

Case No. **LU** - \_\_\_\_\_ Accepted By: \_\_\_\_\_ Date: \_\_\_\_\_

Application Fee: \_\_\_\_\_ Paid Check # \_\_\_\_\_ Receipt # \_\_\_\_\_

# *Baldwin County* *Land Use Certificate Application*

*Main Office*  
22251 Palmer Street  
Robertsdale, AL 36567  
Phone: (251) 580-1655  
Fax: (251) 580-1656

*Foley Office*  
201 East Section Avenue  
Foley, AL 36535  
Phone: (251) 972-8523  
Fax: (251) 972-8520

**AN APPROVED LAND USE CERTIFICATE DOES NOT CONSTITUTE APPROVAL  
FOR A BUILDING PERMIT**

## **Applicant**

Are you the property owner?    **YES**    **NO**  
(If you are not the property owner you must submit Owner Authorization Form signed by the property owner)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip code \_\_\_\_\_ - \_\_\_\_\_

Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ Fax: (\_\_\_\_) \_\_\_\_ - \_\_\_\_ e-mail: \_\_\_\_\_

## **Site Information**

Parcel ID Number:                    05-\_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_ - \_\_\_\_

Physical Address (E-911): \_\_\_\_\_

Subdivision/Lot/Unit No: \_\_\_\_\_

Lot Size (acres or square feet): \_\_\_\_\_ Lot Dimensions: \_\_\_\_\_ X \_\_\_\_\_

Are there existing structures on the property?    **YES**    **NO**

If yes, please describe: \_\_\_\_\_

## **Water and Sewer Information**

(Check Appropriate Box)

Septic Tank System

Well

Sewer System

Water System

Name of System: \_\_\_\_\_ Name of System: \_\_\_\_\_

(Over, Please Continue to Reverse Side)



## Project Description

Use: (Check One)

Single Family

Two-Family

Multi-Family

Commercial

Industrial

Alterations/Repairs

Piers/Boathouse

Accessory Structure

Other (specify) \_\_\_\_\_

Description of work and the proposed use:

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This certificate is valid for a six (6) month period after date of issuance. I hereby certify that the information stated on and submitted with this application is true and correct. I also understand that the submittal of incorrect information will result in the revocation of this permit and any work performed will be at the risk of the applicant. I understand further that any changes which vary from the approved plans will result in the requirement of a new Land Use Certificate.

Applicant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Erosion Control Plan Submitted:**      YES      NO

Proposed Installation Date: \_\_\_\_\_ License No. : \_\_\_\_\_

Comments:

Preparer Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### After application has been reviewed:

I will pick up the approved application after I have been contacted.

I would like the approved application to be forward to the appropriate Building Inspection office.

### Office Use Only

Zoning Classification: \_\_\_\_\_ Planning District: \_\_\_\_\_ Flood Zone: \_\_\_\_\_

Culvert Permit      Sewer Release      Water Release      Site Plan      Construction Plans      Agent Authorization

State Lands Permit Confirmation # \_\_\_\_\_ U.S. Army Corp. Permit      U.S. Fish & Wildlife Permit

Potential Wetlands:      YES      NO      ARB:      YES      NO      Study Area: \_\_\_\_\_ FLU District: \_\_\_\_\_

\*\*\*\*\*

\* Decision:      **APPROVED**      **DENIED**

Comments:

Zoning Administrator (or designee) Signature: \_\_\_\_\_ Date: \_\_\_\_\_

