

PUBLIC SUBDIVISION ADMINISTRATIVE APPROVAL APPLICATION FORM
LAFOURCHE PARISH PLANNING DEPARTMENT
P.O. Box 425, Mathews, Louisiana 70375
4876 Hwy. 1, Raceland, Louisiana 70394
985-537-7608/1-800-794-3160 Fax 985-493-6611

1. Subdivision or Redivision Name: _____

2. Classification: _____ Redivision creating 5 or less lots No. of Lots: _____
 _____ Redivision of Lot Lines 5 lots or less

3. Owner(s) Name & Address: _____
Phone No. _____ Email Address: _____

4. Agent's Name & Address: _____
Phone No. _____ Email Address: _____

5. Engineer/Surveyor Name & Address: _____
Phone No. _____ Email Address: _____

6. Property Location: _____
_____ side of _____ approximately _____ ft. _____ of _____
(N,S,E,W) (Street, Hwy.) (Distance) (N,S,E,W) (Street/Landmark)

7. List all property owner(s) within 100 feet of division/development and attach.

8. Application Checklist:

- ___ 1. Application Fee (see fee schedule). Payable to: Lafourche Parish Government
- ___ 2. Signed, notarized affidavit of ownership (all owners).
- ___ 3. Six (6) copies of plat with the following information:
 - a) Dimensions of all proposed lots.
 - b) Flood Zone(s) Designation
 - c) Natural ground elevation of parcels (at or near center lot elevation on all proposed lots and/or tracts).
 - d) Location of existing or proposed easements or servitudes.
 - e) Vicinity Map.
 - f) Fire hydrant(s) location and distances on plat.
 - g) Street light location(s) and distances shown on plat.
 - h) Individual lot surface directional drainage and destination.
 - i) Minimum 12 ft. utility servitude along property frontage.
 - j) Existing structure locations on plat.
 - k) Minimum yard setbacks (20' front, 10' side, 10' rear).
 - l) Signature Block: (Approved Administratively by Lafourche Parish Planning Department).
 - m) Owner(s) signature Block.

9. Five (5) lots or less, required agencies/utility companies conformation availability of services:

_____ Gas Co. _____ Electric Co. _____ Cable Co. _____ Water District
_____ Telephone Co. _____ Approval Louisiana Department of Health

10. Redivision of lot lines five (5) or less:

_____ Approval Louisiana Department of Health

Planning Review _____ Floodplain Review _____ Addressing Review _____ DPW Review _____

Date of Application: _____ Date Approved: _____

The following will serve as an affidavit of ownership indicating the dates the respective holdings of land were acquired, together with the book and page of each conveyance to the present owner as recorded in the Office of the Lafourche Parish Clerk of Court. This affidavit shall indicate the legal owner of the property, the contract owner of the property, and the date the contract sale was executed. IN THE EVENT OF CORPORATE OWNERSHIP: A list of all directors, officers, and stockholders of each corporation owning more than five percent (5%) of any class of stock must be attached.

AFFIDAVIT OF OWNERSHIP

STATE OF LOUISIANA
PARISH OF LAFOURCHE

BEFORE ME, the undersigned authority, Notary Public, personally came and appeared

_____, who after being duly sworn did depose and
(Name of Owner(s))

declare, under oath, that he/she/they acquired ownership (use percentages of ownership of applicant(s).)
of land subdivided by virtue of the following act(s) of sale:

Dated and recorded _____, in COB _____, page _____,
under entry number _____ in the office of the Clerk of Court for the Parish of Lafourche.

I, _____, hereby depose and say that after reading of the whole,
all of the above statements and the statements contained in the papers submitted herewith are true

(Owner's Signatures)

Mailing Address

Subscribed and Sworn to before me this _____ day of _____,
20 _____.

NOTARY PUBLIC