



Land Disturbance Permit Application

706-694-3330 Town Office
423-593-7497 Inspector

Town of Cohutta
P.O. Box 290
5102 Red Clay Road
Cohutta, GA 30710

Total Acreage:**Parcel Number:****Acreage & SF to be Disturbed:**

Zoning: R-A R-1 R-2 C-1 C-2 M-1

Owner/Applicant:

Address:

Telephone: _____ Email: _____

Description of proposed project:

Home Addition Commercial/Retail Single-Family Subdivision
 Pool Office Multi-Family Development
 Wall greater than 6' in height Single-Family Residential Home Other (Please describe)
 Grading .10 acre or greater
SF of area _____

Owner's Agent/ Project Manager / Project Engineer:

Company:

Date Paid: \$300/TBD

Address:

Phone: _____ Cell: _____ Email: _____

I hereby certify that all information provided herein is true and correct.

Signature:

Date:

OFFICE USE ONLY:

Permit Reviewed & Authorized and Approved

Signature/Title:

Date:

Permit Reviewed & Denied

Reason for Denial:

Signature/Title:

Date: