



WARE COUNTY PLANNING & CODE DEPARTMENT

305 OAK ST, SUITE 157, WAYCROSS, GA 31501

Telephone: (912) 490-4379 Fax: (912) 490-2467



SUBDIVISION APPLICATION – FINAL PLAT

Date: _____

Planning Director
Ware County Planning Department
305 Oak St. Suite 157
Waycross, GA 31501

Dear Planning Director:

This is a request for approval of final plat for _____ Subdivision. The attached five (5) plat copies show the subdivision design. If land fronting existing streets is required for additional right-of-way for dedication to Ware County Commission for street widening or paving, I have shown on the plat my agreement to dedicate such additional right-of-way or easements.

I understand that a filing fee of **\$100.00** plus **\$2.00** per lot must be paid before submission of plat to Planning Commission. The total number of lots in the subdivision is _____. The filing fee is _____. Also, I am paying \$8.00 to Ware County Superior Court Clerk for the recording of the plat. I will also have to pay Ware County for street name and stop sign(s).

\$10.00/Lot – (Health Department Subdivision Review Fee)

(Check here if above fees have been paid on Preliminary Plat application)

The type of street constructed in the subdivision meets the Ware County Subdivision Regulations. I have constructed type _____ paved/unpaved streets in the subdivision according to the attached Street Specification Form. Additional storm water drainage and other improvements required by Ware County Engineer/Road Department have been constructed according to Ware County Standards. A letter of credit or other acceptable form of security (name type) _____ has been filed with the Planning Department/Ware County Commission Clerk’s office. It covers the cost of improvements, in lieu of construction, for a period of _____ months and until _____ (date). I have also obtained and submitted to Ware County, a construction maintenance bond covering 10% of the cost of street paving to be effective for one year following Ware County acceptance of subdivision street construction.

Applicant’s Name

Address
Code

City

State

Zip

Telephone #

Cell Phone #

FINAL PLAT APPLICATION CHECKLIST

Road Dept. Approval _____

Water Dept. Approval _____

Health Dept. Approval _____

Street Name/Address _____

Soil Erosion Approval _____

Application Fee Paid _____
(Amount and Date)

Recording Fee Paid _____
(Amount and Date)

Street Signs Paid _____
(Amount and Date)

WWCPC Meeting Date _____

Ware County Commission _____
(Date)

Other _____

Plat Recorded *(Date)* _____

Plat Book _____ **Page** _____