

FOR OFFICE USE ONLY

DATE RECEIVED: \_\_\_\_\_ CASE NUMBER: \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_



APPLICATION FOR  
LAND USE CERTIFICATE

**\$25.00 Fee**  
**Check/Cash** \_\_\_\_\_  
**Rect #** \_\_\_\_\_

**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: \_\_\_\_\_

TELEPHONE: \_\_\_\_\_ FAX: \_\_\_\_\_ E-MAIL: \_\_\_\_\_

NAME OF CONTRACTOR AND/OR COMPANY: \_\_\_\_\_

**SITE INFORMATION**

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

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

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

Flood Zone: \_\_\_\_\_

Are there any existing structures on the property? \_\_\_\_\_

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)

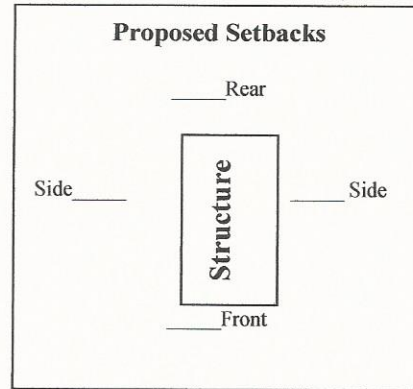
# PROJECT DESCRIPTION

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

Lot Dimensions: \_\_\_\_\_ X \_\_\_\_\_

Use: (Check one)

- |   |  |
|---|--|
| <input type="checkbox"/> Single Family          | <input type="checkbox"/> Two Family          |
| <input type="checkbox"/> Multi-Family           | <input type="checkbox"/> Commercial          |
| <input type="checkbox"/> Industrial             | <input type="checkbox"/> Alterations/Repairs |
| <input type="checkbox"/> Piers/Boathouse        | <input type="checkbox"/> Accessory Structure |
| <input type="checkbox"/> Sign                   |  |
| <input type="checkbox"/> Land Disturbance       |  |
| <input type="checkbox"/> Other (specify): _____ |  |



Description of work and the proposed use: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

.....  
This certificate is valid for a 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.

*By signing below I agree that: for projects in/near the river a turbidity curtain will be installed prior to any land disturbing activities adjacent to a waterway. The curtain will remain in place until permanent stabilization has occurred*

Applicants Signature: \_\_\_\_\_

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

Approved

Denied

Comments: \_\_\_\_\_

Reviewed By: \_\_\_\_\_ Date: \_\_\_\_\_

Zoning Administrator: \_\_\_\_\_ Date: \_\_\_\_\_

\* Subject to any Baldwin County Building Department Requirements.

Submit this Completed Land Use Application to the Town of Magnolia Springs for approval.

To obtain building permit take approved application to  
Foley Satellite Courthouse

Building Department  
201 East Section Street  
Foley, AL 36535  
(251) 943-5061

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