

Lionel Johnson, Jr.
Mayor



City Council:
Deborah Alexander
Freddie "Carl" Frazier, Sr.
Ronald Grace
Melvin Hasten, Sr.
Kelvin York, Sr.

Police Chief:
Kevin Ambeau, Sr.

CITY OF ST. GABRIEL

"A City of Pride, Progress & Possibilities"

APPLICATION FOR CONSTRUCTION PLAN REVIEW

Project Application Number (# assigned by city staff): _____

APPLICANT INFORMATION

Name: _____
Company Name: _____
Phone Number: _____
Mailing Address: _____

City State Zip
Email: _____

PROPERTY OWNER INFORMATION

Name: _____
Company Name: _____
Phone Number: _____
Mailing Address: _____

City State Zip
Email: _____

AGENT INFORMATION

Name: _____
Phone Number: _____
Mailing Address: _____

City State Zip
Email: _____

PROFESSIONAL (Engineer, Surveyor, etc)

Name: _____
Phone Number: _____
Mailing Address: _____

City State Zip
Email: _____

AGENCY APPROVAL CHECKLIST

- Iberville Parish -Drainage
- DHH Approval
- DEQ Approval
- Iberville Parish Utilities – Water & Gas
- Fire Chief Approval
- DOTD Approval

SUBMITTAL VERIFICATION

RECEIVED BY	OFFICIALLY SUBMITTED BY
Date _____ Received by (Initials): _____	Date _____ Received by (Initials): _____

PROPERTY INFORMATION

Name of Proposed Development _____

Street Address (Street + Zip Code) _____

Lot or Parcel No. _____ Existing Zoning District _____ Flood Zone _____

Total Site Acreage _____ Number of Lots _____ Number of Phases for Phased Developments _____

First Filing # _____ Second Filing # _____ Third Filing # _____

APPROVED PRELIMINARY SUBDIVISION INFORMATION:

Application#: _____ Date of Planning Commission Approval: _____ Date of City Council Approval _____

Are/were there any CONDITIONS associated with this application? Please provide:

Rezoning(s) YES, # _____ NO

Variances (s) YES, # _____ NO

Conditional Use Permit(s) YES, # _____ NO

Resolution(s) YES, # _____ NO

NO Zoning Appeal(s), Variance(s) YES, # _____ NO

Special Exception(s) YES, # _____ NO

Waiver(s), Appeal(s), Exception(s) YES, # _____ NO

List of approval dates of all Technical Changes to Approved Preliminary Plan: (Any approval letters shall be embedded on the Construction Plan) _____

APPLICATION SUBMITTAL CHECKLIST

A. General Requirements Checklist

1. Verification of Payment of all fees impact Fees and other fees YES, _____ NO _____
2. Affidavit of ownership submitted YES, _____ NO _____
3. Signed "Statements of Understanding" from the owner(s) and applicant YES, _____ NO _____
4. Completed "Detailed Project Description" YES, _____ NO _____
5. 8 COPIES (8) 24"x 36" sets of plans (ONLY ON 1ST SUBMISSION) YES, _____ NO _____
6. Electronic PDF Copies of all application documents YES, _____ NO _____

B. Subdivision Ordinance Checklist

1. Construction Plan Checklist signed by the engineer who prepared the plat YES, _____ NO _____
2. Construction plan checklist submitted (Section 46-92 "Construction Plans") YES, _____ NO _____
3. Compliance with requirements of Division 2: Specifications YES, _____ NO _____
4. Compliance with requirements of Division 4: Roads and Streets YES, _____ NO _____
5. Compliance with requirements of Section 46-93 Improvements YES, _____ NO _____
6. Compliance with requirements of Division 5: Grass Seeding YES, _____ NO _____
7. Compliance with requirements of Division 6: Street Lighting YES, _____ NO _____

C. Zoning Requirements Checklist

1. Landscape Plans Submitted YES, _____ NO _____
2. Stormwater Management Plan Submitted YES, _____ NO _____
3. Site Plan Review Documents Submitted YES, _____ NO _____
4. Any necessary deeds and plats of dedication for off-site easements and/or right-of-way improvements must be approved and recorded YES, _____ NO _____

AFFIDAVIT OF OWNERSHIP (To be completed by Applicant/Developer)

To be completed by owner:

I, _____, HEREBY DECLARE THAT I AM THE SOLE OWNER,
(Please Print)

OR HAVE LEGAL POWER OF ATTORNEY, IN WHICH CASE SAID POWER OF ATTORNEY OR A CERTIFIED COPY OF THEREOF IS ATTACHED HERETO, TO REQUEST THE SUBDIVISION APPROVAL ON THE SUBJECT PROPERTY, AND I UNDERSTAND THAT THE MISREPRESENTATION OF SUCH OWNERSHIP AND/OR AUTHORITY, EITHER BEFORE OR AFTER FINAL PLAT APPROVAL, MAY CAUSE THE DENIAL OR VACATION OF SAID SUBDIVISION.

I HEREBY AUTHORIZE _____ TO ACT IN MY CAPACITY AS MY
(Please Print)

AGENT FOR THE REPRESENTATION AND/OR PRESENTATION OF THIS REQUEST AND I UNDERSTAND THAT IT IS NECESSARY FOR ME OR MY AUTHORIZED AGENT TO BE PRESENT AT THE HEARING EXAMINER MEETING AND/OR THE PLANNING COMMISSION MEETING.

Signature of Owner: _____ Date: _____

:

STATEMENTS OF UNDERSTANDING

I, as owner/co-owner of the property subject to this application, do hereby certify that I have read and understood the requirements of this submission of Subdivision Construction Plan for review and approval as provided under the Subdivision Ordinance, Chapter 46 of the St. Gabriel Code of Ordinances, and further, that this submittal is in compliance with the requirements and applicable provisions of the Zoning Ordinance for the zoning districts in which this project is located.

Printed Name: _____

Date _____

Signature of Owner/Co-Owner: _____

I, as applicant or agent for the owner(s) of the property subject to this application, do hereby certify that I have submitted this application for subdivision construction plans for review and approval as provided under the Subdivision Ordinance, Chapter 46 of the St. Gabriel Codes and further, that this submittal is in compliance with the requirements and applicable provisions of the Zoning Ordinance for the zoning districts in which this subdivision is located.

Printed Name: _____

Date _____

Signature of Applicant/Agent: _____

ENGINEER’S CERTIFICATION OF PLAN COMPLETION:

I, _____duly licensed/certified in the State of Louisiana, do hereby certify that the plan submitted with these checklists conforms to the requirements of the St. Gabriel Code of Ordinances. I further certify that the above checklists are both complete and accurate.

Signature Certification

APPLICANT CERTIFICATION OF APPLICATION DOCUMENTS

I CERTIFY THAT ALL INFORMATION CONTAINED IN THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND THAT I UNDERSTAND MY RIGHTS UNDER THE APPEAL PROCESS.

Applicant’s Name: _____

(Please Print)

Applicant’s Signature: _____ Date: _____

FEE CALCULATIONS

BUILDING CODE ORDINANCE FEES				
Description	Quantity	Units	Unit Price	Total
1. Impact Fees		Each	\$500 Per Lot	
2. Streets/Roads		LF	\$30 cts Per LF	
3. Storm Drainage		LF	\$20 cts Per LF	
4. Sewer Lines		LF	\$20 cts Per LF	
5. Sidewalks		LF	\$20 cts Per LF	
Total Fees				
VERIFICATION OF PAYMENT OF PLAT FEES & ZONING FEES				
Description	Quantity	Units	Unit Price	Total
1. Preliminary Plat	Number of Lots	Each	\$20 per Lot (Min 200, max \$2,500)	
2. Final Plat	Number of Lots	Each	\$20 per Lot (Min 200, max \$2,500)	
3. Site Plan Review (Where applicable)		Each	\$200 Flat Fee	
4. Rezoning		Each	\$250 for the first acre and \$20 for each additional acre. Minimum \$250, maximum \$2,500	
5. Variance		Each	\$150 per application	