FINAL PLAT CHECK LIST

1. ______  Completed application / Owner authorization form
2. ______  Fee ($150 + $20 per lot)
3. ______  Approved final inspection report from Engineering
4. ______  Approval final inspection report from Baldwin County for ETJ
5. ______  Performance Bond/Maintenance Bond
6. ______  Test Reports per Construction Manual and approved Testing Plan
7. ______  Stormwater Facilities Maintenance Agreement and Pond O&M Plan
8. ______  Approval letter for street names (Patsy for City / E911 for ETJ)
9. ______  Restrictive Covenants
10. ______  1 – Full size final plat
11. ______  2 – 11”x17” final plat

Submit complete package with fees to CDD.

Return the Final Plat with all signatures except City Engineer and PC Chairman to Engineering.

CDD requires a copy of the recorded final plat to close the P&Z file.
CITY OF FOLEY, ALABAMA
APPLICATION FOR FINAL SUBDIVISION

Date ____________________________

City Limits ___ ETJ ___

1. Name of Subdivision ____________________________________________

2. Name of Applicant/Owner _______________________________________

   Phone ____________________________

   Email ______________________________

   Address ____________________________________________

   (Street Number and Name) ____________ (City) ____________ (State) ____________ (Zip Code) ____________

3. Engineer ______________________________________________________

   Phone ____________________________

   Email ______________________________

   Address ____________________________________________

   (Street Number and Name) ____________ (City) ____________ (State) ____________ (Zip Code) ____________

4. Location of Subdivision ________________________________________

5. Total Acreage ____________________________ Number of Lots ____________

6. Parcel Pin # ____________________________

7. I ____________________________________________, hereby depose and say that all the above statements and the
   statements contained in the papers submitted here within are true.

   Signature/Title ____________________________________________

   Mailing Address ____________________________________________

   ____________________________________________

   Phone ____________________________

   Email ______________________________
We authorize and permit to act as My/Our representative and agent in any manner regarding this application which relates to property described as tax parcel ID#. We understand that the agent representation may include but not be limited to decisions relating to the submittal, status, conditions, or withdrawal of this application. In understanding this, we release the City of Foley from any liability resulting from actions made on My/Our behalf by the authorized agent and representative. 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 application and any work performed will be at the risk of the applicant.

*Note: All correspondence will be sent to the authorized representative. It will be the representative's responsibility to keep the owner(s) adequately informed as to the status of the application.

PROPERTY OWNER(S):

Name(s) printed

Address

City/State

Phone          Email          Fax

Signature(s)   Date

PROPERTY OWNER(S):

Name(s) printed

Address

City/State

Phone          Email          Fax

Signature(s)   Date