



ROCKDALE COUNTY PLANNING AND DEVELOPMENT
DRIVEWAY PERMIT APPLICATION

Date:

PROPERTY INFORMATION:

Form with fields: Address of project, Name of business (existing or proposed), Name of property owner, Owner address, Phone, Email.

CONTRACTOR INFORMATION:

Form with fields: Name of company, Name of main contact, Address, Phone, Email.

PROPOSED DRIVEWAY:

Form with fields: Purpose of the driveway (new, reconstruction, expansion, etc.), Will the driveway connect to a Georgia State Route?, Will the driveway require a culvert? What size? Did Stormwater size the pipe?, Total square footage of impervious (including length x width of gravel), Will you be paving the driveway?, Within 200' of state waters?, Type of use: Commercial Residential, Estimated cost of driveway: \$

SUBMIT:

- Detailed site plan with dimensions
Georgia Department of Transportation permit (if applicable)

Signature of property owner: _____

Department of Planning and Development contact information:

Contact information table: In person: 968 Milstead Avenue, Conyers, GA 30012, Monday through Friday, 8:00am to 5:00pm; Mail: P.O. Box 289, Conyers, GA 3001; Phone: 770 278-7100; Email: planning@rockdalecountyga.gov; Fax: 770 278-8940

Approval section: Approved Denied Conditions: Signature: Date:

O.C.G.A. 50-36-1(e)(2) Affidavit

By executing this affidavit under oath, as an applicant for a Permit or License, as referenced in O.C.G.A. 50-36-1, from Rockdale County, the undersigned applicant verifies one of the following with respect to my application for a public benefit:

- I am a United States citizen.
- I am a legal permanent resident of the United States.
- I am a qualified alien or non-immigrant under the Federal Immigration and Nationality Act with an alien number issued by the Department of Homeland Security or other federal immigration agency.

My alien number issued by the Department of Homeland Security or other federal immigration agency is: enter number here

**** Wait to be in front of the notary before signing ****

Enter applicant name here, the undersigned applicant also hereby verifies that he or she is 18 years of age or older and has provided at least one secure and verifiable document, as required by O.C.G.A. 50-36-1(e)(1), with this affidavit.

The secure and verifiable document provided with this affidavit can best be classified as:

In making the above representation under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. 16-10-20, and face criminal penalties as allowed by such criminal statute.

Executed in Conyers, Georgia, this _____ day of _____, 20_____ .

Notary Public signature

Applicant signature

GA Registration No. and expiration date

Seal: