

FOR OFFICE USE ONLY

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



APPLICATION FOR  
LAND USE CERTIFICATE

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

**APPLICANT**

**Are you the property owner?**

YES  NO

(If you are not the property owner you must submit **Agent Authorization Form** signed by the property owner)

**Is property located in the Historic District?**

YES  NO

(If property is in the Historic District, you must complete **Historic COA** prior to Land Use Certificate)

NAME: \_\_\_\_\_ DATE: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

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

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

(Businesses must have current **Business License** with the Town of Magnolia Springs prior to start of work)

**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

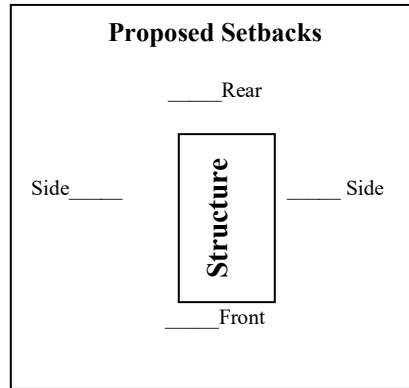
Lot Size (acres or square feet): \_\_\_\_\_

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

Square Feet of Primary Residence: \_\_\_\_\_

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"/> Fence               |
| <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 worked performed will be at the risk of the applicant.

**By signing below, I agree that:**

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

**Zoning Classification:** \_\_\_\_\_ **Historic District:**  Yes  No **COA:**  Yes  No  N/A

Approved  Denied

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

**Reviewed By:** \_\_\_\_\_

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

**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  
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**