



Checklist for Lot Division/Boundary Survey for Recording

City of McDonough

Community Development Department / Phone (678) 432 4622

136 Keys Ferry Street

McDonough, GA 30253

Type of Review	Boundary Survey	Lot Division	Consolidation	Re-plat
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Date Submitted _____

Owner's Name _____

Property Address _____

Parcel/Tax Map ID _____

Contact Information (Name) _____

Phone Number _____

Email _____

Notes: Please use the list below to add all of the needed information to your submittal. **All of the listed information must be on the sheet to be approved.**

- 1) Please submit **one (1) conceptual plan** to the office in order to obtain the Parcel/Tax ID Number and Address **BEFORE** submitting for official review. Three (3) copies will be required for official review.
- 2) **There is a \$50.00 charge for each lot approved for recording.** If a lot is divided into more than 3 parcels, the review process requires a Preliminary and Final Plat approval as a subdivision.
- 3) Once the survey plat has been recorded at the Courthouse the following copies must be returned to the Community Development Department:
 - Five (5) hard copies, plus one (1) electronic copy for distribution.

Please review and initial on the line beside the text that you have added the needed information to the sheet for review. **ALL information must be included on the submittal sheet for approval.**

____ The parcel divisions meet the requirements of the zoning district

____ Plats should be legible and no smaller than 17" x 22"

____ This form, the relined plats, and any copies of zoning maps and tax maps provided by Staff must be returned when resubmitting revised or corrected plats for approval.



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___ Please make sure that at least two (2) plats are submitted with the surveyor's original seal and signature on each copy. The surveying firm name and address must be located on each plat submitted for approval.

___ The plat is drawn accurately to scale

___ Show all dimensions, including setbacks and boundary lines for each parcel division

___ Owner's Name

___ Zoning District and Ordinance # (if applicable)

___ Property Address

___ Tax I.D. Number(s)

___ Land Lot(s)

___ Gross Acreage

___ Adjacent property owners and zoning districts of surrounding properties are identified on the plat

___ Map scale, north arrow (true, magnetic or grid) and date

Please circle

This property **is** or **is not** on City/County water system.

This property **is** or **is not** on paved City/County right-of-way.

This property **is** or **is not** a part of a platted subdivision.

This property **has** or **does not have** bodies of water on the property.

This property **is** or **is not** in a flood plain (provide FIRM and date).

This property **is** or **is not** in a wetland area.

This property **is** or **is not** in a watershed protection area.



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STAFF USE ONLY

Zoning _____

FEE \$ _____

Payment Method: Cash / Credit Card / Check or Money Order # _____

Plat Reviewed by: _____ Date: _____

Approved _____ Denied _____