

Mitchell County
Planning & Zoning Department
18 North Court St. Post Office Box 302
Camilla, Georgia 31730

Phone 229.336.2060
Fax 229.336.2362

Thomas Wade
Zoning Administrator

COMBINED

APPLICATION # _____

PRELIMINARY

DATE _____

FINAL

FEE PAID _____

**LAND DIVISION/ SUBDIVISION
APPLICATION**

10 Xerox Copies of Each Plat Required

Land Division/ Subdivision Name _____

Landowner/Agent _____ Contact Phone # _____

Address _____

Engineer or Surveyor _____

Total Acreage in proposed development _____

Address/ Location of Property _____

Zoning District _____ Land Lot # _____ Land District # _____

Sanitary Sewer -- available or proposed _____

Central Water System -- available or proposed _____

I hereby certify that I am the Owner, or Legal Agent of the Owner, in fee simple of the above-described property.

Owner/Agent _____ Witness _____

Date _____ Date _____

Planning Commission meeting.....DATE/TIME: _____

Board of Commissioners meeting.....DATE/TIME: _____

Meetings are held in the boardroom
Mitchell County Board of Commissioners
26 North Court St.