



Documents Required for the Issuance of an LDA

- Please take care to ensure that all information is provided as required.
- The approval / denial of a permit will be **within 45 calendar days** of the receipt of **completed application** with all required documents.
- Please submit completed permit application to **lda@stmarysga.gov**

_____ Completed Land Disturbance Activity Permit application (with all fields completed)

_____ Property Owner's Authorization Letter (for applicants that are not the property owner)

4 printed copies and 1 digital copy of the site-specific Erosion, Sedimentation and Pollution Control (ESPC) Plan designed by a GSWCC Certified Design Professional (Level II (Tan Card))

_____ 2 copies of the completed ESPC Plan Checklist

_____ Proof of certified ESPC responsible on-site personnel (Level 1A (Blue Card))

_____ Copy of Submittal receipt through Georgia EPD GEOS with Submittal ID number or the NOI

_____ Copy of NPDES Permit Form

_____ Payment for Fees (see below for fee breakdown)

_____ Other: _____

"7 Day" letters must be submitted to lda@stmarysga.gov once all BMPs have been installed and before any building inspections.

Land Disturbance Activity Permit Review Fee due to the City of St. Marys (other fees are due to the state when submitting to EPD GEOS)	
Primary/Stand-Alone Permittee	Secondary/Tertiary Permittee
<p>\$ 50 – Review fee + _____ \$ 40 – Per disturbed acre (ac)</p> <p>_____ disturbed ac * \$ 40 = _____ + \$50 Review</p> <p>Fee = _____ Total Fees</p>	<p>_____ \$ 50 – Single lot, or</p> <p>_____ \$ 100 – Two concurrent lots, or</p> <p>_____ \$ 150 – Three or more concurrent lots</p>



LDA Application

Section A Project Information

Project Name _____ Property Address _____

Number of Lots _____ Lot Numbers or Parcel IDs _____

Total Size of Project (acres) _____ Total Disturbed Area (acres) _____

Blue Card Holder's Name _____

NOI Submittal # _____ NOI Submittal Date _____ GAR # _____ GAR _____

Single-Family Residence Multi-Family Subdivision Home Addition
 Retaining Wall Pool Clearing & Grading Only
 Single-Family Subdivision Commercial/Retail Other _____

Section B Applicant Information

Applicant Name _____ (if applicable) Company _____

Mailing Address _____
City State Zip Code

Phone Number _____ Email _____

Applicant Type Property Owner Contractor Authorized Agent Other _____

Section C Property Owner Information

Owner's Name _____ (if applicable) Company _____

Mailing Address _____
City State Zip Code

Phone Number _____ Email _____

Would the property owner like to receive notifications about inspection results?? Yes No

Section D Design Professional Information

Designer's Name _____ (if applicable) Company _____

Mailing Address _____
City State Zip Code

Phone Number _____ Email _____

I hereby certify that I am authorized to apply for this permit and all information contained in and attached to this application is true and correct. Furthermore, I certify that I will adhere to the Plans as approved by GSWCC and comply with all requirements of this permit

Applicant/Design Professional Signature

Date



City of St. Marys
Community Development

418 Osborne Street
St. Marys, Georgia 31558
(912) 510-4032

For Office Use

Date Received _____ Time _____

Submittal Complete _____ YES / NO

Date Mailed GSWCC _____

ES&PC Plan GSWCC Approval _____ Located within
a Marsh Buffer Zone _____ YES / NO

Amount of Fees Paid \$ _____

Plans Received from GSWCC _____

Plans/Permit Picked Up _____

7 Day Letter Received Date _____

Building Permit Number _____

*This permit is valid for up to one year from the approval date listed below. If within a marsh buffer area, the marsh line will need to be remarked once a year by DNR. The permit is subject to any conditions listed on the plans, plan review, or permit placard. **The permit placard shall be displayed on-site.***

Community Development Department

Date