

LAFOURCHE PARISH
DEPARTMENT OF PLANNING
985-537-7603/1-800-794-3160
RAW LAND SALE
Checklist/Status Report

I. GENERAL INFORMATION

Property Name: _____

Applicant/Agent: _____

Owner: _____

Address: _____

Address: _____

Telephone: _____

Telephone: _____

**II. APPLICATION CHECKLIST
(your responsibility)**

**III. STATUS REPORT
(Planning Department responsibility)**

- 1) _____ Application
- 2) _____ Affidavit of ownership
- 3) _____ **\$175.00** Raw Land Sale Plat fee
payable to Lafourche Parish Government
- 4) _____ 5 copies of Raw Land Sale Plat
with the following information
 - a) Dimensions of lots being proposed
 - b) Flood Zone designation
 - c) Average natural ground elevation of parcels created
 - d) Any existing or proposed easements or servitudes
 - e) Vicinity Map
 - f) Note with the following verbiage:

- 1) _____ Review plans for proposed subdivision with Applicant
Date: _____
- 2) _____ Floodplain management review of proposed plans
Date: _____

The division of raw land as depicted hereon does not constitute an approved public subdivision of land for development purposes. The development of these parcel(s) is limited to agricultural purposes only.

g) Signature Block:

Approved administratively by Lafourche Parish Planning Department

Date of Raw Land Sale Plat Application _____

Date Completed _____

SUBDIVISION APPLICATION FORM

OFFICIAL USE ONLY
Application # _____

DATE: _____

1. SUBDIVISION NAME: _____

2. CLASSIFICATION: Public Subdivision _____ Lot Extension/Redivision _____
Family Subdivision _____ Raw Land Sale XX _____

3. TOTAL ACREAGE _____ NUMBER OF LOTS INVOLVED _____

4. PROPERTY LOCATION: On the _____ side of _____
(N, S, E, or W) (Street, Hwy.)
and _____ feet _____ from _____
(Distance) (N, S, E, or W) (Intersection, street, landmark)

5. OWNER'S NAME: _____ Phone _____
ADDRESS: _____
(Street No. and Name) (P.O. Box)

(City, State, Zip Code)

6. AGENT'S NAME: _____ Phone _____
ADDRESS: _____
(Street No. and Name) (P.O. Box)

(City, State, Zip Code)

7. ENGINEER/SURVEYOR'S
NAME: _____ Phone _____
ADDRESS: _____
(Street No. and Name) (P.O. Box)

(City, State, Zip Code)

8. Was this subdivision ever before the Commission? Yes _____ No _____
If so, when? _____ What approval(s) were given? _____

9. Have any changes been made since this plat was last before the Commission? _____
If so, please describe: _____

10. Is any variance from the Subdivision Regulations being requested at this time? _____
If so, please describe: _____

Enclose check or money order for \$200.00 made payable to Lafourche Parish Planning Commission if a variance is being requested.

11. Please provide the list of names of property owners within 100 feet of your property division.
(A list can be obtained from the Clerk of Courts office and attached to this form.)

The following will serve as an affidavit of ownership indicating the dates the respective holdings of land were acquired, together with the book and page of each conveyance to the present owner as recorded in the Office of the Lafourche Parish Clerk of Court. This affidavit shall indicate the legal owner of the property, the contract owner of the property, and the date the contract sale was executed. **IN THE EVENT OF CORPORATE OWNERSHIP:** A list of all directors, officers, and stockholders of each corporation owning more than five percent (5%) of any class of stock must be attached.

AFFIDAVIT OF OWNERSHIP

STATE OF LOUISIANA
PARISH OF LAFOURCHE

BEFORE ME, the undersigned authority, Notary Public, personally came and appeared

_____, who after being duly sworn did depose and
(Name of Owner(s))

declare, under oath, that he/she/they acquired ownership (use percentages of ownership of applicant(s).) of land subdivided by virtue of the following act(s) of sale:

Dated and recorded _____, in COB _____, page _____,
under entry number _____ in the office of the Clerk of Court for the Parish of Lafourche.

I, _____, hereby depose and say that after reading of the whole,
all of the above statements and the statements contained in the papers submitted herewith are true

(Owner's Signatures)

Mailing Address _____

Subscribed and Sworn to before me this _____ day of _____,
20 _____.

NOTARY PUBLIC