

City of Woodbine

310 Bedell Avenue/P. O. Box 26/Woodbine, Georgia 31569
(912)576-3211 City Hall/ (912)576-3274 Fax/
cityofwoodbine@tds.net

Request to Subdivide/Combine Existing Land Parcel(s)

Property Owner Information

Property Owner _____ Date _____

Mailing Address _____

City/State/Zip _____ Phone _____

Agent of Property Owner _____

Mailing Address _____

City/State/Zip _____ Phone _____

Parcel Information

Parcel Address _____

Map _____ Block _____ Parcel _____ Lot(s) _____

I, _____, as property owner of the above-described lot(s) or the property owner's authorized agent as verified by the attached letter of authorization, do hereby request that the following action be taken with regard to the parcel(s) and as shown on the attached survey, which has been recorded in the Office of the Clerk of Superior Court, Camden County:

Request to Subdivide Existing Land Parcel _____ Request to Combine Existing Land Parcels _____

So Sworn and Subscribed
Before Me this _____ Day of

_____, _____

Property Owner/Authorized Agent Signature

Notary Public

Attachments: Survey of Parcel(s) _____ Section of Tax Map _____
Authorization Letter for Property Owner's Agent _____

This request has been reviewed and approved by the City of Woodbine for compliance with the Woodbine Zoning Ordinance.

City Staff Signature

Date: _____

Printed Name: _____

Title: _____