

APPLICATION FOR DEVELOPMENT PERMIT

PERMIT NO. \_\_\_\_\_  
(COUNTY NO. & SEQUENCE)

DATE: \_\_\_\_\_

APPLICANT: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

OWNER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

TELEPHONE: ( ) \_\_\_\_\_

NEW SUBDIVISION \_\_\_\_\_ (YES/NO) IF YES, RECORD THE ENGINEER'S  
REGISTRATION NO. P.E. NO. \_\_\_\_\_

TRS \_\_\_\_\_

SUBDIVISION \_\_\_\_\_

LOT/BLOCK: \_\_\_\_\_

DU \_\_\_\_\_

WORK \_\_\_\_\_

RIVER: \_\_\_\_\_

RIVER MILE \_\_\_\_\_

PLAN \_\_\_\_\_ (YES/NO)

WELL PERMIT NO. \_\_\_\_\_

SUR-ELEVATION \_\_\_\_\_

SANITARY PERMIT NO. \_\_\_\_\_

SURVEYOR NO. \_\_\_\_\_

BUILDING PERMIT NO. \_\_\_\_\_

OFFICIAL 100-YEAR ELEVATION \_\_\_\_\_ MSL (SRWMD)

REQUIRED LOWEST HABITABLE FLOOR ELEVATION \_\_\_\_\_ MSL ( SRWMD )

PERMIT APPROVED \_\_\_\_\_

ADMINISTRATOR SIGNATURE

DATE

EXPIRATION DATE OF PERMIT \_\_\_\_\_

VIOLATIONS: \_\_\_\_\_ FINAL INSPECTION DATE: \_\_\_\_\_

COMMENTS: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_