



PROPERTY OWNER INFORMATION		PROJECT LOCATION INFORMATION:					
NAME:		PHYSICAL ADDRESS:					
ADDRESS:		SUBDIVISION NAME:					
ADDRESS 2:		PARCEL ID #:					
			SEC	TWN	RNG	SUB	BLK
CITY:		ZONING DESIGNATION:					
STATE:		IS THE PROPERTY A CORNER LOT?                      YES                      NO					
PHONE #:	ZIP:	DRIVING DIRECTIONS:					
FAX:	CELL #:						
E-MAIL:							

DESCRIPTION OF PROJECT:					
TYPE OF PROJECT:	RENOVATION	NEW CONSTRUCTION	POOL	MARINE	DEMO
OTHER:					
SCOPE OF WORK:					
OCCUPANCY CLASSIFICATION:	RESIDENTIAL	ASSEMBLY	BUSINESS	MERCANTILE	
STORAGE		OTHER:			
INTENDED USE:					
DIMENSION:					
	LENGTH	WIDTH	HEIGHT	STORIES	SQUARE FEET
ESTIMATED COST OF CONSTRUCTION:			ESTIMATED COMPLETION DATE:		

UTILITY INFORMATION:					
UTILITIES:	WATER	SEWER	SEPTIC TANK	GAS	ELECTRIC
WATER TAP SIZE:	3/4"	1"	1 1/2"	2"	4"      6"
LIST GAS APPLIANCES:					
WILL THE STRUCTURE HAVE FIRE SPRINKLERS:                      YES                      NO					

**SECTION 21-263 OF THE CITY'S CODE OF ORDINANCES REQUIRES THAT ALL NEW DEVELOPMENT AND REDEVELOPMENT WITH A CONSTRUCTION PERMIT EVALUATION EXCEEDING 50 PERCENT OF THE MOST RECENTLY ASSESSED VALUE OF THE PROPERTY, SHALL BE REQUIRED TO PLACE ALL UTILITIES UNDERGROUND, INCLUDING ELECTRICAL AND TELEPHONE LINES.**

MARINE CONSTRUCTION:				
TYPE OF PROJECT:	RETAINING/SEA WALL	DOCK/PIER	BOATHOUSE	UNCOVERED LIFT
BODY OF WATER:	PENSACOLA BAY	SANTA ROSA SOUND	HOFFMAN BAYOU	
	WOODLAND BAYOU	GILMORE BAYOU		
IF A DOCK/PIER, BOATHOUSE OR UNCOVERED LIFT, WHAT IS THE LENGTH MEASURED FROM THE MHWL?				
IF A DOCK/PIER, BOATHOUSE OR UNCOVERED LIFT, WHAT IS THE TOTAL SQUARE FOOTAGE?				
IF A BOATHOUSE OR UNCOVERED LIFT, WHAT IS THE SQUARE FOOTAGE?				
WHAT IS THE DISTANCE FROM THE FURTHERMOST EXTENT OF THE DOCK/PIER, BOATHOUSE OR UNCOVERED BOAT LIFT FROM THE PROPERTY LINE?				
LEFT: <span style="margin-left: 200px;">RIGHT:</span>				
SECTION 24-172 OF THE LAND DEVELOPMENT CODE REQUIRES THAT ALL DOCKS, PIERS, BOATHOUSES, UNCOVERED SLIPS OR SIMILAR STRUCTURES PROVIDE CONTINUING PUBLIC ACCESS TO ALL SOVEREIGN LANDS, HOW WILL THIS BE ACCOMPLISHED FOR THIS PARTICULAR PROJECT?				
IF A DOCK/PIER BOATHOUSE OR UNCOVERED SLIP, ALONG WHAT SECTION OF SHORELINE WILL THE PROJECT BE LOCATED:				
NAVAL LIVE OAKS - BOB SIKES BRIDGE (200' MAX)		BOB SIKES - SHORELINE PARK (200' MAX)		
SHORELINE PARK - DEER POINT (200' MAX)		DEER POINT - ZAMARA CANAL (300' MAX)		
ZAMARA CANAL - FAIRPOINT (475' MAX)		FAIRPOINT - PENSACOLA BAY BRIDGE (225' MAX)		
PENSACOLA BAY BRIDGE - NAVAL LIVE OAKS (200' MAX)		INLAND BAYOU (25'MAX)		
IF A RETAINING/SEA WALL, WHAT IS IT'S DISTANCE FROM THE MHWL?				
WHAT IS THE VERTICAL HEIGHT OF THE RETAINING/SEA WALL?				
		SEAWARD	LANDWARD	
ARE COPIES OF FEDERAL AND STATE PERMITS ATTACHED?				
		YES	NO	

**POOL INFORMATION:**

POOL TYPE:	BELOW GROUND	ABOVE GROUND	SPA/HOT TUB
DIMENSION:			
	LENGTH	WIDTH	DEPTH
			SQUARE FEET

IS THE YARD FENCED OR WILL IT BE FENCED? YES NO

IS SO, WHAT IS THE HEIGHT?

WILL THE POOL HAVE SCREENED ENCLOSURE?

IS SO, WHAT ARE THE DIMENSIONS:				
	LENGTH	WIDTH	HEIGHT	SQUARE FEET

I, \_\_\_\_\_, NOW ENGAGING OR ABOUT TO ENGAGE IN THE CONSTRUCTION OF A SWIMMING POOL UPON MY OWN PREMISES AS DESCRIBED ON THE REQUIRED BUILDING PERMIT APPLICATION AND LOCATED IN SANTA ROSA COUNTY, FLORIDA, DO HEREBY ACKNOWLEDGE THE REQUIREMENT OF AN APPROVED BARRIER AT LEAST 48 INCHES (4 FEET) ABOVE GRADE, MEASURED ON THE SIDE OF THE BARRIER WHICH FACES AWAY FROM THE SWIMMING POOL, IS TO BE ERECTED PRIOR TO FILLING THE POOL WITH WATER. FURTHERMORE, I ACKNOWLEDGE THE REQUIREMENT OF AN ALARM ON ALL DOORS AND WINDOWS WITHIN A DWELLING UNIT HAVING DIRECT ACCESS TO THE POOL THROUGH A WALL (OR WALLS) THAT SERVES AS PART OF THE BARRIER.

I FURTHER ACKNOWLEDGE THAT THE FOREGOING IS REQUIRED BY SECTION 315 OF THE STANDARD SWIMMING POOL CODE AND CITY ORDINANCE.

_____	_____	_____	_____
CONTRACTOR'S SIGNATURE	DATE	OWNER'S SIGNATURE	DATE
_____		_____	
PRINTED NAME		PRINTED NAME	

**COMMERCIAL DEVELOPMENT:**

ENGINEER'S NAME:	ARCHITECT'S NAME:		
ADDRESS:	ADDRESS:		
ADDRESS 2:	ADDRESS 2:		
CITY:	CITY:		
STATE:	STATE:		
PHONE #:	ZIP:	PHONE #:	ZIP:
FAX:	CELL #:	FAX:	CELL #:
E-MAIL:	E-MAIL:		
STATE LICENSE #:	STATE LICENSE #:		



**DEMOLITION INFORMATION:**

PLEASE ATTACH A SURVEY DEPICTING THE STRUCTURES TO BE REMOVED.

IF UTILITIES ARE TO REMAIN ONSITE, WHAT MEASURES WILL BE TAKEN TO PROTECT THEM FROM DAMAGE?

DISPOSAL OF MATERIAL:

SANTA ROSA COUNTY LANDFILL

ESCAMBIA COUNTY LANDFILL

OTHER: \_\_\_\_\_

**ASBESTOS NOTIFICATION STATEMENT**

**PER FLORIDA BUILDING CODE 105.9 ASBESTOS.** THE ENFORCING AGENCY SHALL REQUIRE EACH BUILDING PERMIT FOR THE DEMOLITION OR RENOVATION OF AN EXISTING STRUCTURE TO CONTAIN AN ASBESTOS NOTIFICATION STATEMENT WHICH INDICATES THE OWNER'S OR OPERATOR'S RESPONSIBILITY TO COMPLY WITH THE PROVISIONS OF SECTION 469.003, FLORIDA STATUTES, AND TO **NOTIFY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION OF HIS OR HER INTENTIONS TO REMOVE ASBESTOS**, WHEN APPLICABLE, IN ACCORDANCE WITH STATE AND FEDERAL LAW.

**469.003 LICENSE REQUIRED**

1. NO PERSON MAY CONDUCT AN ASBESTOS SURVEY, DEVELOP AN OPERATION AND MAINTENANCE PLAN, OR MONITOR AND EVALUATE ASBESTOS ABATEMENT UNLESS TRAINED AND LICENSED AS AN ASBESTOS CONSULTANT AS REQUIRED BY THIS CHAPTER.
2. **(A)** NO PERSON MAY PREPARE ASBESTOS ABATEMENT SPECIFICATIONS UNLESS TRAINED AND LICENSED AS AN ASBESTOS CONSULTANT AS REQUIRED BY THIS CHAPTER.  
**(B)** ANY PERSON ENGAGED IN THE BUSINESS OF ASBESTOS SURVEYS PRIOR TO OCTOBER 1, 1987, WHO HAS BEEN CERTIFIED BY THE DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY AS A CERTIFIED ASBESTOS SURVEYOR AND WHO HAS COMPLIED WITH THE TRAINING REQUIREMENTS OF S. 469.013(1)(B), MAY PROVIDE SURVEY SERVICES AS DESCRIBED IN S. 255.553(1), (2) AND (3). THE DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY MAY, BY RULE, ESTABLISH VIOLATIONS, DISCIPLINARY PROCEDURES, AND PENALTIES FOR CERTIFIED ASBESTOS SURVEYORS.
3. NO PERSON MAY CONDUCT ASBESTOS ABATEMENT WORK UNLESS LICENSED BY THE DEPARTMENT UNDER THIS CHAPTER AS AN ASBESTOS CONTRACTOR, EXCEPT AS OTHERWISE PROVIDED IN THIS CHAPTER.

I CERTIFY THAT I HAVE READ AND UNDERSTAND AND WILL COMPLY WITH THE PROVISIONS OF THIS ASBESTOS NOTIFICATION STATEMENT AND THAT I WILL COMPLY WITH ALL STATE AND FEDERAL REGULATIONS PERTAINING TO ASBESTOS.

\_\_\_\_\_  
 LICENSE HOLDER/CONTRACTOR SIGNATURE

\_\_\_\_\_  
 DATE

\_\_\_\_\_  
 LICENSE HOLDER/CONTRACTOR PRINTED NAME LICENSE NUMBER

**MEETING DATES** (PLEASE PICK MEETING DATE BASED ON DUE DATE):

PACKET DUE DATE	MEETING DATE	PACKET DUE DATE	MEETING DATE
OCT. 13, 2009	NOV. 3, 2009	MAY. 11, 2010	JUN. 1, 2010
NOV. 10, 2009	DEC. 8, 2009	JUN. 8, 2010	JUL 6, 2010
DEC. 15, 2009	JAN. 5, 2010	JUL. 13, 2010	AUG. 3, 2010
JAN. 12, 2010	FEB. 2, 2010	AUG. 10, 2010	SEP. 7, 2010
FEB. 9, 2010	MAR. 2, 2010	SEP. 14, 2010	OCT. 5, 2010
MAR. 9, 2010	APR. 6, 2010	OCT. 12, 2010	NOV. 2, 2010
APR. 13, 2010	MAY 4, 2010	NOV. 9, 2010	DEC. 7, 2010

**AUTHORIZATION:**

APPLICATION IS HEREBY MADE TO OBTAIN A DEVELOPMENT ORDER TO THE WORK AS INDICATED IN THE ATTACHED PLANS AND SPECIFICATIONS. I (WE) CERTIFY THAT NO WORK HAS COMMENCED PRIOR TO THE ISSUANCE OF THE DEVELOPMENT ORDER AND THAT ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH ALL LAWS REGULATING CONSTRUCTION AND ZONING IN THIS JURISDICTION.

\_\_\_\_\_  
CONTRACTOR'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
OWNER'S SIGNATURE

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PRINTED NAME

\_\_\_\_\_  
PRINTED NAME