

City of DeBary  
APPLICATION FOR USE PERMIT

ARTICLE VI – USE PERMIT (USE) DRIVEWAY CONNECTION TO CITY RIGHT-OF-WAY; MAILBOX OR  
UTILITY WORK IN CITY RIGHT-OF-WAY; OR OTHER WORK ON CITY PROPERTY

PLEASE PRINT OR TYPE ALL INFORMATION IN SECTIONS 1, 2, AND 4

APPLICANT MUST SIGN APPLICATION IN SECTION 4.

1. WORK SITE INFORMATION

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

Property Appraiser's Parcel Number \_\_\_\_\_

THIS PROPERTY IS LOCATED IN THE INCORPORATED CITY OF \_\_\_\_\_

Directions to Property: \_\_\_\_\_

THREE (3) plot plans must be attached if property is located in incorporated City area.

FOUR (4) plot plans must be attached if property is located in incorporated City area.

PURSUANT TO CHAPTER 556, FLORIDA STATUTES, AS AMENDED, AN EXCAVATOR OF THE WORK PERFORMED UNDER THE SCOPE OF THIS APPLICATION SHALL CALL THE "SUNSHINE STATE ONE-CALL OF FLORIDA, INC." AT 1-800-432-4770, NOT LESS THAN TWO NOR MORE THAN FIVE BUSINESS DAYS BEFORE BEGINNING EXCAVATION. REFER TO THE ATTACHED INFORMATION SHEET FOR YOUR RIGHTS AND RESPONSIBILITIES UNDER THE NEW LAW.

2. DESCRIPTION OF WORK – CHECK BOX: COMMERCIAL ( ) RESIDENTIAL ( )

- Mailbox located on Public Right-of-Way..... ( )
- Asphalt or Concrete Driveway Approach to Paved Road ..... ( )
- Asphalt or Concrete Driveway Approach with Culvert Pipe to Paved Rd ..... ( )
- Driveway Approach to Unpaved Road ..... ( )
- Open Street Cut on a Paved Street (Number of cuts \_\_\_\_\_) ..... ( )
- Open Street Cut on an Unpaved Street (Number of cuts \_\_\_\_\_) ..... ( )
- Bore and Jack (Number of Bore & Jacks (\_\_\_\_)..... ( )
- Roadway Construction other than by a Special Assessment District; or i
- Connection with the Development of a Subdivision ..... ( )
- Other (Specify) ..... ( )

3. APPLICATION FILING RESPONSIBILITIES A non-refundable application fee shall be paid at time of application submittal. Additional fees may be assessed during the application review process and shall be paid prior to the issuance of the permit. Applications determined to be incomplete may be returned to the applicant prior to acceptance, or approval may be delayed. REFER TO APPROPRIATE CHECKLIST FOR SUBMITTAL REQUIREMENTS AND FEES.

4. ALL COMMUNICATION CONCERNING THIS APPLICATION WILL BE DIRECTED TO THE APPLICANT AND THE PERMIT WILL BE ISSUED IN THE NAME OF THE APPLICANT.

APPLICANT CHECK IF: ( ) OWNER or CONTRACTOR  
( ) AGENT (Agent must supply a notarized statement of authorization).

OWNER'S NAME: \_\_\_\_\_

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

APPLICANT'S NAME: \_\_\_\_\_ PLS MANAGER \_\_\_\_\_

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

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

APPLICANT'S SIGNATURE: \_\_\_\_\_ PLS MANAGER \_\_\_\_\_

DO NOT WRITE BELOW THIS LINE

APPLICANT'S NUMBER: \_\_\_\_\_ PERMIT NUMBER: \_\_\_\_\_



# City of DeBary

16 Calamba Road, DeBary, Florida 32713-3264 Phone: (386) 668-2040

## NOTICE TO OWNER CONDITIONAL RELEASE OF PERMIT

The permit has been released with the following restrictions and/or conditions. The owner/contractor is expected to abide by such conditions and restrictions as stated. Failure to comply may be just cause to revoke the permit or issuance of a stop work order.

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

TYPE OF WORK: \_\_\_\_\_

CONTRACTOR: \_\_\_\_\_

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

### Conditions of release of permit:

- 1. Should any utility work necessitate the removal of that portion of the driveway and/or landscaping located within the City's right-of-way, the City **IS NOT** responsible for replacement of the specialized paving, decorative concrete, or landscaping.*

*As the contractor of record, I have read and understand the conditions/restrictions noted above, and agree to abide to such conditions and or restrictions.*

Contractor's Printed Name: \_\_\_\_\_

Contractor's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Property Owner's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### *City Of DeBary Official Use Only:*

Building Official's Printed Name: \_\_\_\_\_

Building Official's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Permit Number: \_\_\_\_\_ Permit Expiration Date: \_\_\_\_\_