



# SITE PERMIT APPLICATION

Please print clearly and provide all required information

16550 SW Warfield Blvd.  
Indiantown, FL 34956

Tel: 772-597-9900

Office Hours:

Thursdays and Fridays

9 a.m. until 5 p.m.

VILLAGE OFFICE USE ONLY	
Permit #	

DATE

ALL PLAN REVIEW FEES ARE DUE AT TIME OF APPLICATION

A.	PROJECT NAME			
	PARCEL ID NO.			
	ZONING			
	FUTURE LAND USE			
	ADDRESS			
	CONTACT		E-MAIL	
	COMPANY			
	PHONE		FAX	
B.	DESCRIPTION OF WORK:			
	PROPERTY OWNER / DEVELOPER INFORMATION			
	NAME		E-MAIL	
ADDRESS				

	<b>CITY</b>			
	<b>STATE</b>		<b>ZIP</b>	
	<b>PHONE</b>		<b>FAX</b>	
	<b>ENGINEER</b>		<b>E-MAIL</b>	
	<b>LICENSE #</b>		<b>COMPANY</b>	
	<b>ADDRESS</b>			
	<b>CITY</b>			
	<b>STATE</b>		<b>ZIP</b>	
	<b>PHONE</b>		<b>FAX</b>	
<b>C.</b>	<b>CONTRACTOR DETAILS</b>			
	<b>COMPANY NAME</b>			
	<b>STREET ADDRESS</b>			
	<b>CITY</b>			
	<b>STATE</b>		<b>ZIP</b>	
	<b>PHONE</b>		<b>FAX</b>	
	<b>VILLAGE OF INDIANTOWN COMPETENCY #</b>		<b>QUALIFIER</b>	
	<b>STATE OF FLORIDA LICENSE #</b>			
	<b>SUBMITTAL REQUIREMENTS ( 1 sets of all documents unless otherwise indicated)</b>			
<b>D.</b>	<b>SITE PLAN</b>	<b>LANDSCAPE PLAN</b>	<b>LEGAL DOCUMENTS DEMONSTRATING UNIFIED CONTROL</b>	
	<b>BOUNDARY SURVEY</b>	<b>ARCHITECTURAL ELEVATIONS (1 Copies)</b>	<b>TRAFFIC STUDY (MIN &amp; MAJ, STATEMENT if under 100 Trips)</b>	
	<b>DEP STORMWATER DISCHARGE PERMIT</b>	<b>DESCRIPTION OF STORMWATER MANGEMENT SYSTEM &amp; CALCS</b>	<b>EXISTING TREE SURVEY</b>	
	<b>SOILS MAP</b>	<b>ENVIRONMENTAL ASSESSMENT REPORT</b>	<b>SIGN DETAILS</b>	
	<b>ALL DOCUMENTS ON A PDF FORMATTED DISC ELECTRONICALLY SIGNED AND SEALED (1 COPY)</b>			