

PLANTATION ACRES IMPROVEMENT DISTRICT PERMIT

TYPE OF PERMIT: [] Construction [] Modification of existing Permit # _____ [] Extension of existing Permit # _____

PROJECT TITLE: _____

STREET ADDRESS: _____

LOCATION: Tract(s) _____ 1/4 Section _____ Township _____ Range _____ Plat Book _____ Page _____ Block _____ Lot _____

PURPOSE _____ (residential, agricultural, commercial, etc.)

PROJECT SIZE: This phase: _____ acres Total: _____ acres

DESCRIPTION OF WORK TO BE PERMITTED _____

NUMBER OF DWELLING UNITS _____ OR SQUARE FEET OF COMMERCIAL AREA _____

DATE CONSTRUCTION OR ALTERATION IS EXPECTED TO START _____

RECEIVING CANAL FOR PROJECT DRAINAGE _____

PROPERTY OWNER: _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

DEVELOPER: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____ PHONE _____

PROJECT ENGINEER: _____

ADDRESS: _____

CITY _____ STATE _____ ZIP _____ PHONE _____

AS THE PERMITTEE AND/OR OWNER OF THE PROPOSAL SET FORTH ABOVE, I DO UNDERSTAND AND AGREE THAT:

- 1. The use of or construction will be in accordance with the details of the approved drawing(s) supporting this permit; and if any changes are required, same will be cleared with the PLANTATION ACRES IMPROVEMENT DISTRICT in writing prior to initiating.
2. The PLANTATION ACRES IMPROVEMENT DISTRICT will be notified, as required to coordinate and schedule inspections.
3. Erosion, shoaling or deleterious discharges due to permitted actions will be corrected promptly at no expense to the PLANTATION ACRES IMPROVEMENT DISTRICT.
4. The area under permit will be maintained in a safe condition at all times or equipment will be promptly removed from the right of way of easement and that the right of way or easement will be restored to its original or better condition within a reasonable time on termination of the authorized use.
5. No beautification or erection of any structure or vegetation that will prohibit or limit the access of PLANTATION ACRES IMPROVEMENT DISTRICT equipment or vehicles in the right of way or easements will be permitted.
6. As Permittee, will hold and save the PLANTATION ACRES IMPROVEMENT DISTRICT and its successors harmless from any and all damages, claims or liabilities which may arise by reason of the construction, operation, maintenance or use of the work or structure involved in the permit.
7. This permit does not convey any property rights nor any rights or privileges other than those specified herein, nor relieve from complying with any law, regulation or requirement affecting the rights of other bodies or agencies.
8. This permit is in effect for one year, with an additional 60 day grace period. An extension must be requested if work is not completed during permit period.
9. To abide by the terms and conditions of the permit.

SIGNED _____ DATE _____
Owner's Signature (if not the owner, certify below)

I HEREBY CERTIFY THAT I AM AN AUTHORIZED AGENT OF THE OWNER: (Attach Letter of Authorization from Owner)

_____ TITLE _____

STATE OF FLORIDA
COUNTY OF _____

Before me personally appeared _____ as _____ of _____ to be known to be the person(s) described in or who has produced _____ as identification and who executed the foregoing instrument and acknowledged before me that _____ executed said instrument for the purpose expressed.

WITNESS my hand and official seal this _____ day of _____, _____.

My Commission Expires: _____ NOTARY PUBLIC _____ Type, Print or Stamp Name

This permit does not become valid until signed by the Chairman of the PLANTATION ACRES IMPROVEMENT DISTRICT. This permit will expire one year, to the day, from the date signed by the Chairman.

SIGNED _____ DATE _____ PERMIT REFERENCE NUMBER _____
CHAIRMAN