



REC'D BY _____ PERMIT NUMBER: _____

CITY OF PORT ORANGE

1000 CITY CENTER CIRCLE PORT ORANGE, FL 32129
PHONE 386-506-5600 FAX 386-506-5699

MINOR ENGINEERING PERMIT APPLICATION

Application for LDC, Ch. 10, Sec. 2 Change of Grade Permit and LDC, Ch. 9, Art. II, Sec. 2 Wetlands Alteration Permit
Note to Applicant: All sections of this application form must be completed to avoid delays. If a section does not apply to this project, please indicate by listing "not applicable" or "NA".

PROJECT INFORMATION

PROPERTY TYPE: RESIDENTIAL (One/Two-Family Lots) COMMERCIAL (Multi-Family/Commercial/Industrial Lots)

JOB ADDRESS & SUBDIVISION: _____

FLOOD ZONE DESIGNATION: _____ (Search Flood Zone Maps by address at <https://msc.fema.gov/portal/search>)

DESCRIPTION OF WORK (Brief): _____

OWNER INFORMATION

PERMIT APPLICANT

This section must be completed. If owner is applying for permit, please indicate by checking the "Permit Applicant" box above.

NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

CONTRACTOR INFORMATION

PERMIT APPLICANT

This section must be completed. If contractor is applying for permit, please indicate by checking the "Permit Applicant" box above.

QUALIFIER NAME: _____ BUSINESS NAME: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

ENGINEER/ARCHITECT INFORMATION

NAME: _____ COMPANY: _____

ADDRESS: _____

PHONE: _____ EMAIL: _____

TYPE OF WORK: (check all that apply)

- | | | |
|---|--|---|
| <input type="checkbox"/> Filling Depression | <input type="checkbox"/> Clearing and Grubbing | <input type="checkbox"/> Striping/Marking |
| <input type="checkbox"/> Filling Above Existing Grade | <input type="checkbox"/> Curb | <input type="checkbox"/> Landscaping |
| <input type="checkbox"/> Excavation | <input type="checkbox"/> Sidewalk/Ramps | <input type="checkbox"/> Irrigation |
| <input type="checkbox"/> Ditch/Swale | <input type="checkbox"/> Driveway | <input type="checkbox"/> Wetland Alteration |
| <input type="checkbox"/> Drainage Pipe/Culvert | <input type="checkbox"/> Pavement | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Drainage Structure(s) | <input type="checkbox"/> Overlay/Seal Coat | _____ |

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT FOR ANY JOB GREATER THAN \$2,500.00 WITH THE CLERK OF THE CIRCUIT COURT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE SITE AND SUBMITTED TO THIS OFFICE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. SOME AREAS HAVE PRIVATE DEED COVENANTS & RESTRICTIONS ON BUILDING ACTIVITY. CITY PERMIT IS ONLY TO ENSURE COMPLIANCE TO CITY AND STATE CODES. THE OWNER IS RESPONSIBLE FOR OBTAINING ANY PRIVATE ASSOCIATION APPROVAL BEFORE WORK IS STARTED.

DATA TO BE FURNISHED BY APPLICANT:

Survey or scaled plan showing:

- Proposed work
- Limit of work with tabulation of the area within the limit of work
- All existing trees within 25 feet of the proposed work, identify by type and size and depict those to be removed
- Existing and proposed grades
- Existing utility locations

Erosion Control Plan (Required for parcels adjacent to Drainage Easements, Conservation Easements, water bodies, or in excess of 1/2 acre disturbed area)

Stormwater Management calculations, if applicable

Floodplain Compensation calculations, if applicable

APPLICATION is hereby made to obtain a permit to do the work and installations as hereon indicated. I certify that the information contained in this application is correct and that all work will be done in compliance with all FEDERAL, STATE, COUNTY & CITY laws, rules, regulations and resolutions regulating construction and zoning whether specified in this application and accompanying plans/specifications or not.

IT IS AGREED by both Owner and Contractor that the approval of permits, plans and/or specifications does not relieve them of the responsibility to comply with provisions of the City Land Development Code and that any improvements constructed under this permit is subject to the following:

1. Construction inspections will be conducted by the Engineering Division and if the improvements are not in conformance with the approved permits, plans and/or specifications, said improvements must be immediately rectified to conform with the approved permit, plans and/or specifications.
2. After the permit, plans and/or specifications have been approved by the Engineering Division, they shall not be changed without written approval of the Engineering Division.

THE OWNER AND CONTRACTOR FURTHER AGREE to indemnify, hold harmless, defend, and exonerate the city and its employees from all damages, liabilities, claims, injuries, and demands for liability rising out of the work under this permit.

OWNER'S AFFIDAVIT: I authorize the named contractor to do the work stated above on the foregoing property.

Signature _____ Date _____
Owner

Print Name _____

Signature _____ Date _____
Contractor

Print Name _____

STATE OF FLORIDA, COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization on this _____ day of _____, 20__ by _____, who [] is personally known to me or [] who has produced _____ as identification.

Notary Public as to Owner
Printed Name, Commission & Term Expiration Date:

STATE OF FLORIDA, COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization on this _____ day of _____, 20__ by _____, who [] is personally known to me or [] who has produced _____ as identification.

Notary Public as to Contractor
Printed Name, Commission & Term Expiration Date: