



Town of Penney Farms, Florida

Tel: 904-529-9078
Fax: 904-284-4405

4100 Clark Avenue
Penney Farms, FL 32079

FOR OFFICE USE ONLY	

Permit Number	

Parcel ID	
_____	_____
Filing Date	Acceptance Date

SITE CLEARING/SITE WORK APPLICATION

A. PROJECT

Project Name: _____

Address of Subject Property: _____

Parcel ID Number(s): _____

Existing Use of Property: _____

FLUM Designation: _____

Description of Work: _____

Acreage of Parcel: _____

B. OWNER

Name of Owner(s) or Contact Person(s): _____ Title: _____

Company (if applicable): _____

Mailing address: _____

City: _____ State: _____ ZIP: _____

Telephone:() _____ FAX:() _____ E-mail: _____

*Must provide executed Property Owner Affidavit authorizing the agent to act on behalf of the property owner if application is not signed by the owner.

C. ATTACHMENTS (One copy plus one copy in PDF format)

1. Site Plan and Survey including but not limited to:
 - a. Name and owner of property.
 - b. Vicinity map – indicating general location of the site and all abutting streets and properties.
 - c. Statement of Proposed Work.
 - d. Delineation of wetlands.
2. Legal description with tax parcel number.
3. Warranty Deed or other proof of ownership.
4. Permit from the St. Johns River Water Management District, if impacting wetlands.

5. Fee.

- a. \$100.00 plus \$20.00 per acre:

No application shall be accepted for processing until the required application fee is paid in full by the applicant. Any fees necessary for technical review or additional reviews of the application by a consultant will be billed to the applicant at the rate of the reviewing entity. The invoice shall be paid in full prior to any action of any kind on the development application.

All attachments are required for a complete application. A completeness review of the application will be conducted within fourteen

(14) business days of receipt. If the application is determined to be incomplete, the application will be returned to the applicant.

I/We certify and acknowledge that the information contained herein is true and correct to the best of my/our knowledge:

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of Co-applicant

Date

Date

State of _____ County of _____

The foregoing application is acknowledged before me this ____ day of _____, 20____, by _____, who is/are personally known to me, or who has/have produced _____ as identification.

NOTARY SEAL

Signature of Notary Public, State of _____