



City of Lake City - Growth Management
 173 NW Hillsboro St. Lake City, FL 32055 Ph:
 386-719-5754 Email: Planning@lcfla.com

SITE DEVELOPMENT PERMIT APPLICATION

Permit #: _____

CONSTRUCTION UNDER THIS PERMIT SHALL BE DONE IN ACCORDANCE WITH FBC 2023 8TH EDITION

Site Address: _____

Legal Description (Section/Block/Lot): _____

Parcel ID: _____

Owner's Information

Name: _____ Email: _____ Phone: _____

Address: _____

Contractor's Information

Name: _____ Email: _____ Phone: _____

Address: _____ State License no. _____

Architect's/Engineer's Information

Name: _____ Email: _____ Phone: _____

Address: _____ State License no. _____

PROJECT INFORMATION

Commercial Residential

Describe the proposed work in detail: _____

Detailed location of proposed work: _____

***See checklist for additional requirements.**

Total Valuation \$ _____

APPLICATION MUST BE SIGNED AND NOTARIZED BY THE CONTRACTOR AND OWNER

 Contractor Signature Date

 Print Name

 Notary Public, State of Florida

STATE OF FLORIDA, County of _____

[NOTARIAL SEAL]

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

 Owner or Owner's Authorized Representative Signature Date

 Print Name

 Notary Public, State of Florida

STATE OF FLORIDA, County of _____

[NOTARIAL SEAL]

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

FOR OFFICE USE ONLY

PERMIT FEE \$ _____

Application date: _____ Rec'd by: _____



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Building Department
CHECKLIST FOR SITE DEVELOPMENT PERMIT

PERMIT APPLICATION – The following information must be completed on the permit application:

- For office use only - Permit number
- Note Project/plaza name
- Site address
- Parcel ID
- Owner's information, including contact info
- Contractor's information, including contact info
- Architect/Engineer's information
- Description of work
- Notarized Contractor/owner builder signature

PLANS AND DOCUMENTS – Provide 2 copies of the permit package if paper - **ELECTRONIC S&S PLANS PREFERRED**

- Site plans and Construction Plans
- All flood zones and wetlands noted on plans
- Boundary survey
- Tree survey or copy of Tree Permit Application. Needs to show trees being removed and ones being kept.
- Surface soils survey
- Erosion and sediment control plan
- Stormwater runoff plan.
- Copies of any SRWM, Army Corp of Engineers, EPD, FDOT, etc. permits if applicable.
- Driveway Permits if applicable

NOTES:

- Regulations can be found in Article 5 and 6 of the Land Development Regulations for the City of Lake City.

This checklist is intended for Building Department use only. Additional documents may be requested at any time during the permitting process. Any exceptions must be approved by a Supervisor.



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LETTER OF AUTHORIZATION TO SIGN FOR PERMITS

I, _____ (license holder name), licensed qualifier
 for _____ (company name), do certify that
 the below referenced person(s) listed on this form is/are contracted/hired by me, the license holder, or is/are employed by me directly or through an employee leasing arrangement; or, is an officer of the corporation; or, partner as defined in Florida Statutes Chapter 468, and the said person(s) is/are under my direct supervision and control and is/are authorized to purchase permits, call for inspections and sign on my behalf.

Printed Name of Person Authorized	Signature of Authorized Person
1.	1.
2.	2.
3.	3.
4.	4.
5.	5.

I, the license holder, realize that I am responsible for all permits purchased, and all work done under my license and fully responsible for compliance with all Florida Statutes, Codes, and Local Ordinances. I understand that the State and County Licensing Boards have the power and authority to discipline a license holder for violations committed by him/her, his/her agents, officers, or employees and that I have full responsibility for compliance with all statutes, codes and ordinances inherent in the privilege be granted by issuance of such permits.

If at any time the person(s) you have authorized is/are no longer agents, employee(s), or officer (s) you must notify this department in writing of the changes and submit a new letter of authorization form, which will supersede all previous lists. Failure to do so may allow unauthorized people to use your name and/or license number to obtain permits.

 License Holders Signature (Notarized) License Number Date

NOTARY INFORMATION:

State of: _____ County of: _____

The above license holder, whose name is _____
 personally appeared before me and is known by me or has produced identification (type of I.D.)
 _____ on this _____ day of _____, 20_____

(Seal/Stamp)

 NOTARY SIGNATURE