

CITY OF SATELLITE BEACH DEVELOPMENT PLAN APPROVAL APPLICATION



Preliminary _____

Final _____

Fees: Review by Staff: \$500.00 - less than 1 acre
800.00 - 1 to 3 acres
1,000.00 - more than 3 acres

Review by Fire Marshall: \$50

Review by Engineer (escrow deposit): \$300

Name of Applicant: _____ Phone Number: _____

Address: _____

Name of Property Owner: _____ Phone Number: _____

Address: _____

Relationship of applicant to property: _____

Property location and legal description: _____

Zoning: _____

Proposed Use: _____

APPLICANT'S SIGNATURE:

SWORN TO AND SUBSCRIBED BEFORE ME

THIS ____ DAY OF _____ 20 ____

BY _____

WHO IS PERSONALLY KNOWN TO ME OR
WHO HAS PRODUCED _____
AS IDENTIFICATION.

Notary Public

PROPERTY OWNER'S SIGNATURE:

SWORN TO AND SUBSCRIBED BEFORE ME

THIS ____ DAY OF _____ 20 ____

BY _____

WHO IS PERSONALLY KNOWN TO ME OR
WHO HAS PRODUCED _____
AS IDENTIFICATION.

Notary Public