DATE_____

City of Seminole

DOCK CONSTRUCTION ZONING CLEARANCE FOR CITY OWNED WATER BODIES

AN ORGINAL OR CERTIFIED COPY OF NOTICE OF COMMENCEMENT IS REQUIRED ON ALL JOBS OF $2500.00 OR GREAER IN VALUE, AND MUST BE PROVIDED AT THE TIME OF PERMIT ISSUANCE.

VALUATION OF JOB $_____ PARCEL #_____

DOCK SQ. FT_____ DOCK LENGTH_____ DOCK WIDTH_____

PROJECT/JOB SITE ADDRESS_____

CONTRACTOR COMPANY NAME_____

STATE LICENSE #_____PCCLB LICENSE #_____

ADDRESS_____

CITY_____STATE_____ZIP_____

PHONE #_____CONTACT PERSON_____CELL #_____

PROPERTY OWNER NAME_____

PROPERTY OWNERS ADDRESS _____

PHONE #_____FAX_____CELL_____

One dock per lot or parcel of private property; the dock shall not exceed 192 square feet in size nor 16 feet in length; the dock shall meet the side yard setbacks for the zoning district; and, the dock must be maintained in a safe and functional condition.

Notice of Commencement, As per s. 713.135 Florida Statutes, Warning to Owner: Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement.

Right of entry to premises for Dock Inspection.
Permission is hereby given by the property owner for the City to make any inspections to enforce any of the provisions of the Florida Building Code or City Ordinances, or whenever the Building Official has reasonable cause to believe that there exists any condition or code violation which makes such dock unsafe, dangerous, or hazardous, the Building Official may enter such premises at all reasonable times to inspect the same or to perform any duty imposed upon the Building Official by this code. If such building or premises are occupied, he shall first present proper credentials and request entry. If entry is refused, the Building Official shall have recourse to every remedy provided by law to secure entry.

An indemnity and hold harmless agreement must be provided by the applicant prior to the issuance of a building permit.

I certify that all foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating zoning and construction.

Signature_____Date_____
(Owner)

Please Print Name Here_____ Date_____
(Owner)

Signature _____ Date _____
(Contractor)

Please Print Name Here _____ Date _____
(Contractor

INDEMNIFICATION

THE OWNER EXPRESSLEY AGREES TO INDEMNIFY AND HOLD HARMLESS THE CITY, ITS OFFICERS, AGENTS, EMPLOYEES, SUCCESSORS AND ASSIGNS AGAINST ANY AND ALL SUITS, CLAIMS, DEMANDS OR ACTION OF ANY KIND AND NATURE WHATSOVER, INCLUDING BUT NOT LIMITED TO ATTORNEY'S FEES AND COURT COSTS, WHICH ARE BROUGHT OR WHICH MAY BE BROUGHT AGAINST THE CITY, ITS OFFICERS, AGENTS, EMPLOYEES, SUCCESSORS AND ASSIGNS FOR OR AS THE RESULT OF ANY INJUIRES OR DAMAGES RECEIVED OR SUBSTAINED BY ANY PERSON, FIRM OR CORPORATION; OR DAMAGE TO ANY PROPERTY, IN CONNECTION WITH OR RESULTING FROM THE CONSTRUCTION, INSTALLATION OR USE OF THE SUBJECT DOCK; OR IN CONSEQUENCE OF ANY NEGLIGENCE OR INTENTIONAL ACTS IN CONNECTION WITH THE SAME; OR RESULTING FROM THE USE OF ANY IMPROPER OR DEFECTIVE MATERIALS; OR RESULTING FROM POOR WORKMANSHIP; OR ANY ACT OR OMISSION OF THE OWNER, OR ANY OF HIS SUBCONTRACTORS, AGENTS, SERVANTS OR EMPLOYEES RELATING TO THIS PERMIT.

_____ _____

PROPERTY OWNER SIGNATURE **DATE**

I certify that all foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating zoning and construction.

Signature_____**Date**_____
(Owner)

Please Print Name Here_____**Date**_____
(Owner)

STATE OF FLORIDA COUNTY OF _____
Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____, by
_____ who is _____ personally known to me or has _____ produced
(type of identification) _____ as identification and who did / did not take an oath.

_____ **SEAL**
Signature of Notary Public
State of Florida

_____
Print / Type / Stamp Name of Notary Public

PLEASE BE AWARE THAT YOU MAY LIVE IN A DEED RESTRICTED COMMUNITY, OR A COMMUNITY WITH A HOMEOWNER'S ASSOCIATION; YOU ARE REMINDED TO CHECK TO ENSURE YOU COMPLY WITH THE RULES AND REGULATIONS OF THE COMMUNITY/ASSOCIATION. THE CITY OF SEMINOLE IS NOT RESPONSIBLE FOR THE ENFORCEMENT OF THE COMMUNITY/ASSOCIATION RULES AND REGULATIONS.

For staff use only

Application Approved By_____ _____**Plan Reviewer/Building Official**

Date Application Approved_____