

## MAINTENANCE AND REPAIR OF A PERMITTED DOCK

(In Accordance with Orange County Code, Chapter 15, Article IX)

Mail or Orange County Environmental Protection Division

**Deliver To**: 3165 McCrory Place, Suite 200

Orlando, Florida 32803

(407) 836-1400, Fax (407) 836-1499

## **SECTION 1**

OWNER(S) OF THE LAND			
Name:			
Title and Company:			
Address:			
City:		State:	Zip:
Telephone and Fax:	Email:		
ENTITY TO RECEIVE PERMIT (IF OTH	ER THAN OWNER)		
Name:			
Title and Company:			
Address:			
City:			Zip:
Telephone and Fax:	Email:		
AGENT/CONSULTANT AUTHORIZED T	O SECURE PERMIT		
Name:			
Title and Company:			
Address:			
City:		State:	Zip:
Telephone and Fax:	Email:		
CONTRACTOR (IF DIFFERENT FROM A	AGENT)		
Name:			
City:			Zip:
Telephone and Fax:			
Name:		State:	Zip:

## **SECTION 2 - GENERAL INFORMATION** Name of water body: Normal High Water Elevation (NHWE): \_\_\_\_\_msl Original EPD permit number: ☐ Private ☐ Semi-Private ☐ Public Is the existing dock: Brief Description of Work: Brief description of sedimentation and erosion control measures: What is the total square footage of existing terminal platform: sq. ft. Any access restrictions to the property (locked gate/loose dogs): **REQUIRED ATTACHMENTS:** A copy of the permit with the approved plans. If built after May 18, 2004 a copy of an as-built survey of the real property which accurately depicts current conditions Agent Authorization Form Chapter 2019-165, Florida Statutes (House Bill 7103), establishes timeframes for applicant and agency responses. By checking this box, you are providing written authorization for EPD to waive the mandatory timeframes established by law. PERSON AUTHORIZING ACCESS TO THE PROPERTY MUST COMPLETE THE FOLLOWING: I either own the property described in this application or I have legal authority to allow access to the property and I consent to any site visit on the property by agents or personnel from Orange County, Florida necessary for the review and inspection of the proposed project specified in this application. I authorize these agents or personnel to enter the property as many times as may be necessary to make such review and inspection. Further, I agree to provide entry to the project site for such agents or personnel to monitor permitted work if a permit is granted. Typed/Printed Name Signature Date Corporate Title (if applicable) PROPERTY OWNER OR AUTHORIZED AGENT MUST COMPLETE THE FOLLOWING: By signing and submitting this application form, I am applying for the permit identified above, according to the supporting data and other incidental information filed with this application. I am familiar with the information contained in this application, and represent that such information is true, complete, and accurate. I understand this is an application and not a permit, and that work conducted prior to approval is a violation. I understand that this application and any permit issued pursuant thereto, does not relieve me of any obligation for obtaining any other required federal, state, water management district or local permit prior to commencement of construction. I understand that Orange County will make no representation as to the proposed dock's impact on navigability or safety. For that reason, I understand that it may be advisable for me to consult with an expert in navigability and safety issues. I agree, or I agree on behalf of my corporation, to operate and maintain the permitted system unless the permitting agency authorizes transfer of the permit to a responsible operation entity; I understand that knowingly making any false statements or representation in this application is a violation of Sections 15-341 & 15-342, Orange County Code. Signature of Applicant/Agent Date

Corporate Title (if applicable)

## **AGENT AUTHORIZATION FORM**

FOR PROJECTS LOCATED IN ORANGE COUNTY, FLORIDA

I/\_/=	(P	PRINT PROPERTY				OWNER				ME)		5		
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Date: Signature of Pro				roperty	perty Owner				Print Name Property Owner					
Date:		Signature of Propo			roperty	erty Owner				Print Name Property Owner				
Date:		Signature of Prope			roperty	erty Owner				Print Name Property Owner				
STATE OF F			_											
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				Signature of Notary Public										
(Notary Seal)		Notary Public for the State of Florida												
				My Commission Expires:										
Legal Desc	ription(s)	or Paro	el Ident	tification Nu	mber(s) a	re req	uired							
Parcel ID#:	:													
Legal Desc	ription:													