



## APPLICATION FOR LAKESHORE PROTECTION PERMIT AND CONSERVATION AREA AUTHORIZATION\*

\*This permit application is intended to be used when work is being proposed both within a conservation area or easement and below the Normal High Water Elevation, in accordance with Orange County Lakeshore Protection Regulations Chapter 15, Article VII, Chapter 33, Articles II and IV, Orange County Code; and Wetland Regulations Chapter 15, Article X

**Mail or Deliver To:** Orange County Environmental Protection Division  
3165 McCrory Place, Suite 200  
Orlando, Florida 32803  
(407) 836-1400, Fax (407) 836-1499

Enclose a check for the filing and advertising fee of \$126.00 payable to The Board of County Commissioners\*\*  
Process Fee for Appeals and Variances - \$409.00

### SECTION 1

#### OWNER(S) OF THE LAND

Name: \_\_\_\_\_  
Title and Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone and Fax: \_\_\_\_\_ Email: \_\_\_\_\_

#### ENTITY TO RECEIVE PERMIT (IF OTHER THAN OWNER)

Name: \_\_\_\_\_  
Title and Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone and Fax: \_\_\_\_\_ Email: \_\_\_\_\_

#### AGENT/CONSULTANT AUTHORIZED TO SECURE PERMIT

Name: \_\_\_\_\_  
Title and Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone and Fax: \_\_\_\_\_ Email: \_\_\_\_\_

#### CONTRACTOR (IF DIFFERENT FROM AGENT)

Name: \_\_\_\_\_  
Title and Company: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Telephone and Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**SECTION 2 - GENERAL INFORMATION:**

Street address: \_\_\_\_\_

Parcel/Tax ID Number(s): \_\_\_\_\_

Legal description of property: \_\_\_\_\_

Description of work (name specific plants to be removed and/or planted): \_\_\_\_\_

The percentage of vegetation proposed to be removed: \_\_\_\_\_ %; Total shoreline \_\_\_\_\_ feet.

Justification for the removal and/or replacement of lakeshore vegetation outside of the allowed access corridor: \_\_\_\_\_

Describe means of minimizing and controlling erosion and filtering runoff (i.e silt fence/turbidity curtain): \_\_\_\_\_

**REQUIRED ATTACHMENTS:**

- A diagram showing the location of the *vegetated removal area* and *replanting area* with respect to the limits of the conservation area and the Normal High Water Elevation (NHWE)

**NOTE:** As stated in Chapter 15, Article VII and X of the County Code, these diagrams must include all of the following:

- The current and Normal High Water Elevations (NHWE).
- Lake Name
- A north arrow
- Bottom elevations or water depths.
- The dimensions of the property (including total linear feet of shoreline at the NHWE).
- An outline of the existing vegetation areas and the proposed removal areas with dimensions in feet or square feet.
- The owner’s name and site address.

- Agent Authorization Form

- A certified property survey

- A copy of the **notarized** “*Notification to the Adjacent Property Owners*” form informing them of this application, **OR** you must complete the following and EPD will provide written notification to the adjacent property owners (as applicable):

**Name and Address of adjacent property owners:**

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Name: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

**\*\* Please note: If not supplied by the applicant, EPD is required to complete the notification process, which may take up to 45 days to complete and these this may delay the issuance of your permit.**

- A detailed description of the proposed monitoring and maintenance program to be implemented upon completion of the project.

Please note that after one year, or once the lakeshore area has met the required success criteria, the area shall maintain an 80 percent coverage by appropriate wetland/aquatic species, less than five percent exotic vegetation (as identified in the Florida Exotic Pest Plant Council’s List of Invasive Species Category I and II, as amended from time to time), **in perpetuity**.

In addition, to ensure success of any work with conservation areas (wetlands), monitoring and maintenance activities are to be performed for a minimum of five years for forested plantings and three years for herbaceous plantings. If, at any time, EPD determines the conservation area has less than an 85 percent vegetative coverage, the permittee may be required to install additional plantings and continue monitoring until the success of the plantings areas has been demonstrated. If the conservation area at any time contains more than 10 percent coverage of nuisance and five percent coverage of exotic vegetation, the permit shall be void, and prior to any vegetation removal, a new permit will be required. Once the area has met the required success criteria, the area shall maintain an 85 percent coverage by appropriate wetland/aquatic species, and less than five percent exotic vegetation (as identified in the Florida Exotic Pest Plant Council’s List of Invasive Species Category I and II, as amended from time to time), **in perpetuity**.

- 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.

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Typed/Printed Name	Signature	Date
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Corporate Title (if applicable)

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 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 Section 15-256, Orange County Code.

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Typed/Printed Name of Applicant	Signature	Date
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Corporate Title (if applicable)

# AGENT AUTHORIZATION FORM

FOR PROJECTS LOCATED IN ORANGE COUNTY, FLORIDA



I/WE, \_\_\_\_\_ (PRINT PROPERTY OWNER NAME)  
 \_\_\_\_\_, AS THE OWNER(S) OF THE REAL  
 PROPERTY DESCRIBED AS FOLLOWS,  
 \_\_\_\_\_, DO HEREBY  
 AUTHORIZE TO ACT AS MY/OUR AGENT (PRINT AGENT'S NAME),  
 \_\_\_\_\_, TO EXECUTE ANY PETITIONS OR OTHER  
 DOCUMENTS NECESSARY TO AFFECT THE APPLICATION APPROVAL REQUESTED AND MORE  
 SPECIFICALLY DESCRIBED AS FOLLOWS,  
 \_\_\_\_\_, AND TO APPEAR ON MY/OUR  
 BEHALF BEFORE ANY ADMINISTRATIVE OR LEGISLATIVE BODY IN THE COUNTY CONSIDERING THIS APPLICATION AND TO  
 ACT IN ALL RESPECTS AS OUR AGENT IN MATTERS PERTAINING TO THE APPLICATION.

Date: \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Print Name Property Owner \_\_\_\_\_  
 Date: \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Print Name Property Owner \_\_\_\_\_  
 Date: \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Print Name Property Owner \_\_\_\_\_  
 Date: \_\_\_\_\_ Signature of Property Owner \_\_\_\_\_ Print Name Property Owner \_\_\_\_\_

STATE OF FLORIDA  
 COUNTY OF \_\_\_\_\_

I certify that on \_\_\_\_\_, before me, \_\_\_\_\_, an officer duly authorized by the State of Florida and in the county mentioned above, to take acknowledgements, personally appeared \_\_\_\_\_, to me known to be the person described in this instrument or to have produced \_\_\_\_\_, as evidence, and who has acknowledged before me that he or she executed the instrument and did / did not take an oath.

Witness my hand and official seal in the county and state stated above on the \_\_\_\_ day of \_\_\_\_\_, in the year \_\_\_\_\_.

\_\_\_\_\_  
 Signature of Notary Public  
 Notary Public for the State of Florida  
 My Commission Expires: \_\_\_\_\_

(Notary Seal)

<b>Legal Description(s) or Parcel Identification Number(s) are required:</b>
<b>PARCEL ID #:</b>
<b>LEGAL DESCRIPTION:</b>