

LANDSCAPE PERMIT APPLICATION

100 NW 1st Avenue Delray Beach FL 33444 (561) 243-7200 Fax: (561) 243-7221 Website: mydelraybeach.com

PROPERTY CONTROL #:	FOR OFFICE USE ONLY:
	BLDG PERMIT #:
PLEASE PRINT	LAND PERMIT #:
PROJECT NAME (IF APPLICABLE)	PERMIT FEE:
JOBSITE ADDRESS	DI AM CHECH EEE
PROPERTY OWNER NAME	MCP #·
HOME PHONE ()CELL	
PROPERTY OWNER ADDRESS	
CONTRACTOR (COMPANY) NAME	
CONTRACTOR (COMPANY) ADDRESS	
CITYSTZIP	
BUS. PHONE: () CELL	
FAX E-MAIL	
MUST BE ON THE JOB SITE FOR ALL INSPECTIONS. FINAL INSPECTION IS REQUIRED ON ALL PERMITS. PROJECT COST (LABOR AND MATERIAL): \$	
Projects with an estimated cost over \$1,000 must submit	a Cartified Cost Estimate
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<u>DESCRIPTION OF WORK</u>	
LANDSCAPING ASSOCIATED WITH:	
SFRDUPLEXMULTI-FAMILYCOMMERCIA	L FENCE PAVING
OTHER:	
DESCRIPTION OF WORK (TYPE OF PLANTINGS, ETC.):	
**No final inspection will be made for a building or structure until the	landscaping is inspected and approved
SIGNATURE OF QUALIFIER CONTR. REGISTRATION # WORKERS OF	OR EXEMPT (FID /FEIN) #
STATE OF	
COUNTY OF	Personally Known
The foregoing instrument was acknowledged before me this day	OR
of, 20 by	Produced Identification Type of Identification Produced
	Type of identification Froduced
	(SEAL)
Signature of Notary Public	(SEAL)