

STORAGE LOT PERMIT CHECKLIST

This page must be completed by the applicant before any
STORAGE LOT PERMIT APPLICATION
can be accepted at the counter

Your Storage Lot Permit application can not be accepted at the counter unless this page is completed. Please review the package you are submitting for the specific requirements listed below. Check off each box to indicate that the required items, *in the quantities required*, have been included in your package. Completion of this page does not mean the package is "sufficient" – it simply means that the application can be accepted at the counter for later review by staff. If you do not have the following, your application will be turned away:

REQUIRED INFORMATION FOR STORAGE LOT PERMIT APPLICATION

- ZONING OFFICIAL LETTER OF DETERMINATION (NOTE: The storage lot may need a SPECIAL EXCEPTION and / or SITE PLAN REVIEW APPROVAL)**
- TREE PERMIT APPLICATION together with FOUR (4) COPIES of the TREE REMOVAL or PRESERVATION PLAN**
- LANDSCAPE PLAN – Signed & Sealed (Minimum 4 copies)**
- COUNTY STORMWATER APPROVAL LETTER**
- SWFWMD / SFWMD ENVIRONMENTAL RESOURCE PERMIT OR WRITTEN EXEMPTION LETTER FROM THE APPLICABLE DISTRICT**
- ALL APPLICABLE STATE AND FEDERAL PERMITS**
- R-O-W SITE PLAN / STORMWATER or DRAINAGE PLAN (Minimum 2 copies)**
- FENCE OUTLINE AND DETAIL (Minimum 2 copies)**
- SURVEY / less than one year old (Minimum 2 copies)**

This page was completed by: _____
Signature

Date

Phone Number

STORAGE LOT PERMIT APPLICATION

REQUIRED FOR APPLICATION

ZONING OFFICIAL LETTER OF DETERMINATION (NOTE: The storage lot may need a SPECIAL EXCEPTION and / or SITE PLAN REVIEW APPROVAL)
TREE PERMIT APPLICATION with FOUR (4) COPIES of TREE REMOVAL or PRESERVATION PLAN
LANDSCAPE PLAN – FOUR (4) COPIES
COUNTY STORMWATER APPROVAL LETTER
SWFWMD / SFWMD ENVIRONMENTAL RESOURCE PERMIT OR WRITTEN EXEMPTION LETTER FROM THE APPLICABLE DISTRICT
ALL APPLICABLE STATE AND FEDERAL PERMITS
ROW SITE PLAN / STORMWATER or DRAINAGE PLAN Min. (2) COPIES
FENCE OUTLINE Min. (2) COPIES
SURVEY / less than year old Min. (2) COPIES

PLANS REVIEWS

ZONING
PD - ENVIRONMENTAL
TREE
ROW / STORMWATER
LANDSCAPE
BUILDING/ FENCE
FIRE

INSPECTIONS

BUILDING FINAL/ fence
ELECTRICAL FINAL
FIRE
ZONING
TREE
LANDSCAPE
LINE & GRADE
PIPE
ROW FINAL
STORMWATER



Building Construction Services

18400 Murdock Circle, Port Charlotte, FL 33948
Phone: (941) 743-1201 FAX: (941)743-1213
Zoning (941) 743-1964
Toll Free from Englewood (697-2919)
www.charlottecountyfl.com

"To exceed expectations in the delivery of public services"

For Office Use Only

Permit Number

2 0 _____

Application Date

CSR _____

Print Form

Application for Storage Lot Permit

Form 14

Job Site Details

Description of work to be done _____

Address:

_____ Unit # _____
Number Name Type:(St., Dr., Pkwy., Blvd., etc.)

Tax Folio # _____ Lot _____ Block _____ Subdivision _____

Section _____ Township _____ Range _____ Wind Zone _____ Exposure _____ Flood Zone _____

This property will be used as _____ Map Page _____

Zoning Class _____ Construction Cost (excluding lot but including labor) _____

Corner Lot Inside Lot Waterfront

Owner Information

Name _____

Address _____

City _____ State _____

Phone No. _____ Fax No. _____

Email _____

Contractor Information

Name _____

Address _____

Number Name Type:(St., Dr., Pkwy., Blvd., etc.)

City _____ State _____

Phone _____ Fax No _____

Email _____

Contractors State Certification or Registration No. _____ Contractors Certificate of Competency Number _____



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Permit Number

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Print Form

Form 1(ii)

Application for Construction Permit (cont.)

Name of Fee Simple Titleholder (if not owner) _____

Street _____ City _____ State _____ Zip _____ Phone No _____

Bonding Company Name _____ Street _____ State _____ Zip _____

Architect/Engineer Name _____ Street _____ State _____ Zip _____

Mortgage Lender _____ Street _____ State _____ Zip _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

The undersigned applicant for this permit does hereby certify that he/she has or will prior to the performance of any work in connection with the authorization granted under this permit comply with the provisions of the Florida Worker's Compensation Act of Employers Liability Insurance, the Social Security Act, the Florida Child Labor Laws and all other applicable safety and labor laws of the state. Violation will invoke severe penalties.

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

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 YOU LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

NOTICE: In addition to the requirement of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this County, and there may be additional permits required from other governmental entities such as water management districts, state, or federal agencies.

OWNERS/AGENT SIGNATURE

CONTRACTORS SIGNATURE

State of Florida, County of Charlotte

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this ____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

Signature of Notary

Notaries Printed Name

Commission Number

State of Florida, County of Charlotte

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization, this ____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

Signature of Notary

Notaries Printed Name

Commission Number