CHARTERED COUNTY MULCHING PERMIT APPLICATION

Job Address: ____________________________

Parcel ID #: ____________________________ Lot: ______ Property Type: Residential ___ Commercial ___

Contractor or Owner/Builder: ____________________________ Contractor License #: ____________________________

Mailing Address: ____________________________

Phone: ___________________ Email Address: ____________________________

- I certify that ALL native trees over 4” caliper on the above-described property are to remain preserved/protected according to the methods set forth in the Charlotte County Buffers, Landscaping, and Tree Requirements, Section 3-9-100.

- I certify that ONLY underbrush, exotics and trees under 4” caliper will be mulched on the above-described property, no trees over 4” caliper will be removed, and no soil excavation, clearing or filling will occur.

Please initial: Yes ______ No ______ **

** Removal of any tree(s) over 4” caliper requires a separate tree removal permit. See Section 3-9-100 (d)(4) below. Per Section 3-9-100: Buffers, Landscaping, and Tree Requirements (d) Tree removal (4) Absolutely no speculative clearing is allowed. Applicant must have either a building permit or final site plan approval prior to County staff authorizing any clearing or tree removal activities.

Additional Comments/Conditions

____________________________________________________________________________________________________________________

____________________________________________________________________________________________________________________

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I agree to assume full responsibility for the mulching of said vegetation and for compliance with all applicable County and State regulations.

Environmental Inspection Fee: $55

*Please note site review is cursory, additional wildlife or environmental reviews may be required by state and federal agencies if protected species are found onsite (i.e. must avoid gopher tortoise burrows by 25’ if found during mulching activity). *For properties in which the total area to be mulched exceeds 1 acre, the submittal of a current protected species assessment and FLUCCS map will be required.

Applicant’s Signature: ____________________________ Date: __________________

Authorized County Official: ____________________________ Date: __________________

A final inspection may be conducted by staff to ensure compliance with all of the applicable permit conditions.
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Affidavit of Applicant
I, the undersigned, being first duly sworn, depose and say that I am the owner, attorney, attorney-in-fact, agent, lessee or representative of the owners of the majority of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all sketches, data and other supplementary matters attached to and made a part of the application are honest and true to the best of my knowledge and belief. I understand this application must be complete and accurate before the application may be considered, and that if I am not the owner of the property, I have attached a notarized authorization from the owner(s) to submit with this application.

State of ____________________, County of ____________________ The foregoing instrument was acknowledged before me this _____ day of ___________, _______.
by ______________________________ who is personally known to me or; has produced _____________________ as identification and who did / did not take an oath.

Signature of Notary                      Signature of Applicant (or Agent)

Printed Name of Notary

Commission Number

Property Owner’s Consent
I, ______________________, property owner of ____________________________
do hereby give __________________ permission to file this application to allow the use of
this property for: ____________________________________________________.

State of ____________________, County of ____________________. The foregoing
instrument was acknowledged before me this _____ day of ___________, _______.
by ______________________________ who is personally known to me or; has
produced _____________________ as identification and who did / did not take an oath.

Signature of Notary                      Signature of Owner

Printed Name of Notary

Commission Number