



Community Development Department
10720 Caribbean Boulevard, Suite 120
Phone: 305-234-4262 Fax: 305-234-4251

Permit Application for Boat Storage

Owner's Name: _____
Residential Address: _____
City: TCB ST: FL Zip: _____
Phone No.: _____
Driver's License No.: _____
Folio No. _____

One of the following items is needed for submittal of application:

1. Boundary Survey of Property with the proposed location of the Boat Storage; or
2. Site Plan with the proposed location of the Boat Storage; or
3. Scale drawing with the proposed location of the Boat Storage.

Requirements:

1. Boat Identification Number
2. The proposed means of screening the Boat
3. The length, width and height of the Boat
4. The proposed location of the Boat and screening shown on the site drawing
5. The location of any other Boat and its length, width, and height
6. A picture of the Boat, if available.

The undersigned has read this completed application and represents that the information and all submitted materials are true and correct to the best of the applicant's knowledge and belief.

Applicant's Signature and Title

Date

OFFICE USE ONLY:

Date Filed: _____

Approved By: _____

