

#### CITY OF INDIAN ROCKS BEACH 1507 BAY PALM BLVD. INDIAN ROCKS BEACH, FL. 33785 (727)595-2517 Email to Mike Kelley at mkelley@irbcity.com

# PRIVATE DOCK PERMIT APPLICATION

	□ APPROVED □ DENIED				
	Permit Fee:	City of Indian Rocks Beach Officia	l Date		
	315 Court Street Clearwater, FL	ndian Rocks Beach Dock Permit to Pi 33756. (727) 464-3385	nellas Water & Navigation		
	PROPERTY OWNER INFOR	-			
<b>.</b>	Applicant's Name:				
8.	Mailing Address:	Ctata	7		
		State:			
).	Telephone No: E-mail Address:		ddress:		
	AGENT INFORMATION:				
	Name:				
	Address:				
		State:			
;.	Telephone No:	E-mail A	ddress:		
I.	SITE INFORMATION:				
A.	Construction Site Addres	s'			
73.	City:		Zip:		
	B. Parcel ID Number: _		//		
V.	PROJECT DESCRIPTION:				
A.	Nature and Size of Project:				
		Sau	are Feet:		



# V. CONTRACTOR INFORMATION:

I, \_\_\_\_\_\_\_, a certified contractor, state that the dock has not been constructed and that it will be built in compliance with all requirements and standards set forth in the City of Indian Rocks Beach Code, and in accordance with the attached drawings which accurately represent all the information required to be furnished. In the event that this dock is not built in accordance with the permit or the information furnished is not correct, I agree to either remove the dock or correct the deficiency.

Signed:	Cert No.:	
Company Name:	Telephone No:	
City:	State:2	Zip:
E-mail Address:		

# VI. OWNER'S SIGNATURE:

I hereby apply for a permit to do the above work and state that the same will be done according to the map or plan attached hereto and made a part hereof, and agree to abide by the criteria of the City of Indian Rocks Beach Code for such construction. I further state that said construction will be maintained in a safe condition at all times, should this application be approved, that I am the legal owner of the upland from which I herein propose to construct the improvements, and that the above stated agent/contractor may act as my representative. I understand that I, not the City of Indian Rocks Beach, am responsible for the accuracy of the information provided as part of this application and that it is my responsibility to obtain any necessary permits and approvals applicable for the proposed activities on either private or sovereign owned submerged land.

Date

Legal Owner's Signature



# **DISCLOSURE FORM**

In order to alleviate any potential conflict of interest with City of Indian Rocks Beach staff, it is required that the City be provided with a listing of PERSONS being party to a trust, corporation, or partnership, as well as anyone who may have beneficial interest in the application which would be affected by any decision rendered by the City (attach additional sheets if necessary).

# A. PROPERTY OWNERS:

	Name:	Name:
	Address:	Address:
	Name:	Name:
	Address:	Address:
B.	REPRESENTATIVES:	
	Name:	Name:
	Address:	Address:
C.	<b>OTHER PERSONS HAVING OWNERSHIP</b> Interest is: contingent  absolute  Name:	

Specific interest held:

# D. OWNER'S SIGNATURE:

I hereby certify that the information stated above is complete, accurate, and true to the best of my knowledge.

X\_\_\_\_\_Date\_\_\_\_



#### PRIVATE DOCK

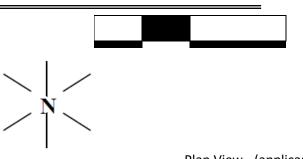
MHW MLW BOTTOM

**Profile View** 

TOTAL SQUARE FEET \_\_\_\_\_ NEW SQUARE FEET \_\_\_\_\_

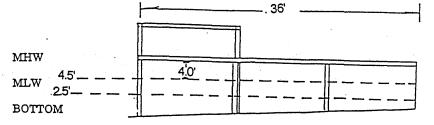
WATER WAY WIDTH \_\_\_\_\_ WATERFRONT WIDTH \_\_\_\_\_

ENG. SCALE: 1" = 20'



Plan View - (applicant and adjacent docks)





Profile View

