



LANDSCAPE PERMIT APPLICATION

Rev: 3 | Revision Date: 10/31/2022 | I.D. Number: LPA

Master Permit #: _____ Sub Permit #: _____

Permit Type: General Retroactive VUA Code Compliance Renewal Change of Contractor

COMPLETE FORM IN BLACK INK – ONLY SIGNATURES MAY BE IN STANDARD BLUE INK

Type of Property: Single Family Duplex Multi-Family Condominium Non-Residential Date of Submittal: _____

1. Job Address: _____

Subdivision: _____ Block: _____ Lot: _____

2. Property Owner's Name: _____ Owner as Landscaper

Owner's Address: _____ City: _____ State: _____ Zip _____

Owner's Phone: (____) _____ - _____ Owner's Email: _____

3. Landscape Company or Contractor's Name: _____

Broward County Business Tax receipt # or FL GC License #: _____

Company Address: _____ City: _____ State: _____ Zip _____

Phone: (____) _____ - _____ Company Email: _____

4. Landscape Architect/Engineer: _____

Address: _____ City: _____ State: _____ Zip _____

Phone: (____) _____ - _____ Email: _____

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

Affidavit: Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that all work or installation will be performed to meet the standards of all laws regulating construction in the City of Fort Lauderdale. I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Signature of Legal Owner/Agent: with notarized statement.

X _____
STATE OF FLORIDA - COUNTY OF BROWARD
Sworn to (or affirmed) and subscribed before me

this _____ day of _____, 20____ by

(Type / Print Owner's Name)

NOTARY'S SIGNATURE as to Owner or Agent's Signature

Name & Title (printed) _____
(Type / Print Notary's Name)

Personally Known _____ or Produced ID _____

Type of Identification Produced: _____

Signature of GC or Registered Landscape Company Representative:

X _____
STATE OF FLORIDA - COUNTY OF BROWARD
Sworn to (or affirmed) and subscribed before me

this _____ day of _____, 20____ by

(Type / Print Qualifier's Name)

NOTARY'S SIGNATURE as to Qualifier's Signature

Name & Title (printed) _____
(Type / Print Notary's Name)

Personally Known _____ or Produced ID _____

Type of Identification Produced: _____





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5. Description of Work to be Done: _____

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

The issuance of the permit by the City of Fort Lauderdale does not in any way create any right on the part of an applicant to obtain a permit from a state or federal agency and does not create any liability on the part of the City for issuance of the permit if the applicant fails to obtain requisite approvals or fulfill the obligations imposed by a state or federal agency or undertakes actions that result in a violation of state or federal law.

The applicant must obtain all other applicable state or federal permits before commencement of the development.