City of DeBary

USE PERMIT WORKSHEET
(TO BE ATTACHED TO PERMIT APPLICATION)

ARTICLE VI — USE PERMIT (USE) DRIVEWAY CONNECTION TO CITY RIGHT-OF-WAY; MAILBOX OR
UTILITY WORK IN CITY RIGHT-OF-WAY; OR OTHER WORK ON CITY PROPERTY

PLEASE PRINT OR TYPE ALL INFORMATION IN SECTIONS 1, 2, AND 4

APPLICANT MUST SIGN APPLICATION IN SECTION 4.

SITE ADDRESS:
Property Appraiser’s Parcel Number:
Directions to Property:

1. WORK SITE INFORMATION
THREE (3) plot plans must be attached.

PURSUANT TO CHAPTER 556, FLORIDA STATUTES, AS AMENDED, AN EXCAVATOR OF THE WORK PERFORMED
UNDER THE SCOPE OF THIS APPLICATION SHALL CALL THE “SUNSHINE STATE ONE-CALL OF FLORIDA, INC.” (DIAL
811) NOT LESS THAN TWO OR MORE THAN FIVE BUSINESS DAYS BEFORE BEGINNING EXCAVATION. REFER TO
THE ATTACHED INFORMATION SHEET (OR RECEIVE ATTACHMENT AT THE BUILDING DEPT.) FOR YOUR RIGHTS
AND RESPONSIBILITIES UNDER THE NEW LAW.

2. DESCRIPTION OF WORK Please check box:
COMMERCIAL [ ] RESIDENTIAL [ ]
Mailbox located on Public Right of Way [ ]
Asphalt or Concrete Driveway Approach to Paved Road [ ]
Asphalt or Concrete Driveway Approach with Culvert Pipe to Paved Road [ ]
Driveway Approach to Unpaved Road [ ]
Open Street Cut on a Paved Street Number of Cuts [ ]
Open Street Cut on an Unpaved Street Number of Cuts [ ]
Bore and Jack Number of Bore & Jacks [ ]
Roadway Construction other than a Special Assessment District; or in Connection
With the Development of a Subdivision [ ]
Other (Specify) [ ]

3. APPLICATION FILING RESPONSIBILITIES
A non-refundable application fee shall be paid at the time of application submittal. Additional fees may be
assessed during the application review process and shall be paid prior to the issuance of the permit. Applications
determined to be incomplete may be returned to the applicant prior to acceptance, or approval
may be delayed. Refer to appropriate checklist for submittal requirements and fees.

4. ALL COMMUNICATION CONCERNING THIS APPLICATION WILL BE DIRECTED TO THE APPLICANT AND THE PERMIT
WILL BE ISSUED IN THE NAME OF THE APPLICANT.

APPLICANTS CHECK IF: [ ] OWNER [ ] CONTRACTOR [ ] AGENT*
*(Agent must supply a notarized statement of authorization.)

APPLICANT’S SIGNATURE: