



PERMITTING REQUEST – ZONING CLEARANCE FORM

APPLICATION NUMBER: _____ (Assigned by Montverde Staff) DATE: _____

PAYMENT: _____ Check No.: _____

CONTACT NAME: _____

LAKE COUNTY ALT KEY No. (If known) _____

TYPE OF PERMIT OR WORK REQUESTED: _____

DESCRIPTION OF PROPOSED ACTIVITY: _____

PROPERTY ADDRESS/LOCATION: _____

TOTAL SQUARE FOOTAGE OF RESIDENCE: _____

TOTAL SQUARE FOOTAGE OF ACCESSORY STRUCTURE: _____

PHONE NUMBER AND E-MAIL ADDRESS (If you want to be contacted via e-mail): _____

BUILDER'S/CONTRACTOR'S NAME, ADDRESS, AND PHONE NUMBER: _____

NOTE: Application shall include survey or sketch of the property indicating proposed activity.
SEE BACK SIDE OR ATTACHED FOR GENERAL AND SPECIFIC PERMIT CONDITIONS OR
COMMENTS AFTER APPROVAL HAS BEEN ISSUED.

I certify that the statements in this application are true to the best of my knowledge.

Signature of Applicant

BELOW TO BE COMPLETED BY TOWN OF MONTVERDE STAFF

1. Legal Description of Property: _____
2. Utilities: Central Water ____ Central Sewer ____ Well ____ Septic Tank _____
3. Existing zoning of property: _____ Lot Size: _____
4. Square Footage of Living Area: _____ Square Footage of Accessory Structure(s): _____
5. Total Square Footage: _____ Square Footage of Lot: _____
6. Outside Dimensions: Width: _____ Depth: _____ Height: (to roof) _____
7. Setbacks: Front: _____ Rear: _____ R-Side: _____ L-Side _____
8. Flood Hazard Area: Yes _____ No _____

GENERAL PERMIT CONDITIONS:

- 1.) Town Ordinance requires a trash container on site for debris. Construction entrance must be noted on site plan.
- 2.) This permit does not guarantee approval from applicable Home Owners Association (HOA) rules. Please consult your HOA prior to initiating construction.
- 3.) Contractors must use Waste Pro for all trash containers (407) 774-0800. Ask for Rita or Jeannie.

SPECIFIC PERMIT CONDITIONS: (to be added by Staff and inspected by Code Enforcement Officer)

Town of Montverde
17404 Sixth Street
Montverde, Florida 34756
PO Box 560008

(407) 469-2681
(407) 469-2773 (Fax)

Approved by Town Planner: _____
Date: _____
Town Clerk: _____
Date: _____

Office Use:

Date Application Received: _____ Received by: _____

Fees Paid: _____