



# City of South Pasadena

## COMMUNITY IMPROVEMENT

**Office Address:**  
6940 Hibiscus Ave S  
South Pasadena, FL 33707

**Mailing Address:**  
7047 Sunset Dr S  
South Pasadena, FL 33707

**\*PHONE: (727) 343-4192 \* FAX: (727) 381-4819\***

### Dock / Tie Pole / Seawall / Rip Rap Application

**PERMIT #** \_\_\_\_\_

This permit becomes null and void after six months. An original or certified copy of the Notice of Commencement is required on all jobs and must be provided at the time of permit issuance. As a condition to the issuance of this Permit, I promise in good faith that I will immediately deliver the required Florida Construction Lien Law Statement to the persons whose property is subject to attachment.

Date \_\_\_\_\_ Valuation of Job \$ \_\_\_\_\_

Contractor Name \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Office Phone # \_\_\_\_\_ Contact Person & Phone # \_\_\_\_\_

Upland Owner \_\_\_\_\_ Phone: \_\_\_\_\_

Address, City, State, Zip \_\_\_\_\_

Upland Construction Address \_\_\_\_\_

Description of Work in Detail with Job Type \_\_\_\_\_

I certify that all foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating zoning and construction. I certify that I own the bottom lands on which construction is proposed, or that I have the right to construct upon the bottom lands.

**Warning to Owner: If you are in doubt regarding your right to construct upon the bottom lands, consult with a Real Property Attorney before signing.**

Contractor or Agent's Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Contractor or Agent's Name \_\_\_\_\_ Date \_\_\_\_\_

Application Approved by \_\_\_\_\_ Approval Date \_\_\_\_\_