



DEVELOPMENT REVIEW APPLICATION

A. General Information:

1. Type of Application:

2. Proposed Development's Name:

3. Former Development's Name:

4. Previous Project Number:

5. Pre-Application Meeting Date:

6. Property Owner:

Name or Company Name _____

Company Representative _____

Address _____

City _____ State _____ Zip _____

Phone ____ - ____ - ____ Fax ____ - ____ - ____

Email _____

7. Agent:

Name or Company Name _____

Company Representative _____

Address _____

City _____ State _____ Zip _____

Phone ____ - ____ - ____ Fax ____ - ____ - ____

Email _____

8. Contract Purchaser:

Name or Company Name _____

Company Representative _____

Address _____

City _____ State _____ Zip _____

Phone ____ - ____ - ____ Fax ____ - ____ - ____

Email _____

9. Land Planner:

Name or Company Name _____

Company Representative _____

Address _____

City _____ State _____ Zip _____

Phone ____ - ____ - ____ Fax ____ - ____ - ____

Email _____

10. Landscape Architect:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

11. Surveyor:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

12. Civil Engineer:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

13. Traffic Engineer:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

14. Architect:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

15. Attorney:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

16. Environmental Planner:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

17. Other Professional:

Name or Company Name _____
Company Representative _____
Address _____
City _____ State _____ Zip _____
Phone ____ - ____ - ____ Fax ____ - ____ - ____
Email _____

18. Parcel Control Number(s):

19. Certifications by Professionals:

Section 10.2.D.7., Article 10, Development Review Procedures, Land Development Regulations (LDR), Martin County Code (MCC) provides the following:

When reviewing an application for a development permit that is certified by a professional listed in s. 403.0877. F.S., the County shall not request additional information from the application more than three times, unless the applicant waives the limitation in writing. If the applicant believes the request for additional information is not authorized by ordinance, rules, statute, or other legal authority, the County, at the applicant's request, shall proceed to process the application for approval or denial.

This box must be checked if the applicant waives the limitations.

B. Applicant or Agent Certification:

I have read this application, and to the extent that I participated in the application, I have answered each item fully and accurately.

Applicant's signature

Date

Printed name

NOTARY ACKNOWLEDGMENT

STATE OF _____

COUNTY OF _____

I hereby certify that the foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____.

He or she

is personally known to me or has produced _____ as identification.

Notary public signature

Printed name

State of _____ at-large