



**DEVELOPMENT SERVICES DEPARTMENT**

Administration (954-797-1101)  
Planning & Zoning (954-797-1103)  
Building & Occupational Licensing (954-797-1111)  
Code Enforcement (954-797-1121)  
Engineering (954-797-1133)

**TOWN OF DAVIE** 6591 ORANGE DRIVE, DAVIE, FLORIDA 33314-3399 (954) 797-1000

**LANDSCAPE PERMIT APPLICATION**

**Permit No.** \_\_\_\_\_

**Loc ID** \_\_\_\_\_

**Folio #** \_\_\_\_\_

**Owner's Name** \_\_\_\_\_

**Phone #** \_\_\_\_\_

**Owner's Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Tenant/Lessee Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Job Address** (location where work will occur) \_\_\_\_\_

**City** \_\_\_\_\_ **County** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Legal Description** \_\_\_\_\_

**Contractor's Company Name** \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Contractor's Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Landscape Architect's Name** (if applicable) \_\_\_\_\_ **Phone #** \_\_\_\_\_

**Architect/Engineer's Address** \_\_\_\_\_

**City** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Description of Work** (please describe scope of work and objectives): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Square Footage of Job Site Area (pervious surface only)** \_\_\_\_\_ square feet

**Type of Work:**  New Installation

Renovation

**Estimated Job Value \$** \_\_\_\_\_

**Anticipated Job Start Date:** \_\_\_\_\_

**Projected Job Completion Date:** \_\_\_\_\_

Bonding Company's Name (if applicable) \_\_\_\_\_

Bonding Company's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

“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 this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.”

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws and codes regulating new landscaping installations and renovations. I further agree to post my approved permit card on the job site premises in an area that is readily visible and accessible to the Town of Davie. Upon completion of said work, I agree to call the Town of Davie Building Department of and request a final landscape inspection.

Signature \_\_\_\_\_

Owner or Agent

Signature \_\_\_\_\_

Contractor

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ As identification and who did take an oath.

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced \_\_\_\_\_ as identification and who did take an oath.

NOTARY PUBLIC:

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

My Commission Expires:

NOTARY PUBLIC:

Sign: \_\_\_\_\_

Print: \_\_\_\_\_

My Commission Expires:

\*\*\*\*\*

Permit Fee \$ \_\_\_\_\_

APPLICATION APPROVED BY: \_\_\_\_\_ Permit Official