

**PERMIT APPLICATION**

**DRIVEWAY PERMIT APPLICATION  
CONSTRUCTION WITHIN PUBLIC RIGHT-OF-WAY**

All information must be filled-in completely

**City of Zephyrhills**

5335 8<sup>th</sup> Street, Zephyrhills, FL 33542

Telephone 813.780.0000 Fax 813.780.0005

<b>Date of application:</b>	<b>Processed By:</b> (gray area for staff use only)	<b>Permit #:</b>
<input type="checkbox"/> Copy to Building Department		<input type="checkbox"/> Copy to Public Works
<b>PROJECT/JOB SITE:</b>		<b>PROPERTY OWNER</b>
Address:	Name:	
Unit #:	Address:	
Parcel Identification Number:	Unit:	
	City, State, Zip	Phone:
	Fax:	

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**CONTRACTOR:**

Company:	Name:
Name:	
Contractor's License #:	E-Mail:
Phone:	Cell:
Fax:	

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**ARCHITECT/ENGINEER:**

Name:	Firm Name:
Address:	City:
State License #:	State:
Zip:	
Phone:	
Cell:	
Fax:	

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**Description of Project**

**TYPE OF DRIVEWAY**

RESIDENTIAL DRIVEWAY  
 COMMERCIAL DRIVEWAY  
 PUBLIC ACCESS DRIVEWAY

LENGTH OF DRIVEWAY

WIDTH OF DRIVEWAY

**R.O.W.**

**EXCAVATION**

DEPTH

LINEAR FEET

**CONSTRUCTION MATERIAL**

ASPHALT  
 CONCRETE

**CURB CUT REQUIRED**

YES  NO

**CULVERTS NEEDED**

REINFORCED CONCRETE  
 CORRUGATED MATERIAL  
 BOX CULVERT  
 OTHER (EXPLAIN) \_\_\_\_\_

**HEADWALL REQUIRED?**  YES  NO

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**NOTICE TO APPLICANT:** If actual work exceeds scope of this description, additional permits or drawings will be required.

**UTILITY LOCATIONS REQUIRED: CALL BEFORE YOU DIG: 1.800.432.4770**

## PERMIT APPLICATION

**UTILITIES LOCATE CONFIRMATION NUMBER:** \_\_\_\_\_

**PROVIDE SKETCH IN THIS AREA, IF ADDITIONAL SPACE IS REQUIRED, ATTACH TO THIS APPLICATION.**

**AFFIDAVIT:** Application is hereby made to obtain a permit to do work and installations as indicated. I certify that all foregoing information is accurate and that all work will comply with all applicable codes. I understand these codes shall take precedence over all approved construction documents, and issuance of this permit is verification that I will notify the property owner of Florida Lien Law req., F.S. 713.

The issuance of this permit does not ensure compliance with deed restrictions and I understand that additional deed restrictions may apply to this property.

**All work shall comply with the current Florida Building Code, Public Works Design Manual and FDOT Design Standards (if applicable).** (Public Works Design Manual online link: [www.ci.zephyrhills.fl.us/public\\_works.asp](http://www.ci.zephyrhills.fl.us/public_works.asp))

**APPLICATION IS VOID UNLESS SIGNED WITH PROPER IDENTIFICATION AND WITNESSED BY A PERMIT TECHNICIAN OR NOTARY PUBLIC.**

**NOTE: The City of Zephyrhills is not responsible for maintenance or repairs of driveways. Driveways shall not alter / interfere with existing stormwater treatment and / or conveyance.**

**PROPERTY OWNERS:** By signing this application: I certify that I have read and understand the owner/builder disclosure statement. \_\_\_\_\_ (please initial)

\_\_\_\_\_  
Applicant Print Name

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Permit Technician Signature

\_\_\_\_\_  
(or) Notary Signature

\_\_\_\_\_  
Date

Applicant is ( ) personally known to me or produced \_\_\_\_\_ as identification.  
(type of identification)

**OFFICE USE ONLY****PUBLIC WORKS USE ONLY**

Concrete (min. 6")	Y	N
Asphalt Base (min. 6")	Y	N
Asphalt (min. 1½")	Y	N
Length (min. 19')	Y	N
Width (10' min – 20' max)	Y	N
Existing sidewalk.	Y	N
New sidewalk.	Y	N
ADA compliant.	Y	N
Expansion material required.	Y	N
Contiguous parking pad.	Y	N
Triangular flare (3'W x 7'L)	Y	N
Visibility triangle o.k.?	Y	N
Side set back (3' min. R.O.W.)	Y	N
Plan Review Fee	_____	

**Additional description of work as defined by Public Works Director and or designee:**

Permit application approved by:	Date: