



## Right-of-Way Permit

Please complete a separate application for each Road

Please provide a copy of the contract(s) with the permit application.

Date \_\_\_\_\_

\_\_\_\_\_  
Business Name/Applicant's Name ("Permittee")

\_\_\_\_\_  
Parcel Control #

\_\_\_\_\_  
Applicant's Street Address

\_\_\_\_\_  
Project Road Name

\_\_\_\_\_  
Applicant's City, State, Zip

\_\_\_\_\_  
Subdivision and/or Site Plan Name (if applicable)

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Applicant's email address

Enter Total Contract Cost: \_\_\_\_\_

\_\_\_\_\_  
Paid Date

**Check appropriate box:**

- Underground Utility       Driveway except one or two family dwelling units       Overhead Utility  
 Wireless Facility       Other Utilization

**Description of Work:**

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

\_\_\_\_\_  
Telephone Number

\_\_\_\_\_  
Qualifier

\_\_\_\_\_  
License No.

\_\_\_\_\_  
Start of Construction Date

Construction duration: \_\_\_\_\_ days

Applicant declares that he/she has determined the location of all existing underground and aerial utilities. A letter of notification was mailed on \_\_\_\_\_ to the following utilities & municipalities:

Length of Right-of-Way to be disturbed in Linear Feet \_\_\_\_\_

Length of Asphalt restored/proposed in Linear Feet \_\_\_\_\_

Length of Concrete restored/proposed in Linear Feet \_\_\_\_\_

Length of Drainage Pipe in Linear Feet \_\_\_\_\_

By submitting and signing this application, the Applicant (“Permittee”) declares that he/she has read the attached and agrees to be bound by the permit requirements and any and all general special conditions herein.

\_\_\_\_\_  
Qualifier’s Signature

**For inspections, please email [zgamble@craventhompson.com](mailto:zgamble@craventhompson.com); [ebach@greenacresfl.gov](mailto:ebach@greenacresfl.gov).**

**Submit Permit to:** Greenacres Building Division at [permitcenter@greenacresfl.gov](mailto:permitcenter@greenacresfl.gov)