

CITY OF JACKSONVILLE
CELL TOWER PERMIT APPLICATION

TODAY'S DATE _____

PERMIT # _____

PERMIT FEE _____
(\$10 per lf of tower height up to \$1,200.00 max)

STATE SURCHARGE _____

CONTRACTOR _____ STATE LICENSE NO. _____

COMPANY OWNING TOWER _____ TOWER HEIGHT _____

LOCATION OF TOWER _____ ZONING _____

PHYSICAL STREET ADDRESS _____ LOT _____ BLOCK _____

SUBDIVISION _____ FLOOD PLAIN - YES _____ NO _____

EST. COST _____ TOWER TYPE _____ NEW CONSTRUCTION _____ ATTACHED WCF _____

ELECTRICIAN _____

I HEREBY ASSUME FULL RESPONSIBILITY FOR THE PROPER PLACEMENT OF THE BUILDING ON THE PLOT PLAN/DRAWING AS SHOWN, AND FOR MEETING ALL APPLICABLE BUILDING AND FIRE CODE REQUIREMENTS.

THE CITY REQUIRES ELEVATION CERTIFICATES ON ALL PROPERTY LOCATED IN THE SPECIAL FLOOD HAZARD AREA.

A CERTIFICATE OF OCCUPANCY WILL NOT BE ISSUED UNTIL ALL INSPECTIONS HAVE BEEN PASSED AND ELEVATION CERTIFICATE IF REQUIRED IS ON FILE.

PRINT NAME

SIGNATURE

CITY WITNESS

DATE

PHONE NUMBER

ADDRESS WHERE C/O IS TO BE MAILED

CITY STATE ZIP