



CITY OF SANIBEL  
 Planning Department  
 APPLICATION FOR DEVELOPMENT PERMIT  
**BRAZILIAN PEPPER ERADICATION**  
**HEAVY EQUIPMENT IS NOT PERMITTED**

STAFF USE ONLY

APPLICATION No: \_\_\_\_\_ FILING DATE: \_\_\_\_\_ ACCEPTED BY: \_\_\_\_\_ FEE: Ø \_\_\_\_\_

**PART I. PARCEL IDENTIFICATION**

TAX STRAP NUMBER: \_\_\_\_ - 46 - \_\_\_\_ - T \_\_\_\_ - \_\_\_\_\_ . \_\_\_\_\_

STREET ADDRESS OF PROPERTY: \_\_\_\_\_

**PART II. OWNER/APPLICANT INFORMATION**

**NAME OF OWNER:** \_\_\_\_\_

Owner's Mailing Address: \_\_\_\_\_

Owner's Phone No: \_\_\_\_\_ Business \_\_\_\_\_ Fax \_\_\_\_\_

Owner's **Email** Address: \_\_\_\_\_

**NAME OF APPLICANT:** \_\_\_\_\_

Applicant's Address: \_\_\_\_\_

Applicant's Phone No: \_\_\_\_\_ Business \_\_\_\_\_ Fax \_\_\_\_\_

Applicant's **Email** Address: \_\_\_\_\_

Applicant's Interest in Property: \_\_\_\_\_

**PART III. VEGETATION CONTRACTOR INFORMATION**

**NAME OF CONTRACTOR:** \_\_\_\_\_ Contact Phone No. \_\_\_\_\_

Vegetation Competency Card # \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Contractor's Email Address: \_\_\_\_\_

**The vegetation inspection is an opportunity to promote an understanding between property owner, contractor and the vegetation inspector of the importance of preserving native vegetation and ways to accomplish preservation.**

\_\_\_\_ Check here and only complete the following if the property owner or applicant would like to be present on site with the vegetation inspection during the inspection.

Person (s) wishing to be present at time of inspection: \_\_\_\_\_

Phone number of person to contact: \_\_\_\_\_

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**PART IV. CHECKLIST OF ATTACHMENTS**

The application information and required attachments are the **minimum** necessary to determine compliance with the requirements of the Sanibel Plan and the Land Development Code (LDC). The City may require additional information, at any time during the application process, to determine compliance with these requirements.

- |       |                                    |       |                                  |
|-------|------------------------------------|-------|----------------------------------|
| _____ | DEED OR LEE COUNTY OWNER OF RECORD | _____ | OWNER'S AUTHORIZATION            |
| _____ | LOCATION MAP                       | _____ | SITE DEVELOPMENT PLAN (1' = 20') |
| _____ | VEGETATION PLAN                    |       |                                  |

\*\*\*\*\* **CERTIFICATION** \*\*\*\*\*

I hereby certify that the information contained in this application and the attachments hereto are true and correct to the best of my knowledge and belief. Furthermore, I acknowledge that the City has the right to inspect the subject property in conjunction with this development permit application. (Please advise the City of any restrictions or limitations on the inspections.)

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**SIGNATURE OF OWNER / OWNER'S AUTHORIZED REPRESENTATIVE** **DATE**