

City of Belle Isle

1600 Nela Avenue, Belle Isle, FL 32809 Tel 407-851-7730 * Fax 407-240-2222 * www.cityofbelleislefl.org

Zoning Review Application

Select Type:

	Temp Storage Pod [] Flood Plans []	Banner [] Air Balloons []
Date:	Review #	
Project Description		
Parcel ID # To obtain this information please	e visit http://www.ocpafl.org/Searches/ParcelSearch.as	рх
Property Owners Name		
Phone	Mobile	
Address of Structure		
Estimated Value of Work	Zoned	
Contractor Name	Company Name	
Phone	Fax	
Name of Active Certificate Holder	License No	
Architect Name		
Attached SurveySETS and/or Construct Inspection will be required to finalize permit. Please construct with your Deed Restrictions. I hereby acknowledge that the above is correct and true Ordinances. If a sidewalk or street is damaged, I agree to reconstruction does not violate any deed restrictions on the presentation.	all City Hall 407-851-7730. Note, this Zoning Approval Me, and agree to conform to the City of Belle Isle's Bui restore same to the pre-damaged condition. I further ac	ilding Regulations, Codes and
Signature	[] Owner [] Agent	
FOR BELLE ISLE USE ONLY Received FEE Chk# ZONING APPROVAL STAMP:	Waste Management is by legal contract the garbage, recycling, yard waste, and construction debris collection and disposs of the City. Contractors, homeowners and contact Waste Management at 407-788. Commercial, Construction Roll Off, or oth fixed by contract and are available at Management. The City enforces the	I commercial garbage and all services with the city limits d commercial businesses may 3-0800 to setup accounts for the services needed. Rates are at City Hall or from Waste

enforcement office. Failure to comply will result in a stop work order.