

COLLIER COUNTY GOVERNMENT GROWTH MANAGEMENT DIVISION/ PLANNING AND REGULATION 2800 NORTH HORSESHOE DRIVE NAPLES, FLORIDA 34104 (239) 252-2400 FAX (239) 252-6358 WWW.COLLIERGOV.NET

APPLICATION FOR INFORMAL WETLAND DETERMINATION APPLICATION

Please note this request is for **single family residential parcels which are 5.00 acres or less.** If greater than 5.00 acres, a formal wetlands determination shall be required. Please contact the Florida Department of Environmental Protection, Fort Myers SLERP Office, at 239-332-6975 for more information regarding Formal Determinations.

Date Received by Staff:	Folio #	AR #:

GENERAL INFORMATION

Following documents provided by the applicant at application:

- 1. \$300.00 Check (Non Refundable) Processing Fee Schedule: Make checks payable to: Board of Collier County Commissioners.
- 2. Proof of ownership (i.e. Warranty Deed, tax statement) **Quit Claim Deeds are not acceptable.**
- 3. Letter signed by the owner if an agent is acting on behalf of the owner.
- 4. Aerial with site location clearly marked.
- 5. A current boundary survey that has been signed, sealed and dated by a Florida registered professional land surveyor (PLS).
- 6. Addressing checklist signed by the addressing department at Growth Management (attached).
- 7. Location map and written directions of the site to be reviewed.
- 8. All four property corners must be staked and labeled with unit and tract number.
- 9. Please provide a site plan of the proposed project if available.

CONTACT INFORMATION						
PROPERTY OWNER _			STATE	71P		
		FAX #				
E-Mail Address:						
AGENT		FIRM				
ADDRESS		CITY	STATE	ZIP		
TELEPHONE #	CELL #	FAX #				
E-Mail Address:						



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To the applicant:

Please have the Florida registered professional land surveyor responsible for staking the property, sign the below "**Stake Verification**" statement.

Stake Verification

Florida registered professional land s provide an access path no wider the department staff to access for a complete	ourveyor. If the site is dense an 3 feet along the entire	ely vegetated, the surveyor mus
Licensed Surveyor (Clearly Print Name and	Sign) License #	Date property was staked
I,, af	firm that I am the owner/agei	nt of the property described in this
application, and that I understand and	will comply with the above co	nditions of this permit.
Sianature		Date

Please return application and required documentation to:

Growth Management Division/Planning and Regulation ATT: Business Center 2800 North Horseshoe Drive Naples, Florida 34104