CONSTRUCTION PLAN APPROVAL/AMENDMENT
City of Fellsmere, 22 S. Orange Street, Fellsmere, Florida 32948
Phone: 772-571-9077 Fax: 772-571-0097

Applicant Information
Company ___________________________ Phone ___________________________
Name _______________________________ Mobile ___________________________
Address ______________________________ Fax ___________________________
Email _______________________________

If Applicant is not the owner of the Property, please provide a signed authorization from the owner permitting
the application and acknowledging responsibility for all fees, fines, and property encumbrances that may be
imposed as a result of this application.

Property Information
Property Folio No. _______________________
Address _______________________________

Final Site Plan Approval: Yes _____ Pending _____ Preliminary Plat Approval: Yes _____ Pending _____
Approval Resolution# ___________ Approval Resolution# ___________

Project Description

Professional Consultants (if applicable)
Architect _______________________________ Phone ___________________________
Name _______________________________ Mobile ___________________________
Address _______________________________ Fax ___________________________
Email _______________________________

Engineer _______________________________ Phone ___________________________
Name _______________________________ Mobile ___________________________
Address _______________________________ Fax ___________________________
Email _______________________________

Traffic _______________________________ Phone ___________________________
Name _______________________________ Mobile ___________________________
Address _______________________________ Fax ___________________________
Email _______________________________

Surveyor _______________________________ Phone ___________________________
Name _______________________________ Mobile ___________________________
Address _______________________________ Fax ___________________________
Email _______________________________

Signature of Applicant ___________________________ Date ___________________________

Application Requirements
Please refer to the City of Fellsmere Development Guide and Land Development Code Sec. 15.6.
A checklist of application requirements is also available from the Community Development Department.

FOR CITY USE ONLY
Associated Site Plan/Conditional Use/Planned Development: ___________________________
Fee Due ________ Escrow Fee Due ________ Receipt # ___________ Receipt Date ___________
(circle applicable review entities) Project Name ___________________________ Project No. ___________

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Form Date 5/6/13