



Permit # _____

UTILITIES DEPARTMENT
CITY OF WINTER PARK, FLORIDA
www.cityofwinterpark.org 407/599-3233

NOTICE: Failure to provide the required informational items could result in a delay of your permit application approval.

WATER/SEWER SERVICES OUTSIDE CITY LIMITS
PERMIT APPLICATION

Date Received: _____ Job Physical Address: _____

12 digit parcel number: _____

Owner: _____ Telephone #: _____ Fax#: _____

Owner
Address: _____

Contractor: _____ Contact person: _____

Telephone #: _____ Fax#: _____ E-Mail Address: _____

Address: _____

Detailed Description of Work Proposed: _____

Engineer: _____ Contact person: _____

Telephone #: _____ Fax#: _____ E-Mail Address: _____

Address: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no utility work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and land development.

Signature: _____
Owner or Agent of Owner
(including contractor)

Signature: _____
(Contractor)

Print Name _____

Print Name: _____

Date: _____

Date: _____

Notary: _____

Notary: _____

Know Personally/ID Shown: _____

Know Personally/ID Shown: _____