



**TOWN OF INDIAN RIVER SHORES
BUILDING DEPARTMENT**

APPLICATION FOR PLAN REVIEW

APPLICANT INFORMATION:	
Applicant: _____	Contact: _____
Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	Ext: _____ Fax: _____ E-mail: _____
CONSULTANT INFORMATION:	
Engineer/Surveyor: _____	Contact: _____
Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	Ext: _____ Fax: _____ E-mail: _____
OWNER INFORMATION:	
Owner: _____	Contact: _____
Address: _____	
City: _____	State: _____ Zip: _____
Phone: _____	Ext: _____ Fax: _____ E-mail: _____
SITE INFORMATION:	
Project Name: _____	
Address/Location: _____	
Current Zoning: _____	
Total Parcel Area: _____ acres	Total Buildable Area: _____ acres
Total Wetland Area: _____ acres	(Excluding wetlands & submerged lands)
Existing Land Use of Property: <i>(check one or more)</i>	
Vacant: _____	Developed: _____ Partially Developed: _____
Undeveloped: _____	Residential: _____ Commercial: _____
Intended Land Use of Property: _____	
Are there any easements of record on the property? YES: _____ NO: _____	
If YES, describe: _____	
Source of water and sewer: _____	
<i>(Name of Utility or onsite well or septic)</i>	

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SUBDIVISION Plan Submittal (ONLY): *(check submittal type)*

Development Plan: _____ Preliminary Plat: _____ Final Engineering: _____

Final Plat: _____ Minor Plat Modification: _____

Total number of proposed lots: _____ Check one: Private Road: _____
Public Road: _____

SITE Plan Submittal (ONLY): *(check submittal type)*

Minor Site Plan Modification: _____ Preliminary Plat: _____ Final Engineering: _____

Final Plat: _____ Minor Plat Modification: _____

Building Area (Sq. Ft.)	Paved Area (Sq. Ft.)	Total Impervious (Sq. Ft.)	Green Area (Sq. Ft.)
Existing: _____	Existing: _____	Existing: _____	Existing: _____
Proposed: _____	Proposed: _____	Proposed: _____	Proposed: _____
TOTAL: _____	TOTAL: _____	TOTAL: _____	

ATTACHMENTS:

APPLICANT MUST PROVIDE THE FOLLOWING:

- _____ Verification of property ownership (Deed)
- _____ Letter of authorization if Applicant does not own property
- _____ Current Certified Survey of property
- _____ Application Fee (check made payable to Town of Indian River Shores)

CERTIFICATION:

I hereby certify that the information provided in this application is true and correct to the best of my knowledge. I understand that the application for plan review must include all required submittals as specified in the Town of Indian River Shores Land Development Code. Submission of incomplete plans may create delays in the review process and plan approval. The review fee provides for the initial review. Additional reviews will require an additional fee.

Applicant's Signature

Printed Name

Date

NOTARIZATION:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged this _____ day of _____, _____ by _____ who personally appeared before me and acknowledged that he or she signed the instrument voluntarily for the purpose expressed in it.

Signature of Notary Public

Notary Stamp