MEDIAN LANDSCAPE and IRRIGATION APPLICATION



JDE ACCT.	Billing Cycle:
PERMIT#	-
DATE:	ISSUED BY:

CONTRACTOR INFORMATION								
Contractor Business Name:			License Ho	older's Name	e:			
Mailing Address:			City Licens	e #:				
City:	State:	Zip:	State Licer	nse #:				
Phone #:	Fax #:		Contact Pe	erson:				
Alt. Phone #:			Email:					
Proposed Work:								
APPLICANT INFORMATION								
(Must be filled out even if using a contractor)								
Applicant:			Applicant's Representative:					
Address:			Address:					
City:	State:	Zip:	City:	State:	1	Zip:		
Phone #:	Fax:		Phone #:		Fax:			
Email:			Email:					
Alt. Contact Person:		Phone #:			Email			
Proposed Work:								
PROJECT INFORMATION								
Landscape area type: Median 🗌 Cul-de-sac Island 🔲 Round-about Island 🔲								
Area location: Median # Area in sq.ft.: Strap #:								
Intersecting roadways at either end of area:								
P.W. Planning Manager Appr	oval:							
Comments:								

- 1. Applicant(s) information must be provided and application signed by applicant. Contractor information and signature must also be provided if a contractor will be performing work.
- 2. Application must be notarized for applicant and contractor as applicable (can be notarized separately).
- 3. A Median and/or Cul-de-Sac Landscape Term Sheet, including project cost/evaluation must be provided by the applicant or their contractor. This shall include all costs for materials and improvements proposed by the applicant that will be installed within the median and/or cul-de-sac.
- 4. A plan that includes (but not limited to) sizes, types, quantities, locations of trees, shrubs, ground cover, irrigation components and mulch. Plan shall also include all existing landscaping or irrigation. Any existing items to be removed shall be identified as such. Identify provisions for irrigation of the proposed landscaping.
- 5. Permit Fees for landscaping and right of way shall apply. <u>Note</u>: A separate permit will be required for installation of all irrigation systems, these will require additional fees.
- 6. A Traffic Control Plan (Maintenance of Traffic) shall be required for all work within the City's right of ways. Traffic Control Plans shall be reviewed on a case by case basis to determine the level of Traffic Control that may be required.

APPLICANT'S AFFIDAVIT:

Application is hereby made to obtain a permit to do landscape installation/maintenance which may include irrigation, as indicated above. I certify that all the foregoing information is true and accurate and that no work or installation has commenced prior to the issuance of a permit. I certify that all work will to be performed will comply with the City of Cape Coral Land Use and Development Regulations, Section 3.14, 3.24, 3.25, 5.2 and 5.3. furthermore all work and/or improvements shall bi in compliance with the City of Cape Coral Public Work's Department's median landscape design themes. densities as well as the PW design templates. By signing this application, if applicable, I agree to use the Irrigation Service from the City of Cape Coral Public Works Utility Division in accordance with the City of Cape Coral Ordinances, Regulations and Recommendations (Ord, 77-97, 11/27/07). I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, IRRIGATION, etc.

Name (PRINT ONLY)	SIGNATURE OF APPLICANT
Name (FRINT ONLT)	SIGNATURE OF APPLICANT
day of, 20,	e. Subscribed and sworn to (or affirmed) before me thiswho is personally
known to me or produced	as identification.
Date	Signature of Notary Public
Commission Number	Printed Name of Notary Public
	CONTRACTOR'S AFFIDAVIT:
sponsibility for compliance with the cusing themes, templates and densities oplication, including but not limited to A	on specified in this application. I acknowledge and accept irrent Florida Building Code, City regulations, and ordinances, CI i, as well as the payment of all legally constituted fees regarding ALL REVIEW FEES and PERMIT FEES. I understand that a
esponsibility for compliance with the cuesign themes, templates and densities oplication, including but not limited to A	rrent Florida Building Code, City regulations, and ordinances, CI, as well as the payment of all legally constituted fees regarding ALL REVIEW FEES and PERMIT FEES. I understand that a ECTRICAL WORK, PLUMBING, SIGNS, WELLS, IRRIGATION,
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Scope of Improvements to be installed by Applicant/Contractor:	
Proposed phasing of Improvements (duration between phases of more than 18	80 days will be
considered a separate project and will require a new permit):	•
Estimated Value of Improvements:	
Cianatura of Applicant	
Signature of Applicant:	
	Date
Signature of Contractor (if applicable):	
	Date
	Dute
FOR OFFICE USE ONLY	
Scope of Improvements to be provided by City:	
- · · · · · · · · · · · · · · · · · · ·	
Estimated value of City Contribution (If Applicable):	
Signature of Reviewer:	
Signature of Reviewer:	
	Date