

**INDIAN RIVER COUNTY
LAND CLEARING APPLICATION**

Date Application Received: _____

PROJECT NUMBER ASSIGNED: _____

GENERAL INFORMATION

1. **Applicant/Agent Name:** _____
Address: _____

Phone: _____

2. **Location where the proposed activity will occur:**
Tax Parcel I.D. #: _____
Street Address: _____
U.S. Census Tract & Block: _____

3. **Reason(s) for clearing [check appropriate reason(s)]:**

_____ The land clearing or grubbing is necessary in order to make site improvements authorized by an approved site plan, subdivision approval, or land development permit and the area to be cleared is the minimum necessary for such work.

_____ In the event the aforementioned approvals are not required bylaw, the proposed clearing is the necessary for the proposed use or improvement.

Specify proposed use: _____

4. **Erosion Control Plan:**

Please describe briefly the method(s) to be used in controlling erosion that may be expected to occur as a result of the proposed clearing or grubbing.

5. **Person or Company to be responsible for land clearing:**

Name: _____
Address: _____
Phone: _____

6. **Method of debris disposal (check appropriate method):**

_____ Debris to be removed to an approved disposal facility.

_____ Debris to be burned with an air curtain incinerator in accordance with Indian River Environmental Health Department permit.

7. **Date the clearing is proposed to begin** _____
Date the clearing is proposed to be complete _____

ACCOMPANIED BY A STATEMENT BY THAT PERSON DESIGNATING THE AGENT AND AGREEING TO FURNISH UPON REQUEST, SUPPLEMENT INFORMATION IN SUPPORT OF THE APPLICATION.

I, the undersigned, do hereby certify that I am familiar with Chapter 927 (Tree Protection and Land Clearing) of the Land Development Regulations of Indian River County and that the information contained within this application, to the best of my knowledge and belief, is true complete and accurate. I agree to provide any additional information/data that may be necessary to fully process this application. I also agree to provide entry to the project site for inspectors from the Indian River County Planning and Development Division of an authorized agent for Indian River County Planning and Development Division for the purposed of allowing preliminary analysis of the site and for any subsequent monitoring of the project as may be required. I further certify that I possess the authority to undertake the proposed activities.

Signature of Applicant

Date

The permit-filing fee must be attached. Please remit checks or money order only - payable to **Indian River County**.

The following information is required for application completeness. Please check that the attachments are submitted to ensure prompt processing of your application.

- _____ **Location Map**
- _____ **Tree Survey and/or Aerial**
- _____ **Deed of Ownership**

OFFICE USE

Application Complete

Date

Initials