

## City of Minneola Planning Department

800 N Highway 27, Minneola, FL 34715 (352) 394 – 3598 x172

### **Construction Plan Application**

This Checklist is based on the relevant provisions of Chapter 126 – Subdivisions and Plats - of the Minneola, FL Code of Ordinances. The Code is available online at www.municode.com.

#### **General Requirements**

Be advised that no site clearing activity, other than the minimum necessary for surveying purposes, may be initiated until the improvement plans are approved AND a tree cutting permit has been issued.

All plans and specifications must be signed and sealed by a Florida registered surveyor, landscape architect or engineer, as appropriate for the document.

Construction plans expire within 12 months after approval.

The DRC has final authority for approval of construction plans.

#### **Construction Plans Submittal:**

Submit 6 copies construction plans at a scale of 100 feet to 1 inch on 24" by 36" sheets PLUS 2 copy of the plans reduced to no greater than 11" by 17".

Transmit to:

City of Minneola Planning Department 800 N Highway 27 Minneola, FL 34715 (352) 394 – 3598 x172

## Checklist

Rec'd	Requirement
	A cover sheet including a location map @ 1000 scale
	Construction Plan Application Fee - \$1,000 Applicant will also be responsible for paying the City's Engineering Consultant's Review Fee prior to issuance of approved plans.
	Name and address of the property owner and consultants
	Proposed on-site and off-site roadway improvement, common areas, drainage areas, conservation areas
	Topography in NGVD contours at 1 foot intervals
	All existing buildings, road improvements, utilities and easements
	Existing utility sources, distribution and collection lines; proposed locations of sidewalks and bike paths both on-site and off-site
	All easements pursuant to the requirements of Chapter 98 of this Code
	Delineation of the FIRM flood zones
	Proposed stormwater management facilities and a grading plan
	Complete plans and details of the water and sewer systems and improvements
	Plan and profile sheets of the rights-of-way and any unique conditions
	Typical roadway cross-sections
	Construction details and minimum standards for materials used
	Traffic control devices and pavement markings
	Soils analysis including the locations and results of the borings
	Proposed erosion control facilities
	IF man-made waterways will be proposed – include bulkhead locations; detailed cross-sections showing existing and proposed depths; location of hardpan or muck or other unique soil conditions; details of bulkhead construction
	A CD in PDF Format which includes ALL the application package text and graphics

#### **CERTIFICATION**

Owner/Authorized Applicant Signature	Date	
complete by the Department prior to the agenda dea		
described therein. I further understand that only	application packages that have	been determined
I, the undersigned, do hereby certify that I have re	ead this Checklist and understand	the requirement

POST OFFICE BOX 678, MINNEOLA, FLORIDA 34755 ♦ (352) 394-3598 ♦ FAX (352) 394-7201

General Location and/or Street Address:					
Alternate Key Number:					
Project Area:	# of Units:	Density:	Zoning:		
Typical Lot Size:	# of Phases:				
# Lots & Acres by Phase:					
# Acres of Recreation Area:			# Acres of Wetlands:		
# Acres of Roads & R/W:			Public or Private Streets:		
Has this site been subject to the type of action and date		ent permit action in the	e last two years? If Yes, provide		
Attach a copy of the Propert					
Applicant Address:					
Applicant Phone #		Fax # and/or E-M	ail:		
Owner Name					
Owner Address					
		Fax and/or E-mai	Fax and/or E-mail:		
Person to be contacted rega	rding questions about	this application, (engin	eer, architect, attorney, etc.):		
Contact Name:					
Contact Address:					
Phone #:	Fax #:	E	-mail:		

#### Certification

I, the undersigned, do hereby certify that I have read the application and the relevant guidance material and understand the requirements described therein and that I will fully comply with all City, State and Federal regulations applicable to this project.

I understand that the application fee is non-refundable.

I further understand that I am responsible to reimburse the City for the actual advertising costs, mailing costs, AND the actual consultants' review fees, if any. Said fees shall be paid within 30 days of receipt of the City's invoice or further processing of the application will cease until the invoice is paid in full.

I understand that only application packages that are determined complete by the Department will be scheduled for review.

		Applicant Signature	
		Date	
Office Use:			
Applicant Name:			
Application For:			
Amount:	Check:		
Amount:			
Rec'd by:	Date:	Receipt #:	

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### Owner's Authorization

(required if the property owner is not the applicant)

STATE OF FLORIDA COUNTY OF LAKE

Befo	re me, the undersigned au	uthority, personally appe	eared	
who	is being by me first duly s	worn on oath, deposes a	and says:	
1.	That he/she is the pro	at he/she is the property owner of the subject parcels in this application.		
2.	That he/she desires to	apply for a Subdivision	Construction Plans	s on land generally located at:
3.	That he/she has appoi to act as agent in his/h	nted ner behalf to accomplish	the above.	
			Owner's Signatu	ure
This i	is to certify that on		, 20	_before me,
appe	fficer duly authorized to ta areduced uced	he/sh	e is personally kno	
	SEAL		, , ,	
				Signature of Acknowledge
				Acknowledger Name
Seria	l Number			My Commission Expires

### **NPDES Stormwater Certification Statement**

Project Name:	
	on and Sediment Control (ESC) procedures will be implemented by the project initiation through project completion.
•	ment Practices (BMPS) will be implemented to ensure proper control o imit the exposure of general project litter and hazardous materials to
	Project Owner Information
Project Owner Name:	
Owner Address:	
Phone #:	Fax and/or E-mail:
Signature	 Date
	Project Contractor Information
Project Contractor Name:	
Contractor Address:	
Phone #:	Fax and/or E-mail:
Signature	Date