

9805 Overseas Hwy, Marathon, FL 33050 Phone (305) 743-0033 www.ci.marathon.fl.us

Application for Building Permit Allocation System Application Fee: \$600.00 (Fee Waived for Affordable)

Once this application is accepted, revisions to your plans that would change your assigned points will require withdrawal and submittal of a new Building Permit Allocation application.

Applicant Name:	
Mailing Address:	
Phone Number:	Phone (Alt):
Email:	
Agent Name:	
Mailing Address:	
Phone Number:	Phone (Alt):
Email: *Property owner must submit a notari	zed letter authorizing the agent to act on his/her behalf.
Property Owner Name:	
Mailing Address:	
Phone Number:	Phone (Alt):
Email:	
Legal Description of Property:	
Key:	Mile Marker:
RE Number:	
If in metes and bounds, attach a legal descrip	tion on separate sheet.

Check Yes or No. If yes, then attach the requested documents:

	The project is combining contiguous lots in a legally platted subdivision with water, electricity, and paved roads or is otherwise below density. Please attach a copy of a proposed restrictive
Yes	covenant limiting the number of units on the property and running in favor of and enforceable by the City.

Yes	No	The unit(s) will be affordable housing: Recorded Deed Restriction(s) must be submitted prior to issuance of allocation (s) Must Check One 50 year Deed Restriction or Deed Restriction in perpetuity Attachment required if application is based on the issuance of Transferable Building Right(s) for the above named property is the TBR award letter. Application as OWNER or AGENT
U Yes	No	The proposal includes a dedication of vacant, buildable land located in areas proposed for acquisition. Attachments required with this application are: 1) letter from the Biologist stating the property is dedicateable, 2) proof of ownership, 3) proposed WARRANTY DEED(S) (Quit Claim Deeds will not be accepted).
U Yes	No	Local Residency (Attachments required for proof of minimum 2 years continuous residency or employment within the City of Marathon prior to Application)

Is this a BPAS/ROGO re-entry application? Yes No If yes, please indicate the following:

BPAS/ROGO # Entry Date and Number of Perseverance Points

I certify 1) I have read and examined this application including attachments and know the same to be true and correct, 2) All provisions of laws and ordinances governing this type of work are complied with whether specified herein or not, including the provision of Local, State, or Federal requirement regulating construction or the performance of construction and 3) Time periods for City action set forth in Section 6-52 of the City Code are hereby waived.

Name (Please Print)

Signature Date NOTARY STATE OF FLORIDA, COUNTY OF MONROE The foregoing instrument was acknowledged before me on this _____ day of _____ , 20 , by ____ who is personally known or who produced for identification. Signature of Notary Public - State of Florida My commission Expires: To Be Completed By Staff CBPAS# Received By Date Time

CITY OF MARATHON PLANNING DEPARTMENT