

PET WASTE DISPENSER PERMIT

Permit Type: ☒ Other ROW_PET_STAT

Master Permit#:

Sub-Permit#:

Application Date:

1	Job Address:	Unit:	City: Fort Lauderdale
	Subdivision:	Lot:	Block: Building#:
	Building Use:	Construction Type:	Occupancy Group:
	Present Use:	Proposed Used:	
	Description of Work: Installation of Approved Design Pet Waste Bag Supply Station in City ROW		
☐ Single Family ☐ Duplex/Two-Family ☐ Multi-Family ☐ Condominium ☐ Commercial ☐ Other			
Legal Description: ☐ Attachment			
2	Property Owner:		Phone:
	Owner's Address:		Email:
	City: _____ State: _____ Zip: _____		
	Fee Simple Titleholder's Name (if other than owner): _____		
Fee Simple Titleholder's Address:		City: _____ State: _____ Zip: _____	

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

NOTE TO OWNER: Your signature below authorizes the City of Fort Lauderdale to remove the device from City Right-of-Way at its discretion.

Refer to: [Pet Waste Dispenser Instructions](#)

X _____
Signature of Property Owner or Agent

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

(Type / Print Property Owner or Agent Name)

NOTARY'S SIGNATURE as to Owner or Agent's Signature

Notary Name _____
(Print, Type or Stamp Notary's Name)

Personally Known ☐ or Produced Identification ☐

Type of Identification Produced _____