

Department of Planning & Zoning Zoning Plans Processing Section Permitting and Inspection Center 11805 SW 26 Street Miami, FL 33175

## **Zoning Plans Processing Plan Review Submittal Checklist**

## **RESIDENTIAL ACCESSORY STRUCTURES**

| Property Folio Number: |        |
|------------------------|--------|
| Project Address:       |        |
| Contact Person:        | Phone: |

## **Instructions for using this form:**

- 1. This form gives a general list of items required for approval of a Building Permit by Zoning Plans Processing. Please be aware this is a general list; not all items apply to all projects.
- 2. Items have been listed under a broad category with various more specific required items listed under those categories. Please check the boxes for those general headings that apply for your project, and then check off the items you have provided.
- 3. Those items in **BOLD PRINT** are ABSOLUTELY REQUIRED. All other items are required if applicable as stated.

## **PERMIT APPLICATION TYPES:**

| FE | NCE (CBS wall – wood – chain link):  |  |
|----|--|--|
|    | Site plan and/or survey  |  |
|    | Fence Details (including overall height)   |  |
|    | Fence Location on site plan/survey (indicated with "X"s in ink)                              |  |
|    | Release from Water Control Section of DERM (if within canal easement)                        |  |
|    | Sunshine Network Ticket number (if encroaching a utility easement)                           |  |
| SW | /IMMING POOLS:   |  |
|    | Site plan and/or survey  |  |
|    | Setbacks on site plan/survey   |  |
|    | Release letters from all utility companies (if deck/pool encroaches into a utility easement) |  |
| DE | TACHED ACCESSORY BUILDINGS (shed – cabana - etc):  |  |
|    | Site plan and/or survey  |  |
|    | Setbacks on site plan/survey   |  |
|    | Floor plan   |  |
|    | Release letters from all utility companies (if structure encroaches into a utility easement) |  |

I have reviewed the plans and materials being submitted and hereby affirm that all the items checked off on this list are accurate and have been provided.

Owner/Agent\_\_\_\_\_

Date:\_\_\_\_\_