

Class I Permit Application

FOR DEPARTMENTAL USE ONLY						
Date Received:	FUR DEPART	WENTAL USE	ONLY			
		Application 1	Fee:			
Application Number:						
Application must be filled out in its entirety. Please indicate N/A for non-applicable fields.						
1. Applicant Information: Name: Address:		Agent is allowed the application of the Agent is allowed. Name:	Applicant's Authorized Permit Agent: Agent is allowed to process the application, furnish supplemental information relating to the application and bind the applicant to all requirements of the application. Name:			
Zip Code:			Address:			
Phone #: Fax#:			Zip Code:			
Email:						
The should be the appreciate and minor the connect pu		Eman.				
3. Location where proposed activity exist Folio #: Street Address:		_				
In City or Town:			Town:			
Name of waterway at location of the activ	ity:					
4. Describe the proposed activity (check	all that apply):					
□ Seawall □ Dock(s) □ Boatlift □ Dredging □ Mangrove Trimmin □ New/Replacement Seawall □ Pier(s) □ Mooring Piles □ Maintenance □ Mangrove Removal □ Seawall Cap □ Viewing Platform □ Fender Piles □ New □ Batter Piles □ Davits □ Filling □ King Piles □ Footer/Toe Wall □ Riprap				☐ Mangrove Trimming☐ Mangrove Removal		
☐ Other:						
Estimated project cost =						
Are you seeking an after-the-fact approval (ATF)? \[\text{ \subset} \text{ Yes \text{ \subset} \text{ No If "Yes", describe the ATF work: \text{ \text{ \text{ \left}}} \]						
5. Proposed Use (check all that apply):	6 If the proposed w	ork relates to the mo	oring of vessels provide	the following information		
		e if the applicant does		the following information		
☐ Single Family ☐ Multi-Family	Proposed Vessel Type (s):					
☐ Private	Vessel Make/Model					
☐ Public ☐ Commercial						
☐ Industrial				eet.):		
☐ Utility	Total Number of Slip	os:				
7. List all permits or certifications that have been applied for or obtained for the above referenced work:						
Issuing Agency Type of Ap	proval Identif	ication Number	Application Date	Approval Date		

8. Contractor Information (If known):						
Name:	License # (County/State):					
Address:	Zi _l	code:				
Phone #: Fax #:	E-mail:					
9. <u>IMPORTANT NOTICE TO APPLICANTS</u> : The written consent of the property owner is required for all applications to be considered complete. Your application WILL NOT BE PROCESSED unless the Applicant and Owner Consent portion of the application is completed below. You have the obligation to apprise the Department of any changes to information provided in this application. Application is hereby made for a Miami-Dade County Class I permit to authorize the activities described herein. I agree to or affirm the						
 I possess the authority to authorize the proposed activities at the subject property, and I am familiar with the information, data and plans contained in this application, and To the best of my knowledge and belief, the information, data and plans submitted are true, complete and accurate, and I will provide any additional information, evidence or data necessary to provide reasonable assurance that the proposed project will comply with the applicable State and County water quality standards both during construction and after the project is completed, and I am authorizing the permit agent listed in Section 2 of this application to process the application, furnish supplemental information relating to this application and bind the applicant to all requirements of this application, and I agree to provide access and allow entry to the project site to inspectors and authorized representatives of Miami-Dade County for the purpose of making the preliminary analyses of the site and to monitor permitted activities and adherence to all permit conditions. A. IF APPLICANT IS AN INDIVIDUAL Signature of Applicant Print Applicant's Name Date Date						
(Examples: Corporation, Partnership						
Print Name of Applicant (Enter the complete name	e as registered) Type (Corp, LLC, LLP	, etc.) State of Registration	n/Incorporation			
Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Applicant, to bind the Applicant, and if so required to authorize the issuance of a bond on behalf of the Applicant. (If asked, you must provide proof of such authority to the Department). ***Please Note: If additional signatures are required, pursuant to your governing documents, operating agreements, or other applicable agreements or laws, you must attach additional signature pages. *** Signature of Authorized Representative Print Authorized Representative's Name Title Date C. IF APPLICANT IS A JOINT VENTURE Each party must sign below(If more than two members, list on attached page) Print Name of Applicant (Enter the complete name as registered) Type (Corp, LLC, LLP, etc.) State of						
Registration/Incorporation	Tura (Comp.)	(I.C.I.I.D. etc.) State of				
Print Name of Applicant (Enter the complete name Registration/Incorporation	as registered) Type (Corp., I	LLC, LLP, etc.) State of				
Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Applicant, to bind the Applicant, and if so required to authorize the issuance of a bond on behalf of the Applicant. (If asked, you must provide proof of such authority to the Department). ***Please Note: If additional signatures are required, pursuant to your governing documents, operating agreements, or other applicable agreements or laws, you must attach additional signature pages. ***						
Signature of Authorized Representative	Print Authorized Representative's Name	Title	Date			
Signature of Authorized Representative	Print Authorized Representative's Name	Title	Date			

10. WRITTEN CONSENT OF THE PROPERTY OWNER OF THE AREA OF THE PROPOSED WORK						
I/We are the fee simple owner(s) of the real property	Miami-Dade County,					
Florida, otherwise identified in the public records of Miami-Dade County as Folio Nos I						
and familiar with the contents of this application for	a Miami-Dade County Class I Permi	it to perform the work on or adjacent to the subject				
property, as described in Section 4 of this application. I possess the riparian rights to the area of the proposed work (if applicable) and						
hereby consent to the work identified in this Class I	Permit application.					
A. IF THE OWNER(S) IS AN INDIVIDUAL						
Signature of Owner	Print Owner's Name	Date				
Signature of Owner	Print Owner's Name	Date				
B. IF THE OWNER IS OTHER THAN AN INDIVIDUAL OR NATURAL PERSON (Examples: Corporation, Partnership, Joint Venture, Trust, LLC, LLP, etc.) Print Name of Owner (Enter the complete name as registered) Type (Corp, LLC, LLP, etc.) State of Registration/Incorporation						
Address of Owner						
Under the penalty of perjury, I certify that I have the authority to sign this application on behalf of the Owner, to bind the Owner, and if so required to authorize the issuance of a bond on behalf of the Owner. (If asked, you must provide proof of such authority to the Department). ***Please Note: If additional signatures are required, pursuant to your governing documents, operating agreements, or other applicable agreements or laws, you must attach additional signature pages. ***						
Signature of Authorized Representative Print Authoriz	ed Representative's Name Title	Date				
Signature of Authorized Representative Print Authorized	ed Representative's Name Title	Date				
11. Professional Engineer Information (required field):						
Name:	License # ((County/State):				
Company						
Address:		_Zip code:				
Phone #: E-mail:						

ENGINEER LETTER OF CERTIFICATION

Note: Please insert applicable information

[LETTERHEAD FOR ENGINEERING FIRM]

[Date]

Miami-Dade County Department of Regulatory and Economic Resources Coastal Resources Section 701 NW 1st Court, Suite 600 Miami, Florida 33136

RE: Class I Short/Standard Form Permit Application Number	
	(insert
description of proposed work)	,

Ladies and Gentlemen:

This letter will certify that I am an engineer licensed in the State of Florida, qualified by education and experience in the area of engineering design and inspection, and that to the best of my knowledge and belief, the proposed work does not violate any laws, rules or regulations of the State of Florida or any provision of the Code of Miami Dade County which may be applicable, that diligence and recognized standard practices of the engineering profession have been exercised in the engineer's design of the proposed work, and in my opinion based upon my knowledge and belief, the following will not occur:

- a. Harmful obstruction or undesirable alteration of the natural flow of the water within the area of the proposed work.
- b. Harmful or increased erosion, shoaling of channels or stagnant areas of water. (Not applicable to class IV permits)
- c. Material injury to adjacent property.
- d. Adverse environmental impacts from changes in water quality or quantity. (Applicable to class IV permits only)

Further, I have been retained by the applicant to provide inspections throughout the construction period and to prepare a set of reproducible record prints of drawings showing changes made during the construction process based upon the marked-up prints, certified surveys, drawings, and other data furnished by the contractor to me.

Sincerely,

[SIGNATURE]

[Print Name, P.E.]

[P.E. #]