



Form "A"
City of Clewiston
Application for Development/Building
Authorization

(Complete applicable sections only)

APPLICANT: _____ DATE: _____

ADDRESS: _____ TELEPHONE: _____

AGENT OF APPLICANT (IF ANY) _____

ADDRESS _____ TELEPHONE: _____

LOCATION (AND NAME) OF PROPERTY TO BE DEVELOPED _____

TYPE OF DEVELOPMENT (Please Check) APPLICATION FEE: \$ _____

// Single-Family Dwelling or Duplex	// Multifamily Dwellings
// Subdivision or PUD	// Commercial
// Development of Regional Impact	// Industrial

LEGAL PROPERTY DESCRIPTION (Write in or attach to this form)

EXISTING LAND USE AND ZONING DISTRICT IS _____

ZONING CHANGE REQUESTED IS (if applicable) _____

LICENSED ARCHITECT/GENERAL CONTRACTOR/ENGINEER/AGENT (as applicable)

SIGNATURE: _____ TELEPHONE: _____