



# ZONING PERMIT APPLICATION

201 Central Ave, West, P.O Box 1320, Lake Wales, FL 33859-1320  
Phone: (863) 676-5112 – Email [planning@lakewalesfl.gov](mailto:planning@lakewalesfl.gov)

Permit #: \_\_\_\_\_

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

Site Address: \_\_\_\_\_ Parcel #: \_\_\_\_\_

Application is hereby made to obtain a permit to do work and installations as indicated. I certify no work or installation has commenced prior to the issuance of a permit and all work will be performed to meet the standards of laws regulating construction in this jurisdiction. I understand a separate permit must be secured for any additional work not described on this application.

## TYPE OF PERMIT: (✓ all that apply)

- Fence                       Landscaping/Irrigation                       Driveway/Parking Lot  
 Tree Removal                       Dumpster Enclosure                       Misc./Other

## DESCRIPTION OF WORK:

\_\_\_\_\_  
\_\_\_\_\_

## Accompanying Material Required:

1. Completed Application
2. Site Plan – showing location of work being completed
3. Authorization statement for agent on company letterhead or notarized

## OWNER INFORMATION

Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip

Email: \_\_\_\_\_

All contractors must be registered with the City of Lake Wales. CURRENT licenses and proof of General Liability and Workers' Compensation or Work Comp Exemption must be on file at the time of permit issuance.

## If applicable, CONTRACTOR INFORMATION

Contractor/Business Name: \_\_\_\_\_

Business Address: \_\_\_\_\_  
Street City State Zip

Office/Cell Phone: \_\_\_\_\_ Email: \_\_\_\_\_

\_\_\_\_\_  
Print Owner Name and/or Contractor (if applicable)

\_\_\_\_\_  
Approved by Planning and Zoning

\_\_\_\_\_  
Signature of Owner and/or Contractor (if applicable)

\_\_\_\_\_  
Approved by Public Works

After work is completed, please contact Planning at (863) 676-5112 or via email at [planning@lakewalesfl.gov](mailto:planning@lakewalesfl.gov) for final inspection.