



EMERGENCY CCCL PERMIT APPLICATION

(Application processed pursuant to Rule 62B-33.014, F.A.C.)

1. Owner of Record		Agent (if applicable)	
Typed or Printed Name:		Typed or Printed Name and Company:	
Mailing Address:		Mailing Address:	
City/State/Zip Code:		City/State/Zip Code:	
Telephone (include area code):	Fax (include area code):	Telephone (include area code):	Fax (include area code):
E-mail Address:		E-mail Address:	
Property Address:	County:	Community/Town:	

2. I hereby certify that I am either: (1a) the owner of the subject property or (1b) I have the owner's consent to secure this permit on the owner's behalf; and that (2) I shall obtain any applicable licenses or permits which may be required by federal, state, county, or municipal law prior to commencement of the authorized work; (3) I acknowledge that the authorized work is what I requested; and (4) I accept responsibility for compliance with all permit conditions.

Signature of Owner	Date	Signature of Agent (if applicable, include title of officer and name of corporation or other business entity)	Date

3. A brief description of the proposed emergency work, activity, or construction.

Check here if additional Information is attached.

EMERGENCY CCCL PERMIT APPLICATION CHECKLIST: Some of the information requirements listed below may be deferred if the delay necessary to gather and submit the information will compound the emergency.		Attached or Included	Deferred
4.	Sufficient evidence of ownership and legal description of the property [paragraph 62B-33.008(3)(c), F.A.C.].	<input type="checkbox"/>	
5.	Written evidence, provided by the appropriate local governmental agency having jurisdiction over the activity, that the proposed activity, as submitted to the Bureau, does not contravene local setback requirements or zoning codes [paragraph 62B-33.008(3)(d), F.A.C.].	<input type="checkbox"/>	
6.	Two original copies of the most recent signed and sealed survey of the subject property.	<input type="checkbox"/>	<input type="checkbox"/>
7.	Two copies of a dimensioned detailed site plan.	<input type="checkbox"/>	<input type="checkbox"/>
8.	Two copies of a dimensioned detailed grading plan.	<input type="checkbox"/>	<input type="checkbox"/>
9.	Two copies of cross-sections.	<input type="checkbox"/>	<input type="checkbox"/>
10.	An anticipated construction schedule.	<input type="checkbox"/>	<input type="checkbox"/>
11.	The permit number or a copy of previous Department CCCL permit for work on the property, if any.	<input type="checkbox"/>	<input type="checkbox"/>
12.	Photograph or other supporting documents.	<input type="checkbox"/>	<input type="checkbox"/>
13.	For coastal protection structures, the year the dwelling was constructed.	<input type="checkbox"/>	<input type="checkbox"/>

Mail To:
 Bureau of Beaches and Coastal Systems
 Division of Water Resource Management
 Florida Department of Environmental Protection
 3900 Commonwealth Boulevard, Mail Station 300
 Tallahassee, Florida 32399-3000

OR

Overnight or Hand deliver to:
 Bureau of Beaches and Coastal Systems
 Division of Water Resource Management
 Florida Department of Environmental Protection
 5050 West Tennessee Street, Building B
 Tallahassee, Florida 32304

Agency Use Only: EMERGENCY PERMIT # _____