

Online Contractor ID # \_\_\_\_\_

**CITY OF PORT ST LUCIE  
PUBLIC WORKS DEPARTMENT  
Construction Permit Application**



Revised July, 2017

- Clearing
- Mass Grading
- Site Work

Project Name (include Phase if applicable):

City Project Number (P#):

Project Street Address or Location:

**Contractor Company**

**Contractor Contact**

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

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

Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

\_\_\_\_\_

Cell Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

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

***This permit includes driveway connection(s) and work within the adjacent City owned road right-of-way shown on the approved construction plan.***

**Engineer of Record and Contractor Acknowledgement of NPDES/Permitting Requirements**

NPDES Program Manager - Dale Majewski 772/ 344-4128 (772/ 344-4222 for deaf and hearing impaired)

- < 1 Acre disturbed
- > 1 Acre disturbed, provide a copy of the FDEP NOI
- > 1 Acre dsiburbed, provide SWPPP
- Provide a copy of the SFWMD Permit/Modification (if applicable)
- Provide a copy of the 10/2 Permit Self Certification (if applicable)

**Contractor Acknowledgement - Protection of Endangered, Threatened, or Listed Species**

*By signing this permit, the Contractor certifies that he has and will comply with City, State and Federal requirements for the protection or relocation of endangered, threatened or listed species.*

Signature: \_\_\_\_\_

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

Print Name: \_\_\_\_\_

**This section to be completed by the Public Works Department**

Date Issued:

Issued By:

Preconstruction Meeting Date/Time:

Reviewed and Approved By: