SITE IMPROVEMENTS PERMIT APPLICATION
($200,000 & UNDER)

LOCATION:_____ DATE:_____

TENANT:_____ PHONE:_____EMAIL_____

APPLICANT: _____ PHONE:_____EMAIL_____

REPRESENTATIVE:_____ ADDRESS_____

Description of site improvements to be installed or modified (Attach 2 sets of drawings signed and sealed by a Florida Professional Engineer and/or Architect.)

_____

_____

Reason Improvements are Necessary

Estimated Start Date:_____Estimated. Completion Date:_____Estimated Cost_____

Estimated Number of Jobs Created: _____

Work to be performed by: (Name of Contractor or Firm_____

ADDRESS:_____ PHONE:_____EMAIL_____

Are TPA easements needed? (Explain)_____

WORK COORDINATED WITH THE FOLLOWING (May be by letter)

Adjacent facility owners or lessees:

1)_____2)_____

U.S. COAST GUARD_____ FIRE MARSHALL_____

REMARKS:_____

Applicant hereby certifies above information to be correct to the best of his knowledge and that all other required permits have been obtained.

DATE:_____ APPLICANT'S REPRESENTATIVE (signature):_____

FOLLOWING TO BE COMPLETED BY TPA STAFF

APPROVED BY:

_____ Date _____
VP Operations, Sal Kass

_____ Date _____
Environmental Director, Chris Cooley

_____ Date _____
VP Real Estate, Lane Ramsfield

_____ Date _____
VP Engineering, Bruce Laurion

_____ Date _____
Facilities Director, Norberto Sanchez

_____ Date _____
VP Security, Mark Dubina

_____ Date _____
CFO, Mike Macaluso

_____ Date _____
VP Legal Affairs, Donna Wysong

PLEASE SEE REVERSE SIDE FOR SPECIAL CONDITIONS.

PORT TAMPA BAY

SITE IMPROVEMENTS PERMIT NUMBER

SPECIAL CONDITIONS

THIS PERMIT IS APPROVED SUBJECT TO THE FOLLOWING SPECIAL CONDITIONS:

1. TPA may stop work if deemed necessary.
2. Prior to start of work, provide TPA copies of all other regulatory permits.
3. Prior to start of work, provide a copy of Contractor's Certificate of Insurance showing coverage meeting Permit Policy Attachment A (copy attached).
4. The area to be improved will be kept cleaned and the applicant is to be responsible for making repair of any damages caused by them to other facilities.
5. Comply with all laws, codes, ordinances, etc.
6. This permit does not change or modify any leasehold conditions.

REQUIREMENTS FOR PERMIT CLOSE-OUT

PERMITTEE MUST NOTIFY PORT ENGINEER WITHIN SEVEN (7) DAYS OF COMPLETING WORK TO SCHEDULE FINAL INSPECTION.
AS A PRE-CONDITION TO CLOSE OUT OF THE PERMIT, APPLICANT MUST PROVIDE THE PORT WITH:

1. One set of as-built drawings of the completed site improvements and confirmation of all permit close-outs with regulatory agencies.
2. A signed Affidavit attesting that all sub-contractors, laborers, and material-persons on the project have been paid.

APPROVAL OF PERMIT

Date of Permit Issuance: _____ Date of Permit Expiration:_____

APPROVED BY:

_____
Bruce A. Laurion, Chief Engineer

NOTE: Any request for extension of this Permit beyond date referenced above shall be made in writing to:

TPA Engineering Department
Attention: Bruce A. Laurion, Chief Engineer
1101 Channelside Drive
Tampa, FL 33602

PLEASE REFER TO SITE IMPROVEMENT PERMITS POLICY FOR ADDITIONAL REQUIREMENTS.