



**Development Services Bureau**  
Escambia County, Florida

For Office Use Only
Invoice# _____
Fee \$ <u> \$75.00 </u>

**SITE INSPECTION APPLICATION**

<b>Requestor's Information</b>	Owner/Applicant: Date: _____	
	Phone #: _____	Fax #: _____
	Escrow Account # _____ <small>(if applicable):</small>	
	Property Address: _____	
	Property Reference #: _____ - _____ - _____ - _____ - _____ - _____	
	Property Reference # can be obtained from the Property Appraiser's Office at 434-2735 or at <a href="http://www.escpa.org">www.escpa.org</a>	
Driving Directions: _____ _____ _____		
Type of Inspection:		
<input type="checkbox"/> <b>Alcohol Uses</b> ( <i>Land Development Code Section 7.14.00</i> ; to determine if a Church or School is within 1,000 feet of a business selling alcoholic beverages for on-premise consumption.) <input type="checkbox"/> <b>Signs</b> ( <i>Land Development Code Section 8.00.00</i> ) <input type="checkbox"/> <b>Other:</b> ( <i>Land Development Code Section _____</i> ; to determine: _____ _____)		
<p>This verification relates to zoning for the specified property and is provided for information purposes only. <b>This form DOES NOT imply or confer development rights for any desired use or activity on the specified parcel.</b> Prior to the issuance of any permits, the applicant must submit a complete application to the County and must comply with all other applicable State and Local Regulations. Requestor, please sign below verifying that you have read and understand, and accept, this disclaimer:</p>		
SIGNATURE <b>X</b> _____ Date: _____		

<b>OFFICE USE ONLY</b>	Zoning District: _____	Future Land Use Category: _____	Zoning Overlay District: Yes ( ) No ( ) If Yes, check one: Barrancas ( ) Brownsville ( ) Scenic Hwy ( ) Warrington ( )
	Findings of Inspection: _____ _____ _____ _____		
	Inspector (signature): _____		Date: _____
	Director/Designee (signature): _____		Date: _____
	<input type="checkbox"/> Approved <input type="checkbox"/> Denied		Date: _____