



Green Swamp Verification

Permit # _____ Lot Size: _____ Acres: _____

Parcel Information

Is parcel smaller than size required by the Polk County Comprehensive Plan? Yes ___ No ___

If yes, provide a copy of the Property Appraiser Printout; and a Site Plan indicating the location of adjacent parcel(s).

If yes, what year was the lot created _____? Is lot included on the vested list? Yes ___ No ___

If yes, do you or the property owner own any vacant land adjacent to this parcel? Yes ___ No ___

Is any portion of this parcel within the 100 year flood plain? Yes ___ No ___

If yes, provide a site plan showing the flood plain line and the proposed and existing structures.

Does this parcel contain any of the following?

Lake/Cypress Yes ___ No ___ Swamp/Wetlands Yes ___ No ___

Other wet areas Yes ___ No ___

If you answered yes to the question above, please state the distance between the structure(s) and the wet area; and show the distance on the site plan.

The access is via a County maintained: Road ___ Dirt Road ___ Easement ___

Notice and Acknowledgement

Before construction or setup begins, you are advised that your property is located in the GREEN SWAMP AREA OF CRITICAL STATE CONCERN (Chapter 380.05, Florida Statutes). As a result of this designation, there is a forty-five (45) day review period in which the Florida Department of Economic Opportunity (DEO) will review your permit application for compliance with local and state regulations. Your application will be rendered to DEO for this review period.

NO WORK SHALL COMMENCE ON SAID PROJECT PRIOR TO THE 45 DAY REVIEW PERIOD

Representatives from the DEO may wish to conduct a site visit at your proposed location. In the event the permit is inconsistent with local and state statutes, DCD may choose to appeal the permit, in which case you will be notified. An appeal could result in the delay of your project for up to several months.

Should you have any questions regarding this process, please contact DOE, at 850-717-8504 or on the web at: <https://floridajobs.secure.force.com/acsc/ACSCPermitsSearch>

Printed name of Owner/Authorized Agent _____

Signature of Owner/Authorized Agent above _____

Date _____