

JEFFERSON COUNTY, FLORIDA PLANNING DEPARTMENT

445 W. PALMER MILL ROAD - MONTICELLO, FLORIDA 32345
Phone (850) 342-0223 - Fax: (850) 342-0225



DEVELOPMENT APPLICATION

Application Date: _____

Applicant Name: _____

Applicant Mailing address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

Property Owner Name: _____

Project/Property Address: _____

City: _____ State: _____ Zip Code: _____

Property Owner Phone Number: _____

Parcel Identification Number: _____

Property Identification Number: _____

Brief Description of Proposed Project

Application Check List

- Site Plan Showing Distances from Property Lines
- 911 Address Form
- Road & Driveway Connection Packet
- Recorded Warranty Deed/Proof of Property Ownership
- Agent Authorization Form if NOT the Property Owner

Signature: _____ Date: _____

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911 ADDRESS

PLEASE DO NOT MAIL THIS FORM TO THE PLANNING DEPT. - BRING IN PERSON

A new 911 address will be assigned when requested. All 911 addresses are based upon the measured location of the center of the driveway access point to the property. Driveway connections to any public or private may be required to obtain a Jefferson County 911 address. You will be given a length of white flagging tape to indicate the location of the proposed new driveway.

NOTE: When an existing driveway becomes the access point for a third residence, the existing driveway shall be named as a private road and any subsequent residences shall be assigned a 911 address based on the location of the driveway to the new residence along the new private road. The proposed name shall be approved by the Planning Official in accordance with **Section 10-135** of the **Jefferson County Code**.

The 911 Address Fee for a new number is **30.⁰⁰**. Date Paid: _____ Staff initial: _____

Make checks payable to: **Jefferson County Board of County Commissioners**

REQUIRED INFORMATION:

Owner Name: _____

Current Address: _____

City: _____ State: _____ Zip Code: _____

PROPOSED ADDRESS SITE:

Parcel Tax ID #: _____ Phone #: _____

Name of Public or Private Road: _____

Upon payment & return of this sheet, a 911 plaque will be issued.

Return sheet to the Jefferson County Planning Department

445 West Palmer Mill Road

Office hours are Monday, through Friday 8:00 AM – 5:00 PM. (Excluding Holidays)

Telephone number 850-342-0223

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Fax Number 850-342-0225.

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Road & Driveway Connection Packet

All NEW road/driveway connections and driveways more than one (1) year in age that connect to a County-maintained road shall be required to obtain a Jefferson County Road & Driveway Connection Permit. This process will ensure the Road Department:

1. Is aware of all vehicular connections to the County-maintained roadway system.
2. Will determine if a culvert will be required at the connection to the County Road to ensure the continued function of the County Road drainage system.
3. To inspect and determine the culvert was installed correctly.

DRIVEWAY CONNECTION PERMITS WILL NOT BE REQUIRED WHEN CONNECTING TO A PRIVATE ROAD

Date of Application: _____

Permit Fee: **\$53.⁰⁰**

Make checks payable to: **Jefferson County Board of County Commissioners**

REQUIRED INFORMATION:

Owner Name: _____

Current Mailing Address: _____

City: _____ State _____ Zip: _____

Driveway 911 Address: _____

Tax ID #: _____

Phone #: _____ Name of County road: _____

Purpose of driveway (CHECK ONE): Residential, Commercial, Development

If a new Development, approved name of new road: _____

1. **Attach a recorded copy of the warranty deed.**
2. **Draw or attach a simple location map.**
3. **Stake the middle of proposed driveway with WHITE flagging material.**

Notify the Road Department at least 24 hours prior to requested date of inspection:

**Jefferson County Road Department
850-997-2036**

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Written directions from Courthouse Circle to Proposed driveway location:

DRAW MAP BELOW

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AGENT AUTHORIZATION FORM

For obtaining driveway connection permit

To: Jefferson County Planning & Road Departments Date: _____

By signing below, I/we, the owners of above property, do hereby grant permission to obtain the necessary permit for a driveway from the Jefferson County Road Department prior to the day of closing to the following person:

PRINTED NAME

Phone number to reach owners: _____

Printed name of owner

Signed name of owner

Printed name of owner

Signed name of owner

Printed name of owner

Signed name of owner

Printed name of owner

Signed name of owner

(Please add additional owners if necessary)

NOTARY PUBLIC STATE OF FLORIDA, COUNTY OF JEFFERSON

Signed before me this ___ day of _____, 201__; _____
PRINTED NAME

who is personally known to me or who produced _____ identification.

Signature

Stamp: