

# FORM BOARD SURVEY FORM

Please Complete All Fields. Incomplete Forms Will Not Be Accepted or Reviewed. Thank you

DATE: \_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

[MANDATORY]

PERMIT #: \_\_\_\_\_

PROJECT #: \_\_\_\_\_

PROPERTY OWNER NAME: \_\_\_\_\_

PHYSICAL ADDRESS: \_\_\_\_\_

PARCEL #: \_\_\_\_\_

## LICENSED CONTRACTOR INFORMATION :

COMPANY/QUALIFIER NAME: \_\_\_\_\_

LICENSE #: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

OFFICE #: \_\_\_\_\_ CELL: \_\_\_\_\_ FAX: \_\_\_\_\_

(Check one) RESIDENTIAL \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ MULTI-FAMILY \_\_\_\_\_

(Check one) Indian River County \_\_\_\_\_ City of Vero Beach \_\_\_\_\_

**\*\*ALL PERMITS MUST BE IN ISSUE STATUS @ TIME OF SUBMISSION, OR THEY WILL BE DISCARDED\*\***

### FOR OFFICE USE ONLY

REVIEWED BY: \_\_\_\_\_

DATE: \_\_\_\_\_

RESULTS: \_\_\_\_\_ APPROVED \_\_\_\_\_ REJECTED

REJECTIONS:

\_\_\_\_\_ SETBACKS \_\_\_\_\_ ELEVATION \_\_\_\_\_ BENCHMARK IS MISSING

NOTES:

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CONTACTED: \_\_\_\_\_

DATE: \_\_\_\_\_

REVIEWER: \_\_\_\_\_

DATE: \_\_\_\_\_