CONSTRUCTION SITE PLAN REVIEW **City of Melbourne** APPLICATION □ Commercial/Multi-Family □ Subdivision □ Outside City Type of ☐ Re-Development City Project No. **Application** □ Water Minor **Project Name** DATE RECEIVED **Project Address** Description Amt. of Impervious after ▼ Construction (sq. ft): **Utility Main Construction/Extension:** □ None □ Water □ Sewer □ Lift Station □ Force Main □ Reclaimed Dedicated Improvements: ☐ None ☐ Water ☐ Sewer ☐ Lift Station ☐ Force Main ☐ Reclaimed ☐ Roadways Site Information (List All Tax Parcel Identification Numbers) Twp: Rng: Sec: S/D: Blk/Par: Lot: **County Tax Acct.:** Twp: Rng: Sec: S/D: Blk/Par: Lot: **County Tax Acct.:** # of Units: Parking Spaces: Acreage: Zoning: Bldg. Sq Ft: **Phone Applicant Name**)) Fax Contact **Address Email** City, State, Zip **Phone Owner Name**) **Fax** Contact **Address Email** City, State, Zip **Engineer of Record Phone**) Fax) Contact **Address Email** City, State, Zip Applicant or Owner agrees to, and shall, reimburse the City all Minimum Documents Required with Application: monies paid for inspection performed outside the regular 40-hour work week and holidays. These monies shall include 30% for Sealed Sets Plans Plan Review Fee fringe benefits and shall be in excess of fees paid to the City for Concurrency Concurrency Fee inspection. Survey **Drainage Calculations Estimated Cost of Overall Site Improvements Estimated Cost of Dedicated Utilities**