



CITY OF DORAL
 PLANNING & ZONING DEPARTMENT
 SEALCOAT AND RESTRIPE PERMIT
 8401 NW 53 TERRACE
 DORAL, FL 33166
 PHONE: (305) 593-6630

APPLICANT'S INFORMATION

Applicant Name: _____ Application Date: _____

Contact Number: _____ Email Address: _____

OWNER'S INFORMATION

Owner's Name: _____ Contact Number: _____

Address: _____

City: _____ State: _____ Zip Code: _____

CONTRACTOR'S INFORMATION

Contractor's Name: _____ Contractor No.: _____

Address: _____ Contact Number: _____

City: _____ State: _____ Zip Code: _____

This permit is solely for parking lot refurbishing - resurfacing, re-striping or seal coating. A parking facility that is making alterations including but not limited to, changing dimensions or location of existing parking spaces, passenger and loading zones, pavement markings, drive aisles, access aisles, curbing shall obtain a building permit from the city's Building Department.

The issuance of the permit does not relieve the property owner from obtaining homeowner's, condominium or tenant association approval (if required) prior to beginning any work and in no way authorizes work that is in violation of any association rule or regulation.

 Signature of Owner or Owner's Agent

Print _____
 STATE OF FLORIDA, COUNTY OF MIAMI-DADE

Sworn to and subscribed before me by means of
 physical presence OR online notarizations
 this _____ day of _____, 20_____,
 by _____
 Signature of Notary Public _____
 Print Name _____
 (SEAL)

Personally known _____
 or Produced Identification _____
 Type of Identification Produced: _____

 Signature of Qualifier

Print _____
 STATE OF FLORIDA, COUNTY OF MIAMI-DADE

Sworn to and subscribed before me by means of
 physical presence OR online notarizations
 this _____ day of _____, 20_____,
 By _____
 Signature of Notary Public _____
 Print Name _____
 (SEAL)

Personally known _____
 or Produced Identification _____
 Type of Identification Produced: _____

SEALCOAT AND RESTRIPE REQUIREMENTS

- Planning and Zoning permits for sealcoat and restripe work ONLY.
- Restripe work is to match the last approved set of plans.

MINIMUM SUBMITTAL REQUIREMENTS

<u>Provided</u>	<u>Not Provided</u>	
		Plans showing the following: <ul style="list-style-type: none"> • location of proposed work • drawings showing pavement markings • parking stall and driveway aisle dimensions • total number of existing and proposed parking spaces
		Homeowners Association (HOA), Condo , or Tenant Association approval
		Last set of approved plans showing the total number of parking spaces
		Affidavit stating no changes will be made to existing layout (see attached template)

PERMIT FEES: None

INSPECTION FEES: Inspection fee of seventy-five (\$75) dollars.

If signing on behalf of the owner, attach a Letter of Authorization from the owner.

Pursuant to Section 77-190 “Marking” of the City’s Land Development Code, designated parking and loading spaces shall be marked on the surface of the parking space with paint or permanent marking materials in accordance with the Manual of Uniform Traffic Control Devices (MUTCD), and maintained in a clear and visible condition.

Planning and Zoning permits for sealcoat and restripe work ONLY.
Restripe work is to match the last approved set of plans.

THE PERMIT APPLICATION WILL NOT BE ACCEPTED WITHOUT THE ABOVE MINIMUM DOCUMENTATION. OTHER DOCUMENTS MAY BE REQUIRED, DEPENDING UPON THE SPECIFIC PROJECT CONDITIONS.

FOR CITY USE ONLY

	Yes	No
License & Insurance		
Owner/Builder Affidavit		
HOA Authorization Approval Letter		
Two (2) copies of required plans		

Permit Number: _____ Date Received: _____

Signature: _____ Date: _____



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Affidavit to Sealcoat and Restripe Existing Parking Lot

Job Address (where seal coating and re-striping will take place)

I am the owner of the property at _____ where seal coating and re-striping of the parking lot will take place. I hereby certify that no modifications to the existing parking lot will occur, including but not limited to, changing the dimensions or locations of existing parking spaces, passenger and loading zones, pavement markings, drive aisles, access aisles and curbing.

Property Owner Signature

Date:

Property Owner:

Date:

Signature of Owner or Owner's Agent

Print _____
STATE OF FLORIDA, COUNTY OF MIAMI-DADE

Sworn to and subscribed before me by means of
 physical presence OR online notarizations
this _____ day of _____, 20_____,
by _____

Signature of Notary Public
Print Name _____
(SEAL)

Personally known _____
or Produced Identification _____
Type of Identification Produced: _____