

RESIDENTIAL DEVELOPMENT ORDER

Issuance of this development order verifies that the following described development proposal has been reviewed for compliance with minimum requirements of the Jackson County Comprehensive Growth Management Plan and Land Development Regulations at the date of issuance. This development order does not constitute a building permit, nor does it guarantee final approval of any associated permits. **Development Order expires six (6) months from date of issuance.** A **\$25.00** permit fee is required at the time application is submitted. ***Recreational Vehicles will not be issued a Development Order.** **REQUIRED ATTACHMENTS: MOST CURRENT RECORDED DEED.** IF NOT THE PROPERTY OWNER, A COPY OF THE OWNER'S DEED AND A NOTARIZED LETTER OF AUTHORIZATION TO THE AGENT/APPLICANT FROM THE OWNER MUST BE PROVIDED.

PROPERTY OWNER INFORMATION

Property Owner as indicated on deed: _____
Address: _____ City: _____ State: _____
Zip: _____ Contact Phone: _____

AUTHORIZED AGENT/APPLICANT INFORMATION

Agent/Applicant Name: _____
Address: _____ City: _____
State: _____ Zip Code: _____ Contact Phone: _____

PROPOSED DEVELOPMENT

Project Address: _____ City: _____
Site Built Manufactured Home Modular Home Duplex
Addition Accessory Structure Replacement Dwelling _____
Other: _____ Total Square Footage: _____
For Entire Parcel Referenced by Deed: # of Proposed Units _____ /# of Existing Units _____
Private Well Public Water System Private Septic Tank Public Sewer System
If public water or sewer, indicate provider(s): _____
Are there any: Rivers Streams Lakes Ponds Wetlands
Existing Driveway Connection New Driveway Connection - County FDOT

PROPERTY LOCATION

Section: _____ Township: _____ Range: _____
Acreage: 1/4 1/2 3/4 1 5 Other: _____
Tax Parcel ID # _____
If located in subdivision/trailer park: Name: _____
Unit Number: _____ Block Number: _____ Lot Number: _____

The FEMA maps used by Jackson County are used to identify FEMA flood plains only and not for any other purpose.

SIGNATURE: _____ **DATE:** _____

FEE PAID: Y N INITIAL: _____ RECEIPT # _____ DATE: _____

DEPARTMENT USE ONLY

N.F.I.P. NO.: 12063C0 - _____ Zone: _____ Floodway: Y N
COMPREHENSIVE PLAN LAND USE DESIGNATION: _____
APPROVED: Y N BY: _____ DATE: _____
SPECIAL APPROVAL CONDITIONS: _____

Site Plan

Use the space below to provide a site plan. The Site Plan must show: property lines, distances to proposed structures (i.e. adjacent roads, right of ways, power line easements, etc.), all proposed and existing structures on the property, proposed and existing well and septic tank locations, and proposed and existing driveway connections. Also must show which way north is on the property.

Each Square = 20 Ft.	SITE PLAN
Site Plan Example	
Property Line	



JACKSON COUNTY E9-1-1 BUSINESS OFFICE

2863 Green Street, Suite A
Marianna, Florida 32448
jce911@jacksoncountyfl.com

850-718-0009
850-482-9146 Fax
adteche911@embarqmail.com

NEED AN ADDRESS?

Application

PLEASE NOTE: ANY ADDRESSES ISSUED BEFORE PERMANENT DWELLING IS ON SITE, COULD BE SUBJECT TO CHANGE. THANK YOU

Your Name (s): _____

Landowners name if different: _____

Parcel identification number: _____

Contact phone numbers: _____

Home

Cell

Business

NAME OF THE ROAD HOUSE WILL BE ON _____

What is the nearest address or intersecting road nearest this property?

What address can be located on either side of this property or across the street from this property?

Is there a lot number? _____

(Important) When the Address Technician arrives on site to assign your address number, please have clearly marked driveway and/or centerline of house site with a white flag, plastic bag or pole, stick etc. Please do not use pink, yellow flags or orange survey marker flags. Make sure all pets are secured, as to not cause any harm to the Technician or Staff.

A CORRECT AND POSTED ADDRESS IS FOR YOUR SAFETY! PLEASE POST ADDRESS ON PROPERTY AND AT DRIVEWAY, MAKE SURE TO USE REFLECTIVE NUMBRS AND NUMBERS ARE VISIBLE (3") INCH MINIMUM. THANK YOU FOR YOUR COOPERATION.

Note: if your residence is inside city limits, you must contact City Hall for the new address.

***This Department does not validate property ownership, only assign addresses upon request.**

LETTER OF AUTHORIZATION

I/WE _____, PROPERTY OWNER(S) OF

SAID LAND DO HEREBY GRANT _____

PERMISSION TO APPLY FOR A RESIDENTIAL DEVELOPMENT ORDER AND/OR A

SEPTIC TANK PERMIT AT _____

(ADDRESS)

(CITY)

Signed _____

Signed _____

Print _____

Print _____

**STATE OF FLORIDA
COUNTY OF JACKSON**

The foregoing instrument was acknowledged before me this _____ day of _____
20____ by _____, who is personally known to me or has produced ____
_____ as identification.

Notary Public, State of Florida