

* Need approval for Phase 1 and 2 * Donation to The

**Town of Eatonville
BUILDING PERMIT APPLICATION**

Town of Eatonville
On behalf of ESTEAMed Learning, Inc

Application is hereby made for a Building Permit to accomplish the work herein described in accordance with duplicate plans and/or specification submitted herewith; it is agreed that all corrections in the plans and/or specifications necessary for compliance shall be observed and all requirements of the Building Codes, Zoning Ordinances, and all other pertinent laws and ordinances of the Town of Eatonville regulating construction shall comply with the pursuit of this work whether or not specified herein. NOTE: ANY DEVIATION FROM AN APPROVED SITE PLAN MUST BE SUBMITTED AS A REVISION. FAILURE TO ENSURE THAT THE DEVIATION HAS BEEN APPROVED MAY RESULT IN THE ADDED IMPROVEMENTS BEING REMOVED AT THE OWNERS EXPENSE. NO CERTIFICATE OF OCCUPANCY WILL BE ISSUED UNTIL ALL CONFLITS ARE RESOLVED.

MASTER PERMIT # _____ PERMIT # _____

ALL REQUESTED INFORMATION MUST BE COMPLETED TO PROCESS THE PERMIT

Project Address: 140 S. West Street Eatonville, FL 32751

Parcel/Tax I.D. #: _____ (Proof of ownership must be attached)

This can be obtained by a records search on the Orange County Property Appraiser's website: <http://www.ocpafl.org>

IDENTIFICATION: TENANT BUSINESS NAME: Town of Eatonville / ESTEAMed Learning, Inc

1. Town of Eatonville Eatonville, FL 32751
Property Owner Address City, State, Zip Telephone #

2. Pro playgrounds Seth Rodgers CGC1522008 1900 573 7529
Contractor Company Contact Name License # Telephone # Ext: 118

3. Pro playgrounds srodgers@proplaygrounds.com
License Holder Address Email Address Fax#

SUBCONTRACTOR	Company Name
Gas:	
Electrical:	
Plumbing:	
Mechanical:	
Fire Sprinkler/Fire Alarm:	

TYPE OF WORK: Residential Commercial Sq. Ft Conditioned _____ Unconditioned _____ Total _____

Work:	Playground pavilion & Other: Garden Install				Fees: (Office Use Only)	
<u>New Construction</u>	Fence	LF: *	Ht: *	Gates: *	Width: *	Building Permit
<u>Alteration/Addition</u>	Roof	Sq:	Slope:	Color:		Surcharge
Interior Alteration	Pool	In Ground	Above Ground			5% Education Fee
Repair	Shed	Size:				Plan Review
Land Use	<u>Park space for playground, garden, community park</u>					Inspection(s) Fees
Impervious Surface Ratio (required if adding square footage):						OC Impact fee
Square footage of work area (for Florida State surcharges):						Water, ERU, Sewer, Meter
Valuation of Work (Estimated Cost) \$						Total:

Work Descriptions: installation of 4 phase project detailed to the town document attached

I hereby certify I have read this application and that all information contained herein is true and correct. I agree to comply with all Town Ordinances and State Laws regulating Building Construction. I am the owner or authorized agent of the owner or contractor described herein. I also certify that I will employ only licensed contractors as required by F.S. 489. I further acknowledge and agree that no site preparation or construction shall commence prior to posting of required permit. Licensed Contractor or persons appointed by power of attorney must sign the building permit application. Owner must sign if obtaining an owner/builder permit.

I understand and agree to the cost recovery requirements in Town of Eatonville and as described on the back of this application.

Print Name: Candace Finley

Signature: _____ Date: 4/7/26

Initial: CF

Cost Recovery Agreement

- By signing this application, the applicant understands and agrees that, pursuant to Town of Eatonville Code, all direct costs, expenses and fees incurred by the Town relating directly to the review, processing inspection, or regulation of an application, including but not limited to the time of Town consultants, as well as those relating directly to advertising, surveying, legal and engineering for an application or project shall be assessed to the applicant and reimbursed to the Town.

Department Approvals	
Community Development (Town Planner)	Approved by: _____ Date: _____
Engineering	Approved by: _____ Date: _____
Utilities	Approved by: _____ Date: _____
Fire	Approved by: _____ Date: _____
Building Official	Approved by: _____ Date: _____

Correspondence		
DATE	COMMENTS	INITIALS



