



TOWN OF HIGHLAND BEACH DEVELOPMENT ORDER APPROVAL APPLICATION

Application # _____

PROPERTY INFORMATION ASSOCIATED WITH THIS APPLICATION	
Address: 4203 TRANQUILITY DR	PCN: 24-43-47-04-02-005-0120
Full Legal Description of the Property [as described in the deed] or reference to an attachment: BEL LIDO LT 12 BLK 5	
Zoning District:	What is the location of the installation? <input type="checkbox"/> Intracoastal Waterway (ICW) <input checked="" type="checkbox"/> Interior Canal/Basin <input type="checkbox"/> N/A

PROPERTY OWNER (APPLICANT) INFORMATION		
Name: Robert D. Hammond	Phone: (561) 213-1231	Fax:
Mailing Address: 4205 S Ocean Blvd Highland Beach FL 33487		
Email Address: rhammondjr@partsbase.com		

APPLICANT'S AGENT INFORMATION		
Name: DARRIN DUNLEA	Phone: 561-756-2568	Fax:
Company Name: SEADAR BUILDERS		
Mailing Address: 3850 NW 2ND AVE SUITE 23 BOCA RATON FL 33431		
Email Address: DARRIN@SEADARBUILDERS.COM		

Provide a detailed description of the proposed project (use additional pages if necessary):

BUILD A NEW SINGLE FAMILY HOME WITH A POOL, DRIVEWAYS AND SITE WALLS. TOTAL SF UNDER AIR 6012, TOTAL SF 7966

I give permission to the members of the Town Commission, Planning Board and staff to inspect the property for the purpose of this application. I declare that all statements made herein are true, based upon the best available information. Willful false statements may jeopardize the validity of my application or any decision issued thereon. I have fully read the information outlining the application requirements. With this application, I am submitting the necessary supporting materials listed.

Applicant's Signature: Rethe Date: 7/10/24

Applicant's Printed Name Robert D. Hammond

Received by the Town Clerk's Office:

Received By: _____ Date: _____

Date Public Notices Mailed: _____

Date Legal Advertisement Published: _____