

TOWN OF HIGHLAND BEACH DEVELOPMENT ORDER APPROVAL APPLICATION

PROPERTY INFORMATION ASSOCIATED) WITH	THIS AP	PLICATION		
Address: 1101 BEL AIR DR, HIGHLAND BEACH FL 33487				PCN:	24-43-47-04-09-000-0000
Full Legal Description of the Property [as des	scribed i	in the dee	d] or referenc	e to an a	attachment:
BEL LIDO MANOR COND					
Zoning District: 0400—CONDOMINIUM	What is the location of the installation?				
RML—MULTI-FAMILY LOW-DENSITY (24-HIGHLAND BEACH)	□ Intrac	oastal Wa	terway (ICW)	ĭ Inter	rior Canal/Basin
PROPERTY OWNER (APPLICANT) INFOR	MATIO	N			
Name: BEL LIDO MANOR CONDOMINIUM ASSOCIATION, INC.		Phone:	561-368-3566	;	Fax:
Mailing Address: 4281 NW 1st Avenue, Boca	Raton F	L 33431			
Email Address: BelLidoManorCondo@gmail.	.com				
APPLICANT'S AGENT INFORMATION					
Name: William Thomas		Phone: 954-532-0129			Fax:
Company Name: Unlimited Permit Services, I	lno		954-552-0129		
Mailing Address: 902 NE 1 ST #2, Pompano	Beach F	FL 33060			
Email Address: office@unlimitedps.net					
Provide a detailed description of the propo	osed pro	oject (use	additional p	ages if	necessary):
Existing 50' x 3' (150sf) wood dock and p	piles to	be remo	ved and rep	laced v	with new wooden dock
(in same footprint) on six new 10" wood	piles				

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.

Property Owner's Signature: Date: 12/4/29 Property Owner's Printed Name HOLLY SAUER			
Property Owner's Printed Name_HOLLY SAUER			
Received by the Town Clerk's Office:			
Received By:	Date:		
Date Public Notices Mailed:			
Date Legal Advertisement Published:			