

<b>TYPE</b>	<b>STATUS</b>	<b>BUILDING TYPE</b>	
CP	SUBMITTED		
<b>ASSIGNED TO</b>			
Francis Forman			
<b>ADDRESS</b>			
1501 SW Cameo Blvd			
<b>SECTION</b>	<b>BLOCK</b>	<b>LOT</b>	
	Crosstown Parkway	Par 1	
<b>LEGAL DESCRIPTION</b>			
<b>SITE LOCATION</b>			
ADFAD			
<b>PARCEL #</b>			
3335-601-0012-000-0			
<b>CURRENT LANDUSE</b>	<b>PROPOSED LANDUSE</b>	<b>CURRENT ZONING</b>	<b>PROPOSED ZONING</b>
U	I	U	I
<b>ACREAGE</b>	<b>NON-RESIDENTIAL SQ. FOOTAGE</b>	<b>NO. OF RESIDENTIAL UNITS</b>	
38.93			
<b>NO. OF LOTS OR TRACTS</b>	<b>NO. OF SHEETS IN PLAT</b>		
0	0		
<b>UTILITY PROVIDER</b>			
CITY OF PORT ST. LUCIE			
<b>DESCRIBE REQUEST</b>			
<b>Primary Contact Email</b>			
fforman@cityofpsl.com			
<b>AGENT/APPLICANT</b>			
<b>FIRST NAME</b>	<b>LAST NAME</b>		
Francis	Forman		
<b>Business Name</b>			
City of Port St Lucie			
<b>ADDRESS</b>			
121 SW Port St Lucie Blvd			
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	
Port St Lucie	FL	34984	
<b>EMAIL</b>	<b>PHONE</b>		
fforman@cityofpsl.com	7723444326		
<b>AUTHORIZED SIGNATORY OF CORPORATION</b>			
<b>FIRST NAME</b>	<b>LAST NAME</b>		
<b>ADDRESS</b>			
<b>CITY</b>	<b>STATE</b>	<b>ZIP</b>	

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**EMAIL****PHONE**

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**PROJECT ARCHITECT/ENGINEER****FIRST NAME****LAST NAME**

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**Business Name**

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**ADDRESS**

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**CITY****STATE****ZIP**

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**EMAIL****PHONE**

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**PROPERTY OWNER****Business Name**

City of Port St. Lucie

**ADDRESS**

121 SW Port St. Lucie Blvd

**CITY****STATE****ZIP**

Port St Lucie

FL

34984

**EMAIL**

fforman@cityofpsl.com

**PHONE**

(772) 344-4326

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**FINAL PERMIT INSPECTION REQUIRED BY:**

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