

## EASEMENT USE AGREEMENT (EUA)

### Applicant Contact Information

Name of Owner: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Name of Agent: \_\_\_\_\_ Firm: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Phone: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_

Name of Applicant (if different than owner or agent): \_\_\_\_\_

Note:

1. If applicant is a land trust, indicate the name of beneficiaries.
2. If applicant is a corporation other than a public corporation, indicate the name of the officers and major stockholders.
3. If applicant is a partnership, limited partnership, or other business entity, indicate the name of the principals.
4. List all other owners.

### Project Information

Address of subject property: \_\_\_\_\_

Parcel #: \_\_\_\_\_ Section/Township/Range: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Subdivision: \_\_\_\_\_ Unit: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_

Legal Description: \_\_\_\_\_

Current Zoning: \_\_\_\_\_ Current Land Use: \_\_\_\_\_

### Submittal Requirement Checklist

The following Submittal Requirement checklist is to be utilized at time of application submittal.  
**Incomplete submittals will not be accepted.** Documents shall be submitted electronically.

REQUIREMENTS FOR REVIEW:	REQUIRED
<b>Application Form</b>	<input checked="" type="checkbox"/>
<b>Cover Letter</b> , including a statement explaining the reason for the Easement Use Agreement	<input checked="" type="checkbox"/>
<b>Addressing Checklist</b>	<input checked="" type="checkbox"/>
<b>Affidavit of Authorization</b> , if applicable	<input type="checkbox"/>
<b>Proof of Ownership</b> , including a copy of the fee simple deed	<input checked="" type="checkbox"/>
<b>Property Owner Disclosure</b> form	<input checked="" type="checkbox"/>

# Collier County

REQUIREMENTS FOR REVIEW:	REQUIRED
<b>Boundary and Topographic Survey</b> , signed & sealed, showing existing conditions and encroachment on 8 1/2 in. X 11 in. format and labeled (in bold) " <b>Exhibit A</b> ".	<input checked="" type="checkbox"/>
Copy of Recorded Subdivision Plat, if applicable.	<input type="checkbox"/>
Copy of the document that granted, conveyed, or dedicated the easement to the County or public.	<input checked="" type="checkbox"/>
<b>Letters of No Objection, as applicable:</b>	
<b>Electric Company / Florida Power and Light Naples Service Center</b> 1220 5 <sup>th</sup> Ave North Naples, FL 34102	<input type="checkbox"/>
<b>Phone:</b> 239-262-1322	
<b>Century Link/Lumen</b> ATTN: Kenneth Stinnett ATTN: Sherlene Clevenger 3530 Kraft Road, Naples, FL 34105	<input type="checkbox"/>
Email: <a href="mailto:Kenneth.stinnett@Lumen.com">Kenneth.stinnett@Lumen.com</a> Email: <a href="mailto:Sherlene.clevenger@Lumen.com">Sherlene.clevenger@Lumen.com</a> Phone: 239-263-6234	
<b>Collier County Sheriff's Office / Legal Department</b> ATTN: Michael Hedberg 3319 E Tamiami Trail, Naples, FL 34112	<input type="checkbox"/>
<b>Phone:</b> 239-252-0660	
<b>Greater Naples Fire and Life Safety</b> ATTN: Shawn Hanson, Deputy Chief 2700 N Horseshoe Drive, Naples, FL 34104	<input type="checkbox"/>
<b>Phone:</b> 239-774-2800	
<b>North Collier Fire Control and Rescue District</b> ATTN: Fire Prevention Bureau and Support Services 6495 Taylor Road, Naples, FL 34109	<input type="checkbox"/>
<b>Phone:</b> 239-597-9227	
<b>Comcast / Xfinity</b> ATTN: Xavier Medina 12600 Westlinks Drive, Ste 4 Fort Myers, FL 33913	<input type="checkbox"/>
Email: <a href="mailto:Xavier_Medina@comcast.com">Xavier_Medina@comcast.com</a>	
<b>Road, Bridge and Stormwater Maintenance Division</b> ATTN: Road Maintenance 4800 Davis Boulevard, Naples, FL 34104	<input type="checkbox"/>
Email: <a href="mailto:RoadMaintenance@collier.gov">RoadMaintenance@collier.gov</a> Phone: 239-252-8924	
<b>Adjacent Property Owners</b>	<input type="checkbox"/>
<b>Homeowners Association</b>	<input type="checkbox"/>
<b>Requirements for Recording</b>	
If approved: Two copies of Exhibit A, signed and sealed, for Board Approval and Recording.	<input checked="" type="checkbox"/>

## Fee Calculation Worksheet

Application Fee: \$2,000.00      \$ \_\_\_\_\_

Recording Fee: You will be contacted of exact amount prior to BCC meeting.      \$ \_\_\_\_\_

<b>Fee Subtotal</b>	<b>\$</b> _____
<b>Pre-application fee credit, if applicable</b>	<b>\$</b> _____
<b>Total Fees Required:</b>	<b>\$</b> _____

\_\_\_\_\_  
Applicant/Agent Signature

\_\_\_\_\_  
Date