

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

Collier County

REQUIREMENTS FOR REVIEW:	REQUIRED
Boundary and Topographic Survey , signed & sealed, showing existing conditions and encroachment on 8 ½ in. X 11 in. format and labeled (in bold) “ Exhibit A ”.	<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"/>
Letters of No Objection, as applicable:	
Electric Company / Florida Power and Light Naples Service Center 1220 5 th Ave North Naples, FL 34102 Phone: 239-262-1322	<input type="checkbox"/>
Century Link/Lumen ATTN: Kenneth Stinnett ATTN: Sherlene Clevenger 3530 Kraft Road, Naples, FL 34105 Email: Kenneth.stinnett@Lumen.com Email: Sherlene.clevenger@Lumen.com Phone: 239-263-6234	<input type="checkbox"/>
Collier County Sheriff's Office / Legal Department ATTN: Michael Hedberg 3319 E Tamiami Trail, Naples, FL 34112 Phone: 239-252-0660	<input type="checkbox"/>
Greater Naples Fire and Life Safety ATTN: Shawn Hanson, Deputy Chief 2700 N Horseshoe Drive, Naples, FL 34104 Phone: 239-774-2800	<input type="checkbox"/>
North Collier Fire Control and Rescue District ATTN: Fire Prevention Bureau and Support Services 6495 Taylor Road, Naples, FL 34109 Phone: 239-597-9227	<input type="checkbox"/>
Comcast / Xfinity ATTN: Xavier Medina 12600 Westlinks Drive, Ste 4 Fort Myers, FL 33913 Email: Xavier_Medina@comcast.com	<input type="checkbox"/>
Road, Bridge and Stormwater Maintenance Division ATTN: Road Maintenance 4800 Davis Boulevard, Naples, FL 34104 Email: RoadMaintenance@collier.gov Phone: 239-252-8924	<input type="checkbox"/>
Adjacent Property Owners	<input type="checkbox"/>
Homeowners Association	<input type="checkbox"/>
Requirements for Recording	
If approved: Two copies of Exhibit A, signed and sealed, for Board Approval and Recording.	<input checked="" type="checkbox"/>

Fee Calculation Worksheet

<input type="checkbox"/> Application Fee: \$2,000.00	\$ _____
<input type="checkbox"/> Recording Fee: You will be contacted of exact amount prior to BCC meeting.	\$ _____
Fee Subtotal	\$ _____
Pre-application fee credit, if applicable	\$ _____
Total Fees Required:	\$ _____

Applicant/Agent Signature _____

Date _____