

FINAL UTILITY CONVEYANCE
Type of Conveyance

Private
 County
 No-Conveyance

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): _____

Project Information

Original SDP/PPL Project No. (PL)/ Project Name: _____

Submittal Requirement Checklist

At time of submittal, the checklist is to be completed and submitted with the application packet.
Incomplete submittal will not be accepted.

REQUIREMENTS FOR REVIEW:	REQUIRED
Completed Application (download current form from the County website)	☒
Addressing Checklist	☒
Utilities Conveyance Checklist	☒
All submittal documents in PDF format including Mylar of Plat and include Plat in Auto Cad Format in State Plane Coordinates email to cad-submittals@collier.gov (If paper submittal)	☒

Applicant/Agent Signature

Date

Print