



Growth and Resource Management  
 Building and Zoning  
 123 W. Indiana Ave., DeLand, FL. 32720  
 (386)822-5739 • Fax (386) 626-6588  
 www.volusia.org

**ACKNOWLEDGMENT**

I, \_\_\_\_\_, property owner(s), hereby request(s) a  
 (full legal name)

building permit for \_\_\_\_\_ located at \_\_\_\_\_  
 (type of work to be performed) (street address)

\_\_\_\_\_, Parcel Number: \_\_\_\_\_  
 (City, State, and Zip Code)

As the undersigned, I hereby certify:

1. I am over the age of eighteen (18) and am a resident of the State of \_\_\_\_\_.

2. I acknowledge that by proceeding with this building permit application, I have been advised and understand that a nonconforming lot letter or a lot combination will need to be reviewed and accepted by the County of Volusia prior to my building permit being approved for issuance.

3. I acknowledge that should I complete the plan review process and am unable to obtain an acceptable nonconforming lot letter or likewise not be approved for issuance of the applied for building permit, my application and plan review fees will not be refunded in accordance with Resolution 2005-191, as amended.

\_\_\_\_\_  
 Signature of Property Owner(s)

\_\_\_\_\_  
 Printed Name of Property Owner(s)

State of Florida  
 County of Volusia

Sworn to and subscribed to before me, on this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_.

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_  
 Type of Identification Produced: \_\_\_\_\_

\_\_\_\_\_  
 (Signature of Notary Public)

\_\_\_\_\_  
 (print, type or stamp name)