



Project Information Form

This form must be completed by the individual(s) that will be responsible for all communications with the Central Florida Tourism Oversight District (CFTOD). Once complete the form must be sent to buzzsaw@oversightdistrict.org. No other forms of submittal are acceptable.

Date:	
Project Name: Land Owners Representative Name and Contact Information:	
Type of Permit/Review Required:	
☐ Right of Way Permit	☐ General Plan Review
☐ Special Events☐ Authorization to work within or Right of N	*All proposed construction within the jurisdictional limits of CFTOD or projects discharging to the CFTOD Master Drainage System check this box.
☐ Haul Route Approval* *If an FDOT Oversize/Overweight permit is required, provide a copy with this form	Development Agreement
Project Data: Location:	
Total Project Area (acres):	Wetland Impact Area (acres):
Project Description: (Summary of work to be comple	-tl\
Below please list the information for the applicant/user that For questions please contact the Planning and Engineering	will be entering the information into the CFTOD/BIM 360 System. Office at (407) 828-2250.
Users:	
	Email Address:
. ,	Mobile Phone No:
Company:	nobile i fione No.
Address:	
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` '	mail Address: Nobile Phone No:
	TODILE PHOTE NO.
Company: Address:	
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