



**Walton County  
Development Services Division**

31 Coastal Centre Boulevard, Suite 100  
Santa Rosa Beach, Florida 32459  
Phone 850-267-1955  
Facsimile 850-622-9133

47 N 6<sup>th</sup> Street  
DeFuniak Springs, Florida 32433  
Phone 850-892-8157  
Facsimile 850-892-8162

**DOCK AND SEAWALL APPLICATION**  
*(Non-Gulf Front Property Only)*

**APPLICANT**

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**PROPERTY INFORMATION**

Parcel Identification Number(s) (Obtain from Property Appraiser's Office): \_\_\_\_\_  
\_\_\_\_\_

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

Name of Water Body: \_\_\_\_\_

**AGENT**

Name: \_\_\_\_\_  
(If company or corporation, name of secretary and president)  
Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_  
Telephone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_ Email: \_\_\_\_\_

**Please submit the following documentation along with the completed application:**

- \_\_\_\_\_ Provide a copy of permit or exemption letter from **FDEP** with approved drawings.
- \_\_\_\_\_ Provide a copy of permit or exemption letter from **Army Corps of Engineers** with approved drawings.
- \_\_\_\_\_ Provide a **survey** of property showing all boundaries, applicable setbacks, buffers, conservation easements, etc. (legible and to scale).
- \_\_\_\_\_ Provide a site plan drawn to scale of the **proposed structure** with exact dimensions and placement on the property. The location, relative to the body of water, including the extent over the body of water must be shown. Existing structures on the water must also be shown. Please show all property lines.

**Please mark all new construction that applies:**

Seawall    Boathouse    Dock/Pier    Retaining Wall   Other \_\_\_\_\_

Is the dock covered?  Yes    No   If yes, a building permit is required by Walton County.  
Provide Building Permit # \_\_\_\_\_

Is electricity to be supplied at dock?  Yes    No   If yes, an electrical permit is required.  
Provide Electrical Permit # \_\_\_\_\_

**Description of the Project:**

---

---

---

---

---

**FOR OFFICIAL USE ONLY**

**General Conditions of Approval:**

---

---

---

---

---

---

---

---

**Reason for Disapproval:**

---

---

---

Approved    Disapproved

By: \_\_\_\_\_  
Environmental Department

By: \_\_\_\_\_  
Development Services Division

DATE ISSUED: \_\_\_\_\_

**Note: Permit is valid for one year from date of issuance**

