



Planning, Zoning & Building Department
 12300 Forest Hill Boulevard Wellington, FL 33414
 Phone: (561) 753-2430 Fax: 561-791-4045
 www.wellingtonfl.gov

UTILITIES EASEMENT CONSENT FORM

**Circle 1 utility per form and fax it to the number indicated
 Please make sure you fax a copy of the Survey**

Comcast Cable Fax: (561) 454-5899
 Email: wade_hagerty@cable.comcast.com

AT&T Fax: (305) 552-5979
 Email: G30576@att.com

FP&L Fax: (561) 616-1625
 Tel: (561) 616-1601

Florida Public Utilities Fax: (561) 838-1769
 Tel: (561) 838-1817
 Email: engineering-wpb@fpuc.com

I am the record title holder of property located at _____
 I propose to apply for a permit from the Village of Wellington to construct or install a _____
 in the _____ easement on my property. The legal description of this
 property is LOT: _____ BLOCK: _____
 SUBDIVISION: _____.

In the event your company has no objections to this improvement, please complete this form. I understand that your company will not be responsible in any way for repairs to, or replacement of, any portion of the above referenced improvement and that any removal or replacement of this improvement necessary for your use or access of this easement will be done at the expense of the property owner or their successors in interest.

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S SIGNATURE: _____

ACKNOWLEDGEMENT:

We agree to the proposed improvement under the circumstances described above.
 Name of easement holder: _____

By: _____
 Title: _____

Date: _____

Please return this form to the applicant for submittal with the application.
 Applicant contact information: _____