

DATE: _____

INDIAN RIVER COUNTY
PUBLIC WORKS REQUEST FOR INFORMATION
1801 27th Bldg. A VERO BEACH, FL 32960
Phone (772) 226-1283 Fax (772) 778-9391

TYPE OF REQUEST: CHECK ALL THAT APPLY

Base Flood Elevation Determination Letter

Site Questions

Food Zone Information (Verbal)

Food Zone Information (Letter)

SITE ADDRESS AND / OR PARCEL ID _____

DESCRIPTION OF REQUEST:

HOW DO YOU WISH TO BE NOTIFIED?

CONTACT NAME _____

ADDRESS _____

TELEPHONE # _____ EMAIL _____

OTHER _____

CHARGES:

Base Flood Elevation Determination Letter: \$30.00

Flood Zone Information Letter: \$30.00

TOTAL DUE FROM CUSTOMER:

Please note: Exact change or check only.

Make checks out to:
INDIAN RIVER COUNTY BOCC

NOTE: For Public records request and costs, refer to optional Public Records Request Form.