



**BAY POINT WATERFRONT AND
CANALFRONT PROPERTY OWNERS
ASSOCIATION
PERMIT REQUEST**



CONTRACTOR

COMPANY _____

ADDRESS _____

CONTACT _____

EMAIL AND PHONE # _____

DATE OF REQUEST _____

BAY POINT RESIDENT

NAME _____

ADDRESS _____

RESIDENT EMAIL _____

RESIDENT PHONE # _____

LOT # _____

ROAD IMPACT FEE _____

The lot owner acknowledges full and complete responsibility for the actions and performance of any and all contractors performing work for the lot owner. The lot owner agrees to "hold harmless" Bay Point Waterfront and Canal front Property owners Association, Bay Point Community Association, and Bay Point West Property Owner's Organization for any and all alleged damages resulting from the work performed by the lot owner or the lot owner's contractors.

SIGNATURE OF LOT OWNER _____ PRINTED NAME _____ DATE _____

NOTE: A ROAD IMPACT FEE WILL BE CHARGED FOR ALL NEW SEA WALLS PAYABLE TO BPCA

DESCRIPTION OF PROJECT

NOTE: ATTACH DRAWINGS AND PICTURES THAT CLEARLY DESCRIBE PROJECT

PROJECT APPROVAL

NOTES ABOUT PROJECT: _____

SEA WALL CHAIRMAN _____ APPROVAL DATE _____ PERMIT # _____

PROJECT COMPLETION

SEA WALL CHAIRMAN _____ COMPLETION DATE _____

NOTE: PLEASE SEND ALL OF THE INFORMATION TO THE BPCA OFFICE OR EMAIL IT TO: BOB GINN: bobbgin@bellsouth.net. ANY QUESTIONS: BOB GINN; 901-340-8400.