



**Palm Beach County Zoning Division**  
 2300 N. Jog Road  
 West Palm Beach, Florida 33411  
 Phone: (561) 233-5200  
 FAX: (561) 233-5165

**LIENS AND FINES DETERMINATION**

Control No. \_\_\_\_\_ Project Name: \_\_\_\_\_ BCC District: \_\_\_\_\_

**INSTRUCTIONS:** Complete all information. If not applicable, indicate with N/A. Attach additional pages, if necessary. Fee is based per PCN or submit Certification Form #06. PZB Fee Schedule: <http://www.pbcgov.com/pzb/Fees.pdf>

**I. PROPERTY IDENTIFICATION**

**A. Property Identification Information:** Complete table for all property within the affected area.

PROPERTY CONTROL NO. (PCN)	PLAT BK & PAGE #	PROPERTY CONTROL NO. (PCN)	PLAT BK & PAGE #
1.		6.	
2.		7.	
3.		8.	
4.		9.	
5.		10.	

**B. Property Address:** \_\_\_\_\_

**C. VERY IMPORTANT:** Attach legal description from Property Appraisers Office or tax bill for each PCN. Applications will not be accepted without this information.

**II. OWNERSHIP INFORMATION**

**Current Property Owner:** \_\_\_\_\_  
**Corporate ID No.** \_\_\_\_\_ **County Tax No.** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_

**Petitioner, if other than owner(s):** \_\_\_\_\_  
**Corporate ID No.** \_\_\_\_\_ **County Tax No.** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_

[ ] Check (✓) here if petitioner is a contract purchaser.

**HOA/POA:\*** \_\_\_\_\_  
**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_  
**Phone:** ( ) \_\_\_\_\_ **FAX:** ( ) \_\_\_\_\_

\* Home Owner Association (HOA) or Property Owner Association (POA) information required if subject property is under common ownership or request is to modify any aspect of the project that applies to the entire development (i.e. condition of approval, internal roadway, etc.).

**STAFF USE ONLY**

Intake Date: \_\_\_\_\_ OFMB Response Deadline: Three (3) weeks from Intake Date.