

Development Services Department Planning and Zoning Division 427 Biltmore Way Coral Gables, Florida 33134 (305) 460-5235

FINAL CERTIFICATE OF LANDSCAPE COMPLETION

Date:			Permit Number:					
Le	gal description: Lo	t	, Block	, Subdi	vision			
P.I	3	Page	·					
De	evelopment name:							
Lo	cated at:						_	
0	I hereby certify that the landscaping has been installed in compliance with the approved landscape plan, that all requirements of the City of Coral Gables Landscape Ordinance, in reference to trees, shrubs, irrigation have been met.							
0	If the permit's scope of work did not include the installation of landscaping, I hereby certify that the existing landscaping remains as noted on the approved plans, and no trees, shrubs, or other landscape material were removed or altered throughout the scope of work.							
				Seal:				
Ar	chitect or Landscap	be Architect	Signature (or Er		nly permits)			
La La La	ndscape Architect' ndscape Architect' ndscape Architect' ndscape Architect' ndscape Architect'	s address: s telephone i s e-mail add	number:			,		
	ATE OF FLORID IAMI-DADE	A COUNTY	OF					
He	e foregoing instrur s/she is personally l entification and did	known to me	or has produce	ore me this d Florida Driver'	day of s License No		, 20, by	 , as
	itness my signature oresaid, the date an			day of	, 20	, in the	County and	d State
				My	Commission	Expires:		
No	otary Public					1		
No	otary Public Print	ed Name						