



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

## WAIVER REQUEST FORM

I hereby request an inspection without the following  
\_\_\_\_\_ in place. I understand there is a  
\$60.00 charge for this service, and that I must call in another inspection  
when the \_\_\_\_\_ is installed.

Permit Number \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_  
Printed Name of Applicant  
**\*\*Qualifier/Owner/Builder**

\_\_\_\_\_  
Signature of Applicant  
**\*\*Qualifier/Owner/Builder**

\_\_\_\_\_  
Date

\_\_\_\_\_  
Applicant Email Address

Approved by: \_\_\_\_\_

\_\_\_\_\_  
Date