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Department of Planning

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P.O. Box 113
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KY1-9000
Cayman Islands

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ANCILLARY & TEMPORARY BUILDINGS / TENTS / CONTAINERS / STORAGE / GAZEBOS / CABANAS

APPLICANT INFORMATION

Name_____
Postal Address_____
KY1-_____
Phone _____
E-mail _____

AGENT INFORMATION

Name_____
Postal Address_____
KY1-_____
Phone _____
E-mail _____

LAND INFORMATION

Block [ ] **Parcel** [ ]

Describe any existing development on the site

_____

Describe surrounding land uses

_____

TYPE OF PROJECT

☐ **New Development** ☐ **After-the Fact**

☐ Ancillary Building
☐ Storage Shed
☐ Temporary Building
☐ Container
☐ Tent
☐ Gazebo/Cabana
☐ Tennis Court
☐ Other _____

PROJECT INFORMATION

Gross Floor Area Existing Building(s) _____sq.ft.
Footprint of Existing Building(s) _____ sq.ft.
Floor/Covered Area of Proposed Structure _____ sq.ft.

Is the structure Temporary or Permanent? _____
If temporary, indicate planned date of removal. _____
dd/mm/yy

What purpose will the structure be used for? _____

_____

TYPE OF CONSTRUCTION

Floor
☐ Concrete
☐ Wood
☐ Metal

Roof
☐ Standing Seam
☐ Asphalt
☐ Cement Tile
☐ Other _____

I hereby certify that the information provided is accurate, true and complete.
*Signature*_____*Date*_____

QUALIFICATIONS FOR REVIEW *

*Accepted By*_____

☐ Site Plan (4 Copies) indicating the proposed development(s) on the site, including setbacks.
☐ Elevations (2 Copies) (except shipping containers). For existing & similar new structures. Photographs may be acceptable.
☐ Proof of notice to all adjacent properties, except those applications related to a house or a duplex.
☐ Registry Map & Land Register (less than 60 days old) (1 Copy Each)
☐ Application Fee

Note that supplying these requirements does not guarantee approval or permit

COST OF DEVELOPMENT

Materials CI$_____
Labour CI$_____
Total CI$_____

For Official Use Only

*PLN Fee $*_____
Fee Rate _____
Fee Rate _____

File No. _____
Project No_____
Project No _____
Code Enforcement No(s)
_____

Date Stamp

Planning Fee Paid Stamp

Planning Approval Stamp