(Office Use) Permit #:	
HCP Training Date:	



St. Johns County Habitat Conservation Section 904-209-0619 North Beach Permit Application

	me:ldress:					
	lephone #:					
Tag #	Annual Pass #	Year	Make	Model	Color	
As the holder of the permit I agree to the following conditions:						
Initial:	-		step program that inclu a 4x4/All-Wheel Drive		-	
Initial:	I understand that, so it is visible.	at all times,	I will display my mag	netic placards and ora	nge hang tag	
Initial:	Lunderstand that the heaches of St. Johns County are important nesting habitat and that					
Initial:	I understand that, at all times, I shall take such precautions as may be necessary to avoid accident or collision with or injury to any persons, coastal wildlife, vegetation, or personal property.					
Initial:	I understand that soft sand and extreme tidal conditions may limit vehicle access; it shall be my responsibility to enter and exit according to the tides: • Access at high tide or mid-high tide is currently prohibited. • Vehicles must remain below the high tide line at all times.					
Initial:						
Initial:	violation to the S my permit.	t. Johns Cou	violation to the aforem nty Beach Code may le	ead to a citation and re	evocation of	
By signing	g below, I have reac	l and unders	tand the above-mentior	ned conditions of this	permit.	
Printed Name of Applicant		1	Date of Issuance			
S	Signature of Applic	ant				
Beach Access Authorized Signature			Expiration Date			

Print, sign, and make an appointment to meet at: Nease Beachfront Park HCP Field Office 3171 Coastal Hwy. St. Augustine, FL 32084