

**CITY OF OCALA**  
**SIDEWALK WAIVER REQUEST**  
**(ONLY APPLICABLE IN M-1, M-2 OR M-3 ZONES)**

---

**Date:** \_\_\_\_\_

**To:** City of Ocala Growth Management Department

**Project Name:** \_\_\_\_\_

**Project Address:** \_\_\_\_\_

**Request waiver of sidewalk construction requirements along:**

\_\_\_\_\_  
\_\_\_\_\_

**Reason for request:**

\_\_\_\_\_  
\_\_\_\_\_

**Approved:** \_\_\_\_\_ **Date:** \_\_\_\_\_  
Growth Management Director