

Building Permit Application

Department of Growth Management

November 2024

BUILDING PERMIT #:	CUSTOMER #:	
CHECK ONE: Commercial □ Residential		
Owner's Name:	Te	lephone #:
Owner's Address		Fax #:
O		
City:	State:2	Zip:
Contractor's Name:		Telephone #:
Contractor's E-mail Address:		Fax #:
Contractor's State Certification or Registratio Contractor's Certificate of Competency No:		
Contractor's Address:	Otata	7:
City:	State:	ZIP:
Architect/Engineer's Name:		
Architect/Engineer's Address:		
City:	State:	ZIp:
Job Name:		ZIP:
Parcel Identification Number (PIN):		
Height of Structure: No. o		
This is from outside of wall to outside of wall	and includes garages, carports, porch	es, balconies, lanais etc.)
(Plans Examiner use only)		_
Plans Accepted or Rejection	ted: (1st) (2nd)	(3rd)
Occupancy Type/Use Classification:		_ Group:
Construction Type: IA □ IB □ IIA □	IIB 🗆 IIIA 🗆 IIIB 🗀 IV 🗆	J VA□ VB□
Project is is not located in the	e Wind Borne Debris Region.	

Fee Simple Title holder's Name (if other than own Fee Simple Title holder's Address (if other than O City:	ner): wner's): State:	Zip:
Bonding Company Address:		
Bonding Company Address:City:	State:	Zip:
Mortgage Lender's Name:		
Mortgage Lender's Address:		
City:	State:	Zip:
Estimated Value: \$ (Cost of Construction Contract) Zoning District: Future Land Use: What is the current use of the existing building?	(For additi cor Flood Zone Designati	ons, remodels and repairs to ensure npliance with NFIP requirements) on:
What is the proposed use?		
Has the lot/parcel been split? Yes:□ No:□ If yes	s, when?	
Variance: Yes:□ No:□ If yes, when?	Special Exception: Yes: ☐ No: ☐ If yes, when?	
Parcel vacant? Yes:□ No:□	Easements on the property? Yes:□ No:□	
Parcel located on Tidal Water? Yes: $$ No: $$	Parcel located on Non-Tida	al Water? Yes:□ No:□
METAL ROOFS: Required Design Pressure	Design Pressure of propos	ed roof

NOTES:

- A) All construction in hazardous flood zones requires the submittal of Elevation Certificates at the following times:
 - At the time the building permit application is submitted (Construction Drawing EC)
 - Before vertical construction commences (Building Under Construction EC); and
 - When final inspections are requested (Finished Construction)

NOTE: Construction in the V Zone areas will require Elevation Certificates and V-Zone Design Certificates are required when application is submitted.

In addition to meeting the elevation requirements of the subject property's flood zone, residential finished floor elevations must also be constructed a minimum of 12" above the actual crown of the road abutting the subject property. If a residential structure is located in a non-hazardous flood zone, the finished floor elevation must be a minimum of 12' above the actual crown of the road abutting the subject property unless an exemption is granted by the County engineer pursuant to Section 6.02.03 of the Land Development Code.

- B) **Applications for Threshold Buildings** shall have Certifications by the Architect, Engineer and Contractor attached hereto as required by Florida Statutes.
- C) A certified survey or plot plan drawn to scale is attached hereto showing existing structures, new structures setbacks, easements etc.
- D) For all commercial & industrial projects, site plan review & approval is required from the Planning Division & other departments as deemed applicable. This does not apply to interior remodeling.
- E) The Building Code in effect as of the date of this application is the Florida Building Code 2023, which includes the Florida Energy Efficiency Code and the Florida Accessibility Code.

OWNER'S AFFIDAVIT

Name	Date	
STAFF ACCEPTANCE:		
Title or rank)	(Serial number, if any)	
	(Cartiel growth on 16 agra)	
(Signature of person taking acknowledgment)	(Name typed, printed or stamped)	_
personally known to me or who has produced identification.	as (type of identification)	
	(name of person acknowledging)	
The foregoing instrument was acknowledge	 ed before me by means of □ physical presence or	□ onlino
STATE OF		
NOTARY INFORMATION:		
Contractor/Owner	Date	
WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE PAYING TWICE FOR IMPROVEMENTS O OBTAIN FINANCING, CONSULT WITH YOR RECORDING YOUR NOTICE OF COMMES Signature	OF YOUR PROPERTY. IF YOU INTEND TO OUR LENDER OR AN ATTORNEY BEFO ENCEMENT.	ΓΟ
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Iaccurate and that all work will be done in coconstruction and zoning.	certify that all the foregoing info ompliance with all applicable laws regulating	rmation is ng
Application is hereby made to obtain a perr certify that no work, installation has comme work will be performed to meet the standard jurisdiction. I understand that a separate performed to meet a separate performed to meet the standard jurisdiction. I understand that a separate performed in the standard section is separated by the standard section.	enced prior to the issuance of a permit and ds of all laws regulating construction in this ermit must be secured for Electrical, Plum	that all s bing,