

NOTICE: THERE MAY BE ADDITIONAL RESTRICTIONS THAT ARE NOT RECORDED ON THIS PLAT THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY.

CITY OF SATELLITE BEACH BUILDING PERMIT APPLICATION

FAX #: 321-777-6619

JOB INFORMATION:

PROJECT NAME: _____

ADDRESS: _____ **COUNTY:** BREVARD

LEGAL DESCRIPTION: **TWP** ____ **RNG** ____ **SEC** ____ **SUB** ____ **BLK/PAR** ____ **LOT** ____
SUBDIVISION NAME: _____ **PLAT/BOOK PAGE:** _____

OWNER'S INFORMATION:

NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____

FEE SIMPLE TITLEHOLDERS (IF DIFFERENT THAN OWNER):

NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____

BONDING COMPANY INFORMATION:

NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____

MORTGAGE LENDER'S INFORMATION:

NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____

ARCHITECT/ENGINEER'S INFORMATION:

NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____

DESCRIPTION OF WORK: _____

_____ **VALUE OF CONSTRUCTION:** _____

OCCUPANCY GROUP: _____ CONSTRUCTION TYPE: _____ FLOOR AREA: _____

CONTRACTOR INFORMATION:

COMPANY NAME: _____ **EMAIL:** _____
QUALIFIER'S NAME: _____
ADDRESS: _____ **PHONE:** _____
CITY: _____ **STATE:** _____ **ZIP:** _____
STATE CERTIFICATION OR REGISTRATION NO.: _____
CERTIFICATE OF COMPETENCY NO.: _____

IT IS THE APPLICANT'S RESPONSIBILITY TO OBTAIN ALL REQUIRED INSPECTIONS.

SUBCONTRACTOR'S INFORMATION:

ELECTRICAL CONTRACTOR: _____ CERT. # _____
ADDRESS: _____ PHONE # _____

PLUMBING: _____ CERT. # _____
ADDRESS: _____ PHONE # _____

HARV: _____ CERT. # _____
ADDRESS: _____ PHONE # _____

GAS: _____ CERT. # _____
ADDRESS: _____ PHONE # _____

ROOFING: _____ CERT. # _____
ADDRESS: _____ PHONE # _____

DRYWALL: _____ CERT. # _____
ADDRESS: _____ PHONE # _____

APPLICANT'S AFFIDAVITS

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS INDICATED. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO ISSUANCE OF A PERMIT AND THAT ALL WORK WILL BE PERFORMED TO MEET THE STANDARDS OF ALL LAWS REGULATING CONSTRUCTION IN THIS JURISDICTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE OBTAINED FOR ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, WINDOWS AND AIR CONDITIONERS, ETC.

APPLICANT HEREBY CERTIFIES THAT ALL SUBCONTRACTORS ARE PROPERTY LICENSED AND INSURED.

OWNER AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

WARNING TO OWNERS: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ANY ATTORNEY BEFORE YOUR NOTICE OF COMMENCEMENT.

CERTIFIED NOTICE OF COMMENCEMENT IS REQUIRED ON FILE IN THIS OFFICE FOR ALL WORK VALUED AT \$2,500.00 OR MORE. HVAC REQUIREMENT IS \$7,500.00 OR MORE.

PROPERTY OWNER'S/
AGENT'S SIGNATURE:

CONTRACTOR'S SIGNATURE:

Sworn to and subscribed before me this _____ day of _____ 20____
by _____
who is personally known to me or has produced _____ as identification

Sworn to and subscribed before me this _____ day of _____ 20____
by _____
who is personally known to me or has produced _____ as identification.

Notary Public

Notary Public

APPLICATION APPROVED BY: _____ DATE: _____ FEE: _____