



## Commercial Building Permit Application

Application/Permit #: \_\_\_\_\_

PROJECT TYPE: \_\_\_\_\_ NEW CONSTRUCTION \_\_\_\_\_ ADDITION \_\_\_\_\_ ALTERATION/REMODEL

Property Owner: \_\_\_\_\_ Owner's Phone #: \_\_\_\_\_

Subdivision: \_\_\_\_\_ Flood Zone : \_\_\_\_\_

STRAP #: \_\_\_\_\_ Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Unit: \_\_\_\_\_

Address of Job: \_\_\_\_\_

\*Occupancy Class:  
 \*Required field.

Owner/Builder \_\_\_\_\_ YES \_\_\_\_\_ No **\*\*If acting as Owner Builder/Owner Builder AFFIDAVIT required\*\***

Contracting Company's Name: \_\_\_\_\_

Contracting Company's Address: \_\_\_\_\_

Qualifier's License #: \_\_\_\_\_ Phone #: \_\_\_\_\_

Email Address: \_\_\_\_\_

Current Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Construction Type per Table 601 FBC (select one):  IA  IB  IIA  IIB  IIIA  IIIB  IV  VA  VB

Description of Work: \_\_\_\_\_

Est. Construction Cost: \$ \_\_\_\_\_ If over \$2,500 an NOC is required (If Mechanical work over \$7,500)

### JOB INFORMATION

<u>Work Area for each Trade</u>	<u>Add/Alt</u>	<u>New</u>	Elec. Amps: _____ Volts: _____
Est. Building Area (SF): _____	_____	_____	Existing Fire Sprinkler System? <input type="checkbox"/> Yes <input type="checkbox"/> No
Est. A/C Work Area (SF): _____	_____	_____	Existing Fire Alarm System? <input type="checkbox"/> Yes <input type="checkbox"/> No
Est. Plum. Work Area (SF): _____	_____	_____	<input type="checkbox"/> Water <input type="checkbox"/> Well <input type="checkbox"/> Septic <input type="checkbox"/> Sewer
Occupant Load: _____	_____	_____	Roof Type: _____
			Opening Protection: ___ Shutters ___ Impact Glass

**\*\*\*PLANS MUST INCLUDE CONSTRUCTION TYPE AND OCCUPANCY CLASS. MAXIMUM SIZE OF PLANS ACCEPTED FOR REVIEW IS 24 X 36.**

**ALL COMMERCIAL SUBMITTALS MUST COME WITH DIGITAL COPY OF PLANS (CD/DVD OR THUMB DRIVE).\*\*\***

THIS PERMIT IS VOID IF THE FIRST INSPECTION IS NOT MADE WITHIN SIX (6) MONTHS FROM THE DATE ISSUED OR IF NO INSPECTION HAS BEEN MADE FOR A PERIOD OF SIX (6) MONTHS FROM THE MOST RECENTLY PASSED INSPECTION. THE PERMIT IS VOID IF THE ZONING CLASSIFICATION IS VIOLATED. APPLICANT AGREES TO COMPLY WITH THE SANITARY REGULATIONS AND UNDERSTANDS THAT THE PROPOSED STRUCTURE MAY NOT BE USED OR OCCUPIED UNTIL AN APPROVED CERTIFICATE OF OCCUPANCY IS ISSUED. APPLICANT FURTHER UNDERSTANDS THAT FAILURE TO OBTAIN PERMIT OR MISREPRESENTATION OF THE IMPROVEMENTS IS A MISDEMEANOR AND UPON CONVICTION, APPLICANT CAN BE PUNISHED AS PROVIDED BY THE LAW. FAILURE TO COMPLY WITH THE MECHANICS LIEN LAW CAN RESULT IN THE PROPERTY OWNER PAYING TWICE FOR THE IMPROVEMENTS.





**MORTGAGE LENDER'S ADDRESS:**

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 the 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 secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

**NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county and there may be additional permits required from other governmental entities such as water management districts, state, or federal agencies.

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING A NOTICE OF COMMENCEMENT.**

\*\*\*Notarized Signature of Owner required only if Contractor is **NOT** acting as Owner/Agent\*\*\*

\_\_\_\_\_  
Contractor/Qualifier Name (Print)

\_\_\_\_\_  
Owner/Owner Agent (Print)

\_\_\_\_\_  
Contractor/Qualifier Signature

\_\_\_\_\_  
Owner/Owner Agent Signature

Notary Seal:

Notary Seal:

State of \_\_\_\_\_

State of \_\_\_\_\_

County of \_\_\_\_\_

County of \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me

Sworn to (or affirmed) and subscribed before me

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

By: \_\_\_\_\_

By: \_\_\_\_\_

\_\_\_\_\_  
Notary Signature

\_\_\_\_\_  
Notary Signature

Type of Identification Produced \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

