

City of Seminole 9199 113th Street N. Seminole, FL 33772 (727) 392-1966

8th Edition FBC Permit Application

3 Pages

Waste Pro is the franchise collection service for all properties in our City. Waste Pro at 727-452-5278 must be used for ALL your project waste needs.

VALUATION OF JOB \$	SQ. FT		PERMIT #_			
PROJECT/JOB SITE ADDRESS						
PARCEL #LEG		AL DESCRIPTION		CITY SEMINOLE CO	CITY SEMINOLE COUNTY PINELLAS	
CONTRACTOR COMPANY NAME						
STATE LICENSE #		PCCLB LICE	NSE #			
ADDRESS		CITY, STA	те	ZIP_		
CONTACT PERSON		CONTRA	ACTOR EMAIL			
PH #	CELL #		FAX #	i <u> </u>		
PROPERTY OWNER NAME			PH#	CELL #		
PROPERTY OWNER ADDRESS			OWNER EN	//AIL		
ARCHITECT/ENGINEER'S NAME						
ARCHITECT/ENGINEER'S ADDRESS				EMAIL		
PHONE #CONTAC	T PERSON			LICENSE #		
FEE SIMPLE TITLE HOLDER (IF OTHER THAN O	WNER)			PH#		
FEE SIMPLE TITLE HOLDER ADDRESS (IF OTH	ER THAN OWNER)			_ CITY, STATE		
MORTGAGE LENDER NAME	PH#	ADDRESS		CITY, STATE	ZIP	
BONDING COMPANY	PH#	ADDRESS		CITY, STATE	ZIP	
TYPE OF WORK:NEV	VADDITION	ALTERATION _	REPAIR	MOVEDEMOLITION	l	
DESCRIPTION OF WORK:						

<u>Owners Affidavit</u>: I certify that all foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

F.S. 713 Notice of Commencement: Warning to Owner: 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 an attorney before recording your Notice of Commencement. A Notice of Commencement must be recorded and posted on the job site before the first inspection.

Application is hereby made to obtain a permit to do the work and installation 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 all work not provided on this application. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

105.1 Permit Application of the Florida Building Code

105.1 When Required, any owner, authorized agent, or contractor who desires to construct, enlarge, alter, repair, move, demolish, or change the occupancy or occupant content of a building or structure, or any outside area being used as part of the building's designated occupancy (single or mixed) or to erect, install, enlarge, alter, repair, remove, convert or replace any electrical, gas, mechanical, or plumbing system, the installation of which is regulated by the technical codes, or to cause any such work to be done, shall first make application to the Building Official and obtain a permit for the work.

<u>109.1 Permit Fees.</u> A permit shall not be valid until the fees prescribed by law have been paid, not shall an amendment to a permit be released until the additional fee, if any, has been paid.

SUBCONTRACTOR LIST:

ELECTR	ICAL		ADDRESS	
	LICENSE #	PHONE	EMAIL	
МЕСНА	NICAL		ADDRESS	
	LICENSE #	PHONE	EMAIL	
PLUMB	ING		ADDRESS	
	LICENSE #	PHONE	EMAIL	
GAS			ADDRESS	
	LICENSE #	PHONE	EMAIL	
ROOFIN	NG		_ADDRESS	
	LICENSE #	PHONE	EMAIL	
OTHER _.			ADDRESS	
	LICENSE #	PHONE	EMAIL	
OTHER _.			ADDRESS	
	LICENSE #	PHONE	EMAIL	
OTHER_			ADDRESS	
	LICENSE #	PHONE	EMAIL	
OTHER _.			ADDRESS	
	LICENSE #	PHONE	EMAIL	
OTHER_			ADDRESS	
	LICENSE #	PHONE	FMAII	

Waste Pro is the franchise collection service for all properties in our City. Waste Pro at 727-452-5278 must be used for ALL your project waste needs.

IF YOUR PROPERTY IS LOCATED IN A FLOOD ZONE, YOU MAY BE REQUIRED TO SUBMIT A SEALED SURVEY AND AN ELEVATION CERTIFICATE

A SURVEY MAY BE REQUIRED FOR ALL FENCES, DRIVEWAYS, ADDITIONS AND POOLS. AN ORIGINAL OR CERTIFIED COPY OF NOTICE OF COMMENCEMENT IS REQUIRED ON ALL JOBS OF \$5,000.00 OR GREAER IN VALUE, WITH THE EXCEPTION OF MECHANICAL PERMITS \$15,000.00 OR GREATER, AND MUST BE PROVIDED PRIOR TO FIRST INSPECTION.

F.S. 553.79 (10). 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 this County, and there may be additional permits required from other governmental entities such as water management districts, State agencies, or Federal agencies

DEMOLITION/ASBESTOS REMOVAL-CALL 464-4422

F. S. Statue 469 requires notification to the Department of Environmental Protection of your intentions to remove asbestos, in conjunction with the demolition or renovation of your existing building, in accordance with State and Federal law.

PLEASE BE AWARE THAT YOU MAY LIVE IN A DEED RESTRICTED COMMUNITY, OR A COMMUNITY WITH A HOMEOWNERS ASSOCIATION; YOU ARE REMINDED TO CHECK TO ENSURE YOU COMPLY WITH THE RULES AND REGULATIONS OF THE COMMUNITY/ASSOCIATION. THE CITY OF SEMINOLE IS NOT RESPONSIBLE FOR THE ENFORCEMENT OF THE COMMUNITY/ASSOCIATION RULES AND REGULATIONS. The issuance of this permit does not ensure compliance with Deed Restrictions and I understand that additional Deed Restrictions may apply to this property.

I have read, understand, and do hereby certify that the above-listed subcontractors are to be utilized on this project. Should there be any changes, I will notify the City of Seminole Building Division, in writing, immediately. Failure to do so shall be cause for revocation of this building permit.

I have read the notification and agree to comply as stated and promise in good faith to deliver this statement to the person whose property is subject to attachment. I hereby certify that all statements made in this application are true and correct and that no construction has begun, except as otherwise has been disclosed, before the permit for this work has been issued.

SIGNATURE OF OWNER OR AGENT DATE	SIGNATURE OF CONTRACTOR DATE				
PRINTED NAME OF OWNER OR AGENT	PRINTED NAME OF CONTRACTOR				
STATE OF FLORIDA COUNTY OF PINELLAS	STATE OF FLORIDA COUNTY OF PINELLAS				
The foregoing instrument was acknowledged before me by means	The foregoing instrument was acknowledged before me by means				
ofphysical presence or online notarization this day	ofphysical presence or online notarization this day				
of, 20, by	of, 20, by				
SEAL Signature of Notary Public, State of Florida	SEAL Signature of Notary Public, State of Florida				
Print/Type/Stamp Name of Notary Public	Print/Type/Stamp Name of Notary Public				