



PERMIT # | | | | | | | | | |

Received By: _____

VILLAGE OF INDIANTOWN, FLORIDA

CONSTRUCTION PERMIT APPLICATION

Application must be typed or printed legibly in ink. Complete all applicable fields.

PROJECT IDENTIFICATION

Parcel ID NUMBER _____ DATE OF APPLICATION ____/____/____

ADDRESS _____ Flood Zone _____

PROJECT NAME _____ CONTACT _____

PROJECT CONTACT PHONE (____) _____ - _____ E-MAIL ADDRESS _____

PROPERTY OWNERSHIP DETAILS

FULL LEGAL NAME, AGENCY, OR BUSINESS _____

MAILING ADDRESS _____

OWNER CONTACT PHONE (____) _____ - _____ OWNER E-MAIL ADDRESS _____

DESCRIPTION OF WORK

Building ____ Electric ____ Plumbing ____ Mechanical ____

LICENSED CONTRACTOR

FLORIDA DESIGN PROFESSIONAL

COMPANY NAME _____ LICENSE # _____ COMPANY NAME _____

NAME (QUALIFYING AGENT) _____ NAME _____ LICENSE # _____

ADDRESS _____ ADDRESS _____

PHONE _____ PHONE _____

E-MAIL ADDRESS _____ E-MAIL ADDRESS _____

For demolition / renovation projects involving a commercial, institutional or industrial structure or apartment building of more than four dwelling units, the following provisions are applicable:
I. Renovation: Is asbestos present? Yes ____ No ____
Mandatory Action: If asbestos is subsequently discovered, then the applicant shall immediately provide notice to the DEP and amend this application.
II. Demolition: All applicants must provide Notice to DEP regardless of whether asbestos is present.

CONSTRUCTION VALUE OF WORK

Building Cost \$ _____ Electrical Cost \$ _____ Plumbing Cost \$ _____ Mech. Cost \$ _____ Total Cost \$0 _____

Number of Stories _____ Building Height _____
Total Floor Area (SF) _____ Enclosed _____ Unenclosed _____
Number of Gas Fixtures _____ Number of Plumbing Fixtures _____
Number of Parking Spaces _____ Number of Accessible Parking Spaces _____

Occupancy Classification _____ Occupancy Capacity: _____ Business Type: _____

PRODUCT APPROVAL

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and product approval number(s) for the building components listed below as applicable to the building construction project for the permit number listed above. You should contact your product supplier if you do not know the product approval number for any of the applicable listed products. Information regarding statewide product approval may be obtained at: <http://www.floridabuilding.org>.

Category/Subcategory	Manufacturer	Model No.	U Factor	SHGC	Product Approval #	Attachment Detail
EXTERIOR DOORS						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
WINDOWS						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
PANEL WALL						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
SHUTTERS						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
ROOFING PRODUCTS						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
STRUCTURAL COMPONENTS						
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

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.

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. I will not occupy or use the referenced building, or any part thereof, until all inspections are final and obtain a certificate of occupancy issued by the building official, as required by law.

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 WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

SIGNATURE OF OWNER

DATE

SIGNATURE OF CONTRACTOR

DATE

SWORN TO (or affirmed) and subscribed before me this _____ day _____, _____ by _____

Personally known to me or who has produced _____ as identification. _____

Notary Public, State of Florida