BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Select One Trade:	Building	Electrical	Plun	nbing	Mechanical	Other _		
Application Number: Application Date:								
Job Address:				Unit:	City:			
Tax Folio No.:		Flood Zn:	_ BFE:	Floor Area	a:	Job Val	ue:	
Building Use:				Construction T	ype:	_ Occup	pancy Group:	
Present Use:				Proposed	Use:			
Description of Wor	k:							
New	Addition	Repair	Alteration	Demo	lition Rev	vision	Other:	
Legal Description:							Attach	ment
			Phone:		Email: _			
Owner's Address: _				City:		State:	Zip:	
Contracting Co.:			Phone:		Email:			
Company Address:				City:		State:	Zip:	
Qualifier's Name:					Owner-Builder	License Num	ıber:	
Architect/Engineer's	Name:		Ph	none:		Email:		
Architect/Engineer's	Address:			City:		State: _	Zip:	
Bonding Company:								
Bonding Company's	Address:			City:		State: _	Zip:	
Fee Simple Titleholder's Name (If other than the owner)								
Fee Simple Titlehold (<i>If other than</i>	er's Name the owner)			City:		State: _	Zip:	
Mortgage Lender's	Name:							
Mortgage Lender's Ad	ldress:			City:		State:	Zip:	

Job Address: _____

BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Unit: _____ City: ____

has commenced prior to the issuance of a permit and that all wo	nd installations as indicated. I certify that no work or installation ork will be performed to meet the standards of all laws regulating permit must be secured for ELECTRICAL WORK, PLUMBING, 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.							
PAYING TWICE FOR IMPROVEMENTS TO YOUR PR RECORDED AND POSTED ON THE JOB SITE BEFORE	NOTICE OF COMMENCEMENT MAY RESULT IN YOUR OPERTY. A NOTICE OF COMMENCEMENT MUST BE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN AN ATTORNEY BEFORE COMMENCING WORK OR						
x	x						
Signature of Property Owner or Agent (Including Contractor)	Signature of Qualifier						
STATE OF FLORIDA COUNTY OF	STATE OF FLORIDA COUNTY OF						
Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of	Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of						
, 20 by	, 20 by						
(Type/Print Property Owner or Agent Name)	(Type/Print Qualifier or Agent Name)						
NOTARY'S SIGNATURE as to Owner or Agent's Signature	NOTARY'S SIGNATURE as to Qualifier or Agent's Signature						
Notary Name(Print, Type or Stamp Notary's Name)	Notary Name(Print, Type or Stamp Notary's Name)						
Personally Known Produced Identification	Personally Known Produced Identification						
Type of Identification Produced	Type of Identification Produced						
APPROVED BY: Permit Officer Issue Date	: Code in Effect: FOR OFFICE USE ONLY FOR OFFICE USE ONLY						

A jurisdiction may use a supplemental page requesting additional information and citing other conditions, please inquire.

Note: If any development work as described in FS 380.04 Sec. 2 a-g is to be performed, a development permit must be obtained prior to the issuance of a building permit.