

TOWN OF LAKE CLARKE SHORES
1701 BARBADOS ROAD
LAKE CLARKE SHORES FL
33406 (561) 964-1515 EXT. 14

Revised 05/2018

BUILDING PERMIT APPLICATION

Application is hereby made for a permit to erect/alter a structure as described herein or shown in accompanying plans and specifications, which structure is to be located as shown on the plot plan. The following information and the accompanying plans and specifications with the representations contained therein are made a part of this application in reliance upon which the Building Official is requested to issue a building permit. It is understood and agreed by applicant that any error, misstatement or misrepresentation or expression of fact, either with or without intention on the part of applicant, such as might or would operate to cause a refusal of this application, or any material alteration or change in the accompanying plans, specifications or structure made subsequent to the issuance of a permit in accordance with this application, without the approval of the Building Official, shall constitute sufficient ground for the revocation of the permit. In consideration of granting this permit, applicant agrees; (1) To install approaches, turnouts, driveways, and aprons at such elevations as established by the engineer; (2) To cause all lots to be surveyed and staked prior to commencement to any construction; (3) To provide adequate sanitary toilet facilities for workmen prior to the commencement of any construction; (4) To complete the erection/alteration in accordance with the plans and specifications, the representations contained herein, and the Building, Plumbing, and Electrical Code and other applicable requirements; (5) To comply with provisions of the Florida of the date of issuance. No structure shall be occupied prior to the issuance of a Certificate of Occupancy, which shall be issued upon request after the final inspection by the Building Official.

WARNING TO OWNER:

FAILURE TO RECORD A NOTICE OF COMMENCEMENT AND SUBMIT A COPY WITH THE PERMIT APPLICATION PRIOR TO PERMIT ISSUANCE MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.

Address of Job: _____

Owner: _____

Contractor: _____ Address: _____

Engineer/Architect: _____ Phone Number: _____

Description of Work: _____

Date of Application _____ Value: \$ _____

Note: The permit issued will be void after 180 days, unless the work that it covers has been commenced. All contractors must have a valid business tax receipt for their business location, state or county certificate of competency and proof of insurances prior to obtaining permits. Drawings, specifications, plot plans, etc. must be provided in duplicate when submitting application.

*** * * ISSUANCE OF A PERMIT DOES NOT AUTHORIZE VIOLATION OF DEED RESTRICTIONS * * ***

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 approved permit being posted on the job site and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

The undersigned hereby certifies that the above information is true and correct.

Signature of Qualifier _____ Print name _____ Phone # _____

Permit Service Company (if applicable) _____ Phone # _____

State of Florida _____ (Notary required if signed outside of Town Hall Office)
County of _____

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

Notary Public-State of Florida at Large _____ Seal: _____

OFFICE USE ONLY:

Permit fee \$ _____ Radon Gas \$ _____ SURCHARGE \$ _____ Plan Review \$ _____ Total \$ _____

Check # _____ Credit _____ Cash _____ Date paid _____ Receipt # _____

BUILDING OFFICIAL USE ONLY:

Permit # Issued _____ Approved by _____ Date _____