## BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Revised 11-17-2022

Select One Trade: Building Electrical		al Plumbi	ng Mechan	ical Othe	er			
Арр	Application Number: Application Date:							
	Job Address:				Unit:	0	City:	
1	Tax Folio No.:			Flood Zn:	BFE:	Floor Area:	、	Job Value:
	Building Use:		Construction Type:		Occupancy Group:			
	Present Use:				Proposed Used:			
	Description of Work:							
	New	Addition	Repair	Alteration	Demolition	Revision	Other	:
	Legal Description:							Attachment
2	Property Owner:			Phone:		_ Email:		
	Owner's Address:				City:		State:	Zip:
3	Contracting Co.:			Phone:		_ Email:		
	Company Address:				City:		State:	Zip:
	Qualifier's Name:				Owner-Builder	License Numbe	er:	
	Architect/Engineer's	s Name:			Phone:	E	Email:	
4	Architect/Engineer's	s Address:			City:		State:	Zip:
	Bonding Company:							
	Bonding Company's	s Address:			City:		State:	Zip:
	Fee Simple Titleholder's Name ( <i>If other than the owner</i> )							
	Fee Simple Titlehol (If other than the ov				City:		State:	Zip:
	Mortgage Lender's	Name:						
	Mortgage Lender's	Name:			City:		State:	Zip:

## See next page.

## **BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION**

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.

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 COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

X Signature of Property Owner or Agent (Including Contractor)	XSignature of Contractor
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, 20 by	Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this day of, 20 by
(Type/Print Property Owner or Agent Name)	(Type/Print Property Owner or Agent Name)
NOTARY'S SIGNATURE as to Owner or Agent's Signature	NOTARY'S SIGNATURE as to Qualifier'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.