



City of PALM COAST

Community Development Department

Building Permit Application Rev 9/16

160 Lake Avenue
Palm Coast, FL 32164
Office: 386-986-3780
Inspection: 386-986-4747

Permit # _____

Detailed description of proposed work:	Estimated Value:
	Florida Green Building <input type="checkbox"/> Yes <input type="checkbox"/> No

Property Owners Name: _____ Telephone: _____

Mailing Address: _____

Email Address: _____ Fax number: _____

Licensed Contractor Name (must sign the application) _____

Business Name _____

Mailing Address: _____

License # (of name listed above) _____ Telephone _____

Email Address: _____ Fax Number: _____

Job Location / Address	Legal Description / Parcel Number

Sub-Contractor Type	Name	Phone Number	License Number

Organization	Name	Address
Bonding Company		
Architect/Engineer		
Mortgage Lender		

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.

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

Signature of Property Owner

OR Signature of Contractor required if identified above

X _____ sworn to and subscribed (**affirmed**) before me this _____ day of _____ in the year _____

by _____
(Printed name of affiant)

Personally Known ___ or Produced ID _____

Type of Identification: _____

Notary Public Signature

X _____ sworn to and subscribed (**affirmed**) before me this _____ day of _____ in the year _____

by _____
(Printed name of affiant)

Personally Known ___ or Produced ID _____

Type of Identification: _____

Notary Public Signature

