

BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Mark one of the boxes below to identify the discipline this application pertains to

Select One Trade: Building Electrical Plumbing Mechanical Other _____

Application Number: *Fill in your permit number (same as application number)* Application Date: *Fill in today's date*

| | | | |
|--|-----------|--|---|
| Job Address: <i>Fill in the address where the work is done</i> | | Unit: | City: <i>Tamarac</i> |
| Tax Folio No.: | Flood Zn: | BFE: | Floor Area: <i>total sqft of the job</i> Job Value: <i>Indicate whether the amount is per discipline or the total cost of the job</i> |
| Building Use: | | Construction Type: | |
| Occupancy Group: | | | |
| 1 Present Use: <i>Required only for commercial job with safety</i> | | Proposed Used: <i>Required only for commercial job with safety</i> | |
| Description of Work: <i>Fill in the work to be done as detailed as possible</i> | | | |
| <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Revision <input type="checkbox"/> Other: | | | |
| Legal Description: | | | <input type="checkbox"/> Attachment |
| 2 Property Owner: <i>Fill in the property owner's information</i> | | Phone: | Email: <i>If the property owner doesn't have email, please put "none"</i> |
| Owner's Address: <i>all fields are required</i> | | State: | Zip: |
| 3 Contracting Co.: <i>Fill in the contractor's information,</i> | | Phone: | Email: |
| Company Address: <i>all fields are required</i> | | City: | State: Zip: |
| Qualifier's Name: <i>all fields are required</i> | | Owner-Builder: <input type="checkbox"/> | License Number: |
| 4 Architect/Engineer's Name: <i>Not required</i> | | Phone: | Email: |
| Architect/Engineer's Address: | | City: | State: Zip: |
| Bonding Company: | | | |
| Bonding Company Address: | | City: | State: Zip: |
| Fee Simple Titleholder's name (if other than owner): | | | |
| Fee Simple Titleholder's Address (If other than owner): | | City: | State: Zip: |
| Mortgage Lender's Name: | | | |
| Mortgage Lender's Address: | | City: | State: Zip: |

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 *Property owner's signature is not required*

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

(Type / Print Property Owner or Agent Name)

NOTARY'S SIGNATURE as to Owner or Agent's Signature

Notary Name _____
(Print, Type or Stamp Notary's Name)

Personally Known _____ or Produced Identification _____

Type of Identification Produced _____

X *Qualifier's Signature*

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

(Type / Print Qualifier's Name)

NOTARY'S SIGNATURE as to Qualifier's Signature

Notary Name _____
(Print, Type or Stamp Notary's Name)

Personally Known _____ or Produced Identification _____

Type of Identification Produced _____

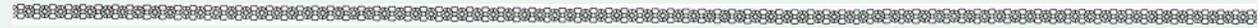
Notary only

APPROVED BY: _____ Permit Officer Issue Date: _____ Code in Effect: _____

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.

FLORIDA JURAT

FS 117.05(13) — Effective January 1, 2020



State of Florida }
County of _____ }

Sworn to (or affirmed) and subscribed before me by means of

Physical Presence,

— OR —

Online Notarization,

This _____ day of _____, by _____
Day Month Year

Notary only
Name of Person Swearing or Affirming

Signature of Notary Public — State of Florida

page

Name of Notary Typed, Printed or Stamped

Personally Known

Produced Identification

Type of Identification Produced: _____

OPTIONAL

Completing this information can deter alteration of the document or fraudulent reattachment of this form to an unintended document.

Description of Attached Document

Title or Type of Document: _____

Document Date: _____ Number of Pages: _____

Signer(s) Other Than Named Above: _____

