Town of Pierson
106 N. Center Street
Pierson, FL 32180
(386) 749-2261 Phone
(386) 749-3239 Facsimile
(855) 445-7630 Inspection Line
www.townofpierson.org

Permit Number: _____

PERMIT APPLICATION

APPLICATION MUST BE FILLED OUT COMPLETELY

SAFEbuilt.

I. PROJECT LOCATION/FACILITY INFORMATION

PROJECT NAME	
ADDRESS	
SUBDIVISION/FACILITY NAME	LOT / UNIT#
TAX FOLIO # / PARCEL #	ZONING DISTRICT
LEGAL DESCRIPTION	

II. IDENTIFICATION

A. OWNER OR LESSEE

NAME	EMAIL ADDRESS	FAX NO.	
		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE

B. BONDING/MORTGAGE NAMES

Fee Simple Titleholder, Bonding Company, Mortgage Lender and Design Professional information is required when the aggregate value (total cost of all improvements and not just work authorized by the individual permit) is $2,500 or more (except HVAC repair/replacement < $7,500).

NAME ADDRESS, CITY, STATE & ZIP TELEPHONE NO.

FEE SIMPLE TITLEHOLDERS (IF OTHER THAN OWNER) ☐ SAME AS OWNER

BONDING COMPANY ☐ NOT APPLICABLE

MORTGAGE LENDERS ☐ NOT APPLICABLE

DESIGN PROFESSIONAL LICENSE #

C. CONTRACTORS

PRIMARY CONTACT EMAIL ADDRESS				PRIMARY CONTACT CELL PHONE NO.		
LICENSE #	TYPE	COMPANY NAME	ADDRESS, CITY, STATE & ZIP	TELEPHONE NO.	EMAIL ADDRESS	
GENERAL						
PLUMBING						
GAS						
ELECTRICAL						
HVAC						
OTHER						

III. TYPE OF IMPROVEMENT

☐ NEW BUILDING	☐ RELOCATION	☐ MANUFACTURED	☐ SHELL	☐ DECK
☐ ADDITION	☐ REPAIR	☐ MOBILE HOME SET-UP	☐ TENANT SPACE	
☐ ACCESSORY STRUCTURE	☐ ALTERATION	☐ DEMOLITION		
☐ POOL/SPA:	☐ IN-GROUND	☐ ABOVE GROUND		

☐ OTHER _____ **ESTIMATED COST OF CONSTRUCTION**: $_____

A. WORK DESCRIPTION (Residential and Non-Residential Projects)

Provide a description of the work to be covered by the permit. As examples; 20,000 sq. ft. office building, building a 2,300 sq. ft. office addition, replace 5 exterior windows, renovate kitchen. etc.

B. DIMENSIONS/DATA

BASIC USAGE: ☐ RESIDENTIAL ☐ COMMERCIAL ☐ INDUSTRIAL ☐ MUNICIPAL

CONSTRUCTION AREA: TYPE OF CONSTRUCTION: ☐ IA ☐ IB ☐ IIA ☐ IIB ☐ IIIA ☐ IIIB ☐ IV ☐ VA ☐ VB

CONDITIONED _____ S.F. ELECTRICAL SERVICE: PHASE _____ SIZE _____ AMPS _____ ☐ OVERHEAD ☐ UNDERGROUND

GARAGE _____ S.F. MECHANICAL (HVAC): ☐ GAS ☐ ELECTRICAL

OTHER _____ S.F. WATER SUPPLY : ☐ MUNICIPAL ☐ PRIVATE WELL

TOTAL AREA: _____ S.F. SEWAGE DISPOSAL : ☐ MUNICIPAL ☐ SEPTIC SYSTEM

IV. OWNER'S AFFIDAVIT / NOTICE OF COMMENCEMENT

Application is hereby made to obtain a permit to perform work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a building 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 & AIR CONDITIONERS, etc. The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit. Failure to comply may result in suspension or revocation of this permit or other penalty. Applicant understands that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency, or Inspector.

To schedule an inspection, have the permit number and address ready and call 1-855-445-7630 or email floridainspections@safebuilt.com.

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 in this jurisdiction.

713.135, FS: 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 RECORDING YOUR NOTICE OF COMMENCEMENT.

FS 553.79(10), FS: NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

STATE OF FLORIDA COUNTY OF _____

_____
(Signature of Owner or Agent)

Sworn to (or affirmed) and subscribed before me this _____ day of _____, _____, by _____
(Name of person making statement)

Personally Known____ OR
Produced Identification ____
Type of Identification Produced: _____

_____
(Signature of Notary Public-State of Florida)

_____
(Print, Type or Stamp Commissioned Name of Notary Public)

STATE OF FLORIDA COUNTY OF _____

_____
(Signature of Contractors)

Sworn to (or affirmed) and subscribed before me this _____ day of _____, _____, by _____
(Name of person making statement)

Personally Known____ OR
Produced Identification ____
Type of Identification Produced: _____

_____
(Signature of Notary Public-State of Florida)

_____
(Print, Type or Stamp Commissioned Name of Notary Public)

V. CERTIFICATE OF COMPETENCY HOLDER

Contractor's State Certification or Registraion No. _____

Contractor's Certification of Competency No. _____

APPLICATION APPROVED BY : _____ DATE : _____
(Building Official/Permit Official)