



Town of Pierson
 106 N. Center Street
 Pierson, FL 32180
 (386) 749-2661 Phone
 (386) 749-3239 Facsimile
 (855) 445-7630 Inspection Line
www.townofpierson.org

Permit Number: _____

PERMIT APPLICATION
 APPLICATION MUST BE FILLED OUT COMPLETELY



| 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 | | EMAIL ADDRESS | | FAX NO. |
| NAME | | | 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) | | <input type="checkbox"/> SAME AS OWNER | | |
| BONDING COMPANY <input type="checkbox"/> NOT APPLICABLE | | | | |
| MORTGAGE LENDERS <input type="checkbox"/> 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. |
| GENERAL | | | | |
| PLUMBING | | | | |
| GAS | | | | |
| ELECTRICAL | | | | |
| HVAC | | | | |
| OTHER | | | | |
| III. TYPE OF IMPROVEMENT | | | | |
| <input type="checkbox"/> NEW BUILDING | <input type="checkbox"/> RELOCATION | <input type="checkbox"/> MANUFACTURED | <input type="checkbox"/> SHELL | <input type="checkbox"/> DECK |
| <input type="checkbox"/> ADDITION | <input type="checkbox"/> REPAIR | <input type="checkbox"/> MOBILE HOME SET-UP | <input type="checkbox"/> TENANT SPACE | |
| <input type="checkbox"/> ACCESSORY STRUCTURE | <input type="checkbox"/> ALTERATION | <input type="checkbox"/> DEMOLITION | | |
| <input type="checkbox"/> POOL/SPA: | <input type="checkbox"/> IN-GROUND | <input type="checkbox"/> ABOVE GROUND | | |
| <input type="checkbox"/> 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 Registration No. _____

Contractor's Certification of Competency No. _____

APPLICATION APPROVED BY : _____

DATE : _____

(Building Official/Permit Official)