

BUILDING PERMIT APPLICATION Commercial & Residential



Permit #: _____ Application Date: _____

Site Address: _____ Parcel #: _____

NEW SINGLE-FAMILY HOMES

Stories/Street Side: _____ Bedrooms: _____ Bathrooms: _____ Living Sq. Ft. _____ Total Sq. Ft. _____

Meter Size: _____ Construction Type: _____ Occupancy Group: _____

Type of Termite Treatment: Soil Treatment _____ Bait System (Signed Contract Required) _____ Wood Treatment _____
(reference: R318.1)

Application is hereby made to obtain a permit to do work and installations as indicated. I certify no work or installation has commenced prior to the issuance of a permit and all work will be performed to meet the standards of laws regulating construction in this jurisdiction. I understand a separate permit must be secured for any additional work not described on this application.

TYPE OF PERMIT: (✓ *all that apply*)

<input type="checkbox"/> Building	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Electrical	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Addition
<input type="checkbox"/> Alteration	<input type="checkbox"/> Roof	<input type="checkbox"/> Pool	<input type="checkbox"/> Fence	<input type="checkbox"/> Misc./Other

TOTAL COST OF CONSTRUCTION: \$ _____

A recorded Notice of Commencement is REQUIRED for all permits at time of issuance that have a Total Cost of \$5,000 or more with the exception of mechanical which is \$15,000 or more.

DESCRIPTION OF WORK:

OWNER INFORMATION

Name: _____ Phone: _____
Address: _____ State: _____ Zip: _____
Email: _____

All contractors and subcontractors must be registered with the City of Lake Wales. CURRENT licenses and proof of General Liability and Workers' Compensation or Work Comp Exemption must be on file at the time of permit issuance.

CONTRACTOR INFORMATION

Contractor Name: _____ Business Name: _____
Business Address: _____ City: _____ State: _____ Zip: _____
Office Phone: _____ Cell Phone: _____
License Number: _____ Email: _____

SUB-CONTRACTOR NAMES AND LICENSE NUMBERS

***Sub-Contractor confirmation form needed**

ELECTRICAL: _____	License Number: _____
IRRIGATION: _____	License Number: _____
MECHANICAL: _____	License Number: _____
PLUMBING: _____	License Number: _____
POOL: _____	License Number: _____
ROOF: _____	License Number: _____

OWNER'S AFFIDAVIT: I certify that all 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 you paying twice for improvement to your property. If you intend to obtain financing, consult your lender or an attorney before recording your "Notice of Commencement".

Print Name of Contractor and/or Owner

Approved by Zoning and Planning

Signature of Contractor and/or Owner

Approved by Fire Marshal

Notary Signature, Seal and Date

Approved & Issued by Building Official