

Date Received			() --				
Owner's Name			Owner Phone Number				
Owner's Address			Owner Phone Number				
Fee Simple Titleholder Name			Owner Phone Number				
Fee Simple Titleholder Address							
JOB ADDRESS				LOT #			
SUBDIVISION			PARCEL ID#				
(OBTAINED FROM PROPERTY TAX NOTICE)							
WORK PROPOSED	<input type="checkbox"/>	NEW CONSTR	ADD/ALT	<input type="checkbox"/>	SIGN	<input type="checkbox"/>	DEMOLISH
	<input type="checkbox"/>	INSTALL	REPAIR				
PROPOSED USE	<input type="checkbox"/>	SFR	COMM	<input type="checkbox"/>	OTHER		
TYPE OF CONSTRUCTION	<input type="checkbox"/>	BLOCK	FRAME	<input type="checkbox"/>	STEEL	<input type="checkbox"/>	
DESCRIPTION OF WORK							
BUILDING SIZE			SQ FOOTAGE			HEIGHT	

<input type="checkbox"/> BUILDING	\$	VALUATION OF TOTAL CONSTRUCTION					
<input type="checkbox"/> ELECTRICAL	\$	AMP SERVICE	<input type="checkbox"/>	PROGRESS ENERGY	<input type="checkbox"/>	W.R.E.C.	
<input type="checkbox"/> PLUMBING	\$						
<input type="checkbox"/> MECHANICAL	\$	VALUATION OF MECHANICAL INSTALLATION					
<input type="checkbox"/> GAS	<input type="checkbox"/>	ROOFING	SPECIALTY	<input type="checkbox"/>	OTHER		
FINISHED FLOOR ELEVATIONS			FLOOD ZONE AREA	<input type="checkbox"/>	YES	NO	

BUILDER SIGNATURE		COMPANY REGISTERED				
Address			<input type="checkbox"/> Y / <input type="checkbox"/> N	FEE CURREN	<input type="checkbox"/> Y / <input type="checkbox"/> N	
ELECTRICIAN SIGNATURE		COMPANY REGISTERED				
Address			<input type="checkbox"/> Y / <input type="checkbox"/> N	FEE CURREN	<input type="checkbox"/> Y / <input type="checkbox"/> N	
PLUMBER SIGNATURE		COMPANY REGISTERED				
Address			<input type="checkbox"/> Y / <input type="checkbox"/> N	FEE CURREN	<input type="checkbox"/> Y / <input type="checkbox"/> N	
MECHANICAL SIGNATURE		COMPANY REGISTERED				
Address			<input type="checkbox"/> Y / <input type="checkbox"/> N	FEE CURREN	<input type="checkbox"/> Y / <input type="checkbox"/> N	
OTHER SIGNATURE		COMPANY REGISTERED				
Address			<input type="checkbox"/> Y / <input type="checkbox"/> N	FEE CURREN	<input type="checkbox"/> Y / <input type="checkbox"/> N	

RESIDENTIAL	Attach (1) Plot Plans; (1set , with 1 thumb drive) of Building Plans; (1) set of Energy Forms; R-O-W Permit for new construction, Minimum thirty (30) working days after submittal date. Required onsite, Construction Plans, Stormwater Plans w/ Silt Fence installed, Sanitary Facilities & 1 dumpster; Site Work Permit for subdivisions/large projects
COMMERCIAL	Attach (1 set , 1 thumb drive) complete sets of Building Plans plus a Life Safety Page; (1) set of Energy Forms. R-O-W Permit for new constr Minimum thirty (30) working days after submittal date. Required onsite, Construction Plans, Stormwater Plans w/ Silt Fence installed, Sanitary Facilities & 1 dumpster. Site Work Permit for all new projects. All commercial requirements must meet compliance
SIGN PERMIT	Attach (2) sets of Engineered Plans. ****PROPERTY SURVEY required for all NEW construction.

Directions:
Fill out application completely.
Owner & Contractor sign back of application, notarized
If over \$5,000, a Notice of Commencement is required. (A/C upgrades over \$7,500)

** Agent (for the contractor) or Power of Attorney (for the owner) would be someone with notarized letter from owner authorizing same

OVER THE COUNTER PERMITTING (Front of Application Only)
Reroofs if shingles Sewers Service Upgrades Fences (Plot/Survey/Footage)

Driveways-Not over Counter if on public roadways..needs ROW

NOTICE OF DEED RESTRICTIONS: The undersigned understands that this permit may be subject to “deed” restrictions” which may be more restrictive than County regulations. The undersigned assumes responsibility for compliance with any applicable deed restrictions.

UNLICENSED CONTRACTORS AND CONTRACTOR RESPONSIBILITIES: If the owner has hired a contractor or contractors to undertake work, they may be required to be licensed in accordance with state and local regulations. If the contractor is not licensed as required by law, both the owner and contractor may be cited for a misdemeanor violation under state law. If the owner or intended contractor are uncertain as to what licensing requirements may apply for the intended work, they are advised to contact the Pasco County Building Inspection Division—Licensing Section at 727-847-8009. Furthermore, if the owner has hired a contractor or contractors, he is advised to have the contractor(s) sign portions of the “contractor Block” of this application for which they will be responsible. If you, as the owner sign as the contractor, that may be an indication that he is not properly licensed and is not entitled to permitting privileges in Pasco County.

TRANSPORTATION IMPACT/UTILITIES IMPACT AND RESOURCE RECOVERY FEES: The undersigned understands that Transportation Impact Fees and Recourse Recovery Fees may apply to the construction of new buildings, change of use in existing buildings, or expansion of existing buildings, as specified in Pasco County Ordinance number 89-07 and 90-07, as amended. The undersigned also understands, that such fees, as may be due, will be identified at the time of permitting. It is further understood that Transportation Impact Fees and Resource Recovery Fees must be paid prior to receiving a “certificate of occupancy” or final power release. If the project does not involve a certificate of occupancy or final power release, the fees must be paid prior to permit issuance. Furthermore, if Pasco County Water/Sewer Impact fees are due, they must be paid prior to permit issuance in accordance with applicable Pasco County ordinances.

CONSTRUCTION LIEN LAW (Chapter 713, Florida Statutes, as amended): If valuation of work is \$2,500.00 or more, I certify that I, the applicant, have been provided with a copy of the “Florida Construction Lien Law—Homeowner’s Protection Guide” prepared by the Florida Department of Agriculture and Consumer Affairs. If the applicant is someone other than the “owner”, I certify that I have obtained a copy of the above described document and promise in good faith to deliver it to the “owner” prior to commencement.

CONTRACTOR’S/OWNER’S AFFIDAVIT: I certify that all the information in this application is accurate and that all work will be done in compliance with all applicable laws regulating construction, zoning and land development. Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet standards of all laws regulating construction, County and City codes, zoning regulations, and land development regulations in the jurisdiction. I also certify that I understand that the regulations of other government agencies may apply to the intended work, and that it is my responsibility to identify what actions I must take to be in compliance. Such agencies include but are not limited to:

- Department of Environmental Protection-Cypress Bayheads, Wetland Areas and Environmentally Sensitive Lands, Water/Wastewater Treatment.
- Southwest Florida Water Management District-Wells, Cypress Bayheads, Wetland Areas, Altering Watercourses.
- Army Corps of Engineers-Seawalls, Docks, Navigable Waterways.
- Department of Health & Rehabilitative Services/Environmental Health Unit-Wells, Wastewater Treatment, Septic Tanks.
- US Environmental Protection Agency-Asbestos abatement.
- Federal Aviation Authority-Runways.

I understand that the following restrictions apply to the use of fill:

- Use of fill is not allowed in Flood Zone “V” unless expressly permitted.
- If the fill material is to be used in Flood Zone “A”, it is understood that a drainage plan addressing a “compensating volume” will be submitted at time of permitting which is prepared by a professional engineer licensed by the State of Florida.
- If the fill material is to be used in Flood Zone “A” in connection with a permitted building using stem wall construction, I certify that fill will be used only to fill the area within the stem wall.
- If fill material is to be used in any area, I certify that use of such fill will not adversely affect adjacent properties. If use of fill is found to adversely affect adjacent properties, the owner may be cited for violating the conditions of the building permit issued under the attached permit application, for lots less than one (1) acre which are elevated by fill, an engineered drainage plan is required.

If I am the **AGENT FOR THE OWNER**, I promise in good faith to inform the owner of the permitting conditions set forth in this affidavit prior to commencing construction. I understand that a separate permit may be required for electrical work, plumbing, signs, wells, pools, air conditioning, gas, or other installations not specifically included in the application. A permit issued shall be construed to be a license to proceed with the work and not as authority to violate, cancel, alter, or set aside any provisions of the technical codes, nor shall issuance of a permit prevent the Building Official from thereafter requiring a correction of errors in plans, construction or violations of any codes. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six months of permit issuance, or if work authorized by the permit is suspended or abandoned for a period of six (6) months after the time the work is commenced. An extension may be requested, in writing, from the Building Official for a period not to exceed ninety (90) days and will demonstrate justifiable cause for the extension. If work ceases for ninety (90) consecutive days, the job is considered abandoned.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

FLORIDA JURAT (F.S. 117.03)

OWNER OR AGENT
Subscribed and sworn to (or affirmed) before me this _____
by _____
Who is/are personally known to me or has/have produced _____
as identification.

CONTRACTOR
Subscribed and sworn to (or affirmed) before me this _____
by _____
Who is/are personally known to me or has/have produced _____
as identification.

Notary Public

Notary Public

Commission No. _____

Commission No. _____

Name of Notary typed, printed or stamped

Name of Notary typed, printed or stamped