

Office Use Only – PERMIT TYPE	P-CODE	CITY OF LAKE ALFRED BUILDING DEPARTMENT CONSTRUCTION PERMIT APPLICATION 155 E. Pomelo Street · Lake Alfred, FL 33850 Phone: (863) 291-5747 · Fax (863) 298-4440	PERMIT NO.: _____ NOC: _____
Date:			

Owner's Last Name:	First Name:	Middle Initial	Telephone No:
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Owner's Address:	City:	State:	Zip Code:
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Property Address:	Subdivision Name:	City:	Zip Code:
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LEGAL DESCRIPTION	Section	Township	Range	Lot No.	Block	Plat Book	Page No.	Sub. Number	Parcel Number	<input type="checkbox"/> Legal Attached
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General Contractor:	Type:	State No:	Area:	Telephone Number:
Electrical Contractor:				
Plumbing Contractor:				
A/C Mech. Contractor:				
Roofing Contractor:				
Irrigation Contractor:				
Gas Contractor:				
Suppression Systems Contractor:				
Alarm System Contractor:				
Underground Utility Contractor:				

DESCRIPTION OF PROPOSES WORK:

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 AND/OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

NOTICE: THIS PERMIT BECOMES NULL AND VOID IF WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS AFTER THE ISSUE DATE OF A PERMIT, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT A TIME, AFTER WORK IS COMMENCED, SEPARATE PERMITS ARE REQUIRED FOR EACH TRADE OR TYPE OF WORK, SUCH AS ELECTRICAL, MECHANICAL, PLUMBING, IRRIGATION, ETC.

ASBESTOS NOTIFICATION STATEMENT: It is the responsibility of the Owner or operator to comply with the provisions of s. 469.003 and to notify the Department of Environmental Protection of any intention to remove asbestos, when applicable, in accordance with state and federal law.

I certify, together with plans and specifications, this application shows a true representation of construction to be accomplished under this permit. It is understood that any false information or deviations from the original documents will render the permit issued under this application null and void, unless approved by the building director. I agree to conform to all building division regulations and Lake Alfred ordinance regulating building and zoning.

Also, I hereby certify that in the event any of the work contemplated by this permit application involves excavation as defined in section 553.851, Florida Statutes; that the applicant has complied with the provisions of section 553.851E.S., paragraph (2)(A) and (C).

X _____
SIGNATURE OF CONTRACTOR, AUTHORIZED AGENT OR OWNER DATE

EXISTING USE:	WATER: <input type="checkbox"/> Well <input type="checkbox"/> Public <input type="checkbox"/> Septic <input type="checkbox"/> Sewer
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SIZE OF PROPERTY (square feet):	Is any portion of this property <input type="checkbox"/> Yes Located near a water body? <input type="checkbox"/> No	TOTAL VALUE OF WORK: \$
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CLASS OF WORK: Erect Repair Remodel Addition Move Demolish Other (Specify)

SPECIAL APPROVALS	REQUIRED	RECEIVED	TYPE OF CONST.	OCCUPANCY:	PRINCIPAL <input type="checkbox"/> Wood <input type="checkbox"/> Reinforced Concrete <input type="checkbox"/> Other FRAME OF: <input type="checkbox"/> Masonry <input type="checkbox"/> Steel <input type="checkbox"/> Alum	
Zoning			<input type="checkbox"/> I	<input type="checkbox"/> Assembly	NO. OF STORIES	NO. OF UNITS
Health Dept.			<input type="checkbox"/> II	<input type="checkbox"/> Business		
Fire Dept.			<input type="checkbox"/> III	<input type="checkbox"/> Education		
Engineering			<input type="checkbox"/> IV	<input type="checkbox"/> Hazardous	SIZE OF BUILDING (Total Sq. Ft.)	
Driveway			<input type="checkbox"/> IV-1 HR	<input type="checkbox"/> Factory/ Industry	ROOFING <input type="checkbox"/> Composition or Wood Shingles	
DOT			<input type="checkbox"/> V	<input type="checkbox"/> Institution	TYPE(S): <input type="checkbox"/> Built-up <input type="checkbox"/> Metal <input type="checkbox"/> Other	
Base Flood Elev.			<input type="checkbox"/> V-1HR	<input type="checkbox"/> Mercantile	OCCUPANCY <input type="checkbox"/> Hazardous	
Finished Floor			<input type="checkbox"/> VI	<input type="checkbox"/> Residential	IS FOR: <input type="checkbox"/> Non-Hazardous Material	
			<input type="checkbox"/> VI-1HR	<input type="checkbox"/> Storage		

ZONING & LAND USE: SETBACKS REQUIRED			COMMERCIAL JOBS ONLY:		
Front:	Sides:	Rear:	Handicap	Employees	Seating Capacity _____ Parking Spaces _____
			Plans Checked By:	Date:	Approved For Issue By: Date:

PERMIT FEES								
BUILDING	ELECTRICAL	PLUMBING	MECHANICAL	GAS	IRRIGATION	PLAN REV.	ADM.	RADON/OTHER
CORRECTION	EMS	SCHOOLS	ROAD			WATER METER	IRR. METER	SEWER TAP
EDUCATIONAL	ARCHIVE		WATER IMP.	SEWER IMP.	PUBLIC SAFETY	PARKS & REC.	GEN GOV.	

	CITY IMPACTS	PERMIT TOTAL
BUILDING & CITY IMPACTS & METERS & TAPS \$ _____	\$ _____	\$ _____