



**CITY OF TITUSVILLE PERMIT APPLICATION
BUILDING / ALL TRADES**

DATE SUBMITTED STAMP

PERMIT # _____

ENTERED BY: _____ TAX ID # _____ PERMIT FEE: _____

Existing use of Structure: SFR Townhouse Condominium Apartment Commercial Storage
 Industrial Mercantile Business Assembly Educational Day Care Other _____

Permit Type: Building Electric Mechanical Plumbing Other: _____

- Fence Gas Roofing Shed Sign Slab A/G Pool/Spa I/G Pool/Spa Driveway
 Deck Generator Antenna Solar Siding/Fascia/Soffits Aluminum Concrete Masonry
 Residential (New) Residential Alteration Residential Addition Exterior Doors/Windows
 Commercial (New) Commercial Alteration Commercial Addition Fire Alarm Fire Suppression
 Mobile Home Modular Home Storage Tank/LP Tank Demolition Tent Dock

PROJECT ADDRESS: _____ **ZIP CODE:** _____

CONTACT PERSON: _____ **PHONE #:** _____

EMAIL: _____

PROPERTY OWNER: _____ **PHONE #:** _____

ADDRESS: _____ **EMAIL:** _____

DESCRIPTION OF WORK: _____

FLOOD ZONE: _____ **ZONING:** _____ **VALUE OF CONSTRUCTION \$:** _____

of Bedrooms: _____ **Florida Code Edition:** _____ **Electrical Code Edition:** _____

Proposed building Use: _____

Construction type: _____ **Occupancy Classification:** _____ **# of Stories:** _____

ARCHITECT/ENGINEER FIRM: _____ **PHONE #:** _____

ADDRESS: _____

PHONE #: _____ **EMAIL:** _____

FEE SIMPLE TITLEHOLDER'S NAME (IF OTHER THAN OWNER): _____

FEE SIMPLE TITLEHOLDER'S ADDRESS: _____

BONDING COMPANY: _____

BONDING COMPANY ADDRESS: _____

Note: Subcontractor's verification forms for electrical, plumbing, mechanical, gas, roofing and any specialty must be submitted prior to permit issuance.

ALL OTHER APPLICABLE STATE OR FEDERAL PERMITS MUST BE OBTAINED PRIOR TO COMMENCEMENT

Continued on page 2.

GENERAL CONTRACTOR: _____ LICENSE #: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

ELECTRICAL: _____ LICENSE #: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

PLUMBING: _____ LICENSE #: _____

PHONE #: _____ EMAIL: _____

MECHANICAL: _____ LICENSE #: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

ROOFING: _____ LICENSE #: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

SPECIALTY: _____ LICENSE #: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

SPECIALTY: _____ LICENSE #: _____

ADDRESS: _____

PHONE #: _____ EMAIL: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a 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 and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all the work will be done in compliance with all the applicable laws regulating construction and zoning. I understand that all permits require inspections as indicated on permit card.

“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. “

OWNER/AGENT'S SIGNATURE

STATE OF FLORIDA
COUNTY OF BREVARD

The foregoing instrument was
acknowledged before me this
_____ day of _____, 20____

By _____ who is

Personally known to me, or has

Produced valid ID _____

Notary as to Owner or Agent W/Seal

CONTRACTOR'S SIGNATURE

STATE OF FLORIDA
COUNTY OF BREVARD

The foregoing instrument was
acknowledged before me this
_____ day of _____, 20____

By _____ who is

personally known to me, or has

Produced valid ID _____

Notary as to Qualifier W/Seal