



CITY OF ST. AUGUSTINE
 PLANNING & BUILDING DEPARTMENT
 APPLICATION FOR PERMIT TO CONSTRUCT

APPLICATION No. _____

OWNER NAME _____ ADDRESS _____ CITY _____ STATE _____ ZIP _____
 PH. _____ CONTRACTOR NAME _____ ADDRESS _____ CITY _____
 STATE _____ ZIP _____ PH. _____ CONTRACTOR LIC. No. _____ LIC. CLASS _____ EXP DATE _____

DESCRIPTION OF PROPERTY:

JOB ADDRESS _____ PARCEL ID No. _____ LOT _____ BLK _____ SUBDIVISION _____
 USE ZONE _____ FLOOD HAZARD ZONE _____ CURRENT USE OF PROP. _____ PROPOSED USE OF PROP. _____

PROPOSED WORK: RESIDENTIAL NON-RESIDENTIAL NEW STRUCTURE ADDITION ALTERATION RENOVATION

TYPE OF PERMIT: BUILDING ELECTRICAL PLUMBING MECHANICAL DEMOLITION BUILDING RELOCATION

FLOOR AREA OF NEW BUILDING _____ No. OF STORIES _____ FLOOR AREA OF ADDITION _____ LEVEL OF ALTERATION _____

DETAILED DESCRIPTION OF PROPOSED WORK _____

AMOUNT OF WORK VALUATION \$ _____

BONDING COMPANY NAME & ADDRESS _____

ARCHITECT OR ENGINEERS NAME & ADDRESS _____

MORTGAGE LENDERS NAME & ADDRESS _____

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO CONSTRUCT AS INDICATED. I CERTIFY THAT NO WORK HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND ALL WORK WILL BE PERFORMED IN COMPLIANCE WITH ALL CODES AND ORDINANCES REGULATING CONSTRUCTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE OBTAINED FOR ALL APPLICABLE TRADES LISTED BELOW. 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 ST. JOHNS COUNTY AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER LOCAL, STATE OR FEDERAL GOVERNMENTAL AGENCIES. IT IS THE OWNER OR CONTRACTOR'S RESPONSIBILITY TO COMPLY WITH THE PROVISIONS OF FLORIDA STATUTE 469.003 AND TO NOTIFY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION IF ASBESTOS IS TO BE REMOVED. NO EXCAVATIONS SHALL COMMENCE ON ANY STREET, ALLEY, RIGHT-OF-WAY OR UTILITY EASEMENT WITHOUT FIRST OBTAINING INFORMATION REGARDING THE LOCATION OF BURIED GAS OR ELECTRICAL UTILITY LINES. SUCH INFORMATION MAY BE REQUESTED BY PHONE, LETTER, FAX OR IN PERSON BY CONTACTING THE UTILITY NOTIFICATION CENTER IN THIS AREA. A 48 HOUR NOTICE IS REQUIRED FOR UNDERGROUND LINE LOCATION SERVICES.

WARNING TO OWNER: FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, YOU SHOULD CONSULT WITH YOUR LENDER OR LEGAL ADVISOR BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. THIS PERMIT IS VOID IF WORK IS NOT COMMENCED WITHIN 180 DAYS AND WILL EXPIRE BY TIME LIMITATION IF THE WORK IS ABANDONED FOR 180 DAYS OR MORE.

OWNER SIGNATURE _____ DATE _____

CONTRACTOR SIGNATURE _____ DATE _____

STAFF USE ONLY

APPROVALS:

ZONING _____ DATE _____
 FIRE MARSHAL _____ DATE _____
 UTILITIES _____ DATE _____
 ARCHAEOLOGY _____ DATE _____
 STORM WATER _____ DATE _____
 PUBLIC WORKS _____ DATE _____
 BUILDING OFFICIAL _____ DATE _____

PERMIT FEES:

BUILDING \$ _____
 PLAN CHECK \$ _____
 ELECTRICAL \$ _____
 PLUMBING \$ _____
 MECHANICAL \$ _____
 ARCH SURCHG. \$ _____
 RADON \$ _____
 OTHER \$ _____

SUBCONTRACTOR SIGN OFF:

ELECTRICAL SUB _____
 PLUMBING SUB _____
 MECHANICAL SUB _____
 SWIM POOL SUB _____
 UNDERGROUND UTILITIES _____

TOTAL FEE \$ _____