



**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 :** \_\_\_\_\_

\_\_\_\_\_ **PERMIT 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 -----

BASE BUILDING VALUE: \$ \_\_\_\_\_

PERCENTAGE OF IMPROVEMENT: \_\_\_\_\_

**APPROVALS:**

**PERMIT FEES:**

ZONING \_\_\_\_\_ DATE \_\_\_\_\_  
 FIRE MARSHAL \_\_\_\_\_ DATE \_\_\_\_\_  
 UTILITIES \_\_\_\_\_ DATE \_\_\_\_\_  
 ARCHEOLOGY \_\_\_\_\_ DATE \_\_\_\_\_  
 STORM WATER \_\_\_\_\_ DATE \_\_\_\_\_  
 PUBLIC WORKS \_\_\_\_\_ DATE \_\_\_\_\_  
 BUILDING OFFICIAL \_\_\_\_\_ DATE \_\_\_\_\_

BUILDING \$ \_\_\_\_\_  
 PLAN CHECK \$ \_\_\_\_\_  
 ELECTRICAL \$ \_\_\_\_\_  
 PLUMBING \$ \_\_\_\_\_  
 MECHANICAL \$ \_\_\_\_\_  
 ARCH SURCHG. \$ \_\_\_\_\_  
 RADON \$ \_\_\_\_\_  
 OTHER \$ \_\_\_\_\_  
**TOTAL FEES \$ \_\_\_\_\_**

**SUBCONTRACTOR SIGN OFF:**

ELECTRICAL SUB \_\_\_\_\_  
 MECHANICAL SUB \_\_\_\_\_  
 UNDERGROUND UTILITIES \_\_\_\_\_

PLUMBING SUB \_\_\_\_\_  
 SWIM POOL SUB \_\_\_\_\_