



**BUILDING DEPARTMENT
MULTI-TRADE PERMIT APPLICATION**

CONTRACTOR	MAILING ADDRESS	ZIP	PHONE#	EMAIL
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JOB ADDRESS	LOT #	SUBDIVISION
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OWNER NAME	MAILING ADDRESS	ZIP	PHONE #
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*CONTRACT PRICE: \$ _____
NOTICE OF COMMENCEMENT IS REQUIRED IF CONTRACT PRICE EXCEEDS \$2,500. HVAC- IF EXCEEDS \$7,500.

PERMIT FEE: SCHEDULE A + 2.5% STATE SURCHARGE APPLIES TO THESE PERMITS (MIN. \$4.00)
(DUE AT TIME OF SUBMISSION. PERMIT APPLICATIONS WILL NOT BE ACCEPTED WITHOUT PAYMENT)

WINDOWS/DOORS SHUTTERS DOCK/BOAT LIFT DUNE CROSSOVER SWIMMING POOLS

SCREEN ENCLOSURE

MINIMUM PERMIT FEE \$100.00 + 2.5% STATE SURCHARGE APPLIES TO THESE PERMITS (MIN. \$4.00)
(DUE AT TIME OF SUBMISSION. PERMIT APPLICATIONS WILL NOT BE ACCEPTED WITHOUT PAYMENT)

MECHANICAL (RESIDENTIAL) ELECTRIC PLUMBING INSULATION GAS

GARAGE DOORS TEMP TRAILER/TENT DRIVEWAY/PAVERS SOLAR IRRIGATION

SIGN WALL

FENCE: (CHECK WHICH APPLIES) YARD FENCE ONLY POOL BARRIER FENCE- POOL BUILT _____ (Year)
NOTE: Pool barrier fences must comply with current pool barrier code unless alternative barrier is approved.

GENERATOR: (CHECK WHICH APPLIES) NEW REPLACE FLOOD ZONE: _____ (Required)

NOTES: *Gas permit applications must accompany all generator applications.
 *Flood zone 'X' – Generator must be at the same elevation as the existing house slab.
 *Other than flood zone 'X' – Generator slab must be 1ft above base flood elevation. Elevation certificates are required before final inspection.

SCOPE OF WORK ANTICIPATED IN THE PERMIT APPLICATION: _____

(Attach additional sheets if necessary)

Revised 10/1/2021

“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.” A NOTICE OF COMMENCEMENT IS REQUIRED IF CONTRACT PRICE EXCEEDS \$2,500. HVAC- IF EXCEEDS \$7,500.

(OWNER)
SIGNATURE _____

State of _____ County of _____

The foregoing instrument was acknowledged before me

this _____ day of _____, 20_____

by _____ who is

personally known OR / produced identification.

Type of identification produced: _____

Official Signature of Notary Public

(QUALIFIER)
SIGNATURE _____

State of _____ County of _____

The foregoing instrument was acknowledged before me

this _____ day of _____, 20_____

by _____ who is

personally known OR / produced identification.

Type of identification produced: _____

Official Signature of Notary Public