

FAX 439-1421

PRINT INFORMATION BELOW IN INK

APPLICATION FOR BUILDING PERMIT FOR TOWN OF LAKE HAMILTON

TO: Building Official

Town of Lake Hamilton Permit # _____ Permit # Code: _____ Fld. Zn.: _____ El.: _____ Date: _____

County Impact Misc. Receipt #: _____ Identification - Sec.: _____ Twd.: _____ Rge.: _____

Zoning: _____ Sub.#: _____ Parcel #: _____ Sub.: _____

Lot(s): _____ Block(s): _____ Property Loc./Addr.: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has begun 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 any other work not described on this application and any paid fees are not refundable. I agree to pay permit fees based on Standard Building Code evaluation schedule or furnish a copy of my signed contract for this construction.

Total Sq. Footage: _____ New Building: _____ Remodeling: _____ Demolition: _____

Addition: _____ Repairs: _____ Single Fam.: _____ Multi-Fam.: _____ Other: _____ Description: _____

OCCUPANCY: Residential: _____ Commercial: _____ Industrial: _____ Church: _____

DISTANCE FROM LOT LINES: Front: _____ Side: _____ Side: _____ Rear: _____

Owner's Name: _____

Owner's Address: _____ Phone: _____

SUBCONTRACTORS: Electrical: _____ Plumbing: _____ Mechanical: _____

Roofing: _____ Other: _____

Meter Size Requested: _____ Meter Numbers: _____

CITY FEES CHARGED

JOB COST:

Building Permit: _____

Plan Checking: _____

Electrical: _____

Plumbing: _____

Mechanical: _____

Factory Built Plmnt: _____

Penalty: _____

Meter Cost: _____

Water Deposit: _____

Water Impact: _____

Archive Fee: _____

Sewer Impact: _____

Contractor's Name: _____ Firm: _____

Contractor's Firm's Address: _____ Phone: _____

Job Name: _____

COUNTY & OTHER FEES CHARGED

Collector Road: _____

Correctional: _____

EMS: _____

License Board: _____

DCA: _____

Permit Surcharge: _____

Total: _____

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

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.

As a condition to the issuance of a building permit, the applicant hereby promises in good faith to deliver the summary of the construction lien law provided herewith to the person whose right, title, and interest is subject to attachment under the construction lien law.

Permit #

Printed Name of Owner/Contractor

Signature of Owner/Contractor

Signature of Plumber

Signature of Electrician

Signature of Mechanical Contractor

Signature of Roofer

Other

Other

Permit Issued By

• PLEASE CALL (941) 439-1910 FOR ALL INSPECTIONS. •

• THIS PERMIT WILL EXPIRE SIX MONTHS FROM ISSUE DATE. •