CITY OF PUNTA GORDA PERMIT APPLICATION

PARCEL ID#:	CODE	DATE:	PERMIT#:

JOB ADDRESS:	UNIT #:	BUILDING #:	PHASE #:

BLOCK:	LOT:	SECTION:	SUBDIVISION:	PROJECT/CONDO NAME

OWNER NAME:	MAILING ADDRESS	ZIP	PHONE

CONTRACTOR'S BUSINESS NAME:	MAILING ADDRESS	ZIP	PHONE	FAX
			E-MAIL	

CONTRACTOR'S STATE REGISTRATION NO.:	CONTRACTOR'S CITY CERTIFICATE NO.:
ARCHITECT:	ENGINEER:

USE OF BUILDING:			
❑ SINGLE FAMILY	❑ DUPLEX	❑ MULTI-FAMILY	❑ COMMERCIAL, DESCRIBE

DESCRIPTION OF WORK – SPECIFICALLY:

NOTICE OF COMMENCEMENT:	VALUATION OF WORK:

SETBACK: LEFT	RIGHT	FRONT	REAR	S.F. LIVING	S.F. TOTAL
TYPE OF CONSTRUCTION	NUMBER OF STORIES	ZONING DISTRICT	FLOOD ZONE	FLOOD ELEVATION	LOT TYPE

NUMBER OF UNITS	CITY IMPACT FEE ASSESSMENT	COUNTY IMPACT FEE ASSESSMENT	DBPR SURCHARGE	DCA SURCHARGE

DRC #	VARIANCE #	OTHER FEES	PERMIT FEE	TOTAL ALL FEES

SPECIAL CONDITIONS:

NOTICE

Separate permits are required for electrical, plumbing, heating, ventilating, air conditioning, roofing, and lawn sprinklers. This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.

I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.

CONTRACTOR (QUALIFIER) SIGNATURE DATE

SIGNATURE OF OWNER (IF OWNER/BUILDER) DATE

ACCEPTED BY:	DATE
PLANS CHECKED BY:	DATE
APPROVED FOR ISSUANCE BLDG:	DATE
SPECIAL APPROVALS:	DATE
APPROVED R.O.W. CONST.:	DATE
APPROVED FIRE DEPT.:	DATE
APPROVED ZONING:	DATE
APPROVED HISTORIC:	DATE

FAILURE TO READ AND UNDERSTAND THE CONDITIONS, GENERAL PROVISIONS, AND SPECIAL PROVISIONS, ON THE BACK HEREOF, DOES NOT RELIEVE THE APPLICANT FROM HIS OBLIGATIONS AS STATED ABOVE. IF ANY CONDITION OR PROVISION IS NOT FULLY UNDERSTOOD, THE APPLICANT SHOULD REQUEST CLARIFICATION BEFORE SIGNING THIS APPLICATION.

PERMIT VALIDATION CK#_____RECEIPT:_____CASH:_____DATE:_____

See Reverse Side