

Pinellas County Florida
Central Permit Form
 (727) 464-3888 – 440 Court Street Clearwater, FL 33756



CB _____ HAB _____ WT/SP # _____ UP _____

File Reference # _____ Set # _____ RUP _____

Notice to Applicants - In all cases, Combination Permits are issued that include the work of all trades described in the work description, construction plans and documents and/or are required to complete the project. All portions identified as Applicant Portions must be completed to avoid processing delays.

Type of Permit Requested - Zoning Flood Utilities Eng Habitat ROW Bldg W/T-DRS

↓ Applicant Portion ↓

Date of Application: _____ / _____ / _____ Applicant: _____ Owner
 Contact # _____ e-mail _____ Contractor
 _____ Agent

Owner _____ Contact # _____
 Address _____ City _____ State _____ Zip _____

Fee Simple Titleholder (If Other Than Owner) _____ Contact # _____
 Address _____ City _____ State _____ Zip _____

Contractor _____ License # _____
 Company _____ Contact # _____
 e-mail _____
 Address _____ City _____ State _____ Zip _____

Project/Subproject Name _____
 Job Address _____

PID# _____ / _____ / _____ / _____ / _____ / _____ Subdivision _____

Work Description: _____

Evaluation \$ _____

Bonding Company _____ Contact # _____
 Address _____ City _____ State _____ Zip _____

Engineer _____ Reg # _____ Contact # _____
 e-mail _____
 Address _____ City _____ State _____ Zip _____

Architect _____ Reg # _____ Contact # _____
 e-mail _____
 Address _____ City _____ State _____ Zip _____

Mortgage Lender _____ Contact # _____
 Address _____ City _____ State _____ Zip _____

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner and Contractor Affidavit: Under penalty of perjury, I/We declare that all the information contained in this building permit application is true and correct. In addition, I/We certify that all of the foregoing information is accurate and that all work will be done in compliance with all applicable law, codes and ordinances regulating construction and zoning.

Signature of Contractor/Agent*

Signature of Owner/Contractor**

X _____

X _____

Contractor/Agent Name _____

Owner/Contractor Name _____

* When a Contractor assigns an agent the Contractor must provide a Notarized Authorization Letter.

**When Owner/Contractor exemption per f.s.489.103 (7) (a) is requested, the Owner must appear in person and no agent is permitted.

↓ Applicant Portion Continued ↓

New Building _____ Sq. Ft.
 Addition _____ Sq. Ft.
 Alteration _____ Sq. Ft.
 Number of Units _____
 Existing Building _____ Sq. Ft.
 Retrofit/Repair Type _____ Sq. Ft.
 Use of Building _____

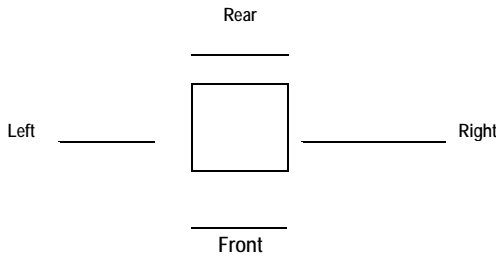
1st Occupancy Type _____ Sq.Ft. Egress Occupancy Load _____ Total Occupancy Load _____
 2nd Occupancy Type _____ Sq.Ft. Egress Occupancy Load _____ Total Occupancy Load _____
 3rd Occupancy Type _____ Sq.Ft. Egress Occupancy Load _____ Total Occupancy Load _____
 Construction Type _____ Conditioned Space _____ Sq.Ft. Project Valuation \$ _____

↓ County Staff Portion ↓

Zoning Review

Zoning _____ By _____ Units _____ Of _____ WT/Site Plan # _____

Setbacks -



BA#/Z# _____

Plan Review Only Yes No

Sign Calculations

Frontage Allowed _____
 Proposed _____

Engineering Review

Drainage Review Approval Date _____ By _____ LFE= _____ NAVD88
 Line of Sight Approval Date _____ By _____

Flood Review

Flood Zone _____ Required Elevation _____ By _____

Utility Review

Potable Water Source Municipal Water Provider _____ Potable Well _____
 Waste Water Treatment Municipal Sewer _____ Septic _____
 Grease Interceptor(s) Yes No Number _____
 Review By _____

| PC Utility Fee Calculations | Size | Fee |
|--------------------------------|-------|-------|
| Water Tap Fee | _____ | _____ |
| Impact Fee | _____ | _____ |
| Backflow | _____ | _____ |
| Sewer Connection | _____ | _____ |
| Sewer Tap | _____ | _____ |
| Sewer Const Contribution Share | _____ | _____ |
| ** Utility Fees Total | | _____ |

Fees

Building Services Fee Calculations

| Trade Section | By | Fees |
|--------------------------------------|-------|-------|
| Building | _____ | _____ |
| Electrical | _____ | _____ |
| Low Voltage/Fire Alarm | _____ | _____ |
| Plumbing | _____ | _____ |
| Medical Gas | _____ | _____ |
| Fuel Gas | _____ | _____ |
| Mechanical | _____ | _____ |
| Sprinkler | _____ | _____ |
| Hood | _____ | _____ |
| Chemical | _____ | _____ |
| Refrigeration | _____ | _____ |
| Fire Resistance / Life Safety | _____ | _____ |
| Plan Review | _____ | _____ |
| Contract Community Review | _____ | _____ |
| Expedited – Additional Fee Threshold | _____ | _____ |
| Violation # _____ x _____ | | _____ |
| * Building Fees Total | | _____ |

Fee Totals

| Type of Fees | By | Fees |
|---|-------|-------|
| Zoning Fees | _____ | _____ |
| Habitat Management Fees | _____ | _____ |
| Building Services *(see detail) | _____ | _____ |
| Miscellaneous Building Fees | _____ | _____ |
| DBPR Surcharge | _____ | _____ |
| DCA Surcharge | _____ | _____ |
| Technology Fees | _____ | _____ |
| Utility Fees **(see detail) | _____ | _____ |
| DRS Over-the-Counter Review - WT | _____ | _____ |
| Site Plan Fees | _____ | _____ |
| Palm Harbor Fire Fees | _____ | _____ |
| Multimodal District # _____ | | _____ |
| Paid <input type="checkbox"/> Yes <input type="checkbox"/> No | | _____ |
| Right of Way Use Fees | _____ | _____ |
| _____ | | _____ |
| _____ | | _____ |
| _____ | | _____ |
| Total Due | | _____ |

