BAL HARBOUR BUILDING DEPARTMENT 655-96TH STREET BAL HARBOUR, FLORIDA 33154 TELEPHONE: 305.866.4633

BAL HARBOUR

Permit Application

Project Type (check one) Commercial Residential		Master Permit:			OLIO #: 12-2226- OB ADDRESS: Unit
1. Owner Information	Address: City: Email:	St:Ow	_ Zip:	2. Contractor Information	Company Name:
3. Permit Type	O Building O Flooring O Electrical O Mechanical O Plumbing O Fire Sprinklers O Windows O Doors O Painting	 Shutters Pool Shed Driveway Paving Gas Roofing Fence Violation/Legali 	 Sign Drainage Landscaping Irrigation Elevator Crane Waterproofing Railing 	4. Type of Improvement	New Construction (BON) Change Contractor Addition Attached (BOA) Extension
5. Architect	Address: City: Email:	St:	Zip:	6. Engineer	Name:
7. Contact Info	Name: Address: City: Email:	St:Zip:Pho	one:	Description 8. of work	Sq Footage: Cost of work: \$
NOTI	CE. Application is house	shry mode to obtain a nam	mit to do the work en	d install	lations as indicated. I certify that no work or installation has commenced

NOTICE: Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced 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 ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. In Addition to the requirements of this permit, there may be additional restrictions found in the public records, and there may be additional permits required from other governmental entities such as water management districts, or federal agencies. OWNER 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. Owner's Electronic Submission Statement: Under penalty of perjury, I declare that all the information contained in this building permit application and the representations made in the required disclosure statement are true and correct. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner: Print Name:	
State of:	
Sworn to (or affirmed) and subscr 	who has taken to me or has produced
X	
Notary Signature	Notary Stamp or Seal
Personally Known or I.D:	

E[Y SfgdMXQualifier:	
Bq`f@S_ W	
State of:	
County of:	
Sworn to (or affirmed) and subscrib 20, by the oath and is personally known to	who has taken
as identificiation	*
X	
Notary Signature	Notary Stamp or Seal
Personally Known or I.D:	

Rev: 05/05/2021