

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.

Applicant Portion

Type of Permit(s) Requested - Building Services Development Review Services Habitat Utility Right of Way Use

Date of Application \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Applicant \_\_\_\_\_

Owner
Contractor
Agent

Contact # \_\_\_\_\_ e-mail \_\_\_\_\_

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: \_\_\_\_\_

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 declare that all the information contained in this building permit application is true and correct. In addition, I 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 \_\_\_\_\_

1<sup>st</sup> Occupancy Type \_\_\_\_\_ Sq.Ft.      Egress Occupancy Load \_\_\_\_\_      Total Occupancy Load \_\_\_\_\_  
 2<sup>nd</sup> Occupancy Type \_\_\_\_\_ Sq.Ft.      Egress Occupancy Load \_\_\_\_\_      Total Occupancy Load \_\_\_\_\_  
 3<sup>rd</sup> 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 \_\_\_\_\_      Site Plan # \_\_\_\_\_

Setbacks -

	Rear	
	_____	
Left _____	<div style="border: 1px solid black; width: 60px; height: 60px; margin: 0 auto;"></div>	Right _____
	Front	

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	_____	_____
<b>** Utility Fees Total</b>	_____	_____

**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 Inspection	_____	_____
Plan Review	_____	_____
Contract Community Review	_____	_____
Expedited – Additional Fee Threshold	_____	_____
Violation # _____ x _____		_____
<b>* Building Fees Total</b>		_____

**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	_____	_____
Site Plan Fees	_____	_____
Palm Harbor Fire Fees	_____	_____
Multimodal District # _____		_____
Paid      Yes      No		_____
Right of Way Use Fees	_____	_____
_____		_____
_____		_____
_____		_____
<b>Total Due</b>		_____

