

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, PLUMBING, SIGNS WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, ETC.

Any deviations or alterations from plans and specifications must be reported and permission must be obtained in writing.

For homes being constructed in Flood Zone AE, A FLOOD ELEVATION CERTIFICATE must be supplied when the lowest floor elevation is established, as per Flood plains Sec.5.03.00, St. Augustine land Development Regulations. No inspection will be done until this certificate is presented to the St. Augustine Beach Building Department.

Notice: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of ;this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

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.

Signature _____
Owner or Agent (Including Contractor)

Signature _____
Contractor

Sworn to and subscribed before me by

who is personally known to me or produced
_____ as identification, this
_____ day of _____, 20

Sworn to and subscribed before me by

who is personally known to me or produced
_____ as identification, this
_____ day of _____, 20

Notary's Signature _____

Notary's Signature _____

Printed Name _____

Printed Name _____

Commission No./Expires _____

Commission No./ Expires _____

SEAL:

SEAL:

CERTIFICATION OF COMPETENCY HOLDER

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY: _____ Permit Officer