

TOWN OF GOLDEN BEACH

BUILDING DEPARTMENT

1 Golden Beach Drive
Golden Beach, FL 33166
· 305-932-0744 Fax: 305-933-3

Office: 305-932-0744 Fax: 305-933-3825

Application	n Date:		

Master Permit Sub-Permit Clerk_____

www.goldenbeach.us

JOB ADDRESS PERMIT APPLICATION MASTER PERMIT NUMBER											
1. Owner Information	Owner Address ST Zip Driver License No. /I.D Phone No					<i>A</i>	Company Name Qualifier Name Address City ic. No				
3. PERMIT TYPE	g Plum	te cape The cape of the cape		Revision Renewal Shop Drawing	4.Type of Improvement	Choose only One	New Construct Addition Attact Alteration Interation Extornion Repair/Replac	ched erior erior	Driveway G	ool azebo-Pergola emolition/ Par enerator	tial
5. ARCHITECT/ ENGINEER INFO	Name						Folio No. 19-1235- Lot(s)B Description of Work				
6.Contact Info	Name E-mail Phone No					Square FT Linear FT Estimated Value of the Work:					_ _ _
Application is hereby made to obtain a permit to do the work and/or 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, Plumbing, Mechanical, Windows, Doors, Roofing, Site Walls, Fencing, Driveways, Pools, Spas, Pool Decks, Outdoor Kitchens, Accessory Structures, Irrigation, Landscape and Landscape Lighting work and other categories not mentioned. Owner's Affidavit: I certify that all the foregoing information is accurate and that work will be done in compliance with all applicable laws regulating construction and zoning. NOTICE REGARDING BUILDING PERMIT APPLICATIONS The Completion and submission of a Building Permit Application is a requirement of securing a Building Permit. The Town will rely upon the information contained in the Application in determining whether a Building Permit should be issued. The submission of inaccurate, misleading or misrepresented information in the Application shall subject the Building Permit to denial, suspension or revocation, and the individual applying for the permit, to all appropriate fines, penalties and other punishments authorized by law. KINDLY GOVERN YOURSELF ACCORDINGLY. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.											
8. Owner Information	PRINT NAME OWNERS SIGNATURE SWORN TO AND SUBSCRIBED BEFORE ME BY PRINT NAME				QUALIFIER INFORMATION	PRINT NAME QUALIFIERS SIGNATURE SWORN TO AND SUBSCRIBED BEFORE ME BY PRINT NAME					
	As identification, this day of 20 Notary's Signatures Printed Name of Notary				9.QUALIFIER	As identification, this day of Notary's Signatures Printed Name of Notary		20			
						- FOR OFFICE USE ONLY ROYFD/DATF FEE CATEGORIES:			5 A		
V	Approvals	APPROVED/D	JATE	DISAPP	ROVED	יטי	AIE	FEE CA	Permit Fee	FEES \$	
+	Building								Street Sweeping		

Structural Electrical Trash Removal Scanning Mechanical Infrastructure Plumbing BCCD Landscaping State Surcharge Zoning Sub-Total **Building Dir Publics Works** Process Fee **Total Fees**