

PLUMBING PERMIT NO.:

BUILDING PERMIT NO.:

DATE:

Job Address:	Floor/Unit No.:
Master Plumber:	Phone No.:
Company Name:	Phone No.:
Owner:	Phone No.:
Builder:	Phone No.:

Type of Building or Structure:	<input type="checkbox"/> Old	<input type="checkbox"/> New
	<input type="checkbox"/> Commercial	<input type="checkbox"/> Residential
	<input type="checkbox"/> Change Out	<input type="checkbox"/> New Installation

Type of Service:

Cost of Construction:(Labor & Materials)	\$	No. of Inspections Required.:	
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FIXTURES	1ST Floor	2nd Floor		FIXTURES	# OF FIXTURES	
Basin				Storm Drain/Sewer		
Bath Tub				Man Hole		
Closet				Sewer Main		
Dishwasher				Water Main		
Drain-Floor/Roof				Sewer Laterals		
Drinking Fountain				Water Laterals		
Kitchen Sink				Backflow Device		
Sewer/Tank Connection				Remarks:		
Shower						
Washer						
Water Heater						
Sprinkler	Lawn/Fire	# Heads		Tank Approval No.:		
			Sewer Tap No.:			

Driving Directions:

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work has been 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 may be required for all ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, HEATING, AND VENTILATING SYSTEMS ELEVATORS, ESCALATORS AND TRANSPORTING ASSEMBLINGS, GAS, SPRINKLER, ROOFING AND INSTALLATIONS, ETC. **OWNER'S AFFIDAVIT:** I certify that 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. A NOTICE OF COMMENCEMENT MUST BE RECORDED AT THE ESCAMBIA COUNTY CLERK OF COURTS AND A CERTIFIED COPY FILED AT THE BUILDING INSPECTIONS DIVISION, BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

If you are not the owner or the property being permitted, by signing this application, you hereby certify that you are the authorized agent of the owner.

Furthermore, you must, by law, promise to inform the owner that the property in question is being subjected to possible liens and/or attachment, and must deliver all forms and notices required by law to the owner.

Signature of Owner or Agent:	Date:	Signature of Contractor:	Date:
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Notary as to Owner or Agent:	Notary as to Contractor:
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[illegible]

STATE OF FLORIDA/COUNTY OF _____ STATE OF FLORIDA/COUNTY OF _____

STATE OF FLORIDA/COUNTY OF _____ STATE OF FLORIDA/COUNTY OF _____

Sworn to and subscribed before me this _____ day of _____, 20____.

Sworn to and subscribed before me this _____ day of _____, 20____, by _____,

by _____, who is/is not personally

known to me or who has produced _____	who is/is not personally known to me and produced _____
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as identification.	_____ as identification.
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[illegible]

SIGNATURE OF NOTARY

Printed Name of Notary: _____

Printed Name of Notary: _____
Comm. Expires: _____

Committ. Expires: _____ _____ _____	Committ. Expires: _____ Contractor's License No.: _____
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Rev: 04/16	Escrow Acct. No.
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