

Orange County Division of Building Safety

201 South Rosalind Avenue

Reply To: Post Office Box 2687 • Orlando, Florida 32802-2687

Phone: 407-836-5550 www.ocfl.net/building

Date	
Buildina Permit Numbe	r

APPLICATION FOR BUILDING/LAND USE PERMIT*

* All Applications Must Comply with Concurrency Requirements

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 RECORDING YOUR NOTICE OF COMMENCEMENT."

PLEASE PRINT: The undersigned hereby applies for a permit to m	nake building improvements as	indicated below	on property.		
Project Address:(Must match address on plans)					
Suite/Unit #: Bldg #:	City:	Zip	Code:		
Subdivision Name:					
Parcel ID Number: Section Township (15 Digit Parcel ID Number & Legal Description must be	Range Subdivision		Lot		
Owner Name:	Phone No.: (
Owner Address:	City:	State: _	Zip Code:		
Tenant Name:	Phone No.: (
Nature of Business:			 		
Architect Name:	License No.:	Phone No	o.: ()		
Civil Engineer Name:	License No.:	Phone No	o.: ()		
Nature of Proposed Improvements:					
Demolition Permit #: S	Site Work Permit #:				
PROPERTY ON \square SEWER or \square SEPTIC					
Permit valuation greater than \$2500 requires a no	otarized Page 2. and Notice of Co	mmencement b	rior to the first ir	spection.	
Is Notice of Commencement Recorded? Yes No					
If there were comments on this project, how would you like to receive them?					
☐ Pick them up ☐ E-Mail (Customer shall access Web Page)					
Is proposed work in response to a Notice of Code Violation written by an Orange County Inspector?					
Is proposed work in response to an unsafe abatement notice? Yes No					
Has project had a pre-review? Yes No If Yes, Commercial Plans Examiner(s):					
Is building fire sprinklered? ☐Yes ☐No					
Detached Garage? ☐Yes ☐No	Valuation for Det	tached Garage	Only: \$		
Required work: Plumbing Electrical Mechanical Gas Roofing None					
Alterations Only:					
Is this a new tenant? Yes No If yes, state previous use:					
Intended use of space:					
List use of adjoining tenant space(s): Side:	Above:				
Rear: Side:					
		Total Job Valu	uation: \$		
I hereby make Application for Permit as outlined above, and County Ordinances regulating same and in accordance with applicable Orange County and/or State of Florida codes and knowledge.	plans submitted. The issuance of this p	permit does not gran	nt permission to viol	ate any	
PLEASE PRINT: (Check one) Owner:	Contractor:				
Name of License Holder/Agent:					
Contractor License Number (if applicable):					
Contact Phone Number: () E-Mail Address:					
Authorized Signature:					

Para más información en español, por favor llame al Departamento de Building Safety al número 407-836-5550.

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Permit Application Information - Page Two

Owner's Name		
Owner'sAddress		
Fee Simple Titleholder's Name (If other than owner's)		
Fee Simple Titleholder's Address (If other than owner's)		
City State	Zip Code	
Contractor's Name		
Contractor's Address		
City State		
Job Name		
Job Address		
City State	Zip Code	
Bonding Company Name		
Bonding Company Address		
City State		
Architect/Engineer's Name		
Architect/Engineer's Address		
Mortgage Lender's Name		
Mortgage Lender's Address		
commenced prior to the issuance of a permit and that all work will b	nd installations as indicated. I certify that no work or installation have performed to meet the standards of all laws regulating construction is ured for ELECTRICAL, PLUMBING, GAS, MECHANICAL, ROOFING	
OWNER'S AFFIDAVIT: I certify that all the foregoing information is a laws regulating construction and zoning.	accurate and that all work will be done in compliance with all applicable	
	ice of Commencement may result in your paying twice nencement must be recorded and posted on the job site ncing, consult with your lender or an attorney before	
Owner Signature	Contractor Signature	
The foregoing instrument was acknowledged before me this//	The foregoing instrument was acknowledged before me this / /	
by who is personally known to me	by who is personally known to me	
and who produced as identification and who	and who produced as identification and who	
did not take an oath.	did not take an oath.	
Notary as to Owner	Notary as to Contractor	
Commission No.	Commission No.	
State of FL. County of	State of FL. County of	
My Commission expires:	My Commission expires:	
(SEAL)	(SEAL)	

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