CITY OF NORTH LAUDERDALE
Community Development Department

BUILDING PERMIT APPLICATION

FOLIO NO:
OWNER'S NAME:
Owner's Address:
City: **State**: **Zip**:
Phone:
FEE SIMPLE TITLE HOLDER'S NAME (If other than owner)
Fee Simple Title Holder's Address (If other than owner)
City State Zip
CONTRACTOR:
Contractor State Certification of Registration No:
Contractor Certificate of Competency No:
Mail Address:
City: State: Zip:
Phone:
JOB NAME:
Job Address:
City: County:
LEGAL DESCRIPTION: Lot Block:
Subdivision: Section:
BONDING COMPANY:
Bonding Company Address
City State Zip
ARCHITECT/ENGINEER'S NAME
Architect/Engineer's Address
MORTGAGE LENDER'S NAME
Mortgage Lender's Address
USE
NO OF STORIES: NO OF BAYS:
NO OF UNITS: BEDROOMS: BATHS:
DESCRIPTION OF WORK:

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.

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.

SIGNATURE Homeowner/Qualifier **DATE:**

PRINT NAME Homeowner/Qualifier **DATE:**

NOTARY as to Homeowner/Qualifier

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENT TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

ESTIMATED COST CONSTRUCTION $ _____
BROWARD COUNTY FEES $ _____

PERMIT NO:

JOB DATA

Items	Value	Fee
Building		
Roof		
Enclosure		
Paving – Slab		
Wall/Fence		
Landscape		

TOTAL	$
PLAN REVIEW	$
DEPOSIT	$
TOTAL AMOUNT DUE	$
BROWARD COUNTY FEE	$
RADON FEE	$
Remarks	

PLAN REVIEWER'S SIGNATURE

DEPT APPROVAL	Approve	Hold	Denied	Date	Initial
Zoning					
Structural					
Plumbing					
Electrical					
Mechanical					
Landscaping					
Public Works/Utilities					
Fire					

Minimum Floor Elevation must be highest of
_____Ft. Above Road Crown or _____Ft M.S.L.

Special Inspector Required For	
Hold C.O. For	
Group Occupancy	
No. of Dwelling Units	
Total Sq. Ft.	
Parking	
Type Const	
Occupancy Load	

APPLICATION APPROVAL

This permit does not become valid until signed by an authorized representative of the City of North Lauderdale Community Development Department and all fees paid and receipt acknowledged in the space provided.

APPLICATION
APPROVED BY Permit Officer Date