



City of Belle Glade

110 Dr. Martin Luther King Jr. Blvd.
Belle Glade, FL 33430-3900
P: 561-518-0111 F: 561-993-1811

Permit Number: _____
Entered by: _____
Application Date: _____
Issue Date: _____

Application for Building Permit

Property Information: City: 04

Range: _____ Township: _____ Section: _____ Subdv: _____ Block: _____ Lot: _____

Site Address: _____

Number

Street

City

Zip

Owner's Name: _____ Phone: _____

Owner's Address: _____

Number

Street

City

Zip

Contractor's Information: (Applicant)

Qualifier's Name: _____ License No: _____

Last

First

Company Name: _____

Company Address: _____

Number

Street

City

Zip

Fax: _____ Phone: _____ Email: _____

* Include one copy of Contractor's State/County License, **Belle Glade Business Tax Receipt**, General Liability Cert. and Workers' Comp Cert. or Exemption

Project Information: Residential Commercial Site Plan No.: _____

Describe Work To Be Done: _____

Valuation of Project: \$ _____ Proposed New Square Footage: _____

No. of Housing Units: _____ No. of New Bedrooms: _____ New Total S.F. of Bldg: _____

Sewer or Septic Public Water Supply or Well

Subcontractor Information:

Plumbing: _____ Lic. No. _____ Signature: _____

Electrical: _____ Lic. No. _____ Signature: _____

Mechanical: _____ Lic. No. _____ Signature: _____

Roofing: _____ Lic. No. _____ Signature: _____

Other: _____ Lic. No. _____ Signature: _____

Other: _____ Lic. No. _____ Signature: _____

Other: _____ Lic. No. _____ Signature: _____

* Include one copy of Subcontractor's State/County License, **Belle Glade Business Tax Receipt** and Workers' Comp Certificate or Exemption

Subcontractor's signature above indicates their agreement to comply with all applicable Federal, State and Local Codes and Ordinances associated with this application package and the issuance of a permit.

NOTICE OF COMMENCEMENT INFORMATION: If the cost of the proposed work has a value of \$2,500 or more, (\$7,500 for HVAC) a Notice of Commencement must be recorded with the Palm Beach County Clerk of Courts. One copy of the recorded Notice of Commencement must be submitted to Belle Glade Building Department and one copy of Notice of Commencement must be posted on the job site prior to receiving an inspection.

Fee Simple Titleholder's Name...(if other than owner): _____

Fee Simple Titleholder's Address...(if other than owner): _____

Bonding Company: _____

Bonding Company Address: _____

Architect/Engineer's Name: _____ License No. _____

Architect/Engineer Address: _____

Mortgage Lender's Name: _____

Mortgage Lender's Address: _____

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 AND/OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

***** 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 or that may be required from other governmental entities such as water management district, state agencies or federal agencies.

APPLICANT'S AFFIDAVIT:

Application is hereby made to obtain a permit to do the work and installations as indicated. I acknowledge and accept full responsibility for compliance with all applicable codes, regulations and ordinances as well as the payment of all legally constituted fees regarding this development application, including but not limited to ALL REVIEW FEES, PERMIT FEES, IMPACT FEES AND RESERVATION FEES.

Contractor

Signature: _____

Date: _____

State of Florida
County of Palm Beach

Subscribed and sworn to before me this _____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification, and who did/did not take an oath.

Notary Public Signature: _____

Seal

Owner:

Signature: _____

Date: _____

State of Florida
County of Palm Beach

Subscribed and sworn to before me this _____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification, and who did/did not take an oath.

Notary Public Signature: _____

Seal