



RESIDENTIAL
 COMMERCIAL

FOR OFFICE USE ONLY
 FBC Version: _____ Permit #: _____
 Date Rec'd: _____ Accepted By: _____

BUILDING PERMIT APPLICATION

SURVEY OR PLOT PLAN REQUIRED FOR NEW STRUCTURES, ADDITIONS, SHEDS AND MOBILE HOME PLACEMENT

Job Address: _____ **AltKey** _____

Job Description / Details of Work _____

Property Legal Description _____ Attached

Point of Contact _____ **Phone #** _____

Point of Contact E-mail _____

Owner Name(s) _____ **Owner Phone #** _____

Address _____ **Email:** _____

Fee Simple Title Holder (if other than owner) Name(s) _____

Fee Simple Title Holder Address _____

Contractor Company Name _____ **Phone#** _____

Address _____ **Email** _____

License Holder _____ **State Cert/Reg #** _____

Bonding Company _____ Address _____

Architect / Engineer Name _____ Address _____

Mortgage Lender's Name _____ Address _____

Building Type: IA IB IIA IIB IIIA IIIB IV VA VB
 Building Type can be found on the first page of your engineered plans/drawings

VALUE OF WORK (Total Value of all Construction)	\$ _____ (Required)	SQUARE FOOT CONDITIONED _____
		SQUARE FOOT UNCONDITIONED _____
		SQUARE FOOT TOTAL _____
POTABLE WATER METER SIZE _____		EXISTING IMPERVIOUS AREA _____
		PROPOSED IMPERVIOUS AREA _____
IRRIGATION: Yes <input type="checkbox"/> No <input type="checkbox"/>	IRRIGATION METER: Yes <input type="checkbox"/> No <input type="checkbox"/>	METER SIZE _____
WILL EXISTING TREES BE REMOVED: Yes <input type="checkbox"/> No <input type="checkbox"/>	(If yes, attach Tree Removal Permit Application)	

Sub-Contractors	MECHANICAL _____	LICENSE # _____
	ELECTRICAL _____	LICENSE # _____
	PLUMBING _____	LICENSE # _____
	ROOFING _____	LICENSE# _____
	GAS _____	LICENSE # _____
	OTHER _____	LICENSE # _____

Homeowner's Association Verification

Is the property or job address located in a neighborhood with an active Homeowner's Association?

Yes No

Has the planned improvement been reviewed by the Homeowner's Association making sure that the improvement complies with HOA covenants and restrictions?

Yes No

**Note: The City of Tavares recommends HOA approval be granted prior to permit submittal.
HOA regulations are not enforced by the City of Tavares.**

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 may be required for ELECTRIC, PLUMBING, MECHANICAL, SIGNS, FENCES, DOCKS, POOLS, ETC.

OWNERS AFFIDAVIT: I CERTIFY THAT ALL OF THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH LOCAL ORDINANCES, AND 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 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.

SIGNATURE OF OWNER or AGENT

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this
____ day of _____, 20____, by

Notary Signature

[] Personally Known _____ OR
[] Produced Identification
Type of Identification Produced: _____

SIGNATURE OF CONTRACTOR

STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this
____ day of _____, 20____, by

Notary Signature

[] Personally Known _____ OR
[] Produced Identification
Type of Identification Produced: _____

If the contractor is applying for the permit on the homeowners behalf, then ONLY the contractor needs to sign.

Notice to Contractor/Owner

If you have not recently pulled permits within the City of Tavares, please include all necessary copies of your license, occupational license, workman's compensation coverage or valid exemption, and insurance liability coverage. Failure to provide all necessary information or fill out this application completely could result in a delay in processing or a denial/rejection of your permit application.



America's Seaplane City

**CONSTRUCTION WASTE
DISPOSAL STATEMENT**

CITY OF TAVARES
COMMUNITY DEVELOPMENT
201 E. Main Street, P.O. Box 1068
Tavares, Florida 32778

PRIOR to the issuance of a Building Permit for the construction or renovation of any structure, the Applicant shall provide for the collection and disposal of any construction waste which may result from construction. Construction waste **MUST** be disposed of at a properly permitted landfill or recycling facility.

The City of Tavares is not responsible for construction or vegetation debris resulting from a permitted construction project. Therefore, there are two (2) alternatives whereby the Applicant may satisfy this requirement.

Alternative I

Use a licensed collector or specialty hauler to collect and properly dispose of/or recycle all construction wastes resulting from this project.

Alternative II

The owner/contractor will collect and properly dispose of/or recycle all construction waster resulting from this project.

Please indicate which method of disposal will be used for this project: (PLEASE CHECK ONE)

Alternative I **Alternative II**

Regardless of which method the applicant chooses, ultimately the responsibility to properly dispose of/or recycle all construction waste will fall to the general contractor/owner. Please be advised that removal of construction waste is one of many requirements for the issuance of a certificate of occupancy.

I hereby swear or affirm that I have read the requirements indicated above, and agree to the terms as directed by the City of Tavares.

Applicant's Signature

Date

Subscribed and sworn to before me this _____ day of _____, 20____ by,
_____ who is personally known to me or has produced _____ as
identification.

Notary Signature

(SEAL)