



MEMORANDUM

This office will not accept incomplete applications. If an incomplete application is submitted it will automatically be rejected.

Complete applications must contain;

- Owner name
- Owner's telephone number
- Description of work
- Valuation of the job/project
- Full parcel ID.(unless the owner is exempt from public records)
- Square footage (new, renovations, additions, shed, carports, roofs, etc.)
- Engineering information (for new construction)
- All contractors' information to be listed on the front of the application.
- Contractor/agent MUST sign the front of the application.
- The back of the application MUST be signed and notarized by pertinent parties.
- On new construction please submit plumbing diagram as well as electrical load calculations.(when applicable)

TOWN OF ST. LEO

Building Permit Application

PERMIT #	Date Received	Received by
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Planning/Zoning Approval: Yes [] No []	Zoning Approved By:
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New construction in Flood Zone: Yes [] No []	Is this Structure on the Historic Register: Yes [] No []
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Is this application the result of a Stop Work order or Notice of Violation? Yes [] No []
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Print or type except where otherwise indicated in **BLACK INK ONLY**. Complete this application in its entirety as indicated or **IT WILL NOT BE ACCEPTED**.

OWNER NAME:	TELEPHONE:
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Fee Simple Titleholder's Name/Address (if other than owner)

Job Site Location

Description of Work

Parcel ID # : Section	Township	Range	Subdivision	Block	Lot
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Lot Size:	Setbacks				Type:
x	Front	Side	Side	Rear	Block [] Frame [] Other []

Living Area sq. ft.	No. of Bedrooms	Patio/Lanai sq. ft.	Entry sq. ft.
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Garage/Carport sq. ft.	Total sq. ft. under roof	Valuation: \$
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Plans review Fee/Administrative Fee: \$	(Fee due at time of application)
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Architect	Address	Telephone
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Engineer	Address	Telephone
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Mortgage Lender	Address	Telephone
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Bonding Company	Address	Telephone
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Building Contractor	Company	Telephone
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License #	Signature
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Electrical Contractor	Company	Telephone
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License #	Signature
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Mechanical Contractor	Company	Telephone
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License #	Signature
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Plumbing Contractor	Company	Telephone
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License #	Signature
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Roofing Contractor	Company	Telephone
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License #	Signature
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Other Contractor	Company	Telephone
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License #	Signature
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DO NOT WRITE BELOW THIS LINE - OFFICE USE ONLY

Building Fee \$	Electrical Fee \$	Mechanical Fee \$
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Plumbing Fee \$	Roofing Fee \$	Fire Inspection Fee \$
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Driveway Fee \$	Temporary Power Pole Fee \$	Administrative Fee \$
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DCA Fee \$	Plans Review Fee \$	Site Plan Review Fee \$
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Other Fee \$

TOTAL PERMIT FEES: \$

FOR INSPECTIONS OR OTHER INFORMATION RELATING TO THIS PERMIT CONTACT
CITY OF DADE CITY

Telephone: (352) 521-1460

Fax: (352) 521-1498

14150 5th Street

P.O. Box 1355

Dade City, FL 33526-1355

CONDITIONS OF PERMIT AFFIDAVIT

Notice of Deed Restrictions:	The undersigned understands that this permit may be subject to "Deed Restrictions" which may be more restrictive than City Regulations. The undersigned assumes responsibility for compliance with any compliable Deed Restrictions.
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Unlicensed Contractors, Owner and Contractor Responsibilities	If the owner has hired a contractor or contractors to undertake work, they are required to be licensed in accordance with state and local regulations. If the contractor is not licensed as required by law, both the owner and contractor may be cited for misdemeanor violation under state law. If the owner or intended contractor is uncertain as to what licensing requirements may apply for this intended work, they are advised to contact the Pasco County Contractor Licensing Division for licensing information at (813) 847-8009. (FLORIDA STATUTES CHAPTER 489, PART I, II AND III)
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Impact Fees	The undersigned understands that City of Dade City Impact Fees may apply to the construction of new buildings or change of use in existing buildings. The undersigned also understands that such fees as may be due will be identified prior to permitting and that NO ELECTRICAL POWER RELEASE OR CERTIFICATE OF OCCUPANCY OR COMPLETION WILL BE ISSUED UNTIL SUCH FEES HAVE BEEN PAID TO THE CITY OF DADE CITY.
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Construction Lien Law, Chapter 713, Florida Statutes	If valuation of work is \$2,500.00 or more, I certify that I, the applicant, have been provided a copy of "FLORIDA CONSTRUCTION LIEN LAW-HOMEOWNER'S PROTECTION GUIDE" prepared by the Florida department of Agriculture and Consumer Affairs. If the applicant is someone other than the "OWNER". I certify that I have obtained a copy of the above-described document and promise in good faith to deliver it to the "OWNER" prior to commencement. (1)(a)713.135
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Contractor/Owner Affidavit	I certify that all the information in this application is accurate and that all work will be done in compliance with all applicable laws regulating construction, zoning and land development. Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet standards of all laws regulating construction. City Codes and Ordinances, Zoning Regulations, and Land Development regulations in the jurisdiction. I also certify that I understand that the regulation of other government agencies may apply to the intended work, and that it is my responsibility to identify what actions I must take to be in compliance. Such agencies include, but are not limited to: (Florida Statutes Section 553.79)
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Department of Environmental Regulations	Cypress Bayheads, Wetland Areas and environmentally sensitive lands, water and wastewater treatment.
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Southwest Florida Water Management District	Wells, Cypress Bayheads, Altering Watercourses
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Department of Health and Rehabilitative Services, Environmental Health Unit	Wells, wastewater and septic tanks.
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U.S. Environmental Protection Agency	Asbestos Abatement
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Army Corp of Engineers	Seawalls, docks, navigable waters
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Fill	I understand that the following restrictions apply to the use of fill: If fill is used in any area, I certify that use of such fill will not adversely affect adjacent properties, and that the owner may be cited for violating the conditions of this building permit. The use of an, A, B, or C Drainage Plan is required to be used when applying for a permit to construct, enlarge, alter, or erect a structure unless otherwise stated.
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Effective October 01, 2003 all property owner(s) and/or contractor(s) shall comply with all MS4 regulations as they related to Stormwater runoff for both commercial and residential construction.

IF I AM THE AGENT FOR THE OWNER, I promise in good faith to inform the owner of the permitting conditions set forth in this affidavit prior to commencing construction. I understand that a separate permit may be required for electrical, plumbing, signs, wells, pools, air conditioning, gas, or other installations not specifically included in the application.

A permit shall be construed to be a license to proceed with the work and not as authority to violate, cancel, alter, or set aside any provisions of the technical codes, nor shall issuance of a permit prevent the Building Official from thereafter requiring correction of error in plans, construction, or violations of any code. Every permit issued shall become invalid unless the work authorized by such permit is commenced within six (6) months of permit issuance, or if work authorized by the permit is suspended or abandoned for a period of six (6) months after time the work is commenced. One or more extensions of time, for periods not to exceed ninety (90) days each, may be allowed for the permit. The extension shall be in writing to the Building Official. Failure to obtain an approved inspection within one-hundred-eighty (180) days of the previous approved inspection shall constitute suspension or abandonment. (FBC 2001, Chapter 1, section 104.5.1).

WARNING TO OWNER:
Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intended financing, consult with your lender or an attorney before recording your Notice of Commencement.

Owner or Agent Signature _____

Contractor Signature _____

Date: _____

Date: _____

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 _____

Personally Known To Me	
Produced ID	
Type Of ID	

Personally Known To Me	
Produced ID	
Type Of ID	

Notary Public Signature _____

Notary Public Signature _____

NOTICE TO OWNER/CONTRACTOR:
Power Release and or Certificate of Occupancy will not be considered until All Impact fees have been paid.