

BUILDING PERMIT APPLICATION DEMOLITION (Page 1 of 2)
INDIAN RIVER COUNTY / CITY OF VERO BEACH

I. LEGAL DESCRIPTION: LOT ____ BLOCK ____ SUBDIVISION _____ App. Date: _____
 PARCEL NUMBER: _____ FL Bldg Code: _____
 (from tax notice \ receipt) Supplements: _____
 JOB ADDRESS: _____

II. CONTRACT / ESTIMATED CONSTRUCTION COST: \$ _____
 Permit Fee = Construction value multiplied by .00415 Minimum Permit Fee = \$200.00

III. TOTAL SQUARE FOOTAGE UNDER-ROOF - REQUIRED: _____

IV. PROPOSED USE (Check All That Apply)	(Check All That Apply)	Type Construction (Check All That Apply)
____ RESIDENTIAL	____ NEW CONSTRUCTION	____ TYPE V – Combustible (All Wood Frame)
____ COMMERCIAL	____ ADDITION	____ TYPE III – Exterior Non-Combustible/ Interior Any Material
____ MULTI-FAMILY	____ ALTERATION	____ TYPE I or II All Non-Combustible (Specify)
____ ACCESSORY Specify: _____	<input checked="" type="checkbox"/> DEMOLITION	____ OTHER (Sprinkler, Timber Const) Specify: _____

	NAME & ADDRESS	CONTACT INFORMATION
OWNER		Name:
		E-MAIL:
		DAYTIME PHONE NUMBER: Fax:
TITLE HOLDER (If Other Than Owner)		Name:
		E-MAIL:
		DAYTIME PHONE NUMBER:
CONTRACTOR	LICENSE NUMBER: COMP CARD NUMBER:	Name:
		E-MAIL:
		DAYTIME PHONE NUMBER: Fax:
ARCHITECT		E-MAIL:
		DAYTIME PHONE NUMBER:
ENGINEER		E-MAIL:
		DAYTIME PHONE NUMBER:

COMBINATION BUILDING PERMIT APPLICATION (Page 2 of 2)
INDIAN RIVER COUNTY / CITY OF VERO BEACH

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, insurance, and worker's compensation. I understand that sub-contractor affidavits must be obtained for electrical, plumbing, air-conditioning, roofing, insulation, pools, irrigation systems, wells, or any other work that is allowed to be included in this permit.

Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the engineering department prior to the issuance of certificate of completion.

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.

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

_____ Signature of Owner or Agent {To sign as an Agent for the Owner you must have a Florida Form Power of Attorney signed by the Owner and Notarized with two additional witnesses other than the Notary} Date: _____	And/or	_____ Signature of Contractor Date: _____
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As to Owner:

As to Contractor:

State of _____
 County of _____

State of _____
 County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by _____ who is ___ personally known or who has _____ produced identification. Type identification produced: _____.

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by _____ who is ___ personally known or who has _____ produced identification. Type identification produced: _____.

 Official Signature of Notary Public

 Official Signature of Notary Public

 Notary's Name, Typed, Printed or Stamped

 Notary's Name, Typed, Printed or Stamped

Notary Seal:

Notary Seal:
