

Tel: 305 899 8000
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VILLAGE OF BISCAYNE PARK
PERMIT APPLICATION

Fees set October 7, 2014



Village of Biscayne Park
 640 NE 114th Street
 Biscayne Park, FL 33161
 building@biscayneparkfl.gov

DATE:

PERMIT #:

JOB ADDRESS:

PROPERTY OWNER INFORMATION **CONTRACTOR INFORMATION**

Name: _____
 Address: _____
 City: _____ ST _____ Zip: _____
 Telephone: _____ - _____ - _____
 E-Mail: _____

Company Name: _____
 Address: _____
 City: _____ ST _____ Zip: _____
 Telephone: _____ - _____ - _____
 License No.: _____

PERMIT TYPE (Check ONLY one)

TYPE OF WORK (Check ONLY one)

- BUILDING
- ELECTRICAL
- MECHANICAL
- PLUMBING/GAS
- PAVING/DRAINAGE
- ROOFING
- CHANGE CONTRACTOR
- EXTENSION
- RENEWAL
- SHOP DRAWING
- PAINTING (exterior only)
- FENCE

- NEW CONSTRUCTION
- ADDITION DETACHED
- ALTERATION EXTERIOR
- REPAIR / REPLACE
- ALTERATION INTERIOR
- ADDITION ATTACHED

ESTIMATED JOB COST
SQUARE FOOTAGE

Architectual plans must be provided in both hard copy and electronic format.

ARCHITECT / ENGINEER INFORMATION

PROPERTY INFORMATION

Name: _____
 Address: _____
 City: _____ ST _____ Zip: _____
 Telephone: _____ - _____ - _____
 License No.: _____

FOLIO NO: **17** - _____ - _____ - _____
 SINGLE FAMILY DUPLEX
 OTHER: _____

DESCRIPTION OF WORK

APPLICATION IS HEREBY submitted to obtain a PERMIT to do work and installations as indicated. I certify that no work 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 the Village of Biscayne Park. If work has commenced without such permit, a double fee will be applied to the permit cost. I understand that separate permits must be secured for each permit type. **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. Furthermore, I authorize the above-named contractor to do the work stated. **AGENT'S AFFIDAVIT:** If an agent is representing the owner, a separate affidavit must be completed and attached herewith authorizing this substitution. A tenant can submit on behalf of the owner with a notarized letter of acknowledgement. **WARNING TO OWNER: Your failure to record a Notice of Commencement may result in paying twice for improvements to your property. If you intend to obtain financing, you must consult with your lender or an attorney BEFORE recording your Notice of Commencement.**

 Signature of Owner or Agent Date
 Print Name (Owner or Agent) _____
 STATE OF FLORIDA, COUNTY OF _____
 Sworn to and subscribed before me this _____ day of _____
 20 _____.

 NOTARY FOR OWNER OR AGENT
 ___ Personally Known OR Provided ID _____

 Signature of Qualifier Date
 Print Name (Qualifier) _____
 STATE OF FLORIDA, COUNTY OF _____
 Sworn to and subscribed before me this _____ day of _____
 20 _____.

 NOTARY FOR QUALIFIER
 ___ Personally Known OR Provided ID _____

PLANNING & ZONING BOARD REVIEW FEE \$25.00

Date: _____, 20 ____
 Approved
 Not Approved
 By _____

TOTAL FEE \$ _____.	Discipline	AP	DAP
	Electrical		
	Mechanical		
	Plumbing		
	Roofing		
	Bldg Official		