



CITY OF ORLANDO

Date: _____

Building Permit Application

Job Site Address or Parcel ID #: _____

Job/Project Name: _____

Property Owner Name: _____ Phone: _____

Address: _____

Business Owner Name: _____ Phone: _____

Address: _____

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

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

Contractor Name: _____ Lic # _____

Address: _____

Email: _____

Contractor Company Name: _____

Contractor Company Address: _____

Primary Contact Name: _____ Phone: _____

Email: _____ Fax: _____

Bonding Company: _____

Bonding Company Address: _____

Architect/Engineer's Name: _____

Architect/Engineer's Address: _____

Mortgage Lender's Name: _____

Mortgage Lender's Address: _____

Work Description: _____

GENERAL

- Type of Work (subtype—select one):
- | | | | |
|--|---|--|--|
| <input type="checkbox"/> New | <input type="checkbox"/> Addition | <input type="checkbox"/> Alteration ¹ | <input type="checkbox"/> SITE WORK |
| <input type="checkbox"/> Fence | <input type="checkbox"/> Roof ² | <input type="checkbox"/> Accessory Structure | <input type="checkbox"/> Repair/Replace ¹ |
| <input type="checkbox"/> Sign | <input type="checkbox"/> Tent | <input type="checkbox"/> Billboard | <input type="checkbox"/> Change of Use |
| <input type="checkbox"/> Solar | <input type="checkbox"/> Swimming Pool | | <input type="checkbox"/> Foundation Only |
| <input type="checkbox"/> LEED (<input type="checkbox"/> certified <input type="checkbox"/> silver <input type="checkbox"/> gold <input type="checkbox"/> platinum) | <input type="checkbox"/> Dumpster Enclosure/Pad | | |

New Jobs created ? Yes No Unsure

Plan Review Type: Commercial Residential 1 or 2 units Residential 3 or more units

Related to Code Enforcement Action? (Y/N) _____

Estimated Construction Cost: \$ _____

Note: Owner furnished equipment and materials must be included in Estimated Construction Cost. If the estimated cost of this job is greater than \$2,500 a certified copy of the recorded Notice of Commencement must be filed with Permitting Services prior to scheduling your first inspection.

¹Requires separate scope of work. ²Requires Re-roofing Supplement form.



CITY OF ORLANDO

SUBCONTRACTORS

Company Name

State of Florida
License # Reg/Cert

Card Holders Name

Elect. _____

Mech. _____

Plumb. _____

Gas. _____

SIGN / BILLBOARD

Building Frontage (Ft): _____ Primary _____ Secondary _____ Third _____ Fourth

Sign Type ³	Electric? (Y/N)	Test Lab #	Sign Area (SqFt)	Existing or Proposed?
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

³Awning, Billboard, Construction, Ground/Pole, Marquee, Menu, Monument, Other, Political Campaign, Projecting, Real Estate, Trailer, Wall, Window (identify existing and proposed signs)

SWIMMING POOL

Deck Area (SqFt): _____ Fenced? (Y/N) _____ Screened? (Y/N) _____ Overhead Power Distance (Ft): _____

TENT⁴

Length (Ft): _____ Width (Ft): _____ Area (SqFt): _____ In Use From: _____ To: _____ # of Tents: _____

⁴Flame Retardant Certificate Required

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 the City of Orlando. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS and AIR CONDITIONERS, etc.

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. 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 COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.



CITY OF ORLANDO

If you are not the owner of the property being permitted, you must, by law (FS 713.135 (c)) promise to inform the fee simple titleholder that the property in question is being subjected to possible liens and/or attachment.

OWNER _____ Date _____

Print Name _____ (Owner)

(Owner)
STATE OF FLORIDA
COUNTY OF _____

SWORN to and subscribed freely and voluntarily for the purpose therein expressed before me by _____, known to me to be the person described in and who executed the foregoing. He/she is personally known to me or has produced _____ (type of identification) as identification. WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 201__.

Notary Public Signature
Print Name:
My Commission Expires:

CONTRACTOR _____ Date _____

Print Name _____ (Contractor)

(Contractor)
STATE OF FLORIDA
COUNTY OF _____

SWORN to and subscribed freely and voluntarily for the purpose therein expressed before me by _____, known to me to be the person described in and who executed the foregoing. He/she is personally known to me or has produced _____ (type of identification) as identification. WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 201__.

Notary Public Signature
Print Name:
My Commission Expires:

CERTIFICATE OF COMPETENCY HOLDER
Contractor's State Certification or Registration No. _____
Contractor's Certificate of Competency No. _____

OWNER'S ELECTRONIC SUBMISSION STATEMENT:
Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

For plan review status, inspection scheduling/results and other permitting information, please call "PROMPT", our Interactive Voice Response system at 407.246.4444 or visit online at <http://www.cityoforlando.net/permits>.

Rev 05/2010