



**APPLICATION FOR BUILDING PERMIT
CITY OF KEY COLONY BEACH
P.O. BOX 510141 - KEY COLONY BEACH, FL 33051-0141
PHONE 305-289-1212 FAX 305-289-1767**

DATE FILED DATE GRANTED PERMIT

NOTE: THIS PERMIT IS VALID FOR A 15 MONTH PERIOD MAXIMUM FROM DATE GRANTED.

PROPERTY OWNER PHONE

ADDRESS OF RECORD (MAIL)

CITY, STATE, ZIP

Property Description:

LOT BLOCK SUBD ZONING DISTRICT TAX FOLIO#

STREET ADDRESS:

- ST STREET FLOOD ZONE & ELEVATION

PROPOSED CONSTRUCTION: (Specify, alteration, seawall, etc.)

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Check applicable line for roofing permit: **New Roof** **Re-Roof** **Re-Cover**

CONTRACTOR **LICENSE**

BUSINESS ADDRESS **PHONE**

BONDING COMPANY NAME/ADDRESS **PHONE**

ARCHITECT/ ENGINEER NAME/ADDRESS **PHONE**

MORTGAGE LENDER NAME/ADDRESS **PHONE**

LIST ALL SUBCONTRACTORS, COUNTY & STATE LICENSE NUMBER AND COST:

ELECTRICAL **LICENSE #** **COST**

PLUMBING **LICENSE #** **COST**

MECHANICAL **LICENSE #** **COST**

CONCRETE/MASONRY **LICENSE #** **COST**

CARPENTRY **LICENSE #** **COST**

ROOFING **LICENSE #** **COST**

In consideration of the granting of the above requested permit, you do hereby agree that you will in all respects construct the work in accordance with the above description and any plans and specifications herewith submitted and filed in the office of the Building Official in compliance with all laws and ordinances of the City of Key Colony Beach, Florida.

"Notice: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of Monroe County, and there may be additional permits required from other governmental entities such as state agencies or federal agencies."

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/Print Owner/Agent (Including Contractor) Date Signed

Signature of Contractor (printed name) Date Signed

Signature of NOTARY as to Owner

Signature of NOTARY as to Contractor

My Commission Expires _____

My Commission Expires _____

I.D. _____ Known _____

I.D. _____ Known _____

BUILDING PERMIT FEES:

Costs up to \$2000.00 Flat Fee \$100.00

Costs greater than \$2000.00 \$40.00 per \$1000.00 or any part of

Fire Safety

Clean-Up Bond

**FINAL INSPECTION FEE: (separate check)
(REFUNDABLE UP TO 1 YEAR AFTER PERMIT IS ISSUED)**

Signature of Building Official

DATE PAID **PAID CHECK #**

DATE ISSUED: _____