

APPLICATION FOR COMMERCIAL/INDUSTRIAL BUILDING PERMIT  
HIGHLANDS COUNTY, FLORIDA

OWNER \_\_\_\_\_ BLDG. CONTRACTOR \_\_\_\_\_  
ADDRESS \_\_\_\_\_ ADDRESS \_\_\_\_\_  
CITY \_\_\_\_\_ CITY \_\_\_\_\_  
PHONE \_\_\_\_\_ PHONE \_\_\_\_\_

Description of Property: \_\_\_\_\_ Date Lot Created: \_\_\_\_\_  
Existing Strap: C- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Proposed Strap: C- \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_  
Current Use \_\_\_\_\_ Proposed Use \_\_\_\_\_  
Subdivision \_\_\_\_\_ Unit/Sec \_\_\_\_\_ BLK \_\_\_\_\_ Lots \_\_\_\_\_  
F. A. R. \_\_\_\_\_% Impervious Surface \_\_\_\_\_% PB \_\_\_\_\_ PG \_\_\_\_\_ Map No. \_\_\_\_\_ Property Zoned \_\_\_\_\_  
Lot Information \_\_\_\_\_ Stories \_\_\_\_\_ Actual Lot Area \_\_\_\_\_  
Setbacks: Front \_\_\_\_\_ Rear \_\_\_\_\_ Sides \_\_\_\_\_ Corner \_\_\_\_\_ Height \_\_\_\_\_  
Date: \_\_\_\_\_ Approved By: \_\_\_\_\_

Land Use Category: \_\_\_\_\_ Zoning \_\_\_\_\_ Consistent:  Yes  No.  
Vesting:  Legal Lot of Record or Vesting # \_\_\_\_\_  
Hist/Arch  Yes:  No: HPC Certificate \_\_\_\_\_  
Natural Resources On  Wetlands;  Cutthroatgrass;  Xeric Uplands;  None  
Environmental Clearance \_\_\_\_\_ / \_\_\_\_\_ (date)  LCP: # \_\_\_\_\_ / \_\_\_\_\_ (Date)  
 Cleared before May 2, 1994  1/2 Acre Lot  < 2 Acres Lot  Expanding Existing Use.  State or Federal Wetlands Permit  
is a Condition of Approval (Must fill out Owner's Wetland Affidavit and see condition of approval On Reverse side of this Application)  
 Land Clearing Permit Issued. Planning \_\_\_\_\_ Date: \_\_\_\_\_

9-1-1 Assigned Address; Approved By \_\_\_\_\_  
BLDG. NO. \_\_\_\_\_ STREET \_\_\_\_\_

Engineering Department approval: \_\_\_\_\_ Date: \_\_\_\_\_

Sanitary And Water Facilities To Be Connected :  
SEPTIC TANK \_\_\_\_\_ CENTRAL SEWER \_\_\_\_\_ WELL \_\_\_\_\_ CENTRAL WATER \_\_\_\_\_ # Of BEDROOMS \_\_\_\_\_ # Of BATHROOMS \_\_\_\_\_  
SIZE OF SEPTIC TANK \_\_\_\_\_ SEPTIC TANK PERMIT NUMBER: \_\_\_\_\_  
PROVIDER-WATER \_\_\_\_\_ PROVIDER SEWER \_\_\_\_\_  
DATE: \_\_\_\_\_ APPROVED BY: \_\_\_\_\_

*Lowest Floor Level to be no lower than 2' above the level of the base flood elevation.*

APPLICATION FOR PERMIT TO: \_\_\_\_\_ FLOOD ZONE & PANEL# \_\_\_\_\_  
 Construct  Enclose  Add To  Alter  Demolish  Move  Repair  
NATURE OF WORK \_\_\_\_\_ IMPACT FEE: \_\_\_\_\_  
TYPE OF CONSTRUCTION: \_\_\_\_\_ FIRE FINAL FEE: \_\_\_\_\_  
SIZE OF BLDG \_\_\_\_\_ VALUATION: \$ \_\_\_\_\_ BUILDING PLAN REVIEW FEE: \_\_\_\_\_  
FOOTAGE: \_\_\_\_\_ RADON/CERTIFICATION SURCHARGE: \_\_\_\_\_  
LIVING AREA: \_\_\_\_\_ MITIGATION: \_\_\_\_\_  
UNENCLOSED AREA: \_\_\_\_\_ ZONING REVIEW FEE: \_\_\_\_\_  
TOTAL COMBINED AREA: \_\_\_\_\_ ADDRESSING: \_\_\_\_\_  
CODE IN FORCE: \_\_\_\_\_ FORM BOARD FEE: \_\_\_\_\_  
TOTAL: \_\_\_\_\_

**THIS APPLICATION MUST INCLUDE Two SETS ENGINEERED DRAWINGS AND ONE SITE PLAN.**

PLANS PREPARED BY: \_\_\_\_\_ ADDRESS: \_\_\_\_\_  
I hereby acknowledge the above information is correct and said work and use will be in conformance  
Highlands County Codes and regulations.

DATE: \_\_\_\_\_ Signature: \_\_\_\_\_  
State # \_\_\_\_\_ County #: \_\_\_\_\_

**STATE ASBESTOS NOTIFICATION REQUIRED:** FOR ALL COMMERCIAL PERMITS (DEMOLITIONS AND RENOVATIONS) FEDERAL AND STATE LAWS  
REQUIRE THE OWNER/OR OPERATOR TO SUBMIT A NOTICE TO THE DEPARTMENT OF ENVIRONMENTAL PROTECTION (DEP) FORM 62-257.900(1)  
PRIOR TO THE REMOVAL OF ASBESTOS PRODUCTS AND/OR THE DEMOLITION OF A STRUCTURE. FOR MORE INFORMATION CONTACT DEP AT  
(239) 332-6975.

Tax Folio No.....

**BUILDING PERMIT APPLICATION**

Owner's Name \_\_\_\_\_

Contractor's Name \_\_\_\_\_

Owner's Address \_\_\_\_\_

Contractor's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Fee Simple Titleholder's Name \_\_\_\_\_

Architect/Engineer's Name \_\_\_\_\_

Fee Simple Titleholder's Address: \_\_\_\_\_

Architect/Engineer's Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Bonding Company \_\_\_\_\_

Job Name \_\_\_\_\_

Bonding Company Address \_\_\_\_\_

Job Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installation 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 and laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS and AIR CONDITIONERS, HOODS, FIRE PROTECTION SYSTEMS AND ALARMS, 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.

Signature \_\_\_\_\_  
(Owner or Agent)

Signature \_\_\_\_\_  
(Contractor)

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_.

Signature of Notary Public – State of Florida

Signature of Notary Public – State of Florida

Print, Type, or Stamp Commissioned Name of Notary

Print, Type, or Stamp Commissioned Name Notary

Personally Known \_\_\_ or Produced Identification \_\_\_\_\_

Personally Known \_\_\_ or Produced Identification \_\_\_\_\_

**Certificate of Competency Holder**

Contractor's State Certification or Registration No.

Contractor's Certificate of Competency No.

APPLICATION APPROVED BY: \_\_\_\_\_  
Permit Officer

I do hereby certify that all subcontractors hired for performance on this job Permit # \_\_\_\_\_, are duly certified and licensed and hold a Certificate of Competency Card in Highlands County.

General Contractor or Owner

**Conditions of approval for Highlands County Building Permit/Land Clearing Permit**

State or Federal Wetlands Permit is a Condition of Approval

Information in the Planning Department indicates that your property may contain wetlands or cutthroat grass seep habitat (a kind of wetland). The Highlands County Comprehensive Plan, Natural Resources Element Policy 4.5, states that where cutthroat grass seep or wetlands are located, a permit from the appropriate State or Federal agency (i.e., the Florida Department of Environmental Protection, the Southwest Florida Water Management District, the South Florida Water Management District, and/or the U.S. Army Corps of Engineers) is a condition of approval for building permits or land clearing permits. Evidence of compliance with this condition (e.g., copy of permit application, copy of permit, or letter from agency) shall be made available to the County Building Official upon request.

Planning: \_\_\_\_\_

Date: \_\_\_\_\_

Applicant's/Agent's signature on this permit indicates knowledge that permits from the US Fish & Wildlife, US Army Corps of Engineers, Florida Fish and Wildlife Conservation Commission, Florida Department of Environmental Protection, and/or the appropriate Water Management District may be required before commencing development or land clearing activities on this permit.