



**BREVARD COUNTY BUILDING CODE**

2725 Judge Fran Jamieson Way, A114  
Viera, FL 32940  
(321) 633-2187 phone  
Email: InspectMail@brevardfl.gov

Permit # \_\_\_\_\_  
Entered by: \_\_\_\_\_  
Application Date: \_\_\_\_\_

**BUILDING PERMIT APPLICATION**  
Florida Building Code in effect: 6th Edition

**PROPERTY INFORMATION**

TWP: \_\_\_\_\_ RNG: \_\_\_\_\_ SEC: \_\_\_\_\_ SUB #: \_\_\_\_\_ BLK/PAR: \_\_\_\_\_ LOT: \_\_\_\_\_

Site Address: \_\_\_\_\_  
# Street City Zip

Owner's Name: \_\_\_\_\_  
Last First Telephone Number

Owner's Address: \_\_\_\_\_  
# Street City Zip

**CONTRACTOR'S INFORMATION (APPLICANT)**

Qualifier Name: \_\_\_\_\_  
Last First License #

Company Name: \_\_\_\_\_

Address: \_\_\_\_\_  
# Street City Zip

Fax #: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-Mail: \_\_\_\_\_

**PROJECT INFORMATION**       Residential       Commercial      Site Plan #: \_\_\_\_\_

Describe Work To Be Done: \_\_\_\_\_  
\_\_\_\_\_

Cost of Project: \$ \_\_\_\_\_ Proposed Sq. Ft.: \_\_\_\_\_  
(conditioned) (total new construction)

# of housing units \_\_\_\_\_ # of new bedrooms \_\_\_\_\_ Master Plan #: \_\_\_\_\_

Sanitary Service:  Sewer Service      Potable Water Service:  Public or Private Water  
 Septic       Well

**SUBCONTRACTOR INFORMATION:**

LAST NAME	FIRST NAME	(NO STATE REGISTRATION #)	
Plumbing Contractor Name:		License #:	Phone:
Electrical Contractor Name:		License #:	Phone:
HVAC Contractor Name:		License #:	Phone:
Roofing Contractor Name:		License #:	Phone:
Specialty Contractor Name:		License #:	Phone:

Site Address: \_\_\_\_\_

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

***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 RECORDING YOUR NOTICE OF COMMENCEMENT.***

**\*\* 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 this county or that may be required from other governmental entities such as water management district, state agencies or federal agencies.**

**APPLICANT'S AFFIDAVIT**

**Application is hereby made to obtain a permit to do the work and installations as indicated. I acknowledge and accept responsibility for compliance with all applicable codes, regulations and ordinances as well as the payment of all legally constituted fees regarding this development application, including but not limited to ALL REVIEW FEES, PERMIT FEES, IMPACT FEES AND RESERVATION FEES.**

\_\_\_\_\_  
Signature: **Contractor**

\_\_\_\_\_  
Signature: **Owner**

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

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

State of Florida  
County of Brevard

State of Florida  
County of Brevard

Subscribed and sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, \_\_\_\_\_, personally  
appeared \_\_\_\_\_  
who is personally known to me or produced  
\_\_\_\_\_ as identification,  
and who did/did not take an oath.

Subscribed and sworn to before me this \_\_\_\_\_ day  
of \_\_\_\_\_, \_\_\_\_\_, personally  
appeared \_\_\_\_\_  
who is personally known to me or produced  
\_\_\_\_\_ as identification,  
and who did/did not take an oath.

\_\_\_\_\_  
Notary Public Signature

\_\_\_\_\_  
Notary Public Signature

Seal

Seal

**FINAL INSPECTION IS REQUIRED Failure to obtain a final inspection may result in a penalty.**