

**HERNANDO COUNTY COMMERCIAL BUILDING  
PERMIT APPLICATION**

\_\_\_\_\_

**Application Number**

\_\_\_\_\_

**Key Number**

<b>Project name:</b>		
Building Sq. Footage	Site Acreage	Project Development Acreage
<b>Address of Job Site</b>		
Legal Description:	Lot:	Block:                      Subdivision:
Previous Use:		
Direction to Job site:		

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

**MUST HAVE THIS INFORMATION - Valuation of work to be done: \$** \_\_\_\_\_

<b>Property Owner:</b>			
Address:	City:	State:	Zip:
Interest in Property			
Name of Fee Simple Title holder: (if other than Owner:)			
Address:	City:	State:	Zip:

<b>Architect:</b>		Phone: (    )	
Address:	City:	State:	Zip:
Email:	Fax: (    )		
<b>Building Engineer:</b>		Phone: (    )	
Address:	City:	State:	Zip:
Email:	Fax: (    )		
<b>Site Civil Engineer:</b>		Phone: (    )	
Address	City:	State:	Zip:
Email:			

**Public Contact Person - Responsible for Coordination of Project**

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: -----

Email:

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

**License number - State Certification Number or Hernando County Number only**

**Building Contractor:**

License Number: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Electrical Contractor:**

License Number: \_\_\_\_\_

Phone: (    ) \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Plumbing Contractor:**

License Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Mechanical Contractor:**

License Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Roofing Contractor:**

License Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Underground utilities Contractor:  
Category Five:**

License Number: \_\_\_\_\_

License Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

**Paving Contractor:**

License Number: \_\_\_\_\_

Phone: \_\_\_\_\_

Fax: (    ) \_\_\_\_\_

Email: \_\_\_\_\_

<b>Gas Line Contractor</b> (within building only):	License Number:
Phone: ( )	Fax: ( )
Email:	

<b>Low Voltage Contractor:</b>	License Number:
Phone: ( )	Fax: ( )
Email:	

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 this jurisdiction. I understand that a permit must be secured for **ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS and AIR CONDITIONING, 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.**

\_\_\_\_\_  
Owner/Contractor or Authorized Agent

STATE OF \_\_\_\_\_ COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_.

Personally Known OR  Produced Identification

\_\_\_\_\_  
Type of Identification Produced

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

\_\_\_\_\_  
Print, Type, or Stamp Commissioned Name

(Notary Seal)