

**CITY OF SAFETY HARBOR**  
**BUILDING DEPARTMENT**  
**Application for Building Permit**

**750 Main Street, Safety Harbor, Florida 34695 (727) 724-1515**

**DATE:**

**PERMIT #:**

**PROPERTY INFORMATION**

Parcel ID #	/	/	/	/	/	/	/
	Section	Township	Range	Subdivision	Block	Lot	
Job Address: _____							
Subdivision Name: _____							
Description of Work: _____							
Is the application an "After the Fact Building Permit" or the result of a "Stop Work Order"?				yes	no		
Value of Improvements: \$		Occupancy Type:		Flood Zone:			

**OWNER INFORMATION**

Owner Name: _____	Phone #: _____
Owner Address: _____	Email: _____
City: _____	State: _____ Zip Code: _____
Mortgage Lender's Name: _____	
Mortgage Lender's Address: _____	
Fee Simple Titleholder Name (If other than owner) _____	
Fee Simple Titleholder Address (If other than owner) _____	

**CONTRACTOR INFORMATION**

Contractor Company Name: _____	Phone #: _____
License Holder: _____	License #: _____
Address: _____	FAX #: _____
City: _____	State: _____ Zip Code: _____
Email address: _____	

**Office Use Only**

<b>REVIEWS &amp; Date Routed</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Arborist _____</li> <li><input type="checkbox"/> Building _____</li> <li><input type="checkbox"/> Engineering _____</li> <li><input type="checkbox"/> Finance _____</li> <li><input type="checkbox"/> Fire _____</li> <li><input type="checkbox"/> P &amp; Z _____</li> <li><input type="checkbox"/> Public Works</li> </ul>	<b>DOCUMENTS REQUIRED:</b> <ul style="list-style-type: none"> <li><input type="checkbox"/> Affidavit</li> <li><input type="checkbox"/> Asbestos Report</li> <li><input type="checkbox"/> Contractor Autho.</li> <li><input type="checkbox"/> Contractor License</li> <li><input type="checkbox"/> Easement Agreement</li> <li><input type="checkbox"/> Energy Calculation's</li> </ul>	<ul style="list-style-type: none"> <li><input type="checkbox"/> Tree Removal yes / no</li> <li><input type="checkbox"/> Notice of Commencement</li> <li><input type="checkbox"/> Owner Builder Affidavit</li> <li><input type="checkbox"/> Pool Safety Letter</li> <li><input type="checkbox"/> Power Company Letter</li> <li><input type="checkbox"/> Other _____</li> </ul>
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**Comments:**


Reviewed by:

Approved  Denied

**ARCHITECT / ENGINEER INFORMATION**

Name: _____	Telephone #:
Address: _____	FAX #
City: _____	State: _____ Zip Code: _____

***Important Notices to Applicant:***

1. All work performed under this permit shall comply with the 2023 Florida Building Code, 8th Edition and all applicable supplements. (Other codes, ordinances, or regulations may also apply.)
2. An application for a permit for any proposed work shall be deemed to have been abandoned, becoming null and void 180 days after the date of filing, unless such application has been pursued in good faith or the permit has been issued. A permit is deemed to be null and void if work does not start within 180 days from date of permit issuance, or there has been no approved inspection within a 180-day period. In addition to the requirements of this permit, there may be additional restrictions to this property which may be found in the city or county public records and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.
3. 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 separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.
4. Asbestos Notification: It is your responsibility to comply with Florida Statute Section 469.003. Call Pinellas County Air Quality Division at (727) 464-4422 for more information regarding demolition or renovation of existing structures.
5. All changes to this application shall be made in writing. Changes to the listed sub-contractors shall be made to the City of Safety Harbor Building Division, in writing, immediately. Failure to do so shall be cause for revocation of this permit.
6. Florida State Statute Section 713.135: 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 INSPECITON. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

**OWNER/CONTRACTOR ACKNOWLEDGEMENT:** By signature below, the Owner and/or Contractor/Agent do hereby acknowledge that I/We have read, understood and shall comply with the information and notices listed above. I/We do declare that all the information contained within this building permit application is true and correct, and do certify that all work shall be done in compliance with all applicable laws, codes and ordinances regulating construction and zoning,

SIGNATURE \_\_\_\_\_  
(OWNER/CONTRACTOR/AGENT)\*

STATE OF FLORIDA  
COUNTY OF PINELLAS

Sworn to (or affirmed) and subscribed before me by means of  physical presence or  online notarization, this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_ by \_\_\_\_\_.

They are  Personally Known OR  Produced Identification \_\_\_\_\_ Type of identification \_\_\_\_\_

Signature of Notary \_\_\_\_\_ Print, Type, or Stamp \_\_\_\_\_

\* The owner must appear in person and sign affidavit. No agent is permitted when the owner/contractor exemption per F.S.S 489.103(7)(a) is utilized.  
Any agent assigned by a Contractor must provide an Original Notarized Letter or Authorization.