



Building Division
904.247.6235

BUILDING PERMIT APPLICATION

11 North Third Street, Jacksonville Beach, FL 32250
building@jaxbchfl.net | www.jacksonvillebeach.org/building
FBC 7TH EDITION (2020)

APPL# _____

LOCATION	Job Address _____		OWNER OF RECORD	Name _____	
	Parcel ID No. _____			Address _____	
	Tenant Name _____			City _____ State _____	
	Lot/Block _____			Zip _____ Phone _____	
	Subdivision _____			E-Mail _____	
SCOPE OF WORK	Project Valuation (MEP's, equipment, materials, labor, overhead, and profit) \$ _____		Work Area _____		Sq Ft _____
	Alternative Plan Review and/or Inspection Services (separate form required) <input type="checkbox"/> N/A <input type="checkbox"/> Inspections <input type="checkbox"/> Plan Review				
	Engineer of Record _____		Architect of Record _____		
	EXISTING USE OF BUILDING		PROPOSED USE OF BUILDING		IMPROVEMENT TYPE
	<input type="checkbox"/> One or Two-Family Residential <input type="checkbox"/> Multiple-Family Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Other _____		<input type="checkbox"/> One or Two-Family Residential <input type="checkbox"/> Multiple-Family Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Other _____		<input type="checkbox"/> Addition () Attached () Detached <input type="checkbox"/> Alteration () Interior () Exterior <input type="checkbox"/> New Building or Structure <input type="checkbox"/> Occupancy OR Tenant Change <input type="checkbox"/> Repair/Replacement
DETAILED DESCRIPTION					
CONTRACTOR OF RECORD	<input type="checkbox"/> Owner Builder (separate form required)				
	[] Company Name _____		DBA Name _____		
	Qualifier Primary Name _____		License Number _____		
	License Location _____				
	Mailing Address _____				
Phone _____		E-Mail _____			
Inspection Contact E-Mail _____					

TREE REMOVAL/SITE CLEARING AFFIDAVIT: I certify all protected trees or any tree retained for tree mitigation or conservation credit will be protected prior to the issuance of a permit and/or during construction. *No trees will be removed, damaged or destroyed without first obtaining a permit (tree removal/site clearing permit application form and tree survey required).*

OWNER'S AFFIDAVIT and ELECTRONIC SUBMISSION STATEMENT: Application is hereby made to obtain a permit to do the work as indicated above and I certify that no work has commenced and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction, whether specified herein or not. I understand that additional permits are required for **Electrical, Plumbing, Signs, Pools, Mechanical, Driveway, Green Energy, Roofing, etc.** and additional approvals may be required from other entities. Issuance of a permit does not presume to give authority to violate or cancel the provisions of any other federal, state, or local laws. Furthermore, if the cumulative cost of improvements to the real property above exceeds more than 50% of the fair market value then the entire structure must conform to all current requirements of the Land Development Code and Florida Existing Building Codes. Unless owner builder exemption is elected, I certify the contracting firm listed above is authorized to obtain a building permit for the work described herein.

In lieu of signed, sworn and notarized signatures of the property owner, agent and/or contractor and under penalty of perjury, I declare that I have read and examined this application and all of the foregoing information is true and correct. Payment of required permit fees will make this application valid and binding to the same force and effect as handwritten signatures and that I may be required to provide traditional signatures at a later date.

WARNING TO OWNER: FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. SAID RECORDED NOTICE MUST BE POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. CONSULT WITH YOUR LENDER OR AN ATTORNEY IF YOU INTEND TO OBTAIN FINANCING.

[] Owner [] Authorized Agent [] Contractor Signature _____ Print Name _____ Date _____