

Date: _____

Clerk: _____

Permit No: _____



BUILDING DEPARTMENT FLOODPLAIN DEVELOPMENT PERMIT APPLICATION

Location of Work:

Unit #:

Zip Code:

1. Information	Name _____ Address _____ City _____ St _____ Zip _____ E-mail _____ Driver Lic. No./I.D. _____ Phone (____) _____	2. Contractor Information	Company Name _____ Qualifier Name _____ Address _____ City _____ St _____ Zip _____ E-mail _____ Lic. # _____ Phone (____) _____
	6. Architect/Engineer		Name _____ Address _____ City _____ St _____ Zip _____ Phone (____) _____ Reg. No. _____ Email _____
8. Prop. Owner	Name _____ Address: _____ E-mail _____ Phone: _____	9. Contact	Name _____ Phone (____) _____ E-mail _____

SIGNATURE of QUALIFIER _____

Notary Name _____
Notary _____
Signature _____

STATE OF FLORIDA, COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____ 20____,

Personally known ☐ or I.D. _____

OFFICIAL USE ONLY	#	Checked Out	Date Out/In	Clerk
	1		/	
	2		/	
	3		/	
	4		/	
FEES				
	FL 02			
	FL 03			
	BD 595			
	TOTAL			
	Upfront			

OFFICIAL USE ONLY

☐ New Structure ☐ Renovation of existing

☐ Residential ☐ Non – Residential

FIRM Zone _____ BFE _____ Panel _____

Back of Sidewalk _____ Crown of Road _____

Ordinance: _____

Proposed improvement value \$ _____

Existing Building Market value \$ _____

Lowest Floor Elevation _____ ☐ Existing ☐ Proposed

Lowest Machinery _____ ☐ Existing ☐ Proposed

Garage _____ ☐ Existing ☐ Proposed

LOMC number: _____

☐ CLOMR ☐ CLOMR-F ☐ LOMR ☐ LOMR-F

5 year cumulative improvement total \$ _____

5 year cumulative improvement percentage _____

Discipline	Approved Date	Disapproved Date(s)
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Flood		
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Conditions of Approval