

CITRUS COUNTY FLORIDA DEVELOPMENT ORDER/PERMIT APPLICATION

Permit #: _____ Date Rcvd: _____ Time: _____ By: _____ Contract Price: _____ Septic: _____

Property owner
Mailing address
City
State Zip
Phone Fax
E-Mail

Applicant
Mailing Address
City
State Zip
Phone Fax
E-mail

Fee Simple Title Holder
Address
City
State Zip
Phone Fax

Mortgage Lender
Address
City
State Zip
Phone Fax

Proposed Project:
Property Description/ Subdivision:
Directions to Project Site:

Site Address:
Unit: Lot: Blk:

In consideration of granting a permit, it is agreed that in all respects the work will be performed and completed in accordance with the permitted plans and applicable codes of Citrus County. This permit may be revoked at any time upon violation of any of the provisions of said laws, ordinances, or rules and regulations, or upon any unauthorized change in the original plans approved by this Division. This permit becomes invalid if an inspection for permanent construction is not requested 180 days for all construction, or more than 6 months has elapsed between approved inspections. I understand a separate permit may be required for sub trades.

Note: All Contractors (excluding Owner/Builders, Gas or MH Setup Contractors) by signing the application below swears the following statement: I hereby swear that I am in compliance with Florida's Workers Compensation Law and that I have secured coverage or have a valid Certificate of Exemption.

Building Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X

Plumbing Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X

Electrical Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X

HVAC Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X

Gas Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X

MH Setup Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X Size: Model: Year: Value:

Specialty Contractor/Company Name: State Cert/Reg # Phone: Fax:
E-Mail Signature: X

Engineer: Phone# Fax# E-Mail

Power Company:

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner's affidavit: By filing this application, I hereby certify that all the foregoing information is accurate and the work will be done in compliance with all applicable laws regulating construction and development.

I DO HEREBY SWEAR THAT THE INFORMATION CONTAINED HEREIN AND THE ATTACHMENTS HERETO ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

Signature (Owner / Agent / Applicant / Contractor)
I HEREBY CERTIFY that on this day, before me an officer duly authorized in the State and County aforesaid to take acknowledgements personally appeared who is personally known to me, or who has produced as identification, and who did / did not take an oath.
Witness my hand and official seal this day of .