City of Crystal River
BUILDING PERMIT APPLICATION

ALT KEY: ______________________  ☑ COMMERCIAL  ☑ RESIDENTIAL  CRA: ☑ Y ☑ N  PERMIT #: ______________________

CRystal RIVER • HOME of the MANATEE

JOB ADDRESS (INCLUDE SUITE #): ______________________

SUBDIVISION: ______________________  LOT #: ______________________  BLOCK: ______________________

DESCRIBE WORK: ______________________  TYPE CONST: ______________________

VALUATION OF COMPLETED WORK: $ ______________________  TOTAL SF: ______________________  TOTAL I.S.R: ______________________  % MAX I.S.R. ______________________

CONTACT NAME: ______________________  PHONE #: ______________________  FAX #: ______________________

E-MAIL ADDRESS: ______________________  CELL#: ______________________

OWNER NAME: ______________________  PHONE #: ______________________

OWNER ADDRESS: ______________________

TENANT NAME: ______________________  CONTACT #: ______________________

CONTRACTOR BUSINESS NAME: ______________________  PHONE #: ______________________

ADDRESS: ______________________  CELL#: ______________________

EMAIL ADDRESS: ______________________  FAX #: ______________________

LICENSE HOLDER NAME: ______________________  STATE LICENSE #: ______________________  EXP: ______________________

<table>
<thead>
<tr>
<th>TYPE</th>
<th>NAME</th>
<th>QUALIFIER/AGENT SIGNATURE</th>
<th>LICENSE NO.</th>
<th>DATE</th>
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<td>MECH.</td>
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<td>PLUMB.</td>
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<td>OTHER</td>
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BY SIGNING THIS APPLICATION, YOU STATE THAT YOU HAVE READ AND UNDERSTAND, THE STATEMENTS LISTED ON PAGE 2

SIGNATURE ______________________  SIGNATURE ______________________

STATE OF FLORIDA  STATE OF FLORIDA
COUNTY OF CITRUS  COUNTY OF CITRUS

SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME THIS
____ Day of ______________________, 20____

(DATE)

BY ______________________

WHO IS/ARE PERSONALLY KNOWN TO ME OR HAS/HAVE PRODUCED
_____________________________ AS IDENTIFICATION

_____________________________ AS IDENTIFICATION.

NOTARY PUBLIC ______________________  NOTARY PUBLIC ______________________

(Seal) ______________________  (Seal) ______________________

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LIEN LAW REQUIREMENTS

OWNER: _____________________________________________________________
ADDRESS: ___________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________

TITLE HOLDER (IF OTHER THAN OWNER): _______________________________

TITLE HOLDER ADDRESS: ____________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________

CONTRACTOR NAME: _______________________________________________

ADDRESS: _________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________

COUNTY: _________________________

LEGAL DESCRIPTION: _______________________________________________

TAX FOLIO #: _______________________________________________________

BONDING COMPANY: _______________________________________________

ADDRESS: _________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________

ARCHITECT: _______________________________________________________

ADDRESS: _________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________

MORTGAGE LENDER: _______________________________________________

ADDRESS: _________________________________________________________

CITY: ___________________________ STATE: ___________ ZIP: ___________

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATION 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 WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONING, FENCE, SCREENS, ETC.

OWNERS ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

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 jobsite before the first inspection.

If you intend to obtain financing, consult with your lender and/or attorney before commencing work or recording your notice of commencement.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.

CONTRACTOR: Acceptance of permit is verification that I will notify the owner of the property of the requirements of Florida lien law, FS713.

All work shall be performed in accordance with all applicable city codes and ordinances. Permit void if construction not started within six (6) months or if city ordinance is violated. Have signature notarized. Complete lien law requirements if job is over $2,500. Submission of application does not constitute permit issuance. No work shall commence prior to permit issuance.

BUILDING OFFICIAL APPROVAL: ______________________ DATE: ___________

ZONING OFFICIAL APPROVAL: ______________________ DATE: ___________
ATTACHMENT 1: Sign Dimensions And Location:
TENT CHECKLIST

Tents come in various sizes and shapes and are used for a variety of purposes. This information Sheet is provided to assist tent users or property owners with what is required by the Building Code for the State of Florida.

Please submit the following information, if applicable, with your tent permit application:

- Site Plan
- Flame-Resistant Treatment/Certificate (this is sometimes sewn into the seam of the tent)
- All tents must be anchored to the ground and secured to prevent collapse and/or rollover during high winds.
- Separation of Generators
- Electrical Equipment
- Portable Fire Extinguishers
- Egress and Exits

____________________________________  ________________________
Applicant’s Signature                  Date

____________________________________
Print Name

Revised 12/22/2017