

PERMIT APPLICATION

City of Cocoa, FL
Community Services Department
Building & Permitting Division
65 Stone Street
Cocoa, FL 32922
(321) 433-8501
Fax (321) 433-8543



OFFICE USE ONLY
Tax Acct. # _____
Permit # _____
Entered by: _____
Application Date: _____

PLEASE PRINT LEGIBLY

Permit type: Residential Commercial
 Building Electric Mechanical Plumbing Fire Other: _____

Description of Work: _____
Job Address: _____ Zip Code: _____

Owner/Builder or Authorized Agent Name: _____ Phone: _____
Address (if different than above): _____ Zip Code: _____

Name of Business: _____
Qualifier's Name (if not an owner/builder): _____ License # _____
Address: _____ Zip Code: _____
Phone #: _____ Fax #: _____ Email: _____

Architect/Engineer: _____ Phone: _____
Address: _____ Zip Code: _____

Value of Construction: \$ _____
Total Area of Construction: _____ Square Footage

SUB-CONTRACTOR INFORMATION: Permit includes below subcontractors' with authorization forms (Power of Attorney).

Electrician Name: _____ State/ County Lic #: _____
Address: _____ Zip Code: _____ Phone: _____

Plumber Name: _____ State/ County Lic #: _____
Address: _____ Zip Code: _____ Phone: _____

Mechanic Name: _____ State/ County Lic #: _____
Address: _____ Zip Code: _____ Phone: _____

Roofer Name: _____ State/ County Lic #: _____
 Address: _____ Zip Code: _____ Phone: _____

Drywall Name: _____ State/ County Lic #: _____
 Address: _____ Zip Code: _____ Phone: _____

Other Name: _____ State/ County Lic #: _____
 Address: _____ Zip Code: _____ Phone: _____

APPLICANT AFFIDAVIT

Application is hereby made 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 may be required for ELECTRIC, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, FIRE SPRINKLERS, FIRE ALARMS, ETC.

I also acknowledge the following:

- A Permit is conditional and subject to time limitations.
- Issuance of a Permit is not authorization to violate code or restrictions, public or private.
- Failure to comply with applicable codes may result in the withholding of future Permits.
- Submission of any false information or misrepresentation is a violation of law and may result in revocation of your Permit(s).
- **By signing, applicant affirms that all above is true and correct and that he/she is an authorized agent of the contractor or owner of the property and will submit a copy of the signed contract or proposal for this permit.**

AFFIDAVIT: I certify that the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Printed Name: _____

Signature: _____
 Owner / Agent / Contractor

Sworn to and subscribed before me this
 _____ day of _____,

Personally known to me ___ OR produced
 _____ as Identification.

NOTARY PUBLIC (As to Owner or Agent)
 My Commission Expires:
 Seal:

DISCLAIMER: *The City of Cocoa's approval of this development permit does not create any right for the permittee to obtain a permit from a state or federal agency. Further, pursuant to section 166.033, Florida Statutes, the City of Cocoa shall not be liable for issuance of this development permit in the event a permittee fails to obtain any other required approval, fails to fulfill obligations imposed by a state or federal agency, or undertakes actions that result in a violation of state or federal law.*

The issuance of this development permit is expressly conditioned upon the permittee obtaining all other applicable state or federal permits, if any, prior to the commencement of the development authorized by the City's development permit.

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 INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

FOR OFFICE USE ONLY

State training fee: \$ _____
Plan review fee (50%): \$ _____
Penalty fee: \$ _____
Total permit fee: \$ _____

Future Land Use: _____	Zoning: _____	Flood Zone: _____
Setbacks: Front _____	Side _____	Rear _____
Planner Comments/Special Conditions/Requirements: _____		

<u>APPROVALS</u>	
<input type="checkbox"/> Approved <input type="checkbox"/> Approved as Noted:	_____
Planning & Zoning By: _____	Date: _____
<input type="checkbox"/> Approved <input type="checkbox"/> Approved as Noted:	_____
Fire Inspector By: _____	Date: _____
<input type="checkbox"/> Approved <input type="checkbox"/> Approved as Noted:	_____
Building Division By: _____	Date: _____