BUILDING PERMIT APPLICATION

City of New Port Richey
Development Department
City Hall, 5919 Main Street, 1st Floor
New Port Richey, FL 34652
Phone: (727) 853-1047   Fax: (727) 853-1052

The City of New Port Richey enforces the Florida Building Code
Please print clearly or type. Do not use pencil. Use N/A if not applicable.

Is this application the result of a **STOP WORK ORDER** or **NOTICE OF VIOLATION?** ☐ Yes   ☐ No

Permit # _____

Date Received:

SITE/OWNER INFORMATION

Job Name or Subdivision		Job Cost	
Job Address		Flood Zone	
Parcel Number		Zoning	
Description of Work			
Owner's Name		Phone	
Address	City	State	Zip
Fee Simple Title Holder (If other than owner)		Phone	
Address	City	State	Zip

OTHER INFORMATION:

Mortgage Lender		Phone	
Address	City	State	Zip
Architect/Engineer		Phone	
Address	City	State	Zip
Bonding Company		Phone	
Address	City	State	Zip

CONTRACTOR INFORMATION:

Company Name		Phone	
Address	City	State	Zip
License Holder	DBPR#	Pasco License #	
E-mail		Fax #	

Office Use:

A permit is a license to proceed with the work and not an authority to violate, cancel, alter, or set aside any provisions of the technical codes. It shall not prevent the Building Official from requiring correction of error in plans, construction or violation of any Code. Every permit shall become invalid unless the work authorized by such permit is commenced within six months of permit issuance. Ordinance #2015-2053 states: If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment pursuant to the provisions of the Florida Building Code, a new permit covering the proposed construction must be obtained before proceeding with the work. If a new permit is not obtained within 30 days from the date the initial permit became null and void, the building official is authorized to require that any work which has been commenced or completed be removed from the building site. Alternately, a new permit may be issued on application, providing the work in place and required to complete the structure meets all applicable regulation in effect at the time the initial permit became null and void and any regulations which may have become effective between the date of expiration and the date of re-issuance. The extension shall be requested in writing to the Building Official. Failure to obtain an approved inspection within 180 days of the previous approved inspection shall constitute suspension or abandonment. (FBC 2010, Chapter 1 Section 105.5)

SUBCONTRACTOR SIGN-ON:

ELECTRICAL _____ Phone _____

Address _____ City _____ State _____ Zip _____

Qualifier's Signature _____ DBPR# _____ Pasco License # _____

PLUMBING _____ Phone _____

Address _____ City _____ State _____ Zip _____

Qualifier's Signature _____ DBPR# _____ Pasco License # _____

MECHANICAL _____ Phone _____

Address _____ City _____ State _____ Zip _____

Qualifier's Signature _____ DBPR# _____ Pasco License # _____

ROOFING _____ Phone _____

Address _____ City _____ State _____ Zip _____

Qualifier's Signature _____ DBPR# _____ Pasco License # _____

APPLICANT'S AFFIDAVIT:

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

Final Inspections are required for all permits issued. Failure to comply with this Code could lead to a Code Enforcement fine.

I certify that all the information in this application is accurate and in compliance with all applicable laws regulating construction, zoning and land development. Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet standards of all laws regulating construction, Florida Building Code, and City Codes and ordinances. I also certify that I understand that the regulations of other government agencies may apply to the intended work, and that it is my responsibility to identify what actions I must take to be in compliance.

SIGNATURE _____   SIGNATURE _____
            Owner or Agent   Contractor of Record

STATE OF FLORIDA   STATE OF FLORIDA
COUNTY OF _____   COUNTY OF _____
The foregoing instrument was acknowledged before me this   The foregoing instrument was acknowledged before me this
_____ day of _____, 20____ by   _____ day of _____, 20____ by

_____   _____
(name of person acknowledging), who is personally known to   (name of person acknowledging), who is personally known to
me or has produced (type of identification) me or has produced (type of identification)
_____ as identification.   _____ as identification.

NOTARY PUBLIC _____   NOTARY PUBLIC _____