



PERMIT REVISION APPLICATION

City of New Port Richey, Florida • Community Development Department
5919 Main Street • New Port Richey, FL 34652 • 727-853-1047 • www.cityofnewportrichey.org

*Please complete ALL sections of this application.
Incomplete applications will be returned to the property owner or contractor of record.*

Date Received

1. Job Address	City	County	State	Zip
Tax Parcel No./Legal Description		FEMA Flood Zone(s)	Base Flood Elevation (BFE)	
2. Permit Number				
Building Type: {Select One}				
<input type="checkbox"/> Residential <input type="checkbox"/> Commercial <input type="checkbox"/> Other: _____				
3. Full Description of REVISED Work:			4. NEW Value of Construction:	
_____ _____ _____ _____			\$ _____ {Construction valuation shall include total value of work, including materials and labor, for which the permit is being sought, such as building, electrical, gas, mechanical, plumbing equipment and permanent systems.}	
5. Primary Contact Info: {Name/Phone/Email}				
6. Contractor (Company Name)			Phone	
Contractor Email Address				
7. Architect/Engineer's Name			Phone	
Address		City	State	Zip

ENSURE ALL CHANGES ARE CLOUDED ON PLANS AND A COMMENT LETTER IS SUBMITTED ADDRESSING ALL REVISIONS.

Signature of Property Owner/Agent

Sworn to and subscribed before me by _____
this _____ day of _____, 20____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Notary Signature: _____

(NOTARY STAMP)

Signature of Contractor

Sworn to and subscribed before me by _____
this _____ day of _____, 20____.

Personally Known OR Produced Identification

Type of Identification Produced: _____

Notary Signature: _____

(NOTARY STAMP)