

City of Port St. Lucie Building Department 121 SW Port St. Lucie Blvd Port St. Lucie, FL 34984 772-871-5132 • Web Site: http://www.cityofpsl.com

Concrete Slab Permit Application

Construction under this permit will be done in accordance with the FBC 5th Edition (2014)

To Schedule Inspections http://pandapublicweb.cityofpsl.com

	PERMIT	PERMIT # CONFIRMATION #								
•	PROPERTY A	ROPERTY ADDRESS								
•										
	LEGAL DESCR	SECTION	BLOCK	LOT	Parcel ID#					
	OWNER		MAIL ADDR	FSS		ZIP	PHONE			
	OWNER		WALE ADDIT	L00	CELL					
	CONTRACTO)R	MAIL ADDR	ESS		ZIP	STATE LI	C.#		
							PSL COM	P#		
	CONTRACTO	R E-mail Address		PHONE	I	FAX#	CELL			
	ARCHITECT/ENGINEER MAIL ADDRESS PHONE LIC# E-MAIL ADDRESS									
OUT										
ILED	Б	Desidential Commercial tif commercial on approved site plan abouting prepared slab revet he attached								
ELY F	Residential: Commercial: *if commercial, an approved site plan showing proposed slab must be attached									
COMPLETELY FILLED	Slab dimensions:x									
E CO										
UST B	Ū	Footing: Yes No If yes, footing size:x Rebar size								
Σ	Is concre	Is concrete slab re-enforced: Yes \(\square\) No \(\square\)								
	If yes, with what: Fiber Mesh ☐ Wire Mesh ☐ Rebar ☐ Rebar size									
	1									
	Location of the slab:									
	Future use of the slab:									
	Does slab abut the main structure: Yes No									
	D003 3101	2000 Stab abat the main officials. 100 Ell 110 Ell								
	*Structural slabs will require form-board survey.									
					,					
•	valuation. \$		Applied Date.	Rec'd By:	Reviewed by/Dat	e	PERMIT	FEE:		
•	THIS PERMIT BECOMES NULL AND VOID IF CONSTRUCTION OR WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS									
	SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.									
		Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work								
		vill be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.								
		OWNER'S AFFIDAVIT: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating to construction and zoning.								
	WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A									
				D AND POSTED ON THE JOB S						
		IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.								
Form	Signature of	Contractor	Date	Signature of Owner (i	f Owner Builder)	Date				
create	3			3 (,					
d 03/0	Print Name			Print Name						
8//201	N									
bdu 1	Notary As to Contra	ctor:		Notary as to Owner or Agent:						
Form created 03/08//2011 updated 7/01/15										
01/15	State of Flori County of	ua								
	, _		dovf	00			Dormit \/-1:-1:-1:-:	Chl	MC	
	Personally	e me on this known	day of Produced ID	, 20 Type (of ID		Permit Validation: Batch #	Chk. tem #	M.O. (Check #	Cash
				ypo					J.100K 11	