



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>

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

**Residential Remodel
Permit Application**

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

PERMIT # _____ CONFIRMATION # _____

PROPERTY ADDRESS				
LEGAL DESCR	SECTION	BLOCK	LOT	Parcel ID#
OWNER		MAIL ADDRESS		ZIP
				PHONE CELL
CONTRACTOR		MAIL ADDRESS		ZIP
				STATE LIC. # PSL COMP #
CONTRACTOR E-mail Address		PHONE	FAX #	CELL
ARCHITECT/ENGINEER	MAIL ADDRESS		PHONE	LIC # E-MAIL ADDRESS
<p>Sq. Footage of Remodeled Space: _____</p> <p>Sq. Footage of any Additional Space: _____</p> <p>Total of Both: _____</p> <p>Detailed description of work: _____</p> <p>Future use of remodeled space: _____ (example: kitchen, family room, den or storage)</p> <p>Will this remodel require any of the following? <input type="checkbox"/> Electric <input type="checkbox"/> A/C <input type="checkbox"/> Plumbing <input type="checkbox"/> Insulation <input type="checkbox"/> Gas</p> <p>**If yes to any of the above, please provide a separate sub-contractor permit for each trade.</p> <p>Must include 2 complete sets of drawings sealed by an engineer or architect with this application for all structural work along with a survey or plot plan showing all setbacks from the property lines if any addition to the existing footprint of the building.</p> <p>Note: If you are applying for a garage conversion to living space permit, please fill out the Garage Conversion Permit Application.</p>				
Valuation: \$	Applied Date:	Rec'd By:	Reviewed by/Date	PERMIT FEE:
<p>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.</p> <p>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 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 ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.</p> <p>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.</p> <p>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.</p> <p>IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.</p>				
Signature of Contractor _____ Date _____		Signature of Owner (if Owner Builder) _____ Date _____		
Print Name _____		Print Name _____		
Notary As to Contractor: _____		Notary as to Owner or Agent: _____		
State of Florida County of _____				
Sworn before me on this _____ day of _____, 20____				
Personally known _____		Produced ID _____		Type of ID _____
Permit Validation: Chk. Batch # _____		M.O. Item # _____		Cash Check # _____

MUST BE COMPLETELY FILLED OUT

Form Created 08/29/2011 updated 07/01/2015