



The City of  
*South Pasadena*  
 Florida  
 "Our Place in the Sun"

COMMUNITY IMPROVEMENT DEPARTMENT  
**Office Address:**  
 6940 Hibiscus Ave S  
 South Pasadena, FL 33707  
**PHONE: (727) 343-4192**  
**FAX: (727) 381-4819**

**Mailing Address:**  
 7047 Sunset Dr S  
 South Pasadena, FL 3370

**GENERAL PERMIT APPLICATION**  
 (NOT including new construction or additions)

**PERMIT #** \_\_\_\_\_ (office use only)

**JOB ADDRESS:** \_\_\_\_\_

**OWNER'S NAME:** \_\_\_\_\_ **PHONE:** \_\_\_\_\_

**OWNER'S ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**COMPANY NAME:** \_\_\_\_\_ **PCCLB:** \_\_\_\_\_

**CONTRACTOR'S STATE LICENSE #:** \_\_\_\_\_ **PH #** ( ) \_\_\_\_\_

**CONTRACTOR'S ADDRESS:** \_\_\_\_\_

**CITY:** \_\_\_\_\_ **STATE:** \_\_\_\_\_ **ZIP:** \_\_\_\_\_

**EMAIL ADDRESS:** \_\_\_\_\_

**TYPE OF WORK:** BUILDING  ELECTRICAL  HVAC/MECHANICAL  PLUMBING   
 ROOFING  POOL/SPA  LP GAS  DRIVEWAY/SIDEWALK   
 FIRE SPRINKLER/ALARM  FENCE  SIGN  OTHER \_\_\_\_\_

**DESCRIPTION OF WORK:** \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**SUB TRADES NEEDED (CHECK ALL THAT APPLY):** PLUMBING  ELECTRICAL   
 MECHANICAL  FIRE  ROOFING  OTHER  PLEASE DESCRIBE: \_\_\_\_\_

**VALUE OF PROPOSED WORK: \$** \_\_\_\_\_ (to include all labor and material costs)

**“WARNING TO PROPERTY OWNER”**

**“WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.”** Section 713.135(1) (a.), Florida Statutes (F.S.)

**NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such a water management districts, state agencies, or federal agencies, Section 553.79 (10), F.S.

The permit for demolition or renovation shall contain an asbestos notification statement which indicates the owner’s or Operator’s responsibility to comply with the provisions of Section 469.003, F.S., and to notify the Department of Environmental Protection of his/her intentions to remove asbestos, when applicable, in accordance with state and federal law. Section 553.79(11), F.S.

The applicant shall file with the issuing authority, prior to the permitting, either a certified copy of the recorded notice of commencement or a notarized statement that the commencement has been filed for recording, along with a copy thereof. Sec. 713.13, F.S.

Owners, acting as their own contractors, are required to provide direct on site supervision of all work not being performed by licensed contractors. The owner-contractor shall not delegate any supervisory role to anyone who is not properly licensed for that scope of work. Section 489.103, F.S.

A.D.A APPLICANTS ARE RESPONSIBLE FOR COMPLYING WITH THE FEDERAL AND STATE OF FLORIDA REQUIREMENTS FOR THE AMERICANS WITH DISABILITIES ACT.

I hereby attest to the fact that I prepared the application for a Certificate of Exemption on the above referenced property. The application encompasses all the work as delineated on the plans and specifications submitted for permit and/or Concurrency applications.

I understand that I am subject to enforcement, penalties and or fines for violation if inspection of the property reveals that I have made additions, renovations or remodeling to the property which were not included in the permit documents.

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_  
**DATE SUBMITTED**

\_\_\_\_\_  
**CONTRACTOR OR OWNER SIGNATURE**

\_\_\_\_\_  
**CONTRACTOR OR OWNER PRINTED NAME**

\*\*\*OFFICE USE ONLY\*\*\*

**REVIEW DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**REVIEWER:** \_\_\_\_\_

**APPROVED DATE:** \_\_\_\_/\_\_\_\_/\_\_\_\_

**ISSUE PERMIT** \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
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\_\_\_\_\_  
\_\_\_\_\_