

SHUTTER PERMIT APPLICATION

IF SUBSIDIARY, PROVIDE MASTER PERMIT NUMBER HERE:

Location of Improvements

Address _____ Unit _____
 Folio _____

Contractor Information

Cert.No. _____
 Contractor Name _____
 Qualifier Name _____
 Qualifier SS _____
 Address _____
 City _____ St _____ Zip _____
 Phone _____

Use of Property

Current Use _____
 Description of Work _____
 Value of Work _____

Type of Improvements

- | | |
|--|---|
| <input type="checkbox"/> New Construction | <input type="checkbox"/> Repair |
| <input type="checkbox"/> Alteration Interior | <input type="checkbox"/> Repair due to Fire |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Renewal |
| <input type="checkbox"/> _____ | <input type="checkbox"/> Change of Contractor |

Owner Information

Name _____
 Address _____
 City _____ St _____ Zip _____
 Phone _____

Architect/ Engineer

Name _____
 Address _____
 City _____ St _____ Zip _____
 Phone _____

Number of Openings

2 copies of an Opening layout must be submitted with the permit application

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for Building, Electrical, Plumbing, Signs, Pools, Mechanical, Window, Shutters and Roofing work and there may be additional permits required from other governmental agencies.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate.

WARNING TO OWNER: If your job cost exceeds \$2500.00 you must file a Notice of Commencement with the Clerk of the Courts in Miami-Dade County. Failure to do so may result in you paying twice for the improvements to your property. If you intend to obtain financing, consult your attorney or lender before recording your Notice of Commencement.

Signature of Owner or Owner's Agent _____
 Print Name _____

Signature of Qualifier _____
 Print Name _____

Sworn to and subscribed to me this _____ day of _____ 20

Sworn to and subscribed to me this _____ day of _____ 20

Personally known Produced Identification

Personally known Produced Identification

Type of identification Produced _____

Type of Identification Produce _____