



**CITY OF ST. AUGUSTINE  
PLANNING & BUILDING DEPARTMENT  
APPLICATION FOR PERMIT TO CONSTRUCT**

APPLICATION No. \_\_\_\_\_

CONTRACTOR NAME \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PH. \_\_\_\_\_ LIC. NO. \_\_\_\_\_

PROPERTY OWNER \_\_\_\_\_ ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PH. \_\_\_\_\_

**DESCRIPTION OF PROPERTY:**

JOB ADDRESS \_\_\_\_\_ PARCEL ID NO. \_\_\_\_\_ LOT \_\_\_\_\_ BLK \_\_\_\_\_ SUBDIVISION \_\_\_\_\_

ZONING \_\_\_\_\_ FLOOD HAZARD ZONE \_\_\_\_\_ CURRENT USE OF BLDG \_\_\_\_\_ PROPOSED USE OF BLDG \_\_\_\_\_

SQUARE FEET OF AFFECTED AREA \_\_\_\_\_ LEVEL OF ALTERATION \_\_\_\_\_

**TYPE OF PERMIT:**  BUILDING  ELECTRICAL  PLUMBING  MECHANICAL  DEMOLITION  BUILDING RELOCATION

**DETAILED DESCRIPTION OF PROPOSED WORK:** \_\_\_\_\_

**JOB COST: \$** \_\_\_\_\_

**PRODUCT APPROVAL INFORMATION: PLEASE INCLUDE MANUFACTURER AND PRODUCT APPROVAL #'S**


BONDING COMPANY NAME & ADDRESS \_\_\_\_\_

ARCHITECT OR ENGINEERS NAME & ADDRESS \_\_\_\_\_

MORTGAGE LENDERS NAME & ADDRESS \_\_\_\_\_

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO CONSTRUCT AS INDICATED. I CERTIFY THAT NO WORK HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND ALL WORK WILL BE PERFORMED IN COMPLIANCE WITH ALL CODES AND ORDINANCES REGULATING CONSTRUCTION. I UNDERSTAND THAT A SEPARATE PERMIT MUST BE OBTAINED FOR ALL APPLICABLE TRADES LISTED BELOW. 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 ST. JOHNS COUNTY AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER LOCAL, STATE OR FEDERAL GOVERNMENTAL AGENCIES. IT IS THE OWNER OR CONTRACTOR'S RESPONSIBILITY TO COMPLY WITH THE PROVISIONS OF FLORIDA STATUTE 469.003 AND TO NOTIFY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION IF ASBESTOS IS TO BE REMOVED.

NO EXCAVATIONS SHALL COMMENCE ON ANY STREET, ALLEY, RIGHT-OF-WAY OR UTILITY EASEMENT WITHOUT FIRST OBTAINING INFORMATION REGARDING THE LOCATION OF BURIED GAS OR ELECTRICAL UTILITY LINES. SUCH INFORMATION MAY BE REQUESTED BY PHONE, LETTER, AND FAX OR IN PERSON BY CONTACTING THE UTILITY NOTIFICATION CENTER IN THIS AREA. A 48 HOUR NOTICE IS REQUIRED FOR UNDERGROUND LINE LOCATION SERVICES.

**WARNING TO OWNER: FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, YOU SHOULD CONSULT WITH YOUR LENDER OR LEGAL ADVISOR BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. THIS PERMIT IS VOID IF WORK IS NOT COMMENCED WITHIN 180 DAYS AND WILL EXPIRE BY TIME LIMITATION IF THE WORK IS ABANDONED FOR 180 DAYS OR MORE.**

ISSUANCE OF A DEVELOPMENT PERMIT BY A MUNICIPALITY DOES NOT IN ANY WAY CREATE ANY RIGHT ON THE PART OF AN APPLICANT TO OBTAIN A PERMIT FROM A STATE OR FEDERAL AGENCY & DOES NOT CREATE ANY LIABILITY ON THE PART OF THE MUNICIPALITY FOR ISSUANCE OF THE PERMIT IF THE APPLICANT FAILS TO OBTAIN REQUISITE APPROVALS OR FULFILL THE OBLIGATIONS IMPOSED BY A STATE OR FEDERAL AGENCY OR UNDERTAKES ACTIONS THAT RESULT IN A VIOLATION OF STATE OR FEDERAL LAW. ALL OTHER APPLICABLE STATE AND FEDERAL PERMITS SHALL BE OBTAINED BEFORE COMMENCEMENT OF THE DEVELOPMENT.

CONTRACTOR/OWNER SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

**STAFF USE ONLY**

**APPROVALS:**

ZONING \_\_\_\_\_ DATE \_\_\_\_\_

ARCHITECTURAL \_\_\_\_\_ DATE \_\_\_\_\_

FIRE MARSHAL \_\_\_\_\_ DATE \_\_\_\_\_

ARCHAEOLOGY \_\_\_\_\_ DATE \_\_\_\_\_

UTILITY FEES \_\_\_\_\_ DATE \_\_\_\_\_

PUBLIC WORKS \_\_\_\_\_ DATE \_\_\_\_\_

BUILDING OFFICIAL \_\_\_\_\_ DATE \_\_\_\_\_

**PERMIT FEES:**

BUILDING \$ \_\_\_\_\_

PLAN CHECK \$ \_\_\_\_\_

ELECTRICAL \$ \_\_\_\_\_

PLUMBING \$ \_\_\_\_\_

MECHANICAL \$ \_\_\_\_\_

STATE SURCHG. \$ \_\_\_\_\_

OTHER \$ \_\_\_\_\_

**TOTAL FEES** \$ \_\_\_\_\_

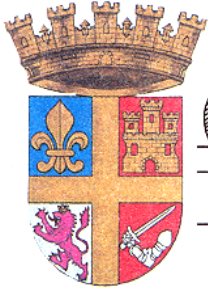
**SUB-CONTRACTOR SIGN OFF:**

ELECTRICAL SUB \_\_\_\_\_

PLUMBING SUB \_\_\_\_\_

MECHANICAL SUB \_\_\_\_\_

OTHER SUB \_\_\_\_\_



# City of St. Augustine



## PLANNING & BUILDING DEPARTMENT BUILDING PERMIT SUBMITTAL REQUIREMENTS

PERMIT TYPE: \_\_\_ NEW RESIDENTIAL BUILDING \_\_\_ RESIDENTIAL RENOVATION  
 \_\_\_ NEW COMMERCIAL BUILDING \_\_\_ COMMERCIAL RENOVATION  
 \_\_\_ OTHER \_\_\_\_\_

SITE ADDRESS: \_\_\_\_\_

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

Item
Completed Building Permit Application (FBC Section 105.3) <b>(Parcel #, Zoning, Flood zone, Square footage, Signature)</b>
Owner/Builder Disclosure Statement (F.S. 489.103)
Notice of Commencement (F.S. 713.135)
Request for Early Power (New Construction Only)
Three (3) Site Plans (Survey's) with Proposed Finished Floor Elevation & Drainage Patterns
Three (3) Sets of Building Plans for New construction <b>OR</b> Two (2) sets of Building Plans for Renovations, signed and sealed by a licensed professional. <b>(Maximum size is 24" X 36") All Commercial submittals require electronic file in pdf format.</b> (FBC Section 107)
Two (2) Sets Truss Engineering - New Construction & Additions
Two (2) Sets of Energy Calculations
Two (2) Sets Product Approval Forms (New Construction Only) (F.S. 553.842)
Completed A-14 Request for Archaeological Review <b>(If Required)</b>
Contractor Requirements: State License, Worker's Comp, Liability Insurance (F.S. 489)

**THE CITY OF ST. AUGUSTINE BUILDING DEPARTMENT WILL NO LONGER ACCEPT  
 INCOMPLETE BUILDING PERMIT SUBMITTALS AS OF OCTOBER 1, 2017. NO EXCEPTIONS!**