



MECHANICAL PERMIT APPLICATION

Permit # _____

Department of Urban Planning and Redevelopment

BUILDING CODE SERVICES DIVISION

955 S. Federal Highway • Fort Lauderdale, Florida 33316 • www.broward.org/building

2004 FLORIDA BUILDING CODE IN EFFECT

Folio # _____ Zone _____

Lot _____ Block _____ Subdivision _____

Type of Work: New Replace Repair Alter Add Demo

Describe _____

Purpose: Sub-Permit Central A/C Hood Fire Suppression Other
A. A/C Split: Make _____ C.U. # _____ Seer/eer _____
Make _____ A.H.U. # _____ KW _____
B. A/C Package: Make _____ Model # _____ KW _____ Seer/eer _____
C. VACUUM SYSTEMS: # of Systems _____ # of Outlets _____

Estimated Job Value \$ _____

Job Name _____

Address _____

City _____ ZIP Code _____

Owner's Name _____

Address _____

City _____ ZIP Code _____ Phone _____

Contracting Firm _____

Address _____

City _____ ZIP Code _____ Phone _____

Cellular Phone Number _____ Fax Number _____

Architect/Engineer _____

Address _____

City _____ ZIP Code _____ Phone _____

Present Use _____ Proposed Use _____

Number of: Stories _____ Bays _____ Families _____ Bedrooms _____ Bathrooms _____

Bonding Company _____

Address _____

City _____ ZIP Code _____ Phone _____

Mortgage Lender's Name _____

Address _____

City _____ ZIP Code _____ Phone _____

Fee Simple Titleholder's Name _____

Address _____

City _____ ZIP Code _____ Phone _____

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 Broward County, Florida. I understand that a separate permit must be secured for STRUCTURAL, ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

"**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 as water management districts, state agencies or federal agencies."

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.

Signature: _____

Signature: _____

Owner or Agent (including Contractor)

Qualifier

Printed Name of Owner

Printed Name of Qualifier

Date _____

Date _____

NOTARY as to Owner

NOTARY as to Qualifier

My Commission Expires _____

My Commission Expires _____

Certificate of Competency Holder

State Certificate or Registration No. _____

Certificate of Competency No. _____

Application Issued by _____

Permit Officer