



PLUMBING PERMIT APPLICATION

CITY OF BOCA RATON • 201 W. PALMETTO PARK ROAD • BOCA RATON, FL 33432

PERMIT #: _____	Date: _____
Permit Type: (CHECK ONE ONLY)	
<input type="checkbox"/> Medical Gas	<input type="checkbox"/> Gas Fireplace
<input type="checkbox"/> Main Plumbing	<input type="checkbox"/> Natural & LP Gas
<input type="checkbox"/> Irrigation	

Is this a sub-permit application? YES NO **CONTRACT AMOUNT: \$** _____

Description of Work: _____

Job Address: _____

Contractor's Name: _____ Phone: _____

State Certification #: _____ Certificate of Competency #: _____

Contractor's Address: _____ Fax: _____

Tax Folio Number: _____

Owner's Name: _____ Phone: _____

Owner's Address: _____ Fax: _____

Architect/Engineer's Name: _____ Phone: _____

Architect/Engineer's Address: _____ Fax: _____

1. Application is hereby made to obtain a permit to do the work and installations as herein indicated. I certify that no work or installation has been affected prior to the issuance of said permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits must be obtained for electrical, plumbing, air conditioning, roofing, paving, signs, pools, fences, etc. It is further understood that other approvals from federal, state or county agencies, homeowner or condominium associations or similar authorities, may be required prior to commencing the work described in this permit.

2. **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.**

3. If you intend to obtain financing, consult with your lender or an attorney before commencing work or recording your notice of commencement.

4. Applicants/Permit Holders are advised to determine if any deed restrictions, Homeowner Association rules, or other applicable provisions or restrictions apply to any work that may be authorized by this permit. The issuance of any permit or other action by the City in relation to any permit does not relieve the Applicant/Permit Holder of the duty, if any, to comply with any other applicable rules, obligations, provisions, or restrictions relating to the work and/or the permit. The City of Boca Raton is not responsible for compliance with or the enforcement of any such obligations, restrictions, rules, or provisions. The City reserves the right, in its sole and absolute discretion, to require, as a condition of the permit, approval from any entity the City deems appropriate for work that may be authorized by a permit.

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.

 (Signature of Owner or Agent)

STATE OF FLORIDA • COUNTY OF PALM BEACH
 Sworn to (or affirmed) and subscribed before me this _____ day of _____ (month), _____ (year),

by: _____
 (Print name of Owner or Agent)

 (Signature of Notary Public)

 (Print, Type or Stamp Commissioned Name of Notary Public)

____ Personally known _____ Produced identification

Type of Identification Produced: _____

CONTRACTOR'S AFFIDAVIT: I certify that I have the authority to make the foregoing application, that the application is true and correct and he contract amount for the work is listed above.

 (Signature of Contractor)

STATE OF FLORIDA • COUNTY OF PALM BEACH
 Sworn to (or affirmed) and subscribed before me this _____ day of _____ (month), _____ (year),

by: _____
 (Print name of Contractor)

 (Signature of Notary Public)

 (Print, Type or Stamp Commissioned Name of Notary Public)

____ Personally known _____ Produced identification

Type of Identification Produced: _____