



# LEVY COUNTY DEVELOPMENT DEPARTMENT

PO BOX 672, BRONSON FL 32621

Phone: 352-486-5198

Website: levycounty.org

Permit # \_\_\_\_\_

Parcel ID: \_\_\_\_\_ Job Address: \_\_\_\_\_

Flood Zone \_\_\_\_\_ Elevation \_\_\_\_\_ Min Finish Floor elev \_\_\_\_\_

Subdivision	Lot	Blk	Unit	Sec	Twp	Rng
-------------	-----	-----	------	-----	-----	-----

Property Owner \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Accessory Structure | <input type="checkbox"/> New Mobile Home | <input type="checkbox"/> Solar            |
| <input type="checkbox"/> Addition            | <input type="checkbox"/> Preinspection   | <input type="checkbox"/> Swimming Pool    |
| <input type="checkbox"/> Commercial          | <input type="checkbox"/> Remodel/Repair  | <input type="checkbox"/> Used Mobile Home |
| <input type="checkbox"/> Demolition          | <input type="checkbox"/> Residence       |   |

Description of Work \_\_\_\_\_

COST OF IMPROVEMENTS \$ \_\_\_\_\_ SQ FT HEATED \_\_\_\_\_ SQ FT UNHEATED \_\_\_\_\_ TOTAL SQ FT \_\_\_\_\_

POWER COMPANY  CFEC  DUKE  CLAY  SECO

Contractor's Business Name \_\_\_\_\_ State Lic # \_\_\_\_\_

License holder Name \_\_\_\_\_ County Cert # \_\_\_\_\_

Address \_\_\_\_\_

Contact Phone # \_\_\_\_\_ Email \_\_\_\_\_

SUBCONTRACTORS:	QUALIFIER NAME	COUNTY CERT #	STATE LICENSE #	EMAIL
MECHANICAL	_____	_____	_____	_____
ELECTRIC	_____	_____	_____	_____
PLUMBING	_____	_____	_____	_____
GAS	_____	_____	_____	_____
ROOF	_____	_____	_____	_____

Application is hereby made to obtain a permit to do the work and installations as indicated. All work will be performed in accordance with the standards of all laws and ordinances regulating construction, whether specified or not. I understand that subcontractors may be required to perform certain work under this permit. I further certify that I have read and examined this application and know the same to be correct, that all work shall be in compliance with all applicable laws regulating construction and zoning, and that the building permit may be revoked in the case of a false statement or misrepresentation in the application and/or plans on which the permit was approved.

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENT TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.**

**IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

\_\_\_\_\_  
OWNER'S SIGNATURE

\_\_\_\_\_  
OWNER'S SIGNATURE

STATE OF FLORIDA, COUNTY OF LEVY

Sworn to (or affirmed) and subscribed before  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by

\_\_\_\_\_  
Personally Known \_\_\_\_\_  
Type of Identification \_\_\_\_\_  
Notary Public Signature \_\_\_\_\_

\_\_\_\_\_  
CONTRACTOR'S/INSTALLERS SIGNATURE

STATE OF FLORIDA, COUNTY OF LEVY

Sworn to (or affirmed) and subscribed before  
this \_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by

\_\_\_\_\_  
Personally Known \_\_\_\_\_  
Type of Identification \_\_\_\_\_  
Notary Public Signature \_\_\_\_\_

---

**Office use only**

Application Approved by \_\_\_\_\_ Date \_\_\_\_\_

Zoning Approved by \_\_\_\_\_ Date \_\_\_\_\_

Plans Reviewed by \_\_\_\_\_ Date \_\_\_\_\_