



Date: \_\_\_\_\_  
 Permit Application Number: \_\_\_\_\_  
**Orange County Division of Building Safety**  
 201 South Rosalind Avenue  
 Post Office Box 2687, Orlando, Florida 32802-2687  
**Phone:** 407-836-5550  
[www.ocfl.net/building](http://www.ocfl.net/building)

**PERMIT APPLICATION “Page 2”**

To be completed as required by Florida Statute Section 713 and other applicable sections.

**Owner’s Name:** \_\_\_\_\_

**Owner’s Address:** \_\_\_\_\_

Fee Simple Titleholder’s Name (If differs from owner): \_\_\_\_\_

Fee Simple Titleholder’s Address: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Contractor Address: \_\_\_\_\_

**Job Name:** \_\_\_\_\_

Job Address: \_\_\_\_\_

Bonding Company Name: \_\_\_\_\_

Bonding Company Address: \_\_\_\_\_

Architect/Engineer Name: \_\_\_\_\_

Architect/Engineer Address: \_\_\_\_\_

Mortgage Lender Name: \_\_\_\_\_

Mortgage Lender Address: \_\_\_\_\_

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 this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL, PLUMBING, GAS, MECHANICAL, ROOFING, SIGNS, POOLS, ETC.

**OWNER 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.**

**Owner Affidavit Signature:** \_\_\_\_\_

**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. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement.

Owner Name: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

Notary Public, State of Florida, County of \_\_\_\_\_

Notary Public, State of Florida, County of \_\_\_\_\_

The foregoing instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_

The foregoing instrument was acknowledged before me on \_\_\_\_\_ by \_\_\_\_\_

by means of \_\_\_ physical presence or \_\_\_ online notarization, who is personally known to me or has produced \_\_\_\_\_ as identification.

by means of \_\_\_ physical presence or \_\_\_ online notarization, who is personally known to me or has produced \_\_\_\_\_ as identification.

Notary Name: \_\_\_\_\_

Notary Name: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

