



TOWN OF HYPOLUXO

BUILDING DEPARTMENT

PERMIT APPLICATION

7580 S. Federal Highway
 Hypoluxo, FL 33462-6034
 Phone: 561.582.0510
 Fax: 561.582.0703
 Inspections: 561.582.0510
 Email: hypoluxo@hypoluxo.org

APPLICATION DATE: _____ CODE IN EFFECT: _____ PERMIT # _____
 Applicant must fill in all shaded sections. If any space is not applicable, write N/A. Submit with two (2) sets of plans. If there is an active permit at the proposed improvement location note the **MASTER #** _____

L O C A T I O N	Address _____	C O N T R A C T O R	Company _____
	Building # _____ Suite, Apt. or Bay # _____		Address _____
	Lessee _____		City _____
	Subdivision _____ Zoning District _____		State _____ Zip _____
	PCN <u>26-43-45</u> - _____ - _____ - _____ - _____ - _____ <small>CITY RG TWP SEC SUB BLOCK LOT</small>		Phone _____ Fax _____
P R O J E C T D E S C R I P T I O N	_____		

	_____ Estimated Cost \$ _____		
	<input type="checkbox"/> Single Family Detached	<input type="checkbox"/> Multi-Family	
	<input type="checkbox"/> Condominium	<input type="checkbox"/> Mobile Home	
	<input type="checkbox"/> Townhouse	<input type="checkbox"/> Commercial	
	<input type="checkbox"/> Other _____	Sq Ft Under A/C _____	
U S E F O R C O N C E L Y	<input type="checkbox"/> Septic Elevation _____ Flood Zone <input type="checkbox"/> A5 <input type="checkbox"/> B <input type="checkbox"/> C		
	Setbacks: _____ Side _____ Front _____ Rear _____		

P R O P E R T Y O W N E R	Owner _____
	Address _____
	Suite, Apt. or Bay # _____
	City _____
	State _____ Zip _____
	Cell or Home Phone _____
	Work Phone _____

S U B C O N T R A C T O R S		Business Name	Qualifier/ Certification #	Address	Phone
		Electrical	_____	_____	_____
		Plumbing	_____	_____	_____
		Roofing	_____	_____	_____
		HVAC	_____	_____	_____
		Other	_____	_____	_____

APPROVAL CONDITIONS This permit is issued pursuant to the following conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.

PERMIT FEES	PERMIT ISSUED BY:
Building Fee _____ Radon _____	_____ Date _____
Electric Fee _____ BCAI _____	Building Official Permit expires 6 months from date of issuance unless otherwise noted.
Plumbing Fee _____ TOTAL _____	PAYMENT INFORMATION
HVAC Fee _____ Town Impact _____	TOWN IMPACT FEE REC'D BY: _____ DATE: _____
Other _____ \$220.00 per Unit /Separate Check Required	PERMIT FEE REC'D BY: _____ DATE: _____
	CK # _____ CASH _____ RCPT # _____
	CK # _____ CASH _____ RCPT # _____

L I E N I N F O R M A T I O N	Name	Mailing Address - Number, Street, City, State, & Zip	Phone
	Fee Simple Titleholder _____		
	Mortgage Company _____		
	Bonding Company _____		
	Architect/Engineer _____		

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 law regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATER, TANKS, ROOFING, AND AIR CONDITIONING, ETC.

I further acknowledge the following:

- Issuance of a permit may be subject to conditions and is subject to time limitations.
- Issuance of a permit is not authorization to violate public or private restrictions.
- Failure to comply with applicable construction regulations may result in the withholding of future permits.

OWNERS 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 TO PROPERTY OWNERS: PLEASE READ THIS NOTICE CAREFULLY - IT MAY SAVE YOU FROM PAYING TWICE FOR HOME REPAIRS, IMPROVEMENT OR NEW CONSTRUCTION.

FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. IN ORDER TO PROTECT YOURSELF FROM PAYING TWICE, YOU MUST TAKE THE FOLLOWING STEPS:

BEFORE ANY WORK IS DONE BY YOU OR YOUR CONTRACTOR, IMMEDIATELY FILE FOR RECORD, A NOTICE OF COMMENCEMENT WITH THE OFFICE OF THE CLERK OF THE CIRCUIT COURT. THIS STEP IS REQUIRED BY THE FLORIDA CONSTRUCTION LIEN LAW.

IF YOU HAVE HIRED A CONTRACTOR TO DO THE WORK, MAKE SURE THAT THE CONTRACTOR OBTAINS THE PERMIT. THE CONTRACTOR'S SIGNATURE INDICATES HE OR SHE IS RESPONSIBLE FOR THE WORK, AND IF THE WORK IS NOT PERFORMED ACCORDING TO CODE, THE TOWN CAN REQUIRE CORRECTIVE ACTION BY THE PARTY WHO OBTAINED THE PERMIT. FURTHERMORE, IF THE CONTRACTOR IS NOT LICENSED, YOU CAN BE IN VIOLATION OF STATE LAW BY ALLOWING AN UNLICENSED PERSON TO DO THIS WORK.

SINCE YOU OR YOUR CONTRACTOR HAVE APPLIED FOR A BUILDNG PERMIT FOR WORK TO BE DONE ON PROPERTY YOU OWN, YOU SHOULD BE AWARE THAT:

ANY PERSON WHO FURNISHED LABOR (A CONTRACTOR, SUBCONTRACTOR OR LABORER) OR SUPPLIES MATERIALS FOR YOUR HOME REPAIR, IMPROVEMENT OR NEW CONSTRUCTION MAY BE ABLE TO FILE A CLAIM (CALLED A LIEN) AGAINST YOU IF HE HAS NOT BEEN PAID BY YOUR CONTRACTOR OR YOU. YOU ARE LIABLE TO SUBCONTRACTORS OR SUPPLIERS IF THEY ARE NOT PAID BY YOUR CONTRACTOR OR YOURSELF.

A CERTIFIED COPY OF THE NOTICE OF COMMENCEMENT MUST BE SUBMITTED PRIOR TO A PERMIT BEING ISSUED AND A COPY POSTED IN A CONSPICUOUS PLACE IN FRONT OF THE PROPERTY WHERE THE WORK WILL TAKE PLACE. (BE SURE TO CHECK WITH YOUR LENDER AS PREMATURE FILING MAY EFFECT YOUR LOAN.)

AT THE COMPLETION OF WORK, REQUIRE THE CONTRACTOR TO GIVE YOU A SWORN NOTARIZED STATEMENT INDICATING ALL BILLS FOR LABOR AND MATERIALS HAVE BEEN PAID OR A LIST NAMING THOSE SUPPLYING LABOR AND MATERIALS THAT HAVE NOT BEEN PAID. ASK FOR THE AFFIDAVIT BEFORE MAKING THE LAST PAYMENT.

FOR FURTHER INFORMATION ON THE FLORIDA CONSTRUCTION LIEN LAW, YOU SHOULD READ CHAPTER 713 OF THE FLORIDA STATUTES, CONTACT YOUR LOCAL CONSUMER PROTECTION AGENCY OR THE FLORIDA DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES (800-342-2176, TOLL FREE) OR CONSULT A PRIVATE ATTORNEY. YOU MAY NEED TO TAKE ADDITIONAL ACTION FOR COMPLETE PROTECTION.

THIS INFORMATION IS PROVIDED AS REQUIRED BY LAW. THE DEPARTMENT OF AGRICULTURE AND CONSUMER SERVICES AND YOUR LOCAL BUILDNG PERMIT OFFICE ASSUME NO RESPONSIBILITY IN THIS REGARD, AND FURNISHING THIS INFORMATION DOES NOT IMPLY THAT YOUR CONTRACTOR IS UNRELIABLE.

UNLICENSED CONTRACTORS: NO PERSON SHALL ENGAGE IN BUSINESS OR ACT IN THE CAPACITY OF A CONTRACTOR WITHOUT BEING DULY REGISTERED OR CERTIFIED. ANY PERSON WHO VIOLATES THIS PROVISION IS GUILTY OF A MISDEMEANOR OF THE FIRST DEGREE AND MAY BE PUNISHED BY A PRISON TERM NOT EXCEEDING ONE (1) YEAR AND/OR A FINE NOT TO EXCEED \$1,000 (SECTION 489.127 FLORIDA STATUTES).

S I G N A T U R E S	Signature _____ Property//Business Owner	Signature _____ Contractor
	Print Name _____	Print Name _____
	-----Notarize if Cost of Work Exceeds \$2,500 (\$5,000 if A/C Change-out)-----	
	STATE OF FLORIDA COUNTY OF PALM BEACH The foregoing instrument was acknowledged before me this _____ date by Owner or Agent, _____ who is personally known to me or who has produced _____ as identification.	STATE OF FLORIDA COUNTY OF PALM BEACH The foregoing instrument was acknowledged before me this _____ date by the Contractor, _____ who is personally known to me or who has produced _____ as identification.
	Notary Signature _____	Notary Signature _____
SEAL:	SEAL:	