

**BUILDING PERMIT APPLICATION**  
**TOWN OF PALM BEACH SHORES**  
**(561) 844-3457**

PROPERTY OWNER INFORMATION

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

Owner Address \_\_\_\_\_

\_\_\_\_\_

Phone (O) \_\_\_\_\_

Phone (H) \_\_\_\_\_

SINGLE FAMILY \_\_\_ MULTI-FAMILY \_\_\_ # UNITS \_\_\_

CONTRACTOR INFORMATION

Qualifier \_\_\_\_\_

Company Name \_\_\_\_\_

Company Address \_\_\_\_\_

\_\_\_\_\_

Phone (O) \_\_\_\_\_

County/State License # \_\_\_\_\_

Town License # \_\_\_\_\_

TYPE OF IMPROVEMENT

- |                                                 |                                     |
|-------------------------------------------------|-------------------------------------|
| <input type="checkbox"/> New Sq. Ft. _____      | <input type="checkbox"/> Building   |
| <input type="checkbox"/> Addition Sq. Ft. _____ | <input type="checkbox"/> Electrical |
| <input type="checkbox"/> Alteration             | <input type="checkbox"/> Gas        |
| <input type="checkbox"/> Repair                 | <input type="checkbox"/> Plumbing   |
| <input type="checkbox"/> Installation           | <input type="checkbox"/> Mechanical |
| <input type="checkbox"/> Change/Cont.           | <input type="checkbox"/> Roofing    |
| <input type="checkbox"/> Pool/Spa               | <input type="checkbox"/> Driveway   |
| <input type="checkbox"/> Other _____            |                                     |

LOCATION INFORMATION

Address \_\_\_\_\_

\_\_\_\_\_

PCN \_\_\_\_\_

Zoning Designation \_\_\_\_\_

Lot # \_\_\_\_\_ Flood Zone \_\_\_\_\_

Base Flood Elevation \_\_\_\_\_

Paid – Receipt # \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

Valuation of Job \$ \_\_\_\_\_

(Does this include value of subcontractor's work? Yes \_\_\_\_\_ No \_\_\_\_\_)

**DESCRIPTION OF WORK**

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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 the jurisdiction. I understand that separate permits must be acquired for ELECTRICAL WORK, PLUMBING, SIGNS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, ROOFING, AIR CONDITIONING, ETC. **WASTE MANAGEMENT DUMPSTER ONLY**

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.

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.

**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.**

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

Owner or Agent

(If agent is signing, then original, notarized agency letter signed by owner must be attached)

STATE OF FLORIDA  
COUNTY OF PALM BEACH

The foregoing instrument was sworn (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced a Florida driver's license as identification.

(Seal)

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

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

Contractor

STATE OF FLORIDA  
COUNTY OF PALM BEACH

The foregoing instrument was sworn (or affirmed) before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has produced a Florida driver's license as identification.

(Seal)

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

**BUILDING OFFICIAL’S COMMENTS:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

APPROVAL \_\_\_\_\_ DATE \_\_\_\_\_

Building Official