



Town of Southwest Ranches

Building Department

13400 Griffin Rd

Southwest Ranches FL, 33330

Phone: 954-343-7445 / Fax: 954-434-1490

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www.southwestranches.org

Revision Cover Sheet

Fill out the information below.

DATE: _____

PERMIT No. _____

PROJECT ADDRESS: _____

CONTACT NAME: _____ PHONE No.: _____

CONTRACTOR NAME: _____

EMAIL: _____

Provide a complete the description for this revision: _____

Please check the appropriate discipline to review your submittal.

STRUCTURAL

Approved:

Disapproved:

Disapproved

Date :

Date:

Date:

Comments from Structural Plans Examiner:

MECHANICAL

Approved:

Disapproved:

Disapproved

Date :

Date:

Date:

Comments from Mechanical Plans Examiner:

PLUMBING

Approved:

Disapproved:

Disapproved

Date :

Date:

Date:

Comments from Plumbing Plans Examiner:

ELECTRICAL

Approved:

Disapproved:

Disapproved

Date :

Date:

Date:

Comments from Electrical Plans Examiner:

FIRE PREVENTION

Approved:

Disapproved:

Disapproved

Date :

Date:

Date:

Comments from Fire Prev. Plans Examiner:

BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Select One Trade: Building Electrical Plumbing Mechanical Other _____

Application Number: _____ Application Date: _____

1	Job Address: _____		Unit: _____	City: _____		
	Tax Folio No.: _____	Flood Zn: _____	BFE: _____	Floor Area: _____	Job Value: _____	
	Building Use: _____		Construction Type: _____		Occupancy Group: _____	
	Present Use: _____		Proposed Used: _____			
	Description of Work:					
	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Revision <input type="checkbox"/> Other: _____					
	Legal Description: _____					<input type="checkbox"/> Attachment

2	Property Owner: _____	Phone: _____	Email: _____		
	Owner's Address: _____	City: _____	State: _____	Zip: _____	

3	Contracting Co.: _____	Phone: _____	Email: _____		
	Company Address: _____	City: _____	State: _____	Zip: _____	
	Qualifier's Name: _____	Owner-Builder: <input type="checkbox"/>	License Number: _____		

4	Architect/Engineer's Name: _____	Phone: _____	Email: _____		
	Architect/Engineer's Address: _____	City: _____	State: _____	Zip: _____	
	Bonding Company: _____				
	Bonding Company Address: _____	City: _____	State: _____	Zip: _____	
	Fee Simple Titleholder's name (if other than owner): _____				
	Fee Simple Titleholder's Address (If other than owner): _____	City: _____	State: _____	Zip: _____	
	Mortgage Lender's Name: _____				
	Mortgage Lender's Address: _____	City: _____	State: _____	Zip: _____	

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 WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

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 COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

X _____
Signature of Property Owner or Agent

X _____
Signature of Qualifier

STATE OF _____
COUNTY OF _____

STATE OF _____
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____

(Type / Print Property Owner or Agent Name)

(Type / Print Qualifier's Name)

NOTARY'S SIGNATURE as to Owner or Agent's Signature

NOTARY'S SIGNATURE as to Qualifier's Signature

Notary Name _____
(Print, Type or Stamp Notary's Name)

Notary Name _____
(Print, Type or Stamp Notary's Name)

Personally Known _____ or Produced Identification _____

Personally Known _____ or Produced Identification _____

Type of Identification Produced _____

Type of Identification Produced _____

APPROVED BY: _____ Permit Officer Issue Date: _____ Code in Effect: _____

A jurisdiction may use a supplemental page requesting additional information and citing other conditions, please inquire.
Note: If any development work as described in FS 380.04 Sec. 2 a-g is to be performed, a development permit must be obtained prior to the issuance of a building permit.