



BUILDING PERMIT APPLICATION FOR:
Carports, Car Shade, Garages, Shed, Pool, Screen
Enclosure, Gazebo, Pergola, Landscape Pond,
Playhouse, Kennel, Metal Structure

City of Mascotte

Submit application at:
<https://mascottefl.portal.iworq.net/portalhome/mascottefl>

Related to Code Enforcement Case? : _____
Estimated Construction Cost: _____

*Job Site Address & Parcel ID #: _____
*Digital Applicant/Primary Contact: _____ *Phone: _____
*Email: _____

PROPERTY

*Job/Project Name: _____
*Property Owner Name: _____
Property Owner Email: _____
*Address: _____ Phone: _____
Business Owner Name: _____
Address: _____ Phone: _____

CONTRACTOR

Name: _____
Address: _____
Email: _____
Company Name: _____
Company Address: _____ Phone: _____

PROFESSIONALS

Architect/Engineer's Name: _____
Email: _____
Address: _____ Phone: _____
Bonding Company Name: _____
Fee Simple Titleholder's Name & Address (if other than owner): _____
Mortgage Lender's Name: _____

WORK DESCRIPTION

***Description of proposed work, including: size, dimensions, width, length, height, location, materials**

WARNING TO OWNER

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN 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. IF THE ESTIMATED COST OF THIS JOB IS GREATER THAN \$5,000 A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT MUST BE FILED WITH PERMITTING SERVICES PRIOR TO SCHEDULING YOUR FIRST INSPECTION.

If you are not the owner of the property being permitted, you must, by law (FS 713.135 (c)) promise to inform the fee simple titleholder that the property in question is being subjected to possible liens and/or attachment.

Property Address: _____ Phone: _____
Permit #: _____ (if applicable)

*Property Owner Signature _____ Date: _____

Print Name _____ (Owner)

STATE OF FLORIDA, COUNTY OF _____

SWORN to and subscribed freely and voluntarily for the purpose therein expressed before me by _____, known to me to be the person described in and who executed the foregoing. He/she is personally known to me or has produced _____ (type of identification) as identification.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 20____.

Notary Public Signature

Print Name: _____ My Commission Expires: _____

*Contractor Signature _____ Date: _____

Print Name _____ (Contractor)

STATE OF FLORIDA, COUNTY OF _____

SWORN to and subscribed freely and voluntarily for the purpose therein expressed before me by _____, known to me to be the person described in and who executed the foregoing. He/she is personally known to me or has produced _____ (type of identification) as identification.

WITNESS my hand and official seal in the County and State last aforesaid this _____ day of _____, 20____.

Notary Public Signature

Print Name: _____ My Commission Expires: _____

CERTIFICATE OF COMPETENCY HOLDER

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. _____

PROPERTY OWNER

CONTRACTOR