CITY OF HOMESTEAD
DEVELOPMENT SERVICES
PLUMBING PERMIT APPLICATION

TEL. 305-224-4500 FAX. 305-224-4539

MASTER PERMIT NO.	PLUMBING PERMIT NO.

COMPANY NAME	PHONE

ADDRESS

OWNER'S NAME	PHONE

ADDRESS

JOB ADDRESS

FOLIO NUMBER

REMARKS:

_____

_____

_____

_____

_____

_____

_____

APPLICATION APPROVED BY: _____DATE _____

ESTIMATED VALUE: _____

JOB DATA

TYPE	NUMBER
Bath Tub	
Dishwasher	
Disposal	
Drinking Fountain	
Floor Drain	
Ice Maker	
Interceptor	
Lavatory	
Laundry Tray	
Clothes Washer	
Shower	
Sink	
Urinal	
Water Closet	
Heater	
Septic Tank	
Grease Trap	
Relay	
Pump & Abandon	
Sewer Service	
Roof Inlet	
Area Drain	
Soakage Pit – CU FT	
Condense Drain	
Water Service	
Lawn Sprinkler System	
# of Heads	
Pool Piping	
Well	
Catch Basin	
Temp Water Closet	
Hose Bib	
Gas Outlets	
Gas Footage	
Back Flow Preventer	
Repair to Water Piping	
Additional Inspection	
Other	

AFFIDAVIT – Please read carefully

Application is hereby made to obtain a permit to do work and installation as indicated. I, the Owner of the property, certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for ELECTRICAL, PLUMBING, EXTERIOR DOOR, MECHANICAL, WINDOW, FENCE, DRIVEWAY, ROOFING, SIGNS, SHUTTERS, etc., and there may be additional permits required from other governmental agencies.

I, the Owner of the property, have disclosed all information related to any work at the property performed in the prior twelve months to the Building Official. Further I am fully aware that if the cumulative cost of the work to my home or business under this and any other permit equals or exceeds fifty percent (50%) of the fair market value of the structure, the entire structure must meet the present Federal Flood criteria for finished floor elevation. I am also fully aware that if the total cost of my home or business under this and other permit exceeds fifty percent (50%) of the replacement cost of the structure, then the entire structure must conform to the current requirements of the South Florida Building Code.

WARNING TO OWNER: *Your failure to record a NOTICE OF COMMENCEMENT may result in you paying twice for improvements to your property. If you are spending more than $2,500 or intend to obtain financing, you may wish to consult with your attorney or lender before recording you Notice of Commencement. The Notice of Commencement must be recorded with Miami-Dade County at 11805 SW 26th Street, 2nd Floor, Miami, FL (305) 275-1155. Once recorded, the Notice of Commencement **MUST** be posted at the job site in accordance with Section 713.35 of Florida Statutes.*

_____
Signature of Owner

_____
Print Name

Sworn to and subscribed before me this ___ day of _____, 20_____

_____
Signature of Notary

_____
Signature of Contractor Qualifier

_____
Print Name

Sworn to and subscribed before me this ___ day of _____, 20_____

_____
Signature of Notary