BUILDING PERMIT APPLICATION

OFFICE USE ONLY		
SUBMITTAL DATE:		
PERMIT NUMBER:		



THE VILLAGE OF NORTH PALM BEACH
COMMUNITY DEVELOPMENT DEPARTMENT
420 U.S. HWY 1 • SUITE 21 • NORTH PALM BEACH, FLORIDA 33408
561.841.3365 • PERMITS@VILLAGE-NPB.ORG • WWW.VILLAGE-NPB.ORG

Is this application the result of a Code Compliance Violation?

Yes No

If yes, submit copy of Code Compliance Notice.

**THIS FORM IS NOT ACCEPTED FOR SUBPERMIT USE. PLEASE SEE FORM TITLED, "SUBPERMIT APPLICATION" **			
APPLICANT INFORMATION	PROPOSED IMPROV	VEMENT LOCATION	
Owner	$\ \square$ Same as owner / lessee address		
Lessee	Address		
Address	Suite / Apt Number		
Suite / Apt Number	Legal Description		
City	Lot Block Plat		
State / ZIP	Unplatted		
Phone Number	Parcel Control Number (PCN)		
E-Mail Address	(Required – Can be found on parcel's tax bill)		
CONTRACTOR INFORMATION	REQUESTED WORK	IMPROVEMENT	
☐ Owner / Lessee Builder	☐ Building	☐ New Construction	
Qualifier	□ Structure		
Company	☐ Sign	☐ Electrical	
Address	☐ Electrical	☐ Addition	
City	☐ Gas	☐ Repair / Replace	
State / ZIP	☐ Mechanical	☐ Demolish	
Phone Number	☐ Plumbing	☐ Install	
E-Mail Address	☐ Roofing	☐ Change of Contractor	
License Number	☐ Pool / Spa	□ Other	
DESCRIPTION OF PROPOSED IMPROVEMENT			
Provide a complete description of the work you are proposing:			
SOLIABE FOOTAGE (area) Existing: Proposed:	Total	loh Valuationst	
SQUARE FOOTAGE (area) Existing:, Proposed:, Total:, Job Valuation:\$ OFFICE USE ONLY:			
Parks \$ Bldgs \$ School \$	Roads \$	Total \$	
Fee \$ Lien \$ Radon \$		Total \$	



SUPPLEMENTAL CONSTRUCTION LIEN LAW INFORMATION			
A recorded Notice of Commencement is required when the direct contract is greater than \$2,499 (\$7,499 for repair or replacement of existing heating and air conditioning equipment). No inspections will be scheduled until a recorded Notice of Commencement is on file with the Building Division, Village of North Palm Beach.			
FEE SIMPLE TITLEHOLDER'S	MORTGAGE COMPANY		
☐ Same as owner on front of form	☐ Not applicable		
Name	Name		
Address	Address		
CitySt / ZIP	CitySt / ZIP		
Phone Number	Phone Number		
BONDING COMPANY	ARCHITECT / ENGINEER / DESIGNER		
☐ Not applicable	☐ Not applicable		
Name	Name		
Address	Address		
CitySt / ZIP	CitySt / ZIP		
Phone Number	Phone Number		
APPLICATION CERTIFICATIO	N AND ACKNOWLEDGEMENT		
 construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, ROOFING, AIR CONDITIONERS, GAS, FENCES and DRIVEWAYS. 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. Issuance of a permit does <u>not</u> assure compliance with Home Owner Association rules, regulations and/or deed restrictions. Property Owners are advised to obtain approval from their Home Owner Association before making any improvements to their properties. Failure to comply with applicable construction regulations may result in the withholding of future permits. Submission of any false information or representation is a violation of law and may result in revocation of the permit. 			
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. If you intend to obtain financing, consult with your lender or an attorney before recording your notice of commencement.			
SignatureOwner or Agent	Signature Certificate of Competency Holder / Owner-Builder		
Print Name	Print Name		
STATE OF FLORIDA COUNTY OF PALM BEACH	STATE OF FLORIDA COUNTY OF PALM BEACH		
The foregoing instrument was acknowledged before me this	The foregoing instrument was acknowledged before me this		
By means of physical presence / online notarization by:	By means of physical presence / online notarization by:		
By(Name of person acknowledging)	By(Name of person acknowledging)		
Who is personally known to me or who has produced	Who is personally known to me or who has produced(Type of identification)		
SEAL (Signature of person taking acknowledgement)	SEAL (Signature of person taking acknowledgement)		

