

EL	MI	Office Use
<input type="checkbox"/>	<input type="checkbox"/>	
AM	PE	
<input type="checkbox"/>	<input type="checkbox"/>	

**CITY OF FLORIDA CITY**  
 Building and Zoning Department  
 404 West Palm Drive Florida City, FL 33034  
 305-247-8222  
**ELECTRICAL PERMIT APPLICATION**

**IF SUBSIDIARY, PROVIDE MASTER PERMIT NUMBER HERE:**

<p align="center"><b>Location of Improvements</b></p> Address _____ Unit _____ Folio _____	<p align="center"><b>Contractor Information</b></p> Cert.No. _____ Contractor Name _____ Qualifier Name _____ Qualifier SS _____ 999-99- _____ Address _____ City _____ St _____ Zip _____ Phone _____
<p align="center"><b>Use of Property</b></p> Current Use _____ Description of Work _____ Value of Work _____	<p align="center"><b>Owner Information</b></p> Name _____ Address _____ City _____ St _____ Zip _____ Phone _____
<p align="center"><b>Architect/ Engineer</b></p> Name _____ Address _____ City _____ St _____ Zip _____ Phone _____	

**Type of Improvements**

( ) New Construction    ( ) Alteration Interior    ( ) Change of Contractor    ( ) Repair    ( ) Repair due to Fire    ( ) Renewal

Item	Qty	Item	Qty	Item	Qty
General Purpose Outlets		Smoke Detectors		Signs	
Special Purpose Outlets		Thermostat		Swimming Pool	
Fixtures		A/C Central (Tons)		Service / Subfeeds (Amps)	
Dishwasher		A/C Package (Tons)		Service Change / Repair (Amps)	
Refrigerator		A/C Window (Tons)		Parking Lot Poles	
Freezer		Low Voltage (Devices)		Parking Lot Fixtures	
Clothes Washer		Panel Boxes		Fans and Motors	
Dryer		Burglar Alarm Panel		Temporary for Test	
Disposal		Burglar Alarm Devices		Temporary for Construction	
Range		Fire Alarm Panel		Generator (KW)	
Water Heater		Fire Alarm Devices		Safety Check	
Other _____					

**If this property is under the jurisdiction of a homeowner's association, you should review the guidelines set forth by that organization and present your plans for review and approvals by the association prior to making any improvements to the property.**

Application is hereby made to obtain a permit to do the work and installation as indicated. I 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 Building Electrical, Plumbing, Signs, Pools, Mechanical, Window, Shutters and Roofing work and there may be additional permits required from other governmental agencies.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate.

WARNING TO OWNER: If your job cost exceeds \$2500.00 you must file a Notice of Commencement with the Clerk of the Courts in Miami-Dade County. Failure to do so may result in you paying twice for the improvements to your property. If you intend to obtain financing, consult your attorney or lender before recording your Notice of Commencement.

Signature of Owner or Owner's Agent _____ Print Name _____	Signature of Qualifier _____ Print Name _____
Sworn to and subscribed to me this ____ day of _____ 20____ Personally known ( ) Produced Identification ( ) Type of Identification Produced _____	Sworn to and subscribed to me this ____ day of _____ 20____ Personally known ( ) Produced Identification ( ) Type of Identification Produced _____