OFC USE	
FEES:	
Application Fee:	\$
Other:	\$
Total:	\$
Paid:	



OFC USE Approved by Building Official:	
Date:PERMIT #	-

City of Apalachicola

MECHANICAL____ ELECTRICAL____ PLUMBING____

	PI	ERMIT APPLIC	CATION		
Owner's Name:	EM	EMAIL:			
Address:					
		Phone #:			
Contractor's Name:	Ph#	Ph#			
Address:	Ph#	Ph#			
City, State & Zip Code:					
State License #:		CO.	A #		
Address of Project:					
Purpose of Permit:					
Property/Parcel ID# & L					
If the application is fo	r a Commercial Pro	oject please list the	Name of the Bus	iness:	
Type of Building:	Single Family	Multi-Family	Commercial	Storage	Sign
Other	Addition, al	teration or renovati	on to building		
		 Total Square Footage:		·	
Lowest Floor Elevation:	Area H	eated/Cooled:	# of Stories:	# of L	Jnits
WARNING TO OWNER	R∙ Your failure to re	ecord a Notice of C	ommencement m	av result in vo	ou naving
twice for improvemen					
attorney BEFORE reco					our remuer or
For improvements to				more a certifi	ed conv of the
Notice of Commencer					
made for a permit or t	-				
affidavit attesting to i	<u> </u>	-			
the Building Departme	_				-
the documents that ha	ave been certified i	may be done by ma	ail, fax, or hand-d	<u>elivery.</u>	
Owner	Date	Contractor		Date	
Printed Name of Owner	Printed Na	Printed Name of Contractor			