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



OFFICE U	JSE			
Approved by Building Official:				
 Date:				

City of Apalachicola

MECHANICAL____ ELECTRICAL____ PLUMBING____ PERMIT APPLICATION

Owner's Name:		email:				
Address:	Ph#					
City, State & Zip Code:						
Contractor's Name:	Ph#					
Address:						
	Business License #					
Address of Project:						
Purpose of Permit:						
Flood Plain Administrator must determine Flood Zone Designation before permit may	Property/Parcel ID# & Legal description: If the application is for a Commercial Project please list the Name of					
be issued: FEMA designation:	the Business	:				
Date:			, ,	Multi-Family _ Addition/alte		
Cost of Construction: \$						
	Total Square Footage: Flood Zone: # of Units					
WARNING TO OWNER: Your failure improvements to your property. If y recording your Notice of Commence	ou intend to obte	ain financ	ing, consult with	your lender or att	orney BEFORE	
For improvements to real property of Commencement is required to be sufficient may submit a copy of recording. A certified copy of the Note that the	ibmitted to the B the Notice of Co	uilding D mmencen	epartment when a nent along with a	application is mad n affidavit attestir	le for a permit or ng to its	
the second or any subsequent inspe be done by mail, fax, or hand-delive		ormed. Fi	ling of the docum	nents that have be	en certified may	
Owner	Date	Contract	tor	Date		
Printed Name of Owner			Printed Name of Contractor			

Building Dept Clerk: Ron Nippe rnippe@cityofapalchicola.com Office: 1 Bay Ave Apalachicola 32320

Effective: April 22, 2024