



# CITY OF PORT ORANGE

1000 CITY CENTER CIRCLE PORT ORANGE, FL 32129  
PHONE 386-506-5602 FAX 386-506-5699

## PERMIT APPLICATION

FLORIDA BUILDING CODE 6<sup>TH</sup> EDITION &  
2014 NATIONAL ELECTRIC CODE

PERMIT NUMBER: \_\_\_\_\_ REC'D BY \_\_\_\_\_ DATE REC'D: \_\_\_\_\_

RESIDENTIAL  COMMERCIAL JOB ADDRESS: \_\_\_\_\_

FLOOD ZONE DESIGNATION: \_\_\_\_\_ (IF A, AE, AH, V, VE, REQUIRES [SPECIAL FLOOD HAZARD AREA BUILDING PERMIT APPLICATION SUPPLEMENT](#))

CONSTRUCTION REQUIRES REMOVAL OF TREE(S):  NO  YES (IF YES, REQUIRES TREE REMOVAL PERMIT)

DESCRIPTION OF PROPOSED WORK: \_\_\_\_\_

CONSTRUCTION VALUE: \_\_\_\_\_ TOTAL SQUARE FOOTAGE: \_\_\_\_\_ JOB/TENANT NAME: \_\_\_\_\_

**PLEASE NOTE:** Customer/contractor shall provide 2 copies of a scaled survey that clearly indicates the location of the improvement and dimensions. Documents **shall not be** reduced or enlarged. **Please sign your initials if you've read and understand this statement:** \_\_\_\_\_

**FENCE** Type \_\_\_\_\_ Lineal Feet \_\_\_\_\_

**ROOF TYPE** Total Squares: \_\_\_\_\_  Shingle  Metal  Tile  Flat (requires product approval data)

Replace Skylights  No  Yes (requires product approval data) Other \_\_\_\_\_

**ELECTRIC**  Upgrade Old Amps \_\_\_\_\_ New Amps \_\_\_\_\_

Pool Wiring

New Construction Amps \_\_\_\_\_ Volts \_\_\_\_\_ Phase \_\_\_\_\_

**MECHANICAL NOTE:** On existing equipment make and model number are only required for components proposed to remain on site. **Condenser or A.H.U. replacement only** (partial system): provide verification of energy rating documentation from ARI or another independent testing agency, manufacturers support documentation, or Florida-registered professional engineer verification, as per FBCEC C101.4.7 and R101.4.7.

**MECHANICAL: Leave Existing Equipment**  No  Yes Make \_\_\_\_\_ Model \_\_\_\_\_

**Ductwork**  No  Yes **Change out**  No  Yes Tons \_\_\_\_\_ KW \_\_\_\_\_ Other \_\_\_\_\_

**PLUMBING:** Number of Fixtures: \_\_\_\_\_

**GAS:** Tank Size \_\_\_\_\_ Number of Fixtures: \_\_\_\_\_

**SIGN:**  Real Estate  Copy Change Only  Wall Sign  Monument Sign

Temp/Banner, from \_\_\_\_\_ to \_\_\_\_\_ Sign Illuminated  No  Yes

**FIRE SYSTEMS:**  Fire Alarm  Fire Sprinkler, number of heads \_\_\_\_\_  Hood Suppression

Paint Booth Suppression  Other \_\_\_\_\_

