



TOWN OF CUTLER BAY
 Department of Community Development
 Building Division
 (305) 234-4193

Permit No: _____
Intake Clerk: _____
Code Case: _____

PERMIT APPLICATION

Permit Type:

- BUILDING ELECTRICAL MECHANICAL PLUMBING/GAS ROOFING SIGN
 PAVING/DRAINAGE PUBLIC WORKS SHOP DRAWING PERMIT REVISION
 ZONING PERMIT EXTENSION PERMIT RENEWAL Other: _____

Property Information: (If the property is unaddressed, Zoning must assign the address prior to permitting.)

Primary Address: _____

Folio No.: _____

Project Information:

Master Permit No. _____

- NEW CONSTRUCTION ADDITION ALTERATION (INTERIOR) ALTERATION (EXTERIOR)
 REPAIR/REPLACE FENCE SWIMMING POOL DRIVEWAY OTHER: _____

Description of Work: _____

Current Use of Property: _____ Value of Work: _____

Square Footage: _____ Work Classification: _____

No. of Units: _____ Linear Footage: _____ Residential Multi-Family Commercial

Applicant Information: Check here if applicant is property owner

Applicant Name: _____

Applicant Address: _____

Applicant Email: _____

Applicant Telephone Number: _____ Applicant License No. _____

Floodplain Information:

FIRM Panel: _____ Flood Zone: _____

Base Flood Elevation: _____ Lowest Floor Elevation: _____

Lowest Machinery Elevation: _____

Lowest Machinery Desc.: _____

Conditional Letter No. & Date: _____

LOMC No. & Date: _____

Surveyor Name: _____

Survey Date: _____ Survey Datum: _____

Benchmark Location: _____

Benchmark Elevation: _____

Permit Fees	
Flood Review	
Zoning Review	
Landscape Review	
Public Works Rev.	
Const. Dumpster	
Base Fee	
State Radon	
Code Violation	
Concurrency	
Rework Fee	
TOTAL FEE DUE	



Permit No: _____
Intake Clerk: _____
Code Case: _____

Property Owner Information:

Name: _____
 Company Name: _____
 Address: _____
 Email: _____
 Telephone Number: _____

Contractor Information: Check here if same as Applicant

Name: _____
 Company Name: _____
 Address: _____
 Email: _____
 Telephone Number: _____ License No. _____

Architect Information: Check here if same as Applicant

Name: _____
 Company Name: _____
 Address: _____
 Email: _____
 Telephone Number: _____ License No. _____

Engineer Information: Check here if same as Applicant

Name: _____
 Company Name: _____
 Address: _____
 Email: _____
 Telephone Number: _____ License No. _____

Disclaimers and Waivers:

Application is hereby made to obtain a permit to do work and installation as indicated herein. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet standards of all laws regulating construction in Cutler Bay. I understand that a separate permit must be secured for ELECTRICAL, MECHANICAL, PLUMBING, SIGNS, POOLS, ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the approved plans and specifications.

WARNING TO OWNER: FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Homeowners Associations/Other Approvals: In addition to the requirements of this permit, there may be additional deed restrictions applicable to this property that may be found in the public records of Miami-Dade County, and there may be additional permits required from other governmental entities such as the South Florida Water Management District, and state or federal agencies.

Waiver of Statutes (§§ 125.022, 166.033, 553.79 et seq.): By initialing this section, Applicant hereby waives standard time limitations imposed by the aforementioned sections of Florida Statutes, including, but not limited to timelines for _____ completeness and other substantive review, limitations on requests for additional information, deadlines regarding _____ reviews, inspections, and certificates of completion and occupancy, and fee adjustments associated with same.

Owner/Contractor 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.



Permit No: _____
Intake Clerk: _____
Code Case: _____

Applicant Signatures

 Applicant/Property Owner Signature
 Print Name: _____
 State of Florida, Miami-Dade County
 Sworn to and subscribed before me this _____
 day of _____, 20____.
 By: _____
 Personally Known or ID: _____

 Qualifier Signature
 Print Name: _____
 State of Florida, Miami-Dade County
 Sworn to and subscribed before me this _____
 day of _____, 20____.
 By: _____
 Personally Known or ID: _____

	APPROVED	DATE	REJECTED 1 (INITIAL/DATE)	REJECTED 2 (INITIAL/DATE)	REJECTED 3 (INITIAL/DATE)	REJECTED 4 (INITIAL/DATE)
Zoning						
Public Works						
Building						
Floodplain						
Roofing						
Structural						
Electrical						
Mechanical						
Plumbing						
Public Works						

CONDITIONS OF APPROVAL

ADMINISTRATIVE NOTES

<input type="checkbox"/> Process Extension	<input type="checkbox"/> Change of Contractor 10-day waiting period unless signed by both qualifiers.	<input type="checkbox"/> Private Provider BO approval & insurance threshold requirements. Register Online. PRIV # _____
<input type="checkbox"/> Permit Extension	<input type="checkbox"/> Change of Architect/Engineer New Plans must be submitted.	Applicable Code Year _____
<input type="checkbox"/> Permit Renewal		
<input type="checkbox"/> Lost Plans		

PLAN TRACKING

Checked Out To	Clerk	Date	Return Date	Clerk	Note

Permit Issuance:
 Final plan reviewed and prepared for issuance by:
 Signature: _____ Date: _____