

# CITY OF Opa-locka

BUILDING DEPARTMENT  
780 Fisherman St  
Opa-locka, FL 33054  
Office: 305-953-2868  
[www.opalockafl.gov](http://www.opalockafl.gov)



Date: \_\_\_\_\_ Clerk: \_\_\_\_\_

☐ Master Permit \_\_\_\_\_

JOB ADDRESS \_\_\_\_\_

## PERMIT APPLICATION

☐ Sub-Permit \_\_\_\_\_

1. OWNER INFORMATION	Owner _____		2. CONTRACTOR INFORMATION	Company Name _____	
	Address _____			Qualifier Name _____	
3. PERMIT TYPE	Choose only One <input type="checkbox"/> Building <input type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing/Gas <input type="checkbox"/> Sign <input type="checkbox"/> Roofing	4. CHANGE TO AN EXISTING PERMIT Choose only One <input type="checkbox"/> Change Contractor <input type="checkbox"/> Extension <input type="checkbox"/> Renewal <input type="checkbox"/> Shop Drawing <input type="checkbox"/> Lost Plans	5. TYPE OF IMPROVEMENT	Choose only One <input type="checkbox"/> New Construction <input type="checkbox"/> Addition Attached <input type="checkbox"/> Alteration Interior <input type="checkbox"/> Alteration Exterior <input type="checkbox"/> Repair/Replace <input type="checkbox"/> Demolition/Partial	<input type="checkbox"/> Re-roof <input type="checkbox"/> Driveway <input type="checkbox"/> Fence <input type="checkbox"/> Window <input type="checkbox"/> Door <input type="checkbox"/> Shutters <input type="checkbox"/> Pool <input type="checkbox"/> Shed <input type="checkbox"/> Other: _____
6. ARCHITECT/ENGINEER INFO	Name _____		8. LEGAL/USE/WORK VALUE	Folio No. 08- _____ No. of Units _____	
	Address _____			Lot Block Subdivision _____	
7. CONTACT	City _____ ST _____ Zip Code _____			Current Use of Property _____	
	Lic. No. _____ Discipline _____			Description of Work _____	
	Phone No. _____			Square FT. _____ Linear FT. _____	
	Name _____			Work Value _____ Building Value _____	
	E-mail _____			Flood Zone _____ Base Flood Elevation _____	
	Phone No. _____				

Application is hereby made to obtain a permit to do the work and/or installations as indicated. 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 the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for Electrical, Plumbing, Signs, Wells, Pools, Furnaces, Boilers, Heaters, Tanks, Air Conditioning, Driveways, Portable Storage Units, etc.

Owner's Affidavit: I certify that all the foregoing information is accurate, and that work will be done in compliance with all applicable laws regulating construction and zoning.

### NOTICE REGARDING BUILDING PERMIT APPLICATIONS

The Completion and submission of a Building Permit Application is a requirement of securing a City Building Permit. The City will rely upon the information contained in the Application in determining whether a City Building Permit should be issued. The submission of inaccurate, misleading, or misrepresented information in the Application shall subject the Building Permit to denial, suspension or revocation, and the individual applying for the permit, to all appropriate fines, penalties and other punishments authorized by law. KINDLY GOVERN YOURSELF ACCORDINGLY.

**WARNING TO OWNER: YOUR 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 LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**

OWNER INFORMATION	PRINT NAME _____ OWNERS SIGNATURE _____	QUALIFIER INFORMATION	PRINT NAME _____ OWNERS SIGNATURE _____
	SWORN TO AND SUBSCRIBED BEFORE ME BY: (PRINT OWNER NAME)		SWORN TO AND SUBSCRIBED BEFORE ME BY: (PRINT QUALIFIER NAME)
	BY MEANS OF PHYSICAL PRESENCE NOTARIZATION AND PRODUCED _____		BY MEANS OF PHYSICAL PRESENCE NOTARIZATION AND PRODUCED _____
	OR IS PERSONALLY KNOWN.		OR IS PERSONALLY KNOWN.
	As identified on this _____ day of _____ 20____		As identified on this _____ day of _____ 20____
	Notary's Signatures _____		Notary's Signatures _____
	Printed Name of Notary _____		Printed Name of Notary _____

**DONOT WRITE BELOW - FOR OFFICE USE ONLY**

✓	TRADE	APPROVED/DATE	DISAPPROVED/DATE	APPLICATION INCLUDES	FEES \$	.00
	Zoning			Zoning		
	Structural			Structural		
	Building			Base Fee		
	Electrical			Scanning		
	Mechanical			Technology		
	Plumbing			Rework		
	Roofing			Violation		
	Flood			DBPR/DCA		
	Publics Works			Code Compliance		
				(-) Upfront Fee		
				Balance Due		