CITY OF WEST MIAMI

Building Department

901 SW 62nd Ave • West Miami, FL 33144 • Ph: (305) 266-4214 • Fax: (305) 266-6574

ZONING IMPROVEMENT PERMIT APPLICATION

(Please fill out completely)

LOCATION OF IMPROVEMENTS

Job Address _____

Folio _____

Lot _____ Block _____

Subdivision _____ PBpg _____

Metes and bounds _____

CONTRACTOR INFORMATION

Contractor No. _____

Last four (4) digits of Qualifier No. _____

Contractor's Name _____

Qualifier Name _____

Address _____

City _____ State _____ Zip _____

PERMIT TYPE

ZONING IMPROVEMENT PERMIT

[ ] 0001 Paving, Drainage of Existing Facilities. Estab. landscape, tennis, basketball courts, guardrails and bollards

[ ] 0002 Driveway

[ ] 0002A Cirsular

[ ] 0003 Interior residential repair

[ ] 0004 Awnings, Canopies, Fabric Covered Framework, Trellis and Pergola, residential

[ ] 0005 Exterior Residential repair

[ ] 0006 Painting

[ ] 0007 Patio Slab

[ ] 0007A **Signs** Commercial Sign

[ ] 0008 Chickees by Miccoussukee or Seminole Indians

[ ] 0009 Above Ground Pools

[ ] 0010 Chain link fence, residential*

[ ] 0011 Picket, Iron, Other Fences Non-Wind Resistant*

*fences with concrete columns require BLDG 18 permit

[ ] 0012 Decorative Pools, Ponds, residential only

[ ] 0013 Paver Driveways or Patios

[ ] 0015 Resurfacing

[ ] 0016 Sealing, stripe painting of existing parking lots

[ ] 0017 Portable Mini Storage

[ ] 0018 Dumpster

Current use of property _____

Description of Work _____

Sq. Ft. _____ Unit _____ Floors

Value of Work _____

CHANGE TO AN EXISTING PERMIT

[ ] Extension

[ ] Chg. Contractor

[ ] Revision

[ ] Reissuance

OWNER'S NAME

Owner _____

Address _____

City _____ State _____ Zip _____

Phone _____

Last four (4) digits of Owner's SSN _____

ARCHITECT ENGINEER

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

PERSON TO PICK UP PLANS

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

MORTGAGE LENDER

Name _____

Address _____

City _____ State _____ Zip _____

Phone _____

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction.

OWNER'S AFFIDAVIT: I certify that all of the foregoing information is accurate. I certify that I am not a named violator with unpaid civil penalties; unpaid administrative cost of hearing; unpaid County investigative, enforcement, testing, or monitoring cost; or unpaid liens, any or all of which are owed to Miami-Dade County pursuant to the provisions of the Code of Miami-Dade County, Florida.

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 ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

The issuance of the permit does not relieve the property owner from obtaining homeowner's association approval (if required) prior to beginning any work and in no way authorizes work that is in violation of any association rule or regulation.

_____

Signature of Owner or Owner's Agent _____

PRINT NAME _____

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____

day of _____, 20_____ ,

by _____

(SEAL) _____

Personally known _____

or Produced Identification _____

Type of Identification Produced _____

_____

Signature of Qualifier

PRINT NAME _____

STATE OF FLORIDA COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____

day of _____, 20_____ ,

by _____

(SEAL) _____

Personally known _____

or Produced Identification _____

Type of Identification Produced _____