


# Revisions

|  |   |                                   |   |
|--|---|-----------------------------------|---|
|  | <b>CITY OF LIGHTHOUSE POINT BUILDING/<br/>ZONING ENFORCEMENT DIVISION</b><br>REVISION NO. _____<br><br>PERMIT NO. _____ | DATE _____<br><br>CHECK NO. _____ | <b>OFFICE USE ONLY</b><br><br>Rev. 07/06/2023 |
|--|---|-----------------------------------|---|

| OWNER'S NAME<br>OWNER'S ADDRESS<br>CITY                      ZIP                      PHONE<br>CONTRACTING FIRM<br>MAILING ADDRESS<br>CITY                      ZIP                      PHONE<br>JOB ADDRESS<br>LOT                      BLOCK                      SUBDIVISION<br>TYPE OF WORK      REVISION | <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="3" style="text-align: center;">JOB DATA</th> </tr> <tr> <th style="text-align: left;">REVISED</th> <th style="text-align: center;">\$/#</th> <th style="text-align: center;">FEE</th> </tr> </thead> <tbody> <tr> <td>JOB VALUE COST</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>ADDITIONAL OUTLETS</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>ADDITIONAL FIXTURES</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>OTHER</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>PLAN REVIEW _____</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>CODE TAX</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td>NON-REFUNDABLE DEPOSIT PAID</td> <td style="text-align: center;">_____</td> <td style="text-align: center;">_____</td> </tr> <tr> <td colspan="2" style="text-align: center;"><b>TOTAL AMOUNT DUE</b></td> <td style="text-align: center;">_____</td> </tr> </tbody> </table> <p><b>NOTICE:</b></p> <ul style="list-style-type: none"> <li>In addition to requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.</li> </ul> <p><b>NOTE:</b></p> <ul style="list-style-type: none"> <li>Time Limitation - Section 104.9.3 FBC</li> <li>Plans must be on job before inspections will be made.</li> <li>Obtain certificate of occupancy before using completed building.</li> <li>This application <b>MUST</b> have all information completed to avoid delays.</li> </ul> <p style="text-align: center;"><b>FOR INSPECTIONS ONLY— 954-784-3449 before 3:00 p.m.<br/>Inspections will be made<br/>on or about the following day after request.</b></p> | JOB DATA |  |  | REVISED | \$/# | FEE | JOB VALUE COST | _____ | _____ | ADDITIONAL OUTLETS | _____ | _____ | ADDITIONAL FIXTURES | _____ | _____ | OTHER | _____ | _____ | PLAN REVIEW _____ | _____ | _____ | CODE TAX | _____ | _____ | NON-REFUNDABLE DEPOSIT PAID | _____ | _____ | <b>TOTAL AMOUNT DUE</b> |  | _____ |
|--|---|----------|--|--|---------|------|-----|----------------|-------|-------|--------------------|-------|-------|---------------------|-------|-------|-------|-------|-------|-------------------|-------|-------|----------|-------|-------|-----------------------------|-------|-------|-------------------------|--|-------|
| JOB DATA   |   |          |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| REVISED  | \$/#  | FEE      |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| JOB VALUE COST   | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| ADDITIONAL OUTLETS   | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| ADDITIONAL FIXTURES  | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| OTHER  | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| PLAN REVIEW _____  | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| CODE TAX   | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| NON-REFUNDABLE DEPOSIT PAID  | _____   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |
| <b>TOTAL AMOUNT DUE</b>  |   | _____    |  |  |         |      |     |                |       |       |                    |       |       |                     |       |       |       |       |       |                   |       |       |          |       |       |                             |       |       |                         |  |       |

**NOTE: Any approved or plans requiring revisions or changes will require that each change be "clouded" and a detailed errata sheet/letter listing and describing every revision by sheet/page.**

**The plans shall show the following:**

- Change symbol with the appropriate revision number.
- Date of revisions.
- Sealed by architect of record.



| Department | Hours | Approved | Denied | Date | Initial | Remarks |
|------------|-------|----------|--------|------|---------|---------|
| Zoning     |       |          |        |      |         |         |
| Structural |       |          |        |      |         |         |
| Electrical |       |          |        |      |         |         |
| Plumbing   |       |          |        |      |         |         |
| Mechanical |       |          |        |      |         |         |
| Fire       |       |          |        |      |         |         |
| Engineer   |       |          |        |      |         |         |