



PERMIT APPLICATION
ELECTRICAL

Heating, Air Conditioning
TYPE OR PRINT IN INK ONLY FBC 2007

**CITY OF DELTONA
BUILDING AND ZONING SERVICES
2345 PROVIDENCE BLVD
DELTONA, FL 32725
Ph 386-878-8650 – Fax 386-878-8651**

Account Number

Permit Number

Parcel ID#

City of Deltona Automated Inspection System

(386) 575-6900 / (407) 936-9999

Owner's Name

Telephone– Include Area Code

Project Address – Include City & Zip

Company Name

Fax

() -

Mailing Address – Include City & Zip

Phone

() -

License Holder's Name

License #

E-mail

REPLACEMENT & MODIFICATIONS

Power Co.: FPL PE _____

Change-Of-Service _____ AMP

Mast Repair

Meter Base Repair

Special Requirement and Conditions (Ex: Locked gate) _____

Job Valuation \$ _____

Signature of Applicant **Date**
(Contractor's Signature to be Notarized)

STATE OF FLORIDA, COUNTY OF _____

Affirmed and subscribed before me this ____ day of _____ 20____ by _____ who is personally known to me or who has produced _____ (type of ID) identification.

Signature of Notary Public State of Florida

Print, Type or Stamp Name of Notary

(SEAL)

The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the issuance of the permit creates no legal liability; express or implied, of the Department, Municipality, Agency or Inspector; and certifies that all of the above information is accurate. Have Permit/Application number and address when requesting inspections, call 386-575-6900 / 407-936-9999. Give at least 24 hours notice on all inspections.

PERMIT EXPIRATION: permit expires 180 days from date issued unless otherwise noted below or governed by law.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

APPROVAL CONDITIONS: This permit is issued pursuant to the attached conditions. Failure to comply may result in suspension or revocation of this permit or other penalty.

PERMIT ISSUED BY MUNICIPAL AGENT _____

DATE _____