



City of Crystal River – Building Division
 123 NW Highway 19, Crystal River, FL 34428 352-795-4216, ext. 317
 EMAIL: jrehberg@crystalriverfl.org

Demolition Permit Application

Permit #: _____ **Date:** _____

PROJECT LOCATION	<input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL	CRA <input type="checkbox"/> YES <input type="checkbox"/> NO
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PROJECT ADDRESS: _____
 KEY NUMBER: _____ SUBDIVISION: _____ LOT #: _____

PROPERTY OWNER INFORMATION

NAME: _____ PHONE: _____
 ADDRESS: _____
 EMAIL ADDRESS: _____

PRIMARY CONTRACTOR INFORMATION or OWNER BUILDER PER FL St. 489

NAME of COMPANY: _____ LICENSE #: _____
 ADDRESS: _____
 CONTRACTOR NAME: _____
 EMAIL ADDRESS: _____ PHONE #: _____

DEMOLITION INFORMATION – BUILDING PERMIT

Building Structure to be Demolished: Residential Commercial Other _____

Reason for Demolition: Flood Damage Unsafe Other _____ **Sq. Ft.** _____

Structure to be rebuilt? Yes No **Timeframe:** _____

USE & OCCUPANCY TYPE: _____ **CODE EDITION:** _____ **FLOOD ZONE:** _____

CONTRACT or CONSTRUCTION VALUE: \$ _____

NOTICE: In addition to the 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.

FEE SIMPLE TITLEHOLDER, BONDING COMPANY, ARCHITECT/ENGINEER AND MORTGAGE LENDER INFORMATION IS REQUIRED WHEN THE AGGREGATE VALUE (TOTAL COST OF ALL IMPROVEMENTS & NOT JUST WORK AUTHORIZED BY THE INDIVIDUAL PERMIT) IS \$2,500 OR MORE (EXCEPT HVAC REP AIR / REPLACEMENT GREATER THAN \$7,500). PLEASE ADDRESS ALL ITEMS.

Fee Simple Titleholder's Name (if other than owner): _____

Fee Simple Titleholder's Address (if other than owner): _____

Bonding Company: _____

Bonding Company Address: _____

Mortgage Lender's Name: _____

Mortgage Lender's Address:

Architect/Engineer's Name:

Architect/Engineer's Address:

NOTICE TO CONTRACTOR: For a direct contract greater than \$2,500 (except for HVAC system repair or replacement greater than \$7,500), Florida Statutes require the applicant to file with the issuing authority, prior to the first inspection, either a certified copy of the recorded (by owner) Notice of Commencement or a notarized statement (by owner) that the Notice of Commencement has been filed for recording, along with a copy thereof. In the absence of a certified copy of the recorded Notice of Commencement, no subsequent inspections can be performed until the applicant files such certified copy with the issuing authority. The certified copy of the Notice of Commencement must contain the name and address of the owner, the name and address of the contractor, and the location or address of the property being improved.

If you intend to obtain financing, consult your lender or an attorney before commencing work or recording your Notice of Commencement.

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.

Application is hereby made to obtain a permit to do the work and 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.

OWNERS 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.

Signature of Owner or Agent (including contractor)

Signature of Contractor

Notary required if \$2,500 or more, or
for All Owner Builders regardless of dollar value.

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Permit Fees Are Non-Refundable

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STATE OF FLORIDA/ COUNTY OF CITRUS

STATE OF FLORIDA/ COUNTY OF CITRUS

Sworn to (or affirmed) and subscribed before me this

Sworn to (or affirmed) and subscribed before me this

_____ day of _____, 2017,

_____ day of _____, 2017,

by _____
(Print Name)

by _____
(Print Name)

_____ who is personally known to me or who has
produced identification; type produced _____

_____ who is personally known to me or who has
produced identification; type produced _____

Driver's License #: _____

Driver's License #: _____

Signature of Notary Public

Signature of Notary Public

Notary Seal

Notary Seal

BUILDING OFFICIAL APPROVAL: _____ **Date:** _____

ZONING OFFICIAL APPROVAL: _____ **Date:** _____

Work Order Submitted to Remove Meter? Yes No – Reason: _____