



**ONE TEAM,
ONE GOAL,
ONE MISSION**

Revised November 2016

Application for a Site Utility Permit

Development Services

6051 Old Bagdad Highway, Suite 202

Milton, FL 32583

Phone: 850-981-7000

www.santarosa.fl.gov

srcpermits@santarosa.fl.gov

Division of Community Planning, Zoning and Development

Fax: 850-983-9874

Building Inspection and Code Compliance

Fax: 850-623-1208



2007 Florida Statutes, 713.135(6) 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. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

Time limitation of application: An application for a permit for any proposed work shall be deemed to have been abandoned 180 days after the day of filing, unless such application has been pursued in good faith or a permit has been issued; except that the building official is authorized to grant one or more extensions of time for additional periods not exceeding 90 days each. The extensions shall be requested in writing and justifiable cause demonstrated.

Conditions of Permit: Every permit issued shall become invalid unless the work authorized by such permit is commenced within six (6) months after its issuance or if the work authorized by such permit is suspended or abandoned for a period of six (6) months after the time the work is commenced. Work shall be considered to be in active progress when the permit has received an **approved** inspection within 180 days.

“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 RECORDING YOUR NOTICE OF COMMENCEMENT.”

Property Information

Property Owner: _____

Job Address: _____

Parcel Number: _____

City: _____ Zip: _____

Owner Phone Number: _____

Owner E-mail: _____

Mailing Address for Property Owner: _____

City: _____ State: _____ Zip: _____

Driving Directions to Site From Public Service Complex (6051 Old Bagdad Hwy, Milton):

If applicable, please provide a gate access code:

Job Information

Commercial or Residential

New or Existing

Repair Alteration Change-out

How Many Inspections: _____

Cost of Construction: \$ _____

Project #: _____

Scope of work :

Commercial Building
 Condo/Apt/Multi

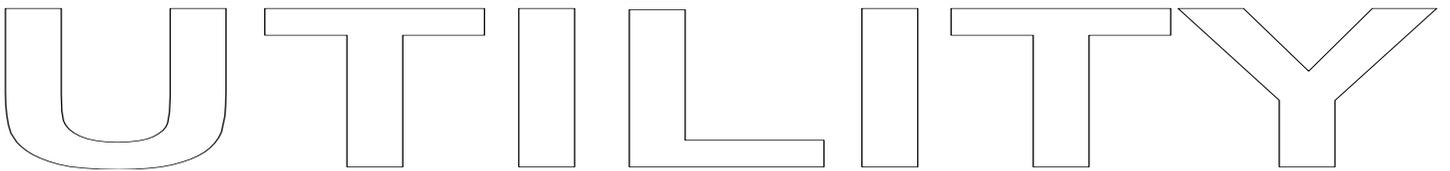
Fixture Count

___ Grinder Pump
___ Man Holes
___ Catch Basin
___ Storm Drain Pipe
___ Back Flows
___ Fire Hydrant
___ Life Station
___ Water Service
___ Sanitary Drain
___ Other
___ Other
___ Other
___ Total Fixture Count

Water and Sewer Provider

Water Provider: _____

Sewer Provider: _____



Contractor

Applicant: _____

Company Name: _____

Phone #: _____

Fax #: _____

Email Address: _____

Contractor State Registration#: _____

Mailing Address: _____

City: _____ State: _____

Zip: _____

Signature of **Qualifier**: _____

By signing you acknowledge the Conditions and Limitations on the reverse side.

If you are an owner who would like to pull your own permit please fill out the Owner/Building Disclosure form.

Office Use

Permit # _____

Issued Date: _____

Approved By: _____

Written By: _____