

**CITY OF MAITLAND FIRE/RESCUE AND BUILDING
STANDARDS & SAFETY ASSURANCE DIVISION
IRRIGATION SYSTEM PERMIT APPLICATION**

PHONE: (407) 539-6248	Permit #:
FAX: (407) 539-6275	Tenant:

Job Address:	Suite/Lot #:
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Parcel ID#:

Owner Name:	Phone:
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Owner Address:

Title Holder (If other than owner)	Phone
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Title Holders Address

Bonding Company	Phone
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Bonding Company Address

Mortgage Lender	Phone
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Mortgage Lender Address

Contractor:	Contact Person:	Ext:
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Phone:	FAX:	E-MAIL
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Business Address:

State License #:	City Recording #:
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Qualifier Name:

Class of Work:	New System	New Meter
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Type of Occupancy:

Description of Work:

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, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S 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.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

(Signature of Owner or Agent)

(Signature of Contractor)

STATE OF FLORIDA, COUNTY OF ORANGE

STATE OF FLORIDA, COUNTY OF ORANGE

Sworn to (or affirmed) and subscribed before me
this ____ day of _____, 200__.

Sworn to (or affirmed) and subscribed before me
this ____ day of _____, 200__.

BY: _____

BY: _____

Personally Known ___ OR Produced
Identification _____ Type of Identification
Produced _____

Personally Known ___ OR Produced
Identification _____ Type of Identification
Produced _____

Permit Tech: _____

Permit Approved By: _____

Date:

Date:

Mar-02

Date Utilities Division Notified:	by:
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Date copy of receipt sent to Finance:	by:
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