



City of Port St. Lucie Building Department

121 SW Port St. Lucie Blvd
Port St. Lucie, FL 34984
772-871-5132 • Web Site: http://www.cityofpsl.com
To Schedule Inspections http://pandapublicweb.cityofpsl.com

Credit Conf# \_\_\_\_\_

Electrical
Permit

Construction under this permit will be done in accordance with the NEC 2014

PERMIT # \_\_\_\_\_ PIN # \_\_\_\_\_

PROPERTY ADDRESS
LEGAL DESCR SECTION BLOCK LOT Parcel ID#
OWNER MAIL ADDRESS ZIP PHONE
CONTRACTOR MAIL ADDRESS ZIP STATE LIC. # PSL COMP #
CONTRACTOR E-mail Address PHONE FAX # CELL

MUST BE COMPLETELY FILLED OUT

Commercial: [ ] Residential: [ ]

Detailed description of proposed work:

Detailed location of proposed work: (example: Interior, exterior, bedroom, bathroom, or kitchen)

Site Lighting YES [ ]\* NO [ ]

\* If Yes, how many light poles: \_\_\_\_\_

Valuation: \$ Applied Date: Rec'd By: Reviewed by/Date PERMIT FEE:

\*Plan Review only: Rough \_\_\_\_\_ Final \_\_\_\_\_ Plans Examiner ID: \_\_\_\_\_ Initial: \_\_\_\_\_

THIS PERMIT BECOMES NULL AND VOID IF CONSTRUCTION OR WORK AUTHORIZED IS NOT COMMENCED WITHIN 6 MONTHS, OR IF CONSTRUCTION OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 6 MONTHS AT ANY TIME AFTER WORK IS COMMENCED.

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.

OWNER'S AFFIDAVIT: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating to 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. 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.

Signature of Contractor Date Signature of Owner (Only if Owner-Builder) Date

Print Name Print Name

NOTARY PUBLIC, State of Florida

State of Florida
County of \_\_\_\_\_

The foregoing instrument was acknowledged before me by means of \_\_\_ physical presence or \_\_\_ online notarization this \_\_\_ day of \_\_\_, 20\_\_\_, by \_\_\_ who is personally known to me or has produced \_\_\_ as identification.

Payment Method: \_\_\_\_\_ Last 4 or Check #: \_\_\_\_\_ Receipt #: \_\_\_\_\_