



City of Port St. Lucie Building Department
 121 SW Port St. Lucie Blvd., Port St. Lucie, Fl. 34984
 Ph: 772-871-5132 Website: www.CityofPSL.com/Building

OPENING PROTECTION/SHUTTER PERMIT APPLICATION

Permit #: _____ Pin: _____

CONSTRUCTION UNDER THIS PERMIT SHALL BE DONE IN ACCORDANCE WITH FBC 2023 8TH EDITION

Site Address: _____

Legal Description (Section/Block/Lot): _____

Parcel ID: _____

Owner's Information

Name: _____

Email: _____

Phone: _____

Address: _____

Contractor's Information

Name: _____

Email: _____

Phone: _____

Address: _____

PSL Comp no. _____

State License no. _____

PROJECT INFORMATION

Commercial Residential

Description of work: _____ (include location)

Manufactured by: _____ Number of openings to shutter: _____

Type of shutter: Roll up Accordion Panels Plywood Motorized (requires electrical sub-permit)

Total Valuation \$ _____

***See checklist for additional requirements.**

APPLICATION MUST BE SIGNED AND NOTARIZED BY THE CONTRACTOR AND OWNER

Contractor Signature Date

Print Name

Notary Public, State of Florida

STATE OF FLORIDA, County of _____

[NOTARIAL SEAL]

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.

Owner or Owner's Authorized Representative Signature Date

Print Name

Notary Public, State of Florida

STATE OF FLORIDA, County of _____

[NOTARIAL SEAL]

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.

FOR OFFICE USE ONLY

PERMIT FEE \$ _____ Payment method: _____ Last 4 Digits of Credit Card or Check no.: _____ Receipt no.: _____

Application date: _____ Rec'd by: _____



Building Department CHECKLIST FOR OPENING PROTECTION/SHUTTER PERMITS

PERMIT APPLICATION – The following information must be completed on the permit application:

- For office use only - Permit number and pin number
- Site address
- Legal description
- Parcel ID
- Owner's information
- Contractor's information
- Commercial/Residential
- Description of work (include location)
- Manufactured by
- Number of openings to shutter
- Type of shutter
- Valuation
- Notarized Contractor/Homeowner builder signature

PLANS AND DOCUMENTS – Provide 2 copies:

- Layout plan
- Florida Product approval with installation instructions
- Electrical sub-contractor permit application, if installing motorized shutters.
- Original Plans signed and sealed by a Florida licensed Architect/Engineer for any structural alteration.
- If altering the structure to install, please refer to the Structural Opening permit checklist
- Recorded Notice of Commencement for work valued at \$5,000 or more. (NOC must be submitted to permitting prior to scheduling the first inspection.)
- ****If applying for the permit as a homeowner builder, a copy of the recorded warranty deed or property card showing homeowners name from the property appraiser's website must be submitted, along with HOB Affidavit. Homeowner must personally appear at the Building Department to have their signature notarized.**

This checklist is intended for Building Department use only. Additional documents may be requested at any time during the permitting process. Any exceptions must be approved by a Supervisor.