



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

RESIDENTIAL LOW VOLTAGE ALARM PERMIT APPLICATION

Number of labels: _____ Label #: _____ Thru: _____

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

Contractor's Name: _____		Phone: _____
Address: _____		
Email: _____	PSL Comp no. _____	State License no. _____

PROJECT INFORMATION (note: excludes all fire alarms or systems that include fire alarms, F.S. 553.793)

The form is for the pre-purchasing of permit labels for "Residential Low Voltage Alarm Systems" per F.S. 489.503 and 553.793.

Each label will expire if not used within one (1) year of purchase.

The contractor is required to notify the city within 14 days of completing an alarm project by submitting a completed Uniform Notice of a Low Voltage Alarm System Project" form (see attachment).

The contractor is required to post the label in a conspicuous place on the premises before commencing work.

The contractor is responsible for scheduling a final inspection. Code violations must be corrected by the contractor. Permit fee shall be \$40 per label. (Permit fees are non-refundable. Permit labels expire 1 year from date of purchase.

The permit process only applies to low-voltage alarm system installations. When a power outlet or any other electrical system modification is required, a regular electrical permit must be obtained by a licensed electrical contractor.

This city will sanction any contractor that fails to notify us of an alarm system installation.

Please initial that you have read the above information: _____

APPLICATION MUST BE SIGNED AND NOTARIZED BY THE CONTRACTOR AND OWNER

_____ Contractor Signature Date	_____ Owner or Owner's Authorized Representative Signature Date
_____ Print Name	_____ Print Name
_____ Notary Public, State of Florida	_____ Notary Public, State of Florida
STATE OF FLORIDA, County of _____	STATE OF FLORIDA, County of _____
[NOTARIAL SEAL]	[NOTARIAL SEAL]
The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20____, by _____ who is personally known to me or has produced _____ as identification.	The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> 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 RESIDENTIAL LOW VOLTAGE ALARM PERMITS

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

- Number of labels
- Label number
- Thru
- Contractor's information
- Initial
- Notarized Contractor/Homeowner builder signature

PLANS AND DOCUMENTS – Provide 2 copies:

- Uniform Notice of a Low Voltage Alarm System Project. (This notice will only be accepted once a permit number and label number has been assigned following the receipt of the low voltage permit application.)
- 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.**

NOTES:

- The "Uniform Notice" can be emailed to permitting@cityofpsl.com and a permit will be sent electronically to the contractor within 2 business days.

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.



City of Port St. Lucie Building Department

121 S.W. Port St. Lucie Blvd., Port St. Lucie, Fl. 34984

Website: www.cityofpsl.com/building

Fax this form to: 772-344-4117

or email to, permitting@cityofpsl.com

Permit Number will be emailed to you within (2) business days

UNIFORM NOTICE OF A LOW VOLTAGE ALARM SYSTEM PROJECT

Owner or Customer's Name _____

Project Address _____

City _____ State _____ Zip _____

Phone Number _____ Email _____

Contractor's Name _____

Contractor's Address _____

City _____ State _____ Zip _____

Phone Number _____ Contractor's License # _____

Date project was completed _____ Permit label # _____

Scope of work _____

Notice is hereby given that a low voltage alarm system project has been completed at the address specified above. I certify that the following information is true and accurate.

(Signature of Owner, Tenant, Contractor, or Authorized Representative)

(Date)

(Print Name)

Do not write below this line – (for office staff only)

PERMIT NUMBER: _____ PIN # _____