



**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](http://www.CityofPSL.com/Building)

**SUB-CONTRACTOR  
 OF RECORD  
 PERMIT APPLICATION**

Permit #: \_\_\_\_\_ Pin: \_\_\_\_\_ Master Permit #: \_\_\_\_\_

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

I hereby authorize the following contractor or individual to include me as a Sub-Contractor for the referenced job.

\_\_\_\_\_ License # \_\_\_\_\_  
 (Print name of authorized master permit holder or property owner if owner builder)

Type of work:  Plumbing  Electrical  Mechanical  Roof Specialty: \_\_\_\_\_ (specify)

<b>Total Valuation \$</b> _____
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**\*See checklist for additional requirements.**

**APPLICATION MUST BE SIGNED AND NOTARIZED BY THE CONTRACTOR AND OWNER**

<p>_____ Contractor Signature <span style="float: right;">Date</span></p> <p>_____ Print Name</p> <p>_____ Notary Public, State of Florida</p> <p>STATE OF FLORIDA, County of _____</p> <p>[NOTARIAL SEAL]</p> <p>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.</p>	<p>_____ Owner or Owner's Authorized Representative Signature <span style="float: right;">Date</span></p> <p>_____ Print Name</p> <p>_____ Notary Public, State of Florida</p> <p>STATE OF FLORIDA, County of _____</p> <p>[NOTARIAL SEAL]</p> <p>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.</p>
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**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 SUB-CONTRACTOR OF RECORD PERMITS

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

- For office use only - Permit number, pin number and master permit number
- Site address
- Legal description
- Parcel ID
- Owner's information
- Contractor's information
- Commercial/Residential
- Name of authorized master permit holder or property owner
- License #
- Type of work
- Specialty
- Valuation
- Notarized Contractor/Homeowner builder signature

**PLANS AND DOCUMENTS** – Provide 2 copies:

- The Sub-contractor of Record Permit Application must be submitted with the master permit, if the master permit is issued over the counter.

**NOTE:**

- All sub-contractor applications must be received before the master permit can be issued.
- Submittal of the Sub-contractor of Record Permit does not allow the applicant to start work until the master permit is issued.

***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.***