



Sumter County Board of County Commissioners

Development Services Department

Building Services Division

7375 Powell Road, Suite 115, Wildwood, FL 34785

Phone: 352-689-4400 Fax: 352-689-4401 Email: building@sumtercountyfl.gov

Website: <http://www.sumtercountyfl.gov>

Building Permit Application

Date: _____

Office Use
Permit No. _____
Primary Permit No. _____

Project Description, Scope of Work, and Project Name (if applicable)

Parcel No _____ Address _____

Total Value of Work \$ _____ Square Feet: Air Conditioned _____ Non-Air Conditioned _____

Property Owner Name(s) _____

Address _____ City _____ State _____ Zip _____

Contact Person _____ Phone No. _____

Email address _____

Is this permit for a Contractor OR Owner/Builder ?

Primary Contractor Company Name _____ License # _____

Address _____ City _____ State _____ Zip _____

Contact Person _____ Phone No. _____

Email address _____

Subcontractors (if applicable) Subcontractors must be listed on Combination permits.

	Company Name	Qualifier Name	License Number
Plumbing			
Electrical			
Mechanical			
Roofing			
Gas			
Other			

	N/A	Name	Address
Bonding Company	<input type="checkbox"/>		
Engineer/Designer	<input type="checkbox"/>		
Fee Simple Titleholder	<input type="checkbox"/>		
Mortgage Company	<input type="checkbox"/>		

Owners must personally appear for Owner/Builder permits prior to the permit being issued.

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.

Property Owner (Owner/Builder ONLY), Authorized Agent, or Contractor Signature: _____

Date: _____

The foregoing was acknowledged before me this _____ day of _____ 20____

by _____ who is personally know to me or has produced identification.

ID Type _____

Notary Signature: _____

Notary Seal