



## Gilchrist County Building Department

209 SE 1<sup>st</sup> Street Trenton, FL 32693  
Phone: (352) 463-3173 Fax: (352) 354-9113

### Building Permit Application

Please print

#### Owner Information

**Owner/Builder Affidavit must be submitted if owner is applying for permit**

Owner Name:

Mailing Address:

City:

State:

Zip:

Contact phone number:

E-mail:

Proof of Ownership:  Recorded Deed  Other:

#### Applicant (if other than owner)

Name:

Mailing Address:

City:

State:

Zip:

Contact phone number:

E-mail:

Contractor Name (if different):

Contact #:

#### Property Information

Total Cost of Project: \$

 Residential     Commercial     Electric     HVAC     Plumbing     Roofing

Project Address:

City:

State:

Zip:

Parcel Number:

Electric Company:  CFEC     Duke

Existing Use of the Building/Space/Site:

Type of project:  New Construction     Addition     Remodel     Repair     Other

Conditioned Square Feet:

Unconditioned Square Feet:

Total Square Feet:

Describe Work to Be Performed:

Fee Simple Title Holder (if other than owner):

Fee Simple Title Address:

Bonding Company's name:

Bonding Company's Address:

Mortgage Lender's Name:

Mortgage Lender's Address:

Architect/Engineer:

Phone:

Mailing Address

Email:



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**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.**

*Application is hereby made to obtain a permit to do the work and installation 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. I understand that a separate permit must be secured for Electrical Work, Plumbing, Signs, Wells, Pools, Furnaces, Boilers, Heaters, and Air Conditioners.*

*Owner Affidavit: I certify that all the foregoing information is accurate, and all work will be done in compliance with all applicable laws regulating construction and zoning.*

*The Department and Applicant agree that this Document may be electronically signed. The parties agree that electronic signatures appearing on this agreement are the same as handwritten signatures for the purposes of validity, enforceability and admissibility.*

\_\_\_\_\_  
Signature of Owner/Contractor/Agent

\_\_\_\_\_  
Date