NOTE: ALL SHEETS MUST BE REVIEWED

MIAMI-DADE COUNTY BUILDING DEPARTMENT
Herbert S. Saffir Permitting and Inspection Center
11805 SW 26th Street (Coral Way), • Miami, Florida 33175-2474 • (786) 315-2100

PERMIT APPLICATION

IF SUBSIDIARY PROVIDE MASTER PERMIT NUMBER HERE

LOCATION OF IMPROVEMENTS

Job Address 9700 SW 344 St Homestead, Fl 33035
Folio
Lot Block
Subdivision PBpg
Metes and bounds

CONTRACTOR INFORMATION

Contractor No. CGC023821
Last four (4) digits of Qualifier No. 3821
Contractor Name Lemartec
Qualifier Name Jose Garcia-Tuñon
Address 11740 SW 80 St 3rd Floor
City Miami State FL Zip 33183

TYPE OF IMPROVEMENTS

[X] New Construction on Vacant Land
[ ] Alteration Interior
[ ] Alteration Exterior
[ ] Relocation of Structure
[ ] Short Term Event
[ ] New Roof
[ ] Recovery (Roof)
[ ] Permit by Affidavit
[ ] Enclosure
[ ] Repair
[ ] Repair Due to Fire
[ ] Demolish
[ ] Shell Only
[ ] Addition Attached
[ ] Addition Detached
[ ] Re-Roof
[ ] Foundation Only

Current use of property Vacant
Description of Work Dry Storage Building
Sq. Ft. 3,500 Units Floors 1
Value of Work

PERMIT TYPE

[X] Building* Category 01
[ ] Electrical
[ ] Mechanical
[ ] Plumbing
[ ] LPGX

CHANGE TO AN EXISTING PERMIT

[ ] Chg. Contractor
[ ] Re-Issue
[ ] Extension
[ ] Supplement
[ ] Reinspection

OWNER'S NAME

Owner
Address
City State Zip
Phone
Last four (4) digits of Owner's Social Security No.

PERSON TO PICK UP PLANS

Name Carlos Arrebola
Address 11740 SW 80 St 3rd Floor
City Miami State FL Zip 33183
Phone 786-877-9961

ARCHITECT ENGINEER

Name BRPH ARCHITECTS-ENGINEERS
Address 1475 E. CENTREPARK BL #230
City WPB State FL Zip 33401
Phone 561-616-5878

BONDING

Name
Address
City State Zip
Phone

MORTGAGE LENDER

Name
Address
City State Zip
Phone

*See reverse side for Building Category

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for **ELECTRICAL, PLUMBING, SIGNS, POOLS, MECHANICAL, WINDOW, SHUTTERS** and **ROOFING WORK** and there may be additional permits required for other governmental entities.

OWNER'S/PERMIT APPLICANT AFFIDAVIT: I certify that all of the foregoing information is accurate and that I have no unpaid civil penalties, administrative hearing cost investigative, enforcement, testing or monitoring costs or unpaid liens which are owed to Miami-Dade County.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner or Owner's Agent
PRINT NAME
STATE OF FLORIDA COUNTY OF MIAMI-DADE
Sworn to and subscribed before me this
day of , 20 ,
by
(SEAL)

Signature of Qualifier
PRINT NAME Jose Garcia-Tuñon
STATE OF FLORIDA COUNTY OF MIAMI-DADE
Sworn to and subscribed before me this 5th
day of , 20 14,
by
(SEAL)

LOURDES OPPERMAN
MY COMMISSION # EE 000203
EXPIRES: June 25, 2014
Bonded Thru Notary Public Underwriters