



**TOWN OF BELLEAIR
BUILDING DEPARTMENT**
901 Ponce de Leon Blvd.
Belleair, Florida 33756-1096
Phone: (727) 588-3769 ext. 215
Fax: (727) 588-3768

PERMIT APPLICATION
(PLEASE PRINT OR TYPE)

Permit # _____ Date Issued _____
 Property Owner _____ Phone() _____
 Owners Address _____ City _____ State _____ Zip _____
 Construction Address _____ Parcel No. _____
 License Holder _____ Company Name _____
(Individual's Name)
 Contractors Mailing Address _____ City _____ State _____ Zip _____
 Contractors Phone No. _____ Fax No. _____
 Email Address. _____ P.C.C.L.B. No. _____

Description of Work: _____

Type of Work: S/F _____ M/F _____ Comm. _____ New _____ Addition _____ Remodel _____ Demo _____ Electrical _____
 Mechanical _____ Plumbing/Gas _____ Roof _____ Window/Door _____ Opening Protection _____ Patio/Deck _____
 Fascia/Soffit/Siding _____ Gutter/Downspout _____ Sidewalk/Driveway _____ Pool/Spa _____ Sign _____ Tree _____
 Pool Enclosure _____ Site Preparation _____ Fence/Fence Wall _____ Well _____ Dock/Seawall _____ Irrigation _____
 Fire Sprinkler/Alarm _____ Dumpster / Trailer _____ Generator _____ Accessory Structure _____ Other _____

Flood Zone _____ Non-Flood Zone _____ Utility Line Locate # _____

SPECIAL CONDITIONS:
(Town of Belleair Use Only) _____

Valuation of Proposed Improvements (Total Job Cost) \$ _____

SIGNATURE: _____ **DATE:** _____
APPLICANT (OWNER or AGENT)

APPLICANTS NAME: _____
(PRINT or TYPE) **(Town of Belleair Use Only)**

ADMINISTRATION FEE (\$25.00)* <small>(\$25.00 if project value is less than \$1000 & 2.0% of Total Project Value)</small>	\$ _____
ADMINISTRATION FEE: (\$50.00)*	\$ _____
ADMINISTRATION FEE: (\$250.00)* FEMA ZONE	\$ _____
VALUATION FEE (2% of Total Project Value)	\$ _____
MISCELLANEOUS FEES: (Recording fee, Dumpster Fee)	\$ _____
RADON FEE: (Radon gas, Radon Surcharge)	\$ _____
PINELLAS COUNTY TRANSPORTATION IMPACT FEE:	\$ _____
AFTER THE FACT PERMIT: (Doubles the total permit cost)	\$ _____
TOTAL PERMIT FEE:	\$ _____
AMOUNT PAID :(Date: _____)	\$ _____

*(Non-Refundable Administration Fee)

BUILDING OFFICIAL'S APPROVAL: _____ Date: _____
 TOWN ARBORIST'S APPROVAL: _____
 TOWN MANAGER'S APPROVAL: _____