



MAR 24 2022

BY

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BUILDING PERMIT APPLICATION

APPL DATE <u>3/24/2022</u>	F.B.C. VERSION <u>2020</u>	ACCEPTED BY <u>UAM</u>	PERMIT NO. <u>22-203195</u>
OWNER INFORMATION		CONTRACTOR & DESIGNER INFORMATION	
Name <u>Troy Gagliardi</u>		☐ Check if Owner/Builder (See Page 3)	
Address <u>942 Evergreen Drive</u>		Contractor License No. <u>CBC 1251448</u>	
City <u>Delray Beach</u> State <u>FL</u> Zip <u>33483</u>		Workers' Comp No. <u>200-831871</u>	
Home Phone (<u>917</u>) <u>825 3716</u>		Company <u>Jm properties of w. Palm Beach, Inc.</u>	
Cell Phone () _____		Address <u>10606 Versailles Boulevard</u>	
Fax No. () _____		City <u>Wallington</u> State <u>FL</u> Zip <u>33449</u>	
Email Address <u>troyg@saycoassemanagement.com</u>		Phone <u>561 756 5744</u> Fax <u>561 752 4227</u>	
		Cell <u>561 756 57414</u>	
		Email <u>ds@jpropertieswpb.com</u>	
PROPERTY INFORMATION		Architect/Engineer's Name _____	
Property Control Number: <u>12-43-45-28-03-000-3149</u> <u>2720</u>		Address _____	
Address of Proposed Work <u>942 Evergreen Drive</u>			
Legal Description <u>TROPIC ISLES 3rd SEC</u>		FOR PERMIT EXPEDITERS ONLY (for permit pick-up):	
Site or Apt # / Floor _____		Contact Name _____	
Project Name (if applicable) _____		Phone _____ Ext. _____	
		Cell _____	
ADDITIONAL INFORMATION			
Fee Simple Title Holder (if other than owner) <u>Troy Gagliardi</u>			
Address <u>942 Evergreen Drive</u>		City <u>Delray Beach</u> State <u>FL</u> Zip <u>33483</u>	
Mortgage Lender _____		Bonding Company _____	
Address _____		Address _____	
City _____ State _____ Zip _____		City _____ State _____ Zip _____	
DESCRIPTION OF PROPOSED IMPROVEMENTS			
Description of the proposed work (New Construction, Addition, Interior/Exterior Alteration, Windows/Doors, etc.) _____			
<u>Remove and install new clock</u>			
Is this a City or Re-hab project? ☐ Yes ☒ No			
Current Use or Occupancy <u>residential</u>		Is the building served with an automatic fire sprinkler system? ☐ Yes ☒ No	
Is this a change in the Use or Occupancy? ☐ Yes ☒ No			
PERMIT VALUATION			
For Impact Fee Credit, Existing or Previous Structure Demolished? ☐ Yes ☐ No			
Type of Structure Demolished: ☐ SFR ☐ Commercial ☐ Commercial Accessory Building			
PLEASE CHOOSE ONE OF THE FOLLOWING:			
NEW CONSTRUCTION & ADDITIONS - FEE SCHEDULE I*		MISCELLANEOUS PERMITS - FEE SCHEDULE II*	
TOTAL COST OF CONSTRUCTION TO INCLUDE: STRUCTURAL, ROOFING, ELEC, MECH, PLBG \$ <u>60,000.00</u>		ALTERATIONS & GENERAL CONSTRUCTION - SCHED. III*	
		TOTAL COST OF CONSTRUCTION: \$ _____	
		COST OF CONSTRUCTION WITHOUT TRADES: \$ _____	
NOTE: OTHER ASSOCIATED TRADES TO BE FEE'D SEPARATELY UNDER <u>FEE SCHEDULE II OR III</u> . THESE INCLUDE: LOW VOLTAGE, HOOD/SUPPRESSION SYSTEM, FIRE SPRINKLERS, IRRIGATION, LANDSCAPING, PAVING, ETC.		NOTE: ALL SUB-TRADES TO BE FEE'D SEPARATELY. THESE INCLUDE ELEC, MECH, PLBG, ROOFING, LOW VOLTAGE, HOOD/SUPP SYSTEM, FIRE SPRINKLERS, IRRIGATION, LANDSCAPING, PAVING, ETC.	
*SEE BUILDING PERMIT FEE SCHEDULE FOR DETAILS			

APPLICATION CERTIFICATION AND ACKNOWLEDGEMENT

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. **A City Building Permit does not assure compliance with Homeowners Association's rules, regulations and/or deed restrictions. Applicant is advised to obtain approval from the Homeowners Association before improving any property.** Applicant further acknowledges the following:

- Separate permits must be secured for ELECTRICAL, PLUMBING, MECHANICAL, WELLS, POOLS, FIRE SPRINKLER, SIGNS, LANDSCAPE, IRRIGATION, ROOFING, SHUTTERS, ETC.
- This permit becomes null and void if work or construction authorized is not commenced within six (6) months or if construction or work is suspended or abandoned for a period of six (6) months at any time after work is commenced. Permit will be considered suspended or abandoned if it does not pass an inspection within 180 days and will be subject to a reactivation fee in the amount in force at the time of reactivation.
- Failure to comply with all applicable construction regulations may result in the withholding of future permits.
- Submission of any false information or misrepresentation is a violation of law and shall result in revocation of your permit.
- NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

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. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNER'S AFFIDAVIT: I hereby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work will be complied with whether specified herein or not. The granting of a permit does not presume to give authority to violate or cancel the provisions of any other state or local law regulating construction or the performance of construction.

PROPERTY OWNER
STATE OF FLORIDA, COUNTY OF PALM BEACH

Signature of Owner

TROY CALLEARD

Printed Name of Owner

STATE OF FLORIDA, COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me

This 23 day March, 2022

By [Signature]

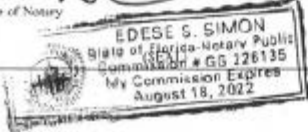
☒ Personally Known OR

☐ Produced Identification

Type of Identification:

Edese Simon

Signature of Notary



GENERAL CONTRACTOR
STATE OF FLORIDA, COUNTY OF PALM BEACH

Signature of Qualifier

Derek Sammen

Printed Name of Qualifier

STATE OF FLORIDA, COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me

This 23 day March, 2022

By [Signature]

☒ Personally Known OR

☐ Produced Identification

Type of Identification:

Edese Simon

Signature of Notary

