

Community Development Department Building Construction Division

18400 Murdock Circle | Port Charlotte FL 33948 Building Phone: 941.743.1201 | Building Fax: 941.764.4907 Zoning Phone: 941.743.1964 | Zoning Fax: 941.743.1598

BuildingConstruction@CharlotteCountyFL.gov www.CharlotteCountyFL.gov

For Office Use Only
Permit Number:
20
Application date:
CSR Initials

AFFIDAVIT

STATEMENT THAT THE BUILDING SITE CONTAINS NO COUNTY OR PUBLIC UTILITY STRUCTURES

Name of person making statement				
Owner(s) Owner(s) Agent	Owner(s) Contractor			
Address:				
Number & Street	Type:(St., Dr., Pkwy., Blvd., et	rc.)	City State Zip	
Parcel ID:			Building #:	Unit #:
l, the undersigned, hereby certify in property proposed as the building proposed site does not contain an site, whether within or without an	g site for which I am app by County or Public Utilit	lying for a building	g permit. I have dete	rmined that the
I understand that should any Cou building site, the County will not k other action related to any such st	oe responsible for any ex	kpenses related to	moving, abandonin	g or taking any
Application is hereby made to obtain a permit commenced prior to issuance of a permit and Owners Affidavit: I hereby certify that all the regulating construction and zoning. WARNING TO OWNER: YOUR FAILURE TO RE YOUR PROPERTY. A NOTICE OF COMMENCE IF YOU INTENT TO OBTAIN FINANCING, CONSCOMMENCEMENT. NOTICE: In addition to the requirement of the records of this County, and there may be add federal agencies. Under penalties of perjury I declare that I I applicable regulations. F.S.92.525	I that all work will be performed foregoing information is accurate foregoing information is accurated. The commental states of the commental states o	to meet the standards of ate and that all work will cement MAY RESULT D POSTED ON THE JOB STATTORNEY BEFORE CO. That restrictions applicable her governmental entiti	of all laws regulating construction of all laws regulating construction of the done in compliance with the done in compliance with the done in compliance with the done in complete the done in the do	uction in this jurisdiction. In all applicable laws OR IMPROVEMENTS TO ON. DRDING YOUR NOTICE OF one found in the public ent districts, state, or
Contractor/Owner Builder Signature:			Date:	
Print Name:				
(Owner's signature only if owner is acting as co	ontractor. **An Owner-Builder Dis	closure Statement will be	required)	
NOTICE: Permit is void if Construction is not start inspection will extend the permit for an additional	ed within six months or does not re	ceive an approved inspecti	on within six months from date	'''