PET WASTE DISPENSER PERMIT

Job Address: Job Address: Job City: Building Use: Construction Type: Occupancy Group: Prepent Use: Proposed Used: Description of Work: Legal Description: Property Owner: City: State: Zip: Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work constallation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard and laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all laws regulating construction and zoning. OWNER: AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST B RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAI FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. NOTE TO OWNER: Your signature below authorizes the City of Fort Lauderdale to remove the device from City Right-of-Way at its discretion. Refer to: Pet Waste Dispenser Instructions Potential Property Owner or Agent Name) WORTHY SIGNATURE as to Owner or Agent Name) Property Owner or Signature Notary Name Property Owner or Signature Property Owner or Sig	Permi	t Type:	Master I	Permit#:	Sub-Permit#:	
Subdivision: Lot: Block: Building#: Building Use: Construction Type: Occupancy Group: 1 Present Use: Proposed Used: Description of Work: Legal Description:					Application Date:	
Building Use: Construction Type: Occupancy Group: Present Use: Proposed Used: Description of Work: Legal Description: LiAttachment Property Owner: Phone: Email: Owner's Address: City: State: Zip: Fee Simple Titleholder's Name (if other than owner): Fee Simple Titleholder's Address: City: State: Zip: Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all laws regulating construction and zoning. WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MUST BRECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIL FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCEMENT MUST BRECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIL FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT. NOTE TO OWNER: Your signature below authorizes the City of Fort Lauderdale to remove the device from City Right-of-Way at its discretion. Refer to: Pet Waste Dispenser Instructions Signature of Property Owner or Agent Name) (Type / Print Property Owner or Agent Name) (Type / Print Property Owner or Agent Name)						
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Personally Known or Produced Identification		Notary Name	e(Print, Type or Stamp Notary's Nam			

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