



Mailing: 25440 W Newberry Rd  
Newberry, Florida 32669  
Tel: 352-472-2161 Ext. 3  
www.NewberryFL.gov

STAFF USE ONLY

### COMMERCIAL PERMIT APPLICATION

**PERMIT EXPIRES 180 DAYS FROM THE DATE OF ISSUE**

All plans must comply with 2020 Florida Building Codes, Seventh Edition, 2017 NEC, City of Newberry Code of Ordinances & Land Development Regulations

#### APPLICANT/CONTRACTOR INFORMATION

_____		_____	
Company Name		Company Phone	
_____		_____	
Address		Email	
_____		_____	
Contractor Name	License #	Contractor Phone	

#### PROPERTY INFORMATION

_____		_____	
Owner Name		Address	
_____		_____	
Owner Phone	Job Address	Unit #	
_____		_____	
Subdivision	Parcel #	Lot	Block
_____		_____	
Zoning	Use		
SETBACKS			
	_____	_____	_____
	Front	Rear	Left      Right

#### PROJECT INFORMATION

_____		_____	
Use of Building		Classification of work (New Construction/Remodel/Addition)	
_____		_____	
# of Units	Phase #	Total Heated Area (SF)	Total Area (SF)
_____		_____	
Foundation Type		Wall Type	
_____		_____	
Roof Type	# of Stories	\$ _____	
		Valuation of Work	

Description of Work

Located in the Historic Little Red School House  
25815 S.W. 2nd Avenue



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## WARNING TO OWNER

A Notice of Commencement must be recorded and posted on the job site before first inspection. 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 lender or an attorney before recording your Notice of Commencement.

## OWNER / CONTRACTORS AFFIDAVIT

I have carefully read and examined this application and the information contained within is true and correct to the best of my knowledge and belief. I certify that no work has commenced prior to the issuance of a permit, and that all work will comply with the City of Newberry and laws of the State of Florida, whether specified or not. **I will notify the City of Newberry 24 hours in advance for all inspection requests.** No work will be concealed before approval is issued.

***Consent is given for the entry of authorized inspections until the job has received a Certificate of Occupancy or Certificate of Completion.***

\_\_\_\_\_  
Contractor Name  
Please Print

\_\_\_\_\_  
Contractor Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Owner-Contractor Name  
Please Print

\_\_\_\_\_  
Owner-Contractor Signature

\_\_\_\_\_  
Date