



CITY OF PANAMA CITY BEACH

Building and Planning Department

TRUST ACCOUNT PERMIT WORKSHEET

Code in effect 7th Edition Florida Building Code (2020)

Job Site / Property Information

Job Site / Property Address: _____ Suite/Unit: _____ Zip Code: _____
 Parcel ID: _____ Property Owner Name: _____ Phone Number: _____

Description of Work

Residential Commercial New Construction Existing Structure Master Permit #: _____

Description of Work: _____

Electrical

JOB COST: _____	SQUARE FOOTAGE: _____
____ Wire new structure	____ Renovations / Additions with Service Change
____ Temporary Service Pole for Construction	____ Renovations / Additions without Service Change
____ Manufactured Home Pole	____ Service Change AMPS _____ <i>≥ 800 AMP requires engineered analysis</i>
____ New Circuits No of circuits: _____	____ Service Repair AMPS _____ <i>engineered analysis</i>
____ Swimming Pool	____ Electrical for Generator installation
____ Pre-inspection for power	____ Wire for Solar Panels with Service Change
____ Electrical for Sign	____ Wire for Solar Panels without Service Change

Mechanical

JOB COST: _____ Number of Systems _____ SEER: _____ Tonnage: _____

Plumbing

JOB COST: _____ Number of Fixtures: _____ Water Heater: _____ Sewer Taps: _____

Gas

JOB COST: _____ Number of Outlets: _____ Water Heater / Vent: _____ Other: _____

Roof

JOB COST: _____
 Re-Roof Roof Over Shingle Metal Other: _____

Contractor and Trust Account Information

Company Name: _____ Phone Number: _____ Trust Account #: _____
 License Holder Name: _____ License Number: _____
 Account Holder's name: _____ Contact Number#: _____
 Email: _____ Permit Sent In By: _____

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. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, POOLS, HVAC, etc.

I understand all REQUIRED INSPECTIONS will be requested of the work permitted herein. Compliance will be strictly enforced. This permit is VOID after six (6) months from issuance unless the work it covers has been commenced and has had ongoing approved inspections. The Building Official may revoke this permit or remove service, in such case as there has been any false statement or misrepresentation as to the material fact in the application or plans upon which this permit was based.

Signature of Applicant: Contractor Authorized Agent: _____ Date: _____