



# *CITY OF STARKE*

## **BUILDING, ZONING & PLANNING**

*Post Office Drawer C \* 209 N. Thompson Street*

*Starke, Florida 32091*

*Ph.: (904) 368-1332\* Fax: (904) 368-1311*

### **OWNERS INFORMATION**

**NAME OF PROPERTY OWNER:** \_\_\_\_\_

**ADDRESS:** -----  
\_\_\_\_\_

**TELEPHONE NO:** \_\_\_\_\_

**PARCEL NO:** -----

**DIRECTIONS TO JOBSITE:** \_\_\_\_\_

### **TYPE OF MISCELLANEOUS PERMIT**

ELECTRICAL \_\_\_\_\_ POWER CO: \_\_\_\_\_ MECHANICAL \_\_\_\_\_

PLUMBING \_\_\_\_\_ ROOFING \_\_\_\_\_ OTHER \_\_\_\_\_

CONTRACT VALUE: \_\_\_\_\_

PROJECT DESCRIPTION: \_\_\_\_\_  
\_\_\_\_\_

### **CONTRACTORS INFORMATION (IF APPLICABLE)**

PRINT COMPANY NAME (OF APPLICABLE):  
\_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

SWORN TO AND DESCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF

\_\_\_\_\_, 20\_\_\_\_.

SEAL: