

City of Lake City - Growth Management 173 NW Hillsboro St. Lake City, FL 32055

173 NW Hillsboro St. Lake City, FL 32055 Ph: 386-719-5750 Email: Permits@lcfla.com

UTILITY CONNECTION PERMIT APPLICATION

Permit #:				
CONSTRUCTION UNDER THIS PERMIT SHALL BE DONE IN ACCORDANCE WITH FBC 2023 8TH EDITION				
Site Address:				
Legal Description (Section/Block/Lot):			Parcel ID:	
Owner's Information				
Name:	Email:			Phone:
Address:				
Contractor's Information				
Name:	Email:			Phone:
Address:		State License no.		
Architect's/Engineer's Information				
Name:	Email:		_	Phone:
Address:				State License no.
PROJECT INFORMATION				
□ Commercial □ Residential Describe the proposed work in detail:				
Detailed location of proposed work:				
*Soo shooklist for additional requirements				
*See checklist for additional requirements.				Total Valuation \$
*See checklist for additional requirements. APPLICATION MUST BE S	IGNED AND NO	TARIZED BY THE COI	NTRACTOR AND OV	·
-	IGNED AND NO	TARIZED BY THE COI	NTRACTOR AND OV	·
-	IGNED AND NO Date			·
APPLICATION MUST BE S				WNER
APPLICATION MUST BE S Contractor Signature		Owner or Owner	's Authorized Repr	WNER
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida		Owner or Owner Print Name Notary Public, St	's Authorized Repre	esentative Signature Date
Contractor Signature Print Name		Owner or Owner Print Name Notary Public, St	's Authorized Repr	esentative Signature Date
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida		Owner or Owner Print Name Notary Public, St	's Authorized Represate of Florida A, County of	esentative Signature Date
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of	Date	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL]	's Authorized Representation ate of Florida A, County of	esentative Signature Date
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of [NOTARIAL SEAL]	Date	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL] The foregoing inst	ate of Florida A, County of	esentative Signature Date
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of [NOTARIAL SEAL] The foregoing instrument was acknowledged before the state of the stat	Date Fore me by zation this	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL] The foregoing inst means of \square phys	ate of Florida A, County of trument was acknowical presence or [esentative Signature Date
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of [NOTARIAL SEAL] The foregoing instrument was acknowledged before means of physical presence or online notaring.	Date Fore me by Exation this who is	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL] The foregoing inst means of \square phys day of $_$	ate of Florida A, County of trument was acknowical presence or, 20,by	esentative Signature Date Date Divide the second of the
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of	Date Fore me by Exation this who is	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL] The foregoing inst means of \square phys day of $_$	ate of Florida A, County of trument was acknowical presence or, 20,by	esentative Signature Date Date Divide the second of the
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of	Date Fore me by zation this who is	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL] The foregoing inst means of phys day of personally known	ate of Florida A, County of trument was acknowical presence or, 20,by	esentative Signature Date Date Divide the second of the
APPLICATION MUST BE S Contractor Signature Print Name Notary Public, State of Florida STATE OF FLORIDA, County of	Date Fore me by zation this who is	Owner or Owner Print Name Notary Public, St STATE OF FLORID [NOTARIAL SEAL] The foregoing inst means of phys day of personally known as identification.	ate of Florida A, County of trument was acknowical presence or, 20,by	esentative Signature Date Date Divide the second of the