

Union County Building Department Application

15 Northeast 1st Street
Lake Butler, FL 32054
Phone: 386-496-2676
Fax: 386-496-4240

PARCEL # _____
Property Owner: _____
Phone: _____
911/Site Address: _____
PERMIT TYPE: Repair, Remodel or Renovation (circle one)
Contractor Name: _____
Mailing Address: _____
Business Name: _____
_____ Phone: _____
Cell: _____
Phone: _____ License #: _____
Estimated Cost: _____
Direction to Job: _____

Owner or Contractor Affidavit: I _____ *certify that all the foregoing information is accurate and true, and that all work will be done in compliance with all applicable laws regulating construction, contractor licensing and zoning. I am responsible for the supervision and completion of the construction.*

Signature: _____ **Date:** _____

UNON COUNTY BUILDING DEPARTMENT

ITEMS REQUIRED FOR A REPAIR, REMODEL OR RENOVATION PERMIT

1. Legal Description of property (Parcel ID #)
2. Notice of Commencement.
3. Two sets of Drawing or Blue Prints.
4. Permit fees as required.

NOTE: ALL CONTRACTORS MUST BE LICENSED IN THIS OFFICE PRIOR TO ISSUANCE OF PERMIT.