



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-220-4765

PERMIT RENEWAL REQUEST

TO BE COMPLETED BY OWNER /BUILDER OR CONTRACTOR

DATE: _____ PERMIT NUMBER: _____

COMPANY: _____ PHONE NUMBER: _____

OWNER'S NAME: _____ QUALIFIER'S NAME: _____

PERMIT ADDRESS: _____

TYPE OF PERMIT: _____

Owner/Builder or Contractor's Signature

Contractor License number

***** OFFICE USE ONLY *****

STATUS OF PERMIT: The above permit has been inactive for _____ days.

Date and type of last inspection: _____ Last inspection Passed _____ Failed _____

Number and date(s) of previous renewals: _____

Was the original permit submitted prior to October 1, 2005? _____ Yes or _____ No

_____ According to the review of this file it has been determined that this permit **is eligible** for renewal.

_____ According to the review of this file it has been determined that the permit **is not eligible** for renewal and the applicant must reapply under the current applicable codes.

Building Official: _____

Comments: _____

Renewal fees due: \$ _____

Applicant notification date: _____