



6601 Main St • Miami Lakes, Florida, 33014
Office: (305) 827-4015 • Fax: (305) 558-9884
Website: www.miamilakes-fl.gov

BUILDING PERMIT APPLICATION

Job Address: 15201 NW 79th Ct

Unit #:

Folio #: 32- 2022-009-0025

Owner-Builder: ☐

Master Permit #: _____

Sub Permit #: _____

Revision #: _____

OWNER INFORMATION	NAME: TGC 15201 OFFICE LLC C/O THE GRAHAM COMPANIES	LEGAL USE/ WORK	Current Use of Property: Commercial office
	Address: 6843 MAIN ST		Job Description: Interior renovation and adaptation of an existing classroom to be used as an HVAC training classroom.
	City, State, Zip MIAMI LAKES, FL 33015		
	Phone #: _____ Cell #: _____		JOB COST \$121,822.00 AREA/LENGTH: 1731 SF/17 LF
	Email Address: _____		Residential ☐ Multi-Family ☒ Commercial ☐ Industrial ☐
CONTRACTOR INFORMATION	Company Name: Dade Construction Corp.	ARCHITECT/ ENGINEER	Code in Effect: _____
	Qualifier Name: Jonathan Cuesta		Occupancy: _____
	License # CGC 1520491		Construction Type: _____
	Address 12240 SW 131 Street		Flood Zone/B.F.E.: _____ F.F.E.: _____
	City, State, Zip Miami FL 33186		
	Phone #: (786).564.7623 Cell #: _____		Firm Name: _____
	Email Address: jonathan@dadeconstruction.com		A/E of record: _____
Permit Type -- Check only One		Change to Permit -- Check only One	
☒ Building ☐ Electrical ☐ Mechanical ☐ Plumbing/Gas ☐ Paving/Drainage ☐ Sign ☐ Roofing ☐ P/W		☐ Extension ☐ Renewal ☐ Revision ☐ Change Contractor ☐ Shop Drawing ☐ Cancellation	

Application is hereby made to obtain a permit to do 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, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, RE-ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

X [Signature] 7/9/26
Signature of Owner or Owner's Agent Date
Print Name of Owner or Owner's Agent LESTER DEBS

X [Signature] 7/3/26
Signature of Qualifier Date
Print Name of Qualifier Jonathan Cuesta

STATE OF Florida COUNTY OF Miami-Dade

Sworn to and subscribed before me this July 9th 2026

by Lester Debs

Personally known ☒ or I.D. ☐

Notary Public State of Florida
Beatriz Del Favero
My Commission HH 711356
Expires 11/12/2027

STATE OF Florida COUNTY OF Miami-Dade

Sworn to and subscribed before me this July 3rd 2026

by Jonathan Cuesta

Personally known ☒ or I.D. ☐

(SEAL)

NOTICE: In addition to the requirements of this permit, there may be additional deed restrictions enforced by the homeowner's associations that may be applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

NOTE: This application will be void if there are no reviews after six (6) months.



Rachel Osoria
Comm.: HH 431612
Expires: Aug. 9, 2027
Notary Public - State of Florida