NOTE: ALL SHEETS MUST BE REVIEWED

MIAMI-DADE COUNTY DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES
Herbert S. Saffir Permitting and Inspection Center
11805 SW 26th Street (Coral Way) • Miami, Florida 33175-2474 • (786) 315-2000

APPLICATION FOR MUNICIPAL PERMIT APPLICANTS THAT REQUIRE PLAN REVIEW FROM MIAMI-DADE FIRE RESCUE AND/OR ENVIRONMENTAL SERVICES

PROVIDE MUNICIPAL PROCESS NUMBER HERE

LOCATION OF IMPROVEMENTS

Job Address 16640 NW 86 Ct
Folio 32-2015-017-0390
Lot _____ Block _____
Subdivision _____ PBpg _____
Metes and bounds _____

CONTRACTOR INFORMATION

Contractor No. CGC1522923
Last four (4) digits of Qualifier No. C838
Contractor Name PA DEVELOPMENT & CONSTNG
Qualifier Name MARIA E ALCANTARA
Address 10540 SW 60 ST
City MIAMI State FL Zip 33173

TYPE OF IMPROVEMENTS

- [ ] New Construction on Vacant Land
- [ ] Alteration Interior
- [ ] Alteration Exterior
- [ ] Relocation of Structure
- [ ] Enclosure
- [ ] Repair
- [ ] Repair Due to Fire
- [ ] Demolish
- [ ] Shell Only
- [ ] Addition Attached
- [ ] Addition Detached
- [ ] Re-Roof
- [ ] Foundation Only
- [ ] Tent

Current use of property RESIDENTIAL
Description of Work SWIMMING POOL
Sq. Ft. 375 Units _____ Floors _____
Value of Work $ 57600

PERMIT TYPE

- [X] MBLD* Category RR
- [ ] MELE
- [ ] MPLU
- [ ] MLPG
- [ ] MMEC
- [ ] FIRE

REVIEW STATUS

- [ ] Chg. Contractor
- [ ] Re-Issue
- [ ] Re-Stamp
- [ ] Revision
- [ ] Not Applicable for Fire

PROPERTY OWNER'S INFO

Owner JORGE FERNANDEZ
Address 16640 NW 86 Ct
City MIAMI LAKES State FL Zip 33016
Phone 786 448 6579
Last four (4) digits of Owner's Social Security No. _____

PERMIT CONTACT

Name MARIA ESTELA ALCANTARA
Address 10540 SW 60 ST
City MIAMI State FL Zip 33173
Phone 786 853 0420

ARCHITECT / ENGINEER

Owner _____
Address _____
City _____ State ____ Zip _____
Phone _____

FIRE SPECIAL REQUEST PLAN REVIEW (SRI)

I am requesting a Special Request Plan Review (SRI) to be scheduled as soon as possible. There is a minimum charge of one-hour. Please contact the Fire Department for current rate.

1st Request: _____ Date: _____
2nd Request: _____ Date: _____
3rd Request: _____ Date: _____

If the applicant is a known named violator with: unpaid civil penalties; unpaid administrative costs of hearing; unpaid County investigative, enforcement, testing, or monitoring costs; or unpaid liens, any or all of which are owed to Miami-Dade County pursuant to the provisions of the Code of Miami-Dade County, Florida, a hold on the review may be placed on this application.