



6601 Main St • Miami Lakes, Florida, 33014

Office: (305) 827-4015 • Fax: (305) 558-9884

Website: www.miamilakes-fl.gov

Master Permit #: 20194133

Sub Permit #:

Revision #:

BUILDING PERMIT APPLICATION

Job Address: 8767 NW 158 ST

Unit #:

Folio #: 32- 2016-005- 1550 Owner-Builder: ☒

OWNER
INFORMATION

NAME: Lennar Homes

Address: 730 NW 107th Avenue 3rd Floor

City, State, Zip Miami, FL 33172

Phone #: 786-326-8380 Cell #: 305-970-1692

Email Address: marylevy1221@yahoo.com

Company Name: Lennar Homes

Qualifier Name: Phil Serrate

License # CGC062343

Address 730 NW 107th Avenue 3rd Floor

City, State, Zip Miami, FL 33172

Phone #: 305-970-1692 Cell #: 786-326-8380

Email Address: levycatpro@yahoo.com

LEGAL USE/
WORK

Current Use of Property: SFR

Job Description truss repair #T4REP

Lot⁵ Blk⁶

JOB COST \$ AREA/LENGTH: SF/LF

Residential ☒ Multi-Family ☐ Commercial ☐ Industrial ☐

Code in Effect:

Occupancy:

Construction Type:

Flood Zone/B.F.E.: F.F.E.:

Firm Name: ESA Architects

A/E of record: Ed Silva

License # 0011131

Address 8900 SW 117 Ave, #B107

City, State, Zip Miami, FL 33186

Phone #: 305-275-8383 Cell #: 786-326-8380

Email Address: anaros@bellsouth.net

ARCHITECT/
ENGINEER

CONTRACTOR
INFORMATION

Permit Type -- Check only One

☒ Building ☐ Electrical ☐ Mechanical ☐ Plumbing/Gas
☐ Paving/Drainage ☐ Sign ☐ Roofing ☐ P/W

Change to Permit -- Check only One

☐ 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 of Owner or Owner's Agent

Date 1/15/20

Phil Serrate

Print Name of Owner or Owner's Agent

X

Signature of Qualifier

Date 1/15/20

Phil Serrate

Print Name of Qualifier

STATE OF Florida COUNTY OF Dade

Sworn to and subscribed before me this 4th of January 20 20

by Phil Serrate

Personally known ☒ or I.D.



MARIA LEVY
MY COMMISSION # FF 988551
EXPIRES: September 3, 2020
Bonded Thru Notary Public Underwriters

STATE OF Florida COUNTY OF Dade

Sworn to and subscribed before me this 4th of January 20 20

by Phil Serrate

Personally known ☒ or I.D.



MARIA LEVY
MY COMMISSION # FF 988551
EXPIRES: September 3, 2020
Bonded Thru Notary Public Underwriters

NOTICE: In addition to the requirem

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.