MIAMI LAKES
Growing Beautifully

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: 7100 Miami Lakeway South
Unit #: —
Folio #: 32- 2023 068 0510 Owner-Builder: ☐

Master Permit #: BLR2025-2550 Sub Permit #: _____ Revision #: _____

OWNER INFORMATION

NAME: NATALY SANTOS
Address: 7100 MIAMI LAKEWAY SOUTH
City, State, Zip MIAMI, LAKES, FL 33014
Phone #: 786-493-4898 Cell #:
Email Address:

LEGAL USE/ WORK

Current Use of Property: SFR
Job Description NEW ROOF (METAL ROOF)

JOB COST $ 17,000.00 AREA/LENGTH: 1,760 SF/LF

Residential ☒ Multi-Family ☐ Commercial ☐ Industrial ☐
Code in Effect:
Occupancy:
Construction Type:
Flood Zone/B.F.E.: _____ F.F.E.: _____

CONTRACTOR INFORMATION

Company Name: SLAZAR CONSTRUCTION INC
Qualifier Name: ERIC SALAZAR
License # CCC1327963
Address 10381 SW 138 CT
City, State, Zip MIAMI, FL 33186.
Phone #: 305-4126355 Cell #:
Email Address: slazarco@gmail.com

ARCHITECT/ ENGINEER

Firm Name:
A/E of record:
License #
Address
City, State, Zip
Phone #: Cell #:
Email Address:

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 _____ 7/15/26
Signature of Owner or Owner's Agent — Date

Nataly Santos
Print Name of Owner or Owner's Agent

X _____ 07-22-26.
Signature of Qualifier — Date

Eric Salazar
Print Name of Qualifier

STATE OF Florida COUNTY OF Miami Dade

Sworn to and subscribed before me this 15 day of July 20 26
by _____
Personally known ☒ or I.D. _____

Notary Public State of Florida
Avelino Lapicio
My Commission HH 655291
Expires 5/6/2029

STATE OF Florida COUNTY OF Miami Dade

Sworn to and subscribed before me this 22 day of July 20 26
by Eric Salazar (SEAL)
Personally known ☐ or I.D. _____

Tatiana Margarita
Comm.: HH 591041
Expires: Oct. 23, 2028
Notary Public - State of Florida

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.