TRADE PERMIT APPLICATION CITY OF SANIBEL BUILDING DEPARTMENT

(If there is incomplete information, we will not process this permit. Print Only.)

JOB ADDRESS: ________________________________________________________________

STRAP NUMBER: _____________________________________________________________

OWNER’S NAME: ____________________________ OWNERS EMAIL (REQUIRED): ________________________

CONTRACTOR (SUB):
NAME
______________________________________________________________

PHONE # (______) __________________________ CONTRACTORS EMAIL (REQUIRED): ________________________

CONTRACTOR LICENSE NUMBER: _____________________________________________

SIGNATURE OF LICENSE HOLDER: ____________________________________________

PRINTED NAME OF LICENSE HOLDER: _________________________________________

Job Cost $ __________________________ OR ________________________________

Attached to Building Permit Number __________

ROOF/RE-ROOF  **For a re-roof only submit a structure insured value. $ __________________

Metal Sheets □ Modified □ Tile □ Asphalt Shingle □ Built Up □ Is tar kettle used? Yes ___ no ___

Underlayment - Manufacturer __________________________ Florida Product Approval # _______________________

Roofing - Manufacturer __________________________ Florida Product Approval # _______________________

**The Florida Product Approval along with the engineered plans must be on the job-site for any metal or tile roof.

AIR CONDITIONING  Number of Systems Changing ______

Condenser _____ Air Handler _____ Seer _____ K.W. _____ Tons _____ Pkg. Unit ______

ELECTRIC

For service change: # of amps _____ Description of Work _______________________________________

PLUMBING

Description of Work _______________________________________

# Of Fixtures ______ Hose Bibs ______ Water Heaters ______

THE BUILDING DEPARTMENT WEBSITE IS WWW.MYSANIBEL.COM, EMAIL TO sanibelbuild@mysanibel.com

BUILDING DEPARTMENT, 800 DUNLOP ROAD, SANIBEL, FL 33957, (239) 472-4555