DADE COUNTY BUILDING AND ZONING DEPARTMENT

APPLICATION FOR STRUCTURE AND/OR OCCUPANCY AND/OR USE PERMIT, subject to compliance with all FEDERAL, STATE AND COUNTY LAWS, rules and regulations.

Application is hereby made for approval of proposed use of premises described. Plans and specifications for such use are herewith submitted for the construction, placing, remodeling, altering and/or repairing of the structures described. Dade County assumes No responsibility for accuracy of, or results from the plans submitted.

DATE	PERMIT NO.	MAP NO.	ZONE	CU. FT. REQ'D	DEED REST.	CLERK
12-26-53	31189	II 16	RO-2	7600	—	JHG

Owner Joe Page
Address 444 NE 71st
Contractor Owner
Address —
Architect Owner
Address —
Former Use Vacant
Use and/or occupancy applied for Change to 2 Family Duplex Over Family Res.
Race to Occupy White
No. Families Two No. Bedrms. 2 Foundation Conc. Slab
Plumbing yes San. Toilet yes Structure C BS
Stories 1
Airports within 2 miles Opa Locka
Roof Tar & Gravel
Fees; Bldg. etc.
Inside Finish Plaster
Fla.Hotel Comm Pat No.
Occupancy 1 & 2
Cu. Cont. Our Est. Value Owners Est. Cost
Remarks No revision in floor layout except addition of sink. Original plans approved for Duplex

SUBDIVISION Acme Gulfair
Lot 15 Block 14
Location 2419 NW 99 St
Legal Des. Aban
Lot size 50 X 112 Sq. Ft.
Off. Hwy. Width 50 Ded. Width 50
Is Survey of Lot attached No
Will Surveyor's stakes be on Site when work is started yes
Plans Attached yes Plans Filed
Foundation Conc. Slab New Bldg. yes
Addition no
Remodel
Repair
Roof
Other
Total

PLOT PLAN

N

Zone & Occupancy approved by
Plans & Specs. approved by
House approved for addn. by
Special use approved by
Permit refused for reason of

No use will be made for any other structure based on the above premises as described, except as now approved, unless another permit is obtained therefor.

Signed Maintenance Page
Owner
BY
Agent
Witness J H Goochen

Dimensions to center line of all-Witness
Inspector

Zone Examiner 12-21-53

Miami Dade County Department of Regulatory And Economic Resources
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Examiner Date Time Stamp Dim. Trade Stamp Name
Fredy Tain 6/14/2016 2:22:56 PM
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METROPOLITAN DADE COUNTY
BUILDING AND ZONING
PROCESS NO. 10698
SECTION: 3-53-41 CLERK:
TYPE OR PRINT
BUILDING PERMIT APPLICATION
APPLICANT FILL INSIDE HEAVY LINES

PERMIT NO. 1316678
FOR OFFICE USE ONLY

OWNER Claudine Perry Phillips TEL. NO. OX6-1803
MAIL ADDRESS 2419 NW 99 ST
BUILDING CONTR. DAY LABOR
MAIL ADDRESS
ARCHITECT
ENGINEER

LEGAL DESCRIPTION OF JOB: LOT NO. 15 BLOCK NO. 14
SUBDIVISION ACME GULFAIR (4087)
OR
METES & BOUNDS
STREET ADDRESS OF JOB 2419 NW 99 ST
LOT SIZE SURVEY ATTACHED? LOT STAKED?
PRESENT USE: (VACANT, OR NO. OF BUILDINGS AND USE OF EACH.) RES

I HEREBY MAKE APPLICATION FOR PERMIT TO ERECT ☐ ALTER ☒ DEMOLISH ☐ ADD ☐
REPAIR ☐ REMOVE ☒ REMODEL ☐ 1 STORY RESIDENTIAL ☒ COMMERCIAL ☐
INDUST. ☐ STRUCTURE WITH CBS ☐ FRAME ☐ CONSTR. ☐ OTHER ☐

FOR THE FOLLOWING SPECIFIC USE AND OCCUPANCY
~~Single Family Residence~~
Homestead

ADDITIONAL ITEMS: WALL ☒ PAVING ☐ POOL ☐ OTHER
NO. OF LIVING UNITS NO. OF BEDROOMS NO. OF STORE UNITS RACE TO OCCUPY W HOTEL PERMIT NO.
WATER CO. NAME OR WELL Well SEWAGE CO. NAME OR SEPTIC TANK

I UNDERSTAND THAT SEPARATE PERMITS MUST BE OBTAINED FOR THE FOLLOWING ITEMS: ELECTRICAL, PLUMBING, SEPTIC TANK, WELL, HEATER, AIR CONDITIONING, SOAKAGE PITS, BOILERS, SIGNS, ELEVATORS, FENCE, AND THAT IN SIGNING THIS APPLICATION, I AM RESPONSIBLE FOR THE SUPERVISION AND COMPLETION OF THE CONSTRUCTION IN ACCORDANCE WITH THE PLANS AND SPECIFICATIONS AND FOR COMPLIANCE WITH ALL FEDERAL, STATE AND COUNTY LAWS APPLICABLE.

Claudine Perry Phillips
(SIGNATURE OF CONTRACTOR (QUALIFIER) OR OWNER - BUILDER OWN)
WITNESS (CLERK) DATE ACCEPTED:

OWNER-BUILDER CHECK ___ Y N ___ CHECKER ___
RED CARD ___ Y N ___ ELEV. SURV. REQUIRED ___ OR DRAINAGE PLAN CHECKED (PROJ.) ___ Y N ___ FLOOR ELEV. REQUIRED ___
YELLOW CARD ___ Y N ___ CONCRETE TESTS ___ Y N ___ HOW MANY ___
GREEN CARD ___ Y N ___ ARCH. SUPER ___ Y N ___ ENG. SUPER ___ Y N ___ OTHER ___
GROUP AND DIVISION ___ TYPE CONST. ___ CONTRACTOR QUAL. TO BUILD ___ Y N ___
PREFAB UNITS APPROVED ___ Y N ___ SHOP DWGS. SUBMITTED ___ Y N ___ SEAL REQUIRED ___ Y N ___
LOT % COVER. ___ CUBIC CONTENT ___ SQUARE FEET ___

THIS PERMIT INCLUDES: ESTIMATED VALUE ___ FEE ___
PRINC. BLDG. ☐ $ ___ $ ___
ACCESS BLDG. ☐ ___ ___
WALL ☐ ___ ___
POOL ___ GAL. ___ ___
PAVING ☐ ___ ___
OTHER Alterations 600.00 5.00
TOTAL BLDG. VALUE & FEES $ 600.00
OCCUPANCY PERMIT FEE
TOTAL AMOUNT DUE
ZONE RU2 CUBE REQUIRED 8700
OFFICIAL HWY. WIDTH 50
DEDICATED WIDTH 50
LOT DIMENS. ___ LOT AREA ___
DEED RESTR. AND RESOLUTIONS CHECKED ___ Y N ___
PROOF OF OWNERSHIP Deed CHECKED
VIOLATIONS CHECK: CHECKER ___ DATE ___
CONTR. CERT. NUMBER ___ CLASS ___ CHECKED
ISSUED BY: DATE

CONDITIONS UNDER WHICH APPROVED

	APPROVED	DATE	DISAPPROVED	DATE	REASONS	ATTACH "REQUIRE CARD"
ZONING						
STRUCTURAL						
PLUMBING						
ELECTRICAL						
MECHANICAL						

FORM NO. BZ11 INSPECTOR'S COPY 0272

310311 LONE GULFAIR