MIAMI-DADE COUNTY BUILDING DEPARTMENT
Permitting and Inspection Center
11805 SW 26th Street (Coral Way), • Miami, Florida 33175-2474 • (786) 315-2100

PERMIT APPLICATION

(Please fill out completely) [ ] SFBC [ ] FBC

B0040252 06

IF SUBSIDIARY OR REVISION PROVIDE MASTER PERMIT NUMBER HERE

LOCATION OF IMPROVEMENTS

Job Address 50 NE 17 ST
Folio
Lot Block
Subdivision PBpg
Metes and bounds

CONTRACTOR INFORMATION

Contractor No. CUC 026463
Qualifier S.S. [redacted]
Contractor Name MORTON ROOFING CORP
Qualifier Name JAMES C. MORTON
Address 7600 NW 74 AVE
City Miami State FL Zip 33166

TYPE OF IMPROVEMENTS

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

Current use of property WARE HOUSE
Description of Work REMOVE & REPLACE EXISTING ROOF SYSTEM w/ JENKS MANUFACTURING SYSTEM
Sq. Ft. 40000 Unit Floors
Value of Work
[ ] Chg. Contractor
[ ] Revision

PERMIT TYPE

[✓] Building Category* 92
[ ] Electrical
[ ] Mechanical
[ ] Plumbing
[ ] LPGX

CHANGE TO AN EXISTING PERMIT

[ ] Chg. Contractor
[ ] Re-Issue
[ ] Extension
[ ] Supplement
[ ] Reinspection

OWNER'S NAME

Owner TACO METALS
Address 50 NE 17 ST
City Miami State FL Zip 33132
Phone
Social Security - -

PERSON TO PICK UP PLANS

Name CHARLES BETALOCKI
Address 7600 NW 74 AVE
City MIAMI State FL Zip 33166
Phone 305 777 3611 CELL: 786 295 3604

ARCHITECT ENGINEER

Name N/A
Address
City State Zip
Phone

BONDING

Name N/A
Address
City State Zip
Phone

MORTGAGE LENDER

Name N/A
Address
City State Zip
Phone

*See reverse side for Building Category

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that sepaprate permits are quired for **ELECTRICAL, PLUMBING, SIGNS POOLS, MECHANICAL, WINDOW** and **ROOFING WORK** and there may be additional permits required for other governmental entities.

OWNER'S AFFIDAVIT: I certify that all of the foregoing information is accurate.

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.

Signature of Owner or Owner's Agent
PRINT NAME EARL STADSTARK - DIV. MANAGER
STATE OF FLORIDA COUNTY OF MIAMI-DADE
Sworn to and subscribed before me this 23 day of October, 2003
by
(SEAL)
Personally known
or Produced Identification
Type of Identification Produced
Barbara Zacarias Commission # DD 000798 Expires March 31, 2005 Bonded Thru Atlantic Bonding Co., Inc.
Barbara Zacarias

Signature of Qualifier
PRINT NAME James C. Morton
Sworn to and subscribed before me this 10th day of November, 2003
by Ada M. Gonzalez
(SEAL)
Personally known ✓
or Produced Identification
Type of Identification Produced
ADA M. GONZALEZ MY COMMISSION # DD 198180 EXPIRES: February 25, 2007 Bonded Thru Notary Public Underwriters

123.01-52 2/02

15