TOWN OF HAVERHILL

4585 Charlotte Street Haverhill, Florida 33417 (561) 689-0370 Ext. 2 townofhaverhill-fl.gov

DEVISION FORM

Permit Application No: Date:							
Contractor's Company Name:							
Cell Phone: Email:							
Permit Address:							
Attached are the following items (please describe each item submitted and all changes included):							
ITEM #	COPIES	DESCRIPTION					
1							
2							
3							
4							
5							
6							
Use additional form if more than six items.							
Attached, please find the following items for review (check all that apply): Plumbing As-Built Fire Plumbing Building/Structural Landscape Zoning Drainage/Civil Mechanical Other Electrical Changes are identified by: Other Triangles Clouds Other Items submitted are in response to: Plumbing Drainage/Civil Building/Zoning/Engineering Field Revision - (revised drawings/plans on an issued permit) Plumbing							
🗌 Incre	ase in Val	ue of Work \$	(Balance may be due	after plan review has been completed.)			
Please attach updated scope of work along with plans and other related paperwork. Please submit 2 sets of plans/paperwork for building/structural/trades/zoning and/or 3 sets if revision impacts drainage, civil, and/or landscaping.							
Applicant acknowledges that copies of revisions will need to be submitted to the Palm Beach County Health Department, Department of Environmental Protection, Florida Department of Transportation, Palm Beach County Building & Zoning Impact Fee Department and/or any other entities that may be impacted. Approvals may be required prior to submitting this revision and/or resubmittal. Any incomplete portions of this document and submittals may result in additional comments and/or rejection of application.							
Applicant's Signature			Applicant's Print N	ame Date			
	BUILDING DEPARTMENT USE ONLY						

Fee:	Date Paid:	Payment Type:	Initials:
Zoning Official:	Date:	Building Official:	Date:
Engineering Official: _	Date:		