



DATE: \_\_\_\_\_

Palm Beach County  
Planning, Zoning and Building Department  
Building Division

PERMIT CENTER  
PERMIT RENEWAL REQUEST

**TO BE FILLED OUT BY OWNER OR CONTRACTOR**

\*IF THE CONTRACTOR IS DIFFERENT FROM THE ORIGINAL CONTRACTOR, A CHANGE OF CONTRACTOR FORM MUST ACCOMPANY THIS FORM.

NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

**BUILDING PERMIT # OR NONRESIDENTIAL FARM BUILDING FLOODPLAIN MANAGEMENT REVIEW**

APPLICATION #: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

\_\_\_\_\_ CONTACT PHONE NUMBER: \_\_\_\_\_

EMAIL: \_\_\_\_\_  Commercial  Residential

Original Permit Scope: \_\_\_\_\_

**Permit Applicant Signature**

I AM AUTHORIZED TO SUBMIT THIS RENEWAL REQUEST ON BEHALF OF THE PROPERTY OWNER OR CONTRACTOR OF RECORD. I UNDERSTAND THAT A NON-REFUNDABLE \$75 FEE (REQUIRED UPON SUBMITTAL) WILL BE CHARGED FOR THIS RENEWAL IN ACCORDANCE WITH THE PALM BEACH COUNTY CONSTRUCTION PERMIT FEE SCHEDULE. THE TOTAL RENEWAL COSTS MAY INCLUDE ADDITIONAL IMPACT FEES, BUILDING REVIEW FEES OR ANY AND ALL OTHER APPLICABLE FEES.

PURSUANT TO FLORIDA BUILDING CODE (FBC) SECTION 105.5, PERMITS THAT REMAIN INACTIVE OR EXPIRED FOR MORE THAN SIX MONTHS SHALL LOSE ALL RIGHTS VESTED IN THE PERMIT PURSUANT TO FBC SECTION 105.4.1.2.

**SECTION REVIEW**

Inactive  Expired  Status Inspection  Finals Only

Number of Previous Renewals: \_\_\_\_\_ Number of Days Inactive: \_\_\_\_\_

Inspection History: \_\_\_\_\_

Building Official: \_\_\_\_\_ Plans Examiner: \_\_\_\_\_

Permit Technician: \_\_\_\_\_ Other: \_\_\_\_\_

Comments: \_\_\_\_\_

**OFFICE USE ONLY**

RESEARCH FEE: \$ \_\_\_\_\_

RENEWAL FEE: \$ 75.00

IMPACT FEES: \$ \_\_\_\_\_

BUILDING PERMIT FEES: \$ \_\_\_\_\_

LANDSCAPE FEE: \$ \_\_\_\_\_

TOTAL AMOUNT DUE: \$ \_\_\_\_\_