NOC BROWARD COUNTY UNITORNA	13 /1PC, / CONT	
Solos Colors Tolling	BUILDING PERMIT AI	PPLICATION
Select One Trade: Building Electrical Application Number:	Plumbing Mechanic	al Other
Job Address: 10661 NW 12 MNR		plication Date: FOR OFFICE USE
Tay Folio No : 4044 24 40 0500 Ft		y: PLANTATION
Building Use: Vac 1 18 0560 Flood Zn: BFE:		Job Value: \$190°
Building Use: Residential Control	Construction Type:	Occupancy Group:
	Proposed Used:	
New Addition Promise 13 Wholow	12 and 2 doors	011mact
Description of Work: Repair Alteration De Legal Description: MINTO PLANTATION 4 425 25 P.	molition Revision (Other:
Legal Description: MINTO PLANTATION-1 135-35 B POR PAR A-A DESC AS COM	M CENTER LINE NW 106 AVE & NW 12 ST, NE	E 942.57 TO POB, NE 93.02 TO P/CARRICHMent
Property Owner: POWELL, DENZIL ROY Owner's Address: 40004 NWW.	Phone: 305-467-6505 Ema	ail:
Owner's Address: 10661 NW 12 MNR	City: PLANTATIC	ON State: FL Zip: 33322
Contracting Co.: BNT SERVICES INC	Phone: 954-233-0126 Ema	ail: PERMITTING@BNTIMPACT.C
Company Address: 1313 NW 65 PLACE SUITE 1		RDALE State: FL Zip: 33309
Qualifier's Name: TOM ZESCHKE		ense Number: SCC131151154
Architect/Engineer's Name:	Phone: Ema	il:
Architect/Engineer's Address:		
Ronding Componi	City:	State: Zip:
4 Bonding Company Address:	MAY 2 7 2020	
Fee Simple Titleholder's none (if II)	City:	State: Zip:
Fee Simple Titleholder's Address (If other than owner):	City:	State: Zip:
		State: Zip:
Mortgage Lender's Name: Mortgage Lender's Address:		
	City:	State: Zip:
Application is hereby made to obtain a permit to do the work and commenced prior to the issuance of a permit and that all war	d installations as indicated. I ce	ertify that no work or installation has
commenced prior to the issuance of a permit and that all work construction in this jurisdiction. I understand that a separate SIGNS, WELLS POOLS FURNACES BOILERS HEATERS	K Will he northroad to most the	L1 1 1 0
SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS,	TANKS, and AIR CONDITION	FRS etc.
OWNER'S AFFIDAVIT: I certify that all the foregoing informatio	n is accurate and that all work	(Will be done in compliance with "
Tribation and regulating constitution and zonling.		
WARNING TO OWNER: YOUR FAILURE TO RECORD A	NOTICE OF COMMENCEM	ENT MAY RESULT IN VOLLE
TATION TWICE FOR IMPROVEMENTS TO YOUR PR	OPERTY A NOTICE OF A	
WESSINGED WIND LOSIED ON THE JOB 211F RELOKE	THE FIRST INSPECTION	IE VOIL INTEND TO OPPAR
FINANCING, CONSULT WITH YOUR LENDER OR RECORDING YOUR NOTICE OF COMMENCEMENT.	AN ATTORNEY BEFORE	COMMENCING WORK OR
STATE OF FLORIDA Signature of Property Owner or Agent	X	
COUNTY OF BROWARD	STATE OF FLORIDA	Signature of Qualifier
	COUNTY OF BROWARD	
Swinto (or affirmed) and subscribed before me this 2 (a day of by	Sworn to (or affirmed) and subsc	
DenzilPourell -	Thomas Joseph	by
ALEXANDER HUYNH (Type / Print Property Owner or Agent Name)	(Type / Print Qualifier's Name)	ALEXANDER HUYNH
Commission # GG 354059 / LM	111	Commission # GG 354059 Expires Nevember 44 2000
Expires Novem Notary Services Bonded Thru Budget Notary Services Notary Name Expires Novem Notary Name	NOTARY'S SIGNATURE as to Qualifi	Ter's Signature Buddet Hiru Budget Notary Services
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Notary Name /Print Tybe or Ste	aman Makan da Manan
Personally Known or Produced Identification (Print, Type or Stamp Notary's Name)	Personally Known	amp Notary's Name) or Produced Identification
Type of Identification Produced // // //////////////////////////////	Type of Identification Produced _	
APPROVED BY: FOR OFFICE USE Permit Officer Issue	a Data: FOR OFFICE LISE (Code in Effect: FOR OFFICE USE
A jurisdiction may use a supplemental page requesting additi	e Date. I OI OI I I I I I I I	
Note II any development work or december the Force of a	ional information and citing o	ther conditions places in a dis-
Note: If any development work as described in FS 380.04 Sec. 2 a-g to the issuance of a building permit.	ional information and citing o	ther conditions places in a dis-