CITY OF TALLAHASSEE — MULTIPLE BUILDING PERMIT APPLICATION

The Multiple Building Permit Application is to be used when applying for multiple building permits associated to a single set of plans. Please note that the first building application (referenced permit) must be applied for online at https://cwpll.talgov.com/TallahasseePortal/. Applications are to be uploaded within the Affidavits and Supporting Docs folder as a single page document and named MultiBldg_.pdf., the _ being the Building number, example MultiBldg2.pdf, MultiBldg3.pdf.

Application Date: _____ **Referenced Permit Number TCB # :** _____

PROJECT NAME:_____ Bldg # _____

LOCATION: _____ Zip Code: _____Unit #(s) _____
Street Number *Street Name*

PARCEL ID # ___ ___-- ___ ___--___ ___--___ ___ ___-- ___ ___ ___ ___ Subdivision _____

If the People information is different than on the referenced permit, please enter the correct information below, where applicable.

Property Owner:_____ Phone #:_____

Owner Email: (print clearly):_____ Fax #: _____

Mailing Address:_____
Street Address *City* *State* *Zip*

Contractor Name:_____Contact Name: _____

Contractor's License No.: _____Phone #:_____

Contractor Email: (print clearly):_____Fax #: _____

Mailing Address: _____
Street Address *City* *State* *Zip*

Architect / Engineer: _____Phone #:_____

A/E Email (print clearly):_____Fax #: _____

Sediment & Erosion Contact Name: _____ DEP#: _____ Phone #:_____

EXISTING / PREVIOUS USE:_____**PROPOSED USE:**_____

Scope of Work:_____

DESCRIPTION OF IMPROVEMENT

01 ☐ New: SqFt_____ 03 ☐ Alteration 10 ☐ Pool / Pool Reliner

02 ☐ Add: SqFt_____ 09 ☐ Foundation Only 11 ☐ Retaining Wall(s) #_____

TOTAL COST of IMPROVEMENT:

$ _____

NEW RESIDENTIAL DRIVEWAY CONNECTIONS: _____

BUILDING CLASS		BUILDING CLASS	
01	☐ One Family Detached	12	☐ One Family Attached (___# of attached units)
02	☐ Duplex	03	☐ Triplex (**residential site plan review of $88.00 is required**)
04	☐ Quadriplex	19	☐ Parking Garage
05	☐ Multi-Family _____units	20	☐ Service Station / Repair
07	☐ Hotel / Motel _____units	21	☐ Hospital / Institutional
08	☐ Dormitory _____units	22	☐ Office Building
09	☐ Warehouse _____units	24	☐ Public Bldg / Utility
10	☐ Non – Bldg Structure	25	☐ Educational
13	☐ Subdivision	26	☐ Stores / Mercantile
15	☐ Business	28	☐ Day Care
16	☐ Amusement / Recreation	30	☐ Multi Use
17	☐ Church / other Religious	32	☐ Accessory Structure
18	☐ Industrial	37	☐ Restaurant
___	☐ **OTHER** _____	39	☐ Cellular Towers

WATER & SEWER ACCOUNT & TAPS
(Required for NEW CONSTRUCTION)

Use Master Utility Account # (1 bill for multiple addresses) ☐

OR Create A New Utility Account # (1 bill for each address) ☐

Ship work orders at permit issuance (need water within 2 weeks) ☐

OR DELAY & ship work orders until: (indicate date): _____

SHELL PERMIT:	**NO:** ☐	**YES:** ☐
CHANGE OF USE:	**NO:** ☐	**YES:** ☐
PROPERTY IN FLOOD ZONE:	**NO:** ☐	**YES:** ☐
HAZARDOUS MATERIALS:	**NO:** ☐	**YES:** ☐

☐ **Sub Trades involved with this project:** ☐ HVAC (Mech) ☐ ELECTRICAL ☐ PLUMBING ☐ FIRE ☐ ROOFING ☐ GAS