



**PAVER**  
**PERMIT APPLICATION**

**CITY OF WINTER SPRINGS**  
BUILDING AND PERMITTING  
1126 East State Road 434  
WINTER SPRINGS, FL. 32708  
PHONE : 407-327-1800  
FAX : 407-327-4784

Permit #:

Date:

**City Of Winter Springs**  
**Inspection Line**  
407-327-7596  
**Online Inspection Request**  
[www.winterspringsfl.org](http://www.winterspringsfl.org)

Owner's Name:

Phone:

Property Address:

Winter Springs, FL 32708

Company Name:

Phone:

Mailing Address:

Fax:

Pavers will be laid at the following location(s):

E-mail:

Contract Valuation:

X \_\_\_\_\_

Owner /Agent Signature

STATE OF FLORIDA, COUNTY OF SEMINOLE

The foregoing instrument was acknowledged

Before me this \_\_\_\_\_ day of \_\_\_\_\_

20\_\_\_\_ By \_\_\_\_\_

who is personally known to me/or has produced

\_\_\_\_\_ as identification and who (did not) take an oath.

Notary \_\_\_\_\_

(seal)

X \_\_\_\_\_

Contractor Signature

STATE OF FLORIDA, COUNTY OF SEMINOLE

The foregoing instrument was acknowledged

Before me this \_\_\_\_\_ day of \_\_\_\_\_

20\_\_\_\_ By \_\_\_\_\_

who is personally known to me/or has produced

\_\_\_\_\_ as identification and who (did not) take an oath.

Notary \_\_\_\_\_

(seal)

The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit; understands that the issuance of this permit creates no legal liability; express or implied, of the Department, municipality, Agency or Inspector; and certifies that all of the above information is accurate.

**PERMIT EXPIRATION:**Permit expires 180 days from date issued unless otherwise noted below or governed by law.

**WARNING TO OWNER:**YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

## Paver Permit Checklist

Paver permit application completed in full with:

\_\_\_\_\_ Property Owner's Name

\_\_\_\_\_ Property Address

\_\_\_\_\_ Contract Value

\_\_\_\_\_ Description of the work to be done

\_\_\_\_\_ The application must be signed by the property owner and notarized OR a signed contract.

\_\_\_\_\_ Two copies of survey with the proposed location where the pavers will be added.

\_\_\_\_\_ A copy of the Homeowner's Association approval if applicable.

\_\_\_\_\_ A copy of the color chart and design if available.