



City of Pompano Beach
Department of Development Services
Building Inspections Division

100 W. Atlantic Blvd Pompano Beach, FL 33060
Phone: 954.786.4669 Fax: 954.786.4677

Permit Maintenance Form

Permit No(s): Date:
Job Address: Pompano Beach, FL (Zip Code)
Owner's | Agent's Name: Phone No:
Owner's Address: City: State: (Zip Code)
Owner's Email:
Contractor's Name: Phone No:
Contractor's Address: City: State: (Zip Code)
Contractor's Email Address:

Description of Work:

Select Applicable Trade: Building Mechanical Electrical Plumbing Other

Select Inspection Time: (8:00am-12:00pm Mon Tues Wed Thur) or (1:00pm-5:00pm Mon Tues Wed Thur)

- Request to Hold (HD): Work covered under the approved permit has commenced but the property owner or permit holder are unable or unwilling to complete the work.
Request to Supersede (SS): Work covered under the approved permit and/or permit application has been performed under permit number.
Request to Withdraw (WD): Work covered under the approved permit has not commenced or has been demolished.
Request to Void (VD): Work covered under the permit application has not commenced and the application has not been approved.

I/We certify the above information provided is a true and accurate representation of the facts and agree to hold the City of Pompano Beach, its commissioners, officers, employees and other agents harmless and to relieve them of all responsibility or liability for any legal action, damage or expense, including, but not limited to, attorney's fees resulting from the processing of any of the foregoing requests.

I/We further acknowledge that compliance with the Code is the responsibility of the property owner and the permit holder per Code Section 105.4.1.2 which also provides that safety to persons and materials during construction operations is the responsibility of the permit holder as set forth in Chapter 33 of The Florida Building Code, Buildings.

Office Use Only
Work Verification Inspection Results (if applicable):
Approved Rejected
Signature of Building Official or Authorized Representative: Date:

X Signature of Property Owner or Agent

STATE OF
COUNTY OF

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization this day of 20 by:

X Signature of Qualifier

STATE OF
COUNTY OF

The foregoing instrument was acknowledged before me, by means of physical presence or online notarization this day of 20 by:



(Type/Print Name as property Owner or Agent)
who is Personally Known or Produced Identification
Type of Identification Produced

(NOTARY PUBLIC SIGNATURE for Owner or Agent Name)

(Name of Acknowledger Typed, Printed or Stamped)

(Type/Print Name as Qualifier of Contractor)
who is Personally Known or Produced Identification
Type of Identification Produced

(NOTARY PUBLIC SIGNATURE for Qualifier)

(Name of Acknowledger Typed, Printed or Stamped)

