



Growth and Resource Management
Building and Code Administration
123 W. Indiana Ave., DeLand, FL. 32720
(386) 736-5929
Email: Permitctr@volusia.org

Pre-Application Review

Residential: ____ Commercial: ____

New Structure: ____ Replacement Structure: ____ After the Fact Permit: ____ Change of Use: ____

PROPERTY AND OWNER INFORMATION

Job Address: _____ Parcel #: _____

Owner Name: _____ Phone #: _____

Owner's Full Address: _____

Email: _____ Cell Phone#: _____

APPLICANT INFORMATION

Contractor: ____ Design Professional: ____ Owner Builder: ____ License #: _____

License Holder/Agent: _____ Licensee's Phone#: _____

Email Address: _____ Company Name: _____

Company Address: _____

Company Phone#: _____

TYPE OF PROJECT

WORK TYPE: New work: ____ Addition: ____ Alteration: ____ Renovation/Repair: ____ Replacement: ____

RESIDENTIAL: DCA Modular: ____ Duplex: ____ Mobile Home: ____ Park Model/RV Perm Setup: ____ Townhouse: ____

Single Family Residence: ____ Other: _____

Residential Accessory Structure: Accessory Dwelling Unit: ____ Barn: ____ Deck: ____ Dock: ____ Fence: ____ Fire: ____

Sprinkler/Alarm: ____ Foundation: ____ Garage/Carport: ____ Patio/Covered Patio: ____ Pool: ____ Pool Encl: ____ Shed: ____ Screen

Room /Porch: ____ Siding: ____ Soffit/Fascia: ____ Windows/Doors: ____

Other: _____

COMMERCIAL: Description of work proposed: _____

SCOPE OF WORK

Detailed description of all work being proposed:

PROJECT INFORMATION: # of Dwellings: ____ # of Stories: ____ Ground Floor Habitable: ____ Existing Residence on Site ____ Permanent Structure ____ Primary Use Area sq ft: ____ Garage Area sq ft: ____ Other Area sq ft: ____ Total sq ft: ____ Lowest floor level will be 12" above adjacent road: ____
Property Access: Gate Code ____ Notes: _____

CHANGE OF USE/ OCCUPANCY: Yes ____ No ____

FIRE: (Commercial Only) NFPA72 Fire Alarm: ____ Hood System: ____ Fire Suppression/Ansul Required: ____
Underground Fire Line: ____ Fire Sprinklers Provided: ____ # Sprinkler Heads: ____ Fire Alarm Provided: ____
Modify/Replace Fire Protection System: ____ Standpipes: ____ Declared Fire Alarm Cost: _____
Descriptions of Work: _____

TREE CLEARING INFORMATION: Lot Size sq ft: ____ Frontage: ____ ft Depth: ____ ft
Tree Survey and Site Plan required to show area to be cleared & location of tree protection barrier.

USE PERMIT INFORMATION: Connected to Road Type: City: ____ County: ____ Private: ____ State: ____
Site Plan is required to show width of driveway at property line and edge of road.

UTILITY INFORMATION: Water Source: ____ Water Company Name: ____
Sewer Source: ____ Sewer Company Name: _____

PRE-APPLICATION SUBMISSION STATEMENT

Under penalty of perjury, I declare that all the information contained in this application is true and correct. I agree to allow County staff to access the property for inspection and review purposes.

I have read and understand the above statement.

Applicant Printed Name: _____
Applicant Signature: _____ Date: _____
Identified as: ____ Owner/ Builder ____ Contractor

STATE OF FLORIDA, COUNTY OF VOLUSIA

The foregoing instrument was acknowledged before me this ____ day of _____ 20____, by _____
(Full name of person acknowledging.)

Personally known: _____
Produced Identification: _____
Type of Identification Produced: _____

Signature of Notary Public