**Contact Information for Permit Application**

**First Name** (print clearly)  
**Last Name** (print clearly)

**Mobile Phone**  
**Office/Home Phone**

**Email** (required so you can be notified on the status of your plans)

**Comments**

*If you are submitting a municipal plan, please provide the municipal process number(s) and ensure the municipal application is in the office set of plans.*

**Plans** (check all that apply)

*Please indicate if plans qualify for the following expedited plan reviews:*

- [ ] Gov’t Project/Dept____________________  
- [ ] Affordable/Workforce Housing*  
- [ ] Economic Significance*  
- [ ] Pace Project*  
- [ ] Green Bldg*(new construction only)  
- [ ] Concierge

*Pursuant to Ordinance 99-140; Ordinance 05-115; and Ordinance 08-51. Project may have additional requirements.*

**Requested Plan Reviews** (check all that apply for rework only)

- [ ] All  
- [ ] Roof  
- [ ] Sign  
- [ ] Permit Affidavit Check  
- [ ] Short Term Event Affidavit

**Optional Plan Reviews** (check all that apply)

- [ ] Bldg  
- [ ] Elec  
- [ ] Mech  
- [ ] Plum  
- [ ] Stru

**Opr Derm Initial Reviews** (check all that apply)

- [ ] Derm Core  
- [ ] Derm Specialty (You will be notified after core review is complete for additional fees)

**Opr Derm Rework** (Opr for specialty only available at PIC)

- [ ] Tree  
- [ ] Grease  
- [ ] Asbestos  
- [ ] Coastal  
- [ ] Air

- [ ] Tanks  
- [ ] Industrial  
- [ ] Wetland  
- [ ] Pretreatment  
- [ ] Core

- [ ] Flood  
- [ ] Paving & Drainage

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**For Office Use Only**

*To be completed by Permit and Occupancy Representative or Plans Processing Specialist*

**Application Date**  
**Clerk Name**  
**Arrival Time**

**Process Number**  
**Process Number**  
**Process Number**

- [ ] Re-Issue  
- [ ] Plan Revision  
- [ ] Rework  
- [ ] Shop Drawing

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