



TOWN OF HILLIARD  
APPLICATION – BUILDING PERMIT  
15859 W CR 108 Hilliard, FL 32046

Phone: 904-675-6171 | [buildingpermits@townofhilliard.com](mailto:buildingpermits@townofhilliard.com)

**For Staff Only**

File #: \_\_\_\_\_

Application Fee: \$ \_\_\_\_\_

Payment Processed By: \_\_\_\_\_

## Applicant Information

Applicant Name: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Mailing Address: \_\_\_\_\_  
Street City State Zip Code

Property Address: \_\_\_\_\_  
Street City State Zip Code

Parcel ID or Tax ID Number: \_\_\_\_\_

\*If the applicant is not the property owner, an owner's affidavit must be included.

## Contractor Information

*Provide hard copies of all insurance documentation naming the Town of Hilliard as certificate holders.*

Contractor Name: \_\_\_\_\_

License Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

General Liability Policy Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Worker's Compensation Policy Number: \_\_\_\_\_ Exp. Date: \_\_\_\_\_

## Project Details

Proposed Structure Type: ☐ Residential ☐ Commercial ☐ Other (please specify): \_\_\_\_\_

Scope of Work (Check all that apply):

☐ Addition ☐ Alteration ☐ Repair ☐ Move On

☐ Detached Structure ☐ Pool ☐ Sign ☐ Electrical

☐ Mechanical ☐ Plumbing ☐ Change of Use ☐ Remove

☐ Other (please specify): \_\_\_\_\_

Brief Description of Work: \_\_\_\_\_

Value of Job: \_\_\_\_\_ Zoning Classification: \_\_\_\_\_

### IMPORTANT NOTICE

- This form is not a permit.
- The information provided will be used to prepare the official permit document.
- Original signatures will be required on final permit.
- Please allow adequate time for processing.



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### PERMITTING PURPOSES ONLY

Owner's Affidavit: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction zoning.

WARNING TO OWNER: Your failure to record a notice of commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your notice of commencement. A notice of commencement must be recorded for construction over \$5000 and posted on the job site.

\_\_\_\_\_  
Property Owner Printed                      Property Owner Signature                      Date

Before me, \_\_\_\_\_, personally appeared on this day of \_\_\_\_\_, 20\_\_\_\_\_  
and is personally known to me or has presented \_\_\_\_\_ as  
identification and who did (did not) take an oath.

\_\_\_\_\_  
Notary Public Name Printed                      Notary Public Signature                      Date

Contractor Affidavit: I certify that all the forgoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

\_\_\_\_\_  
Contractor Name Printed                      Contractor Signature                      Date

Before me, \_\_\_\_\_, personally appeared on this day of \_\_\_\_\_, 20\_\_\_\_\_  
and is personally known to me or has presented \_\_\_\_\_ as  
identification and who did (did not) take an oath.

\_\_\_\_\_  
Notary Public Name Printed                      Notary Public Signature                      Date