



REPAINT PERMIT APPLICATION



Community & Economic Development
Planning & Redevelopment
2200 Civic Center Place, Miramar, FL 33025
Tel: (954) 602-3264
www.miramarfl.gov



UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING APPLICATION FOR A REPAINT PERMIT AND ALL ATTACHMENTS TO THE APPLICATION AND THAT THE FACTS STATED IN IT ARE TRUE.

INITIALS

APPLICATION CHECKLIST

Requirement		✓
1	Completed, signed and notarized application	
2	Color chips and/or materials to be used (Refer to Section 5)	
3	Option 1: Site plan/Aerial view of subject site with highlighted buildings to be painted and proposed paint pattern	
	Option 2: Photographs/Renderings of the subject site with proposed color swatches on building face	

Application No.
Application Received Date

PLEASE PRINT OR TYPE ALL INFORMATION. If the Property Owner is also the Applicant, then only Section 2 is required to be completed. If the Applicant and Property Owner are different, both Sections 1 & 2 must be completed.

1 APPLICANT INFORMATION

Name:	
E-mail:	Phone No.:
Address:	

2 PROPERTY OWNERSHIP INFORMATION

Name:	Signature:
E-mail:	Phone No.:
Address:	

NOTARIZATION

STATE OF FLORIDA/COUNTY OF _____

The foregoing instrument was acknowledged before me this ____ day of _____, _____, by _____

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR Produced Identification _____ Type of Identification Produced _____

3	GENERAL INFORMATION
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Property Parcel ID Number:	5	1									
Property Address:											
Is the request a result of Code Enforcement Action? (If so, please indicate the Code Case No. on the line below) YES / NO											
Code Enforcement Case No.:											
Will your organization be repainting with service from a contractor? (If so, please complete Section 4 below) YES / NO											

4	CONTRACTOR INFORMATION
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Company Name:	
Company Address:	
License No.:	
Phone No.:	E-mail:

5	PAINT DETAIL & ADDITIONAL INFORMATION
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- Please complete the Paint Detail form on Page 3 and submit with this application package.
- A Repainting Permit Application Fee of \$53.50 is due before Issuance of Permit.
- The scope of work must be completed within 180 days of the Issued Permit Date. If work has not been completed by the expiration date, the Applicant may request a 30 day extension. Once work has been completed, the Applicant must schedule a Final Zoning Inspection.

OFFICE USE ONLY	RESULTS	OFFICE USE ONLY
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Results:	REQUEST FOR APPROVAL GRANTED	REQUEST DENIED
Permit Reviewer:	Signature:	
Condition(s) of Approval:		
Reason for Denial:		
Repaint Permit Expires:		

PRIMARY WALLS & COLUMNS (Base Color)	FASCIA
MANUFACTURER	MANUFACTURER
COLOR CODE	COLOR CODE
COLOR NAME	COLOR NAME
FINISH/TEXTURE	FINISH/TEXTURE
<p align="center">ATTACH SAMPLE</p> <p align="center">PLACE COLOR CHIP HERE</p>	<p align="center">ATTACH SAMPLE</p> <p align="center">PLACE COLOR CHIP HERE</p>
SECONDARY WALLS & COLUMNS (Accent or Trim Color)	SECONDARY WALLS & COLUMNS (Accent or Trim Color)
MANUFACTURER	MANUFACTURER
COLOR CODE	COLOR CODE
COLOR NAME	COLOR NAME
FINISH/TEXTURE	FINISH/TEXTURE
<p align="center">ATTACH SAMPLE</p> <p align="center">PLACE COLOR CHIP HERE</p>	<p align="center">ATTACH SAMPLE</p> <p align="center">PLACE COLOR CHIP HERE</p>