



**CITY OF FORT PIERCE, FLORIDA
BUILDING DEPARTMENT
APPLICATION FOR BUILDING PERMIT**
(772) 467-3529 or 467-3724 FAX (772) 467-3849

Permit # 16-884
FBC 2014 (5th edition)
PIN # 669636

*Property Address 609 Orange Ave *Date 3/25/16 *# of plans submitted _____ *# of CD's submitted _____
Parcel ID# 2110-701-0032-000-0 Phone # (772) 633-0740 Fax # (772) 465-8448
(Located on your tax bill) Email Address mike.miley@amerigas.com Cell # (772) 633-0740
*Owner Name Security Food Ministry LLC *Owner Address 90 Almeria Ave Coral Gables, FL 33134

Type of permit Repair *Valuation \$ 850.00
*Description of Work Set aboveground Tank and connect to the existing gas line & equipment
Architect: _____ Phone() _____ Fax() _____
Email Address _____
Engineer: _____ Phone() _____ Fax() _____
Email Address _____

*CONTRACTOR/APPLICANT INFORMATION: City License # _____ State License # 02707
Company Name AmeriGas Qualifier Larry Licaster
Address 3301 Alexander Ave City/State Fort Pierce FL Zip 34982
Phone # (772) 465-7886 Fax # (772) 465-8448 Cell # (772) 633-0740
Email Address mike.miley@amerigas.com

SUBCONTRACTORS: See Subcontractor Verification Sheet. It may be Required to accompany this application
Occupancy _____ Construction Type _____ # of Units _____ # of Stories _____
Sq. Ft. Conditioned Space _____ Total Sq. Ft. _____

Is the property located in a Special Flood Hazard Area (floodplain) per the current Flood Insurance Rate Map (FIRM)
 Yes No KC

If Yes, the applicant must include certified elevation information on a FEMA NFIP Elevation Certificate.

I understand that no building may be occupied until a Certificate of Occupancy/Certificate of Completion has been issued after final inspection by the Building Department and full compliance with the building code, city and state ordinances and other applicable rules and regulations. I am also verifying that all sets of plans submitted are identical.
Signature of Applicant _____ Signature of Property Owner _____

State of Florida, County of St Lucie
Affirmed to and subscribed before me this 25
March, 2016, by Larry Licaster
personally known to me or who has produced
as identification.
Notary Signature: Michael Miley
Notary (print name) Michael Miley

State of Florida, County of _____
Affirmed to and subscribed before me this _____
20____, by _____
personally known to me or who has produced
as identification.
Notary Signature: _____
Notary (print name) _____



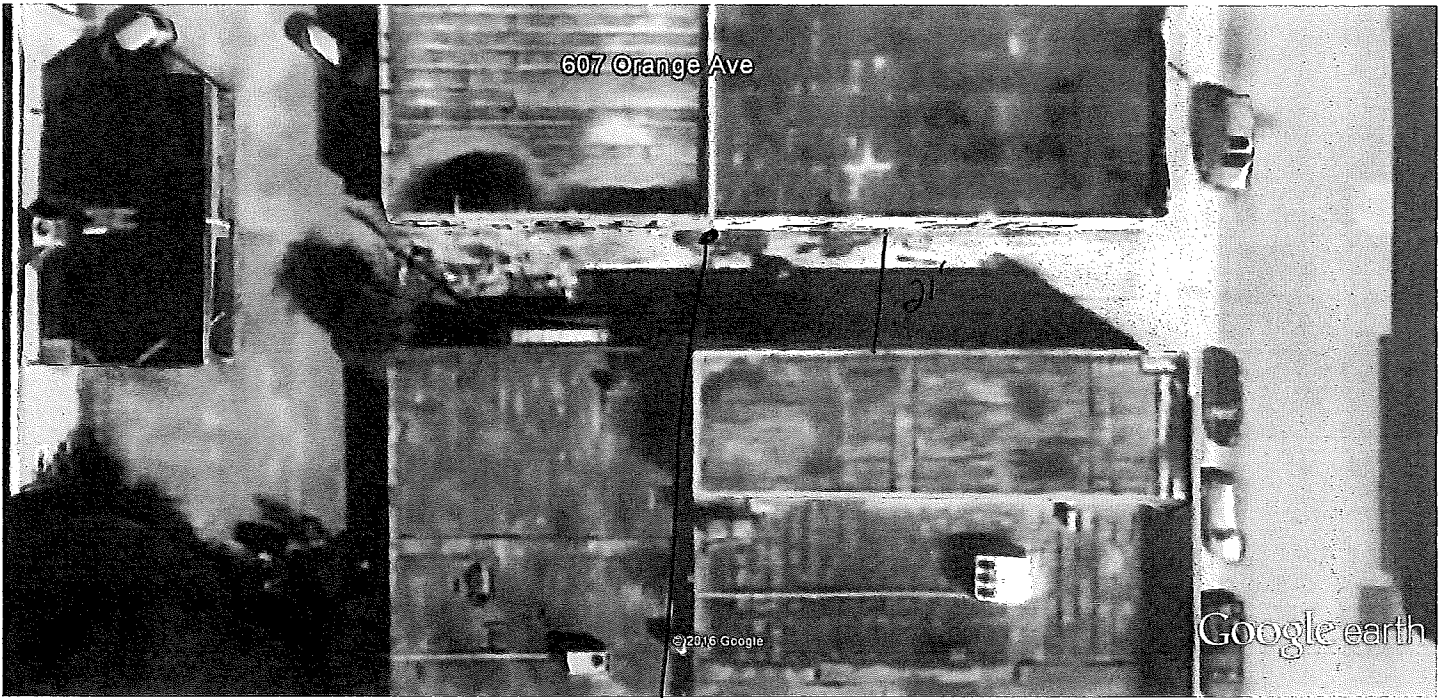
Construction documents must accompany this application. The Florida energy code submitted becomes an integral part of this plan and must pass final inspection. "Notice: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public record of this county, and there may be additional permits required from other governmental entities such as waste management district, state agencies, or federal agencies." SIGNATURE OF THE APPLICANT MUST BE NOTARIZED. If owner builder, applicant must sign in person. BUILDING PERMIT includes: Building, Electrical, Plumbing, Mechanical, and Sewer only. All other trades require separate permits.
*Required Information

Asbestos compliance: It is the owner's or operator's responsibility to comply with section 469.003, Florida Statutes, and to notify the Department of Environmental Protection of his or her intentions to remove asbestos, when applicable, in accordance with state and federal law.

OFFICE USE ONLY

FEES: * See the break Down Fee Sheet
Total Fees Due \$ 105.25 FX 100 PL 75 RT 15 rd
Remarks _____ SC 5.25
Reviewed by _____ Date _____ Building Official _____ Date _____

RECEIVED
MAR 30 2016
Building Department
KC



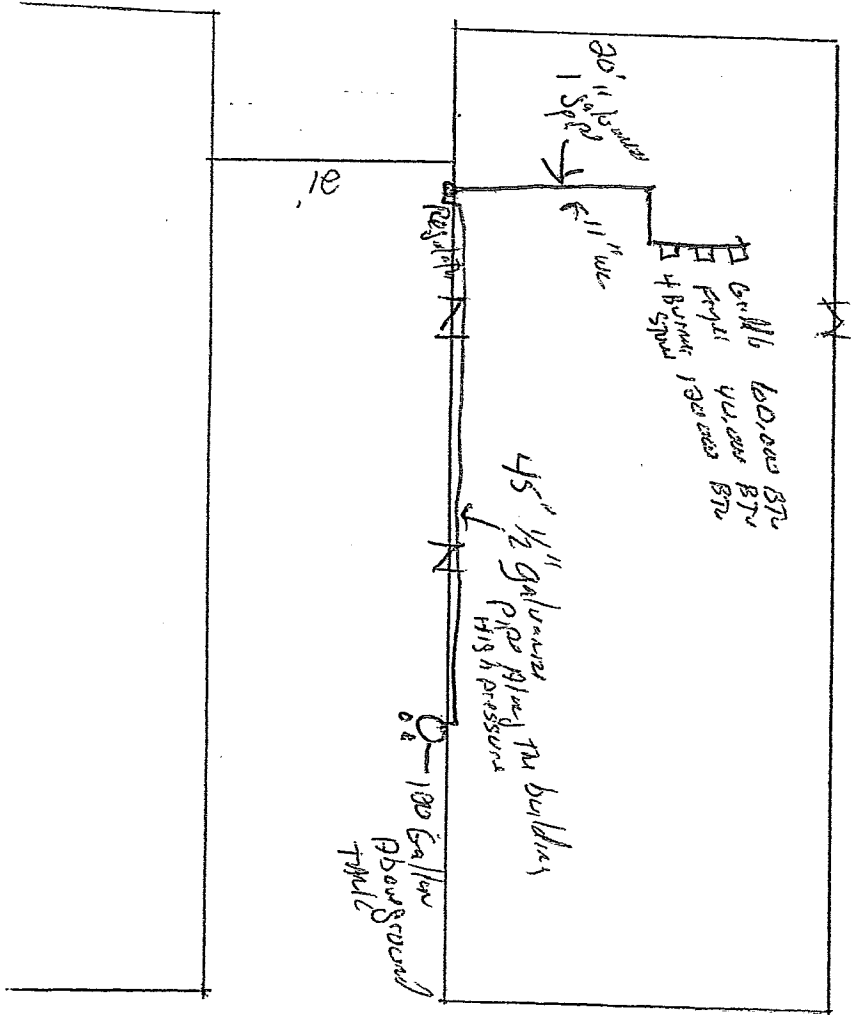
Google earth



existing Piping
& Ballards From
Prior Tank

TANK

ORANGE AVE



10

60,000 BTU
40,000 BTU
1 Spd

Grill
4 Burner Spout

45 1/2 inch galvanized pipe
High pressure
for building

100 Gallon
Above Ground
Tank