



# 40 Year Building Safety Submittal

**\*\*\*\*\* All Forms Must Be Completed In Blue or Black Ink\*\*\*\*\***

Please Check One:  40 YEAR RECERTIFICATION  10 YEAR RENEWAL

Permit Type: BRECERT BRECERT 10

Date: \_\_\_\_\_ Job Address \_\_\_\_\_

Permit/Process # \_\_\_\_\_

Owner's Name \_\_\_\_\_ Phone # \_\_\_\_\_

Owner's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Owner's E-mail Address \_\_\_\_\_

Description of Work:  40 YEAR RECERTIFICATION  10 YEAR RENEWAL  
(Check One)

(RECHECK ONLY: Permit numbers for repairs \_\_\_\_\_ Present Use \_\_\_\_\_

Job Address \_\_\_\_\_

Subdivision \_\_\_\_\_ Lot \_\_\_\_\_ Block \_\_\_\_\_ Zoning \_\_\_\_\_ D

Square Feet \_\_\_\_\_

Engineer \_\_\_\_\_ Reg. # \_\_\_\_\_ Phone \_\_\_\_\_

Engineer's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Architect \_\_\_\_\_ Reg. # \_\_\_\_\_ Phone \_\_\_\_\_

Architect's Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

### **Please make sure your package includes the following with this cover sheet:**

- Building Safety Inspection Report Form -- Structural
- Building Safety Inspection Report Form -- Electrical
- Payment of \$300.00, payable by cash, check, Visa or MasterCard

\_\_\_\_\_  
NAME OF CONTACT PERSON

\_\_\_\_\_  
PHONE NUMBER

\_\_\_\_\_  
DATE OF SUBMITTAL

Visit us at:

<http://www.fortlauderdale.gov/departments/sustainable-development/building-services/neighbor-resources>

Or Phone 954-828-5082 with questions