



SUPPLEMENTAL PERMIT APPLICATION

FRANKLIN COUNTY BUILDING DEPARTMENT

248 US HWY 98 EASTPOINT FL, 32328

Phone: 850-653-9783

<https://building.franklincountyflorida.gov>

Property Owner Information:

Property Owner: _____

Mailing Address: _____

Phone Number: _____

Property Information:

911 Address/Construction Location: _____

Parcel Identification Number: _____

Gate Code (if located in Gated Community): _____

Contractor Information:

Contractor Name: _____ Business Name: _____

Contractor Mailing Address: _____

State License Number: _____

Phone Number: _____

Email: _____

APPLYING FOR SUPPLEMENTAL: (CHECK ALL THAT APPLY)

- ☐ POWER
- ☐ ELECTRICAL
- ☐ PLUMBING
- ☐ HVAC
- ☐ ROOF – PRODUCT APPROVAL CODES: _____
- ☐ GAS
- ☐ ELEVATOR

Supplemental Contractor Signature Date

Sworn to me this _____ day of _____ in the year of 20____

Notary Signature: _____

Printed Name: _____

NOTARY SEAL: