

Scope of Work

Job/Project Name:	Permit #:
Job Site Address:	
Contractor/Owner:	
Plan Review Type: Commercial Residenti	al 1 or 2 units 🛛 Residential 3 or more units
Work Description – List each item separately.	
1	
2	
5.	
6	
Will structural work be involved? Yes /No	
Explain	

Work that does not require a building permit includes: painting, caulking, cleaning, carpet replacement and wallpaper.

Contractor/Owner:		
	Signature	Date
	Print Name	
Rev 9/2004		
ECONOMIC DEVELO	PMENT DEPARTMENT ● PERMITTING SERVI(CES DIVISION
CITY HALL ● 400 SOUTH ORANG	E AVENUE ● FIRST FLOOR ● P.O. BOX 4990 ● ORLAN	DO, FLORIDA 32802-4990
PHONE 407.246	5.2271 FAX 407.246.3420 • http://www.cityoforlando.net/p	permits
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