



PERMIT APPLICATION

City of Sunny Isles Beach Building Department

18070 Collins Avenue
Sunny Isles Beach, FL 33160
Telephone: (305) 947-2150 • Fax: (305) 792-1567

OFFICE USE ONLY

☐ Master ☐ Sub
Process No. _____
Date Submitted _____
Type Code _____
Permit Clerk _____

Location of Improvements

Job Address	19390 Collins Avenue
Folio Number	31-2202-044-0001
Lot	Block
Current Use of Property	Proposed Use Of Property

Owner Information

Name	OCEANVIEW, BUILDING A, CONDOMINIUM ASSOCIATION, INC.		
Address	19390 Collins Avenue, Sunny Isles, FL 33160		
Telephone Number	305.931.5005	E-Mail	manager@oceanviewa.com
Proposed Use of Property			

Contractor Information

Company Name	Premier Fire Alarm And Integra	Qualifiers' Name	Michael Nickerson	Complete Address	2860 W State Rd 84 Unit-118, FT Lauderdale, FL 33312		
License Number	EC13009080	E-Mail Address	plans.dept@premierfirefl.com	Phone Number	954-797-7692	Fax Number	954-797-7289

Type of Improvement

Description of Work (BE SPECIFIC)							
Install Fire alarm system							
Zoning Designation	Value of all Work	520,000	Type of Construction:	No. of Units	Group Occ.		
Square Feet	Linear Feet	Gallons	No. of Floors	Bldg. Height			
Check all the items below that apply (PERMIT WILL COVER CHECKED ITEMS ONLY)							
<input type="checkbox"/> New Construction on Vacant Land <input checked="" type="checkbox"/> Alteration, Interior <input type="checkbox"/> Alteration, Exterior <input type="checkbox"/> Emergency Generator:				<input type="checkbox"/> Screen Enclosure <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/> Shed/Prefab <input type="checkbox"/> Seawall		<input type="checkbox"/> Shell Only <input type="checkbox"/> Addition Attached <input type="checkbox"/> Addition Detached <input type="checkbox"/> Awning/Canopy <input type="checkbox"/> Fencing	
<input type="checkbox"/> Signs <input type="checkbox"/> Roofing <input type="checkbox"/> Swimming Pool/Spa <input type="checkbox"/> Hurricane Shutters <input type="checkbox"/> Doors and Windows <input type="checkbox"/> Shop Drawing				Permit Type		Change to Existing Permit	
				<input type="checkbox"/> Building <input checked="" type="checkbox"/> Electrical <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Public Works <input type="checkbox"/> Landscaping		<input type="checkbox"/> Change Contractor <input type="checkbox"/> Revision <input type="checkbox"/> Extension <input type="checkbox"/> Upgrade <input type="checkbox"/> Supplement <input type="checkbox"/> Re-inspection <input type="checkbox"/> Permit Renewal	

Architect/ Engineer Information

Name	Flood Zone	F.B.E.	Panel	Map No.	Date
Address	Improvement Ratio			Zip	
Telephone ()	Fax ()	Certification No.			

Flood Criteria

Affidavits – Please read carefully

Warning to Owner: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.	
Reminder: "The issuance of the permit does not relieve the property owner from obtaining homeowner/condominium association's approval (if applicable) prior to beginning any work and in no way authorizes work that is in violation of any association's rule or regulation"	
Owner's Affidavit: I, the owner of the property, have disclosed all information regarding any work at the property performed in the prior 12 months to the Building Official. I understand that if the cumulative cost of the work to my home or business under this and any other permit meets the following criteria: <ul style="list-style-type: none">• equals or exceeds 50% of the fair market value of the structure, the entire structure must meet the present federal flood criteria for finished floor elevation.• equals or exceeds 50% of the replacement cost of the structure, then the entire structure must conform to the current code requirements of the Florida Building Code. I certify that all of the foregoing information is accurate and that all work will be done in compliance with the applicable laws regulating construction and zoning. I certify that I am the owner of the property described in this application and that the qualifier for the contracting firm listed on this form is authorized to act as my agent to obtain a building permit for the work described herein.	Qualifier's Affidavit: Application is hereby made to obtain a permit to do work and installation as indicated on this form. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for ELECTRICAL, PLUMBING, POOL, EXTERIOR DOOR, MECHANICAL, WINDOW, FENCE, DRIVEWAY, ROOFING, SIGNS, ETC; and that additional permits may be required by other governmental agencies.

Notarized Signature of Property Owner or Authorized Agent		Notarized Signature of Qualifier	
<input checked="" type="checkbox"/> Signature of Property Owner or Authorized Agent: <i>Alex Taran</i>		<input checked="" type="checkbox"/> Signature of Qualifier	
Date: <i>3/4/2025</i>		Date	
Subscribed and Sworn before me this <i>4</i> day of <i>March</i> (year) <i>2025</i> by <i>Alex Taran</i>		Subscribed and Sworn before me this _____ day of _____ (year) _____ by _____	
Check one: <input checked="" type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification		Check one: <input type="checkbox"/> Personally Known <input type="checkbox"/> Produced Identification	
Type of Identification (if any) _____		Type of Identification (if any) _____	
Notary Public <i>Valentina Isabel Juliao</i>	Notary Stamp	Notary Public	Notary Stamp
My Commission Expires <i>7/18/2027</i>		My Commission Expires <i>7/18/2027</i>	

