



4970 City Hall Blvd
North Port, FL 34286
Phone: 941-429-7044
Inspections: 855-941-4636

CITY OF NORTH PORT
Permit Application

bldginfo@northportfl.gov
www.northportfl.gov

| | |
|---|--------------------------|
| DEPARTMENT | Permit #: 24-8017 |
| BUILDING _____ ZONING _____ FIRE _____ PUBLIC WORKS _____ | <i>Office Use ONLY</i> |
| Related Permit (if applicable) # 23-22683 | |

Commercial Residential Fire (Alarm, Sprinkler etc.)

JOB SITE ADDRESS **4458 BALSEY ST, NORTH PORT, FL** ZIP CODE **34288**

DESCRIPTION OF WORK **New Single Family Residence**

TOTAL VALUE OF CONSTRUCTION **\$150000**

PARCEL ID **0956144605** LOT **6** BLOCK **1446** ADDITION 29TH ADD TO PORT CHARLOTTE

PROPERTY OWNER **OPPORTUNITY CLUB LLC** OWNER'S PHONE **(407) 839-9759**

PROPERTY OWNER'S ADDRESS **9653 NAUTILUS CIRCLE INDIANAPOLIS, IN 46256**

CONTRACTOR'S COMPANY NAME **TAYPA CONSTRUCTION LLC**

CONTRACTOR'S ADDRESS **2715 Bosque Cir #108 Melbourne, FL 32940**

QUALIFIER **De Carvalho Gomes, Yegor** PHONE **321-3263132**

EMAIL **office@taypacconstruction.com** STATE LICENSE # **CGC1533358**

REGISTERED DESIGN PROFESSIONAL **LINE ARCH DESIGN**

REGISTERED DESIGN PROFESSIONAL ADDRESS **7618 PERSIAN CT, ORLANDO, FL 32819**

SQ FT OF LOT **10,312** SQ FT LIVABLE AREA **1,645** SQ FT UNDER ROOF **2,089**

Central Water Central Sewer Well Septic

Subcontractor Forms Required if any of these trades will be doing work:

Electrical Mechanical Plumbing Gas Roofing Other

DEV TECH **JM** BLDG _____ ZONING _____ MECH _____ ELEC _____ PLBG _____ FIRE _____

PUBLIC WORKS **Bds** PLANNING _____ UTILITIES _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installations have commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws and ordinances regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, ect.

I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

It shall also be agreed that the owner has been advised of and understands the applicability of the Construction Lien Law (FSS 713.135) and that impact fees shall be determined with the application for a building permit and shall be due before a Certificate of Occupancy can be issued. Permit fees shall be payable at issuance of a building permit.

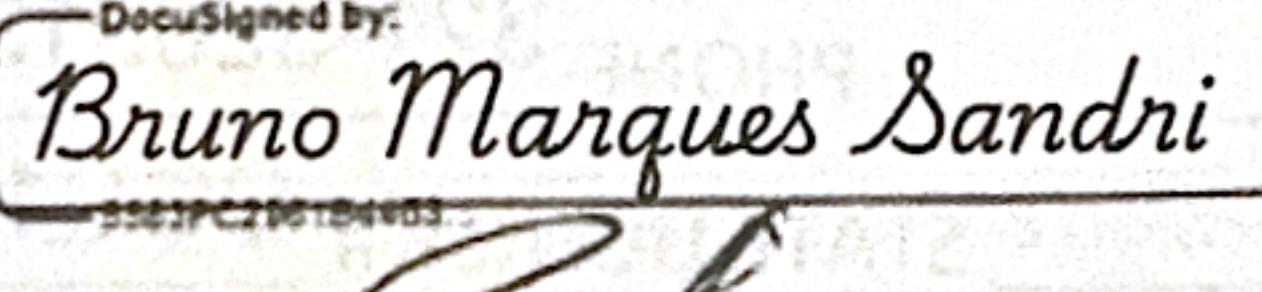
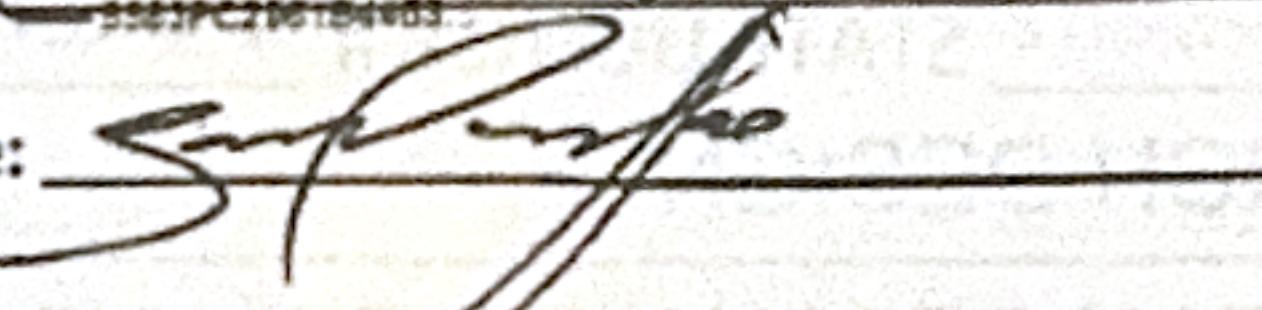
"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT (NOC) MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT." (All work over \$5,000 or existing HVAC over \$15,000 requires a NOC)

The permit will expire 180 days from the date it is issued if inspections have not commenced, or 180 days from the last approved inspections. (FBC 105.3.2/105.4.1)

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 records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

PLEASE PROVIDE THE SARASOTA COUNTY PROPERTY APPRAISER'S SUMMARY SHEET WITH THIS APPLICATION

The party applying for the permit signs below. (Only 1 notarized signature needed per application)

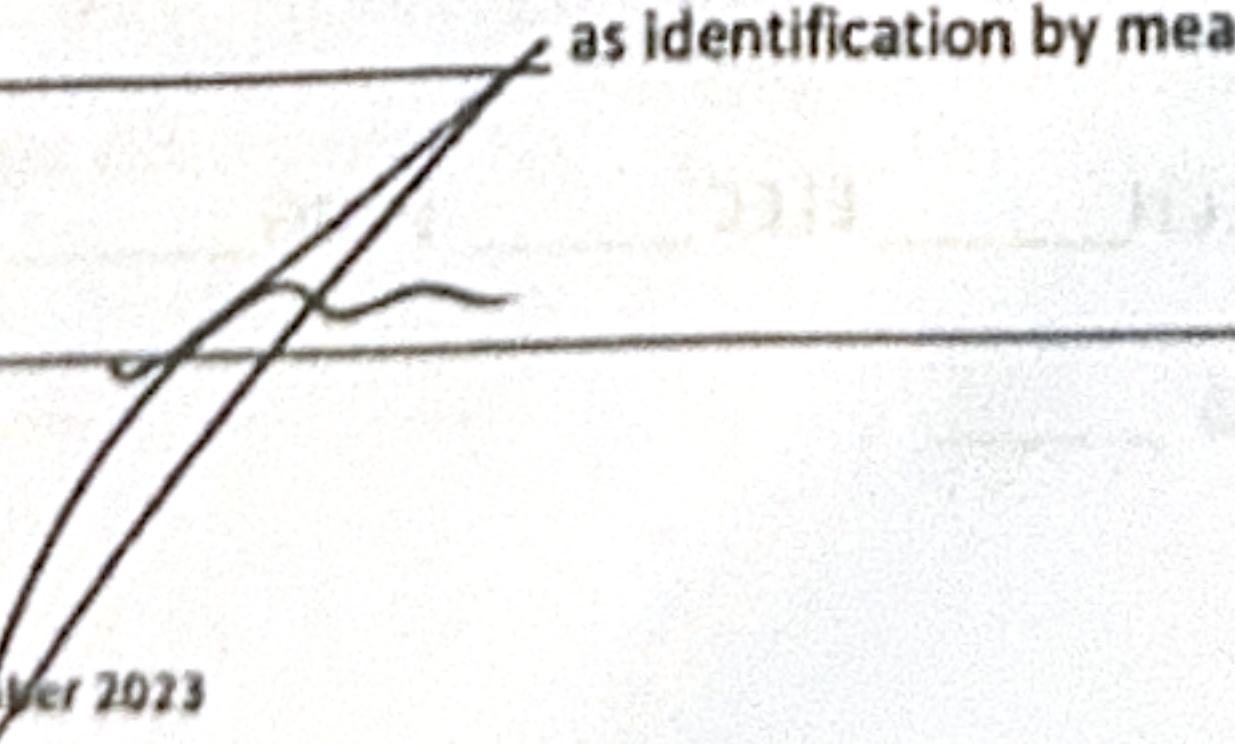
Owner's Signature: 
Contractor Signature: 
Authorized Agent: 

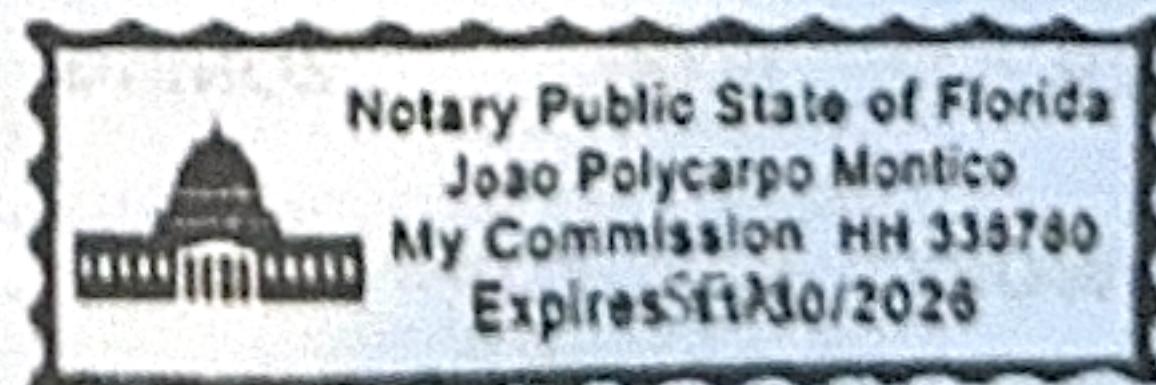
Print Name: Bruno Marques Sandri
Print Name: Yegor de Gervaldo Games
Print Name:

STATE OF FLORIDA, COUNTY OF SARASOTA

The foregoing instrument was acknowledged before me this 12 day of APRIL, 2025

Yegor Games who is personally known to me or who has produced
FL-DL as identification by means of physical presence or online notarization.

Notary Public Signature 



City of North Port
Development Services Department
4970 City Hall Boulevard
North Port, Florida 34286

Phone (941) 429-7044 Email: bldginfo@northportfl.gov Inspections (855) 941-4636

SUB-CONTRACTOR FORM

24-8017

Licensed Contractor/Owner-Builder: CGC1533358 Permit #: _____

Phone #: (321) 326-3132 Parcel ID: **0956144607**

Property Address: **BALSEY ST, NORTH PORT, FL 34288**

FOCCO CONSTRUCTION & DESIGN CORP - EC130098 (305) 814-8485

Electrical Contractor Name and License Number Phone Number

MASSFLO PLUMBING INC - CFC1431924 (941) 724-4794

Plumbing Contractor Name and License Number Phone Number

FOCCO CONSTRUCTION & DESIGN CORP - CMC1250 (305) 814-8485

Mechanical Contractor Name and License Number Phone Number

TOP RANK ROOFING LLC - CCC1333948 (407) 922-3296

Roofing Contractor Name and License Number Phone Number

Fire Alarm Contractor Name and License Number Phone Number

29TH ADD TO PORT CHARLOTTE

Fire Sprinkler Contractor Name and License Number Phone Number

Underground Fire Service Contractor Name and License Number Phone Number

Other Contractor Name and License Number Phone Number

I understand that it is my responsibility, as the Licensed Contractor for construction in the City of North Port, to hire only licensed and insured sub-contractors.

[Signature]
Licensed Contractor/Owner-Builder Signature

Orange JM

State of Florida, County of Sarasota

The foregoing instrument was acknowledged before me by Yegor Gomes who is personally known to me or has produced FL-DL as identification.

Witness my hand and official seal this 12 day of APRIL 2025.

Notary

Seal

