

BUILDING PERMIT REVISION FORM

2800 N. HORSESHOE DRIVE, NAPLES, FL 34104 (239) 252-2400

Permit Number

PRBD20201044491

☒ Residential 1 or 2 Units (Single Family/Duplex) ☐ Residential 3+ Units (Multi-Family) ☐ Commercial

Job Location

Job Street Address: 1547 GORMICAN LANE

Parcel/Folio # 27185005864

Owner Name: ROSSLENBROICH-DEETS MICHAEL P & KRISTIN P DEETS

Contractor/Owner-Builder Information

Company Name: BBHB TOTAL GAS SERVICES INC dba Jacobs Total Gas Service

☒ Contractor ☐ Owner-Builder

Qualifier/License Holder: ALEX HEPPERLEN

Agent/Contact Name: ALEX HEPPERLEN

Company Address: PO BOX 111082

City: NAPLES

State: FL

Zip Code: 34108

Phone: 239-280-7822

Fax:

Email: JACOBSEGAS@GMAIL.COM

ALL REVISIONS MUST BE "CLOUDED" WITH AN ITEMIZED LIST OF THE SCOPE OF WORK

Any changes to any exterior portion of the building may result in an architectural review which may require an SDP amendment/change. Please clearly indicate any change to the facade and/or exterior of building. Additional cost value must be greater than zero dollars (\$).

Change to Original Scope of Work:

REV #1 Change Cooktop and Dryer to Future

Project Name:

Additional Cost of Construction \$: 1.00

Additional Sq. Ft. Living/Interior:

Additional Sq. Ft. Non-Living/Exterior:

Trades Affected by Revision*

*Check All Applicable Trades Associated with Revision

☐ Private Provider

☐ Septic

☐ Permit by Affidavit

☐ Electrical

☐ Mechanical

☐ Roofing

☐ Shutters

☐ Plumbing

☐ Low Voltage

☐ Structural

Qualifier Acknowledgement of Revision Submittal

Company Name: BBHB TOTAL GAS SERVICES INC dba Jacobs Total Gas Service

State License #: LI42518

Qualifier's Name: ALEX HEPPERLEN

Qualifier's Signature: 

State of FLORIDA

County of COLLIER

The foregoing instrument was acknowledged before me by means of ☒ physical presence or ☐ online notarization this 30 day of JULY, 2021, by (printed name of owner or qualifier) ALEX HEPPERLEN

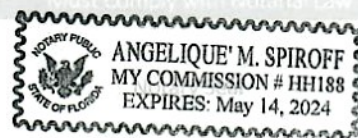
Such person(s) Notary Public must check applicable box:

☒ Are personally known to me

☐ Has produced a current drivers license

☐ Has produced as identification.

Notary Signature: 



PLEASE DO NOT WRITE BELOW, FOR STAFF USE ONLY

Inspections Needed:

Additional Fees: Building: \$

Fire: \$

PMR Date:

Days Review:

Sets of Plans: