



# STOCKING REQUEST APPLICATION

Site Address:	Permit Number:
Legal Description (Section/Block/Lot):	Parcel ID:

WHEREAS, \_\_\_\_\_ ("OWNER") acknowledges there are certain risks associated with stocking before a Certificate of Occupancy is issued, NOW THEREFORE, OWNER, and the City of Port St. Lucie ("City") by and through its Building Department, in consideration of issuance of the Stocking Request for certain work on the PROPERTY, do hereby agree as follows:

1. The City will grant this Stocking Request and Owner hereby releases and hold harmless the City, its agents, employees, officers, directors from any and all liability associated with stocking, this Request, Agreement or related work.
2. The Owner will only stock the building and understand that this is NOT a Certificate of Occupancy or Temporary Certificate of Occupancy or use of the space. No training or hiring employees shall occur without permission from Building Official.
3. The OWNER, his heirs, assigns and successors in interest waive, renounce, relinquish, absolve and discharge the City of Port St. Lucie, its employees, agents, officers, and directors forever from any liability for personal injury and property damage which may result from the issuance of the Stocking Request for certain work on the PROPERTY even if the issuance of the Stocking Request for certain work on the PROPERTY is later found to be wrongful or negligent.
4. That OWNER shall defend, hold harmless and indemnify the City of Port St. Lucie, its employees, agents, officers, and directors from and against all liability, loss, claims, damages, costs, attorneys' fees and expenses of whatever kind or nature the City of Port St. Lucie may sustain, suffer, incur or be required to pay, by reason of the issuance of the Stocking Request for certain work on the PROPERTY is later found to be wrongful or negligent.
5. If the City determines that the conditions of this Agreement and/or the requirements of the City Code of Ordinances have been violated, the City retains the right to revoke the authorization to stock the building and, upon written revocation, stocking of the building must immediately cease.

**Request is granted based on the following conditions:**

- o All life-safety systems will remain fully operational.
- o All fire extinguishers will be in place and operational.
- o All means of ingress/egress will remain clear and unobstructed.
- o Bathroom facilities will be available and functional. Water coolers shall be available for employees that are stocking the building.
- o Barricades will remain in place to direct traffic and persons away from the unfinished areas of the site.
- o The facility and site will comply with all applicable codes and ordinances.
- o All public shall be restricted from the premises until a Certificate of Occupancy has been issued.
- o The above conditions are to be monitored by the Owner, and they shall insure that the above conditions are complied with daily.
- o Owner will pay \$250 fee payment for the Stocking Request.
- o Owner shall schedule final building, fire and electrical final inspections when stocking is completed.
- o Approval from the St. Lucie County Fire District.

**OWNER:**\_\_\_\_\_  
Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Print Name\_\_\_\_\_  
Phone Number\_\_\_\_\_  
Notary Public, State of FloridaSTATE OF FLORIDA,  
County of \_\_\_\_\_

[NOTARIAL SEAL]

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

**CONTRACTOR:**\_\_\_\_\_  
Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Print Name\_\_\_\_\_  
Phone Number\_\_\_\_\_  
Notary Public, State of FloridaSTATE OF FLORIDA,  
County of \_\_\_\_\_

[NOTARIAL SEAL]

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

**LESSEE:**\_\_\_\_\_  
Signature\_\_\_\_\_  
Date\_\_\_\_\_  
Print Name\_\_\_\_\_  
Phone Number\_\_\_\_\_  
Notary Public, State of FloridaSTATE OF FLORIDA,  
County of \_\_\_\_\_

[NOTARIAL SEAL]

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarization this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as identification.

**SLC Fire Marshall:** Approved  Denied  Not required

Initials: \_\_\_\_\_ Date: \_\_\_\_\_

**Chief Building Inspector:** Approved  Denied  Pre-requisites not met

Initials: \_\_\_\_\_ Date: \_\_\_\_\_