

# **ESCROW ACCOUNT INFORMATION PACKET**

**Hernando County Building Division  
789 Providence Boulevard  
Brooksville, FL 34601**

The Hernando County Building Division offers the ability to pay for services from a pre-established escrow account.

To establish an escrow account, submit the “Escrow Account Agreement” and a minimum deposit of \$300.00. The Building Division is not authorized to extend credit, and charges will not be allowed for more than the balance on the account. Please be sure your deposit is sufficient to cover the monthly charges.

Only the persons listed on the agreement will be permitted to charge to your account. You may change the authorized personnel at any time by completing a new “Escrow Account Agreement” and sending it to our office so that we may update our file. Upon receipt of the agreement and deposit, an escrow account number will be assigned to you, and a copy of the form will be returned to your office.

There is no minimum balance required to keep your account active; however, if your account remains inactive for a period of six (6) months, the account will be closed and any remaining funds will be refunded. You can monitor your account via our online system. A statement of your account can be provided upon request.

Thank you for your cooperation, and please feel free to contact this office at (352)754-4050 if you have any questions.

## **HERNANDO COUNTY BUILDING DIVISION**

### **ESCROW ACCOUNTS**

#### **REQUIREMENTS:**

- ◆ Minimum Deposit Amount: \$300.00
- ◆ Must be a Hernando County Licensed or State Certified Contractor

#### **FEATURES:**

- ◆ Payment of Permit Fees
- ◆ Payment of Impact Fees
- ◆ Payment of Red Tags
- ◆ Payment of Contractor Licensing Fees
- ◆ Payment of Timed Inspections, Same Day, or After Hours Inspections
- ◆ No Monthly Fee

#### **HOW TO APPLY AND MAINTAIN ACCOUNT:**

- ◆ Submit Completed Agreement and Deposit to Hernando County Building Division
- ◆ You will be contacted to establish your PIN number.
- ◆ No minimum balance required; however, you must maintain balance sufficient to cover your charges
- ◆ If there is no activity on your account for a period of six (6) months, the account will be closed and unused funds returned to you.
- ◆ Account activity can be viewed through on-line system
- ◆ Paper statement available upon request

**HERNANDO COUNTY BUILDING DIVISION**  
**789 PROVIDENCE BLVD., BROOKSILLE, FL 34601**  
**PHONE (352) 754-4050 FAX (352) 754-4416**  
**ESCROW ACCOUNT AGREEMENT**

**ESCROW ACCOUNT**

**NO.:** \_\_\_\_\_  
(Assigned by Building Division)

(Please Type or Print Legibly)

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

PHONE: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_

I hereby authorize the following employees to charge to my Escrow Account:

Print or Type Name:

Signature:

_____	_____
_____	_____
_____	_____
_____	_____

Opening Deposit: \$ \_\_\_\_\_

(min.\$300.00)

**NOTE: PLEASE COMPLETE NEW AGREEMENT WHEN ADDING OR DELETING AUTHORIZED EMPLOYEES OR WHEN CHANGING THE NAME OF YOUR BUSINESS OR LICENSE HOLDER.**

Print or Type Name of Primary License Holder: \_\_\_\_\_

Signature of Primary License Holder: \_\_\_\_\_ Date: \_\_\_\_\_

Contractor License Number: \_\_\_\_\_ Company Name: \_\_\_\_\_

Contractor License Number: \_\_\_\_\_ Company Name: \_\_\_\_\_

Contractor License Number: \_\_\_\_\_ Company Name: \_\_\_\_\_

**FOR OFFICE USE ONLY:**

Entered By: \_\_\_\_\_ Date: \_\_\_\_\_

Remarks: \_\_\_\_\_