



Building Permit Application

Department of Growth Management

November 2024

BUILDING PERMIT #: _____

CUSTOMER #: _____

CHECK ONE: Commercial Residential

Owner's Name: _____ Telephone #: _____
Owner's Address _____ Fax #: _____
Owner's E-mail Address: _____
City: _____ State: _____ Zip: _____

Contractor's Name: _____ Telephone #: _____
Contractor's E-mail Address: _____ Fax #: _____
Contractor's State Certification or Registration No: _____
Contractor's Certificate of Competency No: _____
Contractor's Address: _____
City: _____ State: _____ Zip: _____

Architect/Engineer's Name: _____
Architect/Engineer's Address: _____
City: _____ State: _____ Zip: _____

Legal Description: Lot: _____ Block: _____ Subdivision/PUD: _____
Job Name: _____
Job Address: _____
City: _____ State: _____ Zip: _____
Job Description: _____
Example: (SFD wood frame/metal frame/masonry etc.) (Commercial Retail masonry construction, single story etc.)

Parcel Identification Number (PIN): _____

Height of Structure: _____ No. of floors: _____ No. of units: _____
Total Square Footage: _____
(This is from outside of wall to outside of wall and includes garages, carports, porches, balconies, lanais etc.)

(Plans Examiner use only)

Plans Accepted _____ or Rejected: _____
(1st) (2nd) (3rd)

Occupancy Type/Use Classification: _____ Group: _____

Construction Type: IA IB IIA IIB IIIA IIIB IV VA VB

Project is _____ is not _____ located in the Wind Borne Debris Region.

Fee Simple Title holder's Name (if other than owner): _____
Fee Simple Title holder's Address (if other than Owner's): _____
City: _____ State: _____ Zip: _____

Bonding Company: _____
Bonding Company Address: _____
City: _____ State: _____ Zip: _____

Mortgage Lender's Name: _____
Mortgage Lender's Address: _____
City: _____ State: _____ Zip: _____

Estimated Value: \$ _____ Total Value of Structure: \$ _____
(Cost of Construction Contract) (For additions, remodels and repairs to ensure compliance with NFIP requirements)

Zoning District: _____ Future Land Use: _____ Flood Zone Designation: _____
What is the current use of the existing building? _____
What is the proposed use? _____

Has the lot/parcel been split? Yes: No: If yes, when? _____

Variance: Yes: No: If yes, when? _____ Special Exception: Yes: No: If yes, when? _____

Parcel vacant? Yes: No: Easements on the property? Yes: No:

Parcel located on Tidal Water? Yes: No: Parcel located on Non-Tidal Water? Yes: No:

METAL ROOFS: Required Design Pressure _____ Design Pressure of proposed roof _____

NOTES:

A) **All construction in hazardous flood zones requires the submittal of Elevation Certificates at the following times:**

- At the time the building permit application is submitted (Construction Drawing EC)
- Before vertical construction commences (Building Under Construction EC); and
- When final inspections are requested (Finished Construction)

NOTE: Construction in the V Zone areas will require Elevation Certificates and V-Zone Design Certificates are required when application is submitted.

In addition to meeting the elevation requirements of the subject property's flood zone, residential finished floor elevations must also be constructed a minimum of 12" above the actual crown of the road abutting the subject property if the flood zone is split. If a residential structure is located in a non-hazardous flood zone, the finished floor elevation must be a minimum of 12" above the actual crown of the road abutting the subject property unless an exemption is granted by the County engineer pursuant to Section 6.02.03 of the Land Development Code.

- B) **Applications for Threshold Buildings** shall have Certifications by the Architect, Engineer and Contractor attached hereto as required by Florida Statutes.
- C) A certified survey or plot plan drawn to scale is attached hereto showing existing structures, new structures setbacks, easements etc.
- D) For all commercial & industrial projects, site plan review & approval is required from the Planning Division & other departments as deemed applicable. This does not apply to interior remodeling.
- E) The Building Code in effect as of the date of this application is the Florida Building Code 2023, which includes the Florida Energy Efficiency Code and the Florida Accessibility Code.

OWNER'S AFFIDAVIT

Application is hereby made to obtain a permit to do the work and installation as indicated. I certify that no work, installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for Electrical, Plumbing, Mechanical and Gas work, Signs, Pools, Furnaces, Boilers, Heaters, Tanks, Air Conditioners etc.

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.

WARNING TO OWNER:

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS OF YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature _____
Contractor/Owner

Date

NOTARY INFORMATION:

STATE OF _____

COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this _____ by _____, who is
(date) (name of person acknowledging)
personally known to me or who has produced _____ as
identification. (type of identification)

(Signature of person taking acknowledgment)

(Name typed, printed or stamped)

Title or rank)

(Serial number, if any)

STAFF ACCEPTANCE:

Name

Date