

## Permit Application Intake Checklist

This checklist is to review Permit Application submittals as they come in. Please use this list to make sure each of these items are contained on the Permit Application before they leave the building. There are other documents that need to be included for most permits but this information needs to be on every Permit Application.

- 1. In the upper right above the Applicant Information make sure they have filled out the Contract Price/Value.
- 2. Make sure they have filled out the Proposed Project Description/Scope.
- 3. Make sure they have filled out the parcel number.
- 4. Make sure page 1 of the Application is Signed and Notarized.
- 5. Make sure they have checked Commercial or Residential.
- 6. If this permit is an Owner/Builder permit, make sure the Owner/Builder Discloser Statement has been filled out Signed and Notarized.
- 7. Please make sure they have included Proof of Ownership. This can include copy of warranty deed or page from Property Appraiser's Website

[Click on item to navigate to specific page.](#)  
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**MECHANICAL, ELECTRICAL, PLUMBING, RE-ROOF, FENCE, DRIVEWAY, MISCELLANEOUS**

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**Permit Application** (Note: this is now a form and can be completed on your computer then printed.)

**Owner-Builder Affidavit**

**Site and/or Building Plan (required for Fence, Driveway, other additional structures)**

**Florida Product Approval Information**

**Florida Product Approval Submittal Forms**

**Air Conditioning Change Out Form**

**Hurricane Mitigation Retrofit for Re-Roofs**

**Resubmittal Cover Sheet**

**Permit Extension Request**

**Notice of Commencement ([prints 8-1/2" X 14"](#))**

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**PERMIT CHECKLIST**

Before **any** development activity occurs on a piece of property, a permit is required from the local jurisdiction. A permit is required before carrying out any building activity, the making of any material change in the use, or change in appearance of any structure.

***PLEASE READ AND UTILIZE THIS CHECKLIST CAREFULLY TO ASSIST YOU IN ORGANIZING AND PREPARING YOUR APPLICATION PACKAGE FOR SUBMITTAL – Items marked with filled in circle are required.***

**INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED**

Items Required At Time Of Submittal Of Application Package:

1. ●  **BUILDING PERMIT APPLICATION**\_ Indicate the Electric Utility Company
2. ●  **COPY OF SIGNED DATED CONTRACT** - (if applicable), or value of project.
3. ○  **RAISED SEAL FLOOD ELEVATION SURVEY W/SPOT ELEVATION WHERE STRUCTURE TO BE LOCATED**  
Required if any part of property in an A zone or V zone (also required at slab and final inspection)
4. ●  **LEGAL DESCRIPTION** - Section, Township, Range, Lot, and Block, Parcel #, Alternate Key #and Subdivision name.
5. ●  **PROOF OF OWNERSHIP** – i.e., Current tax notice, Homestead Exemption Notice, Certificate of Title, or Recorded Deed.
6. ○  **PROOF OF PAYMENT** – IMPACT FEE (if applicable--collected).
7. ○  **TWO (2) SEALED SETS OF CONSTRUCTION PLANS** (Signed & Sealed by Florida Architect or Engineer).  
**DUNNELLON & WILLISTON REQUIREMENT: SUBMIT AN ELECTRONIC VERSION OF PLANS WITH APPLICATION**
8. ●  **AIR CONDITIONING CHANGE OUT FORM** (Required for all Air Conditioner Change Outs)
9. ●  **HURRICANE MITIGATION RETROFIT (RE-ROOFS ONLY, as applicable per 2007-HB 7058, FS 553.844 and Rule 9B-3.0475 FL Adm. Code).** **(RE-ROOF ONLY)**
10. ○  **TRUSS/RAFTER UPLIFT LOAD SUMMARY SHEET. AND TRUSS LAYOUTS.**
11. ●  **TWO (2) ENERGY FORM 600A, B, or C. (IF NEW HVAC SYSTEM)**
12. ●  **TWO (2) LOAD CALCULATIONS FOR HVAC (MANUAL J AND N REQUIRED ON NEW)** \_\_\_\_\_
13. ●  **TWO (2) COPIES OF HVAC DUCT LAYOUT. (Attached to plans) (IF NEW HVAC SYSTEM)**
14. ●  **TWO (2) COPIES OF A SITE/BUILDING PLAN : Drawn to scale (1"=30') (one inch equals thirty feet) using Site plan or survey with the following showing: **NOTE: PROPERTY RECORDS CARD ACCEPTABLE IF IT SHOWS DIMENSIONS.****

**\*\* PLEASE BE SURE EACH OF THE ITEMS LISTED BELOW ARE INCLUDED ON THE SITE PLAN \*\***

- A. Dimensions of the property.
  - B. Location of all existing and proposed structures.
  - C. Setbacks from all property lines to existing and proposed structures.
  - D. Location of all roads and right-of-ways (including center lines) in relation to the property.
  - E. A directional arrow indicating North.
  - F. The scale used for the site plan (such as 1" = 30')
  - G. Septic, drain field, and well location on the proposed building site. If any one of these locations is within 75 feet of the property line, then the site plan must encompass those areas adjoining the proposed building site indicating location of property's septic, drain field and well locations.
  - H. Location of all natural and man made surface waters (i.e., lakes streams, canals, wetlands, etc.).
  - I. Location of proposed and/or existing water lines and meters.
  - J. Location of driveways and sidewalks.
  - K. Location of LP tanks, size, type. Distance from tank to structure. Distance from all external ignition sources, i.e. air conditioner.
15. ●  **NOTICE OF COMMENCEMENT** (Certified and Recorded for projects \$2,500 or more—mechanical \$7,500 or more)
  16. ●  **OWNER/BUILDER DISCLOSURE STATEMENT & AFFIDAVIT**\_ (If applicable)
  17. ○  **ONE (1) COMPLETE STATE HEALTH DEPT. APPLICATION PACKAGE REQUIRED TO BE SUBMITTED TO THE HEALTH DEPARTMENT FOR SEPTIC AND/OR WELL (If Applicable).**
  18. ●  **PROVIDE COPY OF APPLICABLE STATE AND LOCAL LICENSES, PROOF OF WORKERS COMPENSATION INSURANCE OR EXEMPTIO'N (for contractor and all subcontractors; see Permit Application).**
  19. ●  **PRODUCT APPROVAL SHEETS (FOR RE-ROOFS)**

352-628-7904

[dallas@fmsbuildingdepartment.com](mailto:dallas@fmsbuildingdepartment.com) (email)

05-26-16

BUILDING PERMIT APPLICATION

RETURN TO TOC

Date Rcvd: \_\_\_\_\_ Time Rcvd: \_\_\_\_\_ Rcvd By: \_\_\_\_\_

PERMIT # \_\_\_\_\_ COMMERCIAL \_\_\_\_\_ RESIDENTIAL \_\_\_\_\_ OWNER/BUILDER \_\_\_\_\_

CONTRACT PRICE/VALUE: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Applicant: \_\_\_\_\_
Address \_\_\_\_\_ Address \_\_\_\_\_
City \_\_\_\_\_ City \_\_\_\_\_
State \_\_\_\_\_ Zip \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_
Phone \_\_\_\_\_ Email \_\_\_\_\_ Phone \_\_\_\_\_ Email \_\_\_\_\_

PROPOSED PROJECT DESCRIPTION/SCOPE \_\_\_\_\_

PROJECT ADDRESS \_\_\_\_\_ FLOOD ZONE DESIG. \_\_\_\_\_

Subdivision \_\_\_\_\_ Phase \_\_\_\_\_ Blk \_\_\_\_\_ Lot \_\_\_\_\_

Directions to Project Site: \_\_\_\_\_

PARCEL #/ ALT KEY #: \_\_\_\_\_

BONDING COMPANY: \_\_\_\_\_ POWER COMPANY \_\_\_\_\_

It is agreed that in all respects the work will be performed and completed in accordance with the permitted and applicable codes of the local jurisdiction. This permit may be revoked at any time upon violation of any of the provisions of said laws, ordinances, or rules & regulations, or upon any unauthorized change in the original approved plans. This permit becomes invalid if an inspection for permanent construction is not requested within 180 days or more than 6 months has elapsed between inspections. 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 governments.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT 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.

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 government entities, such as water management districts, state agencies, or federal agencies.

I DO HEREBY SWEAR THAT THE INFORMATION CONTAINED HEREIN AND THE ATTACHMENTS HERETO ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE (OWNER/AGENT/APPLICANT/CONTRACTOR): \_\_\_\_\_

STATE OF FLORIDA, COUNTY OF: \_\_\_\_\_

I HEREBY CERTIFY that on this day, before me an officer duly authorized in the State and County aforesaid to take acknowledgements personally appeared \_\_\_\_\_, who is personally known to me or produced \_\_\_\_\_ as identification, and did not take an oath. Witness my hand and official seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

Notary Public

PERMIT APPROVED BY BLDG DEPT REPRESENTATIVE \_\_\_\_\_ DATE \_\_\_\_\_

**BUILDING PERMIT APPLICATION - PAGE 2**

**CONTRACTOR—PLEASE COMPLETE INFORMATION AND SIGN IN APPROPRIATE BLOCK BELOW. BY SIGNING BELOW, I HEREBY SWEAR THAT I AM IN COMPLIANCE WITH FLORIDA’S WORKER’S COMPENSATION LAW AND THAT I HAVE SECURED COVERAGE OR HAVE A VALID CERTIFICATE OF EXEMPTION.**

**BUILDING CONTRACTOR** \_\_\_\_\_

STATE/CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**M/H SETUP CONTRACTOR** \_\_\_\_\_

STATE CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**PLUMB. CONTRACTOR** \_\_\_\_\_

STATE/CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**HVAC CONTRACTOR** \_\_\_\_\_ (\*)

STATE CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**ELEC. CONTRACTOR** \_\_\_\_\_

STATE/CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**LP GAS CONTRACTOR** \_\_\_\_\_

STATE CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**SPECIALITY CONTRACTOR** \_\_\_\_\_

STATE/CERT/REG # \_\_\_\_\_

ADDRESS \_\_\_\_\_

STATE \_\_\_\_\_ ZIP \_\_\_\_\_

PHONE \_\_\_\_\_ FAX \_\_\_\_\_

CELL \_\_\_\_\_ EMAIL: \_\_\_\_\_

SIGNATURE \_\_\_\_\_

**ENGINEER/ARCHITECT** \_\_\_\_\_

STATE CERT/REG # \_\_\_\_\_

**(\*) NOTE TO HVAC CONTRACTOR: FLORIDA BUILDING CODE - ENERGY EFFICIENCY, REQUIRES THAT THE CONTRACTOR PROVIDE MANUAL J & MANUAL N ON ALL NEW CONSTRUCTION HVAC SYSTEMS ; CONTRACTOR MUST ALSO PROVIDE CERTIFICATION THAT ALL DUCTWORK HAS BEEN INSPECTED AND ALL NECESSARY REPAIRS/TAPING HAVE BEEN COMPLETED.**

## OWNER/BUILDER DISCLOSURE STATEMENT

**F.S. Chapter 489, CONTRACTING; PART 1 CONSTRUCTION CONTRACTING (SS 489.103):** State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even though you do not have a license. You must supervise the construction yourself. You may build or improve a commercial building at a cost of \$75,000 or less. The building must be for your own use or occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within one year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. **Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct FICA and withholding tax and provide worker's compensation for that employee, all as prescribed by law.** Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

**Section 6. Subsection (1) of Section 455.228 Florida Statutes - F.S. 455.228 Unlicensed practice of a profession; cease and desist notice; civil penalty; enforcement.-----**

(1) When the department has probable cause to believe that any person not licensed by the department or the appropriate regulatory board within the department or the appropriate regulatory board within the department has violated any provision of this chapter or any statute that relates to the practice of a profession regulated by the department, or any rule adopted pursuant thereto, the department may issue and deliver to such person a *notice to cease and desist* from such violation. In addition, the department may issue and deliver a notice to cease and desist to any person who aids and abets the unlicensed practice of a profession by employing such unlicensed person. For the purpose of enforcing a cease and desist order, the department may file a proceeding in the name of the state seeking *issuance of an injunction or a writ of mandamus* against any person who violates any provisions of such order. In addition to the foregoing remedies, the department may impose an administrative penalty not to exceed **\$5,000.00 per incident**, pursuant to F.S. 120.58, it shall be entitled to collect its attorney's fees and costs, together with any cost of collection.

**FLORIDA BUILDING CODE 2014, BUILDING 105.3.6 ASBESTOS REMOVAL:** State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within one year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. **Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct FICA and withholding tax and provide worker's compensation for that employee, all as prescribed by law.**  
**ANY PERSON WHO AIDS AND ABETS UNLICENSED CONTRACTORS OR SUBCONTRACTORS WILL FACE IMPOSED PENALTIES AS PROVIDED BY LAW.**

1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner/builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license. **OWNER INITIAL \_\_\_\_\_**

2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility. **OWNER INITIAL \_\_\_\_\_**

3. I understand that, as an owner/builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts. **OWNER INITIAL \_\_\_\_\_**

4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption. **OWNER INITIAL \_\_\_\_\_**

5. I understand that, as the owner/builder, I must provide direct, onsite supervision of the construction. **OWNER INITIAL \_\_\_\_\_**

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6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

**OWNER INITIAL \_\_\_\_\_**

7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner/builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner/builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner/builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

**OWNER INITIAL \_\_\_\_\_**

8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation.

**OWNER INITIAL \_\_\_\_\_**

9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner/builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

**OWNER INITIAL \_\_\_\_\_**

10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at WWW.DBPR.COM for more information about licensed contractors.

**OWNER INITIAL \_\_\_\_\_**

11. I am aware of, and consent to, an owner/builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address : \_\_\_\_\_.

**OWNER INITIAL \_\_\_\_\_**

12. I agree to notify the Building Department, immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

**OWNER INITIAL \_\_\_\_\_**

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner/builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

This \_\_\_\_\_ Day of \_\_\_\_\_ the Year \_\_\_\_\_, I, the undersigned, have read the preceding and understand the responsibility of acting as my own contractor, and having been noticed of the above Florida Statutes, will abide by the laws governing the municipality having jurisdiction and the State of Florida.

I further state that I have the knowledge and ability to do the work proposed, and I assume full responsibility for familiarizing myself with all the municipality having jurisdiction codes and building regulations. In the event a building inspector requires corrections to be made, I will make such corrections and call for a re-inspection before proceeding. I understand the Building Department is not responsible for instructing me on what to do. I understand I may subject myself to code enforcement action by not requesting and obtaining, Final Inspection Approval prior to engaging in the use of the proposed development.

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

\_\_\_\_\_  
SIGNATURE OF OWNER/BUILDER AND DATE

I HEREBY CERTIFY that on this day, before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who did/did not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC

**SITE PLAN**

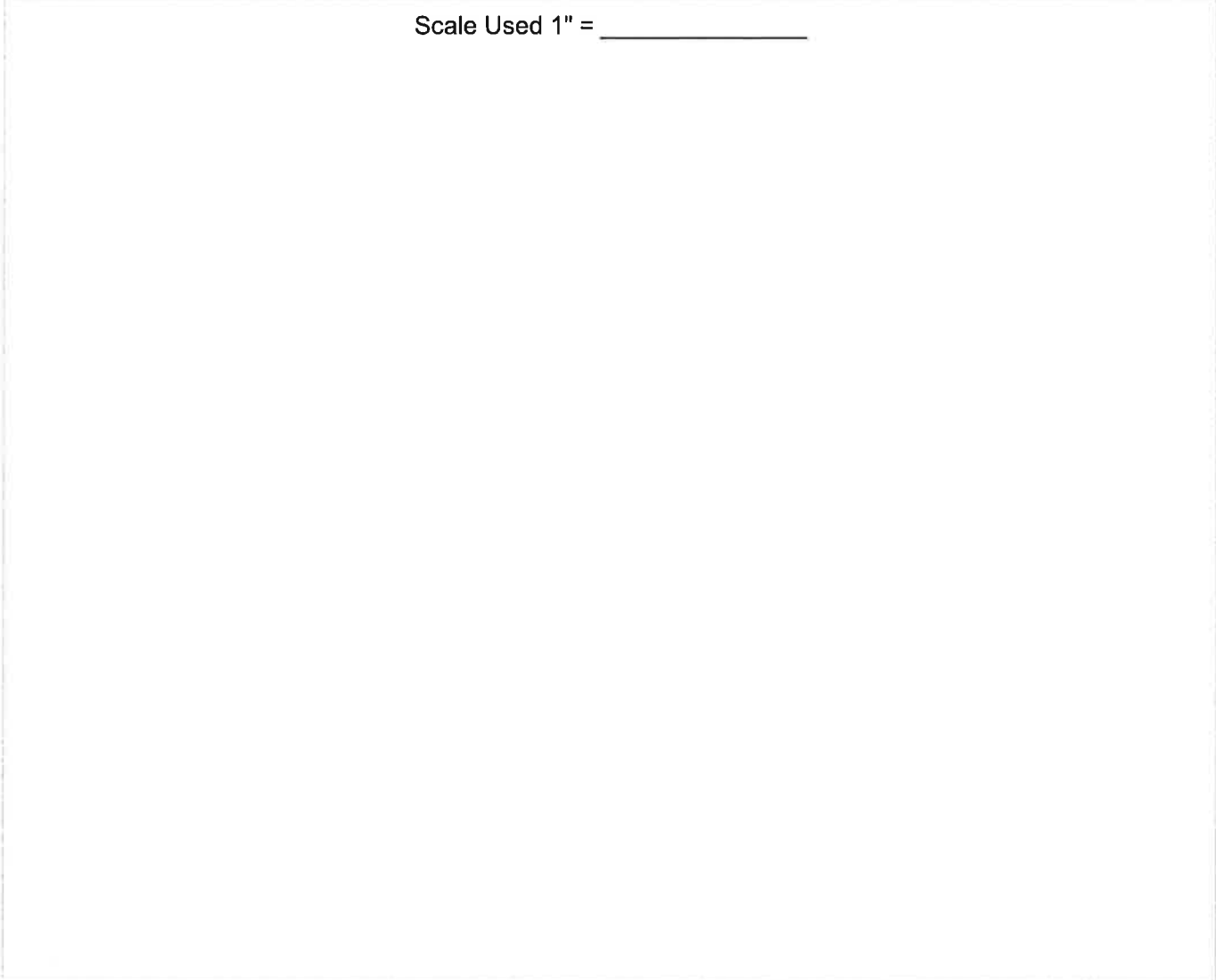
Note: This form may be replaced by comparable form that contains detail according to numbered items below.

Site Plan For: \_\_\_\_\_

Lot: _____	Block: _____	Subdivision: _____ (Platted or Unrecorded)	Parcel Zoning: _____
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Setbacks (in ft.): Front \_\_\_\_\_ Side \_\_\_\_\_ Rear \_\_\_\_\_ Property Size \_\_\_\_\_

Scale Used 1" = \_\_\_\_\_



- A. Indicate subdivision name, lot and block numbers (or letters) or parcel number if unrecorded subdivision. (Information can be found on deed or tax bill.)
- A. Dimensions of the property.
- B. Location of all existing and proposed structures.
- C. Setbacks from all property lines to existing and proposed structures.
- D. Location of all roads and right-of-ways (including center lines) in relation to the property.
- E. A directional arrow indicating North.
- F. The scale used for the site plan (such as 1" = 30')
- G. Septic, drain field, and well location on the proposed building site. If any one of these locations is within 75 feet of the property line, then the site plan must encompass those areas adjoining the proposed building site indicating location of property's septic, drain field and well location.
- H. Location of all natural and manmade surface waters (i.e., lakes streams, canals, wetlands, etc.).
- I. Location of proposed and/or existing water lines and meters.
- J. Location of driveways and sidewalks.
- K. Location of LP tanks, size, type. Distance from tank to structure. Distance from all external ignition sources, i.e. air conditioner.



# RESUBMITTAL COVER SHEET

**(Check One)**

Resubmittal to Correct Noted Deficiencies

Voluntary Design Revision to Plans

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

Owners Name: \_\_\_\_\_ Permit #: \_\_\_\_\_

Contractor: \_\_\_\_\_ Contact: \_\_\_\_\_

Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

If this is a Plans Revision, briefly but fully identify the revisions made:

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\_\_\_\_\_  
SIGNATURE OF PROPERTY OWNER OR CONTRACTOR

\_\_\_\_\_  
DATE

Phone # of Signor: \_\_\_\_\_

\_\_\_\_\_  
APPROVAL – BUILDING DEPARTMENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Fee (for use by Building Department Only)

[RETURN TO TOC](#)

## PERMIT EXTENSION REQUEST

DATE: \_\_\_\_\_

PERMIT#: \_\_\_\_\_

LENGTH OF EXTENSION WILL BE 90 DAYS FROM THE APPROVED DATE.

PLEASE STATE THE REASON FOR THE PERMIT EXTENSION BELOW:

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**Minimum permit fee is required at the time the extension is granted.**

\_\_\_\_\_  
SIGNATURE OF PROPERTY OWNER OR CONTRACTOR

\_\_\_\_\_  
DATE

Phone # of Signor: \_\_\_\_\_

\_\_\_\_\_  
APPROVAL – BUILDING DEPARTMENT

\_\_\_\_\_  
DATE

\_\_\_\_\_  
Fee (for use by Building Department Only)

**RETURN TO TOC**

Record and Return to:

File No: \_\_\_\_\_ Prepared by: \_\_\_\_\_ Name \_\_\_\_\_  
Permit No.: \_\_\_\_\_ Address: \_\_\_\_\_  
Key No. \_\_\_\_\_  
Tax Folio/Parcel ID: \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

State of Florida County of \_\_\_\_\_

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida State Statutes, the following information is provided in this Notice of Commencement.

1. Description of Property: (Legal description of the property): \_\_\_\_\_  
Property Address: \_\_\_\_\_
2. General Description of Improvement: \_\_\_\_\_
3. Owner Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_  
Interest in Property: \_\_\_\_\_  
Name and Address of Fee Simple Titleholder (If other than owner): \_\_\_\_\_
4. Contractor: Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
5. Surety: Name: \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
6. Lender: Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)(7), Florida Statutes:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City: \_\_\_\_\_ State \_\_\_\_\_  
Phone No. \_\_\_\_\_ Fax No. \_\_\_\_\_
8. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.
9. Expiration date of Notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified). \_\_\_\_\_

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SEC 713.13, FLORIDA STATUTES, AND CAN 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.**

\_\_\_\_\_  
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

\_\_\_\_\_  
Signatory's Title/Office

State of Florida, County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_, as  
(Name of Person)

\_\_\_\_\_ for \_\_\_\_\_  
(Type of authority e.g., office, trustee, attorney in fact) (Name of party on behalf of who instrument was executed)

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Print, Type or Stamp Name of Notary

Personally known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_ Type of Identification Produced: \_\_\_\_\_

**Verification pursuant to Section 92.525, Florida Statutes: under Penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.**

\_\_\_\_\_  
Signature of Natural Person Signing Above