### BUILDING PERMIT APPLICATION CHECKLIST

**PROPERTY OWNER:**

**SITE ADDRESS:**

**CONTACT #:** __________

**TYPE:**

- ☐ Cell
- ☐ Home
- ☐ Work
- ☐ Other: ________________

**EMAIL:**

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**Current Use:**

- ☐ Apartment
- ☐ Assembly-Restaurant
- ☐ Assembly – Other
- ☐ Business/Office
- ☐ Condominium
- ☐ Mercantile / Retail
- ☐ 1-2 Family Dwelling
- ☐ Storage
- ☐ Other: ________________

**Type/Scope of Work:**

- ☐ Addition
- ☐ Alteration
- ☐ Dumpster Enclosure/Pad
- ☐ Foundation Only
- ☐ New 1-2 Family Dwelling
- ☐ Fence – Type: ____________
- ☐ New Commercial
- ☐ Shed/Accessory Structure
- ☐ Swimming Pool
- ☐ Screen Enclosure
- ☐ Other: ________________

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**Site Information:**

- ☐ Square Footage: __________
- ☐ ISR: __________% ✔
- ☐ Contract Valuation: $__________

**Description of Work:** ___________________________________________________________________

_____________________________________________________________________________________

_____________________________________________________________________________________

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- ☐ Building Permit Application Form – Completed, Signed and Notarized
- ☐ New construction or remodel incurs a $120.00 submittal fee at time of submission
- ☐ Citrus County Property Appraiser Property Card (available at [www.citruspa.org](http://www.citruspa.org))
- ☐ Copy of Contract: If requested by Building Official
- ☐ Valuation of job on permit application
- ☐ Certificate of Elevation must be submitted with all new construction permit applications
- ☐ Construction Plans – [Three hard copy sets, plus one electronic signed and sealed copy](#), signed and sealed by a Florida Design Professional (minimum size 11” x 17” - maximum size 30” x 42”), **FOLDED**, not rolled, in compliance with the Florida Building Code.
- ☐ Site Plan or Survey – for all projects involving changes to the site, **three full sets, plus one electronic copy, FOLDED** not rolled, detailing the following:
- Property lines with lot dimensions and setbacks
- Easements
- Total building area: Current and proposed
- Impervious surface area (ISR): Show calculations

- Location and size of mechanical equipment pads, pool equipment, etc.
- Location and size of porches, patios, steps, driveways, sidewalks, etc.
- Location and size of existing trees
- Height Diagram of new Structures

- Drainage/Stormwater plan – For all projects involving the addition of impervious area or lot drainage, three full drainage plans, plus 1 electronic copy, signed and sealed, detailing the following:
  - Existing lot drainage patterns (Topographic survey)
  - Proposed grading plan

- **NOTE:** Prior to landscaping and sod installation, a site stormwater grading inspection will be performed. **A change to impervious surface area previously permitted is not allowed without prior approval.**

- Impervious Surface Ratio must be included for all permits.

- Proof of ownership (Property Appraiser Property Card, Current Tax Notice, Homestead Exemption Notice, Deed, Certificate of Title).

- Homeowner Association or Condominium Association Approval Letter, if applicable

- Proof of Payment Citrus County Impact Fees, if applicable

- Owner/Builder Disclosure – An owner/builder disclosure must be signed when a property owner acts as their own Contractor

- Notice of Special Interceptor Form – Must be completed for all work occurring on grease or other type interceptor

- Notice of Commencement – Certified and Recorded for projects $2,500.00 or more – mechanical $7,500.00 or more

- Plan Review Fee for all projects per approved fee schedule

- Contractor Registration, if applicable

**MECHANICAL, ELECTRICAL, PLUMBING, FIRE ALARMS, FIRE SPRINKLERS, POOLS, SPAS, FENCES, WALLS, SHEDS, SCREEN ENCLOSURES, SIGNS, AND DETACHED STRUCTURES MAY REQUIRE SEPARATE PERMITS.**

Please read, complete, sign and return

Applicant Signature ____________________ Date ____________
BUILDING PERMIT APPLICATION

ALT KEY: ________________  ☑ COMMERCIAL  ☑ RESIDENTIAL  CRA: ☑ Y ☑ N  PERMIT #: ________________

CRystal River • HOME of the MANATEE

JOB ADDRESS (INCLUDE SUITE #): __________________________________________________________

SUBDIVISION: ___________________________________  LOT #: ________________  BLOCK: __________

DESCRIBE WORK: ____________________________________________________________ TYPE CONST: ________________

VALUATION OF COMPLETED WORK: $__________  TOTAL SF: ________  TOTAL I.S.R: ________  % MAX I.S.R. ________

CONTACT NAME: ____________________________  PHONE #: ________________  FAX #: ________________

E-MAIL ADDRESS: ____________________________________________________________  CELL#: ________________

OWNER NAME: ____________________________________________________________  PHONE #: ________________  

OWNER ADDRESS: ____________________________________________________________

TENANT NAME: ___________________________________  CONTACT #: ______________________________________

CONTRACTOR BUSINESS NAME: ____________________________________________________________  PHONE #: ________________

ADDRESS: ____________________________________________________________  CELL#: ________________

EMAIL ADDRESS: ____________________________________________________________  FAX #: ________________

LICENSE HOLDER NAME: ______________________________________  STATE license #: ________________  EXP: __________

BY SIGNING THIS APPLICATION, YOU STATE THAT YOU HAVE READ AND UNDERSTAND, THE STATEMENTS LISTED ON PAGE 2

<table>
<thead>
<tr>
<th>TYPE</th>
<th>NAME</th>
<th>QUALIFIER/AGENT SIGNATURE</th>
<th>LICENSE NO.</th>
<th>DATE</th>
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<tbody>
<tr>
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<td>MECH.</td>
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<td>PLUMB.</td>
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<td>ROOF</td>
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<td>OTHER</td>
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SIGNATURE ____________________________  SIGNATURE ____________________________

STATE OF FLORIDA  STATE OF FLORIDA
COUNTY OF CITRUS  COUNTY OF CITRUS
SUBSCRIBED AND SWORN TO (OR AFFIRMED) BEFORE ME THIS
____ DAY OF ________________, 20____

(DATE)

BY ________________

WHO IS/ARE PERSONALLY KNOWN TO ME OR HAS/HAVE PRODUCED

_________________________ AS IDENTIFICATION

_________________________ AS IDENTIFICATION.

NOTARY PUBLIC ________________ (SEAL)  NOTARY PUBLIC ________________ (SEAL)

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LIEN LAW REQUIREMENTS

OWNER: ____________________________________________________________

ADDRESS: ____________________________

CITY: ________________________ STATE: __________ ZIP: __________

TITLE HOLDER (IF OTHER THAN OWNER): ________________________________

ADDRESS: ____________________________

CITY: ________________________ STATE: __________ ZIP: __________

TITLE HOLDER ADDRESS: ____________________________________________

CITY: ________________________ STATE: __________ ZIP: __________

ADDRESS: ____________________________

CITY: ________________________ STATE: __________ ZIP: __________

COUNTY __________________________________________________________

LEGAL DESCRIPTION: ______________________________________________

TAX FOLIO #: ______________________________________________________

BONDING COMPANY: ________________________________________________

ADDRESS: ____________________________

CITY: ________________________ STATE: __________ ZIP: __________

ARCHITECT: ________________________________

ADDRESS: ____________________________

CITY: ________________________ STATE: __________ ZIP: __________

MORTGAGE LENDER: ________________________________________________

ADDRESS: ____________________________

CITY: ________________________ STATE: __________ ZIP: __________

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATION AS INDICATED. I CERTIFY THAT NO WORK OR 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 WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONING, FENCE, SCREENS, ETC.

OWNERS ELECTRONIC SUBMISSION STATEMENT: UNDER PENALTY OF PERJURY, I DECLARE THAT ALL THE INFORMATION CONTAINED IN THIS BUILDING PERMIT APPLICATION IS TRUE AND CORRECT.

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 JOBSITE BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER AND/OR 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 GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES OR FEDERAL AGENCIES.

CONTRACTOR: ACCEPTANCE OF PERMIT IS VERIFICATION THAT I WILL NOTIFY THE OWNER OF THE PROPERTY OF THE REQUIREMENTS OF FLORIDA LIEN LAW, FS713.

ALL WORK SHALL BE PERFORMED IN ACCORDANCE WITH ALL APPLICABLE CITY CODES AND ORDINANCES. PERMIT VOID IF CONSTRUCTION NOT STARTED WITHIN SIX (6) MONTHS OR IF CITY ORDINANCE IS VIOLATED. HAVE SIGNATURE NOTARIZED. COMPLETE LIEN LAW REQUIREMENTS IF JOB IS OVER $2,500. SUBMISSION OF APPLICATION DOES NOT CONSTITUTE PERMIT ISSUANCE. NO WORK SHALL COMMENCE PRIOR TO PERMIT ISSUANCE.

BUILDING OFFICIAL APPROVAL: ______________________________ DATE: ____________________

ZONING OFFICIAL APPROVAL: ______________________________ DATE: ____________________

STORMWATER OFFICIAL APPROVAL: ______________________________ DATE: ____________________

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OWNER BUILDER DISCLOSURE STATEMENT

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 _____

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 for the employee. I understand that my failure to follow these laws may subject me to serious financial risk. 

   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 (850-487-1395) or (www.myfloridalicense.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 City of Crystal River 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.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

Signature: ___________________________________________

Date: ___________________________________________

STATE OF FLORIDA

COUNTY OF CITRUS

I HEREBY CERTIFY that on this day, before me on this _______ day of ________________________, 20____, 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 not take an oath.

_________________________________________ (SEAL)

NOTARY PUBLIC

Revised 3/11/2020
Product Approval Statewide

The implementation date for the Florida Product Approval System was October 1, 2003. Rule 9B-72 of the Florida Building Commission establishes a higher standard of practice for product evaluations, as well as uniformity and consistency of enforcement statewide.

The Rule covers the following eight categories of products: (Items in parentheses are examples of sub-categories of products specific functionality, but are not limited to these examples)

1. **Exterior Doors** (rollup, sectional, sliding, swinging, automatic or other)
2. **Windows** (awning, casement, dual action, double hung, single hung, fixed, horizontal slider, projected, pass through, Mullions, wind breaker or other)
3. **Panel Walls** (siding, soffits, exterior insulation finish system (EIFS), storefronts, curtain walls, wall louver, glass block, membrane, greenhouse, or other)
4. **Roofing Products** (built up roofing, modified bitumen roof system, single ply roof systems, spray applied polyurethane roof system, roofing fasteners, roofing insulation, asphalt shingles, wood shingles and shakes, roofing slate, roof tile adhesives, cement-adhesives-coatings, liquid applied roof systems, underlayments, no n-structural metal roofing, roofing tiles, waterproofing or other)
5. **Shutters** (accordion, bahama, storm panels, colonial, roll-up, equipments or other)
6. **Skylights** (skylight or other)
7. **Structural Components** (truss plates, wood connectors, anchors, coolers-freezers, sheds, concrete admixtures, insulation forms, engineered lumber, material, plastics, wall, deck-roof, railing or other)
8. **Products Comprising a Building's Envelope Introduced as a Result of New Technology** (as applicable)

The product approval system includes a statewide website for submittal of applications and payment of fees for statewide product approvals. In addition, a database is available to search a list of approved entities and products approved for statewide use. For more information on statewide product approval and the Florida Building Code, visit [www.floridabuilding.org](http://www.floridabuilding.org) or call the Florida Department of Community Affairs at (850) 487-1824 or (877) FLA-DCA-2 and ask to speak to someone in the Codes and Standards Section.
As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online at [www.floridabuilding.org](http://www.floridabuilding.org).

<table>
<thead>
<tr>
<th>Category/Subcategory</th>
<th>QTY</th>
<th>Manufacturer</th>
<th>Product Description</th>
<th>Approval Number(s)</th>
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<td><strong>1. EXTERIOR DOORS</strong></td>
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<td>A. SWINGING</td>
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<td>B. SLIDING</td>
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<td>C. SECTIONAL/ROLL UP</td>
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<td>D. OTHER</td>
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<td><strong>2. WINDOWS</strong></td>
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<td>A. SINGLE/DUPLICATE</td>
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<td>B. HORIZONTAL SLIDER</td>
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<td>C. CASEMENT</td>
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<td>D. FIXED</td>
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<td>E. MULLION</td>
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<td>F. SKYLIGHTS</td>
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<td>G. OTHER</td>
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<td><strong>3. PANEL WALL</strong></td>
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<td>A. SIDING</td>
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<td>B. SOFFITS</td>
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<td>C. STOREFRONTS</td>
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<td>D. GLASS BLOCK</td>
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<td>E. OTHER</td>
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<td><strong>4. ROOFING PRODUCTS</strong></td>
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<td>A. ASPHALT SHINGLES</td>
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<td>B. NON-STRUCT METAL</td>
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<td>C. ROOFING TILES</td>
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<td>D. SINGLE PLY ROOF</td>
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<td>E. OTHER</td>
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<td><strong>5. STRUCT COMPONENTS</strong></td>
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<td>A. WOOD CONNECTORS</td>
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<tr>
<td>C. TRUSS PLATES</td>
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<td><strong>5. SHUTTERS</strong></td>
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<td>C. STORM PANELS</td>
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<td>F. EQUIPMENTS</td>
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<td><strong>6. NEW EXTERIOR</strong></td>
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<td>A. ENVELOPE PRODUCTS</td>
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The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite; (1) copy of the product approval (2) performance characteristics which the product was tested and certified to comply with (3) copy of the applicable manufacturer’s installation requirements. Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

APPLICANT SIGNATURE ____________________________ DATE ____________________________
**PERMIT INSPECTION REQUEST**

- **EMAIL REQUEST**
- **FAX REQUEST**

**ALL REQUESTS MUST BE SUBMITTED PRIOR TO 4:00 P.M. THE DAY PRIOR TO SCHEDULED INSPECTION**

**Permit #:_________________________**

**Alt Key Number:_________________________**

**Date:_________________________**

**PROJECT INFORMATION**

**CRA DISTRICT?**

- **YES**
- **NO**

**PROJECT ADDRESS:**

________________________________________________________________________________________

**OWNER'S NAME:**

________________________________________________________________________________________

**PHONE:**

_____________________

**SITE ADDRESS:**

________________________________________________________________________________________

**PRIMARY CONTRACTOR INFORMATION or OWNER BUILDER PER FL St. 489**

**NAME of COMPANY:**

________________________________________________________________________________________

**LICENSE #:**

_____________________

**EMAIL ADDRESS:**

________________________________________________________________________________________

**PHONE #:**

_____________________

---

**PERMIT INSPECTION REQUEST:**

- **RESIDENTIAL**
- **COMMERCIAL**

**DATE REQUESTED:**

______________

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**NOTES:**

_____________________

**BUILDING:**

- **PLUMBING**
  - **1ST ROUGH**
  - **ROUGH-IN**
  - **UNDERGROUND**
  - **ROUGH-IN**
  - **M.H. SETUP**

- **MECHANICAL**
  - **FINAL**
  - **ROUGH-IN**
  - **ROUGH-IN**
  - **M.H. FINAL**

- **ELECTRICAL**
  - **FINAL**
  - **FINAL**

- **GAS**
  - **FINAL**

- **OTHER**

**FOOTING**

- **STEM WALL**
  - **2ND ROUGH**
  - **UNDERGROUND**
  - **UNDERGROUND**

- **SLAB**
  - **SEWER/SEPTIC**
  - **WATER**

**LINTEL**

**WALL SHEATHING**

**ROOF SHEATHING**

**FRAME**

**FIREFALL**

**WIRE LATH**

**INSULATION**

**DRYWALL SCREW**

**ROOF IN PROGRESS / DRY IN**

**WINDOW ATT.**

**ROOF DECK NAILING**

**ROOF TO WALL CONNECTOR**

**FINAL ROOF**

**FINAL BUILDING**

---

Signature of Contractor /Owner/Applicant __________________________

Print Name of Contractor/Owner/Applicant __________________________

Revised: 3/11/2020
NOTICE OF COMMENCEMENT

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: Parcel No: ____________________________
   (Legal description of the property and street address if available)

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 ____________________________
   (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 ______________________________________________________________________

09-26-07