

Permit Checklist

Swimming Pool Permit

- 1. COMPLETED PERMIT APPLICATION
- 2. COPIES OF LICENSE AND INSURANCE
- 3. NOTICE OF COMMENCEMENT FOR JOBS VALUED AT OVER \$2,500
- 4. A SITE PLAN IN COMPLIANCE WITH CITY STANDARDS.
- 5. PROPERTY RECORDS CARD SHOWING THE OWNER MATCHES THE OWNER ON THE APPLICATION.
- 6. A SET OF PLANS DIGITALLY SIGNED BY THE ENGINEER OF RECORD. PLEASE NOTE THAT PLANS SHOULD BE SUBMITTED AS ONE FILE, NOT ONE FILE PER PAGE. PLANS SHOULD BE UNLOCKED TO ALLOW FOR DIGITAL STAMPS TO BE INSTALLED. IF PLANS HAVE SEVERAL FOOTING OPTIONS, PLEASE BE SURE TO CALL OUT THE ONES THAT ARE SPECIFIC TO THIS JOB.
- 7. ISR WORKSHEET CALCULATION.
- 8. ALL SPECIFICATIONS TO CERTIFY ENTRAPMENT PROTECTION AND TDH CALCULATIONS.

REQUIRED INSPECTIONS: POOL STEEL, POOL DECK, POOL SAFETY, POOL FINAL

Apply online at: https://portal.iworq.net/MASCOTTEFL/new-permit/600/5611

		C	ITY OF	MASC	OTTE	Perr	nit Number
		PE PE	ERMIT A	PPLIC	ATION		
Alternate Key Number	Pa	arcel Number	Project Addre	ess			
			Project Desc	ription			
Owner's Name	Mailing Addre	ss	City, State,	Zip		Т	elephone
Email Address:	<u> </u>		ı			L	
ee Simple Titleholder's Nam	e Mailing Addre	ss	City, State, 2	Zip		Т	elephone
General Contractor	Mailing Addre	ss	City, State, 2	Zip		Т	elephone
Email Address:	I		State License				
Construction Contractor	Mailing Addre	SS	City, State, 2	Ζιp		<u> </u>	elephone
Email Address:			State License	a Number			
Electrical Contractor	Mailing Addre	ss	City, State, 2		<u> </u>	T	elephone
Email Address:			State License	e Number:			
Plumbing Contractor	Mailing Addre	SS	City, State, 2	Zip		Т	elephone
Email Address:			State License Number:		Tolophore		
HVAC Contractor	Mailing Addre	SS	City, State, 2	Zip		<u> </u>	elephone
Email Address: Roofing Contractor	Mailing Addre	SS	State License Number: City, State, Zip			Telephone	
			-				
Email Address:	IM-Sin - Antolog		State License Number: City, State, Zip			-	Salara la cara
Gas Contractor	Mailing Addre	SS	City, State, A	Zip		<u>'</u>	elephone
Email Address:			State License	e Number:			
_egal Description							
Bonding Company							
Bonding Company Address Architect's Name							
Architect's Address							
		Job Name:			•		
Project Informa	ation	Subc	division Name		Lot No.	Phase	
Zone Lot Area							
		Setback	s (ft)	Front	Rear	Side	Corner
Project (check one)	1	Area	Electrical Service Size		vac		(check one)
New	Living		5311100 0120	Ту	pe	Municipal	
Alteration	Garage		-			Well	<u> </u>
Addition	Porch(s)		-	Efficiency		Plumbing (check	one)
Repair Other	Other Total		-	Airhandler Condenser	1	Sewer Septic	
Ou IOI	i otai	1	END OF PAC		<u> </u>	Оерис	<u>I</u>

PAGE 2 OF 2								
Attached Detached		Job Value		7th Edition Florida Building Code				
Signature of	Applicant		Date					
WARNING TO OWNER: Your failure to record a Notice of Commencement may result in your paying twice for improvements to								
your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement. The issuance of a building permit does not assure the building setbacks have								
been met or that the structure does not encroach on an easement. The owner and/or contractor have the sole responsibility of determining								
compliance with setbacks and non-encroachment of easements. If the City of Mascotte determines the structure does not meet applicable								
setbacks or improperly encroaches on an easement, the owner is responsible for moving the structure, restoring the easement to its								
original condition, or otherwise making the structure comply with City setbacks and other land use requirements. Permits expire 6 months after								
issuance.								
20,	by			day of, who is personally known to me				
or has prod or did not _			as (Seal)	identification and who did				
			Notary Public					

Afte	er recording return to:									
	mit No: Folio or Alternate Key #:	Groveland, Lady Lake, Lake County, Leesburg, Mascotte, Minneele Montyorde Mount Days, Toyong, Umotille								
		e that improvement will be made to cert bllowing information is provided in this N	ain real property, and in accordance with otice of Commencement.							
1.	Description of property:	Legal Description: (legal description of the property, and street address if available)								
		Street Address:								
2.	General description of improve	description of improvement:								
3.	Owner's Information:	Address:	cholder (if other than owner):							
4.	Contractor Information:	Name:	_Fax No. (Opt.)							
5.	Surety Information:	Name:	Fax No. (Opt.)							
6.	Lender Information:	Name:Address:Telephone No	Fax No. (Opt.)							
7.		rida designated by Owner upon whom n 713.13(1)(a)7.,Florida Statutes: Name:								
8.	In addition to himself or herself to receive a copy of the following	f, Owner designates ng Lienor's Notice as Provided in Sectio Name:	of							
9.		nmencement (the expiration date is 1 ye	ear from the date of recording unless a							
PAY PRO	YMENTS UNDER CHAPTER 713, PA OPERTY. A NOTICE OF COMMENC	ART I, SECTION <u>713.13</u> , FLORIDA STATUTI EMENT MUST BE RECORDED AND POSTE	CPIRATION OF THE NOTICE OF COMMENCEMENT AR ES, AND CAN RESULT IN YOUR PAYING TWICE FOR I ED ON THE JOB SITE BEFORE THE FIRST INSPECTIO NG WORK OR RECORDING YOUR NOTICE OF COMMI	MPROVEMENTS TO YOUR N. IF YOU INTEND TO OBTAIN						
			Signature of Owner or Owner's Authorized Officer/Dir	ector /Partner /Manager						
			Printed Name & Signatory's Title/Office							
The	foregoing instrument was acknowled	lged before me thisday of	_, 20, by							
who is personally known to me or has produced			as identification and who did	or did not						
take	e an oath.									
			Signature of Notary Public - State of Florida							
Ve	ification nursuant to Section 22.50	E Florido Statutas	Print, type or Stamp Commissioned Name of Notary F	Public						
	ification pursuant to Section <u>92.52</u> der penalties of perjury, I declare that		ated in it are true to the best of my knowledge and belief.							

Signature of Natural Person (Owner) Signing Above

IMPERVIOUS SURFACE RATIO WORKSHEET

<u>IMPERVIOUS SURFACE</u> means a surface that has been compacted or covered with a layer of material so that it is highly resistant to or prevents infiltration by stormwater. It includes surfaces such as compacted limerock, or clay, as well as most conventionally surfaced streets, roofs, sidewalks, parking lots and other similar surfaces.

<u>IMPERVIOUS SURFACE RATIO (ISR)</u> means a measure of the intensity of hard surfaced development on a site. An impervious surface ratio is the relationship between the total impervious surface area on a site and the gross land area. The ISR is calculated by dividing the square footage of the area of all impervious surfaces on the site by the square footage of the gross land area.

LOT AREA: The area included within the lot lines of the lot. No public right-of-way shall be included in the calculation of the lot area. UY ÞÒÜ NAMEÇÌD ÔUÞVÜŒÔVUÜÁÞŒFÒ: JOB SITE ADDRESS: _____ **EXISTING** IMPERVIOUS SURFACES: **PROPOSED** IMPERVIOUS SURFACES: SQ. FT. Building footprint: _____ SQ. FT. **Building footprint:** _ SQ. FT. Parking & Drive areas: _____ SQ. FT. Parking & Drive areas: SQ. FT. Pool & Patio areas: _____ SQ. FT. Pool & Patio areas: _____ SQ. FT. _____ SQ. FT. Walkways: Walkways: _____ SQ. FT. _____ SQ. FT. Other: Other: TOTAL EXISTING IMPERVIOUS SURFACE: ______ SQ. FT. TOTAL PROPOSED IMPERVIOUS SURFACE: ______ SQ. FT. **Existing Impervious Total Proposed Proposed Impervious Total Existing** Lot Area Lot Area Impervious Surface Surface % Impervious Surface Surface % , certify that the calculations submitted above for the Impervious Surface Ratio are accurate and complete. ÁWWW (O.[]] | aBaa) of pae(^: ______