Door or Window Replacement Instructions and Checklist

Yes	No	ltem			
		Completed Application			
		The most recent FL product Approval Number			
		Installation Specifications			
		A notice of Commencement if the job value is over \$5000			
		Power of attorney if anyone other than the contractor is picking up the permit.			
		Disclosure Statement if work is done by the owner			
		A floor plan showing the location of the item being replaced. Egress windows must be identified and cannot be reduced in size.			
		Contractor license and insurance information			

- 1. Please submit all the paperwork indicated above to the City Building Department.
- 2. Please make sure that you do not start the job until you have a permit card in hand. Please be aware that permit cards must be visible from the road closest to the job.
- 3. Work must be completed in a timely manner and inspections must be called for as soon as the work is completed.
- 4. On the day of the inspection, the permit card and installation specs must be posted on the job.
- 5. Failure to call for an inspection, or to complete the work before 180 days will require a new permit and will require that you pull another permit.

			Dar	m:4		his permit, you		Permit Num	ıber
			Permit		may be required to receive approval from other State of				
			Applic	ation	Federal agenc	ies prior to			
You must sub	omit 3 copie	es of this form	. Only 1 has	Project Addre	ess				
be notarized if signed prior to coming			to City Hall.	Project Desc	ription				
Property ID Key/	/Number			Parcel Number	er				
Owner's Name		Mailing Addres	SS	•	City, State, Zip			Telephone	
General Contractor		Mailing Addres	ss		City, State, Zip)		Telephone	
Construction Contractor		Mailing Addres	ss		City, State, Zip)		Telephone	
Electrical Contractor		Mailing Addres	SS		City, State, Zip			Telephone	
Plumbing Contra	actor	Mailing Addres	SS		City, State, Zip			Telephone	
HVAC Contracto	or	Mailing Addres	SS		City, State, Zip			Telephone	
Roofing Contrac	tor	Mailing Addres	ss		City, State, Zip)		Telephone	
Legal Descriptio	n								
Bonding Compa									
Bonding Compa									
Architect's Name									
Architect's Addre	ess								
				Project In	formation				
Sub	division Na	ame	Phase	Lot No.	Model	Elevation	Lot Area	Impervious	Surface Ratio
Flood Zone									
F 1	ı	In.	Setbac		d over Requi		1	10: + 0: 1	1
Front Proj e	oot	Rear	rea	Side Electrical	Hvac	Corner	l iter	Street Side	/leter
New		Living	ii ea	Service Size		Municipal	llei	Size	leter
Alteration		Garage			Type	Well		Oize	+
Addition		Porch(s)		1	Effic	iency		Plumbing	3
Repair		Other		1	Airhandler		Sewer		<i>5</i>
Other		Total		1	Condenser		Septic		
Gara	ige	Number o	f Bedrooms		Cost / Value)		Code In Eff	ect
Attached Detached									
Detached									
Applicant Sign	ature					Date _			
WARNING TO C	OWNER: Your					. , .	•		ty. If you intend to
			attorney before r						
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. Permits expire 6 months after issuance. You are responsible for the completion									
of the permit, inspections, and all Re-Inspection Fees.									
The forces	ina inetru	mont was a	oknowloda	ad bafara i	mo thic		dov	, of	
The foregoing instrument was acknowled									م ماید،
is personally known to me or has produced as					as				
identification and who did or did not take an oath.									
(Seal)	(Seal)								
Notary Pub	olic								
White Copy Office				Yellow Co	opy Property Ap	praiser		Pink Copy Owr	ner

LIMITED POWER OF ATTORNEY

Date:				
I here	by name and appoint:			
an ag	ent of			
un ug		(Name of Company)		
	my lawful attorney-in-fact to a sary to this appointment for (cl	act for me to apply for, receipt for, sign for and do all the heck only one option):	ings	
	All permits and applications submitted by this contractor.			
	The specific permit and appl	ication for work located at:		
		(Street Address)		
Expir	ation Date for This Limited Po	ower of Attorney:		
Licen	se Holder Name:			
State	License Number:			
Signa	ture of License Holder:			
	TE OF FLORIDA NTY OF			
	20 by	acknowledged before me thisday of, who is □ personally known		
	to me or who has produced identification and who did (did	I not) take an oath.	_as	
		Signature		
(Nota	ry Seal)			
		Print or type name		
		Notary Public - State of Commission No My Commission Expires:		

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 \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 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.

Any person who aids and abets unlicensed contractors or subcontractors will face imposed penalties as provided by law.

Section 6. Subsection (1) of Section 455		
a profession; cease and desist notice; civ		
probable cause to believe that any perso		
regulatory board within the department o		
has violated any provision of this chapter		
regulated by the department, or any rule		
and deliver to such person a notice to ce		
department may issue and deliver a notice		
the unlicensed practice of a profession b		
enforcing a cease and desist order, the d		
seeking issuance of an injunction or a wr		
provisions of such order. In addition to t		
an administrative penalty not to excee		
shall be entitled to collect its attorney		
collection. This Day of		
Read The Preceding And Understand Th		
Having Been Noticed Of The Above Flori		
County And The State Of Florida. I further		
work proposed, and I assume full respon		
Codes and building regulations. In the ev		
I will make such corrections and call for a		
Building Division is not responsible for in-		
myself to code enforcement action by no		
prior to engaging in the use of the propos	sed development	Signature
of Owner/Builder		
State of Florida		
County of Lake		
I hereby certify that on this day, before m		
aforesaid to take acknowledgements, pe	rsonally appeared	who is
personally known to me or who has prod	uced	as identification
and who did/did not take an oath.		
Witness was bond and official and this	day of	40
Witness my hand and official seal this	day of	, 19
Notary Public		

Afte	er recording return to:	 		CE OF COMMENCEMENT			
Permit No:							
The	e undersigned hereby gives not apter 713, Florida Statutes, the	tice that improvement vertice that improvement vertices	will be made to cer s provided in this N	tain real property, and in accordance with Notice of Commencement.			
1.	Description of property:	(legal description	of the property, an	d street address if available)			
		Street Address:					
2.	General description of improv	vement:					
3.	Owner's Information:	Address: Interest in Propert	Name:				
4.	Contractor Information:	Name: Address: Telephone No		Fax No. (Opt.)			
5.	Surety Information:	Name: Address: Telephone No					
6.	Lender Information:	Name:		Fax No. (Opt.)			
7.	Persons within the State of F served as provided by Section	Florida designated by O on <u>713.13</u> (1)(a)7.,Florid Name:	wner upon whom la Statutes:	notices or other documents may be			
		Telephone No		Fax No. (Opt.)			
8.	In addition to himself or herse to receive a copy of the follow	elf, Owner designates _ wing Lienor's Notice as Name: Address:	Provided in Section	ofofon <u>713.13</u> (1) (b), Florida Statutes:			
		Telephone No		Fax No. (Opt.)			
9.	Expiration date of notice of codifferent date is specified)	, ,	piration date is 1 ye	ear from the date of recording unless a			
PA' PR	YMENTS UNDER CHAPTER 713, OPERTY. A NOTICE OF COMMEN	PART I, SECTION <u>713.13</u> ICEMENT MUST BE REC	, FLORIDA STATUT ORDED AND POST	XPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER ES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR ED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN ING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.			
				Signature of Owner or Owner's Authorized Officer/Director /Partner /Manager			
				Printed Name & Signatory's Title/Office			
The	foregoing instrument was acknowl	edged before me this	day of	, 20, by			
who	o is [] personally known to me or []	has produced		as identification and [] who did or [] did not take an oath.			
				Signature of Notary Public - State of Florida			
				Print, type or Stamp Commissioned Name of Notary Public			
	ification pursuant to Section 92.6 der penalties of perjury, I declare the		g and that the facts s	stated in it are true to the best of my knowledge and belief.			
				Signature of Natural Parson (Owner) Signing Above			