

City of Mascotte

Permit Checklist

Swimming Pool Permit

- 1. COMPLETED PERMIT APPLICATION
- 2. COPIES OF LICENSE AND INSURANCE
- 3. NOTICE OF COMMENCEMENT FOR JOBS VALUED AT OVER \$5,000
- 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



PERMIT APPLICATION

Date Received:_____ Permit #_____

PROJECT INFORMATION		PURPOSE OF APPLICA			TION			
Job Site Address:				Resident	ial	New 0	Construction	Living
City, State & Zip:				Multi-fan	nily	🗌 Addit	ion	Garage
Alternate Key #				Commer	cial	Altera	ition/repair	Porch(s)
Subdivision Lot				ndustrial		Demo	lition	Other
Sewer Septic						🗌 Other	-	Total
SCOPE OF WORK								
Job Description:								
Job Value \$		RE-ROOFS ONLY RO	OFIN	G MATER	IAL:			
Existing Site Development/ Current use of building:		Proposed use of building:						
OWNER'S INFORMATION				FEE S	SIMPL	E TITLEH	IOLDER (if diffe	erent than owner)
Name:				Name:				
Mailing Address:			Mailing	Mailing Address:				
City, State & Zip:			City, St	City, State & Zip:				
Phone #: Email:			Phone	Phone #: Email:				
CONTRACTOR INFORMATION								
Company Name:					Licens	e #		
Qualifier Name:					Phone #			
Mailing Address:					Email			
City, State & Zip:								
SUBCONTRACTORS								
Electrician:	Lice	nse #			Email:			
Mechanical:	Lice	nse #			Email:			
Plumbing:	Lice	nse #		Email:				
Gas: License #					Email:			
Roofer:	Lice	nse #			Email:			
Irrigation: License #				Email:				
Fire:	Lice	nse #			Email:			
INSPECTION CONTACT	-							
Super 1:	Em	nail:					Phone #	
Super 2: Email:							Phone #	
Super 3:	_	Email:			Phone #			
BONDING COMPANY		ARCHITECT/ENGINEER				MORTGAGE LEI	NDER	
Name:	Name:			Name:				
Address:	Ad	dress:					Address:	

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.

Application is hereby made to obtain a permit to do the work and installations 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 ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: 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.

I DO HEREBY SWEAR THAT THE INFORMATION CONTAINED HEREIN AND THE ATTACHMENTS HERTO ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT.

STATE OF FLORIDA
COUNTY OF

Sworn to (or affirmed) and subscribed before me by means of this _____ day of _____, 20___,

by _____.

Personally Known: 🗌	
Or Produced Identification:	
Type of Identification Produced	

Notary Signature

After recording return to:

Permit No:	
Tax Folio or Alternate Key #:	

NOTICE OF COMMENCEMENT Astatula, Clermont, Eustis, Fruitland Park, Howey in the Hills, Groveland, Lady Lake, Lake County, Leesburg, Mascotte, Minneola, Montverde, Mount Dora, Tavares, Umatilla

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

1.	Description of property:	Legal Description: (legal description	on of the property, and street address if available)
		Street Address:	
2	Concret description of improv		
2.	General description of improv	ement.	
3.	Owner's Information:	Address:	
		Interest in Property: Name and Address of fee simple t	titleholder (if other than owner):
4.	Contractor Information:	Name:	
		Address: Telephone No	Fax No. (Opt.)
5.	Surety Information:		
••		Address:	
			Fax No. (Opt.)
		Amount of Bond:	
6.	Lender Information:		
		Address:	
			Fax No. (Opt.)
7.		lorida designated by Owner upon whor n <u>713.13</u> (1)(a)7.,Florida Statutes: Name:	n notices or other documents may be
		Address:	
		Telephone No.	Fax No. (Opt.)
8.	In addition to himself or herse	elf, Owner designates	of
	to receive a copy of the follow	ving Lienor's Notice as Provided in Sec	ction <u>713.13</u> (1) (b), Florida Statutes:
		Address:	
		Telephone No.	Fax No. (Opt.)
9.		ommencement (the expiration date is 1	year from the date of recording unless a
PA) PRC	MENTS UNDER CHAPTER 713, I DPERTY. A NOTICE OF COMMEN	PART I, SECTION <u>713.13</u> , FLORIDA STAT ICEMENT MUST BE RECORDED AND PO	EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER UTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR STED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN NCING 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 acknowle	edged before me thisday of	, 20, by
who	is personally known to me or has p	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

Verification pursuant to Section <u>92.525</u>, 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.

IMPERVIOUS SURFACE RATIO WORKSHEET

IMPERVIOUS SURFACE 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.

IMPERVIOUS SURFACE RATIO (ISR) 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.

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EXISTING IMPERVIOUS SURFACES:

Wanthayo.	SQ. FT. Walkways: SQ. FT. Other: SQ. FT. TOTAL PROPOSED IM	SQ. FT. SQ. FT. IPERVIOUS SURFACE: SQ. FT.
Total Existing Lot Area Existing In	÷	IPERVIOUS SURFACE: SQ. FT.

PROPOSED IMPERVIOUS SURFACES:

_____, certify that the calculations submitted above for the Impervious Ι, _ Surface Ratio are accurate and complete.

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