

City of Mascotte

Permit Checklist

Screen Room Permit

- 1. COMPLETED PERMIT APPLICATION
- 2. COPIES OF LICENSE AND INSURANCE
- 3. NOTICE OF COMMENCEMENT FOR JOBS VALUED AT OVER \$2,500
- 4. PROPERTY RECORDS CARD SHOWING THE OWNER MATCHES THE OWNER ON THE APPLICATION
- 5. PLANS ELECTRONICALLY SIGNED BY AN ENGINEER/ARCHITECT
- SITE PLAN SHOWING THE DISTANCE BETWEEN THE SCREEN ROOM AND PROPERTY LINES
- 7. ISR WORKSHEET COMPLETED IF NEW CONCRETE WILL BE INSTALLED
- 8. OWNER BUILDER AFFIDAVIT IF WORK IS BEING DONE BY THE OWNER

Apply for your permit at the following address: https://portal.iworq.net/MASCOTTEFL/new-permit/600/5611

		C	ITY OF	MASC	OTTE	Perr	nit Number
		PERMIT APPLICATION					
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>					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		T	elephone
Email Address:	I			State License Number:		Talankan	
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>	Telephone	
Email Address:			State License	e Number:			
Plumbing Contractor	Mailing Addre	SS	City, State, 2	Zip		Т	elephone
Email Address:			State License Number:		Talanhana		
HVAC Contractor	Mailing Addre	SS	City, State, 2	Zip		<u> </u>	elephone
			0				
Email Address: Roofing Contractor	Mailing Addre	SS	State License Number: City, State, Zip		Telephone		
			-				
Email Address:			State License Number: City, State, Zip		Telephone		
Gas Contractor	Mailing Addre	SS	City, State, A	Zip		<u>'</u>	eiepnone
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 Lo	ot 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)		-		iency	Plumbing (check	one)
Repair Other	Other Total		-	Airhandler Condenser	1	Sewer Septic	
Ou IOI	i otai	1	END OF PAC		<u> </u>	Оерис	l

			PAGE 2 OF 2		
Attached Detached		Job Value		7th Edition Florida Building Code	
Signature of A			Date	latia at	
			ailure to record a N		
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					
			ne sole responsibilit		
			•	of easements. If the	
=			e structure does not		
			hes on an easeme	• •	
		• •		·	
•		•	cture, restoring the		
		·	making the structur		
		other land use red	quirements. Permits	s expire 6 months after	
issuance	e.				
			efore me this		
or has produ				who is personally known to me identification and who did	
or did not			ac	nachtinoation and who did	
			(Seal)		
			Notary Public		

Afte	er recording return to:					
Peri	mit No:	Astatula, Clermon Groveland, Lad	CE OF COMMENCEMENT of, Eustis, Fruitland Park, Howey in the Lake, Lake County, Leesburg, Masontverde, Mount Dora, Tavares, Umat	cotte,		
	rollo of Alternate Key #	<u> </u>				
		ce that improvement will be made to cerollowing information is provided in this N	ain real property, and in accordance with lotice 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	ement:				
3.	Owner's Information:	Name:	Pholder (if other than owner):			
4.	Contractor Information:	Name:Address:Telephone No	Fax No. (Opt.)			
5.	Surety Information:	Address: Telephone No.	Fax No. (Opt.)			
6.	Lender Information:	Name:	Fax No. (Opt.)			
7.	Persons within the State of Flo served as provided by Section	orida designated by Owner upon whom in 1713.13(1)(a)7.,Florida Statutes: Name:				
8.	In addition to himself or hersel to receive a copy of the followi	f, Owner designates ing Lienor's Notice as Provided in Section Name:	ofofofof			
9.		mmencement (the expiration date is 1 ye				
PA\	RNING TO OWNER: ANY PAYMEN MENTS UNDER CHAPTER 713, P. DPERTY. A NOTICE OF COMMENC	NTS MADE BY THE OWNER AFTER THE EX ART I, SECTION <u>713.13</u> , FLORIDA STATUT CEMENT MUST BE RECORDED AND POST	(PIRATION OF THE NOTICE OF COMMENCEMENT AR ES, AND CAN RESULT IN YOUR PAYING TWICE FOR ED ON THE JOB SITE BEFORE THE FIRST INSPECTION ING WORK OR RECORDING YOUR NOTICE OF COMM	IMPROVEMENTS TO YOUR ON. IF YOU INTEND TO OBTAIN		
			Signature of Owner or Owner's Authorized Officer/Di	rector /Partner /Manager		
			Printed Name & Signatory's Title/Office			
The	foregoing instrument was acknowled	dged before me thisday of	, 20, by			
who	is personally known to me or has pr	roduced	as identification and who did	or did not		
take	e an oath.		Signature of Notary Public - State of Florida			
		Print, type or Stamp Commissioned Name of Notary Public				
	ification pursuant to Section <u>92.52</u> ler penalties of perjury, I declare that		tated in it are true to the best of my knowledge and belief.			

Signature of Natural Person (Owner) Signing Above

OWNER MUST PERSONALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THIS DOCUMENT.

A POWER OF ATTORNEY <u>CANNOT</u> BE ACCEPTED.

Building, Plumbing and/or Mechanical Installation Disclosure Statement required by Florida Statute 489.103(7) and Electrical Disclosure statement per Florida Statute 489.503(6)

(Initial to the left of <u>each statement)</u>
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.
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.
3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that 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.
4. I understand that I may build or improve a one-family or two-family residence or a farm out building. 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, unless I am completing the requirements of a building permit where the contractor listed on the permit substantially completed the project. 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.
5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.
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.
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.
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

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.

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. 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(^: ______