Revised 2018

Screen Enclosure Checklist

Yes	No	Item Required			
		Plans signed and sealed by an engineer			
		A schematic showing the size and spacing of structural members			
	Notice of commencement for jobs valued over \$2,500				
	A completed permit application				
	A site plan showing the location, size and setbacks – drawing must be				
		Contractor License and Insurance Information			
A property records card		A property records card			
	A copy of the contract between the owner and contractor				
		A disclosure statement if work is being done by the owner			

- 1. Please be sure to have the permit on the job when performing the work.
- 2. Permit card must be visible from the road.
- 3. Request an inspection by emailing <u>inspectionrequest@alpha-inspections.net</u>.
- 4. All the above items can be sent via email to info@alpha-inspections.net

To Schedule An Inspection - email: inspectionrequest@alpha- inspections.net			Permit Application		In addition to this permit, you may be required to receive approval from other State of Federal agencies prior to commencing work			Permit Nur	nber	
You must submi	t 3 copie	s of this form	. Only 1 has	Project Addre	ess					
be notarized if s	igned pri	or to coming	to City Hall.	Project Descr	ription	SCREEN	ALUMIN	JUM		
Property ID Key/Nur	nber			Parcel Numbe	r	NOT RE	QUIRED			
Owner's Name		Mailing Addres	S		City, State, Zip		-	Telephone		
General Contractor		Mailing Addres	S		City, State, Zip			Telephone		
Construction Contra	ctor	Mailing Addres	S		City, State, Zip	I		Telephone	·	
Electrical Contractor	r	Mailing Addres	S		City, State, Zip	1		Telephone		
Plumbing Contracto	r	Mailing Addres	S		City, State, Zip			Telephone		
HVAC Contractor $\mathrm{N/A}$		Mailing Addres	S		City, State, Zip			Telephone		
Roofing Contractor N/A		Mailing Addres	S		City, State, Zip			Telephone		
Legal Description										
Bonding Company										
Bonding Company A	Address									
Architect's Name										
Architect's Address										
				Project In	formation					
Subdiv	ision Na	me	Phase	Lot No.	Model	Elevation	Lot Area	Imperviou	s Surface Ratio	
Flood Zone										
		1-	Setbac	ks Provided	l over Requi		T	.		
Front		Rear		Side		Corner	Ļ	Street Sid		
Project			rea	Electrical Service Size	Hvac		ater		Meter	
New Alteration		Living Garage		Service Size	Туре	Municipal Well		Size		
Addition		Porch(s)		-	Effic	iency		Plumbir)d	
Repair		Other		-	Airhandler		Sewer		9	
Other		Total			Condenser		Septic			
Garage	9	Number o	f Bedrooms		Cost / Value	•		Code In E	ffect	
Attached Detached		_								
Applicant Signatu				·		Date	•			
WARNING TO OWN										
obtain financing, cor the building setback determining complia	s have been ance with s	en met or that th etbacks and nor	e structure does n-encroachment d	not encroach on	an easement.	The owner and	d/or contractor	r have the sole	responsibility of	
of the permit, inspec	cuons, and	all Re-Inspectio	n Fees.							
The foregoing instrument was acknowledgec				d before me this			-	-		
is personally	known	to me or h	_, _, _, as produced	4					as	
identification (Seal) Notary Public	and wh				in oath.				<u> </u>	
White Copy Office	;			Yellow Co	py Property Ap	praiser		Pink Copy Ov	vner	

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 455.228 Florida Statutes F.S. 455.228 Unlicensed practice of a profession; cease and desist notice; civil penalty; enforcement.--- (1) When the department has probable cause to believe that any person not licensed by the department or the appropriate regulatory board within the department or the appropriate regulatory board within the department has violated any provision of this chapter or any stature that relates to the practice of a profession regulated by the department, or any rule adopted pursuant thereto, the department may issue and deliver to such person a notice to cease and desist from such violation. In addition, the department may issue and deliver a notice to cease and desist to any person who aids and abets the unlicensed practice of a profession by employing such unlicensed person. For the purpose of enforcing a cease and desist order, the department may file a proceeding in the mane of the state seeking issuance of an injunction or a writ of mandamus against any person who violates any provisions of such order. In addition to the foregoing remedies, the department may impose an administrative penalty not to exceed \$5,000.00 per incident, pursuant to F.S. 120.58, it shall be entitled to collect its attorney's fees and costs, together with any cost of _____ The Year _____, I, The Undersigned, Have collection. This Day of Read The Preceding And Understand The Responsibility Of Acting As My Own Contractor, And Having Been Noticed Of The Above Florida Statutes, Will Abide By The Laws Governing Lake County And The State Of Florida. I further state that I have the knowledge and ability to do the work proposed, and I assume full responsibility for familiarizing myself with all Lake County Codes and building regulations. In the event a building inspector requires corrections to be made, I will make such corrections and call for a re-inspection before proceeding. I understand the Building Division is not responsible for instructing me on what to do. I understand I may subject myself to code enforcement action by not requesting and obtaining. Final Inspection Approval prior to engaging in the use of the proposed development. _____ Signature of Owner/Builder

State of Florida County of Lake I hereby certify that on this day, before me, 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/did not take an oath.

Witness my hand and official seal this _____ day of _____, 19 ____,

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 of the property, and street address if available)					
		Street Address:					
2.	General description of impro-	vement:					
3.	Owner's Information:	Name:					
		Address:					
		Interest in Property:	e titleholder (if other than owner):				
		Name and Address of fee simple	s titlenolder (if other than owner):				
4.	Contractor Information:	Name:					
		Address:					
		Telephone No.	Fax No. (Opt.)				
5.	Surety Information:	Name:					
		Address:					
		Telephone No Amount of Bond:	Fax No. (Opt.)				
6.	Lender Information:	Name:					
		Address:					
		Telephone No.	Fax No. (Opt.)				
7.	Persons within the State of F served as provided by Section	n 713.13(1)(a)7.,Florida Statutes:	om notices or other documents may be				
		Address:	Fax No. (Opt.)				
8.	In addition to himself or herse	elf, Owner designates	of ection <u>713.13</u> (1) (b), Florida Statutes:				
	to receive a copy of the follow	Name:	ection <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) PR(MENTS UNDER CHAPTER 713, DPERTY. A NOTICE OF COMMEN	PART I, SECTION <u>713.13</u> , FLORIDA STA ICEMENT MUST BE RECORDED AND P	IE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER TUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR OSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN ENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.				
			Signature of Owner or Owner's Authorized Officer/Director /Partner /Manager				
			Printed Name & Signatory's Title/Office				
Th -	for a going in a trunch trunch a start and	adread before me this day of	20 hu				
ine	ioregoing instrument was acknowl	eugeu belore me misday or	, 20, by				

who 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

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.

LIMITED POWER OF ATTORNEY

Date	:	
I here	eby name and appoint:	
an ag	gent of:	
	gent of:(Name of Company)	
	e my lawful attorney-in-fact to act for me to apply for, receipt for, sign for and do all ssary to this appointment for (check only one option):	things
	All permits and applications submitted by this contractor.	
	The specific permit and application for work located at:	
	(Street Address)	
Expi	ration Date for This Limited Power of Attorney:	
Licer	nse Holder Name:	
State	e License Number:	
Signa	ature of License Holder:	
	TE OF FLORIDA JNTY OF	
	The foregoing instrument was acknowledged before me this $\ day$ of $ 20_ by \ who is \Box personally know$	wn
	to me or \Box who has produced	as
	Signature	
(Nota	ary Seal) Print or type name	
	Notary Public - State of	
	Commission No.	
	My Commission Expires:	