Addition Checklist

Yes	No	Required Item					
		Plans digitally signed by an engineer/architect					
		Truss drawings digitally signed if applicable					
		Energy calculations with A/C load calcuations if applicable					
		3 copies of a survey (see survey requirements below)					
		Permit application notarized					
		Product approval checklist					
		Property records card					
		Owner Builder affidavit if applicable					
		Copies of all listed contractor's license and insurance information					

- 1. Survey must be completed by a state of Florida licensed surveyor.
 - a. Must provide setback measurements from all sides
 - b. Septic tank location and size
 - c. Slab finished floor elevation
 - d. Yard drainage type A, B or C
 - e. Corner elevations
 - f. Flood zone type A, AE, C or X if applicable
- 2. Plans must be in compliance with the latest edition of the Florida Building Code
- 3. Plans can be submitted electronically at https://portal.iworq.net/MASCOTTEFL/new-permit/600/5611
- 4. Zoning will require a completed ISR form



PERMIT APPLICATION

Date Received:	
Permit #	

PROJECT INFORMATION		PURPOSE C			OF A	OF APPLICATION		
Job Site Address:		[Residential		☐ New (Construction	Living
City, State & Zip:		☐ Mu		Multi-fam	nily	Additi	on	Garage
Alternate Key #				Commerc	cial	☐ Altera	tion/repair	Porch(s)
Subdivision Lot				ndustrial		☐ Demo	lition	Other
Sewer Septic						☐ Other		Total
SCOPE OF WORK								
Job Description:								
Job Value \$		RE-ROOFS ONLY ROOFING MATERIAL:						
Existing Site Development/ Current use of building:		Proposed use of building:						
OWNER'S INFORMATION		FEE SIMPLE			LE TITLEHOLDER (if different than owner)			
Name:				Name:				
Mailing Address:			Mailing Address:					
City, State & Zip:				City, Sta	tate & Zip:			
Phone #: Email:				Phone i				
CONTRACTOR INFORMATION								
Company Name:					License #			
Qualifier Name:					Phone #			
Mailing Address:		Eı			Email	Email:		
City, State & Zip:								
SUBCONTRACTORS								
Electrician:	Lice	License #			Email:			
Mechanical:	Lice	License # Email:			ail:			
Plumbing:	License #				Email:			
Gas:	License #				Email:			
Roofer:	License #			Email:				
Irrigation:	License #				Email:			
Fire:	License #			Email:				
INSPECTION CONTACT								
Super 1:	Email:				Phone #			
Super 2:	Email:				Phone #			
Super 3:		Email:				Phone #		
BONDING COMPANY	AR	ARCHITECT/ENGINEER				MORTGAGE LEN	IDER	
Name:		Name:				Name:		
Address:	Ad	Address:				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.

CONTRACTOR OR OWNER/BUILDER SIGNATURE			
CONTRACTOR OR OWNER, BUILDER SIGNATURE			
STATE OF FLORIDA			
COUNTY OF			
Sworn to (or affirmed) and subscribed before me by means	of this _	day of	, 20,
by			
Personally Known:	Notary Sigr	 nature	
Or Produced Identification:	,		
Type of Identification Produced:			

Afte	er recording return to:	 		CE OF COMMENCEMENT				
	mit No: Folio or Alternate Key#:							
The	e undersigned hereby gives not apter 713, Florida Statutes, the	tice that improvement vertice that improvement vertically	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	(legal description of the property, and street address if available)					
		Street Address:						
2.	General description of improv	vement:						
3.	Owner's Information:	Address: Interest in Propert	ty:	eholder (if other than owner):				
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				

OWNER BUILDER DISCLOSURE STATEMENT

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 I 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 outbuilding. 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 no 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 (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will bide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand hat the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.
10. I understand that I may obtain more information regarding my obligations as an employer from the internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction industry Licensing Board at (telephone number) or (Internet website address) for more information about licensed contractors.
11. I am aware of, and consent to, an owner-builder building permit applied for in my name and inderstand that I am the party legally and financially responsible for the proposed construction activity at the ollowing address: (address of property).
12. I agree to notify (issuer of disclosure statements) immediately of any additions, deletions, or changes to may of the information that I have provided on this disclosure.
13. Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand hat, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.
14. Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.
Dwner Signature Date
state of
County of
worn to and subscribed and acknowledged before me this day of 20 who is personally known to meor
vho has produced
Notary Signature

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(^: ______