



# City of Mascotte

## Permit Checklist

### PV Solar Permit

1. COMPLETED PERMIT APPLICATION
2. COPIES OF LICENSE AND INSURANCE
3. NOTICE OF COMMENCEMENT FOR JOBS VALUED AT OVER \$5,000
4. PROPERTY RECORDS CARD SHOWING THE OWNER MATCHES THE OWNER ON THE APPLICATION.
5. 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.
6. PLANS SHOULD ADDRESS THE FOLLOWING CRITERIA
  - a. WIND SPEED 140 MPH
  - b. EXPOSURE C OR SHOW HOW IT'S SOMETHING ELSE
  - c. ROOF LAYOUT SHOULD SHOW ALL PANEL LOCATIONS, REQUIRED STRUCTURAL CONNECTION LOCATIONS, EXISTING ROOF PENETRATIONS, FIRE DEPARTMENT ACCESS LOCATION AND FIRE DEPARTMENT ACCESS PATHWAYS.
  - d. PLANS SHOULD CLEARLY SHOW METER LOCATIONS, AND ANY OTHER EQUIPMENT REQUIRED AS PART OF THIS INSTALLATION.
  - e. PLANS SHOULD SHOW ANY OTHER INFORMATION REQUIRED TO DETERMINE THE MINIMUM COMPLIANCE WITH THE APPLICABLE CODES.

Apply for a permit at: <https://portal.iworq.net/MASCOTTEFL/new-permit/600/5611>



# PERMIT APPLICATION

Date Received: \_\_\_\_\_

Permit # \_\_\_\_\_

PROJECT INFORMATION		PURPOSE OF APPLICATION		
Job Site Address:		<input type="checkbox"/> Residential	<input type="checkbox"/> New Construction	Living
City, State & Zip:		<input type="checkbox"/> Multi-family	<input type="checkbox"/> Addition	Garage
Alternate Key #		<input type="checkbox"/> Commercial	<input type="checkbox"/> Alteration/repair	Porch(s)
Subdivision _____ Lot _____		<input type="checkbox"/> Industrial	<input type="checkbox"/> Demolition	Other
<input type="checkbox"/> Sewer <input type="checkbox"/> Septic			<input type="checkbox"/> 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 TITLEHOLDER (if different than owner)		
Name:		Name:		
Mailing Address:		Mailing Address:		
City, State & Zip:		City, State & Zip:		
Phone #: _____ Email: _____		Phone #: _____ Email: _____		
CONTRACTOR INFORMATION				
Company Name:		License #		
Qualifier Name:		Phone #		
Mailing Address:		Email:		
City, State & Zip:				
SUBCONTRACTORS				
Electrician:	License #	Email:		
Mechanical:	License #	Email:		
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		ARCHITECT/ENGINEER		MORTGAGE LENDER
Name:		Name:		Name:
Address:		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

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 of the property, and street address if available)  
\_\_\_\_\_  
\_\_\_\_\_  
Street Address: \_\_\_\_\_
2. General description of improvement: \_\_\_\_\_
3. Owner's Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Interest in Property: \_\_\_\_\_  
Name and Address of fee simple titleholder (if other than owner): \_\_\_\_\_  
\_\_\_\_\_
4. Contractor Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
5. Surety Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_  
Amount of Bond: \_\_\_\_\_
6. Lender Information: Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
8. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_  
to receive a copy of the following Lienor's Notice as Provided in Section 713.13 (1) (b), Florida Statutes:  
Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone No. \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified) \_\_\_\_\_.

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING 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 acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 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.

\_\_\_\_\_  
Signature of Natural Person (Owner) Signing Above

## PV Solar Plan Review Checklist

Please check all of the boxes below and submit this with your application.

- Plans show compliance with the current editions of the Florida Building Code. This includes wind zone and exposure category called out on the plans.
- Plans show a roof plan with all roof penetrations (vents etc.) with panel overlay.
- Plans show an attachment detail for the panel to the roof with spacing of supports.
- Plans show an electrical schematic that complies with the NEC.
- Plans have been submitted as one file digitally signed by the engineer of record or are approved by the FSEC.
- The day of the final inspection, pictures must be provided showing the following: Roof with support system installed prior to panel placement (tape measure showing spacing of fasteners), pictures of combiner boxes after all conductors are installed, pictures of conductors run through the attic and any other pictures that support the case that the system was installed per the approved plans.

Signature: \_\_\_\_\_

Email: \_\_\_\_\_

Name: \_\_\_\_\_

Phone: \_\_\_\_\_

Job Address: \_\_\_\_\_

**Please note that if this document is not submitted with the plans, a review will not be started**