

BUILDING PERMIT REQUIREMENTS FOR NEW CONSTRUCTION AND ADDITIONS

Before any development activity occurs on a piece of property, a permit must be obtained. All construction or permitted uses MUST meet the current Building Code for the State of Florida. The inspector will perform inspections and provide approval based on these codes.

Below are a list of items required at time of application submittal. Please note that incomplete applications will NOT be accepted.

Complete permit application, notarized by all applicable parties.

Copy of signed contract, if applicable.

Owner-Building Affidavit, unless contractor is performing work.

Proof of ownership (i.e. Current tax notice, Homestead Exemption notice, Recorded Deed).

Two copies of the site plan, drawn to scale.

Two c±mplete sets of signed and sealed construction drawings and supporting documentation



CITY OF EUSTIS -- BUILDING PERMIT APPLICATION

111 E. Orange Avenue, P. O. Drawer 68, Eustis, FL 32727-0068 Telephone: 352-483-5462---Fax: 352-589-2651

Code in Effect: FLORIDA BUILDING CODE 2020, (7th Edition)

Property Owner	Conti	actor(Applicant)		
Address	Licens	se Holder			
CityZip	Licens	se Number			
State Zip	Addre	ess			
PhoneFax	Cıty _		Sta	teZip	
	Phone			Fax	
	E-mai	l Address:			
Project Address		Alt.	. Key #		
Subdivision	Phase	Alt.	Blk	Lot	
Responding to a Code Violation?Yes	NoIf "Yes	Within a Histo	oric District?ation must be pro	Yesvided on your	No Site Plan.
Contract Price/Value: \$	Proposed P	roject Description	/Scope:		
WARNING TO OWNER: YOUR FAMAY RESULT IN YOUR PAYING NOTICE OF COMMENCEMENT MUBEFORE THE FIRST INSPECTION. IF YOUR LENDER OR AN ATTORNEY NOTICE OF COMMENCEMENT.	TWICE FO JST BE RE FYOU INTE	OR IMPROVE CORDED A CND TO OBT	EMENTS TO ND POSTE AIN FINANO	O YOUR PR D ON THI CING, CON	OPERTY. A E JOB SITE ISULT WITH
NOTICE: In addition to the requirements of this perifound in the public records of this county, and there remanagement districts, state agencies, or federal agence	nay be additiona				
I certify that, per Chapter 469, F.S., Asbestos Abat Demolition Form, and will comply with all require prior to the commencement of demolition or renovati	ments, including				
I DO HEREBY SWEAR THAT THE INFORMATION AND ACCURATE TO THE BEST OF MY KNOWI		ED HEREIN AND	THE ATTACH	IMENTS HER	ETO ARE TRUE
SIGNATURE (Contractor/Applicant)			DAT	TE	
STATE OF FLORIDA					
COUNTY OF LAKE					
The foregoing instrument was acknowledged before	me this	day of	, who is per	20sonally known	by to me or who
has produced				as identifica	ition.
			Notary	Public	
Permit Application Form – Jan 2020					

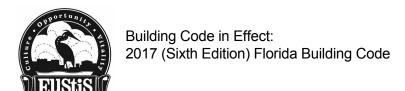
Permit Application Form – Jan 2020

Permit #

BUILDING PERMIT APPLICATION - PAGE 2

CONTRACTOR—PLEASE COMPLETE INFORMATION AND SIGN IN APPROPRIATE BLOCK BELOW. BY SIGNING BELOW, I HEREBY SWEAR THAT I AM IN COMPLIANCE WITH FLORIDA'S WORKER'S COMPENSATION LAW AND THAT I HAVE SECURED COVERAGE OR HAVE A VALID CERTIFICATE OF EXEMPTION.

Building Contr	actor:	M/H Set-up Cont	M/H Set-up Contractor:State/Cert/Reg #				
State/Cert/Reg #	#	State/Cert/Reg #					
Address		Address	Address				
City		City					
State	Zip	State	Zip				
	Fax		Fax				
	Email:	Cell	Email:				
Signature		Signature					
Plumb Contrac	ctor:	HVAC Contracto	or:				
State/Cert/Reg #	#	State/Cert/Reg #_					
Address		Address					
City		City					
State	Zip	State	Zip				
	Fax		Fax				
Cell	Email:	Cell	Email:				
Signature		Signature					
Elec. Contract	or:	LP Gas Contract	or:				
State/Cert/Reg #	#	State/Cert/Reg #_					
Address		Address					
City		City					
State	Zip	State	Zip				
Phone	Fax	Phone	Fax				
Cell	Email:	Cell	Email:				
Signature		Signature					
Specialty Cont	ractor:	Engineer/Archite	ct:				
State/Cert/Reg #	#	State/Cert/Reg #_					
Address							
City							
State	Zip						
Phone	Fax						
Cell	Email:						
Signature							
			<i>E – ENERGY EFFICIENCY</i> , REQ				
			N ALL NEW CONSTRUCTION <u>AN</u>				
			ROVIDE CERTIFICATION THAT A				
DUCTWORK	HAS BEEN INSPECTED AND	ALL NECESSARY REP.	AIRS/TAPING HAVE BEEN COMP	LETED.			
Approved by	y	Date	:				



Permit Number:	
----------------	--

Important!

Yes No (Check one) I am filling and /or excavating the property. If yes, provide the Finish Floor Elevation (FFE), lot corner elevations and drainage plan for the site. Depending on the type of development, not all information will be required. Note: Failure to respond correctly will make you personally liable for future damages.

III. OWNER & LENDER INFO							
A. OWNER OR LESSEE	EMAIL ADDRESS			FAX NO.			
NAME				TELEPHONE NO.			
ADDRESS		CITY		STATE	ZIP CODE		
B. BONDING/MORTGAGE NAMES							
Fee Simple Titleholder, Bonding Company, Mortgage Lender and Design Professional information is required when the aggregate value (total cost of all improvements and not just work authorized by the individual permit) is \$2,500 or more (except HVAC repair/replacement > \$7,500).							
NAME	ADDRESS,	CITY,	STATE	& ZIP	TELEPHONE NO.		
FEE SIMPLE TITLEHOLDERS (IF OTHER THAN OWNER)	☐ SAME AS OWNER						
BONDING COMPANY							
MORTGAGE LENDERS							
DESIGN PROFESSIONAL LICENSE #		·					
	PRIMARY CONTACT EMAIL	ADDRESS		PRIMARY CONTACT CE	LL PHONE NO.		



HOMEOWNER AFFIDAVIT

Parcel ID #:			_
Property Owners Name:			_
Property Owners Address:			_
The undersigned, being first duly sworn by me an office the State of Florida as follows:	er authorized t	to take oaths and make acknow	/ledgments in
Notice to Property Owner: Prior to filling out a Notice of any lending institution that you may have applied for a to your property.		•	•
The Notice of Commencement should not be filed before	ore the mortga	ige or construction loan is close	d.
"FAILURE TO COMPLY WITH THE MECHANICS' LIE PAYING TWICE FOR THE BUILDING IMPROVEMEN WITH THE CLERK OF THE COURT, AND A COPY M TO THE FIRST INSPECTION.	NTS". NOTICE	E OF COMMENCEMENT MUS	T BE FILED
Property Owners Signature	Date		
STATE OF FLORIDA, COUNTY OFSworn to and subscribed before me this	_ day of	, 20_	
Personally Known OR Produced Identification Type of Identification Produced:		Signature of Notary Public - State of Flori	da
		Print, Type or Stamp Commissioned Nan	ne of Notary Public

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 \$75,000 or less. The building must be for your own use or occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within one 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.

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 name 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 collection.

FLORIDA BUILDING CODE 2020, BUILDING 105.3.6 ASBESTOS REMOVAL: State law requires asbestos abatement 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 asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within one year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state aw 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.

ANY PERSON WHO AIDS AND ABETS UNLICENSED CONTRACTORS OR SUBCONTRACTORS WILL FACE IMPOSED PENALTIES AS PROVIDED BY LAW.

1. I understand that state law requires construction to be done by a licensed contractor and have applied for an ovexemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contreven though I do not have a license.	
I understand that building permits are not required to be signed by a property owner unless he or she is responsib not hiring a licensed contractor to assume responsibility.	le for the construction and is OWNER INITIAL
3. I understand that, as an owner/builder, I am the responsible party of record on a permit. I understand that I may financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own nar 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 bubuilding if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or lease, who construction is complete, the law will presume that I built or substantially improved it for sale or lease, who	y not be built or substantially eased within 1 year after the
5. I understand that, as the owner/builder, I must provide direct, onsite supervision of the construction.	OWNER INITIAL

PAGE 1 OF 2 REV Jan 2020

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. OWNER INITIAL
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. OWNER INITIAL
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. OWNER INITIAL
9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws are requirements that govern owner/builders as well as employers. I also understand that the construction must comply with all applicable laws ordinances, building codes, and zoning regulations. OWNER INITIAL
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 may contact the Florida Construction Industry Licensing Board at WWW.DBPR.COM for more information about licensed contractors. OWNER INITIAL
11. I am aware of, and consent to, an owner/builder building permit applied for in my name and understand that I am the party legally and
financially responsible for the proposed construction activity at the following address: OWNER INITIAL
OWNER MITTAL
12. I agree to notify the Building Department, immediately of any additions, deletions, or changes to any of the information that I have provided or this disclosure. **OWNER INITIAL** **OWNER INITIAL**
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 financia 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 that 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.
This Day of the Year, I, the undersigned, have 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 the municipality having jurisdiction 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 the municipality having jurisdiction 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 Department 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.
STATE OF FLORIDA, COUNTY OF SIGNATURE OF OWNER/BUILDER AND DATE
I HEREBY CERTIFY that on this day, before me on this day of, 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.

PAGE 2 OF 2 REV Jan 2020

NOTARY PUBLIC

	and Return to:						
File No:		Prepared by:		Name			
	0.:	Address:			_		
-	D/Parcel ID:						
		NOT		OMMENCEM	IENT		
State of				of			
		ives notice that improver ormation is provided in the			al property, and in accord	dance with Chapter	713, Florida
1.		/: (Legal description of t					_
2.	General Description of	Improvement:					_
3.	Owner Information: Na	ame:			State		_
	Address: Interest in Property:		_ City:		State		
	Name and Address of	Fee Simple Titleholder (f other than o	wner):			_
4.	Contractor: Name:						
٦.	Address:		City:		State		<u> </u>
	Phone No.			Fax No			
5.	Surety: Name:				Amount of Bond \$ State		_
	Address: Phone No.		City:	Fay No.	State		_
6.	Lender: Name:		City		State		_
	Phone No.		_ City	_ Fax No	State		_
7.	Section 713.13(1)(a)(7	7). Florida Statutes:	•		es or other documents		
8.		or herself, Owner designa e Lienor's Notice as prov			oflorida Statutes.		_
9.	•	tice of commencement		n date is 1 year	from the d ate of recor	rding unless a diffe	rent date is
PAY CAN A NO SITE CON	IRATION OF TIMENTS UNDER RESULT IN YOUTICE OF COME BEFORE THE SULT WITH YO	HE NO TICE OF R CHAPTER 71 DUR PAYING T IMENCEMEN T E FI RST INSPE	F COMM 3, PART WICE FO MUST E CTION. DR AN	ENCEMEN 1, SEC 7' OR IMPRO BE RECORI IF YOU II ATTORNE	E BY THE OW IT ARE CONSII 13.13, FLORID IVEMENTS TO DED AND POS NTEND TO OB Y BEFORE COI NT.	DERED IMPI A STATUTE: YOUR PROF TED ON THE TAIN FINAN	ROPER S, AND PERTY. E J OB CI NG,
Signatu	re of Owner or Owner's	Authorized Officer/Direc	tor/Partner/Ma	anager			
Signato	ry's Title/Office						
	Florida, County of						
The fore	egoing instrument was a	cknowledged before me	thisfor	_ day of	, 20 <u>by</u> (National of the control	ame of Person)	, as
(Type o	f authority e.g., office, tr	ustee, attorney in fact)		(Name of party	on behalf of who instru	ment was executed)	
Signatur	e of Notary			Print,	Type or Stamp Name of No	tary	—
Persona	lly known OR Produc	ced Identification T	pe of Identifica	tion Produced:			
	tion pursuant to Section true to the best of my kno		under Penaltie	s of perjury, I decl	are that I have read the fo	pregoing and that the	facts stated

Signature of Natural Person Signing Above