PERMIT CHECKLIST

Before any development activity occurs on a piece of property, a permit is required from the local jurisdiction. A permit is required before carrying out any building activity; the making of any material change in the use, or change in appearance of any structure.

PLEASE READ AND UTILIZE THIS CHECKLIST CAREFULLY TO ASSIST YOU IN ORGANIZING AND PREPARING YOUR APPLICATION PACKAGE FOR SUBMITTAL

INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED

Items Required At Time Of Submittal Of Application Package:

1. ___ BUILDING PERMIT APPLICATION Indicate the Electric Utility Company
2. ___ COPY OF SIGNED DATED CONTRACT - (if applicable), or value of project.
3. ___ RAISED SEAL FLOOD ELEVATION SURVEY W/SPOT ELEVATION WHERE STRUCTURE TO BE LOCATED
   Required if any part of property in an A zone or V zone
4. ___ LEGAL DESCRIPTION - Section, Township, Range, Lot, and Block, Parcel #, Alternate Key #and Subdivision name.
5. ___ PROOF OF OWNERSHIP – i.e., Current tax notice, Homestead Exemption Notice, Certificate of Title, or Recorded
   Deed.
6. ___ PROOF OF PAYMENT – IMPACT FEE (if applicable--collected).
7. ___ THREE (3) SEALED SETS OF CONSTRUCTION PLANS (Signed & Sealed by Florida Architect or Engineer).
8. ___ TRUSS/RAFTER UPLIFT LOAD SUMMARY SHEET. AND TRUSS LAYOUTS.
9. ___ THREE (3) ENERGY FORM 600A, B, or C.
10. ___ THREE (3) LOAD CALCULATIONS FOR HVAC
11. ___ THREE (3) COPIES OF HVAC DUCT LAYOUT. (Attached to plans)
12. ___ THREE (3) COPIES OF A SITE PLAN: Drawn to scale (1"=30') (one inch equals thirty feet) using Site plan or survey
   with the following showing:

** PLEASE BE SURE EACH OF THE ITEMS LISTED BELOW ARE INCLUDED ON THE SITE PLAN **
A. Dimensions of the property.
B. Location of all existing and proposed structures.
C. Setbacks from all property lines to existing and proposed structures.
D. Location of all roads and right-of-ways (including center lines) in relation to the property.
E. A directional arrow indicating North.
F. The scale used for the site plan (such as 1" = 30')
G. Septic, drain field, and well location on the proposed building site. If any one of these locations is within 75 feet of the
   property line, then the site plan must encompass those areas adjoining the proposed building site indicating location of
   property’s septic, drain field and well locations are.
H. Location of all natural and man made surface waters (i.e., lakes streams, canals, wetlands, etc.).
I. Location of proposed and/or existing water lines and meters.
J. Location of driveways and sidewalks.
K. Location of LP tanks, size, type. Distance from tank to structure. Distance from all external ignition sources, i.e. air conditioner.

13. ___ NOTICE OF COMMENCEMENT (Certified and Recorded for projects $2,500 or more—mechanical $7,500 or more)
14. ___ OWNER/BUILDER DISCLOSURE STATEMENT & AFFIDAVIT. (If applicable)
15. ___ ONE (1) COMPLETE STATE HEALTH DEPT. APPLICATION PACKAGE REQUIRED TO BE SUBMITTED TO THE HEALTH
   DEPARTMENT FOR SEPTIC AND/OR WELL. (If Applicable).
16. ___ PROVIDE COPY OF APPLICABLE STATE AND LOCAL LICENSES, PROOF OF WORKERS COMPENSATION INSURANCE
   OR EXEMPTION (for contractor and all subcontractors; see Permit Application).
17. ___ THREE (3) PRODUCT APPROVAL SHEETS

877-686-4677
municipal@capriengineering.com (email)

05-01-08
2010 FLORIDA BUILDING CODE IN EFFECT 03-15-2012

BUILDING PERMIT APPLICATION

Date Rcvd: _______ Time Rcvd: _______ Rcvd By: _______

PERMIT #: __________________ COMMERCIAL ____ RESIDENTIAL ____ OWNER/BUILDER ____

Property Owner: _____________________________________________________________
Address: ___________________________ City: ___________________________ State: ______ Zip:_____
Phone: ___________________________ Fax: ________________________________

Commercial Property Owner: ________________________________________________
Address: ___________________________ City: ___________________________ State: ______ Zip:_____
Phone: ___________________________ Fax: ________________________________

Applicant: ________________________________________________________________
Address: ___________________________ City: ___________________________ State: ______ Zip:_____
Phone: ___________________________ Fax: ________________________________

PROPOSED PROJECT DESCRIPTION/SCOPE

PROJECT ADDRESS
Subdivision: __________________ Phase: ______ Blk: ______ Lot: ______
Directions to Project Site: _____________________________________________________

PARCEL #: ALT KEY #: __________________ BONDING COMPANY: __________________
POWER COMPANY: __________________

It is agreed that in all respects the work will be performed & completed in accordance with the permitted and applicable codes of the local jurisdiction. This permit may be revoked at any time upon violation of any of the provisions of said laws, ordinances, or rules & regulations, or upon any unauthorized change in the original approved plans. This permit becomes invalid if an inspection for permanent construction is not requested within 180 days or more than 6 months has elapsed between inspections. In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal governments.

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.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other government entities, such as water management districts, state agencies, or federal agencies.

I DO HEREBY SWEAR THAT THE INFORMATION CONTAINED HEREIN AND THE ATTACHMENTS HERETO ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE.

SIGNATURE (OWNER/AGENT/APPLICANT/CONTRACTOR): ________________________________

STATE OF FLORIDA, COUNTY OF: ________________________________

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 produced ______________________ as identification, and did not take an oath. Witness my hand and official seal this ______________ day of _______________, 20____.

__________________________
Notary Public

PERMIT APPROVED BY BLDG DEPT REPRESENTATIVE ____________________________

CONTRACTOR(S) - COMPLETE PAGE 2

Page 1 of 2  REV 03-15-12
CONTRACTOR—PLEASE COMPLETE INFORMATION AND SIGN IN APPROPRIATE BLOCK BELOW. BY SIGNING BELOW, I HEREBY SWORE 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 CONTRACTOR ____________________________  MIH SETUP CONTRACTOR ____________________________
STATE/CERT/REG # ______________________________  STATE/CERT/REG # ______________________________
ADDRESS ______________________________________  ADDRESS ______________________________________
STATE __________________________ ZIP __________  STATE __________________________ ZIP __________
PHONE __________________________ FAX __________  PHONE __________________________ FAX __________
CELL __________________________ EMAIL: __________  CELL __________________________ EMAIL: __________
SIGNATURE ____________________________________  SIGNATURE ____________________________________

PLUMB. CONTRACTOR ____________________________  HVAC CONTRACTOR ____________________________ (*)
STATE/CERT/REG # ______________________________  STATE/CERT/REG # ______________________________
ADDRESS ______________________________________  ADDRESS ______________________________________
STATE __________________________ ZIP __________  STATE __________________________ ZIP __________
PHONE __________________________ FAX __________  PHONE __________________________ FAX __________
CELL __________________________ EMAIL: __________  CELL __________________________ EMAIL: __________
SIGNATURE ____________________________________  SIGNATURE ____________________________________

ELEC. CONTRACTOR ____________________________  LP GAS CONTRACTOR ____________________________
STATE/CERT/REG # ______________________________  STATE/CERT/REG # ______________________________
ADDRESS ______________________________________  ADDRESS ______________________________________
STATE __________________________ ZIP __________  STATE __________________________ ZIP __________
PHONE __________________________ FAX __________  PHONE __________________________ FAX __________
CELL __________________________ EMAIL: __________  CELL __________________________ EMAIL: __________
SIGNATURE ____________________________________  SIGNATURE ____________________________________

SPECIALITY CONTRACTOR ____________________________  ENGINEER/ARCHITECT ____________________________
STATE/CERT/REG # ______________________________  STATE/CERT/REG # ______________________________
ADDRESS ______________________________________  ADDRESS ______________________________________
STATE __________________________ ZIP __________  STATE __________________________ ZIP __________
PHONE __________________________ FAX __________  PHONE __________________________ FAX __________
CELL __________________________ EMAIL: __________  CELL __________________________ EMAIL: __________
SIGNATURE ____________________________________

(*) NOTE TO HVAC CONTRACTOR: FLORIDA BUILDING CODE - ENERGY EFFICIENCY, REQUIRES THAT THE CONTRACTOR PROVIDE MANUAL J (RESIDENTIAL) & MANUAL N (COMMERCIAL) ON ALL NEW CONSTRUCTION AND REPLACEMENT HVAC SYSTEMS; CONTRACTOR MUST ALSO PROVIDE CERTIFICATION THAT ALL DUCTWORK HAS BEEN INSPECTED AND ALL NECESSARY REPAIRS/TAPING HAVE BEEN COMPLETED.
**SITE PLAN**

<table>
<thead>
<tr>
<th>Site Plan For:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lot:<strong><strong><strong><strong>, Block:</strong></strong></strong></strong>, Subdivision:________ (Platted or Unrecorded)</td>
</tr>
<tr>
<td>Parcel Zoning:________</td>
</tr>
<tr>
<td>Setbacks (in ft.): Front ______, Side ______, Rear ______, Property Size ______</td>
</tr>
</tbody>
</table>

Scale Used 1" = __________

---

1. Show property size in feet.
2. Show all street frontage and names.
3. Show any water frontage or wetland areas.
4. Show all existing and proposed buildings and their sizes.
5. All drawings must be to scale.
6. Show all existing and proposed driveways and entrances.
7. Show location of well and septic tank and distances between them and structures, property lines and any water.
8. Indicate North.
9. Indicate subdivision name, lot and block numbers (or letters) or parcel number if unrecorded subdivision. (Information can be found on deed or tax bill.)

Note: Site Plan may be drawn on another form if all information requested above is included.

12-04-07
City of Cedar Key
Air Conditioning Change Out Form
Air Conditioning System

PERMIT # _______________ Commercial _______ Residential _______ Received _______

COMMERCIAL NOTE: ONE FORM REQUIRED FOR EACH SEPARATE A/C SYSTEM INSTALLED

Single Packet Unit: _______ Split System_______ Ductless Mini _______
Any Duct Replacement: YES _______ NO _______
Refrigerant Line Replacement: YES _______ NO _______
* Rooftop AC Stand Installation: YES _______ NO _______
  (over 2000 cfm)

NEW REPLACEMENT
System Components

Manufacturer _____________________________
AIR HANDLER Model # _____________________
SEER/ EER ______________________________
Size _______ tons  Heat Strip _______ KVA/ KW
HACR Breaker/ Fuse Size: _______ min _______ max
Wire Size __________________________________
Refrigerant type __________________________
Location: _______ Existing _______ New
Configuration: _______ Horizontal _______ Vertical

Manufacturer _____________________________
CONDENSER Unit Model # ___________________
SEER/ EER ______________________________
Size _______ tons
HACR Breaker/ Fuse Size: _______ min _______ max
Wire Size __________________________________
Refrigerant type __________________________
Location: _______ Existing _______ New
Configuration: _______ Horizontal _______ Vertical

OLD EXISTING
System Components (if known)

Manufacturer _____________________________
SEER/ EER ______________________________
Size _______ tons  Heat Strip _______ KVA/ KW
EXISTING HACR Breaker/ Fuse Size: __________
Refrigerant piping sizes (Liq) _______ (Suc) _______
Refrigerant type ____________________________

Manufacturer _____________________________
SEER/ EER ______________________________
Size _______ tons
EXISTING HACR Breaker/ Fuse Size: __________
Refrigerant piping sizes (Liq) _______ (Suc) _______
Refrigerant type ____________________________

Certification
With the authorization of the installing Contractor, I certify that the information entered on this form accurately represents the system(s) installed.

________________________________________
Signature of Applicant
Date
Owner-Builder Information

Only a licensed contractor or the legal property owner can obtain a building permit.

If an applicant applies as an owner/builder, the building must be for their own use and occupancy. It may not be for sale or lease. If an owner/builder sells or leases the building within one year after construction is completed, the law will presume that it was built for sale or lease, which is a violation of Florida State Statute 489.103 (7).

It is the owner/builders responsibility to make sure the employees working for them have the required licenses from the state and/or county municipal licensing ordinances. Any person working on the building who is not licensed must work under the owner/builders direct supervision and must be employed by them. The owner/builder must provide worker’s compensation as prescribed by Florida law as well as comply with the IRS requirements concerning F.I.C.A. and withholding taxes.

Do not hire an unlicensed contractor to perform work

Homeowners who hire unlicensed contractors potentially face several costly penalties. The Department of Business and Professional Regulation can issue an order to stop construction and can levy a $5,000 fine for aiding and abetting unlicensed contractors.

Click on the following, Owner-Builder Builder Disclosure Statement, to be directed to the form which must be signed, notarized, and included with your permit application.
OWNER-BUILDER Disclosure Statement

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 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.

NOTICE: DON’T RISK IT! 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 statute 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.

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 of the jurisdiction having authority.

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 local 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 Department of Development 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 ____________

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 ______________, 20__.

Notary Public

05-01-08
NOTICE OF COMMENCEMENT

State of Florida  County of _________________________

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida State Statutes, the following information is provided in this Notice of Commencement.

1. Description of Property: (Legal description of the property):
   Property Address:________________________________________________________

2. General Description of Improvement:
   ________________________________________________________________

3. Owner Information: Name: ____________________________  City: ___________  State: ____________
   Interest in Property: ____________________________________________________
   Name and Address of Fee Simple Titleholder (If other than owner):
   ________________________________________________________________

4. Contractor: Name: ____________________________  City: ___________  State: ____________
   Address: ____________________________________________________________
   Phone No. ____________________________________________________________
   Fax No. _____________________________________________________________

5. Surety: Name: ____________________________  Amount of Bond $ ____________
   Address: ____________________________________________________________
   Phone No. ____________________________________________________________
   Fax No. _____________________________________________________________

6. Lender: Name: ____________________________  City: ___________  State: ____________
   Address: ____________________________________________________________
   Phone No. ____________________________________________________________
   Fax No. _____________________________________________________________

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: ____________________________  City: ___________  State: ____________
   Address: ____________________________________________________________
   Phone No. ____________________________________________________________
   Fax No. _____________________________________________________________

8. In addition to himself or herself, Owner designates ____________________________
   ____________________________________________________________
   to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

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 1, SEC 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BERecorded 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.

Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

Signatory's Title/Office

State of Florida, County of ____________

The foregoing instrument was acknowledged before me this _______ day of ________, 20__ by ________________ as ____________________________
   (Name of Person)
   ____________________________ for (Name of party on behalf of who instrument was executed)
   (Type of authority e.g., office, trustee, attorney in fact)

Signature of Notary

Print, Type or Stamp Name of Notary

Personally known _____ OR Produced Identification _____ Type of Identification Produced: ____________________________

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 Signing Above

12-11-07