



CITY OF FLAGLER BEACH BUILDING DEPARTMENT

INTERIOR / EXTERIOR RENOVATION / FIRE SAFETY PERMIT CHECKLIST

Contractors must be current with Flagler County Building Services for permitting.

- Permit Application**
- Proof of Property Ownership** (Copy of recorded warranty deed or print out from the Property Appraiser's Office)
- Disclosure Statement** (owner is acting as his/her own contractor) **FS 489.103**
- Notice of Commencement** (required when value of labor and materials is over **\$2,500.00**) Recorded and certified by the Flagler County Clerk of Court FS sec 713.135
- 1 Set of Sealed Plans** (detailed scope of work, manufacturers drawings or booklet , including wind loads & fastening detail)
- 1 Electronic Set of Plans** (For large formatted plans, thumb drive, CK, e-mail...)

Applicant must obtain all required inspections including the final inspection. Failure to close out permits may result in additional fees and/or suspension of permitting rights.



CITY OF FLAGLER BEACH
BUILDING DEPARTMENT

BUILDING PERMIT APPLICATION

FOR BUILDING USE ONLY
Permit # _____
Fee \$ _____

1. Property Owners Name: _____
Mailing Address: _____ Phone Number: _____

2. Location/Job Address: _____
Parcel # _____ Block: _____ Lot: _____

3. Contractor / Installer: _____
Address: _____ State License _____
City/State/Zip Code _____ Phone # _____
Fax # _____ Cell # _____
E-mail _____

4. Description of Work: [] Commercial [] Residential

5. Construction Dumpster [] Contractor Owned [] Dumpster Company's Name: _____

6. Total Square Footage Under Roof (Square footage subject to state surcharge): _____
(Total square footage under roof - including but not limited to: new construction, carports, roofed screen rooms, modular buildings, boathouses, accessory structures) DCA Rule 9B-62.003

7. Type of Construction, Occupancy Classification and Area Totals:
Type of Construction (circle one): IA IB IIA IIB IIIA IIIB IV VA VB
Occupancy Classification (circle one): A-1 A-2 A-3 A-4 B E F-1 F-2 H-1 H234 H-5 I-1
I-2 I-3 I-4 M R-1 R-2 R-3 R-4 S-1 S-2 U
Living Area: _____ square feet Non Living: _____ square feet # of Rooms (total): _____
of Bedrooms: _____ # of Bathrooms: _____ # of Stories: _____ # of Habitable Floors: _____
Patio: _____ square feet Driveway: _____ x _____ Pool Area (including deck): _____
Mobile Home: Make _____ Model _____ Year _____ Serial Number _____
Specify Single or Double Wide _____ Width _____ x Length _____ (without hitch) = Sq Ft _____
Is this a replacement home? _____ YES or _____ NO (If yes provide proof)

8. Total Cost of Improvements: \$ _____

9. Sub Contractor Information

• **Electrical Contractor:** _____ License Holders Name _____
State License # _____ Size of Electrical Service: Phase _____ Amps _____

• **Plumbing Contractor:** _____ License Holders Name _____
State License # _____ # Bathrooms _____ # Fixtures, Drains & Traps _____

• **Mechanical Contractor:** _____ License Holders Name _____
State License # _____ Total Cost of Mechanical \$ _____ Size of Unit _____ tons

• **Roofing Contractor:** _____ License Holders Name _____
State License # _____ Total Cost of Roof \$ _____
Type of Roof to be Installed _____ Square Footage of Structure _____

• **Aluminum Contractor:** _____ License Holders Name _____
State License # _____ Total Cost of Aluminum Structure \$ _____
Square Footage under Solid Roof Panels _____

• **Gas Contractor:** _____ License Holders Name _____
State License # _____ Total Number of Outlets _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work 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.

*To qualify as an owner/builder, the owner of the property must personally appear at Flagler Beach Building Dept. and sign this application. (FS §489.103.7b)

“FAILURE TO COMPLY WITH THE MECHANICS LIEN LAW CAN RESULT IN THE PROPERTY OWNER PAYING TWICE FOR THE BUILDING IMPROVEMENTS”

(Signature) (Printed Name)

(Check one)

IS SIGNING AS: CONTRACTOR MOBILE HOME INSTALLER OWNER*

State of Florida County of Flagler

The foregoing instrument was acknowledged before me by means of physical presence or online notarization this _____ day of _____, 20__ by _____ individual submitted by Personal knowledge Satisfactory Evidence; Type _____.

_____, Notary Public
Signature of Notary Public Typed, Printed or Stamped Name of Notary Public



CITY OF FLAGLER BEACH BUILDING DEPARTMENT
OWNER BUILDER DISCLOSURE STATEMENT

Florida Statutes F.S.489.103(7) quoted here in part for your information to indicate the authority for exemptions for homeowners from qualifying as contractors and to express any applicable restrictions and responsibilities.

- 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 all permit 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. If a building or residence that I have built or substantially improved myself is sold or leased within in 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates this 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 individual 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 ordinance.
7. I understand that it is frequent practices of unlicensed persons to have the property owner obtain owner-builder permits 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.
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 abide by all applicable laws and 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. I am of aware of construction practices and I have access to the Florida Building Code.
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 1-850-487-1395 or at www.myflorida.com/dbpr/pro/cilb/ 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 understand that I am the party legally and financially responsible for the proposed construction activity at the address listed below.
12. I agree to notify the building department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure or in the permit application package.

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, the Department of Business and Professional Regulation and the building department 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 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 property licensed and the status of the contractor's workers' compensation coverage.

ACKNOWLEDGMENT: I do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above. I agree to comply with all provisions of the City of Flagler Beach ordinances and codes pertinent to the building. In the event the corrections are required to be completed for code violations, I will assume responsibility to insure they are made and upon completion I will call for a re-inspection before proceeding with the building. I will assume full responsibility for the construction and I will not expect supervision of my work from the Building Department. I agree to pay any additional fees, including re-inspection fees in full prior to requesting a final inspection.

Property Address: _____

Signature of Owner-Builder _____

Print Name _____

State of Florida
County of Flagler

The foregoing instrument was acknowledged before me by means of [] physical presence or [] online notarization this ___ day of ___, 20__ by ___ individual submitted by [] Personal knowledge [] Satisfactory Evidence; Type _____.

Signature of Notary Public _____

Typed, Printed or Stamped Name of Notary Public _____, Notary Public



CITY OF FLAGLER BEACH PRODUCT APPROVAL PERMIT APPLICATION INFORMATION

PROJECT DESIGN CRITERIA		YES	NO
COASTAL CONSTRUCTION ZONE (SEAWARD OF CCCL LINE (EXP C, 3109 FBC))			
COASTAL BUILDING ZONE (BARRIER ISLAND)			
WINDBORNE DEBRIS REGION (EAST OF 140 MPH LINE (1609.1.2 FBC))			
IF APPLICABLE, METHOD OF COMPLIANCE WITH SECTION 1609.1.2 "PROTECTION OF OPENINGS"			
CHECK APPROPRIATE METHOD			
	1609.1.2 FBC		
	IMPACT RESISTANT GLASS (1609.1.2 FBC)		

SPECIAL NOTE:
 IT IS THE APPLICANTS SOLE RESPONSIBILITY TO VERIFY THAT SPECIFIC PRODUCTS HAVE BEEN INSTALLED IN ACCORDANCE WITH THEIR LIMITATIONS (FOR EX.: WINDOWS, DOORS, GARAGE DOORS, SKYLIGHTS AND SHUTTER SYSTEMS NEED TO MEET THE MINIMUM REQUIRED DESIGN PRESSURES FOR THE PROJECT). SPECIFIC COMPLIANCE WILL BE VERIFIED DURING FIELD INSPECTIONS.

TYPE	MANUFACTURER	MODEL#/SERIES	RESERVED FOR PLANS EXAMINER USE	FLORIDA APPROVAL # (INCLUDE DECIMAL IF APPLICABLE)	FLORIDA APPROVAL pdf FILE # (IF APPLICABLE)	MIAMI/DADE N.O.A. (IF APPLICABLE)
EXTERIOR DOORS						
SWINGING						
"						
"						
SLIDING						
"						
"						
OVERHEAD						
"						
"						
OTHER						
WINDOWS						
SINGLE HUNG						
DOUBLE HUNG						
HORIZONTAL ROLLING						
CASEMENT						
FIXED						
AWNING						



CITY OF FLAGLER BEACH PRODUCT APPROVAL PERMIT APPLICATION INFORMATION

PASS THRU						
SKYLIGHT						
OTHER						
TYPE	MANUFACTURER	MODEL#/SERIES	RESERVED FOR PLANS EXAMINER USE	FLORIDA APPROVAL #	FLORIDA APPROVAL PDF FILE # (IF APPLICABLE)	MIAMI/DADE N.O.A. (IF APPLICABLE)
ROOFING						
SHINGLES FIELD VERIFY						
METAL						
TILE						
OTHER						
SHUTTERS						
ROLL-UP						
PANELS						
PLYWOOD	<input type="checkbox"/> (CHECK HERE IF THIS METHOD IS CHOSEN)					
OTHER						
STRUCTURAL COMPONENTS						
HURRICANE ANCHORS		(SPECIFY MANUFACTURER(S))				
ENGINEERED LUMBER						
LINTELS						
INSULATION FORMS						
OTHER						

CONTRACTOR or OWNER/CONTRACTOR SIGNATURE: _____ DATE: _____
 JOB LOCATION: _____

THE FOLLOWING ALTERNATIVES ARE ACCEPTABLE IF THE PROPOSED PRODUCTS DO NOT HAVE VOLUNTARY STATE APPROVAL OR MIAMI/DADE ACCEPTANCE:

- Copy of product approval/esting information and copy of listing -or- report from a Product Certification Agency approved by the Florida building commission for each different covered product. Approved product certification agencies are shown @ www.floridabuilding.org (click on the product approval button, then click on the organization search tab).
- Copy of product approval/esting information from a Florida Building Commission approved Product Evaluation Entity or Product Testing Laboratory and documentation showing the manufacturer has a Florida Building Commission approved Quality Assurance Agency on retainer. Submittals are required for each different covered product. Approved Product Evaluation Entities, Product Testing Laboratories and Quality Assurance Agencies are shown on the above referenced website (click on the product approval button, then on the organization search tab).