CONSTRUCTION PERMIT APP	201 S.E. 3rd Street (MANAGEMENT DEPARTMENT Second Floor), Ocala, FL 34471 uilding@ocalafl.org or online at T3/(registered contractors only) Phone: (352) 629-8421
<i>At the time of plan submittal, a site plan in compliance w</i> <i>the compliance of</i>	with section 107.2.6, of the Florida Building Code will of natural drainage and finish drainage must be shown	be required. With the submittal of plans,
PERMIT TYPE: (BLD) (ELEC) (PL	MB) (HVAC) (GAS) (SITE) (ALA	RM) (OTHER-)
RESIDENTIAL OR COMMERCIAL	OCCUPANCY CLASSIFICATION	CONST TYPE
SUB TRADES involved with this project (mark	all that apply): HVAC ELEC PLM	I GAS
(Subcontractors are required to obtain their own		
PROJECT NAME:	PARCEL ID:	
LOCATION:		
Street Number Street Name MASTER PERMIT NUMBER:		
Property Owner:	Phone #	
Owner Email (print clearly):		
Mailing Address:	State Zip	
Street Address City	State Zip	
Contractor Name:	Contact Name:	
Contractor's License #:	Phone #	
Contractor Email (print clearly):	Fax #	
Mailing Address: Street Address City	State Zip	
Architect / Engineer:		
A/E Email (print clearly):		
**ELECTRONIC PLAN SUBMISSION REQ The applicant will have all permissions to acc for making changes to plans based on review	ess comments, markups and uploading of file	s into the project, and is responsible
Applicant's email address will be used as the	login ID to access your account in our ePlans	system.
Applicant Name:	Phone:	
Applicant Email Address:		
Submittal Notes: Each sheet of the plan set shall name as when initially submitted. Stamped, appr		
Applicants may add others to the project in eithe group allows the permission to accept and comp		0 11
EXISTING/PREVIOUS USE:	PROPOSED USE:	
SCOPE OF WORK:		
DESCRIPTION OF IMPROVEMENT New: Sq FtAlteration/Repair Pool / Spa Addn: Sq FtFoundation Only Retaining W		E \$
	(
ALL PERMIT	TTING FEES ARE NON-REFUNDABLE	

BUI	LDING CLASS	SIFICATION:						
Multi	-Familyunits	New SFR	Stores/Mercantile	Subdivision	Educational			
Hotel	/Motelunits	Industrial	Business	Cellular Tower	Hospital/Institutional Restau	urant		
Dorm	nitoryunits	Parking Garage	Amusement/Recreation	Multi Use	Public Bldg/Utility			
Ware	houseunits	Service Stations/Repair	Accessory Structure	Office	Non-Bldg Structure			
		Church	Day Care					
TOT	TAL NUMBER	OF STORIES						
SHE	ELL PERMITS:	;						
1.	When a Shell Of	NLY permit is obtained, a	Certificate of Completion v	will be issued in lier	of a Certificate of Occupa	ancy.		
2.	Energy Forms and	re required per Florida Bui	ilding Code, Energy Conse	ervation, 6 th Edition	(2020)			
FLO	DOD ZONE:	YES NO						
Min	. Finish Floor Ele	evation FEN	MA Base Elevation	Substantia	1 Improvement			
	> All new cons	struction and substantial impro	ovements shall be designed (o	r modified) and adeq	uately anchored to prevent flo			
		ment of the structure resulting struction of residential structure						
	LDR Sec. 90-	-52-2a.						
		rtifications 90-34. Sites locate in the Elevation of the lowest						
	elevation cert	tificate required prior to issua	nce of permit. Interim survey	required after slab po	oured. No further inspections	until interim		
		nd compliant with preliminary y shall be submitted for review						
EX	ISTING BUILDI	NG: Olevel 1 O le	vel II O level III	O REPAIR	O HISTORIC			
		O RELOCATED	O MOVED BUILDING	CHANGE OF				
A	PPLICABLE CO	DES: 2020 FL Building Cod	-	0				
		020 FL Gas Code // 2020 FL						
	20	20 FL Gas Couc // 2020 FL		Energy Code // 2020	The Accessionity Cour			
APPLICATION CHECKLIST					Applicant	Staff		
Pro	vide the following	for <u>ALL</u> construction:			Initials	Initials		
1. Completed Permit Application								
2. Certified copy of recorded Notice of Commencement								
Pro	vide the following	for NEW, ADDITIONS, SH	IED AND UTILITY BUILD	INGS: (if alteration	s/repairs, go to next section	<u>)</u>		
3.	Construction pla	ans						
4.	4. Truss Plans and layout							
5.	Product Approv	val Specification Sheet						
	(Products that rec	quire approval are any compo	nents and products comprisin	g a building's exterio	r such as			
		rior doors, roofing products, s						
6.								
7.								
8.	911 Address Ap	plication						
9.								
10.								
11.								
12.	12. Completed Driveway Connection Application							
	13. Water meter size (proposed or existing)							

Provide the following for ALTERATIONS/REPAIRS:

- 3. Construction plans
- 4. Energy Calculations (signed by the preparer and the Owner/Agent)
- 5. HVAC Duct Layout and Manual J & DForms
- 6. Completed Driveway Connection Application
- 7. HVAC SEER Rating _____

If your job scope involves work in the Right of Way (ROW), you are responsible for obtaining a ROW Utilization Permit from the Transportation Engineering Division. Applications are available on their web page, or you may call 352-351-6733 for more information. A building permit will not be issued without clearance from Transportation Engineering.

NOTICE

Application is hereby made to obtain a permit to do the work and installation 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. I understand that a separate permit may be required for ELECTRIC, PLUMBING, SIGNS, IRRIGATION WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS and AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I certify that the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

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 AT THE MARION COUNTY CLERK OF COURTS AND A CERTIFIED COPY FILED AT THE BUILDING DEPARTMENT BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

OWNER:		or	CONTRACTOR:				
Owner's Signature	Date		Contractor's Signature	Date			
		NOTARY					
STATE:			STATE:				
COUNTY:			COUNTY:				
The foregoing instrument was a	cknowledged before	The foregoing instrument was acknowledged before					
me by means of physical pre	sence or online	me by means of physical presence or online					
notarization, this day of _		notarization, this day of,					
20, by		20, by					
Who is personally known to me	or has produced	Who is personally known to me or has produced					
Identification. Type of ID produce	ced:		Identification. Type of ID produced:				
Notary Public signature			Notary Public signature				
Print/Type/Stamp Commissioned Name of Notary Public			Print/Type/Stamp Commissioned I	Name of Notary Public			
P	ursuant to Florida Statut	te 713.135(7), a	ll signatures must be notarized.				

How to Complete the Permit Application

- Permit Type: Select the type of permit being applied for. If not in the list, enter type under Other
- Is the property **Residential or Commercial**use?
- **Occupancy Classification/Building Type**: this information can be found on the building plans, usually on the first page
- Sub Trades: Mark which trades will be involved for the project.
- Project Name: Enter the name of the business the work is being done for or the homeowner's name
- Parcel ID: this is the parcel identification number for the property, found on your property tax bill.
- Location: Enter the current address, or leave space blank and follow the instructions and submit the Address Requestapplication. Include building number and unit number, if applicable.
- Master Permit #: Enter the site plan or building permit for this job if one exists
- **<u>Property Information</u>** Fill in all blanks in this section
- **Property Owner of Record**: Enter who the current property owner is. If it has been recently sold, we will need a copy of the Special Warranty Deed.
- Daytime Phone number/mailing address: phone number and mailing address of property owner
- Subdivision/Lot/Block/Unit/Section/Township/Range: Enter information from the property's legal description
- <u>Contractor</u> Fill in all blanks in this section
- <u>Architect/Engineer</u> Fill in all blanks in this section for the person responsible for the drawings.
- **Contact Person for plan review:** Enter name, phone, and email for the person that can answer technical questions.
- Electronic Plan Review: Please fill out this section in its entirety for electronic plan review via Projectdox/ePlans.
- Use: List what the building is/was used for and what is being proposed.
- Scope of Work: Describe the work being done. If needed, attach a separate form for scope of work.
- Description of Improvement: Enter square footage under new or additional and mark what type of improvement.
- **Total Job Value:** Excluding the lot, what is the job value of the work to be performed? Must include labor and materials in your cost, whether a contractor or homeowner is doing the work.
- Building Classification: Select how this building is classified
- Number of Stories: Fill in the number of floors
- Flood Zone: Access city maps at <u>www.ocalafl.org</u> to check to see if your property is in a flood zone.
- Existing Building: Mark what type of construction
- Application Checklist items: Initial all that apply to ensure that all items are being submitted.
- HVAC SEER rating: If mechanical work is to be done, enter the SEER rating of the equipment being installed.

<u>Page 3 – Signatures</u> – The Owner and Contractor signatures need to be completed before a Notary Public. All Building permit technicians are notaries and will provide this service for you at no cost.

Owner/Agent Electronic Submission statement – The owner (or agent representing the owner) needs to sign this section when submitting plans electronically. If you have selected a contractor, the contractor also needs to sign this section.