



# Building Permit Application

Gilchrist County Building Department  
 209 South East First Street Trenton, FL 32693  
 Phone: (352) 463-3173 Fax: (352) 463-3189

Owner's Name		
Address		
City, State Zip		
Phone number		
Project Address		
Contractor Name		
License Number		
Phone Number		
Parcel ID NO.		
Valuation of Project: \$		Square Feet:
Description of Work:		

2010 Florida Building Code & 2010 Florida Fire Prevention Code Apply Check All The Boxes That Apply To The Proposed Job:

Permit Type	Submittals
<input type="checkbox"/> Single Family Dwelling	See Attached Residential Requirements NEW, ADDITION, RENOVATION
<input type="checkbox"/> Commercial	See Attached Residential Requirements NEW, ADDITION, RENOVATION
<input type="checkbox"/> Modular Building	2-sets of the State Approved Plan, engineered foundation plan, energy gauge, right-J load, site plan, Notice of Commencement, Zoning Approval, Sewage Waste Permit
<input type="checkbox"/> Aluminum Structures	2-sets of the engineered plan, elevations, site plan, Notice of Commencement, Zoning Approval,
<input type="checkbox"/> Modular Building	2-sets of the State Approved Plan, engineered foundation plan, energy gauge, right-J load, site plan, Notice of Commencement, Zoning Approval, Sewage Waste Permit
<input type="checkbox"/> Foundation Only	Two sets of engineered foundation plan and Notice of Commencement
<input type="checkbox"/> Swimming Pool	Site Plan, Engineered Pool Plan, Electric, Plumbing, Affidavit for Swimming Pool Owners, Notice of Commencement
<input type="checkbox"/> Roofing	Florida Product Approval(s) & Product Installation Details, Manufactures' Installation Instructions, Notice of Commencement if applicable
<input type="checkbox"/> Mechanical HVAC Change-out	Required for Permitting Wright J-Load and AHRI Certification Notice of Commencement if applicable
<input type="checkbox"/> Other Specify:	ELECTRIC ONLY

# ROOFING PERMIT APPLICATION

Roof Valuation \$ \_\_\_\_\_

CHECK THE BOXES THAT APPLY TO THIS PERMIT:

- Re-roof Number of Squares \_\_\_\_\_ or Square Footage \_\_\_\_\_
- Roof-over
- Residential       Commercial
- Asphalt Shingles - Florida Product Approval # \_\_\_\_\_
- Structural Metal Roofing - Florida Product Approval # \_\_\_\_\_

**INSTALLATION INSTRUCTION MANUALS FOR ROOFING MATERIALS ARE REQUIRED TO BE SUBMITTED WITH APPLICATION BEFORE PERMIT CAN BE ISSUED.**

I herby certify that I have read and examined this application and know the same to be true and correct. All provisions of laws and ordinances governing this type of work shall be complied with whether specified herein or not.

Contractors Signature \_\_\_\_\_ Date: \_\_\_\_\_

STATE OF FLORIDA, COUNTY OF Gilchrist

The foregoing information was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_,

by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_ as identification, and did not take an oath.

Notary Public, State of Florida \_\_\_\_\_ Stamp:

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

Approved by: \_\_\_\_\_ Date: \_\_\_\_\_

**ANY WORK STARTED PRIOR TO THE ISSUANCE OF A PERMIT WILL RESULT IN DOUBLE PERMIT FEES**



## **Gilchrist County Building Permit Application**

### **DISCLOSURE STATEMENT OWNER CONTRACTOR AND/OR ASBESTOS ABATEMENT PERMIT**

FLORIDA STATUTES 489.103/469.002 & FLORIDA BUILDING CODE 104.4.4 F. S. 489.103

STATE LAW REQUIRES CONSTRUCTION TO BE DONE BY LICENSED CONTRACTOR. YOU HAVE APPLIED FOR A PERMIT UNDER AN EXEMPTION TO THAT LAW. THE EXEMPTION ALLOWS YOU AS, OWNER OF YOUR PROPERTY, TO ACT AS YOUR OWN CONTRACTOR EVEN THOUGH YOU DON'T HAVE A LICENSE. **YOU MUST SUPERVISE THE CONSTRUCTION YOURSELF.** YOU MAY BUILD OR IMPROVE A ONE OR TWO-FAMILY HOME RESIDENCE OR A FARM BUILDING. YOU MAY ALSO BUILD OR IMPROVE A COMMERCIAL BUILDING AT A COST OF \$25,000 OR LESS. **THE BUILDING MUST BE FOR YOUR OWN USE AND OCCUPANCY. IT MAY NOT BE BUILT FOR SALE OR LEASE.** IF YOU SALE OR LEASE MORE THAN ONE BUILDING YOU HAVE BUILT WITHIN ONE YEAR AFTER THE CONSTRUCTION IS COMPLETE. THE LAW PRESUMES THAT YOU HAVE BUILT IT FOR SALE OR LEASE, WHICH IS A VIOLATION OF THIS EXEMPTION. YOU MAY NOT HIRE AN UNLICENSED PERSON AS YOUR CONTRACTOR. IT'S YOUR RESPONSIBILITY TO MAKE SURE THE PEOPLE EMPLOYED BY YOU HAVE LICENSES REQUIRED BY THE STATE LAW AND COUNTY LICENSING ORDINANCES. ANY PERSON WORKING ON YOUR BUILDING WHO ISN'T LICENSED MUST WORK UNDER YOUR SUPERVISION AND MUST BE EMPLOYED BY YOU, WHICH MEANS THAT YOU MUST DEDUCT F.I.C.A AND WITHHOLDING TAX AND PROVIDE WORKERS COMPENSATION FOR THAT EMPLOYEE, AS PRESCRIBED BY LAW, YOUR CONSTRUCTION MUST COMPLY WITH ALL APPLICABLE LAWS, ORDINANCES, BUILDING CODES, AND ZONING REGULATIONS. OWNERS MUST PROVIDE DIRECT, ONSITE SUPERVISION THEMSELVES OF ALL WORK NOT PERFORMED BY LICENSE CONTRACTORS, THAT DUTY CANNOT BE DELEGATED.

F.S. 469.002 & FLORIDA BUILDING CODE 104.4.4

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 LAW AND BY COUNTY OR MUNICIPAL LICENSING ORDINANCES.

#### 507.2.2 Roof diaphragm.

Where roofing materials are removed from more than 50 percent of the roof diaphragm of a building or section of a building where the roof diaphragm is a part of the main wind force-resisting system the integrity of the roof diaphragm shall be evaluated and if found deficient because of insufficient or deteriorated connections, such connections shall be provided or replaced.

I CERTIFY BY MY SIGNATURE THAT I HAVE READ AND UNDERSTAND THIS DISCLOSURE STATEMENT AND THAT I SHALL COMPLY WITH ALL THE REQUIREMENTS FOR ISSUANCE OF AN OWNER/BUILDER PERMIT.

\_\_\_\_\_  
PROPERTY OWNER/CONTRACTOR

\_\_\_\_\_  
DATE

**NOTICE OF COMMENCEMENT**

State of Florida County of \_\_\_\_\_

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

Legal Description of property (include the street address, if available)

\_\_\_\_\_  
\_\_\_\_\_

General Description of

Improvements \_\_\_\_\_

Owner \_\_\_\_\_

Address \_\_\_\_\_

Contractor \_\_\_\_\_

Address \_\_\_\_\_

Surety \_\_\_\_\_

Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_

Any person making a loan for the construction of the improvements:

Name \_\_\_\_\_

Address \_\_\_\_\_

Person within the State of Florida designated by owner upon who notices or other documents may be served as Provided by Section 713.13(1) (a) 7. Florida Statutes.

Name \_\_\_\_\_

Address \_\_\_\_\_

In addition to himself, owner

designee \_\_\_\_\_

of \_\_\_\_\_

To receive a copy of the Lien or Notice as provided in Section 713.13(1) (b), Florida Statutes.

Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless different date is specified).

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Printed Name of Owner

Notary Stamp Seal Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_

Affiant is personally known to me \_\_\_\_\_ or

Affiant provided the following type of Identification: \_\_\_\_\_

Notary Seal:

\_\_\_\_\_  
Notary Signature



## Owner Builder Affidavit

Florida Statutes are 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.

**OWNERS MUST PERSONALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THIS DOCUMENT**

**BY SIGNING THIS STATEMENT, I ATTEST THAT:** *(Initial to the left of each statement)*

	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.
	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.
	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 permits and contracts.
	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.
	I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.
	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.
	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.
	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. <u>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.</u> I understand that my failure to follow these laws may subject me to serious financial risk.
	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 aware of construction practices and I have access to the Florida Building Code.
	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 <a href="http://www.myflorida.com/dbpr/pro/cilb/">www.myflorida.com/dbpr/pro/cilb/</a> for more information about licensed contractors.
	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 properly licensed and the status of the contractor's workers' compensation coverage.

Property Address: \_\_\_\_\_

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.

\_\_\_\_\_  
Signature of Owner-Builder

\_\_\_\_\_  
Date

***A violation of this exemption is a misdemeanor of the first degree punishable by a term of imprisonment not exceeding 1 year and a \$1,000.00 fine in addition to any civil penalties. In addition, the local permitting jurisdiction shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.***

Personally Known

Form of ID: \_\_\_\_\_

\_\_\_\_\_  
Notary Signature

Notary Stamp: