



Jackson County Building Department
 4487 Lafayette St.
 Marianna, FL 32448
 850-482-9802, Fax 850-718-0029
permitting@earthlink.net

THIS SECTION FOR OFFICE USE ONLY
 Master Permit #: _____
 Date: _____
 Accepted by: _____

CONSTRUCTION PERMIT APPLICATION
 RESIDENTIAL OR COMMERCIAL
 CODE IN EFFECT: FLORIDA BUILDING CODE

<p>Owner Information:</p> <p>Owner Name: _____</p> <p>Project Name: _____</p> <p>Project Address: _____</p> <p>Owner Phone #: _____</p> <p>Driving Directions: _____</p> <p>_____</p>
<p>Project Information:</p> <p>Type of Building: <input type="checkbox"/> Residential <input type="checkbox"/> Commercial</p> <p>Class of Work: <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alter/Repair <input type="checkbox"/> Other: _____</p> <p>Purpose of Building: <input type="checkbox"/> Single Family <input type="checkbox"/> Duplex <input type="checkbox"/> Multi-Family <input type="checkbox"/> Commercial</p> <p> <input type="checkbox"/> Industrial <input type="checkbox"/> Barn <input type="checkbox"/> Garage/Carport <input type="checkbox"/> Storage <input type="checkbox"/> Other: _____</p> <p>Square Footage _____ Valuation of Work \$ _____</p> <p><u>Type of Termite Treatment Being Used:</u> _____</p>
<p>Contractor Information:</p> <p>Name: _____</p> <p>Company Name: _____</p> <p>Florida State License # _____ County Comp Card # _____</p>
<p>Architect / Engineer Information:</p> <p>Name: _____</p> <p>Address: _____</p> <p>Phone Number: _____</p> <p>Florida State License # _____ County Comp Card # _____</p>

Fl Statute, 713.135 (7)

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation 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 must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNANCES, BOILERS, HEATERS, TANKS, AND AIR CONDITIONERS, etc ...

I understand all REQUIRED INSPECTIONS will be requested of the work permitted herein. Compliance will be strictly enforced. This permit is VOID after six (6) months from issuance unless the work it covers has been commenced and has had ongoing inspections.

The Building Official may revoke this permit or remove service, in case there has been any false statement or misrepresentation as to the material fact in the application or plans, which this permit was based.

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FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOU LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. FOR IMPROVEMENT TO REAL PROPERTY WITH A CONSTRUCTION COST OF \$2,500 OR MORE, A CERTIFIED COPY OF THE NOTICE ON COMMENCEMENT IS REQUIRED TO BE SUBMITTED TO THE BUILDING DEPARTMENT WHEN APPLICATION IS MADE FOR A PERMIT OR THE APPLICANT MAY SUBMIT A COPY OF THE NOTICE OF COMMENCEMENT ALONG WITH AN AFFIDAVIT ATTESTING TO ITS RECORDING. A CERTIFIED SECOND OF ANY SUBSEQUENT INSPECTION CAN'T BE PERFORMED UNTIL FILING OF THE DOCUMENT. FILING OF THE DOCUMENTS THAT HAVE BEEN CERTIFIED MAY BE DONE BY MAIL, FACSIMILE, OR HAND DELIVERY.

NOTICE

IF YOU ARE RENOVATION OR DEMOLISHING A COMMERCIAL, INDUSTRIAL, OR GOVERNMENT OWNED BUILDING OR RESIDENTIAL STRUCTURE, THE FEDERAL EPA REGULATIONS CONCERNING ASBESTOS MAY APPLY TO YOUR PROJECT. YOUR OBLIGATIONS TO COMPLY WITH THOSE REGULATIONS ARE NOT SATISFIED BY MEETING THE REQUIREMENTS OF THE LOCAL BUILDING DEPARTMENT TO OBTAIN A BUILDING OR DEMOLITION PERMIT.

SIGNATURE OF OWNER / AGENT / CONTRACTOR

DATE

SIGNATURE OF WITNESS

DATE

Owner Use Only

OWNER'S AFFIDAVIT:

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

Florida Statutes, 489.103 (7):

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 with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. 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. You 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 your building who is not licensed must work under your direct 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, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

Signature OWNER / CONTRACTOR

Date

STATE OF FLORIDA
COUNTY OF JACKSON

The foregoing instrument was acknowledged before me this _____ day of _____, 20____.
By _____ who is personally known to me or who has produced _____
as identification, and who did not take an oath.

Notary Public

(affix stamp)