



# AWNING/SHADE SHUTTER PERMIT APPLICATION

# 17

### Job Information

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

Owner: \_\_\_\_\_ Permit #: \_\_\_\_\_

Tenant name: \_\_\_\_\_ Tax/Folio #: \_\_\_\_\_

Job address: \_\_\_\_\_

Owner's mailing address: \_\_\_\_\_

Permit expiration date: \_\_\_\_\_ Est. cost: \_\_\_\_\_

Legal Address Unit \_\_\_\_\_ Block \_\_\_\_\_ Lot \_\_\_\_\_

Type of awning: \_\_\_\_\_ Number of awnings: \_\_\_\_\_

Actual Setbacks (feet): Front: \_\_\_\_\_ Rear: \_\_\_\_\_ LSide: \_\_\_\_\_ Rside: \_\_\_\_\_

Description of work: \_\_\_\_\_

Is this material fire retardant? Yes No Total square footage: \_\_\_\_\_

### Contractor Information

Contractor: \_\_\_\_\_ State Cert/CC Comp Card #: \_\_\_\_\_

Qualifier's name: \_\_\_\_\_ Job rep: \_\_\_\_\_

Address: \_\_\_\_\_ Phone #: \_\_\_\_\_ Fax: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

*Sub-Contractor information must be supplied if other work will be performed*

Sub-Contractor: \_\_\_\_\_ State Cert/CC Comp Card #: \_\_\_\_\_

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

### The Following must be included with the application:

- \_\_\_\_\_ Two (single family or multi-family) or Three (commercial) sets of plans showing the design, size and location of the awning/shade shutter to be installed.
- \_\_\_\_\_ Two (single family or multi-family) or Three (commercial) copies of engineered or mastered drawings.
- \_\_\_\_\_ Waiver of Hurricane Protection Affidavit for Shade Shutter application.

**Regulations and Information**

1. Plan size should be 24X 36 or smaller, on standard sized paper. Plans must be to scale.
2. All awnings or shade shutters must meet the requirements of the 2004 Florida Building Code.
3. If engineering for the structure and materials being used is not on file, the contractor is responsible for supplying the drawings with an original signature and the raised seal of a registered Florida architect or structural engineer to City of Marco Island Building Division.
4. If permit is for a shade shutter, a Waiver of Hurricane Protection Affidavit must be submitted with the permit application.
5. Any awning or canopy, which extends 4 feet or more from an attached sprinkled building, must be equipped with an automatic fire sprinkler system.
6. Awnings that meet all testing requirements of NFPA 102 & NFPA 701 will now be accepted without fire sprinklers installed under the awnings.
7. See Collier County Land Development Code for Special Overlay Districts.
8. One application must be filled out with the original signature of the qualifier pulling the permit.
9. The fee for this permit is \$0.15 per square foot of the gross square footage of the structure. The minimum fee shall be \$50.00. The fee for a shade only shutter is \$50.00.
10. A plan check fee of 15% of the building permit fee will be charged at the time of application. This fee is not refundable nor is it credited to any other fee.
11. The Electronic Data Conversion Surcharge, added to all permits, will equal 3% of the total permit cost, with a minimum charge of \$3.00 and a maximum charge of \$150.00.

RECORDED NOTICE OF COMMENCEMENT MUST BE POSTED IF THE PROJECT VALUATION EXCEEDS \$2,500.00

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.**

**Contractor's Affidavit**

I certify that all the foregoing information is accurate and that all work must be done in compliance with all applicable laws regulating construction and zoning. I understand **THERE WILL BE A FINAL INSPECTION** of the work permitted herein. Compliance will be strictly enforced.

**No work whatsoever will commence until the building permit has been issued.**

- ? The permit fee will be quadrupled if work is started without an approved permit.
- ? The permittee further understands that only licensed contractors may be employed and that the structure shall not be used or occupied until a Certificate of Occupancy/Completion is issued.
- ? See Section 105.4.1.1 of the Marco Island Administrative Construction Code for information regarding the permit expiration date.

\_\_\_\_\_  
Print Name of Qualifier

\_\_\_\_\_  
Signature of Qualifier

State of Florida

County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Signature, Notary Public – State of Florida

(Seal)

\_\_\_\_\_

Printed, Typed, or Stamped Name of Notary