

Plumbing – Reclaimed Water System Building Permit Florida Building Code 8th Edition (2023)

Florida Fire Prevention Code 8th Edition

Job Information	Application Date:	Est. cost:	Permit #:	
Parcel ID #:		Job Address:		
Legal: Sub/Unit/B	lk/Lot:			
Owner's Name:				
Primary Contrac	tor Information			
Contractor:		State C	Cert/CC Comp Card #:	
Address/Email/Phe	one:			
Job Representative	e Contact Info:			
Description of W	ork			

Be advised that significant portions of the City of Marco Island are subject to deed restrictions. It is incumbent upon the property owner to research deed restrictions that may be applicable to their property. Questions regarding deed restrictions should be directed to the Marco Island Civic Association (MICA) at (239) 642-7778.

Regulations and Information

- City of Marco Island Building Services is regulated by the Florida Building Code 8th Edition (2023), Plumbing. For more
 information about the code or to purchase the code visit <u>http://www.floridabuilding.org</u>
- 2. Visit <u>www.cityofmarcoisland.com/CSS</u> for more information about how to submit for permit.
- 3. All onsite modifications by condominiums to accommodate the new reuse water system must be performed by a Florida licensed plumber and with a Re-use System permit. Irrigation system modifications require a separate permit by a licensed irrigation or landscape unlimited contractor.
- 4. A Florida licensed plumber or a Florida licensed engineer must submit Certification that there is no cross connections between the customer's potable water system and the customer's re-use system.
- 5. A reduced pressure zone backflow device must be installed on all potable water sources.
- 6. All existing and new backflow prevention devices must be tested by a Florida licensed backflow prevention tester technician with results submitted to Marco Island Utilities.
- 7. Call Marco Island Utilities for City verification when a backflow assembly is installed.
- 8. Install re-use irrigation signs permanently at each street entrance and each hose bib. The signs must be pantone purple background with either white or black lettering stating: "Non Potable Water" "DO NOT DRINK" in English, Spanish, and the international symbol.
- 9. Retrofit hose bibs using reuse water to accommodate a lockable vault around valve.
- Set back requirements for connection to reclaimed water system: Establishments with pools must have a 50-foot set back from sprinkler type irrigation heads to prevent aerosol mist travel. Areas closer than 50-foot must use soaker type irrigation. Detailed information can be obtained at <u>https://floridadep.gov/water/industrial-wastewater</u> Reference FDEP (FAC) rule 62-610.
- 11. The City Plumbing inspector will be present for the following test (performed on a non-watering day):
 - Disconnect irrigation from potable water supply.
 - Upon completion of restoring potable water supply and prior to pressurizing non-potable supply to irrigation system a plumbing inspection is required.
 - At the time of the plumbing inspection all hose bibs, foot wash/shower stations, car wash areas, drinking fountains and any other outdoor water stations will be identified.
 - Once supplies are identified and labeled the irrigation will be pressurized in the presence of the City Plumbing Inspector.

Job Information Address:______ Permit #: ______

- 12. One application must be filled out with the original signature of the qualifier pulling the permit.
- 13. The fee for this plumbing permit is \$56.00. A plan review fee of 38% of the building permit fee will be charged at the time of application. A one time meter charge be invoiced on the utility bill for the property.

Sub-Contractor Information (Enter Company Name, License Number, and Address.)

Plumbing:

Design Professional Information (Enter Name, License Number, and Address.)

Architect:_____

Engineer:

Miscellaneous Information (Enter Company Name and Address.)

Fee Simple Title Holder:

Bonding Company:

Mortgage Lender:

Additional Portal Access Permission

I am authorizing the general contractor for this project ______, and/or permitting service

_____, to have full access to this permit via the Citizens Self Service Portal. I acknowledge that I am solely responsible for managing any/all permits applied for under my license.

Voluntary Owner Contact Info

If the property owner for this project would like to be copied on City emails related to this permit add their email here. Owner's Email Address:

Job Information	Address:
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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.

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 AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Print Name of Owner or Agent for Owner	Signature of Owner or Agent for O	Jwner	-
State of County of			
The foregoing instrument was acknowledged before me this	day of	, 20	_,
by, who is Dersonally kn	own to me, or □has produced		_as identification,
by means of \Box physical presence or \Box online notarization.			
Signature, Notary Public – State of Florida	(Seal)		
Printed, Typed, or Stamped Name of Notary			
Contractor's Affidavit			
 I certify that all the foregoing information is accurate and that all construction and zoning. I understand THERE WILL BE A FIN be strictly enforced. No work whatsoever will commence until the building permit The permit fee will be quadrupled if work is started without a The permittee further understands that only licensed contract occupied until a Certificate of Occupancy is issued. See Section 105.5 of the Marco Island Administrative Constr I will provide the Florida DBPR - Florida Lien Law statement 	NAL INSPECTION of the work permission of the work permises that the structure of the stru	mitted herein. Tucture shall not ng the permit e	Compliance will ot be used or expiration date.
Print Name of Licensed Contractor	Signature of Licensed Contractor		-
State of County of			
The foregoing instrument was acknowledged before me this			
by, who is Dersonally kn	own to me, or \Box has produced		_ as identification,
by means of \Box physical presence or \Box online notarization.			
Signature, Notary Public – State of Florida	(Seal)		

Printed, Typed, or Stamped Name of Notary