

Single Family – Addition/Alteration Building Permit Florida Building Code 8th Edition (2023)

Florida Fire Prevention Code 8th Edition

Job Information	Application Date:	Est	t. cost:	Permit #:
Parcel ID #:		Job Address:		
Legal: Sub/Unit/B	lk/Lot:			
Owner's Mailing	Address (if different):_			
Primary Contrac	tor Information			
Contractor:			State Cert/CC Comp Card	#:
Address/Email/Ph	one:			
Job Representative	e Contact Info:			
Lot Data				
Width:	Ft Depth:	Ft Area:	Sf Street frontage:	Ft
Actual Setbacks (f	feet): Front:	Rear:	Side: Side:_	
Type of Lot: Vaca	ant □ Existing Build	ing Demolished □ Demo	o Permit 🗆 #	
If Demo Lot Origi	nal A/C Sq Ft:	Original Sq	Ft Under Roof:	
Building Data				
Addition Total Sf:	Ad	dition A/C Sf:		
Remodel Total Sf:	Rei	model Sf Non-A/C to A/C	area:	
Bldg. Depth:	Bldg. Width:_	Bldg. Height:_		
Site Work Sf:	Bldg Footprin	it: Lot coverage	e:% Parking Spac	es: HC Parking:
Roof Type:	# 5	Sqs:	Construction Type:	
DFE Required:	NAV	D DFE Actual:	NAVD	
A separate Right-o	of-Way permit is requir	ed for all work in the publi	ic right of way.	
The following mu	ıst be included with th	<mark>1e application</mark> An electron	ic set of plans consisting of	at least the following:
☐ Plan Document			☐ Impervious Surface	Worksheet
☐ Structural & A		- N I., d Cl4	☐ Variances	
	t Approval/Miami-Dad	e Noa Index Sheet	☐ Survey☐ Other Agency Appro	ovale
☐ Truss Layouts and Design Loads ☐ Electric & Load Calculations			☐ Erosion & Sedimen	
	hanical & Energy Calc	ulations	_ 2.55.511 & Staffiell	

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.

Job Information	Address:	Permit #:	

Regulations and Information

- 1. City of Marco Island Building Services is regulated by the Florida Building Code 8th Edition (2023). For more information about the code or to purchase the code, visit http://www.floridabuilding.org
- 2. Visit www.cityofmarcoisland.com/CSS for more information about how to submit for permit.
- 3. Plans must be to scale with a minimum of 3/16" =1'.
- 4. If this site is located in a Special Flood Hazard Area, the finished floor elevation must meet the required Design Flood Elevation. An elevation certificate must be submitted. The Base Flood Elevation shall be noted on the large-scale section.
- 5. Substantial improvement will require the first floor of the structure to be at or above Design Flood Elevation (DFE). An elevation certificate must be submitted if the structure is being substantially improved.
- 6. Please click on this link for more information regarding the floodplain regulation permit requirements.
- 7. Other supporting documents, such as variances, surveys, conditional use permits, DEP permits, Health Department approval, application for Certificate of Public Adequacy, and GDSP's must accompany your plans.
- 8. Check with the respective property owners association for deed restrictions.
- 9. Show setbacks on the site plan when additions will occur.
- 10. Owner-builders must sign an affidavit, reside at that location, and supply homeowners' insurance.
- 11. All Florida Product Approvals and Miami Dade Notice of Acceptance information must be provided in our <u>Florida Product Approval/Miami-Dade NOA Index Sheet.</u>
- 12. Provide roof and floor truss layout sheets with reactions greater than or equal to 5000# and uplift greater than or equal to 1000#. Show any additional loads imposed by equipment and/or storage.
- 13. Plans for structural components must be designed, signed and sealed by a Florida State Certified Design Professional.
- 14. A total floor plan must be submitted with any interior remodeling. Work areas will be clouded.
- 15. If the electrical service is greater than 600 amps or greater, an Electrical Engineer must design and sign the electrical plans with a raised seal.
- 16. Electrical load calculations and riser diagram are required to be submitted with plans.
- 17. A set of current year energy calculations must be submitted with plans.
- 18. Driveway width and setbacks must be noted on the site plan when a new driveway is to be installed. Any work in the Right of Way requires a permit from the City of Marco Island, Public Works Department.
- 19. All accessory structures must be permitted separately.
- 20. One application must be filled out with the original signature of the qualifier who is pulling the permit.
- 21. Fee for this permit is \$0.60 per square foot of addition/alteration area. Fee for Electrical, Plumbing and Mechanical trades are each \$0.20 per square foot of addition/alteration area. The minimum trade fee shall be \$77.00 per trade. The roof permit fee is \$5.00 per roof square (100 sq ft.).
- 22. Any driveway permit fee will be \$107.00. Separate Right of Way permits will be issued at a rate equal to the current adopted fee.
- 23. A fee equal to 38% of the permit fee will be charged at the time an application for a permit is received for plan review. This fee is not refundable nor is it credited to any other fee.
- 24. The Electronic Data Conversion Surcharge, added to all permits, will equal 5% of the total permit cost, with a minimum charge of \$5.00 and a maximum charge of \$300.00. The fee is capped at \$100.00 if the documents are also submitted in electronic format.
- 25. A spot survey & spot elevation certificate must be submitted to the Building Department within 10 days of the approved slab inspection.
- 26. A temporary power inspection will allow the power to be turned on, with the understanding that the areas under construction will not be occupied until a Certificate of Occupation or a Certificate of Completion is issued.
- 27. It is the contractor's responsibility to contact the Building Department when all final inspections are complete and obtain a Certificate of Occupancy or a Certificate of Completion.

Job Information	Address:	Permit #:
Sub-Contractor Infor	<mark>mation</mark> (Enter Co	pany Name, License Number, and Address.)
Electric:		
Plumbing:		
Mechanical:		
Design Professional I	<mark>nformation</mark> (Enter	Name, License Number, and Address.)
Architect:		
Miscellaneous Inform	<mark>lation</mark> (Enter Com	any name and Address.)
Fee Simple Title Holde	er:	
Additional Portal Acc	cess Permission	
I am authorizing the ge	eneral contractor for	his project, and/or permitting service
	<u>,</u> to	we full access to this permit via the Citizens Self Service Portal. I acknowledge that I am
solely responsible for 1	managing any/all po	mits applied for under my license.
1 1 2	or this project wou	like to be copied on City emails related to this permit add their email here. Owner's Email

Job Information	Address:	Permit #:	
	certify that all the foregoing information lating construction and zoning.	on is accurate and that all work will be done in c	ompliance with all
		RE TO RECORD A NOTICE OF	
		YOUR PAYING TWICE FOR IM	PROVEMENTS
		COMMENCEMENT MUST BE R	
		HE FIRST INSPECTION. IF YOU	
		H YOUR LENDER OR AN ATTO	
		IG YOUR NOTICE OF COMMEN	
Print Name of Owne	er or Agent for Owner	Signature of Owner or Agent for Owner	
State of	County of		
		sday of,	20,
by	, who is □persona	ılly known to me, or □has produced	as identification,
by means of □physic	cal presence or □online notarization.		
Signature Notary Pu	ıblic – State of Florida		
218111111111111111111111111111111111111	5 5	(Seal)	
Printed, Typed, or St	tamped Name of Notary		
Contractor's Affida	vit		
I certify that all the f construction and zon be strictly enforced. No work whatsoeve The permit fee v The permittee fu occupied until a	Foregoing information is accurate and the cing. I understand THERE WILL BE are will commence until the building power will be quadrupled if work is started with urther understands that only licensed concertificate of Occupancy is issued.		herein. Compliance will shall not be used or
• I will provide th	e Florida DBPR - Florida Lien Law stat	tement to the person whose property is subject to	attachment.
Print Name of Licen	sed Contractor	Signature of Licensed Contractor	
State of	County of		
The foregoing instru	ment was acknowledged before me this	day of,	20,
by	, who is □persona	ılly known to me, or □has produced	as identification,
by means of □physic	cal presence or □online notarization.		
Signature, Notary Pu	ıblic – State of Florida	/Q 15	
		(Seal)	
Printed, Typed, or St	tamped Name of Notary		