



RESIDENTIAL  
 COMMERCIAL

FOR OFFICE USE ONLY  
FBC Version: \_\_\_\_\_ Permit #: \_\_\_\_\_  
Date Rec'd: \_\_\_\_\_ Accepted By: \_\_\_\_\_

## BUILDING PERMIT APPLICATION

SURVEY OR PLOT PLAN REQUIRED FOR NEW STRUCTURES, ADDITIONS, SHEDS AND MOBILE HOME PLACEMENT

Job Address: \_\_\_\_\_ AltKey \_\_\_\_\_

Job Description / Details of Work \_\_\_\_\_

Property Legal Description \_\_\_\_\_ Attached

Point of Contact \_\_\_\_\_ Phone # \_\_\_\_\_

Point of Contact E-mail \_\_\_\_\_

Owner Name(s) \_\_\_\_\_ Owner Phone # \_\_\_\_\_

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

Fee Simple Title Holder (*if other than owner*) Name(s) \_\_\_\_\_

Fee Simple Title Holder Address \_\_\_\_\_

Contractor Company Name \_\_\_\_\_ Phone# \_\_\_\_\_

Address \_\_\_\_\_ Email \_\_\_\_\_

License Holder \_\_\_\_\_ State Cert/Reg # \_\_\_\_\_

Bonding Company \_\_\_\_\_ Address \_\_\_\_\_

Architect / Engineer Name \_\_\_\_\_ Address \_\_\_\_\_

Mortgage Lender's Name \_\_\_\_\_ Address \_\_\_\_\_

Building Type: IA  IB  IIA  IIB  IIIA  IIIB  IV  VA  VB

\*\*\*Building Type can be found on the first page of your engineered plans/drawings\*\*\*

VALUE OF WORK \$ \_\_\_\_\_  
(Total Value of all Construction) (Required)

SQUARE FOOT CONDITIONED \_\_\_\_\_

SQUARE FOOT UNCONDITIONED \_\_\_\_\_

**SQUARE FOOT TOTAL** \_\_\_\_\_

EXISTING IMPERVIOUS AREA \_\_\_\_\_

PROPOSED IMPERVIOUS AREA \_\_\_\_\_

IRRIGATION: Yes  No  IRRIGATION METER: Yes  No  METER SIZE \_\_\_\_\_

WILL EXISTING TREES BE REMOVED: Yes  No  (If yes, attach Tree Removal Permit Application)

MECHANICAL	LICENSE #
ELECTRICAL	LICENSE #
PLUMBING	LICENSE #
ROOFING	LICENSE #
GAS	LICENSE #
OTHER	LICENSE #

### **Homeowner's Association Verification**

Is the property or job address located in a neighborhood with an active Homeowner's Association?

Yes  No

Has the planned improvement been reviewed by the Homeowner's Association making sure that the improvement complies with HOA covenants and restrictions?

Yes  No

**Note: If you answered YES to the above questions please submit an approval letter from the HOA along with your building permit application. The City of Tavares reserves the right to deny a building permit request if Homeowner's Association approval has not been granted.**

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 may be required for ELECTRIC, PLUMBING, MECHANICAL, SIGNS, FENCES, DOCKS, POOLS, ETC.

**OWNERS AFFIDAVIT:** I CERTIFY THAT ALL OF THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH LOCAL ORDINANCES, AND 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 RECORDING YOUR NOTICE OF COMMENCEMENT.

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SIGNATURE OF OWNER or AGENT

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

*Sworn to (or affirmed) and subscribed before me this  
\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by*

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*Notary Signature*

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SIGNATURE OF CONTRACTOR

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

*Sworn to (or affirmed) and subscribed before me this  
\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by*

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*Notary Signature*

[ ] Personally Known \_\_\_\_\_ OR  
[ ] Produced Identification  
Type of Identification Produced: \_\_\_\_\_

[ ] Personally Known \_\_\_\_\_ OR  
[ ] Produced Identification  
Type of Identification Produced: \_\_\_\_\_

### **Notice to Contractor/Owner**

If you have not recently pulled permits within the City of Tavares, please include all necessary copies of your license, occupational license, workman's compensation coverage or valid exemption, and insurance liability coverage. Failure to provide all necessary information or fill out this application completely could result in a delay in processing or a denial/rejection of your permit application.



## CONSTRUCTION WASTE DISPOSAL STATEMENT

CITY OF TAVARES  
COMMUNITY DEVELOPMENT  
201 E. Main Street, P.O. Box 1068  
Tavares, Florida 32778

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PRIOR to the issuance of a Building Permit for the construction or renovation of any structure, the Applicant shall provide for the collection and disposal of any construction waste which may result from construction. Construction waste **MUST** be disposed of at a properly permitted landfill or recycling facility.

The City of Tavares is not responsible for construction or vegetation debris resulting from a permitted construction project. Therefore, there are two (2) alternatives whereby the Applicant may satisfy this requirement.

### **Alternative I**

Use a licensed collector or specialty hauler to collect and properly dispose of/or recycle all construction wastes resulting from this project.

### **Alternative II**

The owner/contractor will collect and properly dispose of/or recycle all construction waster resulting from this project.

Please indicate which method of disposal will be used for this project: (PLEASE CHECK ONE)

**Alternative I**       **Alternative II**

Regardless of which method the applicant chooses, ultimately the responsibility to properly dispose of/or recycle all construction waste will fall to the general contractor/owner. Please be advised that removal of construction waste is one of many requirements for the issuance of a certificate of occupancy.

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I hereby swear or affirm that I have read the requirements indicated above, and agree to the terms as directed by the City of Tavares.

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*Applicant's Signature*

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*Date*

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by,  
\_\_\_\_\_ who is personally known to me or has produced \_\_\_\_\_ as  
identification.

(SEAL)

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Notary Signature

After recording, return to:

Permit No.: \_\_\_\_\_  
Tax Folio No.: \_\_\_\_\_

## Notice of Commencement

State of Florida | County of Lake

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

1. Description of the Property: (*legal description of the property and street address if available*)

Legal Description: \_\_\_\_\_

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

2. General Description of Improvement

3. Owner's Information or Lessee information if the lessee contracted for the improvement:

Name: \_\_\_\_\_

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

Interest in Property: \_\_\_\_\_

Name & Address of fee simple titleholder (*if different than owner*): \_\_\_\_\_

4. Contractor Information

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

5. Surety (*if applicable, a copy of the payment bond must be attached*):

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

6. Lender Information:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:

Name: \_\_\_\_\_ Phone No.: \_\_\_\_\_

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

8. In addition to himself or herself, Owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the following Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes: \_\_\_\_\_ Phone No.: \_\_\_\_\_

9. Expiration date of notice of commencement (*the expiration date will be 1 year from the date of recording unless a different date is specified*).

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN 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 YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

\_\_\_\_\_  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager

\_\_\_\_\_  
Signatory's Title/Office

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_, by \_\_\_\_\_ as  
for \_\_\_\_\_

Type of authority (i.e. officer, trustee, attorney in fact) \_\_\_\_\_ Name of party on behalf of whom instrument was executed \_\_\_\_\_

is personally known or produced \_\_\_\_\_ as type of identification.

\_\_\_\_\_  
Signature of Notary Public – State of Florida (print, type or stamp commissioned name of Notary Public)

## PIER SPACING TABLE FOR USED HOMES

Load bearing capacity	Footer size (sq in)	16" x 16" (256)	18 1/2" x 18 1/2" (342)	20" x 20" (400)	22" x 22" (484)*	24" X 24" (576)*	26" x 26" (676)
1000 psf		3'	4'	5'	6'	7'	8'
1500 psf		4' 6"	6'	7'	8'	8'	8'
2000 psf		6'	8'	8'	8'	8'	8'
2500 psf		7' 6"	8'	8'	8'	8'	8'
3000 psf		8'	8'	8'	8'	8'	8'
3500 psf		8'	8'	8'	8'	8'	8'

\* interpolated from Rule 15C-1 pier spacing table.

### PIER PAD SIZES

I-beam pier pad size \_\_\_\_\_

Perimeter pier pad size \_\_\_\_\_

Other pier pad sizes  
(required by the mfg.) \_\_\_\_\_



Draw the approximate locations of marriage wall openings 4 foot or greater. Use this symbol to show the piers.

List all marriage wall openings greater than 4 foot and their pier pad sizes below.

Opening \_\_\_\_\_ Pier pad size \_\_\_\_\_

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

### POPULAR PAD SIZES

Pad Size	Sq In
16 x 16	256
16 x 18	288
18.5 x 18.5	342
16 x 22.5	360
17 x 22	374
13 1/4 x 26 1/4	348
20 x 20	400
17 3/16 x 25 3/16	441
17 1/2 x 25 1/2	446
24 x 24	576
26 x 26	676

### ANCHORS

4 ft \_\_\_\_\_ 5 ft \_\_\_\_\_

### FRAME TIES

within 2' of end of home \_\_\_\_\_  
spaced at 5' 4" oc \_\_\_\_\_

### OTHER TIES

Number \_\_\_\_\_

Sidewall \_\_\_\_\_  
Longitudinal \_\_\_\_\_  
Marriage wall \_\_\_\_\_  
Shearwall \_\_\_\_\_

### TIE DOWN COMPONENTS

#### ***Longitudinal Stabilizing Device (LSD)***

Manufacturer \_\_\_\_\_

#### ***Longitudinal Stabilizing Device w/ Lateral Arms***

Manufacturer \_\_\_\_\_

## POCKET PENETROMETER TEST

The pocket penetrometer tests are rounded down to \_\_\_\_\_ psf  
or check here to declare 1000 lb. soil \_\_\_\_\_ without testing.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### POCKET PENETROMETER TESTING METHOD

1. Test the perimeter of the home at 6 locations.
2. Take the reading at the depth of the footer.
3. Using 500 lb. increments, take the lowest reading and round down to that increment.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## TORQUE PROBE TEST

The results of the torque probe test is \_\_\_\_\_ inch pounds or check here if you are declaring 5' anchors without testing \_\_\_\_\_. A test showing 275 inch pounds or less will require 5 foot anchors.

**Note:** A state approved lateral arm system is being used and 4 ft. anchors are allowed at the sidewall locations. I understand 5 ft anchors are required at all centerline tie points where the torque test reading is 275 or less and where the mobile home manufacturer may requires anchors with 4000 lb holding capacity.

Installer's initials \_\_\_\_\_

## ALL TESTS MUST BE PERFORMED BY A LICENSED INSTALLER

Installer Name \_\_\_\_\_

Date Tested \_\_\_\_\_

## Electrical

Connect electrical conductors between multi-wide units, but not to the main power source. This includes the bonding wire between multi-wide units. Pg. \_\_\_\_\_

## Plumbing

Connect all sewer drains to an existing sewer tap or septic tank. Pg. \_\_\_\_\_

Connect all potable water supply piping to an existing water meter, water tap, or other independent water supply systems. Pg. \_\_\_\_\_

## Site Preparation

Debris and organic material removed \_\_\_\_\_.

Water drainage: Natural \_\_\_\_\_ Swale \_\_\_\_\_ Pad \_\_\_\_\_ Other \_\_\_\_\_.

## Fastening multi wide units

Floor: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_

Walls: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_

Roof: Type Fastener: \_\_\_\_\_ Length: \_\_\_\_\_ Spacing: \_\_\_\_\_

For used homes a min. 30 gauge, 8" wide, galvanized metal strip  
will be centered over the peak of the roof and fastened with galv.  
roofing nails at 2" on center on both sides of the centerline.

## Gasket (weatherproofing requirement)

I understand a properly installed gasket is a requirement of all new and used  
homes and that condensation, mold, mildew and buckled marriage walls are  
a result of a poorly installed or no gasket being installed. I understand a strip  
of tape will not serve as a gasket.

Installer's initials \_\_\_\_\_

Type gasket \_\_\_\_\_

Installed:

Pg. \_\_\_\_\_

Between Floors Yes \_\_\_\_\_

Between Walls Yes \_\_\_\_\_

Bottom of ridgebeam Yes \_\_\_\_\_

## Weatherproofing

The bottomboard will be repaired and/or taped. Yes \_\_\_\_\_ Pg. \_\_\_\_\_

Siding on units is installed to manufacturer's specifications. Yes \_\_\_\_\_

Fireplace chimney installed so as not to allow intrusion of rain water. Yes \_\_\_\_\_

## Miscellaneous

Skirting to be installed. Yes \_\_\_\_\_ No \_\_\_\_\_

Dryer vent installed outside of skirting. Yes \_\_\_\_\_ N/A \_\_\_\_\_

Range downflow vent installed outside of skirting. Yes \_\_\_\_\_ N/A \_\_\_\_\_

Drain lines supported at 4 foot intervals. Yes \_\_\_\_\_

Electrical crossovers protected. Yes \_\_\_\_\_

Other: \_\_\_\_\_

I understand Lateral Arm Systems cannot be used on any home (new or used)

where the sidewall ties exceed 5 ft 4 in.

Installer verifies all information given with this permit worksheet  
is accurate and true based on the  
manufacturer's installation instructions and or Rule 15C-1 & 2

Installer Signature \_\_\_\_\_ Date \_\_\_\_\_

### **Homeowner's Association Verification**

Is the property or job address located in a neighborhood with an active Homeowner's Association?

Yes  No

Has the planned improvement been reviewed by the Homeowner's Association making sure that the improvement complies with HOA covenants and restrictions?

Yes  No

**Note: If you answered YES to the above questions please submit an approval letter from the HOA along with your building permit application. The City of Tavares reserves the right to deny a building permit request if Homeowner's Association approval has not been granted.**