

- Complete Contractor Registration Packet-including copy of State Certified License or copy of State Registered License accompanied by a Bay or Gulf County Comp Card (Mexico Beach excluded from comp card) proof of liability insurance, workers compensation or exemption)
- Electronic copy of Plans designed and sealed by a licensed architect or engineer (paper copy for
  jobsite box) drawn to scale, including site plan, structural, electrical, plumbing and mechanical.
   All areas on the plans shall be labeled as to the use of that area. Property located seaward of the
   Coastal Construction Control Line (CCCL) area must have a FDEP permit & the approved FDEP
  plans.

Plans shall include at least the following items:

- a. Floor plan
- b. Floor/Roof Framing Plan or truss layout if trusses will be used
- c. Exterior elevations
- d. Method of complying with 140 MPH wind load requirements
- e. Wall sections for each different type of wall from foundation through roof, including assembly and all materials. Connection tables, including hurricane clips, straps, fasteners, nail or screw patterns, and hold-downs
- f. Location of smoke detectors
- g. Location of all plumbing fixtures
- h. Identify accessible bath
- i. Electrical service size and location
- j. Electrical plan
- k. Mechanical plan and equipment location
- I. Proposed finished floor elevation
- 3. A Development Order from Building Department with City Council and Planning & Zoning approval if required
- 4. Stormwater management plan
- 5. Landscape/tree plan(1 tree per 50 linear feet of property line)
- 6. A plot Plan survey showing elevations of existing grade and adjacent roads
- 7. Signed and sealed Base Flood Elevation for properties in Flood Zones Shaded X, A, AE and V
- 8. Notice of Commencement
- 9. Energy Forms
- 10. Department of Environmental Protection and/or Corp of Engineers approval if required
- 11. Complete Permit Application

PERMITS CANNOT BE ISSUED UNLESS ALL ABOVE ITEMS HAVE BEEN SUBMITTED

An approved set of plans must be on site with permit at all times or inspection will not be made.

EMAIL ALL REQUIRED DOCUMENTS TO: MEXICOBEACH@CODESOUTH.COM



# CITY OF MEXICO BEACH PLANNING DEPARTMENT Development Order Application

Residential

Telephone Number

INCOMPLETE SUBMITTALS WILL NOT BE REVIEWED
(Separate forms and fees required for Building Permits)
NOTE: PROPERTY ADDRESS MUST BE POSTED PRIOR TO SUBMITTAL
All new construction must meet City of Mexico Beach Land Development Regulations and
FEMA's flood elevation requirements

1. Site Plan with square feet of structures, impervious surface, trees to be removed from property, and setbacks

\*\*\*\* setbacks are measured from the closest vertical structure to property line\*\*\*\*

Commercial

**Email Address** 

2. New address application if needed Project Address: Project Description: Project Square Footage: Proposed Setbacks Front:\_\_\_\_\_ Left:\_\_\_\_\_ Rear:\_\_\_\_ Right: Dwelling Square Footage\_\_\_ Lot Square Footage: Driveway Square Footage\_\_\_\_\_ Accessory Building Square Footage: \_\_\_\_\_ Pool Square Footage\_\_\_\_\_ Patio/Deck Square Footage: \_\_\_\_\_ Current Impervious Surface: \_\_\_\_\_ Impervious Surface Including Project: \_\_\_\_\_ Building Height in Feet: \_\_\_\_\_ Landscape Buffers: (height x width) \_\_\_\_\_ Finished Floor Elevation Flood Zone Are trees to be removed from the property? \_\_\_ (if yes, attach a tree location map) **Applicant Signature** Date **Applicant Address** 



# **Building Application**

Owners NamePhone #	
Address	
Address	
City: State: Zip Code:	
Fee simple Title Holder(if other than owner)	
Address:	
City: State:Zip Code: Phone #	
Contractor Name:	
Address: Phone #:	
State Licenses #: Competency Card#:	
Address of Project	
City: State: Zip Code:	
Proposed Use of Site:	
Property Parcel ID#:	
Will structure be at least 30' from any body of water?Yes	No
<u>Commercial Projects</u>	
Company Name:	
Bonding Company:	
Address:Phone #	
City:State:Zip Code:	
Architect/Engineer:	
Architect/Engineer: Address: Phone #:	
Architect/Engineer:	
Address: Phone #: City: State: Zip Code:	
Address: Phone #:	

Application is made herby to obtain a permit to do work and installation as indicated. I certify that NO WORK or installation has commenced prior to Issuance of a permit and that all work will be performed to meet the standards of all laws regarding construction in this jurisdiction. I understand that separate permits must be secured for electrical work, plumbing, signs, roofing, pools, furnaces, boilers, heaters, tanks, air conditioners, etc.

<b>Purpose of Buildin</b>	g		
Single Family	Townhouse	Commercial	Industrial
Duplex	Swimming Pool	Storage	Sign
	Demolition	Addition, Alterat	on, Renovation
Project Description	n:		
Distance from Pro	perty Lines:		
Front:	Rear: Left	Side: Ri	ght Side:
EPI:	Flood Zone:	Lowest Floor Eleva	ion
Cost of Construction	on:	Number of Stories	
		_	Number of Bathrooms
<b>Total Square Foota</b>	age: Heated	& Cooled Square Foot	age:
Type of Roof:	Type of Walls:	Тур	e of Floor:
Extreme Dimensio	ns of: Length:	Height:	Width:
CONSULT WITH COMMENCEMENT certified copy of to with an affidavit of provided to this Do of the documents	YOUR LENDER OR AN For improvements to rea he Notice of Commencement testing to its recording. A separtment before the secont hat have been certified mo	ATTORNEY BEFORE I property with a con int is required to be s I certified copy of the ind or any subsequent iy be done by mail or l	U INTEND TO OBTAIN FINANCING, RECORDING YOUR NOTICE OF struction cost of \$2,500 or more, a ubmitted to this Department along Notice of Commencement must be inspection can be performed. Filing and delivery.  We the authority to enforce DEED
	xico Beach Builaing Depa COVENANTS on properties	rtment aoes not na	ve tne autnority to enjorce DEED
correct to the best			nined in this application is true and ne in compliance with all applicable
Signature of Owner	er or Agent	Signature o	f Contractor
Date:		Date:	
Notary as to Owne	er or Agent	Notary as to	Contractor



# **City of Mexico Beach Building Department**

# **Product Affidavit**

I, h	ereby certify that all products used in building at
(Contractors Name)	
	_ meets the requirements of the Florida Building Code for
(Job Address)	_ meets the requirements of the frontal banding code for
Product Approval	
Signature	
STATE OF FLORIDA	
COUNTY OF BAY	
Sworn to and subscribed before me this	day of 20
Ву	
	Notary Stamp
Notary Public, State of Florida	
Personally known or	
Produced Identification	
Type of identification produced	



#### **Hold Harmless Agreement**

Every Contractor, Trades Person, Homeowner Contractor, Contractor's employees or related business entity who conducts business within the City shall resume all responsibility and save the City and its employees free and harmless from any prosecution or liability for any damages to any persons or property in anyway connected with, arising of, or incidental to construction related activities, building inspections, or enforcement of any code violation. Every person who signs this document understands that there is no time limitation in which this document shall expire, this document shall remain in force from this day forward even through any situation where a persons license may be suspended revoked or allowed to expire.

Print	Sign
Busine	ss name (DBA)
l,	do fully agree to and understand the
contents of this H	old Harmless Agreement.
Notarization	
STATE OF FLORIDA COUNTY OF BAY	
Sworn to and subscribed before me this	day of 20
1	Notary Stamp
Notary Public, State of Florida	
Personally known or	
Produced Identification	
Type of identification produced	

Form B05

# TO THE RESERVE TO THE

#### NOTICE OF COMMENCEMENT

State of Florida	
County of Bay	
To Whom It May Concern: The undersigned hereby gives <b>Notice</b> that improvement accordance with <u>Chapter 713</u> , Florida Statutes, the follo <b>Commencement.</b>	
Description of property (legal description of the property, and $\boldsymbol{s}$	treet address if available):
General description of improvement:	
Owner Name: Address: Owner's interest in site of the improvement:	
Fee Simple Titleholder Name:Address:	
Contractor Name:Address:Phone Number:	
Payment Bond Surety:	
Address:	mount of Bond: \$
Lender Name:Address:Phone Number:	
Person within the State of Florida designated by Owner up served as provided by Section 713.13(1) (a) 7., Florida Sta Name_	oon whom <b>Notices</b> or other documents may be tutes:
AddressPhone Number:	
In addition to himself or herself Owner designates	
In addition to himself or herself, Owner designates of as provided in Section 713.13(1) (b), Florida Statutes.	to receive a copy of the Lienor's <b>Notice</b>
Expiration date of <b>Notice of Commencement</b> unless a different date is specified	
	Signature of Owner
Sworn to (or affirmed) and subscribed before me thisby	day of, 20,(name of person making statement).
	Signature of Notary Public (State of Florida)
Personally Knownor Produced Identification Type of Identification Produced	NOTARY SEAL

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROVER 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK ON RECORDING YOUR NOTICE OF COMMENCEMENT.



### **Owner Affidavit**

I	of	
Owner Name Printed	Address of Constru	ction Site
do hereby give my permission for contra	ctorContractors Na	me Printed
to accept the responsibility of obtaining		
and /or Building Permit. I further unders	tand that even though th	e contractor has
signed on my behalf I am responsible fo	the entire contents and	requirements set
forth within these documents, Ordinano	e, or State Law. I further ι	understand that if
any violations occur I can be held solely	esponsible for correction	of these
problems because I am the owner of sai	• • •	
This Affidavit is for the City's use only an		•
against the property owner in any disag	eement, civil suit, dispute	e, or violation.
Owners Signature	Da	te
STATE OF FLORIDA		
COUNTY OF BAY		
Sworn to and subscribed before me this	day of 20	
	20	
Ву		
	Notary Stamp	
Note in Dublic Chats of Florida		
Notary Public, State of Florida		
Barrary III. I are a		
Personally known or Produced Identification		
Type of identification produced		

#### **INSPECTION LIST FOR NEW HOUSE:**

In order of when they should be called in

- 1. TEMP POWER POLE
- 2. FOOTER OR REINFORCEMENT & SETBACKS
- 3. WALL/CONCRETE BLOCK REINFORCEMENT
- 4. UNDERGROUND PLUMBING
- 5. SLAB/FOUNDATION
- 6. STRAPPING
- 7. SHEATHING/NAILING/PLYWOOD
- 8. DRY IN/ROUGH IN, FRAMING, BOLTS/CLIPS/HURRICANE TIES, SHEARWALLS, ROUGH MEP, SMOKE DETECTORS, ROUGH FLOOD
- 9. INSULATION
- 10. FIRE/GARAGE FIREWALL
- 11. EARLY PERM/TEMP TO PERM/I WANT POWER ON MY HOUSE
- 12. FINAL/CO FINAL BUILDING, ELECTRICAL, MECHANICAL, AND PLUMBING TABS (ALSO SCHEDULE ANYTHING THAT IS PARTIAL PASSED)
- 13. SETBACKS, LANDSCAPE, STORMWATER, FINAL FLOOD, IMPERVIOUS
- 14. PAVERS

#### **OPEN POLE BARN, DECK**

- 1. FOOTER & SETBACKS
- 2. SLAB (IF APPLICABLE)
- 3. STRAPPING/FRAMING
- 4. ELECTRICAL (IF APPLICABLE)
- 5. FINAL

#### **ENCLOSED POLE BARN, GARAGE, SITE BUILT SHED**

- 1. FOOTER & SETBACKS
- 2. SLAB
- 3. ROUGH PLUMBING (IF APPLICABLE)
- 4. STRAPPING\SHEATHING (ROOF & WALL NAILING)
- 5. DRY IN
- 6. ROUGH FLOOD (IF APPLICABLE)
- 7. INSULATION
- 8. FINAL
- 9. FINAL FLOOD (IF APPLICABLE)

#### POOL

- 1. SETBACKS, FORM & REBAR, ROUGH PLUMBING
- 2. BONDING
- 3. FINAL