



PERMIT NUMBER _____

MINIMUM PERMIT REQUIREMENTS

FOR

ADDITIONS AND ALTERATIONS

- PERMIT APPLICATION COMPLETELY FILLED OUT SIGNED AND NOTARIZED
- DOCUMENTED PROOF OF COST ALL TRADES
- BROWARD COUNTY PROPERTY APPRAISERS ACCESSED VALUATION

THE FOLLOWING DOCUMENTS MUST BE SUBMITTED IN DUPLICATE

- APPROVAL FROM ZONING
- ARCHITECTURAL PLANS SIGNED AND SEALED
- CONSTRUCTION FENCE PERMIT INCLUDING SILT FENCE FOR THE PEREMITER OF THE PROPERTY AND FILTER FABRIC OVER CATCH BASINS
- CURRENT SURVEY SIGNED AND SEALED SHOWING ALL EASEMENTS AND ELEVATIONS
- ELEVATION CERTIFICATE SIGNED AND SEALED, BASE FLOOD ELEVATION, FLOOD ZONE
- FIRE DEPARTMENT PERMIT
- HOMEOWNERS APPROVAL IF REQUIRED
- IMPERVIOUS & PERVIOUS SPACE CALCULAIONS
- INSULATION AND FENESTRATION DOCUMENTATION COMPLING WITH R401 OR C401 FBC ENERGY
- NOTICE OF COMMENCEMENT OVER \$ 2,500.00 IN VALUE
- PRODUCT APPROVALS HIGHLIGHTED AND APPROVED BY DESIGNER OF RECORD
- SITE PLAN SHOWING PROPOSED ELEVATIONS AND LOCATION OF IMPROVEMENT
- WIND LOAD CALCULATIONS SIGNED AND SEALED BY ENGINEER
- PERVIOUS AND IMPERVIOUS CALCULATIONS PREPARED, SIGNED AND SEALED BY ARCHITECT OR ENGINEER

BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Select One Trade: Building Electrical Plumbing Mechanical Other _____

Application Number: _____ Application Date: _____

1	Job Address: _____	Unit: _____	City: _____
	Tax Folio No.: _____	Flood Zn: _____	BFE: _____
	Building Use: _____	Construction Type: _____	Job Value: _____
	Present Use: _____	Proposed Used: _____	Occupancy Group: _____
	Description of Work:		
	<input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Repair <input type="checkbox"/> Alteration <input type="checkbox"/> Demolition <input type="checkbox"/> Revision <input type="checkbox"/> Other: _____		
	Legal Description: _____ <input type="checkbox"/> Attachment		

2	Property Owner: _____	Phone: _____	Email: _____
	Owner's Address: _____	City: _____	State: _____ Zip: _____

3	Contracting Co.: _____	Phone: _____	Email: _____
	Company Address: _____	City: _____	State: _____ Zip: _____
	Qualifier's Name: _____	Owner-Builder: <input type="checkbox"/>	License Number: _____

4	Architect/Engineer's Name: _____	Phone: _____	Email: _____
	Architect/Engineer's Address: _____	City: _____	State: _____ Zip: _____
	Bonding Company: _____		
	Bonding Company Address: _____	City: _____	State: _____ Zip: _____
	Fee Simple Titleholder's name (if other than owner): _____		
	Fee Simple Titleholder's Address (If other than owner): _____	City: _____	State: _____ Zip: _____
	Mortgage Lender's Name: _____		
	Mortgage Lender's Address: _____	City: _____	State: _____ Zip: _____

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 must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

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.

X _____
Signature of Property Owner or Agent

X _____
Signature of Qualifier

STATE OF _____
COUNTY OF _____

STATE OF _____
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____
(Type / Print Property Owner or Agent Name)

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20____ by _____
(Type / Print Qualifier's Name)

NOTARY'S SIGNATURE as to Owner or Agent's Signature
Notary Name _____
(Print, Type or Stamp Notary's Name)

NOTARY'S SIGNATURE as to Qualifier's Signature
Notary Name _____
(Print, Type or Stamp Notary's Name)

Personally Known _____ or Produced Identification _____
Type of Identification Produced _____

Personally Known _____ or Produced Identification _____
Type of Identification Produced _____

APPROVED BY: _____ Permit Officer Issue Date: _____ Code in Effect: _____

A jurisdiction may use a supplemental page requesting additional information and citing other conditions, please inquire.
Note: If any development work as described in FS 380.04 Sec. 2 a-g is to be performed, a development permit must be obtained prior to the issuance of a building permit.



Lauderdale-By-The-Sea

Building Department

4501 Ocean Drive

Lauderdale-By-The-Sea, FL 33308

Phone: (954)640-4215

Fax: (954)640-4211

PERMIT NUMBER _____

OWNER'S AFFIDAVIT: I certify that all information provided is accurate, and that all work will be performed in compliance with all applicable laws regulating construction and zoning. No work has been commenced prior to the permit sought by this application, and all work will be done as indicated in the application and all accompanying document and plans.

NOTICE: In addition the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required from other governmental entities such as water management districts, County, State or Federal agencies.

DISCLAIMER: Issuance of a development permit by a municipality does not in any way create any right on the part of the applicant to obtain a permit from a state or federal agency and does not create any liability on the part of the municipality for issuance of the permit if the applicant fails to obtain requisite approvals or fulfill the obligations imposed by a state or federal agency or undertakes actions that result in a violation of state or federal law.

CONDITION: All applicable state and federal permits must be obtained before commencement of the development.

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

CONTRACTOR

PRINT NAME OF CONTRACTOR

SIGNATURE OF CONTRACTOR

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before
me this _____ day of _____

20____, by _____
NOTARY: _____

SEAL:

Personally Known: _____
Or produced Identification _____
Type of Identification Produced _____

PRINT NAME OF OWNER

SIGNATURE OF OWNER

STATE OF FLORIDA
COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before
me this _____ day of _____

20____, by _____
NOTARY: _____

SEAL:

Personally Known: _____
Or produced Identification _____
Type of Identification Produced _____

OWNER



Lauderdale-By-The-Sea

Building Department 4501 Ocean Drive
Lauderdale-By-The-Sea, FL 33308
Phone: (954)640-4215 Fax: (954)640-4211

PERMIT AFIDAVIT

FOR ACKNOWLEDGEMENT OF COMPLIANCE WITH RESTRICTIVE DEEDS AND COVENANTS
STATE OF FLORIDA
BROWARD COUNTY

On this day personally appeared before me, the undersigned officer duly authorized to administer oaths and take acknowledgments _____, who being by me first duly sworn, deposes and says.

(HOMEOWNER)

By my signature below, I acknowledge that the legal description for the property for which I am applying for a permit is _____

(Lot/block)

a/k/a _____

(Street address & subdivision)

1. That I am the legal owner of the property
2. I acknowledge that approval may be required from the following

(Homeowners Association)

Which entities or associations regulate or otherwise govern the community, neighborhood, or development my property is located.

3. I further acknowledge that I am responsible for any additional cost that may be assessed by the Town of Lauderdale by the Sea and/or the entity regulating or governing the subject property as a result of my not having obtained the necessary approvals from any entity or association that may regulate or otherwise govern the community neighborhood, development in which my property is located.

FURTHER AFFIANT SAYETH NAUGHT

Witness Signature

Witness Signature

Witness Printed Name

Witness Printed Name

STATE OF FLORIDA COUNTY OF BROWARD

Affirmed and signed before me, on _____ the foregoing document was acknowledged before me affiant, _____, who personally appeared before me at the time of notarization, who signed and acknowledged signing the foregoing document, who did take an oath, and:

- Who is personally known to me or
- Who produced the following identification _____

_____ Commission Expiration date:

Notary Public

_____ (Seal)

(Printed or typed name)

THE PERMIT APPLICATION WILL NOT BE ACCEPTED WITHOUT THE ABOVE MINIMUM DOCUMENTATION

OTHER DOCUMENTS MAY BE REQUIRED DEPENDING UPON THE JOB CONDITIONS



Lauderdale-By-The-Sea

Building Department 4501 Ocean Drive
Lauderdale-By-The-Sea, FL 33308
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Time Limits for Construction - NOTICE TO OWNER

Section 6-12 of the Town's Code of Ordinances requires:

- 1. The construction of any new structure or new addition to an existing structure to be completed and all construction material, equipment and debris removed from the property within 18 months of the date of the issuance of the first building permit.***
- 2. The exterior elements of any repair or renovation to an existing structure which requires a building permit shall be completed and all construction material, equipment and debris removed from the property within six months of the issuance of the first building permit.***

This notice is the minimum 60 days notice required in 6-12.9(g).

The Failure to complete the construction at _____, by the construction deadline may result in a fine or legal action by the Town.

If there are extenuating circumstances that prohibit the property owner from completing the construction within the deadline, the owner may seek an extension of time from the Town Commission. An application for extension of time may be obtained from the Development Services Department or Town Clerk.

Owner's Acknowledgement

I acknowledge receipt and understanding of the Town's code provisions regarding the time period to complete a construction projects.

Signature: _____ Date: _____

Print Name: _____

Address of Property: _____

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BUILDING DEPARTMENT

**DURING A HURRICANE WATCH & BEFORE THE ONSET
OF HURRICANE VELOCITY WINDS YOU ARE REQUIRED TO**

SECURE THIS SITE

**IN ACCORDANCE WITH THE BROWARD COUNTY ADMINISTRATIVE PROVISIONS
OF THE FLORIDA BUILDING CODE SECTION 110.13**

**All loose objects in exposed outdoor locations shall be lashed
to rigid construction or shall be stored inside an enclosed
structure.**

Florida Building Code Broward County Administrative Provisions Section 110.13.2.4

**NOTICES ISSUED BY THE NATIONAL WEATHER SERVICE OF A HURRICANE WATCH ARE DEEMED
SUFFICIENT NOTICE TO THE OWNER OF REAL PROPERTY UPON WHICH CONSTRUCTION IS
OCCURRING, OR ANY CONTRACTOR RESPONSIBLE FOR SAID CONSTRUCTION, TO SECURE
LOOSE CONSTRUCTION DEBRIS AND LOOSE CONSTRUCTION MATERIALS AGAINST EFFECTS OF
HURRICANE FORCE WINDS**

This includes but not limited to:

- 110.13.2.1 Road Right-of-Way shall remain clear of construction waste and trash
- 110.13.2.2 Waste and Trash Enclosures Temporary Toilets
- 110.13.2.3 Loose Construction Debris Forms and Construction Materials
- 110.13.2.5 Roofing Tile and Materials Construction Shacks
- 110.13.2.5 (1) Loading of Roof Tile
- 110.13.2.5 (4) Store the construction materials inside an enclosed structure.
- 110.13.3 Building materials shall be loaded on a roof no earlier than (200 working days prior to permanent installation.
- Temporary Electric Service Poles

AND PROTECT ALL GLASS AREAS

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IMPERVIOUS & PERVIOUS SPACE CALCULATIONS

PERMIT # _____ DATE _____

OWNER _____

CONTRACTOR _____

TOTAL LOT AREA (SQ.FT.) _____

BUILDING FOOTPRINT AREA _____ % _____

PORCH/PAIOS/WAKWAYS/SLABS AREA _____ % _____

DRIVEWAY AREA _____ % _____

POOL/PATIO AREA _____ % _____

TOTAL IMPERVIOUS AREA _____ %

TOTAL PERVIOUS AREA _____ %

CONTRACTORS SIGNATURE

CERTIFIED SEAL

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH THE APPLICABLE LAWS, REGULATIONS, CONSTRUCTION AND ZONING.

PROPERTY OWNER/AGENT SIGNATURE

DATE

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