



HOME OF PELICAN ISLAND  
BUILDING DEPARTMENT  
FIRE PREVENTION OFFICE

1225 MAIN STREET • SEBASTIAN, FLORIDA 32958  
TELEPHONE: (772) 589-5537 FAX (772) 589-2566

## OWNER/BUILDER PERMIT APPLICATION

ALL OF THE FOLLOWING MUST BE FILLED IN BY APPLICANT, ACCORDING TO FS 713.135

PERMIT # \_\_\_\_\_ DATE: \_\_\_\_\_

INDIAN RIVER COUNTY PARCEL ID # \_\_\_\_\_ RECEIVED BY: \_\_\_\_\_

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_ FLOOD ZONE: \_\_\_\_\_

TYPE OF WORK:  NEW STRUCTURE  ADDITION  ALTERATION  REPAIR  DEMOLITION  OTHER

WORK INCLUDES:  STRUCTURAL  ELECTRICAL  PLUMBING  MECHANICAL  ROOFING - SLOPE: \_\_\_\_\_

FIRE SYSTEM  POOL  ALUMINUM STRUCTURE  SHED  FENCE  SLAB OR DECK  OTHER

WORK DESCRIPTION: \_\_\_\_\_

ESTIMATED JOB VALUE: \$ \_\_\_\_\_ TOTAL S/F \_\_\_\_\_ UNDER AIR \_\_\_\_\_

JOB NAME: \_\_\_\_\_

JOB ADDRESS: \_\_\_\_\_

PROPERTY OWNER'S NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

CONTACT E-MAIL ADDRESS: \_\_\_\_\_

CONTRACTOR BUSINESS NAME: \_\_\_\_\_ LICENSE #: \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CONTACT PHONE: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP CODE \_\_\_\_\_

CONTACT E-MAIL ADDRESS: \_\_\_\_\_

ARCHITECT/ENGINEER: \_\_\_\_\_ PHONE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

CITY/STATE: \_\_\_\_\_ ZIP CODE: \_\_\_\_\_

CONTACT E-MAIL ADDRESS: \_\_\_\_\_

PRESENT USE: \_\_\_\_\_ PROPOSED USE: \_\_\_\_\_ OCCUPANT LOAD: \_\_\_\_\_

NUMBER OF:  STORIES  BAYS  UNITS  BEDROOMS  HEIGHT \_\_\_\_\_

TYPE OF CONSTRUCTION: \_\_\_\_\_ GROUP OCCUPANCY: \_\_\_\_\_ AREA \_\_\_\_\_

IS THE BUILDING PRESENTLY EQUIPPED WITH AN AUTOMATIC FIRE SPRINKLER SYSTEM?  YES  NO

BONING COMPANY: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

MORTGAGE LENDER: \_\_\_\_\_ ADDRESS: \_\_\_\_\_

**SUB-CONTRACTOR SUMMARY**

PERMIT # \_\_\_\_\_

\_\_\_\_\_ will be using the following sub-contractors  
(Company/Business Name)  
for the project located \_\_\_\_\_  
(Street Address)

It is understood that **ALL** sub-contractors are required to be licensed regardless if a Separate permit is required. If there are any changes in status regarding the participation of the sub-contractors listed below, I will immediately advise the City of Sebastian Building Department.

\_\_\_\_\_

**ELECTRICAL CONTRACTOR:** \_\_\_\_\_  
QUALIFIER: \_\_\_\_\_  
PHONE # \_\_\_\_\_ LICENSE # \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**PLUMBING CONTRACTOR:** \_\_\_\_\_  
QUALIFIER: \_\_\_\_\_  
PHONE # \_\_\_\_\_ LICENSE # \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**MECHANICAL CONTRACTOR:** \_\_\_\_\_  
QUALIFIER: \_\_\_\_\_  
PHONE # \_\_\_\_\_ LICENSE # \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**ROOFING CONTRACTOR:** \_\_\_\_\_  
QUALIFIER: \_\_\_\_\_  
PHONE# \_\_\_\_\_ LICENSE # \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

\_\_\_\_\_

**OTHER CONTRACTOR:** \_\_\_\_\_  
QUALIFIER: \_\_\_\_\_  
PHONE# \_\_\_\_\_ LICENSE # \_\_\_\_\_  
E-MAIL ADDRESS: \_\_\_\_\_

**NOTE: THE ABOVE CONTRACTORS ARE REQUIRED TO PULL BUILDING PERMITS AND SHALL BE REQUIRED TO SUBMIT A "SUB-CONTRACTOR PERMIT APPLICATION" PRIOR TO ISSUANCE OF THE MASTER PERMIT.**

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.**

**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.

A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT SIGNED BY THE OWNER, SHALL BE FILED WITH THE PERMITTING AUTHORITY IF THE VALUE IS \$2,500 OR MORE, EXCEPT HEATING OR AIR CONDITIONING CHANGE OUTS LESS THAT \$7,500.

**NOTICE:** IN ADDITION TO 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, STATE AGENCIES, OR FEDERAL AGENCIES.

ANY CHANGE IN BUILDING PLANS OR SPECIFICATIONS **MUST** BE RECORDED WITH THIS OFFICE. ANY WORK NOT COVERED ABOVE MUST HAVE A VALID PERMIT PRIOR TO STARTING. IN CONSIDERATION OF GRANTS, THIS PERMIT, THE OWNER, AND THE BUILDING CONTRACTOR AGREE TO ERECT THIS STRUCTURE IN FULL COMPLIANCE WITH THE BUILDING AND ZONING CODES OF THE CITY OF SEBASTIAN.

**NOTE:** THIS PERMIT APPLICATION IS VOID AFTER 180 DAYS UNLESS THE WORK, WHICH IT COVERS, HAS COMMENCED. **ALL CONTRACTORS MUST** HAVE A VALID STATE CERTIFICATION, STATE REGISTRATION, OR CERTIFICATE OF COMPETENCY ISSUED BY THE CITY OF SEBASTIAN PRIOR TO OBTAINING PERMIT.

**OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all laws applicable regulating construction and zoning.**

\_\_\_\_\_  
❖ OWNER/AGENT SIGNATURE

**AN OWNER ACTING AS THEIR OWN CONTRACTOR MUST PERSONNALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THE PERMIT APPLICATION. PER FS 489.103**

\_\_\_\_\_  
PRINTED NAME OF OWNER/AGENT

DATE: \_\_\_\_\_

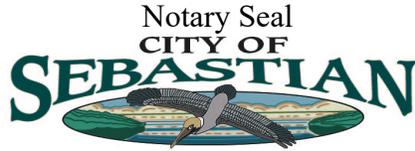
❖ Individuals who sign as the owner's agent must first obtain legal power of attorney to sign on their behalf.

**STATE OF FLORIDA  
COUNTY OF**

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ personally appeared \_\_\_\_\_ who is \_\_\_\_\_ personally known to me or has \_\_\_\_\_ produced identification.

Type of identification produced: \_\_\_\_\_.

\_\_\_\_\_



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## **OWNER / BUILDER DISCLOSURE STATEMENT**

As an owner of your property you may act as your own contractor through a specific exemption to contracting law. The following disclosure statement is required to be filled out by any owner who wishes to act as their own contractor and to express any applicable restrictions and responsibilities as required by Florida Statute 489.103.

### **OWNERS MUST PERSONALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THE APPLICATION**

**BY SIGNING THIS STATEMENT, I ATTEST THAT:** *(Initial to the left of each statement)*

	I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.
	I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.
	I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on all permits and contracts.
	I Understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease, unless I am completing the requirements of a building permit where the contractor listed on the permit substantially completed the project. If a building or residence that I have built or substantially improved myself is sold or leased within in 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates this exemption.
	I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.
	I understand that I may not hire an unlicensed individual person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.
	I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for

	<b>injuries to workers on my property.</b>
	<b>I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. <u>Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee.</u> I understand that my failure to follow these laws may subject me to serious financial risk.</b>
	<b>I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.</b>
	<b>I am of aware of construction practices and I have access to the Florida Building Code.</b>
	<b>I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 1-850-487-1395 or at <a href="http://www.myflorida.com/dbpr/pro/cilb/">www.myflorida.com/dbpr/pro/cilb/</a> for more information about licensed contractors.</b>
	<b>I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the address listed below.</b>
	<b>I agree to notify the building department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure or in the permit application package.</b>
	<b>Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board, the Department of Business and Professional Regulation and the building department may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.</b>

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

\_\_\_\_\_  
Signature of Owner-Builder

\_\_\_\_\_  
Date

**STATE OF FLORIDA COUNTY OF INDIAN RIVER**

I hereby certify that on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ personally appeared \_\_\_\_\_ who is \_\_\_\_\_ personally known to me or has \_\_\_\_\_ produced identification.

Type of identification produced: \_\_\_\_\_.

\_\_\_\_\_  
Official Signature of Notary Public

\_\_\_\_\_  
Notary Seal

**A violation of this exemption is a misdemeanor of the first degree punishable by a term of imprisonment not exceeding 1 year and/or a \$1,000.00 fine in addition to any civil penalties. In addition, the local permitting jurisdiction shall withhold**

**final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.**