

# Town of Indialantic

## Building Permit Application Required Support Documents

Incomplete packages *will not* be accepted.

- Verify address is in the Town.  
Brevard County Property Appraiser website.  
Millage Code will confirm proper location.
- Current completed permit application.
- Owner and Contractor have signed/notarized permit application.
- Copy of Contractor's Licenses (State, County, Municipal)
- Copy of Contractor's Insurances (Workers' Compensation or Exemption & General Liability)  
These will be submitted with *each* permit application!
- For any permit with a value of \$2,500.00 or more. *Construction*  
Notice of Commencement must be completed and recorded with Clerk of the Court.  
Owner keeps original, Town keeps copy.
- For any permit with a value of \$7,500.00 or more. *Mechanical*  
Notice of Commencement must be completed and recorded with Clerk of the Court.  
Owner keeps original, Town keeps copy.
- Three (3) copies of *SEALED* plans for *commercial* projects.
- Two (2) copies of *SEALED* plans for *residential* projects.  
New homes or additions that include a bedroom must have filed a Sewer Permit application with Brevard County. A copy of the Sewer Permit must be submitted with the plans.
- If owner is doing work him/herself, a Disclosure Statement For Owner Contractors is required.
- Roll-off will need to be removed before final inspection.
- After the application has been approved by the Building Official, the permit and, if applicable, job or site copy are given to owner/contractor after payment of any fee(s).
- The Town of Indialantic only accepts Cash, Checks or Money Orders for payment. Paying with a Credit Card in person or via phone is not an option.

**Permit and job or site copy must be posted at the job site.**

# Town of Indialantic

## Building Permit Application Required Support Documents

### **Credit or Debit Card Payment Method**

Payments made by credit or debit cards are *only* accepted online. Be sure to enter the card number from your actual card.

Online payments can be made with the following credit cards:  
American Express, Discover Card, Master Card or Visa

Online payments can be made with the following debit cards:  
Master Card or Visa

NOTICE: A convenience fee of \$2.95 (up to \$100.00, \$2.00 each additional \$100.00) is added for use of a Credit or Debit Card. This fee goes entirely to our third party vendor.

### **Electronic Check Payment Method**

Payments made by electronic check are *only* accepted online. Be sure to enter the routing transit number from your actual check.

NOTICE: A convenience fee of \$2.95 (up to \$100.00, \$2.00 each additional \$100.00) is added for use of electronic check. This fee goes entirely to our third party vendor.

NOTICE: If your banking institution declines payment to our service provider due to incorrect account and/or routing-transit numbers, you will be charged an additional \$35.00 reprocessing fee. DO NOT USE Money Market Accounts, Savings Accounts or Credit Card Checks for Electronic Check payments.

Payments are accepted online at **Indialantic.com**

PERMIT APPLICATION

Town of Indialantic  
 216 Fifth Avenue  
 Indialantic, Florida 32903  
 (321) 727-3377 - Office  
 (321) 984-3867 - Fax  
 Cliff Stokes, Building Official



Permit # \_\_\_\_\_

Application Date: \_\_\_\_\_

PLEASE PRINT LEGIBLY – INCLUDE STREET NUMBER/NAME, CITY & STATE

Job Name: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 TWP: \_\_\_\_\_ RNG: \_\_\_\_\_ SEC: \_\_\_\_\_ BLK/PAR: \_\_\_\_\_ LOT: \_\_\_\_\_ COUNTY: BREVARD

Owner Name: \_\_\_\_\_ Phone: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Contractor's Firm: \_\_\_\_\_  
 Qualifier's Name: \_\_\_\_\_ License #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_  
 Phone #: \_\_\_\_\_ Fax#: \_\_\_\_\_ E-mail: \_\_\_\_\_  
 Architect/Engineer: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Permit Type: Residential Commercial

Building     Demo     Electrical     Mechanical     Plumbing     Fence     Gas

Above Ground Pool/Spa     In-ground Pool/Spa    Site Plan # \_\_\_\_\_

Shed     Fire Alarm     Fire Sprinkler    Other \_\_\_\_\_

Roofing: Shingle Mfg.: \_\_\_\_\_     Pitch: \_\_\_\_\_     # of Squares: \_\_\_\_\_

Description of Work: \_\_\_\_\_  
 Value of Construction: \$ \_\_\_\_\_ Total Area of Construction: \_\_\_\_\_ Sq. Ft.

Electrical: \_\_\_\_\_ State Reg./Cert. #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Signature: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State Reg./Cert. #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Signature: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State Reg./Cert. #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Signature: \_\_\_\_\_

Roofing: \_\_\_\_\_ State Reg./Cert. #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Signature: \_\_\_\_\_

Other: \_\_\_\_\_ State Reg./Cert. #: \_\_\_\_\_ Phone #: \_\_\_\_\_  
 Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Signature: \_\_\_\_\_

**APPLICANT'S AFFIDAVIT**

Application is hereby made to obtain a permit to do the work and installation as indicated. The Building Code in effect at the time of this application is the **CURRENT FLORIDA BUILDING CODE AS ADOPTED BY THE FLORIDA LEGISLATURE.** I understand that all permits require inspections as indicated. This permit application is valid for 180 days from the date of submission.

I certify that no work or installation has commenced prior to the issuance of a permit. By signing, applicant affirms that all above is true and correct and that he/she is an authorized agent of the Contractor/Owner and has authority to apply for this permit.

**WARNING TO OWNER: 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.**

Business/Tenant Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\_\_\_\_\_  
 OWNER/AGENT'S SIGNATURE

STATE OF FLORIDA  
 COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, 20\_\_\_ by \_\_\_\_\_ personally known to me, or has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
 Notary as to Owner/Agent

Stamp

\_\_\_\_\_  
 CONTRACTOR'S SIGNATURE

STATE OF FLORIDA  
 COUNTY OF BREVARD

The foregoing instrument was acknowledged before me this \_\_\_ day of \_\_\_\_\_, 20\_\_\_ by \_\_\_\_\_ personally known to me or has produced \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
 Notary as to Qualifier

Stamp

Town of Indialantic  
Permit Authorization Form

(PRINT ALL INFORMATION LEGIBLY)

NAME OF FIRM \_\_\_\_\_

QUALIFIER/LICENSE HOLDER \_\_\_\_\_

LICENSE NO. \_\_\_\_\_

I, \_\_\_\_\_ do hereby authorize \_\_\_\_\_

to obtain a permit on my behalf under my license for the job at the following address

\_\_\_\_\_

\_\_\_\_\_  
Signature of License Holder

\_\_\_\_\_  
Date

This foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_  
20 \_\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who has  
produced \_\_\_\_\_ (type of identification) as identification.

\_\_\_\_\_  
Notary Public, State of Florida

(STAMP)

NOTICE OF COMMENCEMENT

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

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 property: (legal description of property, and street address if available) \_\_\_\_\_
2. General description of improvement: \_\_\_\_\_
3. Owner information:
  - a. Name and address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_
  - c. Name and address of fee simple titleholder (if other than owner): \_\_\_\_\_
4. Contractor:
  - a. Name and address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_
5. Surety:
  - a. Name and address: \_\_\_\_\_
  - b. Amount of bond \$ \_\_\_\_\_ Phone number: \_\_\_\_\_
6. Lender:
  - a. Name and address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_
7. Persons with 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:
  - a. Name and address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_
8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
  - a. Name and address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_
9. Expiration date of notice of commencement (the expiration date is one (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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

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

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

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ by \_\_\_\_\_ (name of person) as \_\_\_\_\_ (type of authority, ...e.g. officer, trustee, attorney in face) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).

\_\_\_\_\_  
Signature of Notary Public – State of Florida  
Print, type, or stamp commissioned name of Notary Public

Personally Known \_\_\_\_\_ OR Produced Identification \_\_\_\_\_  
Type of identification produced \_\_\_\_\_

Verification pursuant to Section 92.525, Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

\_\_\_\_\_  
Signature of natural person signing above

# Town of Indialantic

Building Department

216 Fifth Avenue, Indialantic, Florida 32903

321-727-3377 Office 321-984-3867 Fax

Monday – Friday 7:00 a.m. – 4:00 p.m.

---

## Supplemental Fasteners Inspection Affidavit

Permit Number \_\_\_\_\_

I, \_\_\_\_\_, licensed as a(n)  
(Please print name & check license type)

Contractor\*

Engineer

Architect

FS 468 Building Inspector\*

license number \_\_\_\_\_ did personally inspect the *roof deck nailing*

work on \_\_\_\_\_ of property located at  
(Date)

\_\_\_\_\_, Brevard County, Florida.  
(Job Site Address)

Based upon the examination, I have determined the installation under the *prescriptive method* was done according to the Hurricane Mitigation Retrofit Manual Section 201.1 (Based on 553.844 F.S.).

---

Signature, Seal and Date

OR

STATE OF FLORIDA

COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_ by

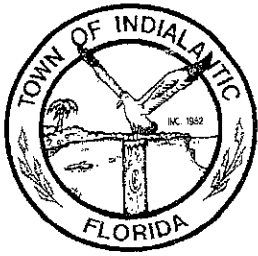
\_\_\_\_\_ who is personally known to me \_\_\_\_\_ or has

produced identification \_\_\_\_\_.

---

Notary Signature/ Notary Stamp

\* General, Building, Residential, Roofing Contractor or any individual certified under 468 F.S. to make such an inspection.



# Town of Indialantic

216 Fifth Avenue

Indialantic, Florida 32903

Phone: 321-727-3377

Fax: 321-984-3867

Cliff Stokes, Building Official

## **“OWNER/BUILDER” APPLICATION FOR CONTRACTOR EXEMPTION**

Florida Statutes 489.103 Exemptions.

7) Owners of property may act as their own contractor and provide direct, onsite supervision themselves of all work not performed by licensed contractors:

(a) When building or improving farm outbuildings or one-family or two-family residences on such property for the occupancy or use of such owners and not offered for sale or lease, or building or improving commercial buildings, at a cost not to exceed \$75,000, on such property for the occupancy or use of such owners and not offered for sale or lease. In an action brought under this part, proof of the sale or lease, or offering for sale or lease, of any such structure by the owner-builder within 1 year after completion of same creates a presumption that the construction was undertaken for purposes of sale or lease.

(b) When repairing or replacing wood shakes or asphalt or fiberglass shingles on one-family, two-family, or three-family residences for the occupancy or use of such owner or tenant of the owner and not offered for sale within 1 year after completion of the work and when the property has been damaged by natural causes from an event recognized as an emergency situation designated by executive order issued by the Governor declaring the existence of a state of emergency as a result and consequence of a serious threat posed to the public health, safety, and property in this state. This subsection does not exempt any person who is employed by or has a contract with such owner and who acts in the capacity of a contractor. The owner may not delegate the owner's responsibility to directly supervise all work to any other person unless that person is registered or certified under this part and the work being performed is within the scope of that person's license. For the purposes of this subsection, the term "owners of property" includes the owner of a mobile home situated on a leased lot. To qualify for exemption under this subsection, an owner must personally appear and sign the building permit application and must satisfy local permitting agency requirements, if any, proving that the owner has a complete understanding of the owner's obligations under the law as specified in the disclosure statement of this section. If any person violates the requirements of this subsection, the local permitting agency 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. The local permitting agency shall provide the person with a disclosure statement. Owners violating the above shall be subject to a penalty under Florida Statute 455.228 and may be issued a citation and/or civil penalty.

\_\_\_\_\_initial

Owner Builder Affidavit, Indialantic



## DISCLOSURE STATEMENT

Florida Statute 489.103(7) requires all owners of property acting as their own contractor to complete the following disclosure statement. This is an affidavit for owner/builders applying for building permits under the owner/builder contractor exemption.

1. 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.

2. 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.

3. 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 permits or contracts.

4. 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. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will assume that I built or substantially improved it for sale or lease, which violates the exemption.

5. I UNDERSTAND that, as the owner-builder, I must provide direct, onsite supervision of the construction.

6. I UNDERSTAND that I may not hire an unlicensed 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 ordinance.

7. 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 injuries to workers on my property.

8. 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. 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 worker's compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

9. 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.

\_\_\_\_\_ initial

Owner Builder Affidavit, Indialantic

10. 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, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at (850) 487-1395 or www.myfloridalicense.com for more information about licensed contractors.

11. 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 following address:

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

12. I AGREE to notify the Indialantic Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. 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 and the Department of Professional Regulation 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 also 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 worker's compensation coverage. Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

**I HEREBY ACKNOWLEDGE** that I have read and understand the above Owner/Builder Affidavit and declare under penalty of perjury that the foregoing is true and correct, dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature: Owner/Builder

\_\_\_\_\_  
Printed Name: Owner/Builder

**STATE OF FLORIDA**  
**COUNTY OF BREVARD**

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by

\_\_\_\_\_, who is personally known to me or who produced \_\_\_\_\_

identification, and did/did not take oath.

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
initial  
Owner Builder Affidavit, Indialantic

I HEREBY ACKNOWLEDGE that I have read and understand the above Owner/Builder Affidavit and declare under penalty of perjury that the foregoing is true and correct, dated this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Signature: Owner/Builder

\_\_\_\_\_  
Printed Name: Owner/Builder

**STATE OF FLORIDA  
COUNTY OF BREVARD**

Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by \_\_\_\_\_, who is personally known to me or who produced \_\_\_\_\_

identification, and did/did not take oath.

\_\_\_\_\_  
Signature of Notary

**\*489-Part II, No. 6, exempts from licensing an owner doing or supervising any electrical work on a one or two-family residence and/or commercial work less than \$75,000.**

# TOWN OF INDIALANTIC BUILDING DIVISION

216 Fifth Avenue

Indialantic, Florida 32903

Phone: 321-727-3377

Fax: 321-984-3867

## CHANGE OF CONTRACTOR REQUEST

Building Permit # \_\_\_\_\_

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

All contractors must have an active license and current general liability and worker's compensation insurance.

- Completed Application for Building Permit – signed and notarized. (If owner acting as contractor, owner must sign application and submit an Owner/Builder Application for Contractor Exemption).
- Subcontractor Authorization for each named subcontractor, if applicable.
- One (1) copy of recorded Termination of Notice of Commencement.
- One (1) copy of recorded Notice of Commencement.
- Any other documents that require the contractor's name or signature.
- Statement from the new contractor assuming responsibility for any work to date that has not been inspected and approved by a Town of Indialantic Building Inspector.

**As the property owner, I attest, by my signature on this form that I have notified the current contractor that he/she has been discharged from this job.**

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
Date

Subscribed and sworn to before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
personally appeared \_\_\_\_\_ who is personally known to me  
or produced \_\_\_\_\_ as identification, and who did not take an oath.

\_\_\_\_\_  
Notary Public Signature

Seal