



BUILDING DEPARTMENT INFORMATION

GENERAL

Prior to working in the City of Punta Gorda, **ALL** contractors and **ALL** subcontractors must first obtain a City of Punta Gorda Certificate of Competency.

Anyone can pick up or drop off permits, however, the Qualifier must sign all permit applications. Stamped or photocopies of the qualifier's signature are not acceptable.

A Notice of Commencement (N-O-C) must be submitted for any permit application with a job valuation over **\$2500** unless it is for Air Conditioning which requires the N-O-C for valuations over **\$7500**.

INSPECTIONS

To schedule an inspection you must have the permit number and job address. Call the inspection(s) on the Building Department's inspection line at **(941) 575-3327**. Leave your name, permit number, job address, inspection type, and either AM or PM inspection. Inspections called **before 6:00 AM** will be scheduled on the current working day. Any inspection called **after 6:00 AM** will be scheduled on the next working day. Please note that times of inspections could be changed at our department's discretion. Failure to provide required information may prevent your inspection from being scheduled.

Prior to the **Footer/Slab** inspection on Commercial or Multi-Family projects, a compaction test must be submitted to this office and approved or the inspection cannot be scheduled.

Required two working days prior to tie beam inspection:

1 – A sealed finish floor elevation survey (with front, side and rear setbacks). This document may be faxed to 941.575.3347 or e-mailed to buildingdept@pgorda.us. Be sure the seal is visible prior to sending.

AND

2 – If there are no changes to the original truss layouts submitted with the permit application, a sealed letter from the architect/engineer stating he/she has reviewed the drawings and that there are no changes.

3 – If there are changes to the original truss layouts, two sets of truss engineering drawings and sealed letters from the architect/engineer stating he/she has reviewed the drawings and has listed the changes.

The submitted/approved sealed letter must be on the job site for the tie beam inspection, the truss engineering must be on the job site for the framing inspection.

Re-inspections can be scheduled before paying the fee(s), but **ALL** fees must be paid before you can schedule final inspection(s).

A Sealed Finished Construction Elevation Certificate (FEMA) is required must be submitted and approved prior to issuance of the Certificate of Occupancy (CO).

Termite Protection Certificate of Compliance from pest control company (**FL Building Code 1816.1.7 and 320.1**) is required and must be submitted and approved prior to the issuance of the CO.

FEES

Refer to the enclosed Permit Fee Schedule for specific costs.

Permit fees for new construction are based on job valuation. There is a base fee of \$50.00 plus \$7.00 per each \$1000.00 of valuation.

The valuation for a new single family residence is based on the current (at time of application) International Building Code construction costs data.

For all Building permits, a surcharge of .015 of the permit fee is charged by the Florida Dept. of Business and Professional Regulation. This fee must be paid at permit issue.

For all Building permits, a surcharge of .010 of the permit fee is charged by the Florida Dept. of Community Affairs. This fee must be paid at permit issue.

Impact fee information, can be obtained by contacting the Zoning Division at (941) 575-3381 or (941) 575-3314. The Building Division does not perform the calculations on impact fees.

If you have any questions please call the Building Department at 941-575-3324

CITY OF PUNTA GORDA
BUILDING PERMIT CHECKLIST

All drawings must be drawn to scale with sufficient clarity and detail.

Reversed plans (mirror image) are not accepted.

RESIDENTIAL ONE AND TWO FAMILY

1. Building permit application completely filled out and signed by **QUALIFIER** only. Be sure to include telephone and fax numbers and e-mail address.
2. Line and Grade application (on the reverse side of the permit application) completely filled out and signed by qualifier.
3. Certified copy of the Notice of Commencement.
4. Qualifier's Affidavit with notarized signature.
5. County Impact Fee Affidavit with notarized signature.
6. Sub-contractors List.
7. Roofing System Sheet
8. **2** Sets of completed drawings, **sealed** by a Structural Engineer or an Architect.
9. **3** Sets of **sealed** surveys.
10. **3 signed and sealed** site drainage plans.
11. **4** Sets of plot plans, if not part of the original drawings.
12. **2** Sets of Thermal Energy Calculations and **1** copy minimum Manual-J.
13. **2** Sets of complete truss layouts from truss manufacturer approved by the architect/engineer of record.
14. Provisions affidavit.
15. Data Summary Worksheet

buildingdept@ci.punta-gorda.fl.us

CITY OF PUNTA GORDA PERMIT APPLICATION

PARCEL ID#:		CODE	DATE:	PERMIT#:
JOB ADDRESS:			UNIT #:	BUILDING #:
BLOCK:			SECTION:	PHASE #:
LOT:		SUBDIVISION:		PROJECT/CONDO NAME
OWNER NAME:	MAILING ADDRESS	ZIP	PHONE	
CONTRACTOR'S BUSINESS NAME:	MAILING ADDRESS	ZIP	PHONE	FAX
CONTRACTOR'S STATE REGISTRATION NO.:		CONTRACTOR'S CITY CERTIFICATE NO.:		
ARCHITECT:		ENGINEER:		
USE OF BUILDING:	<input type="checkbox"/> SINGLE FAMILY	<input type="checkbox"/> DUPLEX	<input type="checkbox"/> MULTI-FAMILY	<input type="checkbox"/> COMMERCIAL, DESCRIBE
DESCRIPTION OF WORK – SPECIFICALLY:				
NOTICE OF COMMENCEMENT:			VALUATION OF WORK:	
SETBACK:	RIGHT	FRONT	REAR	S.F. LIVING
LEFT	NUMBER OF STORIES	ZONING DISTRICT	FLOOD ZONE	FLOOD ELEVATION
TYPE OF CONSTRUCTION	CITY IMPACT FEE ASSESSMENT	COUNTY IMPACT FEE ASSESSMENT	DBPR SURCHARGE	S.F. TOTAL
NUMBER OF UNITS	LOT TYPE	DCA SURCHARGE		
DRC #	VARIANCE #	OTHER FEES	PERMIT FEE	TOTAL ALL FEES
SPECIAL CONDITIONS:				
<p style="text-align: center;">NOTICE</p> <p>Separate permits are required for electrical, plumbing, heating, ventilating, air conditioning, roofing, and lawn sprinklers. This permit becomes null and void if work or construction authorized is not commenced within 6 months, or if construction or work is suspended or abandoned for a period of 6 months at any time after work is commenced.</p> <p>I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF A PERMIT DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.</p>			ACCEPTED BY:	DATE
CONTRACTOR (QUALIFIER) SIGNATURE _____			PLANS CHECKED BY:	DATE
DATE _____			APPROVED FOR ISSUANCE BLDG:	DATE
SIGNATURE OF OWNER (IF OWNER/BUILDER) _____			SPECIAL APPROVALS:	DATE
DATE _____			APPROVED R.O.W. CONST.:	DATE
			APPROVED FIRE DEPT.:	DATE
			APPROVED ZONING:	DATE
			APPROVED HISTORIC:	DATE
FAILURE TO READ AND UNDERSTAND THE CONDITIONS, GENERAL PROVISIONS, AND SPECIAL PROVISIONS, ON THE BACK HEREOF, DOES NOT RELIEVE THE APPLICANT FROM HIS OBLIGATIONS AS STATED ABOVE. IF ANY CONDITION OR PROVISION IS NOT FULLY UNDERSTOOD, THE APPLICANT SHOULD REQUEST CLARIFICATION BEFORE SIGNING THIS APPLICATION.				
PERMIT VALIDATION CK# _____ RECEIPT: _____ CASH: _____ DATE: _____				

See Reverse Side

CITY OF PUNTA GORDA LINE & GRADE APPLICATION

		CODE	DATE:	APPLICATION #:	
JOB ADDRESS:			UNIT #:	BUILDING #:	PHASE #:
BLOCK:	LOT:	SECTION:	SUBDIVISION:	PROJECT/CONDO NAME	
OWNER NAME:		MAILING ADDRESS	ZIP	PHONE	
CONTRACTOR'S BUSINESS NAME:		MAILING ADDRESS	ZIP	PHONE	
CONTRACTOR'S STATE REGISTRATION NO.:			CONTRACTOR'S CITY CERTIFICATE NO.:		
USE OF BUILDING:	<input type="checkbox"/> SINGLE FAMILY	<input type="checkbox"/> DUPLEX	<input type="checkbox"/> MULTI-FAMILY	<input type="checkbox"/> COMMERCIAL, DESCRIBE	
DESCRIPTION OF WORK – SPECIFICALLY: Line and Grade only					
TYPE OF CONSTRUCTION	ZONING DISTRICT	FLOOD ZONE	FLOOD ELEVATION	LOT TYPE	
Special Conditions:				Line & Grade Fee: \$100.00	
<p>NOTICE</p> <p>I HEREBY CERTIFY THAT I HAVE READ AND EXAMINED THIS APPLICATION AND KNOW THE SAME TO BE TRUE AND CORRECT. ALL PROVISIONS OF LAWS AND ORDINANCES GOVERNING THIS TYPE OF WORK WILL BE COMPLIED WITH WHETHER SPECIFIED HEREIN OR NOT. THE GRANTING OF THIS APPLICATION DOES NOT PRESUME TO GIVE AUTHORITY TO VIOLATE OR CANCEL THE PROVISIONS OF ANY OTHER STATE OR LOCAL LAW REGULATING CONSTRUCTION OR THE PERFORMANCE OF CONSTRUCTION.</p>			ACCEPTED BY:		DATE
			APPROVED BY:		DATE
			CONTRACTOR (QUALIFIER) SIGNATURE _____		DATE _____
SIGNATURE OF OWNER (IF OWNER/BUILDER) _____		DATE _____			
VALIDATION CK# _____ RECEIPT: _____ CASH: _____ M/C: _____ VISA: _____ DATE: _____					

NOTICE OF COMMENCEMENT

State of Florida

Permit Number: _____

County of Charlotte

Tax Folio or Parcel Number: _____

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** (a complete legal description or parcel number; and a complete street address with city/state/zip code, if available):

2. **General Description of Improvement:** _____

3. **Owner Information:**

a. **Name:** _____

b. **Address:** _____ **City/State/Zip Code:** _____

c. **Interest in Property:** _____

d. **Name and Address of Fee Simple Title Holder** (if different from the Owner listed above): _____

4. **Contractor Information:**

a. **Name:** _____ **Phone Number:** _____

b. **Address:** _____ **City/State/Zip Code:** _____

5. **Surety Information:**

a. **Name:** _____ **Phone Number:** _____

b. **Address:** _____ **City/State/Zip Code:** _____

c. **Bond Amount:** \$ _____

6. **Lender Information:**

a. **Name:** _____ **Phone Number:** _____

b. **Address:** _____ **City/State/Zip Code:** _____

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/Address/Phone Number: _____

8. **In addition to himself/herself, Owner designates the following to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b) Florida Statutes:**

Name/Address/Phone Number: _____

9. **Expiration Date of Notice of Commencement** (the expiration date is one year from the recording date unless a different date is specified here):

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.

Under penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

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

Printed Name

Company Name and Title

State of _____, County of _____ Sworn to (or affirmed) and subscribed before me, by means of
physical presence or online notarization, this _____ day of _____, 20 _____ by _____,
(name of person making statement)

personally known, or produced identification with type of identification _____.

Signature of Notary Public

Printed or Stamped Commissioned Name of Notary Public

**CITY OF PUNTA GORDA
QUALIFIER'S AFFIDAVIT**

QUALIFIER'S PRINTED NAME: _____
DBA (If applicable): _____
JOB ADDRESS: _____
PERMIT #: _____

I hereby certify that all documents for the above named job requiring my signature, contain my original signature, none are photo copies or stamps, and no one else has signed or will sign in my place.

Signature of Qualifier

Date Signed

STATE OF _____

COUNTY OF _____

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

Signature Notary Public

SEAL

Date

CHARLOTTE COUNTY IMPACT FEES
AREA 103 B PUNTA GORDA
(Based on Impact Fees Effective 05/22/98 at 5% Discount)

Contractor/Owner: _____

Permit #: _____

Address: _____

Date: _____

Pay impact fee at issuance of building permit.

Pay impact fee immediately prior to issuance of the certificate of occupancy for the referenced improvement.

THE UNDERSIGNED hereby represents that authority exists from the owner and contractor to make the representations with reference to land use and election of time of payment.

Print Name of Owner: _____

Print Name of Contractor: _____

Date _____ Owner/Contractor _____

STATE OF FLORIDA
COUNTY OF CHARLOTTE

The above election was acknowledged before me by _____, who is the owner/contractor for the referenced improvement, and who stated under oath that the representations in the above election are true and correct.

My Commission Expires: _____ Notary Public _____

FOR OFFICE USE ONLY

Land Use Type:

Residential: SF / MF / MH / O / Hotel/Motel

Impact Fee _____ * _____ Units = _____

Commercial: _____

Impact Fee _____ * _____ Square Feet = _____

Commercial: _____

Impact Fee _____ * _____ Square Feet = _____

Signature

Total Due \$ _____ **Receipt Date** _____ **Receipt Number** _____

**CITY OF PUNTA GORDA
BUILDING DEPARTMENT
QUALIFIED SUB CONTRACTORS LIST
FOR 1 & 2 FAMILY DWELLINGS**

JOB ADDRESS: _____

PERMIT # _____

COMPANY NAME: _____

PHONE # _____

CATEGORY	CITY CERT. #	COMPANY NAME
A/C-HARV-HVAC		
ALUMINUM- SOFFIT-FASCIA		
ALUMINUM ENCLOSURES		
ELECTRIC		
PLUMBING		
ROOFING		
SWIMMING POOL-SPA		
ICYNENE		
INSULATION		
ROUGH CARPENTRY		
FINISH CARPENTRY		
CONCRETE-FLOORS- DRIVEWAYS		
CONCRETE-FOOTERS		
CONCRETE-TIE BEAMS		
MASONRY		
CERAMIC-TILE		
MARBLE		
DRYWALL		
PAINTING		
SHUTTERS		

PLASTER/STUCCO		
IRRIGATION		
SOLAR SYSTEMS		
WATER CONDITIONER		
STEEL ERECTORS		
GLASS/GLAZING		
HAND RAILS/GUARD RAILS		
CABINET INSTALLER		
TRASH HAULING (Name Only)	--	

 Qualifier's Signature

CONTRACTOR NAME: _____

JOB ADDRESS: _____

ROOF CATEGORY

___ Low slope Application ___ Tile ___ Other
___ Asphalt/Fiberglass shingles ___ Metal

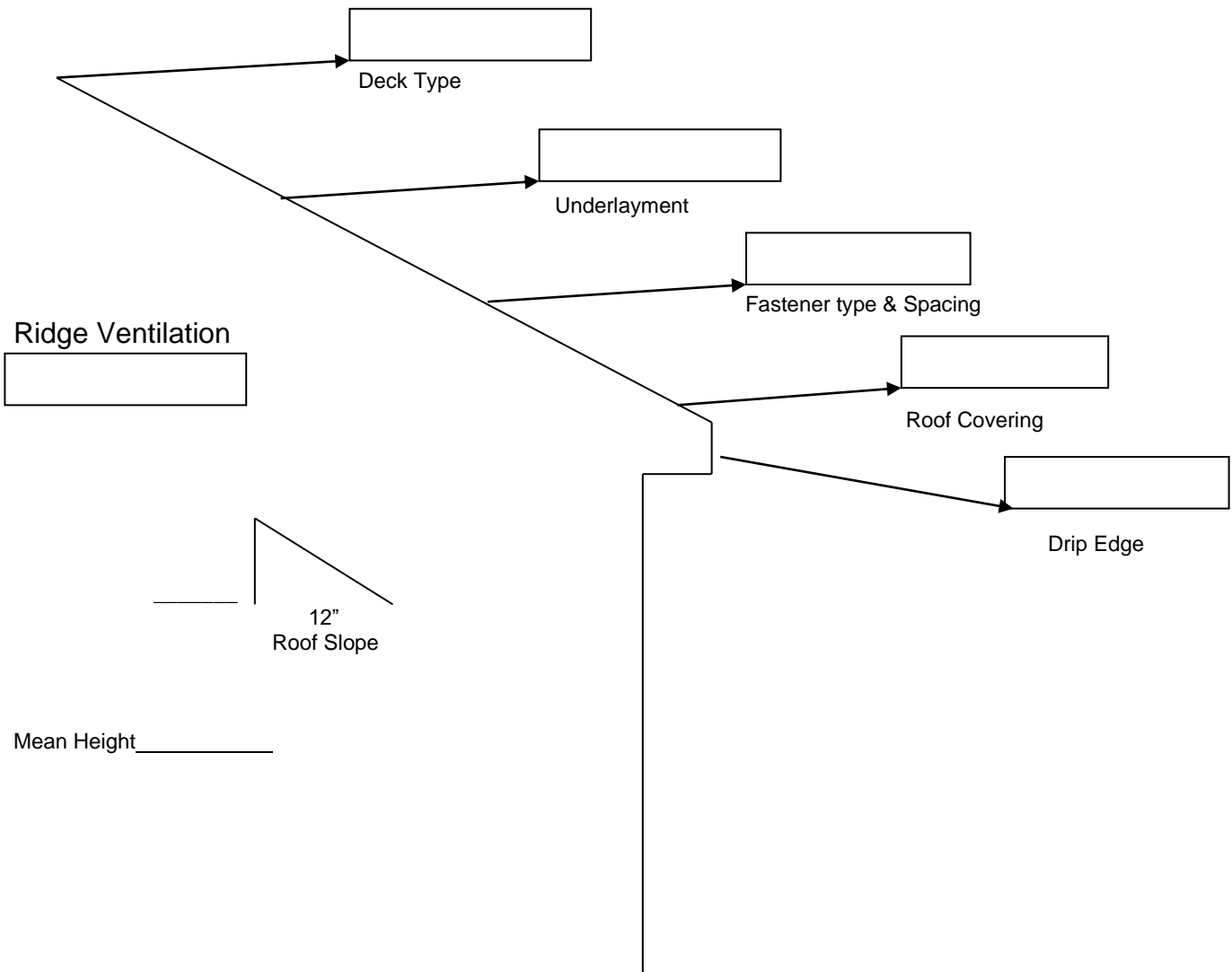
ROOF TYPE

___ New ___ Re-roofing ___ Recovering ___ Repair

Exposure category _____

Building Classification Category _____

SLOPED SYSTEM DESCRIPTION



This permit is issued subject to the following:

SPECIAL PROVISIONS

1. Applicant agrees to repair/replace to pre-permit condition any public property/ waterway or premises used or occupied.
2. Under no circumstances will water be taken from the neighboring property without prior written approval from the property owner.
2. Prior to excavation for driveways, resods, contact the Building Inspection line at 575-3327 to obtain grade elevations, etc.
3. Contact BUILDING DIVISION prior to installing boatlift pilings/pouring elevert/davit pads.

GENERAL PROVISIONS

1. City Police, Fire, and the Public Works Departments will be notified when streets are closed and opened, or when excavations are made in paved areas.
2. Provisions will be made for the accommodation and convenience of traffic. If all or a portion of a street or roadway is to be temporarily blocked by the Contractor's work, a traffic maintenance plan must be approved by the City Engineering Division prior to start of work.
3. Fire Hydrants will be left accessible at all times.
4. Provisions will be made for the continuous operation of all pipes, ducts, and other lines.
5. An approved Contractor will make necessary pavement repairs under the direct supervision of the City Engineering Division and/or Public Works Department.
6. All work, equipment, and materials will be properly barricaded and lighted and watchmen/flagmen employed where necessary.
7. Stormwater facilities will be kept open for the flow of water and soil erosion protection devices maintained.
8. No excavations in public rights-of-way or easements dedicated to the public will be made without prior approval from the City Public Works Department and/or Building Division.
9. No structures will be placed in public waterways without prior approval of the City Building Division. Dredging and/or excavating in public waterways are prohibited unless approved by the City Public Works Department and/or Building Division.
10. Permitted construction, when approved by a variance, or special permit approved by City Council, will be subject to time constraints and limitations imposed by the City Council.
11. No excavations are allowed within thirty inches (30") of the edge of the pavement.
12. Utilities must be buried a minimum of twenty-four inches (24") in the ground and thirty inches (30") under paved areas.
13. A copy of the construction plans must be attached to the permit.
14. All work will be conducted in such a manner as to interfere as little as possible with public safety and convenience.
15. Both public and private property, and public waterways, of whatever nature, occupied or affected hereunder, will be maintained and preserved from injury during the operations and cleaned and restored to its original condition upon completion or cessation of the work.
16. Locations and elevations furnished by the Applicant for improvements in the public rights-of-way, waterways and easement areas, as approved by the City Building Division, will be reasonably permanent; but are subject to revision wherever required by changing conditions; and the right is reserved to require the owner or owners of such property to make, at their own expense, such changes, alterations or replacements as may from time-to-time be necessary in order to adapt them to the changed conditions.
17. All suits, actions or claims of whatever nature which may arise, occasioned whether directly or indirectly by the work permitted or the special privileges granted hereunder, shall be assumed by the Applicant; and the City Council and all its officers, agents, and employees, shall be indemnified and saved harmless therefrom.
18. The City Building Division reserves the right to revoke this PERMIT without other formality than that of notifying Applicant of revocation.

This permit is issued subject to the following:

SPECIAL PROVISIONS

1. Applicant agrees to repair/replace to pre-permit condition any public property/ waterway or premises used or occupied.
2. Under no circumstances will water be taken from the neighboring property without prior written approval from the property owner.
2. Prior to excavation for driveways, resods, contact the Building Inspection line at 575-3327 to obtain grade elevations, etc.
3. Contact BUILDING DIVISION prior to installing boatlift pilings/pouring elevvert/davit pads.

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3. Fire Hydrants will be left accessible at all times.
4. Provisions will be made for the continuous operation of all pipes, ducts, and other lines.
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11. No excavations are allowed within thirty inches (30") of the edge of the pavement.
12. Utilities must be buried a minimum of twenty-four inches (24") in the ground and thirty inches (30") under paved areas.
13. A copy of the construction plans must be attached to the permit.
14. All work will be conducted in such a manner as to interfere as little as possible with public safety and convenience.
15. Both public and private property, and public waterways, of whatever nature, occupied or affected hereunder, will be maintained and preserved from injury during the operations and cleaned and restored to its original condition upon completion or cessation of the work.
16. Locations and elevations furnished by the Applicant for improvements in the public rights-of-way, waterways and easement areas, as approved by the City Building Division, will be reasonably permanent; but are subject to revision wherever required by changing conditions; and the right is reserved to require the owner or owners of such property to make, at their own expense, such changes, alterations or replacements as may from time-to-time be necessary in order to adapt them to the changed conditions.
17. All suits, actions or claims of whatever nature which may arise, occasioned whether directly or indirectly by the work permitted or the special privileges granted hereunder, shall be assumed by the Applicant; and the City Council and all its officers, agents, and employees, shall be indemnified and saved harmless therefrom.
18. The City Building Division reserves the right to revoke this PERMIT without other formality than that of notifying Applicant of revocation.

I have read and agree to the above provisions.

Signature Contractor/Authorized Agent

Date Signed

Printed Name

**CITY OF PUNTA GORDA
BUILDING DEPARTMENT
RESIDENTIAL 1 & 2 FAMILY DATA SUMMARY**

RESIDENTIAL DATA SUMMARY WORKSHEET

This form shall be completed and submitted with Application Documents

Owners Name _____ Project Address _____
 _____ Design Professional _____
 _____ Phone _____ Fax _____ Contractor _____
 _____ Phone _____ Fax _____

Applicable Codes

Building Code Florida Building Code 2017 Residential Volume
 Mechanical Code Florida Building Code 2017 Residential Volume
 Plumbing Code Florida Building Code 2017 Residential Volume
 Electrical Code NFPA 70 / NEC 2011
 Accessibility Code Florida Building Code FACBC 2017
 Energy Code Florida Building Code Residential Energy Efficiency 2017

Manufacturer / FL Product Approval / NOA #

Doors / SGD _____
 Windows _____
 Overhead Doors _____
 Mitered Glass _____
 Shutters _____
 Roof Coverings _____
 Soffit _____
 Sentricon Bait _____

Method of Design per R301 / Residential Volume			
_____ AF&PA (WFCM)	_____ ASCE 7 - 10	_____ AISI (COFS/PM)	_____ ICC 600
_____ MAF Guide	Other _____		
_____ FBC 2014 / Residential Volume			
Construction Type	IV	V	(circle one) Other _____
Basic Wind Speed _____ m.p.h.	R301.2 (4)		
Risk Category _____			
Wind Debris Area Yes No	Exposure B C or D (circle one)		
Internal Pressure Coefficient _____			
Structural Forces	Section R301.4 / R301.5 / R301.6		
Floor Design	Live Load _____ p.s.f.		
	Dead Load _____ p.s.f.		
Roof Design	Live Load _____ p.s.f.		
	Dead Load _____ p.s.f.		
Components and Cladding Design Pressures:		Mean Roof Height _____ ft	
Z1 _____ p.s.f.	Z3 _____ p.s.f.	Z5 _____ p.s.f.	
Z2 _____ p.s.f.	Z4 _____ p.s.f.	a= edge distance _____	
Type of Protection: Shutter Impact (circle one)		Area Tabulation	
Misc. Notes:		Living	sf / Conditioned Space
		Garage	sf
		Lanai	sf
		Entry	sf
		Storage	sf
		Other	sf
		Total square footage	

I certify to the best of my knowledge and belief, these plans and specifications have been designed to comply with the structural portion of the Building Code for wind and gravity loads as amended and enforced by the permitting jurisdiction.

Signature _____
 Architect / Engineer

Date _____

**SEWER TEST
CONTRACTOR AFFIDAVIT**

**FLORIDA PLUMBING CODE
SECTION 312 TESTS AND INSPECTIONS**

Sewer tests shall be provided by the licensed plumbing contractor. It shall be verified by an affidavit at time of sewer connection and posted on the job site inspection board.

Job Address: _____

Plumbing Contractor: _____

Telephone Number: _____

Property Owner: _____

City Certificate of Competency Number: _____

License Type: _____

I, as the qualified plumbing contractor with permit # _____
have tested the gravity sewer to conform to FPC Section 312.

Date of Test: _____

Start Time of Test: _____

Finish Time of Test _____

Signature of Contractor

Date Signed



**CITY OF PUNTA GORDA
CHANGE OF SUBCONTRACTOR NOTICE**

PERMIT # _____

JOB ADDRESS _____

I, _____, qualifier for _____,
Qualifier's Name Company Name

have changed _____ subcontractors.
(Type of Work)

from: _____ City Cert. # _____

to: _____ City Cert. # _____

as of _____ for the above referenced job.
Date

Qualifier's Signature

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____,
by _____ (name of person acknowledging), who is personally known to me or who
has produced _____ as identification.

Notary Public

(SEAL)



**CITY OF PUNTA GORDA
CHANGE OF SUBCONTRACTOR NOTICE
1 & 2 FAMILY DWELLINGS**

PERMIT # _____

JOB ADDRESS _____

I, _____, qualifier for _____,
Qualifier's Name Company Name

have changed _____ subcontractors.
(Type of Work)

From: _____ City Cert. # _____

To: _____ City Cert. # _____

as of _____ for the above referenced job.
Date

Qualifier's Signature



Punta Gorda

Florida's Harborside Hometown

PLANS CHANGE REQUEST

DATE SUBMITTED _____

PERMIT # _____ - _____

JOB ADDRESS _____

CONTRACTOR NAME _____

CONTACT TELEPHONE NUMBER (**REQUIRED**) () - _____

PLEASE CHECK ONE OF THE FOLLOWING:

- 1. PLANS CHANGE-STRUCTURAL/SEALED. BRIEF SUMMARY OF CHANGE(S)

- 2. PLANS CHANGE-NON-STRUCTURAL. BRIEF SUMMARY OF CHANGE(S)

- 3. FIRE _____

- 4. ZONING _____

- 5. OTHER. DESCRIPTION:

_____ REJECTED BY _____

_____ APPROVED BY _____

FEE DUE: \$ _____

IDENTIFY ALL PAPERWORK

Any and all paperwork delivered to the City of Punta Gorda Building Department must be identified. This identification is to include the **CORRECT** permit number, job address, and phase and/or building number, if applicable. Your attention is appreciated in this matter.

CITY OF PUNTA GORDA

TEMPORARY POWER APPLICATION - 1 & 2 FAMILY DWELLINGS

Requirements:

1. The Owner Hold Harmless statement must be completed.
2. The fee of \$50.00 is payable upon submittal of the application.
3. The service must be completely built, wired and all grounding & bonding completed.
4. The interior branch circuit panel must be installed on a solid wall that is an integral part of the structure and shall be protected from the weather by a method acceptable to the Punta Gorda Building Dept.
5. For purpose of construction only, a maximum of 2 GFCI protected duplex receptacle outlets may be wired into this panel.
6. No other circuit breakers shall be installed until the electrical trim is 100% complete.
7. A bold letter sign must be affixed to the panel and/or any associated main disconnect, reading as follows:
“ENERGIZED...QUALIFIED PERSONNEL ONLY”
8. The panel cover must be in place at all times.

Permit #: _____

Contractor: _____

Electric Contractor: _____

OWNER’S HOLD HARMLESS AFFIDAVIT

I, _____ owner of property located at Block _____, Lot _____, Section _____,
also known as _____, Punta Gorda, Florida,

will not occupy this dwelling, nor will I move furniture or any personal belongings into the above described property,
prior to the City of Punta Gorda’s issuance of a Certificate of Occupancy.

I further state that I will not hold the City of Punta Gorda or its employees responsible for any damages that might
arise as a result of this action.

Property Owner’s Signature

Date Signed

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____
_____, by _____, who is _____ personally known to me or who has produced
_____ as identification. (SEAL BELOW)

Notary Public Signature

**CITY OF PUNTA
BUILDING DIVISION
326 W. Marion Ave.
Punta Gorda, FL 33950
941.575.3324**

BLOWER DOOR CERTIFICATION FOR AIR LEAKAGE TEST

Permit #: _____

Job Address: _____, Punta Gorda, FL

Qualifier's Name: _____

Company Name: _____

Address: _____

Phone #: _____

E-mail: _____

QUALIFICATIONS:

- _____ NEEB BET CP
- _____ BPI Envelope Professional
- _____ Mechanical/HVAC Contractor (Class A or B)
- _____ BPI Building Analyst
- _____ BPI Energy Auditor
- _____ RESNET – HERS Rater
- _____ BPI Infiltration & Duct Leakage
- _____ PBI Quality Control Inspector

I certify that the structure located at the job address listed above was tested for air leakage in accordance with the Fifth Edition (2014) Florida Building Code – Energy Conservation, section R402.4.1.2

The test was performed after the creation of all penetrations into the building thermal envelope and the results of our test indicate that the structure has ___ Air Changes/Hour (ACH).

*NOTE: If less than 3 ACH, mechanical ventilation is required (R303.4)

_____ PASSED – 3 to 7 air changes/hour (ACH)

_____ PASSED – Less than 3 air changes/hour (ACH) – MECHANICAL VENTILATION REQUIRED

Qualifier's Signature: _____

Qualifier's Printed Name: _____

Date Signed: _____

This form can be submitted via:

E-mail to blowerdoorcerts@pgorda.us

Fax to 941-575-3347

In person to the Building office – City Hall Annex
126 Harvey St.
Punta Gorda, FL 33950