



BUILDING DEPARTMENT INFORMATION

GENERAL

In order to work in the City of Punta Gorda, <u>All</u> contractors and <u>All</u> 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 certified copy of the Notice of Commencement is to be submitted with any permit application with a job valuation over \$2500 or for Air Conditioning 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 a.m.** will be scheduled on the current working day. Any inspection called **after 6:00 a.m.** will be scheduled on the next working day. Please note that times of inspections could be changed at our department's discretion.

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@CityofPuntaGordaFL.com 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, one set of truss engineering drawings and 2 sealed letters 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 Elevation Certificate (FEMA) is required prior to Certificate of Occupancy processing.

Termite Protection Certificate of Compliance from a pest control company, per the FL Building Code, is required prior to Certificate of Occupancy processing.

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 & Fire permits, there are DCA and DBPR surcharges on the permit fee, currently .025% of the permit fee.

Impact fee information, can be obtained by contacting the Zoning Division at (941) 575-3314 or (941) 575-3381. 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 are not accepted.

MULTI - FAMILY & COMMERCIAL

- 1. Building permit application completely filled out and signed by QUALIFIER only. Be sure to include telephone and fax numbers, and the e-mail address
- 2. Line and Grade application, when applicable, filled out and signed by the qualifier.
- 3. Certified copy of the Notice of Commencement.
- 4. Completed Commercial Data Summary Checklist.
- 5. Sub-contractors List
- 6. Roofing System Sheet.
- 7. Provisions affidavit
- 8. 3 Sets of sealed surveys.
- 9. 3 Sets of plot plans.
- 10. 2 Sets of Thermal Energy Calculations with input data summary sheets.
- 11. 5 Sets of completed drawings, sealed by a Structural Engineer or an Architect.
- 12. 5 Sets of complete truss layouts from truss manufacturer approved by the architect/engineer of record.
- 13. DRC number and copy of letter showing approval upon request, Building staff will perform a preliminary plan review, with civils, during the DRC process.
- 14. County Impact Fee Affidavit with notarized signature.
- 15. Warranty Deed (If applicable).
- 16. Electric, Mechanical and Plumbing plans.

buildingdept@pgorda.us

CITY OF PUNTA GORDA PERMIT APPLICATION

PARCEL ID#:				CODE			DA	TF.		PERMIT#:	
								16.			
JOB ADDRESS:								UNIT #:		BUILDING #:	PHASE #:
BLOCK:			LOT:			SECT	ION:	SUBDIVIS	SION: PI	ROJECT/CONDO	NAME
OWNER NAME:		MAILIN	G ADDRESS			ZIP		PHONE	I		
CONTRACTOR'S BUSIN	ESS NAME:	MAILIN	G ADDRESS			ZIP		PHONE		FAX	
								E-MAIL			
CONTRACTOR'S STATE	REGISTRATIO	N NO.:				CC	NTRAC	CTOR'S CITY (CERTIFICA	TE NO.:	
ARCHITECT:						EN	IGINEEI	D.			
							IOINLLI				
USE OF BUILDING: □ SINGLE FAMILY			DUPLEX			TI-FAMII	V		MMERCIAI	_, DESCRIBE	
DESCRIPTION OF W	ORK - SPE		_		I I MOL	I I-I AIVIII	- !	1 3 00	WINIERCOLA	_, DEGOTABL	
NOTICE OF COMMENCE	MENT.						./4111	ATION OF W	MODI/		
NOTICE OF COMMENCE	INIEN I :						VALU	ATION OF V	VORK:		
SETBACK:		RIGHT		FRONT	Г		REAR		S.F. LIVI	NG	S.F. TOTAL
TYPE OF CONSTRUCTION	NI .	NUMBE	D OE	ZONIN	G DISTRICT		FLOOD	ZONE	FLOOD	ELEVATION	LOT TYPE
TIPE OF CONSTRUCTION	JN	STORIE		ZONIN	GDISTRICT		FLOOD	ZONE	FLOOD	ELEVATION	LOTTIFE
NUMBER OF UNITS	CITY IMPA	ACT FEE	ASSESSMENT		COUNTY IMP	PACT FE	E ASSE	ESSMENT	DBPR SI	JRCHARGE	DCA SURCHARGE
DRC#	VARIANCE #		OTHER FEE	ES			PE	ERMIT FEE		TOTAL ALL F	EES
SPECIAL CONDITIONS:											
		N	OTICE					ACCEPTE	n RY·		DATE
Separate permits are required for electrical, plumbing, hea			plumbing, heat								DAIL
and lawn sprinklers. This p within 6 months, or if const								r PLANS C	HECKED B	Y:	DATE
work is commenced. I HEREBY CERTIFY THAT I HAVE READ AND EXAMI			IINED THI	IS ADDI ICAT	TION AN	n	APPROVE	ED FOR ISS	SUANCE BLDG:	DATE	
KNOW THE SAME TO E								ODECIAL	ADDDOVA	1.0:	DATE
GOVERNING THIS TYPE NOT. THE GRANTING (1.	APPROVA	LS:	DATE
CANCEL THE PROVISIO						IO VIOL	AIE OF	APPROVE	ED R.O.W.	CONST.:	DATE
CONSTRUCTION OR TH	IE PERFORMAI	NCE OF (CONSTRUCTION	ON.				APPROVE	ED FIRE DE	DT ·	DATE
								AFFROVE		-F I	DAIL
CONTRACTOR (QUALIFI	ER) SIGNATUR	E			DATE			APPROVE	ED ZONING):	DATE
SIGNATURE OF OWNER (IF OWNER/BUILDER)				DATE			APPROVE	ED HISTOR	RIC:	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							· IOIOIV	TO NOT TOLL !	JIVDLING	TOOD, THE ALL	LIO, IIVI OI IOOLD
PERMIT VALIDATION C			DECEIDT.				CV6⊓1				
FERMIT VALIDATION OF	\fr <u></u>		NEVEIF1:_				одоп.		DATE		

CITY OF PUNTA GORDA LINE & GRADE APPLICATION

		CODE		DA	ATE:	APPLICATIO	N #:	
JOB ADDRESS:	<u> </u>				UNIT #:	BUILDING	#: PHA	ASE#:
BLOCK:	LOT:	8	SECTION:	1	SUBDIVISION:	PROJECT/CO	NDO NAME	
OWNER NAME:			MAILING AD	DRESS	S ZIP	РНО	NE	
CONTRACTOR'S BUSINESS NAME	:		MAILING AD	DRESS	S ZIP	PHO	NE	
CONTRACTOR'S STATE REGISTRA	ATION NO.:		CC	ONTRA	ACTOR'S CITY CERTIFIC	ATE NO.:		
USE OF BUILDING: ☐ SINGLE FAMILY	□ DUPLEX		□ MULTI-FAMIL	_Y	□ COMMERCI	AL, DESCRIBE		
DESCRIPTION OF WORK - S	SPECIFICALLY: Lin	e an	d Grade onl	y				
TYPE OF CONSTRUCTION	ZONING DISTRICT	F	FLOOD ZONE	F	FLOOD ELEVATION	LOT TYPE		
Special Conditions:					Lir	ne & Grade \$100.00	Fee:	
	NOTICE				ACCEPTED BY:		DATE	
I HEREBY CERTIFY THA KNOW THE SAME TO BE TRUE A	T I HAVE READ AND EXA			AND	APPROVED BY:		DATE	
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.								
CONTRACTOR (QUALIFIER) SIGNA	TURE		DATE					
SIGNATURE OF OWNER (IF OWNE	R/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. Description of Property (a complete legal description or parcel number; and a complete street address with city/state/zip code, if available): General Description of Improvement: 3 Owner Information: Name: a. _____ City/State/Zip Code: __ b. Address: Interest in Property: ___ c. Name <u>and</u> Address of Fee Simple Title Holder (if different from the Owner listed above): ___ d. **Contractor Information:** Name: __ Phone Number: ___ a. ____ City/State/Zip Code: ___ Surety Information: a. Name: Phone Number: ___ ____ City/State/Zip Code: __ Address: b. Bond Amount: \$ _ Lender Information: a. Name: Phone Number: h. Address: City/State/Zip Code: 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: _ 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: 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 Printed Name Officer/Director/Partner/Manager Company Name and Title State of _ ___ Sworn to (or affirmed) and subscribed before me, by means of , County 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

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:
	pact fee at issuance of	
Pay im improve		rior to issuance of the certificate of occupancy for the referenced
		nts that authority exists from the owner and contractor to make the delection of time of payment.
Print Name of Owner:		
Print Name of Contrac	ctor:	
	<u>-</u>	
Date	(Owner/Contractor
STATE OF FLORIDA COUNTY OF CHARLO	OTTE	
The above election are		d before me by improvement, and who stated under oath that the representations in
My Commission Expir	es:	Notary Public
Land Use Type:	FC	OR OFFICE USE ONLY
	Residential: SF /	MF / MH / O / Hotel/Motel
Impact Fee _		_ * Units =
	Commercial:	
Impact Fee _		Square Feet =
Impact Fee _		Square Feet =
Signature		
Total Due \$	Receipt Date	Receipt Number

CITY OF PUNTA GORDA BUILDING DEPARTMENT QUALIFIED SUB CONTRACTORS LIST FOR MULTI FAMILY AND COMMERCIAL WORK

JOB ADDRESS:	PERMIT #
COMPANY NAME:	PHONE #
COMPANT 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)				
I HEREBY CERTIFY that all persons who will be performing work in any category for which I have listed my company as the sub-contractor are, at present, on the payroll of my company, and that, for all such persons, social security, income tax, insurance, and all other deductions are being withheld and will continue to be withheld. Qualifier's Signature Date Signed				
State of				
County of				
The foregoing instrument was ackr by	wledged before me this day of 20 who is personally known to me or who has produced as identification and who did/did not take an oath.			
Signature Notary Public	(SEAL)			

CONTRACTOR NAME:		
JOB ADDRESS:		
	ROOF CATEGORY	,
Low slope Application	Tile	Other
Asphalt/Fiberglass shingles	Me	etal
	ROOF TYPE	
New Re-roofing	Recovering Re	epair
Exposure category		
Building Classification Category		
SLO	OPED SYSTEM DESCR	RIPTION
Deck Type		
	Underlayment	
	Fastene	r type & Spacing
Ridge Ventilation	T distinct	Type a opacing
		Roof Covering
12" Roof Slope		Drip Edge
Mean Height		

This permit is issued subject to the following:

SPECIAL PROVISIONS

- 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.
- 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.
- 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 pubic 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.

have read and agree to the above provisions	S.	
Signature Contractor/Authorized Agent	Date Signed	
Printed Name		

City of Punta Gorda 326 W. Marion Ave. Punta Gorda, FL 33950

COMMERCIAL DATA SUMMARY WORKSHEET

This form shall be completed and Submitted with the Application Owner's Name **Project Address** Design Professional Contractor Phone **Applicable Codes** Florida Building Code Electrical Code NFPA 70 / NEC 2011 FBC Building Volume 2017 **Building Code** FBC Building Volume 2017 Accessibility Code Mechanical Code FBC Mechanical Volume 2017 Energy Code FBC Building Volume 2017 Plumbing Code FBC Plumbing Volume 2017 Fair Housing Act FBC Building Volume 2017 Product Manufacturers' NOA # for: Windows: Doors: Overhead Door: Roof Covering: Impact Glass: Shutters: Other: **Building Limitations** Minimum Occupancy Flood Type of Construction Table 503 Type of Constr Classification Zone Sprinkler Yes No Square Footage per Floor Allowed 1 Hr Protected Yes No Area Modifier Section 506 Total Actual Building Height Allowable Height Mezzanines (section 505) Fire Separation Table 602 Percent of Opening Ν W N W Allowed Exterior Wall Rating N W Protected Openings Ν W Columns Beams Roof Interior Bearing Number of Exits METHOD OF DESIGN PER Chapter 16 Occupant Load Table 1004.1.2 Section 1021 ASCE 7-10 _____ 1609 _____ Other ___ Units of Exit Width Travel Distance Section 1016 Section 1005.3 Fully Enclosed ____ Means of Egress **Exit Configuration** _____ m.p.h. (Figure 1609) Section 1003 Section 1021 Design Wind Speed Dead Ends Mezzanine Egress _____ Class (Table 1604.5) Section 1018.4 Section 505.2 Risk Category Exterior Stairways Vertical Openings Section 705.8.5 Section 1026 Exposure B C or D (circle one) Side hinged Swing Exit Doors Section 716.5.1 Section 1015 Fire Separation Fire Resistance Structural Forces (Section 1606 & 1607) Table 508.4 Floor Design Table 706.4 Live Load ____ p.s.f. Dead Load _____ p.s.f. Wall Openings Fire Windows-Doors Section 706.8 Section 716 Roof Design Live Load p.s.f. Draft Stopping & Fire Blocking Fire Partitions Section 1609.5 Dead Load Section 718 Section 709 Penetrations Fire Dampers **Components and Cladding Design Pressures:** Section 717 Section 714 Zone 4 P.S.F. Zone 1 P.S.F. Zone 5 P.S.F. Sprinklers Standpipes Fire alarm Zone 2 P.S.F. Section 903 Section 905 Section 907 Zone 3 P.S.F. Edge Strip a = Plumbing / Fixtures T 403.1 Occupancy Use Ration Number of Fixtures Water Closets Required Lavs Required M М Water Closets Provided M Lavs Provided: M Urinals Required Provided Drinking Fountains Required Provided Handicap Restrooms Building Accessibility Building Valuation **Energy Calcs** Threshold Inspector (if required) 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

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 per have tested the gravity sewer to conform to FF	mit #
Date of Test:	
Start Time of Test:	Finish Time of Test
Signature of Contractor	



CITY OF PUNTA GORDA CHANGE OF SUBCONTRACTOR NOTICE MULTI-FAMILY & COMMERCIAL

PERMIT #	
JOB ADDRESS	
I,	, qualifier for, Company Name
Qualifier's Name	Company Name
have changed(Type of Work)	subcontractors.
from:	City Cert. #
to:	City Cert. #
as of for	the above referenced job.
	Qualifier's Signature
STATE OFCOUNTY OF	
The foregoing instrument was acknowled by(nar has produced	dged before me thisday of, 20, me of person acknowledging), who is personally known to me or whoas identification.
Notary Public	

(SEAL)



PLANS CHANGE REQUEST

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.