



**CITY OF PUNTA GORDA  
NEW CONSTRUCTION PACKAGE  
FOR  
OWNER/BUILDERS  
1 & 2 FAMILY DWELLINGS**



## BUILDING DEPARTMENT INFORMATION

### GENERAL

In order to work 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 **CERTIFIED COPY** of the Notice of Commencement **MUST** 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 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 one week 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](mailto: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, 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** 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 .015 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) 575-3314** or **(941) 575-3363**. 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 **OWNER/BUILDER** 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 owner builder.
3. Certified copy of the Notice of Commencement.
4. County Impact Fee Affidavit with notarized signature.
5. Sub-contractors List.
6. Roofing System Sheet
7. **2** Sets of completed drawings, **sealed** by a Structural Engineer or an Architect.
8. **3** Sets of **sealed** surveys.
9. **3 signed and sealed** site drainage plans.
10. **4** Sets of plot plans, if not part of the original drawings.
11. **2** Sets of Thermal Energy Calculations and **1** copy minimum Manual-J.
12. **2** Sets of complete truss layouts from truss manufacturer approved by the architect/engineer of record.
13. Provisions affidavit.
14. Data Summary Worksheet
15. Owner/Builder Affidavit

[buildingdept@ci.punta-gorda.fl.us](mailto:buildingdept@ci.punta-gorda.fl.us)

# CITY OF PUNTA GORDA PERMIT APPLICATION

PARCEL ID#:		CODE	DATE:	PERMIT#:
JOB ADDRESS:			UNIT #:	BUILDING #:
BLOCK:			LOT:	SECTION:
OWNER NAME:			MAILING ADDRESS	ZIP
CONTRACTOR'S BUSINESS NAME:			MAILING ADDRESS	ZIP
CONTRACTOR'S STATE REGISTRATION NO.:			CONTRACTOR'S CITY CERTIFICATE NO.:	
ARCHITECT:			ENGINEER:	
USE OF BUILDING:		E-MAIL		
<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: LEFT	RIGHT	FRONT	REAR	S.F. LIVING
TYPE OF CONSTRUCTION	NUMBER OF STORIES	ZONING DISTRICT	FLOOD ZONE	FLOOD ELEVATION
NUMBER OF UNITS	CITY IMPACT FEE ASSESSMENT	COUNTY IMPACT FEE ASSESSMENT	DBPR SURCHARGE	DCA SURCHARGE
DRC #	VARIANCE #	OTHER FEES	PERMIT FEE	TOTAL ALL FEES
SPECIAL CONDITIONS:				
<p style="text-align: center;"><b>NOTICE</b></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><b>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.</b></p>			ACCEPTED BY:	DATE
CONTRACTOR (QUALIFIER) SIGNATURE _____			PLANS CHECKED BY:	DATE
SIGNATURE OF OWNER (IF OWNER/BUILDER) _____			APPROVED FOR ISSUANCE BLDG:	DATE
DATE _____			SPECIAL APPROVALS:	DATE
DATE _____			APPROVED R.O.W. CONST.:	DATE
			APPROVED FIRE DEPT.:	DATE
			APPROVED ZONING:	DATE
			APPROVED HISTORIC:	DATE
<p><i>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.</i></p>				
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: <b>Line and Grade only</b>				
TYPE OF CONSTRUCTION	ZONING DISTRICT	FLOOD ZONE	FLOOD ELEVATION	LOT TYPE
Special Conditions:			Line & Grade Fee: <b>\$100.00</b>	
<p style="text-align: center;"><b>NOTICE</b></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: _____				



## CITY OF PUNTA GORDA

### OWNER BUILDER STATEMENT/AFFIDAVIT

Florida Statutes are quoted here or in part for your information to indicate the authority for exemptions for homeowners from qualifying as contractors and to express any applicable restrictions and responsibilities.

**OWNERS MUST PERSONALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THIS DOCUMENT**

**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, I 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 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 contract.
_____	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 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 a licenses required by law and by city 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 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 these 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.
_____	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 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.

_____	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.
_____	I am aware of construction practices and I have access to the Florida Building Code.
_____	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.
_____	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.
_____	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.
_____	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 the 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 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.

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

I, \_\_\_\_\_, do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

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

\_\_\_\_\_  
Date

Form of Identification: \_\_\_\_\_  
(Must be Photo I.D.)

**A violation of this exemption is a misdemeanor of the first degree punishable by a term of imprisonment not exceeding 1 year and 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.**



**NOTICE OF COMMENCEMENT**

STATE OF FLORIDA  
CHARLOTTE COUNTY

Permit No. \_\_\_\_\_  
Tax Folio No. \_\_\_\_\_

The Undersigned hereby gives notice that improvements will be made to real property and in accordance with Section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

Legal Description of property (include street address, if available):  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**This Space Reserved for Recording**

General Description of improvements: \_\_\_\_\_

Owner: \_\_\_\_\_

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

Owners interest in the site of improvement: \_\_\_\_\_

Fee simple title holder (if other than owner): \_\_\_\_\_

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

Contractor: \_\_\_\_\_

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

Surety: \_\_\_\_\_

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

Amount of Bond: \_\_\_\_\_

Any person making a loan for the construction of the improvements:

Name: \_\_\_\_\_

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

Person within the State of Florida designated by owner whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes.

Name: \_\_\_\_\_

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

In addition to himself, owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of Lienor's notice as provided in Section 713.13(1)(b), Florida Statutes.

Name: \_\_\_\_\_

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

Expiration date of Notice of Commencement (the expiration date is one year from the date of recording unless a different date is specified). \_\_\_\_\_

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

\_\_\_\_\_  
Printed Name of Owner

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_ by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification . And who did take an oath.

\_\_\_\_\_  
Signature - Notary Public/ Deputy Clerk

This document prepared by:

\_\_\_\_\_  
Printed Name Notary Public/Deputy Clerk

**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 OWNER/BUILDER'S**

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		

<b>IRRIGATION</b>		
<b>SOLAR SYSTEMS</b>		
<b>WATER CONDITIONER</b>		
<b>STEEL ERECTORS</b>		
<b>GLASS/GLAZING</b>		
<b>HAND RAILS/GUARD RAILS</b>		
<b>CABINET INSTALLER</b>		
<b>TRASH HAULING</b>	<b>N/A</b>	

\_\_\_\_\_ Owner's Signature

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.

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

**(SEAL)**

CONTRACTOR NAME: \_\_\_\_\_

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

**ROOF CATEGORY**

\_\_\_ Low slope Application      \_\_\_ Tile      \_\_\_ Other  
\_\_\_ Asphalt/Fiberglass shingles      \_\_\_ Metal

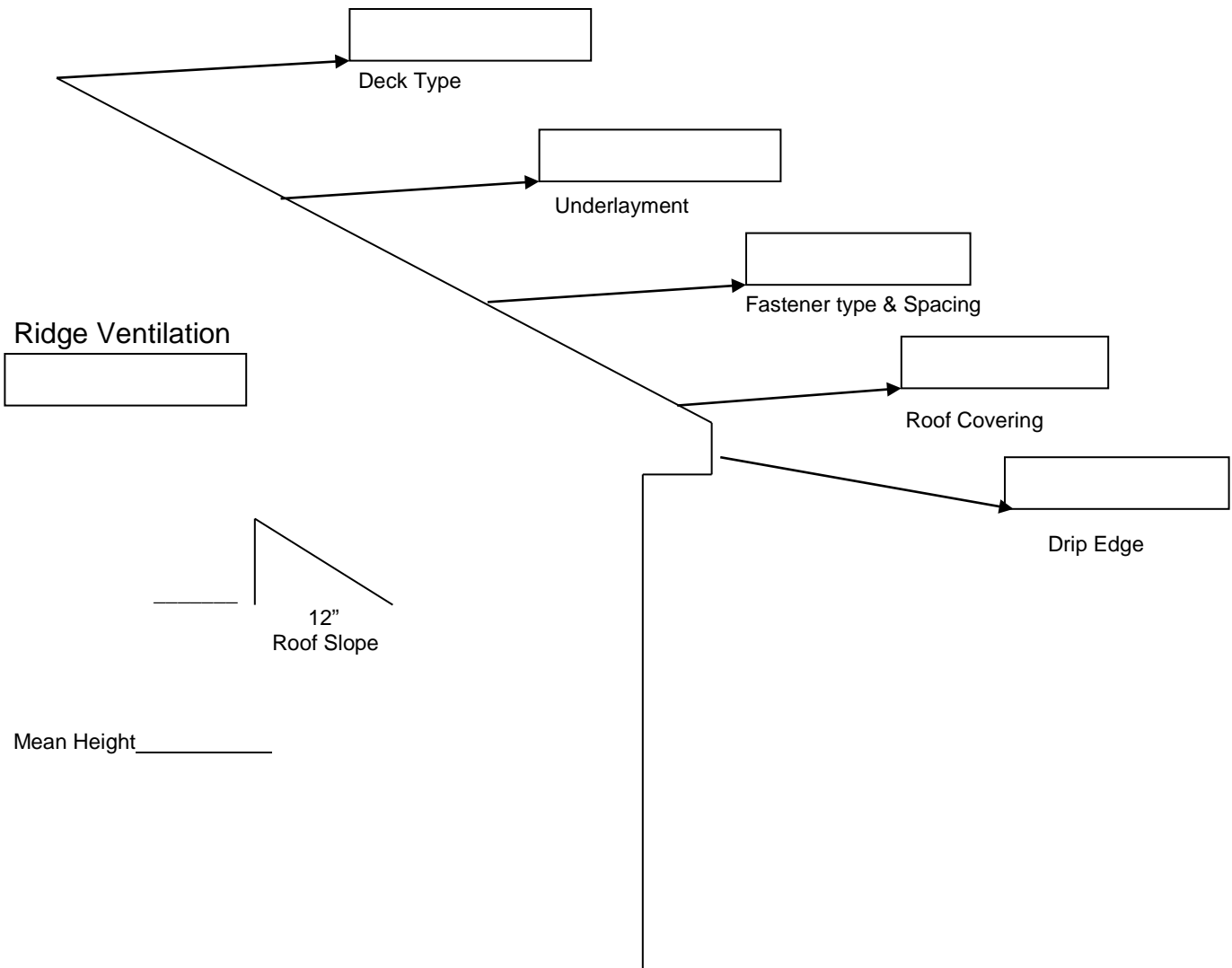
**ROOF TYPE**

\_\_\_ New    \_\_\_ Re-roofing    \_\_\_ Recovering    \_\_\_ Repair

Exposure category \_\_\_\_\_

Building Classification Category \_\_\_\_\_

**SLOPED SYSTEM DESCRIPTION**



**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 \_\_\_\_\_

<b>Method of Design per R301 / Residential Volume</b>			
_____ AF&PA (WFCM)	_____ ASCE 7 - 10	_____ AISI (COFS/PM)	_____ ICC 600
_____ MAF Guide	Other _____		
_____ FBC 2014 / Residential Volume			
<b>Construction Type</b>	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 _____			
<b>Structural Forces</b>	Section R301.4 / R301.5 / R301.6		
<b>Floor Design</b>	Live Load _____ p.s.f.		
	Dead Load _____ p.s.f.		
<b>Roof Design</b>	Live Load _____ p.s.f.		
	Dead Load _____ p.s.f.		
<b>Components and Cladding Design Pressures:</b>		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)		<b>Area Tabulation</b>	
Misc. Notes:		Living	sf / Conditioned Space
		Garage	sf
		Lanai	sf
		Entry	sf
		Storage	sf
		Other	sf
		<b>Total square footage</b>	

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 \_\_\_\_\_

**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.

**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.

**I have read and agree to the above provisions.**

\_\_\_\_\_  
**Signature Contractor/Authorized Agent**

\_\_\_\_\_  
**Date Signed**

\_\_\_\_\_  
**Printed Name**



# 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**

**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 GORDA  
OWNER/BUILDER'S  
CHANGE OF CONTRACTOR**

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

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

I, \_\_\_\_\_, have changed my sub-contractor in the following scope  
Owner/Builder's Printed Name  
of work: \_\_\_\_\_

from: \_\_\_\_\_ City Cert. # \_\_\_\_\_

to: \_\_\_\_\_ City Cert. # \_\_\_\_\_

as of \_\_\_\_\_ for the above referenced job.  
Date

\_\_\_\_\_  
Owner-Builder'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)



## REQUEST FORM

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 \_\_\_\_\_

**AMOUNT 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  
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](mailto:blowerdoorcerts@pgorda.us)

Fax to 941-575-3347

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