

## CITY OF MARGATE, FLORIDA BUILDING DEPARTMENT PERMIT APPLICATION

Building@MargateFL.com

901 NW 66<sup>th</sup> AVENUE MARGATE, FL 33063 PHONE 954-970-3004 FAX 954-970-3412 INSPECTIONS 954-970-3112

□ STRUCTURAL □ MECHANICAL □ PLUMBING □ ELECTRIC □ FIRE ☐ SIGN JOB INFORMATION Address: Unit #: Sq. Footage: Est. Value: \$ Subdivision: Lot: Block: Group: Type: Use: THIS SECTION Tax ID FOLIO # OFFICE USE ONLY Code Date: 20 Min. Floor Elevation: □ Commercial □ New □ Alteration □ Addition □ Demolition □ Residential Permit # □ ROOF □ FENCE □ SCREEN □ SHED Permit Issue Date: Check # \_\_\_ Cash \_\_\_\_\_ Description: OWNER INFORMATION TYPE Name: VALUE 
 Address:
 Unit #:

 City:
 State:
 Zip:

 Phone:
 Fax:
 FEE STRUCTURAL PERMIT **MECHANICAL PERMIT** Email: PLUMBING PERMIT FEE SIMPLE TITLEHOLDER (OTHER THAN OWNER) **ELECTRIC PERMIT** Name: FIRE PERMIT Address: PLAN REVIEW FEE \$ 60.00 ARCHITECT INFORMATION **RE-REVIEW FEE** Name: SPECIAL INSPECTOR Address: Unit #: **TRAINING & EDUCATION** City:\_\_\_\_State:\_\_\_Fax: Zip: RADON **BUILDING CODE FUND** Email: COUNTY ORDINANCE FEE REGISTRATION # FIRE IMPACT FEE ENGINEERS INFORMATION POLICE IMPACT FEE Name: Address: Unit #: City: State: Zip: Phone: Fax: Email: REGISTRATION # CO/CC CONTRACTOR INFORMATION TOTAL Name: DEPARTMENT APPROVALS DEPARTMENT REJECTED DATE **APPROVED** DATE Phone: Fax: ZONING Email:\_\_\_\_\_ Certificate of Competency #\_\_\_\_ STRUCTURAL State Registration #: ELECTRICAL Broward County Competency #: **PLUMBING** BONDING COMPANY INFORMATION MECHANICAL Name: FIRE Address:\_\_\_\_ Unit #: City:\_\_\_\_ Zip: REMARKS: Phone: MORTGAGE LENDER NAME Name: Unit #: Address: City: State: NOC: REQUIRED RECEIVED RECORDED Phone:

PERMIT #
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Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to issuance of a permit and that all work will be performed to meet the standards of laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electric work, plumbing, signs, wells, pools, furnaces, boilers, heaters, tanks, and air conditioning.

The issuance of a building permit does not give you permission to violate deed restrictions and/or homeowners regulations. Please read deed restrictions before commencing construction.

**NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental agencies such as water management districts, state agencies, or federal agencies.

WARNING TO OWNER: Your failure to file a Notice of Commencement may result in paying twice for the 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 you lender or attorney before recording your Notice of Commencement.

OWNERS AFFIDAVIT: I certify that all information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Owner Responsibility: Notify your homeowners association of the improvements prior to start of construction.

All plans and permit documentation must be posted on the front of the jobsite for inspection. Inspections scheduled prior to 2:00 pm will be performed the next business day between 8:00 am and 3:00 pm.

PERMIT APPLICATIONS SHALL BE COMPLETELY FILLED OUT WITH ALL OF THE INFORMATION IN THE SPACES PROVIDED.

NOTARIZED Signatures of the Qualifier and Owner.

## TO EXPEDITE YOUR APPLICATION, PLEASE MAKE SURE THAT YOU HAVE ALL OF THE FOLLOWING APPLICABLE ITEMS, IN DUPLICATE, IN YOUR PACKAGE PRIOR TO SUBMITTAL.

- 1. Two (2) sets of plans drawn to scale (signed and sealed by designer when required by code).
- 2. Notice of commencement is required for all projects exceeding \$2,500.00 in construction value (\$7500.00 for Mechanical A/C Change Out).
- 3. Structural calculations signed and sealed by designer of record (when applicable).
- 4. Notice of Acceptance (NOA) for roofs, utility-sheds, windows, shutters, exterior doors, skylights, etc... Reviewed and approved by the designer of record.
- 5. Current signed and sealed surveys by a licensed surveyor (when applicable).
- Energy calculations forms, signed and sealed, and heating /cooling load calculations.
- Proof of property ownership.
- 8. Proof of approval by Department of Business and Professional Regulations, division of Hotel and Restaurants (954-956-5692)
- 9. Proof of approval by Army corps of engineers (561.686.3441) and Department of Natural Resource protection (954-519-1230) for dredge and fill activities or structures within the jurisdictional waterways.
- 10. Proof of approval by Department of Planning and Environmental Protection (DPEP), 954-519-1250) for new buildings, additions to non-residential buildings, interior commercial alterations, commercial pools, land clearing, and demolition, docks, seawalls, boat ramps, bulkheads, and emergency generators.
- 11. Total estimated cost of construction. Documented proof of cost.

Signatur <mark>e of Qualifier</mark>			1 (1)
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Printed name of Qualifie	er	100000000000000000000000000000000000000	
STATE OF FLORIDA COUNTY OF BROWA			
On this	Day of	, 20	, before
me, the undersigne	ed Notary Public of	f the State of Florida perso	onally appeared
		, and whose name	e is subscribed
to the within instru	u <mark>ment, and he/she</mark> a	acknowledges that he/she	executed it.
		WITNESS MY HAND AN OFFICIAL SEAL	ID.
NOTARY PUBLIC STAT	TE OF FLORI <mark>DA</mark>	NOTARY PUBLIC SEAL OF OFFICE	O E
PRINTED NAME OF NO	OTARY	1	
TRINIED NAME OF NO			

OWNER SIG	GNATURE RE	<u>QUIRED</u>	
Signature of Owner			
Printed name of Owner		70	
STATE OF FLORIDA: COUNTY OF BROWARD:	15		
On thisDay of		, 20	, before
me, the undersigned Notary Publ	ic of the State of	Florida person	ally appeared
	, and	whose name i	s subscribed
to the within instrument, and he/s	she acknowledge	s that he/she ex	recuted it.
		ESS MY HAND AND TAL SEAL	
NOTARY PUBLIC STATE OF FLORIDA		RY PUBLIC OF OFFICE	
DDINTED NAME OF NOTABY			
PRINTED NAME OF NOTARY  ☐ Personally known to me ☐ Pro	duced identifica	tion □ Oath tal	zon

This permit does not become valid until signed by an authorized representative of the Building Department and all fees are paid
acknowledged in the space above.

www.MargateFL.com/Building

BUILDING OFFICIAL / AUTHORIZED REPRESENTATIVE