



LEON COUNTY
DEPARTMENT OF DEVELOPMENT SUPPORT AND ENVIRONMENTAL MANAGEMENT
 435 NORTH MACOMB STREET, 2ND FLOOR
 TALLAHASSEE, FLORIDA 32301
 (850) 606-1300
 www.leonpermits.org

BUILDING PERMIT APPLICATION

I. OWNER/LESSEE INFORMATION							
OWNER NAME: _____							
MAILING ADDRESS: _____							
CITY: _____		STATE: _____		ZIP: _____			
WORK PHONE: _____		MOBILE PHONE: _____		HOME PHONE: _____			
EMAIL ADDRESS: _____							
II. CONTRACTOR INFORMATION							
BUSINESS NAME: _____			CONTRACTOR NAME: _____				
MAILING ADDRESS: _____							
CITY: _____		STATE: _____		ZIP: _____			
WORK PHONE: _____		MOBILE PHONE: _____					
EMAIL ADDRESS: _____							
III. SITE AND BUILDING INFORMATION							
PARCEL I.D. # _____		NO. OF EXISTING BLDGS ON SITE _____					
ADDRESS: _____				LOT _____ BLK _____			
SUBDIVISION NAME: _____				PHASE _____			
BUILDING FOUNDATION: <input type="checkbox"/> Monolithic Slab/Pad <input type="checkbox"/> Block Stem Wall <input type="checkbox"/> Pier or Piling							
USE OF FILL: <input type="checkbox"/> Yard/Lawn _____ cu. yds. <input type="checkbox"/> Foundation _____ cu. yds. <input type="checkbox"/> Septic _____ cu. yds. <input type="checkbox"/> Pool _____ cu. yds.							
PROPERTY OWNERSHIP: <input type="checkbox"/> Public (Fed, State or local govt) <input type="checkbox"/> Private (Individual, corp, non-profit)				UTILIZING BLDG ENVELOPE OPTION? <input type="checkbox"/> Yes <input type="checkbox"/> No			
SEWAGE DISPOSAL: <input type="checkbox"/> Public <input type="checkbox"/> Private (Septic System)*		WATER SYSTEM: <input type="checkbox"/> Public <input type="checkbox"/> Private Co. <input type="checkbox"/> Private (Well)					
ROADS: <input type="checkbox"/> Public <input type="checkbox"/> Private		CORNER LOT: <input type="checkbox"/> No <input type="checkbox"/> Yes – indicate preferred street for address:					
* Please contact the Florida Dept. of Health in Leon County for septic tank permit requirements.							
Is property located within 100 feet of the centerline of a Canopy Road? <input type="checkbox"/> No <input type="checkbox"/> Yes, then indicate below:							
<input type="checkbox"/>	Meridian Road, SR 155 (from 7th Avenue to Georgia State line)	<input type="checkbox"/>	Old Bainbridge Road (from Raa Avenue to Capital Circle SR 263)				
<input type="checkbox"/>	Magnolia Dr. - Centerville Rd – Moccasin Gap Rd.(from 7th Avenue to SR 59)	<input type="checkbox"/>	Old Centerville Road				
<input type="checkbox"/>	Miccosukee Road (from Capital Circle NE /Route 261 to Moccasin Gap Road)	<input type="checkbox"/>	Sunny Hill Road				
<input type="checkbox"/>	Old St. Augustine Road (from E. Lafayette Street to W.W. Kelly Road)	<input type="checkbox"/>	Pisgah Church Road				
IV. RESIDENTIAL BUILDINGS							
One Family Detached		Two Family Attached (Duplex)		Multi Family			
Accessory Structure (Shed, greenhouse, pool house, detached garage, etc.)		Triplex		Hotel/Motel			
Single-Family Attached (Townhouse)		Quadruplex		Other - <i>Specify</i>			
V. NON-RESIDENTIAL BUILDINGS (If known, please provide LSP# _____)							
<input type="checkbox"/>	Amusement recreational	<input type="checkbox"/>	Hospital, institutional	<input type="checkbox"/>	Public utility	<input type="checkbox"/>	Cellular Tower
<input type="checkbox"/>	Church, other religious	<input type="checkbox"/>	Medical office	<input type="checkbox"/>	School, library, other educational	<input type="checkbox"/>	Other - <i>Specify</i>
<input type="checkbox"/>	Industrial	<input type="checkbox"/>	Non-medical office	<input type="checkbox"/>	Stores, mercantile	<input type="checkbox"/>	
<input type="checkbox"/>	Service station, repair garage	<input type="checkbox"/>	Bank	<input type="checkbox"/>	Restaurant	<input type="checkbox"/>	
Fire suppression system required? <input type="checkbox"/> Yes <input type="checkbox"/> No							

VI. DESCRIPTION OF WORK

New Building	Moving Site Built Home	Mechanical*
New Building – SHELL ONLY	Foundation Only (Commercial Only)	Plumbing*
New Manufactured Home (SDMH, RDMH)	Residential Swimming Pool	Fuel Gas*
Manufactured home replacement	Retaining Wall	Other – <i>specify below</i>
Addition	Roofing*	
Alteration/Repair/Replacement*	Electrical*	

PLEASE NOTE: ALL BUILDING PERMIT APPLICATIONS REQUIRE A SITE PLAN, EXCEPT THOSE INDICATED WITH AN ASTERISK (*) ABOVE. SITE PLANS MUST BE DRAWN TO SCALE AND DEPICT THE ACTUAL CONFIGURATION AS SHOWN ON THE PROPERTY APPRAISER'S DATABASE. THE SITE PLAN MUST INCLUDE THE FOLLOWING INFORMATION:

- North directional arrow
- Property boundary lines
- Location of ALL existing structures and their distances from all property lines and each other
- Location of driveways, streets and utility easements
- Location of septic system (proposed and existing)
- Location of water system
- Location of any wells w/in 200 feet of the septic system, even if wells are located on adjacent property
- Location of any fill material
- Limits of clearing activity
- Location of Canopy Road Protection Zone, if applicable
- Location of grading activity
- Location of any on-site or nearby wetlands (lakes, ponds, swamps, marshes, sinkholes or shallow depressions)
- Location of all natural or constructed water conveyance features such as ravine, ditch, swale, culvert, canal, stream or springs/seeps
- Location of special development restrictions such as easements, natural areas required undisturbed or land use buffers

SITE PLANS MUST BE DRAWN TO SCALE

NEW/ADDED CONSTRUCTION (if applicable): New/Added Square Footage: _____
 Cost of New/Added Sq. Footage: _____

MECHANICAL Work ELECTRICAL Work PLUMBING Work FUEL GAS Work

ALTERATIONS (if applicable): Alteration Costs: _____

PROVIDE PROJECT NARRATIVE OR WORK DESCRIPTION:

VII. CONTRACTOR INFORMATION

TYPE	BUSINESS/CONTRACTOR NAME	LICENSE NO.	EMAIL ADDRESS	PHONE
ENGINEER				
ARCHITECT				
PRINCIPAL				
ELECTRICAL				
PLUMBING				
MECHANICAL				
GAS				
ROOFING				
CLEARING/ EXCAVATION				
MANUFACTURED HOME INSTALLER				
SPECIALTY CONTRACTOR				

Fla. Stat. 553.79(10) NOTICE: In addition to the requirements of this permit, other restrictions applicable to the property such as private deed restrictions and or covenants may apply. These private deed restrictions and or covenants may be found in the public records of this county. There may also be other approvals or permits required from state or federal agencies including but not limited to the state water management district.

Approved as to form:
Leon County Attorney's Office
301 South Monroe St., Suite 202
Tallahassee, FL 32301



Leon County
Board of County Commissioners
Department of Development Support &
Environmental Management
435 North Macomb St.
Tallahassee, FL 32301
Phone#: (850) 606-1300
Fax#: (850) 606-1301

Applicant's Affidavit of Ownership & Designation of Agent(s)

Date: _____

I. OWNER INFORMATION

OWNER'S (S') NAME: _____

OWNER'S (S') MAILING ADDRESS: _____

CITY: _____ COUNTY: _____ STATE: _____ ZIP CODE: _____

PARCEL I.D.# (List all numbers for the site subject to this affidavit.): _____

II. DESIGNATION OF AGENT(S)

As the owner(s) of the above-designated property and the applicant(s) for which this affidavit is submitted, I wish to designate the below named party(ies) as my agent in all matters pertaining to the location address and concerning approval(s) and permit(s) required by Leon County. In authorizing the agent(s) named below to represent me or my company, I attest that the application is made in good faith and that any information contained in the application is accurate and complete to the best of my knowledge and belief.

(1) Owner's Agent: _____

Address: _____

Contact Phone: _____ Email Address: _____

If the Owner intends the Designation of Agent to be limited in any manner, please indicate the limitation below (i.e., limited to obtaining a Certificate of Concurrency for the parcel; limited to obtaining a building permit application; etc.).

(2) Owner's Agent: _____

Address: _____

Contact Phone: _____ Email Address: _____

If the Owner intends the Designation of Agent to be limited in any manner, please indicate the limitation below (i.e., limited to obtaining a Certificate of Concurrency for the parcel; limited to obtaining a building permit application; etc.).

III. NOTICE TO OWNER(S)

Application is hereby made to obtain approval(s) and permit(s) for the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction and development of land in this jurisdiction. I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

All changes in ownership and applicant's agent prior to issuance shall require a new affidavit. If ownership changes, the new owner assumes the obligations and the original applicant is released from responsibility for actions taken by others after the change in ownership.

Deed Restrictions and Covenants

Prior to pursuing a permit application, applicants should review any Deed Restrictions and/or Covenants which may apply to a particular site. Applicants should be aware that Deed Restrictions or Covenants are private civil issues and therefore are not enforced or reviewed by the County. Based on this information, I hereby acknowledge that I have been advised that I should seek out and obtain information on my own to identify if there are any Deed Restrictions and/or Covenants on the use of the site associated with this permit application. _____ Owner's Initials

Public Record Information

Chapter 119, Florida Statutes, Section 119.071(4)(d) Subparagraphs a.-r. exempt the public release of select information pertaining to the name, address, and phone numbers of certain public employees, e.g. law enforcement personnel, their spouses and children.

Do you or your spouse fall into one of these protected categories? Yes ___ No ___

If yes, do you want the exempt information that is included on this application withheld from the public, or from any official public record request? Yes ___ No ___

The authenticity of the request to withhold this specific information from the public as specified in Chapter 119, Florida Statutes is subject to verification by this Department. _____ Owner's (s') Initials

Access to Property

By submitting this application, I (we) am (are) providing permission for Leon County personnel to inspect at reasonable times the property and work required under any permit issued under this application for compliance with applicable codes as specified in Leon County's Code of Laws, Chapter 10, Section 10-1.105 and 10-4.212. Unless the inspection requires entry into a private residence, no further permission will be required.

_____ Owner's (s') Initials

Modifications

Any changes to the limits of clearing, structure location/orientation, elevations, or drainage patterns shown on the approved plans may require additional review and new approval by Leon County.

_____ Owner's (s) Initials

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 COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

I (we), _____, certify that I (we) am (are) the owner(s), as defined by Sections 10-1.101 or 10-4.201(a) of the Leon County Code of Laws, of the property described herein.

OWNER SIGNATURE (1):

OWNER SIGNATURE (2):

NOTARY PUBLIC – CROSS THROUGH NOTARY SECTIONS NOT USED

STATE OF:

COUNTY OF:

For an individual or individuals acting in his, her or their own right; or

Sworn to (or affirmed) and subscribed before me by means of ___ physical presence or ___ online notarization this ___ day of _____, 20 ___, by _____, who is personally known to me or who has produced _____ as identification.

(type of identification produced)

For Corporation or Governmental Entity; or

Sworn to (or affirmed) and subscribed before me by means of ___ physical presence or ___ online notarization this ___ day of _____, 20 ___, by _____, as _____ of _____, a _____ corporation, on behalf of the corporation.

(name of officer or agent, title of officer or agent)

(office held)

(name of corporation)

(state)

He/she is personally known to me or has produced _____ as identification.

(type of identification produced)

For Partnership

Sworn to (or affirmed) and subscribed before me by means of ___ physical presence or ___ online notarization this ___ day of _____, 20 ___, by _____, partner on behalf of _____ a partnership. He/she is personally known to me or has produced _____ as identification.

(name of acknowledging partner)

(name of partnership)

(type of identification produced)

Notary Seal

Signature of Notary

Print Name of Notary

Title or Rank



Leon County
Department of Development Support
& Environmental Management
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Permit Application Checklist

LB#:
LDR#:
LDV#:
LPR#:

General Information:

Parcel ID#			
Sewage Disposal	Septic Tank Permit Required <input type="checkbox"/>	Sewer Tap Receipt Required <input type="checkbox"/>	
Driveway	Driveway Exits <input type="checkbox"/>	Driveway Permit Required <input type="checkbox"/>	
Notice of Commencement	Form Provided <input type="checkbox"/>	Form Recorded <input type="checkbox"/>	OR BK____, PG____
Square Footage*	Plans SF:	Energy Form SF:	
<i>*Verify SF includes all spaces (conditioned and unconditioned – garages and porches). The SFs on the plans and energy form should match; if not, check with a plans reviewer to see if the application is sufficiently complete to accept.</i>			

Documents Required:

Provided	Item	Sealed Plans	Notes
NSFR DETACHED/ATTACHED, ADDITIONS, ACCESSORY STRUCTURES/DWELLINGS & COMMERCIAL			
	Building Permit Application		
	Owner's Affidavit		
	Scope of Work Checklist		
	Site Layout Plan		
	Flood Letter	Y	<i>Not required if accessory structure is 300 SF and consist of non-habitable space constructed of flood resistant materials</i>
	Wind Load Analysis	Y	<i>Only required for additions and accessory structures over 400 SF</i>
	Energy Code EPL Card		
	Soil Report	Y	<i>Only required for additions and accessory structures over 400 SF</i>
	Manufacturer's Installation Instructions for Siding and Soffits		
Building Plans (Residential Only):			
	Electric Plan		
	Elevation Plan		
	Floor Plan		
	Foundation Plan (and details)		
	Special Foundation Plan	See Notes	<i>Refer to the soil report to see if sealed plans are required</i>
	Gas Riser Plan		
	Roof Plan		
	Truss Plan		
	Typical Wall Section Plan		
Building Plans (Commercial Only):			
	Engineered Plans	Y	<i>Includes structural, mechanical, electrical, plumbing, architectural plans</i>
MOBILE AND MANUFACTURED HOMES			
	Building Permit Application		
	Owner's Affidavit		
	Site Layout Plan		
	Pier Spacing Worksheet		
	Flood Letter	Y	