

**INDIAN RIVER COUNTY/CITY OF VERO BEACH
ALTERATIONS AND ADDITIONS – SINGLE FAMILY
INFORMATION/CHECKLIST
BUILDING DIVISION**

Complete Building Permit Application _____
 Submit Four Sets of Plans _____
 Plans Include the Following As They Apply to Proposed Job:

MINIMUM PLAN SIZE: 18” X 24”

Plot Plan (Show Any Easements) _____
 Floor Plan – ¼ inch scale _____
 Typical Wall Section _____
 Elevations _____
 Complete Truss Drawings (with uplifts if applicable) _____
****PLAN SPECIFICATION DETAILS AVAILABLE UPON REQUEST****

Submit Completed Energy Code (ONLY if alteration or addition involves living area) _____
 Submit Completed Flood Zone Application/Information Form _____
 Payment of Plans Examination Fee _____
 Soils Report for Waterfront Property _____

**WARNING: NOTICE OF COMMENCEMENT REQUIRED ON CONSTRUCTION PROJECTS VALUED OVER \$2,500.
 DO NOT RECORD UNTIL AFTER FINANCING PACKAGE HAS BEEN RECORDED. NOTICE OF COMMENCEMENT
 FORMS ARE AVAILABLE UPON REQUEST**

OTHER ITEMS REQUIRED AS APPLICABLE:

Oceanfront Property:

Department of Natural Resources Permit Approval for Projects Located
 SEAWARD OF THE COASTAL CONSTRUCTION CONTROL LINE (CCL)
 Projects in TURTLE PROTECTION ZONE Subject to Specific Review _____

Property on Septic Tank System:

If Living Area is Being Increased, Plans Must Be Stamped by the Environmental
 Health Department _____

All Applications MUST INCLUDE PARCEL NUMBER:

Applications Will Not Be Accepted Without a Parcel Number Assigned by the
 Property Appraiser’s Office _____

Traffic Impact Fee Requirements:

An increase in square footage of a single family structure may result in additional impact fees. The impact fees will be based on the **square footage** of the building under air. **The difference between the fees of each threshold will be charged.** The three thresholds for traffic impact fee determination for single family projects are as follows:

| | |
|-------------------------------|---------|
| Less than 1,500 gsf under air | \$2,843 |
| 1,500 to 2,499 gsf under air | \$4,284 |
| 2,500 gsf or larger under air | \$4,808 |

It is the responsibility of the applicant to coordinate with the planning department (Nancy Wood at 226-1255) to determine the additional fees as applicable.

NOTICE TO CONTRACTORS

RE: NOTICE OF COMMENCEMENT

WARNING: DO NOT RECORD THE NOTICE OF COMMENCEMENT UNTIL AFTER THE FINANCING PACKAGE HAS BEEN RECORDED

WARNING: PLEASE NOTE SECTION 713.13(1)(g) BELOW.

Florida State Statutes Section 713.13 OF COMMENCEMENT:

Section 713.13(1)(a):

...An owner or the owner's authorized agent before actually commencing to improve any real property, or recommencing completion of any improvement after default or abandonment, whether or not a project has a payment bond complying with s. 713.23, shall record a **NOTICE OF COMMENCEMENT** in the Clerk's office and forthwith post either a certified copy thereof or a Notarized statement that the Notice of Commencement has been filed for recording along with a copy thereof...

Section 713.13(1)(g):

...**The owner must sign the Notice of Commencement and no one else may be permitted to sign in his stead.**

Section 713.135(1)(d):

If the direct contract is greater than \$2,500 (\$5,000 if repair or replace an existing heating or air conditioning system). The applicant shall file with the issuing authority prior to the first inspection either a certified copy of the recorded NOTICE OF COMMENCEMENT or a notarized statement that the NOTICE OF COMMENCEMENT has been filed for recording, along with a copy thereof. In the absence of filing of a certified copy of the recorded NOTICE OF COMMENCEMENT the issuing authority shall not perform or approve subsequent inspections until the applicant files by mail, facsimile, hand delivery or any other means such certified copy with the issuing authority. This subsection does not require the recording of a NOTICE OF COMMENCEMENT prior to the issuance of a building permit.

COMBINATION BUILDING PERMIT APPLICATION (Page 1 of 2)
INDIAN RIVER COUNTY / CITY OF VERO BEACH

I. LEGAL DESCRIPTION: LOT ____ BLOCK ____ SUBDIVISION _____ **App. Date:** _____
 PARCEL NUMBER: _____ **FL Bldg Code:** _____
 (from tax notice \ receipt) **Supplements:** _____
 JOB ADDRESS: _____

II. CONTRACT / ESTIMATED CONSTRUCTION COST: \$ _____
 Permit Fee = Construction value multiplied by .00415 Minimum Permit Fee = \$200

III. TOTAL SQUARE FOOTAGE UNDER-ROOF: _____ **# of Bedrooms:** _____

Water: City County Well **Sewer:** City County Septic Sq Ft Under Air _____ **# of Bathrooms:** _____ **# of Garages:** _____
 (Circle one) (Circle one)

| IV. PROPOSED USE (Check All That Apply) | (Check All That Apply) | Type Construction (Check All That Apply) |
|---|------------------------|--|
| ____ RESIDENTIAL | ____ NEW CONSTRUCTION | ____ TYPE V – Combustible (All Wood Frame) |
| ____ COMMERCIAL | ____ ADDITION | ____ TYPE III – Exterior Non-Combustible/ Interior Any Material |
| ____ MULTI-FAMILY | ____ ALTERATION | ____ TYPE I or II All Non-Combustible (Specify) |
| ____ ACCESSORY Specify: _____ | ____ DEMOLITION | ____ OTHER (Sprinkler, Timber Const) Specify: _____ |

| | NAME & ADDRESS | CONTACT INFORMATION |
|---------------------------------------|--------------------------------------|-------------------------------|
| OWNER | | Name: |
| | | E-MAIL: |
| | | DAYTIME PHONE NUMBER: Fax: |
| TITLE HOLDER (If Other Than Owner) | | Name: |
| | | E-MAIL: |
| | | DAYTIME PHONE NUMBER: |
| CONTRACTOR | LICENSE NUMBER: COMP CARD NUMBER: | Name: |
| | | E-MAIL: |
| | | DAYTIME PHONE NUMBER: Fax: |
| ARCHITECT | | E-MAIL: |
| | | DAYTIME PHONE NUMBER: |
| ENGINEER | | E-MAIL: |
| | | DAYTIME PHONE NUMBER: |

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 the issuance of a permit, and that all work will be performed to meet the standards of all laws regulating construction, insurance, and worker's compensation. I understand that sub-contractor affidavits must be obtained for electrical, plumbing, air-conditioning, roofing, insulation, pools, irrigation systems, wells, or any other work that is allowed to be included in this permit.

Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the engineering department prior to the issuance of certificate of completion.

Owner's Affidavit: 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.

COMBINATION BUILDING PERMIT APPLICATION (Page 2 of 2)
INDIAN RIVER COUNTY / CITY OF VERO BEACH

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner or Agent
 {To sign as an Agent for the Owner you must have a Florida Form Power of Attorney signed by the Owner and Notarized with two additional witnesses other than the Notary}
Date: _____

And/or Signature of Contractor
Date: _____

As to Owner:
 State of _____
 County of _____

As to Contractor:
 State of _____
 County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by _____ who is ___ personally known or who has _____ produced identification. Type identification produced: _____.

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by _____ who is ___ personally known or who has _____ produced identification. Type identification produced: _____.

 Official Signature of Notary Public

 Official Signature of Notary Public

 Notary's Name, Typed, Printed or Stamped

 Notary's Name, Typed, Printed or Stamped

Notary Seal:

Notary Seal:

This Area for Building Division Use Only:

Building Living/Non Living Area: _____ sq ft **BR** ____ **Bath** ____ **Garage** ____

Value: = \$ _____ **Per:** **Plans Examination** **Contract**

| | |
|------------------------------------|------------|
| Building Permit Fee: | = \$ _____ |
| Radon Fund (State Mandated) | = \$ _____ |
| BCAI Fund (State Mandated) | = \$ _____ |
| Other | |
| Total Fees | = \$ _____ |



**INDIAN RIVER COUNTY/CITY OF VERO BEACH
COMBINATION PERMIT**

SUB-CONTRACTOR SUMMARY

_____ will be using the following sub-contractors for the
(company/individual name)

project located at _____. It is understood that if there
(street address and parcel #)

are any changes in status regarding the participation of any of the sub-contractors listed below, I
will immediately advise the Indian River County Building Department.

| Trade | Name of Company/Contractor | Indian River Co./ State of Florida Number |
|---------------------------|----------------------------|---|
| Plumbing | | |
| | | |
| Electrical | | |
| | | |
| Mechanical | | |
| | | |
| Roofing | | |
| | | |
| Insulation | | |
| | | |
| Irrigation | | |
| | | |
| Burglar Alarm | | |
| | | |
| Aluminum (Infill Only) | | |
| | | |
| Garage Door | | |
| | | |
| Other | | |
| | | |

Attached or Detached Screen Rooms, Swimming pools and other accessory structures require separate permits.

CONTRACTOR (original signature required):

Signature

Printed Name

Date

**INDIAN RIVER COUNTY/CITY OF VERO BEACH
COMBINATION PERMIT**

SUB-CONTRACTOR AGREEMENT/AFFIDAVIT

Indian River County Contractor Certificate Number: _____

State of Florida Certification Number (if applicable): _____

Combination Permit Number (if known): _____

_____ has agreed to be the _____
(company/individual name) (type of construction trade)

sub-contractor for _____ for the project located at
(Name of prime contractor)

_____. It is understood that, if there is any change of status
(street address)

regarding our participation with the above mentioned project, I will immediately advise the

Indian River County Building Department by personally filing a Change of Contractor.

BUSINESS QUALIFIER (original signatures required):

Signature Printed Name Date

Business Name: _____
Address: _____
City, State, Zip: _____
Phone: _____

NOTARY AS TO CONTRACTOR:

State of _____
County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20__ by
_____ who is _____ personally known or who has _____ produced identification. Type identification
produced: _____.

Official Signature of Notary Public

Notary's Name, Typed, Printed or Stamped

Notary Seal:

PLAN SPECIFICATIONS
(Minimum Required for Building Department Review)

This information is intended to be a guideline, and does not necessarily indicate all details required to determine code compliance.

SIZE: 24" X 36" BLUE PRINTS RECOMMENDED

MINIMUM 18" X 24"

PLOT PLAN: (Must Include the Following)

- * All streets and rights of way abutting the site
- * North direction indication
- * Any existing structures (exact location)
- * Well and septic location(check Health Department requirements)
- * Building Dimensions
- * Set back dimensions from all property lines at 90 degrees from property line
- * All easements
- * Exact legal description of property (if lengthy, attach copy of deed)

FLOOR PLAN: (Drawn to 1/4" Scale - Must Include the Following)

- * Exterior and interior dimensions
- * All window, door and miscellaneous openings with sizes shown
- * Plumbing fixtures and all fixed items - cabinets, counters, etc.
- * Partitions
- * Location of electrical outlets, fixtures, switches, main service panel, and proposed meter location
- * Attic access panel location(s) (minimum size 24" X 36")
- * A/C and heat equipment location. Show ducts and register sizes and locations
- * Wind load certifications for windows and doors - including garage door - with attachment details.
- * **IMPORTANT: Smoke detector and emergency egress window locations**

TYPICAL WALL SECTIONS: (Drawn to 1/2" or 3/4" Scale - Must Include the Following)

- * Footing type and sizes indicated
- * Vertical details (frame or block wall)
- * Truss anchoring detail
- * Truss, roof sheathing, type of roof covering (shingles, etc.)
- * Vapor barrier, 3-1/2" minimum slab thickness shown - Indicate termite protection method

STRUCTURAL NOTES:

BLOCK CONSTRUCTION:

Monolithic Footings: 16" deep X 20" wide with (2) #5 rods for single story;
16" deep X 24" wide with (3) #5 rods for two story.

Stemwall Footings: 8" deep X 20" wide, with (2) #5 rods for single story;
10" deep X 24" wide with (3) #5 rods for two story.

FRAME CONSTRUCTION:

Monolithic Footings: 20" deep X 16" wide with (2) #5 rods for single story;
20" deep X 24" wide with (3) #5 rods for two story.

Stemwall Footings: 10" deep X 20" wide with (2) #5 rods for single story;
10" deep X 24" wide with (3) #5 rods for two story.

NOTE: Bottom of all foundations must extend a minimum of 12" below finish grade per **Standard Building Code.**

ROOF CONSTRUCTION AND (WOOD FRAMED FLOORS):

Hand Framed:

- Show lumber grade and species
- Show load bearing walls and related foundation details
- Include complete framing plan

Pre-Engineered Trusses:

- Show truss layout (from Truss Manufacturer)
- Complete engineered Truss package must be on the job at the time of the framing inspection.

ELEVATIONS:

- Show all four views of the building

NOTE: Footings on fill require soil density reports by a qualified Engineer, as well as fill under slabs in excess of 20" deep, or as may be determined by field conditions.

**FLOOD ZONE APPLICATION INFORMATION FORM
SUBSTANTIAL IMPROVEMENT INFORMATION**

APPLICANT: _____

SITE LOCATION: _____

PARCEL NUMBER/TAX I.D. NUMBER: _____

FLOOD ZONE DESIGNATION: _____

(To Be Determined by: Planning/Engineering for Indian River County or Plans Examiner for City of Vero Beach)

If the property is located in a flood zone, the following information must be submitted with your application:

1. **BUILDING MARKET VALUE*** \$ _____**
(Building Staff)

Applicant must provide Property Appraiser's Record of Building Value. Available from Property Appraiser's office, 1st Floor, County Administration Building. Alternate sources listed below.

**To Be Filled in by Building Department Staff

(STAFF: Value determined by Property Appraiser's Record of Building Value Only X 115%)

2. **ESTIMATED COST OF IMPROVEMENT** \$ _____
(Owner/Contractor)

I hereby certify that the cost estimate submitted includes **all the costs** of improvements to structure located at the above referenced location.

OWNER OR PRIME CONTRACTOR

LICENSE NUMBER

PRINTED SIGNATURE

If property is located in the Coastal Building Zone (**Barrier Island**):

1. Applicant must provide total cost of **Improvements** based on five year tracking rule which extends back five years from the date of application.
2. Estimated Cost of **Substantial Improvements** \$ _____
during past five years (refer to #1 above) (Owner)

(STAFF: Check Address Reference Number on Computer for Prior Improvements)

I hereby certify that the referenced costs include **all improvements** to the above referenced structure for the last five years.

OWNER OR PRIME CONTRACTOR

***Acceptable estimate of market value can be obtained from the following sources:**

1. Property Appraisals used for tax assessment purposes. Print-out available from Property Appraiser's office on 1st-floor of County Administration Building.
2. Independent appraisals by a professional appraiser.
3. Detailed estimates of the structure's actual cash value (used as a substitute for market value based on the preference of the community).
4. The value of buildings taken from National Flood Insurance Program Claims data.
5. **"Qualified Estimates"** based on sound professional judgment made by staff of the local Building Department or local or state Tax Assessor's office.

BRING ONE OF THE ABOVE WITH YOU TO THE BUILDING DEPARTMENT

**REVIEW PROCESS FOR
SUBSTANTIAL IMPROVEMENTS OF EXISTING
SINGLE-FAMILY STRUCTURES IN
SPECIAL FLOOD HAZARD ZONES**

All single family lateral and vertical additions, interior modifications, and remodels, in Special Flood Hazard zones will have determination of substantial improvement conducted by the Indian River County/City of Vero Beach Building Division.

CITY OF VERO BEACH PROJECTS:

Forward improvements cost information (completed flood zone application/information form) to the City of Vero Beach Engineering Department, Attn: Monte Falls, Assistant City Engineer.

INDIAN RIVER COUNTY PROJECTS:

If cost of construction/improvements exceed 50% of the market value of the primary structure, forward a copy of the completed flood zone application/information form to County Engineering Department, Attn: Dave Cox.

- NOTE A:** Applicant may obtain market value, excluding land value from Property Appraiser's Office (add 15% more to Property Appraiser's value for total market value); or use one of the other four sources listed on the Flood Zone Application/Information form.
- NOTE B:** The cost of pools, open decks, and open or screen porches may be deducted from the total when they are added individually or as part of an overall improvement project.
- NOTE C:** The cost of attached garage and second story additions must be included in the total.
- NOTE D:** Additions (where the cost does not exceed 50% of the market value of the primary structure): Plans Examiners will stamp plans requiring addition to meet flood zone requirements. If applicant objects, send application to Engineering for further review.
- NOTE E:** Additions (detached buildings): Send to Engineering for review regardless of cost.
- NOTE F:** Additions (NOT HABITABLE- detached buildings) if located in A and AE Zones, and the cost is less than \$10,000, DO NOT send to Engineering for review.