

# NOTE: ALL SHEETS MUST BE REVIEWED

## DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES Herbert S. Saffir Permitting and Inspection Center 11805 SW 26th Street (Coral Way), • Miami, Florida 33175-2474 • (786) 315-2000 **PERMIT APPLICATION**

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IF SUBSIDIARY PROVIDE MASTER PERMIT NUMBER HERE						
LOCATION OF IMPROVEMENTS	Job Address _____ Folio _____ Lot _____ Block _____ Subdivision _____ PBpg _____ Metes and bounds _____	CONTRACTOR INFORMATION	Contractor No. _____ Last four (4) digits of Qualifier No. _____ Contractor Name _____ Qualifier Name _____ Address _____ City _____ State _____ Zip _____			
TYPE OF IMPROVEMENTS	<table style="width: 100%; border: none;"> <tr> <td style="width: 50%; border: none;"> <input type="checkbox"/> New Construction on Vacant Land  <input type="checkbox"/> Alteration Interior  <input type="checkbox"/> Alteration Exterior  <input type="checkbox"/> Relocation of Structure  <input type="checkbox"/> Short Term Event  <input type="checkbox"/> New Roof  <input type="checkbox"/> Recovery (Roof)  <input type="checkbox"/> Permit by Affidavit                             </td> <td style="width: 50%; border: none;"> <input type="checkbox"/> Enclosure  <input type="checkbox"/> Repair  <input type="checkbox"/> Repair Due to Fire  <input type="checkbox"/> Demolish  <input type="checkbox"/> Shell Only  <input type="checkbox"/> Addition Attached  <input type="checkbox"/> Addition Detached  <input type="checkbox"/> Re-Roof  <input type="checkbox"/> Foundation Only                             </td> </tr> </table>	<input type="checkbox"/> New Construction on Vacant Land <input type="checkbox"/> Alteration Interior <input type="checkbox"/> Alteration Exterior <input type="checkbox"/> Relocation of Structure <input type="checkbox"/> Short Term Event <input type="checkbox"/> New Roof <input type="checkbox"/> Recovery (Roof) <input type="checkbox"/> Permit by Affidavit	<input type="checkbox"/> Enclosure <input type="checkbox"/> Repair <input type="checkbox"/> Repair Due to Fire <input type="checkbox"/> Demolish <input type="checkbox"/> Shell Only <input type="checkbox"/> Addition Attached <input type="checkbox"/> Addition Detached <input type="checkbox"/> Re-Roof <input type="checkbox"/> Foundation Only	Current use of property _____ Description of Work _____ Sq. Ft. _____ Units _____ Floors _____ Value of Work _____		
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PERMIT TYPE	<table style="width: 100%; border: none;"> <tr> <td style="width: 25%; border: none;"> <input type="checkbox"/> Building* Category _____  <input type="checkbox"/> Electrical _____  <input type="checkbox"/> Mechanical _____  <input type="checkbox"/> Plumbing _____  <input type="checkbox"/> LPGX _____                             </td> <td style="width: 10%; text-align: center; color: red; font-weight: bold; writing-mode: vertical-rl; transform: rotate(180deg);">CHANGE TO AN EXISTING PERMIT</td> <td style="width: 65%; border: none;"> <input type="checkbox"/> Chg. Contractor  <input type="checkbox"/> Re-Issue  <input type="checkbox"/> Extension  <input type="checkbox"/> Supplement  <input type="checkbox"/> Reinspection                             </td> </tr> </table>	<input type="checkbox"/> Building* Category _____ <input type="checkbox"/> Electrical _____ <input type="checkbox"/> Mechanical _____ <input type="checkbox"/> Plumbing _____ <input type="checkbox"/> LPGX _____	CHANGE TO AN EXISTING PERMIT	<input type="checkbox"/> Chg. Contractor <input type="checkbox"/> Re-Issue <input type="checkbox"/> Extension <input type="checkbox"/> Supplement <input type="checkbox"/> Reinspection	OWNER'S NAME	Owner _____ Address _____ City _____ State _____ Zip _____ Phone _____ Last four (4) digits of Owner's Social Security No. _____
<input type="checkbox"/> Building* Category _____ <input type="checkbox"/> Electrical _____ <input type="checkbox"/> Mechanical _____ <input type="checkbox"/> Plumbing _____ <input type="checkbox"/> LPGX _____	CHANGE TO AN EXISTING PERMIT	<input type="checkbox"/> Chg. Contractor <input type="checkbox"/> Re-Issue <input type="checkbox"/> Extension <input type="checkbox"/> Supplement <input type="checkbox"/> Reinspection				
PERSON TO PICK UP PLANS	Name _____ Address _____ City _____ State _____ Zip _____ Phone _____	ARCHITECT ENGINEER	Name _____ Address _____ City _____ State _____ Zip _____ Phone _____			
BONDING	Name _____ Address _____ City _____ State _____ Zip _____ Phone _____	MORTGAGE LENDER	Name _____ Address _____ City _____ State _____ Zip _____ Phone _____			

\*See reverse side for Building Category

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that separate permits are required for **ELECTRICAL, PLUMBING, SIGNS, POOLS, MECHANICAL, WINDOW, SHUTTERS and ROOFING WORK** and there may be additional permits required for other governmental entities.

**OWNER'S/PERMIT APPLICANT AFFIDAVIT:** I certify that all of the foregoing information is accurate. I certify that I am not a named violator with: unpaid civil penalties; unpaid administrative costs of hearing; unpaid County investigative, enforcement, testing, or monitoring costs; or unpaid liens, any or all of which are owed to MiamiDade County pursuant to the provisions of the Code of Miami-Dade County, Florida.

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

"The issuance of the permit does not relieve the property owner from obtaining homeowner's association approval (if required) prior to beginning any work and in no way authorizes work that is in violation of any association rule or regulation."

Signature of Owner or Owner's Agent \_\_\_\_\_  
 PRINT NAME \_\_\_\_\_  
 STATE OF FLORIDA COUNTY OF MIAMI-DADE  
 Sworn to and subscribed before me this \_\_\_\_\_  
 day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_  
 by \_\_\_\_\_  
 Signature of Notary Public \_\_\_\_\_  
 Print Name \_\_\_\_\_  
 (SEAL) \_\_\_\_\_  
 Personally known \_\_\_\_\_  
 or Produced Identification \_\_\_\_\_

Signature of Qualifier \_\_\_\_\_  
 PRINT NAME \_\_\_\_\_  
 STATE OF FLORIDA COUNTY OF MIAMI-DADE  
 Sworn to and subscribed before me this \_\_\_\_\_  
 day of \_\_\_\_\_, 20\_\_\_\_, \_\_\_\_\_  
 by \_\_\_\_\_  
 Signature of Notary Public \_\_\_\_\_  
 Print Name \_\_\_\_\_  
 (SEAL) \_\_\_\_\_  
 Personally known \_\_\_\_\_  
 or Produced Identification \_\_\_\_\_

## **BUILDING PERMIT CATEGORIES**

<b>CATEGORY</b>	<b>DESCRIPTION</b>
01	GENERAL BUILDING—COMMERCIAL
02	SUB—GENERAL BUILDING—RESIDENTIAL
08	CANVAS AWNING
10	COMMUNICATION TOWER
15	DEMOLITION
18	FENCE
19	FLAGPOLE—SATELLITE DISH
22	GARAGE DOOR REPLACEMENT
29	METAL AWNING & STORM SHUTTER
35	ORNAMENTAL IRON
48	SCREEN ENCLOSURES
51	SIGN (NON-ELECTRIC)
55	SWIMMING POOL
82	WINDOWS (RESIDENTIAL OR COMMERCIAL)
83	STORE FRONT (RESIDENTIAL OR COMMERCIAL)
84	GLAZED CURTAIN WALLS
86	TRAILER TIE DOWN
88	WALK-IN COOLER
91	MARINAS
92	LOW SLOPE APPLICATIONS (GRAVEL, SMOOTH MODIFIED, SINGLE PLY)
95	SHINGLES (ASPHALT, FIBERGLASS)
96	SHINGLES (METAL ROOFS/WOOD SHINGLES & SHAKE)
99	SOIL IMPROVEMENT
0100	BULK STORAGE PROPANE TANK
0101	REMOVABLE STORM PANELS
0104	SINGLE ENTRANCE DOOR
0106	LIGHTWEIGHT CONCRETE
0107	TILE ROOF
0109	WATERPROOFING SYSTEMS
0113	CHINESE DRYWALL REPAIR – RESIDENTIAL
0114	CHINESE DRYWALL REPAIR – COMMERCIAL

### **ATTENTION**

Please be advised that Roadway Impact Fee may be required for Building Permit categories "01" Commercial, "02" Residential, "18" Fence and "86" Trailer Tie Down.

Please complete the following if your application is for one of the above mentioned categories.

Impact Fee, Fee Payer Name \_\_\_\_\_

Address \_\_\_\_\_ Phone No. \_\_\_\_\_

Last four (4) digits of Social Security/Tax Identification No. \_\_\_\_\_

Please be advised that any existing or proposed Development served or to be served with a septic tank requires approval from the Florida Department of Health.

# NOTICE OF COMMENCEMENT

A RECORDED COPY MUST BE POSTED ON THE JOB SITE AT TIME OF FIRST INSPECTION

PERMIT NO. \_\_\_\_\_ TAX FOLIO NO. \_\_\_\_\_

STATE OF FLORIDA:  
COUNTY OF MIAMI-DADE:

THE UNDERSIGNED hereby gives notice that improvements 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.

Space above reserved for use of recording office

1. Legal description of property and street/address: \_\_\_\_\_

2. Description of improvement: \_\_\_\_\_

3. Owner(s) name and address: \_\_\_\_\_

Interest in property: \_\_\_\_\_

Name and address of fee simple titleholder: \_\_\_\_\_

4. Contractor's name, address and phone number: \_\_\_\_\_

5. Surety: (Payment bond required by owner from contractor, if any)

Name, address and phone number: \_\_\_\_\_

Amount of bond \$ \_\_\_\_\_

6. Lender's name and address: \_\_\_\_\_

7. 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 and phone number: \_\_\_\_\_

8. In addition to himself, Owners designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Name, address and phone number: \_\_\_\_\_

9. Expiration date of this Notice of Commencement: \_\_\_\_\_

(the expiration date is 1 year from the date of recording unless a different date is specified)

**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.

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/Manager

Prepared By \_\_\_\_\_ Prepared By \_\_\_\_\_

Print Name \_\_\_\_\_ Print Name \_\_\_\_\_

Title/Office \_\_\_\_\_ Title/Office \_\_\_\_\_

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_.

By \_\_\_\_\_

Individually, or  as \_\_\_\_\_ for \_\_\_\_\_

Personally known, or  produced the following type of identification: \_\_\_\_\_

Signature of Notary Public: \_\_\_\_\_

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

(SEAL)

## VERIFICATION PURSUANT TO SECTION 92.525, FLORIDA STATUTES

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true, to the best of my knowledge and belief.

Signature(s) of Owner(s) or Owner(s)'s Authorized Officer/Director/Partner/Manager who signed above:

By \_\_\_\_\_ By \_\_\_\_\_

This instrument prepared by:

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

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

\_\_\_\_\_

\_\_\_\_\_

**NOTICE OF TERMINATION**  
(of Notice of Commencement)

STATE OF FLORIDA:  
COUNTY OF MIAMI-DADE:

Space above reserved for use of recording office

The undersigned hereby gives notice that the effective period of that certain Notice of Commencement dated \_\_\_\_\_, recorded in O.R. Book/Page \_\_\_\_\_/\_\_\_\_\_ of the Public Records of Dade County, Florida, will terminate; and, in accordance with Section 713.132, Florida Statutes, the following information is provided:

1. The date and recording information for the Notice of Commencement being terminated are as described above, and all information contained therein is hereby expressly incorporated into this NOTICE OF TERMINATION.
2. The Notice of Commencement shall be terminated as of \_\_\_\_\_, or 30 days from the recording date of this Notice of Termination, whichever date is later.
3. This Notice of Termination applies to:
  - all the real property subject to the above described Notice of Commencement.
  - only to the portion of such real property described as:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

4. All lienors have been paid in full or prorata in accordance with Section 713.06(4), Florida Statutes.
5. A copy of this notice has been served on the contractor and on each lienor who has given notice, if any.

Owner Signature: \_\_\_\_\_  
Print Name \_\_\_\_\_

Owner Signature: \_\_\_\_\_  
Print Name \_\_\_\_\_

SWORN TO AND SUBSCRIBED before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_  
by: \_\_\_\_\_

Personally known to me, or produced \_\_\_\_\_ as identification.

Notary Signature: \_\_\_\_\_

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

seal

**Exhibit attached:**

- Contractor's Final Payment Affidavit
- Property Legal Description
- Copy of Notice of Commencement

# RELEASE OF LIEN AND AFFIDAVIT

Space above reserved for use of recording office

1. The undersigned contractor, for an in consideration of the payments of the sum of \_\_\_\_\_ paid by receipt of which is hereby acknowledged, hereby releases and quit claims to \_\_\_\_\_, the owner of the hereinafter described property, all liens, lien rights, claims or demands of any kind whatsoever, which the undersigned now has to might have against the building located on, or premises legally described as \_\_\_\_\_

on account of labor performed and/or materials furnished for the construction of any such improvements on said premises.

2. All labor and materials used by the undersigned in the erection of said improvements have been paid in full, except as follows: \_\_\_\_\_

3. All lienors furnishing labor, services, or materials for said improvements have been paid in full, except as follows: \_\_\_\_\_

4. This instrument is executed and delivered to the owner in compliance with Chapter 713, Florida Statutes.

5. The undersigned contractors does hereby consent to the payment by the owner of all lienors giving notice and those lienors above named.

IN WITNESS WHEREOF, I have hereunto set by hand and seal this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

Witnesses:

1. \_\_\_\_\_ (SEAL)  
(Contractor)

2. \_\_\_\_\_ By \_\_\_\_\_  
(President)

**STATE OF FLORIDA:**

**COUNTY OF MIAMI-DADE:**

I, hereby acknowledge that the statements contained in the foregoing Release of Lien and Affidavit are true and correct. Sworn to and subscribed before me, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

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

Print Notary's Name: \_\_\_\_\_

My Commission Expires: \_\_\_\_\_



## MIAMI-DADE COUNTY CONSTRUCTION LIEN LAW FOR OWNERS

**NOTE: IF YOU SIGNED AS THE OWNER'S AGENT YOU ARE RESPONSIBLE FOR DELIVERING THIS INFORMATION SHEET TO THE OWNER OF THE PROPERTY.**

### WARNING TO OWNER

Florida's Construction Lien Law (Chapter 713, Part One, Florida Statutes) requires the recording with the Clerk of the Courts a Notice of Commencement for real property improvements greater than \$2,500.00. However, it does not apply to the repair or replacement of an existing heating or air conditioning system less than \$7,500.00 in value. This notice must be signed by you, the property owner.

Under Florida law, those who work on your property or provide materials and are not paid, have a right to enforce their claim for payment against your property. This claim is known as a construction lien.

### YOU MUST FILE A NOTICE OF COMMENCEMENT

For your protection under the Construction Lien Law and to avoid the possibility of paying twice for improvements to real property, you must record a Notice of Commencement in the Clerk of the Court's Office. You also must provide a certified copy of the recorded document at the construction site. The Notice of Commencement must be signed by you, the owner contracting the improvements, and not by your agent.

The Notice of Commencement form, provided with this information packet, must be completed and recorded within 90 days before starting the work.

A copy of the payment bond, if any is required by you and purchased by the contractor, must be attached as part of the Notice of Commencement when recorded.

If improvements described in the Notice of Commencement are not actually started within 90 days after the recording of the Notice, a new Notice of Commencement must be recorded.

You lose your protection under the Construction Lien Law if the payments are made to the contractor after the expiration of the Notice of Commencement. The Notice is good for one year after the recording date or up to the date specified under item nine of the form.

Florida law requires the Department of Regulatory and Economic Resources to be a second source of information concerning the improvements made on real property. The Building Permit Application (included with this packet) has been expanded to include information on the construction lender and the contractor's surety, if any. The new application requires your signature or your agent's, to inform you of the Construction Lien Law.

### YOU MUST POST THE NOTICE OF COMMENCEMENT AT THE JOB SITE

By law, the Department of Regulatory and Economic Resources is required to verify at the first inspection, after the building permit is issued, that a certified copy of the recorded Notice of Commencement, with attached bonds if any, is posted at the construction site. Failure to show the inspector a certified copy of the recorded Notice will result in a disapproved inspection, (Florida Statute 713.135(1)(d)).

### NOTICE TO OWNER FROM SUBCONTRACTORS AND SUPPLIERS

You may receive a Notice to Owner from subcontractors and material suppliers. This notice advises you that the sender is providing services or materials. Subcontractors and suppliers must serve a Notice to Owner within 45 days of commencing work to preserve their ability to lien your property.

If your address changes from that given in the Notice of Commencement, you should record a corrected Notice reflecting your current address. This is done to help ensure you will receive all notices.

### RELEASE FROM LIEN FROM CONTRACTOR

Prior to paying the contractor, you need to receive a Release of Lien and Affidavit to the extent of payment from the general contractor. The Release of Lien and Affidavit shall state either that all the subcontractors and suppliers have been paid or list those unpaid and the amount owed. The contractor is required to list on the Release of Lien and Affidavit any subcontractor or supplier that has not been paid. That amount may be withheld from the contractor's pay and paid directly to the subcontractor or suppliers after 10 days written notice to the contractor.

If the balance due to the contractor is not sufficient to pay in full all subcontractors and suppliers listed on the contractor's affidavit, you may wish to consult an attorney.

The general contractor shall furnish a final Release of Lien and Affidavit to the owner indicating all subcontractors and suppliers have been paid at the time he requests final payment. You can rely on the affidavit in making final payment to the general contractor. If you make final payment to the general contractor without obtaining the affidavit, your property can be liened for non-payment if the general contractor fails to pay the subcontractors or suppliers. You should always obtain a Release of Lien and Affidavit from the contractor to the extent of any payments being made.

### RELY ON YOUR LENDER FOR COMPLIANCE WITH CONSTRUCTION LIEN LAW

If you have a lender, you may rely on the lender to handle the recording of the Notice of Commencement. Learn more about the Construction Lien Law by contacting an attorney, your lender, or the Florida Department of Agricultural and Consumer Services, Division of Consumer Services.

**Documents are recorded at the Clerk of the Courts, MIAMI-DADE COUNTY RECORDER, COURTHOUSE EAST, 22 N.W. First Street, 1st Floor, Miami, FL 33128.**

You can record the Notice of Commencement by mail. The original Notice should be sent to the County Recorder, P.O. Box 011711, Flagler Station, Miami, Florida 33101. Please make sure the original Notice is signed and notarized. Also, remember to enclose the recording fee (for a single copy) and written instructions for recording and returning a certified copy of the recorded documents. For additional information on fees and recording documents call (305) 275-1155.