

**PERMIT SUBMITTAL REQUIREMENTS**

Listed below are the basic permit submittal requirements. Additional information may be required based on project type.

- Permit applications signed & notarized for each discipline of work (i.e. building, electrical, plumbing, and mechanical). **(Please note that a copy of an original signature is NOT acceptable)**
- Verify that the Job Value includes the cost of work for all sub-permit amounts. A copy of the contract describing the job may be required.
- Contractors must be registered with the City of Weston with current Insurance Certificates (liability and workers compensation) and Licensing documentation (Contractor, Certificate of Competency, Occupational License.)
- Copy of recorded Notice of Commencement, required for projects valued at \$2,500 or higher. For A/C permits, the limit is raised to \$7,500. **(This must be submitted prior to the permit being issued.)**
- Two (2) sets of plans signed & sealed by a professional engineer/architect, if applicable.
- Two (2) Original Surveys (Raised seal) for all NEW Residential and Commercial construction.
- Two (2) copies of a current survey showing location of proposed construction / improvements. (Fences, driveways, pools, decks etc.)
- Lot Calculation Sheet that identifies ALL impervious areas (existing and proposed). (Pools, Decks, Driveways, Pavers, slabs, sheds and screen rooms.)
- A copy of the Broward County Planning & Environmental Regulation Division approval certificate showing DER Review #, when applicable. This is required for all new building construction, additions or alterations to non-residential buildings, as well as demolitions, new or replacement emergency generators, commercial or multifamily pools and below ground storage tanks, temporary buildings and construction trailers. **For a complete list and e-permit instructions, please visit [www.broward.org/ePermits](http://www.broward.org/ePermits).**
- Product approvals for sheds, doors, all glass, roofs, and all types of shutters.
- Energy calculations including heating and cooling load calculations.
- Wind load calculations (signed & sealed) are needed for shutters, windows, doors, skylights, & garage doors.
- Signed & sealed pressure calculations are required for doors and windows.
- City of Weston Permit Acknowledgement Affidavit - required for residential projects, and must be signed and notarized by property owner. **(Please note that a copy of an original signature is NOT acceptable)**
- Permit Fees are due and collected when the permit application package is submitted. Payment in the form of Company or Personal checks, MasterCard, Visa or American Express are accepted. **CASH WILL NOT BE ACCEPTED.**

The City's building and permitting system allows residents to monitor the overall permitting process with a few simple clicks of the mouse. For contractors the system provides a centralized one stop source for applying and completing residential and commercial work in the City of Weston. Visit the website at <https://inkforce.westonfl.org/WestonInkforce/Tasks.aspx>

**Please call if you have any questions regarding either permit requirements or the process.**

**17250 Royal Palm Boulevard \* Weston, FL. 33326 \* Tel. (954) 385-0500 \* Fax. (954) 384-7723**



**CITY OF WESTON**  
 17250 Royal Palm Boulevard  
 WESTON, FLORIDA 33326  
 954-385-0500 Office      954-384-7723 FAX

Permit # \_\_\_\_\_

AP# \_\_\_\_\_

**BUILDING PERMIT APPLICATION**  
*Florida Building Code 5th Edition (2014) In Effect*

PERMIT TYPE:(Select One)	BUILDING	MECHANICAL	ELECTRICAL	PLUMBING	ROOFING	
JOB ADDRESS:						
OWNER NAME:						
OWNER ADDRESS:						
CITY:						
PHONE:		FAX:		EMAIL:		
FEE SIMPLE TITLE HOLDER'S NAME:						
FEE SIMPLE TITLE HOLDER'S ADDRESS:						
CONTRACTING FIRM:						
MAIL ADDRESS:						
CITY STATE ZIP:						
PHONE:		FAX:		EMAIL:		
CERT. COMPETENCY:			STATE REGISTRATION:			
LOT:	BLOCK:	PRESENT USE:		PROPOSED USE:		
FOLIO NUMBER:			SUBDIVISION:			
NO. OF STORES:		OFFICES:	FAMILIES:	BEDROOMS:	BATHS:	
TYPE OF WORK:		ADD	NEW	ALTER	REPAIR	
<b>JOB COST:</b> (Total all Trades or Contract):		SQ. FT.: (Total)		L. F.: (Total)		
DESCRIBE WORK:						
ARCHITECT/ENGINEER NAME:						
ARCHITECT/ENGINEER ADDRESS:						
PHONE:		FAX:		EMAIL:		
MORTGAGE LENDER NAME:						
MORTGAGE LENDER ADDRESS:						

Application is hereby made to obtain a permit to do the work and installations as indicated, I certify that no work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of all laws regulating construction in BROWARD COUNTY and the CITY OF WESTON whether specified in this Application and accompanying plans or not. I understand that a separate permit must be secured for ELECTRICAL, PLUMBING, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, etc. The information provided herein by the Applicant is not evaluated for issuance of a Certificate of Use. The City reserves the right to deny or condition any proposed use of the property pursuant to provisions of the City's Code of Ordinances.

(Please Complete Second Page)

Initial this Page \_\_\_\_\_

**OWNER'S AFFIDAVIT:** I certify that all information provided is accurate, and that all work will be performed in compliance with all applicable laws regulating construction and zoning. No work has been commenced prior to the issuance of the permit sought by this application, and all work will be done as indicated in the Application and all accompanying document and plans.

**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 the county, and there may be additional permits required from other governmental entities such as water management districts, state or federal agencies.

**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 YOUR LENDER OR ATTORNEY BEFORE RECORDING THE NOTICE OF COMMENCEMENT.

CONTRACTOR  
(Print Name): \_\_\_\_\_

OWNER  
(Print Name): \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by \_\_\_\_\_.

Sworn to (or affirmed) and subscribed before  
me this \_\_\_\_\_ day of \_\_\_\_\_,  
20\_\_\_\_, by \_\_\_\_\_.

NOTARY: \_\_\_\_\_

NOTARY: \_\_\_\_\_

SEAL:

SEAL:

Personally known \_\_\_\_\_  
OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_

Personally known \_\_\_\_\_  
OR Produced Identification \_\_\_\_\_  
Type of Identification Produced \_\_\_\_\_

- Fax inspection requests to 954-384-7723.
- Allow one (1) day's notice for inspections. Inspection requests received after 3:00 p.m. will be scheduled for the following day.
- Plans and permit card must be on job before inspections will be made.
- At least one (1) approved inspection every 90 days is required or the permit expires.
- Obtain Certificate of Occupancy from Department before using completed building.



## PERMIT APPLICATION ACKNOWLEDGMENTS

**CITY OF WESTON**

**BUILDING DEPARTMENT**  
17250 Royal Palm Boulevard  
WESTON, FLORIDA 33326  
954-385-0500 Office  
954-384-7723 FAX

OWNER NAME: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ LOT/BLOCK: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

This document is required with every residential permit submitted to the Building Department. Original, notarized signatures must be affixed, and **each numbered item must be initialed**. It must be executed (signed and notarized) by the property owner. Signatures by agents, owner representatives, or individuals other than the property owner will not be accepted.

- \_\_\_\_\_ 1. I am the legal owner of the property described above.
- \_\_\_\_\_ 2. I acknowledge that approval may be required from a homeowners association or other entity which regulates or otherwise governs the community, neighborhood, or development in which my property is located.
- \_\_\_\_\_ 3. I acknowledge that I am responsible for any additional costs that may be assessed by the City of Weston and/or the entity regulating or governing the subject property as a result of my not having obtained the necessary approvals from any entity or association that may regulate or otherwise govern the community, neighborhood, or development in which my property is located.
- \_\_\_\_\_ 4. I understand that permit fees are due at the time the application is submitted.
- \_\_\_\_\_ 5. I understand that building permits are required to be signed by a property owner.
- \_\_\_\_\_ 6. I understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.
- \_\_\_\_\_ 7. I understand that inspections are required under this permit, and that the approved set of plans stamped by this office, and the building permit/inspection card must be available to the inspector. Otherwise, a re-inspection with additional fees may be assessed.
- \_\_\_\_\_ 8. I understand that an inspector may require access to interior components in order to complete an inspection. If the inspector is unable to gain access as part of a scheduled inspection a re-inspection with additional fees may be assessed.
- \_\_\_\_\_ 9. I understand that this permit will expire if work is not begun within 180 days from the date the permit is issued. Additionally, if work is suspended or abandoned for a period of 90 days, the permit is deemed expired. Once expired, permits must be renewed prior to any further work or inspections being accomplished. (Florida Building Code Section 105.23.3)
- \_\_\_\_\_ 10. I understand that if this permit expires it becomes null and void. Failure to schedule all required inspections, or otherwise ensure the permit is closed may result in this file being forwarded to Code Enforcement or the Unsafe Structures Board for a further determination. Action by either of these entities could result in fines being imposed and/or liens being placed against your property.

11. 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 a 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 or 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.

12. I understand that final inspection(s) must be scheduled by the permit holder and approved by the City to properly document completion of work and closure of the permit. Failure to do so will result in an open permit status in the public record, which may prevent future real estate transactions from occurring.

13. Issuance of a development permit by the city does not in any way create any right on the part of an applicant to obtain a permit from a state or federal agency and does not create any liability on the part of the city for issuance of the permit if the applicant fails to obtain requisite approvals or fulfill the obligations imposed by a state or federal agency or undertakes actions that result in a violation of state or federal law. All applicable state and federal permits must be obtained before commencement of the development

\_\_\_\_\_  
Homeowner Signature

**STATE OF FLORIDA**        )  
**COUNTY OF BROWARD**    )

Affirmed and signed before me, on \_\_\_\_\_ the foregoing document was acknowledged before me by Affiant \_\_\_\_\_, who personally appeared before me at the time of notarization, who signed and acknowledged signing the foregoing document, who did take an oath, and:

[    ] who is personally known to me or  
[    ] who produced the following identification: \_\_\_\_\_

\_\_\_\_\_  
(Notary Public Signature)

Commission Expiration date: \_\_\_\_\_

\_\_\_\_\_  
(Printed or Typed Name)

(Seal)



## OWNER/BUILDER AFFIDAVIT

**CITY OF WESTON**  
**BUILDING DEPARTMENT**  
17250 Royal Palm Boulevard  
WESTON, FLORIDA 33326  
954-385-0500 Office  
954-384-7723 FAX

OWNER NAME: \_\_\_\_\_

SUBDIVISION: \_\_\_\_\_ LOT/BLOCK: \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_

I am applying for a Building Permit pursuant to the Owner Builder exemption set forth in Florida Statute 489.103. Florida law requires that I attest to the following statements. **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 and 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 or her 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 permit and contracts.

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 in 1 year after the 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 the licenses required by law and by county 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 any 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 those 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. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that 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. 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 of 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 [www.myflorida.com/dbpr/pro/cilb/](http://www.myflorida.com/dbpr/pro/cilb/) 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 a 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 or 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 property licensed and the status of the contractor's workers' compensation coverage.

Check types of permits you are seeking:

- Building
- Roofing / Reroofing
- Electrical
- Plumbing
- Air Conditioning
- Other \_\_\_\_\_

*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*

\_\_\_\_\_  
*STATE OF FLORIDA – COUNTY OF BROWARD*

*Sworn to (or affirmed) and subscribed before me  
This \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
by \_\_\_\_\_  
(Type / Print owners name)  
NOTARY as to owner's signature*

*Name and Title(printed)\_\_\_\_\_*  
*(Type / Print Notary's Name)*

*Personally known \_\_\_ or Produced Identification\_\_\_\_*  
*Type of Identification produced*



# CITY OF WESTON

**BUILDING DEPARTMENT**  
17250 Royal Palm Boulevard  
WESTON, FL 33326  
954-385-0500 Office  
954-384-7723 Fax

## Contractor Registration

Date Submitted: \_\_\_\_\_

**No fee is required to register with the City of Weston Building Department**

### COMPANY INFORMATION

Type of Contractor: \_\_\_\_\_

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

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

Company Phone: \_\_\_\_\_

Company Fax: \_\_\_\_\_

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

### QUALIFIER INFORMATION

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

Qualifier Cell Phone: \_\_\_\_\_

Qualifier Email Address: \_\_\_\_\_

Would you like to be added to our mailing list to receive City of Weston Building Code Services policy and procedure updates and office closure information: Yes  No

#### Copies of the following are required for registration

- State Certification
- -OR- State Registration AND Broward County Certificate of Competency
- Business Tax Receipt
- General Liability: "City of Weston" as Certificate Holder  
17250 Royal Palm Boulevard  
Weston, FL 33326
- Workman's Compensation / Exemption

**\*\*Qualifier Signature:** \_\_\_\_\_



Permit # \_\_\_\_\_ Folio # \_\_\_\_\_

## NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement 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 :

this space reserved for recorder

1. Legal Description of Property: Lot \_\_\_\_\_ Block \_\_\_\_\_ Unit # \_\_\_\_\_ Bldg # \_\_\_\_\_  Lengthy legal attached  
Subdivision / Condominium: \_\_\_\_\_  
Street Address if available: \_\_\_\_\_
2. General description of Improvement : \_\_\_\_\_
3. a. Owner name and address: \_\_\_\_\_  
b. Interest in property: \_\_\_\_\_  
c. Name and address of fee simple titleholder (if other than Owner): \_\_\_\_\_
4. a. Contractor name and address: \_\_\_\_\_  
b. Contractor's phone number: \_\_\_\_\_
5. a. Surety name and address: \_\_\_\_\_  
b. Surety's phone number: \_\_\_\_\_  
c. Amount of bond: \$ \_\_\_\_\_
6. a. Lender name and address: \_\_\_\_\_  
b. Lender's phone number: \_\_\_\_\_
7. a. 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: \_\_\_\_\_  
b. Phone number: \_\_\_\_\_
8. a. In addition to himself or herself, the Owner designates \_\_\_\_\_ to receive a copy of Lienor's Notice per Section 713.13(1)(b), Florida  
b. Phone number of person or entity designated by owner \_\_\_\_\_
9. Expiration date of 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

By _____	By _____
Print Name _____	Print Name _____
Title/Office _____	Title/Office _____

STATE OF FLORIDA  
COUNTY OF BROWARD

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)' Authorized Officer/Director/Partner/Manager who signed above:

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



**CITY OF WESTON**  
**BUILDING DEPARTMENT**  
 17250 Royal Palm Boulevard  
 Weston, FL 33326  
 954-385-0500 Phone  
 954-384-7723 Fax

## Revision Application

Revision Application is required when plans are submitted after the **Master Permit** has been issued.

Fees for Revision:      \$223.00 Residential (Per Trade)      \$277.00 Commercial (Per Trade)

Revision Type	BUILDING	ELECTRICAL	MECHANICAL	PLUMBING	FIRE	ZONING
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Master Permit Number: \_\_\_\_\_

Is this a Correction to an existing Revision?    No     Yes  If so, please provide the application #

Application Number: \_\_\_\_\_

Contracting Firm responsible for Revision: \_\_\_\_\_

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

City, State, Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax Number: \_\_\_\_\_

Email: \_\_\_\_\_

State License or Certificate of Competency#: \_\_\_\_\_

Will the job cost be increased due to this revision?    No     Yes  If so, please provide the new value

Job Cost if changed: \_\_\_\_\_

**Revision Description:**

Contractor  
(Print Name): \_\_\_\_\_

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

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

Seal: \_\_\_\_\_

State of Florida  
 County of \_\_\_\_\_  
 Sworn to (or affirmed) and subscribed before  
 me this \_\_\_\_\_ day of \_\_\_\_\_  
 20\_\_\_\_, by \_\_\_\_\_

Personally Known \_\_\_\_\_  
 OR Produced Identification \_\_\_\_\_  
 Type of Identification Provided \_\_\_\_\_

**LOT COVERAGE CALCULATION WORKSHEET**

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

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

Project Type: \_\_\_\_\_

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

**Effective Immediately - Lot Coverage Calculations must be provided for those projects adding impervious square footage to a single family lot. (§158.57(b)(6))**

**Total Lot Square Footage**  A  
60% of Lot \_\_\_\_\_

**Existing Impervious Square Footage**

House \_\_\_\_\_  
Driveway \_\_\_\_\_  
Walkway \_\_\_\_\_  
Entryway \_\_\_\_\_  
A/C Pad(s) \_\_\_\_\_  
Other Mechanical Pad(s) \_\_\_\_\_  
Patio/Screen Room \_\_\_\_\_

**Total**  B

**New Impervious Square Footage**

Description  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Total**  C

**Total All Impervious Square Footage (B + C)**

**Total Coverage Impervious Area (D÷A)x100=**

Completed By: \_\_\_\_\_

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

Date: \_\_\_\_\_



## INSPECTION REQUEST

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

Phone: \_\_\_\_\_ Permit #: \_\_\_\_\_

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

### STRUCTURAL

- Foundation
- Rock Base/Forms
- Slab
- Exterior Framing
- Wall Sheathing
- Columns
- Tie Beam
- Truss/Rafters
- Roof Sheathing
- Interior Framing
- Bucks
- Windows/Doors
- Insulation
- Drywall
- Wire Lath
- Pool Steel
- Pool Deck
- Final Pool
- Final Fence
- Final Screen Enclosure
- Driveway
- Tin Cap and Accessories
- Mop in Progress
- Roof Cover in Progress
- Final Roof
- Shutters
- Final Shutters
- Ceiling Grid/Above Ceiling Penetrations
- Final

### FIRE

- Sprinklers Underground Rough/Pressure
- Sprinklers Above Ground Rough/Pressure
- 200 PSI Test
- Hood Fire Suppression System
- Flush Test
- Final Fire Alarm
- Final Fire Pump
- Hydrant Flow Test
- Emergency Generator
- Special Extinguishing Sys.
- LP Gas Final
- Smoke Control Sys.
- Fire Standpipe
- Fuel Storage Tanks
- Firestopping
- Final Sprinklers
- Final CO

### FINAL ZONING/LANDSCAPE

- Fence
- Screen Enclosure
- Pool
- Rock Base/Forms
- Driveway/Driveway Transition
- Slabs/Decks/Patios
- New SFR
- Addition

### PLUMBING

- Rough
- Water Service
- 2nd Rough
- Top Out
- Fire Sprinklers Above Ground Rough
- Fire Sprinklers Underground Rough
- Fire Sprinklers Final
- Septic Tank Hook-up
- Sewer Hook-up
- Roof Drains
- Gas Rough Inside
- Gas Rough Outside
- Gas Final
- 200 PSI Test
- LP Tank
- Well
- Lawn Sprinkler Rough
- Lawn Sprinkler Final
- Main Drain
- Pool Piping
- Backflow Preventer
- Interceptor
- Catch Basins
- Condensate Drains
- Final
- Medical Gas

### MECHANICAL

- Underground Piping
- Jennaire
- Condensate Drains
- Rough Ductwork
- Exhaust Fans/Dryers
- Fire Dampers
- Smoke Dampers
- Ceiling Radiation Damper
- Hood Systems Rough
- Hood Systems Final
- Refrigerator/Walk Cooler/Freezer

- Boiler
- Tanks Above Ground
- Tanks Underground
- Spray Booths
- Chimneys and Vents
- Cooling Tower/Chiller Sys.
- Process Piping
- Fireplace Rough/Ventilation
- Fireplace Final
- Final

### ELECTRICAL

- Temporary Pole
- 30 Day Temporary
- Pool Grounding
- Underground Rough
- Slab Grounding
- Rough
- Ceiling Rough
- Telephone Rough
- Telephone Final
- Television Rough
- Television Final
- Intercom Rough
- Intercom Final
- Alarm Final
- Sound Rough
- Sound Final
- Central Vacuum Rough
- Central Vacuum Final
- Service Upgrade
- Miscellaneous Repairs
- Pool Niche Light
- Wall Rough
- Generator Rough
- Fire Alarm Rough
- Final

- Identify the type of inspection(s) requested by checking the appropriate box.
- **Fax** the completed form to **954-384-7723**.
- Requests received prior to **3:00pm** will be scheduled for the following day.
- Scheduling in advance of one (1) day cannot be accommodated.