

### INSTRUCTIONS FOR BUILDING PERMIT APPLICATION

2800 N. HORSESHOE DR., NAPLES, FL 34104 | TEL: (239) 252-2400

These Instructions are designed to assist and guide Permittees through completing the Building Permit Application. For your convenience, the Application is also available on <a href="http://www.colliergov.net">http://www.colliergov.net</a> as an interactive PDF. All sections, as noted, must be completed.

| nsmue         | tions for Section A. Perm   | it Number  |                     |                       |                              |                         |            |                 |  |  |  |  |
|---------------|---|--|---------------------|-----------------------|------------------------------|-------------------------|------------|-----------------|--|--|--|--|
| <b>4.1.</b>   | Permit #: To be comple  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| nstruc        | ions for Section B. Gene  | THE PROPERTY OF THE PROPERTY O |                     |                       |                              |                         |            |                 |  |  |  |  |
| B.1.          | Primary Permit #: To be completed by the applicant, if applicable. For example, the single-family home permit is the PRIMARY PERMIT an accessory pool permit.                                       |  |                     |                       |                              |                         |            | MARY PERMIT for |  |  |  |  |
| 3.2.          | Master Permit #: To be use for future permits.  | e completed by the applicant, if applicable. A MASTER PERMIT is a set of documents pre-approved by the Coun  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.3.          |   | t one of the four options.   |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.4.          | Permittee Type: Select one of the three options.  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| B. <b>5</b> . | Parcel/Folio #: These can be found on the Collier County Property Appraiser website: http://www.collierappraiser.com.   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.6.          | Job Street Address: This is the physical address where the construction work will take place.   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.7.          | Ower Name: Name of the property owner where the construction work will take place.  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.8.          | Owner Phone: Phone number of the property owner where the construction work will take place.  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.9.          | Subdivision: The subdivision/lot/block/unit numbers can be found on the Collier County Property Appraiser   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
|               | website: http://www.collierappraiser.com, when applicable.  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.10.         |   |  |                     |                       |                              |                         |            | SDP) (including |  |  |  |  |
|               | SDPA, SDPI, SIP, SIPI) are required for all commercial building permit applications. Approved SDPs can be obtained by contacting the  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
|               | Collier County Records Room at GMDRecordsRoom@colliergov.net. For building permits submitted prior to SDP approval, please note in  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
|               | B.10: "SDP not submitted." If a SDP is under review, please note on B.10: "SDP under review" and provide the PL#. Please see the Building   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
|               | Division and Inspection Division Bulletin #9 regarding the process and correction submittal fees.   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.11.         |   |  |                     |                       |                              |                         |            | olicants may    |  |  |  |  |
|               |   | identify the PL# Filename in lieu of providing physical files.   |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.12.         |   |  |                     |                       |                              |                         |            | ner Builder     |  |  |  |  |
| - 40          | applicants must state "SELF."   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.13.         |   | ame of contractor's company performing the construction work. Owner Builder must state "SELF."   |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.14.         | Qualifer Name: Provide the name of the qualifier. Owner Builder must state "SELF."  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| 3.15.         | Contractor Contact Inforamtion: Name of the contractor's contact, if different than above. Owner Builder must state "SELF."   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| B.16.         | Contractor Address: Address of the contractor or Owner Builder (if different than B.6).   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| B.17.         | Contractor Phone: Phone number of the contractor or Owner Builder (if different than B.8).  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| B.18.         | Contractor Fax: Fax number of Contractor or Owner Builder.  Contractor Email: Email(s) of the Contractor or Owner Builder. Check the box if email should NOT be the primary method of contact.      |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| B.19.         |   |  | r Owner Bu          | ullder. Chec          | k the box if email should    | NOT be the prim         | ary method | or contact.     |  |  |  |  |
|               | tions for Section C. Appli  |  |                     | a tala sita           |                              | WINE AND A TOTAL SENSE  |            | SEED THE LOCAL  |  |  |  |  |
| C.1.<br>C.2.  |   | actors that will conduct   |                     | e job site.           |                              |                         |            |                 |  |  |  |  |
|               | Aluminum Structure  | e from the following list<br>Cell Tower  | Fence               | Mos                   | hanical                      | Pool                    |            | Solar           |  |  |  |  |
|               | Awnings   | Construction Trailer   | Garage              |                       | nanical<br>pile Home/Trailer | Pool Roof               |            | Water Feature   |  |  |  |  |
|               | Building*   | Demolition   | Gas                 |                       | e/Sales Trailer              | Shutters/Doors/Windows  |            | Water reature   |  |  |  |  |
|               | Carport/Shed  | Electrical Marine  |                     |                       |                              | Sign/Flagpole           |            |                 |  |  |  |  |
|               | Carport/Shed   Electrical   Marine   Plumbing   Sign/Flagpole    *Building Permit Type includes: New Construction, Alteration, Chickee/Tiki Hut, Dumpster Endosure, Pergola, Tenant Build-out, etc. |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| C 2           | Identify the Fire Permit Type from the following list:  |  |                     |                       |                              |                         |            |                 |  |  |  |  |
| C.3.          |   |  |                     | lood                  |                              | Spray Booths            | Undorse    | nund Eiro Lines |  |  |  |  |
|               | Clean Agent System Fire Alarm Monitoring  | Fire Pumps Fire Sprinkler System   |                     | lood<br>P.Gas (for co | mmercial permits only)       | Spray Booths Standpipes | Undergre   | ound Fire Lines |  |  |  |  |
|               |   |  |                     |                       |                              |                         |            |                 |  |  |  |  |
|               | Fire Alarms   | Fossil Fuel Storage S  | Suppression Systems | Tents                 |                              |                         |            |                 |  |  |  |  |

Instructions continued on next page



Revised Date: 8/10/17 Version 1.0

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| C.4.       | <b>Construction Type:</b> Identify the Construction Type from the following list: <i>Construction Types are established in Chapter 6 of the Florida Building Code.</i>   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|------------|--|--|--|--|--|--|---------------------------------|----------------------------|------------------------------------|-----------------|--|
|            | Type IA  |  |  | our) Type IV   |  |  |                                 | Type VB (Un                | protected)                         |                 |  |
|            | Type IB  |  | nprotected)  | Type IIIB (Unp   |  |  | A (1 hour)                      |                            |                                    |                 |  |
| 25.        | Occupancy Type: lo   | -  | *******************************                    |  |  |  |                                 | hed in Ch                  | apter 3 of th                      | e Florida       |  |
|            | Building Code.   | •  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Amusement Parks, S   | stadium,   | Chickee - N  | Ion Residential  | High Haza  | High Hazard, Explosives  |                                 |                            | Residential, 1 & 2 Family New or   |                 |  |
|            | Bleachers  |  |  |  |  |  |                                 | Guest House                |                                    |                 |  |
|            | Assembly, Church   |  | Chickee – Residential                              |  | HPM  |  |                                 | Special Purpose Industrial |                                    |                 |  |
|            | Assembly, Arenas   |  | Day Care   |  | Institutional, Incapacitated                             |  |                                 | Storage, Low Hazard        |                                    |                 |  |
|            | Assembly, Nightclubs   |  | Factory-Industrial (Low                            |  | Institutional, Supervised                                |  |                                 | Utility, miscellaneous-    |                                    |                 |  |
|            |  |  | Hazard)  |  |  | Environment  |                                 |                            | Commercial & M/F                   |                 |  |
|            | Assembly, Restaura   | nts, Bars,   | Factory-Industrial                                 |  | Mercantile   | Mercantile   |                                 |                            | Utility, miscellaneous-Residential |                 |  |
|            | Banquet Halls  |  | (Moderate Hazard)                                  |  |  |  |                                 |                            |                                    |                 |  |
|            | Assembly, Theaters, with Stage   |  | High-Hazard (H-2)                                  |  | Residential, Care/Assisted Living Facilities             |  |                                 |                            |                                    |                 |  |
|            | Assembly, Theaters, without  |  | High-Hazard (H-3)                                  |  | Residential, Hotels                                      |  |                                 |                            |                                    |                 |  |
|            | Stage  | Stage  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Business   |  | High-Haza  |  | Residential, Multi-Family                                |  |                                 |                            |                                    |                 |  |
| C.6.       | Water Service: Ide   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Well Ave Maria   | <u> </u>   |  | ity of Marco Island  |  |  | Collier County                  | Golde                      | en Gate City                       | Immokalee       |  |
| C.7.       | Sewer Service: Ide   | -  | THE RESERVE AND DESCRIPTION OF THE PERSON NAMED IN |  | -  |  |                                 |                            |                                    |                 |  |
|            |  | Septic Ave Maria Everglades City City of Marco Island  |  |  |  |  | of Naples   Collier County   Go |                            |                                    | Immokalee       |  |
| 28.        | Fire Sprinkled: Ider   | TAXABLE PARTY OF THE PARTY OF T | -  |  | NAME OF TAXABLE PARTY OF TAXABLE PARTY OF TAXABLE PARTY. |  | 7.7.7                           |                            |                                    |                 |  |
| C.9.       | Permit by Affidavit  |  |  | THE RESERVE THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN COLUMN TWO I |  | THE RESERVE AND ADDRESS OF THE PARTY OF THE  |                                 |                            |                                    |                 |  |
| C.10.      | Private Provider: k  |  |  |  | THE RESERVE OF THE PERSON NAMED IN COLUMN TWO            | ACTUAL PROPERTY AND ADDRESS OF THE PARTY AND A |                                 |                            |                                    |                 |  |
| C.11.      | Threshold Building: Identify whether the structure is a threshold building, as defined by FBC Ch. 2 and F.S. 553.71(12): Yes or No   |  |  |  |  |  |                                 |                            |                                    |                 |  |
| C.12.      | Vegetation Clearing: Identify whether clearing of vegetation will take place: Yes. Clearing will take place on site, or No. Clearing will not take   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | place on site.   |  |  |  |  |  |                                 |                            |                                    |                 |  |
| -          | ions for Section D. Project Information  |  |  |  |  |  |                                 |                            |                                    |                 |  |
| D.1.       | Description of Work: The Description of Work must convey a detailed account of the work identified on the construction plans. For a multi-   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | story project, identify the floor/story where construction work will take place. In addition, for permit applications addressing a Cod   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Enforcement violation, please include the case number. Do NOT state "Please see attached plans." The description of work must be included as the control of  |  |  |  |  |  |                                 |                            |                                    |                 |  |
| <b>D</b> 2 | be included on the approved Permit. For A/C installations, provide tonnage.  Commercial Project Name: Identify the Commercial Project Name, If any.  |  |  |  |  |  |                                 |                            |                                    |                 |  |
| D.2.       |  | -  |  |  |  | \ \ \  | -1                              | Ala au Ala a               |                                    | OD the value    |  |
| D.3.       | Declared Value: Id   | -  |  |  |  |  |                                 |                            | contract val                       | ue OR the vail  |  |
| D 4        | established by the Items to Be Included, pg. 3 of the 50% Structural Improvement/Structural Damage Form.   |  |  |  |  |  |                                 |                            | - 1 0 2 Fermi                      |                 |  |
| D.4.       | 1 & 2 Family Dwelling/Townhouse Sq. Ft.: This series of tables are to be filled out by applicants applying for a 1 & 2 Family Dwelling/Townhouse building permit. For alterations or additions, the work area is considered the square footage only where the  |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | construction will occur, not the total area of the structure.  |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Follow the instructions in Table D.4 and fill out the D.4 table series, based on the type of work proposed. For example, an applicant seeking  |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | to construct a NEW single family dwelling unit must complete tables D.4.a New Construction and D.4.b Work Area (Sq. Ft.). All 1 & 2 Family   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Dwelling/Townhouse applicants must fill out D.4.d Totals by Area, i.e. Total Living: D.4.b.i + D.4.c.i and Total Non-living: D.4.b.ii + D.4.c.i  |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | See the Note below for condominium buildings.  |  |  |  |  |  |                                 |                            |                                    |                 |  |
| D.5.       | Commercial Sq. Ft: This series of tables are to be filled out by applicants applying for a commercial building permit. For alterations of tables are to be filled out by applicants applying for a commercial building permit.   |  |  |  |  |  |                                 |                            |                                    |                 |  |
| <b>₩,₩</b> | additions, the work area is considered the square footage only where the construction will occur, not the total area of the structure.   |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | Follow the instructions in Table D.5 and fill out the D.5 table series, based on the type of work proposed. For example, an applicant seeking  |  |  |  |  |  |                                 |                            |                                    |                 |  |
|            | an alteration to a commercial building must complete D.5.c. Work Area.   |  |  |  |  |  |                                 |                            |                                    |                 |  |
| Note:      | The second secon |  |  | The state of the s |  | building i   | unit. fill out D.4.             | For con-                   | struction wo                       | rk in a lobby ( |  |
|            | Condominimums: For construction work in a residential condominium building unit, fill out D.4. For construction work in a lobby (or communal space) in a condominium building, fill out D.5.   |  |  |  |  |  |                                 |                            |                                    |                 |  |



## **BUILDING PERMIT APPLICATION**

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Directions: Applicants must complete all fields. Please follow the Building Permit Application Instructions to complete this Application.

| Section A. Permit Number  |  |   |           |   |   |   |                                   |  |                   |            |              |  |  |
|---|--|---|-----------|---|---|---|-----------------------------------|--|-------------------|------------|--------------|--|--|
| A.1. Permit # (staff to provide):   |  |   |           |   |   |   |                                   |  |                   |            |              |  |  |
| Section B. General Per  | mit Informa  | tion                                      |           |   |   |   |                                   |  |                   | ALT OF     |              |  |  |
| B.1. Primary Permit # @a  | ту):   |   |           |   | B.2. Ma   | aster Perr  | mit#(ifar                         | ny):   |                   |            |              |  |  |
| B.3. Building Type:   | $\bigcirc$ 18  | & 2 Family dwelling/Tow                   | O Mobi    | obile/Manufactured home Residential 3+ un                         |   |   |                                   |  | amily             | Commercial |              |  |  |
| B.4. Permittee Type:  | C  | Contractor                                |           |   |   | Professio   | onal                              | Owner Builder  |                   |            |              |  |  |
| Property Information B.5. Parcel/Folio #: B.6. Job Street Address:  | 49660084   |   |           | Contractor Information<br>B.12. License #:<br>B.13. Company Name: |   |   | CGC1504629<br>Stultz Inc.         |  |                   |            |              |  |  |
| b.o. Job Street Address.  | 8909 Immok   | alee Blvd                                 |           |   |   |   |                                   | Jeff Stultz  |                   |            |              |  |  |
| B.7. Owner Name:  | Phone:   |   |           | ent   | B.14. Qualifier Name:<br>B.15. Contact Name:<br>B.16. Company Address:  |   |                                   | Jeff Stultz  5276 Summerlin Commons Way Suite 701, Ft. Myers, FL 33907 |                   |            |              |  |  |
| B.8. Owner Phone: B.9. Subdivision:   |  |   |           | eplat   |   |   |                                   |  |                   |            |              |  |  |
| Lot/Block/Unit:   |  |   |           |   | B.17. Company Phone:  |   |                                   | 239.590.3033   |                   |            |              |  |  |
| B.10. SDP/PL#:  | IO. SDP/PL#: PL20160003383   |   |           |   |   | B.18. Fax #:  |                                   |  | 239.590.3063      |            |              |  |  |
| B.11. *PL# Filename:  | 3.11. PL# Filename:  |   |           |   |   |   |                                   | jeff.stultz(   | z@stultzinc.com   |            |              |  |  |
| *Optional – Search existing F   | *Optional – Search existing Filenames on <u>CityView Portal</u> .  B.19.b. **Email 2:  **Do not use Email(s) as primary contact method.  |   |           |   |   |   |                                   |  |                   |            |              |  |  |
| Section C. Application  | Information  |   |           |   | -   | 1955  |                                   |  | SELVEN            |            | All the same |  |  |
| C.1. Subcontractors: C.2. Permit Type: C.3. Fire Permit Type: C.4. Construction Type: C.5. Occupancy: C.6. Water Service: C.7. Sewer Service: |  | ⊐PLUMB □ MEC                              | ЭН Б      | Roof  | C.8. Fire Sp<br>C.9. Permit<br>C.10. Priva<br>C.11. Thres<br>C.12. Vege | t by Affida<br>te Provide<br>shold Buil<br>tation Cle | avit:<br>er:<br>Iding:<br>earing: | □ Shutter  |                   |            |              |  |  |
| D.1. Description of Work  | The state of the s | D.2. Project Name                         | (if any): | Prof  | essional R  | esource   | e Dev                             | D.3. Dec   | lared Value       | : \$40     | 0,000        |  |  |
| New construction of a   |  | -   |           | building.   |   |   |                                   |  |                   |            |              |  |  |
| D.4. Residential Sq. Ft.<br>New Const. (Complete D.4.a  | . & D.4.b.)  | D.4.a. New Const.<br># Stories:           |           | D.4.b. W<br>D.4.b.i. Liv  | /ork Area (Sc<br>ing:   | ı. Ft.)   | <b>D.4.c.</b><br>D.4.c.i.         | Work Area(<br>Living:  | (Sq. Ft.)         | D.4.d.     | -            |  |  |
| Addition (Complete D.4.a. & L<br>Alteration (Complete D.4.c.)   | 0.4.b.)  | # Units:<br># Bedrooms:<br># Bathrooms:   |           | D.4.b.ii. No<br>TOTAL:  | on-living:  | 0   | D.4.c.ii.<br><b>TOTA</b>          | Non-living:  | 0                 | TOTAL      | Non-living:  |  |  |
| D.5. Commercial Sq. For New Const. (Complete D.5.a Addition (Complete D.5.a & Alteration (Complete D.5.c.)                                    | . & D.5.b)   | D.5.a. New Const.<br>#Stories:<br>#Units: | 1 2       | D.5.b. W<br>Interior:<br>Exterior<br>TOTAL:                       |   | 5,680<br>5,680  | D.5.c<br>Interi<br>Exter          | ior:   | 5q. Ft.)<br>5,680 |            |              |  |  |
| Section E. Staff Section<br>E.1. Final Review Date:   | n  | E.2. Numl                                 | her of P  |   | ME PARTY  |   | eview Da                          |  | VT 1              | 5 1        | 10 15        |  |  |

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#### NOTICE OF COLLIER COUNTY ADDITIONAL REGULATIONS

**NOTICE OF ADDITIONAL RESTRICTIONS:** 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 entities such as the Water Management District, State agencies, or Federal agencies.

WARNING OF POSSIBLE DEED RESTRICTIONS: The land subject to this permit may be subject to deed, and other restrictions that may limit or impair the landowner's rights. Collier County is not responsible for the enforcement of these restrictions, nor are Collier County employees authorized to provide legal or business advice to the public relative to these restrictions. The landowner or any applicant acting on behalf of the landowner is cautioned to seek professional advice.

WARNING OF WORK IN THE COUNTY RIGHT-OF-WAYS: This permit does not authorize construction or installation of any structure or utility, above or below ground, within any right of way or easement reserved for access, drainage or utility purposes. This restriction specifically prohibits fencing, sprinkler systems, landscaping other than sod, signs, water, sewer, cable and drainage work therein. If such improvements are necessary, a separate permit for that purpose must be obtained from the Growth Management Department.

**NOTICE OF CLEARING RESTRICTIONS:** The issuance of a building permit for a single-family dwelling allows up to one (1) acre of native vegetation to be cleared. Clearing more than one (1) acre may be allowed for accessory structures and requires a separate Vegetation Removal Permit. Properties located in the following zoning district overlays may **not** be allowed to clear one (1) acre: Rural Fringe Mixed Use District (RFMU), Big Cypress Area of Concern (ACSC), and Special Treatment Overlay (ST). There may be additional restrictions related to clearing native vegetation and impacts to wetlands or protected species found on the property. State and Federal agency permits may be required. Contact the Growth Management Department's Environmental Services at (239) 252-2400 for additional information. Issuance of a Demolition Permit for a structure does not authorize removal of vegetation beyond the footprint of the structure. A Demo Permit is not a clearing permit.

By initializing, I am acknowledging that I have read and understand this Notice of Collier County Additional Regulations.

Initials

Owner, or Agent of Owner, or Contractor's initials are required.



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#### **ACKNOWLEDGEMENT OF COLLIER COUNTY REGULATIONS**

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 in this jurisdiction. The permit or application fee may have additional fees imposed for failing to obtain permits prior to commencement of construction.

The approved permit and/or permit application expires if not commenced within 180 days from the date of issuance. The permittee further understands that only licensed contractors may be employed and that the structure will not be used or occupied until a certificate of occupancy is issued. By signing this permit application, I agree that I have been retained by the owner/permittee to provide contracting services for the trade for which I am listed. Furthermore, it is my responsibility to notify the Building Plan Review and Inspection Division should I no longer be the contractor responsible for providing said contracting services. I further agree that I understand that the review and issuing of this permit does not exempt me from complying with all County Codes and Ordinances. It is further understood that the property owner/permittee is the owner of the parmit,

| Sign: Ason benine   | Sign:  |  |  |  |  |  |  |  |
|---|--|--|--|--|--|--|--|--|
| Owner of Agent of Owner   | Contractor   |  |  |  |  |  |  |  |
| State of THINOIS, in the County of EFFINGHAM  | State of Florida, in the County of                             |  |  |  |  |  |  |  |
| The foregoing instrument was acknowledged before me this  | The foregoing instrument was acknowledged before me this       |  |  |  |  |  |  |  |
| 26th day of October, 20 17 by   | a & day of October, 2017 by                                    |  |  |  |  |  |  |  |
| Jason Benline   | Jeffry Stultz  |  |  |  |  |  |  |  |
| (name of person) who is personally known to me or who has   | (name of person) who is personally known to me or who has      |  |  |  |  |  |  |  |
| produced personally known (type   | produced   |  |  |  |  |  |  |  |
| of identification) as identification.   | of identification) as identification.                          |  |  |  |  |  |  |  |
| Notary Signature:  Notary (Seal)  B J WEBER  OFFICIAL SEAL  Notary Public, State of Illinois  My Commission Expires  March 02, 2019 | Notary Signature:  Notary (Seal)  Notary (Seal)  Notary (Seal) |  |  |  |  |  |  |  |
| For change of contractor, please provide the following: Permit N  | lumber: #GG 100636   |  |  |  |  |  |  |  |
| mail:Phone:   |  |  |  |  |  |  |  |  |
| NOTICE OF COMMENCEMENT INFORMATION  |  |  |  |  |  |  |  |  |

Per Florida Statutes 713.135 a Notice of Commencement (NOC) is required for construction of improvements totaling flore than \$2,500, with certain exceptions. For A/C Repairs or Replacements a notice of commencement is required for improvements more than or equal to \$7,500. The applicant shall file with the issuing authority prior to the first inspection either a certified copy of the recorded NOC or a notarized statement that the NOC has been filed for recording, along with a copy thereof. In order to comply with the state requirement, permits will be placed in inspection hold until proof of the NOC is filed with the building permitting and inspection department. The issuing authority shall not perform or approve subsequent inspections until the applicant files by mail, facsimile, hand delivery, email or any other means such as certified copy with the issuing authority.

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. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.