



Please read this in full; if you have additional questions after reading, please call 904-297-7050 or email building@greencovesprings.com.

You **must** own the property and the improvements must be for your own use and occupancy. The property cannot be up for sale, lease, rent, or be entirely vacant. The property cannot be up for sale, lease or rent for an entire year after construction.

Question	Answer
What documents do I need to bring?	<p>It depends on the type of permit you're applying for, but in general, you may need:</p> <ol style="list-style-type: none"> 1. Warranty deed or other proof of ownership 2. 2 sets of construction plans, if applicable 3. A survey of your property showing setbacks, existing structures, new structures, and the distance from new structures to the property lines, if applicable 4. Form of government issued ID 5. Information from the manufacturer about the product, e.g. Florida product approvals, windloads, et cetera, if applicable <p>Please refer to the appropriate permit checklist for your exact needs.</p>
What information will I need for the permitting forms?	<ol style="list-style-type: none"> 1. Job Site Address 2. Job Cost 3. Work description / scope of work <p>Please refer to the following example forms to understand what you need to fill out <i>minimally</i> to complete the applications.</p>
What happens after I submit the application?	<p>Again, this depends on the permit type; in general, your permit application may follow these steps:</p> <ol style="list-style-type: none"> 1. <i>Complete</i> application is logged in the City's permitting software by the Building Assistant. 2. Land Development Regulations compliance review by the Planning & Zoning Director 3. Building Code compliance review by the Building Official 4. If both compliance reviews are approved, the Building Assistant will notify you via e-mail with a payment request. 5. Payment is made (in-person or remotely). 6. The permit is issued, and you are provided with a copy of the permit and a "job copy" of your plans to have on-site. If the job cost exceeds \$2,500, you will need to get a Notice of Commencement recorded at the Recording Office inside the courthouse; a copy of the recorded NOC must be provided to the Building Assistant (in-person or via e-mail) prior to the first inspection. 7. You do the work as described in the application / plans; once complete or as required throughout the work, you schedule inspections with the Building Assistant. We inspect Monday through Thursday, and we schedule next day inspections. Call 904-297-7050 or e-mail building@greencovesprings.com with the type of inspection needed and your permit number. 8. Upon completion of a final inspection, your project can be issued a Certificate of Completion or Certificate of Occupancy as appropriate.



EXAMPLE DOCUMENT - PLEASE UTILIZE AS
A RESOURCE WHEN COMPLETING YOUR
OWN PERMIT APPLICATION

CITY OF GREEN COVE SPRINGS
BUILDING PERMIT APPLICATION

COMPLETE ALL
HIGHLIGHTED LINES

Application must be typed or printed legibly in ink. Complete all relevant fields

OFFICIAL USE ONLY		DATE ISSUED ____ / ____ / ____	LDR APPROVAL _____	PERMIT # _____
PROJECT IDENTIFICATION		FINAL APPROVAL	TOTAL PERMIT FEE \$	
PROJECT NAME _____		NAME _____		
PROJECT CONTACT _____		MAILING ADDRESS _____		
PROJECT CONTACT PHONE (_____) _____		OWNER CONTACT PHONE (_____) _____		
PROJECT CONTACT PHONE (_____) _____		OWNER E-MAIL ADDRESS _____		
BUILDING PERMIT ADDRESS (This is the physical address of the actual work location.)				
ADDRESS _____		LOT NO. _____	BLOCK _____	
PARCEL # _____		SUBDIVISION _____		
LICENSED CONTRACTOR				
COMPANY NAME _____		FLORIDA DESIGN PROFESSIONAL		
LICENSE NAME _____		COMPANY NAME _____		
LICENSE NUMBER _____		LICENSE NUMBER _____		
ADDRESS _____		ADDRESS _____		
PHONE _____	FAX _____	PHONE _____	FAX _____	
E-MAIL ADDRESS _____		E-MAIL ADDRESS _____		
FEES SIMPLE TITLEHOLDER (IF OTHER THAN OWNER)		BONDING COMPANY	MORTGAGE LENDER	
NAME _____		NAME _____	NAME _____	
ADDRESS _____		ADDRESS _____	ADDRESS _____	
SETBACKS	JOB COST	Square Footage of Improvements		
Front _____	\$ _____	Heated/Cooled _____ S.F.	BRIEF DESCRIPTION OF WORK	
Rear _____		Total Under Roof _____ S.F.		
Side _____			Construction Type _____	

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. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AND AIR CONDITIONERS, etc.

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. I will not occupy or use the referenced building, or any part thereof, until all inspections are finalized and prior to obtaining a certificate of occupancy or completion issued by the building official, as required by law.

WARNING TO OWNER—YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.

OWNER or AGENT (If Agent, Power of Attorney or Agency Letter Required)		CONTRACTOR (Qualifier only)	
Signed: _____ Date: _____		Signed: _____ Date: _____	
Before me this _____ day of _____ 20_____ in the County of Clay, State of Florida, has personally appeared		Before me this _____ day of _____ 20_____ in the County of Clay, State of Florida, has personally appeared	
herein by himself/herself and affirms all statements and declarations herein are true and accurate.		herein by himself/herself and affirms all statements and declarations herein are true and accurate.	
Notary Public at Large		Notary Public at Large	
State of Florida, County of Clay		State of Florida, County of Clay	
Personally Known or Produced Identification		Personally Known or Produced Identification	
ID Type _____		ID Type _____	

Your signature **MUST** be
notarized; staff can provide
this service, but you **MUST**
sign the document in front of
staff and provide a
government-issued ID.



**EXAMPLE DOCUMENT -
PLEASE UTILIZE AS A
RESOURCE WHEN
COMPLETING YOUR
OWN PERMIT
APPLICATION**

FOR OFFICE USE ONLY

Approved Denied Approval with conditions below

Amount Paid: _____ Receipt #: _____

Development Services Director: _____

City of Green Cove Springs

Application for Certificate of Land Development Regulations (LDR) Compliance

You must have all information for your application to be considered complete. Incomplete applications will not be accepted.

A. PROCESS:

1. Zoning Approval (Certificate of LDR Compliance).
2. Building Department Approval (Building Permit, Change of Use Permit, Change of Occupancy, and/or Local Business Tax License, as required for type of development activity).
3. Pay Local Business Tax License Fee, if applicable.

B. PERMIT/LICENSE TYPE (CHECK ALL THAT APPLY):

<input type="checkbox"/> Local Business Tax	<input type="checkbox"/> Commercial New	<input type="checkbox"/> Residential New
<input type="checkbox"/> Commercial Addition/Remodel	<input type="checkbox"/> Residential Addition/Remodel	<input type="checkbox"/> Fence
<input type="checkbox"/> Pool/Spa Install	<input type="checkbox"/> Garage	<input type="checkbox"/> Screen Enclosure
<input type="checkbox"/> Storage Shed	<input type="checkbox"/> Sign	<input type="checkbox"/> Other: _____

Check the box which applies

C. PROJECT:

1. Project/Business Name (if applicable): _____
2. Current Occupant: _____
3. Address of Subject Property: _____
4. Parcel ID Number(s): _____
5. Subdivision: Unit: Block: Lot: _____
6. Existing Use of Property: _____
7. Proposed Use of Property: _____
8. Type of Construction Proposed: _____
9. Number of Existing Structures on the Property: _____
10. Number of Striped Parking Spaces on Site: _____
11. Gross Square Footage of Building, Pool, etc.: _____
12. Unit/Suite Square Footage: _____
13. Property Acreage: _____
14. Building Height (at peak): _____

D. APPLICANT

1. Name of Applicant(s) or Contact Person(s): _____ Title: _____
Company (if applicable): _____
- Mailing address: _____
- City: _____ State: _____ ZIP: _____
- Telephone: (904) _____ FAX: (904) _____ e-mail: _____

I/We certify and acknowledge that:

1. Prior to receiving a final certificate of occupancy I/We must comply with the current Florida Building Code through the Development Services Department and obtain any necessary permits.
2. I/We must comply with the requirements of the City of Green Cove Springs.
3. I/We must obtain a Local Business Tax License, if required.
4. I/We must meet parking standards and any use specific standards for the zoning district.
5. Falsifying information may result in the LDR Compliance Permit being revoked.

Signature of Applicant

Signature of Co-applicant

Typed or printed name and title of applicant

Typed or printed name of co-applicant

Date

Date

State of _____ County of _____

The foregoing application is made upon the City of Green Cove Springs, Florida, for a Building Permit for the construction of a dwelling unit. The applicant certifies that the information contained in this application is true and accurate to the best of the applicant's knowledge. The applicant further certifies that the applicant is the owner of the property or has the authority to act on behalf of the owner. The applicant agrees to comply with all applicable laws, codes, and regulations. The applicant agrees to pay all fees and costs associated with the issuance of the permit. The applicant agrees to provide any additional information or documentation requested by the City of Green Cove Springs. The applicant agrees to be bound by the terms and conditions of the permit issued by the City of Green Cove Springs.

NOTARY SEAL

Your signature MUST be notarized. Staff can provide this service, but you must sign the document in front of staff and provide your government-issued ID.

Office Use Only:

Review Date: _____

FLUM: _____

Zoning District: _____

Max. Lot Coverage: _____ Lot Coverage Proposed: _____

Max. Height Allowed: _____ Height of Structures Proposed: _____

Setbacks: F _____ R _____ SR _____ SL _____ Not Applicable: _____

of Parking Spaces Required: _____ # of Parking Provided: _____

Enclosed Garage: _____

Accessory Use Height: _____

Max. Fence Height Allowed: _____ Height of Fence Proposed: _____

Architectural Review Board Approval Required: Yes No If yes, Date of Approval: _____

Accessory Use: Yes No If yes, requirements met: _____

Previous Site Plan Approval: Yes No If yes, Date of Approval: _____

Home Occupation: Yes No If yes, Date of Approval: _____

Alcoholic Beverage License Required: Yes No Application been submitted? _____

FEMA Flood Zone: _____ BFE _____ FFE _____

Located in Wellfield Protection Zone: Yes No

Comments/Conditions of Approval: _____

**EXAMPLE DOCUMENT - PLEASE
UTILIZE AS A RESOURCE WHEN
COMPLETING YOUR OWN PERMIT**

NOTICE OF COMMENCEMENT

Permit Number: _____

The undersigned hereby gives notice that improvement(s) to the property located at _____, Florida Statutes, the following information is provided.

Minimally, complete the highlighted lines with the requested information. If you have a contractor, surety bond, or lender associated with the work, or would like to designate persons other than yourself who may be served/given Lienor's Notice, complete 4-8 as appropriate.

Florida, County of Clay

accordance with Chapter 713,

1. **Description of Property (Legal and street address):** _____
2. **General description of improvement:** _____
3. **Owner information:**
 - a. **Name and address:** _____
 - b. **Interest in property:** _____
 - c. **Name and address of fee simple titleholder (if other than Owner):** _____
4. Contractor's Name, address and Phone number: _____
5. Surety: Name, address, Phone: _____ Amount of Bond: \$ _____
6. Lender's Name, address and 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) Florida Statutes (Name, Address & Phone numbers): _____

8. a. In addition to himself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes. b. Phone Number of person or entity: _____

9. **Expiration date of notice of commencement (the expiration date is 1 year from date of recording unless a different date is specified):** _____

Only required to be completed if you would like to select a date which exceeds one year; if your Notice expires prior to the completion of construction, you WILL have to file a new notice.

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER DURING THE PERIOD OF NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS AND ARE PROHIBITED BY 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.

Date: _____

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

Notary Signature: _____ Seal: _____

Personally Known _____ or Produced ID _____

Type of Identification produced: _____

Verification pursuant to Section 92.525, Florida Statutes

Your signature **MUST** be notarized. Staff can provide this service, but you **MUST** sign the document in front of staff and provide your government-issued ID. After staff notarizes this document, it will be returned to you so you may get it recorded at the Clay County Courthouse.

You **MUST record a Notice of Commencement if the job cost exceeds \$2,500. A copy of the recorded NOC must be provided to the Building Assistant prior to the first inspection. It can be submitted via e-mail, building@greencovesprings.com, if desired.**



Owner - Builder Disclosure Statement

City of Green Cove Springs

Florida Statutes, Chapter 489, Part I, Section 489.103 (7)

YOUR NAME

1. I, **YOUR NAME**, understand that state law requires construction to be provided 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. Exemptions for Owner-Builder Permits in lieu of licensed contractor as stipulated in Florida Statutes 489.103 (7) **Initial.**
2. 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 have 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 permits and contracts and registered with the City of Green Cove Springs. **Initial.**
3. 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 (Rental Property). If a building or residence that I have built or substantially improved by myself is sold or leased within one (1) year after the construction is complete, the law will presume that I built to substantially improve it for sale or lease, which violates the exemption. **Initial.**
4. I understand that, as the Owner-Builder, I must provide direct, onsite supervision of the construction. **Initial.**
5. I understand that I may not hire an unlicensed 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 licenses required by law and by city ordinance. **Initial.**
6. I understand that it is frequent practices 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 employees while working on my property. My homeowner's insurance may not provide coverages for these 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. **Initial.**
7. 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. **Initial.**

8. 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-Builder as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations. **Initial.**

9. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service (IRS), the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Construction Industry Licensing Board at 850-487-1395 or www.myfloridalicense.com for more information about licensed contractors. **Initial.**

10. I am aware of, and consent to, Owner-Builder building permits applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address. **Initial.**

11. I agree to notify the City of Green Cove Springs Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. **Initial.**

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 and Department of Business and Professional Regulation 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 Worker's Compensation coverage.

The City of Green Cove Springs Building Department staff cannot instruct you on how to complete your project.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the Building Department. A copy of the property owner's driver's license, or other form of government issued verification, and the notarized signature of the property owner is required when the permit is issued. I hereby certify that I have read and examined this affidavit and know the same to be complete and correct.

Construction Address: _____

Signature of Owner/Applicant: _____ **Date:** _____

Printed Name: _____

Sworn to and subscribed before me this _____ day of _____ 20____

Personally known _____ or produced identification _____.

Type of identification produced _____

Signature of Notary: _____ **Date:** _____

Your signature **MUST** be notarized. Staff
can provide this service, but you **MUST**
sign the document in front of staff and
provide your government-issued ID.