

**LEVY COUNTY DEVELOPMENT DEPARTMENT**  
**PERMIT REQUIREMENTS CHECKLIST FOR POST & BEAM**  
**STRUCTURES**

THE FOLLOWING **MUST** BE PROVIDED AT THE TIME OF APPLICATION FOR BUILDING PERMITS (BY EITHER THE PROPERTY OWNER, OWNER'S AGENT, OR LICENSED CONTRACTOR) TO ENABLE THE BUILDING PERMIT APPLICATION TO BE ACCEPTED BY THE PERMIT CLERK.

1. **Proof of ownership of land :**

The applicant must provide a contract for deed, warranty deed, or tax statement, inclusive of a complete legal description or parcel identification number.

2. **Letter of Authorization:**

If applicant is not the owner of the property or a licensed contractor, the applicant must have a site specific, signed and notarized, letter of authorization giving the owner's agent permission to obtain the necessary building permits for the project.

3. **Application for Permit-** All property owners must sign application and have it notarized

4. **Notice of Commencement-** Must be recorded in Clerk's Office and a copy brought to our office before first inspection.

5. **3 copies of site plan.-** Site plan must be drawn to scale

6. **Zoning Approval within Municipalities (Inglis and Yankeetown)**

For property located within the boundary of a municipality, applicable evidence of municipal approval must be provided before the Levy County Development Department can process the permit application.

7. **2 Complete Sets of Plans and Supporting Construction Documents.**

All plans for new construction of steel structures must be engineered sealed plans

Plans must state the Design Wind Speed, and that the Design is in Compliance with the Latest Edition of the Florida Building Code.

Plans consisting of multiple pages must be bound in separate sets or they will not be accepted by the permitting staff.

**Notice:** Any Steel structure constructed on commercial, industrial, public or multi-family properties require professional design (plans must be signed and sealed by a Florida registered architect or engineer).

8. **Verification of Onsite Sewage Disposal system from the Department of Health:**

This is a necessary requirement anytime plumbing is involved in your project. You will be required to provide the Building Department with verification of the review of the waste water facilities by the Department of Health before your building permit may be issued. You must provide documentation of the Final approval by the Department of Health for any modifications to an existing system, or of the final inspection of a newly installed system that was required for the project, prior to final inspection of the structure.

9. **Owner Builder Affidavit:**

This affidavit is required by the same law that exempts property owners from the requirement to hold a valid contractor's license. If the property owner is going to do any portion of work (i.e.: construction, electrical, or plumbing ...) they are required to sign this document, stating they have read, understand and are accepting the same responsibilities contractor's bear for that portion of the work the owner builder permit covers. Some of these responsibilities include federal income tax, social security taxes, and worker's compensation insurance requirements for any employees.

**10. Disclaimers:**

This document provides written notice that: Levy County is not responsible for maintaining roads not currently in the maintenance system and Although Levy County has a flood prevention ordinance there are no assurances implied that compliance with the ordinance is a guarantee that you will never flood.

Also this notice states that the applicant, contractor or property owner must string at least two property lines to enable the building inspector to document compliance with setbacks shown on site plan on the first inspection; and the applicant, contractor or property owner is responsible for true and accurate property lines shown to the inspector.

**11. Contractor Disclosure Form**

**12. Product Approval Specification sheet:** need to have when apply for permit.

**THE FOLLOWING ARE ADDITIONAL REQUIREMENTS IF THE PROJECT IS LOCATED WITHING A FLOOD ZONE**

13. If your property is located in the regulatory flood way, or the 100 year flood plain adjacent to the Suwannee River, you will need to acquire an Environmental Resource Permit from the Suwannee River Water Management District prior to issuance of building permits.
14. Professional design (architect or engineer sealed) plans and a V-Zone Certificate are required if located in velocity zone (V-Zone) or coastal high hazard construction zone.
15. In the event there is any enclosure(s) an "Elevation Certificate" must be provided to the office within 21 days after finished floor is established and before vertical construction starts (A-Zone); or 21 days after the placement of the lowest horizontal structural member (V-Zone). Then one before final inspection.

(08/07/15 HD)

# CONTRACTOR DISCLOSURE FORM

The purpose of this form is to ensure compliance with Chapter 489 Florida Statutes.

The intent is to assure that all construction work or activities are done by licensed contractors or subcontractors, and that contractors and subcontractors are not working beyond the scope of their licenses.

Date: \_\_\_ / \_\_\_ / \_\_\_\_\_ Parcel I. D. Number: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Property Owner: \_\_\_\_\_  
Printed Name

Situs Address (Job Site): \_\_\_\_\_

## Contractor of Record:

\_\_\_\_\_  
Printed Name of Contractor or Owner/builder License Number of Owner/builder

Note: Owner/builders are required to complete Owner/builder affidavits.

Type of License: Registered / State Certified Classification: A B C  
(Circle one) (Circle one)

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## Subcontractors:

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

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

Heat, Vent and Air Conditioning \_\_\_\_\_

Fuel Gas Contractor: \_\_\_\_\_

Swimming Pool Contractor: \_\_\_\_\_

Subcontractor Contractor Other Above: \_\_\_\_\_

Discipline or Trade of Other Subcontractor : \_\_\_\_\_

## Chapter 489.113 (3) (b)

A General, Building or Residential Contractor shall not be required to subcontract the installation, or repair made under warranty, of wood shingles, wood shakes, or asphalt or fiberglass shingle roofing material on a new building of his or her own construction.

Type of Roof Covering To Be Used: \_\_\_\_\_

Roofing Contractor (When Required): \_\_\_\_\_

I do Hereby Affirm that the information provided herein is true to the best of my knowledge.

\_\_\_\_\_  
Contractor of Record or Owner/builder's Signature

**PRODUCT APPROVAL SPECIFICATION SHEET**

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and approval numbers on the building components listed below if they will be utilized on the construction project for which you are applying for a building permit. We recommend you contact your local product supplier should you not know the product approval number for any of the applicable listed products. Statewide approved products are listed online @

Category/Subcategory	Manufacturer	Product Description	Approved Number (s)
<b>1. EXTERIOR DOORS</b>			
a. SWINGING			
b. SLIDING			
c. SECTIONAL/ROLL UP			
d. OTHER			
<b>2. WINDOWS</b>			
a. SINGLE/DOUBLE HUNG			
b. HORIZONTAL SLIDER			
c. CASEMENT			
d. FIXED			
e. MULLION			
f. SKYLIGHTS			
g. OTHER			
<b>3. PANEL WALL</b>			
a. SIDING			
b. SOFFITS			
c. STOREFRONTS			
d. GLASS BLOCK			
e. OTHER			
<b>4. ROOFING PRODUCTS</b>			
a. ASPHALT SHINGLES			
b. NON-STRUCT METAL			
c. ROOFING TILES			
d. SINGLE PLY ROOF			
e. OTHER			
<b>5. STRUCT COMPONENTS</b>			
a. WOOD CONNECTORS			
b. WOOD ANCHORS			
c. TRUSS PLATES			
d. INSULATION FORMS			
e. LINTELS			
f. OTHERS			
<b>6. NEW EXTERIOR</b>			
a. ENVELOPE PRODUCTS			

The products listed below did not demonstrate product approval at plan review. I understand that at the time of inspection of these products, the following information must be available to the inspector on the job site: 1) copy of the product approval, 2) performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturers installation requirements. Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

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\_\_\_\_\_  
 APPLICANT SIGNATURE

\_\_\_\_\_  
 DATE

**LEVY COUNTY DEVELOPMENT DEPARTMENT**

**APPLICATION FOR PERMIT**

**P.O. BOX 672, BRONSON, FL. 32621 352-486-5198, 352-486-5200, 352-486-5202**

TAX FOLIO NO: (PARCEL#)	DATE:
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OWNERS NAME	OWNERS ADDRESS _____
	City _____

PHONE #	State _____ Zip _____
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CONTRACTOR'S/INSTALLER'S NAME (NOT BUSINESS NAME)	CONTRACTOR'S ADDRESS _____
	CITY _____

PHONE #	STATE _____ ZIP _____
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JOB NAME	JOB ADDRESS _____
	CITY _____ COUNTY - LEVY _____

LEGAL DESCRIPTION

SUBDIVISION \_\_\_\_\_ LOT \_\_\_\_\_ BLK \_\_\_\_\_  
 UNIT \_\_\_\_\_ PHASE \_\_\_\_\_ SECTION \_\_\_\_\_ TOWNSHIP \_\_\_\_\_ RANGE \_\_\_\_\_

TYPE OF CONSTRUCTION: RESIDENCE \_\_\_\_\_ NEW MOBILE HOME \_\_\_\_\_ USED MOBILE HOME \_\_\_\_\_  
 ADDITION \_\_\_\_\_ POOL \_\_\_\_\_ REMODEL/REPAIR \_\_\_\_\_ DEMO \_\_\_\_\_ PREINSPECTION \_\_\_\_\_  
 OTHER \_\_\_\_\_

DRIVING DIRECTIONS TO JOB SITE:

TOTAL COST OF IMPROVEMENTS \_\_\_\_\_ TOTAL SQ FT. \_\_\_\_\_  
 TOTAL LAND AREA \_\_\_\_\_ NUMBER OF STORIES \_\_\_\_\_ WALL TYPE \_\_\_\_\_  
 NUMBER OF BATHROOMS-FULL \_\_\_\_\_ PARTIAL \_\_\_\_\_ SQ FT HEATED \_\_\_\_\_ UNHEATED \_\_\_\_\_

<p><b>For Office Use Only</b></p> ZONING: _____ SEPTIC PERMIT # _____ FLOOD ZONE: _____ ELEVATION _____ MIN. FINISH FLOOR ELVATION _____	<p><b>For Office Use Only</b></p> PERMIT FEE _____
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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.

**WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY 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 of Owner

\_\_\_\_\_  
Signature of Owner

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

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

\_\_\_\_\_

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

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

(SEAL)

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

\_\_\_\_\_  
Signature of Contractor/ Installer

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

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

\_\_\_\_\_

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

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

(SEAL)

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

County Competency Card # \_\_\_\_\_

Contractor's State Certification No. \_\_\_\_\_ or Registration No. \_\_\_\_\_

Installer's State License # \_\_\_\_\_

(OFFICE USE ONLY)

Application Approved by	_____	_____
	Permit Officer	Date
Zoning Approved By :	_____	_____
	Building Official or Zoning Signature	Date
Zoning Denied By:	_____	_____
	Building Official or Zoning Signature	Date
Plans Reviewed By:	_____	_____
	Plans Examiner Signature	Date

# LEVY COUNTY RESIDENTIAL SITE PLAN

Levy County Development Department  
P.O. Box 672, Bronson, Fl. 32621 (352) 486-5198

Clerk \_\_\_\_\_

Date \_\_\_\_\_

## Property Owner Information:

Name: \_\_\_\_\_ Parcel I.D.# \_\_\_\_\_  
Subdivision: \_\_\_\_\_ Unit \_\_\_\_\_ Phase \_\_\_\_\_ Lot(s) \_\_\_\_\_ Block \_\_\_\_\_  
Section \_\_\_\_\_ Township \_\_\_\_\_ Range \_\_\_\_\_ 911 Address \_\_\_\_\_

## The following items must be on Site Plan to be complete:

1. Show symmetrical shape and dimensions of property. **Site Plan must be drawn to scale.**
2. Show and identify all existing and proposed buildings.
3. Show dimensions of all existing and proposed buildings and distances of all existing and proposed buildings to all property lines.
4. Show all streets and easements abutting property.
5. Indicate, with a dashed line, any water or depressions.
6. Indicate North direction with arrow. North should be at top of site plan page.
7. Identify all contiguous public owned lands and other natural reservations.
8. Identify proposed driveway.

## REQUIRED SETBACKS

**NOTE: Setback for parcels contiguous to Natural Reservations – Minimum 100 ft.**

### R-Residential – Zoning

Front 25 ft.  
Sides 10 ft.  
Rear 25 ft.

### RR – Rural Residential – Zoning

Front 50 ft.  
Sides 10 ft.  
Rear 50 ft.

### A/RR – Agriculture/Rural Residential

Front 50 ft.  
Sides 10 ft.  
Rear 50 ft.

### F/RR – Forestry/Rural Residential

Front 50 ft.  
Sides 10 ft.  
Rear 75 ft.

### Accessory Structures

Sides 10 ft.  
Rear 10 ft.

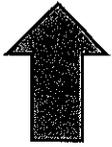
Front – same as current zoning/land use designation.

**Notice: Side street and corner lot  
same setback as front.**

### Zoning Officer:

This Building Site: IS \_\_\_\_\_ IS NOT \_\_\_\_\_ within a flood prone area

Community/Panel No. \_\_\_\_\_ Flood Zone \_\_\_\_\_ Elevation \_\_\_\_\_ Finished Floor \_\_\_\_\_



North

I certify that I am the owner of the property, that the information provided on these forms and this Site Plan (or attached Site Plan) and other exhibits is accurate, and that I am aware of my responsibilities under the Levy County Code of Ordinances.

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Signature of Property Owner

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Date



# NOTICE OF COMMENCEMENT

This Instrument Prepared By:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_  
Permit No: \_\_\_\_\_  
Tax Folio No: \_\_\_\_\_  
STATE OF: \_\_\_\_\_  
COUNTY OF: \_\_\_\_\_

THE UNDERSIGNED HEREBY gives notice that improvement(s) 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.

1. DESCRIPTION OF PROPERTY: Street Address: \_\_\_\_\_  
Legal Description: \_\_\_\_\_

2. GENERAL DESCRIPTION OF IMPROVEMENT(S): \_\_\_\_\_  
\_\_\_\_\_

3. OWNER INFORMATION: a.) Name: \_\_\_\_\_ Address: \_\_\_\_\_  
b.) Interest in Property: \_\_\_\_\_  
c.) Fee Simple Titleholder (if other than owner) Name: \_\_\_\_\_ Address: \_\_\_\_\_

4. CONTRACTOR: a.) Name: \_\_\_\_\_ Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

5. SURETY: a.) Name: \_\_\_\_\_ Address: \_\_\_\_\_  
b.) Amount of bond \$: \_\_\_\_\_ c.) Phone: \_\_\_\_\_

6. LENDER: a.) Name: \_\_\_\_\_ Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

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:

a.) Name: \_\_\_\_\_ Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

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

a.) Name: \_\_\_\_\_ Address: \_\_\_\_\_ b.) Phone: \_\_\_\_\_

9. Expiration date of notice of commencement (the expiration date is one (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 of Owner or Owner's Authorized Officer/Director  
Partner/Manager

\_\_\_\_\_  
Signatory's Title/ Office

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_ (year)  
by \_\_\_\_\_ (name of person) as \_\_\_\_\_ (type of authority, e.g. officer,  
trustee, attorney in fact) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).

\_\_\_\_\_  
Signature of Notary Public - State of Florida  
Print, Type, or Stamp Commissioned Name of Notary Public  
Commission Number: \_\_\_\_\_  
Personally Known \_\_\_ or Produced Identification \_\_\_\_\_

### 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 of Natural Person Signing Above



**LEVY COUNTY DEVELOPMENT DEPARTMENT**

**OWNER/BUILDER AFFIDAVIT**

**EXEMPTION FOR ELECTRICAL LICENSING**

**DISCLOSURE STATEMENT FS 489.503 (6) PART II,  
F.S.**

**State law** requires electrical contracting to be done by **licensed** electrical contractors. You have applied for a permit under an **exemption** to that law. The exemption allows you, as the owner of your property, to act as your own electrical contractor even though you do not have a license. You may install electrical wiring for a farm out building or a single-family or duplex residence. You may install electrical wiring in a commercial building where the aggregate construction cost of which is under \$25,000. The home or building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease more than one building you have wired yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an un-licensed person as your electrical contractor. Your construction shall be done according to building codes and zoning regulations. It is your responsibility to make sure that people employed by you have licenses required by state law **and** by county or municipal licensing ordinances.

I acknowledge that as an owner/builder, I \_\_\_\_\_ am  
Printed Name, First Name First

responsible to actually physically do the work for which I have requested the electrical permit. I understand that if I am not physically doing the work or physically supervising free labor from friends or relatives, that I must hire a licensed contractor (i.e. Certified or Registered Electrical Contractor). I further understand that the violation of not physically doing the work, not being present and supervising the electrical work, or the use of un-licensed contractors at the construction site, will cause the project to be shut down by the inspection staff of the Levy County Building Department and the revocation of the electrical permit.

I hereby assume full responsibility as the owner/builder contractor, and will personally perform or supervise all work covered by the electrical permit requested under the license exemption.

Property Owner's Address: \_\_\_\_\_

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

Telephone # ( \_\_\_\_\_ ) \_\_\_\_\_ Personally known \_\_\_\_\_ or ID \_\_\_\_\_

I hereby acknowledge that I have read and understand the above Disclosure Statement on this  
\_\_\_\_\_ Day, of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Owner/Builder Signature

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

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

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

**LEVY COUNTY DEVELOPMENT DEPARTMENT  
OWNER/BUILDER AFFIDAVIT FOR CONSTRUCTION, ROOFING,  
PLUMBING, MECHANICAL & FUEL GAS**

DISCLOSURE STATEMENT CONSISTENT WITH FS 489.103 (7)

I understand that state law requires construction to be done by a licensed contractor and I 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 below, 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 the 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 the 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 at a cost not to exceed \$75,000.00. 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 one (1) year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the license 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 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 license required by law and by county or municipal 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 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 worker's 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 understand that I may obtain more information regarding my obligations as an employer for 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 **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 following address: \_\_\_\_\_

I agree to notify the **Levy County Development Department** immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

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 general liability and worker's compensation insurance coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and submitted to the local permitting agency responsible for issuing the building permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

I hereby acknowledge that **I have read and understand** the above **Disclosure Statement** on this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Owner/Builder's Printed Name

\_\_\_\_\_  
Owner/Builder's Signature

\_\_\_\_\_  
Notary Public's Signature

\_\_NOTARY SEAL\_\_

\_\_\_\_\_  
Notary Public's Printed Name