

Mechanical/Gas Permit Fees

Levy County Development Department

P.O. Box 672 (622 E Hathaway Ave)
Bronson, Fl. 32621

Phone (352) 486-5198
Fax (352) 486-5246

Job Site Address:	Contractors Name:
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Description	Quantity	Cost	Total
Base Fee Mechanical & Gas Premits	1	\$50.00	\$50.00
Cost of Equipment \$0 - \$1,000		\$6.00	
Each Additional \$1,000 or fraction thereof		\$3.00	
Supply Outlets (Each)		\$2.50	
Return Air Outlets (Each)		\$2.50	
Solar Hot Water Systems		\$5.00	
Ventilation Systems		\$5.00	
Boiler Installation		\$5.00	
Fuel Tanks > 60 Gallons		\$3.00	
Air Handler Change-outs		\$6.00	
Condensing Unit Change-outs		\$6.00	
Hood Systems (Commercial)		\$20.00	
Walk In Coolers		\$20.00	
New Multi Family Blds. First Unit		\$60.00	
Each Additional Unit in Building		\$20.00	

GAS PERMIT FEES

First 4 Piping Outlets		\$6.00	
Each Outlet > 4		\$2.00	
Conversion Burners		\$6.00	
Floor Furnaces		\$6.00	
Incinerators		\$6.00	
Boilers		\$6.00	
Water Heaters		\$6.00	
Vented Wall Furnace		\$3.00	
Tank Set (Propane)		\$3.00	
Reinspection Fee		\$40.00	
Third Reinspection Fee		\$160.00	
After Hours Inspection Fee		\$50.00	
All Other Inspections		\$50.00	
New Multi Family Blds. First Unit		\$40.00	
Each Additional Unit in Building		\$20.00	
SUBTOTAL			
3% State Surcharge (Min \$4.00)			
		Total	

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 _____

For Office Use Only	For Office Use Only
ZONING: _____ SEPTIC PERMIT # _____	PERMIT FEE _____
FLOOD ZONE: _____	
ELEVATION _____ MIN. FINISH FLOOR ELVATION _____	

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 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