



GROWTH MANAGEMENT DEPARTMENT
 201 S.E. 3rd Street (Second Floor), Ocala, FL 34471
FAX PERMITS TO: (352) 629-8264 Phone: (352) 629-8421

Master Permit #: _____ PARCEL #: _____

CURRENT CODE IN EFFECT: 2014 FLORIDA BUILDING CODE, 5TH EDITION

Permit Type: BLD _____ ELEC _____ PLM _____ HVAC _____ GAS _____ SITE _____ ALARM _____ OTHER _____

PROJECT INFORMATION:

Residential or Commercial? _____ Occupancy Classification: _____ Building Type: _____
 New _____ Repair _____ Alteration _____ Addition _____ Revision _____
 Is the renovation necessary for a change of use? _____ Yes _____ No Proposed Use: _____
 Project Name: _____ City: Ocala County: Marion
 Project Address*: _____ Unit #: _____ Zip Code _____
**New construction/new unit requires submission of Address Request application. Provide the completed application to the City and we will submit the request to Marion County 9-1-1 Management for assignment of address.*
 Square Footage: _____ Sq. Ft under roof of this project: _____ HVAC SEER Rating: _____
 Detailed Description of Proposed Work: _____

 Estimated Value of Job (excluding lot) \$ _____
 TOTAL # OF PAGES & ATTACHMENTS PER PLAN _____ (larger than 11" x 17")

PROPERTY INFORMATION:

Property Owner of Record: _____ Daytime Phone #: _____
 Property Owner Mailing Address: _____
 City: _____ State: _____ Zip: _____
 Subdivision: _____ Lot: _____ Block: _____ Unit: _____ Sec: _____ Twp: _____ Rge: _____
 Fee Simple Titleholder's Name: (If other than owner) _____
 Fee Simple Titleholder's Address: (If other than owner) _____
 City: _____ State: _____ Zip: _____

ELECTRONIC PLAN SUBMISSION:

Will you be submitting plans electronically for review? Yes _____ No _____
 If Yes, identify as Applicant the person or firm responsible for electronic submission (uploading) of plans:
 Applicant: _____ Contact person (if applicant is a firm): _____
 Email Address: _____ Daytime Phone #: _____
Important: Please identify in the space provided below persons or firms that should received notices regarding review of these plans and who should have the ability to view the review process on-line.
Notice & access cannot be provided without a valid email address
 Name: _____ Phone #: _____ Email Address: _____
 Name: _____ Phone #: _____ Email Address: _____

CONTRACTOR:

Contractor Business Name: _____		Contact Person: _____	
Phone #: _____	Fax #: _____	Email Address: _____	
License Holders Name: _____			
State License #: _____		City Comp. #: _____	
Physical Address: _____	City: _____	State: _____	Zip: _____
Mailing Address: _____	City: _____	State: _____	Zip: _____
Bonding Company Name: _____			
Mailing Address: _____		City: _____	State: _____ Zip: _____

ARCHITECT/ENGINEER:

Business Name: _____		Contact Person: _____	
Phone #: _____	Fax #: _____	Email Address: _____	
Physical Address: _____	City: _____	State: _____	Zip: _____
Mailing Address: _____	City: _____	State: _____	Zip: _____

MORTGAGE INFORMATION:

Mortgage Company Name: _____		Contact Person: _____	
Mailing Address: _____		City: _____	State: _____ Zip: _____
Phone #: _____	Fax #: _____	Email Address: _____	

NOTICE

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work 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 may be required for ELECTRICAL, PLUMBING, SIGNS, IRRIGATION WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, ETC.

OWNER’S AFFIDAVIT: I certify that 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 AT THE MARION COUNTY CLERK OF COURTS AND A CERTIFIED COPY FILED AT THE BUILDING DEPARTMENT, BEFORE THE FIRST INSPECTION.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

OWNER:

or

CONTRACTOR:

OWNER’S SIGNATURE

DATE

CONTRACTOR’S SIGNATURE

DATE

OWNER/AGENT ELECTRONIC SUBMISSION STATEMENT: *Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.*

NOTARY

STATE: _____

STATE: _____

COUNTY: _____

COUNTY: _____

The foregoing was acknowledged before me this
_____ Day of _____ 20____

The foregoing was acknowledged before me this
_____ Day of _____ 20____

By _____
Who is personally known to me or has produced
identification.

By _____
Who is personally known to me or has produced
identification.

Type of Identification produced: _____

Type of Identification produced: _____

Notary Public (Seal)

Notary Public (Seal)

Pursuant to Florida Statute 713.135(7) all signatures must be notarized

FAX PERMITS ONLY

Contractor's Signature: _____ Fax #: _____

STATE OF FLORIDA
COUNTY OF MARION

Notary's Signature: _____ Notary Seal:

COMMERCIAL ELECTRIC METERS

OVERHEAD _____ UNDERGROUND _____
AMPS _____ PHASE _____ VOLTAGE _____
OF METERS _____ CHG OF SERVICE _____

APPLICATION APPROVED BY

_____ **Permit Officer**

Consistent with the requirements of paragraph (a), an authority responsible for issuing building permits under this section may accept a building permit application in an electronic format, as prescribed by the authority. Building permit applications submitted to the authority electronically must contain the following additional statements in lieu of the requirement in paragraph (a) that a signed, sworn, and notarized signature of the owner or agent and the contractor be part of the owner's affidavit:

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

An authority responsible for issuing building permit applications which accepts building permit applications in an electronic format shall provide public interest access to the electronic building permit application in a searchable format.

This section applies to every municipality and county in the state which has or hereafter may have a system of issuing building permits for the construction or improvements of for the alteration on property located within the geographic limits of the issuing authority.

How to Complete the Permit Application

Master Permit #: Enter the site plan or building permit for this job if one exists

Parcel #: this is the parcel identification number for the property, found on your property tax bill.

Project Information – Fill in all blanks in this section

- Is the property **Residential or Commercial** use?
- **Occupancy Classification/Building Type:** this information can be found on the building plans, usually on the first page
- **Is the renovation necessary for a change of use:** answer yes or no and list the proposed use of the property.
- **Project Name:** Enter the name of the business the work is being done for or the homeowner's name
- **Project Address:** Enter the current address, or leave space blank and follow the instructions and submit the Address Request application.
- **Square Footage:** SF of area of work to be done **Square Ft. under roof of this project:**
- **HVAC SEER rating:** If mechanical work is to be done, enter the SEER rating of the equipment being installed.
- **Description of Proposed Work:** Enter the full scope of work to be completed.
- **Estimated Value of Job:** Excluding the lot, what is the job value of the work to be performed? Must include labor and materials in your cost, whether a contractor or homeowner is doing the work.
- **Total # of pages and attachments per plan:** If submitting paper plans, anything greater than 11" x 17" will be charged a fee of \$5 per page at the time the permit is issued.

Property Information – Fill in all blanks in this section

- **Property Owner of Record:** Enter who the current property owner is. If it has been recently sold, we will need a copy of the Special Warranty Deed.
- **Daytime Phone number/ mailing address:** phone number and mailing address of property owner
- **Subdivision/Lot/Block/Unit/Section/Township/Range:** Enter information from the property's legal description

Electronic Plan Submission – Fill in all blanks if submitting plans electronically via Projectdox/ePlans. This requires you to deposit money to an escrow account, but is a convenient option to the plan review process. Contact our office to speak to a customer service rep for more information at 352-629-8421.

Contractor – Fill in all blanks in this section

Architect/Engineer – Fill in all blanks in this section for the person responsible for the drawings.

Mortgage Information – Fill in all blanks if there is a mortgage on this property.

Page 3 – Signatures – The Owner and Contractor signatures need to be completed before a Notary Public. All Building permit technicians are notaries and will provide this service for you at no cost.

Owner/Agent Electronic Submission statement – The owner (or agent representing the owner) needs to sign this section when submitting plans electronically. If you have selected a contractor, the contractor also needs to sign this section.

Page 4 – Fax Permits Only - Fax permits are only permissible if the contractor has an escrow account. This page to be signed by the contractor and notarized.