



## LYNN HAVEN BUILDING DEPARTMENT

### PLAN REVIEW SUBMITTAL FORMS

Please Provide All Applicable Items Listed Below:

1.  ONE COMPLETE SET OF PAPER PLANS, drawn to scale & ONE DIGITAL Copy (Total of 2 complete sets) Plans must be executed and sealed by registered design professional and contain the following:
  - A.  Site Plan (All Structures, water, dimensions, property lines, setbacks, adjacent areas, driveways, sidewalks, patios, swimming pool, impervious surface, site drainage, and proposed floor elevation.)
  - B.  Dimensioned foundation and footing plans
  - C.  Complete floor plan indicating all bearing walls (With additions, show existing floor plan)
  - D.  Wall section(s), foundation through roof. Include panel nailing schedules
  - E.  Elevations and Accessibility features
  - F.  Electrical, plumbing and HVAC plans (Location of all Smoke Detectors)
  - G.  Detailed Fire Alarm and Fire Protection plans
  - H.  Method of compliance with wind-load. Lynn Haven is located in **140 MPH** wind zone
2.  Completed and notarized Building Permit Packet including:
  - A.  Recorded Notice of Commencement
  - B.  Signed Flood Zone handout
  - C.  Finished Floor Elevation Affidavit
  - D.  Signed Florida Product Approval Affidavit
3.  Florida Energy Form
4.  **No Adverse Impact Certificate – Drainage Plan**
5.  Property or Parcel ID # \_\_\_\_\_, (Proof of Ownership)
6.  Approvals from Planning Department
7.  Need Irrigation Meter: Yes  No  (check one)

**Must have Terminte Certificate, Blower Door Certificate, Survey with Finished Floor Elevation or Elevation Certificate before a Certificate of Occupancy can be issued.**

Applicant's Signature \_\_\_\_\_

Contact # \_\_\_\_\_ E-Mail \_\_\_\_\_

**THIS REVIEW FORM MUST BE COMPLETED AND SUBMITTED WITH THE BUILDING PERMIT APPLICATION**

817 Ohio Avenue • Lynn Haven, FL 32444  
(850) 265-2121 EXT 2135

[www.cityoflynnhaven.com](http://www.cityoflynnhaven.com)

Email: [buildingdepartment@cityoflynnhaven.com](mailto:buildingdepartment@cityoflynnhaven.com)



## LYNN HAVEN BUILDING DEPARTMENT

### APPLICATION FOR BUILDING PERMIT

Date: \_\_\_\_\_ Flood Zone: \_\_\_\_\_ Flood Elevation Certificate Attached: Yes or No

Owner's Name: \_\_\_\_\_ Primary Address: \_\_\_\_\_

Email: \_\_\_\_\_ Cell # \_\_\_\_\_

Contractor's Name: \_\_\_\_\_

Company Name: \_\_\_\_\_

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Telephone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

FL License #: \_\_\_\_\_ Email Address: \_\_\_\_\_

**ADDRESS OF PROJECT:** \_\_\_\_\_

**PARCEL ID #:** \_\_\_\_\_

If the Application is for a Commercial Project, please list Name of the Business:

\_\_\_\_\_

Bonding Company: \_\_\_\_\_

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

Architect's/Engineers 's Name: \_\_\_\_\_

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

Mortgage Lender's Name: \_\_\_\_\_

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

#### Purpose of Building:

Commercial  Residential 3 or more units (Multifamily)  Single Family/Townhouse  Duplex

Addition  Renovation  Other (Please list and explain): \_\_\_\_\_

**Does the Renovation/Addition Exceed 50% Substantial Improvements: Yes or No.**

**Cost of Construction \$** \_\_\_\_\_

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**Site Plans, Plat or Survey Attached:** Yes or No

**Please enter the measurements from Site Plans, Plat or Survey:**

Distance from property line: Front Side \_\_\_\_\_ Street Side \_\_\_\_\_ Rear (Street) \_\_\_\_\_

Total Lot Size \_\_\_\_\_ Flood Zone \_\_\_\_\_ Lowest Floor Elev. \_\_\_\_\_

Total Area \_\_\_\_\_ Heated/Cooled (sqft) \_\_\_\_\_ Number of Stories \_\_\_\_\_

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, Pools, Heaters, Air Conditioners, Roofs, etc.....

For improvements to real property with a construction cost of \$5,000 or more, a recorded copy of the Notice of Commencement is required and submitted to the Lynn Haven Building Department when application is made for a permit, or the applicant may submit a copy of the Notice of Commencement along with an affidavit attesting to this recording. A recorded copy of the Notice of Commencement must be provided to the Lynn Haven Building Department before the first can be performed and posted on the jobsite.

**NOTICE:** The Lynn Haven Building Department does not have the authority to enforce deed restrictions or covenants on properties. You are advised to check for any restrictions that may affect your property.

The enforcing agency shall require each building permit for the demolition or renovation of an existing structure to contain an asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of Section 469.003, Florida Statutes, and to notify the Department of Environmental Protection of his or her intentions to remove asbestos, when applicable, in accordance with state and federal law.

**IMPORTANT:** The building permit is valid if there is substantial construction progress, and an approved inspection is recorded within each 180 days (6 months) period.

**CONTRACTOR'S/OWNER'S AFFIDAVIT:** I hereby certify that the information contained in this Application is true and correct and that all work will be done in compliance with all applicable law's regulation construction and zoning.

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

\_\_\_\_\_  
**Signature of Contractor**

**Date:** \_\_\_\_\_

**Date:** \_\_\_\_\_

\_\_\_\_\_  
**Notary to Owner**

\_\_\_\_\_  
**Notary to Contractor**

**Application approved by:** \_\_\_\_\_ **Building Official**

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## LYNN HAVEN BUILDING DEPARTMENT

### FINISHED FLOOR ELEVATION AFFIDAVIT

I hereby verify that the finished floor elevation for all building structures, both habitable and non-habitable, on the parcel noted below, meet the requirements noted on the recorded plat, approved subdivision drainage plan, applicable deed restrictions, and the minimum requirements of the City of Lynn Haven Unified Land Development Code.

Per Lynn Haven Ordinance, Sec. 14-28 Minimum elevation of slab or floor. Floor level of a building or structure shall be constructed 12 inches higher than the crown of the roadway, existing road, street, or access to the property, or 12 inches above Base Flood Elevation whichever is higher.

The Florida Building Code, which was the code at time of permit, In Sec. R309.3 requires garages to be **elevated** or, if below the BFE and used solely for parking must meet the requirements of Sec. 322.

**The elevation must be verified by a surveyor, elevation of crown of road, garage, and finish floor elevation in Flood Zone X and an elevation certificate in all other flood zones as soon as the floor is established and prior to vertical framing.**

Date \_\_\_\_\_

Parcel ID # \_\_\_\_\_

Building Permit # \_\_\_\_\_

Owner/Contractor Printed Name \_\_\_\_\_

Signature \_\_\_\_\_

Absolutely no permit for construction shall be issued until this affidavit is signed and witnessed.

Printed name of Witness \_\_\_\_\_

Signature \_\_\_\_\_

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## "A" AND "V" FLOOD ZONES

### IMPORTANT INFORMATION FOR THOSE WHO BUILD ON PROPERTIES IN SPECIAL FLOOD HAZARD AREAS

A special flood hazard area is where FEMA has determined that there is a greater chance for flooding to occur. The effective FEMA map is dated June 16, 2009. When building in these areas, two additional documents will be needed for your file and certain procedures must be followed. Failure to follow them could result in substantial extra costs and delays.

A suggested first step when building in these areas is to obtain a licensed land surveyor. He or she will first determine the Base Flood Elevation (BFE) of the area. This is the expected highest level of the water during a flood. He or she then places a "benchmark" on the property, which is used to determine how high this flood water level will be on your property.

- **You must then build your floor above that flood water level.**
- **For manufactured homes approved by HUD, only a final elevation certificate is required.**
- **For site-built homes, THREE elevation certificates are required. (before construction, under construction, & final)**

In the City of Lynn Haven, your lowest floor (garage) must be **1 foot above the BFE or 1-foot above crown of roadway**. Immediately after your slab is poured (or joists and girders installed for framed floor systems), the surveyor must then prepare a document called an "Elevation Certificate" (EC) that will verify your building floor is in compliance.

- **Don't wait to get this first Elevation Certificate.**

It is important to get this *second EC* done soon after the floor is finished because, if for any reason, the floor is too low (below BFE), it will have to be raised to the proper level.

- **NOTE: Section 110.3 of the code requires the under-construction elevation certificate to be submitted to the building official prior to vertical framing.**

The *third EC* is called for when the home and site (finished grade) are completed and nearing the final inspection. It again documents compliance of the floor and additionally documents other items like finished grade, equipment (such as air conditioning systems, these items must meet the elevation requirements also), flood venting if needed, etc.

- **NOTE: Per section 110.3 of the code, the final inspection and Certificate of Occupancy cannot be given until this *third EC* (Finished Construction EC) is provided for the file.**

For additions to existing homes located in flood zones, please make an appointment with staff to consider the applicable rules. "V" zones have wave action in addition to flooding hazards. They must meet all the above and they have unique foundation requirements that will need structural engineering. If you have questions, please call for assistance.

Why all the paperwork? FEMA provides low-cost flood insurance for communities that make sure their new homes and additions are safe from flooding, and it is the law. Need further information? For questions regarding your construction, call 850-265-7316 or call the CRS Coordinator, regarding the FEMA flood insurance program, or go to <http://www.fema.gov/about/programs/nflplindex.shtm>

I have read and understand the above \_\_\_\_\_ Dated \_\_\_\_\_

# PRODUCT APPROVAL SPECIFICATION SHEET

As required by Florida Statute [553.842](#) and the [Florida Administrative Code](#), 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.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>1. Exterior Doors</b>			
A. Swinging			
B. Sliding			
C. Sectional			
D. Roll-up			
E. Automatic			
F. Other			
<b>2. Windows</b>			
A. Single Hung			
B. Horizontal Slider			
C. Casement			
D. Double Hung			
E. Fixed			
F. Awning			
G. Pass Through			
H. Projected			
I. Mullion			
J. Wind Breaker			
K. Dual Action			
L. Other			
<b>3. Panel Walls</b>			
A. Siding			
B. Soffits			
C. EIFS			
D. Storefronts			
E. Curtain Walls			
F. Wall Louver			
G. Glass Block			
H. Membrane			
I. Greenhouse			
J. Other			
<b>4. Roofing Products</b>			
A. Asphalt Shingles			
B. Underlayments			
C. Roofing Fasteners			
D. Non-Structural Metal Roofing			
E. Wood Shingles and Shakes			
F. Roofing Tiles			
G. Roofing Insulation			
H. Waterproofing			
I. Built Up Roofing Roof Systems			
J. Modified Bitumen			
K. Single Ply Roof Systems			

Category/Subcategory		Manufacturer	Product Description	Approval Number(s)
L.	Roofing Slate			
M.	Cements-Adhesives Coatings			
N.	Liquid Applied Roof Systems			
O.	Roof Tile Adhesive			
P.	Spray Applied Polyurethane Roof			
Q.	Other			
<b>5.</b>	<b>Shutters</b>			
A.	Accordion			
B.	Bahama			
C.	Storm Panels			
D.	Colonial			
E.	Roll-up			
F.	Equipment			
G.	Other			
<b>6.</b>	<b>Skylights</b>			
A.	Skylight			
B.	Other			
<b>7.</b>	<b>Structural Components</b>			
A.	Wood Connectors/ Anchors			
B.	Truss Plates			
C.	Engineered Lumber			
D.	Railing			
E.	Coolers-Freezers			
F.	Concrete Admixtures			
G.	Material			
H.	Insulation Forms			
I.	Plastics			
J.	Deck Roof			
K.	Wall			
L.	Sheds			
M.	Other			
<b>8.</b>	<b>New Exterior Envelope Product</b>			

The products manufacturer, description, and approval numbers can be obtained from the Florida Building Code information system on the web @ [Florida Building Code Online](#). I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite: 1) copy of the product approval; 2) the performance characteristics which the product was tested and certified to comply with; and 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. A completed copy of this Product Approval Specification Sheet will be returned to Lynn Haven Building Department before a Certificate of Occupancy will be issued.

\_\_\_\_\_  
Applicant Signature

\_\_\_\_\_  
Date



## TEMPORARY POWER AFFIDAVIT

STATE OF FLORIDA  
COUNTY OF BAY

City of Lynn Haven

Project Address:

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I, the Contractor of Record, agree and accept all responsibility to have Temporary Power turned on at the above listed project address. At any time prior to issuance of a Certificate of Occupancy, I authorize the City of Lynn Haven to have power disconnected from the building or premises noted above.

I acknowledge that authorization for Temporary Power is for a period of 90 days from the date permanent power is applied and an extension of 90 days may be granted if requested.

I affirm that this building, nor any portion thereof, shall not be occupied without the issuance of a Certificate of Occupancy. Violation of this will result in cancellation of Temporary Power.

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Contractor

**\*\*YOUR APPLICATION WILL NOT BE PROCESSED IF THIS IS INCOMPLETE\*\***

**CITY OF LYNN HAVEN  
WATER & SEWER IMPACT FEE WORKSHEET**

Address:

Fixture Type		Fixture Value	Number of Fixtures	Total Fixture Units
Bathtub (with or without shower)		8		
Bed pan Washers		10		
Combination Snk and Tray		3		
Dental Unit		1		
Dental Lavatory		2		
Dishwasher	1/2" connection	4		
	3/4" connection	10		
Drinking Fountain	Cooler	1		
	Public	2		
Kitchen Sink	1/2" connection	3		
	3/4" connection	7		
Lavatory	3/8" connection	2		
	1/2" connection	4		
Laundry Tray	1/2" connection	3		
	3/4" connection	7		
Shower Head (shower only)		4		
Service Sink	1/2" connection	3		
	3/4" connection	7		
Urinal	Pedestal Flush Valve	35		
	Wall or Stall	12		
	Trough (2' unit)	2		
Wash Sink (each set of faucets)		4		
Water Closet	Flush Valve	35		
	Tank Type	3		
Washing Machine	1/2" connection	5		
	3/4" connection	12		
	1" connection	25		
		<b>Total Sewer Related Fixtures</b>		
<b>Non-Sewer Related Fixtures</b>				
Hose Bib	1/2" connection	6		
	3/4" connection	10		
Ice Maker		2		
<b>Total Non-Sewer Related Fixtures</b>				
<b>TOTAL FIXTURE VALUE</b>				

**\*\*YOUR APPLICATION WILL NOT BE PROCESSED IF THIS IS INCOMPLETE\*\***

# CITY OF LYNN HAVEN STORMWATER IMPACT FEE WORKSHEET

ADDRESS: \_\_\_\_\_

SQUARE FOOTAGE ACCORDING TO PLANS

Structure Footprint	
Driveway/Parking Area	
Sidewalk/Walkway Area	
Decking	
Accessory Structures/Pads	
Roadway System	
Commercial Development	
Subdivision	

TOTAL IMPERVIOUS SURFACE AREA: \_\_\_\_\_ SQUARE FEET

TOTAL SQUARE FOOTAGE x .19 = \$ \_\_\_\_\_ TOTAL





# NOTICE OF COMMENCEMENT

THE UNDERSIGNED hereby gives notice that improvement 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 (legal description of property): \_\_\_\_\_  
a) Street (job) Address: \_\_\_\_\_
- 2. General description of improvement(s): \_\_\_\_\_  
\_\_\_\_\_
- 3. Owner or Lessee information (Lessee as owner only if contracted for improvements)  
a. Name and address: \_\_\_\_\_  
b. Interest in property: \_\_\_\_\_  
c. Name and address of fee simple titleholder (if other than owner): \_\_\_\_\_
- 4. Contractor Information  
a. Name and address: \_\_\_\_\_  
b. Phone number: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
- 5. Surety Information  
a. Name and address: \_\_\_\_\_  
b. Amount of bond \$ \_\_\_\_\_  
c. Phone number: \_\_\_\_\_ Fax No. (Opt.) \_\_\_\_\_
- 6. Lender  
a. Name and address: \_\_\_\_\_  
b. Phone number: \_\_\_\_\_
- 7. Persons within the State of Florida designated by Owner upon who notices or other documents may be served as provided by Section 713.13(l)(a)7., Florida Statutes:  
a. Name and address: \_\_\_\_\_  
b. Phone number: \_\_\_\_\_
- 8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(l)(b), Florida Statutes:  
a. Name and address: \_\_\_\_\_  
b. Phone number: \_\_\_\_\_

Expiration date of notice of commencement (the expiration date is 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 1, 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.**

**Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have - read the foregoing and that the facts in it are true to the best of my knowledge and belief.**

\_\_\_\_\_  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager  
Signatory's Title/Officer: \_\_\_\_\_

State of Florida  
Bay County

The foregoing instrument was acknowledged before me this \_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_, who is personally known to me or has produced \_\_\_\_\_, and who did/did not take an oath.

(Driver's License #)

\_\_\_\_\_  
Signature of Notary  
Public - State of Florida

\_\_\_\_\_  
Print, Type, or Stamp  
Commissioned Name of Notary Public

**Worksheet for Commercial and Residential New Construction Permits**

Contractor \_\_\_\_\_ CID # \_\_\_\_\_

Owner \_\_\_\_\_ CID # \_\_\_\_\_

Address \_\_\_\_\_

Lot # \_\_\_\_\_ Subdivision \_\_\_\_\_

Parcel # \_\_\_\_\_

Construction (*Circle one*)     Frame     Block     Metal     Other

Roof (*Circle one*)     Shingle     Metal     Tile     Build-up     Other

Flood Zone \_\_\_\_\_ Elevation \_\_\_\_\_

Occupancy Class \_\_\_\_\_ Bedrooms \_\_\_\_\_ Bathrooms \_\_\_\_\_ Stories \_\_\_\_\_

Gross SF (*UNDER ROOF: heat & cooled, garage, & porches only*) \_\_\_\_\_

Construction Cost (*calculate manual: Gross Square Foot x \$110.29*) \$ \_\_\_\_\_

Net SF (*heated & cooled porches, & garages used for electrical cal.*) \_\_\_\_\_

Finished SF (*heated and cooled area only for mechanical cal.*) \_\_\_\_\_

Total Impervious (*worksheet for storm water calculation*) \_\_\_\_\_

Extra Piping Fee \$ \_\_\_\_\_ Extra Piping Supply Fee (*Basin*) \$ \_\_\_\_\_

Driveway (*# feet*) \_\_\_\_\_ Sewer Impact (*number of fixtures from worksheet*) \_\_\_\_\_

Water Meter Size \_\_\_\_\_ Water Impact (*number of fixtures from worksheet*) \_\_\_\_\_

County Water Y/N \_\_\_\_\_ Size \_\_\_\_\_ Reuse Water \_\_\_\_\_

Extra Charges for Irrigation Meter (*amount from locate form sent to UT Dept.*) \$ \_\_\_\_\_

Extra Charges for Water Tap (*amount from locate form sent to UT Dept.*) \$ \_\_\_\_\_

Extra Charges for Sewer Tap (*amount from locate form sent to UT Dept.*) \$ \_\_\_\_\_

Plumbing (*fixtures from water/sewer worksheet*) \_\_\_\_\_

***This form has been completed to the best of my abilities and I certify that the above information provided is accurate and complete.***

Sign: \_\_\_\_\_ Date: \_\_\_\_\_

Please print your full name: \_\_\_\_\_