



INDIAN RIVER COUNTY/ CITY OF VERO BEACH
BUILDING DIVISION

1801 27th Street, Vero Beach, FL 32960 772-226-1260

Residential 1 & 2 Family Permit Checklist

- Completed Indian River County/City of Vero Beach **Building Permit** application.
- Structures in COVB Jurisdiction will need to visit <https://www.covb.org/DocumentCenter/View/358/Site-Plan-Application-Minor-SFR-or-Duplex-2013-PDF> and complete additional COVB Planning application.
- New Single Family structures require approved and completed review by the Planning, Public Works and Utility Dept. having jurisdiction. If site has a septic system or well an Environmental Health Dept. will also be required.
- Sub-contractor Agreement/Affidavits are required for each trade that either the Prime Contractor or the Owner/Builder is going to self-perform.
- Sub-Contractor Agreement/Affidavits are required for each sub-contractor prior to their first inspection.
- Four (4) Sets of Signed and Sealed Plans from a Florida Licensed Design Professional (18" x 24" Minimum Size). Refer to Plan Specifications for minimum plan specification requirements.
- Six (6) certified boundary and topographic surveys. These surveys should include plot plan details; if not three (3) separate plot plans are required. Not required for Alterations that do not increase overall footprint of structure.
- Three (3) completed Energy Code Calculation Forms including Manual J, S and D. Not required for Alterations that do not increase overall footprint of structure or if alteration value is less than 30% of the value of the structure.
- One (1) complete truss package with uplifts and three (3) truss manufacturer truss layout plans. Alternative, Design Professional includes truss layout with uplifts and other loads on plans and truss package is on-site for inspection. Not required for Alterations that do not increase overall footprint of structure.
- One (1) signed and sealed Soils Investigation Report from a Florida Licensed Design Professional for all Waterfront properties. Not required for Alterations that do not increase overall footprint of structure.
- Three (3) signed and sealed I.R.C. Product Approval Affidavit from a Florida Licensed Design Professional.
- Submit a recorded Notice of Commencement to the Building Division prior to the first inspections. Forms can also be found on-line at <https://www.indianriver.gov/>
- See Planning Technician for Impact Fee calculation. Impact fees can only be paid by cash or check.
- Unity of Title must be submitted if house will be located on more than one lot (County Only)
- Lots larger than ¼ acre in size require a Tree Removal Permit Application or Exemption Form to be submitted
- Oceanfront Property: Department of Natural Resources Permit Approval for Projects Located Seaward of the Coastal Construction Control Line. Projects in Turtle Protection Zone are subject to specific review. Un-platted property must have deed submitted. State Road Right-of-Way- Property abutting State Roads Require Permit from Department of Transportation. State Roads: A1A; 17th Street- FEC R/R to A1A; State Road 60; I-95; 27th Avenue- State Road 60 to South County Line.
- Utility Information: Check <https://www.covb.org/187/Septic-Tank-Effluent-Pump-STEP-System> for COVB Utilities Availability. Go onto <http://indianriver.clearvillageinc.com/citizenportal/defaultutilities.aspx> for I.R.C. Utilities Availability.
- Applicants are advised that Building Permit Applications are considered incomplete until all other IRC/ COVB Departments and other Governmental agency reviews are completed and approved. The Building Permit Application will be routed to other departments, even if considered incomplete, in order to expedite the review process. The Building Permit Application review and approval time clock does not start until the application is deemed a Complete Application.

Additional documents may be requested at any time during the permitting process.

For Permitting and Submittal Questions please contact the Building Division at 772-226-1260. REV 7/30/2024



**INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION**

1801 27th Street, Vero Beach, FL 32960 772- 226-1260

**BUILDING PERMIT APPLICATION
INDIAN RIVER COUNTY / CITY OF VERO BEACH**

PARCEL NUMBER: _____

JOB ADDRESS: _____ SUBDIVISION: _____

JOB VALUE: _____ (Permit Fee=0.4334% of ICC Building Valuation over \$46,146.75. Minimum Permit Fee = \$200.00)

TOTAL SQUARE FOOTAGE UNDER-ROOF: _____ SQUARE FOOTAGE UNDER AIR: _____

If Addition Permit Indicate Existing Square Footage Under Air: _____ Additional Square Footage Under Air Proposed: _____

of BEDROOMS: _____ # of BATHROOMS: _____ # of GARAGES: _____
(Detached Garages require Separate Permit)

WATER SERVICE: COUNTY CITY WELL SEWER SERVICE: COUNTY CITY SEPTIC

JOB DESCRIPTION:

- SINGLE-FAMILY DUPLEX NEW ADDITION ALTERATION
 NO MECHANICAL, ELECTRICAL OR PLUMBING-STRUCTURAL ONLY

	NAME & ADDRESS	CONTACT INFORMATION
OWNER	_____	Name:
	_____	E-MAIL:
	_____	DAYTIME PHONE NUMBER: Fax:
TITLE HOLDER (If Other Than Owner)	_____	Name:
	_____	E-MAIL:
	_____	DAYTIME PHONE NUMBER: Fax :
CONTRACTOR	_____	Name:
	_____	E-MAIL:
	License # _____ Comp. Card # _____	DAYTIME PHONE NUMBER: Fax:
ARCHITECT	_____	E-MAIL:
	_____	DAYTIME PHONE NUMBER:
ENGINEER	_____	E-MAIL:
	_____	DAYTIME PHONE NUMBER:



INDIAN RIVER COUNTY/ CITY OF VERO BEACH BUILDING DIVISION

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, insurance, and worker's compensation. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONER, ETC. Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the Engineering Department prior to the issuance of Certificate of Completion. IN APPLYING FOR THIS PERMIT, I HEREBY ATTEST THAT I HAVE THE KNOWLEDGE AND UNDERSTANDING OF ALL THAT IS REQUIRED BY THE FLORIDA BUILDING CODE AND ALL LAWS AND REGULATIONS PERTAINING TO PERFORMING AND COMPLETING THIS TYPE OF WORK.

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.

Owner Signature

Contractor Signature

Acknowledgement for Person in an Individual Capacity

State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of physical presence or online notarization this _____ day of _____, 20 _____ by _____

who is personally known or produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal

State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of physical presence or online notarization this _____ day of _____, 20 _____ by _____

who is personally known or produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal

Acknowledgement for Person in a Representative Capacity

State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of physical presence or online notarization this _____ day of _____, 20 _____, by _____ (Name of Person) as _____ (Explain

Representative Capacity) for _____ (Name of Party on Behalf of Whom Instrument was Executed).

who is personally known or produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal

State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of physical presence or online notarization this _____ day of _____, 20 _____, by _____ (Name of Person) as _____ (Explain Representative

Capacity) for _____ (Name of Party on Behalf of Whom Instrument was Executed).

who is personally known or produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal

Total FT2: _____ X ICC Multiplier= _____ = \$ _____ or Job Value: \$ _____ ADDRESS REF #: _____

Living Space: _____ Non-Living Space: _____ # Bedrooms: _____ # Baths: _____ #Garage : _____ PROJECT#: _____ Page 2 of 18



**INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION**

1801 27th Street, Vero Beach, FL 32960 772- 226-1260

SUB-CONTRACTOR AFFIDAVIT REQUIREMENTS

The following trades require Sub-Contractor Agreement Forms to be submitted and approved prior to requesting any related inspections

Trades:

Mechanical	Burglar Alarm
Electrical	Concrete
Plumbing	Masonry
Roofing*	Carpentry
Insulation	Drywall
Irrigation	Garage Door
Fuel/Gas**	

Conditions:

If the required affidavit forms are not received and approved prior to the inspection request the inspection request cannot be scheduled.

If there is a Sub-Contractor change for the project a new affidavit form along with Change of Contractor Form is required for the new Sub-Contractor and must also be submitted and approved prior to any related inspections.

If the Sub-Contractor's license status changes to "Inactive" for any reason, related inspections cannot be scheduled. Changes could include but are not limited to license, liability insurance or worker's compensation expiration.

Notes:

*Roof coverings other than asphalt shingles, wood shingles or wood shakes require a licensed roofing contractor

** Piping installation only, tank installation requires a separate permit.



INDIAN RIVER COUNTY/CITY OF VERO BEACH
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PRIME CONTRACTOR AGREEMENT/AFFIDAVIT

IRC Certificate Number: _____ State of Florida Certificate Number: _____

Permit Number: _____ Job Address: _____

_____ will be conducting the work for the following trades:
(Company/Individual name)

- checkbox concrete, checkbox drywall, checkbox aluminum (in-fill only), checkbox masonry, checkbox insulation, checkbox garage door, checkbox carpentry, checkbox roofing*, checkbox other

It is understood that, if there is any change of status regarding our participation with the above-mentioned project, I will immediately advise the Indian River County Building Division by personally filing a Change of Contractor.

*Roof coverings other than asphalt shingles, wood shingles or wood shakes require a licensed roofing contractor.

PRIME CONTRACTOR QUALIFIER SIGNATURE: _____

Printed Name: _____ Date: _____

Table with 2 columns: Acknowledgement for Person in an Individual Capacity, Acknowledgement for Person in a Representative Capacity. Each column contains fields for State of Florida, County, acknowledgment method, date, name, capacity, notary name, signature, and seal.



INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION

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SUB-CONTRACTOR AGREEMENT/AFFIDAVIT

IRC Certificate Number: State of Florida Certificate Number:

Permit Number: Job Address:

- will be conducting the work for the following trade(s) for
(Company/Individual Name) (Prime Contractor)
concrete electric aluminum (in-fill only) other
masonry insulation mechanical garage door
carpentry roofing irrigation fuel gas
drywall plumbing burglar alarm/low voltage

It is understood that, if there is any change of status regarding our participation with the above-mentioned project, I will immediately advise the Indian River County Building Division by personally filing a Change of Contractor.

SUB-CONTRACTOR QUALIFIER

PRIME CONTRACTOR QUALIFIER
(Main Permit Holder Information Required)

Signature:

Signature:

Printed Name: Date:

Printed Name: Date:

Acknowledgement for Person in an Individual Capacity

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of, 20, by

who is personally known or produced identification
Type of ID Produced
Printed Name of Notary
Signature of Notary
Notary Seal

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of, 20, by

who is personally known or produced identification
Type of ID Produced
Printed Name of Notary
Signature of Notary
Notary Seal

Acknowledgement for Person in a Representative Capacity

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of, 20, by (Name of Person) as (Explain

Representative Capacity) for (Name of Party on Behalf of Whom Instrument was Executed).

who is personally known or produced identification
Type of ID Produced
Printed Name of Notary
Signature of Notary
Notary Seal

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of, 20, by (Name of Person) as (Explain

Representative Capacity) for (Name of Party on Behalf of Whom Instrument was Executed).

who is personally known or produced identification
Type of ID Produced
Printed Name of Notary
Signature of Notary
Notary Seal



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PLAN SPECIFICATIONS

This information is intended to be a guideline, and does not necessarily indicate all details required to determine code compliance. (Minimum required for Building Department and Engineering Division review)

SIZE: 24" X 36" PRINTS RECOMMENDED

PLOT PLAN: (Must include the following, may be included on the Boundary and Topographic Survey)

- ___ All Existing and Proposed Improvements, including grading elevations
- ___ All streets and rights-of-way abutting the site
- ___ North Arrow and Graphic Scale
- ___ Minimum scale: 1"= 30'
- ___ Minimum Font Size: 1/8"
- ___ Driveway, location, width and material
- ___ Location of any existing structures, including pipes
- ___ Well and septic location/top of drainfield elevation (check Health Department requirements)
- ___ Building dimensions
- ___ Set back dimensions from all property lines, at 90 degrees from property line
- ___ All easements
- ___ Pad elevation for all mechanical equipment servicing the building
- ___ Porch, Deck, Pool

FLOOR PLAN: (Drawn to 1/4" Scale - Must Include the Following)

- ___ Exterior and interior dimensions
- ___ All window, door and miscellaneous openings with sizes shown
- ___ Plumbing fixtures and all fixed items - cabinets, counters, etc.
- ___ Partitions
- ___ Location of electrical outlets, fixtures, switches, main service panel, and proposed meter location
- ___ Attic access panel location(s)
- ___ A/C and heat equipment location. Show ducts and register sizes and locations
- ___ Wind load certifications for windows and doors - including garage door - with attachment details.
- ___ All floor elevation changes
- ___ **IMPORTANT:** Smoke detector and emergency egress window locations

TYPICAL WALL SECTIONS: (Drawn to 1/2" or 3/4" Scale - Must Include the Following)

- ___ Footing type and sizes indicated
- ___ Vertical details (frame or block wall)
- ___ Truss anchoring detail
- ___ Truss, roof sheathing, type of roof covering (shingles, etc.)
- ___ Vapor barrier, 3-1/2" minimum slab thickness shown - Indicate termite protection method
- ___ Stucco details per ASTM C-1063 including but not limited to: control joint location, weep screed location, attachment requirements, secondary water barrier and dissimilar material joint around windows and doors



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Product Approval Affidavit Form

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide the information and the product approval number(s) on the building components listed below. Product approval information can be obtained at the following sources:

https://www.floridabuilding.org/pr/pr_app_srch.aspx or http://www.miamidade.gov/building/pc-search_app.asp or directly from the manufacturer.

This form can be incorporated on the plans or submitted as a separate form. In the event any of the listed products in this form change during construction revisions to this form will be required. The following information must be available on the jobsite for inspections:

1. This entire product approval form, stamped as "Reviewed" by Indian River County Plans Examiner.
2. Miami-Dade NOA or Florida product approval referenced in the product approval form.
3. A copy of the manufacture's installation instructions, details and requirements for each product.

Permit Number: _____ Address: _____ Contractor/Applicant: _____

Category/Subcategory	Approval Number(s)	Manufacturer	Model Number	Building Design Pressures (+PSF) (-PSF)	Product Design Pressures (+PSF) (-PSF)
A. EXTERIOR DOORS					
1. Swinging					
2. Sliding					
3. Sectional					
4. Roll up garage					
5. Automatic					
6. Other					
B. WINDOWS					
1. Single hung					
2. Horizontal slider					
3. Casement					
4. Double hung					
5. Fixed					
6. Awning					
7. Pass-through					
8. Projected					
9. Mullion					
10. Other					
C. PANEL WALL					
1. Siding					
2. Soffits					
3. EIFS					
4. Storefronts					
5. Curtain walls					
6. Wall louver					
7. Glass block					
8. Other					

D. ROOFING PRODUCTS					
1. Asphalt shingles					
2. Underlayments					
3. Roofing fasteners					
4. Non-structural Metal RF					
5. Built-up roofing					
6. Modified bitumen					
7. Single ply roofing sys					
8. Roofing tiles					
9. Roof tile adhesive					
10. Roofing insulation					
11. Wood shingles/shakes					
12. Roofing slate					
13. Liquid applied roof sys					
14. Cements-adhesives-coatings					
15. Spray applied polyurethane roof					
16. Other					
E. SHUTTERS					
1. Accordion					
2. Bahama					
3. Storm panels					
4. Colonial					
5. Roll-up					
6. Others					
F. SKYLIGHTS					
1. Skylight					
2. Other					
G. OTHER					
1. Spray Foam Insulation					
2. Liquid Applied Flashing					

I have reviewed the above components or cladding and I have approved their use in this structure. These products provide adequate resistance to the wind loads and forces specified by current code provisions.

Name: _____ Signature: _____

Design Prof: _____

Cert. No. _____

Date: _____ Seal

NOTICE TO CONTRACTORS

RE: NOTICE OF COMMENCEMENT

WARNING: DO NOT RECORD THE NOTICE OF COMMENCEMENT UNTIL AFTER THE FINANCING PACKAGE HAS BEEN RECORDED

WARNING: PLEASE NOTE SECTION 713.13(1)(g) BELOW.

Florida State Statutes

713.13 Notice of commencement.—

(1)(a) Except for an improvement that is exempt pursuant to s. 713.02(5), an owner or the owner's authorized agent before actually commencing to improve any real property, or recommencing completion of any improvement after default or abandonment, whether or not a project has a payment bond complying with s. 713.23, shall record a notice of commencement in the clerk's office and forthwith post either a certified copy thereof or a notarized statement that the notice of commencement has been filed for recording along with a copy thereof. The notice of commencement shall contain the following information:

Section 713.13(1)(g):

(g) The owner must sign the notice of commencement and no one else may be permitted to sign in his or her stead.

Section 713.135(1)(d):

If the direct contract is greater than \$2,500, the applicant shall file with the issuing authority prior to the first inspection either a certified copy of the recorded notice of commencement or a notarized statement that the notice of commencement has been filed for recording, along with a copy thereof. In the absence of the filing of a certified copy of the recorded notice of commencement, the issuing authority or a private provider performing inspection services may not perform or approve subsequent inspections until the applicant files by mail, facsimile, hand delivery, or any other means such certified copy with the issuing authority. The certified copy of the notice of commencement must contain the name and address of the owner, the name and address of the contractor, and the location or address of the property being improved. The issuing authority shall verify that the name and address of the owner, the name of the contractor, and the location or address of the property being improved which is contained in the certified copy of the notice of commencement is consistent with the information in the building permit application. The issuing authority shall provide the recording information on the certified copy of the recorded notice of commencement to any person upon request. This subsection does not require the recording of a notice of commencement prior to the issuance of a building permit.

NOTICE OF COMMENCEMENT TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00 OR WHEN HEATING OR AIR CONDITIONING REPAIR OR REPLACEMENT EXCEEDS \$7500.00

Permit #: _____ Tax Folio #: _____

State of Florida, County of Indian River, The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Fla. Stat. the following information is provided in this Notice of Commencement.

Office Use Only

1. Legal description of the property (*and complete street address if available*):

2. General description of improvement:

3. Owner information or Lessee information (*if the Lessee contracted for the improvement*):
 - a. Name: _____
 - b. Address: _____
 - c. Interest in property: _____
 - d. Name & complete address of fee simple titleholder (if different from Owner listed above):

4. Contractor:
 - a. Name: _____
 - b. Address: _____
 - c. Phone number: _____
5. Surety Company (*if applicable, a copy of the payment bond is attached*):
 - a. Name & complete street address: _____
 - b. Phone number: _____ Bond amount: _____
6. Lender/Mortgage Company:
 - a. Name & complete street address: _____
 - b. Lender's phone number: _____
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 & complete street address: _____
 - b. Phone number: _____ Fax number: _____
8. In addition to himself or herself,
 - a. 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: _____
9. Expiration date of notice of commencement: _____ (1 year from date of recording unless otherwise 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 Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager)

(Signatory's Title/Office)

Acknowledgement for Person in an Individual Capacity	Acknowledgement for Person in a Representative Capacity
State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20_____. by _____ who is <input type="checkbox"/> personally known or <input type="checkbox"/> produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal	State of Florida, County of _____ The foregoing instrument was acknowledged before me by means of <input type="checkbox"/> physical presence or <input type="checkbox"/> online notarization this _____ day of _____, 20_____. by _____ (Name of Person) as _____ (Explain Representative Capacity) for _____ (Name of Party on Behalf of Whom Instrument was Executed). who is <input type="checkbox"/> personally known or <input type="checkbox"/> produced identification Type of ID Produced _____ Printed Name of Notary _____ Signature of Notary _____ Notary Seal

RESIDENTIAL SINGLE-FAMILY PERMIT PLOT PLAN CHECKLIST

This checklist is to assist you, the applicant, in the preparation and submittal of information necessary for the review of all Residential Single Family (**RSF**) permit applications. The information requested is utilized by Indian River County Engineering during building permit review for grading, stormwater management & right-of-way (ROW). A separate ROW application is not required for a Building Residential Combination (BRCOM), but may be for other building permit applications or work within a public right-of-way.

Check () all applicable items supplied with this permit application. Review by the Engineering Division may not begin until a complete application has been submitted. For questions or assistance on this checklist, call the IRC Engineering Division at 772-226-1283.

1. Is the residence within a platted subdivision?

- Yes Lot ____ Block ____ Subdivision Name _____
- No Tax Parcel # _____

2. Access to the property is from: (The street name is required on the survey and/or Plot Plan)

- County (public) roadway
- Private roadway

3. A Plot Plan or Survey with Plot Plan is prepared by a Registered Design Professional (Engineer Per FS 471, Architect per FS 481; Part I or Landscape Architect per FS 481; Part II) and design information is required and shall include the following:

- Proposed Finish Floor Elevation (provide the proposed FFE for each floor within the building envelope)
- Proposed equipment pad elevation for all electrical and mechanical equipment (heating, plumbing and air conditioning equipment and bottom elevation of other service facilities including ductwork)
- Demonstrate proposed property topographic information (demonstrate positive drainage in final grading. Any grading plans not in compliance with FBC requirements must include a letter of explanation from the Registered Design Professional.)
- Proposed driveway & culvert: Driveway width and distance from the side property line to the edge of the driveway (show proposed culvert(s) type and size where required)
- Type of driveway stated on plan (concrete, asphalt, gravel, etc.)
- Septic system: If onsite septic is required, indicate the proposed septic tank location and drainfield setback from property lines(s). (May be prepared by others.)
- Proposed sidewalk, location and elevations

4. A Boundary & Topographic Survey of the property is prepared by a Surveyor and is required and shall include the following:

- Structure(s) located and referenced to the front, side and rear property lines
- F.I.R.M. panel number and effective date
- Flood Zone(s) and Base Flood Elevation(s); show boundary line(s) if multiple zones
- Reference the published BM used for site elevations, provide all elevations with reference to NAVD '88
- Demonstrate existing property topographic information (demonstrate positive drainage in final grading)
- Finish Floor Elevation of structures within 50 feet on the adjacent properties.
- Roadway: Right-of-way width, edge of road or curb elevation, type of surface, location and elevations of swale(s) and existing culvert(s) on adjacent properties up to 100 feet, including invert elevations.

5. Identify work within the right-of-way

_____ DRIVEWAY _____	_____ CABLE TV _____	_____ UNDERGROUND _____
_____ STREET PAVING _____	_____ ELECTRICITY _____	_____ OVERHEAD _____
_____ SIDEWALKS/CURBS _____	_____ TELEPHONE _____	_____ STORM DRAINAGE _____
_____ RIGHT-OF-WAY _____	_____ WATER SYSTEMS _____	_____ CLEARING _____
_____ SANITARY SEWER _____	_____ OTHER _____	

6. For properties one acre or larger (Compensatory Storage may be required):

- A. Is the lot within special flood hazard area A or AE? Yes No (skip B & C)
- B. Did this parcel / lot exist in its present configuration before July 1, 1990? Yes No
- C. Is the lot within:
 - Vero Lake Estates MSTU Yes No
 - St. Johns Marsh Yes No
 - 100-year flood plain of Indian River Lagoon Yes No [930.07(2)(i)1]

7. Will the proposed improvements include any underground storage tanks? Yes No
 If **“yes”**, include the following:

- Location of the storage tanks on the survey
- If located within a SFHA, certification by a Professional Engineer stating that the tank is adequately designed to prevent flotation, collapse or lateral movement during the base flood event.

8. Will the proposed improvements include any of the following conditions? If so, additional information may be required.

- Is any part of the structure less than 0.5 feet above the base flood elevation
- Building addition or interior rehabilitation of an existing structure located in Special Flood Hazard Area Zone A, AO or VE
- Onsite sewage treatment system

NOTE: Resubmittals: Any revisions made to building plans, surveys or plot plans requires submittal in accordance with the original application outline. Written response with the Project / Permit No. must accompany resubmittals. Submittals must be submitted via the customer's MGO Customer Portal. Use the link on the left-hand side of the Home Page- Respond to Permit Comments and Submit Revisions. Use the link labeled – Respond to Engineering Department Comments on a Building Permit to upload all resubmittals.

The information requested on this form is necessary for a complete review of this application. Failure to complete and supply this checklist as part of the application constitutes an incomplete application. Incomplete applications may not be accepted by the County. Failure to supply the pertinent information or providing erroneous information may result in a delay in the review and permitting process while the information is sought.



Definitions

Special flood hazard area an area in the floodplain subject to a one-percent or greater chance of flooding in any given year. Special flood hazard areas are shown on FIRMs as Zone A, AO, A1-A30, AE, A99, AH, V1-V30, VE or V. [Also defined in FBC, B].

Type C Permit a single-family residential (single, duplex, triplex, quadplex) floodplain management permit associated with a structure partially or wholly within a special flood hazard area.

Compensatory Storage floodwater storage volume created on a development site to offset the volume of floodwater storage displaced by development on the site within a floodplain.

Right-of-Way a strip of land dedicated, deeded, used, or to be used for a street, alley, walkway, boulevard, utility installations, drainage facility, access for ingress or egress, or other purpose by the public, certain designated individuals, or governing bodies. Includes Murphy Deed Reservations.

Flood Insurance Rate Map (FIRM) the official map of the community on which the Federal Emergency Management Agency has delineated both special flood hazard areas and the risk premium zones applicable to the community. [Also defined in FBC, B].

Plot Plan- a plan, prepared to scale, showing accurately and with complete dimensioning, the boundaries of a site and the location of all buildings, structures, uses, and principal site development features existing and proposed for a specific parcel of land.



**INDIAN RIVER COUNTY
LAND CLEARING/TREE REMOVAL
EXEMPTION ACKNOWLEDGMENT FORM**

THIS FORM IS TO BE COMPLETED IF IT IS THE APPLICANT'S POSITION THAT NO LAND CLEARING AND/OR TREE REMOVAL PERMIT IS REQUIRED FOR THE PROPOSED DEVELOPMENT PROJECT, IN ACCORDANCE WITH SECTION 927.06, EXEMPTIONS, OF THE INDIAN RIVER COUNTY TREE PROTECTION AND LAND CLEARING ORDINANCE.

Please mark the following appropriate reason(s) as to why a land clearing and/or tree removal permit is not required:

LAND CLEARING EXEMPTION

- _____ The land clearing is on a detached single-family residential lot or parcel having an area of one (1) acre or less, and no mangroves, dune vegetation, or any native vegetation in a conservation easement will be disturbed; **OR**
- _____ The project will not entail the removal or destruction of any living rooted shrubbery or the denuding of a parcel by digging, raking or dragging (reference Chapter 901, Definitions, "Land Clearing").
- _____ The land clearing will not alter any protected vegetation and is for the purpose of a survey (4' wide path max.) Reference Section 927.06 (1).
- _____ The project is a bona fide commercial nursery, tree farm, agricultural operation, silvicultural operation, ranch, or similar operation, and the land clearing to be conducted is in pursuit of said activity. No non-agricultural/non-silvicultural activity will occur on the subject property within two (2) years of clearing completion [reference Section 927.06(5)].

TREE REMOVAL EXEMPTION

- _____ The land clearing is on a detached single-family residential lot or parcel having an area of one (1) acre or less, and no mangroves, dune vegetation, or any native vegetation in a conservation easement will be disturbed; **OR**
- _____ No protected tree is to be damaged or removed. A "protected tree" is any tree having a dbh of 4 inches or more, cabbage palms (Sabal palmetto) with 10 feet or more of clear truck, all specimen and historic trees, and all significant groupings of trees of West Indian or tropical origin of any size, and all mangroves regardless of size; excluding, however, the following trees, regardless of size:

Casuarina spp. - Australian pine
Schinus terebinthifolius - Brazilian pepper
Melaleuca quinquenervia - Melaleuca (pork tree)
Melia azedarach - Chinaberry
 (Citrus trees are not protected trees.)

_____ Any trees to be removed are diseased, dead, dying, or a safety hazard, as verified by County environmental planning staff.

ACKNOWLEDGMENT

I hereby proclaim, to the best of my knowledge, that the proposed land development project will not result in the need for a County land clearing and/or tree removal permit, based on the reason(s) noted.

Project Agent or Owner Signature

Date

Print Name: _____ Email: _____



ACKNOWLEDGMENT FORM

SINGLE-FAMILY LOT TWO-CANOPY TREE REQUIREMENT (Unincorporated Indian River County)

I, the undersigned, hereby acknowledge that two canopy (shade) trees are required to be planted or preserved on the herein described lot prior to County issuance of a certificate of occupancy for a new residence on the property (reference County Code Section 926.15).

I also acknowledge that trees planted to meet this requirement must be Florida No. 1 quality, at least 2” caliper and 12 feet in height at time of planting. Pre-approved species:

Live oak (*Quercus virginiana*)
Diamond-leaf oak (*Quercus laurifolia*)
American holly (*Ilex opaca*)
Sweet gum (*Liquidambar styraciflua*)
Seagrape (*Coccoloba uvifera*)
Slash pine (*Pinus elliottii*)

Laurel oak (*Quercus hemisphaerica*)
Red maple (*Acer rubrum*)
Southern magnolia (*Magnolia grandiflora*)
Sycamore (*Platanus occidentalis*)
Red mulberry (*Morus rubra*)
Cypress (*Taxodium distichum*)

SUBJECT PROPERTY DESCRIPTION:

Tax ID Parcel No. _____
Address: _____
Subdivision: _____
Property Owner: _____

SIGNATURE OF ACKNOWLEDGMENT

Project Agent or Owner Signature
Print Name: _____

Date: _____

To be filled out by County Planning Staff:

CD-Plus Project No. _____
CD-Plus BP No. _____

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[Effective date: March 14, 2005]



Utility Requirements for Sign Off in CD Plus

To ensure Utility Impact fees are processed and signed off in a timely manner
PLEASE make sure to have:

- Permit
- Cost Sheet
- Application for Service
- Check in the amount indicated on cost sheet

Signature Of Acknowledgement

Project Agent or Owner Signature

Print Name: _____

Date: _____

Effective: February 11, 2021



Minimum Requirements for Processing a Request for a Water Meter Installation

The following conditions, as a minimum, are necessary to be eligible for a water meter. When all of the criteria listed below have been met, the customer shall notify Indian River County Utility Services that the location is substantially ready for a meter install.

- All Associated fees and charges MUST be paid.
- The lot MUST be cleared and accessible from the road right-of-way.
- An active/approved County Building Permit MUST be issued and publicly displayed.
- The lot MUST be clearly identified by lot number and/or address.
- The meter box MUST be intact and the curb stop MUST be accessible inside the box. The box should be set to final grade.
- Submit meter request to: meterinstall@indianriver.gov, in person at either customer service location, 1801 27th St, Vero Beach or 1925 US Hwy 1, Sebastian.

Contact Information: When submitting the request for meter install please include the following contact information. The information is needed in order to process your request.

- The name on the account (as it appears on the original application for service).
- The service address.
- A contact name (in case we must contact someone regarding the meter installation).
- The telephone number and e-mail address for the contact person.

Please allow 72 business hours for all meter installations.

Note: If a meter install is requested before the above criteria have been met, you may be subject to additional charges and fees for a service call. In addition, you will have to submit a new request once the site is ready for the meter.

We Thank You in Advance for your Cooperation.



Rick Scott
Governor

John H. Armstrong, MD, FACS
State Surgeon General & Secretary

FLORIDA DEPARTMENT OF HEALTH IN INDIAN RIVER COUNTY

ATTENTION

**BUILDING PERMIT APPLICATIONS ON
PROPERTIES SERVED BY A SEPTIC SYSTEM**

The Health Department must review and approve your plan before your building permit can be issued.

To **expedite** this process, please indicate the location of the septic tank, drainfield, and any well on your site plan, along with the proposed improvement. This includes building applications for pools, detached garages, and additions.

Residential building additions may require modification of the existing septic system.

QUESTIONS?

Call the Indian River County Environmental Health office at 772-794-7440, or stop by our office at 1900 27th Street (across the street).

Florida Department of Health
in Indian River County
1900 27th Street, Vero Beach, FL 32960
PHONE 772/7947400 www.myirchd.com



www.FloridasHealth.com
TWITTER: HealthyFLA
FACEBOOK: FLDepartmentofHealth
YOUTUBE: fldoh