

Yankeetown

6241 Harmony Lane
Yankeetown, Fl. 34498
(352) 447-2511 Phone
(352) 628-7904 Inspection Line
[www.linda@yankeetownfl.org](mailto:linda@yankeetownfl.org)



NEW CONSTRUCTION AND ADDITIONS PERMIT PACKET

Before any development activity occurs on a piece of property, a permit must be obtained. All construction or permitted uses **MUST** meet the current Building Code for the State of Florida. The inspector will perform inspections and provide approval based on these codes.

Apply for Minor Compliance Zoning Permit Before Applying for Building Permit.

Below are a list of items required at time of application submittal. Please note that incomplete applications will **NOT** be accepted.

- Complete permit application, notarized by all applicable parties.

- Copy of signed contract, if applicable.

- Owner-Building Affidavit, unless contractor is performing work.

- Proof of ownership (i.e. Current tax notice, Homestead Exemption notice, Recorded Deed).

- Three copies of the site plan, drawn to scale.

- Three complete sets of signed and sealed construction drawings and supporting documentation

 - Foundation sheet, floor plan and cross section.

 - Truss/rafter uplift load summary sheet and truss layout.

 - Energy Form 600A, B or C.

 - Load calculations for HVAC (manual J and N required on new)

 - HVAC duct layout.

 - Product approval sheets

- Septic tank approval from Levy County Health Department.

- Disclaimer of liability due to flooding and/or unimproved roads.

- Copy of State Contractors or Installers License and proof of Liability Insurance Certificate listing the Town of Yankeetown as the Certificate Holder if contractor is performing work.

- Signed and recorded Notice of Commencement (required for all work exceeding \$2,500).

- Impervious Surface Calculation Sheet.

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Permit Number: _____

Building Code in Effect:
 2023 (Eighth Edition) Florida Building Code

PERMIT APPLICATION

APPLICATION MUST BE FILLED OUT COMPLETELY

I. PROJECT LOCATION/FACILITY INFORMATION			
PROJECT NAME			
ADDRESS			
SUBDIVISION/FACILITY NAME		LOT / UNIT#	
TAX FOLIO # / PARCEL #		ZONING DISTRICT	
LEGAL DESCRIPTION			
II. IDENTIFICATION			
A. OWNER OR LESSEE		EMAIL ADDRESS	FAX NO.
NAME		TELEPHONE NO.	
ADDRESS	CITY	STATE	ZIP CODE
B. BONDING/MORTGAGE NAMES			
Fee Simple Titleholder, Bonding Company, Mortgage Lender and Design Professional information is required when the aggregate value (total cost of all improvements and not just work authorized by the individual permit) is \$2,500 or more (except HVAC repair/replacement > \$7,500).			
NAME	ADDRESS, CITY, STATE & ZIP		TELEPHONE NO.
FEE SIMPLE TITLEHOLDERS (IF OTHER THAN OWNER)	<input type="checkbox"/> SAME AS OWNER		
BONDING COMPANY <input type="checkbox"/> NOT APPLICABLE			
MORTGAGE LENDERS <input type="checkbox"/> NOT APPLICABLE			
DESIGN PROFESSIONAL	LICENSE #		
C. CONTRACTORS		PRIMARY CONTACT EMAIL ADDRESS	PRIMARY CONTACT CELL PHONE NO.
LICENSE #	TYPE	COMPANY NAME	ADDRESS, CITY, STATE & ZIP
TELEPHONE NO.	EMAIL ADDRESS		
GENERAL			
PLUMBING			
GAS			
ELECTRICAL			
HVAC			
OTHER			
III. TYPE OF IMPROVEMENT			
<input type="checkbox"/> NEW BUILDING	<input type="checkbox"/> RELOCATION	<input type="checkbox"/> MANUFACTURED	<input type="checkbox"/> SHELL
<input type="checkbox"/> DECK	<input type="checkbox"/> ADDITION	<input type="checkbox"/> REPAIR	<input type="checkbox"/> MOBILE HOME SET-UP
<input type="checkbox"/> TENANT SPACE	<input type="checkbox"/> ACCESSORY STRUCTURE	<input type="checkbox"/> ALTERATION	<input type="checkbox"/> DEMOLITION
<input type="checkbox"/> POOL/SPA:	<input type="checkbox"/> IN-GROUND	<input type="checkbox"/> ABOVE GROUND	
<input type="checkbox"/> OTHER	ESTIMATED COST OF CONSTRUCTION: \$ _____		
A. WORK DESCRIPTION (Residential and Non-Residential Projects)			
Provide a description of the work to be covered by the permit. As examples; 20,000 sq. ft. office building, building a 2,300 sq. ft. office addition, replace 5 exterior windows, renovate kitchen. etc.			

DATE RECEIVED:



B. DIMENSIONS/DATA

BASIC USAGE: RESIDENTIAL COMMERCIAL INDUSTRIAL MUNICIPAL

CONSTRUCTION AREA: TYPE OF CONSTRUCTION: IA IB IIA IIB IIIA IIIB IV VA VB

CONDITIONED _____ S.F. ELECTRICAL SERVICE: PHASE _____ SIZE _____ AMPS _____ OVERHEAD UNDERGROUND

GARAGE _____ S.F. MECHANICAL (HVAC): GAS ELECTRICAL

OTHER _____ S.F. WATER SUPPLY: MUNICIPAL PRIVATE WELL

TOTAL AREA: _____ S.F. SEWAGE DISPOSAL: MUNICIPAL SEPTIC SYSTEM

IV. OWNER'S AFFIDAVIT / NOTICE OF COMMENCEMENT

Application is hereby made to obtain a permit to perform work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a building 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 & AIR CONDITIONERS, etc. The applicant agrees to comply with the Municipal Ordinances and with the conditions of this permit. Failure to comply may result in suspension or revocation of this permit or other penalty. Applicant understands that the issuance of the permit created no legal liability, express or implied, of the Department, Municipality, Agency, or Inspector.

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 in this jurisdiction.

713.135, FS: 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 RECORDING YOUR NOTICE OF COMMENCEMENT.

FS 553.79(10), FS: NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

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.

STATE OF FLORIDA, COUNTY OF _____ (Signature of Owner or Agent)

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this _____ day of _____, _____, by _____ (name of person making statement)

Personally Known _____ OR Produced Identification _____ (Signature of Notary Public-State of Florida)

Type of Identification Produced: _____ (Print, Type or Stamp Commissioned Name of Notary Public)

STATE OF FLORIDA, COUNTY OF _____ (Signature of Contractors)

Sworn to (or affirmed) and subscribed before me by means of o physical presence or o online notarization, this _____ day of _____, _____, by _____ (name of person making statement)

Personally Known _____ OR Produced Identification _____ (Signature of Notary Public-State of Florida)

Type of Identification Produced: _____ (Print, Type or Stamp Commissioned Name of Notary Public)

V. CERTIFICATE OF COMPETENCY HOLDER

Contractor's State Certification or Registration No. _____

Contractor's Certification of Competency No. _____

APPLICATION APPROVED BY : _____ DATE : _____
 (Building Official/Permit Official)

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SITE PLAN FORM

Date: _____ Parcel I.D.#: _____
Lot #: _____ Block #: _____ Subdivision: _____
Property Address: _____

SETBACKS REQUIRED

RESIDENTIAL RHD-1, RHD-2 & RLD:

Front: 25 ft.
Sides: 8 ft.
Rear: 10 ft.

AGRICULTURE A-1:

Front: none
Sides: none
Rear: none

COMMERCIAL C-1 & C-2:

Front: none
Sides: none
Rear: none

PUBLIC:

Front: none
Sides: none
Rear: none

STREET

1. Show all existing and proposed buildings.
2. Show dimensions of buildings and the distances of all buildings to all property lines.
3. Show all streets abutting property.
4. Indicate with a dashed line, any water or depressions.

FLOOD ZONE (MAP PANEL NO. 1295820001B - Effective date 2/1/1987)

Choose one: This building site is located within a flood prone area.
 This building site is **not** located within a flood prone area.

Zoning Office: _____ Date: _____

I acknowledge that there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required from other entities such as water management, state or county agencies and federal agencies.

Owner/Agent

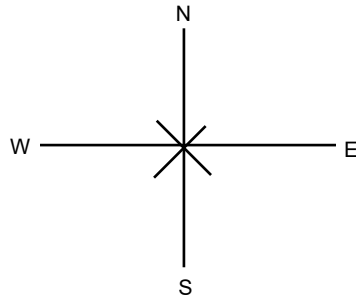
Date

Yankeetown

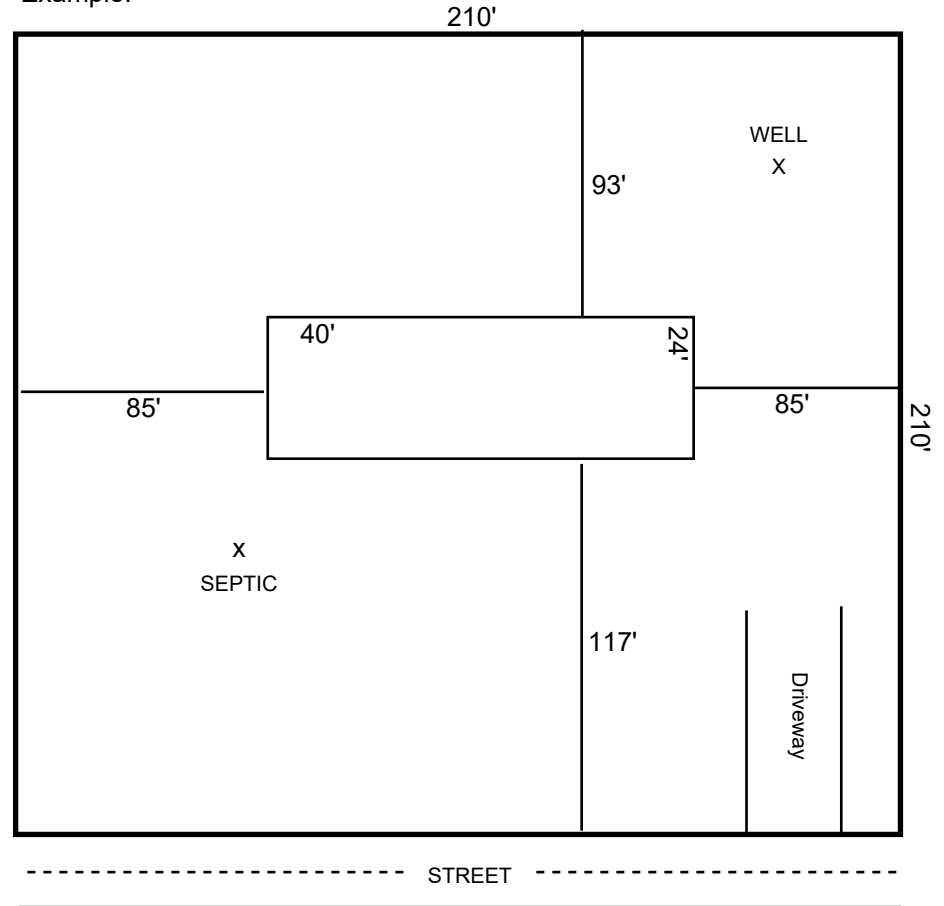
SITE PLAN

LEGAL DESCRIPTION

1. Show shape and dimensions of property.
2. Show all existing and proposed buildings.
3. Show dimensions of buildings and the distance of all buildings to all property lines.
4. Show all streets abutting property.
5. Indicate, with a dashed line, any water or depressions.



Example:



LEGAL DESCRIPTION

Parcel #: _____

Subdivision: _____ Lot: _____ Block: _____

Section: _____ Township: _____ Range: _____

Metes and Bounds: _____

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HOMEOWNER AFFIDAVIT

Parcel ID #: _____
Property Owners Name: _____
Property Owners Address: _____

The undersigned, being first duly sworn by me an officer authorized to take oaths and make acknowledgments in the State of Florida as follows:

Notice to Property Owner: Prior to filling out a Notice of Commencement, it is important to consult an attorney or any lending institution that you may have applied for a mortgage or construction loan to finance the improvements to your property.

The Notice of Commencement should not be filed before the mortgage or construction loan is closed.

"FAILURE TO COMPLY WITH THE MECHANICS' LIEN LAW CAN RESULT IN THE PROPERTY OWNER PAYING TWICE FOR THE BUILDING IMPROVEMENTS". NOTICE OF COMMENCEMENT MUST BE FILED WITH THE CLERK OF THE COURT, AND A COPY MUST BE PROVIDED TO THE YANKEETOWN PRIOR TO THE FIRST INSPECTION.

Property Owners Signature

Date

STATE OF FLORIDA, COUNTY OF _____
Sworn to and subscribed before me by means of physical presence or online notarization, this
_____ day of _____, 20_____
by _____.

Personally Known _____ OR

Produced Identification _____

Type of Identification Produced: _____

Signature of Notary Public - State of Florida

Print, Type or Stamp Commissioned Name of Notary Public

OWNER/BUILDER DISCLOSURE STATEMENT

F.S. Chapter 489, CONTRACTING; PART 1 CONSTRUCTION CONTRACTING (SS 489.103): State law requires construction to be done by licensed 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 contractor even though you do not have a license. You must supervise the construction yourself. You may build or improve a commercial building at a cost of \$75,000 or less. The building must be for your own use or occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within one 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 unlicensed person as your contractor. 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. **Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct FICA and withholding tax and provide worker's compensation for that employee, all as prescribed by law.** Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

Section 6. Subsection (1) of Section 455.228 Florida Statutes - F.S. 455.228 Unlicensed practice of a profession; cease and desist notice; civil penalty; enforcement.-----

(1) When the department has probable cause to believe that any person not licensed by the department or the appropriate regulatory board within the department or the appropriate regulatory board within the department has violated any provision of this chapter or any statute that relates to the practice of a profession regulated by the department, or any rule adopted pursuant thereto, the department may issue and deliver to such person a *notice to cease and desist* from such violation. In addition, the department may issue and deliver a notice to cease and desist to any person who aids and abets the unlicensed practice of a profession by employing such unlicensed person. For the purpose of enforcing a cease and desist order, the department may file a proceeding in the name of the state seeking *issuance of an injunction or a writ of mandamus* against any person who violates any provisions of such order. In addition to the foregoing remedies, the department may impose an administrative penalty not to exceed **\$5,000.00 per incident**, pursuant to F.S. 120.58, it shall be entitled to collect its attorney's fees and costs, together with any cost of collection.

FLORIDA BUILDING CODE 2023, BUILDING 105.3.6 ASBESTOS REMOVAL: State law requires asbestos abatement to be done by licensed 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 asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within one year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. 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. **Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct FICA and withholding tax and provide worker's compensation for that employee, all as prescribed by law.**

ANY PERSON WHO AIDS AND ABETS UNLICENSED CONTRACTORS OR SUBCONTRACTORS WILL FACE IMPOSED PENALTIES AS PROVIDED BY LAW.

1. I understand that state law requires construction to be done by a licensed contractor and 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, may act as my own contractor with certain restrictions even though I do not have a license. **OWNER INITIAL _____**

2. 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. **OWNER INITIAL _____**

3. I understand that, as an owner/builder, I am the responsible party of record on a 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 permits and contracts. **OWNER INITIAL _____**

4. 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 if the costs do not exceed \$75,000. 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 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 exemption. **OWNER INITIAL _____**

5. I understand that, as the owner/builder, I must provide direct, onsite supervision of the construction. **OWNER INITIAL _____**

[RETURN TO TOC](#)

6. 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 licenses required by law and by county or municipal ordinance.

OWNER INITIAL _____

7. 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.

OWNER INITIAL _____

8. I understand that I may not delegate the responsibility for supervising work to a 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 workers' compensation.

OWNER INITIAL _____

9. 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.

OWNER INITIAL _____

10. I understand that I may obtain more information regarding my obligations as an employer from 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 WWW.DBPR.COM for more information about licensed contractors.

OWNER INITIAL _____

11. 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 : _____.

OWNER INITIAL _____

12. I agree to notify the Building Department, immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

OWNER INITIAL _____

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 workers' compensation coverage.

This _____ Day of _____ the Year _____, I, the undersigned, have read the preceding and understand the responsibility of acting as my own contractor, and having been noticed of the above Florida Statutes, will abide by the laws governing the municipality having jurisdiction and the State of Florida.

I further state that I have the knowledge and ability to do the work proposed, and I assume full responsibility for familiarizing myself with all the municipality having jurisdiction codes and building regulations. In the event a building inspector requires corrections to be made, I will make such corrections and call for a re-inspection before proceeding. I understand the Building Department is not responsible for instructing me on what to do. I understand I may subject myself to code enforcement action by not requesting and obtaining, Final Inspection Approval prior to engaging in the use of the proposed development.

STATE OF FLORIDA, COUNTY OF _____

SIGNATURE OF OWNER/BUILDER AND DATE

I HEREBY CERTIFY that on this day, the forgoing instrument was sworn to (or affirmed), by means of physical presence or online notarization, on this _____ day of _____, _____, who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

NOTARY PUBLIC



Product Approval Statewide

The implementation date for the Florida Product Approval System was October 1, 2003. Rule 9B-72 of the Florida Building Commission establishes a higher standard of practice for product evaluations, as well as uniformity and consistency of enforcement statewide.

The Rule covers the following eight categories of products: (Items in parentheses are examples of sub-categories of products specific functionality, but are not limited to these examples)

1. **Exterior Doors** (rollup, sectional, sliding, swinging, automatic or other)
2. **Windows** (awning, casement, dual action, double hung, single hung, fixed, horizontal slider, projected, pass through, mullions, wind breaker or other)
3. **Panel Walls** (siding, soffits, exterior insulation finish system (EIFS), storefronts, curtain walls, wall louver, glass block, membrane, greenhouse, or other)
4. **Roofing Products** (built up roofing, modified bitumen roof system, single ply roof systems, spray applied polyurethane roof system, roofing fasteners, roofing insulation, asphalt shingles, wood shingles and shakes, roofing slate, roof tile adhesives, cement-adhesives-coatings, liquid applied roof systems, underlayments, non-structural metal roofing, roofing tiles, waterproofing or other)
5. **Shutters** (accordion, bahama, storm panels, colonial, roll-up, equipments or other)
6. **Skylights** (skylight or other)
7. **Structural Components** (truss plates, wood connectors, anchors, coolers-freezers, sheds, concrete admixtures, insulation forms, engineered lumber, material, plastics, wall, deck-roof, railing or other)
8. **Products Comprising a Building's Envelope Introduced as a Result of New Technology**(as applicable)

The product approval system includes a statewide website for submittal of applications and payment of fees for statewide product approvals. In addition, a database is available to search a list of approved entities and products approved for state wide use. For more information on statewide product approval and the Florida Building Code, visit www.floridabuilding.org or call the Florida Department of Community Affairs at (850) 487-1824 or (877) FLA-DCA-2 and ask to speak to someone in the Codes and Standards Section.

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 at www.floridabuilding.org.

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
1. EXTERIOR DOORS			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
2. WINDOWS			
A. SINGLE/DOUBLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
3. PANEL WALL			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
4. ROOFING PRODUCTS			
A. ASPHALT SHINGLES			
B. NON-STRUCT METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
5. STRUCT COMPONENTS			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
6. NEW EXTERIOR			
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 jobsite; (1) copy of the product approval (2) performance characteristics which the product was tested and certified to comply with (3) copy of the applicable manufacturer's installation requirements. Further, I understand these products may have to be removed if approval cannot be demonstrated during inspection.

APPLICANT SIGNATURE

DATE

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**ZONING, LAND DEVELOPMENT REGULATIONS,
LOT/YARD/HEIGHT REGULATIONS**

NOTICE TO PROPERTY OWNERS AND CONTRACTORS

"It is the responsibility of the landowner to establish the true boundaries of property, to enable the Town of Yankeetown to confirm compliance with the setback requirements. On smaller parcels, this may be accomplished by the use of string or wire between corners, or by the staking out of the building foundation by licensed surveyors. Regardless of the size of the parcel, when there remains question, require a Licensed Professional Surveyor to locate the foundation on a survey map and provide it to the office of the Building Official. The survey is to be at the land owners expense."

Property Owner Signature: _____

Property Owner Print Name: _____

Date: _____

Contractor Signature: _____

Contractor Print Name: _____

Date: _____



Town of Yankeetown

Building Department

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Yankeetown, Florida 34498
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Email: linda@yankeetownfl.org

INSTRUCTIONS FOR NOTICE OF COMMENCEMENT

These Instructions guide the Permittee through completing the Notice of Commencement form. The Notice is available on upon request via email to linda@yankeetownfl.org as a downloadable interactive PDF form. Save a copy on your hard drive and fill it in. *All sections of the Notice of Commencement must be completed; if a response does not apply, mark N/A. Please do not submit these instructions with your completed form.*

Instructions for Permit and Parcel/Folio Numbers

- A Permit #-** insert the Permit Number, which can be found on the Permit Application for improvements.
- B. Parcel/Folio #-** the Parcel and Folio numbers can be found on the Levy County Property Appraiser website: <http://www.qpublic.net/fl/levy/search.html>

Instructions for Section B. General Permit Information

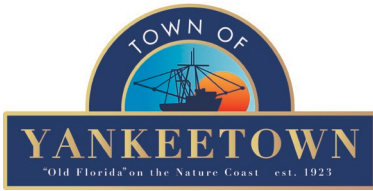
- 1 Description of Property** - insert legal description (required), and street address (if available), of the property being improved. Legal descriptions can be found on the Levy County Property Appraiser website <http://www.qpublic.net/fl/levy/search.html>. Property Description must match the description on the Permit Application.
- 2. General Description** - insert a description of the improvements taking place. The description must be work scope specific and match the Permit.
- 3. Owner Information** - enter the owner's information, (*or enter Lessee's Information if the Lessee is the person who contracted the improvement*). Include name, address, interest in the Property, and name and address of Fee Simple Titleholder (*if different from Owner listed above*).
- 4. Contractor Information** - enter the Contractor's Name, Address, and Phone Number.
- 5. Surety-** check "Yes" or "No". Information is needed if applicable. Include a copy of the payment bond as an attachment. Provide Surety name, address, phone number, and amount of bond. If none, check "N/A".
- 6. Lender Information** - insert Lender name, address, and phone number, if applicable. If none, check "N/ A".
- 7. Person(s) to be Noticed** - include Persons within the State of Florida Designated by Owner to be served with Notices or other documents as provided by Section 713.13 (l)(a)7. Insert the name(s), address(es), and phone number(s) of designated person(s). If none, check "N/ A".
- 8. Owner Designee** - add person whom Owner designates (in addition to him/herself) to receive a copy of Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes, by inserting their name and phone number. If none, check "N/A".
- 9. Expiration Date** - insert the expiration date of the Notice of Commencement (*the expiration date may not be before the completion of construction and that payment to the contractor, and will be 1 year from the date of recording unless a different date is specified*).

Instructions for Notary

Notary-the Notary must complete all areas of the acknowledgment in full.

Certified Copy Required

Certified Copy- only a CERTIFIED COPY of the Notice of Commencement will be accepted. Notices can be recorded for certification purposes by the **Levy County Clerk of Court, (352) 486-5266**, for mailing or in-person instructions.



NOTICE OF COMMENCEMENT

State of Florida

County of Levy

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida State Statutes, the following information is provided in this Notice of Commencement.

1. Description of Property: (Legal description of the property): _____
Property Address: _____
2. General Description of Improvement: _____
3. Owner Information: Name: _____
Address: _____ City: _____ State _____
Interest in Property: _____
Name and Address of Fee Simple Titleholder (If other than owner): _____
4. Contractor: Name: _____
Address: _____ City: _____ State _____
Phone No. _____ Fax No. _____
5. Surety: Name: _____ Amount of Bond \$ _____
Address: _____ City: _____ State _____
Phone No. _____ Fax No. _____
6. Lender: Name: _____
Address: _____ City: _____ State _____
Phone No. _____ Fax No. _____
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:
Name: _____
Address: _____ City: _____ State _____
Phone No. _____ Fax No. _____
8. In addition to himself or herself, Owner designates ___ of _____
to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b). Florida Statutes.
9. 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 OWNE AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SEC 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 by means of physical presence or on-line notarization, this ___ day of _____, 20___, 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)
____ Personally Known OR ___ Produced Identification
Type of Identification Produced _____

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

Yankeetown

6241 Harmony Lane
Yankeetown, Fl. 34498
(352) 447-2511 Phone
(352) 447-0774 Fax
(352) 628-7904 Inspection Line
[www.linda@yankeetownfl.org](mailto:linda@yankeetownfl.org)



**MAXIMUM IMPERVIOUS COVERAGE
SURFACE CALCULATION SHEET**

ALL PERMIT APPLICATIONS FOR BUILDING ADDITIONS, ACCESSORY STRUCTURES, POOLS, POOL DECKS, DECKS, DWELLINGS, WALKWAYS, DRIVEWAYS, PAVERS OR ANYTHING ELSE COVERING THE LAND MUST BE ACCOMPANIED BY A PLOT PLAN INDICATING ALL STRUCTURES AND IMPERVIOUS SURFACES THAT EXIST ON THE PROPERTY.

PLEASE COMPLETE THE FOLLOWING

- A. SQUARE FOOTAGE OF EXISTING HOUSE (FOOTPRINT ONLY) _____
- B. SQUARE FOOTAGE OF CARPORT/GARAGE _____
- C. SQUARE FOOTAGE OF SHED OR DETACHED STRUCTURE _____
- D. SQUARE FOOTAGE OF DECK OR COVERED PORCH _____
- E. SQUARE FOOTAGE OF DRIVEWAY _____
- F. SQUARE FOOTAGE OF ALL CONCRETE AREAS (EXCLUDING THE PEDESTRIAN SIDEWALK) _____
- G. SQUARE FOOTAGE OF POOL AND POOL DECKING _____
- H. SQUARE FOOTAGE OF PROPOSED IMPERVIOUS AREA
TOTAL SQUARE FOOTAGE OF IMPERVIOUS COVERAGE
(A+B+C+D+E+F+G+H) _____
- I. TOTAL SQUARE FOOTAGE OF LOT _____

TO COMPLETE THE MAXIMUM SQUARE FOOTAGE OF IMPERVIOUS COVERAGE ALLOWED ON A LOT, MULTIPLY THE PERCENTAGE ALLOWED IN YOUR ZONING DISTRICT BY THE TOTAL SQUARE FOOTAGE OF THE LOT (EXPAMPLE: A LOT MEASURING 7,500 SQ.FT. WITH A 50% ALLOWABLE COVERAGE WOULD HAVE AN ALLOWABLE MAXIMUM IMPERVIOUS COVERAGE OF 3,750 SQ. FT.)



TOWN OF YANKEETOWN

Application # _____

Parcel # _____

MINOR PROJECT COMPLIANCE CERTIFICATE

GENERAL REQUIREMENTS:

APPLICATIONS SUBMITTED AFTER START OF WORK WILL TRIPLE THE APPLICATION FEE.

Fees are as follows:

Addition/remodel <\$1500.....	\$25
Addition/remodel >\$1500.....	\$55
Single family dwelling	\$88
Multi family dwelling.....	\$220 plus \$22/family

Pick up application from the zoning official, town hall, or the Town website.

Return all four pages of the completed form, with necessary attachments, and appropriate fee to town hall by mail or in person. Make check payable to Town of Yankeetown.

Payment in full is required before final determination of any application.

There shall be a charge to applicant over and above posted fees when costs incurred by the Town of Yankeetown to process applications exceed posted fees. Costs billed shall include the time of the zoning official, billed at the hourly rate of the zoning official. Other costs may include, but are not necessarily limited to: contract support engaged by the zoning official for an individual project for the purpose of reviewing and reporting on applications and all pertinent material related to applications of changes; newspaper ads, certified mail, office staff time, copies billed at the current rate, and any other costs to the town. Contract support, services, and materials shall be purchased or contracted by the Town of Yankeetown with vendors to be determined at the sole discretion of the Town of Yankeetown.

Upon completion of review or for additional information, the zoning official will call the phone number listed on application. Difficulty in contacting applicant could delay process.

If the property owner is not making the application and an agent is acting on behalf of the owner an Agent Authorization Form (form 10) must be completed by the owner and notarized.

HOW TO COMPLETE APPLICATION:

- A. Applicant fills out the pages 3 and 4.
- B. Attach three sets of blue prints showing the complete structure. Two complete sets will be returned upon completion of the review. The Health Department will inspect the septic system. The Yankeetown Zoning Official will inspect for code compliance.
- C. Attach three copies of site plan, site survey and construction plans as necessary.
- D. Attach a copy of the deed or tax file showing proof of ownership of the property in question.
- F. A certified elevation survey must be completed after the finish floor is completed, indicating that the finished floor and supporting floor structure is above the flood height requirements indicated on the Flood Compliance Certificate. A stamped copy of the elevation certificate must be submitted to the Yankeetown Zoning Official before a certificate of occupancy will be issued.
- G. Insure all signatures are included as necessary.
- H. New construction requires an application for a 911 address from Levy County.
- I. If construction is on a county road; C40, C40A, Allen Park Road, Riverside Drive, or 63rd

- Street, a driveway permit is required from Levy County.
- J. An Agent Authorization Form (form 10) may be required.
 - K. An excavation and fill permit from Yankeetown is required for septic installations.
 - L. A tree permit may be required.
 - M. If you have any questions about what is required please contact the Zoning Official.

YANKEETOWN TOWN HALL

Telephone: 352-447-2511

Fax: 352-447-0774

Email: yankeetownth@gmail.com

6241 Harmony Lane, Yankeetown, FL
34498

ZONING OFFICIAL

Telephone: 352-628-7904 Cell: 352-436-5192

Fax: 352-628-7758

Email: dallas@fmsbuildingdepartment.com

6241 Harmony Lane, Yankeetown, FL 34498

Mail form to Town Hall address

TOWN OF YANKEETOWN

APPLICATION FOR MINOR PROJECT COMPLIANCE CERTIFICATE

PLEASE PRINT OR TYPE

Date: _____

A. Legal description of property:

Parcel #[s] _____

911 Address _____

B. Names, addresses and phone numbers of all owners. Use back if necessary.

1. _____ 2. _____

() _____ () _____

C. Use(s) 1. Existing _____

2. Proposed _____

D. Type of septic system: Performance based or Other _____

E. If project is located in Residential Environmentally Sensitive area provide wetlands jurisdictional information as approved by USACOE or DEP.

F. Site survey prepared by a Florida State licensed land surveyor, showing the following information as indicated by check marks supplied by Zoning Official.

- ___ 1. Entire property owned and to be developed including lot dimensions.
- ___ 2. Location of existing and proposed improvements, to include septic, structure, dock, etc.
- ___ 3. Existing elevation at corners and center of the proposed structure.
- ___ 4. Existing grade elevation at the center of the proposed accessory structure.
- ___ 5. Existing elevations at the corners and center of the lot.
- ___ 6. Distances/setbacks to property lines and other structures.
- ___ 7. Location of wetlands or water bodies and appropriate demarcation lines.
- ___ 8. Location of archaeological sites within property boundaries in conservation area.
- ___ 9. Location of water retention facilities.

G. Construction plans for the proposed improvement as necessary to show:

- ___ 1. Proposed first floor elevation.
- ___ 2. Pedestrian, handicapped access.
- ___ 3. Proposed building height to highest point of or on the roof.
- ___ 4. Proposed floor elevation of non-habitable structures.

H. Site plan drawn to scale showing the following information as indicated by check marks supplied by Zoning Official.

- ___ 1. Placement of the structure.
- ___ 2. Set backs from the property/water lines/wetlands.

- ___3. Location of driveway.
- ___4. Location of proposed well.
- ___5. Location of water and electrical services.
- ___6. Location of proposed septic.
- ___7. Grading plan showing rain water run-off flow direction and site water retention.
- ___8. Location of trees >4" DBH and species identification for all trees within 20' of structure, within setback area, and within the building envelope area of the proposed structure.
- ___9. Location of any existing well, septic, structure, electrical service, etc.
- ___10. Location and amounts of any fill or excavation, for example septic, driveway, etc.

NOTE

If any of the required site plan information is included on the site survey it need not be repeated here.

NOTE

If any site plan required information is unavailable application may be held up. Submit an updated site plan as soon as information is available. Information may be included on site survey

- I. If well is proposed submit SWFWMD water use permit. Well permit is also required.
- J. If excavation or fill is proposed an excavation and fill permit will also be required.
- K. If dock is proposed a dock permit will also be required.
- L. If tree removal is proposed a tree permit will be required.
- M. Estimated construction cost of project: \$ _____

N. Owner Certification: I certify that I am the owner or one of the owners of this property and that the information provided on this form and the attachments is accurate, and that I am aware of my responsibilities under the Town of Yankeetown Code. (Circle correct underlined statement.)

Date: _____ Signature: _____

O. Agent Certification: I certify that I am the agent for the owner and that the information provided on this form and the attachments is accurate, and that I have informed the owner(s) of their responsibilities as stated above. Agent Authorization Form, Form 10, properly notarized must be attached.

Date: _____ Signature: _____

NOTICE:

IN ADDITION TO THE REQUIREMENTS OF THIS CERTIFICATE OF COMPLIANCE THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THE PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY AS DEED COVENANTS, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS; WATER MANAGEMENT DISTRICT, STATE, COUNTY, OR FEDERAL AGENCIES.. I have read this notice: _____

Signature of agent or owner