

**Town of Bronson**  
650 Oak Street  
Bronson, FL 32621  
(352) 486-2354 Phone  
(351) 486-6262 Fax  
[www.townofbronson.org](http://www.townofbronson.org)

## BUILDING PERMIT REQUIREMENTS FOR NEW CONSTRUCTION AND ADDITIONS

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.

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.
- Four 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 Environments Health Department unless on central sewer system.
- 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 Bronson as the Certificate Holder if contractor is performing work.
- Signed and recorded Notice of Commencement (required for all work exceeding \$2,500).

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Permit Number: \_\_\_\_\_

**PERMIT APPLICATION**  
**APPLICATION MUST BE FILLED OUT COMPLETELY**

I. PROJECT LOCATION/FACILITY INFORMATION		DATE RECEIVED:	
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
GENERAL	TELEPHONE NO.	EMAIL ADDRESS	
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.

**PERMIT APPLICATION**

**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 \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_  
(Signature of Owner or Agent)  
(Name of person making statement)

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)

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, by \_\_\_\_\_  
(Signature of Contractors)  
(Name of person making statement)

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)

**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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# 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 TOWN OF BRONSON PRIOR TO THE FIRST INSPECTION.

\_\_\_\_\_  
Property Owners Signature

\_\_\_\_\_  
Date

STATE OF FLORIDA, COUNTY OF \_\_\_\_\_  
Sworn to and subscribed before me 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 2014, 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** \_\_\_\_\_

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 off 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, before me on this \_\_\_\_\_ day of \_\_\_\_\_, \_\_\_\_\_, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification and who did/did not take an oath.

\_\_\_\_\_  
NOTARY PUBLIC

Record and Return to:

File No: \_\_\_\_\_ Prepared by: \_\_\_\_\_ Name \_\_\_\_\_  
Permit No.: \_\_\_\_\_ Address: \_\_\_\_\_  
Key No. \_\_\_\_\_  
Tax Folio/Parcel ID: \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

State of Florida County of \_\_\_\_\_

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 OWNER 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

State of Florida, County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by \_\_\_\_\_, as  
(Name of Person)

\_\_\_\_\_ for \_\_\_\_\_  
(Type of authority e.g., office, trustee, attorney in fact) (Name of party on behalf of who instrument was executed)

\_\_\_\_\_  
Signature of Notary

\_\_\_\_\_  
Print, Type or Stamp 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

**RETURN TO TOC**

**Air Conditioning Change Out Form**  
**Florida Building Code 5th Edition (2014)**  
**Air Conditioning System**

Residential \_\_\_\_\_ Commercial \_\_\_\_\_  
Single Package Unit: \_\_\_\_\_ Split System \_\_\_\_\_ Ductless Mini \_\_\_\_\_  
Any Duct Replacement: \_\_\_\_\_ Yes \_\_\_\_\_ No  
Refrigerant Line Replacement: \_\_\_\_\_ Yes \_\_\_\_\_ No  
\*Rooftop A.C. Stand Installation : \_\_\_\_\_ Yes \_\_\_\_\_ No  
\*Smoke Detector Installation (over 2000 cfm) : \_\_\_\_\_ Yes \_\_\_\_\_ No

**\*Commercial Permits Only**

**One form required for each separate A/C system installed**

**NEW REPLACEMENT System Components**

Manufacturer \_\_\_\_\_  
**AIR HANDLER** Model No \_\_\_\_\_  
SEER/EER \_\_\_\_\_  
Size \_\_\_\_\_ tons Heat Strip \_\_\_\_\_ KVA/KW  
HACR Breaker/Fuse size:  
\_\_\_\_\_ Min. \_\_\_\_\_ Max.  
Wire size \_\_\_\_\_  
Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
Refrigerant type \_\_\_\_\_  
Location: \_\_\_\_\_ Existing \_\_\_\_\_ New  
Configuration: \_\_\_\_\_ Horizontal \_\_\_\_\_ Vertical

Manufacturer \_\_\_\_\_  
**CONDENSER** Unit Model No \_\_\_\_\_  
SEER/EER \_\_\_\_\_  
Size \_\_\_\_\_ tons  
HACR Breaker/Fuse size:  
\_\_\_\_\_ Min. \_\_\_\_\_ Max.  
Wire size \_\_\_\_\_  
Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
Refrigerant type \_\_\_\_\_  
Location: \_\_\_\_\_ Existing \_\_\_\_\_ New  
Location: \_\_\_\_\_ Ground \_\_\_\_\_ Roof top

**OLD EXISTING System Components**

Manufacturer if known \_\_\_\_\_  
SEER/EER if known \_\_\_\_\_  
Size \_\_\_\_\_ tons Heat Strip \_\_\_\_\_ KVA/KW  
Existing HACR Breaker/Fuse size: \_\_\_\_\_  
Existing Wire size \_\_\_\_\_ (A.W.G.)  
Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
Refrigerant type \_\_\_\_\_

Manufacturer if known \_\_\_\_\_  
SEER/EER if known \_\_\_\_\_  
Size \_\_\_\_\_ tons  
Existing HACR Breaker/Fuse size: \_\_\_\_\_  
Existing Wire size \_\_\_\_\_ (A.W.G.)  
Refrigerant piping sizes (Liq) \_\_\_\_\_ (Suc) \_\_\_\_\_  
Refrigerant type \_\_\_\_\_

**Certification**

With the authorization of the installing Contractor, I certify that the information entered on this form accurately represents the system(s) installed.

\_\_\_\_\_  
Signature of applicant

\_\_\_\_\_  
Date



## 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](http://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](http://www.floridabuilding.org).

Category/Subcategory	Manufacturer	Product Description	Approval Number(s)
<b>1. EXTERIOR DOORS</b>			
A. SWINGING			
B. SLIDING			
C. SECTIONAL/ROLL UP			
D. OTHER			
<b>2. WINDOWS</b>			
A. SINGLE/DOUBLE HUNG			
B. HORIZONTAL SLIDER			
C. CASEMENT			
D. FIXED			
E. MULLION			
F. SKYLIGHTS			
G. OTHER			
<b>3. PANEL WALL</b>			
A. SIDING			
B. SOFFITS			
C. STOREFRONTS			
D. GLASS BLOCK			
E. OTHER			
<b>4. ROOFING PRODUCTS</b>			
A. ASPHALT SHINGLES			
B. NON-STRUCT METAL			
C. ROOFING TILES			
D. SINGLE PLY ROOF			
E. OTHER			
<b>5. STRUCT COMPONENTS</b>			
A. WOOD CONNECTORS			
B. WOOD ANCHORS			
C. TRUSS PLATES			
D. INSULATION FORMS			
E. LINTELS			
F. OTHERS			
<b>6. NEW EXTERIOR</b>			
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.

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APPLICANT SIGNATURE

DATE

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