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COMMISSIONERS  
BRANDON ALDRIDGE  
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## LYNN HAVEN BUILDING DEPARTMENT

### APPLICATION FOR BUILDING PERMIT

#### Residential Alteration or Renovation (not adding square footage)

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

Owner's Name: \_\_\_\_\_

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

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

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

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

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

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

FL License #: \_\_\_\_\_

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

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

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

\_\_\_\_\_

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

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

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

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

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

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

Alteration or Renovation to what area of the building: \_\_\_\_\_

Please include a complete and detailed scope of work along with one (1) complete set of paper plans, drawn to scale, and (1) one digital disc for a total of two sets.

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

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

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

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

Please enter the measurements from Site Plans:

Distance from property line: Front \_\_\_\_\_ Side \_\_\_\_\_ Side (Street) \_\_\_\_\_  
Rear \_\_\_\_\_ Total Lot Size \_\_\_\_\_ Impervious Surface Area \_\_\_\_\_  
Driveway(s) Area \_\_\_\_\_ Walk Path Area \_\_\_\_\_ Garage Area \_\_\_\_\_  
Porches Area \_\_\_\_\_ House Footage \_\_\_\_\_ Total Area \_\_\_\_\_  
Heated/Cooled \_\_\_\_\_ Number of Stories \_\_\_\_\_  
Type of Roof \_\_\_\_\_ Type of Walls \_\_\_\_\_  
Extreme Dimensions of Length \_\_\_\_\_ Height \_\_\_\_\_ Width \_\_\_\_\_  
Flood Zone \_\_\_\_\_ Lowest Floor Elev. \_\_\_\_\_

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 the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, and etc.

For improvements to real property with a construction cost of \$2,500 or more, a certified copy of the Notice of Commencement is required to be submitted to the Lynn Haven Building Department when application is made for a permit or the applicant may submit a copy of the Notice of Commencement along with an affidavit attesting to this recording. A certified copy of the Notice of Commencement must be provided to the Lynn Haven Building Department before the first can be performed and posted on the jobsite.

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

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

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

**CONTRACTOR'S/OWNER'S AFFIDAVIT:**

I hereby certify that the information contained in this Application is true and correct and that all work will be done in compliance with all applicable laws regulation construction and zoning.

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

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

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

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

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

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

Application approved by: \_\_\_\_\_ **Plans Reviewer**

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**NOTICE OF COMMENCEMENT**

State of Florida  
County of Bay

To Whom It May Concern:

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

Description of property (legal description of the property, and street address if available): \_\_\_\_\_

General description of improvement: \_\_\_\_\_

Owner Name: \_\_\_\_\_

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

Owner's interest in site of the improvement: \_\_\_\_\_

Fee Simple Titleholder Name: \_\_\_\_\_

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

Contractor Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Payment Bond Surety: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_ Amount of Bond: \_\_\_\_\_

Lender Name: \_\_\_\_\_

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

Phone Number: \_\_\_\_\_

Person 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 \_\_\_\_\_

Phone Number: \_\_\_\_\_

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. Phone Number: \_\_\_\_\_

Expiration date of **Notice of Commencement** is one (1) year from date of recording unless a different date is specified \_\_\_\_\_.

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

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_,  
by \_\_\_\_\_ (name of person making statement).

\_\_\_\_\_  
Signature of Notary Public (State of Florida)

NOTARY SEAL

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_

Type of Identification Produced \_\_\_\_\_

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROVER 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 ON RECORDING YOUR NOTICE OF COMMENCEMENT.

# CONSTRUCTION DETAIL CHECKSHEET

APPLICABLE FOR A LENGTH TO WIDTH RATIO OF 2:1 ONLY (WIDTH IS ENDWALL)  
A MIN. OF 50% OF WALL MUST BE SHEATHED WITH FULL HEIGHT SHEATHING

ROOF PITCH GREATER THAN 7:12 REQUIRES ENGINEERING

MIN. 15/32" ROOF SHEATHING  
NAILED WITH 8d RING-SHANK 6" O.C.  
GABLES NAILED 4" O.C. ON FIRST  
TWO FRAMING MEMBERS

SHINGLES NAILED PER MANUFACTURER  
MUST MEET ASTM D3161 CLASS F  
ASTM D7158 CLASS H, OR TAS 107

**ROOF STRUCTURE**

TRUSSES

HAND FRAMED

**ROOF COVERING**

SHINGLES

OTHER DESCRIBE

**ROOF SLOPE**

7/12 MAXIMUM  7/12

**EXTERIOR FINISH**

STUCCO

SIDING

BRICK

OTHER DESCRIBE

**INTERIOR FINISH**

DRYWALL

PANELING

OTHER DESCRIBE

**FOUNDATION**

MONOLITHIC ANCHOR BOLTS 18" D.C.

STEMWALL ANCHOR BOLTS, 18" D.C.

WOOD FLOOR & STEMWALL ANCHOR BOLTS, 2 FT. O.C.

ENGINEERED DESIGN IS REQUIRED FOR PERIMETER SPOT PIERS OR PILE FOUNDATIONS

TRUSSES MUST BE ENGINEERED

RAFTERS AND CEILING JOISTS MUST MEET SPAN TABLES

TRUSS/RAFTER CONNECTOR INSTALLED PER MANUFACTURER TO MEET UPLIFT

DOUBLE TOP PLATE WITH MIN. 4 FT. OVERLAP

MAX. OVERHANG ON GABLE END IS 12 INCHES

MIN. 15/32 IN. SHEATHING NAILED WITH 10d NAILS AT 3 IN. O.C. ON PANEL EDGES, AND AT 12 IN. O.C. IN THE FIELD

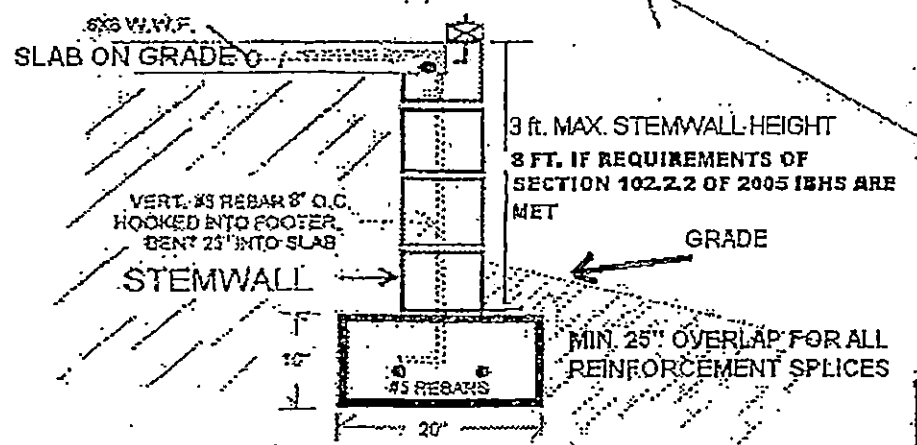
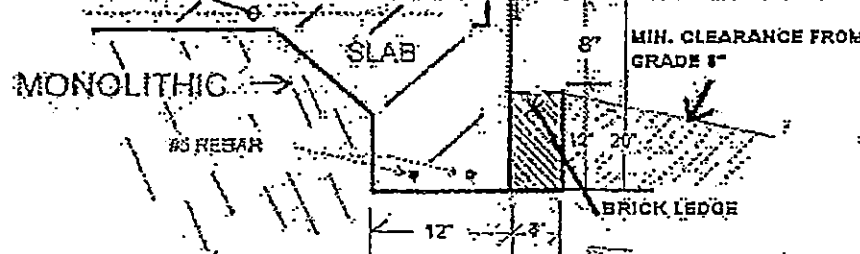
BENDING STRESS FOR EXTERIOR BEARING STUDS:  
8 ft. WALLS: 2090 FOR 2x4, 845 FOR 2x6  
9 ft. & 10 ft.: 3310 FOR 2x4, 1335 FOR 2x6  
GREATER THAN 10 ft. REQUIRES ENGINEERING

PRESSURE TREATED BOTTOM PLATE 5/8" x 10" ANCHOR BOLTS WITHIN 6"-12" OF EACH END OF EACH PLATE

HOLDDOWNS SHALL BE PROVIDED WITHIN 12" OF EACH END OF EACH SHEARWALL CORNER FOR SINGLE AND TOP OF TWO STORY.

HOLDDOWNS WITHIN 12" OF EACH SIDE OF EACH OPENING AND WITHIN 12" OF CORNERS FOR FIRST STORY OF TWO STORY.

EXG W.W.F. DOUBLE AT PERIMETER



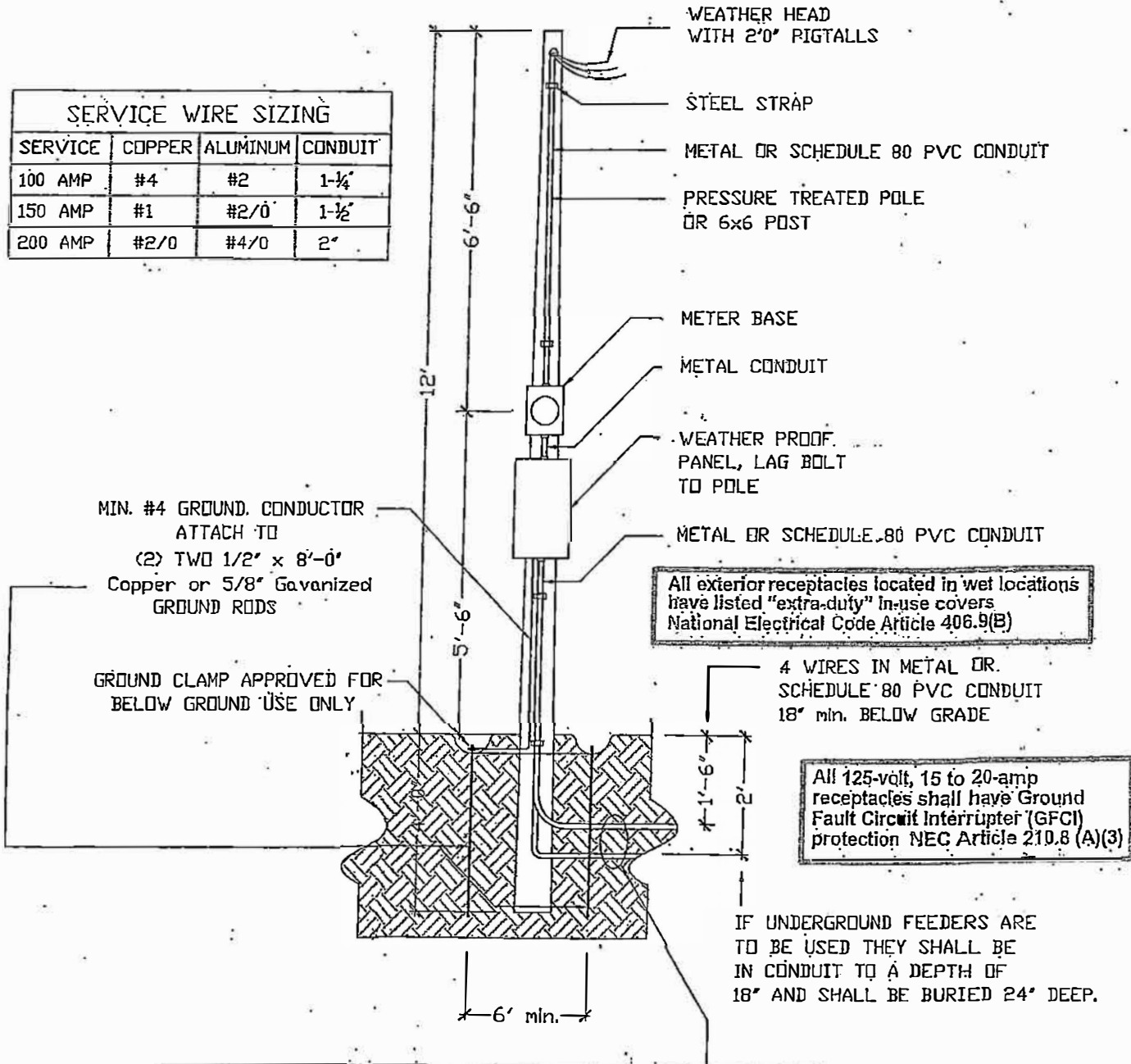
SIGNATURE \_\_\_\_\_

ALL FASTENERS AND CONNECTORS MUST BE INSTALLED ACCORDING TO THE MANUFACTURER'S INSTALLATION INSTRUCTIONS. ALTERNATIVE SYSTEMS SUCH AS THREADED ROD SYSTEMS MUST BE INSTALLED AS A TESTED ASSEMBLY PER MANUFACTURER'S INSTRUCTIONS. FOR EXAMPLE: A STANDARD ANCHOR BOLT OR COUPLING CAN NOT BE USED WITH THE SYSTEM UNLESS IT WAS TESTED AS PART OF THE SYSTEM BY THE MANUFACTURER. WIND DESIGN MUST COMPLY WITH SECTION R301.2.1.1 OF THE FLORIDA RESIDENTIAL BUILDING CODE.

# ELECTRICAL POWER POLE DIAGRAM

ALL WORK SHALL COMPLY WITH THE 2014 NATIONAL ELECTRICAL CODE

SERVICE WIRE SIZING			
SERVICE	COPPER	ALUMINUM	CONDUIT
100 AMP	#4	#2	1-1/4"
150 AMP	#1	#2/0	1-1/2"
200 AMP	#2/0	#4/0	2"



All exterior receptacles located in wet locations have listed "extra-duty" in-use covers National Electrical Code Article 406.9(B)

All 125-volt, 15 to 20-amp receptacles shall have Ground Fault Circuit Interrupter (GFCI) protection NEC Article 210.8 (A)(3)

SERVICE	FEEDER SIZING			GROUNDING	
	COPPER	ALUMINUM	CONDUIT	COPPER	ALUMINUM
100 AMP	#4	#2	1-1/4"	8	6
150 AMP	#1	#2/0	1-1/2"	6	4
200 AMP	#2/0	#4/0	2"	6	4

# LYNN HAVEN BUILDING DEPARTMENT

## *Checklist to Make Sure Nothing Else is Needed*

Submit All Applicable Items Listed Below:

1. \_\_\_\_\_ ONE (1) COMPLETE SET OF PAPER PLANS, drawn to scale & ONE (1) DIGITAL DISC (Total of 2 complete sets).
  - A. \_\_\_ **Site Plan** (All Structures, water, dimensions, property lines, setbacks, adjacent areas, driveways, sidewalks, patios, swimming pool, impervious surface, site drainage and proposed floor elevation.)
  - B. \_\_\_ Dimensioned foundation and footing plans
  - C. \_\_\_ Complete floor plan indicating all bearing walls (With additions, show existing floor plan)
  - D. \_\_\_ Wall section(s), foundation through roof. Include panel nailing schedules.
  - E. \_\_\_ Roof framing or truss layout plan
  - F. \_\_\_ Electrical, plumbing and HVAC plans (Location of all Smoke Detectors)
  - G. \_\_\_ Detail all window and door sizes
  - H. \_\_\_ Method of compliance with wind-load. Lynn Haven is located in **150 MPH** wind zone.  
Wind-Load Design (Check One)
    1. \_\_\_ Architect's/Engineer's Design
    2. \_\_\_ Other (explain)

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2. \_\_\_\_\_ Completed and notarized Building Permit Packet including
  - A. \_\_\_ Notarized Owner/Builder Affidavit (if not using a licensed contractor)
  - B. \_\_\_ Recorded Notice of Commencement
  - C. \_\_\_ Signed Flood Zone handout
  - D. \_\_\_ Finished Floor Elevation Affidavit
  - E. \_\_\_ Signed Florida Product Approval Affidavit
3. \_\_\_\_\_ Florida Energy Form
4. \_\_\_\_\_ **No Adverse Impact Certificate-drainage plan**
5. \_\_\_\_\_ Property ID # \_\_\_\_\_, legal description and copy of Deed
6. \_\_\_\_\_ Septic Tank Permit (when required)
7. \_\_\_\_\_ Need Irrigation Meter Yes \_\_\_\_\_ No \_\_\_\_\_ (check one)

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

Contact # \_\_\_\_\_

E-Mail \_\_\_\_\_

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