

**Town of Sewall's Point Building Department**

One South Sewall's Point Road

Sewall's Point, Florida 34996

Ph: 772-287-2455

**COMMERCIAL TENANT
IMPROVEMENT
PERMIT APPLICATION**

Permit # _____

CONSTRUCTION UNDER THIS PERMIT SHALL BE DONE IN ACCORDANCE WITH FBC 2023 8TH EDITION

Zoning ID# P-	Tract/Other:	Project/Plaza name:	
Site Address:		Name of Business:	
Legal Description:		Parcel ID:	
Owner's Information			
Name:		Email:	Phone:
Address:			
Contractor's Information			
Name:		Email:	Phone:
Address:			State License no.
Architect's/Engineer's Information			
Architect's Name:		Email:	Phone:
Address:			State License no.
Engineer's Name:		Email:	Phone:
Address:			State License no.

PROJECT INFORMATION

Description of work: _____ Fire sprinklers: _____ Number of stories: _____

Number of units: _____ Elevator ☐ Yes ☐ No Special conditions: _____

Occupancy group: _____ Total sq. footage of building: _____ Specify tenant improvement: ☐ New ☐ Remodel Existing

City water: ☐ Yes ☐ No Change of Occupancy: ☐ Yes ☐ No Shell Permit: ☐ Yes ☐ No City sewer: ☐ Yes ☐ No Class of work: ☐ New ☐ Addition ☐ Alteration

Septic Tank _____ Utilities _____ Property use: _____

Is this for a new business? ☐ Yes ☐ No Type of business: _____

Total Valuation \$ _____

APPLICATION MUST BE SIGNED AND NOTARIZED BY THE CONTRACTOR AND OWNER

<div>Contractor Signature _____ Date _____</div> <div>Print Name _____</div> <div>Notary Public, State of Florida _____</div> <div>STATE OF FLORIDA, County of _____</div> <div>[NOTARIAL SEAL]</div> <div>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 ____ personally known to me or ____ has produced _____ as identification.</div>	<div>Owner or Owner's Authorized Representative Signature _____ Date _____</div> <div>Print Name _____</div> <div>Notary Public, State of Florida _____</div> <div>STATE OF FLORIDA, County of _____</div> <div>[NOTARIAL SEAL]</div> <div>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 ____ personally known to me or ____ has produced _____ as identification.</div>
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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.



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COMMERCIAL DATA SUMMARY WORKSHEET (BUILD OUT - TENANT IMPROVEMENT ONLY)

Form shall be completed and Submitted with the Application

Owner's Name _____ Parcel I.D. _____
Project Address _____
Design Professional _____ Phone _____ Fax _____
Contractor _____ Phone _____ Fax _____

Applicable Codes

Florida Building Code

Building Code FBC Building Volume 2023
Mechanical Code FBC Mechanical Volume 2023
Plumbing Code FBC Plumbing Volume 2023

Electrical Code

Accessibility Code FBC Building Volume 2023
Energy Code FBC Building Volume 2023
Fair Housing Act FBC Building Volume 2023

NFPA 70 / NEC 2020

Product Manufactures		Windows:		Doors:		Overhead Door:	
Impact Glass:		Shutters:		Roof Covering:		Other:	
Building Limitations		Minimum		Occupancy		Flood	
Type of Construction Table 503		Type of Constr		Classification		Zone	
Square Footage per Floor		Allowed		Sprinkler ___ Yes ___ No		1 Hr Protected ___ Yes ___ No	
Area Modifier Section 506				Total			
Actual Building Height		Allowable Height		Mezzanines (section 505)			
Fire Separation T- 602		N		S		E	
Percent of Opening		N		S		E	
Allowed		N		S		E	
Exterior Wall Rating		N		S		E	
Occupant Load		Number of Exits		METHOD OF DESIGN PER Chapter 16 ASCE 7 _____ 1609 _____ Other _____ Fully Enclosed _____ Design Wind Speed _____ m.p.h. (Figure 1609) Risk Category _____ Class (Table 1604.5) Exposure B or C (Circle One) Structural Forces (Section 1606 & 1607) Floor Design Live Load _____ p.s.f. Dead Load _____ p.s.f. Roof Design Live Load _____ p.s.f. Section 1609.5 Dead Load _____ p.s.f. Components and Cladding Design Pressures: Zone 1 _____ P.S.F. Zone 4 _____ P.S.F. Zone 2 _____ P.S.F. Zone 5 _____ P.S.F. Zone 3 _____ P.S.F. Edge Strip a = _____			
Table 1004.1.1		Section 1021					
Units of Exit Width		Travel Distance					
Section 1005.1		Section 1016					
Means of Egress		Arrangements of Exits					
Section 1003		Section 1010					
Dead Ends		Mezzanine Egress					
Section 1018.4		Section 505.3					
Vertical Openings		Exterior Stairways					
Section 705.8.5		Section 1026					
Exit Doors		Side hinged		Swing			
Section 1015		Section 715.4.1					
Fire Resistance		Fire Separation					
Table 706.4		Table 508.4					
Wall Openings		Fire Windows-Doors					
Section 706.8		Section 715					
Draft Stopping / Fire Blocking		Fire Partitions					
Section 717		Section 709					
Fire Dampers		Other Penetrations					
Section 716		Section 713					
Sprinklers		Standpipes		Fire alarm			
Section 903		Section 905		Section 907			
Plumbing / Fixtures T 403.1		Occupancy Use					
Number of Fixtures		Water Closets Required		M		F	
		Water Closets Provided		M		F	
		Urinals		Required		Provided	
		Drinking Fountains		Required		Provided	
Handicap		Restrooms		Building			
Accessibility							
Building Valuation				Energy Calcs			
Threshold Inspector (if required)							

I certify to the best of my knowledge and belief, these plans and specifications have been designed to comply with the Applicable Florida Building & Florida Fire Prevention Codes being enforced by the Authority Having Jurisdiction.

Signature: _____ Date: _____

Architect/Engineer

Seal



Building Department
CHECKLIST FOR COMMERCIAL TENANT IMPROVEMENT PERMITS

A document review will be performed on the following items prior to the submittal of a permit application. Failure to submit these items will result in the application package returned to the applicant until the deficient documents are included. This review sheet must accompany the application submittal.

- Completed permit application
 - Legal Description
 - Notarized Signature of Owner and Contractor
 - Proof of Ownership (Recorded Warranty Deed or Tax Bill)
- Florida Energy Form (FLACOM-01) for Zone 8-signed sealed and dated
- A/C Calculations-WPB Area (Drybulb: Summer 90 Degrees/Winter 47 Degrees)
- Fire Sprinkler Design
- Lot dimensions and bearings
- COMPLETE SETS OF PLANS WITH ALL REQUIRED PAGES SIGNED & SEALED BY A FLORIDA REG. ARCHITECT OR ENGINEER. MAXIMUM SIZE PLANS 24" X 36"
- Product Approval Checklist Signed & Sealed by the Architect or Engineer or Indicate on the Plans
- Asbestos Notification Statement
- Recorded Notice of Commencement for work valued at \$5000 or more. (NOC must be submitted to permitting prior to scheduling the first inspection.)

This checklist is intended for Building Department use only. Additional documents may be requested at any time during the permitting process. Any exceptions must be approved by a Supervisor.

CONTRACTOR, OWNER /BUILDER ASBESTOS NOTIFICATION STATEMENT

Date: _____

Building Permit # _____

Site Address: _____

FBC 104.1.10 Asbestos. 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 s. 469.003 Florida Statutes and to notify the Department of Environmental Protection of her or his intentions to remove asbestos, when applicable, in accordance with state and federal law. 469.003 License required.--

(1) No person may conduct an asbestos survey, develop an operation and maintenance plan, or monitor and evaluate asbestos abatement unless trained and licensed as an asbestos consultant as required by this chapter.

(2)(a) No person may prepare asbestos abatement specifications unless trained and licensed as an asbestos consultant as required by this chapter.

(b) Any person engaged in the business of asbestos surveys prior to October 1, 1987, who has been certified by the Department of Labor and Employment Security as a certified asbestos surveyor, and who has complied with the training requirements of s. 469.013(1)(b), may provide survey services as described in s. 255.553(1), (2), and (3). The Department of Labor and Employment Security may, by rule, establish violations, disciplinary procedures, and penalties for certified asbestos surveyors.

(3) No person may conduct asbestos abatement work unless licensed by the department under this chapter as an asbestos contractor, except as otherwise provided in this chapter.

FBC 105.3.6 Asbestos removal. (Owner /Builder Exemption)

Moving, removal or disposal of asbestos-containing materials on a residential building where the owner occupies the building, the building is not for sale or lease, and the work is performed according to the owner-builder limitations provided in this paragraph. To qualify for exemption under this paragraph, an owner must personally appear and sign the building permit application. The permitting agency shall provide the person with a disclosure statement in substantially the following form: **Disclosure Statement:** 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 1 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.

☐ Contractor or ☐ Owner/Builder Signature _____

Subscribed and sworn to before me this _____ day of _____, 20____, personally appeared _____ who is personally known to me or produced _____ as identification, and who did/did not take an oath.

Notary Public Signature _____

Seal