



POST OFFICE BOX 458 \* 80 EUCLID PLACE \* LABELLE, FLORIDA 33975 \* (863) 675-0492

**RESIDENTIAL STRUCTURE/BUILDING PERMIT APPLICATION  
CITY OF LABELLE**

**\*STAFF USE ONLY**

Received by:\* \_\_\_\_\_ Date Received:\* \_\_\_\_\_ Zoning Approval:\* \_\_\_\_\_ Date:\* \_\_\_\_\_ **\*PERMIT#** \_\_\_\_\_

Plan Examiner Approval:\* \_\_\_\_\_ Date:\* \_\_\_\_\_ 8<sup>th</sup> Edition (2023) of the Florida Building Code

**\*ZONING:** \_\_\_\_\_ **\*SETBACKS: FRONT** \_\_\_\_\_ **ft/ SIDE** \_\_\_\_\_ **ft/ REAR** \_\_\_\_\_ **ft \*FLOOD ZONE:** \_\_\_\_\_

**PROJECT PHYSICAL ADDRESS:** \_\_\_\_\_ City: \_\_\_\_\_ County: HENDRY

Subdivision: \_\_\_\_\_ Lot(s): \_\_\_\_\_ Block: \_\_\_\_\_

Parcel I.D. #: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_

Property Owner: \_\_\_\_\_ Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Phone No: \_\_\_\_\_ Email: \_\_\_\_\_

**WORK DESCRIPTION:** \_\_\_\_\_

**PROPOSED USE:** \_\_\_\_\_

**Applicant: Contractor OR Owner Builder (Circle One)** If Owner Builder, fill out Owner Builder Affidavit

**Contractor Company Name:** \_\_\_\_\_ **License:** \_\_\_\_\_

**Address:** \_\_\_\_\_ **City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip:** \_\_\_\_\_

**Phone No:** \_\_\_\_\_ **Email address:** \_\_\_\_\_

**Contact Name:** \_\_\_\_\_ **Contact Phone#:** \_\_\_\_\_

**Electrical Contractor/Company Name:** \_\_\_\_\_ **License:** \_\_\_\_\_

**Plumbing Contractor/Company Name:** \_\_\_\_\_ **License:** \_\_\_\_\_

**Mechanical Contractor/Company Name:** \_\_\_\_\_ **License:** \_\_\_\_\_

**Fee Simple Titleholder's Name (if other than owner) :** \_\_\_\_\_

**Fee Simple Title holder's Address:** \_\_\_\_\_

**Property Status:** \_\_\_\_\_ **New Residential** \_\_\_\_\_ **Existing Residential** \_\_\_\_\_ **Other (** \_\_\_\_\_ **)**

**Contract Price:** \$ \_\_\_\_\_ **(Contractor's must submit copy of contract)** **Value of completed Project \$** \_\_\_\_\_

**Design Floor Load (PSF)** \_\_\_\_\_ **Square Footage:** \_\_\_\_\_ **Number of Stories:** \_\_\_\_\_ **Height of Building:** \_\_\_\_\_

**Occupancy Type:** \_\_\_\_\_ **Mixed Use Occupancy:** \_\_\_\_\_ **YES** \_\_\_\_\_ **NO**

Impact Fee Payer: \_\_\_\_\_

**Flood Zone Designation:** If your property is located in any flood zone (**except Zone X**), the First Floor Elevation must be certified to be in compliance with City of LaBelle Code of Ordinances by a State of Florida Registered/Licensed Surveyor or Engineer after the foundation and finished first floor have been installed. This Certificate must be on file in the Building Department prior to requesting the final inspection or a Certificate of Occupancy.

Zone "A" – First Floor must be held 36" above highest adjacent grade.

Zone "AH" – First Floor must be held \_\_\_\_\_ inches above NGVD (MSL), FEMA Map No. \_\_\_\_\_

Numbered "A" Zone – First Floor must be held \_\_\_\_\_ inches above NGVD (MSL), FEMA Map No. \_\_\_\_\_

Mortgage Company: \_\_\_\_\_

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

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

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

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

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

Architect/Engineer: \_\_\_\_\_ License No.: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Application is hereby made to obtain a permit to do work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the Standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, wells, pools, furnaces, boilers, heaters, tanks, air conditioning systems, fences, etc., unless properly licensed contractors under the provisions of Chapter 489 of Florida Statutes, City of LaBelle Code of Ordinances and/ or as the Owner/Builder Exemption have been accepted for construction.

**Warning – Work in the right-of-way:** This permit does not authorize construction or installation of any structure or utility, above or below ground, within any right-of-way or easement reserved for access, drainage or utility purposes. This restriction specifically prohibits fencing, sprinkler systems, landscaping other than sod, signs, water, sewer, cable and drainage work therein. If such improvements are necessary, a separate permit(s) may be required from the City of LaBelle Building Department and/or City of LaBelle Public Works Department or agency responsible for easement.

# Owner's Affidavit

I certify that all foregoing information is accurate and that all work will be done in compliance with applicable laws regulating construction and zoning. I have researched Federal, State and local regulations related to this project, and I have received permits from other agencies claiming jurisdiction over this project as required by law. I further understand that any omissions in content of this application or failure to provide additionally required information or to construct to Code may render this permit immediately void and a new permit will be required.

I further acknowledge the following:

- Issuance of a permit may be subject to conditions and is subject to time limitations or constraints.
- Issuance of a permit is not authorization to violate public or private restrictions, laws or regulations.
- Failure to comply with applicable construction regulations may result in with holding of future permits and a STOP WORK ORDER.
- I will comply with all the requests and requirements contained within this application to construct the new residential structure.

Signature: \_\_\_\_\_  
(Owner or Agent including Contractor)

Signature: \_\_\_\_\_  
(Owner/Builder)

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

The foregoing instrument was acknowledged before me by means of  physical presence or  online notarizations, this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_, by the contractor, their agent or the Owner/Builder, who is personally known to me or who has produced \_\_\_\_\_ Drivers License or \_\_\_\_\_ as identification and who did not take an oath.

\_\_\_\_\_  
Signature of Notary Taking Acknowledgment

Notary Stamp

Application reviewed and approved by \_\_\_\_\_ Permit Officer

*Warning to Owner: Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement.*

## Sub-Contractor List for Permit Application

In accordance with Florida Statute 489 and/or City of LaBelle Code of Ordinances, a complete list of all persons contracting work on this project must be identified. These persons must be licensed as contractors, working within the scope of their licenses, unless working under the direct supervision of another licensed contractor, in which his license allows the use. All contractors must be either a state certified, state registered with City of LaBelle, or a hold a City of LaBelle Certificate of Competency as a Specialty Contractor (Same contractor may work in different areas, when scope allows):

**Please identify the following contractors working on this project and their license numbers.**

Building / General / Residential:	_____	_____
Pool Contractor:	_____	_____
Air Conditioning/Mechanical:	_____	_____
Plumbing Contractor:	_____	_____
Electrical Contractor:	_____	_____
Roofing Contractor:	_____	_____
Aluminum Specialty Contractor:	_____	_____
Asphalt Sealing / Coating Contractor:	_____	_____
Cabinet and Millwork Contractor:	_____	_____
Carpentry Contractor:	_____	_____
Concrete / Masonry Contractor:	_____	_____
Demolition Contractor:	_____	_____
Excavation (Land Clearing) Contractor:	_____	_____
Fence Contractor:	_____	_____
Finish Carpentry Contractor:	_____	_____
Garage Door Installation Contractor:	_____	_____
Glass and Glazing Contractor:	_____	_____
Gunite Contractor:	_____	_____
Gutter and Downspout Contractor:	_____	_____
Insulation Contractor:	_____	_____
Irrigation Sprinkler Contractor:	_____	_____
Marciting Contractor:	_____	_____
Painting Contractor:	_____	_____
Paver Block Contractor:	_____	_____
Paving Contractor:	_____	_____
Plastering / Stucco Contractor:	_____	_____
Reinforcing Steel Contractor:	_____	_____
River Rock Contractor:	_____	_____
Sand Blasting Contractor:	_____	_____
Structural Steel Erection Contractor:	_____	_____
Terrazos Contractor:	_____	_____
Tile and Marble Contractor:	_____	_____
Other Contractor:	_____	_____

If there are any questions as to who should be listed, please call the Building Department. Any person with whom a contract is made to perform construction services should be identified. Copies of signed contracts with names and licenses may be required for permit files.

## RESIDENTIAL PERMIT CHECKLIST

- \_\_\_\_\_ 1. Did you provide the documentation of ownership as recorded in public records?  
Documentation may be a tax bill, or recorded deed (warranty, mortgage or contract for deed). Note: If you are not the owner, as identified by public records, you must obtain written permission to make improvements.
- \_\_\_\_\_ 2. Did you provide the written authorization for the potable water connection to the local utility?
- \_\_\_\_\_ 3. Are there any zoning regulations that will require the zoning department to approve? Is the the use a conforming use to City of LaBelle Land Development Code?
- \_\_\_\_\_ 4. Have you provided the driveway connection approval or construction authorization permit from the Public Works Department, as required?
- \_\_\_\_\_ 5. Have you provided a copy of a signed agreement or contractor for the removal of all construction debris or sludge from this project? Have you arraigned to have a portable toilet provided, in the absence of other accessible sanitary facilities?
- \_\_\_\_\_ 6. Have you completed the list of sub-contractors that you have contracted with for work on this project? All applicable lines must be identified, even if provided by same contractor.
- \_\_\_\_\_ 7. Have you provided the boundary survey with Flood Zone information with the application?  
Needs to be signed and sealed by a Florida licensed surveyor or engineer.
- \_\_\_\_\_ 8 . Does your site plan (2 copies) contain the following minimum information?
- i. All existing structures. Also show proposed new construction, proposed phases, future projects, etc. with overall dimensions;
  - ii. Indicate all proposed or existing ponds, drainage systems, or retention ponds;
  - iii. Identify the points of the compass, utilities, demolition;
  - iv. Indicate fire hydrants, standpipe connections, fire pump locations, mains, branches and other potable water system sizes that are to be dedicated to use for fire suppression systems (if provided). Indicate all valve locations;
  - v. Indicate names and locations of adjacent county, city and/or state or federal road systems. Indicate connections to these roads.
  - vi. Indicate size and location of sanitary sewage piping and potable water lines. Indicate other pressurized piping (Gas, steam, non-potable water, fuel, etc.)
- \_\_\_\_\_ 9. Have you provide 2 complete sets of plans and specifications, as well as a digital copy?
- \_\_\_\_\_ 10. Have you provided a complete copy of the signed contract for this project?

**IN ACCORDANCE WITH REQUIREMENTS CONTAINED IN THE FLORIDA BUILDING CODE.**

**SECTION 106.3.5. AND CITY OF LABELLE CODES AND ORDINANCES. THE FOLLOWING INFORMATION IS REQUIRED FOR A NEW RESIDENTIAL STRUCTURE/BUILDING PERMIT.**

All items must be submitted to the Building Department at the time of this request for a permit. An incomplete application will not be accepted and may result in the delay of the construction / project. It is your responsibility to provide written authorization/approval for items requiring approval from Departments outside of the Building Department. It will be your responsibility to provide plans or specifications to these agencies, for their review and approval **PRIOR TO PERMITTING:**

1. Documentation of ownership as recorded in public records. Documentation may be a tax bill, or recorded deed (warranty, mortgage or contract for deed). Note: If you are not the owner, as identified by public records, you must obtain written permission to make improvements.
2. Sewer connection and/or design authorization or approval of existing septic tank, new septic tank, (From City of LaBelle Public Works Department or Hendry County Environmental Health Unit) or written authorization for connection to the appropriate local sewer utility.
3. Written authorization for the potable water connection to the local utility.
4. Zoning approval (if changes will be required from current classified or existing use) from the City Zoning Department.
5. Approval of driveway location and construction from the City Public Works Department. Please contact the City Superintendent of Public Works at at (863) 675-2872 in LaBelle for questions.
6. A contract or agreement with a solid waste disposal company, acceptable to the Superintendent of Public Works, to dispose of any solid waste or sludge that may be generated from this project in the form of demolition debris/waste and/or construction debris. Site shall be kept clean at all times (to prevent debris from being blown throughout the area). A portable sanitary outlet (Example:Porta-John) will also be required on the job-site.
7. A list of sub-contractors shall also be submitted at time of permitting. Any changes in sub-contractors will be immediately forwarded to City of LaBelle Building Department to ensure compliance with current licensure requirements. Sub-contractors are not permitted to work on this job unless properly licensed to perform the activities tasked to them. Must complete and return the attached Sub-Contractor sheet.
8. A boundary survey. Owner must locate all markers and stake property prior to first inspection (applies to new construction). Survey shall show all easements and Flood Zone. (engineered scale).
9. Site plan (2 copies) must show the following information within the submitted plans:
  - a. All existing structures. Also show proposed new construction, proposed phases, future projects, etc. with overall dimensions;
  - b. Indicate all proposed or existing ponds, drainage systems, or retention ponds;
  - c. Identify the points of the compass;
  - d. Indicate fire hydrants, standpipe connections, fire pump locations, mains, branches and other potable water system sizes that are to be dedicated to use for fire suppression systems (if provided). Indicate all valve locations;
  - e. Indicate names and locations of adjacent county, city and/or state or federal road systems. Indicate connections to these roads.
  - f. Indicate Septic systems or sewer connections, utilities, demolition;
  - g. Setbacks from structures and property lines;
  - h. Parking.
10. Certification of Compliance with the Florida Energy Code (3 copies) as applicable. Must be signed by owner and designer in applicable locations. Must be compliant with the Florida Building Code. (Jurisdiction 361000)
  
11. Occupancy group and special occupancy requirements shall be determined.
12. Minimum type of construction shall be as determined by Table 503 of the Florida Building Code.
13. When applicable, fire suppression system plans shall include the following:
  - a. Early warning smoke evacuation system.

- b. Schematic fire sprinklers.
  - c. Standpipes.
  - d. Pre-engineered systems.
  - e. Riser diagram.
14. Structural requirements shall include:
- a. Soil condition/analysis.
  - b. Termite protection.
  - c. Design loads.
  - d. Wind requirements.
  - e. Building envelope.
  - f. Structural calculations (if required).
  - g. Foundation location, size and reinforcement.
  - h. Wall systems, construction and materials.
  - i. Floor systems, construction and materials.
  - j. Roof systems, construction and materials.
  - k. Stair system, construction and materials.
  - l. Connector tables
15. Handicap accessible bathroom show location (29" Clear opening for doors that serve this bathroom).
16. Materials for construction shall be reviewed and shall at a minimum include the following:  
Wood, steel, Aluminum, Concrete, Plastic, Glass, Masonry, Gypsum board and plaster, Insulating (mechanical), Roofing, and Insulation.
17. Compaction test indicating a Proctor of at least 95 %. You may be required to remove any soil which may be determined as incompatible for foundations supporting structure (Example: cannot build on "black muck" type soil as your structure may continue to settle, possibly causing structural damage. This type of soil will require a structural engineer to sign and seal your foundation plans, if not removed).
18. Provide a complete copy of the signed contract and specifications
19. Provide a copy of the first floor elevation certificate after the foundation or finished first floor level has been determined through permanent or complete construction.

**NOTE: THESE ARE MINIMUM REQUIREMENTS. THE PLANS EXAMINER(S) MAY REQUIRE ADDITIONAL DRAWINGS/DETAILS IN ORDER TO COMPLETE THEIR REVIEW. ARCHITECT AND/OR ENGINEERD PLAN(S) MAY BE REQUIRED.**

**IF THE FLORIDA BUILDING CODES OR CITY OF LABELLE REGULATIONS, CODES OR ORDINANCES DO NOT SPECIFICALLY REQUIRE THE ITEMS ABOVE, YOU WILL MAY NOT BE REQUIRED TO PROVIDE THE INFORMATION.**

*(Example: Gas lines if none are proposed; Fire alarm system if not proposed or required by codes; etc.) You should copy the completed permit application for your files prior to applying with the City of LaBelle Building Department.*

## **PLANS REVIEW GUIDELINES – SINGLE FAMILY RESIDENCE**

**NOTE:** Building code compliance is the **obligation** of design professionals and/or contractors. Plan review and inspection guidelines are to be used to ensure that construction plans and construction projects, at a minimum, address the same code priorities that the City of LaBelle Building Department will be looking at during plan review and inspection. These guidelines are not all inclusive. Additional requirements in the Florida Building Code 2020 (7<sup>th</sup> Edition) and the Florida Residential Code 2020 (7<sup>th</sup> Edition) may also apply to your project. If you need assistance with a code question, please consult the Florida Building Code 2020 (7<sup>th</sup> Edition), the Florida Residential Code 2020 (7<sup>th</sup> Edition) or contact the Building Department.

**A. SITE PLAN** Two (2) copies of site plan, **Survey** signed and sealed stating flood elevation.  
(Use site plan form, survey, or other paper, as long as it is drawn to scale and contains all required information)

**B. BUILDING CONSTRUCTION PLAN** Two [2] sets of plans:

1. Drawn to scale
2. Plans shall include:
  - foundation plan
  - elevations
  - floor plan- of each floor
  - wall sections- from foundation through roof, including structural details
  - lintel/header schedule
  - window/door schedule
  - Roof framing plan- showing location and designation of trusses, design loads and truss diagram, location and designation of connectors
3. Egress, including egress window size and location
4. Handicap accessible bath
5. Wall and ceiling details for garage
6. Wall and roof flashing details for protection of water intrusion

**C. WIND LOAD PROVISIONS**

1. Plan must be sealed by an Engineer/Architect **or** certified by the Contractor
2. Plan shall specify whether the Florida Residential Code 2020 (7<sup>th</sup> Edition) **or** an alternate methodology listed in FRC 2017 section R301.2.1.1 is used to meet the wind load requirements of the code
3. Plan shall specify wind speed, importance factor, wind exposure, internal pressure coefficient, and design pressure for all the openings of the building
4. Product Approval Specification Sheet for all doors, windows/mullions, siding, roofing, skylights/garage doors

**D. ELECTRICAL PLAN**

1. Two (2) sets of plans showing all electrical devices of the system as well as the smoke alarms, meter location, panel size/location, and weatherproof/GFCI receptacle locations, 3000 sq. ft. and above require one-line diagram and load calculations

**E. PLUMBING PLAN**

1. Two (2) set of plans showing the location of all the plumbing fixtures and size of main sewer line(s)

**F. MECHANICAL PLAN**

1. Two (2) sets of plans including a duct layout, Manual D and Manual J
2. Two (2) sets of the Florida Energy Calculation Form plus additional cover sheet for State use. Signed and dated by the owner/agent.
3. Gas Layout including developed length, pipe size, type and pressures.

**Approved plans must be on site and available for inspections, all manufactures installation manuals must be on site for inspections.**





**OWNER-BUILDER STATEMENT/AFFIDAVIT**

City of LaBelle Building Department

This affidavit is designed to both inform you of State and County laws regarding construction, and to help you avoid some of the problems that Owner/Builders often encounter. Please feel free to call on us if the Building Department can be of assistance.

NAME OF OWNER/BUILDER: \_\_\_\_\_

JOB SITE ADDRESS: \_\_\_\_\_

DISCLOSURE STATEMENT YOU ARE RESPONSIBLE FOR COMPLIANCE WITH ALL APPLICABLE LAWS AND CODES AND THEY WILL BE STRICTLY ENFORCED.

**I do hereby certify that, as Owner/Builder, I understand and acknowledge the following (initial each item):**

\_\_\_\_\_ 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. I understand that depending on the work being done that I may be required to take the County Competency exam for the corresponding trade.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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. \_\_\_\_\_ 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, unless I am completing the requirements of a building permit where the contractor listed on the permit substantially completed the project. 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.

\_\_\_\_\_ 5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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.

\_\_\_\_\_ 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 for the employee; proof may be required. I understand that my failure to follow these laws may subject me to serious financial risk.

\_\_\_\_ 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.

\_\_\_\_ 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 850-487-1395 or [www.myflorida.com/dbpr/pro/cilb/](http://www.myflorida.com/dbpr/pro/cilb/) for more information about licensed contractors.

\_\_\_\_ 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 address noted above.

\_\_\_\_ 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.

\_\_\_\_ 13. I understand that I must call or email the Building Department to request all inspections

\_\_\_\_ 14. 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.

**As Owner/Builder you must appear in person to sign this document, and to pick-up an issued building permit.**

\_\_\_\_\_  
Signature of Owner-Builder

\_\_\_\_\_  
Date

Form of identification \_\_\_\_\_  
(Must be photo ID)

**A violation of this exemption is a misdemeanor of the first degree punishable by a term of imprisonment not exceeding 1 year and a \$1,000.00 fine in addition to any civil penalties. In addition, the local permitting jurisdiction shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.**

# **CONTRACTOR PERMIT AUTHORIZATION FORM**

## **ORIGINAL FORM TO BE SUBMITTED WITH PERMIT APPLICATION**

License Holder: \_\_\_\_\_ License Number: \_\_\_\_\_

Business Name: \_\_\_\_\_

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

Business Phone: \_\_\_\_\_ Additional Contact #: \_\_\_\_\_

I authorize the following individual(s)/ agencies to act as my agent in all permitting procedures with the City of LaBelle Building Department.

Authorized Person(s)/Agencies (PLEASE PRINT CLEARLY):

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

This authorization is ONLY for: (must be filled out)

Job address: \_\_\_\_\_

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

I understand I remain fully responsible and liable for all construction performed under my license.

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

Printed Name: \_\_\_\_\_

County of: \_\_\_\_\_

Signed and acknowledged before me by means of  physical presence or  online notarization this \_\_\_ day of \_\_\_\_\_, 20\_\_\_. He/she has produced \_\_\_\_\_ as proof of identification or is personally known to me.

Notary Stamp

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