



City of Davenport Building and Zoning Department

Check Off List	Document	Date
	Building Permit Application	
	Owner's Affidavit Signed and Notarized	
	Notice of Commencement (NOC) Signed and Notarized	
	Two – 24x36 Complete sets of building plans (Raised Seal & Signed)	
	One – 11x17 Complete sets of building plans (Raised Seal & Signed)	
	Engineering Survey Plot Plan	
	Structural Calculations	
	Truss Engineering	
	Energy Calculations	
	Landscaping and Irrigation Plans	
	Windows and Doors Specifications	
	Other technical specification and/or supporting documents	
	Architectural, Structural, Mechanical, Electrical, Plumbing Drawings	
	Septic Tank Permit from the Polk County Health Dept. if required	
	One – CD PDF Format or Flash Drive required of all above documents	



City of Davenport

Building and Zoning Department

BUILDING APPLICATION AND REQUIREMENTS

Requirements for all submittals: Commercial, Industrial, Warehouse, Manufacturing, Multi-Family, Single-Family Housing, Additions and accessory structures.

All submittals shall include electronic copies (PDF format required) of the building plans **(Raised seals and Signature are required to be visible)**. Building permit application, site plan, plot plan, structural calculation, landscaping/irrigation plot plans, window and door specifications, technical specifications and other supporting documents.

Two **(2)** complete sets of building plans (Raised seal and Signed); first set to be **24x36**, second set to be **11x17** to scale^{1,2} Including the architectural, structural, mechanical, electrical and plumbing drawings; along with the below requirements.

One **(1)** hard copy of the following:

1. Owner's Affidavit (Signed and Notarized)
2. Copy of "Notice of Commencement" if required, based on total cost of the project (Signed and Notarized)
3. Copy of the "Septic Tank" permit from the PCHD, if required
4. Engineering Survey Site Plan or Survey Plot Plan, Foundation/Formboard, and Final Survey

Structural calculations, truss engineering, energy calculations, landscaping and irrigation plans, windows and door specifications and other technical specifications and/or supporting documents.

One **(1)** CD PDF Format or Flash Drive:

1. Burn with all the documents requested above.

¹ Architectural scale unit are based on foot/inch dimensions. Floor plan drawings are usually drawn to the scale of $\frac{1}{4}'' = 1'-0''$ and for very large plans, a scale of $\frac{1}{8}'' = 1'-0''$ maybe used. When drawing a small plan or a single room, scales of $\frac{3}{8}'' = 1'-0''$, $\frac{1}{2}'' = 1'-0''$, or $1'' = 1'-0''$ maybe used to fit the size of your drawing format.

² Engineering scale units of measure are equal to parts per inch and parts per foot. The most common graduations are **10, 20, 30, 40, 50, 60** parts per inch, the graduations vary based on the application.



City of Davenport

BUILDING PERMIT APPLICATION

DATE			
	ADDITION	BUILDING PERMIT NUMBER	
	ALTERATION	ELECTRICAL PERMIT NUMBER	
	DEMOLITION (VALID 3 MONTHS)	FENCE PERMIT NUMBER	
	MOVING	MECHANICAL PERMIT NUMBER	
	NEW CONSTRUCTION	PLUMBING PERMIT NUMBER	
	OCCUPANCY	ROOFING PERMIT NUMBER	
	OTHER – MISC.	SWIMMING POOL/ENCLOSURE	
		OTHER	

OWNER INFORMATION

NAME	
PRESENT ADDRESS	
TELEPHONE	
EMAIL	

JOB INFORMATION

JOB DESCRIPTION			
JOB ADDRESS			
PARCEL ID NUMBER			
LOT NUMBER		ZONING	
SUBDIVISION NAME			
LOT SIZE	FT. by	FT.	SQUARE FEET
FUTURE LAND USED			
LIVING AREA SQ. FT.		NUMBER OF STORIES	
PORCHES, CARPORTS, ETC. SQ. FT.			
TOTAL COST OF JOB	\$		

SET BACKS (SURVEY REQUIRED)

FRONT		STREET		REAR		RIGHT		LEFT	
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CONTRACTOR INFORMATION

GENERAL CONTRACTOR

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____

MECHANICAL/ELECTRIC/PLUMBING

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____

MECHANICAL/ELECTRIC/PLUMBING

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____

MECHANICAL/ELECTRIC/PLUMBING

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____



CONTRACTOR INFORMATION

LANDSCAPE/IRRIGATION/FENCE

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____

SWIMMING POOL/SCREEN ENCLOSURE CONTRACTOR

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____

ALL OTHER CONTRACTORS:

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____

ALL OTHER CONTRACTORS:

COMPANY NAME: _____
ADDRESS: _____
CITY: _____ STATE: _____ ZIP CODE: _____
BUSINESS PHONE: _____ CELL: _____
EMAIL ADDRESS: _____
STATE: _____ COUNTY: _____ CITY: _____
LICENSE NUMBER: _____



City of Davenport
BUILDING PERMITS, PLANS REVIEW and INSPECTIONS

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.

WARNING TO THE OWNER

YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR THE IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTENDED TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

ASBESTOS NOTIFICATION

IT IS THE RESPONSIBILITY OF THE OWNER OR CONTRACTOR TO COMPLY WITH THE PROVISIONS OF FLORIDA STATUTE 469.003 AND TO NOTIFY THE DEPARTMENT OF ENVIRONMENTAL PROTECTION OF ASBESTOS REMOVAL, WHEN APPLICABLE, IN ACCORDANCE WITH STATE AND FEDERAL LAW.

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TODO THE WORK AS INDICATED. I CERTIFY THAT NO WORK HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT. I UNDERSTAND THAT THIS PERMIT BECOMES NULL AND VOID IF AUTHORIZED WORK IS NOT COMMENCED WITHIN SIX (6) MONTHS AFTER THE ISSUE DATE OF THE PERMIT, OR IF WORK IS ABANDNED OR SUSPENDED FOR SIX (6) MONTHS AFTER WORK IS COMMENCED.

NOTICE

THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO T HIS PROPERTY THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL AGENCIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE OR FEDERAL AGENCIES. SEPARATE PERMITS ARE REQUIRED FOR EACH TRADE OR TYPE OF WORK, SUCH AS ELECTRIAL, PLUMBING, MECHANICA, SIGNS, ROOFING, SWIMMING POOLS, IRRIGATION, FENCES, ETC. CHECK WITH THE BUILDING DEPARTMENT BEFORE STARTING WORK.

OWNER/CONTRACTOR SHALL BE RESPOINSIBLE TO THE CITY FOR THE COST OF PROCESSING THIS APPLICATION AND REVIEW OF PLANS AND SPECIFICATION. IF THE PERMIT IS NOT PICKED UP AND PAID FOR IN FULL WITHIN 30 CALENDAR DAYS FROM DATE OF THE PERMIT THE OWNER/CONTRACTOR WILL BE RESPONSIBLE FOR THE COST EQUAL TO THE AMOUNT OF THE PLAN REVIEW FEE.

SIGNATURE OF OWNER OR AGENT

DATE

SIGNATURE OF CONTRACTOR

NOTARY AS TO OWNER OR AGENT

NOTARY AS TO CONTRACTOR

MY COMMISSION EXPIRES



City of Davenport
BUILDING PERMITS, PLANS REVIEW and INSPECTIONS

**OWNER'S AFFIDAVIT
DISCLOSURE STATEMENT**

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 with certain restrictions even though you do not have a license. You must provide direct on-site supervision of the residence or farm outbuilding. You may also build or improve a commercial building providing your costs do not exceed \$25,000.00. **The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease.** If you sell or lease a building that you have built or substantially improved yourself within one (1) year after the construction is completed, the law will presume that you built or substantially improved if for sale or lease which is a "VIOLATION" of the exemption. **You may not hire an unlicensed person to act as your contractor or to supervise people working on your building.** It is your responsibility to make sure that people employed by you have licenses required by state law and by the county or municipal licensing ordinances. **You may not delegate the responsibility for supervising the work to a licensed contractor who is not licensed to perform the work being done.** Any person working on your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. 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. **ALL ELECTRICAL WORK MUST BE COMPLETED BY A LICENSED CONTRACTOR.**

PROPERTY OWNER'S SIGNATURE

DATE

PERMIT NUMBER

PROPERTY ADDRESS

CONTACT TELEPHONE

EMAIL ADDRESS



City of Davenport

BUILDING PERMITS, PLANS REVIEW and INSPECTIONS

The following information is required for the review by the building department, building official, plans review examiner, building inspector or authorized representative/consultant:

PLOT PLAN

1. Survey Plot Plan with the initial permit application submission - **REQUIRED**
2. Survey Foundation/Formboard/Tie-In Plot Plan after slab is poured and before erections of walls – **REQUIRED**
3. Survey Plot Plan Final – **REQUIRED**
4. Legal Description
5. Street Address
6. Location of structures both existing and proposed
7. Location of wells, septic systems, pools, etc.
8. Setbacks for all the above
9. High water mark elevation (If applicable) – **FLOOD PLAINS ONLY**

FLOOR PLAN

1. Dimensions
2. Opening sizes, types and locations
3. Room usage
4. Smoke Detectors
5. Electrical information (Including the service)
6. Location and type of utilities
7. Header beam size, span and location

FOUNDATION PLAN

1. Footing size
2. Slab thickness and elevation
3. Concrete and reinforcement specifications
4. Anchor – Size and location
5. Soils and moisture protection information

WALL SECTION

1. Type, height and specification or spacing and size
2. Anchors – Types and locations
3. Truss type and spacing (Engineering Required)
4. Roof type and specifications (Including Overhang)
5. Insulation type and “R” value (Same as shown on energy code)
6. Vertical reinforcement and masonry walls

MECHANICAL PLAN

1. Duct type and size and location
2. Type of system
3. Energy code: 1993 Florida 600 Form and Equal – Manual “J” Energy Guide

PLUMBING PLAN

1. Location, type and size of lines
2. Isometric
3. Health Department approved septic system

RE-ROOF

1. Detailed specification of work to be done
2. Copy of signed contract
3. Re-Roof Affidavit