# CITY OF MARGATE Together We Make It Great

#### SMOKE DETECTOR PERMIT APPLICATION CHECKLIST

#### Minimum Permit Application Requirements:

Broward County Uniform Building Permit Application (filled out and notarized)

Documented proof of cost, including all labor and materials (signed contract)

Notice of Commencement (if job value is over \$2,500)

Electrical plans shall be signed and sealed by a Florida licensed architect/engineer or an electrical contractor; plan shall be signed by electrical contractor/qualifier with state license number and notarized (*plans must show the full scope of work*).

Floor plans to show location of smoke alarms on plans. Smoke alarms must comply with Florida Statutes 553.883 – all smoke alarms shall be powered by a non-removable, non-replaceable battery that powers the alarm for at least 10 years.

THE PERMIT APPLICATION WILL NOT BE ACCEPTED WITHOUT THE ABOVE MINIMUM DOCUMENTATION OTHER DOCUMENTS MAY BE REQUIRED DEPENDING UPON THE JOB CONDITIONS

#### **BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION**

Select One Trade: Building	Electrical	□Plu	mbing	Mech	anical	Other	
Application Number:					Applica	tion Date:	
Job Address:				Unit:	City:		
Tax Folio No.:	Flood Zn:	BFE:	Fle	oor Area:	,	Job Value:	
Building Use:		Cor	structi	on Type:	(	Occupancy	Group:
Present Use:		Pro	posed	Used:			
Description of Work:							
□New □Addition □Repai	r Alteration	Demo	olition	Revision	Othe	r:	
Legal Description:							Attachment
Property Owner:		PI	none:		Email:		
Owner's Address:		•	10110.	City:	Linaii	State:	Zip:
			1	Oity.		Otato.	
Contracting Co.:		PI	none:		Email:		
Company Address:			_	City:		State:	Zip:
Qualifier's Name:			Owne	er-Builder: 🗆	License	Number:	
Architect/Engineer's Name:		Ph	none:		Email:		
Architect/Engineer's Address:				City:		State:	Zip:
Bonding Company:				-			-
Bonding Company Address:				City:		State:	Zip:
Fee Simple Titleholder's name (if	other than owner	·):					
Fee Simple Titleholder's Address	(If other than ow	ner):		City:		State:	Zip:
Mortgage Lender's Name:							
Mortgage Lender's Address:				City:		State:	Zip:
commenced prior to the issuance or construction in this jurisdiction. I un SIGNS, WELLS, POOLS, FURNACE OWNER'S AFFIDAVIT: I certify that applicable laws regulating construction	derstand that a ses, BOILERS, HE all the foregoing i	separate po ATERS, TA	ermit m ANKS,	ust be secure and AIR COND	d for ELE DITIONERS	CTRICAL W S, etc.	ORK, PLUMBING
WARNING TO OWNER: YOUR PAYING TWICE FOR IMPRO' RECORDED AND POSTED ON FINANCING, CONSULT WITH RECORDING YOUR NOTICE O	VEMENTS TO Y N THE JOB SITE H YOUR LEND! OF COMMENCEM	OUR PROBEFORE ER OR A ENT.	PERT THE F	Y. A NOTICE IRST INSPEC TORNEY BE	OF CONTION. IF	MENCEME YOU INTEN	NT MUST BE D TO OBTAIN
STATE OF FLORIDA COUNTY OF BROWARD	gnature of Property Owi	ner or Agent	-	OF FLORIDA TY OF BROWAR	RD		Signature of Qualifie
Sworn to (or affirmed) and subscribed before me this day of by		Sworn to (or affirmed) and subscribed before me this day of, 20 by					
(Type / F	Print Property Owner or	Agent Name)	(Type / F	Print Qualifier's Nam	ne)	<del></del>	
NOTARY'S SIGNATURE as to Owner or Agent's Signature							
Notary Name		Notary Name					
(	Print, Type or Stamp No	tary's Name)		(Print,	Type or Stamp	Notary's Name)	
Personally Known or Produc				Personally Know			
Type of Identification Produced			Type o	of Identification Pr	oduced		
APPROVED BY:	Permit Offic	er Issue	Date:		Cod	de in Effect:	
A jurisdiction may use a supplement.  Note: If any development work as described.	nental page requ	esting add	itional	information a	nd citing (	other condit	ions, please inqui

the issuance of a building permit.

\*\*\*Issuance of a building permit by the City of Margate does not guarantee that the work permitted is allowed by your homeowner's association. The homeowner and/or contractor is responsible for obtaining their approval separately.\*\*\*

PERMIT NUMBER:						
NOTICE OF COM	MENCE	MENT				
The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statues the following information is provided in the Notice of Commencement.  1. DESCRIPTION OF PROPERTY (Legal description & street address, if available) TAX FOLIO NO.:						
SUBDIVISIONBLOCK	_TRACT	LOT	BLDG	UNIT		
2. GENERAL DESCRIPTION OF IMPROVEMENT:						
3. OWNER INFORMATION: a. Name						
b. Address	_c. Interest in property					
d. Name and address of fee simple titleholder (if other than Owner)  4. CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:						
5. SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT	NT:					
6. LENDER'S NAME, ADDRESS AND PHONE NUMBER:						
7. Persons within the State of Florida designated by Owner upon whom notices or oth Florida Statutes:  NAME, ADDRESS AND PHONE NUMBER:	er documents n	nay be served as pro	vided by Section 71	3.13 (1) (a) 7.,		
8. In addition to himself or herself, Owner designates the following to receive a copy of 713.13 (1) (b), Florida Statutes:  NAME, ADDRESS AND PHONE NUMBER:	f the Lienor's I	Notice as provided in	Section			
9. Expiration date of notice of commencement (the expiration date is 1 year from the commencement)	late of recordir	ng unless a different of	date is specified):	, 20		
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AF ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PARESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR IRECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INS WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING W	TER THE EXART I, SECT PROPERTY. PECTION. I	KPIRATION OF T ION 713.13, FLO A NOTICE OF C F YOU INTEND	THE NOTICE OF PRIDA STATUTI OMMENCEMEN TO OBTAIN FIN	COMMENCEMEN' ES, AND CAN VT MUST BE ANCING, CONSUL		
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager State of Florida County of Broward	Print Na	ne and Provide	Signatory's Ti	tle/Office		
The foregoing instrument was acknowledged before me this	day of		_, 20			
By	(type of au	thority,e.g. officer	r, trustee, attorney i	n fact)		
Personally known orproduced the following type of identification	:					
Notary	_	(	Signature of Notary	Public)		
Under Penalties of perjury, I declare that I have read the foregoing and that the facts in Statutes).	t are true to the	e best of my knowled	dge and belief (Sect	ion 92.525, Florida		

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:

Ву\_\_\_

Rev .08-09-07 (S.Recording)



### SECURE THIS JOB

## DURING A HURRICANE WATCH & BEFORE THE ONSET OF HURRICANE VELOCITY WINDS YOU ARE REQUIRED TO SECURE THIS JOB

IN ACCORDANCE WITH THE BOARD COUNTY ADMINISTRATIVE PROVISIONS
OF THE FLORIDA BUILDING CODE SECTION 110.13

All loose objects
in exposed outdoor locations
shall be lashed to rigid construction
or shall be stored in buildings.

Florida Building Code Broward County Administrative Provisions
Section 110.13.2

NOTICES ISSUED BY THE NATIONAL WEATHER SERVICE OF A HURRICANE WATCH ARE DEEMED SUFFICIENT NOTICE TO THE WONER OF REAL PROPERTY UPON WHICH CONSTRUCTIONS IS OCCURRING, OR ANY CONTRACTOR RESPONSIBLE FOR SAID CONSTRUCTION, TO SECURE LOOSE CONSTRUCTION DEBRIS AND LOOSE CONSTRUCTION MATERIALS AGAINST EFFECTS OF HURRICANE FORCE WINDS.

#### THIS INCLUDES BUT IS NOT LIMITED TO:

110.13.2.1 Road Right-of-Way shall remain clear of construction waste and trash				
110.13.2.2 Construction Waste and Trash Contained	110.13.2.3 Construction Materials; Loose Construction Debris; Roofing Tile & Materials; Temporary Electric Service Poles; Temporary Toilets and Temporary Construction Trailer			
AND PROTECT ALL GLASS AREAS				