



City of Anna Maria

REQUIRED DOCUMENTATION FOR OBTAINING A BUILDING PERMIT

New Residential Construction

The following items are required for submission of a residential application:

1. Residential Checklist
2. Building Permit Application
3. Contractor License
4. Contractor Insurance, Liability and Worker's Compensation
5. Subcontractor Forms with license and insurance information
6. Surety Bond
7. Staging Plan
8. Product Approval Specification Sheet
9. Authorization of Permanent Power For Temporary Use
10. Impervious Coverage Calculation Worksheet
11. Coastal A-Zone or Coastal V-Zone Design Certificate
12. Energy Forms
13. Soil Report
14. Elevation Certificates:
 - Construction Drawings (submission)
 - Building Under Construction (during construction)
 - Finished Construction (prior to C.O.)
15. 2 Sets of signed, dated, and sealed plans
16. Recorded Notice of Commencement with the permit number on it
17. West Manatee Fire Department Impact Fees Receipt
18. Declaration of Land Restriction (Non Conversion Agreement - prior C.O.)
19. Education Impact Fee Forms (prior to C.O.)
20. Legal Survey of Property (prior to C.O.)



RESIDENTIAL PERMIT APPLICATION CHECKLIST

IF YOU TURN IN A COMPLETE APPLICATION YOU WILL GET YOUR PERMIT QUICKER

Incomplete applications will be returned.

- All drawings must be on good quality paper, sized no smaller than 24" x 30", legible, to scale, reasonably neat and accurate. Structural drawings require the seal of an Engineer.

ADMINISTRATIVE:

- Permit application fully completed;
- Subcontractor Verification Forms for all trades;
- Notice of Commencement;
- Photos of proposed work site including Right of Way
- \$25,000 security bond where City property may suffer damage (form is on City website)
- West Manatee Fire and Rescue Impact fee receipt
- A sealed survey complying with COAM Chapter 74 – Elevations must be in NAVD
- For remodels of any structure built prior to March 17th 2014 a substantial improvement analysis and elevation certificate
- A pre-construction elevation certificate
- DIGITAL ATTACHMENTS FOR NEW SINGLE FAMILY HOMES & ADDITIONS
- TURTLE LIGHTING PLAN IF APPLICABLE

SITE PREPARATION:

A separate land clearing permit application is required. Use a site plan based upon a boundary survey and indicate all existing vegetation and note the vegetation to be removed and maintained, invasive and non-invasive.

SITE PLAN:

For all work disturbing soil: Two copies of a site plan based on the survey. The Site Plan shall at minimum contain the information set forth below (multiple pages are acceptable):

- Types and percentages of proposed impervious areas and depictions of such impervious areas; including structures and paving;
- the size and location of new construction and existing structures on the site;
- distances from lot lines;
- crown of road elevation;
- proposed finished grades;
- flood hazard areas;
- design flood elevations;
- the location, dimensions and square footage of any native habitat preservation area;
- engineered drainage plan or Infiltration Trench placement area(s);
- living Area Ratio calculation;
- parking calculations per COAM Code Section 90-3(k)(3)
- Percentage of totally enclosed space on ground level
- Square footage of foyer
- Indicate all existing vegetation and note the vegetation to be removed and maintained, invasive and non-invasive (landscaping checklist appears below)

___ **LANDSCAPING:** If the following thresholds are tripped the landscaping requirements and standards under section 114-420 are required to be met and any required landscape plan shall be signed and sealed by a Florida Registered Design Professional.

___ **Y** ___ **N** there IS a total increase in total increase of all the structures on a lot or parcel in excess of 1,000 square feet of gross floor area.

___ **Y** ___ **N** there IS an increase in the non-permeable surface area of a lot or parcel in excess of 1,600 square feet including structures with in the last 12 month period.

NOTE: This means if a pool is put in within 12 months of a new residence being built a new landscape plan will be required.

BUILDING CODE INFORMATION:

Two sets of sealed plans from a Florida Licensed design professional providing in addition to the information required in Chapter one of the FBC:

___ Floor plans - showing size and arrangement of all rooms with use of each designated, Give opening pressures at each window and door / openings on the engineered plans;

___ for additions and remodels; A detailed color coded demolition plan with substantial demolition calculations is required;

___ Foundation - a Sealed Geo-tech soil report with a minimum 20 foot deep sample and structural sections showing size and arrangement of all structural members required by design to be compliant with ASCE 24-05 section 4.0;

___ A scour analysis unless the established CCCL scour depth is used for foundation components;

___ Typical wall section(s) - from footing to roof with elevations in NAVD of all levels including lowest horizontal member and top of grade beam(s) from 0'NAVD and from crown of road showing all footing, reinforcing, foundations and depths, framing and miscellaneous components such as and breakaway wall section and other structural details (structural fill is not allowed);

___ Details on all wall types and load paths;

___ Front, side and rear elevations; Showing existing grade from the survey in NAVD and floor and roof heights including finials, railings and elevator shafts from zero NAVD. Do not use crown of road as zero;

___ For new work and replacement/remodel; Two sets of product approval documents;

___ Two sets of energy code analysis forms with load calculations for new work.

FLOOD PREVENTION

1. A V- Zone certificate or Coastal A-Zone Certificate with break-away wall certification for all additions/new or replacement structures and/or lower enclosures for any structure;
2. Square footage of foyer is shown on cover page? Is it conditioned space?
3. Percentage of totally enclosed space on ground level given?
4. Location of electrical and plumbing services shown on plans as being on non-breakaway exterior walls?
5. Locations and calculations for flow through vents provided?
6. Disconnects/Outlets/Switches required for safety by NEC 210 and 230 allowed below BFE shall be shown on plans;
7. No partitions in enclosed area other than the separation of the foyer or storage from garage;
8. Foundation plans show depth of foundations elements in relation to scour;

9. Non-conversion agreement of enclosed space recorded on deed at the County Clerk's office;
10. For ALL new work and additions to structures built before the latest FIRM map adoption date (March 17, 2014) a pre-plans/pre-construction FEMA flood elevation certificate is required;
11. For additions and remodels/alterations on structures built before the latest FIRM map adoption date (March 17, 2014); a 50% substantial improvement determination form is required to be submitted;
12. For remodels and additions to structures built before the latest FIRM map adoption date; a Substantial Demolition analysis is required on city supplied form. **PHOTOS** of interior of subject property are required.

CONSTRUCTION STAGING PLAN:

For all new construction including pools and additions a construction staging plan shall be submitted for approval by the City. A construction staging plan based upon the proposed site plan shall contain, at a minimum the following:

1. A best management practices plan for stormwater and sediment control during the project; this includes, but is not limited to:
 - (i) the method and placement of project access route – how and where the site will be entered by vehicles
 - (ii) a minimum 20 foot deep washed medium shell (or other coarse aggregate of a similar type) soil tracking prevention device across the City Right-of-Way, (where sidewalks are encountered the device must be placed on either side);
 - (iii) silt fencing around the perimeter of the property and/or stored material;
 - (iv) turbidity control features in canals (Containment boom or turbidity curtain)
 - (v) location of groundwater discharge and filtration methods to be used to control siltation, (hay bales, pipe sock, etc.)
2. Depict the location for material storage (lumber, pavers fill, trusses, etc.);
3. If a construction trailer will be used, show where it be located;
4. Will the construction require the use of the public right-of-way? In what way? (parking, storage of materials, etc.);
5. Indicate the number of workers and the areas where their vehicles will be parked;

City of Anna Maria
BUILDING DEPARTMENT
307 Pine Ave
Anna Maria, FL 34216
Phone: 941-708-6130 Fax: 941-708-6136



BUILDING PERMIT APPLICATION

OFFICE USE ONLY

PERMIT # : _____
Fees Due: \$ _____ Receipt #: _____
Approved by (plans reviewer): _____

REVIEWED UNDER FLORIDA BUILDING CODE SIXTH EDITION AND STATE STATUTES

APPLICATION MUST BE COMPLETED IN INK OR TYPED. ALL SIGNATURES MUST BE NOTARIZED

AMOUNT OF CONTRACT: \$ _____ IF CONTRACT/PRICE IS \$2,500 OR MORE, A RECORDED NOTICE OF COMMENCEMENT IS REQUIRED TO BE SUBMITTED PRIOR TO THE ISSUANCE OF THE PERMIT.

BRIEF DESCRIPTION OF PROPOSED WORK:

JOB SITE

STREET ADDRESS: _____
UNIT# _____
LOT(S) # _____ PARCEL# _____

BUILDING PERMIT APPLICANT

FL. LICENSE # _____
APPLICANT/QUALIFIER NAME: _____ PHONE: _____
COMPANY NAME _____ EMAIL: _____
STREET: _____ OTHER: _____
CITY: _____ STATE: _____ ZIP: _____

PROPERTY OWNER IS APPLICANT
PROPERTY OWNER (required)

NAME AS ON PROPERTY RECORD: _____ PHONE: _____
COMPANY NAME: _____ EMAIL: _____
STREET: _____ OTHER: _____
CITY: _____ STATE: _____ ZIP: _____

TYPE OF CONSTRUCTION: _____ OCCUPANCY AND USE: _____
TOTAL # STORIES FROM GRADE: _____
FIRE SPRINKLERED? YES NO FLOOD ZONE FOR PROPOSED/EXISTING BLDG. _____

<50%: YES NO JUST VALUE: _____ YEAR BUILT: _____

BUILDING: CONFORMING NON-CONFORMING (IF NON-CONFORMING, FEMA IMPROVEMENTS/REPAIR APPLICATION PACKET IS REQUIRED)

ALTERATIONS

SIXTH ADDITION FBC- EXISTING BUILDING: ALTERATION LEVEL I II III

KITCHEN LIVING ROOM DINING ROOM # _____ BEDROOM(S) # _____ FULL BATH(S) # _____ 1/2 BATH(S)

OTHER/DESCRIPTION:

CITY OF ANNA MARIA APPLICATION FOR DEVELOPMENT PERMIT

By Ordinance the site shall be kept clean and materials will be kept secured from winds. The Contractor is responsible to effect compliant erosion control best management practices including but not limited to Silt Control Fencing. The applicant covenants that any damage to City property that results from the work performed under this permit shall be repaired at the sole cost of the Applicant. 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 government entities such as water management districts, state agencies or federal agencies. If asbestos is present Contractor or Owner Builders shall inform the Department of Environmental Protection at 813.362.7600 and comply with Florida Statute 469.003. For all renovation or demolition work an asbestos affidavit is required to be signed, notarized and submitted to the DEP.

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY 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 OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Property Owner Affidavit: I certify that all the information is accurate and complete. I certify that where required, all plans have been prepared by, or under the direct supervision of, an engineer registered and licensed by the state. I further certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for applicable independent trade work associated with the building permit. Note: If owner is applying for this permit as a contractor under F.S. 489.103 (and applicable Florida Building Code), said owner must personally appear at the City Building Department to sign this application form and submit a completed Owner Affidavit Form.

Owner Signature: _____ Print Name: _____

NOTARY of the State of Florida County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification.

(Signature of Notary) SEAL

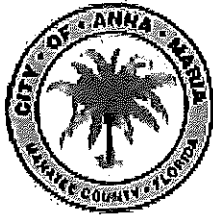
Contractor Affidavit: I certify that all the information is accurate and complete. I certify that where required, all plans have been prepared by, or under the direct supervision of, an engineer registered and licensed by the state. I further certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for applicable independent trade work associated with the building permit.

Contractor Signature: _____ Print Name: _____

NOTARY of the State of Florida County of _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification.

(Signature of Notary) SEAL



**CITY OF ANNA MARIA
BUILDING DEPARTMENT**
10005 Gulf Drive, P.O. Box 779,
Anna Maria, Florida 34216

Phone (941) 708-6132 Fax (941) 708-6136

Sub-Contractor Verification Form

Street Address: _____ Date: _____

General Contractor: _____ Phone # _____

ELECTRIC Company Name _____
Mailing Address _____
Print Contractors Name _____ Phone # _____
Contractors Signature _____ License # _____
 Check if authorized agent signature

MECHANICAL Company Name _____
Mailing Address _____
Print Contractors Name _____ Phone # _____
Contractors Signature _____ License # _____
 Check if authorized agent signature

PLUMBING Company Name _____
Mailing Address _____
Print Contractors Name _____ Phone # _____
Contractors Signature _____ License # _____
 Check if authorized agent signature

ROOFING Company Name _____
Mailing Address _____
Print Contractors Name _____ Phone # _____
Contractors Signature _____ License # _____
 Check if authorized agent signature

GAS Company Name _____
Mailing Address _____
Print Contractors Name _____ Phone # _____
Contractors Signature _____ License # _____
 Check if authorized agent signature

This form must be signed by the license holder or an authorized agent when an original authorized agent signature form is submitted or on file.

BUILDING PERMIT# _____



CITY OF ANNA MARIA

SURETY BOND REQUIREMENT

As of March 17th 2014, a security bond in the minimum amount of \$25,000 will be required on permits for all new structures and other work where City property as set forth in COAM Code Section 50-1 may suffer damage. For work other than new structures the bond will be required on a site specific case by case basis as decided by the Director of public works for projects that may affect City property. Local Development Permits will not be issued until the Bond is received and accepted by the City. Construction fencing may be required for projects abutting City Drainage features.

The bond form to be supplied to your bonding company is attached.



CITY OF ANNA MARIA
STATE OF FLORIDA
PUBLIC WORKS DEPARTMENT
SURETY BOND

KNOW ALL MEN BY THESE PRESENTS

That _____, as Principal, and

_____ a corporation duly authorized to do business in the State of Florida, as Surety, are held and firmly bound unto the City of Anna Maria, a political subdivision of the State of Florida, in the minimum principal sum of Twenty-Five Thousand and no/100 Dollars (\$25,000.00) Said payment hereby jointly and severally binds ourselves, our heirs, executors, administrators, successors and assigns firmly

SIGNED, SEALED AND DATED this the _____ day of _____ year

THE CONDITIONS OF THE ABOVE OBLIGATION ARE SUCH THAT:

WHEREAS, the above bounden Principal may receive a permit or permits from the City of Anna Maria, Florida, which said permit or permits authorize the above bounden Principal to disturb, excavate, or place any constructions in any public road, right-of-way or easement of the City of Anna Maria in the rendition of services or work as particularly set forth in each permit, and by the terms of said permit or permits, the above bounden Principal agrees and is bound to repair, replace, and restore the parts of the public streets and pavement, alleys, sidewalks, or drainage structures including, but not limited to, drainage swales, pipes or outfalls or easements or rights of way thereof or respective fixtures thereon which have been removed or damaged to their respective former status and condition, and is bound to insure prompt payment of any loss, damage, cost and expenses that may be incurred by the City of Anna Maria or any adjoining property owner in connection with such work, including cost of erecting and maintaining of any warning signals, barricades, or other preventative measures to eliminate safety hazards, and maintain traffic flow, by reason of the failure of the applicant to restore or repair any damage to any aforementioned property under the control of the City of Anna Maria, or the failure of the applicant to comply with City of Anna Maria Code Sections 50-1, 50-2, 50-3, and the conditions of the permit.

NOW, THEREFORE, if the above bounden Principal shall keep and perform all of the terms, provisions and conditions of said permit or permits which may be issued, and shall repair, replace and restore the parts of the public streets referred to, and the alleys, sidewalks, or drainage structures including, but not limited to, drainage swales, pipes or outfalls or easements or general rights of way thereof and respective fixtures thereon, to their respective former status and condition, then, in that event, this obligation shall be null and void; otherwise to remain in full force and virtue.

The term of this bond shall be from 12:01 AM _____ to 12:01 AM _____
date year date year
(Two year minimum)

COMPANY (Principal)

By: _____
Title: _____
Address: _____
Telephone: _____

SURETY COMPANY (Surety)

By: _____
Attorney-in-Fact

Countersigned:

By: _____
Resident Agent
State of Florida

Name of Firm: _____

Address: _____



City of Anna Maria Florida

PRODUCT APPROVAL SPECIFICATION SHEET

Project Number _____ Bldg #/Location _____

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72, please provide information and product approval number(s) on the building components listed below if they will be utilized on the construction project for which you are applying. Your supplier should have product approval numbers and information. More information about statewide product approval can be obtained at: www.floridabuilding.org

| Category/Subcategory | Manufacturer | Product Description | Approval Number(s) |
|-------------------------------------|---------------------|----------------------------|---------------------------|
| A. EXTERIOR DOORS | | | |
| 1. Swinging | | | |
| 2. Sliding | | | |
| 3. Sectional | | | |
| 4. Roll up | | | |
| 5. Automatic | | | |
| 6. Other | | | |
| B. WINDOWS | | | |
| 1. Single hung | | | |
| 2. Horizontal Slider | | | |
| 3. Casement | | | |
| 4. Double Hung | | | |
| 5. Fixed | | | |
| 6. Mullion | | | |
| 7. Wind Breaker | | | |
| 8. Dual Action | | | |
| 9. Other | | | |
| C. PANEL WALL | | | |
| 1. Siding | | | |
| 2. Soffit | | | |
| 3. EIFS | | | |
| 4. Storefronts | | | |
| 5. Curtain walls | | | |
| 6. Wall louver | | | |
| 7. Glass block | | | |
| 8. Membrane | | | |
| 9. Greenhouse | | | |
| 10. Other | | | |
| D. ROOFING PRODUCTS | | | |
| 1. Asphalt Shingles | | | |
| 2. Underlayment | | | |
| 3. Roofing Fasteners | | | |
| 4. Non-structural Metal Rf | | | |
| 5. Built-Up Roofing | | | |
| 6. Modified Bitumen | | | |
| 7. Single Ply Roofing Sys | | | |
| 8. Roofing Tiles | | | |
| 9. Roofing Insulation | | | |
| 10. Waterproofing | | | |
| 11. Roof Tile Adhesive | | | |
| 12. Liquid Applied Roof Sys | | | |
| 13. Other | | | |
| Category/Subcategory (cont.) | Manufacturer | Product Description | Approval Number(s) |

| | | | |
|--|--|--|--|
| E. SHUTTERS | | | |
| 1. Accordion | | | |
| 2. Storm Panels | | | |
| 3. Colonial | | | |
| 4. Roll-up | | | |
| 5. Equipment | | | |
| 6. Other | | | |
| F. SKYLIGHTS | | | |
| 1. Skylight | | | |
| 2. Other | | | |
| G. STRUCTURAL COMPONENTS | | | |
| 1. Wood connector/anchor | | | |
| 2. Truss plates | | | |
| 3. Engineered lumber | | | |
| 4. Railing | | | |
| 5. Coolers-freezers | | | |
| 6. Material | | | |
| 7. Insulation Forms | | | |
| 8. Plastics | | | |
| 9. Deck-Roof | | | |
| 10. Wall | | | |
| 11. Sheds | | | |
| 12. Other | | | |
| H. NEW EXTERIOR ENVELOPE PRODUCTS | | | |
| 1. | | | |
| 2. | | | |

I understand that at the time of inspection of these products, the following information must be available to the inspector on the jobsite: 1) copy of the product approval, 2) the performance characteristics which the product was tested and certified to comply with, 3) copy of the applicable manufacturer's installation requirements. I understand these products may have to be removed if approval cannot be demonstrated during inspection.

The products listed below did not demonstrate product approval at plan review:

Applicant Signature

Print Name

Date

Contact Name & Phone Number

Permit # (FOR STAFF USE ONLY)



CITY OF ANNA MARIA, FLORIDA

AUTHORIZATION OF PERMANENT POWER FOR TEMPORARY USE (PPTU)

IT IS UNDERSTOOD THAT THIS TEMPORARY SERVICE APPROVAL BY THE CITY OF ANNA MARIA BUILDING DEPARTMENT IS BEING GRANTED FOR CONSTRUCTION PURPOSE ONLY. THIS APPROVAL IS RELATED TO:

DATE OF ISSUE: _____ BUILDING PERMIT NO.: _____ RB #: _____

FOR THE PROPERTY OWNER: _____

AT THE FOLLOWING ADDRESS: _____

SECURITY MEASURES WILL BE TAKEN TO LIMIT ACCESS TO DISCONNECTS; ENERGIZED PANELS AND SERVICE GEAR TO AUTHORIZED PERSONNEL ONLY.

AN INDIVIDUAL WILL BE ASSIGNED THE RESPONSIBILITY FOR THE SAFETY OF THESE OPERATIONS, THAT INDIVIDUAL WILL HAVE THE SOLE AUTHORITY OVER WHAT IS TO BE ENERGIZED AND WHEN SUCH ENERGIZATION WILL TAKE PLACE.

IT IS UNDERSTOOD THAT THIS APPROVAL IS NOT TO BE CONSIDERED A RELEASE OF THE STRUCTURE FOR USE AND/OR OCCUPANCY. NO SUCH USE AND/OR OCCUPANCY SHALL BE PERMITTED PRIOR TO THE ISSUANCE OF THE C.O.

IT IS UNDERSTOOD THAT THIS APPROVAL IS SUBJECT TO REVOCATION AND THAT THE ELECTRICAL POWER CAN BE DISCONNECTED (AT ANY TIME) BY ORDER OF THE BUILDING DEPARTMENT.

I, _____, BEING FIRST DULY SWORN, DEPOSE AND SAY THAT I AM THE OWNER OF THE ABOVE DESCRIBED PROPERTY AND THAT I AGREE WITH AND ACCEPT ALL OF THE AFOREMENTIONED STIPULATIONS.

NAME AND SIGNATURE OF OWNER: _____

STATE OF FLORIDA
MANATEE COUNTY

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____, DAY OF _____, 20____

SIGNATURE OF NOTARY PUBLIC _____

Seal

I, _____, BEING FIRST DULY SWORN, DEPOSE AND SAY THAT I AM THE ELECTRICAL CONTRACTOR FOR THE ABOVE DESCRIBED PERMIT AND THAT THE ELECTRICAL INSTALLATIONS AS NOW EXISTING WILL NOT CREATE A SAFETY HAZARD IF TEMPORARY PERMANENT SERVICE IS CONNECTED, IN ADDITION, I AGREE WITH AND ACCEPT ALL OF THE AFOREMENTIONED STIPULATIONS.

NAME AND SIGNATURE OF ELECTRICAL CONTRACTOR: _____

STATE OF FLORIDA
MANATEE COUNTY

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____, DAY OF _____, 20____

SIGNATURE OF NOTARY PUBLIC _____

Seal

I, _____, BEING FIRST DULY SWORN, DEPOSE AND SAY THAT I AM THE GENERAL/BUILDING CONTRACTOR FOR THE ABOVE DESCRIBED PERMIT AND THAT I AGREE WITH AND ACCEPT ALL OF THE AFOREMENTIONED STIPULATIONS.

NAME AND SIGNATURE OF BUILDING CONTRACTOR: _____

STATE OF FLORIDA
MANATEE COUNTY

SWORN TO AND SUBSCRIBED BEFORE ME THIS _____, DAY OF _____, 20____

SIGNATURE OF NOTARY PUBLIC _____

Seal



City of Anna Maria

CITY OF ANNA MARIA BUILDING DEPARTMENT

Telephone (941) 708-6132 / Fax (941) 708-6136

IMPERVIOUS COVERAGE CALCULATION WORKSHEET For Submittals After January 1, 2016

STREET ADDRESS: _____

Lot Size: _____ ft. x _____ ft. = _____ sq. ft.
(A)

Building Coverage: _____ sq. ft.
(Any area under a roof) (B)

Divide (B) by (A) = _____ %
Building (D)

Impervious surface coverage means the area of a surface that has been compacted or covered with a layer of material so that it is highly resistant to infiltration by water. It includes but is not limited to semi-impervious surfaces such as paver bricks, crushed or compacted clay, as well as most conventionally surfaced streets, roofs, sidewalks, parking lots and other similar structures. (§§ 70-1,102-3, City of Anna Maria Code). ... Swimming pools and hot tubs permitted after January 1, 2016 shall be counted as impervious surface coverage. (§ 114-222 (4), City of Anna Maria Code.) No deduction is given for pavers of any type unless part of an engineered retention system.

Other Impervious Surface Coverage Existing Before = _____ sq. ft.

Proposed = _____ sq. ft.

TOTAL = (C) _____ sq. ft.

Divide (C) by (A) = _____ %
(E)

Add (D) and (E) TOTAL COVERAGE = _____ %
Maximum Total Impervious Surface Coverage: 40 percent

This form is for impervious surface coverage only; Living Area Ratio (LAR) is calculated separately.

RBMcl/ May 26, 2016

COASTAL A-ZONE DESIGN CERTIFICATE

Name _____ Policy Number (Insurance Co. Use) _____
 Building Address or Other Description _____ State _____ Zip Code _____
 Permit No. _____ City _____

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community No. _____ Panel No. _____ Suffix _____ FIRM Date _____ FIRM Zone(s) _____

SECTION II: Elevation Information Used for Design

[NOTE: This section documents elevations used in the design - it does not substitute for an as-built Elevation Certificate.]

- NGVD NAVD Other
1. Datum..... _____ feet above datum
 2. Elevation of the Bottom of Lowest Horizontal Structural Member _____ feet above datum
 3. Base Flood Elevation (BFE)..... _____ feet above datum
 4. Elevation of Lowest Adjacent Grade _____ feet above datum
 5. Approximate Depth of Anticipated Scour/Erosion used for Foundation Design..... _____ feet above datum
 6. Embedment Depth of Piling or Foundation Below Lowest Adjacent Grade..... _____ feet above datum

SECTION III: Design Certification Statement

[NOTE: This section must be certified by a Florida licensed engineer or architect.]

I certify: (1) that I have developed or reviewed the structural design, plans, and specifications for construction and (2) that the design and methods of construction to be used are in accordance with accepted standards of practice for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (with the exception of mat or raft foundations, piling, pile caps, columns, grade beams and bracing) is elevated to or above the BFE in accordance with the requirements of the *Florida Building Code* and local floodplain management regulations; and
- The pile and column foundation and building or structure to be attached thereto is designed in accordance with the *Florida Building Code* to be anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and flood loads acting simultaneously on all building components, and other load requirements of the *Florida Building Code*. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

SECTION IV: Breakaway Wall Design Certification Statement

[NOTE: This section must also be certified by a Florida licensed engineer or architect when breakaway walls exceed a design safe loading resistance of 20 pounds per square foot. This requirement does not apply to open wood/plastic lattice/slats/louvers or insect screening.]

I certify: (1) that I have developed or reviewed the structural design, plans, and specifications for construction and (2) that the design and methods of construction to be used for the breakaway walls are in accordance with the *Florida Building Code*, *Building (ASCE 24)* or *Florida Building Code, Residential*, and local technical amendments as applicable, and accepted standards of practice.

SECTION V: Certification and Seal

This certification is to be signed and sealed by a Florida licensed professional engineer or architect authorized by law to certify structural designs. I certify the Coastal-Zone Design Certification Statement in Section III and the Breakaway Wall Design Certification Statement in Section IV (if applicable).

 Certifier's Name License Number

 Title Company Name

 Address City State ZIP

 Signature Date Telephone



V- ZONE DESIGN CERTIFICATE

Name _____ Policy Number (Insurance Co. Use) _____
 Building Address or Other Description _____
 Permit No. _____ City _____ State _____ Zip Code _____

SECTION I: Flood Insurance Rate Map (FIRM) Information

Community No. _____ Panel No. _____ Suffix _____ FIRM Date _____ FIRM Zone(s) _____

SECTION II: Elevation Information Used for Design

[NOTE: This section documents elevations used in the design -- it does not substitute for an as-built Elevation Certificate.]

- _____ NGVD NAVD Other
1. Datum..... _____ feet above datum
 2. Elevation of the Bottom of Lowest Horizontal Structural Member _____ feet above datum
 3. Base Flood Elevation (BFE)..... _____ feet above datum
 4. Elevation of Lowest Adjacent Grade _____ feet above datum
 5. Approximate Depth of Anticipated Scour/Erosion used for Foundation Design..... _____ feet above datum
 6. Embedment Depth of Piling or Foundation Below Lowest Adjacent Grade..... _____ feet above datum

SECTION III: V Zone Design Certification Statement

[NOTE: This section must be certified by a Florida licensed engineer or architect.]

I certify: (1) that I have developed or reviewed the structural design, plans, and specifications for construction and (2) that the design and methods of construction to be used are in accordance with accepted standards of practice for meeting the following provisions:

- The bottom of the lowest horizontal structural member of the lowest floor (with the exception of mat or raft foundations, piling, pile caps, columns, grade beams and bracing) is elevated to or above the BFE in accordance with the requirements of the *Florida Building Code* and local floodplain management regulations; and
- The pile and column foundation and building or structure to be attached thereto is designed in accordance with the *Florida Building Code* to be anchored to resist flotation, collapse, and lateral movement due to the effects of the wind and flood loads acting simultaneously on all building components, and other load requirements of the *Florida Building Code*. The potential for scour and erosion at the foundation has been anticipated for conditions associated with the base flood, including wave action.

SECTION IV: Breakaway Wall Design Certification Statement

[NOTE: This section must also be certified by a Florida licensed engineer or architect when breakaway walls exceed a design safe loading resistance of 20 pounds per square foot. This requirement does not apply to open wood/plastic lattice/slats/louvers or insect screening.]

I certify: (1) that I have developed or reviewed the structural design, plans, and specifications for construction and (2) that the design and methods of construction to be used for the breakaway walls are in accordance with the *Florida Building Code*, *Building (ASCE 24)* or *Florida Building Code, Residential*, as applicable, and accepted standards of practice.

SECTION V: Certification and Seal

This certification is to be signed and sealed by a Florida licensed professional engineer or architect authorized by law to certify structural designs. I certify the V Zone Design Certification Statement in Section III and the Breakaway Wall Design Certification Statement in Section IV (if applicable).

| | |
|------------------|----------------|
| Certifier's Name | License Number |
| Title | Company Name |
| Address | City State ZIP |
| Signature | Date Telephone |

Place Seal
Here

This Instrument Prepared By:

Name: _____

Address: _____

Tax Folio No: _____

Permit No.: _____

NOTICE OF COMMENCEMENT

State of _____
County of _____

THE UNDERSIGNED hereby gives notice that improvement(s) 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.

1. Description of property (legal description of property and street address): _____
2. General description of improvement: _____
3. Owner Information:
 - a) Name and complete address: _____
 - b) Interest in property: _____
 - c) Name and address of Fee Simple Title Holder (if other than owner): _____
4. Contractor Information:
 - a) Company name and complete address: _____ Fax Number: _____
 - b) Phone number: _____
5. Surety:
 - a) Name and complete address: _____
 - b) Amount of Bond: \$ _____ Fax Number: _____
 - c) Phone number: _____
6. Lender:
 - a) Name and complete address: _____ Fax Number: _____
 - b) Phone number: _____
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by in Section 713.13(1)(a)7., Florida Statutes:
 - a) Name and complete address: _____ Fax Number: _____
 - b) Phone number: _____
8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
 - a) Name and complete address: _____ Fax Number: _____
 - b) Phone number: _____
9. Expiration date of Notice of Commencement (the expiration date is 1-year from the date of recording, unless a different date is specified): _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, 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 OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____, by _____ (name of person) as the _____ (name of party on behalf of whom instrument was executed) of authority, e.g., officer, trustee, attorney in fact) for _____

Signature of Notary Public - State of Florida
Print, Type, or Stamp Commissioned Name of Notary Public/Commission Number

Personally Known _____ or Produced ID _____

Verification Pursuant to Section 92.525, Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

**DECLARATION OF LAND RESTRICTION
(NONCONVERSION AGREEMENT)**

**FOR USE IN FLOOD HAZARD AREAS FOR PROPOSED DEVELOPMENT
THAT INCLUDES**

- (1) ENCLOSURES BELOW ELEVATED BUILDINGS,**
- (2) CRAWL/UNDERFLOOR SPACES THAT ARE MORE THAN 4 FEET IN
HEIGHT,**
- (3) DETACHED ACCESSORY STRUCTURES THAT ARE NOT ELEVATED
AND ARE LARGER THAN 300 SQUARE FEET IN AREA (FOOTPRINT) AND**
- (4) ATTACHED GARAGES.**

**The attached agreement shall be executed and recorded onto
the property deed prior to a Certificate of Occupancy being
issued on structures built after February 14th, 2014.**

Ordinance 14-769 Flood Damage Prevention

**DECLARATION OF LAND RESTRICTION
(NONCONVERSION AGREEMENT)**

This DECLARATION made this _____ day of _____, 20____ by
_____ ("Owner") having an
address at: _____

WITNESSETH:

WHEREAS, the Owner is the record owner of all that real property located at _____
_____ in the _____ the Election District of _____ County, designated in the Tax
Records as Property Identifier number _____ Block _____, parcel _____, lot
_____, subdivision and being that same property acquired by the Owner by deed dated
_____, 20____, and recorded among the Land Records of
_____ County, Florida at OR Book _____ and Page No. _____.

WHEREAS, the Owner has applied for a permit to construct a structure on that property
and:

- (1) It is identified by Permit Number _____ ("Permit");
- (2) It is located in a flood hazard area identified on Flood Insurance Rate Map Panel #
_____;
- (3) It is located in Flood Zone _____;
- (4) It is designed to conform to the requirements of the Floodplain Management Regulations of
{insert community name} and the *Florida Building Code*; and
- (5) If unauthorized improvements, modifications, alterations, or conversions are made to it in
the future, the structure could be made noncompliant by such unauthorized actions,
including such actions by future owners.

Owner: _____

Address: _____

Permit No. _____

WHEREAS, the Owner agrees to record this DECLARATION OF LAND RESTRICTION (NONCONVERSION AGREEMENT) on the deed of the property recorded in the above-cited land records and certifies, accepts, and declares that the following covenants, conditions, and restrictions are placed on the affected property as a condition of granting the Permit, and affects rights and obligations of the Owner and shall be binding on the Owner, his heirs, personal representatives, successors, and assigns.

THE PERMITTED STRUCTURE SHALL BE DESIGNED IN ACCORDANCE WITH THE FLORIDA BUILDING CODE AND IS SUBJECT TO CONDITIONS as follows:

1. The structure or part thereof to which these conditions apply is:
 - An enclosure that is below an elevated building.
 - A crawl/underfloor space enclosed by perimeter walls and is more than 4 feet in height.
 - A detached accessory structure that is not elevated and that is larger than 300 square feet in area (footprint).
 - An attached garage.
2. The structure or part thereof identified in #1 shall be used solely for parking of vehicles, storage, or access to the elevated building, as applicable. See section 604.50, F.S., for the definition and limitations of nonresidential farm buildings.
3. As required by the *Florida Building Code*, the walls of the structure or part thereof identified in #1 shall be equipped with flood openings [applies in flood hazard areas designated Zone A (including A, AE, AO, AH, or A1-30) and flood hazard areas designated as Coastal A Zone]. The flood openings shall not be blocked, covered, closed or modified in any way that would alter the intended performance to allow floodwaters to automatically enter and exit.
4. As required by the *Florida Building Code*, the walls of the structure or part thereof identified in #1 shall be designed to break away. The breakaway walls shall not be altered in any way that prevents the walls from breaking away, as designed, under flood conditions.
5. As required by the *Florida Building Code*, building materials used below the elevation required by the *Florida Building Code*, shall be flood damage-resistant materials and unfinished.
6. Any conversion, alteration, modification, improvement or change in use of the structure or part thereof identified in #1:
 - a. Shall not occur without the issuance of a permit by the local permit authority; and
 - b. Depending on the nature of work, such permit may require full compliance with the *Florida Building Code*.
7. Any conversion, alteration, modification, improvement or change in use of the structure or part thereof identified in #1 or any other variation beyond what is permitted that is not authorized by permit constitutes a violation of the Permit and the *Florida Building Code* and shall be subject to enforcement action to correct such violation.

WARNINGS

8. Unauthorized conversion, alteration, modification, improvement or change in use of the permitted structure or part thereof identified in #1 may render the structure uninsurable by the National Flood Insurance Program or increase the cost for flood insurance commensurate with the increased risk.

9. Unauthorized conversion of an enclosure below the lowest floor of an elevated building for uses other than permitted uses, or the unauthorized conversion of an accessory structure for uses other than permitted uses, exposes occupants to increased risk of death and injury. The local jurisdiction issuing the Permit shall not be held liable for any increase in damage or injury to occupants.

10. Unauthorized conversion of an enclosure below the lowest floor of an elevated building for uses other than permitted uses, or the unauthorized conversion of an accessory structure for uses other than permitted uses will be prosecuted as allowed for under the Code Enforcement regulations of the City of Anna Maria.

SIGN ONLY IN THE PRESENCE OF A NOTARY:

| | |
|--------------------------|--------------|
| Owner's Signature / Date | Printed Name |
|--------------------------|--------------|

| | |
|---------------------------------------|--------------|
| (Additional) Owner's Signature / Date | Printed Name |
|---------------------------------------|--------------|

Type of ID: _____

Witness my hand and official seal, this _____ day of _____ 20____

SEAL:

Notary Public Signature

EDUCATIONAL FACILITIES IMPACT FEE INVOICE

PLEASE USE ONE INVOICE PER DWELLING UNIT

This form is valid for the period beginning April 18, 2016.
Educational Facilities Impact Fees - Manatee County Ordinance 16-03 as amended.

INVOICE DATE: _____

JURISDICTION:

| | | |
|---|--|--|
| <input type="checkbox"/> Anna Maria** | <input type="checkbox"/> Bradenton*** | <input type="checkbox"/> Bradenton Beach** |
| <input type="checkbox"/> Holmes Beach** | <input type="checkbox"/> Longboat Key+ | <input type="checkbox"/> Palmetto** |
| <input type="checkbox"/> Unincorporated Manatee County* | | |

| TYPE OF STRUCTURE | CHECK ONE | IMPACT FEE | FEE COLLECTED |
|-------------------|-----------|------------|---------------|
| Single Family | _____ | 3,238.00 | _____ |
| Duplex/Townhouse | _____ | 3,424.00 | _____ |
| Mobile Home | _____ | 739.00 | _____ |
| Other: | _____ | 1,763.00 | _____ |

PROPERTY ADDRESS: _____

OWNER: _____

BUILDING PERMIT # _____

PARCEL IDENTIFICATION # _____

SIGNATURE OF LOCAL GOVERNMENT OFFICIAL VERIFYING INFORMATION: _____

Educational Facilities Impact Fees can ONLY be paid:

- * County Administration Building, Second Floor Cashier
- ** Manatee County Historic Courthouse (1115 Manatee Avenue West), Clerk of the Circuit Court, Second Floor Cashier
- *** City of Bradenton Planning and Building Department
- + Town of Longboat Key Planning and Building Department

EDUCATIONAL FACILITIES IMPACT FEE EXEMPTION REQUEST

Completed Exemption Request form, building permit, and required documentation should be mailed or faxed for consideration to: Construction Services Department, PO Box 9069, Bradenton, FL 34206
 FAX: (941) 708-8832 PHONE: (941) 708-8800 Ext 1056

DATE: _____

JURISDICTION: Anna Maria Bradenton Bradenton Beach
 Holmes Beach Longboat Key Palmetto
 Unincorporated Manatee County

PROPERTY ADDRESS: _____

OWNER: _____

CONTACT INFO: _____

BUILDING PERMIT #: _____

PARCEL ID#: _____

Applicable Exemption Criteria-Check One Type

- _____ Alteration or expansion of an existing building where no additional residential units are created, where the use of such building is not changed, and where no additional public school enrollment will be generated over and above the number produced by the existing use.
- _____ The construction of accessory buildings or structures which will not produce additional public school enrollment over and above that generated by the principal building or use of the land.
- _____ The replacement of a destroyed or partially destroyed building or structure with a new building or structure of the same number of dwelling units and use on the same parcel of land, provided that no additional public school enrollment will be generated over and above that produced by the original use of land, and that such destruction occurred after July 1, 2002. (Required: valid demolition permit)
- _____ The installation of a replacement mobile home on a lot or other such site when the impact fee pertaining to the site has previously been paid pursuant to this ordinance or where a residential mobile home legally existed on such site on or before July 1, 2002.
- _____ Housing for older persons. See Ordinance 16-03, Section 2-29-90(a)(5) for criteria.

SCHOOL DISTRICT OR LOCAL GOVERNMENT USE ONLY

Exemption Amount \$ _____ Authorized by: _____
 Backup Docs Verified _____ Authorized Signature: _____
 Authorization Date: _____ Contact Information: _____