



Bradford County ~ City of Starke  
Building, Zoning & Planning  
P.O. Box 1148 ~ 945-F North Temple Ave.  
Starke, FL 32091  
Phone: 904-966-6205 / 904-966-6223  
Fax: 904-966-6220



## **RESIDENTIAL CONSTRUCTION PERMIT INFORMATION**

1. You must PROVIDE a parcel number (this identifies the property in which the construction will take place) This can be found on your tax bill.
  2. The **B.C. Building & Zoning Department** will issue a zoning certification on your property the fee will be \$25.00 and issue a Flood Zone Designation Map the fee will be \$25.00. These fees will be collected at the issuance of the permit. **Must have a survey of parcel for certification.**
  3. If not connected to municipal water and sewer, a septic tank permit must be obtained from the **B.C. Environmental Health Department, 904-964-7732**. The Health Department **MUST** initial by Septic number on application form before building permit will be issued.
  4. If you are not the property owner, you must have a notarized letter of authorization from the property landowner granting you permission to build on the land.
  5. Road Department **MUST** initial by culvert number on application form before building permit will be issued. (904) 966-6243.
  6. **DOCUMENTS REQUIRED IN ORDER TO BE ISSUED A RESIDENTIAL PERMIT:**
    - The completed construction application:
    - Subcontractor verification list with notarized Contractor's signatures:
    - The Owner Builder or General Contractor will pull **ALL** the permits at the same time:
    - Survey showing Flood Zone and site plan showing setbacks from property lines:
    - One set of plans and one set of floor plans; **Additional requirements for plans see page 2.**
    - Recorded Notice Commencement of any project over \$2,500.00:
    - Warranty Deed showing ownership:
    - If in a Flood Zone A or AE, a Floodplain Development Permit Application will need to be Submitted with construction application.
    - **Must have a 911 address at time of permitting; call 904-966-6179: ADDRESS MUST BE POSTED AT TIME OF FINAL INSPECTION.**
    - Survey stakes must be in place and visible prior to first inspection:
    - Pro-rated SWSA fee will be added to new construction upon permitting.
    - A completed packet with plans must be submitted for review by Clay County prior to issuance of permit.
  7. The cost of the Building permit is based on square footage; Electrical, Plumbing, HVAC are based on contract value. Before a final is given on new construction, the prorated portion of the solid waste special assessment must be paid at the Building Department.
  8. For new electrical service, or transfer of electrical service you must submit an application to your ELECTRICAL POWER SERVICE PROVIDER: This could take up to three weeks.
- FPL - **1-800-462-0561**      CLAY - **352-473-8000 EXT 8356**      CITY OF STARKE - **904-964-5027**

## ADDITIONAL REQUIREMENTS FOR PLANS

- One (1) sets of plans, and one (1) floor plans

Mono-slab or stem wall.

Anchor bolts and spacing.

Any interior footings for bearing wall and required anchors.

Smoke Detector & C.O. Detector locations

Egress window locations

Clearly indicate stud size, grade and spacing; sheathing material, thickness and nailing schedule, any bracing requirements and location:

All required shear walls and anchors for same.

Roof framing plan and either engineered truss details showing uplift and required anchors or conventional framing details, along with uplift and required anchors.

Any other requirements to meet wind loads per F.B.C. 2007 Edition.

- Florida Building Code 2007 106.3.1.5. Minimum Plan Review Criteria
- Energy forms

**Note: Items 1 thru 4 must be placed on the cover sheet or front page of plans**

1. Name and Address of owner.
2. Square footage heated and cooled.
3. Square footage under roof.
4. Wind load specifications FBC Section 1609
  - a. Wind load 3 second gust = 100 mph
  - b. Wind importance factor = (!) residential
  - c. Wind Exposure = B\_\_\_\_\_
  - d. The applicable internal pressure coef. \_\_\_\_\_

**BRADFORD COUNTY, FLORIDA  
BUILDING AND ZONING DEPARTMENT**

TIME LIMITATIONS FOR BUILDING PERMITS

The following is the policy of Bradford County, Florida concerning the time limits for construction after a building permit is issued by the Bradford County Building and Zoning Department. This policy applies to building permits issued for properties within unincorporated Bradford County as well as for properties within municipalities for which the Bradford County Building Department is responsible for issuing building permits.

1. Florida Building Code Section 104.5 Conditions of the permit states that every permit issued shall become invalid unless the work authorized by such permit is commenced within 6 months after its issuance, or if the work authorized by such permit is suspended or abandoned for a period of 6 months after the time the work is commenced.
2. Work shall be considered to be in active progress when the permit has received and improved inspection within 6 months from issuance of permit and an extension will be given for an additional 6 months from each inspection.
3. If no inspection is requested and given within three (3) months of the issuance of a building permit or three (3) months from a prior inspection by the Building Department, then the Building Department may allow up to four (4) extensions of the three (3) months each, provided that the contractor contacts the Building Department by telephone or by U.S. Mail to request the extension prior to the expiration date of the current permit.
4. If a building permit expires and no extension has been requested and granted, then the contractor will be required to reapply for the building, electrical, mechanical, and plumbing permits that were issued prior to the expiration. The contractor will be charged a re-permit fee of \$50.00 per permit.
5. The County Manager, upon a showing of good cause, may wave the reapplication fee described above or otherwise reimburse any such fees previously paid.

**BRADFORD COUNTY  
RESIDENTIAL PERMIT  
APPLICATION**

**OWNER'S INFORMATION**

NAME OF PROPERTY OWNER: \_\_\_\_\_

PROPERTY OWNERS MAILING ADDRESS: \_\_\_\_\_

TELEPHONE #: \_\_\_\_\_ CELL #: \_\_\_\_\_

**911 ADDRESS:** \_\_\_\_\_

NAME OF POWER SERVICE PROVIDER: \_\_\_\_\_

SEPTIC NUMBER: \_\_\_\_\_ TOTAL SQUARE FOOTAGE: \_\_\_\_\_

CULVERT NUMBER: \_\_\_\_\_

DIRECTIONS TO JOB-SITE: \_\_\_\_\_

**I hereby state that I have received the Time Limitations For Building Permits sheet in the Residential Packet.**

**SIGNATURE (OWNER/CONTRACTOR)** \_\_\_\_\_

**ZONING DEPARTMENT CERTIFICATION**

PARCEL ID NUMBER: \_\_\_\_\_

LAND USE / ZONING CLASSIFICATION: \_\_\_\_\_

MINIMUM LOT SIZE REQUIREMENT: \_\_\_\_\_

MINIMUM LOT WIDTH: \_\_\_\_\_

FEMA FLOOD ZONE: \_\_\_\_\_

**MINIMUM PROPERTY SET-BACKS:**

FRONT: \_\_\_\_\_ SIDES: \_\_\_\_\_ REAR: \_\_\_\_\_

AUTHORIZED ZONING SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

# SUBCONTRACTOR VERIFICATION FORM

**ALL PERMITS WILL BE ISSUED AT ONE TIME ALL CONTRACTOR'S MUST HAVE THEIR SIGNATURES NOTARIZED IT IS THE RESPONSIBILITY OF ALL CONTRACTOR'S TO INFORM BRADFORD COUNTY BUILDING DEPARTMENT IN WRITING IF YOU WILL BE REMOVED FROM THIS PROJECT: ALL CONTRACTOR'S MUST BE HAVE CURRENT LICENSE AND INSURANCE WITH THIS OFFICE PRIOR TO ISSUANCE OF PERMIT.**

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contract Value

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_

Notary Public \_\_\_\_\_, Commission

**Electric Contractor Company Name:** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contract Value

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_

Notary Public \_\_\_\_\_, Commission

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

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contract Value

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_

Notary Public \_\_\_\_\_, Commission

**HVAC Contractor Company Name:** \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Contract Value

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ A.D. 20\_\_\_\_

Notary Public \_\_\_\_\_, Commission

**STATEMENT OF FACT**  
**BY OWNER DESIRING TO CONSTRUCT**  
**HIS/HER OWN RESIDENCE**

STATE OF FLORIDA  
COUNTY OF BRADFORD

Before me this day personally appeared \_\_\_\_\_ who, being duly sworn and says as follows, "I have read and fully understand the provision of this instrument":

The undersigned states and affirms that he/she is capable of physically constructing his/her own domicile (single family residence only), that he/she actually occupies, or will occupy the domicile, and that he/she shall comply with the following conditions.

1. **That the owner and he/she alone shall act as the contractor for all phases of construction.**
2. That the owner will comply with all provisions of the Florida Building Code and the National Electrical Code.
3. That in the event various phases of construction are sub-contracted, he/she will personally supervise such work.
4. That in the event that Building Inspectors shall require corrections to be made, the owner will assume full responsibility to insure they are made, upon completion you must call for a re-inspection before proceeding with construction.
5. That the owner shall assume full responsibility for the construction and will not expect supervision of his/her work from the Bradford County Building Department.
6. That prior to final inspection any additional fees, including re-inspection fees, must be paid in full. A verbal request from this office, by phone or in person, shall constitute an official notice to pay additional fees.
7. That the owner shall comply with all state and federal laws in regard to Social Security, Workmen's Compensation, Liability Insurance and Federal With-holding, where applicable.
8. That the owner shall comply with all the Safety Codes issued by the Florida Industrial Commission.
9. That the owner will not sell, lease, or offer to sell or lease the domicile for a period of at least one (1) year from the date of Certificate of Occupancy.

The undersigned further agrees that he/she shall, should he/she be unable to comply with the above requirements, amend the permits, hire a licensed, bonded Building Contractor and/ or other applicable licensed and bonded sub-contractors to take over and complete the job in strict compliance with the Florida Building Code including the taking out of all necessary amendments.

**Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20 \_\_\_\_\_**

**Personally known \_\_\_\_\_ or produced identification. Type of identification produced Driver's License  
Number \_\_\_\_\_.**

\_\_\_\_\_  
**Owner's Printed Name** \_\_\_\_\_  
**Owner's Signature**

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

\_\_\_\_\_  
**Notary Public Signature** \_\_\_\_\_  
**My Commission Expires:**

## **DISCLOSURE STATEMENT FLORIDA STATUTE 489.103 (7)**

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 construction yourself. You may Build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$25,000. 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 you have built or substantially improved yourself within one (1) year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this 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 person's employed by you have a license required by state law and by county or municipal licensing ordinances. You may not delegate the responsibility for supervision work to a licensed contractor who is not licensed to perform the work being done. Any person working on you're 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, and building codes, and zoning regulations.

# NOTICE OF COMMENCEMENT

RETURN TO:

THIS INSTRUMENT PREPARED BY:

PROPERTY APPRAISER'S PARCEL ID NUMBER:

SPACE ABOVE THIS LINE FOR RECORDING DATA

STATE OF FLORIDA, COUNTY OF BRADFORD

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

PARCEL ID NUMBER \_\_\_\_\_

Street address of property: \_\_\_\_\_

Description of improvements: \_\_\_\_\_

Property Owner Name: \_\_\_\_\_

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

Owners Interest in property: \_\_\_\_\_

Fee Simple Title Holder Name: \_\_\_\_\_

Title Holder Address: \_\_\_\_\_

Contractor Name: \_\_\_\_\_

Contractor Mailing Address: \_\_\_\_\_

Surety Name: \_\_\_\_\_

Surety Mailing Address: \_\_\_\_\_

Lender Name: \_\_\_\_\_

Lender Mailing Address: \_\_\_\_\_

Person within the State of Florida designated by Owner upon which notices and other documents may be served as provided by Section 713.13 (1) (a) 7, Florida Statutes.

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

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

In addition to himself, the Owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (a)7., Florida Statutes

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

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

Expiration date of Notice of Commencement ( the expiration date is 1 year from the date of recording)

Signature of Owner \_\_\_\_\_

Printed Signature of Owner \_\_\_\_\_

APPLY NOTARY SEAL HERE

I have relied on the following identification of the Affiant:

Sworn to and subscribed before me this \_\_\_\_\_

day \_\_\_\_\_ of \_\_\_\_\_ 20\_\_

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

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