



Town of Montverde
17404 Sixth Street
Montverde, FL 34756
(407) 469-2681

Electrical/Upgrade

1. Completed Permit Application
2. Service Change/Upgrade portion filled out, or a line diagram/plans with enough detail to determine compliance with the NEC.
3. A property records card showing ownership of the property.



**TOWN OF MONTEVERDE
PERMIT APPLICATION**

Permit Number

Alternate Key Number	Parcel Number	Project Address	
		Project Description	Electrical/Upgrade
Owner's Name	Mailing Address	City, State, Zip	Telephone

Email Address:

Fee Simple Titleholder's Name	Mailing Address	City, State, Zip	Telephone
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General Contractor	Mailing Address	City, State, Zip	Telephone
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Email Address:	State License Number:
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Construction Contractor	Mailing Address	City, State, Zip	Telephone
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Email Address:	State License Number:
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Electrical Contractor	Mailing Address	City, State, Zip	Telephone
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Email Address:	State License Number:
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Plumbing Contractor	Mailing Address	City, State, Zip	Telephone
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Email Address:	State License Number:
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HVAC Contractor	Mailing Address	City, State, Zip	Telephone
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Email Address:	State License Number:
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Roofing Contractor	Mailing Address	City, State, Zip	Telephone
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Email Address:	State License Number:
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Legal Description

Bonding Company

Bonding Company Address

Architect's Name

Architect's Address

Project Information

Job Name:

Subdivision Name	Lot No.	Phase
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Zone	Lot Area
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Setbacks (ft)		Front	Rear	Side	Corner

Project (check one)	Area	Electrical	Hvac	Water (check one)
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New	Living	Service Size	Type	Municipal
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Alteration	Garage	Well
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Addition	Porch(s)	Efficiency	Plumbing (check one)
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Repair	Other	Airhandler	Sewer
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Other	Total	Condenser	Septic
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Garage (check one)	Number of Bedrooms	Estimated Cost	Code In Effect
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Attached			6th Edition Florida Building Code
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Detached			
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Signature of Applicant _____ **Date** _____

STATE OF FLORIDA, COUNTY OF _____.

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization,

this _____ day of _____, 20____, by _____.

Personally Known OR

Produced Identification Type of Identification Produced _____

Signature

Print Name

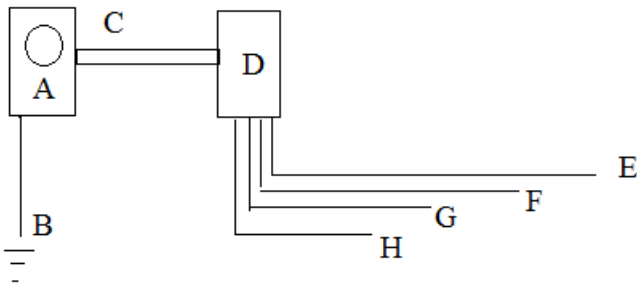
Service Change/Upgrade Permit

Instructions: Please fill out this form to the best of your ability, and note that this is a generic form and that some items listed may not apply to your permit. The length is listed for voltage drop consideration. Anything that is existing, please put Existing in the first space of that item and leave the rest of the blanks for that item blank.

Work Description: _____

- A. Meter Combination _____ Voltage, phase amp rating _____ AIC rating _____
- B. Ground Type _____ Grounding Electrode Conductor size and type _____
- C. Conduit type and Size _____ Conductor Number/Type/Size _____ Parallel _____ Length _____
- D. Panel Rating in Amps _____ Number of Circuits _____ Disconnect? _____
- E. Breaker Size _____ Voltage _____ Conductor Size and Type _____ Load _____ Approximate Length _____
- F. Breaker Size _____ Voltage _____ Conductor Size and Type _____ Load _____ Approximate Length _____
- G. Breaker Size _____ Voltage _____ Conductor Size and Type _____ Load _____ Approximate Length _____
- H. Breaker Size _____ Voltage _____ Conductor Size and Type _____ Load _____ Approximate Length _____

Calculated Load _____



LIMITED POWER OF ATTORNEY

Date: _____

I hereby name and appoint: _____

an agent of: _____
(Name of Company)

to be my lawful attorney-in-fact to act for me to apply for, receipt for, sign for and do all things necessary to this appointment for **(check only one option)**:

All permits and applications submitted by this contractor.

The specific permit and application for work located at:

(Street Address)

Expiration Date for This Limited Power of Attorney: _____

License Holder Name: _____

State License Number: _____

Signature of License Holder: _____

STATE OF FLORIDA
COUNTY OF _____

The foregoing instrument was acknowledged before me by means of physical presence or online notarization this ____ day of _____, 20____, by _____ who is personally known to me or who has produced _____ as identification and who did (did not) take an oath.

Signature

(Notary Seal)

Print or type name

After recording return to:

Permit No: _____
Tax Folio or Alternate Key #: _____

NOTICE OF COMMENCEMENT
Astatula, Clermont, Eustis, Fruitland Park, Howey in the Hills,
Groveland, Lady Lake, Lake County, Leesburg, Mascotte,
Minneola, Montverde, Mount Dora, Tavares, Umatilla

The undersigned hereby gives notice that improvement 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: (legal description of the property, and street address if available)

Street Address: _____
2. General description of improvement: _____
3. Owner's Information: Name: _____
Address: _____
Interest in Property: _____
Name and Address of fee simple titleholder (if other than owner): _____

4. Contractor Information: Name: _____
Address: _____
Telephone No. _____ Fax No. (Opt.) _____
5. Surety Information: Name: _____
Address: _____
Telephone No. _____ Fax No. (Opt.) _____
Amount of Bond: _____
6. Lender Information: Name: _____
Address: _____
Telephone No. _____ Fax No. (Opt.) _____
7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes:
Name: _____
Address: _____
Telephone No. _____ Fax No. (Opt.) _____
8. In addition to himself or herself, Owner designates _____ of _____
to receive a copy of the following Lienor's Notice as Provided in Section 713.13 (1) (b), Florida Statutes:
Name: _____
Address: _____
Telephone No. _____ Fax No. (Opt.) _____
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 I, 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 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

Printed Name & Signatory's Title/Office

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____, by _____
who is personally known to me or has produced _____ as identification and who did _____ or did not _____
take an oath.

Signature of Notary Public - State of Florida

Print, type or Stamp Commissioned Name of Notary Public

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 Natural Person (Owner) Signing Above

OWNER BUILDER STATEMENT/AFFIDAVIT

Astatula, Clermont, Eustis, Fruitland Park, Howey in the Hills,
Groveland, Lady Lake, Lake County, Leesburg, Mascotte,
Minneola, Montverde, Mount Dora, Tavares, Umatilla

AS REQUIRED BY F.S. 489.103(7)

Florida Statutes are quoted in part for your information to indicate the authority for exemptions for homeowners from qualifying as contractors and to express any applicable restrictions and responsibilities.

OWNERS MUST PERSONALLY APPEAR AT THE BUILDING DEPARTMENT TO SIGN THIS DOCUMENT.

BY SIGNING THIS STATEMENT/AFFIDAVIT, I ATTEST THAT: (*Initial to the left of each statement*)

_____ 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 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.

_____ 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 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 all permit applications and contracts.

_____ I understand that I may build or improve a one 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 improved for sale or lease. If a building or residence that I have built or improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or improved it for sale or lease, which is a violation of this exemption.

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

_____ I understand that I may not hire an unlicensed individual 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.

_____ 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 the property. My homeowners 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.

_____ 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 permitted. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means 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. I understand that my failure to follow these laws may subject me to serious financial risk.

_____ 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.

_____ I am aware of construction practices and I have access to the Florida Building Codes.

_____ 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 1-850-487-1395, or at www.myflorida.com/dbpr/pro/cilb for more information about licensed contractors.

_____ 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 listed below.

_____ 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 or in the permit application package.

_____ Licensed contractors are regulated by laws designed to protect the public. If I contract with a person who does not have a license, the Construction Industry Licensing Board, the Department of Business and Professional Regulation and the Building Department may be unable to assist me with any financial loss that I sustain as a result of a complaint. My only remedy against an unlicensed contractor may be in civil court. It is also important for me to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on my property, I may be held liable for damages. If I obtain an owner-builder permit and wish to hire a licensed contractor, I will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Property Address: _____

I, do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

_____ Title: _____

Signature

Print Name

STATE OF _____
COUNTY OF _____

The foregoing instrument was acknowledged before me on this _____ day of _____, 2011, by _____, who is personally known to me or who has produced _____ as identification and who did not take an oath.

Notary Public _____ SEAL:

Type/print name _____

A violation of this exemption is a misdemeanor of the 1st degree punishable by a term of imprisonment not exceeding 1 year, and a \$1,000 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.