



101 Old Main St.
Bradenton, 34205

(941) 932-9400
Fax: (941) 932-9534

City of Bradenton

BUILDING
DIVISION

www.cityofbradenton.com
Inspections #: (941) 932-9423

Permit No:	Permit Application BUILDING___ ZONING___ FIRE___ FLOOD___
Related Permit #	Site Improvement Plan #

- | | | |
|---|--|--|
| <input type="checkbox"/> Accessory
Shed/Carport/Etc. | <input type="checkbox"/> Electric and/or Low Voltage | <input type="checkbox"/> Dumpster |
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Mechanical and/or Gas | <input type="checkbox"/> Roof |
| <input type="checkbox"/> Antenna | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Sign |
| <input type="checkbox"/> Commercial (Add. / Alt.) | <input type="checkbox"/> Exterior Door & Window | <input type="checkbox"/> Shell |
| <input type="checkbox"/> Commercial (New) | <input type="checkbox"/> Fence | <input type="checkbox"/> Swimming (Pool - Spa) |
| <input type="checkbox"/> Concrete | <input type="checkbox"/> Mobile Home or Modular | <input type="checkbox"/> Tent and/or Temp Use |
| <input type="checkbox"/> Damage Assessment | <input type="checkbox"/> Residential (New) | <input type="checkbox"/> Waterfront (Dock/Seawall/Etc.) |
| <input type="checkbox"/> Demolition | <input type="checkbox"/> Residential (Add. / Alt.) | <input type="checkbox"/> Plan Amendment <input type="checkbox"/> Other |

COST OF CONSTRUCTION \$ _____ PARCEL I.D. # _____

JOB ADDRESS: _____

PROPERTY OWNER: _____ PHONE: _____ EMAIL: _____

BUSINESS / SUBDIVISION / MH PARK: _____ LOT _____ BLOCK: _____

DESCRIPTION OF WORK: _____

WAS THIS BUILDING DAMAGED BY FIRE, FLOOD, OR OTHER YES NO / DAMAGE ASSESSMENT PERMIT# _____

BUILDING: Flood Zone _____ New (sq.ft.) _____ Adding (sq.ft.) _____ Renovating (sq.ft.) _____

FBC Occupancy Type: _____ FBC Construction Type: _____ Number of Stories: _____ Building Height: _____

Area per Story: _____ Area under A/C _____ # of Bedrooms: _____ # of Units: _____ # of Bathrooms: _____

Existing Sprinkler: Yes No Existing Alarm: Yes No FBC Threshold Building: Yes No

*Subcontractor Verification Form Required

*Additional Work Required: Electrical Mechanical Plumbing Gas Masonry Concrete Roofing

ZONING: District _____ Existing Use: _____ Proposed Use: _____ Lot Frontage: _____ Lot Area _____

Lot Width: _____ Lot Coverage: Building% _____ Other% _____

Setbacks: Front _____ Left: _____ Right: _____ Rear: _____ Parking Spaces: _____ Accessible: _____ Site Plan: Yes No

Sign: Type: _____ Height _____ Width _____ Length _____ Construction _____ #of Faces _____ Area (sq.ft) _____

Number of Existing Signs _____ Illuminated: Yes No

PRIVATE PROVIDER: (NAME) _____

➤ Required = First Floor Proposed Elev. Ordinance 4.1.1.6 Appendix "A" Floodplain Mgmt and ASCE 24: _____

CONTRACTOR: _____ STATE CERT. /REG. # _____

AGENT/CONTACT PERSON: _____
Name Phone / fax

EMAIL _____

DATE: _____ Signature _____ Print Name _____

PCD DEPARTMENT USE ONLY

STOPS: BLDG _____ MECH _____ ELEC _____ PLUMBING _____ FIRE _____ ZONING _____ FLOOD _____ RECORDS _____

PLEASE SIGN BELOW

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installations have commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws and ordinances regulating construction in The City of Bradenton, Florida, whether specified herein or not. I understand that a separate permit may be required to perform electrical, plumbing, sign, well, pool, furnace, boiler, heater, air conditioning, storage tank, demolition or any other types of work as specified by The City of Bradenton. I further certify that I have read and examined this application and know the same to be correct, that all work shall be in compliance with all applicable laws regulating construction and zoning, and that the building permit may be revoked in the case of a false statement or misrepresentation in the application and/or plans on which the permit was approved.

It shall also be agreed that the owner has been advised of and understands the applicability of the Construction Lien Law (FSS 713.135) and that Impact Fees shall be determined with the application for a building permit and shall be due before Final Inspection. Permit Fees shall be payable at issuance of a building permit.

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.

Owner's Signature: _____

Print Name: _____

Contractor Signature: _____

Print Name: _____

Authorized Agent: _____

Print Name: _____

Date: _____

STATE OF FLORIDA, CITY OF BRADENTON

The foregoing instrument was acknowledged before me this ____ day of _____, 20____

by _____ personally known to me () or who has produced _____ as identification

as identification _____

Expiration Date: _____

and who did _____ did not _____ take an oath.

Notary Public Signature _____

Notary Public Stamp Here



NOTICE OF COMMENCEMENT

Permit No. _____

Tax Folio No. _____

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 of property): _____

a) Street (job) Address: _____

2. General description of improvement(s): _____

3. Owner or Lessee information (Lessee as owner only if contracted for improvements)

a. Name and address: _____

b. Interest in property: _____

c. Name and address of fee simple titleholder (if other than owner): _____

4. Contractor Information

a. Name and address: _____

b. Phone number: _____ Fax No. (Opt.) _____

5. Surety Information

a. Name and address: _____

b. Amount of bond \$ _____

c. Phone number: _____ Fax No. (Opt.) _____

6. Lender

a. Name and address: _____

b. Phone number: _____

7. Persons within the State of Florida designated by Owner upon who notices or other documents may be served as provided by Section 713.13(l)(a)7., Florida Statutes:

a. Name and address: _____

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(l)(b), Florida Statutes:

a. Name and address: _____

b. Phone number: _____

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.

Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have - read the foregoing and that the facts in it are true to the best of my knowledge and belief.

Signatory's Title/Officer: _____

State of Florida, City of Bradenton

The foregoing instrument was acknowledged before me this ____ day of _____, 20__ by

_____, who is personally known to me or has produced

_____, and who did / did not take an oath.

(Driver's License #) _____

Signature of Notary
Public - State of Florida

Print, Type, or Stamp
Commissioned Name of Notary Public

CITY OF BRADENTON SUBCONTRACTOR VERIFICATION FORM
101 12 STREET WEST, BRADENTON, FL. 34205
permitting@cityofbradenton.com

(PLEASE PRINT)

BUILDING PERMIT NO: JOB ADDRESS:

ELECTRIC Company Name Mailing Address

LOW VOLT Print Contractor's Name Phone #

FIRE ALARM Contractor's Signature _____ License #

Alternate Digital Signature

MECHANICAL Company Name Mailing Address

Print Contractor's Name Phone #

Contractor's Signature _____ License#

Alternate Digital Signature

PLUMBING Company Name Mailing Address

Print Contractor's Name Phone #

Contractor's Signature _____ License #

Alternate Digital Signature

ROOFING Company Name Mailing Address

Print Contractor's Name Phone #

Contractor's Signature _____ License #

Alternate Digital Signature

GAS Company Name Mailing Address

Print Contractor's Name Phone #

Contractor's Signature _____ License #

Alternate Digital Signature

MASON Company Name Mailing Address _____

Print Contractor's Name Phone #

Contractor's Signature _____ License #

Alternate Digital Signature

BUILDING Company Name Mailing Address

Print Contractor's Name Phone #

Contractor's Signature _____ License #

Alternate Digital Signature

NOTE: SUBCONTRACTOR VERIFICATION FORM MUST BE SIGNED BY THE LICENSE HOLDER.
THIS FORM MUST BE SUBMITTED PRIOR TO THE ISSUANCE OF A PERMIT.

IMPACT FEES APPLICATION

City of Bradenton
101 12th Street West
Bradenton, FL 34205
941-932-9423

PERMIT # _____

DATE: _____

OWNER: _____ CONTRACTOR: _____

ADDRESS OF JOB: _____

UNIT VALUE	FIXTURE TYPE	APPLICATION		FIELD VERIFICATION	
		# Fixtures	Total	# Fixtures	Total
6	1 Bathroom Group (tank operated w.c. lav tub or shower)	_____	_____	_____	_____
3	Water closet, flushometer tank, public or private	_____	_____	_____	_____
4	Water closet, private installation	_____	_____	_____	_____
6	Water closet, public installation	_____	_____	_____	_____
2	Bidet	_____	_____	_____	_____
3	Combination sink and tray	_____	_____	_____	_____
4	Combination sink & tray with food disposal unit	_____	_____	_____	_____
1	Dental unit or cuspidor	_____	_____	_____	_____
1	Dental Lavatory	_____	_____	_____	_____
1/2	Drinking Fountain	_____	_____	_____	_____
2	Dishwashing machine domestic	_____	_____	_____	_____
1	Floor Drains (multiply by sewer charge only)	_____	_____	_____	_____
2	Kitchen Sink domestic	_____	_____	_____	_____
3	Kitchen Sink, domestic with food waste grinder	_____	_____	_____	_____
1	Lavatory (1 & 1/4" Drain)	_____	_____	_____	_____
2	Lavatory (1 & 1/2" Drain)	_____	_____	_____	_____
2	Lavatory - barber, beauty parlor, bar sink, hand sink	_____	_____	_____	_____
2	Lavatory - surgeon's, exam sink	_____	_____	_____	_____
2	Laundry tray (1 or 2 compartments)	_____	_____	_____	_____
2	Shower stall, domestic	_____	_____	_____	_____
3	Showers (group) per head	_____	_____	_____	_____
3	Sinks - surgeon's	_____	_____	_____	_____
8	Flushing rim (with valve)	_____	_____	_____	_____
3	Service (trap standard) (Indirect Waste)	_____	_____	_____	_____
2	Service (P trap) self contained or remote to indirect	_____	_____	_____	_____
4	Pot, scullery, etc.	_____	_____	_____	_____
8	Urinal, pedestal, syphon jet, blowout	_____	_____	_____	_____
4	Urinal, wall lip	_____	_____	_____	_____
4	Urinal stall, washout	_____	_____	_____	_____
2	Bathtub	_____	_____	_____	_____
3	Washing Machine (residential)	_____	_____	_____	_____
2	Wash sink (circular or multiple) each set of faucets	_____	_____	_____	_____
5	Commercial washing machine	_____	_____	_____	_____
TOTALS:		_____	_____	_____	_____

WATER TOTAL UNITS _____ X \$62.24 = \$ _____
 SEWER TOTAL UNITS _____ X \$81.34 = \$ _____
 TOTAL FEE \$ _____

SIGNATURE OF APPLICANT: _____

DATE: _____



To eliminate or reduce the amount of sediments and other pollutants leaving a construction site, erosion and sediment control steps and procedures called Best Management Practices (BMPs) must be utilized. When properly implemented and maintained BMPs are very effective in minimizing erosion and migration of sediments off construction sites

The grading/erosion control permit holder, also the building permit holder, is responsible for ensuring that adequate BMPs are in place on the individual lot, and catch basins adjacent to the site are properly protected and remain functional until the building project is completed.

The subdivision in which you are building likely already has an overall Stormwater Pollution Prevention Plan (SWPPP) and Southwest Florida Water Management District (SWFWMD) Environmental Resources Permit (ERP). That permit remains in effect until all the lots are developed. BMPs related to that permit and plan are in place and should not be removed or compromised.

Failure to prevent erosion and to minimize sediments from leaving a construction site can result in damage to adjacent property, damage to the City's storm sewer system, and contribute to the pollution of stormwater ponds and surface waters within the City limits which can be a violation of the federal Clean Water Act and result in fines of up to \$25,000 per day.

A project is defined as completed only when 70 percent of the lot has been re-vegetated.

As contractor of record _____, License Number _____,
(Name)

doing business as _____. I fully understand that this permit
(Name of Firm)

is issued conditionally, that all erosion control measures will be erected and maintained during the
construction of _____
(Type of Project)

located at _____, Permit Number _____.
(Address)

My failure to comply with all requirements of the City of Bradenton: Land Use Regulation Section 4.1.5.3.c and Best Management Practices may result in this permit being revoked or other disciplinary action by the City of Bradenton. A Guide to Erosion and Sedimentation Control Standards provided by the City of Bradenton Public Works Department may be found on the City of Bradenton's web page (Forms and Applications). I have read and understand the foregoing instrument and agree to abide by such conditions.

(Print Name)

(Signature)