

**NEW COMMERCIAL BUILDING PERMIT APPLICATION
FRANKLIN COUNTY BUILDING DEPARTMENT**

34 Forbes Street, Suite 1, Apalachicola, Florida 32320

<https://www4.citizenserve.com/Portal/PortalController>

Please note paper applications will have a longer processing time.

For a faster processing time please use the link above to apply via CitizenServe

Property Owner Information:

Property Owner: _____

Mailing Address: _____

Phone Number/ Email: _____

Contractor Information:

Contractor Name: _____

Business Name: _____

State License Number: _____

Phone Number: _____

Email: _____

Property Information:

911 Address/Construction Location: _____

Parcel Identification Number: _____

Property is Zoned: R1 R2 R3 R4 Other: _____

Water Body: _____

Gate Code (if located in Gated Community): _____

Description of Development:

Total Sq. Ft: _____ Heated Sq. Ft: _____ Un-Heated Sq. Ft: _____

Roof Material: _____ Foundation Type: _____ No. of Stories: _____

Enclosure Under Home Sq. Ft. (elevated homes): _____ Contract Amount: _____

Septic Tank Permit # or Sewer District: _____

Water District or Private Well: _____

Owner/Contractor Signature

Date

OFFICE USE ONLY

Flood Panel: _____ Firm Zone: _____

Elevation Requirements: _____

Critical Shoreline District: YES NO

Critical Habitat Zone: YES NO

PERMIT NUMBER: _____

Permit Fee: \$ _____

Radon: \$ _____

Total FEE: \$ _____

FLOODPLAIN MANAGER DATE

BUILDING OFFICIAL DATE

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I, _____, hereby certify that the below listed requirements will be met.
Please initial next to each:

I agree to have a portable toilet on site for the duration of construction, or I have made the following arrangements and attached a letter explaining.

I agree to provide an onsite dumpster/debris trailer and maintain a clean job site.

I agree to provide documentation that a COMPLETE TERMITE treatment was performed on this site according to the guidelines outlined in the Florida Building Code.

This structure will not exceed 47 feet from the natural grade.
Height of Structure: _____

This structure will not exceed 3 habitable stories. Number of Stories: _____

I agree to ensure that ALL REQUIRED SUPPLEMENTAL PERMITS ARE OBTAINED.

I agree to schedule all required inspections at the appropriate time.

I understand that a building under construction elevation certificate will be required when the first floor is established for any new structure being built in a flood zone (A, AE, VE ZONES). Construction should not go beyond this point until the elevation certificate has been provided and reviewed.

I understand that a final elevation certificate will be required at the completion of the structure for any new structure built in a flood zone (A, AE, VE ZONES)

I agree to adhere to the requirements of County Ordinance 2015-1 Lighting Ordinance for Marine Turtle Protection of Franklin County, Florida

NOTE TO APPLICANTS AND PERMIT HOLDERS:

VIOLATIONS OF THE TERMS AND CONDITIONS OF THIS PERMIT MAY WARRANT A STOP WORK ORDER OR REVOCATION OF THIS PERMIT. THIS PERMIT IS VALID FOR ONE YEAR FROM THE DATE OF ISSUANCE. CONSTRUCTION MUST COMMENCE WITHIN SIX MONTHS OF DATE ISSUED.

Owner/Contractor Signature

Date

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THIS FORM MUST BE SIGNED AND SUBMITTED TO THE PERMIT CLERK. INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.

PLEASE INITIAL INDICATING ALL REQUIRED DOCUMENTS ARE INCLUDED:

REQUIRED DOCUMENTS:

- ____ Complete Application
(Pages 1-3)
- ____ Supplemental Forms w/ all Subcontractors Listed
- ____ 2 Complete Sets of Building Plans
 - Wind Load Analysis Engineered
- ____ Boundary Survey
- ____ Site Plan
- ____ Energy Code Form
- ____ Septic Tank Letter or Permit (if applicable)
- ____ Recorded Notice of Commencement (or letter from Bank) (Contractors Only)
- ____ Owner Builder Affidavit (Only required for owners acting as the contractor)
- ____ Planning & Zoning Approval _____ (Date)
- ____ Board of County Commissioners Approval _____ (Date)

ADDITIONAL FORMS REQUIRED FOR FLOOD ZONES:

- ____ Topographical Survey
- ____ Non-Conversion Agreement (required if there are any enclosures below base flood elevation)
- ____ V Zone Certification (If in a V Zone)

By signing below, I attest that all information in this permit application is accurate and complete. I have utilized the checklist on page four of this application to verify that I have included all required documentation. I understand that incomplete applications will not be accepted. I understand that the standard permit processing time is 7 - 10 business days and that a permit clerk will contact me when my permit is ready to be issued.

Owner/Contractor Signature

Date