

Town of Loxahatchee Groves
155 F Road
Loxahatchee Groves, Florida 33470
561.793.2418 fax 561.793.2420

WINDOW/DOOR/SHUTTER REPLACEMENT CHECKLIST FORM
FBC 8th Edition 2023

THE FOLLOWING INFORMATION & DOCUMENTS ARE REQUIRED FOR PERMIT PROCESSING

- ☐ Completed Building Permit Application
- ☐ Owner/Builder Affidavit, if applicable
- ☐ Notice of Commencement, if applicable
- ☐ Fully completed and signed Window, Door, and Shutter Worksheet For
- ☐ Copy of floor plan
 - The floor plan must show the numbered locations of all the window(s)/door(s) being replaced. This layout to match the worksheet.
- ☐ Full and complete product approvals for all openings

UNIVERSAL COUNTY-WIDE/MUNICIPAL BUILDING PERMIT APPLICATION FORM

September 2022 Edition

Approved for use throughout Palm Beach County and Municipalities

FOR OFFICE USE ONLY

FBC Version: _____ Permit Type: _____

Accepted By: _____ Application Date: _____

Application #: _____

1
KIND of PERMIT (CHECK ONE):

☐ PRIMARY PERMIT

☐ SUB-PERMIT - If Fee & Value of a Sub-Permit are covered under a Primary Permit, complete boxes 1, 3, 4, 5, 6 & 8 only to apply. If not covered under a Primary Permit, complete the entire application to apply.

☐ FLOOD REVIEW ONLY

PRIVATE PROVIDER: ☐ PLAN REVIEW ☐ INSPECTIONS

2
PROPERTY OWNER: _____

TENANT: _____

ADDRESS: _____ **UNIT:** _____

CITY: _____ **STATE:** _____ **ZIP:** _____

PHONE: _____ **FAX:** _____

EMAIL: _____

3
TRADE (CHECK ONE):

☐ STRUCTURAL

☐ ROOFING

☐ ELECTRICAL

☐ MECHANICAL

☐ PLUMBING

☐ FIRE

☐ GAS

☐ OTHER: _____

PRIMARY PERMIT #: _____

4
PROJECT NAME: _____

PCN: _____ - _____ - _____ - _____ - _____ - _____ - _____ - _____

LEGAL DESCRIPTION: _____

PROJECT ADDRESS: _____

☐ SPECIAL FLOOD HAZARD AREA (FLOOD ZONE)

5
FURTHER WORK DESCRIPTION: _____

Type of Work: ☐ New ☐ Addition ☐ Alteration ☐ Repair ☐ Demo ☐ Temporary ☐ Other

VALUE: _____ PERMIT FEE: _____ NET S.F. (for SFD's): _____
(SEE FEE SCHEDULE) (AS APPLIES) (AS APPLIES)

6
☐ OWNER BUILDER PER FL. ST. 489 (AS NAMED ABOVE, FOR CONTACT INFORMATION SEE BOX 2)

☐ CONTRACTOR (CERT. HOLDER): _____ License #: _____

DBA (COMPANY NAME): _____ Contact Person: _____

ADDRESS: _____ STE: _____ CITY: _____ STATE: _____ ZIP: _____

PHONE: _____ FAX: _____ EMAIL: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

7

(Signature of Owner or Agent) (including contractor)

Print Name: _____

NOTARY REQUIRED IF \$ 2,500 OR MORE, OR FOR ALL OWNER / BUILDERS REGARDLESS OF \$ VALUE STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____, by _____

(Name of person making statement)

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Physical Presence ☐ OR Online Notarization ☐

Personally Known ☐ OR Produced Identification ☐

Type of Identification Produced _____

8

(Signature of Contractor)

Print Name: _____

NOTARY REQUIRED IF \$ 2,500 OR MORE, OR FOR ALL OWNER / BUILDERS REGARDLESS OF \$ VALUE STATE OF FLORIDA
COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____, 20_____, by _____

(Name of person making statement)

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Physical Presence ☐ OR Online Notarization ☐

Personally Known ☐ OR Produced Identification ☐

Type of Identification Produced _____

FEE SIMPLE TITLEHOLDER, BONDING COMPANY, ARCHITECT/ENGINEER AND MORTGAGE LENDER INFO IS REQUIRED WHEN THE AGGREGATE VALUE (TOTAL COST OF ALL IMPROVEMENTS & NOT JUST WORK AUTHORIZED BY THE INDIVIDUAL PERMIT) IS \$2,500 OR MORE (EXCEPT HVAC REPAIR /REPLACEMENT < \$15,000). PLEASE ADDRESS ALL ITEMS.

⁹
Fee Simple Titleholder's Name (If other than owner): _____

Fee Simple Titleholder's Address (If other than owner): _____

City: _____ **State:** _____ **Zip:** _____
☐ Same as Owner

¹⁰
Bonding Company: _____

Bonding Company Address: _____

City: _____ **State:** _____ **Zip:** _____
☐ Not Applicable

¹¹
Architect/Engineer's Name: _____

Architect/Engineer's Name Address: _____

City: _____ **State:** _____ **Zip:** _____
☐ Not Applicable

¹²
Mortgage Lender's Name: _____

Mortgage Lender's Address: _____

City: _____ **State:** _____ **Zip:** _____
☐ Not Applicable

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.

NOTICE TO CONTRACTOR: FOR A DIRECT CONTRACT GREATER THAN \$2,500 (EXCEPT FOR HVAC SYSTEM REPAIR OR REPLACEMENT LESS THAN \$15,000), FLORIDA STATUTES REQUIRE THE APPLICANT TO FILE WITH THE ISSUING AUTHORITY, PRIOR TO THE FIRST INSPECTION, EITHER A CERTIFIED COPY OF THE RECORDED (BY OWNER) NOTICE OF COMMENCEMENT OR A NOTARIZED STATEMENT (BY OWNER) THAT THE NOTICE OF COMMENCEMENT HAS BEEN FILED FOR RECORDING, ALONG WITH A COPY THEREOF. IN THE ABSENCE OF A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT, NO SUBSEQUENT INSPECTIONS CAN BE PERFORMED UNTIL THE APPLICANT FILES SUCH CERTIFIED COPY WITH THE ISSUING AUTHORITY. THE CERTIFIED COPY OF THE NOTICE OF COMMENCEMENT MUST CONTAIN THE NAME AND ADDRESS OF THE OWNER, THE NAME AND ADDRESS OF THE CONTRACTOR, AND THE LOCATION OR ADDRESS OF THE PROPERTY BEING IMPROVED.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

FOR APPLICATIONS SUBMITTED UNDER THE PRIVATE PROVIDER PROVISIONS OF F.S. SECTION 553.791, THIS APPLICATION IS NOT CONSIDERED COMPLETE OR SUFFICIENT FOR PURPOSES OF SUBMISSION TO THE BUILDING DEPARTMENT UNTIL THE APPLICANT SECURES ALL NECESSARY APPROVALS FROM OTHER DEPARTMENTS OR AGENCIES INCLUDING, BUT NOT LIMITED TO, PLANNING, ZONING, ENGINEERING, FIRE RESCUE, ENVIRONMENTAL, AND THE FLORIDA DEPARTMENT OF HEALTH.

OFFICE USE ONLY BELOW THIS LINE

¹³
CODE EDITION/NOTES: _____

¹⁴
USE (CHECK ONE):
☐ 1 & 2 FAMILY ☐ TOWNHOUSE ☐ CONDOMINIUM
☐ MULTI-FAMILY ☐ COMMERCIAL ☐ INDUSTRIAL
☐ AGRICULTURAL - BLDG CODE EXEMPT ☐ OTHER: _____

☐ USE CHANGE: _____

Instrument Prepared By:

Name: _____

Address: _____

PERMIT NUMBER: _____

NOTICE OF COMMENCEMENT

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 the property & street address, if available) **TAX FOLIO NO (PCN):** _____

Legal Description _____

2. **GENERAL DESCRIPTION OF IMPROVEMENT:** _____

3. **OWNER INFORMATION OR LESSEE INFORMATION IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:**

a. Name and address: _____

b. Interest in property: _____

c. Name and address of fee simple titleholder (if different from Owner listed above): _____

4. a. **CONTRACTOR'S NAME:** _____

Contractor's address: _____ b. Phone number: _____

5. **SURETY** (if applicable, a copy of the payment bond is attached): a. Amount of bond: _____ b. Phone number: _____

c. Name and address: _____

6. a. **LENDER'S NAME:** _____

Lender's address: _____ 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 Section 713.13 (1) (a) 7., Florida Statutes:

a. Name and address: _____

b. Phone numbers of designated persons: _____

8. a. In addition to himself or herself, Owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.

b. Phone number of person or entity designated by Owner: _____

9. Expiration date of notice of commencement (the expiration date will be 1 year from the date of recording unless a different date is specified): _____, 20____

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 WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

(Signature of Owner or Lessee, or Owner's or Lessee's
Authorized Officer/Director/Partner/Manager)

(Print Name and Provide Signatory's Title/Office)

State of _____ County of _____

The foregoing instrument was acknowledged before me by means of ☐ physical presence or ☐ online notarization,

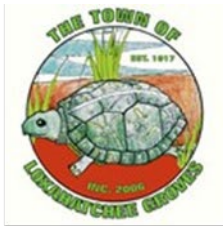
this _____ day of _____, 20____ by _____,
(name of person)

as _____ for _____
(name of party on behalf of whom instrument was executed) (type of authority...e.g. officer, trustee, attorney in fact)

Personally Known ☐ or Produced Identification ☐ Type of Identification Produced _____

Notary

(Signature of Notary Public)
(Print, Type, or Stamp Commissioned Name of Notary Public)



Town of Loxahatchee Groves
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WINDOW / DOOR / SHUTTER WORKSHEET FORM - (FBC 8th Edition 2023)

SITE ADDRESS: _____

SELECT ALL THAT APPLY:

- ☐ Windows ☐ Doors (Swinging, Sliding)
☐ Accordion Shutters ☐ Doors (Overhead/Garage)
☐ Hurricane Panels

Window/Door Types:

- SH – Single Hung
- DH – Double Hung
- FIX – Fixed
- HR – Horizontal Roller
- SGD – Sliding Glass Door
- FD – French Door
- CAS – Casement
- AW – Awning
- OH – Overhead
- MULL – Mull Bars

REQUIRED DESIGN PRESSURES:

*****DESIGN PRESSURES EITHER TO MATCH THIS TABLE -OR- BY SEPARATE CALCULATIONS.*****

WINDOWS, DOORS & SHUTTERS (EXCLUDING OVERHEAD/GARAGE DOORS)				ONLY OVERHEAD (GARAGE) DOORS			
Interior Wind Zone - 4		Corner Wind Zone - 5		9' Wide X 7' High		16' Wide X 7' High	
Pos.	Neg.	Pos.	Neg.	Pos.	Neg.	Pos.	Neg.
+ 43.68	- 47.32	+ 43.68	- 58.52	+ 38.6	- 43.7	+ 37.0	- 41.2

FOR BUILDING WITH MEAN ROOF HEIGHT (h) UP TO 30 FEET (EXPOSURE C @ 170 MPH).

VARIATIONS TO THESE PRESSURES TO BE BY SEPARATE CALCULATIONS.

Product # (Numerical ONLY)	Wind Zone	Window & Door Type	Opening Dimensions (W x H)	Bedroom Egress Required	Required Design Pressures		Pressures listed on Product Approval		Product Approval #
					+	-	+	-	
1	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
2	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
3	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
4	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
5	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
6	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
7	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
8	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
9	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
10	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					

☐ Additional Openings Needed on Continued Pages

Applicant's Affidavit: I hereby certify that I have read, understood and accepted the material on ALL pages of this document including "Policies & Procedures" on Page 4 and "Egress Requirements" on Page 5 and have FULLY provided ALL the information requested on this form.

Qualifier Name

Qualifier Signature

Date

WINDOW / DOOR / SHUTTER CHECKLIST FORM – (CONTINUED)

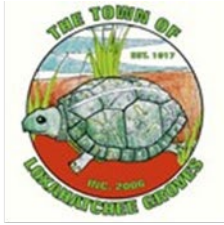
Product # (Numerical ONLY)	Wind Zone	Window & Door Type	Opening Dimensions (W x H)	Bedroom Egress Required	Required Design Pressures		Pressures listed on Product Approval		Product Approval #
					+	-	+	-	
11	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
12	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
13	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
14	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
15	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
16	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
17	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
18	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
19	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
20	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
21	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
22	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
23	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
24	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
25	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
26	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
27	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
28	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
29	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
30	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
31	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
32	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
33	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
34	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
35	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					

☐ Additional Openings Needed on Continued Pages

WINDOW / DOOR / SHUTTER CHECKLIST FORM – (CONTINUED)

Product # (Numerical ONLY)	Wind Zone	Window & Door Type	Opening Dimensions (W x H)	Bedroom Egress Required	Required Design Pressures		Pressures listed on Product Approval		Product Approval #
					+	-	+	-	
36	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
37	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
38	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
39	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
40	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
41	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
42	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
43	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
44	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
45	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
46	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
47	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
48	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
49	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
50	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
51	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
52	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
53	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
54	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
55	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
56	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
57	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
58	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
59	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					
60	<input type="checkbox"/> 4 <input type="checkbox"/> 5			<input type="checkbox"/> Yes					

☐ Additional Openings Needed on Continued Pages



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**WINDLOADS FOR SINGLE FAMILY, DUPLEX & TOWNHOUSE
 FORM PER TABLE R301.2(2) - FBC RESIDENTIAL - 7TH ED. 2020**

FOR BUILDING WITH MEAN ROOF HEIGHT (h) UP TO 30 FEET:

V_{ult} 170 MPH	Exposure "C"	Interior Zone 4		Corner Zone 5 *	
		<u>Pos.</u>	<u>Neg.</u>	<u>Pos.</u>	<u>Neg.</u>
		+ 43.68	- 47.32	+ 43.68	- 58.52

* (Zone 5 is any opening within the corner distance from any corner.)

MEASURED FIGURES (OR FROM PLANS):

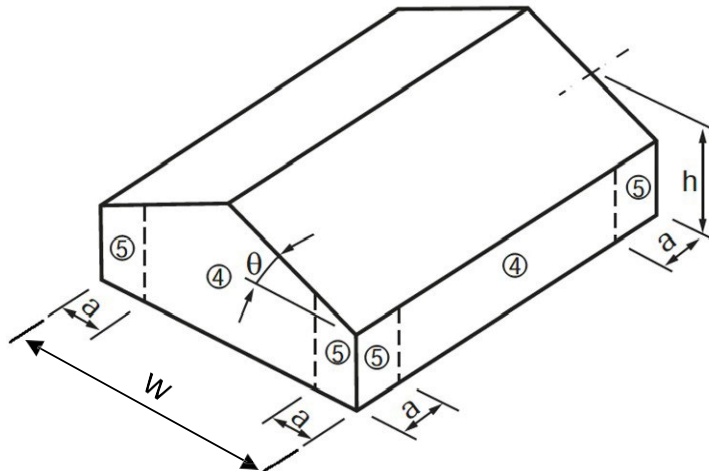
Mean Roof Height (h): _____ FT Width (w): _____ FT (narrowest side of building)

CALCULATED / DETERMINED FIGURES (PER ASCE 7-10):

a_h = Mean Roof Height X 0.4 = _____ FT **a_w** = Width X 0.1 = _____ FT

a_L = Lesser Value between **a_h** and **a_w** = _____ FT

a = Corner Distance = Greater Value between **a_L** and **3 Feet** = _____ FT



**GARAGE DOOR LOADS FROM TABLE R301.2(4) – BUILDING WITH MRH UP TO 30 FEET
 BASIC WIND SPEED (V_{ult}) 170 MPH – 3 SECOND GUST**

Roof Angle >0 Degrees Effective Area:		Exposure "C"	
<u>Width (Ft)</u>	<u>Height (Ft)</u>	<u>Pos.</u>	<u>Neg.</u>
9	7	+ 38.6	- 43.7
16	7	+ 37.0	- 41.2

REQUIREMENTS FOR WINDOWS, DOORS AND SHUTTERS

The information provided herein serves to assist permit holders in understanding building code and building division policies effecting building permits. Please contact the building division before commencing work if there are questions regarding code requirements.

REPLACEMENT WINDOW/DOOR INSPECTION PROCESS

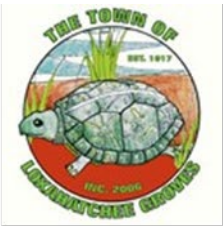
Effective July 1, 2013

Upon receipt of the permit for Window and/or Door replacement, the following steps must be followed:

1. Take DETAILED photographs of each opening, numbered per the approved plan layout. The photos should clearly show the installed bucks will meet the requirements of the Notice of Acceptance/Product Approval. Photos should also clearly show the sills have been sufficiently filled to fully support the frames and provide protection from air infiltration and wind-driven rain.
2. Schedule the final inspection and provide the Inspector with photos and a signed "Window/Door Buck Affidavit"

Photos that are not sufficient in number and detail will not be accepted and may result in the Windows/Doors being removed in order to complete the buck inspection.

*****ENGINEER LETTERS WILL NOT BE ACCEPTED
WITHOUT PRIOR APPROVAL OF THE BUILDING OFFICIAL.*****



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Replacement Window/Door **Buck Affidavit**

FBC 2023, 8th Edition: R609.7 Residential, and 704.1 and 707.4 Existing Building

Where the wood shim or buck thickness is less than 1-1/2 inches (38 mm), window and door assemblies shall be anchored through the main frame or by jamb clip or subframe system, in accordance with the manufacturers published installation instructions. Anchors shall be securely fastened directly into the masonry, concrete or other structural substrate material. Unless otherwise tested, bucks shall extend beyond the interior face of the window or door frame such that full support of the frame is provided. Shims shall be made from materials capable of sustaining applicable loads, located and applied in a thickness capable of sustaining applicable loads per current NOA or product approval. Anchors shall be provided to transfer load from the window or door frame to the rough opening substrate.

Where the wood buck thickness is 1-1/2 inches (38 mm) or greater, the buck shall be securely fastened to transfer load to the masonry, concrete or other structural substrate and the buck shall extend beyond the interior face of the window or door frame. Window and door assemblies shall be anchored through the main frame or by jamb clip or subframe system or through the flange to the secured wood buck in accordance with the manufacturers published installation instructions. Unless otherwise tested, bucks shall extend beyond the interior face of the window or door frame such that full support of the frame is provided. Shims shall be made from materials capable of sustaining applicable loads, located and applied in a thickness capable of sustaining applicable loads per current NOA or product approval. Anchors shall be provided to transfer load from the window or door frame assembly to the secured wood buck.

For final inspections, the following affidavit, including DETAILED photographs, must be submitted and signed by the Contractor (Qualifier) or Owner (for Owner Builder permit).

Check one of the following:

☐ Existing buck(s) extend(s) beyond the face of the window and door frame and are anchored per NOA or approved plans. **Detailed photographs of existing buck installation, identified for each opening, are required for Final Inspection.**

☐ New buck(s) extend(s) beyond the face of the window and door frame and are anchored per NOA or approved plans. **Detailed photographs of new buck installation, identified for each opening, are required for Final Inspection.**

Additional Note: Fasteners in frames with Snap-On type covers are to be left exposed until the window attachments have been inspected and approved. Mullion attachment needs inspection or you may provide photographs. All provided photographs must clearly identify the structure where windows are installed and the numbered opening(s). Photos must clearly show properly sized and attached bucks as well as proper sill frame support.

Address: _____

Permit Number: _____

Qualifier or Homeowner's Signature
(Permit Holder)

Print Contractor or Homeowner's Name
(Permit Holder)



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OWNER BUILDER AFFIDAVIT

NOTICE: Florida Statute 489.103 requiring construction to be done only by licensed contractors provides an exemption from licensing for property owners acting as their contractor under specific conditions. Answers to the following questions are essential to determine if those state qualifications are satisfied by an Owner/Builder applicant.

THIS DOCUMENT MUST BE REVIEWED AND SIGNED BY A REPRESENTATIVE OF BUILDING DEPARTMENT

(Please Type or Print Clearly)

Owner/Builder Applicant Name: _____

1. Site address of the proposed building work _____

2. Name of legal title owner of the site address above _____

3. Describe the new construction or building work to be done at the site _____

4. How is the building or space going to be used? _____

5. Who will do the actual labor in each major trade area? Owner Alone, Owner with Hired Help or By Licensed Contractor (Name)

Trade Owner Alone or Owner with Hired Help or Licensed Contractor

6. Who will supervise the trade work to meet all the various adopted codes? _____

7. What provisions are there for Public Liability and Property Damage Insurance? _____

8. What provisions exist for withholding Social Security and Federal Income Taxes, as required by Federal Law, from wages paid to people you hire who are not licensed? _____

9. How will Workers Compensation be provided for any people hired who are not licensed?

10. After improvements are done, who will use the space.

11. Do you plan to rent, lease or offer for sale and if so, when? _____

12. What previous Owner/Builder improvements have you done in Florida?(If "none", state so)
Location Type of Work Done Year Done

13. What Code books do you own for reference? _____

_____	_____	_____	_____
Building	Electric	HVAC	Plumbing

14. Do you realize that as the permit holder you are liable for following all Local, County, State and Federal codes, laws and requirements? You are also liable for any one injured on the construction site. _____

15. Have you consulted with your Homeowner's Insurance Agent or Attorney?

☐ **I have read and understand all laws pertaining to Owner/Builder Construction and agree to comply.**

_____	_____
Owner/Builder Signature	Date

_____	_____
Reviewed and Accepted by VOW Personnel	Date



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OWNER BUILDER AFFIDAVIT

OWNER BUILDER AFFIDAVIT & DISCLOSURE STATEMENT PERMIT

The provisions of Chapter 489.103, F.S. 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 even though you do not have a license. ***You must perform or provide direct on-site supervision of the construction yourself.*** You may build or improve a one-family or two-family residence or improve a commercial building at a cost of \$75,000 or less in value within any 12 month period, ***provided the residence or building is for your own use and 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 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses and insurance required by State law and by County licensing ordinances. Any person working on your 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 workers' compensation for that employee, all as prescribed by law. **The construction must be performed according to all Building Codes and Zoning Regulations, and it is your responsibility as the Owner/Builder to make sure this is done and correct any code violations. A Village Building Permit does not assure compliance with your Homeowners Association's rules, regulations and/or deed restrictions. We advise you to obtain approval from your Homeowners Association before improving your property.**

Disclosure Statement: Therefore, I understand and agree:

1. 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.
2. 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.
3. 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 own 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 permits and contracts.
4. That I may build or improve a one-family 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 substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.
5. That, as the owner-builder, I must provide direct, onsite supervision of the construction.
6. That I may not hire an unlicensed person 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 and by county or municipal ordinance.
7. 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 my property. My homeowner's 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.
8. That I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that 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.

9. 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.
10. That 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 following address: (address of property _____).
11. To notify Building Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

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

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

I, the owner of property legally described as (attach copy of Warranty Deed): _____

Address: _____

do hereby certify that I have read the foregoing, and am aware of my responsibilities and liabilities for construction work on the above-described property. I do hereby covenant and agree to abide by each of the aforesaid stipulations. I further understand that any falsification of the above statements constitutes fraud and may result in revocation of this permit.

OWNER (Print)	DATE	OWNER (SIGNATURE)	DATE
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STATE OF FLORIDA

COUNTY OF PALM BEACH

The foregoing instrument was acknowledged before me this _____ day of _____, 20____
by _____ (Name of Person Acknowledging) who is personally

known to me or who has produced _____ (Type of I.D.) as identification and who did/did not take an
oath. SEAL

(Signature of Person Taking Acknowledgement)

(Name of Officer Taking Acknowledgement Typed, Printed or Stamped)

<p>Pursuant to Florida Law, Chapter 489 Part 1, property owners qualified to act as their own contractor must personally appear at the Building Department and sign the permit application.</p>
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