

Calhoun County Building Department

RESIDENTIAL BUILDING PERMIT APPLICATION

(A) OWNERS NAME: _____

(B) OWNER'S MAILING ADDRESS: _____

(C) OWNER'S PHONE NUMBER _____ CELL# _____

(D) OWNER'S EMAIL: _____

(E) CONSTRUCTION 911 ADDRESS: _____

(F) PARCEL ID #: _____

(G) COST OF CONSTRUCTION: _____

(H) CONTRACTOR'S NAME: _____

(I) CONTRACTOR'S MAILING ADDRESS: _____

(J) CONTRACTOR'S PHONE NUMBER: _____

(K) CONTRACTOR'S FLORIDA LICENSE NUMBER: _____

(L) CONTRACTOR'S EMAIL ADDRESS: _____

(M) ENVIROMENTAL HEALTH PERMIT #: _____

(N) COPY OF PAID SEWER/WATER TAP RECEIPT: (If applicable)

(O) PROPERTY FLOOD ZONE: () X-ZONE, () A-ZONE, () AE____ ZONE, () VE____ ZONE.

If construction property is in a FEMA flood zone, then a Flood statement letter or an Elevation certificate must be provided with this application.

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CHECKLIST

PLANS WILL NOT BE ACCEPTED OR REVIEWED IF ANY OF THE BELOW INFORMATION IS MISSING THAT PERTAINS TO THIS CONSTRUCTION APPLICATION.

- (A) _____ 2 SETS OF CONSTRUCTION PLANS
Plans must meet the Florida Building Code 2017 6TH edition
Plans must meet the 110 MPH wind zone

- (B) _____ Certified Florida Energy Efficiency Code/ EPI.
- (C) _____ 911 address certificate
- (D) _____ Detailed site plan showing proper setbacks (DRAWN TO SCALE)

- (E) _____ Detailed truss/floor truss drawings
- (F) _____ Provide copy of recorded Notice of Commencement
- (G) _____ Provide copy of Environmental Health Department Permit or paid sewer/water tap receipt
- (H) _____ Provide certified copy of Elevation certificate if property is in a flood zone. A, AE, VE
- (I) _____ Provide copy of Calhoun County Culvert Permit *if applicable*
- (J) _____ Provide copy of Florida DOT driveway Permit *if applicable*

1. Blower Door Test certificate will be required on all new construction modular and single family.
2. Restroom facilities must be provided on each job site.
3. Job sites must maintain clean by hauling trash off daily or trash dumpster
4. Permit job box are required for each construction site. All permit is to be posted inside box. Box is to be in an accessible area. Box is to bear name of job site and contractor information.
5. Requesting Inspections must be called in a min. of 24 hrs. prior to inspection date.
6. Due to the added structural requirements, we are requiring that a *strapping inspection, wall nail pattern, roof nail pattern, shear wall inspection* be called in before covering up.