



## Items Require of Commercial Building

- Letter of Compliance from town of Raiford, City of Lake Butler or Town of Worthington Springs.
- Culvert permit or letter of non-permit requirement (Copy of Application from D.O.T)
- Sewer & Water tap-in receipt from the City of Lake Butler
- Survey & Legal description of property
- Notice of Commencement. Must be recorded in Clerk's Office.
- If in Flood Zone, need base flood elevation and Flood Elevation Certification with first floor elevation prior to issuance permit
- Commercial building must submit a copy of a permit from Suwannee River Water Management District.
- For owner/builder acting as his/her own contractor and claiming exemption you must complete and sign a disclosure statement with this office
- Subcontractor verification form must be completed.

**Note:**

All contractors and subcontractors must be licensed with this office prior to issuance of permit.  
No permits will be issued until all the County and State requirements are turned into this office.

- Two sets of drawings, (Drawn to scale with specifications and details in sufficient clarity, Square footage of all areas). (Sealed & Signed).
- Site plan: (Dimensions of lot, building setbacks, location of well & septic and all other buildings on the lot).
- Elevations: (All sides with dimensions and roof pitch).
- Floor plan: (Rooms labeled with dimensions, window & door size, fireplace details, stair details).
- Foundation plan (What type, footing dimensions & reinforcing, location of load bearing walls, location of any vertical steel).
- Wall sections: (All material type & size, nailing, header size, bracing, truss anchors, straps, bolts & washers).
- Floor framing system design (If applicable).
- Plumbing fixture layout.
- Electrical layout: (Location of service panel, smoke detectors, ceiling fans, gfcı outlets).
- Energy calculations
- Air conditioning information, manual J.
- Wind load calculations for a minimum of 130 mph. (Sealed & Signed).
- Truss layout & Truss details

**NOTE:**

This list of requirements is requested before issuance of permit.

PARCEL # \_\_\_\_\_  
PROPERTY OWNERS NAME: \_\_\_\_\_  
MAILING ADDRESS: \_\_\_\_\_  
911 ADDRESS: \_\_\_\_\_  
PHONE #: \_ (\_\_\_\_) \_\_\_\_\_

CONTRACTOR NAME: \_\_\_\_\_  
BUSINESS NAME & ADDRESS : \_\_\_\_\_  
\_\_\_\_\_

LICENSE #: \_\_\_\_\_  
CONTRACTOR PHONE #: (\_\_\_\_) \_\_\_\_\_  
TOTAL SQ FT: \_\_\_\_\_ ESTIMATED COST: \_\$ \_\_\_\_\_

ELECTRICAL CONTRACTOR NAME: \_\_\_\_\_  
LICENSE #: \_\_\_\_\_  
POWER COMPANY: F.P.L OR CLAY ESTIMATED COST: \$ \_\_\_\_\_

HAVAC CONTRACTOR NAME: \_\_\_\_\_  
LICENSE #: \_\_\_\_\_  
ESTIMATED COST: \$ \_\_\_\_\_

PLUMBING CONTRACTOR: \_\_\_\_\_  
LICENSE #: \_\_\_\_\_  
ESTIMATED COST: \_\$ \_\_\_\_\_

**SUBCONTRACTOR VERIFICATION**

**SUBMITTED BY** \_\_\_\_\_ **DATE** \_\_\_\_\_

Union County issues combination permits where one permit covers all trades doing work at one site. It is necessary that we have documentation of the subcontractors who actually did the trade specific work under the general contractor’s permit. It shall be the responsibility of the general contractor to make sure that the subcontractors are licensed with the Union County Building Department.

**Please Note:** A person may not, in any matter within the jurisdiction of the Department of State knowingly and willfully falsify or conceal a material fact, make any false or fictitious statement or representation, or make use any false document knowing the same to contain any false, fictitious, or fraudulent statement or entry. A person who violates this section is guilty of a misdemeanor of the second degree, punishable as provided in s. 775.082 or s. 775.083. the statute of limitations for prosecution of an act committed in violation of this section is 5 years from the date the act was committed.

**General Contractor:** \_\_\_\_\_  
NAME STATE LICENSE

Company Name: \_\_\_\_\_  
PLEASE PRINT PHONE #

**Electrical Contractor:** \_\_\_\_\_  
NAME STATE LICENSE

Company Name: \_\_\_\_\_  
PLEASE PRINT PHONE #

**HVAC Contractor:** \_\_\_\_\_  
NAME STATE LICENSE

Company Name: \_\_\_\_\_  
PLEASE PRINT PHONE #

**Plumbing Contractor:** \_\_\_\_\_  
NAME STATE LICENSE

Company Name: \_\_\_\_\_  
PLEASE PRINT PHONE #

**Roofing Contractor:** \_\_\_\_\_  
NAME STATE LICENSE

Company Name \_\_\_\_\_  
PLEASE PRINT PHONE #

**General Contractor**  
**Signature** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Notary:** \_\_\_\_\_ **Date:** \_\_\_\_\_