

Union County Building Department

15 Northeast 1st Street, Lake Butler, FL 32054 • Phone: 386-496-2676 • Fax: 386-496-4240

ITEMS REQUIRED TO OBTAIN A BUILDING OR ADDITION PERMIT

- 1. Survey & Legal Description of property
- 2. Obtain 911 address
- 3. Proof of payment of Special Assessment Tax from Tax Collection Office
- 4. Septic tank permit/letter from Health Dept. OR sewer & water tap-in receipt from City of Lake Butler
- 5. Culvert Permit (or letter of non-permit requirement) Florida DOT if on a state road
- 6. Letter of Compliance/Flood Data:
 - If in the unincorporated area, from Union County Building Dept. (Fee of \$60.00)
 - If in municipality: from Town of Raiford, City of Lake Butler or Town of Worthington Springs
- 7. If in Flood Zone: base flood elevation and Flood Elevation Certification, with first floor elevation
- 8. Commercial Buildings only: Copy of permit from Suwannee River Water Management District
- 9. Subcontractor Verification Form must be completed
- 10. For owner/builder acting as his/her own contractor and claiming exemption, Owner must complete and sign a disclosure statement with this office
- 11. If the property was created by a lot split, a new tax parcel number must be obtained from the Union County
 - Property Appraiser's office.
- 12. If the property is a recent purchase, you will need to bring a copy of the recorded deed.
- 13. Two (2) sets of plans, in compliance with State Minimum Plan Requirements (See Page 3), provided to the Building Department
- 14. Notice of Commencement (Recorded in Clerk's Office)
- 15. Receipt for payment of all fees
- 16. 911 address posted at the road and house numbers on home if more than 50 feet from road, number to be 3" minimum height

NOTE: All contractors and subcontractors must be licensed with the State of Florida, and approved by the Union County Building Department prior to issuance of permit. No permits will be issued until all of the County and State requirements are submitted.

STATE MINIMUM PLAN REQUIREMENTS

1. Two sets of drawings:

Drawn to scale with specifications and details in sufficient clarity, square footage of all areas. (Signed & Sealed)

- 2. Site plan:
- Dimensions of lot, building setbacks, location of well & septic and all other buildings on the lot
- 3. Elevation Sheet:
- All sides with dimensions and roof pitch
- 4. Floor Plan Sheet:
- Rooms labeled with dimensions, window & door size, fireplace details, stair details
- 5. Foundation Plan Detail:
- What type, footing dimensions & reinforcing, location of load bearing walls, location of any vertical steel
- 6. Wall Section Detail:
- All material type & size, nailing, header size, bracing, truss anchors, straps, bolts & washers
- 7. Floor Framing System Design (If applicable)
- 8. Plumbing Fixture Layout Sheet
- 9. Electrical Layout Sheet:
- Location of service panel, smoke detectors, ceiling fans, GFI outlets, etc.
- 10. Energy Calculations
- 11. Air Conditioning Information, Manual J
- 12. Wind Load Calculations, for a minimum of 130 mph (Signed & Sealed)
- 13. Truss Layout & Truss Details (Signed & Sealed)

NOTE: This list of requirements is required before issuance of permit.

SUBCONTRACTOR VERIFICATION

SUBMITTED BY		DATE
that we have document contractor's permit. It s	ntation of the subcontractors who actually	s all trades doing work at one site. It is necessary did the trade specific work under the general ntractor to make sure that the subcontractors are
willfully falsify or cond false document knowin violates this section is	ceal a material fact, make any false or fictiting the same to contain any false, fictitious, guilty of a misdemeanor of the second defilimitations for prosecution of an act comm	etion of the Department of State knowingly and ous statement or representation, or make use any or fraudulent statement or entry. A person who gree, punishable as provided ins. 775.082 or s. nitted in violation of this section is 5 years from
General Contractor:	NAME	STATE LICENSE NUMBER
Electrical Contractor:	COMPANY NAME	PHONE NUMBER
	NAME	STATE LICENSE NUMBER
HVAC Contractor:	COMPANY NAME	PHONE NUMBER
	NAME	STATE LICENSE NUMBER
	COMPANY NAME	PHONE NUMBER
Plumbing Contractor:	NAME	STATE LICENSE NUMBER
Roofing Contractor:	COMPANY NAME	PHONE NUMBER
	NAME	STATE LICENSE NUMBER
	COMPANY NAME	PHONE NUMBER
General Contractor Signature		Date: