



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 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** _____

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 ins. 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 NUMBER

COMPANY NAME PHONE NUMBER

Electrical Contractor: _____
NAME STATE LICENSE NUMBER

COMPANY NAME PHONE NUMBER

HVAC Contractor: _____
NAME STATE LICENSE NUMBER

COMPANY NAME PHONE NUMBER

Plumbing Contractor: _____
NAME STATE LICENSE NUMBER

COMPANY NAME PHONE NUMBER

Roofing Contractor: _____
NAME STATE LICENSE NUMBER

COMPANY NAME PHONE NUMBER

General Contractor Signature _____ **Date:** _____