



Mechanical
Building Permit
Florida Building Code 5th Edition (2014)

8

Job Information Application Date: _____ Est. cost: _____ Permit #: _____

Tax/Folio #: _____ Job Address: _____

Legal Sub/Unit/Blk/Lot: _____

Owner Name: _____

Owner Mailing Address (if different): _____

Contractor Information

Contractor: _____ State Cert/CC Comp Card #: _____

Qualifier's name: _____ Job rep: _____

Address: _____

Phone/Fax/E-mail: _____

Work being performed

Number of Units _____ Heat pump _____ Refrigeration _____
_____ A/C replacement (tonnage: _____) _____ A/C to existing home w/o previous A/C

Description of Work: _____

The following must be included with the application:

- _____ 2 copies of plans if scope of work includes locating or relocating ductwork.(Single Family)
- _____ 3 copies of plans if scope of work includes locating or relocating ductwork.(Commercial)

Regulations and Information

1. City of Marco Island Building Services is regulated by the Florida Building Code 5th Edition (2014), Mechanical. For more information about the code or to purchase the code, visit <http://www.floridabuilding.org>
2. Mechanical plans must be submitted. Show all ducts, duct sizes, condensate line locations and all exhaust locations. Current year energy calculations must be submitted with plans. Three sets for commercial.
3. All mechanical equipment shall be located above the required base flood elevation.
4. Clearances are required per manufacturer specifications. See Sec. 103.4 of the Marco Island Administrative Construction Code.
5. Failure to Provide these documents at or before inspection will result in a failed inspection:
 - a. Building load calculations detailing the capacity of the new system, in BTU/HR. All calculations based on the ACCA Manual J 8th Edition.
 - b. Written certification from the contractor stating that the duct system (when in an attic) has been inspected and sealed where needed. Ductwork between floors is not subject to this requirement.
 - c. Copy of AHRI or other efficiency rating of unit.
6. If the electrical service needs to be upgraded an electrical permit shall be required. You may add the electric work to this permit or have the electrician pull a separate, simultaneous permit.
7. Owner-builders must sign an affidavit and supply homeowners insurance.
8. One application must be filled out with the original signature of the qualifier pulling the permit.

9. Ductwork replacement or alteration will require a plan review fee equal to 25% of the permit fee. This fee is not refundable nor is it credited to any other fee.
10. The fee for this permit is \$0.10 per square foot of the gross square footage of the structure. The minimum fee shall be \$75.00.
11. The Electronic Data Conversion Surcharge, added to all permits, will equal 5% of the total permit cost, with a minimum charge of \$5.00 and a maximum charge of \$300.00. The fee is capped at \$100.00 if the documents are also submitted in electronic format.

RECORDED NOTICE OF COMMENCEMENT MUST BE POSTED IF THE PROJECT VALUATION EXCEEDS \$7,500.00

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Contractor's Affidavit

I certify that all the foregoing information is accurate and that all work must be done in compliance with all applicable laws regulating construction and zoning. I understand **THERE WILL BE A FINAL INSPECTION** of the work permitted herein. Compliance will be strictly enforced.

No work whatsoever will commence until the building permit has been issued.

- The permit fee will be quadrupled if work is started without an approved permit.
- The permittee further understands that only licensed contractors may be employed and that the structure shall not be used or occupied until a Certificate of Occupancy is issued.
- See Section 105.4.1.1 of the Marco Island Administrative Construction Code for information regarding the permit expiration date.

Print Name of Qualifier

Signature of Qualifier

State of Florida

County of _____

The foregoing instrument was acknowledged before me this ____ day of _____, 20____, by _____, who is personally known to me or has produced _____ as identification.

Signature, Notary Public – State of Florida

(Seal)

Printed, Typed, or Stamped Name of Notary