



QUICK PERMIT APPLICATION CHECKLIST / REQUIREMENTS

All forms can be accessed in the city website under FORMS for Download:

<https://www.westonfl.org/government/forms-for-download>

REQUIREMENTS FOR ALL BUILDING PERMIT APPLICATIONS: (except Replacement of Water & Pool Heaters)

1. [Weston Building Code Services - Uniform Building Permit Application Packet](#)
2. [Broward County Uniform Building Permit Application](#).
3. Notice of Commencement (for value over \$2500.00 or \$15,000.00 if A/C Change-Out).
4. Contract/Agreement with total job cost.

Garage Door Replacement, Window and Door Replacement, Shutters:

1. Product Approval (w/highlighted components for installation).
2. [Broward County Uniform Retrofit Window and Door Schedule \(Policy 20-01\)](#).
3. [Broward County Fenestration Voluntary Wind Load Chart \(Signed and sealed if bldg. over 30 feet high\)](#).
4. Site Specific Plan/Sketch with all dimensions.
5. Refer to FBC 107.3.5 for minimum plan review criteria.

Re-Roof/Roofs:

1. Product Approval (w/ highlighted components for installation)
2. Roofing Application Package
 - A. [HVHZ Uniform Roof Permit Application \(FBC Section 1525\)](#)
 - B. [Owner's Notification Form \(FBC Section 1524\)](#)
 - C. Copy of the Broward County Property Appraiser's assessed valuation of the building.
3. Re-roofs (other than single-family residences)
 - A. Statement of Responsibilities Regarding Asbestos Form (obtained at Broward County Development and Regulation Division (DERD))
 - B. For lightweight concrete installation, please use [Lightweight Concrete Installation Packet](#).
 - C. [Rooftop Equipment & Gas Vent Affidavit \(Weston Form\)](#)
 - D. [Rooftop Mounted Equipment Affidavit \(Broward County Form\)](#)

A/C Change-Out:

1. Mechanical Permit Application ([Attached](#))
2. Structural Permit Application (only if package units mounted on elevated metal frame or installing new poured in place slab)
3. [Broward County Uniform A/C Changeout Form](#)
4. Signed/sealed original anchoring details, or NOA documents, or Product approval documents.
5. Survey (survey affidavit if survey over a year old.)
6. Aerial photos, showing all outdoor equipment location. (Commercial Only)
7. New roof top unit adapter curb installation details. (Commercial Only)

Emergency Generator:

1. Electrical Permit Application ([Attached](#))
2. Plumbing Permit Application ([Attached](#))
3. Mechanical Permit Application (Commercial Only)
4. Load Calculations/Riser Diagram
5. Plans showing complete installation details/manufacture installation details. Stationary Fuel Cell Power System 924.1
 - A. Signed/sealed original anchoring details, or NOA documents, or Product approval documents.
6. Survey (survey affidavit if survey over a year old.)



QUICK PERMIT APPLICATION CHECKLIST / REQUIREMENTS

All forms can be accessed in the city website under FORMS for Download:

<https://www.westonfl.org/government/forms-for-download>

Electrical Service Upgrade/Panel Changeout:

1. Electrical Permit Application ([Attached](#))
2. Load calculations
3. Riser Diagram

Screen Enclosure:

1. Signed and Sealed Construction Plans.
2. [Lot Coverage Calculation Form](#)
3. Survey (survey affidavit if survey over a year old.)

New Pool:

1. Electrical Permit Application ([Attached](#))
2. Plumbing Permit Application ([Attached](#))
3. Pool Heater Application ([Attached](#))
4. Signed and Sealed Construction Plans & Specifications.
5. [Lot Coverage Calculation Form](#)
6. Residential Swimming Pool, Spa, and Hot Tub Safety Act
7. Pool Barrier Alarm Specifications
8. Survey (survey affidavit if survey over a year old.)

Pool Heater

1. Plumbing Application
2. Electrical Application
3. Pool Heater Specifications

Pool Resurfacing

1. Resurfacing Material Application Specifications
2. Anti-Entrapment Pool Drain Cover
3. Residential Swimming Pool, Spa and Hot Tub Safety Act

Driveways, Walks, Patio and Pool Decks:

1. Engineering Application ([Attached](#))
2. [Lot Coverage Calculation Form](#)
3. Plans, details, and specifications
4. Survey (survey affidavit if survey over a year old.)

Fence:

1. Signed and sealed Plans by a Florida Licensed Architect/Engineer, if installing a PVC or metal fence. Wood and chain link fences must be installed per the prescribed method of the Florida Building Code, 7th Edition, if not designed by an Architect/Engineer.
2. A Chain link Fence Table must be filled out and submitted for chain link fences.
3. All required product approvals, if required.
4. Florida Building Code Guidance for Wood Fences
5. Survey
6. Site Plan showing the proposed structure and the setback dimensions to all property lines. This may be omitted if represented on the surveys submitted.



QUICK PERMIT APPLICATION CHECKLIST / REQUIREMENTS

All forms can be accessed in the city website under FORMS for Download:

<https://www.westonfl.org/government/forms-for-download>

Shed / Pergola / Gazebo:

1. Signed and sealed plans by a Florida Licensed Architect/Engineer
2. [Lot Coverage Calculation Form](#)
3. Survey (survey affidavit if survey over a year old.)
4. Site Plan showing the proposed structure and the setback dimensions.
5. to all property lines. This may be omitted if represented on the surveys submitted.

Water Heater Replacement:

1. Plumbing Permit Application (*Attached*)
2. Water Heater Specifications
3. [Dwelling Unit Water Heater Replacement Form](#)

Solar System:

1. Electrical Permit Application (*Attached*)
2. Dedicated electrical plans and structural plans if applicable.
 - A. Electrical plans shall have a schematic showing all system components labeled, wire sizes, grounding, circuit sizing, overcurrent protection and disconnect location complete with signage and location of signage.
3. Special Inspector Form
4. Survey (survey affidavit if survey over a year old.)



BUILDING CODE SERVICES OWNER-BUILDER AFFIDAVIT

Owner Name: _____

Subdivision: _____ Lot/Block: _____

Property Address: _____

I am applying for a Building Permit pursuant to the Owner Builder exemption set forth in Florida Statute 489.103. Florida law requires that I attest to the following statements. **BY SIGNING THIS STATEMENT, I ATTEST THAT:** (Initial to the left of each statement)

I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on all permit and contracts.

I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within in 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates this exemption.

I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

I understand that I may not hire an unlicensed individual person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county ordinance.

I understand that it is frequent practices of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.

I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulation.

I am of aware of construction practices and I have access to the Florida Building Code.

I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 1-850-487-1395 or at http://www.myfloridalicense.com/dbpr/pro/cilb/documents/cilb_board.pdf for more information about licensed contractors.

I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the address listed below.

I agree to notify the building department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure or in the permit application package.

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board, the Department of Business and Professional Regulation and the building department may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is property licensed and the status of the contractor's workers' compensation coverage.

Check types of permits you are seeking:

- Building
- Roofing / Reroofing
- Electrical
- Plumbing
- Air Conditioning
- Other _____

I, _____, do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

Signature of Owner-Builder

STATE OF FLORIDA – COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me
This _____ day of _____, 20____
by _____
(Type / Print owners name)

NOTARY'S Signature as to Owner's signature

Notary Name (Type, Print, _____
Stamp Notary's Name)

Personally known ___ or Produced Identification ___
Type of Identification produced



BUILDING CODE SERVICES CONTRACTOR REGISTRATION

Note: No fee is required to register with the City of Weston Building Code Services.

CONTRACTOR INFORMATION

TYPE OF CONTRACTOR: _____

COMPANY NAME: _____

ADDRESS: _____

PHONE: _____ FAX: _____ EMAIL: _____

QUALIFIER INFORMATION

NAME OF QUALIFIER: _____

PHONE: _____ FAX: _____ EMAIL: _____

Would you like to be added to our mailing list to receive City of Weston Building Code Services policy and procedures updates and office closure information? Yes No

DOCUMENTATION - Copies of the following are required for registration. **Email all documents to the building department email: Building@westonfl.org**

- State Certification -OR- State Registration AND Broward County Certificate of Competency
- Business Tax Receipt
- General Liability: "City of Weston" as Certificate Holder
- Workman's Comp

QUALIFIER SIGNATURE: _____ DATE: _____

STATE OF FLORIDA/COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me this _____ day of , 20____ ,
by _____

Notary's Signature

Print Name of Notary Public

Personally known _____
OR Produced Identification _____
Type of Identification Produced _____

PERMIT NUMBER:

NOTICE OF COMMENCEMENT

The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes the following information is provided in the Notice of Commencement.

1. **DESCRIPTION OF PROPERTY** (Legal description & street address, if available) **TAX FOLIO NO.:** _____

SUBDIVISION _____ **BLOCK** _____ **TRACT** _____ **LOT** _____ **BLDG** _____ **UNIT** _____

2. **GENERAL DESCRIPTION OF IMPROVEMENT:**

3. **OWNER INFORMATION:** a. Name _____

b. Address _____ c. Interest in property _____

d. Name and address of fee simple titleholder (if other than Owner) _____

4. **CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:**

5. **SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:**

6. **LENDER'S NAME, ADDRESS AND PHONE NUMBER:**

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:

NAME, ADDRESS AND PHONE NUMBER:

8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes:

NAME, ADDRESS AND PHONE NUMBER:

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): _____, 20____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

**Signature of Owner or
Owner's Authorized Officer/Director/Partner/Manager**

Print Name and Provide Signatory's Title/Office

State of Florida
County of Broward

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____

By _____, as _____
(name of person) (type of authority,...e.g. officer, trustee, attorney in fact)

For _____
(name of party on behalf of whom instrument was executed)

_____ Personally known or _____ produced the following type of identification: _____

Notary

(Signature of Notary Public)

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/ Director / Partner/Manager who signed above:

By _____ By _____



BUILDING CODE SERVICES
PERMIT REVISION APPLICATION
 (Change of Plan submitted to an issued permit)

Revision Application is required when Plans are submitted after the Master Permit has been issued.
Fees for Revision: \$98.48 Residential (per Trade) \$127.76 Commercial (per Trade)

PROJECT INFORMATION

Master Permit #		Revision #:		Submittal Date:	
Is this a correction to an existing revision? <input type="checkbox"/> No <input type="checkbox"/> Yes, if Yes, provide the application #:				Application #:	
Job Address:					
Job Name:					
Contracting Co.:		Phone:		Email:	
Company Address:		City:		State:	Zip:
Qualifier's Name:		Owner-Builder:	<input type="checkbox"/>	License or Cert of Comp. #	

REVISION INFORMATION

<i>This revision affects the following disciplines*: Applicant to check all that apply</i>					
<input type="checkbox"/> Building	<input type="checkbox"/> Electrical	<input type="checkbox"/> Plumbing	<input type="checkbox"/> Mechanical	<input type="checkbox"/> Roofing	<input type="checkbox"/> Fire
<input type="checkbox"/> Zoning	<input type="checkbox"/> Engineering	<input type="checkbox"/> Other (Specify):			
Do these revisions represent a change in the scope of work and increased job cost?				<input type="checkbox"/> No	<input type="checkbox"/> Yes, if Yes, provide new cost.
Increase in Job Cost:		New Total Job Cost:			

**Please note that a plans examiner has the authority to modify required reviews based upon examination of the plans submitted for revision*

Provide a brief description of the revised work	

Applicant please read carefully:

Application is hereby made for plan revision as indicated herein. I certify that all the information is accurate. I understand that only the review disciplines indicated will review my plans. I am aware that any error in indicating the disciplines required may result in the need for further plan revisions or inspection delays.

Contractor Print Name _____	Notary Signature: _____
Signature: _____	Notary Name: _____
STATE OF FLOIRDA	(Print, type or Stamp Notary's Name)
County of _____	
Sworn to (or affirmed) and subscribed before me this _____ day of _____	Personally Known _____ or Produced Identification _____
20 _____, by _____ (Type/print Contractor's name)	Type of Identification Produced _____