

INSTRUCTIONS FOR BUILDING PERMIT APPLICATION

2800 N. HORSESHOE DRIVE, NAPLES, FL 34104 (239) 252-2400

These Instructions are designed to assist and guide Permittees with completing the Building Permit Application. For your convenience, the Application is also available on <http://www.colliercountyfl.gov> as an interactive PDF. All sections, as noted, must be completed.

Instructions for Section A. Permit Number

A.1. Permit #: To be completed by Staff.

Instructions for Section B. General Permit Information

B.1. Primary Permit #: To be completed by the applicant, if applicable. i.e., the single-family home permit is the PRIMARY PERMIT for an accessory pool permit.

B.2. Master Permit #: To be completed by the applicant, if applicable. A MASTER PERMIT is a set of documents pre-approved by the County to use for future permits.

B.3. Building Type: Select one of the five options.

Instructions for Section C. Property Information

C.1. Parcel/Folio #: These can be found on the Collier County Property Appraiser website: <http://www.collierappraiser.com>.

C.2. Job Street Address: This is the physical address where the construction work will take place.

C.3. Owner Name: Name of the property owner where the construction work will take place.

C.4. Owner Phone: Phone number of the property owner where the construction work will take place.

C.5. Owner Email: Email address of the property owner where the construction work will take place.

C.6. Subdivision: The subdivision/lot/block/unit #'s can be found on the Collier County Property Appraiser website: <http://www.collierappraiser.com>

C.7. Project Name: The name of the project, when applicable.

C.8. SDP/PL#: Approved SDPs can be obtained by contacting the Collier County Records Room at GMDPublicRecordRequest@colliercountyfl.gov.

C.9. Jurisdiction: Select Option that applies.

Instructions for Section D. Contractor Information

D.1. Permittee Type: Please check the applicable box.

D.2. Contact Name: Name of the contractor's contact, if different than below. Owner Builder must state "SELF."

D.3. License #: Contractors must provide their State (preferred) and/or County license numbers and business information. Owner Builder applicants must state "SELF."

D.4. Company Name: Name of contractor's company performing the construction work. Owner Builder must state "SELF."

D.5. Company Address: Address of the Contractor or Owner Builder.

D.6. Qualifier Name: Provide the name of the qualifier. Owner Builder must state "SELF."

D.7. Contractor Email: Email(s) of the Contractor or Owner Builder.

D.7.A. For Contractors: Is Email your preferred method of contact. Please check YES box, if applicable.

D.9. Company Phone: Phone Number of the Contractor or Owner Builder.

D.10. Company Fax: Fax Number of the Contractor or Owner Builder.

Instructions for Section E. Permit Information

E.1. Declared Value: Identify the Declared Value of the construction. The Declared Value must be either the contract value OR the value established by the Items to Be Included, pg. 3 of the [50% Structural Improvement/Structural Damage Form](#).

E.2. Permittee Type: Select a permit type from the supplied list.

E.3. Description of Work: The Description of Work must convey a detailed account of the work identified on the construction plans. For a multi-story project, identify the floor/story where construction work will take place. In addition, for permit applications addressing a Code Enforcement violation, please include the case number. Do NOT state "Please see attached plans." The description of work must be included on the approved Permit.

E.4. Occupancy Type: Identify the Occupancy Type from the list: *Occupancy Types are established in Chapter 3 of the Florida Building Code.*

Amusement Parks, Stadium, Bleachers	Assembly, Church	Assembly, Arenas	Assembly, Niteclubs	Assembly, Restaurants, Bars, Banquet Halls	Assembly, Theaters, with Stage	Assembly, Theaters, without Stage
Business	Chickee-Non-Residential	Chickee - Residential	Day Care	Factory - Industrial (Low Hazard)	Factory - Industrial (Moderate Hazard)	High Hazard (H-2)
High Hazard - (H-3)	High Hazard (H-4)	High Hazard, Explosives	HPM	Institutional Incapacitated	Institutional Supervised Environment	Mercantile
Residential, Care/Assisted Living Facilities	Residential, Hotels	Residential, Multi-Family	Residential 1&2 Family New or Guest House	Special Purpose Industrial	Storage, Low Hazard	Utility, Miscellaneous Commercial & M/F Utility, Miscellaneous Residential

E.5. Construction Type: Identify the Construction Type from the list: *Construction Types are established in Chapter 6 of the Florida Building Code.*

Type IA	Type IIA (1 hour)	Type IIIA (1 hour)	Type IV	Type VB (Unprotected)	Type IB	Type IIB (Unprotected)	Type IIIB (Unprotected)	Type VA (1 hour)
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E.6. Is structure in flood zone: Identify whether the structure is located in a flood zone: No, Unknown, Yes.

E.7. Fire Sprinkled: Identify whether the building is fire sprinkled: Yes or No.

E.8. Type of Water Supply: Check the box that identifies the type of water supply.

E.9. Sewage Disposal: Check the box that identifies the method of sewage disposal.

E.10. Vegetation Removal: Identify whether clearing of vegetation will take place: Yes. Clearing will take place on site, or No. Clearing will not take place on site.

E.11. Private Provider: Identify whether Private Provider services will be rendered: No or Plan Review & Inspection or Inspection Only.

E.12. Threshold Building: Identify whether the structure is a threshold building, as defined by FBC Ch. 2 and F.S. 553.71(12): Yes or No.

E.13. Repairs from Disaster Event: Identify whether these are repairs from a disaster event. Yes, Name of Event or No.

E.14. Change of Occupancy: Please check Yes or No.

E.15. Permit by Affidavit: Identify whether the permit is a Permit by Affidavit: Yes or No.

E.16. Subcontractors: Check all the Subcontractors that will conduct work at the job site.

Instructions for Section F. Area of Construction Activity

F. Identify number of stories in structure, floor where work is being performed, # of bedrooms/bathrooms. Supply interior/living sq.ft., additional sq.ft. being added, exterior/non-living sq. ft. and total square footage.

BUILDING PERMIT APPLICATION

2800 North Horseshoe Drive, Naples, FL 34104 (239) 252-2400
PermittingDept@CollierCountyFL.gov

Directions: Applicants must complete all fields. Please follow the *Building Permit Application Instructions* to complete this Application.

Section A. Permit Number **A.1. Permit #** (Staff to Provide): _____

Section B. Permit Information **B.1. Primary Permit #** (if any): _____ **B.2. Master Permit #:** _____

B.3. Building Type: 1&2 Family Dwelling/Townhouse Res. 3+ Units/Multi-Family Commercial Mobile/Manufactured Home Guest House

Section C. Property Information

C.1. Parcel/Folio #: _____ **C.6. Subdivision Lot #:** _____

C.2. Job Street Address: _____ **C.7. Project Name:** _____

C.3. Owner Name: _____ **C.8. SDP/PL#:** _____

C.4. Owner Phone: _____ **C.9. Jurisdiction:** Collier County City of Everglades

C.5. Email: _____

Section D. Contractor Information **D.1. Permittee Type:** Contractor Design Professional Owner-Builder

D.2. Contact Name: _____ **D.3. License:** _____

D.4. Company Name: _____

D.5. Company Address: _____ **D.9. Company Phone:** _____

D.6. Qualifier Name: _____ **D.10. Fax #:** _____

D.7. Email: _____

For Contractors: *The above email address is my preferred method of contact for all correspondence regarding this permit.* Yes

Section E. Permit Information *Building Permit Type includes: New Construction, Addition, Alteration, Chickee/Tiki Hut, Dumpster Enclosure, Pergola, Tenant Build-out, etc. **E.1. Declared Value: \$** _____

E.2. Permit Type: Alum Structure Awnings Building* Carport/Shed Cell Tower Demolition Detached Garage Electrical Fence Fire Gas
 Marine Mechanical Plumbing Pool Roof Shutters/Doors/Windows Sales/Const. Trailer Screen Enclosure Solar Sign/Flagpole Water Feature

E.3. Description of Work: *The Description of work must convey an account of work identified on the construction plans.*

E.4. Occupancy Type: _____ *See Instructions*

E.5. Construction Type: IA IB IIA IIB III A III B IV VA VB *See Instructions*

E.6. Is Structure in a Flood Zone: No Unknown Yes, additional form required. *See Instructions*

E.7. Is Structure Fire Sprinkled: No Yes

E.8. Type of Water Supply: Collier County Well City of Naples Ave Maria City of Everglades Immokalee Other

E.9. Type of Sewage Disposal: Sewer Septic

E.10. Vegetation Removal: Yes No A Vegetation Removal Affidavit is required for any new structure of addition on all parcels larger than 1 acre.

E.11. Private Provider: No Yes Plan Review & Inspections Inspections Only

E.12. Threshold Building: No Yes

E.13. Repairs from Disaster Event: No Yes *Name of Disaster Event:* _____

E.14. Change of Occupancy: No Yes

E.15. Is this a Permit by Affidavit: No Yes

E.16. Subcontractors: Check All that Apply: Electrical Plumbing Mechanical Roofing Septic

Section F. Area of Construction Activity (Work Area Only)

Total Number of Stories: _____ Floor (Story) work is being performed on: _____ # Bedrooms: _____ # Bathrooms: _____

Living /Int. Sq. Ft.: _____ Add'l. Sq. Ft.: _____ Non-Living/Ext. Sq. Ft.: _____ Total Sq. Ft.: _____