



2800 N. Horseshoe Dr.  
Naples, Fl. 34104

# ALUMINUM STRUCTURE & SCREEN PERMIT APPLICATION

### JOB INFORMATION

SDP #: \_\_\_\_\_ Permit # \_\_\_\_\_  
Tax Folio #: \_\_\_\_\_ Master permit # \_\_\_\_\_  
Construction address: \_\_\_\_\_  
Property Owner: \_\_\_\_\_ Owner's mailing address: \_\_\_\_\_  
Architect/Engineer: \_\_\_\_\_ E-mail address: \_\_\_\_\_ Phone #: \_\_\_\_\_

### CONTRACTOR INFORMATION (Must provide notarized statement if owner/builder)

Contractor: \_\_\_\_\_ Collier County Certificate #: \_\_\_\_\_  
Qualifier's name: \_\_\_\_\_ State Cert #: \_\_\_\_\_  
Address: \_\_\_\_\_ Job Rep: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone #: \_\_\_\_\_  
E-mail address: \_\_\_\_\_ Fax #: \_\_\_\_\_

### WORK BEING PERFORMED

Contracted Value \$: \_\_\_\_\_

- Screen Enclosure/Screen Roof    Screen Room/Pan Roof    Screen Room/Wood Roof  
 Siding    Carport (Wood/Aluminum/CBS)    Deck (Wood/CBS)    Other

Description of work:

- Commercial    Single Family    Multi-Family   Square Footage \_\_\_\_\_  
 Private Provider Permit    Permit by affidavit    Code Case # \_\_\_\_\_  
 Existing Slab    New Slab    No Slab    with Electric    without Electric  
 New   or    Replacement   Original Permit # \_\_\_\_\_    Septic    Well

### LOT DATA

Subdivision: \_\_\_\_\_ Section: \_\_\_\_\_ Township: \_\_\_\_\_ Range: \_\_\_\_\_  
Block: \_\_\_\_\_ Lot/Parcel: \_\_\_\_\_ Unit: \_\_\_\_\_ Tract: \_\_\_\_\_  
Taz: \_\_\_\_\_ Flood Zone: \_\_\_\_\_ Flood Panel # \_\_\_\_\_ Zoning: \_\_\_\_\_ Special Zoning: \_\_\_\_\_  
Depth: \_\_\_\_\_ Ft. Width: \_\_\_\_\_ Ft. Area: \_\_\_\_\_ Ft. FIRM PANEL# \_\_\_\_\_ E.F.E. \_\_\_\_\_  
Bench Mark Elevation: \_\_\_\_\_ Location: \_\_\_\_\_ Breakaway Walls:  Yes    No

### OFFICE USE ONLY

Setbacks: Front: \_\_\_\_\_ Rear: \_\_\_\_\_ Left Side: \_\_\_\_\_ Right Side: \_\_\_\_\_  
Comments \_\_\_\_\_

**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.**

The approved permit and/or permit application expires if not commenced within six (6) months from the date of issuance. The permit or application fee will be two times the amount of the permit fee, if work is started without an approved permit. The permittee further understands that only licensed contractors may be employed and that the structure will not be used or occupied until a certificate of occupancy is issued. By signing this permit application, I agree that I have been retained by the owner/permittee to provide contracting services for the trade for which I am listed. Furthermore, it is my responsibility to notify the Customer Service section of the Building Review and Permitting Department should I no longer be the contractor responsible for providing said contracting services. I further agree that I understand that the review and issuing of this permit does not exempt me from complying with all County Codes and Ordinances. It is further understood that the property owner/permittee is the owner of the permit.

**WARNING OF POSSIBLE DEED RESTRICTIONS**

THE LAND SUBJECT TO THIS PERMIT MAY BE SUBJECT TO DEED, AND OTHER RESTRICTIONS THAT MAY LIMIT OR IMPAIR THE LANDOWNER'S RIGHTS. COLLIER COUNTY IS NOT RESPONSIBLE FOR THE ENFORCEMENT OF THESE RESTRICTIONS, NOR ARE COLLIER COUNTY EMPLOYEES AUTHORIZED TO PROVIDE LEGAL OR BUSINESS ADVICE TO THE PUBLIC RELATIVE TO THESE RESTRICTIONS. THE LANDOWNER OR ANY APPLICANT ACTING ON BEHALF OF THE LANDOWNER IS CAUTIONED TO SEE PROFESSIONAL ADVICE.

**WARNING ON WORK IN COUNTY RIGHT-OF-WAYS**

This permit does not authorize construction or installation of any structure or utility, above or below ground, within any right-of-way or easement reserved for access, drainage or utility purposes. This restriction specifically prohibits fencing, sprinkler systems, landscaping other than sod, signs, water, sewer, cable and drainage work therein. If such improvements are necessary, a separate permit for that purpose must be obtained from Transportation/ROW Permits and Inspections (239) 252-5767.

**NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management district, state agencies, or federal agencies.

\_\_\_\_\_  
Print Name of Qualifier

\_\_\_\_\_  
Signature of Qualifier

STATE REGISTRATION NUMBER: \_\_\_\_\_

COUNTY CERTIFICATE # \_\_\_\_\_

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

ALUMINUM STRUCTURE/SCREEN ENCLOSURE PERMIT  
SUBMITTAL CHECK LIST

1 & 2 Family - submit **two** (2) complete assembled sets of plans, a minimum of **two** (2) of these sets shall be signed and sealed as determined to be applicable, included but not limited to the following:

Multi-Family or Commercial - submit **three** (3) complete assembled sets of plans, a minimum of **two** (2) of these sets shall be signed and sealed as determined to be applicable, included but not limited to the following:

**Applicant**   **In Take**   **Plan Reviewer**

**Included**   **Verified**   **Verified**

- |                          |                          |                          |  |
|--------------------------|--------------------------|--------------------------|--|
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 1. E-mail address, fax number, and phone number  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 2. Site plan showing location with setbacks  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 3. Sealed drawings   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 4. Product approval documents, as required   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 5. Highlight details (when mastered)   |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 6. Vegetation removal permit, if needed  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 7. Preservation review form, if in the RFMU  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 8. Clearing plan, if needed  |
| <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | 9. Copy of the approved SDP, cover page and site plan, and approved architectural plans, if required |

For a copy of an Environmental Resource Permit please contact the Ft. Myers office at 239-332-6975 or an informal wetland determination, please contact the Environmental Department at 239-252-2505. **The above checklist is intended to ensure the minimum required documents are included in the application and may not include all the documents required for every situation. It is the applicant's responsibility to submit all required information. If the application is found to be insufficient for a thorough review, the permit package may be cancelled, and the application fee will not be refunded.** I have read all requirements above mentioned and agree that the submissions of these plans are correct.

\_\_\_\_\_

(APPLICANT SIGNATURE)

\_\_\_\_\_

DATE