**Sheds/Utility Building Checklist**

NOTE: THIS CHECKLIST MUST BE COMPLETED AND SUBMITTED ALONG WITH THE PERMIT APPLICATION

IS THIS SHED: [ ] PRE-MANUFACTURED BUILDING [ ] HAND BUILT/CUSTOM

SQ FT: \_\_\_\_\_\_\_\_\_\_ SQ FT: \_\_\_\_\_\_\_\_\_\_\_

REQUIRED ITEMS:

[ ] 1. Completed permit application form including all signatures and completion of the owner/builder affidavit if applicable.

TWO (2) Complete Sets of the following items

[ ] 2. DRAWING PACKAGE at minimum 1/8 inch scale to include the following drawings-

a) Site Plan/survey showing location of proposed shed/utility building and distances from the existing property lines. Show location of overhead service.

b) Provide Lot Coverage Information.

3. FOR PRE-MANUFACTURED BUILDINGS:

a) Product Approval/Notice of acceptance, FL# and cover sheet.

4. FOR SITE BUILT SHEDS/UTILITY BUILDINGS

a) 2 sets of drawing drawn to min 1/8” scale that show the following

b) Floor Plan of proposed structure including door/window location with wind pressures.

c) Foundation details, typical wall details and connections, roof framing plan and structural information from Chapter 16 of the Florida Building Code.

d) Product Approvals/Notice of Acceptance, FL# and Cover sheet for door, window and roof covering.

e) If applicable show all electrical and plumbing.

f) All structural information needs to be signed and sealed by Architect or Engineer

PLAN DESIGN AND SUBMISSION NOTES

1. ALL CONSTRUCTION IN DESIGNATED HISTORIC DISTRICTS ARE SUBJECT TO HISTORIC PRESERVATION REVIEW.

2. NO EQUIPMENT OR STRUCTURES TO BE PLACED IN THE SETBACK.

3. NOTICE OF COMMENCEMENT REQUIRED FOR VALUE GREATER THAN $2,500.00 A COPY OF THE RECORDED NOC TO BE SUBMITTED PRIOR TO FIRST INSPECTION.

**Affidavit: I hereby certify that I have read and understand the requirements as stated above for a permit and further understand that unless all required items are submitted with the permit application, my application will be IMMEDIATELY placed on HOLD until all required items are submitted.**

**SIGNATURE OF APPLICANT: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ DATE: \_\_\_\_\_\_\_\_\_\_\_\_\_\_**