

BUILDING PERMIT APPLICATION - ELECTRICAL, CABLING, FIRE ALARM, AND BALL FIELD LIGHTING

<p align="center">SBBC Office use only</p> <p>Project Manager: _____</p> <p>Proj./W.O. No.: _____</p> <p>Account No.: _____</p>	<p>BUILDING PERMIT APPLICATION</p> <p>(ELECTRICAL * CABLING * FIRE ALARM * BALL FIELD LIGHTING)</p>
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Instructions: Application must be typed or printed. Submit original copy. Complete each item.

Codes enforced by the Building Dept. Florida Building Code 2007, Florida Mechanical Code 2007, Florida Plumbing Code 2007, Florida Fuel Gas Code 2007, Florida Existing Building Code 2007, Florida Fire Prevention Code 2007, State Requirements for Educational Facilities 2007, National Electrical Code 2008

Date: _____ Permit No.: _____
BCC Office Use Only

1. Applicant: _____ Contractor Owner
First MI Last

2. Facility/School: _____ School: # _____
 Address: _____ City: _____
 Legal Description: _____ Tax Folio No.: _____

3. Proposed Work: _____

4. Brief Description of Work: _____

5. Estimated Cost: _____ 6. Square Footage: _____
 Construction Type: ____ Protected: ____ Unprotected: ____ Sprinkler: ____

7. Occupancy Classification: _____ 8. Occupancy Load: _____

9. Contracting Firm: _____
 Address: _____
 Phone No.: _____ Fax No.: _____ E-mail: _____

10. License Holder: _____

Address: _____

Phone No.: _____ Fax No.: _____ E-mail: _____

Qualifier: _____ License No.: _____ Exp. Date: _____ Occ. License: _____

Please submit a copy

WC Insurance: _____ General Liability Insurance: _____

Please submit a copy

(**Certificate Holder** shall be School Board of Brevard County, 2700 Judge Fran Jamieson Way, Viera, FL 32940-6699 and **Description of Operations/Locations** box shall list name of school where work being performed & SBBC is an additional insured)

11. Bonding Company: _____

Bonding Company Address: _____

City: _____ State: _____

12. Architect/Engineer: _____ License No.: _____ Exp. Date: _____

Address: _____

Phone No.: _____ Fax No.: _____ E-mail: _____

Insurance: _____

13. Submit the following documents with this application:

Project Implementation Information OEF 110A noting Architect/Engineer of Record (required to be submitted to this office on projects over \$200,000).

14. Submit the following documents with this application:

No permit may be issued for any building construction, erection, alteration, modification, repair, or addition unless the applicant for such permit provides to the enforcing agency which issues the permit any of the following documents which apply to the construction for which the permit is to be issued and which shall be prepared by or under the direction of an engineer registered under F.S. Chapter 471:

Electrical documents for any new building or addition which requires an aggregate service capacity of 600 amperes (240 volts) or more on a residential electrical system or 800 amperes (240 volts) or more on a commercial or industrial electrical system and which costs more than \$50,000.

Fire sprinkler documents for any new building or addition which includes a fire sprinkler system which contains 50 or more sprinkler heads. A Contractor I, Contractor II or Contractor IV, certified under F.S. 633.521, may design a fire sprinkler system of 49 or fewer heads and may design the alteration of an existing fire sprinkler system if the alteration consists of the relocation, addition or deletion of not more than 49 heads, notwithstanding the size of the existing fire sprinkler system.

Any specialized mechanical, electrical, or plumbing document for any new building or addition which includes a medical gas, oxygen, steam, vacuum, toxic air filtration, halon, or fire detection and alarm system which costs more than \$5,000.

SUBMITS FDOE OEF Form 208 - Letter of Transmittal with Construction/Phase III documents for review (required on projects over \$200,000).

Electrical/Cabling/Ballfield Lighting

- Three (3) copies sets, project drawings/specifications, signed & sealed by the Electrical/Engineer.
Showing 1. Electrical, Wiring, Services, Feeders & branch circuits, over current protection, Grounding, GFCI's 2. Equipment 3. Emergency Systems 4. Communication Systems 5. Low voltage 7. Load calculations

Fire Alarm

- Three (3) copies, sets, project drawings/specifications, signed & sealed by the Electrical/Engineer.
FBC 907.1.1 Construction documents. Construction documents for fire alarm systems shall be submitted for review and approval prior to system installation. Construction documents shall include, but not be limited to, all of the following:
1). A floor plan which indicates the use of all rooms. 2). Locations of alarm-initiating and notification appliances. 3). Alarm control and trouble signaling equipment. 4). Annunciation. 5). Power connection. 6). Battery calculations. 7). Conductor type and sizes. 8). Voltage drop calculations. 9). Manufacturers, model numbers and listing information for equipment, devices and materials. 10). Details of ceiling height and construction. 11). The interface of fire safety control functions.

Ball Field Lighting

- Three (3) copies, sets, project drawings/specifications, 1). Structural Engineered Drawing on Light Poles Wind Load. 2). Equipment Layout 3). Field Lighting Design Drawing. 4). Life cycle Cost. 5). Control System. 6). Product Submittals.

NOTICE: Building permit for the demolition or renovation of an existing structure to contain an asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of F.S. 469.003, and to notify the Department of Environmental Protection of his/her intentions to remove asbestos, when applicable, in accordance with State and Federal law.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

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.

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

Owner/Contractor Affidavit: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

14. **Signature (must be notarized)**

Signature (must be notarized)

Owner/Agent

Contractor

Printed Name of Owner (Agent)

Printed Name of Contractor

Date:

Date:

Notary as to Owner (Agent)

Notary as to Contractor

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

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

(name of person making statement)

(name of person making statement)

(Signature of Notary Public - State of Florida)

(Signature of Notary Public - State of Florida)

(Print, Type, or Stamp Commissioned Name of Notary Public)

(Print, Type, or Stamp Commissioned Name of Notary Public)

Personally Known _____ OR produced Identification _____

Personally Known _____ OR produced Identification _____

Type of Identification Produced

Type of Identification Produced

SUBCONTRACTOR INFORMATION

Identification of minimum premium policy. Except as otherwise provided in F.S. Chapter 440, Workers' Compensation, every employer shall, as a condition to receiving a building permit, show proof that it has secured compensation for its employees as provided in F.S. 440.10 and 440.38.

SUBCONTRACTOR LISTING**OTHER CONTRACTOR**

Name: _____			
Address: _____			
Phone No.: _____		Fax No.: _____	E-mail: _____
Qualifier: _____	License No.: _____	Exp. Date: _____	Occ. License: _____
Please submit a copy		Please submit a copy	
WC Insurance: _____		General Liability Insurance: _____	
Please submit a copy		Please submit a copy	
Signature: _____			Date: _____

OTHER CONTRACTOR

Name: _____			
Address: _____			
Phone No.: _____		Fax No.: _____	E-mail: _____
Qualifier: _____	License No.: _____	Exp. Date: _____	Occ. License: _____
Please submit a copy		Please submit a copy	
WC Insurance: _____		General Liability Insurance: _____	
Please submit a copy		Please submit a copy	
Signature: _____			Date: _____

OTHER CONTRACTOR

Name: _____			
Address: _____			
Phone No.: _____		Fax No.: _____	E-mail: _____
Qualifier: _____	License No.: _____	Exp. Date: _____	Occ. License: _____
Please submit a copy		Please submit a copy	
WC Insurance: _____		General Liability Insurance: _____	
Please submit a copy		Please submit a copy	
Signature: _____			Date: _____

**Office Use Only
ROUTING & RESULTS**

Date Submitted: _____ By: _____ Comments: _____

Date Reviewed: _____ By: _____ Comments: _____

Date Resubmitted: _____

Date Received Contractor Licenses: _____ Comments: _____

Comments: _____

Plan Review Tracking Permit No.: _____

Reviewed by:	Date Reviewed:	Date Forwarded:	Initials:	Reviewer's Comments:	Date Final Review:
Building Dept. Office					
Permit Technician					
Fire Inspector					
Plans Examiner					

Approved Approved as Noted: _____

By: _____ Date: _____
Plan Examiner

Approved Approved as Noted: _____

By: _____ Date: _____
Fire Inspector

Approved Approved as Noted: _____

By: _____ Date: _____
Building Official

FIRE REVIEW

Occupancy Type	Mixed Occupancy	Construction Type	Area Modification
Group _____ # Units _____ No. of Stories _____ Height _____ Area _____	_____ Hours Separation Required _____ Principle Group Type _____ Accessory Group Type	Type _____ <input type="checkbox"/> Protected <input type="checkbox"/> Unprotected <input type="checkbox"/> Sprinkler System <input type="checkbox"/> Central Fire Alarm <input type="checkbox"/> Monitored Fire Alarm	_____ _____ _____ _____ _____ _____ _____ _____ _____ _____ NO

2/11/10