



Town of Ponce Inlet
 Planning & Development Dept.
 Building Department Office
 4300 S. Atlantic Avenue
 Ponce Inlet, FL 32127
 386-236-2182 (voice)
 386-322-6717 (fax)

**DEVELOPMENT/CONSTRUCTION
 ROOF PERMIT APPLICATION**
 For More than one Trade Pursuant to Chapter 18,
 Article I through XII Code of Ordinances

DATE SUBMITTED: _____ FEE PAID: ____
 PERMIT # _____
 FAST-TRACK? Yes _____ No _____
 FLOOD ZONE: _____ ZONING CLASS: _____

Please Note: Failure to fully complete all applicable items will result in the application being deemed incomplete and no further action will be taken.

NOTE: Permits requiring approval from state or federal agencies will be issued conditioned on those permits being obtained prior to commencement of any work.

SECTION 1: PROPERTY INFORMATION					
Property Address					
Tax Parcel Number		Subdivision			
SECTION 2: PROPERTY OWNER INFORMATION					
Name:		Email			
Phone:		Fax			
Address:					
City:		State		Zip:	
SECTION 3: CONTRACTOR INFORMATION					
License Number:		Email			
Company Name:					
Licensee Name:		Phone			
Address:		Fax			
City:		State		Zip:	
SECTION 4: COMPLETE DETAILED WORK DESCRIPTION					
Complete and Detailed Description of Work (including dimensions, square footage, length, height, etc):					
<i>NOTE: It is entirely the responsibility of the Town and/or Contractor to check with the HOA/COA to confirm that the proposed work is in accordance to its By-Laws and not contrary to the Covenants and Restrictions of the Association.</i>					
Total Contract Cost: \$					
SECTION 5: FLOOD ZONE					
Existing Finished floor elevation:			Proposed Finished Floor elevation:		
SECTION 6: COMPLIANCE WITH TOWN'S CODES, LUDC, & COMPREHENSIVE PLAN - PLANNING & ZONING					
When required: Planning & Zoning must review and approve this application prior to issuance of a Construction permit.					
Planning & Zoning review and approval required: Yes [] No []					
Approved: [] Approved with Conditions: [] Denied: []					
Planning & Zoning Approval: _____, Date _____					
Reviewer					

[] Lien Law Information disseminated to contractor and mailed to property owner. _____

2014 5th Edition Florida Building Code, NFPA 70 NEC 2011

Continued on reverse side. Add additional trades that will be working under this permit on page 2.

SECTION 7: COMPLIANCE WITH FLORIDA BUILDING CODE – BUILDING DIVISION	
Check all that apply for this permit	
Commercial <input type="checkbox"/> Residential <input type="checkbox"/> New <input type="checkbox"/> Addition <input type="checkbox"/> Alteration <input type="checkbox"/> Repair <input type="checkbox"/> Demolition <input type="checkbox"/>	
Building <input type="checkbox"/> Electrical <input type="checkbox"/> Gas <input type="checkbox"/> Mechanical <input type="checkbox"/> Plumbing <input type="checkbox"/> Roofing <input type="checkbox"/> Dock <input type="checkbox"/> Pavers <input type="checkbox"/>	
Boathouse <input type="checkbox"/> Boat Slip <input type="checkbox"/> Pier <input type="checkbox"/> Mooring Poles <input type="checkbox"/> Driveway <input type="checkbox"/> Shed <input type="checkbox"/> Other <input type="checkbox"/>	
SECTION 7: ELECTRICAL	SECTION 8: PLUMBING
Company:	Company:
License Number	License Number:
Phone:	Phone:
Existing service AMP size:	Number of fixtures replaced?
New service AMP size:	Number of new fixtures?
Remodel: Number of circuits added	Check one: City Sewer <input type="checkbox"/> Septic System <input type="checkbox"/>
Remodel: Number of fixtures added	
Total Cost for this work: \$	Total Cost for this work: \$
SECTION 9: MECHANICAL	SECTION 10: ROOFING
Company:	Company:
License Number	License Number
Phone:	Phone:
Check one: New <input type="checkbox"/> Replacement <input type="checkbox"/>	Type of material:
Total cost for this work: \$	Total cost of this work: \$
SECTION 11: GAS	SECTION 12: ADDITIONAL TRADE
Company:	Company:
License Number	License Number
Phone:	Phone:
Check one: New <input type="checkbox"/> Replacement <input type="checkbox"/>	Type of Work?

Application is hereby made to obtain a Development/Construction Permit from the Planning & Development Department of the Town of Ponce Inlet, Florida to perform the type of work indicated herein. I certify that no work or installation has commenced **PRIOR** to the issuance of the requested Permit and, if so, then I will pay **additional fees per the Town regulations**. I further certify that all work will be performed to meet all applicable laws, rules and codes regulating construction and development in this jurisdiction. I understand that a separate Permit must be secured before any work for building, electrical, mechanical, plumbing, excavation & grading, sign installation, soil erosion control, tree removal, wells, pools, accessory buildings, seawalls & docks, or any other land disturbance activities. **Owner's Affidavit: I certify that all the foregoing information is accurate and all work will be done in compliance with all of the applicable laws, rules and codes regulating zoning and construction in Ponce Inlet, Florida.**

WARNING TO OWNER: Your failure to record a Notice of Commencement (NOC) may result in your being required to pay DOUBLE fees for improvements to your property. If you intend to obtain financing, please consult your lender or attorney before recording your NOC.

STATE OF FLORIDA

COUNTY OF VOLUSIA

TOWN OF PONCE INLET

Signature of Owner (as contractor)

Signature of Contractor

Subscribed and sworn to (or affirmed) before me on _____, 20__
by _____. He / She is personally known to me or
has presented _____ as identification.

SEAL / STAMP
Notary Signature:

Application Approved By: _____, Building Official Date: ___/___/___

Approved by: _____, Fire Marshal Date: ___/___/___

Additional Conditions Attached

TOWN OF PONCE INLET
BUILDING DEPARTMENT
PHONE 386-236-2182 / FAX 322-6717

NOTICE TO CONTRACTOR
CONDITIONAL RELEASE OF PERMIT

The permit has been released with the following restrictions and conditions. The contractor is expected to abide by such conditions and restrictions as stated. Failure to comply may be just cause to revoke the permit or issuance of a stop work order.

JOB ADDRESS: _____ PERMIT NO: _____

TYPE OF WORK: Re-roof _____

CONTRACTOR: _____

DATE: _____

NOTE: The items marked below will apply to this project.

Summary of Mitigation Requirements:

When a Roof is Replaced

1. Everywhere in the state –
Roof deck attachments and fasteners must be strengthened or corrected and a secondary water barrier must be installed - **regardless of house value.**
2. In wind borne debris region only –
Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost - **when the house value is \$300,000 or more.**

When ANY Building Permit is Applied for On or After July 1, 2008

1. In wind borne debris region only -
Opening protections complying with the building code must be installed – **when the house value is \$750,000 or more and \$50,000 or more work is being done.**

The law does not require:

Gable end bracing retrofits.

The Legislature directed the Commission to develop prescriptive techniques that building departments must allow when the retrofit is done voluntarily but it did not make retrofitting of gable ends mandatory. Note: Other techniques can also be allowed but not required, e.g. prescriptive criteria for new buildings and engineered techniques.

NOTE: In addition to inspections that are required for mitigation projects. ALL roofing projects will require a roof deck/nailing, roof dry-in/flashing and a final roof inspection. As needed, insulation and in-progress inspections will be required. Inspections requested must be scheduled a minimum of 24 hours in advance.

- Affidavits will **ONLY** be accepted for approved emergency situations. When the contractor is authorized to use affidavits, a signed and notarized affidavit along with photos **MUST** be provided prior to the next inspection.

As the contractor of record, I have read and understand the conditions / restrictions noted above, and agree to abide to such conditions and or restrictions.

(Print Name)

(Date)

(Signature)

201.1 Roof sheathing fastening for site-built single family residential structures. For site-built single family residential structures the fasteners and spacing required in Table 201.1 are deemed to comply with the requirements of Section 507.2.2 511-5, of the 2014 5th Edition Florida Building Code, Existing Building.

Board roof decking secured with at least two 8d nails into roof framing members shall be deemed to be sufficiently connected. Board roof decking secured with smaller fasteners than 8d nails or with fewer than two 8d nails per board shall be deemed sufficiently connected if two 8d clipped head, round head, or ring shank nails are in place on each framing member.

Supplemental fasteners as required by Table 201.1 shall be 8d ring shank nails with round heads and the following minimum dimensions:

1. 0.113 inch nominal shank diameter
2. Ring diameter of 0.012 over shank diameter
3. 16 to 20 rings per inch
4. 0.280 inch full round head diameter
5. 2-1/4 inch nail length

**Table 201.1
Supplement Fasteners at Panel Edges and Intermediate Framing**

Existing fasteners	Existing spacing	Wind speed 110 mph or less supplemental fastening shall be no greater than	Wind speed greater than 110 mph supplemental fastening shall be no greater than
Staples or 6d	Any	6" o.c. ^b	6" o.c. ^b
8d clipped head, round head, or ring shank	6" o.c. or less	None necessary	None necessary
8d clipped head or round head	Greater than 6" o.c.	6" o.c. ^a	6" o.c. ^b
8d round head ring shank	Greater than 6" o.c.	6" o.c. ^a	6" o.c. ^a

- a. Maximum spacing determined based on existing fasteners and supplemental fasteners.
- b. Maximum spacing determined based on supplemental fasteners only.

SLOPED ROOF INFORMATION

1 & 2 Family Residential

All re-roofing projects must comply with the following code and sections
5th Edition Florida Building Code: Existing Building 140 mph Wind Zone

Deck Type _____

Underlayment _____ Weight _____ Layers _____
ASTM D 226 Type I or Type II

Insulation _____

Roof Covering _____
Manufacturer & Product info
Asphalt shingles shall comply with

140 MPH	ASTM D 3161 Class F or ASTM D 7158 Class G or TAS 107
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Number of Squares _____

Fasteners Attachment shall conform to
ASTM F 1667 and ASTM A 641

Roof Slope  12

Drip Edge _____

Mean height _____

Contractor: _____

Owner: _____

Job Site: _____

Re-roof permits require the following minimum inspections:

Roof Mitigation (Roof Deck Nailing)

Re-Roof Dry-in (Secondary Water Barrier, Flashing, & Drip edge)

Re-Roof Final (Final installation)

ATTACHMENT shall conform to FBCR R905.2.6

FLASHING to comply with FBCR R905.2.8

DRIP EDGE to comply with FBCR R905.2.8.6

VALLEYS to comply with FBCR R905.2.8.2

**ALL ROOFING TO COMPLY WITH 2014 5th EDITION FLORIDA BUILDING CODE
RESIDENTIAL**