



TENT AND CANOPY PACKAGE

Required inspections:

- 801 Fire Marshall final
- 999 Final Inspection - for electrical and mechanical if applicable
- 999 Final Inspection - Structural

Application reviewed by

- Zoning
- Fire
- Structural

Application Checklist

- Owner/builder affidavit - (**if permit is pulled by property owner or lessee**)
- Permit Application for *each* discipline (Building, Electrical, Plumbing, etc.)
- Job contract - completed and signed by all parties
- Certificate of Flame Resistance (**obtained from Tent Company**)
- Sample of Tent / Canopy material (**3 samples approximately 4" x 4" size**)
- Full scalable survey or a site plan of the area - (**3 copies**).
- Proof of Temporary Use Permit (**TUP**) approval from Planning and Zoning

***The application must indicate the total number and square footage of tents or canopies, and the contract value (labor and material).**

***The job description must detail the complete scope of work.**

*** It is the property owner's responsibility to provide sanitary facilities.**

*** Each survey or site plan must show the proposed location and dimensions of the tent or canopy.**

*** If a survey is used, it should not be reduced, faxed, enlarged, or cut.**

ATTENTION PROPERTY OWNER / LESSEE

- **Proof of ownership or tenancy (recorded warranty deed, property tax statement, or lease) is required for owner builder permits.**
- **If the permit is pulled by a contractor, the contractor must sign the application.**
- **If the permit is being pulled by the property owner or tenant, the application and owner builder affidavit must be signed by the owner or the person who signed the lease. These can be notarized prior to being submitted to the Building Division.**
- **If a contractor is hired, the contractor must pull the permit.**



Community Development - Building Division
 2200 Civic Center Place
 Miramar, Florida 33025
 Tel: (954) 602-3200 Fax: (954) 602-3635
<http://www.ci.miramar.fl.us>

OWNER-BUILDER AFFIDAVIT

You have made application for a Building Permit as an Owner-Builder. State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. Please be advised of the following provisions and requirements.

RESPONSIBILITY: The exemption for which you have applied allows you, as the owner of your property, to act as your own contractor even though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy; it may not be built it for sale or lease, which is a violation of this exemption. **You may not hire an unlicensed person as your contractor.** Your construction must be done according to building codes and zoning regulations. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

INSURANCE: Most regular home insurance policies do not cover any damage to persons or property resulting from work of this nature. You are advised to investigate your liability.

WITHHOLDING TAXES, ETC.: You are advised to investigate your responsibility for withholding Social Security, Federal, and State Unemployment Insurance Taxes, as well as Federal Income taxes from the wages of persons employed by you on this construction, and for making returns thereof to the proper agencies.

APPROVED PLAN: The Building Official shall retain one set of the approved plans and the other set shall be kept at the building site, open to inspection by the Building Official, at all reasonable times. The Building Official may stop work, if such plans are not available at the building site. **THE BUILDING PERMIT AND THIS NOTICE MUST BE POSTED AT THE JOB SITE.**

NOTICE OF COMMENCEMENT: If the improvements cost more than \$2,500, you must file a Notice of Commencement before beginning the project. This department can provide the form. You must record the form at the Broward County Government Center, 115 South Andrews Avenue, Fort Lauderdale, and Room 114. Failure to record a Notice of Commencement or incorrect information on the Notice of Commencement could contribute to having to pay twice for the same work or materials. It could also prevent the property from passing code inspection.

INSPECTIONS: You will be responsible as Owner-Builder to see that all inspections are called for; you are not to continue work until each inspection has been approved.

ACKNOWLEDGMENT: I hereby swear and affirm that I am the owner of the property described as:

LOT _____ BLOCK _____ SUBDIVISION _____

ADDRESS _____

I have read the foregoing instructions and am aware of my responsibilities.

 Signature Date Signed

STATE OF FLORIDA)
 COUNTY OF BROWARD)

Sworn to and subscribed before me this _____ day of _____, 20_____.

 Notary Public



2200 Civic Center Place

Miramar, Florida 33025

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www.ci.miramar.fl.us

PERMIT APPLICATION

Permit Type (Check one): STRUCTURAL, ELECTRICAL, MECHANICAL, PLUMBING, LANDSCAPING

Date _____ Tax Folio # _____ Master # _____
 Owner Name _____ Permit # _____
 Owner Address _____ City, State, Zip _____
 E-Mail _____ Phone # _____

Contractor Company Name _____
 Contractor Address _____ City, State, Zip _____
 State Certificate or Registration _____ Phone # _____
 Certificate of Competency _____ Fax # _____
 E-Mail _____
 Architect / Engineer _____ Phone # _____

Job Name _____ Gate Code _____
 Job Address _____ **Miramar, FL** Zip _____
 Subdivision _____ Lot _____ Blk _____
 Type of Work New Existing Commercial Residential Add Alt Repair
 Use/Occupancy _____ No. of Stories _____ Bed _____ Bath _____
 Job Description _____

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.

Linear / Sq. Ft. _____
 Contract Value _____
 Estimated Cost _____

Application is hereby made to obtain a permit to do 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 the City of Miramar, Florida. I understand that a separate permit must be secured for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, etc.
PERMIT APPLICANT AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with applicable laws regulating construction and zoning.

O	Permit Fee _____
F	Plan Review _____
F	Training _____
I	Radon _____
C	Constr. Fund _____
E	Brow. Surv. _____
U	7% Surcharge _____
S	Total _____
E	

Signature _____
 Contractor (Qualifier) * If Permit is by Owner, the owner must sign

Print Name _____
 State of Florida, Broward County

On this _____ day of _____ 20 _____ the person whose name is subscribed to within this instrument, personally appeared before / personally known to me, the undersigned Notary Public of the State of Florida, and he / she acknowledges that he / she executed it.

 Notary Public, State of Florida

NOTICE: In addition to the requirements of this permit, there may additional restrictions applicable to this property that may be found in the public records of this county.

This permit does not become valid until signed by the Building Official (or designated employee) of the City of Miramar and all fees are paid.

 Authorized Signature

Inspection will be made on or about the following workday after request. Plans & permit must be on job before inspection will be made. Obtain certificate of occupancy from Building Division before using completed Building.



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NOTICE OF COMMENCEMENT

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement:

this space reserved for recorder

1. Legal Description of Property: Lot _____ Block _____ Unit # _____ Bldg # _____ Lengthy legal attached
Subdivision/Condominium: _____

Street Address if available: _____

2. General Description of Improvement: _____

3.a. Owner name and address: _____

b. Interest in property: _____

c. Name/mailling address of fee simple title holder (if other than Owner): _____

4. a. Contractor name and address: _____

b. Contractor's phone number: _____

5. a. Surety name and address: _____

b. Surety's phone number: _____

c. Amount of bond: \$ _____

6. a. Lender name and address: _____

b. Lender's phone number: _____

7. a. Persons within the State of Florida designated by Owner upon whom Notices or other documents may be served as provided by Section 713.13(1)(A)7., Florida Statutes:

Name: _____

Address: _____

b. Phone Number: _____

8. a. In addition to himself or herself, the Owner designates _____ to receive a copy of the Lienor's Notice per section 713.13(1)(B), Florida Statutes:

b. Phone number of person or entity designated by owner _____

9. Expiration date of notice of commencement: _____

(the expiration date is 1 year from date of recording unless a different date is specified).

WARNING OT OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13 FLORIDA STATUTES, AND CAN RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/ Manager

By _____
Print Name _____
Title/Office _____

By _____
Print Name _____
Title/Office _____

STATE OF FLORIDA
COUNTY OF BROWARD

The forgoing instrument was acknowledged before me this _____ day of _____, _____ by _____

Individually, or as _____ for _____

personally known or produced the following type of identification: _____

Signature of Notary Public: _____

Printed name: _____

(SEAL)

VERIFICATION PURSUANT TO SECTION 92.525, FLORIDA STATUTES

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true, to the best of my knowledge and belief.

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/ Manager who signed above:

By _____

By _____