



Demolition Checklist

- Application
- Property Record Card
- Notice of Commencement if job value is over \$2,500
- Owner/Builder Affidavit (if applicable)
- Site Plan
- Commercial buildings: Asbestos certification must be submitted to the Florida Department of Environmental Protection, provide copy with permit application

*Prior to demolishing the building, all utilities must be disconnected, and septic tank (if applicable) must be pumped, crushed, and backfilled with clean and compacted fill. Please provide certificate from licensed Septic Contractor.



CITY OF GROVELAND

BUILDING PERMIT APPLICATION

Date Received: _____

Permit # _____

PROPERTY INFORMATION

Address # _____ Street _____ City _____ Zip _____

Subdivision _____ Phase _____ Lot _____

Alternate Key # _____ Sewer Septic

PROJECT INFORMATION: Single Family Residence Multi-family Commercial Industrial

PURPOSE: Demolition New Addition Alteration Other

Job Value \$ _____ Project cost of \$2,500 or more requires recorded Notice of Commencement

Scope of Work _____

OWNER'S INFORMATION

Name(s) _____

Mailing Address _____

Phone # _____ Email _____

Fee Simple Titleholder Name (if different than owner) _____

Mailing Address _____

Phone # _____ Email _____

CONTRACTOR INFORMATION

Company Name _____ License # _____

Qualified Name: Last _____ First: _____

Mailing Address _____

Phone # _____ Email _____

Bonding Company _____

Address _____

Architect _____ Engineer _____

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR 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 RECORDING YOUR NOTICE OF COMMENCEMENT.

SUBCONTRACTOR'S

Electric _____ Qualifier _____ License # _____

Plumbing _____ Qualifier _____ License # _____

Mechanical _____ Qualifier _____ License # _____

Gas _____ Qualifier _____ License # _____

Roofer _____ Qualifier _____ License # _____

Irrigation _____ Qualifier _____ License # _____

Fire _____ Qualifier _____ License # _____

I DO HEREBY SWEAR THAT THE INFORMATION CONTAINED HEREIN AND THE ATTACHMENTS HERTO ARE TRUE AND ACCURATE TO THE BEST OF MY KNOWLEDGE AND THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT.

CONTRACTOR OR OWNER/BUILDER SIGNATURE

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me by means of this _____ day of _____, 20____,
by _____.

(Seal)

Notary Signature

Personally Known:

Or Produced Identification:

Type of Identification Produced: _____

1. All new construction SFR or commercial building permits must be in digital format.
2. Submit digital permit applications via the etrakit portal <https://gvld-trk.aspgov.com/etrakit/> or by email to PERMITTING@GROVELAND-FL.GOV
3. Incomplete permit applications will not be processed until complete
4. Schedule inspections via the etrakit portal <https://gvld-trk.aspgov.com/etrakit/>

City of Groveland Building Division
6825 SR 50, Groveland, FL 34736
Phone (352)429-2141 Opt 2
Email: permitting@groveland-fl.gov

Revised 5-23

OWNER BUILDER DISCLOSURE STATEMENT PER FL STATUTE 489.103

1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.
2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.
3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.
4. I understand that I may build or improve a one-family or two family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.
5. I understand that, as owner-builder, I must provide direct, onsite supervision of the construction.
6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.
7. I understand that it is a frequent practice of unlicensed persons to have a property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries to workers on my property.
8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.
9. I agree that, as the party legally and finically responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes and zoning regulations.
10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at **850-487-1395** or www.myfloridalicense.com/construction-industry/ for more information about licensed contractors.

11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following **address:**

_____.

12. I agree to notify **City of Groveland Building Department** immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and the Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

Signature: _____ Date: _____

STATE OF _____ COUNTY OF _____

Sworn to and subscribed and acknowledged before me this _____ day of _____ 20_____

by _____, who is personally known to me or who has produced _____ as identification and who did ___ or did not ___ take an oath.

_____ (signature of NOTARY PUBLIC)

_____ (Printed name of NOTARY PUBLIC)

State of _____ at Large My commission expires: _____



Florida Department of
Environmental Protection
Division of Air Resource Management

NOTICE OF DEMOLITION OR ASBESTOS RENOVATION

TYPE OF NOTICE (CHECK ONE ONLY): ORIGINAL REVISED CANCELLATION COURTESY

TYPE OF PROJECT (CHECK ONE ONLY): DEMOLITION RENOVATION

IF DEMOLITION, IS IT AN ORDERED DEMOLITION? YES NO
IF RENOVATION:
IS IT AN EMERGENCY RENOVATION OPERATION? YES NO
IS IT A PLANNED RENOVATION OPERATION? YES NO

I. Facility Name _____
Address _____
City _____ State _____ Zip _____ County _____
Site _____ Consultant Inspecting Site _____
Building Size _____ (Square Feet) # of Floors _____ Building Age in Years _____
Prior Use: School/College/University Residence Small Business Other _____
Present Use: School/College/University Residence Small Business Other _____

II. Facility Owner _____ Phone (____) _____ Email Address _____
Address _____

City _____ State _____ Zip _____
III. Contractor's Name _____ Phone (____) _____ Email Address _____
Address _____
City _____ State _____ Zip _____

Is the contractor exempt from licensure under section 469.002(4), F.S.? YES NO

IV. Scheduled Dates: (Notice must be postmarked 10 working days before the project start date)
Asbestos Removal (mm/dd/yy) Start: _____ Finish: _____ Demo/Renovation (mm/dd/yy) Start: _____ Finish: _____

V. Description of planned demolition or renovation work to be performed and methods to be employed, including demolition or renovation techniques to be used and description of affected facility components. _____

Procedures to be Used (Check All That Apply):

<input type="checkbox"/> Strip and Removal	<input type="checkbox"/> Glove Bag	<input type="checkbox"/> Bulldozer	<input type="checkbox"/> Wrecking Ball
<input type="checkbox"/> Wet Method	<input type="checkbox"/> Dry Method*	<input type="checkbox"/> Explode	<input type="checkbox"/> Burn Down
OTHER _____			

*MUST OBTAIN PRIOR DEP APPROVAL BEFORE USING A DRY METHOD

VI. Procedures for Unexpected RACM: _____

VII. Asbestos Waste Transporter: Name _____ Phone (____) _____
Address _____
City _____ State _____ Zip _____

VIII. Waste Disposal Site: Name _____ Class _____
Address _____
City _____ State _____ Zip _____

IX. RACM or ACM: Procedure, including analytical methods, employed to detect the presence of RACM and Category I and II nonfriable ACM. _____

Amount of RACM or ACM*

RACM	ACM
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

X. Fee Invoice Will Be Sent to Address in Block Below: (Print or Type)

Name:
Address:
City:
State/Zip:

*Identify and describe surfacing material and other materials as applicable: _____

I certify that the above information is correct and that an individual trained in the provisions of this regulation (40 CFR Part 61, Subpart M) will be on-site during the demolition or renovation and evidence that the required training has been accomplished by this person will be available for inspection during normal business hours.

(Print Name of Owner/Operator) _____ (Date)

(Signature of Owner/Operator) _____ (Date)

Instructions

The state asbestos removal program requirements of s. 376.60, F.S., and the renovation or demolition notice requirements of the National Emission Standards for Hazardous Air Pollutants (NESHAP), 40 CFR Part 61, Subpart M, as embodied in Rule 62-257, F.A.C., are included on this form.

Check to indicate whether this notice is an original, a revision, a cancellation, or a courtesy notice (i.e., not required by law). If the notice is a revision, please indicate which entries have been changed or added.

Check to indicate whether the project is a demolition or a renovation.

If you checked demolition, was it **ordered** by the State or a local government agency? If so, in addition to the information required on the form, the owner/operator must provide the name of the agency ordering the demolition, the title of the person acting on behalf of the agency, the authority for the agency to order the demolition, the date of the order, and the date ordered to begin. A copy of the order must also be attached to the notification.

If you checked renovation, is it an **emergency renovation operation**? If so, in addition to the information required on the form, the owner/operator must provide the date and hour the emergency occurred, the description of the sudden, unexpected event, and an explanation of how the event caused unsafe conditions or would cause equipment damage or an unreasonable financial burden. If you checked renovation and it is a **planned renovation operation**, please note that the notice is effective for a period not to exceed a calendar year of January 1 through December 31.

- I. Complete the facility information. This section describes the facility where the renovation or demolition is scheduled. This address will be used by the Department inspector to locate the project site. Provide the name of the consultant or firm that conducted the asbestos site survey/inspection. For "prior use" check the appropriate box to indicate whether the prior use of the facility is that of a school, college, or university; residence, as "residential dwelling" is defined in Rule 62-257.200, F.A.C.; small business, as defined in s. 288.703(1), F.S.; or other. If "other" is checked, identify the use. Please follow the same instructions for "present use."
- II. Complete the facility owner information.
- III. Complete the contractor information.
- IV. List separately the scheduled start and finish dates (month/day/year) for both the asbestos removal portion of the project and the renovation or demolition portion of the project.
- V. Describe and check the methods and procedures to be used for a planned demolition or renovation. Include a description of the affected facility components. (Note: The NESHAP for asbestos, which is adopted and incorporated by reference in Rule 62-204.800, F.A.C., requires obtaining Department approval prior to using a dry removal method in accordance with 40 CFR section 61.145(3)(c)(i).)
- VI. Describe the procedures to be used in the event unexpected RACM is found or previously nonfriable asbestos material becomes crumbled, pulverized, or reduced to powder after start of the project.
- VII. Complete the asbestos waste transporter information.
- VIII. Complete the waste disposal site information.
- IX. List the amount of RACM or ACM of each type of asbestos to be removed. (Note: A volume measurement of RACM off facility components is **only** permissible if the length or area could not be measured previously.) Identify and describe the listed surfacing material and other listed materials as applicable.
- X. Provide the address where the Department is to send the invoice for any fee due. Do not send a fee with the notification. The fee will be calculated by the Department pursuant to Rule 62-257.400, F.A.C.

Sign the form and mail the original to the district or local air program having jurisdiction in the county where the project is scheduled (**DO NOT FAX**). The correct address can be obtained by contacting the State Asbestos Coordinator at: Department of Environmental Protection, Division of Air Resources Management, 2600 Blair Stone Road, Tallahassee, FL 32399-2400.