



PERMIT SUBMITTAL REQUIREMENTS

CITY OF WESTON
BUILDING DEPARTMENT
2700 S. COMMERCE PKWY., SUITE 103
WESTON, FLORIDA 33331
954-385-0500 Office
954-888-9018 FAX

Listed below are the basic permit submittal requirements. Additional information may be required based on project type.

- Permit applications signed & notarized for each discipline of work (i.e. building, electrical, plumbing, and mechanical).
- Copies of Insurance Certificates, liability and workers compensation, and copies of licensing documentation, Contractor, Certificate of Competency, Occupational License.
- Copy of recorded Notice of Commencement, required for projects valued at \$2,500 or higher. For A/C permits the limit is raised to \$7,500. (This must be submitted prior to the permit being issued.)
- Two (2) sets of plans signed & sealed by a professional engineer/architect, if applicable.
- Two (2) Original Surveys (Raised Seal).
- Two (2) copies of survey showing location of proposed construction.
- Department of Urban Planning & Redevelopment Procedure Form and stamp on plans when applicable (i.e., all new residential construction, additions for bedrooms and baths on sewer, and additions to non-residential buildings, all commercial and industrial alterations and demolitions.
- Product approvals for sheds, doors, all glass, roofs, and all types of shutters.
- Energy calculations including heating and cooling load calculations.
- Wind load calculations (signed & sealed) are needed for shutters, windows, doors, skylights, & garage doors.
- Signed & sealed pressure calculations are required for doors and windows.
- City of Weston Permit Affidavit - required for residential projects, and must be signed and notarized by property owner.
- Permit Fees are collected when the permit package is submitted. Payment in the form of Company or Personal checks, MasterCard, Visa or American Express are accepted. Payments are processed electronically. Please see check form.

The City's building and permitting system allows residents to monitor the overall permitting process with a few simple clicks of the mouse. For contractors the system provides a centralized one stop source for applying and completing residential and commercial work in the City of Weston.

Please call if you have any questions regarding either permit requirements or the process.



PERMIT AFFIDAVIT

FOR ACKNOWLEDGEMENT OF COMPLIANCE WITH RESTRICTIVE DEEDS AND COVENANTS

STATE OF FLORIDA)
COUNTY OF BROWARD)

On this day personally appeared before me, the undersigned officer duly authorized to administer oaths and take acknowledgments, _____, who being by me first duly sworn, deposes and says:
(Homeowner)

By my signature below, I acknowledge that the legal description for the property for which I am applying for a permit is _____
(Lot/Block)

a/k/a _____
(Street Address & Subdivision)

1. That I am the legal owner of the property.
2. I acknowledge that approval may be required from the following:

(Homeowners Association)

which entities or associations regulate or otherwise govern the community, neighborhood, or development in which my property is located.

3. I further acknowledge that I am responsible for any additional costs that may be assessed by the City of Weston and/or the entity regulating or governing the subject property as a result of my not having obtained the necessary approvals from any entity or association that may regulate or otherwise govern the community, neighborhood, or development in which my property is located.

FURTHER AFFIANT SAYETH NAUGHT

Witness name-signature

Witness name printed

Witness name-signature

Witness name printed

AFFIANT
(Homeowner)

STATE OF FLORIDA)
COUNTY OF BROWARD)

Affirmed and signed before me, on _____ the foregoing document was acknowledged before me by Affiant _____, who personally appeared before me at the time of notarization, who signed and acknowledged signing the foregoing document, who did take an oath, and:

[] who is personally known to me or
[] who produced the following identification: _____

Notary Public
(Printed or typed name)

Commission Expiration date:
(Seal)



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2700 S. COMMERCE PKWY., SUITE 103
WESTON, FLORIDA 33331
954-385-0500 Office 954-888-9018 FAX

PERMIT NO. _____

AMT DUE _____

BUILDING PERMIT APPLICATION
2007 Florida Building Code In Effect

PERMIT TYPE:(Select One)	BUILDING	MECHANICAL	ELECTRICAL	PLUMBING	ROOFING	
JOB ADDRESS:						
OWNER NAME:						
OWNER ADDRESS:						
CITY:						
PHONE:		FAX:		EMAIL:		
FEE SIMPLE TITLE HOLDER'S NAME:						
FEE SIMPLE TITLE HOLDER'S ADDRESS:						
CONTRACTING FIRM:						
MAIL ADDRESS:						
CITY STATE ZIP:						
PHONE:		FAX:		EMAIL:		
CERT. COMPENTENCY:			STATE REGISTRATION:			
LOT:	BLOCK:	PRESENT USE:		PROPOSED USE:		
FOLIO NUMBER:			SUBDIVISION:			
NO. OF STORES:		OFFICES:	FAMILIES:	BEDROOMS:	BATHS:	
TYPE OF WORK:		ADD	NEW	ALTER	REPAIR	
JOB COST: (Total all Trades):		SQ. FT.: (Total)		L. F.:		
DESCRIBE WORK:						
ARCHITECT/ENGINEER NAME:						
ARCHITECT/ENGINEER ADDRESS:						
PHONE:		FAX:		EMAIL:		
MORTGAGE LENDER NAME:						
MORTGAGE LENDER ADDRESS:						

Application is hereby made to obtain a permit to do the work and installations as indicated, I certify that no work or installation has been effected prior to the issuance of said permit and that all work will be performed to meet the standards of all laws regulating construction in BROWARD COUNTY and the CITY OF WESTON whether specified in this Application and accompanying plans or not. I understand that a separate permit must be secured for ELECTRICAL, PLUMBING, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, etc. The information provided herein by the Applicant is not evaluated for issuance of a Certificate of Use. The City reserves the right to deny or condition any proposed use of the property pursuant to provisions of the City's Code of Ordinances.

Initial this Page: _____

(Please Complete Second Page)

OWNER'S AFFIDAVIT: I certify that all information provided is accurate, and that all work will be performed in compliance with all applicable laws regulating construction and zoning. No work has been commenced prior to the issuance of the permit sought by this application, and all work will be done as indicated in the Application and all accompanying document and plans.

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of the county, and there may be additional permits required from other governmental entities such as water management districts, state or federal agencies.

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 YOUR LENDER OR ATTORNEY BEFORE RECORDING THE NOTICE OF COMMENCEMENT.

CONTRACTOR
(Print Name):

OWNER
(Print Name):

SIGNATURE:

SIGNATURE:

STATE OF FLORIDA
COUNTY OF _____

STATE OF FLORIDA
COUNTY OF _____

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

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

NOTARY: _____

NOTARY: _____

SEAL:

SEAL:

Personally known _____
OR Produced Identification _____
Type of Identification Produced _____

Personally known _____
OR Produced Identification _____
Type of Identification Produced _____

- Fax inspection requests to 954-888-9018.
- Allow one (1) day's notice for inspections. Inspection requests received after 3:00 p.m. will be scheduled for the following day.
- Plans and permit card must be on job before inspections will be made.
- At least one (1) approved inspection every 90 days is required or the permit expires.
- Obtain Certificate of Occupancy from Department before using completed building.