BUILDING CODE SERVICES PERMIT
SUBMITTAL REQUIREMENTS

(2023 Florida Building Code in Effect)

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).
- Verify that the Job Value includes the cost of work for all sub-permit amounts. A copy of the contract describing the job may be required. (Contract to include all labor and materials)
- Contractors must be registered with the City of Weston with current Insurance Certificates (liability and workers compensation) and Licensing documentation (Contractor, Certificate of Competency, Occupational License.)
- Copy of recorded Notice of Commencement, required for projects valued at $5,000 or higher. For A/C permits, the limit is raised to $15,000. (**This must be submitted prior to the first inspection**.)
- Plans digitally signed & sealed by a professional engineer/architect, if applicable.
- Original Survey (digitally signed and sealed) for all **NEW** residential and commercial construction.
- Current survey showing location of proposed construction / improvements. (Fences, driveways, pools, decks etc.)
- Lot Calculation Sheet that identifies **ALL** impervious areas (existing and proposed). (Pools, Decks, Driveways, Pavers, slabs, sheds and screen rooms.)
- A copy of the Broward County Development and Environmental Review approval certificate showing DER Review #, when applicable. This is required for all new building construction, additions or alterations to non-residential buildings, as well as demolitions, new or replacement emergency generators, commercial or multifamily pools and below ground storage tanks, temporary buildings and construction trailers.
  For a complete list and e-permit instructions, please visit www.broward.org/ePermits.
- 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.
- Permit Fees are due and collected when the permit application package is submitted. Payment in the form of Company or Personal checks, MasterCard, Visa or American Express are accepted. **Cash will NOT be accepted.**

  The City's building and permitting system allows residents to monitor the overall permitting process with a few simple clicks of the mouse. Visit the website at **www.westonfl.org/epermits**

- To schedule inspections visit the website at **https://www.westonfl.org/epermits**
- Allow one (1) day's notice for inspections. Inspection requests received after 3:00 pm. will be scheduled for the following day.
- Plans and permit card must be on job before inspections will be made.
- Obtain Certificate of Occupancy from Department before using completed building.

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

17250 Royal Palm Boulevard ■ Weston, FL. 33326 ■ Phone: 954-385-0500 ■ www.westonfl.org

BUILDING CODE SERVICES

OWNER-BUILDER AFFIDAVIT

Owner Name: _____

Subdivision: _____ Lot/Block: _____

Property Address: _____

☐ I am applying for a Building Permit pursuant to the Owner Builder exemption set forth in Florida Statute 489.103. Florida law requires that I attest to the following statements. **BY SIGNING THIS STATEMENT, I ATTEST THAT:** (Initial to the left of each statement)

☐ 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 the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

☐ 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.

☐ 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 name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on all permit and contracts.

☐ 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 in 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates this exemption.

☐ I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction.

☐ I understand that I may not hire an unlicensed individual 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 ordinance.

☐ I understand that it is frequent practices of unlicensed persons to have the 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. I am willfully acting as an owner- builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

☐ 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.

17250 Royal Palm Boulevard ■ Weston, FL. 33326 ■ Phone: 954-385-0500 ■ www.westonfl.org

DM#61840, 61841 v1 Form–owner-builder affidavit Rev 06/2026

☐ I agree that, as the party legally and financially 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 regulation.

☐ I am of aware of construction practices and I have access to the Florida Building Code.

☐ 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 1-850-487-1395 or at http://www.myfloridalicense.com/dbpr/pro/cilb/documents/cilb_board.pdf for more information about licensed contractors.

☐ 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 address listed below.

☐ I agree to notify the building department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure or in the permit application package.

☐ 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, the Department of Business and Professional Regulation and the building department 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 property licensed and the status of the contractor's workers' compensation coverage.

Check types of permits you are seeking:

□ Building

□ Roofing / Reroofing

□ Electrical

□ Plumbing

□ Air Conditioning

□ Other _____

I,_____ , do hereby state that I am qualified and capable of performing the requested construction involved with the permit application filed and agree to the conditions specified above.

Signature of Owner-Builder

_____

STATE OF FLORIDA – COUNTY OF BROWARD

Sworn to (or affirmed) and subscribed before me
This _____ day of _____, 20_____
by_____
(Type / Print owners name)

_____

NOTARY'S Signature as to Owner's signature

Notary Name (Type, Print,_____
Stamp Notary's Name)

Personally known ___ or Produced Identification ___
Type of Identification produced

_____

AFTER RECORDING – RETURN TO:

PERMIT NUMBER:

NOTICE OF COMMENCEMENT

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

1. **DESCRIPTION OF PROPERTY** (Legal description & street address, if available) **TAX FOLIO NO.:** _____

SUBDIVISION _____**BLOCK**_____**TRACT**_____**LOT**_____**BLDG**_____**UNIT**_____

_____

2. **GENERAL DESCRIPTION OF IMPROVEMENT:**

_____

3. **OWNER INFORMATION**: a. Name_____

b. Address_____ c. Interest in property_____

d. Name and address of fee simple titleholder (if other than Owner) _____

4. **CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:**

_____

_____

5. **SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:**

_____

6. **LENDER'S NAME, ADDRESS AND PHONE NUMBER:**

_____

7. 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 AND PHONE NUMBER:

_____

8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes:
NAME, ADDRESS AND PHONE NUMBER:

_____

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified):_____ _____, 20____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN 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 COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

_____ _____

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

Print Name and Provide Signatory's Title/Office

State of Florida
County of Broward

The foregoing instrument was acknowledged before me this _____ day of _____, 20_____

By _____, as _____
(name of person) (type of authority,…e.g. officer, trustee, attorney in fact)

For _____.
(name of party on behalf of whom instrument was executed)

_____ Personally known or _____ produced the following type of identification: _____

Notary

_____
(Signature of Notary Public)

Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

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

By _____ By _____

BUILDING CODE SERVICES
PERMIT REVISION APPLICATION

(Change of Plan submitted to an issued permit)

Revision Application is required when Plans are submitted after the Master Permit has been issued.
Fees for Revision: $111.57 Residential (per Trade) $144.74 Commercial (per Trade)

PROJECT INFORMATION

Master Permit #		Revision #:		Submittal Date:			
Is this a correction to an existing revision? ☐ No ☐ Yes, if Yes, provide the application #:				Application #:			
Job Address:							
Job Name:							
Contracting Co.:		Phone:		Email:			
Company Address:		City:		State:		Zip:	
Qualifier's Name:		Owner-Builder: ☐		License or Cert of Comp. #			

REVISON INFORMATION

This revision affects the following disciplines: Applicant to check all that apply*					
☐ Building	☐ Electrical	☐ Plumbing	☐ Mechanical	☐ Roofing	☐ Fire
☐ Zoning	☐ Engineering	☐ Other (Specify):			
Do these revisions represent a change in the scope of work and increased job cost?			☐ No ☐ Yes, if Yes, provide new cost.		
Increase in Job Cost:		New Total Job Cost:			

**Please note that a plans examiner has the authority to modify required reviews based upon examination of the plans submitted for revision*

Provide a brief description of the revised work

Applicant please read carefully:

Application is hereby made for plan revision as indicated herein. I certify that all the information is accurate. I understand that only the review disciplines indicated will review my plans. I am aware that any error in indicating the disciplines required may result in the need for further plan revisions or inspection delays.

Contractor
Print Name _____

Signature: _____

STATE OF FLOIRDA
County of _____

Sworn to (or affirmed) and subscribed before me this _____ day of _____

20_____, by _____
(Type/print Contractor's name)

Notary Signature: _____

Notary Name:_____
(Print, type or Stamp Notary's Name)

Personally Known_____ or Produced Identification_____

Type of Identification Produced _____