City of Weston - Building Code Services
17250 Royal Palm Blvd. Weston, FL 33326
954-385-0500

BUILDING PERMIT EXEMPTION REQUEST

Single-Family Residential Permit Exemption

Section A: Exemption Type — Select ONE	
☐ **Exemption 1 — Minor Work Under $7,500** *Work valued at less than $7,500 on a single-family residence, excluding electrical, mechanical, plumbing, gas, and structural work (see §553.79, Fla. Stat.). The total contract value must not be subdivided or phased to qualify for this exemption.*	☐ **Exemption 2 — Voluntary Temporary Flood Panel Installation** *Voluntary installation of temporary flood panels or barriers solely to mitigate flooding or storm surge on properties NOT located in a Special Flood Hazard Area (SFHA). All flood-panel conditions in Section D must be met.*

Section B: Property Information	
B.1. Property Address:	
B.2. Property Owner:	B.3. Parcel #:
B.4. Legal Description:	
B.5. Is property located in a Special Flood Hazard Area (SFHA)? ☐ Yes ☐ No ☐ Unknown	B.6. Flood Zone Designation (if known):

Section C: Contractor / Applicant Information	
C.1. Applicant Type: ☐ Licensed Contractor ☐ Owner Builder	
C.2. Company Name:	
C.2.1. License Number:	C.2.2. Qualifier Name:
C.2.3. Company Phone:	C.2.4. Email:
C.2.5. Company Address:	
C.3. Owner Builder Name:	
C.3.1. Owner Builder Phone:	C.3.2. Owner Builder Email:

Section D: Description of Proposed Work	
D.1. Estimated Total Project Cost $:	
D.2. Description of Work (describe all work to be performed — no phasing permitted):	
D.3. Square Footage Affected:	D.4. Location Within Structure:

Section E: Flood Panel / Barrier Conditions *(Complete only if Exemption 2 is selected — leave blank if not applicable)*		
E.1.	**Structure Type**	☐ Single-Family Dwelling ☐ Two-Family Dwelling ☐ Townhouse
E.2.	**Non-Load-Bearing & Non-Habitable** ☐ Confirmed- The wall or barrier is non-load-bearing and is not used as habitable space.	
E.3.	**Purpose — Storm Surge Mitigation Only** ☐ Confirmed-The wall or barrier is installed solely to mitigate or prevent storm surge from entering the building.	
E.4.	**Contractor Licensing** ☐ Confirmed-The wall or barrier will be installed by a contractor licensed under Part I of Chapter 489, Florida Statutes.	
E.5.	**Zoning / Drainage / Easement / Setback Compliance** ☐ Confirmed-The wall or barrier complies with all applicable local zoning, drainage, easement, and setback requirements.	
E.6.	**Property NOT in SFHA** ☐ Confirmed-The property is not located within a Special Flood Hazard Area (SFHA) as designated on the effective FEMA Flood Insurance Rate Map (FIRM).	

Section F: Required Attachments — Check All Enclosed	
☐ **Copy of Written Contract** or other documentation demonstrating the nature and scope of work to be performed (required for all exemption requests).	☐ **FIRM Panel Map / Flood Zone Documentation** confirming property is NOT located in a Special Flood Hazard Area (required for Exemption 2 only).
☐ **Contractor License Documentation** (Chapter 489, Part I) required for Exemption 2.	☐ **Site Plan or Diagram** showing proposed flood barrier location and dimensions — required for Exemption 2.

NOTE: Work covered by this exemption must constitute a single, complete project. Phasing or subdividing a project into smaller contracts to remain under the $7,500 threshold is prohibited and will void the exemption.

Section G: Legal Disclaimer — No Duty of Local Government

By submitting this Permit Exemption Request, the property owner, contractor, and their respective successors and assigns acknowledge and agree that the City of Weston, its officers, employees, agents, and representatives owe no legal duty whatsoever to the property owner, contractor, or their successors or assigns with respect to any work performed pursuant to this exemption. The City of Weston expressly disclaims any and all liability arising from, related to, or connected with exempted work, including but not limited to: structural failure, property damage, personal injury, flooding, or any other loss or harm. Approval of this exemption request does not constitute inspection, approval, or endorsement of the quality, safety, or code-compliance of the work. The property owner and contractor remain solely responsible for ensuring that all exempted work complies with the Florida Building Code, City of Naples Code of Ordinances, and any other applicable state, federal, or local laws, regulations, and ordinances.

Section H: Application Terms

H.1. I have read and understood the exemption criteria and the legal disclaimer above.

☐ Yes ☐ No

H.2. This application has been filled out completely and all required attachments are enclosed.

☐ Yes ☐ No

H.3. The project described herein is complete and will NOT be phased.

☐ Yes ☐ No

H.4. For Exemption 2: The property is NOT located in a Special Flood Hazard Area.

☐ Yes ☐ No ☐ N/A

Section I: Property Owner / Agent of Owner Acknowledgment

Application is hereby made for a permit exemption as indicated. I certify that the information provided is accurate and complete, that the work described qualifies for the exemption claimed, that no work subject to this exemption will commence prior to submission and acceptance of this form, and that all work will be performed in accordance with all applicable laws and codes. The contractor may sign as Agent of the Owner provided the contract with the property owner permits such action. Owner Builders must also complete the Owner-Builder Affidavit.

_____ _____

Print Name of Property Owner Signature of Property Owner

State of _____, County of _____

The foregoing instrument was acknowledged before me by means of

☐ physical presence or ☐ online notarization this _____ day of _____, 20_____ by

_____ (name of person) who is ☐ personally known to me, or ☐ who has

produced _____ as identification.

_____

Notary Signature: Notary Seal:

Section J: Qualifier / Contractor Acknowledgment

_____ _____

Print Name of Property Owner Signature of Property Owner

State of _____, County of _____

The foregoing instrument was acknowledged before me by means of

☐ physical presence or ☐ online notarization this _____ day of _____, 20_____ by

_____ (name of person) who is ☐ personally known to me, or ☐ who has

produced _____ as identification.

_____

Notary Signature: Notary Seal: