MIAMIBEACH

Building Department
1700 Convention Center Drive, 2nd Floor
Miami Beach, Florida 33139
Office: 305.673.7610 Fax: 305.673.7857
http://www.miamibeachfl.gov/building/

Office Use Only
Submittal Date: _____
Permit Number: _____

Permit Application

Applicant Information (Blue or Black Ink Only)

Property Address	Unit Number	Parcel/Folio Number

If sub-permit or revision, please indicate the Master Permit Number	If associated with violation, indicate BV#	Please note that outstanding expired permits must be resolved prior to the issuance of a work permit

Permit Type (select one)

- ☐ Building
- ☐ Electrical
- ☐ Mechanical
- ☐ Plumbing
- ☐ Roofing
- ☐ Phased Permit
- ☐ Demolition
- ☐ Generator
- ☐ Special Event
- ☐ Fire

Permit Request (select all that apply)

- ☐ New Permit
- ☐ Change of Contractor
- ☐ Change of Architect/Engineer
- ☐ LEED
- ☐ Permit Extension
- ☐ Permit Renewal
- ☐ Permit Revision
- ☐ Change of Use
- ☐ Private Provider
- ☐ City Project

Property Information (select one)

- ☐ Commercial
- ☐ Multi-Family Residential
- ☐ Residential: Single-Family Residential or Duplex

Total Value of Work
$

	New Construction/Addition	Alteration/Reconfiguration of Space
Square Footage	SF	SF
Value of Work	$	$

New Construction/Addition	Alteration/Reconfiguration of Space
☐ **A-1 Assembly (Theater/ Concert Hall)**	☐ **M -Department Store / Drug Store**
☐ **A-2 Assembly (Restaurant/Night Club/ Bar)**	☐ **M -Gas Station**
☐ **A-3 Assembly (Worship/Amusement/ Arcade Community Hall**	☐ **M – Retail/ Warehouse**
☐ **B – Business**	☐ **R-1 Residential Transient (Boarding House/ Hotel/Motel)**
☐ **D/E -Daycare & Educational**	☐ **R-2 Residential Permanent (Apartment/Dormitory/ Timeshare**
☐ **I-1 Institutional (Ambulatory)**	☐ **R-3 Residential (Dwelling/ Custom Homes)**
☐ **I-2 Institutional (Non Ambulatory)**	☐ **R-4 Residential (Assisted Living 6-16 person)**
	☐ **S-1 Storage (Mod. Hazard (Repair Garage)**
	☐ **S-2 Storage (Low Hazard (excluding Parking Garage)**
	☐ **S-2 Storage (Parking Garage)**

Description of Work

Provide a summary of work to be done.

Responsible Parties

Property Owner

Name
Address | Suite
City | State | Zip Code
Driver's License/ State Identification Number
E-Mail Address
Daytime phone | Cell Phone

Contractor

Name
Address | Suite
City | State | Zip Code
State Identification Number/License
E-Mail Address
Daytime phone | Cell Phone

Architect

Name
Address | Suite
City | State | Zip Code
Professional License Number
E-Mail Address
Daytime phone | Cell Phone

Structural Engineer

Name
Address | Suite
City | State | Zip Code
Driver's License/ State Identification Number
E-Mail Address
Daytime phone | Cell Phone

Notice & Certification

This application is hereby made to obtain a permit to do the work and installations as indicated. I certify that all work will be performed to meet the standards of all laws and construction regulations in this jurisdiction. I understand that a **separate permit** must be secured for **Electrical, Elevator, Fire, Mechanical, Plumbing, Signs, Wells, Pools, Furnaces, Boilers, Heaters, Tanks, Air Conditioners**, etc.

Owner's Affidavit: I certify that all the forgoing information is correct. Owner Certifies that the aforementioned Contractor has the authorization to perform the work as specified above.

Lessee's Affidavit: Lessee certifies that he has full consent and authorization from owner of subject property to perform the abovementioned work and to hire above captioned contractor.

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 this county, and there may be additional permits required from other governmental entities such as the Environmental Division of Miami-Dade County; Permitting, Environment and Regulatory Affairs; Water & Sewer Department; Department of Environmental Protection; South Florida Water Management District; Miami-Dade County Impact Fee water management districts; state agencies; and/or federal agencies.

Under penalties of perjury, I declare that to the best of my knowledge, the facts stated in this document are true. Any information found to be false may cause the revocation and/or denial of the permit and/or Certificate of Occupancy.

OWNER'S ELECTRONIC SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this building permit application is true and correct.

☐ **Owner/Lessee for new permits** (Documentation establishing ownership may be requested)
☐ **Master Permit Contractor of Record** (For sub-permit change of contractor)

_____ _____
Print Name Signature

STATE OF FLORIDA , COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____ day of _____ 20 ____, by _____
☐ Personally
☐ Produced Identification – Type of Identification _____

_____ (SEAL)
Signature of Notary Public

☐ **Contractor** (Proof of licensure may be required if not on file)

_____ _____
Print Qualifier's Name Qualifier's Signature

STATE OF FLORIDA , COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this _____ day of _____ 20 ____, by _____
☐ Personally
☐ Produced Identification – Type of Identification _____

_____ (SEAL)
Signature of Notary Public

Excellence Miami Beach

Our Mission
We are committed to providing excellent public service and safety
to all who live, work and play in our vibrant, tropical, historic community.

Form Name	Permit Application
Form Purpose	This form is completed if an owner or developer would like to request **a permit** for a construction or rehabilitation project within the City of Miami Beach.
Related Forms	Please see Document Submission Checklist on page 4
Associated Fees	1. Upfront Processing Fee 2. Permit Fees, as applicable
Additional Info	Payments can be made at following locations: • Kiosk located in Building Department lobby, 2nd Floor City Hall • Cashier's window, 1st Floor City Hall • Online at https://www.velocityhall.com/accela/velocityhall/ • Permit Counter, 2nd Floor, Miami Beach City Hall
Form Process	1. Permit Application and project plans submitted with upfront fee. 2. Plan Review Process is performed by the City, if applicable. 3. Payment of permit fees assessed. 4. Permit is issued.
For Progress Status	You can check on this application's status in the City's system via: https://www.velocityhall.com/accela/velocityhall/
For Assistance	Please contact: • **In – person**: Building Department, Miami Beach City Hall, 2nd Floor 1700 Convention Center Drive, Miami Beach, Florida 33139 • **Via Telephone**: 305-673-7610 • **Via E-mail**: buildingdepartment@miamibeachfl.gov • **Online:** www.miamibeachfl.gov

ADA Information
To request this material in accessible format, sign language interpreters, information on access for persons with disabilities, and/or any accommodation to review any document or participate in any city-sponsored proceeding, please contact 305.604.2489 (voice), 305.673.7524 (fax) or 305.673.7218 (TTY) five (5) days in advance to initiate your request. TYY users may also call 711 (Florida Relay Service).

Our Mission

The Building Department is dedicated to serving the public by the efficient and effective supervision of construction activities to safeguard the public health, safety and general welfare of the City's residents and visitors by assuring compliance with the Florida Building Code

Document Submission Checklist	Plans Checklist
☐ Two (2) sets of plans for Review ☐ Completed Permit Application ☐ Two (2) Surveys of Property ☐ Two (2) Elevation Certificates ☐ Asbestos Report ☐ Two (2) Energy Calculation Forms ☐ Two (2) Heating and Cooling Load Calculation Forms ☐ Owner/Qualifier/Contractor Estimate Construction Cost Affidavit ☐ Recorded Warranty Deed ☐ Corporation Documentation/Articles of Incorporation ☐ Original Power of Attorney ☐ Original Authorization Letter from Owner to Agent ☐ Original Authorization Letter from Condominium Association ☐ Contractor's State or Municipal License ☐ Contractor's Business Tax Receipt ☐ Contractor's Municipal Contractor Business Tax Receipt ☐ Contractor's Local Business Tax Receipt ☐ Contractor's Liability Insurance ☐ Contractor's Workman's Compensation Insurance ☐ Contractor's Workman's Compensation Insurance Exemption ☐ Owner/Builder Affidavit ☐ Change of Contractor Hold Harmless ☐ Roofing Appendix Sections A,B,C,D.E as applicable ☐ Soil Density Letter ☐ Soundproofing specifications (Multifamily building for unit above first floor) ☐ Special Inspector Form (pilings, lightweight insulating concrete, soil compaction, precast units and attachments, steel bolted and welded connections, truss spans over 35 ft long or over 6 ft high) ☐ Swimming Pool Safety Act Form ☐ Temporary Electrical Service for Testing Hold Harmless Form ☐ Trade-specific Fee Sheets ☐ LEED Certification Registration (if applicable) ☐ Paint color sample ☐ Photographs of existing conditions ☐ FPL Disconnection Letter ☐ People/TECO Gas Disconnection Letter ☐ Telephone Company Disconnection Letter ☐ Other (Please Specify): _____ ☐ Other (Please Specify): _____	☐ Civil drawings ☐ Site Plan ☐ Elevation drawings ☐ Demolition plans ☐ Proposed floor plans ☐ Electrical plans ☐ Fire alarm plans ☐ Fire protection plans ☐ Irrigation plans ☐ Landscape plans ☐ Life safety plans ☐ Mechanical plans ☐ Plumbing plans ☐ Structural plans and calculations ☐ Miami Dade County Product Control Notice of Acceptance (windows, doors, waterproofing, truss connectors, equipment stands) ☐ Miami Dade County Impact Fee Stamp ☐ Miami Dade County DERM Approval ☐ State of Florida Division of Hotels and Restaurants Approval

Revised July 2013

MIAMIBEACH

Building Department
1700 Convention Center Drive, 2nd Flr
Miami Beach, Fl 33139

NOTICE TO THE CITY OF MIAMI BEACH BUILDING DEPARTMENT OF EMPLOYMENT AS SPECIAL INSPECTOR UNDER THE FLORIDA BUILDING CODE

I have been retained by: _____ to perform special inspector services under the Florida Building Code at the _____ project on the below listed structures as of _____ (date). I am a professional engineer licensed in the State of Florida.

Process Number: _____ **Master Permit (IF APPLICABLE):** _____

- ○ Special Inspector for Pilings, FBC 1822.1.20
- ○ Special Inspector for Lightweight Insulating Concrete, FBC 1917.2
- ○ Special Inspector for Soil Compaction, FBC 1820.3.1
- ○ Special Inspector for Precast Units and Attachments, FBC 1927.12.2 (By P.E. or R.A..)
- ○ Special Inspector for Reinforced Masonry, FBC 2122.4 (By P.E or R.A)
- ○ Special inspection for Steel Bolted & Welded Connections, FBC 2218.2 (By P.E. or R.A..)
- ○ Special Inspector for Trusses over 35 feet long or 6 feet high, FBC 2319.17.2.4.2 (By P.E. or R. A..)
- ○ Special Inspector for _____

NOTE: Only the marked boxes apply.

The following individual's employed by this firm or me are authorized representatives to perform inspections

1. _____ 2. _____
3. _____ 4. _____

* Special inspectors utilizing authorized representatives shall insure the authorized representative is qualified by education or licensure to perform the duties assigned by the Special Inspector. The qualifications shall include: licensure as a professional engineer or architect; graduation from an engineering education program in civil or structural engineering; graduation from an architectural education program; successful completion of the NCEES Fundamentals Examination; or registration as a building inspector or general contractor.

I will notify the City of Miami Beach Building Department of any changes regarding authorized personnel performing inspection services.

I, understand that **all mandatory inspections, as required by the Florida Building Code, shall be requested by the permit holder and approved by the Building Department Inspectors. Inspections performed by the Special inspector hired by the Owner are in addition to the mandatory inspections performed by the Building Department**. A Special Inspection Log for each building must be displayed in a convenient location on the site for inspection by the Building Department Inspectors. Further, upon completion of the work under each building permit, I will submit to the Building Department at the time of final inspection the completed Inspection Log form and sealed statement that, to the best of my knowledge, belief and professional judgment those portions outlined above meet the intent of the Florida Building Code and are in subsequent accordance with the approved plans.

Architect/Engineer Signature: _____
Architect/Engineer Name Printed: _____
Address: _____
Phone Number: _____
Owner/Agent Signature: _____
Owner/Agent Name Printed: _____
Building Department Accepted By: _____

Signed and Sealed

_____
License Number

Date: _____

MIAMIBEACH

Building Department
1700 Convention Center Drive, 2nd FL
Miami Beach, Florida 33139
305.673.7610

Field Structural Inspection Approval Form

To: City of Miami Beach Building Official
1700 Convention Center Drive, Second Floor
Miami Beach, FL 33139

Date: _____

RE: _____
[Name of Special Event]

_____
[Address of Project]

_____
[Permit No.]

Dear Building Official:

I _____, having performed and approved the required inspections, hereby attest that to the best of my knowledge, belief and professional judgment, the system marked below, covered by the above referenced permit, have been approved in accordance with the approved plans and the provisions of the Florida Building Code 2010.

- ☐ Membrane Structures (Tents)
- ☐ Stage
- ☐ Platform
- ☐ Bleachers
- ☐ Others Describe:
- ☐ Tower for Lighting or Sound System
- ☐ Trailer/Container
- ☐ Lift
- ☐ Ramp

_____

_____

Sincerely,

_____
Special Inspector (SIGNED AND SEALED)

_____
License Number

Revised Aug 2013