



## City of Miramar | Building Division

Building, Planning & Zoning Department  
2200 Civic Center Place | Miramar, Florida 33025  
Tel: 954.602.3200 | Fax: 954.602.3635  
www.miramarfl.gov

## Swimming Pool & Spa Application Package

### Who Can Apply (A or B)

**A. Licensed Contractors:** Permit can be issued to **Licensed Contractors** properly registered in Building Division; providing updated licenses & insurances.

#### **ATTENTION HOMEOWNER – FOR RESIDENTIAL APPLICATION ONLY- READ CAREFULLY**

**B. Owner/Builder for Residential Only.** Permit can be issued to owner/builder as per the following requirements:

- Picture ID (Driver License, ID card) matching the address where the work will be conducted.
- Proof of ownership (Recorded warranty deed, tax statement, settlement statement).
- Verification or confirmation of Homestead Exemption

**If a contractor is hired, then the contractor must pull the permit**

### Required Documents

- All required applications based on the scope of work (Structural, Plumbing, Electrical, etc.).
- Plans (1 original set) signed & sealed by Professional Engineer or Registered Architect. **The submitted plans for this purpose should not exceed the page size of 11" x 17". If submitted plans are larger than 11" X 17", then two (2) sets are required along Boundary Property Surveys (2).**
- A complete Affidavit of Identical Documents must be submitted for Engineered plans submitted with digital signature of the Professional Designer. (Included in this package).
- Full Scalable and Updated Boundary Survey (1 set). **Reduced, faxed, enlarged surveys or any altered surveys are not acceptable. The boundary surveys submitted for application purpose shall be updated with less than seven (7) years, and it shall be original signed & sealed by the Professional Land Surveyor.**
- All applicable specifications for Child Pool Barrier, Heat Pump, Exit alarms, Pool cover, etc. (1 set of each is required).
- Affidavit of Awareness of Homeowner's Association (Included in this package). This affidavit is required even if the property is not located in a Homeowner's Association.
- Construction Debris Removal Affidavit (Included in this package).
- Land Development Code Sec 22-141. (c):** The safety barrier shall be erected either around the swimming pool or around the premises on which the swimming pool is erected; in either event, it shall enclose the area entirely, prohibiting unrestrained admittance to the enclosed area. As per the above section, besides the Florida Building code requirements, fencing around the premises is required. Other safety regulations may apply.
- Job Value, including labor & materials is required for permit valuation. As per Florida Building Code FBC 103.9, the Building Official can require additional information about the job value.

**Attention Applicant:** As per Florida Statutes 713.135, a Recorded Notice of Commencement is required when construction, renovation, alterations values exceed \$5,000. **The recorded Notice of Commencement should be available at the first inspection.**



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### Swimming Pool & Spa Plans Reviews & Required Inspections

## PLANS REVIEWS

1. PLANNING & ZONING	3. PLUMBING	5. STRUCTURAL/BUILDING
2. ENGINEERING	4. ELECTRICAL	

**NOTE: OTHER AGENCIES APPROVALS MAY BE REQUIRED BASED ON THE SCOPE OF WORK**

## REQUIRED INSPECTIONS

E110 CLEARING & GRUBBING <b>(REQUIRED PRIOR POOL STEEL)</b>
B168 POOL/SPA STEEL
B229 POOL BOND
B233 UNDERGROUND ROUGH
B251 EQUIPOTENTIAL BONDING
B431 MAIN DRAIN
B432 POOL/SPA PIPING
B170 PATIO/DECK/SLAB <b>(POOL DECK INSPECTION)</b>
B910 FINAL ELECTRICAL
B931 FINAL PLUMBING
E410 DRAINAGE & GRADING <b>(REQUIRED PRIOR FINAL BUILDING/POOL)</b>
B999 FINAL BUILDING/POOL
<b>OTHER INSPECTIONS MAY BE REQUIRED BASED ON THE PROPOSED SCOPE OF WORK.        FOR MORE INFORMATION ABOUT THE INSPECTIONS, CONTACT THE FOLLOWING:</b>
ENGINEERING: <a href="mailto:EngineeringServices@miramarfl.gov">EngineeringServices@miramarfl.gov</a> ENGINEERING INSPECTIONS CAN BE SCHEDULED MONDAY THRU THURSDAY BY CALLING <b>954-602-3304, WITH 48 HOURS ADVANCED NOTICE.</b>
ELECTRICAL: <a href="mailto:Building-Electrical@miramarfl.gov">Building-Electrical@miramarfl.gov</a>
PLUMBING: <a href="mailto:BuildingPlumbing@miramarfl.gov">BuildingPlumbing@miramarfl.gov</a>
STRUCTURAL/BUILDING: <a href="mailto:Building-Structural@miramarfl.gov">Building-Structural@miramarfl.gov</a>

# BROWARD COUNTY UNIFORM BUILDING PERMIT APPLICATION

Revised 11-17-2022

Select One Trade:  Building  Electrical  Plumbing  Mechanical  Other \_\_\_\_\_

Application Number: \_\_\_\_\_ Application Date: \_\_\_\_\_

1

Job Address: \_\_\_\_\_ Unit: \_\_\_\_\_ City: \_\_\_\_\_

Tax Folio No.: \_\_\_\_\_ Flood Zn: \_\_\_\_\_ BFE: \_\_\_\_\_ Floor Area: \_\_\_\_\_ Job Value: \_\_\_\_\_

Building Use: \_\_\_\_\_ Construction Type: \_\_\_\_\_ Occupancy Group: \_\_\_\_\_

Present Use: \_\_\_\_\_ Proposed Use: \_\_\_\_\_

Description of Work: \_\_\_\_\_

New  Addition  Repair  Alteration  Demolition  Revision  Other: \_\_\_\_\_

Legal Description: \_\_\_\_\_  Attachment

2

Property Owner: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Owner's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

3

Contracting Co.: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Company Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Qualifier's Name: \_\_\_\_\_  Owner-Builder License Number: \_\_\_\_\_

4

Architect/Engineer's Name: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Architect/Engineer's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Bonding Company: \_\_\_\_\_

Bonding Company's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Fee Simple Titleholder's Name (If other than the owner) \_\_\_\_\_

Fee Simple Titleholder's Name (If other than the owner) \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mortgage Lender's Name: \_\_\_\_\_

Mortgage Lender's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_





# City of Miramar | Building Division

Community Development Department

2200 Civic Center Place | Miramar, Florida 33025

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## Affidavit of Identical Documents for Digital Submittal

Attention: All documents digitally submitted for permitting purpose shall be in True PDF format. Other formats, including pictures converted to PDF won't be accepted.

I, *(print full name)* \_\_\_\_\_ **Architect/Engineer of Record** with registration number AR/PE # \_\_\_\_\_ with the Architectural/Engineering Firm (Name) \_\_\_\_\_

\_\_\_\_\_, hereby attest or affirm that the electronic files submittal of the plans for project located at the location shown below are an exact and accurate duplicate of the complete hardcopy set of plans submitted to the Building Division.

Project Name \_\_\_\_\_

Property Address: \_\_\_\_\_

Folio No.; \_\_\_\_\_

I also hereby acknowledge that if there are any discrepancies between the two versions, the review process for said project will be terminated, become null and void, and require re-application under a new permit application number. Previously reviewed plans and comments will be discarded. This affidavit will apply to all documents submitted electronically throughout the life of the project including initial submittal, re-works, revisions, shop drawings, etc.

Plan's reference/job identification number from title block: \_\_\_\_\_



*Architect/Engineer of Record Signature & Seal*

Designer of Record Contact Phone: \_\_\_\_\_

Contact Email: \_\_\_\_\_

\_\_\_\_\_

Sworn to (Or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_,

Notary Name: \_\_\_\_\_

Notary Signature: \_\_\_\_\_

\_\_\_\_\_

*Notary Seal*

Personally known     Produced Identification \_\_\_\_\_ I.D. No. \_\_\_\_\_



# Miramar | Planning & Zoning Division

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**Safety  
Barrier  
Affidavit**

## SAFETY BARRIER AFFIDAVIT SUBMITTAL

Date: \_\_\_\_\_  
Building Permit Application No. \_\_\_\_\_

Property Address \_\_\_\_\_

In accordance with Land Development Code Section 809.12.1, for the City of Miramar, Florida, I \_\_\_\_\_, the owner of the above referenced property, hereby certify that I understand and agree that the swimming pool to be constructed at the above address will not be used or filled with water until a separate **permit** has been pulled for, and a final inspection obtained, for the installation of an **approved** safety barrier. The pool shall comply with the requirements of Florida Statutes, Chapter 515 entitled "Residential Swimming Pool Safety Act," including but not limited to the pool barrier requirements found in Section 515.29. In addition to the statutory requirements, the safety barrier as stated in the Land Development Code, Section 809.12.1 (a), shall take the form of a screened-in patio, a wooden fence, or a concrete block wall. The minimum height of the safety barrier shall be four (4) feet. The safety barrier shall be erected either around the swimming pool or around the premises on which the swimming pool is erected. In either event, it shall enclose the area entirely, prohibiting unrestrained admittance to the enclosed area. Gates shall be of the spring lock type, so that they shall automatically be in a closed position at all times. Gates shall also be equipped with a self-latching lock and shall be locked when the swimming pool is not in use. Other safety requirements may apply based on the provisions of the Florida Building Code in effect at the time of the permit.

Note: Please be aware that the final inspection of the pool will be rejected, if the required safety barrier has not been installed, inspected, and approved.

I have read and understand the safety barrier requirement.

Property Owner Signature \_\_\_\_\_

Property Owner (Print Name) \_\_\_\_\_

\*\*\*\*\*

State of FLORIDA

County Of \_\_\_\_\_

Sworn to (or affirmed) and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_ by

\_\_\_\_\_  
(Print Homeowner's/Representative's Name

STAMP

\_\_\_\_\_  
NOTARY SIGNATURE as to Homeowner's /Representative's Name

\_\_\_\_\_  
Notary Name

Personally Known \_\_\_\_\_ or Produced Identification \_\_\_\_\_ (type)



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# Construction Debris Removal Affidavit

### ATTENTION APPLICANT. READ CAREFULLY

**Section 18-7 of the Code of Ordinances of the City of Miramar (“City Code”)** requires any debris from demolition work, renovations, re-roofs, and new construction to be removed by the City’s trash vendor, Waste Pro of Florida (“Waste Pro”). Failure to adhere to this requirement shall be deemed a violation of the City Code Section 18-7 and shall be subject to code compliance activities that may result in fines/penalties, as provided in the City Code. For roll-off collection services, homeowners/builders and licensed contractors shall contact Waste Pro at the information below.

**Waste Pro: 17302 Pines Blvd, Pembroke Pines, FL 33029**  
**Phone: (954) 967-4200**  
**Fax: (954) 241-4489**  
**Website: [www.wasteprousa.com](http://www.wasteprousa.com)**



Read and initial to the left of the applicable statement

I acknowledge that I have to contact Waste Pro for the removal of all construction and demolition debris

Name:

Job Address:

City , State  Zip Code

Signature:

STATE OF FLORIDA. Sworn to and subscribed before me this  day of , 20

Notary Public



**City of Miramar  
Engineering Services  
2200 Civic Center Place  
Miramar, FL 33025  
(954) 602-3304**

## **SWIMMING POOL & SPA REQUIREMENTS FOR REVIEW AND FINAL INSPECTION.**

### **ENGINEERING REQUIREMENTS**

#### **Plan Review**

- Plans must include a site grading plan demonstrating that surface drainage along property lines will not be altered and/or create an adverse effect to adjacent properties.
- Plans must indicate existing and proposed elevations.
- Provide cross-sections along property lines in relation to the proposed pool improvements.
- Include the following notes on plans:
  - Coordinate a site inspection with Engineering prior to excavating and grading.
  - Fill shall not be placed along property lines and/or drainage swales.

#### **Final Engineering Inspection**

- Provide certified survey with final grade elevations prepared by a Florida licensed surveyor.
- Schedule a final site grading inspection with Engineering.

***\*Engineering Inspections can be scheduled Monday thru Thursday by calling 954-602-3304, with 48 hours advanced notice.***





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## SITE DRAINAGE PROVISION DISCLOSURE STATEMENT

### SITE DRAINAGE PROVISION

Property Address: \_\_\_\_\_ Miramar, FL \_\_\_\_\_

Lot: \_\_\_\_\_ Block: \_\_\_\_\_ Subdivision: \_\_\_\_\_

### ATTENTION HOMEOWNER & CONTRACTOR

Applying for a Building Permit require compliance with city ordinances in reference to the site drainages. The Building Division along with the Engineering Service Dept. will assure that during construction and inspection process drainage requirements shall be satisfied. as per the following city Code section.

**City Code 809.17(c) Drainage provision. Rainwater runoff must be maintained on the property. Rainwater shall not be allowed to flow onto or across any adjoining property or sidewalk, either public or private.**

**Exception: Rainwater may flow into a street gutter, storm sewer, or storm sewer catch basin if first approved by the engineering department.**

*I understand that not being in compliance with the required "Drainage Provision" will constitute a violation of City Code 809.17(c) and will be considered an intended violation of this code, punishable as provided in the Miramar City Ordinances. This form must be signed by the owner/agent and the primary contractor.*

Owner Signature

Date Signed

Contractor Signature

Date Signed

STATE OF FLORIDA, COUNTY OF BROWARD.

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Signature and Date Commission Expires



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## RESIDENTIAL SWIMMING POOL, SPA & HOT TUB SAFETY ACT

Property Address: \_\_\_\_\_ Miramar, FL \_\_\_\_\_

Serve this affidavit, as an acknowledgement that a new swimming pool, spa or hot tub will be constructed or installed at the above property address; and hereby affirm that one of the following methods will be used to meet the requirements of Florida Statutes 515.29, and Florida Building Code Section R4501.17.

(Initial the method(s) to be used as pool barrier)

\_\_\_\_\_ The pool will be equipped with an approved **safety pool cover** that complies with ASTM F1346  
**(Submit Manufacturer's Specifications).**

\_\_\_\_\_ A continuous, one-piece (child) barrier meeting the requirements of **Florida Building Code R4501.17** will protect the pool perimeter. The plans shall indicate the child fence location and method of attachment, including one end that shall not be removable without the aid of tools. **(Submit Manufacturer's Specifications).**

\_\_\_\_\_ The pool will be isolated from access from the structure by an enclosure that meets the pool barrier requirements of Code Section FBC R4501.17. If this option is selected, submit engineered plans showing all types and location of all perimeter protection. The plans must also show the location and type of all openings, and the hardware type for each location.

\_\_\_\_\_ All doors and windows providing direct access from the home to the pool shall be equipped with an exit alarm complying with UL 2017 that has a minimum sound pressure rating of 85 dBA at 10 feet (3048 mm). Any deactivation switch shall be located at least 54 inches (1372 mm) above the threshold of the access. **(Submit Manufacturer's Specifications).** Any swimming pool alarm that, when placed in a pool, sounds an alarm upon detection of an accidental or unauthorized entrance into the water. Such pool alarm must meet and be independently certified to ASTM F2208, titled "Standard Safety Specification for Residential Pool Alarms," which includes surface motion, pressure, sonar, laser, and infrared alarms. **(Submit Manufacturer's Specifications)**

I understand that not having one of the above pool safety methods constitute a violation of Florida Statutes 515.29. and the Florida Building Code R4501.17. **The property owner and the prime contractor must sign this form.**

Owner Signature \_\_\_\_\_

Prime Contractor Signature \_\_\_\_\_

Print name \_\_\_\_\_

Print name \_\_\_\_\_

STATE OF FLORIDA

STATE OF FLORIDA

Sworn to or affirmed and subscribed before me

Sworn to or affirmed and subscribed before me

this \_\_\_\_\_ day of \_\_\_\_\_, in the year 20\_\_\_\_\_

this \_\_\_\_\_ day of \_\_\_\_\_, in the year 20\_\_\_\_\_

who has taken an oath and is personally known to me

who has taken an oath and is personally known to me

or has produced \_\_\_\_\_

or has produced \_\_\_\_\_

as identification.

as identification.

Notary Public Signature \_\_\_\_\_

Notary Public Signature \_\_\_\_\_

My Commission Expires \_\_\_\_\_

My Commission Expires \_\_\_\_\_

Notary Seal.

Notary Seal.



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# Owner/Builder Disclosure Statement

Owner Name: \_\_\_\_\_

Address: \_\_\_\_\_ Miramar, FL, Zip Code: \_\_\_\_\_

LOT: \_\_\_\_\_ BLOCK: \_\_\_\_\_ SUBDIVISION: \_\_\_\_\_

I am submitting an application for a Building Permit as an Owner-Builder in accordance with the exemption set forth in Florida Statute 489.103. Florida law requires construction to be done by a licensed contractor. It's a requirement by law you read and sign the following statements, and hence you can understand your responsibilities as an owner-builder. By signing the following statements, you attest that:

### DISCLOSURE STATEMENT

*(Read and Initial to the left of each statement)*

- 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 the 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 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 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 the 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 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.
- 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 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 regulations.



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## Owner/Builder Disclosure Statement

(Continuation)

- 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 (telephone number) or (Internet website address) 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 address listed above.
- 12. I agree to notify (issuer of disclosure statements) 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 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, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

I have read the foregoing instructions and I am aware of my responsibilities.

\_\_\_\_\_  
*Owner Signature*

\_\_\_\_\_  
*Date Signed*

STATE OF FLORIDA, COUNTY OF BROWARD. Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_.

\_\_\_\_\_  
Notary Public

***F.S 489.103. 3(c). If any person violates the requirements of this subsection, the local permitting agency shall withhold final approval, revoke the permit, or pursue any action or remedy for unlicensed activity against the owner and any person performing work that requires licensure under the permit issued.***



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# Affidavit of Awareness of Homeowner's Association Regulations

The following "Affidavit" is required as per City's ordinance. This is a mandatory affidavit which is required even if your property is not located in a Homeowner's Association.

### ATTENTION APPLICANT. READ CAREFULLY

- For homeowner/Builder applicants, this affidavit can be notarized by Permit Clerk at the Building Division. Homeowner should appear in person with required picture I.D. (i.e. Driver License) and proof of ownership (i.e. Recorded Warranty, County Tax Statement). The physical address on I.D. shall match the address on the proof of ownership (i.e. Recorded Warranty Deed).
- For Licensed Contractor applicants, this affidavit can be notarized outside the Building Division by any Notary Public.

**Homeowner or Condominium Association Affidavit requirement. Miramar - City Code Sec. 22-29.(c)(1)** As part of the application process for a building permit in accordance with this chapter and with Section 713.20 of the Land Development Code, each applicant shall sign an affidavit (the "affidavit of awareness") indicating that the applicant is aware that, if the subject property is located in a Homeowners' Association or Condominium Association, as defined in this section, the applicant's property may be subject to additional regulations despite the issuance of a building permit by the city.

This serves to notify such homeowner that the issuance of a Building, Landscaping, or other permits by the City of Miramar, Florida does not exempt he/she from any and all other regulations imposed by the Homeowner's Association (HOA) in which his/her property is located. Be aware that despite the issuance of a building permit by the city, the applicant's property may result in additional regulations or denial to perform the work in your property located at HOA community.

Read and Initial to the left of the applicable statement

\_\_\_\_\_ I acknowledge that **I am the owner of property** located in the following Homeowner's Association:

\_\_\_\_\_  
Print Name of Homeowner's Association

\_\_\_\_\_ I acknowledge that my property is not located in a Homeowners' Association.

Name: \_\_\_\_\_  
Homeowner - Print Name

Job Address: \_\_\_\_\_

Miramar, Florida Zip Code : \_\_\_\_\_

Signature: \_\_\_\_\_  
Homeowner - Signature

STATE OF FLORIDA. Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_\_

\_\_\_\_\_  
Notary Public



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### NOTICE OF COMMENCEMENT

In accordance with Section [713.135](#) of the Florida Statutes, a Notice of Commencement is required for the construction of, improvements to, alteration of or repair of real property. The Notice of Commencement must be recorded with Broward County Records, Taxes and Treasury Division.

- If the **direct contract is greater than \$2,500**, the applicant shall file with the issuing authority prior to the first inspection either a certified copy of the recorded notice of commencement or a notarized statement that the notice of commencement has been filed for recording, along with a copy thereof.
- If the direct contract for repair or replace an existing heating or air conditioning exceed **the amount of \$15,000**, a certified copy of the recorded notice of commencement is required.
- In the absence of the filing of a certified copy of the recorded notice of commencement, **the issuing authority or a private provider performing inspection services may not perform or approve subsequent inspections** until the applicant files by mail, facsimile, hand delivery, or any other means such certified copy with the issuing authority.
- The certified copy of the notice of commencement must contain the name and address of the owner, the name and address of the contractor, and the location or address of the property being improved.
- The issuing authority shall verify that the name and address of the owner, the name of the contractor, and the location or address of the property being improved which is contained in the certified copy of the notice of commencement is consistent with the information in the building permit application.

**Attention Applicant:** Construction Cost of Improvement will be based on contract signed by both parties (owner & contractor) and/or as determined by the Building Official (Florida building Code 109.3).

#### Recording a Notice of Commencement

- Complete the Notice of Commencement Form (See attached form).
- Recording the Notice of commencement at the. Broward County Records, Taxes and Treasury Division. Broward County Governmental Center Room 114. 115 S. Andrews Ave. Fort Lauderdale, FL 33301.

**See attached information about eRecording Vendors in Broward County.**





**Notice of Commencement Document Recording  
can be conducted by contacting one of the below  
eRecording Vendors:**

1. CSC (formerly INGEO) [erecording@cscglobal.com](mailto:erecording@cscglobal.com) / 866-652-0111 / [erecording.com/contact-us](http://erecording.com/contact-us)
2. E-Docs Solutions / [info@edocsrecording.com](mailto:info@edocsrecording.com) / 888-973-3627 / [edocsrecording.com/ContactUs.htm](http://edocsrecording.com/ContactUs.htm)
3. eRecording Partners Network (ePN ) / [sales@GOePN.com](mailto:sales@GOePN.com) / 888-325-3365 / [goepn.com/contact/](http://goepn.com/contact/)
4. Indecomm (formerly US Recordings) / [marketing\\_info@indecomm.net](mailto:marketing_info@indecomm.net) / 877-272-5250 / [dmg.indecomm.net/Connect/Contact](http://dmg.indecomm.net/Connect/Contact)
5. Simplifile / [sales@simplifile.com](mailto:sales@simplifile.com) / 800-460-5657 / [simplifile.com/contact-simplifile/](http://simplifile.com/contact-simplifile/)

**Or by Mail:**

**Records, Taxes and Treasury Division, Recording  
115 S. Andrews Avenue, Room 114  
Fort Lauderdale, FL 33301**

For more information, please visit [Broward.org/RecordsTaxesTreasury](http://Broward.org/RecordsTaxesTreasury),  
call 954-831-4000, or by email [records@broward.org](mailto:records@broward.org)

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 Statutes 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 \_\_\_\_\_