

City of Naples - Building Department

295 Riverside Circle | Naples, Florida 34102 Phone: (239) 213-5020 www.naplesgov.com

EXHAUST HOOD PERMIT APPLICATION

Florida Building Codes, 7th Edition

Job Information:	Permit Application #:		
Tax/Folio#:	Legal Description:		
Job Address:			
Property Owner:		Tenant Name: _	
Mailing Address:			
Permit Expiration Date:			
Est. Cost: \$	Number of Units:	Square Footage	e:
Contractor Information:			
Contractor:		State Cert/CC Comp Card #:	
Qualifier's Name:		Phone #:	
Email Address:			
		City	State Zip
Description of Work.			
Sub-contractor Information (must be supplied if other work wi	ll be performed):	
	ectrical: State Cert/CC Comp Card #:		
Please include with permit pa	ackage:		
One copy of a scale p	olan view showing kitchen floo	or plan and cooking equip	pment layout beneath hood.
	an showing location of all equ stalled on the roof, provide so		ong with all existing equipment. les with equipment.
One copy of scale pla	an showing duct work from ho	ood to termination.	
One copy of specifica	tion sheets for all equipment	to be installed.	

Regulations and Information:

- 1. Required plan size is 24" x 36" maximum. Plans must be to scale with a minimum of 3/16"=1".
- 2. The fee for this permit is \$0.10 per square foot, with a minimum fee of \$100.00. A plan review fee, equal to 20% of permit fee, will be due at time of application. If plan review fee is less than \$30.00, it will be collected at time permit is issued, or upon withdrawal. The plan review fee is not refundable, nor is it credited to any other fee.Initial Required Building & Fire Code Inspections: \$35.00 each inspection.

Recorded Notice of Commencement must be posted if the project valuation exceeds \$2,500.00 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 WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Contractor's Affidavit:

I certify that all the foregoing information is accurate and that all work must be done in compliance with all applicable laws regulating construction and zoning. I understand **THERE WILL BE A FINAL INSPECTION** of the work permitted herein. Compliance will be strictly enforced. **No work whatsoever will commence until the building permit has been issued.**

• The permit fee will be doubled if work is started without an approved permit.

Print Name of Qualifier	Signature of Qualifier
State of Florida	
County of	
The foregoing instrument was acknowledged before me by	y means ofphysical presence oronline notarization
this day of, 20 by	y, who is
personally known to me orhas produced	as identification
	(Seal)
Signature, Notary Public - State of Florida	
Printed, Typed, or Stamped Name of Notary	