



City of Naples - Building Department

295 Riverside Circle | Naples, Florida 34102

Phone: (239) 213-5020

www.naplesgov.com

SCREEN ENCLOSURE PERMIT APPLICATION

Florida Building Codes, 7th Edition

Job Information:

Permit Application #: _____

Tax/Folio#: _____ Legal Description: _____

Job Address: _____

Property Owner: _____

Mailing Address: _____

Est. Cost: \$ _____ Permit Expiration Date: _____

Description of Work: _____

☐ Screen Room/Screen Roof ☐ Screen Room/Pan Roof ☐ Screen Room/Composite Roof ☐ Aluminum Carport

Will this function as a pool barrier? ☐ Yes ☐ No

Actual Setbacks (feet): Rear: _____ Left Side: _____ Right Side: _____

Contractor Information:

Contractor: _____ State Cert/CC Comp Card #: _____

Qualifier's Name: _____ Phone #: _____

Email Address: _____

Address: _____

City

State

Zip

Please check all items included with permit package:

- ___ One copy of a survey/site plan showing the location of the screen enclosure, setbacks, and the property lines.
- ___ One copy of signed and sealed engineering attached to application, **or** approved engineering master filed with the City of Naples.
- ___ One copy of signed and sealed Spatial Perception plan with screen enclosure shown.

COPIES OF APPROVED ENGINEERING MUST BE AVAILABLE TO THE INSPECTOR AT ALL JOB SITES WHEN CALLING FOR INSPECTION.

Screen enclosures shall comply with Spatial Perception Requirements, and when used as a pool barrier, shall comply with the FBC *Building* and/or FBC *Residential*.

Regulations and Information:

1. Screen enclosures must be engineered to meet wind loads.
2. Required plan size is 24" x 36" maximum. Plans must be to scale with a minimum of 3/16"=1'
3. If engineering for the structure and materials being used is not on file, the contractor is responsible for supplying the drawings with an original signature and the raised seal of a registered Florida Structural Engineer to City of Naples Building Division.
4. Work performed on sites located west of the Coastal Construction Control Line will require a field permit from the FL Department of Environmental Protection.
5. Check with the respective property owners association for deed restrictions.
6. Owner-builders must sign an affidavit.
7. Screen cages shall comply with all height, setbacks and spatial perception requirements.
8. A Final Survey showing the location of the new or updated screen enclosure will be required to obtain your Certificate of Completion
9. The fee for this permit is \$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. Zoning review fee: \$50.00, or \$0.05 per square foot of affected enclosed space, whichever is greater, for permits that include new or renovated square footage. 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 means of ____physical presence or ____online notarization this ____ day of _____, 20____ by _____, who is ____personally known to me or____has produced _____ as identification.

(Seal)

Signature, Notary Public - State of Florida

Printed, Typed, or Stamped Name of Notary