



# City of Naples-Building Department

295 Riverside Circle | Naples, Florida 34102  
239-213-5020

## HURRICANE IAN Single Family Emergency Repair Permit Application Florida Building Code, 7<sup>th</sup> Edition

### Section A: Property Information

A.1. Property Address:

A.2. Property Owner:

A.3. Parcel #:

A.4. Legal Description:

### Section B: Contractor Information

B.1. Applicant Type: ☐ Contractor (Complete B.2.-B.2.5.) ☐ Owner Builder (Complete B.3-B.3.2 and Owner Builder Affidavit)

B.2. Company Name:

B.2.1. License Number:

B.2.2. Qualifier Name:

B.2.3. Company Phone:

B.2.4. Email:

B.2.5. Company Address:

B.3. Owner Builder Name:

B.3.1. Phone Number:

B.3.2. Owner Email:

### Section C: Permit Information

C.1. Estimated Job Cost \$:

C.2. Description of Work:

### Section D: Application Terms (This is a like for like repair application only. Any structural work and/ reconfiguration of space and/or exterior work will require construction plans).

D.1. The following items must be included with this permit submittal:

- ☐ Scope of Work Letter
- ☐ Market Valuation Documentation/ Private Appraisal/ Value Listed on Flood Insurance Policy
- ☐ Itemized list of all items to be repaired which includes an accurate cost estimate of repairs

\_\_\_\_\_  
Print Name of Qualifier/ Owner Builder

\_\_\_\_\_  
Signature of Qualifier/ Owner Builder

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 know to me, or ☐ who has produced \_\_\_\_\_ as identification.

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

Notary Seal:



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## Repair/Improvement Owner Cost Affidavit

|                          |                     |
|--------------------------|---------------------|
| Property Address:        |                     |
| Property Owner:          | Parcel #:           |
| Owner Email:             | Owner Phone #:      |
| Contractor/Company Name: | License #:          |
| Job Representative:      | Email:              |
| Contractor Phone #:      | Construction Value: |

### OWNER AFFIDAVIT

I hereby attest that the Scope of Work included in the permit application for the work on the existing building that is located at the property identified above is accurate and describes all the work to be done, including all improvements, rehabilitation, remodeling, repairs, additions, and any other form of improvement. I further attest that I ☐ Owner Builder or ☐ the Licensed Contractor I have hired to prepare a cost estimate for all of the work, including the contractor's overhead and profit. I acknowledge that if, during construction, I decide to apply for additional separate permits, add more work or modify the work of this permit, that the City of Naples will review the comparison of the cost of all work to the market value of the building to determine if the work is substantial improvement. Such review may require revision of the permit Scope of Work and may subject the property to additional requirements to determine if the permitted work exceeds the 50% rule and the structure has been substantially damaged.

I also understand that I am subject to enforcement action and/or fines if any inspection of the property reveals that I have made repairs or improvements that were not included in the Scope of Work description and/or the cost estimate for that work that were the basis for issuance of a permit.

\_\_\_\_\_  
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 know to me, or ☐ who has produced \_\_\_\_\_ as identification.

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

Notary Seal:



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### Repair/Improvement Contractor Cost Affidavit

|                          |                        |
|--------------------------|------------------------|
| Property Address:        |                        |
| Property Owner:          | Parcel #:              |
| Owner Email:             | Owner Phone #:         |
| Contractor/Company Name: | License #:             |
| Job Representative:      | Email:                 |
| Contractor Phone #:      | Construction Value: \$ |

#### CONTRACTOR AFFIDAVIT

I hereby attest that I have personally inspected the building located at the above-referenced address and discussed the nature and extent of the work requested by the owner, including all improvements, rehabilitation, remodeling, repairs, additions and any other form of improvement. At the request of the owner, I have prepared a cost estimate for all of the improvement/repair work requested by the owner and the cost estimate includes, at a minimum, the costs presented to the City of Naples in that Cost estimate that are appropriate for the nature of the work. If the work is repair of damage, I have prepared a cost estimate to repair the building to its pre-damaged condition. I acknowledge that if, during the course of construction, the owner requests more work or modification of the work above what described in the application or Cost Estimate, a revised cost estimate must be provided to the City of Naples. I understand the City of Naples will re-evaluate its comparison of the cost of work to the market value of the building to determine if the work is substantial improvement. Such re-evaluation may require revision of the permit and may subject the property to additional requirements.

I also understand that I am subject to enforcement action and/or fines if inspection of the property reveals that I have made repairs or improvements that were not included in the description of work and the cost estimate for that work that were the basis for issuance of a permit.

\_\_\_\_\_  
Print Name of Qualifier

\_\_\_\_\_  
Signature of Qualifier

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 know to me, or ☐ who has produced \_\_\_\_\_ as identification.

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

Notary Seal: