

**TOWN OF LONGBOAT KEY  
PLANNING, ZONING AND BUILDING  
DEPARTMENT**

501 Bay Isles Road  
Longboat Key, FL 34228  
Phone: 941-316-1966 FAX: 941-316-1970

**ROOF SYSTEM  
APPLICATION**

**APPLICATION SUBMITTAL & REVIEWS:** All application materials must be originals – NO FAXES. Forms must be properly completed and executed. Each application must be submitted with the following, at minimum:

- One (1) fully completed Roof System Application.
- Three (3) collated sets, each of which shall include:
  - Copy of “Work Description” page 1 of Application Form.
  - Copy of manufacturer’s specifications including Florida Product approvals.
  - If applicable, plans per “Plans Requirements: Roofing Work Involving Mechanical Systems,” see page 4.

No work is authorized until a valid permit for such work has been issued. All fees must be paid before permit is issued. Permits are subject to the FBC Administrative Section.

**ADDITIONAL PERMITS REQUIRED:** HVAC and Electrical permits may be required. See attached “Plans Requirements: Roofing Work Involving Mechanical Systems. If work exceeds the thresholds established by the FS 553.844, a separate building permit may be required, by an appropriately license contractor. Any person who commences work without required permits shall be subject to fees twice that of the normal permit fees, as well as other actions allowed by law.

**INSPECTIONS:** The Florida Building Code establishes specific required inspections. The inspector may require additional inspections during the course of the project.

**Minimum required inspections:**

1. **Roof sheathing / attachment**
2. **Dry-in / flashing**
3. **In progress** – after flashings have been installed and during application of the final water proofing material: e.g., hot mop, shingles, single-ply membranes, modified bitumen.
4. **Final** inspection when the job is fully completed.

Inspections must be requested through the PZB Department at least 24 hours prior to the preferred date. Inspections will be scheduled based on availability of inspection staff. The permit holder or authorized agent is required to meet the inspector at the site or provide on-site safe access to the roof areas.

**CHANGES TO APPROVED PLANS:** Work found to be in violation of or not in conformity with the provisions of the Florida Building Code, including work not conforming to the approved plans, may cause the permit to be subject to revocation. Revisions to the approved plans must be submitted and approved by the Issuing Department prior to implementation and inspection of such changes. A fee for staff time and additional permit fee for increases in project cost shall be collected.

**FLORIDA CONSTRUCTION LIEN LAW:** Chapter 713, Part 1, Florida Statutes: A Notice of Commencement signed by the property owner and recorded in the Clerk’s Office of the county in which the property is located will be submitted to the PZB Department prior to issuance of a permit for work exceeding \$2500, and a copy of this notice shall be posted on-site until issuance of the required notice of completion.

**ROOFING WORK INVOLVING MECHANICAL SYSTEMS:**

For the construction of a new roof or for the re-roofing of an existing structure where mechanical equipment is located on that roof, three sets of plans, and other required documents, must be submitted, showing compliance with the following Florida Building Code Mechanical sections:

**306.5 Equipment and appliances on roofs or elevated structures.** Where equipment and appliances requiring access are installed on roofs or elevated structures at a height exceeding 16 feet (4877 mm), such access shall be provided by a permanent approved means of access, the extent of which shall be from grade or floor level to the equipment and appliances’ level service space. Such access shall not require climbing over obstructions greater than 30 inches (762 mm) high or walking on roofs having a slope greater than 4 units vertical in 12 units horizontal (33-percent slope).

**304.11 Guards.** Guards shall be provided where appliances, equipment, fans or other components that require service and roof hatch openings are located within 10 feet (3048 mm) of a roof edge or open side of a walking surface and such edge or open side is located more than 30 inches (762 mm) above the floor, roof or grade below. The guard shall extend not less than 30 inches (762 mm) beyond each end of such appliances, equipment, fans, components and roof hatch openings and the top of the guard shall be located not less than 42 inches (1067 mm)

above the elevated surface adjacent to the guard. The guard shall be constructed so as to prevent the passage of a 21-inch-diameter (533 mm) sphere and shall comply with the loading requirements for guards specified in the Florida Building Code, Building.

**301.12 Wind resistance.** Mechanical equipment, appliances and supports that are exposed to wind shall be designed and installed to resist the wind pressures on the equipment and the supports as determined in accordance with the Florida Building Code, Building. Roof mounted mechanical units and supports shall be secured to the structure. The use of wood "sleepers" shall not be permitted.

**A/C DISCONNECTS:** The plans must show the electrical disconnect for A/C equipment, as required by NEC 440.14. Location: Disconnecting means shall be located within sight and readily accessible from the air-conditioning or refrigerating equipment. The disconnecting means shall be permitted to be installed on or within the air-conditioning or refrigerating equipment.

**Accessible, Readily:** (Readily Accessible.) Capable of being reached quickly for operation, renewal, or inspections, without requiring those to whom ready access is requisite to climb over or remove obstacles or to resort to portable ladders, chairs, etc.

Required by FBC 1509.7 Mechanical units. Roof mounted mechanical units shall be mounted on curbs raised a minimum of 8 inches (203 mm) above the roof surface, or where roofing materials extend beneath the unit, on raised equipment supports providing a minimum clearance height in accordance with Table 1509.7.

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**ROOF SYSTEM PERMIT  
APPLICATION**

Application must be completed in ink or typed. All signatures must be notarized. All sections of the application must be accurately completed including the Work Description with a thorough description of all work proposed by this application. All required supporting documents, engineering, plans, etc., must be submitted for the application to be valid for review.

**OFFICE USE ONLY**

PERMIT # PP: \_\_\_\_\_

Fees Due: \$ \_\_\_\_\_

Receipt #: \_\_\_\_\_

**REVIEWED UNDER FLORIDA BUILDING CODE SIXTH EDITION AND STATE STATUTES**

**Amount of contract: \$** \_\_\_\_\_ If contract/price is \$2,500 or more, a recorded Notice of Commencement is required to be submitted prior to the issuance of the permit.

**JOB SITE**

PROJECT/COMPLEX NAME (IF ANY): \_\_\_\_\_

STREET ADDRESS: \_\_\_\_\_ UNIT #: \_\_\_\_\_

COUNTY:  MANATEE  SARASOTA LOT (S) #: \_\_\_\_\_ PARCEL ID #: \_\_\_\_\_

**ROOF SYSTEM PERMIT APPLICANT**  **PROPERTY OWNER IS APPLICANT** (if yes, skip below to property owner information)

NOTE: Registered Contractor must be licensed in the county project is located

LICENSES: STATE #: \_\_\_\_\_ MANATEE CO: \_\_\_\_\_ SARASOTA CO: \_\_\_\_\_

APPLICANT/QUALIFIER NAME: \_\_\_\_\_ PHONE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ FAX: \_\_\_\_\_

STREET: \_\_\_\_\_ OTHER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**PROPERTY OWNER (required)**

NAME AS ON PROPERTY RECORD: \_\_\_\_\_ PHONE: \_\_\_\_\_

COMPANY NAME: \_\_\_\_\_ FAX: \_\_\_\_\_

STREET: \_\_\_\_\_ OTHER: \_\_\_\_\_

CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

**WORK DESCRIPTION:**

- REPAIR** The process of repairing/replacing less than 100 square feet/ 1 roofing square of roof covering does not require a permit. A Binding Interpretation of Minor Work Form shall be submitted in this scenario.
- ROOF RECOVER** The process of installing an additional roof covering over a prepared, existing roof covering without removing the existing roof covering.
- RE-ROOF** The process of recovering or replacing an existing roof covering.
- NEW ROOF** Roof for new construction.

**EXISTING PRINCIPAL STRUCTURE - DESCRIPTION OF STRUCTURE**

Type of Construction:  I-A  I-B  II-A  II-B  III-A  III-B  IV  V-A  V-B

Building is Flood Code:  Conforming  Non-Conforming Year Built: \_\_\_\_\_ Fire Sprinklered?  Yes  No

Flood Zone Designation for Building: \_\_\_\_\_ Total number of Stories from grade: \_\_\_\_\_

**ROOF SYSTEMS DATA:** (If necessary attach a separate sheet for additional roof systems covered under this permit.)

1. Location of work (e.g., lanai; garage; front of house): \_\_\_\_\_
  2. Total work area in squares: \_\_\_\_\_ 3. Roof pitch at work area: \_\_\_\_\_
  4. Weight and type of materials used: \_\_\_\_\_
  5. NOA or Florida Product #: \_\_\_\_\_ 6. Mfr's Name: \_\_\_\_\_
  7. Insulation R value (if any): \_\_\_\_\_ 8. Existing Deck Material: \_\_\_\_\_
  9. Are there any HVAC components located on the area of roof where work will occur?  No  Yes  
If "YES" see "Plans Requirements: Roofing Work Involving Mechanical Systems." An Electrical Permit Application and HVAC Permit Application must accompany this Roof System Permit Application.
  10. Is any decking planned to be replaced?  No  Yes: Approx S.F. area to be replaced: \_\_\_\_\_  
What type decking will be installed (materials)? \_\_\_\_\_
  11. Are any of the roof rafters or truss system needing repair?  No  Yes
- < After Roof Recovering or Re-roof work has begun, if truss/deck replacements or repairs are found to be needed, contact the Building Inspector immediately to determine whether a structural Roof Replacement Building Permit is required.
  - < If separate Building Permit for structural Roof Replacement is required, it shall be obtained by a Florida State Licensed General, Building or Residential contractor, as defined by FS 489.105 (3) (a)(b)(c).
  - < See Roof System Mitigation Techniques related to Hurricane Mitigation Retrofits as specified by FS 553.844.

**OWNER AFFIDAVIT Applicable only to owners acting as their own contractor**

I am applying for a construction permit pursuant to the owner/builder exemption set forth in Florida Statutes Section 489.103 and Florida Building Code 105.3.6.

**Florida Statutes Section 489.103 DISCLOSURE STATEMENT** State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor with certain restrictions even though you do not have a license. You must provide direct, onsite supervision of the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building, provided your costs do not exceed \$75,000. The building or residence must be for your own use or occupancy. It may not be built or substantially improved for sale or lease. If you sell or lease a building you have built or substantially improved yourself within 1 year after the construction is complete, the law will presume that you built or substantially improved it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person to act as your contractor or to supervise people working on your building. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances. You 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 your building who is not licensed must work under your direct supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

**Florida Building Code 105.3.6 ASBESTOS ABATEMENT DISCLOSURE STATEMENT:** State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licensed required by state law and by county or municipal licensing ordinances. **Owner's Initials:** \_\_\_\_\_

**WARNING TO OWNER:** Your failure to record a notice of commencement may result in you 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.

**Applicant's Affidavit:** I certify that all the information is accurate and complete. I further certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for applicable independent trade work associated with the building permit. **Note:** If owner is applying for this permit as a contractor under F.S. 489.103 (and applicable Florida Building Code), said owner must personally appear at the Town Planning, Zoning and Building Department to sign this application form and submit a completed Owner Affidavit Form.

Signature: \_\_\_\_\_ Print Name: \_\_\_\_\_

**NOTARY of the State of Florida** County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, by \_\_\_\_\_ who is personally known to me or who has produced \_\_\_\_\_ as identification.

\_\_\_\_\_  
Signature of Notary Public, State of Florida SEAL: