

Planning Department 324 S Berthe Ave, Callaway, FL 32404 Phone (850) 871-1033 www.callaway.com

### RESIDENTIAL INDIVIDUAL LOT DEVELOPMENT ORDER APPLICATION

Incomplete submittals will not be reviewed.

The Building Department requires separate forms and fees to obtain building permits.

The address of the property must be posted prior to submittal.

1	Two complete sets of plans drawn to scale including:				
	<ul> <li>A site plan with square feet of living, total square feet, impervious surface, and setbacks.</li> <li>Setbacks are measured from the building (not including overhang) to property line.</li> </ul>				
	<ul> <li>Floor plan, indicating all bearing walls, fixtures and exterior hose bibs.</li> </ul>				
2	New address letter from Bay County (if applicable)				
3	Complete driveway and piping application				
4	Complete water and sewer allocation application				
5	Complete customer service application (either notarized or include copy of current photo ID)				
6	Complete transportation impact worksheet				
Appli	cant Phone				
Proje	oct Address Date				
	(Do not write below this line)  ElevationLand Use DistrictFlood ZoneTotal Square Feet				
	Connection feesSet Meter feeAccount Deposit feeC.A. fee				
	Driveway Permit fee WaterSewer Transportation Impact fee				
	First Check Second Check Total Impact fees				
	Reviewed byDate				

#### **DESCRIPTION** Project Address: Lot square footage: \_\_\_\_\_\_ Dwelling square footage: \_\_\_\_\_ Driveway square footage: \_\_\_\_\_\_ Accessory structure square footage: \_\_\_\_\_ Pool square footage: Patio/deck square footage: Setbacks: Front: Right: Setbacks in feet for accessory uses (including pools and sheds). from rear property line: \_\_\_\_\_\_ from primary structure: \_\_\_\_\_ Setback minimums are 25' in front, 5' on the side (10' on side abutting corner), and 15' in the rear or 20' if abutting a street. Setbacks are measured from the building, not including overhang, to any natural or manmade feature (such as a road, body of water or property line). Districts zoned R-5, R-5M, R-6, and R-6M have front setbacks of 20'. These setbacks are for residential use only. Commercial setbacks differ. Please double check your setbacks. Floor area ratio: \_\_\_\_\_ Lot coverage: \_\_\_\_\_ Building height in feet: \_\_\_\_\_ Impervious surface: \_\_\_\_\_ Landscape buffers: (height x width) Flood zone:\_\_\_\_\_ (Flood zone classification other than X will require elevation certificate)

LDR Section 15.715.6.2a – PROVISIONS FOR FLOOD HAZARD REDUCTION reads: Residential Construction. New construction or substantial improvement of any residential building (or manufactured home) shall have the lowest floor, including basement elevated no lower than one foot above the base flood elevation or seven feet above the mean sea level, whichever is greater. Should solid foundation perimeter walls be used to elevate a structure, openings sufficient to facilitate the unimpeded movements of flood waters shall be provided in accordance with standards of paragraph (c).

Elevation:

#### **Development Application Checklist**

1. Development order application					
2. Address application (Bay County)					
3. Driveway and piping permit application					
4. Water and sewer allocation application					
5. Customer service application					
6. Transportation impact fee worksheet					
7. V Zone Certificate (if applicable)					
8. All parcels over 1 acre in size will need to submit an erosion and sedimentation control/waste control plan (NPDES)					
9. 3 Complete sets of plans to include:					
<ul> <li>site plan</li> <li>foundation plan</li> <li>floor plan</li> <li>elevations</li> <li>wall section foundation through the roof (drawn to scale)</li> </ul>					
10. Complete building permit application					
11. All applicable fees paid (retail impact fees, wholesale impact fee, driveway fee, certificate of acceptance fee, transportation impact fee, and building permit fee)					
12. Flood Elevation Certificate (if applicable)					
13. Energy forms					
14. Notice of commencement					

Items 12, 13, and 14 are Building Department requirements only. They do not need to be submitted in with the rest of the application.

Permit#	
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# Public Works Department 324 S Berthe Avenue, Callaway, FL 32404 Phone (850) 871-1033 www.cityofcallaway.com DRIVEWAY AND PIPING PERMIT

I,, of (address)	•
I,, of (address) request permission for the construction of the following on the City of Callaway right-of-way at:	
Phone:	
Address of project	
<ul> <li>Copy of deed or other proof of ownership is required</li> </ul>	
Description of project:	
New Residential Existing Residential Driveway Only Storm water Pipe	
Will you be purchasing sod? YES:NO: The City of Callaway will lay the sod upon completion of all ground work for existing residential only. The purchase of sod is optional.	
<ul> <li>The driveway shall be constructed in accordance with the City of Callaway specifications.</li> <li>For traffic access area installation shall be with Reinforced Concrete Pipe (RCP) only.</li> <li>For the remainder of the ditch not directly under the driveway path, High Density Polyethylene Pipe may be used instead of RCP.</li> <li>The City of Callaway, Public Works Department shall assign the diameter of the pipe.</li> <li>The property must have an address posted and the construction area must be flagged in order for pipe to be delivered.</li> <li>For a previously undeveloped lot, the FULL extent of the ditch must be piped in before the City will issue a Certificate of Acceptance.</li> <li>This permit will only be valid for 90 days from date of the application and a new permit will be required if the date is beyond 90 days from receipt.</li> </ul>	
The applicant shall save and keep the City of Callaway harmless from any and all damages, claims, or injuries that m occur by reason of this construction of said facility.	a
The applicant binds and obligates himself to conform to the above description and attached sketch and to abide by th driveway regulations stated above.	е
All driveway and piping permit fees shall be paid prior to the issuance of a Certificate of Acceptance and prior to the commencement of any work by the City of Callaway. Price of the material may be subject to change.	
Signature of applicant Date	

#### TO BE COMPLETED BY THE STREET SUPERINTENDENT

Permit fee:					
			Driveway	\$	
			Ditch	\$	
Concrete Pipe:					
Pipe diameter:	inches at	linear feet =\$_			
HDPE Pipe:					
Pipe diameter:	inches at	linear feet =\$_			
			SUBTOTAL	- \$	
Sod sq. ft.:	Pallets:		SOD	\$	
			TOT	AL s	
Signature of Street Sup	pervisor:	Date n	otified:		
Notified by:					

### INSPECTION REPORT (Contractors Only)

	Please Print
Phone Number:	
COMMENTS:	
Passed inspection: Fai	
More dirt on the Right of WayPipe too high	
Pipe too low Pipe joints not sealed	
Inspector signature and title:	
**For a previously undeveloped lot, the FULL extends of Acceptance.	ent of the ditch must be piped in before the City will issuea Certificat
**The City will not provide any equipment or mate 24 hours of work completion for a final inspection	erial for work on the site. The City of Callaway must be called within
The applicant will save and keep the City of Calla occur by reason of this construction of said facility	way harmless from any and all damages, claims, or injuries that may
The applicant binds and obligates himself to confo driveway regulations stated above.	orm to the above description and attached sketch and to abide by th
All driveway and piping permit fees must be paid commencement of any work by the City of Callaw	prior to the issuance of a Certificate of Acceptance and prior to the vay. Price of the materials is subject to change.
Signature of applicant	Date



#### Public Works Department 324 S Berthe Avenue, Callaway, FL 32404 Phone (850) 871-1033 www.cityofcallaway.com

#### APPLICATION FOR WATER/SEWER ALLOCATION

( ) Water Only ( ) Sewer Only ( ) Water/Sewer	( ) Residential ( ) Commercial ( ) Irrigation Meter			
Date:	( ) imgation weter			
Name:				
Address:				
Phone:				
Project Information				
Project address:				
(If different from above ac	ddress)			
Is this project located within the city limits of Callaway? () YES (	() NO			
Additional Information Required:				
** A complete set of blue prints or working drawings indicating all This includes dishwasher, hose bibs, and icemakers. ** A site plan.	-			
** Additional certifications, plans and permits maybe required for	construction in specific areas.			
If Irrigation Meter Is To Be Installed:				
** Number of rotating sprinkler heads:				
** Number of non-rotating sprinkler heads:				
** Number of hose bibs: Size: ** Unless otherwise specified, a ¾" irrigation meter will be used for	ion autimostico di co			
Onless outerwise specified, a 74 Inigation meter will be used to	or estimating price 1			

Applicant acknowledges receipt of this application or any of the attached documents by the City of Callaway does not constitute a grant or reservation of sewer allocation or the approval of the application by the City.

Applicant acknowledges responsibility to pay all costs and expenses incident to the installation and connection of the building water/sewer. Applicant shall indemnify the City from any loss or damage that may directly or indirectly be occasioned by the installation of the building utility. Fees may include, but shall not be limited to labor, equipment, material, engineering, permitting, connection, and deposit and impact fees. I understand the connection fees are <u>NON-REFUNDABLE</u>.

For any application outside the city limits, a 25% surcharge will be added to the total connection/impact fees for service.

Note: If other governmental permits are required additional time and cost may be incurred to obtain these permits.

All impact fees incurred must be paid at the time of the connection fees.

I have read and understand the information described in this application.

Applicant's signature:		Date:	
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"East Bay at its Best"

Utility Billing Department 6601 E Hwy 22, Callaway, FL, 32404 Phone (850) 871-6000 Fax (850) 871-2444 www.cityofcallaway.com

#### UTILITY SERVICE APPLICATION INFORMATION

- Present your photo ID, military ID or any other valid photo ID
- A copy of <u>either</u>: documented proof of ownership; a signed lease agreement; valid sales agreement; signed realtors listing agreement OR notarized letter of authorization from the property owner ( if the applicant is not the owner)
- A secondary name may be added to a customer's account with equal access and authority. Both account holders will be equally responsible for any unpaid balance
- There is a non-refundable account fee of \$10.00
- Current deposit amount: \$250.00 ( Active Duty Military \$100.00)
- If an applicant has a past due balance owed to the City for prior service at any location, that balance must be paid in full
- Complete notarized applications with legible supporting documents are accepted by fax
- Incomplete applications will not be processed
- Same day connections are available if received by 3:00 P.M.

NOTE: When the water meter is unlocked and turned on and there's water running on the premises, the city technician will turn the meter back off but will leave the meter unlocked so the occupant can turn the water on. If the technician is required to make a second service call to turn the meter on, a \$25 service charge must be paid prior to technician being sent.



## Utility Billing Department 6601 E Hwy 22, Callaway, FL, 32404 Phone (850) 871-6000 Fax (850) 871-2444 www.cityofcallaway.com

#### UTILITY SERVICE APPLICATION

Drimary Assount Name		PLEASE PRINT OR TYPE		
Primary Account Name_	Last	First	Middle	
Secondary Account Nam	e			
	Last	First	Middle	
Service Address:				
Mailing Address:(If different than service address)			Zip Code	
Driver's License:			•	
Date of Birth:	Number Prima	ry Phone		
Secondary Phone		Email (Optional):		
Employment:				
Date for Service to Begin	;	Check One Box: Unlock M	Meter Only OR Turn on Meter	
as billed and accept total respon collection of the unpaid balance. provided at the service location memployees HARMLESS of author damage as a result of water connection.	rater/sewer/solid waste service rehase date or lease comment is ibility for payment of all chall am also responsible for an all be turned on without applicite izations made on behalf of a cection.    Columbia	ce date unless otherwise stated on legal do arges incurred for the services provided, in by damages done to any meters at this loc ant or applicant's representatives present. account holder or a secondary account hold	application is true and correct to the best of my known currented agreement. I understand that all charge including reasonable attorney's fees and costs increation by me or anyone else. I consent that water Applicant further agrees to hold the City of Callawar and or should the property, building(s) or premiser and or should the property, building(s) or premisers agreement.	s are due curred for services ay and ils ses incur
	•			
Date:	_ Secondary Applican	ts' Signature:		
	ne this day of	20 . by	, who is personally known to me or wh	o has
NOTARY PUBLIC: PRINT NAME: MY COMMISSION EXPIRES				
METER #		READ		
TECH	DATE	TIME		
COMMENTS		July 2, 2018		
		July 2, 2010		

# City of Callaway Transportation Impact Fee Worksheet Residential Uses

- Philodilli	Property Address:	ddress;	
TE Code:	Select Land Use Type:	Check which Applies:	# of Unit(c).
210	Single Family Detached (includes Mobile Homes and Manufactured Homes on Single Family Lots)		- com(a).
220	Multi-Family Unit	7	
230	Attached Residential	· · ·	**************************************
240	Mobile Home Park (Per Lot)		1
	(1 e) FOI)	( )	

#### **EPCI**BUILDING DEPARTMENT

#### APPLICATION FOR BUILDING PERMIT

DATE;	_Permit#	Permit Fee	
OWNER'S NAME:			-
ADDRESS:			
		_PHONE#	
		);	
ADDRESS:			
		_PHONE#	<del></del>
ADDRESS:			
		PHONE #	***************************************
		COMPETENCY CARD #	
ADDRESS OF PROJECT:			
PROPOSED USE OF SITE:			
		ET FROM ANY BODY OF WATER?YES	NO
		CT PLEASE LIST THE NAME OF THE BUSINE	SS:
BONDING COMPANY:			
ADDRESS:	CI1	TY, STATE & ZIP:	
ARCHITECT'S/ENGINEER'S NAME:			
ADDRESS:	C17	TY, STATE & ZIP:	
MORTGAGE LENDER'S NAME:			
ADDRESS;	cm	/, STATE & ZIP:	
		EWER SYSTEM PROVIDER:	
PRIVATE WATER WELL:	SI	EPTIC TANK PERMIT NUMBER:	

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that NO WORK or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for electrical work, plumbing, signs, roofing, pools, furnaces, boilers, heaters, tanks, and air conditioners, etc.

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PURPOSE OF BUILDING:			
Single Family	Townhouse	Commercial	Industrial
Duplex	Swimming Pool	Storage	Sign
Multi-Family	Demolition	Olher	
Addition, Alteration or R	enovation to building		
Distance from property lines R. Side	: FrontRe	arL Sid	e
Cost of Construction &	ood Zono	Square Footage	
Area Heated/Cooled	# Of Stories	Lowest Floor Elevation	iile
Type of Roof	Type of Walls	Type of Flo	0f
EPIFloated Floated Float	Length	HeightW	īdth
FINANCING, CONSULT NOTICE OF COMMENC more, a certified copy of application is made for a with an affidavit attestin provided to this Departm the documents that have NOTICE: EPCI: The Cal RESTRICTIONS or COV OWNER'S AFFIDAVIT:	WITH YOUR LENDER EMENT. For improveme the Notice of Commence permit or the applicant m g to its recording. A count before the second or been certified may be do laway Building Department ENANTS on properties.	to Your Property. It or an Attorney Into to real property with ment is required to be sultary submit a copy of the partified copy of the Notic any subsequent inspect the by mail, facsimile or ha int does not have the authorization contained in this	
Signature of Owner or Ager	ıt	Signature of C	ontractor
Date:		Date:	
Notary as to Owner or Ager	ıt	Notary as to C	
		Hotaly as to C	onu actor
My Commission expires:		My Commission	on expires:
APPLICATION APPROVE	D BY:	BUILD	ING OFFICIAL.