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

ADDITION
DEVELOPMENT ORDER APPLICATION

Items that must be submitted with application:
Incomplete submittals will not be reviewed

• A survey with the addition drawn and setbacks shown
  OR
• A site plan drawn to scale with lot dimensions plus the addition setbacks shown

Contractor
Contact person:______________________________________________________________
Date of application:______________________________________________________
Name:______________________________________________________________
Address:_______________________________________________________________
City:________________________ State:________________________ Zip code:________
Phone:________________________ Email:________________________

Applicant
Name:______________________________________________________________
Address:______________________________________________________________
City:_________ Callaway State:_________ Florida Zip Code:_________ 32404
Phone:________________________ Email:________________________
Height of primary structure: __________________________ Height of the addition: _______________________
Lot square footage: __________________________ Dwelling footprint square footage: _______________________
Driveway square footage: __________________ Accessory structure square footage: ______________________
Pool square footage: __________________________ Patio/deck square footage: __________________________
Impervious surface square footage: __________________ Flood zone: __________
Will water fixtures be included in accessory structure? Y N How many?: __________

**Setbacks**

From primary structure: __________________________

Left side: __________________________

Right side: __________________________

Rear: __________________________

*No such building or structure shall be located nearer than five (5) feet to any property line and not closer than ten (10) feet to the principle structure. Setbacks are measured from the building, not including overhang. An additional setback from a lot line of one (1) foot shall be required for each foot of total building or structure height exceeding eleven (11) feet until a setback of ten (10) feet is reached.*

Applicant Signature: __________________________ Date: __________________

Approved by: __________________________ Date: __________________

The City of Callaway will prepare the permit document based on the information provided by the applicant or mover and will not be held responsible or liable for falsified information provided to them. In addition, all information provided to the applicant by the City must be in writing and endorsed by a proper authority.
APPLICATION FOR BUILDING PERMIT

DATE: ___________________________ Permit # ___________________________ Permit Fee ___________________________

OWNER'S NAME: __________________________________________________________

ADDRESS: ______________________________________________________________

CITY, STATE & ZIP CODE: __________________________ PHONE # __________________________

FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): __________________________

ADDRESS: ______________________________________________________________

CITY, STATE & ZIP CODE: __________________________ PHONE # __________________________

CONTRACTOR'S NAME: ______________________________________________________

ADDRESS: ______________________________________________________________

CITY, STATE & ZIP CODE: __________________________ PHONE # __________________________

STATE LICENSE NUMBER: __________________________ COMPETENCY CARD # __________________________

ADDRESS OF PROJECT: ______________________________________________________

PROPOSED USE OF SITE: ______________________________________________________

WILL THE STRUCTURE BE LOCATED AT LEAST 30 FEET FROM ANY BODY OF WATER? YES ___ NO ___

PROPERTY PARCEL ID #: _____________________________________________________

LEGAL DESCRIPTION OF PROPERTY: __________________________________________

IF THE APPLICATION IS FOR A COMMERCIAL PROJECT PLEASE LIST THE NAME OF THE BUSINESS:

BONDING COMPANY: _________________________________________________________

ADDRESS: __________________________ CITY, STATE & ZIP: __________________________

ARCHITECT'S/ENGINEER'S NAME: _____________________________________________

ADDRESS: __________________________ CITY, STATE & ZIP: __________________________

MORTGAGE LENDER'S NAME: ________________________________________________

ADDRESS: __________________________ CITY, STATE & ZIP: __________________________

WATER SYSTEM PROVIDER: __________________________ SEWER SYSTEM PROVIDER: __________

PRIVATE WATER WELL: __________________________ SEPTIC 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.
PURPOSE OF BUILDING:

___ Single Family  ___ Townhouse  ___ Commercial  ___ Industrial
 ___ Duplex  ___ Swimming Pool  ___ Storage  ___ Sign
 ___ Multi-Family  ___ Demolition  ___ Other

___ Addition, alteration or renovation to building ________________________________

Distance from property lines: Front ___________ Rear ___________ L. side ___________
R. side ______

Cost of construction $ ___________________ Square footage ___________________
EPI ___________________ Flood zone ___________________ Lowest floor elevation ___________

Area heated/cooled ______________ # of stories ___________ # of units ___________

Type of roof ___________________ Type of walls ___________________ Type of floor ___________

Extreme dimensions of: Length ___________ Height ___________ Width ___________

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. For improvements to real property with a construction cost of $2,500 or more, a certified copy of the Notice of Commencement is required to be submitted to this Department when application is made for a permit or the applicant may submit a copy of the Notice of Commencement along with an affidavit attesting to its recording. A certified copy of the Notice of Commencement must be provided to this Department before the second or any subsequent inspection can be performed. Filing of the documents that have been certified may be done by mail, facsimile or hand delivery.

NOTICE: EPCI: The Callaway Building Department does not have the authority to enforce DEED RESTRICTIONS or COVENANTS on properties.

OWNER'S AFFIDAVIT: I hereby certify that the information contained in this application is true and correct to the best of my knowledge. And that all work will be done in compliance with all applicable laws regulating construction and zoning.

Signature of Owner or Agent ________________________________________________
Date: ________________________________

Notary as to Owner or Agent ________________________________________________
My Commission expires: ________________________________

Signature of Contractor ________________________________________________
Date: ________________________________

Notary as to Contractor ________________________________________________
My Commission expires: ________________________________

APPLICATION APPROVED BY: ________________________________ BUILDING OFFICIAL.