



Community Development Department

Building Construction Division

18400 Murdock Circle | Port Charlotte FL 33948
Building Phone: 941.743.1201 | Building Fax: 941.764.4907
Zoning Phone: 941.743.1964 | Zoning Fax: 941.743.1598
BuildingConstruction@CharlotteCountyFL.gov
CharlotteCountyFL.gov

"To exceed expectations in the delivery of public services"

For Office Use Only
Permit Number
2 0 _____
Application Date

CSR

OWNER -BUILDER STATEMENT

DISCLOSURE STATEMENT (F-S 489.103.7.b)

PLEASE READ THIS STATEMENT CAREFULLY.

FAILURE TO COMPLY WITH THIS STATEMENT SHALL RESULT IN YOUR PERMIT BEING REVOKED BY THE BUILDING OFFICIAL AND MAY RESULT IN FINES UP TO \$10,000.

Initials I understand that State law requires construction to be done by licensed contractor and have applied for an owner/builder permit under an **exemption** to that law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.

Initials I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.

Initials I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.

Initials I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.

Initials I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.

Initials I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property.

Initials I understand that I 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 my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at **(850) 487-1395** or **www.myfloridalicense.com/dbpr/pro/cilb/index.html** for more information about licensed contractors.

Initials I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

A recorded Notice of Commencement is required in the Permitting Office prior to the first inspection.



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Licensed contractors are regulated by laws designed to protect the public. **If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint.** Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

<input type="text"/> Initials	I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that <u>I am the party legally and financially responsible</u> for the proposed construction activity at the following address: <table border="1" style="width: 100%;"> <tr> <td style="width: 40%;">Number and Street</td> <td style="width: 30%;">City</td> <td style="width: 30%;">Zipcode</td> </tr> </table>	Number and Street	City	Zipcode
Number and Street	City	Zipcode		

<input type="text"/> Initials	I agree to notify <u>Charlotte County Building Construction Services</u> immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.
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CHECK THOSE CONTRACTOR CATEGORIES WHICH WILL BE DONE BY THE OWNER:

- | | | | | |
|-------------------------------------|--|-------------------------------------|---|--|
| <input type="checkbox"/> A/C & Heat | <input type="checkbox"/> Plumbing | <input type="checkbox"/> Insulation | <input type="checkbox"/> Cement, Concrete, Masonary | <input type="checkbox"/> Painting and Wallcovering |
| <input type="checkbox"/> Electric | <input type="checkbox"/> Roofing | <input type="checkbox"/> Carpentry | <input type="checkbox"/> Ceramic/Marble/Terrazzo | <input type="checkbox"/> Spa /Swimming Pools |
| <input type="checkbox"/> Aluminum | <input type="checkbox"/> Solar Systems | <input type="checkbox"/> Drywall | <input type="checkbox"/> Plaster/Stucco/Spraycrete | <input type="checkbox"/> Other (Detail Below) |

I have read the above statement and agree to abide by it

Signature of Owner

Printed Name of Owner

Sworn to (or affirmed) and subscribed before me this _____ day of _____ 20____ by _____

Personally Known OR Produced Identification Type of Identification _____

Notary Name (Printed) _____

Notary Signature _____ Commission Number _____

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