HARLOTTE COUNTY	Zonin 18400 Murdock Circle, I Building Phone: 941.7 Zoning Phone: 941.7 <u>www.Zoning@(</u> <u>www.Char</u>	43.1201   Fax: 941.764.4907 13.1964   Fax: 941.743.1593 CharlotteCountyFL.gov lotteCountyFL.gov	,	For Office Use Only Permit Number 20 Application Date Zoning Tech. Signature
<ul><li>Accessory Affidate</li><li>Notice of Commentation</li></ul>	it application o scale or survey showing locati	s over \$5,000.00) Will thi	ies)	is a baby barrier?
Address:	O be completed(Type of m (Address) Building #:	(City)	(State)	
Address:	(Address)	(City)	(State)	(Zip)
Address:	(Address) Number:	(City) Phone Nu	(State)	(Zip)
installation has comm of all laws regulating <b>Owners' affidavit:</b> I h in compliance with al WARNING TO OWNER <b>TWICE FOR IMPROV</b> POSTED ON THE JOB LENDER OR ATTORNE <b>NOTICE:</b> In addition to that may be found in governmental entities <b>Under penalties of p</b>	made to obtain a permit to do to enced prior to issuance of a per- construction in this jurisdiction. ereby certify that all the forego applicable laws regulating const <b>YOUR FAILURE TO RECORD A</b> <b>EMENTS TO YOUR PROPERTY</b> . SITE BEFORE FIRST INSPECTION. Y BEFORE COMMENCING WORL of the requirement of this permit, the public records of the Court s such as water management dis- erjury, I declare that I have re- iance with the applicable regul	rmit and that all work will be ing information is accurate a struction and zoning. <b>NOTICE OF COMMENCEME</b> A NOTICE OF COMMENCE IF YOU INTENT TO OBTAIN I < OR RECORDING YOUR NOT there may be additional rest nty, and there may be additi stricts, state, or federal agen ead the foregoing documen	performed to m nd that all work <b>NT MAY RESULT</b> MENT MUST BE FINANCING, CON ICE OF COMMEN crictions applicab onal permits rec cies.	eet the standards will be completed IN YOUR PAYING RECORDED AND SULT WITH YOUR ICEMENT. le to this property guired from other
Contractor/Owner Bu Print Name:	ilder Signature:		Date:	
within 180 days from	id if construction is not started date of issue. An approved inspe e of a permit may result in a per	ection will extend the permit	for an additional	-
		R	evised De	<b>1</b>   Page c. 2023LF



# **Community Development Zoning Division**

18400 Murdock Circle, Port Charlotte, FL 33948-1094 Building Phone: 941.743.1201 | Fax: 941.764.4907 Zoning Phone: 941.743.1964 | Fax: 941.743.1593 www.Zoning@CharlotteCountyFL.gov www.CharlotteCountyFL.gov

For Office Use Only

Permit Number

20

**Application Date** 

Zoning Tech. Signature

## **Affidavit of Applicant**

I, the undersigned, being first duly sworn, depose and say that I am the owner, attorney, attorney-in-fact, agent, lessee or representative of the owners of the majority of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all sketches, data and other supplementary matters attached to and made a part of the application are honest and true to the best of my knowledge and belief. I understand this application must be complete and accurate before the application may be considered, and that if I am not the owner of the property, I have attached a notarized authorization from the owner(s) to submit with this application.

State of	, County of	
The foregoing instrument w	vas acknowledged before me, by means of	physical presence or
online notarization, this	day of	, 20, by
	who is personally known to me o as identification and who did/did not ta	•
Signature of Notary	Signature of Applican	t

Printed Name of Notary

**Commission Number** 

Property Owner's Consent			
I,(print name	e), property owner of		
do hereby give	permission to file this application to allow		
the use of this property for:			
State of, Count	y of		
The foregoing instrument was acknowledged bef			
online notarization, this day of	, 20, by		
	who is personally known to me or		
who has produced	as identification and who did/did not take		
an oath.			
Signature of Notary	Signature of Property Owner		
Printed Name of Notary			
Commission Number			



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Permit Number

Application Date

20

Zoning Tech. Signature

#### Affidavit for Accessory Structures

Property Address:			
(Address)	(City)	(State)	(Zip)
Owners' Name:			
Owner/Agent Signature:			

I, the undersigned applicant, being first duly sworn, depose and say that I am the owner, attorney, attorney-in-fact, agent, contractor, lessee or representative of the owners of the majority of the property described and which is the subject matter of the proposed application; that all answers to the questions in this application, and all site plans, sketches, data and other supplementary matters attached to and made a part of the application are honest and true to the best of my knowledge and belief. Any costs, expenses, liens, lawsuits, and liabilities that arise from the issuance of this permit regarding building location is the sole responsibility of the contractor and property owner. It is also understood that the County does not verify the final location of structures or their setbacks and that all structures must be located in compliance with required setback regulations, and that all permit and license requirements apply. Additionally, the structure covered by this affidavit shall be compliant with all county codes and regulations. If non-compliance is discovered, a code enforcement case may be opened and pursued. Under penalties of perjury, I declare that I have read the foregoing document and that facts stated are true, correct and in compliance with the applicable regulations. F.S.92.525

Please initial each statement below if applicable:				
 Initials	Where a property survey is not available, all site plans, drawings or sketches must be drawn to scale and shall include all buildings, easements, and setbacks. Note: Real Estate Services may be contacted at 941-764-5588 for information regarding easements.InitialsThe above-described property does not require the removal of any trees (four 			
Initials				
Initials	<ul> <li>Structures that do not require a zoning instancessory structure below:</li> <li>Accessory Structures Under 250 Square Feet</li> <li>Boat Dock (Replacement ONLY)</li> <li>Boat Lift (Natural Body of Water or Replacement ONLY)</li> <li>Canopy/Boat Canopy</li> </ul>	<ul> <li>Spection, please check the applicable</li> <li>Carport in Mobile Home Park</li> <li>Fence (Excludes Baby Barriers)</li> <li>Non-Structural Slab/Driveway</li> <li>Shed Under Carport</li> </ul>		



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### Some Requirements for Residential Fences

Fences and walls follow Charlotte County Code of Laws & Ordinances, Chapter 3-9, Article III, section 3-9-72.

Chain Link and Wood Fences must be six feet (6'), or less, in height.

Height is measured from natural grade (Masonry fences are considered Walls and require a Building Permit).

All fences and walls shall be installed with the finished side facing the adjacent property or the public right-of-way. All fence posts must be located on the inside of the fence facing the property on which the fence is located unless the fence is designed and constructed to look the same on both sides. No element of fences and walls shall encroach on an adjacent lot or right-of-way.

Gates, columns, posts, and finials may exceed the maximum height of the fence by no more than one foot (1'). Pergolas or arches associated with a gate or entrance may be permitted up to ten feet (10') in height.

If the property abuts a waterbody, no fence or wall greater than four feet (4') in height shall be permitted closer than ten feet (10') to the Mean High-Water line, seawall, or the property line, whichever is more restrictive.

In all residential districts except Residential Estate (RE), side and rear setback requirements shall not apply to fences and walls six feet (6') high or less behind the minimum front setback line.

Front setback requirements shall not apply to opaque fences or walls three feet (3') high or less or non-opaque fences or walls four feet (4') high or less.

Properties located within the Babcock, Charlotte Harbor CRA, and Manasota Key Overlay will need additional review for compliance.

Please see the Zoning Department for details.



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## Charlotte County, Florida Charlotte County Easement Encroachment Agreement (For a Residential Fence ONLY)

l,	as owner of the			
(Print name of property owner)				
locate	ed atagreeagree			
(Specify type of easement)	(Property address)			
on this day of	(Property address) , 20, that I will move or replace said			
equipment at my own expense, in the event that Charlotte County or the easement holder				
ever deems it necessary to utilize the eas	sement at the above premises. I also agree to release			
and hold harmless the easement holder.	and hold harmless the easement holder. This agreement shall run with the land.			
Said property is located at the following address:				
(Street Address) (City/Town)	(State) (Zip Code)			
Owner's Signature:				
State of	, County of			
	dged before me, by means of physical presence			
	day of, 20, by			
W	who is personally known to me or who has			
produced	_ as identification and who did/did not			
take an oath.				
Notary Signature:	Notary Stamp:			

NOTE: This agreement must be recorded by the property owner with the Clerk of the Circuit Court prior to issuance of a residential fence permit, or placing the equipment in the easement, or obtain a Certificate of Occupancy, as may be applicable.

#### **NOTICE OF COMMENCEMENT**

State of Florida County of Charlotte		Permit Number:	Permit Number: Tax Folio or Parcel Number:		
		Tax Folio or Parcel Number:			
	e undersigned hereby gives notice that improvem lowing information is provided in this Notice of Cor	ent will be made to certain real property, and in accord mmencement.	dance with Chapter 713, Florida Statutes, the		
1.	Description of Property (a complete legal des	Description of Property (a complete legal description or parcel number; and a complete street address with city/state/zip code, if available			
2. 3.	General Description of Improvement:				
	a. Name:				
	b. Address:	City/State/Zip Code:			
	c. Interest in Property:				
	d. Name and Address of Fee Simple Title	Holder (if different from the Owner listed above):			
4.	Contractor Information:				
	a. Name:	Phone	Number:		
_		City/State/Zip Code:			
5.	<b>,</b>				
	a. Name:	Phone	Number:		
	b. Address:	City/State/Zip Code:			
6.					
	a. Name:	Phone Number	r:		
	b. Address:				
7.		City/State/Zip Code:			
8.	Name/Address/Phone Number: In addition to himself/herself, Owner d 713.13(1)(b) Florida Statutes:	esignates the following to receive a copy of	Lienor's Notice as provided in Section		
9.	Name/Address/Phone Number:				
CO PA SI CO Un	DNSIDERED IMPROPER PAYMENTS UNDER CH AYING TWICE FOR IMPROVEMENTS TO YOUR TE BEFORE THE FIRST INSPECTION. IF YOU I DMMENCING WORK OR RECORDING YOUR NO	E BY THE OWNER AFTER THE EXPIRATION OF HAPTER 713, PART I, SECTION 713.13, FLORIDA PROPERTY. A NOTICE OF COMMENCEMENT MUST INTEND TO OBTAIN FINANCING, CONSULT WITH TICE OF COMMENCEMENT. ve read the foregoing and that the facts in it are	STATUTES, AND CAN RESULT IN YOUR BE RECORDED AND POSTED ON THE JOB YOUR LENDER OR AN ATTORNEY BEFORE		
	gnature of Owner or Lessee, or Owner's or Lessee's ficer/Director/Partner/Manager	s Authorized Printed Name			
		Company Name and Title			
		Sworn to (or affirmed)			
	physical presence or $\square$ online notarization, this	day of, 20 by	(name of person making statement)		
	personally known, or $\Box$ produced identification with	h type of identification			
<u>Cir</u>	gnature of Notary Public	Drinted or Stamped Come	nissioned Name of Notary Public		
JUG			noordined marrie of motory rublic		

Notice of Commencement (Updated Dec 2021 | DJ: NoticeOfCommencement)