

**TOWN OF GOLDEN BEACH
DOCUMENTATION LOG**

Permit Number: _____
 Job Site Address: _____
 Owner's Name: _____
 Contractor's Name: _____

Date Documentation Log Given to Contractor: _____
 Contractor's Signature for Receipt of Log: _____
Acknowledgement of copy of Sect 14-84 Construction sounds

DESCRIPTION	RECEIVED DATE	COMMENTS
1. Recorded Variances		
2. Impact Fee Verification		
3. Notice of Commencement		
Posted at job prior to 1st Inspection and within 7 days of permit issuance - Certified Copy to Building Department Prior to 1st Major Inspect		
4. Soil Treatment		
5. Piling Certification		
6. Foundation Survey		
7. Certificate of Elevation		
8. For Issuance of Certificate of Occupancy/Completion		
a). Final Survey & Certificate of Elevation		
b). Statement of Inspections (Architect/Engineer)		
c). Inspection Log & Pile Certification		
d). Special Inspector as per FBC		
e). Insulation Certificate		
f). Roof Uplift Test		
g). Residential Pool Safety Act Affidavit		
h). Proof of Final Inspections		
i). Proof of Water Service Connection		
j). Proof of Impact Fee Payment		
k). Subcontractor Listing		
l). As-built Drawings		
m). Final Cost Affidavit		
Contractor		
Owner		

SAMPLE FORMAT

**This Form is for used by the Architect and/or Engineer of record.
Prepare this document on the letterhead of the responsible party.**

“STATEMENT OF INSPECTIONS”

[Date]

Town of Golden Beach
1 Golden Beach Drive
Golden Beach, Fl. 33160

Re: [Owners' Name, Project Address, Permit No.,
Contractor Name]

Dear Building Official:

I [Architect or Engineer], having performed and approved the required inspections, as indicated in the attached approved inspection log, hereby attest that to the best of my knowledge, belief and professional Judgment, the structural and envelope components of the above referenced structure are in compliance with the approved plans and other approved permit documents. I also attest to the best of my knowledge, belief and professional judgment, that the approved permit plans represent the as-built condition of the structural and envelope component of said structure.

This document is being prepared in accordance with the Florida Building Code and is being submitted to the Town of Golden Beach Building & Zoning Department at the time of the final inspection for the above referenced structure.

Should you have any questions or need any additional information, please do not hesitate to contact me.

Sincerely,

(signature of license holder)

Name: _____ License No. _____ (seal)

Company Name: _____ (if applicable)

**TOWN OF GOLDEN BEACH
BUILDING & ZONING DEPARTMENT
Residential Swimming Pool, Spa and Hot Tub Safety Act
Notice of Requirements**

I (we) acknowledge that a new swimming pool, spa or hot tub will be constructed or installed at:
_____, Golden Beach, Florida, and hereby affirm that one of the following methods will be used to meet the requirements of Chapter 515, Florida Statute and Section 424.2 of the Florida Building Code.

Please initial the method(s) to be used for your pool, spa, or hot tub:

- The pool will be equipped with an approved safety pool cover that complies with F1346-91. (Submit Manufacture's Specifications).
- A continuous one-piece (child) barrier meeting the requirements of Florida Building Code 424.2.17 will protect the pool perimeter. The plans shall show the fence location and method of attachment, including one end that shall not be removable with the aid of tools (Submit Manufacture's Specifications).
- A combination of non-dwelling walls and fences (child fence, masonry fence Walls, chain link or wood fence, etc.), will protect the pool perimeter. The plans must specify the type and location of all non-dwelling walls.
- Any combination of protection which incorporates dwelling walls with openings directly into the pool perimeter and that all doors will be equipped with exit alarms complying with the Florida Building Code. 424.2.17.1.9 (Submit Manufacture's Specifications).
- Any combination of protection which incorporates dwelling walls with openings directly into the pool perimeter and that all doors will be equipped with a self latching device with positive mechanical latching/locking installed at a minimum 54" above the threshold. If this option is selected, submit plans showing all types and location of all perimeter protection. The plans must also show the location and type of all openings, and the hardware type for each location. (Submit Manufacture's Specifications).

Final inspection of the pool project cannot be approved without compliance with the Private Swimming Pool Safety Act requirements.

I understand that not having one of the above installed will constitute a violation of Chapter 515 F.S., and will be considered as committing a misdemeanor of the second degree, punishable as provided in Section 775.082 or Section 775.083 F.S. The owner, and the prime contractor must sign this form.

Owner: _____ Owner: _____ Date: _____
Print Name Signature

The foregoing instrument was acknowledged before me this ___ day of ___, 20__.

Notary Public State of Florida at Large Commission Seal: _____

___ personally known ___ produced identification (type _____)

Contractor _____ Contractor _____ Date: _____
Print Name Signature

The foregoing instrument was acknowledged before me this ___ day of ___, 20__.

Notary Public State of Florida at Large Commission Seal: _____

___ personally known ___ produced identification (type _____)



**AFFIDAVIT OF FINAL COST OF CONSTRUCTION
PROPERTY OWNER
APPLICATION FOR CERTIFICATE OF OCCUPANCY OR COMPLETION**

Folio No.: _____ Address: _____

Legal Description: _____

_____ Being duly sworn, deposes and says: That He/She is the Owner, named in the application for Building Permit Number _____ and Dated _____, _____ relating to construction or other work to be performed on, or in connection with, the premises located as indicated above, that the estimated cost stated in said application of the construction or other work described therein was:

\$ _____ Dollars (\$ _____); that the actual final cost of such construction or other work was \$ _____ dollars (\$ _____)

And that costs for the work described in the Permit Application include the cost of all construction, other work performed therewith, exclusive of the cost of the land.

I agree to pay all additional permitting and processing fees associated with the difference in the Final cost, if more than the estimated cost of the work as stated in the permit application.

Application is hereby made for the Issuance of a Certificate of Occupancy and/or Completion for the structure on the premises.

Property Owner

Sworn to before me this _____, day of _____, 20____

Notary Public State of Florida at Large (seal)



**AFFIDAVIT OF FINAL COST OF CONSTRUCTION
CONTRACTOR OR PERMIT HOLDER
APPLICATION FOR CERTIFICATE OF OCCUPANCY OR COMPLETION**

Folio No.: _____ Address: _____

Legal Description: _____

_____ Being duly sworn, deposes and says: That He/She is the Contractor, named in the application for Building Permit Number _____ and Dated _____, relating to construction or other work to be performed on, or in connection with, the premises located as indicated above, that the estimated cost stated in said application of the construction or other work described therein was: \$ _____ Dollars (\$ _____); that the actual final cost of such construction or other work was \$ _____ dollars (\$ _____)

And that costs for the work described in the Permit Application include the cost of all construction, other work performed therewith, exclusive of the cost of the land.

I agree to pay all additional permitting and processing fees associated with the difference in the Final cost, if more than the estimated cost of the work as stated in the permit application.

Application is hereby made for the Issuance of a Certificate of Occupancy and/or Completion for the structure on the premises.

Contractor – Qualifier of Record
License Number: _____

Sworn to before me this _____, day of _____, 20____

Notary Public State of Florida at Large (seal)

SUBCONTRACTOR LIST

TO BE SUBMITTED WITH CO PACKAGE

MASTER PERMIT NO.: _____

CONTRACTOR NAME AND ADDRESS:

PHONE: _____
PROPERTY ADDRESS: _____

CATEGORY	SUBCONTRACTOR NAME	LICENSE NO.	ADDRESS	PHONE NO.
CARPENTRY				
PILES				
CONCRETE/STEEL ERECT.				
CONCRETE PLACEMENT				
BLOCK, MASONRY, ETC.				
GLAZING/WINDOW				
INSULATION				
ELECTRICAL				
PLUMBING				
AIR CONDITIONING				
PLASTERING				
ROOFING				
SWIMMING POOL				
GARAGE DOORS				
PAINTING				
ACOUSTICAL TILE, ETC.				
KITCHEN CABINETS				
FLOORING FINISHES				
WALL FINISHES				
FIREPLACE				
LANDSCAPING				
DRIVEWAY, PAVING				
WELLS				
ORNAMENTAL IRON				
FENCING				
LAWN SPRINKLERS				
FRONT DOOR				

LICENSE NO: _____ **QUALIFIER SIGNATURE**

SUBCONTRACTOR LIST

TO BE SUBMITTED WITH CC PACKAGE

MASTER PERMIT NO.: _____

CONTRACTOR NAME
AND ADDRESS:

PHONE:

PROPERTY ADDRESS:

CATEGORY	SUBCONTRACTOR NAME	LICENSE NO.	ADDRESS	PHONE NO.

LICENSE NO: _____

QUALIFIER SIGNATURE
