MIAMIBEACH BUILDING DEPARTMENT

Permit Checklist for Building – Condominium Online Flooring (Interior Flooring Only; No Bathroom/Balcony)

Plan Reviews N/A

Inspections*

Sound Proofing/Underlayment/Coating, Building Final

*Not all inspections listed may be required.

PROJECTS MAY REQUIRE PLANNING BOARD APPROVAL PRIOR TO BUILDING PERMIT SUBMITTAL.

For the Planning Department Checklist, visit: www.tinyurl.com/288e54ba

For Online Permitting Resources, visit: www.tinyurl.com/2552jdam

Required Construction Documents for Submittal: Digitally or electronically signed and sealed drawings – (Visit the Online Permitting Resource Center link noted above for instructions).

Construction Documents	Department Review
🗆 Unit Floor Plan	N/A

* Site Plan must show setbacks, both existing and proposed structures, property lines, lot dimensions, and grade elevation as per survey. It must also include all proposed structures such as fences/walls, accessory buildings, pool, decks, walkways, mechanical equipment, etc. as may be required for scope.

** All elevations must include the following in NGVD values: BFE, Grade, Adjusted Grade, Freeboard (if applicable).

***Review of construction documents may require additional departments

Supporting Documents that May be Required:

Construction Documents	Department Review
Soundproofing Specification Sheet	N/A
□ Flooring Affidavit	N/A

*Flooring affidavit - Please visit our Forms page under the heading Plan Review Forms.

SAMPLE SUBMISSION OF SIMPLE FLOORING PERMIT APPLICATION

1. Go to our Form's page and under Permit Application Forms, download the Permit Application form.

	Applicant Informati	on (Blue or Black Ink Only	()	
Office Use Only	Master Permit Number	(If applicable):	Florida Statute 553.79 (16) regardi	See information on
Submittal Date: / /			timelines. Please select one (Requ	
Permit #:	Violation # (If applicable):		🗆 Opt IN 🛛 Opt OUT	FS553.79 included
Property Address: Requiered	Unit #: Requiered Requ	Folio Number: Ill'Ed	For more information, see attached F.S	with the application
Permit Type (select one)	Permit Request (sele		Property Information (select	ct one)
Building Demo year-t Electrical Generator Mechanical Plumbing Fire	Change of Contractor	Permit Extension Permit Renewal Permit Revision Private Provider	Commercial Multi-Family Residential Residential: Single-Family Residence	e/Duplex
Roofing Shop Drawir Phased Permit	ngs Interior, Non-Structural Affordable Housing	City Project Reprieve Permit	Occupancy Classification CONDOMINIUM R-2	Multifamily R-2
Type of Work		of Work changed once submitted)	Area of Work (SqF	t)
New Construction/Additions:	\$	v ,		
Alterations/Reconfig of space:	S Value of the work			
Description of Work: Replacemen	nt or New Flooring			
Property C	Owner		Contractor	
Name: Full Name of Owner	T I I	Qualifiers Nan	ne	
Address: Main address	The owner and	Company ad	dress	
city: City State: Stat	contractor	City	State: State Zip Code: Zip	Code
Driver's License/State Identification:	information should		Contractor License Numb	er
E-Mail Address (REQUIRED): owners e-mail address	be fully filled out	il Address contractors e-mail	Davtime phone:	
Archite	ect		Structural Engineer	
Name N/A for flooring only	License Number:	Name: N/A for Floorin	a only	
E-Mail Address:	Daytime phone:	E-Mail Address	Deytime phone:	
	Notice 8	Certification		
This application is hereby made to obtain a permit regulations in this jurisdiction. I understand that a s Conditioners, etc. Owner's Affidavit: I certify that all the forgoing in Lessee's Affidavit: I certify that all the forgoing in addition to the requirements of this permit, there permits required from other governmental erities Department of Environmental Protection, South Fi penalities of permits and/or Certificate of Occup third degree, punishable as provided in a.774.	separate permit must be secured for Electrica formation is correct. Owner Certifies that the uil consent and authorization from owner of si may be additional restrictions applicable to such as the Environmental Division of Marm fordia Water Management District, Mami-Daa the foregoing application and that the fact anory. A person who knowingly makes a 1	al, Elevator, Fire, Mechanical, Plur aforementioned Contractor has thi ubject property to perform the abo this property that may be found in i-Dade County, Permitting, Environ de County Impact Fee, water main is stated in it are true. Any infor	nbing, Signs, Wells, Pools, Furnaces, Boilers, He e authorization to perform the work as specified a ve-menioned work and to hire above captioned the public records of this courty, and there may hy- nment and Regulatory Affairs, Water & Sewer De agement districts, state agencies, and/or federal mation found to be false may cause the revoc	eaters, Tanks, Air above. contractor. be additional spartment, agencies. Under addion and/or
Owner/Lessee for new permits (Documentation		. Owner Builder Permit (m	ust complete Owner Builder Affidavit)	
Master Permit Contractor of Record (For sub- WARNING TO OWNER: YOUR FAILURE TO RE	CORD A NOTICE OF COMMENCEMENT M		TWICE FOR IMPROVEMENTS TO YOUR PRO	PERTY. A NOTICE
OF COMMENCEMENT IS REQUIRED FOR ANY Signature of Owner/Agent or GC (for Sub-permits)		0. Signature of Qualifier:		
PRINT NAME: See next page regarding proof of ow			page regarding contractor information	
STATE OF COUNTY OF		STATE OF		
The foregoing instrument was acknowledged befor □ physical presence or □ online notarization, this day of by Signature of Notary Public	The Notarized	signature both required on the		-
PRINT NAME:				1
(SEAL)	Proof of owne	rship and updat	ed contractor	
Personally known	Proof of owne information ar	rship and updat e required	ed contractor	

Proof Of Ownership

- · Recorded warranty deed
- · Articles of Incorporation (listing managing members/officers/directors)
- · Certificate of Good Standing for out of State Corporations (within 1 year)

Contractor Information (All Insurance Certificates must be addressed to the City of Miami Beach)

- · Liability insurance
- Workman's Compensation Insurance **
- · Workman's Comp Exemption (Form)
- \cdot State License OR Municipal Contractor Occupational License Must be a GC or licensed for flooring.
- · Local Business Tax License from municipality in Florida
- · Certificate of Competency

**When the contractor is workers compensation exempt, they must notify the owner and provide signed owner

2. Next, under Plan Review Forms, download the Flooring Permit Affidavit

	EACH	Miami Beach, Florida 33 Ph: 305-673-7 miamibeachfl.gov/buil
	Flooring Permit Af	fidavit
	ies, including condominium units, are required ermit for flooring, please provide the following	
highlighted 4) Floor Plans clearly i	davit ufacturer's literature with assembly value that ndicating the area of work Contract/Agreement between client and contra	
	ill be required for flooring permits except for t	alcony/terraces, porches, bathrooms,
NOTE: A soundproof	ing inspection is mandatory in the City of M	liami Beach
Process No:		
Property Address:		
Product/Material:		
	, qualifying agent number	for,
(Name) hereby certify that all r	_{Contractor's	
(Name) hereby certify that all r and 1010.1.7, and Cha		fect, Chapter 10, Sections 1010.1.5, 1010.1.6,
(Name) hereby certify that all r and 1010.1.7, and Ch Signature:	(Contractors equirements of the Florida Building Code In E apter 12, Sections 1207, Section 1207.2, Se	fect, Chapter 10, Sections 1010.1.5, 1010.1.6,
(Name) hereby certify that all r and 1010.1.7, and Ch Signature: Print Qualifier's Name	(Contractors equirements of the Florida Building Code In E apter 12, Sections 1207, Section 1207.2, Se	Tect, Chapter 10, Sections 1010.1.5, 1010.1.6, tion 1207.3.
(Name) hereby certify that all r and 1010.1.7, and Chi Signature: Print Qualifier's Name State of	(Contractors equirements of the Florida Building Code In E apter 12, Sections 1207, Section 1207.2, Se	Tect, Chapter 10, Sections 1010.1.5, 1010.1.6, tion 1207.3.
(Name) hereby certify that all r and 1010.1.7, and Chi Signature: Print Qualifier's Name State of	(Contractors(Cont	Tect, Chapter 10, Sections 1010.1.5, 1010.1.6, tion 1207.3.
(Name) hereby certify that all r and 1010.1.7, and Ch Signature: Print Qualifier's Name State of Sworn to and subscrib	(Contractors equirements of the Florida Building Code In E apter 12, Sections 1207, Section 1207.2, Se	Tect, Chapter 10, Sections 1010.1.5, 1010.1.6, tion 1207.3.
(Name) hereby certify that all r and 1010.1.7, and Ch Signature: Print Qualifier's Name State of Sworn to and subscrib By	(Contractors equirements of the Florida Building Code In E apter 12, Sections 1207, Section 1207.2, Se	fect, Chapter 10, Sections 1010.1.5, 1010.1.6 tion 1207.3.
(Name) hereby certify that all r and 1010.1.7, and Ch Signature: Print Qualifier's Name State of Sworn to and subscrib By (SEAL) Personally known or P	(Contractors equirements of the Florida Building Code In E apter 12, Sections 1207, Section 1207.2, Se	Tect, Chapter 10, Sections 1010.1.5, 1010.1.6, tion 1207.3.

SAMPLE SUBMITAL

Property Address:_____ Unit #: _____

Scope of work:

- Remove old flooring type XXX
- Install New XXX type flooring over soundproof material type XXXXXX with a sound transmission class not less than 50
- No flooring in bathrooms or balcony
- No vertical change in floor level will not exceed 1/4"
- Maximum threshold height of 1/2 inch across the main entrance exit door
- Floor work area: <u>XXX</u>sq. ft
- Foyer
- Living Room
- Kitchen
- No cabinet removal

The text shown here MUST be written on the plans.



IMPORTANT NOTE:

The entry door is a fire door and cannot be cut or altered as it may affect the fire protection

*** Include: The flooring and soundproof underlayment specification.