



ST. JOHNS COUNTY BUILDING DEPARTMENT COMMERCIAL SUFFICIENCY CHECK LIST

CLEARANCE SHEET #: (C) _____ (N) _____

CONDITIONAL SUBMITTAL YES ____ NO ____ DATE RECEIVED ____ / ____ / ____

NAME OF PROJECT _____ PROJECT TYPE _____

SITE ADDRESS _____ PRELIMINARY REVIEW: YES _____ NO _____

CONTRACTOR _____ CONTACT _____

PHONE _____ EXT# _____ EMAIL _____

DATE PLANS REC'D _____ By _____ RESUBMITTED _____

NOTIFIED PENDING COMMENTS/STATUS: _____ DEPOSITORY ACCOUNT #: _____

Item	Pending	Rec'd By	N/A
Completed Clearance Sheet (signature acknowledging impact fee) (SJC Land Development Code/Ord. 2011-7)			
Approved DRC Site Plan (SJC Land Development Code)			
Completed Building Permit Application (FBC Section 105.3)			
Two (2) Sets of Building Plans (FBC Section 107)			
Two (2) Energy Forms with Manual N; ASHRAE or ACCA and One (1) copy of signature page marked STATE (FBC Energy Conservation Section 103)			
Two (2) sets Truss Engineering (one set must have raised seal) (FBC Sec.802.10)			
Two (2) Product Approval Form (must be signed) (FS 553.842)			
Water / Sewer Availability Letter or Paid Water / Sewer Receipt (FBCR P2602.1) Utility Company: _____			
Septic Tank <u>Permit</u> / Environmental Health Department <u>Approved</u> Site Plan and <u>Floor Plan</u> (FS 381.0065)			
Well Permit (FBCR P2602.1)			
Verification of Ownership: Property Appraiser / Deed / NAL (FBC 105.1)			
Contractor Verification: License / Workers Comp / Liability (FS 489)			
Notice of Commencement (FS 713.135) Note: A recorded copy must be received by the Building Department prior to first inspection			
Termite Bond Company _____ Termite Treatment Method: SLAB WOOD BAIT (FBC 110.3.11)			
PRIVATE PROVIDER SERVICES (FS 553.791) PPI _____ PPP _____ Notice to B.O. _____ Plan Review Affidavit _____ Rec'd by: _____			
Office Use Only			
Initial for Valuation Increase: YES _____ NO _____			
Sent to Fire Marshall: Date: _____ Approved _____ Rejected _____			
Resubmitted to Fire Marshall : Date: _____ Approved _____ Rejected _____			
Comments:			

Office Use ONLY:
SJC Permit Release Check List

Contractor _____

Project type _____ **Created** _____

Project Address / Legal _____
City _____ **State** _____ **Zip** _____

NECESSARY ITEMS FOR PICK-UP:

Valuation Increase _____ **Applicant Initials** _____

Impact fee acknowledgement signature _____

Deed _____

Verify application and deed match _____

Contractor Licensing Data: **License** _____ **W/C** _____ **Liability** _____ **Other** _____

Utility Source _____

Water/Sewer Availability _____ **Paid receipt** _____

Well _____

Septic _____ **FDOH Site Plan** _____ **FDOH Floor Plan** _____

NOC _____ **Pending** _____

Additional Items:

APPLICANT TO COMPLETE OR CORRECT

Payout Required _____ **Print Permit** _____

VERIFIED & RELEASED BY:

CONTRACTOR: _____