



Town of Longboat Key
Planning, Zoning and Building Department
 501 Bay Isles Road
 Longboat Key, Florida 34228
 941-316-1966
 941-316-1970 FAX



BUILDING PERMIT APPLICATION

Application must be completed in ink or typed. Please submit one copy of application and three copies of supporting documentation. License holder or owner signatures must be notarized. All sections of the application must be accurately completed including the Work Description with a thorough description of all work proposed by this application. All required supporting documents, engineering, plans, etc., must be submitted for the application to be valid for review.

OFFICE USE ONLY:

Permit No. _____ Fees Due _____ Receipt No. _____

**REVIEWED UNDER CURRENT FLORIDA BUILDING CODES AND STATE STATUTES
 IF PAYING BY CREDIT CARD, PLEASE COMPLETE A CREDIT CARD AUTHORIZATION FORM**

Amount of contract: \$ 150,000.00 If contract, or price, is \$2,500 or more, a recorded Notice of Commencement is required to be submitted prior to the issuance of the permit.

JOB SITE

PROJECT/COMPLEX NAME (IF ANY): ST. REGIS GROIN

STREET ADDRESS: 1621 Gulf of Mexico Dr. UNIT # _____

COUNTY: MANATEE SARASOTA LOT(s) # _____ PARCEL ID #: 0009041247

OWNER OF RECORD S.R. LBK II, LLC

BUILDING PERMIT CONTRACTOR/APPLICANT OR OWNER AS CONTRACTOR

If Property Owner is applicant, please skip to Property Owner Information

LICENSES: STATE # CGC 1511059

MANATEE CO: _____ SARASOTA CO: _____

APPLICANT/QUALIFIER NAME: Scott Moss

COMPANY NAME: Moss and Associates

STREET/MAILING ADDRESS: 2101 N Andrews Ave

CITY: Wilton Manors STATE: FL ZIP: 33311

PHONE #: _____ CELL #: _____ FAX: # _____

EMAIL ADDRESS: voliveira@mosscom.com

PROPERTY OWNER (Required)

NAME AS ON PROPERTY RECORDS: Charles Whittall

COMPANY NAME: S.R. LBK II, LLC



STREET/MAILING ADDRESS: 7940 Via Dellagio, Suite 200

CITY: Orlando STATE: FL ZIP: 32819

PHONE #: 305-506-5181 CELL #: _____ FAX: # _____

EMAIL ADDRESS: George@unicorp.com

Scope of Work (describe what you are doing): _____

Structural repair of exposed 130-foot seaward segment of existing groin. It includes removal of top slabs and replacement of derelict structural elements where necessary.



Utilizing the categories below, please check one type of work associated with this building permit application. Building Permit Applications that include multiple categories may be best described as an "Other" under miscellaneous.

Building Project:

Carport Concrete Repair Garage

Total Area of new work or affected area 1,560 (square feet)

Entry Doors Replacement Sliding Glass Doors

Garage Door Replacement Windows

Shutters Deck

Demolition Lanai/Screen Enclosure/Pool Cage

(must provide Owner's Authorization Form)

Pre-Construction/Pre-Engineered Shed

Structures Over Water:

Residential Dock Lift (including davit or hoist)

Seawall (Provide EOR) Pilings

Miscellaneous

Generator Gutter, Soffits, Siding and Facia

Handrail Solar Energy Systems

Permanent Free-Standing Sign Wall Sign

Stairs

Other Miscellaneous Not Listed: _____

Pools:

New/Replacement Pool/Spa Pool Safety Barrier

Pool Repair Resurface Pool

Other Trades Involved:

Electrical Mechanical Plumbing Low Voltage Wiring Fire Sprinklers



Gas Alarm Wiring Other _____

DESIGN PROFESSIONAL(s)- Florida Licensed (must be completed for all associated design professionals)

Licensed Architect Licensed Engineer Licensed Interior Designer

Florida License No. 16313

NAME OF PROFESSIONAL Reuben Clarson

COMPANY NAME: Reuben Clarson Consulting

STREET/MAILING ADDRESS: 780 94th Avenue North, Suite 102

CITY: St. Petersburg STATE: FL ZIP: 33702

PHONE #: 727-895-4717 CELL #: 727-710-0237 FAX: # _____

EMAIL ADDRESS: info@reubenclarsonconsulting.com

NEW CONSTRUCTION **ACCESSORY USE** **Addition** **Alteration**

Type of Construction: I-A I-B II-A II-B III-A III-B IV V-A V-B

Single-Family Duplex Multifamily Number of Units: _____

Commercial Number of Units: _____ Other: _____

Total Stories from grade: _____ Fire Sprinklered: Yes No

Flood Zone for Proposed Building: _____

Total Area of new work or affected area _____ **(square feet)**

EXISTING PRINCIPAL STRUCTURE – DESCRIPTION OF STRUCTURE (Additions or Alterations Only)

Type of Construction: I-A I-B II-A II-B III-A III-B IV V-A V-B

Building is Flood Code: Conforming Non-conforming Year Built: _____

Fire Sprinklered: Yes No

Flood Zone Designation for Building: _____ Total Stories from grade: _____

Building Occupancy: Single-Family Duplex Multifamily Commercial

Other : _____

Applicant's Affidavit: I certify that all the information is accurate and complete. I further certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed in accordance with the standards of all laws regulating construction in this jurisdiction. **I understand that a separate permit must be secured for applicable independent trade work associated with the building permit.**



Note: If owner is applying for this permit as a contractor under F.S. 489.103 (and applicable Florida Building Code), said owner must personally appear at the Town Planning, Zoning and Building Department to sign this application form and submit a completed Homeowner Affidavit Form.

I hereby acknowledge that I have read and understood the above affidavit on this 22nd day of NOVEMBER, 2022.

Signature [Handwritten Signature]
Print Name Scott R. Moss

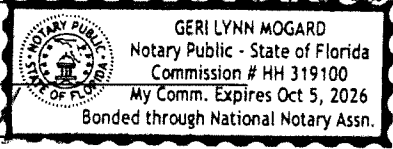
NOTARIZATION OF SIGNATURE

State of Florida
County of Okeechobee

The foregoing instrument was acknowledged before me by means of physical presence or online notarization , this 22nd day of November 2022 By Scott Moss

as (type of authority) CEO for (name of party on behalf) Moss Associates LLC

Signature of Notary Public [Handwritten Signature]
Printed/Stamped Name of Notary Public Berily Mogard



Personally known OR produced identification Type of ID. _____

OWNER'S SUBMISSION STATEMENT: Under penalty of perjury, I declare that all the information contained in this permit application is true and correct.

CONTRACTOR/AGENT/OWNER AFFIDAVIT:

Application is hereby made to obtain a permit to the work and installation as indicated. I certify that all the information is accurate and complete. I certify that where required, all plans have been prepared by, or under the direct supervision of, an engineer registered and licensed by the state. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I further certify that I have entered into a contract with the owner/agent of the subject property to make the specified improvements to, or perform the contracting at, the real property specified in this application. I have also made the owner/agent aware of the provisions of the Homebuyers Protection Act. I certify that all the foregoing information is accurate and that the work will be done in compliance with all applicable laws regulating construction and zoning. I acknowledge and accept responsibility for compliance with the correct Florida Building Code, regulations, and ordinances, as well as the payment of all legally constituted fees regarding this development application including but not limited to ALL REVIEW FEES AND PERMIT FEES. I understand that a separate permit must be secured for applicable independent trade work associated with the building permit. **NOTICE:** In addition to the requirements for this permit, there may be additional restrictions to this property that may be found in the public records of the county or that may be required from other governmental entities such as water management district, state agencies or federal agencies.

Note: If owner is applying for this permit as a contractor under F.S. 489.103 (and applicable Florida Building Code), said owner must personally appear at the Town Planning, Zoning and Building Department to sign this application form and submit a completed Owner Affidavit Form.

OWNERS AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning. I agree to allow any authorized employee of the Town of Longboat Key to enter upon the premises associated with this project for the purpose of ascertaining compliance with the terms and conditions of the application, or permit, and/or permit stipulations.

WARNING TO OWNERS: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENT TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED



AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

The applicant by signature on this application certifies that he or she will deliver this statement to the person whose property is subject to attachment in accordance with the provisions of F.S. 713. The Right, Title and Interest of the person who has contracted for the improvement may be subject to attachment under the Construction Lien Law.

Revised 01/15/2021