

Board of County Commissioners

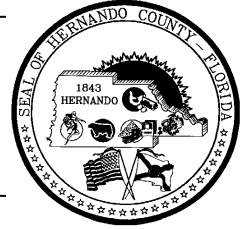
Hernando County Development Services

789 Providence Boulevard
Brooksville, FL 34601
352-754-4050

Permitting / Zoning

Fax: 352-754-4416

Visit us on the Internet:
www.co.hernando.fl.us



PERMITTING GUIDELINES FOR SINKHOLE REPAIR/FOUNDATION STABILAZATION

Permits for sinkhole repair, grouting, underpinning, and foundation stabilization are issued pursuant to Hernando County Code Ordinances, Chapter 8, Article II, Section 105.14, *Permits Issued on Basis of Affidavit*; and are based on an engineer's report as required by Chapter 18, 2010 Florida Building Code (FBC) – Building. Chapter 18 FBC sets the standards for soil investigation reports and foundation stabilizations. Work completed under these permits shall comply with Section R318.5 and/or Chapter 18 of the FBC as applicable.

The applications must include the following:

1. ___ Permit Application
2. ___ Certified Copy of NOC
3. ___ One (1) original and One (1) copy of signed and sealed Soil Investigation Report by a registered design professional
4. ___ One (1) original and One (1) copy of signed and sealed Remediation Plan prepared by a registered design professional.

The Remediation Plan shall include, but not be limited to the following:

- a. ___ Details and/or data defining the foundation repair or stabilization
 - b. ___ Layout for underpinning and/or grouting
 - c. ___ Deviation Letter *if remediation plan is different than recommendation of the soil investigation report*. Deviation letter must include the new recommendation based on the soils report with explanation and basis for the deviations from the original recommendation. This letter must be signed and sealed by the registered design professional.
5. ___ Letter from the registered design profession for the remediation plan acknowledging the contractor performing the work. (Hernando County Code of Ord., CH 8, Section 107)

Note: *Stabilization permit cannot be finalized until and sealed final report or letter is submitted to the department.*

HERNANDO COUNTY

SINKHOLE STABILIZATION APPLICATION

Please Provide Your FAX#: _____
Permitting Service FAX #: _____
E-Mail: _____

Permits for sinkhole repair, grouting, underpinning, and foundation stabilization are issued based on an engineer's report pursuant to Chapter 18,2010 Florida Building Code-Building and Hernando County Code of Ordinances. Chapter 8, Article II, Section 105.14, Permits issued on Basis of Affidavit. Work completed shall comply with 2010 FBC,R318.5 and/or Chapter 18.

Permit Application No. _____

Key #: _____
Date: _____

Describe work to be done: _____

Valuation of work to be done: \$ _____

Legal description: Lot : _____ Block : _____ Subdivision: _____ Unit : _____

Address of job site: No.: _____ Street: _____ City: _____, Hernando County

Directions to job site: _____

Property owner: _____ Phone: _____
E-mail: _____ Address: _____
City: _____ State: ___ Zip: _____ Interest in property: _____

Name of fee simple titleholder (If Other Than Owner): _____
Address: _____ City: _____ State: ___ Zip: _____

Permitting Service Name: _____ Phone _____ :
Contact Name: _____ E-Mail: _____

Contractor: _____ Phone: _____
E-Mail: _____
Address: _____ City: _____ State: ___ Zip: _____
License #: _____

Architect/Engineer's Name: _____ Phone: _____
Address: _____
City: _____ State: _____ Zip: _____

Bonding Company Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Mortgage lender's Name: _____
Address: _____
City: _____ State: _____ Zip: _____

Application is hereby made to obtain a permit to do the work and installations as indicated. 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 understand that a permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, ETC.

OWNER'S AFFIDAVIT: I certify that all of the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SEC 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS 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.

Owner/Contractor or Authorized Agent

State of: _____ County of: _____

The foregoing instrument was acknowledged before me this _____ day of _____, 20____ by _____, who is () personally known to me or who () has produced _____ as identification.

Signature of Notary Public

(SEAL)

Application Approved By Permit Representative: _____

Hernando Co. Dev. Dept., 789 Providence Boulevard, Brooksville, Florida, 34601 • 352-754-4050 • Fax: (352)754-4416