

# WINTER HAVEN

## *The Chain of Lakes City*

City of Winter Haven

### Demolition Permit Application Instructions

1. Demolition permit application must be completed with parcel ID and Owner's name.
2. When application is completely filled out it must be signed by Central Florida Gas. 800-427-7712 or Fax request to 855-212-5011.
3. Contact Account Services at 863-291-5678 to request the water meter to be removed.
4. Call Sunshine Call One of Florida at 811 or 1-800-432-4770 to obtain a locate ticket number.
5. Contact TECO at 863-299-0800 and follow the prompts for demolitions.
6. Water services must be cut and capped at the customer side of the meter box.
7. The sanitary sewer lateral must be capped above grade at the right-of-way / property line and concrete poured around the capped portion. Contractor shall contact Engineering Services Division at 863-291-5850 prompt #: 3 to coordinate an inspection of the capping / removal of the water and sewer services. Inspection by Engineering Services Division is required prior to backfilling. Sign off will be provided at the time of inspection, if acceptable.
8. Contact Scott Walls, Installation & Maintenance at 863-668-4010 or Pat Neff at 863-221-0115 with Frontier for signatures **(COMMERCIAL ONLY)**.
9. Upon completion of items 1 – 8 above, contractor shall submit Demolition Permit Application to the Building Division.
10. Upon completion of items 1 – 9 above you will be notified by the City of Winter Haven Building Division to obtain the permit.

Thank you,

City of Winter Haven  
Building Division  
490 3<sup>rd</sup> Street, NW  
Winter Haven, FL 33881  
863-291-5695

City of Winter Haven Building Division  
Demolition Permit Application

Date: \_\_\_\_\_ Tax Folio# (REQUIRED) \_\_\_\_\_

Contractor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Owner Address: \_\_\_\_\_

Job Address: \_\_\_\_\_

Type of structure(s): \_\_\_\_\_ Number of Structures Involved: \_\_\_\_\_

Demolition Contractor: \_\_\_\_\_ Phone #: \_\_\_\_\_

STATE OF FLORIDA  
COUNTY OF POLK

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_ by

\_\_\_\_\_ Who is personally known to me or who has produced \_\_\_\_\_ (Type of identification?)

Signature of Notary \_\_\_\_\_ Notary Seal or Stamp

State of Florida

My commission expires \_\_\_\_\_

Contractor Signature: \_\_\_\_\_ License #: \_\_\_\_\_

Owner Signature: \_\_\_\_\_

**WARNING TO OWNER:** Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. A Notice of Commencement must be recorded and posted on the job site. If you intend to obtain financing. Consult with your lender or any attorney before commencing work or recording your notice of Commencement.

**NOTICE:** In addition to the requirements of this permit, there may be additional restrictions applicable to the property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies. Each BUILDING PERMIT for demolition or renovation must contain an Asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of F.S.469.003 and to notify the Department of Environmental Protection of his/her intentions to remove asbestos, when applicable, in accordance with state and federal law.

Sunshine Call One Locate #: \_\_\_\_\_  
(Sunshine Call One 1-800-432-4770)

Central Florida Gas Approval: \_\_\_\_\_ Date: \_\_\_\_\_

Frontier Approval: \_\_\_\_\_ Date: \_\_\_\_\_

TECO: \_\_\_\_\_ Date: \_\_\_\_\_  
(863-299-0800)

City Utilities Approval: \_\_\_\_\_ Date: \_\_\_\_\_ Septic: \_\_\_\_\_ Sewer: \_\_\_\_\_

Building Division Approval: \_\_\_\_\_ Date: \_\_\_\_\_

A permit must be obtained from the Building Division prior to commencing ANY demolition work. Septic Tanks require separate Abandonment Permit issued by Polk County Health Department prior to issuance of the Demolition Permit.

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City of Winter Haven Building Division  
Asbestos Disclosure Statement

**Disclosure Statement:** State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of the exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

### **6<sup>th</sup> Edition Florida Building Code-105.3.6 Asbestos removal.**

Moving, removal or disposal of asbestos-containing materials on a residential building where the owner occupies the building, the building is not for sale or lease, and the work is performed according to the owner-builder limitations provided in this paragraph. To qualify for exemption under this paragraph, an owner must personally appear and sign the building permit application. The permitting agency shall provide the person with a disclosure statement in substantially the following form:

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Owner / Contractor Signature

Date