

If you have a disability and the format of this document interferes with your ability to access some information, please contact us at (239) 444-6150 and we'll gladly assist.

CITY OF BONITA SPRINGS

Community Development Department
9220 Bonita Beach Road, Ste. 111
Bonita Springs, FL 34135
Phone: (239) 444-6150
email: permitting@cityofbonitaspringscd.org

DEMOLITION PERMIT APPLICATION (2024)

PERMIT #: _____

RESIDENTIAL

COMMERCIAL

1. Owner Name: _____ STRAP Number _____
2. Site Address: _____ City: _____ Zip: _____
3. Contractor License Number: _____ Company Name: _____
4. Contractor Name: _____ Phone: Area Code: _____ Number: _____
5. E-mail Address: _____

Job Value: \$ _____ Number of structures: _____

Recycling: ___ Yes ___ No ___ Diversion Fees Paid

Supplemental Information:

Coastal Building Zone: Yes No

Parcel Tag: Yes No

Coastal Construction Line: Yes No

Historic: Yes No

Coastal Letter Sent: Yes No (If Yes to Historic, prior planning approval will be required.)

Vegetation Removal: Yes No (If Yes, Environmental Review may be required.)

Requirements for Permits

1.0 Residential Structure (SFR/DUPLEX, SHED, MRV, ANY STRUCTURE ON RESIDENTIAL PROPERTY INCLUDING POOLS)

- Three (3) site plans showing property dimensions, *all structures* on property & highlight building(s) to be demolished.
- A notarized letter from the property owner, giving permission to the contractor for demolition...OR... A recorded "Notice of Commencement", signed by the owner, if the job value is over \$5,000.
- A copy of the "Demolition Well Protection" form. (Only required for a SFR or Duplex.)

2.0 Residential Interior Demolition

- Three (3) copies of the floor plan with the proposed demolition area highlighted.
- A notarized letter from the property owner, giving permission to the contractor for demolition...OR... A recorded "Notice of Commencement", if the job value is over \$5,000.

3.0 COMMERCIAL STRUCTURE

- Four (4) site plans showing property dimensions, *all structures* on property & highlight building(s) to be demolished.
- A notarized letter from the property owner, giving permission to the contractor for demolition...OR... A recorded "Notice of Commencement", signed by the owner, if the job value is over \$5,000.
- An "Asbestos Affidavit".
- A copy of the "Demolition Well Protection" form.

4.0 COMMERCIAL INTERIOR DEMOLITION

- Four (4) copies of the floor plan with the proposed demolition area highlighted.
- A notarized letter from the property owner, giving permission to the contractor for demolition...OR... A recorded "Notice of Commencement" if the job value is over \$5,000.
- An "Asbestos Affidavit".

NOTIFICATION REQUIREMENTS FOR DEMOLITION/RENOVATION ACTIVITIES

1. Written notification is required to be submitted to the South District Office of the Florida Department of Environmental Protection (FDEP/SD) ten (10) working days prior to the commencement of any facility demolition or regulated renovation activity
2. All facility demolitions (even those without asbestos) require notice.
3. Notice is also required for facility renovations impacting 260 linear ft. of RACM on pipes or 160 sq. ft. on other components (35 cu. Ft. if measurements not possible.)
4. A complete Florida Department of Environmental Protection (FDEP) Notice of Asbestos Renovation or Demolition Form 62-257.900(1) shall be mailed to:

FDEP/South District
 2295 Victoria Ave, Ste 364
 P.O. Box 2549
 Fort Myers, FL 33902

Download Notice of Asbestos Renovation / Demolition form at: http://www.floridadep.com/south/Air/Air_Resources.htm.

Initial _____

COMMUNITY DEVELOPMENT DEPARTMENT

Permit reviewed and approved based on information provided by applicant. Omitted and/or falsified information may void permit in accordance with 4-162(d).

APPLICABLE BUILDING CODES

8th ed. 2023 FBC; Florida Building Code: Building, Existing, Mechanical, Plumbing
 8th ed. 2023 FFC; Florida Fire Prevention Code
 NEC 2020; National Electric Code

*****SIGN ONLY IN THE PRESENCE OF A NOTARY PUBLIC*****

Contractor Signature: _____

Contractor Name: _____

Site Address: _____ City: _____ Zip: _____

Date: _____

STATE OF FLORIDA
 COUNTY OF LEE

Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization ,
 this (day) _____ of (month) _____ , (year) _____ ,
 by (name of person making statement) _____ .

Signature of Notary Public - State of Florida: _____

Print, Type, or Stamp Commissioned Name of Notary Public: _____

Personally Known OR Produced Identification

Type of Identification Produced: _____