



INDIAN RIVER COUNTY/CITY OF VERO BEACH  
BUILDING DIVISION

1801 27<sup>th</sup> Street, Vero Beach, FL 32960 772- 226-1260

## **Modular Building Permit Checklist**

***The following items are required with submission of your permit application:***

- **A completed Indian River County/City of Vero Beach Modular Building permit application.**
- **Owner/Builder Disclosure Statement when applicable.**
- **Documentation that verifies job value. Examples include a copy of the signed contract between the owner and contractor or a signed estimate, etc.**
- **Please provide the below information for review:**
  - **Four (4) copies of a legible survey or site plan that indicates proposed structure along with distances from other structures, property lines and easements.**
  - **Modular Building plans from the manufacturer. Provide 4 copies of the below information for Residential Modulares and 5 sets for Commercial Modular Applications. The building must comply with the Wind Speed and Exposure Category for the proposed location. The plans must be reviewed by a third-party review agency.**
  - **Provide four (4) Site-Specific Foundation Plans from a Florida Licensed Design Professional.**
  - **Provide a copy of a Soils Investigation report for Commercial Modular Building.**
  - **Provide three (3) copies of the Florida Energy Code for Climate Zone 2.**
  - **Submit a copy of the Modular Building approval letter from DBPR.**
  - **Submit four (4) sets of plans for any site-built construction (i.e. ramps, stairs, decks, etc.) These plans must be signed and sealed by a Florida licensed Design Professional.**
- **Modular Buildings require approval from both the Planning Department and Public Works Department having jurisdiction**
- **Commercial Modular Buildings require Fire Prevention Bureau approval.**
- **Sites on septic and/or well require Environmental Health Department approval.**
- **A Recorded Notice of Commencement (NOC) preferred to be submitted with application but must be submitted prior to first inspection if job value exceeds \$2500.**
- **Applicants are advised that Building Permit Applications are considered incomplete until all other IRC/COVB Departments and other Governmental agency reviews are completed and approved. The Building Permit Application will be routed to other departments, even if considered incomplete, in order to expedite the review process. The Building Permit Application review and approval time clock does not start until the application is deemed a Complete Application.**



INDIAN RIVER COUNTY/CITY OF VERO BEACH  
BUILDING DIVISION

1801 27<sup>th</sup> Street, Vero Beach, FL 32960 772- 226-1260

# Modular Building Permit Application

SCOPE OF WORK:  NEW  REPLACEMENT

Parcel #: \_\_\_\_\_ JOB ADDRESS: \_\_\_\_\_

JOB DESCRIPTION: \_\_\_\_\_

Owner: \_\_\_\_\_ Phone: \_\_\_\_\_

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

Email: \_\_\_\_\_ Contractor FAX: \_\_\_\_\_

Contractor License Number: \_\_\_\_\_ IRC Certificate #: \_\_\_\_\_

Engineer: \_\_\_\_\_ Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Contract Price: \_\_\_\_\_

## PLEASE COMPLETE THE BELOW INFORMATION FOR REVIEW:

RESIDENTIAL

COMMERCIAL

UTILITY CONNECTION: \_\_\_\_\_

SQUARE FOOTAGE UNDER AIR: \_\_\_\_\_

PROPOSED USE OF COMMERCIAL MODULAR BUILDING:

\_\_\_\_\_  
\_\_\_\_\_

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, insurance, and worker's compensation. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS AND AIR CONDITIONER, ETC. Properties on which earth spills or other debris falls shall be cleaned immediately. All streets, sidewalks, and curbs damaged due to this construction shall be repaired to the satisfaction of the Engineering Department prior to the issuance of Certificate of Completion. IN APPLYING FOR THIS PERMIT, I HEREBY ATTEST THAT I HAVE THE KNOWLEDGE AND UNDERSTANDING OF ALL THAT IS REQUIRED BY THE FLORIDA BUILDING CODE AND ALL LAWS AND REGULATIONS PERTAINING TO PERFORMING AND COMPLETING THIS TYPE OF WORK.



INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION

1801 27th Street, Vero Beach, FL 32960 772- 226-1260

OWNER'S 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.

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 BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner Signature

Contractor Signature

Acknowledgement for Person in an Individual Capacity

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of 20 by

who is personally known or produced identification Type of ID Produced Printed Name of Notary Signature of Notary Notary Seal

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of 20 by

who is personally known or produced identification Type of ID Produced Printed Name of Notary Signature of Notary Notary Seal

Acknowledgement for Person in a Representative Capacity

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of 20 by (Name of Person) as ( Explain

Representative Capacity) for (Name of Party on Behalf of Whom Instrument was Executed).

who is personally known or produced identification Type of ID Produced Printed Name of Notary Signature of Notary Notary Seal

State of Florida, County of The foregoing instrument was acknowledged before me by means of physical presence or online notarization this day of 20 by (Name of Person) as ( Explain

Representative Capacity) for (Name of Party on Behalf of Whom Instrument was Executed).

who is personally known or produced identification Type of ID Produced Printed Name of Notary Signature of Notary Notary Seal