



**INDIAN RIVER COUNTY/CITY OF VERO BEACH
BUILDING DIVISION**

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

**MODULAR BUILDING – COMMERCIAL OR RESIDENTIAL
INFORMATION/CHECKLIST
BUILDING DIVISION**

THIS PAGE TO BE SUBMITTED WITH PERMIT APPLICATION

- Provide a copy of Site Plan for review, prior to issuance an Approved Site Plan will be needed from either the Indian River County Planning Department or the City of Vero Beach Planning Department for Commercial Modular. Residential Modular buildings will need site plan approval from the appropriate Planning and Engineering Departments.
- Provide Four (4) Sets of Modular Building Plans from the manufacturer. The building must comply with the wind speed and exposure category for the proposed location. The plans must be reviewed and stamped by a third party review agency.
- Provide a copy of a soils investigation report from a Florida Licensed Engineer for a Commercial Modular.
- Provide Four (4) Foundation plans from a Florida Licensed Engineer, specific to the local site.
- If the modular will be located on a site with other structures, provide information to show compliance with FBC Building Code Chapters 6 and 7 for Fire Separation Distance and Fire Protection of exterior walls for the modular and existing buildings for Commercial Modular.
- Submit Three (3) copies of the Florida Energy Code for Climate Zone 2.
- Submit a copy of the approval letter from the DBPR.
- Submit Four (4) sets of plans for any site built construction (i.e. ramps, stairs, decks, etc.). These plans must be under an Architect or Engineer's Seal.
- Fire Department approval required prior to release of Commercial Modular buildings.
- Provide information on sewage disposal; either a utility connection or Health Department approval.
- Building Division Application Fee \$200.00

INSPECTION REQUIREMENT

Prior to the trades inspections, a location survey will be required from a Florida Licensed Surveyor documenting the location complies with the required set-backs and elevations determined by the appropriate Planning and Engineering Departments.



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MODULAR BUILDING PERMIT APPLICATION
BUILDING DIVISION

PARCEL NUMBER: - - - - -

OWNER'S NAME: _____ JOB ADDRESS: _____

COMPANY NAME: _____ QUALIFER NAME: _____ LICENSE #: _____

CONTACT INFORMATION PHONE #: _____ FAX #: _____ E-MAIL: _____

CONTRACT PRICE: _____ *

Scope of the work anticipated in this permit application: _____

*NOTICE OF COMMENCEMENT IS REQUIRED IF CONTRACT PRICE EXCEEDS \$2,500

Contractor Signature _____

Owner Signature _____

COMP. CARD # _____

Notary as to Contractor:
STATE OF FLORIDA, COUNTY OF
Sworn to and subscribed before me _____ day of
_____ 20_____,
by _____
who is [] personally known or [] produced identification
Type of ID produced _____
Printed Name of Notary _____
Signature of Notary _____
Notary Seal

Notary as to Owner:
STATE OF FLORIDA, COUNTY OF
Sworn to and subscribed before me _____ day of
_____ 20_____,
by _____
who is [] personally known or [] produced identification
Type of ID produced _____
Printed Name of Notary _____
Signature of Notary _____
Notary Seal



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INDIAN RIVER COUNTY/CITY OF VERO BEACH
SUB-CONTRACTOR AGREEMENT/AFFIDAVIT

Indian River County Contractor Certificate Number: _____

State of Florida Certification Number (if applicable): _____

Permit Number: _____

_____ has agreed to be the _____ sub-contractor for
(Company/Individual name) (Type of construction trade)

_____ for the project located at _____
(Name of prime contractor) (Street address)

It is understood that, if there is any change of status regarding our participation with the above mentioned project, I will immediately
advise the Indian River County Building Division by personally filing a Change of Contractor.

SUB-CONTRACTOR QUALIFIER

PRIME CONTRACTOR QUALIFIER
(Main Permit Holder Information Required)

Signature: _____

Signature: _____

Printed Name: _____

Printed Name: _____

Date: _____

Date: _____

Business Name: _____

Business Name: _____

Address: _____

Address: _____

City, State, Zip: _____

City, State, Zip: _____

Phone: _____

Phone: _____

Notary as to Sub-Contractor:
STATE OF FLORIDA, COUNTY OF
Sworn to and subscribed before me _____ day of
_____ 20_____,
by _____
who is [] personally known or [] produced identification
Type of ID produced _____
Printed Name of Notary _____
Signature of Notary _____
Notary Seal

Notary as to Prime Contractor:
STATE OF FLORIDA, COUNTY OF
Sworn to and subscribed before me _____ day of
_____ 20_____,
by _____
who is [] personally known or [] produced identification
Type of ID produced _____
Printed Name of Notary _____
Signature of Notary _____
Notary Seal