



INDIAN RIVER COUNTY/CITY OF VERO BEACH  
BUILDING DIVISION

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

## **Fuel Gas Permit Checklist**

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

- **Indian River County/City of Vero Beach Fuel Gas permit application completed.**
- **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.**
- **Submittals require 4 copies of each of the following:**
  - **Survey (See below for requirements)**
  - **Engineered tank Tie Down if located in a Flood Zone or an Above Ground Tank**
  - **Tank specifications**
- **A legible survey or site plan indicating location of proposed fuel tank and distances from property lines, structures and easements. Location should clearly be indicated in ink (no highlighted plans please).**
- **Tank tie-down method provided. If tank is above ground or located in a Flood Zone other than X, a site-specific signed and sealed tie-down detail will be required from a Florida licensed Design Professional.**
- **Fuel tank permits require approval from the Planning Division and the Public Works Department having jurisdiction.**
- **If property is on a septic system, the Environmental Health Department will need to approve the tank location.**
- **Commercial Fuel tanks will also need to be reviewed by the Indian River County Fire Prevention Bureau.**
- **Commercial locations may also require Administrative Approval from the Planning Division.**
- **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.**



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# Fuel Gas 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: \_\_\_\_\_

Job Value: \_\_\_\_\_  RESIDENTIAL  COMMERCIAL

## The below information must be completed for review.

Gas Type:  LP  Natural

Above Ground  Underground  No Tank Installed- Gas Lines Only

*Tanks located a Flood Zone other than X require a signed and sealed tie-down detail provided by a Design Professional.*

Tank Specs: \_\_\_\_\_ Gallons \_\_\_\_\_ Length \_\_\_\_\_ Width

***\*Tank Distance provided below must be from the side or end of the tank and not from the center of the tank per NFPA 58, Section 6.3.2.2.***

**\*Tank Distance from Structure: \_\_\_\_\_ Ft.**

**Tank Fill Point Distance from Building Openings: \_\_\_\_\_ Ft.**

**Tank Fill Point Distance from closest Source of Ignition: \_\_\_\_\_ Ft.**

**\*Tank Distance from Property Lines: *Indicate all applicable***

**Side: \_\_\_\_\_ Ft. Rear: \_\_\_\_\_ Ft. Front: \_\_\_\_\_ Ft.**



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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.

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