



CITY OF SEMINOLE

Achieving Service through Dedication

OWNER / BUILDER DISCLOSURE STATEMENT

PLEASE INITIAL EACH STATEMENT

- _____ I understand that state law requires construction to be done by a licensed contractor and have applied for an owner/builder permit under an exemption from law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license.
- _____ I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility.
- _____ I understand that, as an owner/builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts.
- _____ I understand that I may build or improve a one-family or two-family or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000. The building or residence must be for my own use or occupancy. **It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within one year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption.**
- _____ **I understand that, as the owner/builder, I must provide direct, on-site supervision of the construction.**
- _____ I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance.
- _____ I understand that it is frequent practices of unlicensed persons to have the property owner obtain an owner/builder permit that erroneously implies that the property owner is providing her or her own labor and materials. I, as an owner/builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner/builder and am aware of the limits of my insurance coverage for injuries to workers on my property.
- _____ I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. **Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide worker's compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk.**
- _____ I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner/builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

_____ I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at **850-487-1395** or www.myflorida.com for more information about licensed contractors.

_____ **I am aware of and consent to an owner/builder permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address.** _____

_____ I agree to notify the City of Seminole immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

_____ **I will assume full responsibility as an owner/builder contractor and will personally supervise or perform all work allowed by law on the permitted structure.**

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner/builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's worker's compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver's license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

Property Owner Signature: _____ Date _____

Printed Owner Name: _____

STATE OF FLORIDA

COUNTY OF _____

Sworn to (or affirmed) and subscribed before me this _____ day

of _____, 20_____,

by _____, who is _____ personally

known to me or has _____ produced (type of identification) _____
as identification and who did take an oath.

Signature of Notary Public
State of Florida

SEAL

Print/Type/Stamp Name of Notary Public