

BUILDING DEPARTMENT

Revision Date: 10/3/2024 Form I.D. Number: **019.0**

PURPOSE

The City of Coral Springs Building Department has implemented an Early Start Request Program to provide an opportunity for construction work to begin while the application for building permit(s) is being reviewed.

Please Note: An Early Start request will only be approved if there is delay in the approval of plans and/or specifications or other similar special circumstances and only after the completion of the first round of reviews.

AUTHORITY

Section 105.12 of the Broward County Administrative Provisions to the Florida Building Code 8th Edition (2023) allows limited work to start before a building permit is issued. This code section allows certain work to commence up to the point an inspection would be required. In other words, a contractor is not allowed to continue work beyond the point of a required inspection without an official permit. Any work completed prior to the permit issuance is entirely at the risk of the permit applicant.

SUBMITTAL PRE-REQUISITES

- All required building permit applications and corresponding plans must have been submitted to the Building Department.
- Building permit applications and plans must have been approved by both
 Planning & Zoning and Engineering Divisions (if applicable).
- Required demolition permits and inspections must be obtained and approved.

SUBMITTAL REQUIREMENTS

- Early Start Request Application may be submitted in person at the Building Department One Stop Shop or by email at <u>buildingpermits@coralsprings.gov</u> and must be accompanied by a completed Credit Card Authorization Form.
- □ \$60.35 fee charged upon approval of application.
- Completed application signed by both property owner (or owner's agent) <u>and</u>
 the Qualifier.
- Copies of all applicable required county and state agency approvals. Check all that apply. Application will be rejected if left blank.



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YES	N/A	(Must Indicate One or the Other for Each Item Listed Below)
		BCEPGMD Environmental Review Approval Certificte (ER Review)
		BCEPGMD Transportation Concurrency Satisfaction Certificate (DR Review)
		Broward County Asbestos Certificate of Submittal (SRRA)
		BCEPGMD Surface Water License Approval
		Broward County Health Department Approval



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Please complete this application to apply for an Early Start Request. Make sure all contractor information is complete, including what specific work will be performed, for all contractors working under the Early Start Request.

PROJECT INFORMATION	Permit Number:		
Name of Project:			
Job Address:	Suite #: _		
Scope of Work: New Constr	ruction Alteration		
CONTRACTOR INFORMATION	Is this a change of Use / Occupancy?	Yes	No
Description of Early STRUCTURAL Work:			
Name	License # (State / BC COC)		
Address	City	State	Zip
Phone	E-mail		
Contact Name	Contact Phone		
Description of Early ELECTRICAL Work: _			
Name	License # (State / BC COC)		
Address	City	State	Zip
Phone	E-mail		
Contact Name	Contact Phone		
Description of Early Plumbing Work:			
Name	License # (State / BC COC)		
Address	City	State	Zip
Phone	E-mail		
Contact Name	Contact Phone		
Description of Early Mechanical Work: _			
Name	License # (State / BC COC)		
Address	City	State	Zip
Phone	E-mail		
Contact Name	Contact Phone		
	the Early Start Request must be registered urrent liability insurance and worker's comp		
	Verified By	Date:	
USE ONLY: License and Insurance Cur	rent? Yes 🗆 No 🗆 Checked By	Date:	



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APPLICANT NAME:	DATE:
APPLICANT ADDRESS:	
TO: Alex Hernandez - Chief Building Official City of Coral Springs - Building Department 9500 W. Sample Road Coral Springs, FL. 33065	
Re: Building Permit Application #	Job Address:
the issuance of the permit. This request is being made pu County Administrative Amendments to the Florida Build	w work to commence for the above referenced location prior to ursuant to, and in accordance with the provisions of the Broward ling Code, effective December 31, 2023, Section 105.12, which ginning before the issuance of a building permit if there is a delay illar special circumstances.
building permit application and plan may be started pric	ral of the Building Official, "the scope of work delineated in the or to the final approval and issuance of the permit, provided any delineated inspection."
and in accordance with the Florida Building Code. It is ur the proposed scope of work. We, the undersigned, co approval of this request, we, the undersigned, collectively the City of Coral Springs, it's elected officials, employees, a	ned as represented on the plans submitted with the application inderstood that the Florida Building Code may require changes to oblectively and individually, accept that risk. In consideration for and individually, agree to indemnify, hold harmless, and defend and from any and all legal actions or damages, claims, costs, losses, of this request to allow work to commence prior to the issuance of all counsel.
We understand the risks and responsibilities associated with	n this request and appreciate your consideration in this matter.
Signature of Qualifier Date	Signature of Property Owner or Agent / Tenant Date
Printed Name of Qualifier and License #	Printed Name of Owner/Tenant
STATE OF FLORIDA – COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this	STATE OF FLORIDA – COUNTY OF BROWARD Sworn to (or affirmed) and subscribed before me this
day of 20	day of 20
by means of physical presence or on-line notarization	by means ofphysical presence or on-line notarization
personally known or by I.D	personally known or by I.D
Notary Signature	Notary Signature
Notary Name	
Building Official's signature below indicates the request ha	
Alex Hernandez, Chief Building Official	_



Credit Card Authorization Form

BUILDING DEPARTMENT

Revision Date: 10/1/2022 Form I.D. Number: 026.0

~ PLEASE MAKE COPIES FOR FUTURE USE ~

Visa or MasterCard Only

buildingpermits@coralsprings.gov

Cardholder Name (As it o	appears on th	he card)			
Company Name					
Type of Credit Card	Visa	MasterCard	3 Digit Security Code	e	
Credit Card Number			Exp. Do	te	
Cardholder Address			C'A.	Charles 7in	
				State Zip	
	Home Phone E-mail				
Print Cardholder's Name	e				
amount to be determined a your application requirement the Building Department. Succount, I will make every authorization, I acknowledge Cardholder's Signature	ts. This charg Should I have attempt to re e that I am ai	ge is payment for fees e any questions con esolve the issue direc	and/or services and is accer cerning the credit card cha tly with the Building Departr or for the above referenced c	pted in good faith by arge(s) made to my ment. By signing this redit card.	
Permit Number (Required,	. if assigned)				
Job Description					
Job Address					
Re-inspection Fee Type of inspection			Re-inspection Date(optional)		
Expired Permit Re	Expired Permit Renewal \$		Expedited Plan Review \$		
Open/Expired Permit Request \$		st \$	Early Start Request \$		
Overtime Inspecti	on Reques	t \$	Requested Date:		
Other (Specify)				\$	