



Mastering of Single Family Residence Plans

CGC, CRC, and CBC may apply for permit.

- “Request to Master Plans for Single Family Residence” form
- Two (2) copies of sealed plans to include:
 - Engineering supplemental pages
 - Energy Calculations (Worst case scenario)
 - Window/Doors/Garage Doors/Shutters designated from product approvals, FL #, NOA or Miami Date. Note: Complete approval data required in the field to verify at inspection
 - Manufacturers Truss Plan, including list of reactions greater than 5000# and uplifts greater than 1000#
 - All options shall be displayed on a single page with the STANDARD
 - Options are limited to non-structural, interior modifications

Description:

- Master, model name

Route to: OFFICE USE ONLY (Permit Tracking Area)

Building Zoning

Processing: OFFICE USE ONLY

- Type: Master Plans for NC
- Subtype: Residential

Fees:

- Plan Rev Master Res \$120.00 (paid at submittal)
- Surcharge NO

Expiration:

- None

A permit # is assigned to a Master for reference & future site specific building permits. Add record in PermitTrak and the permit won't be assigned to a specific Parcel.

Contractor will be informed of Approval or Rejection via phone/email by a Permit Coordinator.

One set of approved plans will be placed in the To Be Issued drawer, the second set is kept in the bull pen near the Permit Coordinators.

When contractor picks up approved Master set – note in chronology who the approved set was given to.

Note: Masters can be revised once approved. Only items that would **not** change the footprint are allowed, such as type of foundation, type of roof, window manufacturer, etc. Standard Revision Fees apply.



(Date Stamp)

Master #: _____

**Request to Master Plans
for Single Family Residence**

**Contractor to submit 2 complete sets of plans for initial review.

Contractor Name: _____

License Holders Name: _____

Model Name (as shown on plans): _____

Contact person: _____

Contact phone number: _____

Person submitting: _____

Signature: _____

Review fee: \$120.00 to be paid upon submittal

CSR: _____

Office use only:

Approved Date: _____ __Building __Zoning Approved by: _____

Rejected Date: _____ __Building __Zoning Rejected by: _____

If Rejected:

Resubmit Date: _____ Time: _____ Taken in by CSR: _____

Released by: _____ Date: _____ Issued by: _____ Date: _____

SFRmaster/mam 10/27/15