TITLE
ANNUAL FACILITY PERMIT

OBJECTIVE AND PURPOSE
In lieu of an individual permit for each alteration of an existing electrical, gas, mechanical, plumbing or interior non-structural office system(s), the Building Official is authorized to issue an Annual Facility Permit to facilitate routine or emergency service, repair, refurbishing, minor renovations of service systems or manufacturing equipment installation/relocation, per FBC. The permit interval runs from January 1 through December 31st.

RESPONSIBILITY

PHYSICAL PLANT DIRECTOR OR PERMIT HOLDER
♦ Applies for an Annual Facility Permit (Attachment “A”) by formulating a general description of the activities to be performed and the building(s) in which the activities will take place.

BUILDING CODE ADMINISTRATOR
♦ At the discretion of the Building Code Administrator, issue an Annual Facility Permit to the Director of Physical Plant, or other tenant located in FAU property, to facilitate minor repairs and renovations.
♦ Shut down the work or declines the renewal of the permit should building code violations be found, records mismanaged permit(s) or permit(s) not filed in a timely manner.

BUILDING CODE COORDINATOR
♦ Periodically monitor and inspect the work of the Physical Plant Director, or other tenant, to verify that work is being done in accordance with the Florida Building Code.
♦ Verifies that the Annual Facility Permit Log (Attachment “B”) outlining the work is being properly kept and work is being accurately recorded.

PHYSICAL PLANT DIRECTOR OR PERMIT HOLDER
♦ Maintains and files detailed log of construction activities annually with the Building Code Administrator. Additionally, the log shall be submitted monthly to the Building Code Coordinator in a timely manner (5th of the month) or the Annual Facility Permit may be revoked by the Building Code Administrator.
♦ Shall employ only skilled and/or licensed workmen to execute the work and assure adequate safety program is in place.
♦ Verifies that all non-university workers who are retained to perform any work under the Annual Facility Permit have appropriate state or local licenses and insurance.
♦ Ensures that work complies with all provisions of the Florida Building Code, Life Safety Code, and all other applicable codes.
♦ Shall notify the Building Code Administrator if any major changes occur in the scope of the work.

ATTACHMENTS
♦ ANNUAL FACILITY PERMIT – ATTACHMENT “A”
♦ ANNUAL FACILITY PERMIT LOG –ATTACHMENT “B”


APPROVED: Vice President     Assistant V.P.      Director
ANNUAL FACILITY PERMIT (Calendar Year- ____)

Issued To: ______________________________ Date: ______________

Department: ____________________________ Permit Expiration: ____________

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<th>Building(s)</th>
<th>Scope of Work</th>
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The permit holder is responsible for providing direct on-site supervision of construction activities and for ensuring that all work conforms to all applicable codes and standards. The applicant is also responsible for maintaining the job log per Chapter 553.80 F.S.

Name (printed)       Title

Signature of Permit Holder, Date
By signing I certify that to the best of my knowledge all provisions of Laws, Ordinances, and Codes governing this type of Work will be compiled with.

Building Code Administrator, Date
Florida Atlantic University
Engineering & Utilities Department
Building Code Administration

In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

ATTACHMENT “A”
Name: __________________________ Year: ________ Dept: __________________________ Position: __________________________

University Address: __________________________ Phone: __________________________ Fax: __________________________

Log Location: __________________________ Email: __________________________

Month Ending: ________________

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<thead>
<tr>
<th>Bldg# &amp; Room#</th>
<th>Description of Work</th>
<th>Vendor</th>
<th>License Number</th>
<th>Start Date</th>
<th>End Date</th>
<th>Cost of Work</th>
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Signature: ______________________________________________ (attach additional sheets as necessary)

ATTACHMENT “B”