Flood Authorization Form for Condominiums, Apartments and Townhomes Buildings Located in a Flood Hazard Area

*Building owner or an authorized representative must complete this form for **each building**. The County will review the form and supporting materials. Once approved, permits can be issued.*

Property Address and Building Number (if applicable): _____

_____

Property Type: ◉ Condominium ○ Townhomes in HOA Community ○ Apartment Building ○ Other

Designated Point of Contact:

Name: _____

Title: _____

Phone: (_____)_____ Email: _____

Mailing address if different from property address:

_____

_____

Structure's market value from property appraiser or private appraisal
(*attach appraisal or property appraiser FEMA letter from pcpao.gov*) ..$ _____ (A)

49% of the above value (the substantial improvement limit) .....$ 0 (B)

This amount will be reduced by the value of any open permits and permits closed in the past year. Estimated cost to improve/repair commonly owned elements (*or enter $0 if none*) $ _____ (C)

Attach a detailed estimate for all improvements/repairs to common elements (*roofing, lobby, etc.*)

Estimated cost to improve/repair all individual units .....$ _____ (D)

Total improvement/repair estimate for all units and common elements (C+D)..... 0 (E)

The following applies to condo associations and townhome HOAs only:

Number of units in **this** building (*one form is required for each building*): _____

This form authorizes Pinellas County to issue permits to improve/repair:

○ Any unit in this building

○ Only the following unit numbers that have repair/improvements: _____

_____

_____

The construction dollar limit for each unit of the building (how much each unit owner may spend):

◯ **is the same** amount for every unit: $ _____

◯ **is not the same** for every unit. *List the construction limit for each unit or ranges of unit numbers here or on an attached page:* _____

_____

_____

_____

Licensed contractor for all common building improvements:

Name of company: _____

Contact person: _____

Phone: (_____)_____ Email: _____

Signature of association president, building owner, or authorized representative:

By signing this document, the authorized representative attests that the estimates provided will fully repair all damage or remodeling to the structure.

Signature:_____ Date:_____

Title: _____

Printed Name: _____

Phone: (_____) _____

The Association must submit this form for every building. This form and supporting materials must be approved by Pinellas County Building and Review Services. Once approved, it will be entered into your building's record in the permitting system and permits can be issued.