



MANATEE COUNTY FLORIDA

DETERMINATION OF IMPROVEMENT CONSTRUCTION

SUBSTANTIAL IMPROVEMENT means any combination of repair, reconstruction, rehabilitation, addition, or other improvement of a building or structure taking place during a 1-year period, the cumulative cost of which equals or exceeds 50 percent the market value of the building or structure before improvement or repair is started. For each building or structure, the 1-year period begins on the date of the Certificate of Completion or Certificate of Occupancy of the first improvement or repair of that building or structure.

POLICY

This form is used for alterations or additions of existing legally nonconforming structures within the floodplain. The owner attests to improvement costs with back-up documentation that is compared to known current construction costs. A review for feasibility is made and compared against the value of the structure before any improvements are made.

PROCEDURE

1. Floodplain Management staff compares the proposed cost of the improvements against the appraised value of the structure to determine if the proposed work constitutes a substantial improvement under local law.
2. This notarized form will become part of the permanent record. The cost of improvements is tracked and accumulated toward any future improvement considerations. Based on policy, improvements are tracked from one year of the issuance of a Certificate of Completion.
3. Back-up material may be required and shall include contracts or estimates by duly licensed contractors and/or material lists with labor add ons for work being done by the owner.
4. Form must be signed by the owner of the land and notarized.

Building and Development Services Department

Mailing Address: P. O. Box 1000 Street Address: 1112 Manatee Avenue West, Bradenton, FL 34206-1000

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**MANATEE COUNTY
FLORIDA**

DETERMINATION OF IMPROVEMENT FORM

Building Permit Application No. _____ Date: _____

Location of Property (Address) _____

Section _____ Township _____ Range _____ PID # _____

Subdivision _____ Block _____ Lot _____

Property Owner _____

Owner's Address _____

FLOOD ZONE INFORMATION

Attach copy of Survey indicating the flood zone boundaries and required elevations.

F.I.R.M. Panel Number **12081C** _____ Variance No. (if applicable) _____

Flood Zone _____ Exist. Elevation _____ B.F.E. _____

Date of Original Construction _____

Fair market value of existing structure _____
(Excluding land and detached improvements)

Manatee Co. Property Appraiser _____ Private Appraiser _____ Manatee Co. Desk Appraisal _____

Cost of Proposed Improvements: (Value from next page) \$ _____

Percentage of Improvements (Cost of improvement ÷ fair market value) _____ %

Do the proposed modifications represent a Substantial Improvement? _____ Yes _____ No

Substantial Improvement: Any combination of repair, reconstruction, rehabilitation, addition, or other improvement of a building or structure taking place during a 1-year period, the cumulative cost of which equals or exceeds 50 percent the market value of the building or structure before improvement or repair is started. For each building or structure, the 1-year period begins on the date of the Certificate of Completion or Certificate of Occupancy of the first improvement or repair of that building or structure.

Describe the scope of the proposed work in detail _____

(Attach copies of all contracts, estimates and material lists)

	Labor Cost <small>(Homeowners calculate at a rate of \$30/hr)</small>	Material Cost
General Construction	_____	_____
Electric	_____	_____
Plumbing	_____	_____
Mechanical/Gas	_____	_____
Exclusions		
Permit fees, plans, etc.	\$ _____	_____
Net Value of Improvements	\$ _____	_____

I certify that the above information is a complete and accurate representation of the full scope of the intended work and the total cost of all labor and materials necessary to complete that scope.

Owner Date

**STATE OF FLORIDA
COUNTY OF MANATEE**

The foregoing instrument was acknowledged before me by means of physical presence or online notarization, this ____ day of _____ 20__, by _____, who is personally known to me () or has provided the following identification _____ . Expiration Date: _____ and who did/did not take an oath.

Notary Public Signature _____ Notary Public Stamp Here
