



Building and Code Administration
123 West Indiana Avenue, Room 203 • DeLand, FL 32720
Tel: 386-626-6591 • FAX: 386-740-5215

VOLUSIA COUNTY SUBSTANTIAL IMPROVEMENT / DAMAGE ASSESSMENT PACKET

NOTICE TO PROPERTY OWNERS

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY

SUBSTANTIAL DAMAGE shall mean damage of any origin sustained by a building or structure whereby the cost of restoring the building or structure to its before-damaged condition would equal or exceed fifty (50) per cent of the market value of the building or structure before the damage occurred. The term also includes flood related damage sustained by a structure on two (2) separate occasions during a ten-year period for which the cost of repairs at the time of each such flood event, on average, equals or exceeds twenty-five (25) per cent of the market value of the structure before damage occurred.

SUBSTANTIAL IMPROVEMENT shall mean any combination of reconstruction, addition, repair, rehabilitation, alteration, or other improvement of a building or structure taking place during a five-year period, the cumulative cost of which equals or exceeds fifty (50) per cent of the market value of the building or structure before the improvement or repair is started. For each building or structure, the five-year period evaluation begins on the date of the most recent permit application. If substantial demolition is proposed, the structure shall be considered substantially improved. If the structure has incurred "substantial damage," any repairs are considered substantial improvement regardless of the actual repair work performed. The term does not, however, include any project for improvement of a building required to correct existing health, sanitary, or safety code violations identified by the building official and that are the minimum necessary to assure safe living conditions or any alteration of a historic structure provided that the alteration will not preclude the structure's continued designation as a historic structure.

*All repairs and improvements to a structure that is wholly or partially in a special flood hazard area must be permitted through Volusia County Building and Code Administration for a substantial improvement / damage assessment. This requirement includes non-structural repairs or improvements I.E. painting, flooring, cabinetry.

Market value is the value of the building only. Property values are not used for substantial improvement / damage assessments. Market value is determined by way of Volusia County Property Appraisal for Just Improvement on the Building plus 15% mark up to achieve fair market value. Applicants may opt to use a private State Certified Appraiser to perform the valuation. The report should show the value of the building only before improvements take place or before the damage occurred.

If a structure is deemed "substantially improved" or "substantially damaged" it must be brought into full compliance with the most current Florida Building Code edition, Volusia County Ordinances, and FEMA Regulations in addition to these requirements, Coastal Properties within the VE zone and/or seaward of the CCCL must also adhere to Federal and State Regulations such as Department of Environmental Protection and Army Corps of Engineers. Compliance examples can include elevating to the minimum requirement of one foot above the base flood elevation, total reconstruction, elevating of equipment servicing the structure, limited use of lowest floor, etc. Non-residential structures may also have the option of properly designed dry-floodproofing. All options to meet compliance will require a building permit.

An itemized cost estimate **prepared by a licensed Engineer, Architect, or Building Contractor** will be required to be submitted. A list of the included items and excluded items for substantial improvement / damage review purposes have been included in this packet.

NOTE: This packet is intended to be used as an informational guide to assist with the substantial improvement / damage process. Depending on uniqueness of each property, additional information may be necessary to complete the process.



CHECKLIST OF ITEMS TO BE SUBMITTED FOR SUBSTANTIAL IMPROVEMENT / DAMAGE ASSESSMENT

- _____ Application for Substantial Improvement or Substantial Damage Review (included in this packet)
- _____ Completed and signed Substantial Improvement Disclosure Statement
- _____ Elevation Certificate indicating the lowest habitable floor to be one foot above the base flood elevation.
- _____ Property owner's Substantial Improvement or Damage Affidavit (included in this packet)
- _____ Contractor's Substantial Improvement or Damage Affidavit (included in this packet)
- _____ Itemized Improvement Cost breakdown completed by a licensed professional as defined on page 1



**VOLUSIA COUNTY
APPLICATION FOR SUBSTANTIAL IMPROVEMENT
OR SUBSTANTIAL DAMAGE ASSESSMENT**

PROJECT ADDRESS: _____

PROPERTY OWNER'S NAME: _____

PROPERTY OWNER'S ADDRESS: _____
(If different than project address)

CONTRACTOR'S NAME: _____

CONTRACTOR'S LICENSE NO. _____

CHECK ONE OF THE FOLLOWING:

- ☐ I am attaching a State Certified Appraiser's report of the property.
- ☐ I am not using a State Certified Appraiser's report and I accept the use of market value determination by use of the Volusia County Property Appraiser property record.
(Just improvement value of the building only plus 15 percent before the start of improvements or the value before the damage occurred.)

OWNER'S SIGNATURE

STATE OF FLORIDA – County of Volusia
The foregoing instrument was acknowledged before
me via ()physical presence OR ()online notarizations
this _____ day of _____, 20_____
by _____, who is
personally known ___ or has produced identification____,
Type of identification produced_____

Notary Signature_____
Notary Printed Name_____
My Commission Expires_____

CONTRACTOR'S SIGNATURE

STATE OF FLORIDA - County of Volusia
The foregoing instrument was acknowledged before
me via ()physical presence OR ()online notarizations
this _____ day of _____, 20_____
by _____, who is
personally known ___ or has produced identification____,
Type of identification produced_____

Notary Signature_____
Notary Printed Name_____
My Commission Expires_____



**PROPERTY OWNER'S
SUBSTANTIAL IMPROVEMENT OR SUBSTANTIAL DAMAGE
AFFIDAVIT**

PROPERTY ADDRESS: _____

PROPERTY OWNER'S NAME: _____

I hereby attest that the list of work and cost estimate submitted with my Building permit application and the Substantial Improvement or Substantial Damage Application reflects ALL OF THE WORK TO BE CONDUCTED on the subject structure including all additions, improvements and repairs. If the work is the result of Substantial Damage, this work will return the structure at least to the "before damage" condition and bring the structure into compliance with all applicable codes. Neither I nor any contractor or agent will make any repairs or perform any work on the subject structure other than what has been included in the attached list. If additional work is required, I fully understand all work outside the scope of this permit, additional defects, reconstruction cost, damage, and /or unforeseen repairs occurring on this project will require a revision to be submitted with a description of the change and cost associated with the change. This change and increased cost may trigger the requirement for total compliance with the current edition of the Florida Building Code, Volusia County Ordinance, and other Federal Flood and Coastal Regulations.

I UNDERSTAND THAT I AM SUBJECT TO ENFORCEMENT ACTION, WHICH MAY INCLUDE FINES, IF ANY INSPECTION OF THE PROPERTY REVEALS THAT I, OR MY CONTRACTOR, HAVE MADE REPAIRS OR IMPROVEMENTS NOT INCLUDED ON THE ATTACHED LIST OF REPAIRS OR THE APPROVED BUILDING PLANS.

TOTAL COST \$ _____

STATE OF _____

COUNTY OF _____

Before me this day personally appeared _____, who, being duly sworn, deposes and says that he/she has read, understands, and agrees to comply with all the aforementioned conditions.

Property Owner's Signature

The foregoing instrument was acknowledged before me via ☐ physical presence OR ☐ online notarization, this ____ day of _____ 20__ by _____, who is personally known () or produced identification () Type of identification produced _____.

Notary Signature

Notary Printed Name

My Commission Expires _____



**CONTRACTOR'S
SUBSTANTIAL IMPROVEMENT OR SUBSTANTIAL DAMAGE
AFFIDAVIT**

CONTRACTOR'S NAME: _____

CONTRACTOR'S LICENSE NO.: _____

I hereby attest that the list of work and cost estimate submitted with the Building permit application and the Substantial Improvement or Substantial Damage Application reflects ALL OF THE WORK TO BE CONDUCTED on the subject structure including all additions, improvements and repairs. If the work is the result of Substantial Damage, this work will return the structure at least to the "before damage" condition and bring the structure into compliance with all applicable codes. Neither I nor any contractor or agent will make any repairs or perform any work on the subject structure other than what has been included in the attached list. If additional work is required, I fully understand all work outside the scope of this permit, additional defects, reconstruction cost, damage, and /or unforeseen repairs occurring on this project will require a revision to be submitted with a description of the change and cost associated with the change. This change and increased cost may trigger the requirement for total compliance with the current edition of the Florida Building Code, Volusia County Ordinance, and other Federal Flood and Coastal Regulations.

I UNDERSTAND THAT I AM SUBJECT TO ENFORCEMENT ACTION, WHICH MAY INCLUDE FINES, IF ANY INSPECTION OF THE PROPERTY REVEALS THAT I, REPAIRS OR IMPROVEMENTS HAVE BEEN MADE NOT INCLUDED ON THE ATTACHED LIST OF REPAIRS OR THE APPROVED BUILDING PLANS.

TOTAL COST \$ _____

STATE OF _____

COUNTY OF _____

Before me this day personally appeared _____, who, being duly sworn, deposes and says that he/she has read, understands, and agrees to comply with all the aforementioned conditions.

Contractor's Signature

The foregoing instrument was acknowledged before me via ☐ physical presence OR ☐ online notarization, this ____ day of _____ 20__ by _____, who is personally known () or produced identification () Type of identification produced _____.

Notary Signature

Notary Printed Name

My Commission Expires _____



SUBSTANTIAL IMPROVEMENT / DAMAGE ASSESSMENT ITEMIZED COST BREAKDOWN

ITEMS THAT MAY BE EXCLUDED:

- Plans and specifications
- Survey cost
- Permit fees
- Clean-up and trash removal
- Plug-in appliances
- Carpeting over finished floor
- Outside improvements, including landscaping, irrigation, sidewalks, driveways, fences, yard lights, swimming pools, pool enclosures, and detached accessory structures.

PROJECT ADDRESS: _____

Structural Elements:

ITEMS	COST
Foundation & Slab	
Bearing walls, Tie Beams, Trusses	
Framing, joists, Beams, Sub floor, Roof Sheathing	
Interior non-bearing walls	
Exterior finishes I.E. brick, stucco, siding, trim	
Windows and exterior doors	
Roofing, gutters, downspouts	
Attached decks and porches	
Other not listed	

Total Structural Elements \$ _____

Interior Finishes:

Floor finishes (hardwood, vinyl, ceramic, etc.)	
Bathroom tiling and fixtures	
Wall finishes (drywall, paint, stucco ,plaster)	
Built- in cabinets (kitchen, utility, bathroom etc.)	
Interior doors	
Interior finish carpentry	
Built-in book cases and furniture	
Hardware	
Insulation	

Total Interior Finishes \$ _____

Utility/ Trades/Service Equipment:

MECHANICAL	
HVAC Ductwork & rough	
HVAC Equipment	
HVAC grills and decorative trim	
Bathroom fans, rangehood, dryer exhaust	
Other	
PLUMBING	
Plumbing piping & rough	
Plumbing fixtures (sink, tubs, toilets, shower, garbage disposal etc.)	
Water heater	
Water filtration, water softeners	
Recirculating systems	
Other	
ELECTRICAL	
Electrical wiring & rough	
Electrical panel & meter base	
Electrical lighting fixtures, ceiling fans, receptacles, switches	
Security system, intercom system	
Smoke detectors	
Generator	
Other	
GAS	
Gas piping & rough	
Gas tank	
Other	

Total Utility/Trades/Service Equipment**\$**_____**Miscellaneous**

Construction management and supervision	
Overhead and profit	
Sales tax on materials	
Labor associated with demolition	
Demolition and construction debris disposal	
Other	

Total Miscellaneous**\$**_____

Total Cost

Structural Elements	\$
Interior Finishes	\$
Utility/ Trades/Service Equipment	\$
Miscellaneous	\$
TOTAL COST	\$

COST ESTIMATOR'S NAME: _____ LICENSE NUMBER: _____

ADDRESS: _____

PHONE NUMBER: _____

SIGNATURE: _____ DATE: _____

The foregoing instrument was acknowledged before me via ☐ physical presence OR ☐ online notarization, this ____ day of _____ 20__ by _____, who is personally known () or produced identification () Type of identification produced _____.

Notary Signature

Notary Printed Name

My Commission Expires _____

DO NOT WRITE BELOW THIS LINE. FOR USE BY THE VOLUSIA COUNTY BUILDING DEPARTMENT

5-Year Cumulative \$ _____

Current project cost \$ _____

Building Market Value \$ _____

Assessment year _____

Percentage of improvement or restoration _____ %

Notes: