

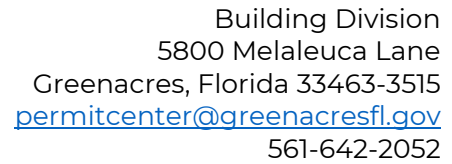


Building Division
5800 Melaleuca Lane
Greenacres, Florida 33463-3515
permitcenter@greenacresfl.gov
561-642-2052

ACCESSORY STRUCTURE CHECKLIST

Site Information
Address: _____ Greenacres, FL _____
Required Plans and Documents
☐ Permit Application. ☐ Accessory Structure Checklist. ☐ Accessory Structure Worksheet. ☐ Survey showing location, size and setbacks of proposed structure. ☐ Plans if applicable. (Plans must be signed in accordance with Florida Statute, and Florida Administrative Code) ☐ NOA or Product approvals. ☐ Tie downs information. ☐ Notice of Commencement for work valued at \$5,000 or more. (Recorded and certified copy of the NOC must be submitted to inspections@greenacresfl.gov prior to scheduling the first inspection) ** Plans and Documents submitted digitally that require a signature and seal from a Registered Design Professional must be signed in accordance with Florida Statute, and Florida Administrative Code. ** NOTES: • Surveys older than one (1) year may be accepted by Planning and Zoning if they accurately represent the current condition of the property. • A maximum of two (2) detached accessory buildings shall be permitted on any residential lot. Approval is contingent on zoning review. Even if all other requirements are met, final approval will not be granted until zoning compliance is confirmed • Additional documents may be requested at any time during the permitting process. Any exceptions must be approved by the Building Official. Applicant Signature: _____ Date: _____

This form is intended for Building Division use only.



Site Information
Address: _____ Greenacres, FL _____
Project Information
☐ Shed ☐ Detached Garage ☐ Tiki Hut ☐ Pergola ☐ Gazebo ☐ Detached Carport ☐ Porch ☐ Screen Porch ☐ Other
☐ Prefabricated ☐ Constructed on Site
Accessory Structure Size: _____ Manufacturer: _____
Is there an existing pad/ slab? ☐ Yes ☐ No
If yes, type of pad/ slab: ☐ Concrete ☐ Wood
Is the pad/ slab part of this permit? ☐ Yes ☐ No
Size of pad/ slab: _____
Are there any other accessory structures on this property? ☐ Yes ☐ No
If yes, how many? _____
*Refer to checklist for any additional requirements. Applicant Signature: _____ Date: _____

Rev. 9/30/25. IC