

PLANNING AND DEVELOPMENT SERVICES

SUBSTANTIAL IMPROVEMENT/DAMAGE WORKSHEET

Date 8/05/2024 Parcel ID Number 0171131007 Permit Application Number 24-004599
 Property Address 101 LOUELLA LANE APT 7 ^{NOKOMIS} ~~VENTNEE~~ FL 34275
 Property Owner KENN & CONNIE Phone Number _____ Email KKUNZE333@gmail.com
 Contractor Name CK FORTITUDE, INC. ^{KUNZE} Phone Number 941 204 8028 Email ckfortitude.com
 Description of Improvements/Repairs Paint unit, replace cabinetry in ^{LED can light} bathrooms & kitchen, convert tub into shower, replace tile & flooring in entire unit. Fluorescent lighting replaced by

Instructions: Fill out all the fields below. If the cost ratio is equal to or greater than 30 percent fill out the 2-page Cost Itemization Form. Note that the reviewer may require the cost itemization forms and quotes for material and labor if deemed necessary to make the Substantial Improvement/Damage determination. Fill out and have notarized the Owner and Contractor Affidavits.

Flood Zone: <u>AE</u>	Required Elevation: <u>NAVD</u>	Year Built: <u>1972 eff date 1992</u>
ACV Appraisal Attached? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	FEMA Elevation Cert Attached? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

1. Present Market Value of building ONLY (depreciated value of building from ACV appraisal or adjusted assessed value, before start of improvement, or if damaged, before the damage occurred), not including land value:

\$ 247,900.00

2. Cost of Improvement and/or Repair, actual cost of the construction. See Cost Itemization Form for items that must be included (include volunteer labor and donated materials/supplies):

\$ 64,625.00

3. Ratio:

Cost of Improvement/Repair (line 2) ÷ Market Value (line 1) = .2606 %

If the ratio in line 3 is 50 percent or greater the entire building must be elevated to the minimum elevation requirement and all other aspects brought into compliance with the Sarasota County floodplain management regulations.

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COST ITEMIZATION WORKSHEET FOR SUBSTANTIAL IMPROVEMENT/DAMAGE

The itemization worksheet below lists the items that must be included in the cost of improvement or repair. The term "costs of improvement" includes all costs directly associated with the alterations and/or additions to the building. The term "costs of repair" includes all costs of all work necessary to restore a damaged building to its pre-damaged condition. Both terms include the costs of all materials, labor, and other items necessary to perform the proposed work. Complete the itemization form by entering the estimated cost for materials, labor, profit and overhead in all the spaces in form that apply to proposed work. Costs of items not directly associated with the building such as outside improvements, detached accessory structures, pools, and permit fees can be excluded from the costs of improvement or repair.

Date 8/05/2024 Parcel ID Number 0171 13 1007 Permit Application Number 24-004599

Property Address 101 LOVELLA

Item	Description	Cost
Site Preparation (e.g. foundation excavation)		\$ 0
Demolition and Construction debris removal	N/A	\$ 2500. ⁰⁰
Structural Elements and Exterior Finishes		
Foundations (e.g. footings, pilings, columns, posts, etc.)	N/A	\$ 0
Monolithic and other types of concrete slabs		\$ 0
Bearing and non-bearing walls exterior and interior		\$ 0
Lintels, tie beams		\$ 0
Joists, beams, subflooring, ceilings		\$ 0
Attached decks and porches		\$ 0
Exterior finishes (e.g. stucco, siding, painting, and trim)	TOUCH UP PAINT AROUND EXTERIOR DOORS	\$ 0
Frame Lumber		
Truss package		\$ 0
Hardware (e.g. connectors, straps, fasteners, nails, screws, etc.)		\$ 0
Framing lumber		\$ 0
Floor, wall, and roof sheathing	NOT EXTERIOR	\$ 1500. ⁰⁰ 0
Manufactured lumber		\$ 0
Wall wrap/Vapor barrier		\$ 0
Windows and Doors		
Windows and sliding glass doors	1 SLIDING GLASS DOOR	\$ 7000. ⁰⁰
Exterior and interior doors	2 EXTERIOR DOORS	\$ 2500. ⁰⁰
Garage overhead doors and openers		\$ 0
Shutters	N/A	\$ 0
Skylights		\$ N/A
Roofing		
Roofing underlayment (felt, self-adhered, synthetic)		\$ 0
Roof cladding (e.g. shingle, metal, tile, membrane, etc.)	N/A	\$ 0
Flashings, drip edge, fascia, soffit, gutters, down spouts, etc.		\$ 0

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	Interior Finishes and Insulation	
Attic, wall, and floor insulation	N/A	\$ 0
Drywall (walls and ceiling, textures)	N/A	\$ 0
Flooring (e.g. wood, laminate, tile, stone, etc.)	TILE	\$ 4,500.00
Finish carpentry (e.g. baseboard, casings, trim, wainscoting, etc.)		\$ 0,000.00
Cabinetry and counter tops		\$ 3,000.00
Wall tile		\$ 8,000.00
Interior painting		\$ 3,000.00
	Electrical	\$ 2,500.00
Rough-in and trim-out		
Fixtures (e.g. lights, ceiling fans)		\$ 3,000.00
Service Change	owner supplied	\$ 500.00
	N/A	\$
	Plumbing	
Rough-in and trim-out		\$ 3,800.00
Fixtures and accessories (e.g. showers, sinks, toilets, faucets, etc.)	owner supplied	\$ 500.00
Fire suppression systems	New smoker	\$ 150.00
	Mechanical	
Rough-in and trim-out	N/A	\$ 0
Equipment and accessories	N/A	\$ 0
	Interior and Exterior Stairs	
Treads and risers	N/A	\$ 0
Guardrails, handrails	N/A	\$ 0
	Miscellaneous	
Aluminum screen lanais and porches under roof	0 N/A	\$
Bathroom accessories (e.g. mirrors, towel racks, shelving, etc.)		\$ 1,200.00
Built-in appliances (e.g. dishwasher, microwave, central vacuum, etc.)		\$ 800.00
Closet shelving and built-ins	N/A	\$ 0
Exterior and interior door hardware		\$ 500.00
Elevator		\$
Fireplace (flue, hearth, mantel, and surround)	N/A	\$
Kitchen accessories	N/A	\$
Low voltage electrical systems		\$
Other describe	under cabinet lighting	\$ 250.00
Other describe		\$
Other describe		\$
Other describe		\$
Line 1		\$
Line 2	Enter total	\$ 51,700.00
Total estimate of cost	Enter Supervision, Overhead, Taxes, Profit	\$ 12,925.00
	Add lines 1 and 2, enter sum in this line	\$ 64,625.00

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OWNER'S AFFIDAVIT:
SUBSTANTIAL IMPROVEMENT OR REPAIR OF SUBSTANTIAL DAMAGE

Property Address: 101 Lovella Lane Unit #7 Nokomis FL
Parcel ID Number: 0171131007
Owner's Name: Kenneth & Connie Kunze
Owner's Address/Phone: Same 260-241-2256
Contractor: Kristen Wheat Young
Contractor's License Number: CRC 1333380
Date of Contractor's Estimate: 4-26-24

I hereby attest that the description included in the permit application for the work on the existing building that is located at the property identified above is the complete scope of work that will be done, including all improvements, rehabilitation, remodeling, repairs, additions, and any other form of improvement.

I further attest that I requested the above-identified contractor to prepare a cost estimate for all of the work, including the contractor's overhead and profit. I acknowledge that if, during the course of construction, if scope of work is modified from the work described, that Sarasota County will re-evaluate its comparison of the cost of work to the market value of the building to determine if the work is substantial improvement. Such re-evaluation may require revision of the permit and may subject the property to additional requirements.

I also understand that I am subject to enforcement action and/or fines if inspection of the property reveals that I have made or authorized repairs or improvements that were not included in the description of work and the cost estimate for that work that were the basis for issuance of a permit.

Connie Kunze
(Signature of Owner/Agent/Contractor)
STATE OF ~~FLORIDA~~ Indiana ^{INC}

Connie Kunze
(Printed Name)
COUNTY OF Sarasota Whitley ^{INC}

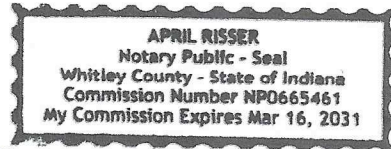
Sworn to (or affirmed) and subscribed before me by means of physical presence or online notarization, this 5th day of August, 2024, by Connie Kunze.

Personally known or Produced identification Florida Driver License
(type of identification produced)

Notary Name Printed: April Risser

Notary Signature: *April Risser*

Commission Number: NP0665461



(Notary Stamp)