



City of Belle Isle
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
 Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

PERMIT CARD – PLEASE POST AT JOB SITE
 THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

<p>Scope of Work: PLUMBING: irrigation, 25 heads</p> <p>Comments: To close out expired OC Permit #P00005168</p> <p>Project Information Address: 4155 Bell Tower Court, Belle Isle, FL 32812 Parcel ID: 20-23-30-1618-00-470 Property Owner: Carolla, Gary Phone Number: 407-722-1002 ***** Company Name: BY OWNER Contractor Name: License Number: Address: Phone Number:</p>	<p align="right">Permit Number: 2014-01-027</p> <p align="right">Date of Application: 01/17/2014</p> <p align="right">Date Permit Issued: 01/23/2014</p> <p>WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.</p>
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BUILDING FEATURES

<p>IMPACT FEES School \$</p> <p>ZONING FEES Zoning Fee \$</p> <p>UNIVERSAL ENG - BUILDING FEES</p> <table style="width:100%;"> <tr><td>Demo</td><td>\$</td></tr> <tr><td>Building</td><td>\$</td></tr> <tr><td>Fence</td><td>\$</td></tr> <tr><td>Driveway</td><td>\$</td></tr> <tr><td>Shed</td><td>\$</td></tr> <tr><td>Window(s)</td><td>\$</td></tr> <tr><td>Door(s)</td><td>\$</td></tr> <tr><td>PrePower</td><td>\$</td></tr> <tr><td>Electrical</td><td>\$</td></tr> <tr><td>Temp Pole</td><td>\$</td></tr> <tr><td>Plumbing</td><td>\$55.50</td></tr> <tr><td>Mechanical</td><td>\$</td></tr> <tr><td>Gas</td><td>\$</td></tr> <tr><td>Roofing</td><td>\$</td></tr> <tr><td>Boat Dock</td><td>\$</td></tr> <tr><td>Screen Encl</td><td>\$</td></tr> <tr><td>Swimming Pool</td><td>\$</td></tr> </table> <p>SURCHARGE FEES</p> <table style="width:100%;"> <tr><td>Surcharge Fee</td><td>\$2.00</td></tr> <tr><td>Surcharge Fee</td><td>\$2.00</td></tr> </table> <p align="center">TOTAL FEES \$59.50</p> <p>Date Paid 1-23-14</p> <p>CC or Check # VWA 4377</p> <p>Amount Paid 59.50</p> <p>The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).</p>	Demo	\$	Building	\$	Fence	\$	Driveway	\$	Shed	\$	Window(s)	\$	Door(s)	\$	PrePower	\$	Electrical	\$	Temp Pole	\$	Plumbing	\$55.50	Mechanical	\$	Gas	\$	Roofing	\$	Boat Dock	\$	Screen Encl	\$	Swimming Pool	\$	Surcharge Fee	\$2.00	Surcharge Fee	\$2.00	<p align="center">BUILDING INSPECTOR USE ONLY</p> <p>IF APPLICABLE: Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO</p> <p>€ BUILDING</p> <p>1st _____ (Footing/Foundation) Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____</p> <p>2nd _____ (Slab)</p> <p>3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)</p> <p>4th _____ (Exterior Framing)(Roof/Wall Sheathing)</p> <p>5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)</p> <p>6th _____ (Insulation to be Made After Roof Installed)</p> <p>7th _____ (Drywall)</p> <p>8th _____ (Sidewalk/Driveway)</p> <p>9th _____ (Other)</p> <p>10th _____ (Final – After MEP and Other Applicable Finals)</p> <p>€ ROOFING</p> <p>1ST ROOFING Deck Nailing/Dry-in/Flashing _____</p> <p>2nd ROOFING Covering In-Progress _____</p> <p>3rd ROOFING Covering Final _____</p> <p>€ PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)</p> <p>€ 1ST _____ (Underground) 2nd _____ (Sewer)</p> <p>3rd _____ (Rough-In/Tub Set) 4th _____ (Final)</p> <p>CHECK APPROPRIATE BOX</p> <p>€ GAS <input type="checkbox"/> Natural <input type="checkbox"/> LP € MECHANICAL € ELECTRICAL € LOW VOLTAGE</p> <p>1st _____ (Rough-In) 2nd _____ (Final)</p>
Demo	\$																																						
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Inspection requests are to be emailed to BDscheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. **Next-Day Inspection requests must be made by 1pm.** Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com/f/fo94edc4-832d-44bd-9809-ecf32f9e2e63>
 login ID = cobi@universalengineering.com password = universal13



City of Belle Isle
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
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received
 1-17-14

APPLICATION FOR PLUMBING PERMIT

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE OF APPLICATION: 1/17/2014 PERMIT NUMBER: 2014-01-027 P00005168 Expired oc
 The undersigned hereby applies for a permit to make plumbing installations as indicated below. PLEASE PRINT

Project Address 4155 Bell Tower Court, Belle Isle FL 32809 32812

Property Owner GARY CAROLLA Phone _____

Property Owner's Mailing Address 4155 Bell Tower Court City BELL ISLE

State FL Zip Code 32812 Parcel Id Number: 30-23-30-1618-00-470

To obtain this information, please visit <http://www.ocpaf.org/Searches/ParcelSearch.aspx>

Class of Building: Old New Type of Building: Residential Commercial Other
 Type of Work: New Alteration Addition Repair Type of System: Sewer Septic Re-pipe
Inspection NEVER DONE WHEN I ORIGINALLY BOUGHT THE HOUSE
 YOU MAY BE REQUIRED TO PROVIDE SEPTIC SYSTEM VERIFICATION FOR NEW / ALTERED / ADDITION to Septic System – ORANGE COUNTY DOCUMENT 64E-6

VALUATION OF JOB (labor & materials) \$ 1,000

FIXTURES	Quantity	FIXTURES	Quantity
Water Closets (Toilet)		Dishwashers	
Bathtubs		Laundry Tubs	
Urinals		Floor Drains	
Disposals		Grease Traps	
Washing Machines		Trailer Connections	
Water Heaters		Spa	
Sewer		Solar	
Catch Basins/Sumps		Pool Piping	
Service Sink		*Irrigation: (# Systems / # Heads)	<u>1/25</u>
Lavatory (Bathroom Sink)		Water Softener	
Showers		Re-pipe	
Sinks		Miscellaneous (Specify)	

**Per FBC, Sec. 608, a Backflow Preventer must be installed & tested; the report must be posted with permit for Final Inspection.*

Building Official: Mr. Bruce Buissery Date: 1/23/2014
 Total Fees 55.50
 3% State Surcharge (\$4.00 minimum) 4.00
 Permit/Review Fee Grand Total 59.50

I hereby certify that the above is true and correct to the best of my knowledge and make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances.

LICENSE HOLDER SIGNATURE Gary Carolla LICENSE # _____
 LICENSE HOLDER NAME GARY CAROLLA COMPANY NAME _____
 Street Address 4155 Bell Tower Court
 City BELL ISLE State FL Zip Code 32812 Phone Number 407-722-1002
 Email Address GARYCAROLLA@GMAIL.COM

NOTE: The Building Permit Number is required if the Plumbing Installation is associated with any construction or alteration where a Building Permit has been issued.

Building Permit Number 707005881

expired OC permit # P00005168

PROJECT NUMBER 0115.1400027.0000

TASK NUMBER 01

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2014-01-027
Property Owner	Caivola
Address	4155 Bell Tower Ct
Nature of Improvement	Plumbing
Received Application	1-17-14
Sent for Stormwater Review	/
Stormwater Approved	/
Sent for Zoning Review	/
Zoning Approved	/
Applied for Variance	/
Variance Approved	/
Sent to BO for Review	1-17-14
Building Official Approved	1-23-14
Comments	
1.	1-23-14 cq emailed Gary it's ready
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



City of Belle Isle

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OWNER BUILDER DISCLOSURE STATEMENT

Per Florida Statute 455.228:

**Homeowners hiring unlicensed Contractors may be
subject a fine of up to \$5,000.00!**

Before me this day personally appeared GARY CAROLLA, who being duly sworn, deposes, and says as follows. "I hereby acknowledge that I have read and fully understand the individual provisions of this instrument."

1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license
GC Initial
2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility. GC Initial
3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts. GC Initial
4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000.00. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption. GC Initial
5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. GC Initial
6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance. GC Initial
7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit, that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property. GC Initial
8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk. GC Initial

Owner Builder Disclosure Statement

9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations.

GC Initial

10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at (850)487-1395 or www.Call.Center@dbpr.state.fl.us for more information about licensed contractors.

GC Initial

11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:


Project Address: 4155 Bell Tower Court Bell Isle FL 32812 GC Initial

12. I agree to notify the City of Belle Isle Building/Zoning Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.

GC Initial

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if any unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

Signature: <u>Gary Carolla</u> <small>(Signature of the property owner)</small>	Print: <u>GARY CAROLLA</u> <small>(Name of the property owner)</small>
Signature: _____ <small>(Signature of the property owner)</small>	Print: _____ <small>(Name of the property owner)</small>
Owner's Address: <u>4155 Bell Tower Ct</u>	
The foregoing instrument was acknowledged before me this <u>1</u> / <u>17</u> / <u>14</u>	
by <u>Gary Carolla</u> who is personally known to me / who produced the following	
<u>FL DL #C640-290-61-361-0</u> as identification and who did not take an oath.	
State of Florida / County of <u>Orange</u>	Seal:
Notary Signature <u>Collina Gast</u>	

2000 00171137 000 00 PLUM Plumbing Permit

Type PLUM Plumbing Permit	Status Expired
Sub Type	Parent ID
Work Addition	Row ID 1503963
Group Structure Permitting	

Primary Property

Address 4155 Bell Tower Court, Orlando, Florida, 32812, USA	Parcel ID 20-23-30-1618-0...	PropID 576904	Folder Unit
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Legal Converted Address :
4155 BELL TOWER CT
BELLE ISLE FL

Tracking Dates and Reference Information

In Date May 17, 2000	Issue/Approve May 17, 2000	Expires Nov 18, 2000
Ref. No. P00005168	By	Final Date
Name		Priority

Description

IRRIGATION 25 HEADS

Conditions

Plan File

Indicators



Plumbing Permit

KEEP POSTED ON JOBSITE AT ALL TIMES
 Orange County Division of Building Safety
 201 South Rosalind Avenue
 Orlando, Florida 32802-2687
 Phone: 407-836-5550

DATE ISSUED: **May 17, 2000**

PLUMBING PERMIT NUMBER: **P00005168**

Permission is granted to do the following work according to the conditions hereon and the approved plans and specifications subject to compliance with the Ordinances of Orange County, Florida.

The issuance of this permit does not grant permission to violate any applicable Orange County and/or State of Florida codes and/or State of Florida codes and/or ordinances. There may be additional permits required from other governmental agencies.

In addition to the requirements of this permit, there may be additional restrictions applicable to the property that may be found in the public records of this county.

This permit becomes void if the work authorized is not commenced within 12 months or is suspended or abandoned for a period of 12 months after commencement. Work shall be considered suspended if an approved inspection has not been made within a 12 month period.

Tenant/Occupant: **NONE**

Owner:

Project Address: **4155 Bell Tower Ct.
 Orlando FL
 32812**

Parcel I.D. Number: **20-23-30-1618-00-470**

Zoning District:

Contractor: **BRUCE S KARP**

License #: **RX0999971**

Address: **232 OVERBROOK Dr.
 CASSELBERRY, FL
 32707-4344**

Building Code:

Class of Building:

Type of Structure:

Scope of Work: **Addition**

FIXTURES	QTY	FIXTURES	QTY	FIXTURES	QTY
2nd Meter:	0	Service Sink(s):	0	Trailer Connection(s):	0
Bathub(s):	0	Sewer:	0	Urinal(s):	0
Dishwasher(s):	0	Shower(s):	0	Washing Machine(s):	0
Disposal(s):	0	Sink(s):	0	Water Closet(s):	0
Drinking Fountain(s):	0	Spa:	0	Water Heater(s):	0
Floor Drain(s):	0	Solar:	0	Misc:	0
Irrigation (# of heads):	1	Laundry Tub(s):	0	Lavatories:	0
Grease Trap/Interceptor:	0	Size:	0	Gallon:	0

WORK INVOLVED:

Backflow Preventer:	0	Re-Pipe:	0	Sewer Hook-up:	0
Sewer Replacement:	0	Spa w/Permanent Connections:	Yes	Water Softener:	Yes
Water Heater Changeout:	0	Mobile Home Connection:	0	Pool Piping:	Yes
Solar Pool Heater:	0	2nd Water Meter:	0		
Estimated Job Cost:	\$0				

Issued By:

Description: **IRRIGATION 25 HEADS**