



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

PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FC 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: REROOF: 30sq, shingles</p> <p>Comments: To close out expired OC Permit #T07005881</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="center">Permit Number: 2014-01-028</p> <p align="center">Date of Application: 01/17/2014</p> <p align="center">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</p> <p>School \$</p> <p>ZONING FEES</p> <p>Zoning Fee \$30.00</p> <p>UNIVERSAL ENG - BUILDING FEES</p> <p>Demo \$</p> <p>Building \$</p> <p>Fence \$</p> <p>Driveway \$</p> <p>Shed \$</p> <p>Window(s) \$</p> <p>Door(s) \$</p> <p>PrePower \$</p> <p>Electrical \$</p> <p>Temp Pole \$</p> <p>Plumbing \$</p> <p>Mechanical \$</p> <p>Gas \$</p> <p>Roofing \$80.00</p> <p>Boat Dock \$</p> <p>Screen End \$</p> <p>Swimming Pool \$</p>	<p align="center">BUILDING INSPECTOR USE ONLY</p> <p>IF APPLICABLE:</p> <p>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)</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 ___ Natural ___ LP € MECHANICAL € ELECTRICAL € LOW VOLTAGE</p> <p>1st _____ (Rough-In) 2nd _____ (Final)</p>
<p>SURCHARGE FEES</p> <p>Surcharge Fee \$2.00</p> <p>Surcharge Fee \$2.00</p> <p>TOTAL FEES \$114.00</p> <p>Date Paid 1-23-14</p> <p>CC or Check # 2014 4317</p> <p>Amount Paid 114⁰⁰</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>	

Inspection requests are to be emailed to BiDScheduling@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://universallengengineering.sharefile.com/f/fo94edc4-832d-44bd-9809-ecf32f9e2e63>
 login ID = cobi@universallengengineering.com password = [universa113](https://universallengengineering.com)



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APPLICATION FOR ROOFING 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 ROOF PERMIT NUMBER 707005881 Expired on 2014-01-028

PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

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, Belle Isle FL 32812

State FL Zip Code 32812 Parcel Id Number: _____
 REQUIRED! To obtain this information, please visit: <http://www.ocpafi.org/Searches/ParcelSearch.aspx>

Class of Building: Old New Type of Building: Residential Commercial Other
 Type of Work: New Roof ReRoof

- **REQUIRED!** Florida Product Approval Screen Printout from www.floridabuilding.org showing the Code Version
- **REQUIRED!** Florida Product Approval Installation Instructions from www.floridabuilding.org (not the manufacturer instructions)
- **REQUIRED!** Copies of your General Liability & Worker's Comp Insurance Certificate & State and Local Licenses

Please indicate the nature of work by completing the information below:

Roof Square Footage: APPX 2,999.58 FT Number of Stories: 2 Job Valuation: \$ 11,755.00

Type: Asphalt Shingles Metal Modified Bitumen Other: _____

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 State FL Zip Code 32812 Phone Number 407-722-1002

City Orlando Email Address GARYCAROLLA@gmail.com

Building Official: _____ Date _____	Zoning Fee	\$ <u>30⁰⁰</u>
	Permit Fee	\$ <u>80⁰⁰</u>
	3% Florida Surcharge	\$ <u>4⁰⁰</u>
	Total Permit Fee	\$ <u>114⁰⁰</u>

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

25' = 1000'
55' = 10755'
 Building Permit Number 707005881



approved ac permit #T07005881

PROJECT NUMBER 0115.1400027.0000

TASK NUMBER 02

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2014-01-028
Property Owner	Casella
Address	4155 Belle Tower Ct
Nature of Improvement	Re-roof
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	
Building Official Approved	
Comments	
1.	1-17-14 sq Gary getting FPA information
2.	
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8.	
9.	
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11.	
12.	



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Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
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Product Approval Form

DATE: 1/17/2014

PERMIT # _____

PROJECT ADDRESS 4155 Bell Tower Court

Belle Isle, FL 32809 32812

As required by Florida Statue 553.842 and Florida Administrative Code 9B-72m, please provide the information and approval numbers of the building components listed below if they will be utilized on the building or structure. FL Approved products are listed online at www.floridabuilding.org or can be obtained from the local product supplier. The following information must be turned in with permit application and available onsite for inspections:

1. This Product Approval Cover Sheet
2. Internet screen from FloridaBuilding.org showing PA#, approval and code edition stamped
3. Manufacturer's installation details from FloridaBuilding.org and requirements for each product stamped

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
EXTERIOR DOORS							
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS							
Single/Dbl Hung				Asphalt Shingles			<u>FL10674. R8</u>
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other			
Skylights							
Other							
STRUCTURAL COMPONENTS							
Wood Connectors							
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							
WALL PANELS							
OTHER							

It is the applicant's responsibility to verify that specific products have been installed in accordance with their limitations and with the minimum required design pressures for the structure. Specific compliance will be verified during field inspections.

Applicant Signature _____

Gary Caroll

Date 1/17/2014



Let's be efficient. Register here.

OFFICE OF THE SECRETARY

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > [Application Detail](#)

FL # **FL10674-R8**
 Application Type **Revision**
 Code Version **2010**
 Application Status **Approved**
 Comments
 Archived
 Product Manufacturer **Owens Corning**
 Address/Phone/Email **One Owens Corning Parkway
 Toledo, OH 43659
 (740) 404-7829
 greg.keeler@owenscorning.com**

Authorized Signature **Greg Keeler
 greg.keeler@owenscorning.com**

Technical Representative **Mel Sancrant**
 Address/Phone/Email **1 Owens Corning PKWY
 Toledo, OH 43659
 (419) 376-8360
 mel.sancrant@owenscorning.com**

Quality Assurance Representative **Greg Keeler**
 Address/Phone/Email **greg.keeler@owenscorning.com**

Category **Roofing**
 Subcategory **Asphalt Shingles**

Compliance Method **Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer**
 Evaluation Report - Hardcopy Received

Florida Engineer or Architect Name who developed the Evaluation Report **Robert J.M. Nieminen**
 Florida License **PE-59166**
 Quality Assurance Entity **UL LLC**
 Quality Assurance Contract Expiration Date **09/26/2014**
 Validated By **John W. Knezevich, PE**
 Validation Checklist - Hardcopy Received

Certificate of Independence **[FL10674_R8_COI_Trinity ERD CI - Nieminen.pdf](#)**

Referenced Standard and Year (of Standard) **Standard**
ASTM D3161, Class F **Year**
ASTM D3462 **2006**
ASTM D7158, Class H **2007**

Equivalence of Product Standards Certified By

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted

12/19/2012

Date Validated

12/20/2012

Date Pending FBC Approval

12/25/2012

Date Approved

02/04/2013

Summary of Products		
FL #	Model, Number or Name	Description
10674.1	Owens Corning Asphalt Roofing Shingles and Starters	3-tab, laminated, starter, and hip & ridge
Limits of Use	Installation Instructions FL10674_R8_IL_er121912FINAL_OC_Aspphalt Shingles_FL10674-R8.pdf Verified By: Robert J. M. Nieminen PE - 59166 Created by Independent Third Party: Yes	
Approved for use in HVHZ: No		
Approved for use outside HVHZ: Yes		
Impact Resistant: N/A		
Design Pressure: N/A		
Other: Refer to ER, Section 5.		
	Evaluation Reports FL10674_R8_AE_er121912FINAL_OC_Aspphalt Shingles_FL10674-R8.pdf Created by Independent Third Party: Yes	

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[Next](#)

Contact Us :: [1940 North Monroe Street, Tallahassee FL 32399](#) Phone: 850-487-1824

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Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:





EXTERIOR RESEARCH & DESIGN, LLC.
Certificate of Authorization #9503
353 CHRISTIAN STREET, UNIT #13
OXFORD, CT 06478
PHONE: (203) 262-9245
FAX: (203) 262-9243

EVALUATION REPORT

Owens Corning
One Owens Corning Parkway
Toledo, OH 43659

Evaluation Report O37940.02.12-R2
FL10674-R8
Date of Issuance: 02/06/2012
Revision 2: 12/19/2012

SCOPE:

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been designed to comply with the 2010 FBC and 2010 FBC Residential Volume sections noted herein.

DESCRIPTION: Owens Corning Asphalt Roof Shingles

LABELING: Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

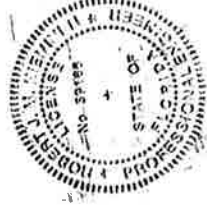
ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 6.

Prepared by:

Robert J.M. Nieminen, P.E.
Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 12/19/2012. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

CERTIFICATION OF INDEPENDENCE:

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

ROOFING SYSTEMS EVALUATION:
1. SCOPE:
Product Category: Roofing

Sub-Category: Asphalt Shingles

Compliance Statement: Owens Corning Asphalt Roof Shingles, as produced by Owens Corning, have demonstrated compliance with the following sections of the Florida Building Code and Florida Building Code, Residential Volume through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

Section	Property	Standard	Year
1507.2.5, R905.2.4	Physical Properties	ASTM D3462	2007
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D3161, Class F	2006
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D7158, Class H	2007

3. REFERENCES:

Entity	Examination	Reference	Date
UL LLC (CER9626)	Physicals & Wind Resistance	File R2453, Vol. 3	02/15/2007
UL LLC (CER9626)	Physicals & Wind Resistance	20120516-R2453	05/16/2012
UL LLC (TST9628)	Physical Properties	06CA20263	04/18/2006
UL LLC (TST9628)	Wind Resistance	11CA34308	02/18/2012
Miami-Dade (CER1592)	FBC HVHZ Compliance	07-1116.12	02/14/2008
Miami-Dade (CER1592)	FBC HVHZ Compliance	09-0915.12	12/16/2009
Miami-Dade (CER1592)	FBC HVHZ Compliance	10-0817.09	10/27/2010
Miami-Dade (CER1592)	FBC HVHZ Compliance	10-0817.10	10/27/2010
Miami-Dade (CER1592)	FBC HVHZ Compliance	10-0817.08	10/27/2010
Miami-Dade (CER1592)	FBC HVHZ Compliance	10-0817.07	10/27/2010
Miami-Dade (CER1592)	FBC HVHZ Compliance	11-0411.03	06/16/2011
Miami-Dade (CER1592)	FBC HVHZ Compliance	12-0309.01	07/19/2012
UL LLC (QUA9625)	Quality Control	Service Confirmation R2453	Exp. 09/26/2014

4. PRODUCT DESCRIPTION:

- 4.1 Asphalt Shingles:
 - 4.1.1 Classic® and Supreme® are fiberglass reinforced, 3-tab asphalt roof shingles.
 - 4.1.2 Berkshire® are fiberglass reinforced, 4-tab asphalt roof shingles.
 - 4.1.3 Duration®, TruDefinition® Duration®, Duration® Premium Cool, TruDefinition® Duration® Designer Color Collection, TruDefinition® Oakridge®, Oakridge® and WeatherGuard® HP are fiberglass reinforced, laminated asphalt roof shingles.
- 4.2 Berkshire® Hip & Ridge Shingles, High Ridge, Hip & Ridge with Sealant, WeatherGuard® HP Hip & Ridge Shingles and ProEdge Hip & Ridge Shingles are fiberglass reinforced, hip and ridge asphalt roof shingles.
- 4.3 Starter Strip Plus and Starter Shingle Roll are starter strips for asphalt roof shingles.

5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in the HVHZ.
- 5.2 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.3 Wind Classification:

- 5.3.1 All Owens Corning shingles noted herein are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F and/or ASTM D7158, Class H, indicating the shingles are acceptable for us in all wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph). Refer to Section 6 for installation requirements to meet this wind rating.
- 5.3.2 All Owens Corning hip & ridge shingles and Starter Strip Plus noted herein are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F, indicating the shingles are acceptable for us in all wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph). Refer to Section 6 for installation requirements to meet this wind rating.
- 5.3.3 Classification by ASTM D7158 applies to exposure category B or C and a building height of 60 feet or less. Calculations by a qualified design professional are required for conditions outside these limitations. Contact the shingle manufacturer for data specific to each shingle.
- 5.3.4 Refer to Owens Corning published information on wind resistance and installation limitations.
- 5.4 All products in the roof assembly shall have quality assurance audit in accordance with the Florida Building Code and F.A.C. Rule 9N-3.

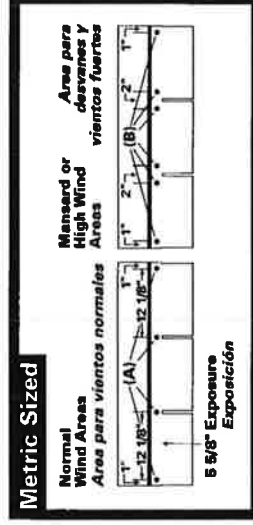
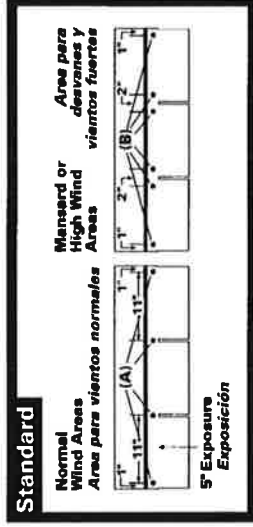
6. INSTALLATION:

6.1 Underlayment:

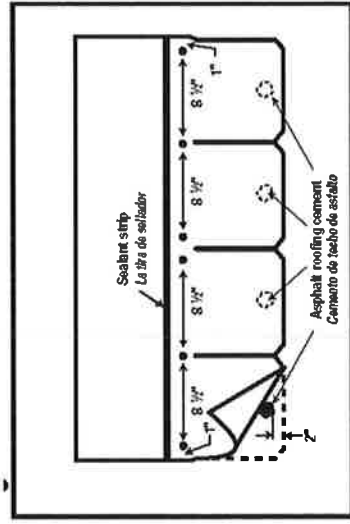
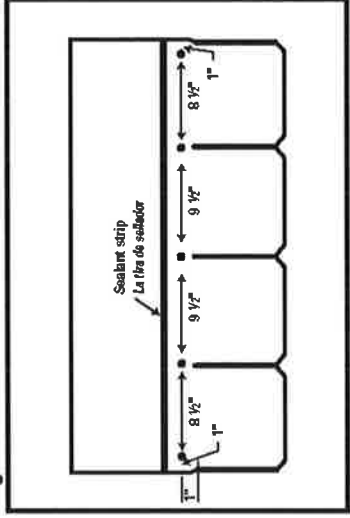
- 6.1.1 Underlayment shall be acceptable to Owens Corning and shall hold current Florida Statewide Product Approval, or be Locally Approved per Rule 9N-3, per FBC Sections 1507.2.3, 1507.2.4 or R905.2.3.

6.2 Asphalt Shingles:

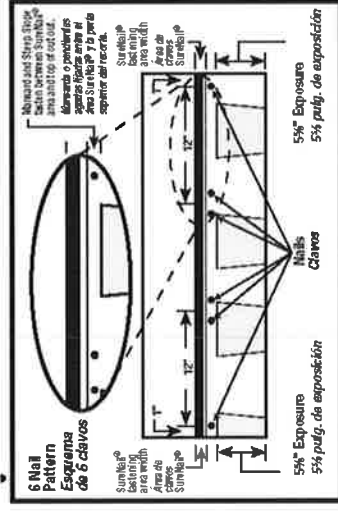
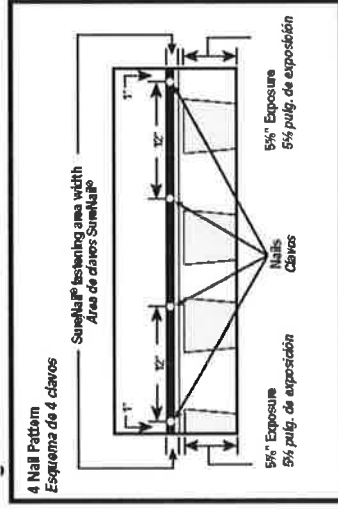
- 6.2.1 Installation of asphalt shingles shall comply with the manufacturer's current published instructions, using minimum four (4) nails per shingle in accordance with FBC Sections 1507.2 or R905.2, with the following exceptions:
 - Berkshire® shingles require minimum five (5) nails per shingle.
 - WeatherGuard® HP shingles require minimum six (6) nails per shingle.
 - Starter Strip Plus requires minimum five (5) nails per strip.
 Refer to Owens Corning published information on wind resistance and installation limitations.
- 6.2.2 Fasteners shall be in accordance with the manufacturer's published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.
- 6.2.4 Where the roof slope exceeds 21 units vertical in 12 units horizontal, special methods of fastening are required. Contact the shingle manufacturer for details.
- 6.2.5 Minimum Nailing – Classic® & Supreme:



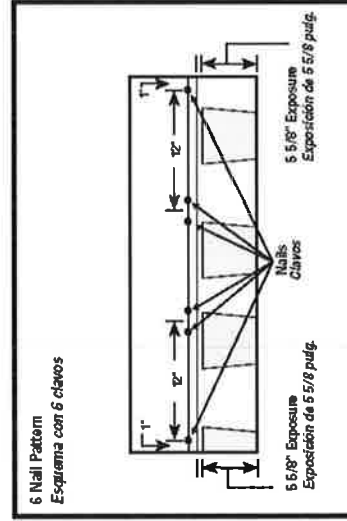
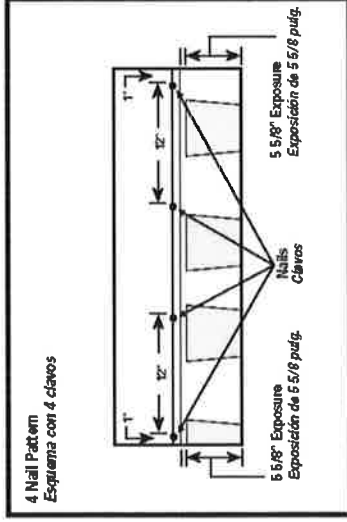
6.2.6 Minimum Nailing – Berkshire®:



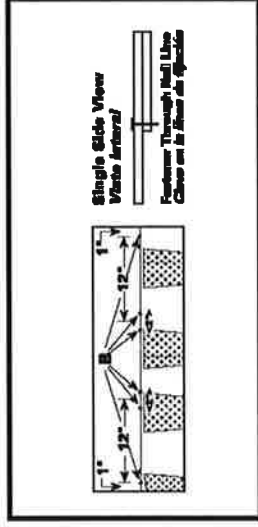
6.2.7 Minimum Nailing – Duration®, TruDefinition® Duration, Duration® Premium Cool & TruDefinition® Designer Color Collection:



6.2.8 Minimum Nailing – TruDefinition® Oakridge®, Oakridge®:

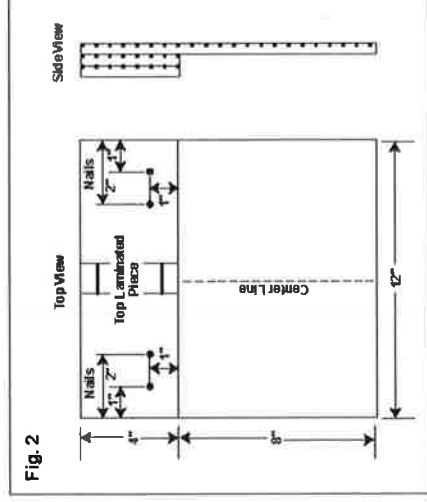
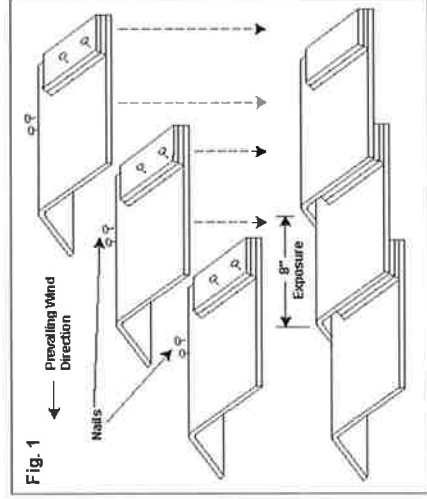


6.2.9 Minimum Nailing – WeatherGuard® HP:

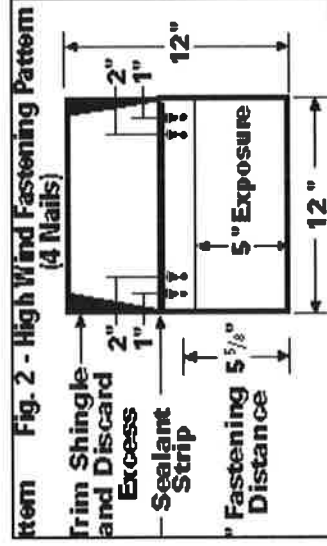


6.3 Hip & Ridge Shingles:

- 6.3.1 Installation of Berkshire® Hip and Ridge Shingles, High Ridge, Hip & Ridge with Sealant, WeatherGuard® HP Hip and Ridge Shingles and ProEdge Hip & Ridge Shingles shall comply with the manufacturer's current published instructions, using four (4) nails per shingle. Refer to Owens Corning published information on wind resistance and installation limitations, including the use of hand-sealing for wind warranties.
- 6.3.2 Fasteners shall be in accordance with the manufacturer's published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.
- 6.3.3 Minimum Nailing – Berkshire® Hip & Ridge and High Ridge:



6.3.4 Minimum Nailing – Hip & Ridge with Sealant:



6.3.5 Minimum Nailing – WeatherGuard® HP Hip and Ridge:

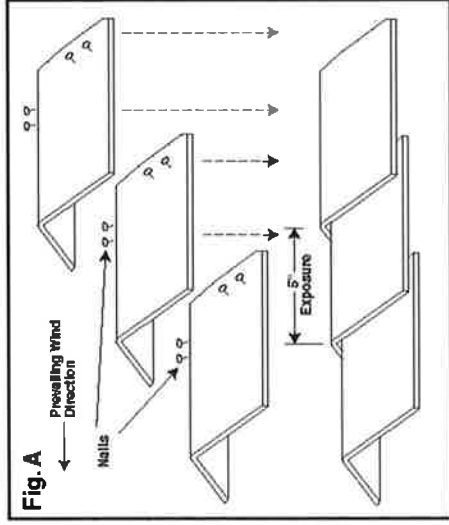
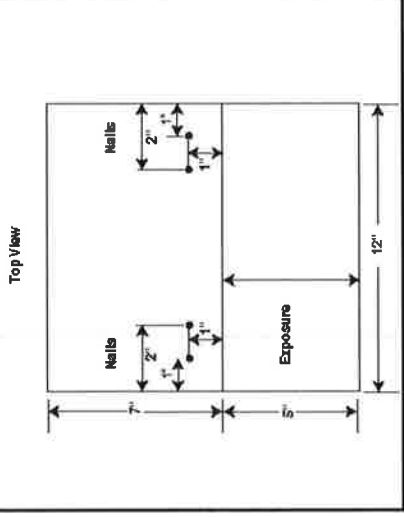
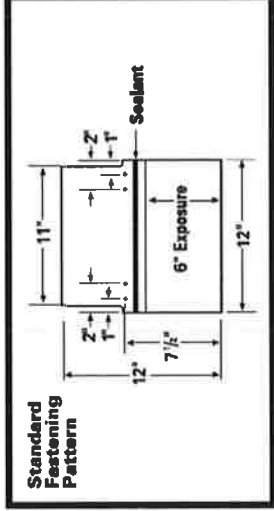
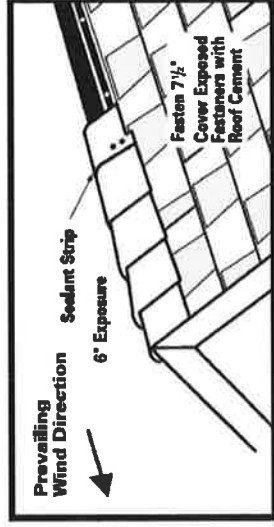


Fig. C Hip & Ridge Shingle Fastening



6.3.6 Minimum Nailing – ProEdge Hip & Ridge Shingles:



7. LABELING:

- 7.1 Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.
- 7.2 Asphalt shingle wrappers shall indicate compliance with one of the required classifications detailed in FBC Table 1507.2.7.1 / R905.2.6.1.

8. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

9. MANUFACTURING PLANTS:

Contact the named QA entity for information on which plants produce products covered by Florida Rule 9N-3 QA requirements.

10. QUALITY ASSURANCE ENTITY:

UL LLC– QUA9625 ; (414) 248-6409; karen.buchmann@ul.com

- END OF EVALUATION REPORT -



City of Belle Isle

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

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.
GA 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.
AC 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 AC 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. AC 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: Gary Carolia (Signature of the property owner) Print: GARY CAROLIA (Name of the property owner)

Signature: _____ (Signature of the property owner) Print: _____ (Name of the property owner)

Owner's Address: 4155 Bell Tower Court Orlando FL 32812

The foregoing instrument was acknowledged before me this 1 / 17 / 14
by Gary Carolia who is personally known to me / who produced the following
FL DL #C410-290-61-361-0 as identification and who did not take an oath.

State of Florida / County of Orange Seal: 

Notary Signature Collina Gast

2007 00157459 000 00 ROOF Roof Permit

Type ROOF Roof Permit Status Expired
Sub Type Parent ID
Work Row ID 1336789

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

Legal Converted Address :
4155 BELL TOWER CT
ORLANDO, FL

Tracking Dates and Reference Information

In Date Oct 02, 2007 Issue/Approve Oct 02, 2007 Expires Apr 05, 2008

Ref. No. T07005881 By Final Date

Name Priority

Description

RE-ROOF
SHINGLES

Conditions

Plan File

Indicators



Roof 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: October 02, 2007

ROOF PERMIT NUMBER: T07005881

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 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: **Jack Douglas Lanier** License #: **CCC0058022**
 Address: **P.O. Box 520668
 Longwood, FL
 32752-0668**

Building Code: **NOC:**

Value of Work:

Square Footage:

No. Of Stories:

Class Of Building:

Nature Of Work: **Type Of Structure:**

Type Covering:

NTRMA/FRSA System:

Owner Established Value: **\$**

Issued By:

Description: **RE-ROOF
 SHINGLES**



Inspection History
Permit #: T07005881

Date Completed	Inspector	Inspection Type	Results
10/31/2007 280 Roof Final	TR	280 Roof Final	Failed