



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.

Scope of Work: PLUMBING: spa & pool piping

Comments: None

Project Information

Address: 1401 Horizon Court, Belle Isle, FL 32809
Parcel ID: 25-23-29-7343-00-010
Property Owner: Gonzalez, Ibrain
Phone Number: 321-442-5666

Company Name: Mid-Florida Pools & Repair Co.
Contractor Name: Hagerstrom, Carl
License Number: CPC023578
Address: 2707S. Crystal Lake Drive, Orlando, FL 32806
Phone Number: 407-468-0301

Permit Number: 2014-07-009

Date of Application: 06/30/2014

Date Permit Issued: 07/02/2014

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.

BUILDING FEATURES

IMPACT FEES

Traffic \$
School \$

ZONING FEES

Zoning Fee \$

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
Boat House \$
Building \$
Demo \$
Door(s) \$
Driveway \$
Electrical \$
Fence \$
Gas \$
Irrigation \$
Low Voltage \$
Mechanical \$
Plumbing \$111.00
Pool \$
Roofing \$
Screen Endl \$
Shed \$
Temp Pole \$
Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
Surcharge Fee \$2.00

TOTAL FEES \$115.00

Date Paid 7-3-14

CC or Check # 58284

Amount Paid 115

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 (F-S 553).

BUILDING INSPECTOR USE ONLY

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

BUILDING

1st Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____ (Footing/Foundation)

2nd _____ (Slab)

3rd _____ (Lintel) Wall Reinforcing on Masonry Building)

4th _____ (Exterior Framing) (Roof/Wall Sheathing)

5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)

6th _____ (Insulation to be Made After Roof Installed)

7th _____ (Drywall)

8th _____ (Sidewalk/Driveway)

9th _____ (Other)

10th _____ (Final - After MEP and Other Applicable Finals)

ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1st ROOFING Deck Nailing/Dry-in/Flashing _____

2nd ROOFING Covering In-Progress _____

3rd ROOFING Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1st _____ (Underground) 2nd _____ (Sewer)

3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS ___ Natural ___ LP ___ MECHANICAL ___ ELECTRICAL ___ LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

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://universalengineering.sharefile.com/ff094edc4-832d-44bd-9809-ecf32f9e2e63>

login ID = cobi@universalengineering.com

password = universal113



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

Received
 6-30-14

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: 6/26/14 PERMIT NUMBER 2014-07-009
 The undersigned hereby applies for a permit to make plumbing installations as indicated below. PLEASE PRINT

Project Address 1401 HORIZON CT Belle Isle FL ✓ 32809 Y 32812
 Property Owner IBRAIN GONZALEZ Phone 321 460 3706
 Property Owner's Mailing Address 1401 HORIZON CT City BELLE ISLE
 State FLA Zip Code 32809 Parcel Id Number: 25-23-7343-00-010

To obtain this information, please visit <http://www.ocpafl.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

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) \$ 1500

SWIMMING POOL (NEW)

FIXTURES	Quantity	FIXTURES	Quantity
Water Closets (Toilet)		Dishwashers	
Bathtubs		Laundry Tubs	
Urinals		Floor Drains	
Disposals		Grease Traps	
Washing Machines		Trailer Connections	
Water Heaters		Spa	1
Sewer		Solar	
Catch Basins/Sumps		Pool Piping	1
Service Sink		*Irrigation: (# Systems / # Heads)	
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: Angel Perez Date 7-01-2014 Permit Fee 74-
 Verified Contractor's Licenses & Insurance are on file cg Date 6-30-14 Review Fee 37-
 3% State Surcharge (\$4.00 minimum) 4-
 Total Permit Fee 115.00

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 Carl E. Hagerstrom LICENSE # CPC023518
 LICENSE HOLDER NAME CARLE HAGERSTROM COMPANY NAME MID-FLORIDA POOL REPAIR CO
 Street Address 2707 S. CRYSTAL LK DR
 City ORLANDO State FLA Zip Code 32806 Phone Number 407.843.2700

Email Address _____
 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 2014-07-004

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	<u>2014-07-009</u>
Property Owner	<u>Gonzalez, Brian</u>
Address	<u>1401 Horizon Dr</u>
Nature of Improvement	<u>Plumbing Permit for Pool</u>
Received Application	<u>6/30/14</u>
Sent for Stormwater Review	<u>N/A</u>
Stormwater Approved	
Sent for Zoning Review	<u>N/A</u>
Zoning Approved	
Applied for Variance	
Variance Approved	
Sent to BO for Review	
Building Official Approved	<u>7-01-2014</u>
Comments	
1.	<u>7-2-14 eq Called Carl + told him it's ready</u>
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



COBI Permit Fee Calculation Form



Reviewer Signature: AP. Date: 7/07/2014

Permit Type:	<u>Plumbing</u>	Job Cost:	<u>\$ 1500-</u>
Permit Fee:	<u>\$ 74-</u>		
Plans Review Fee:	<u>\$ 37-</u>	(50% of permit fee – excluding ReRoofs)	
1.5% State Fee:	<u>\$ 2-</u>		
1.5% State Fee:	<u>\$ 2-</u>		
TOTAL BUILDING FEE:	\$ 115-	(does not include Zoning fees or Deposits)	

Note: Total gets doubled for SWO/AFT permits

Spa \$37
 Pool \$37

 74
 50% 37

 \$111
 3% 4

 \$115.00