



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://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:** DOORS: front entry; size-for-size  
**Comments:** None  
**Project Information**  
Address: 3200 Cullen Lake Shore Drive, Belle Isle, FL 32812  
Parcel ID: 17-23-30-4379-01-500  
Property Owner: Edward & Rebecca Gold  
Phone Number: 407-923-7781  
\*\*\*\*\*  
Company Name: BY OWNER  
Contractor Name:  
License Number:  
Address:  
Phone Number:

**Permit Number: 2014-07-027**

**Date of Application: 07/11/2014**  
**Date Permit Issued: 07/11/2014**

**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

#### BUILDING INSPECTOR USE ONLY

#### IMPACT FEES

School \$  
Traffic \$

#### ZONING FEES

Zoning Fee \$

#### UNIVERSAL ENG - BUILDING FEES

Boat Dock \$  
Boat House \$  
Building \$  
Demo \$  
Door(s) \$43.50  
Driveway \$  
Electrical \$  
Fence \$  
Gas \$  
Irrigation \$  
Low Voltage \$  
Mechanical \$  
Plumbing \$  
Pool \$  
Roofing \$  
Screen Encl \$  
Shed \$  
Temp Pole \$  
Window(s) \$

#### SURCHARGE FEES

Surcharge Fee \$2.00  
Surcharge Fee \$2.00

**TOTAL FEES \$47.50**

Date Paid 7-11-14

CC or Check # VISA 5110

Amount Paid 47.50

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).

#### 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

1<sup>st</sup> \_\_\_\_\_ (Footing/Foundation)  
Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? \_\_\_\_  
2<sup>nd</sup> \_\_\_\_\_ (Slab)  
3<sup>rd</sup> \_\_\_\_\_ (Lintel)(Wall Reinforcing on Masonry Building)  
4<sup>th</sup> \_\_\_\_\_ (Exterior Framing)(Roof/Wall Sheathing)  
5<sup>th</sup> \_\_\_\_\_ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)  
6<sup>th</sup> \_\_\_\_\_ (Insulation to be Made After Roof Installed)  
7<sup>th</sup> \_\_\_\_\_ (Drywall)  
8<sup>th</sup> \_\_\_\_\_ (Sidewalk/Driveway)  
9<sup>th</sup> \_\_\_\_\_ (Other)  
10<sup>th</sup> \_\_\_\_\_ (Final – After MEP and Other Applicable Finals)

#### ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1<sup>ST</sup> ROOFING Deck Nailing/Dry-in/Flashing \_\_\_\_\_  
2<sup>nd</sup> ROOFING Covering In-Progress \_\_\_\_\_  
3<sup>rd</sup> ROOFING Covering Final \_\_\_\_\_

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

1<sup>ST</sup> \_\_\_\_\_ (Underground) 2<sup>nd</sup> \_\_\_\_\_ (Sewer)  
3<sup>rd</sup> \_\_\_\_\_ (Rough-In/Tub Set) 4<sup>th</sup> \_\_\_\_\_ (Final)

#### CHECK APPROPRIATE BOX

GAS  Natural  LP  MECHANICAL  ELECTRICAL  LOW VOLTAGE

1<sup>st</sup> \_\_\_\_\_ (Rough-In) 2<sup>nd</sup> \_\_\_\_\_ (Final)

Inspection requests are to be emailed to [BidScheduling@UniversalEngineering.com](mailto: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/f/fo94edc4-832d-44bd-9809-ecf32f9e2e63>

login ID = [cobi@universalengineering.com](mailto:cobi@universalengineering.com)

password = universal13





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**Building Permit (Land Use) Application**  
 To be completed as required by State Statute Section 713 and other applicable sections.

Owner's Name V Edward and Rebecca Gold

PERMIT # \_\_\_\_\_

Owner's Address 3200 Cullen Lake Shore Dr. Belle Isle, FL 32812

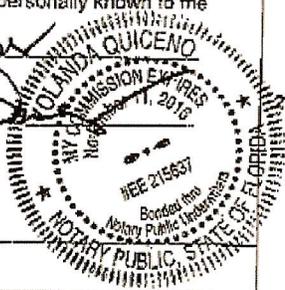
Contractor Name <u>By owner</u>	Company Name _____
License # _____	Company Address _____
Contact Phone/Cell <u>407-923-7781</u>	City, State, ZIP _____
Contact Email <u>beckygold@belleisland.net</u>	Contact Fax _____

**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 if job is \$2500(+) or if A/C Replacement \$7500(+) 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.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Division of Building Safety Regulations ([www.floridabuilding.org](http://www.floridabuilding.org)) and City Ordinances ([www.municode.com](http://www.municode.com)) regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable City and/or State of Florida codes and/or ordinances. Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all other construction including ROOFING, ELECTRICAL, MECHANICAL, PLUMBING, GAS, SIGNS, POOLS, SCREEN ENCLOSURES, ETC.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Owner Signature V Edward Gold  
 The foregoing instrument was acknowledged before me this 7/10/2014  
 by VEDWARD GOLD who is personally known to me  
 and who produced Pl. Dennis Kern  
 as identification and who did not take an oath  
 Notary as to Owner \_\_\_\_\_  
 State of Florida \_\_\_\_\_  
 County of Orange \_\_\_\_\_



Contractor Signature \_\_\_\_\_  
 COMPANY NAME \_\_\_\_\_  
 The foregoing instrument was acknowledged before me this \_\_\_/\_\_\_/\_\_\_  
 by \_\_\_\_\_ who is personally known to me  
 and who produced \_\_\_\_\_  
 as identification and who did not take an oath.  
 Notary as to Owner \_\_\_\_\_  
 State of Florida \_\_\_\_\_  
 County of Orange \_\_\_\_\_

*By [Signature]*

**Impervious Surface Ratio Worksheet**  
 Development Zoned A-1, A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per City Code, Section 50-74: Impervious Surface Ratio

- Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).  
 Total Lot Area \_\_\_\_\_ X 0.35 =  
 Allowable Impervious Area (BASE) \_\_\_\_\_

Calculate the "proposed" impervious area on the lot. This includes the sum of all areas that do not allow direct percolation of rainwater. Examples include house, pool, deck, driveway, accessory building, etc.

- House \_\_\_\_\_
- Driveway \_\_\_\_\_
- Walkway \_\_\_\_\_
- Accessory Buildings \_\_\_\_\_
- Pool & Spa \_\_\_\_\_
- Deck & Patio \_\_\_\_\_
- Other \_\_\_\_\_

Actual Impervious Area (AIA) \_\_\_\_\_

- If AIA is less than BASE, subtract AIA from BASE to determine the amount of impervious area that may be added without providing onsite retention.
- If AIA is greater than BASE, then onsite retention must be provided.

Assuming 7.5 inches of rainfall based on a 24hr 10 year Rain Event (TP40), the formula is: (7.5 inches rainfall/12 inches p/foot) X (result from line 4) = cubic feet of storage volume needed



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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 Rebecca Gold, 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. RG 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. RG 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. RG 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. RG Initial
5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. RG 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. RG 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. RG 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. RG 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.

*VEG* 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.CallCenter@dbpr.state.fl.us](http://www.CallCenter@dbpr.state.fl.us) for more information about licensed contractors.

*VEG* 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: 3200 Cullen Lake Shore Dr. Belle Isle, FL 32812

*VEG* 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.

*VEG* 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 owners 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: *V Edward Gold, Jr.*  
(Signature of the property owner)

Print: V Edward Gold, Jr.  
(Name of the property owner)

Signature: *Rebecca Gold*  
(Signature of the property owner)

Print: Rebecca Gold  
(Name of the property owner)

Owner's Address: 3200 Cullen Lake Shore Dr. Belle Isle, FL 32812

The foregoing instrument was acknowledged before me this 7 / 10 / 2014

by Rebecca Gold who is personally known to me / who produced the following FL Drivers license who did not take an oath.

State of Florida / County of Orange

Notary Signature *Yolanda Quince*





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### Product Approval Form

DATE: 07-09-14

PERMIT # \_\_\_\_\_

PROJECT ADDRESS 3200 Cullen Lake Shore Dr.

Belle Isle, FL  32809  32812

As required by Florida Statute 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](http://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 #
<b>EXTERIOR DOORS</b>				<b>EXTERIOR DOORS</b>			
Swinging	Masonite	Fiberglass	FL 5507-PA	Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
<b>WINDOWS</b>				<b>ROOFING MATERIALS</b>			
Single/Dbf Hung				Asphalt Shingles			
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other			
Skylights							
Other							
<b>STRUCTURAL COMPONENTS</b>				<b>STRUCTURAL COMPONENTS</b>			
Wood Connectors							
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
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 \_\_\_\_\_

Date \_\_\_\_\_



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Business Professional



Product Approval  
USER: Public User

[Home](#) > [Product Approval](#) > [Application Detail](#)

Product Approval Method > [Method 1 - Option A](#) > [Application Detail](#) > **Application Detail**

FL #	FL5507-R4
Application Type	Revision
Code Version	2010
Application Status	Approved

\*Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.

Comments  
Archived

Product Manufacturer Address/Phone/Email	Masonite International 1955 Powis Road West Chicago, IL 60185 (615) 441-1258 sschreiber@masonite.com
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Authorized Signatory	Steve Schreiber sschreiber@masonite.com
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Technical Representative  
Address/Phone/Email

Quality Assurance Representative  
Address/Phone/Email

Category	Exterior Doors
Subcategory	Swinging Exterior Door Assemblies

Compliance Method  
Certification Mark or Listing

Certification Agency Validated By	National Accreditation & Management Institute National Accreditation & Management Institute,
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Referenced Standard and Year (of Standard)	<u>Standard</u> TAS 202	<u>Year</u> 1991
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Equivalence of Product Standards  
Certified By

Product Approval Method  
Method 1 Option A

Date Submitted	03/04/2012
Date Validated	03/11/2012

Date Pending FBC Approval  
 Date Approved

03/14/2012

**Summary of Products**

FL #	Model, Number or Name	Description
5507.1	Fiberglass Side-hinged Door Unit	6'-8" Glazed I/S and O/S Double Door
<b>Limits of Use</b>		<b>Certification Agency Certificate</b>
Approved for use in HVHZ: Yes		12/31/2014
Approved for use outside HVHZ: Yes		<b>Quality Assurance Contract Expiration Date</b>
Impact Resistant: No		12/31/2014
Design Pressure: +/-50.5/-50.5		<b>Installation Instructions</b>
Other: Evaluated for use in locations adhering to the Florida Building Code including the High Velocity Hurricane Zone, and where pressure requirements as determined by ASCE7, do not exceed the design pressures listed. 6'-0" x 6'-8" max nominal size. Max DP +/- 50.5. When large missile impact resistance is required, hurricane protective system is required. See installation drawing DWG-MA-FL0143-05 for additional information.		FL5507.1-01-11-FBC-1-1-001 Verified By: National Accreditation & Management Institute Created by Independent Third Party:
		<b>Evaluation Reports</b>
		Created by Independent Third Party: Yes

Contact Us :: 1340 North Monroe Street, Tallahassee FL 32308 Phone: 904.487.1822

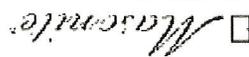
The State of Florida is an AFFCO employer. Copyright 2002-2012 State of Florida. :: Privacy Statement :: Accessibility Statement :: Refund Statement

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 904.487.1305. Pursuant to Section 455.225(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 email provided may be used for official communication with the licensee. However, email addresses are public records. 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:**



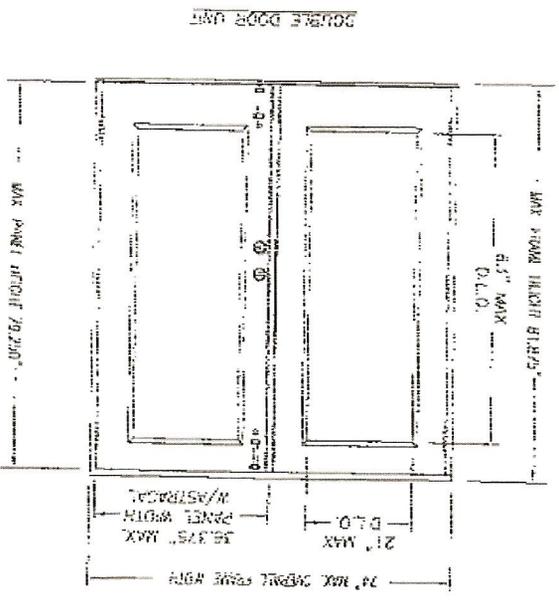
Product Approval Accepts  
 Approved by: [Signature]  
 Date: 03/14/2012


**6-8" GLAZED DOUBLE DOOR**  
**SIDE-HINGED FIBERGLASS DOOR UNIT**

- GENERAL NOTES
- EVALUATED FOR USE IN LOCATIONS REFERRED TO THE FLOOR BUILDING CODE AND WHERE PRESSURE REQUIREMENTS AS DESCRIBED IN ASSE-71 UNLESS DESIGN LOADS FOR BUILDINGS AND OTHER STRUCTURES DOES NOT EXCEED THE DESIGN PRESSURES LISTED.
  - HOUR-RATE PROTECTIVE SYSTEM (SHUTTERS) IS REQUIRED.
  - OUTLET/INLET CORE FLAME SPREAD INDEX OF 30 AND SMOKE DEVELOPED INDEX OF 60 PER ASTM E84.
  - PLASTIC TESTING OF PRESSURE EXPOSURE:
 

TEST DESCRIPTION	RESULT
SELF EXTINGUISHING	ASTM D1929
RATE OF BURNING	0.58 IN/MIN
SMOKE DENSITY	53.4%
GLASS STRENGTH	3.28 MPa
  - PLASTIC TESTING OF LITE FRAME MATERIAL:
 

TEST DESCRIPTION	RESULT
SELF EXTINGUISHING	ASTM D1929
RATE OF BURNING	0.27 IN/MIN
SMOKE DENSITY	1.4%
GLASS STRENGTH	1.50X MPa



11/1/77  
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11/1/77	11/1/77	11/1/77	11/1/77
11/1/77	11/1/77	11/1/77	11/1/77

11/1/77	11/1/77	11/1/77	11/1/77
11/1/77	11/1/77	11/1/77	11/1/77

MASONITE INTERNATIONAL CORP.  
 19551 POWERS RD.  
 WEST CHICAGO, IL 60185

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