



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universallengengineering.com](http://www.universallengengineering.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:** MECHANICAL: c/o 3ton AC with no ductwork

**Comments:** None

**Project Information**

**Address:** 3714 Quando Circle, Belle Isle, FL 32812

**Parcel ID:** 20-23-30-1646-00-960

**Property Owner:** Ricks, Walter and Millie Sue

**Phone Number:** 407-240-2332

\*\*\*\*\*

**Company Name:** No Sweat AC & Heating, LLC

**Contractor Name:** Thrift, Alan

**License Number:** CAC1816648

**Address:** 2798 Pepper Lane, Orlando, FL 32812

**Phone Number:** 407-497-4259

**Permit Number: 2014-07-060**

**Date of Application: 07/30/2014**

**Date Permit Issued: 07/30/2014**

**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 \$165.00  
Plumbing \$  
Pool \$  
Roofing \$  
Screen Encl \$  
Shed \$  
Temp Pole \$  
Window(s) \$

**SURCHARGE FEES**

Surcharge Fee \$2.48  
Surcharge Fee \$2.48

**TOTAL FEES \$169.96**

**Date Paid** 7-31-14

**CC or Check #** MC

**Amount Paid** \$169.96

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).

**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**

1<sup>st</sup> Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? \_\_\_\_\_ (Footing/Foundation)

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 [BDscheduling@UniversalEngineering.com](mailto: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://universallengengineering.sharefile.com/f/fo94edc4-832d-44bd-9809-ect32f9e2e63>

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

password = universal13

PROJECT NUMBER 0115.1400 394.0000

TASK NUMBER 01

CITY OF BELLE ISLE  
Permit Application Review Sheet

Permit Number	<u>2014-07-060</u>
Property Owner	<u>Ricks, Jo lex &amp; Millie</u>
Address	<u>3714 Quando CR</u>
Nature of Improvement	<u>Mechanical</u>
Received Application	<u>7-30-14</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>7-30-2014 Provide ANCHORING FORM</u>
<b>Comments</b>	
1.	
2.	
3.	
4.	
5.	
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7.	
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10.	
11.	
12.	



# COBI Permit Fee Calculation Form



Reviewer Signature: AP. Date: 7-30-2014

Permit Type:	<u>Mechanical</u>	Job Cost:	\$ <u>4,150-</u>
Permit Fee:	\$ <u>110.00</u>		
Plans Review Fee:	\$ <u>55.00</u>	(50% of permit fee – excluding ReRoofs)	
1.5% State Fee:	\$ <u>2.475</u>		
1.5% State Fee:	\$ <u>2.475</u>		
<b>TOTAL BUILDING FEE:</b>	\$ <u>169.95</u>	(does not include Zoning fees or Deposits)	

Note: Total gets doubled for SWO/AFT permits

$$377 + (\$6 \times 3) = 377 + 18 = \$395 \times 2 = \$794$$

$$\$110 \times 50\% = \$55 + 110 = \$165$$

$$165 \times 3\% = \$4.95$$



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universaleengineering.com](http://www.universaleengineering.com)

## APPLICATION FOR MECHANICAL 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:** 7-30-2014 **PERMIT NUMBER:** 2014-07-060  
PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

Project Address 3714 Quando Circle Belle Isle FL 32809  32812  
Property Owner RICKS, Walter H and Millie Sue Phone 407-240-2332  
Property Owner's Mailing Address 3714 Quando Circle City Belle Isle  
State FL Zip Code 32812-2835 **Parcel Id Number:** 20-23-30-1646-00-960

To obtain this information, please visit <http://www.ocpaf1.org/Searches/ParcelSearch.aspx>

**Class of Building:** Old  New  **Type of Building:** Residential  Commercial  Other   
**Type of Work:** New  Alteration  Addition  Repair

- **REQUIRED Tie Down Engineering and Equipment Sizing Calculation**
- **REQUIRED, adding A/C to new space – provide Energy Calculations**
- **REQUIRED, if replacing unit with no duct work, Duct Certification as per FB 101.4.7.1, must be posted on unit**

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

**Air Conditioning:** # of Units 1 Tons Per Unit 3.0 Total Tons 3.0 Estimated Cost \$ \_\_\_\_\_  
Type of System: Water to Air Chiller Split System Package Heat Pump x

**Heating:** # of Units KWS Per Unit 10 Total KWS BTU's Estimated Cost \$ \_\_\_\_\_  
Oil Electric Boiler Gas (A) Estimated Cost Fee \$ 4150

**Fees for items below are based on valuation of all units, equipment, materials and labor supplied by owner or contractor.**

**Ventilation:** (Number of) Grease Heat Hoods, Air Intakes Exhaust Fans Dryer Vents Estimated Cost \$ \_\_\_\_\_

**Refrigeration:** Number of units Estimated Cost \$ \_\_\_\_\_

**Piping:** Air Vacuum Steam Chill Water Estimated Cost \$ \_\_\_\_\_

**Others:** (Specify) Estimated Cost \$ \_\_\_\_\_

**Was the space previously Air Conditioned?** Yes No (B) Estimated Cost Fee \$ \_\_\_\_\_

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 Alan D Thrift LICENSE # CAC1816648  
LICENSE HOLDER NAME Alan D Thrift COMPANY NAME No Sweat AC & Heating

Street Address 2798 Pepper Lane  
City Orlando State FL Zip Code 32812 Phone Number 407-497-4259

Building Official: Angel A Perez Date 7-30-2014  
Review & Permit Fee \$ 165-  
3% Florida Surcharge \$ 4.96  
Total Permit Fee \$ 169.96

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

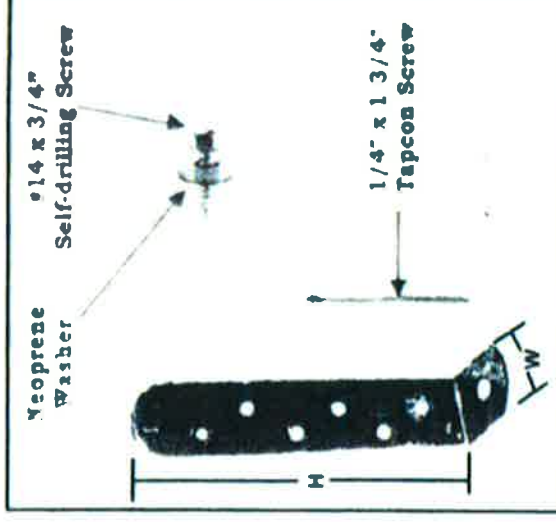
Building Permit Number \_\_\_\_\_



PART NO.	H DIM.	W DIM.	DESCRIPTION
# 771	4"	1"	4 pk. Clips only
# 773	6"	1"	4 pk. Clips only

**ANCHOR CLIP NOTES:**

- The anchor clip are 16 Gauge, G-90 hot-dip galvanized steel rated for corrosion of coastal applications.
- 196 mph ultimate wind speed (3-second gust) rating based on a condenser unit surface area of 10.2 sq. ft. facing wind ; calculations based upon equations in ASCE 7-10 Chapter 26 ; and Chapter 16, Section 1609 2010 FBC. Exposure C or D (facing water direction) ; Risk category III ; Max. 500 Lb. condenser unit that withstands 196 mph wind speed for 3 second gusts.
- On condenser units near bodies of water AHJ may require condenser units to be raised above ground level. (Suggest The Metal Shop's equipment wall stand for these areas)
- The anchor clips with self-drilling screws and Tapcon screw are for ground mounted condensing units only on 2000 psi or higher psi concrete pads ONLY. Other pads or configurations must be custom engineered.
- Engineer seal affixed hereto validates design as shown only. Use of this plan by Contractor, et al, indemnifies and saves harmless this engineer and The Metal Shop for all costs & damages, including legal fees & appellate fees resulting from deviations of this plan.



**ANCHOR CLIP**



**ANCHOR CLIP INSTALLATION INSTRUCTIONS**

- SUITABLE FOR GROUND MOUNTED UNITS ONLY. DISCONNECT POWER BEFORE INSTALLATION.
- Minimum of 4 clips required equally spaced around condenser unit : Minimum of 2- #14 x 3/4" self-drilling screws (per clip) with neoprene washer required to fasten 4 clips to condenser unit base. 1/4" x 1-3/4" Tapcon concrete screw required to fasten each anchor clip into concrete condenser pad ( 2000 psi or higher psi concrete).
- Adjust anchor clip accordingly to fit on the condenser unit and attach 2 self-drilling screws through the anchor clip and into the condenser unit, at the same time ensuring that the base of the anchor clip is still in contact with the concrete pad.
- Attach each Tapcon screw to the base of the anchor clip and into the concrete pad in accordance with Tapcon instructions.
- All hardware must be fastened prior to connecting refrigerant lines and electrical power to the condenser unit.



Jeff Gaither  
 AR93666

**The Metal Shop**

2541 W. Dunneilton Rd  
 Dunneilton  
 FL 34434  
 Ph: (352) 522-0006  
 Fax: (352) 522-0007  
 Web: www.metashop.org

**ANCHOR CLIP INSTALLATION INSTRUCTIONS- 196 mph (3-second gusts)**

SIZE **B** REVISED FOR 2010 FBC

CONNECTION DETAIL

FOR CONFORMANCE WITH 2010 FBC

SCALE **N.T.S.** DATE April 4 2011

SHEET **1 OF 1**



The New Degree of Comfort™

# DesignStar Load Calculation

Results are intended for use with Rheem heating and cooling systems

Reviewed for Code Compliance  
by a Licensed Professional Engineer

## Customer Information

Street Address: 3714 Quando Cir, Orlando, FL 32812

Latitude, Longitude: 29.1462°, -81.0534°

House Square Footage: 1475 sq. ft.

Name: Walter Ricks

Phone:

Email:

## House Information

SHR: .75

Number of residents: 2

Ceiling height: 9

Wall U-value | R-value: 0.09 | 11

Floor U-value | R-value: 0.2 | 5

Ceiling U-value | R-value: 0.053 | 19

Window U-value: 0.5

Window SHGF: 0.85

Moisture grains: 58

Duct loss %: 10

Duct gain %: 10

Cooling infiltration (ACH): 0.6

Heating infiltration (ACH): 0.8

Winter ventilation: 0

Summer ventilation: 0

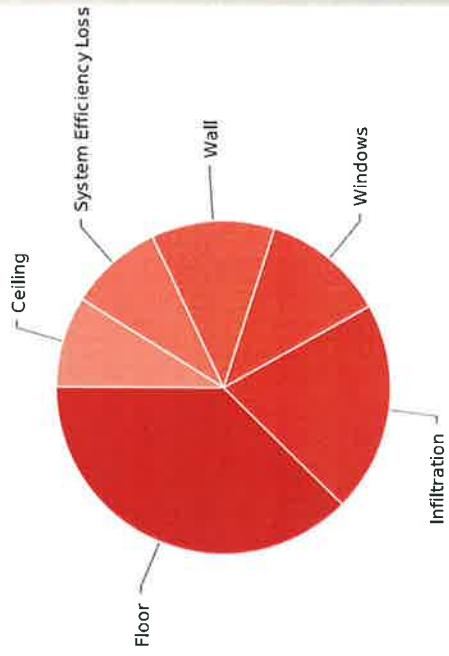
## Design Conditions

<b>Outdoor</b>	<b>Heating</b>	<b>Cooling</b>
Dry bulb (°F)	37	90
Daily range	L	
Relative humidity		50%
Moisture difference		58
<b>Indoor</b>	<b>Heating</b>	<b>Cooling</b>
Indoor temperature (°F)	70	75
Design temperature difference(°F)	33	15

# Heating Loads

Area	Btuh	% of load
Wall	3477	11.9
Floor	11015	37.7
Ceiling	2580	8.8
Windows	3498	12
Infiltration	5975	20.5
System Efficiency Loss	2655	9.1
Total:	29200	

Heating Loads  
29,200 BTU/hr

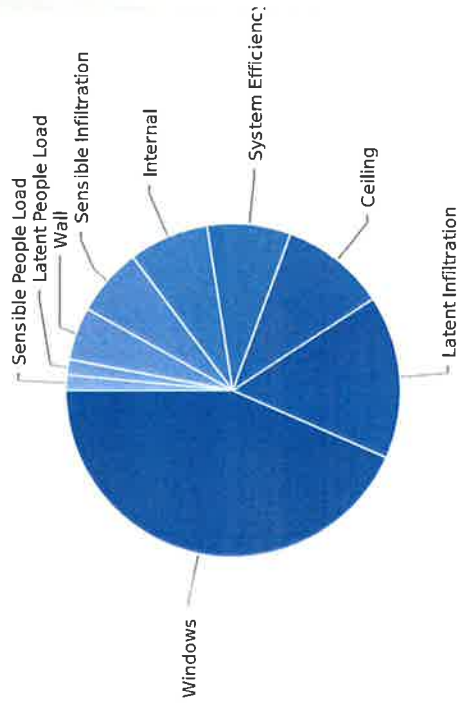




## Cooling Loads

Area	Btuh	% of load
Wall	1580	5.1
Ceiling	3127	10.1
Windows	13393	43.4
Sensible Infiltration	2037	6.6
Latent Infiltration	4869	15.8
System Efficiency Gain	2501	8.1
Internal	2400	7.8
Sensible People Load	460	1.5
Latent People Load	460	1.5
<b>Total:</b>	<b>30828</b>	
<b>Sensible load</b>	<b>25499</b>	
<b>Latent load</b>	<b>5329</b>	
<b>SHR</b>	<b>0.83</b>	
<b>Capacity at .75 SHR</b>	<b>2.83 Tons</b>	

Cooling Loads  
30,828 BTU/hr



## Adequate Exposure Diversity



## Equipment selection

System equipment selection will be made using the following derived values.

**Glass (E)**

**107 sq. ft.**

**Glass (S)**

**15 sq. ft.**

**Glass (N)**

**15 sq. ft.**

**Glass (W)**

**75 sq. ft.**

**Summer Outdoor**

**90°F**

**Summer Wet Bulb**

**77°F**

**Summer Indoor**

**75°F**

**Summer Design Grains**

**50%**

**Winter Outdoor**

**37°F**

**Winter Indoor**

**70°F**

**Sensible Cooling**

**25,499 Btuh**

**Latent Cooling**

**5,329 Btuh**

**Required Cooling Airflow**

**1,159 CFM**

**Sensible Heating**

**29,200 Btuh**

**Required Heating Airflow**

**379 CFM**

All calculations are based upon approved hvac industry standards and procedures, and comply with all local, state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12060101197

DATE	BATCH NUMBER	LICENSE NBR
06/01/2012	110409877	CAC1816648

The CLASS B AIR CONDITIONING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2014

THRIFT, ALAN DALE  
NO SWEAT A/C AND HEATING LLC  
2798 PEPPER LANE  
ORLANDO FL 32812

RICK SCOTT  
GOVERNOR

KEN LAWSON  
SECRETARY

DISPLAY AS REQUIRED BY LAW

**CITY OF ORLANDO**  
ECONOMIC DEVELOPMENT  
PERMITTING SERVICES  
**LOCAL BUSINESS TAX RECEIPT**  
(Formerly known as "Business License," changed per state law #81268-2006)  
Issued Date: 10/01/2013  
Expiration Date: 9/30/2014

Business Name  
NO SWEAT A/C AND HEATING LLC  
2798 PEPPER LN  
ORLANDO, FL 32812

Business Type(s):  
CONTRA 1524 CONTRACTOR DBPR

Case Number: BUS-0032154

Business Owner  
NO SWEAT A/C AND HEATING LLC  
ALAN THRIFT CAC1816648

Business Location:  
2798 Pepper Ln

Fees:  
Administration Fee 20.00  
2014 Business Tax 110.26  
Total Paid: \$130.26

**2013-2014**

**NOTICE-THIS RECEIPT ONLY EVIDENCES PAYMENT OF THE LOCAL BUSINESS TAX PURSUANT TO CH. 205, FLORIDA STATUTES. IT DOES NOT PERMIT THE HOLDER TO OPERATE IN VIOLATION OF ANY CITY, STATE, OR FEDERAL LAW. CITY PERMITTING MUST BE NOTIFIED OF ANY MATERIAL CHANGE TO THE INFORMATION FOUND HEREIN BELOW. THIS RECEIPT DOES NOT CONSTITUTE AN ENDORSEMENT OR APPROVAL OF THE HOLDER'S SKILL OR COMPETENCY.**

## Scott Randallph, Tax Collector

## Local Business Tax Receipt

## Orange County, Florida

This local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

\*\*\*ORIGINAL\*\*\*  
1804 CLASS B AIR COND CONTR \$30.00 1 EMPLOYEE 5000 BUSINESS OFFICE 9/30/2014 1804-1099862 \$30.00 1 EMPLOYEE

TOTAL TAX \$60.00  
PREVIOUSLY PAID \$60.00  
TOTAL DUE \$0.00

2798 PEPPER LN (MOBILE)  
A - ORLANDO, 32812

PAID: \$60.00 099-00573580 7/2/2013

This receipt is official when validated by the Tax Collector



THRIFT ALAN

NO SWEAT A/C AND HEATING LLC  
2798 PEPPER LN  
ORLANDO FL 32812





NOSWE-1 OP ID: HAHN

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
02/13/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

**IMPORTANT:** If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Al Mallin Insurance 3801 Bee Ridge Road, Suite #6 Sarasota, FL 34233 House Account	Phone: 941-377-7283 Fax: 941-827-8461	CONTACT NAME PHONE NO. (Ext) FAX (Ext) EMAIL ADDRESS	INSURER(S) AFFORDING COVERAGE INSURER A: Cypress Prop & Cas Ins Co INSURER B: Progressive Companies INSURER C: Markel Insurance Co INSURER D: INSURER E: INSURER F:	NAIC # 10953 10192
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INSURED  
No Sweat Ac and Heating LLC  
2798 Pepper Lane  
Orlando, FL 32812

**COVERAGES**

REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBR INSR. W/VD	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXP. DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		GFL1021994	02/13/2014	02/13/2015	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ca occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A	GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		08413316-0	02/13/2014	02/13/2015	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 50,000 BODILY INJURY (Per accident) \$ 100,000 PROPERTY DAMAGE (Per accident) \$ 50,000
	UMBRELLA LIAB EXCESS LIAB					EACH OCCURRENCE \$ AGGREGATE \$
	DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? <input type="checkbox"/> Y <input checked="" type="checkbox"/> N N/A If yes, describe under DESCRIPTION OF OPERATIONS below		MWC0044065-01	01/18/2014	01/18/2015	<input checked="" type="checkbox"/> W/STATUS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)

**CERTIFICATE HOLDER****CANCELLATION**

City of Belle Isle  
1600 Nela Ave  
Belle Isle, FL 32809

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

ACORD 25 (2010/05)

The ACORD name and logo are registered marks of ACORD

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03-14-2012

JEFF ATWATER  
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF WORKERS' COMPENSATION

**\* \* CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW \* \***  
**CONSTRUCTION INDUSTRY EXEMPTION**

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

**EFFECTIVE DATE:** 03/14/2012      **EXPIRATION DATE:** 03/14/2014  
**PERSON:** THRIFT      **ALAN**      **D**  
**FEIN:** 454172451  
**BUSINESS NAME AND ADDRESS:**  
NO SWEAT A/C AND HEATING LLC  
2798 PEPPER LANE      **FL**      **32812**  
ORLANDO

**SCOPES OF BUSINESS OR TRADE:**

- 1- REPAIR SERVICE
- 3- MAINTENANCE
- 2- DUCTS - HTG & A/C
- 4- CERTIFIED AC CONTRACTOR

*CONF # 180036500*

**IMPORTANT:** Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-11

QUESTIONS? (850) 413-1609



JEFF ATWATER  
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF WORKERS' COMPENSATION

**\* \* CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW \* \***  
**CONSTRUCTION INDUSTRY EXEMPTION**

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

**EFFECTIVE DATE:** 3/14/2014      **EXPIRATION DATE:** 3/13/2016  
**PERSON:** THRIFT      **ALAN**      **D**  
**FEIN:** 454172451  
**BUSINESS NAME AND ADDRESS:**  
NO SWEAT A/C AND HEATING LLC

2798 PEPPER LN  
ORLANDO      **FL**      **32812**

**SCOPES OF BUSINESS OR TRADE:**  
HEATING, VENTILATION,  
AIR-COND

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a