



**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 TOWN OF WINDERMERE, FLORIDA.

**Scope of Work:** REROOF: 41sq, shingles

**Comments:** None

**Project Information**

Address: 2324 Nela Avenue, Belle Isle, FL 32809  
 Parcel ID: 19-23-50-5888-04-080  
 Property Owner: Valle, Rafael & Elaine  
 Phone Number: 321-202-0478

\*\*\*\*\*

Company Name: BY OWNER  
 Contractor Name:  
 License Number:  
 Address:  
 Phone Number:

**Permit Number: 2014-11-011**  
 Date of Application: 11/11/2013  
 Date Permit Issued: 11/14/2013

**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**

School \$

**ZONING FEES**

Zoning Fee \$30.00

**UNIVERSAL ENG - BUILDING FEES**

Demo \$  
 Building \$  
 Fence \$  
 Driveway \$  
 Shed \$  
 Window(s) \$  
 Door(s) \$  
 PrePower \$  
 Electrical Fee \$  
 Temp Pole \$  
 Plumbing Fee \$  
 Mechanical Fee \$  
 Gas Fee \$  
 Roofing \$80.00  
 Boat Dock \$  
 Screen Encl \$  
 Swimming Pool \$

**SURCHARGE FEES**

Surcharge Fee \$2.00  
 Surcharge Fee \$2.00

**TOTAL FEES \$114.00**

Date Paid 11-18-13

CC or Check # 440

Amount Paid 114.00

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

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.



# City of Belle Isle

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



## 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: 11/4/13

ROOF PERMIT NUMBER 2014-11-011

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

Project Address 2324 NELA AVE, BELLE ISLE, FL 32809

Windermere, FL 34786

Property Owner RAFAEL A VALLE

Phone 321-202-0478

Property Owner's Mailing Address SAME

City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parcel Id Number: 19 23 50 58804 080

REQUIRED! 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 Roof  ReRoof

• **REQUIRED!** Florida Product Approval Screen Printout from [www.floridabuilding.org](http://www.floridabuilding.org) showing the Code Version

• **REQUIRED!** Florida Product Approval Installation Instructions from [www.floridabuilding.org](http://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: 4,100

Number of Stories: 1

Job Valuation: \$ 5,500

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 \_\_\_\_\_

LICENSE # \_\_\_\_\_

LICENSE HOLDER NAME \_\_\_\_\_

COMPANY NAME \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_

Email Address \_\_\_\_\_

Zoning Fee \$ 30<sup>00</sup>

Permit Fee \$ 80<sup>00</sup>

3% Florida Surcharge \$ 4<sup>00</sup>

Total Permit Fee \$ 114<sup>00</sup>

Building Official: \_\_\_\_\_ Date \_\_\_\_\_

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.

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

CITY OF BELLE ISLE  
Permit Application Review Sheet

Permit Number	2014-11-011
Property Owner	Yvette
Address	2324 Nola Ave
Nature of Improvement	Re-roof
Received Application	11-11-13
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. 11-12-13 sq	Emailed Rafael to sign retaining app +
2.	owner-builder disclosure
3. 11-14-13 sq	Rafid signed disclosure + NDC, emailed Rafael
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



## City of Belle Isle

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

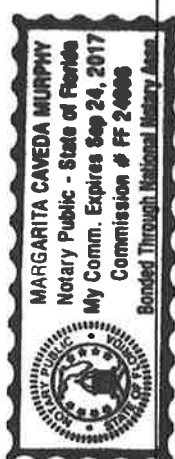
1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license  
RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ Initial
5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ 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.  
RAV \_\_\_\_\_ 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](http://www.Call.Center@dbpr.state.fl.us) for more information about licensed contractors. RAV \_\_\_\_\_ 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: 2324 NELA AVE, BELLE ISLE, FL 32809 RAV \_\_\_\_\_ 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. RAV \_\_\_\_\_ Initial

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

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

Signature: <u><i>[Signature]</i></u> (Signature of the property owner)	Print: RAFAEL A VALLE (Name of the property owner)
Signature: _____ (Signature of the property owner)	Print: _____ (Name of the property owner)
Owner's Address: 2324 NELA AVE, BELLE ISLE, FL 32809	
The foregoing instrument was acknowledged before me this <u>11</u> / <u>13</u> / <u>2013</u> by <u>Rafael A. Vaile</u> who is personally known to me / who produced the following <u>FL DL # 40072161122-D</u>	
State of Florida / County of <u>Orange</u>	Seal:
Notary Signature <u><i>[Signature]</i></u>	

Permit Number: \_\_\_\_\_  
Folio/Parcel Identification Number: 19-23-30-5888-04-080  
Prepared by: RAFAEL A VALLE  
2324 NELA AVE  
BELLE ISLE, FL 32809  
Return to: RAFAEL A VALLE  
2324 NELA AVE  
BELLE ISLE, FL 32809



**NOTICE OF COMMENCEMENT**

State of Florida, County of Orange

The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

- 1. **Description of property** (legal description of the property, and street address if available)  
NELA ISLE (ISLAND SECTION) 0/99 LITS 8&9 BLK D SEE 4028/3763; 2324 NELA AVE, BELLE ISLE
- 2. **General description of improvement**  
RE-ROOF

3. **Owner information or Lessee information if the Lessee contracted for the improvement**

Name RAFAEL A VALLE  
Address 2324 NELA AVENUE, BELLE ISLE, FL 32809  
Interest in Property OWNER  
Name and address of fee simple titleholder (if different from Owner listed above)  
Name \_\_\_\_\_  
Address \_\_\_\_\_

4. **Contractor**

Name N/A  
Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

5. **Surety** (if applicable, a copy of the payment bond is attached)

Name N/A  
Address \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Amount of Bond \$ \_\_\_\_\_

6. **Lender**

Name N/A  
Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

7. **Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**

Name N/A  
Address \_\_\_\_\_ Telephone Number \_\_\_\_\_

8. **In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_

9. **Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) 10/31/2014

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES, AND CAN 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 COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

**Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.**

*Rafael A Valle*  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager OWNER Signatory's Title/Office

The foregoing instrument was acknowledged before me this 13th day of Nov, 2013 by Rafael A Valle  
month/year name of person

as \_\_\_\_\_ for \_\_\_\_\_  
Type of authority, e.g., officer/trustee/attorney in fact  
*Margarita Cavada Muela*  
Signature of Notary Public - State of Florida  
Print, type, or stamp Commission # 194858174 CAVELDA MUELA  
Notary Public - State of Florida  
My Comm. Expires Sep 24, 2017  
Commission # FF 24008  
E-Notary Registered Representative, Notary Public, State of Florida

Personally Known \_\_\_\_\_ OR Produced ID   
Type of ID Produced FL DL V400-721-61-122.0



NOV 13 2013  
MARTHA O. HAYNIE, COUNTY COMPTROLLER  
Orange County, Florida  
I hereby certify that this is a true and correct copy of the document as reflected in the Official Record.  
Deputy Comptroller


FLORIDA DEPARTMENT OF

# Business & Professional Regulation


Florida Department of  
**Business & Professional Regulation**

License Efficiency. Regulatory Integrity.

► OFFICE OF THE SECRETARY



**Product Approval**  
USER: Public User



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Product Approval Menu > Product or Application Search > Application List > Application Detail

<p><b>R. #</b></p> <p>Application Type</p> <p>Code Version</p> <p>Application Status</p> <p>Comments</p> <p>Archived</p>	<p>FL5444-R5</p> <p>Editorial Change</p> <p>2010</p> <p>Approved</p> <p><input type="checkbox"/></p>	<p><b>Product Manufacturer Address/Phone/Email</b></p> <p>CertainTeed Corporation-Roofing PO Box 1100 1400 Union Meeting Rd Blue Bell, PA 19422 (215) 274-2350 Steven.T.Lawrey@saint-gobain.com</p>	<p><b>Authorized Signature</b></p> <p>Steven Lawrey Steven.T.Lawrey@saint-gobain.com</p>
<p><b>Technical Representative Address/Phone/Email</b></p>	<p>Steven Lawrey 1400 Union Meeting Road Blue Bell, PA 19422 (215) 274-2425 Steven.T.Lawrey@saint-gobain.com</p>	<p><b>Quality Assurance Representative Address/Phone/Email</b></p>	<p>Steven Lawrey 1400 Union Meeting Road Blue Bell, PA 19422 (215) 274-2425 Steven.T.Lawrey@saint-gobain.com</p>
<p><b>Category Subcategory</b></p>	<p>Roofing Asphalt Shingles</p>	<p><b>Compliance Method</b></p>	<p>Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Handcopy Received</p>
<p><b>Florida Engineer or Architect Name who developed the Evaluation Report</b></p> <p>Florida License</p> <p>Quality Assurance Entity</p> <p>Quality Assurance Contract Expiration Date</p> <p>Validated By</p>	<p>Robert Nieminen PE-59166 UL LLC 02/13/2016 John W. Knezewich, PE</p>	<p><b>Certificate of Independence</b></p>	<p>FL5444_R5_COI_Trinity.ERD.CI - Nieminen.pdf</p>
<p><b>Referenced Standard and Year (of Standard)</b></p>	<p><b>Standard</b></p> <p>ASTM D3161, Class F ASTM D3462 ASTM D7158, Class H</p>	<p><b>Equivalence of Product Standards Certified By</b></p>	<p><b>Year</b></p> <p>2006 2007 2007</p>
<p><b>Sections from the Code</b></p>	<p>Method 1 Option D</p>	<p><b>Product Approval Method</b></p>	

Date Submitted  
Date Validated  
Date Pending FBC Approval  
Date Approved

02/14/2013  
02/20/2013  
02/28/2013  
04/09/2013

**Summary of Products**

FL #	Model, Number or Name	Description
5444.1	CertainTeed Asphalt Roofing Shingles	3-tab, laminated, architectural and 4-tab asphalt roof shingles
<b>Limits of Use</b>		
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 for Limits of Use		
<b>Installation Instructions</b>		
FL5444_RS_II_02202013FINAL_CERTAINTCEED_Aspphalt Shingle_FL5444-RS.pdf		
Verified By: Robert Nieminen, PE PE-59166		
Created by Independent Third Party: Yes		
<b>Evaluation Reports</b>		
FL5444_RS_02202013FINAL_CERTAINTCEED_Aspphalt Shingle_FL5444-RS.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

CertainTeed Corporation  
1400 Union Meeting Road  
Blue Bell, PA 19422

Evaluation Report **3532.09.05-R5**  
**FL5444-R5**  
Date of Issuance: **09/22/2005**  
Revision 5: **02/20/2013**

### 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 Florida Building Code.

**DESCRIPTION:** CertainTeed Asphalt Roofing Shingles.

**LABELING:** Each unit shall bear labeling in accordance with the requirements of 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.

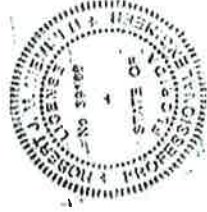
**ADVERTISEMENT:** The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

**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 10.

### 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 02/20/2013  
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:** CertainTeed Asphalt Roofing Shingles, as produced by CertainTeed Corporation, 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:**

<b>Section</b>	<b>Property</b>	<b>Standard</b>	<b>Year</b>
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:**

<b>Entity</b>	<b>Examination</b>	<b>Reference</b>	<b>Date</b>
UL (TST 1740)	ASTM D3161	94NK9632	05/15/1998
UL (TST 1740)	ASTM D3161	99NK26506	11/23/1999
UL (TST 1740)	ASTM D3161	03CA12702	05/27/2003
UL (TST 1740)	ASTM D3161	03CA12702	06/16/2003
UL (TST 1740)	ASTM D3161	03NK29847	10/03/2003
UL (TST 1740)	ASTM D3161	04CA11329	05/24/2004
UL (TST 1740)	ASTM D3161	04CA32986	12/03/2004
UL (TST 1740)	ASTM D3161	05NK07049	04/15/2005
UL (TST 1740)	ASTM D3161	05NK16778	05/12/2005
UL (TST 1740)	ASTM D3161	05CA16778	05/12/2005
UL (TST 1740)	ASTM D3161	05NK14836	05/22/2005
UL (TST 1740)	ASTM D3161	05NK22800	06/22/2005
UL (TST 1740)	ASTM D3462	R684	09/21/2005
UL (TST 1740)	ASTM D7158	05NK08037	06/28/2006
UL (TST 1740)	ASTM D3161 & D3462	09CA28873	07/23/2009
UL (TST 1740)	ASTM D3462	10CA41303	10/07/2010
UL (TST 1740)	ASTM D3161	10CA41303	10/08/2010
UL (TST 1740)	ASTM D7158	10CA41303	10/27/2010
UL (TST 1740)	ASTM D3161 & D3462	10CA44960	11/11/2010
UL LLC (QUA 9625)	Quality Control	Service Confirmation	Exp. 02/13/2016

**4. PRODUCT DESCRIPTION:**

- 4.1 CT20™, XT™ 25 and XT™ 30 are fiberglass reinforced, 3-tab asphalt roof shingles.
- 4.2 Carriage House Shangle®, Centennial Slate™, Grand Manor Shangle®, Landmark™, Landmark™ Pro (formerly Landmark™ Plus), Landmark™ Premium, Landmark™ TL and Landmark™ Solaris are fiberglass reinforced, laminated asphalt roof shingles.
- 4.3 Presidential Shake™ and Presidential Shake TL™ are fiberglass reinforced, architectural asphalt roof shingles.
- 4.4 Hatteras™ and Highland Slate™ are fiberglass reinforced, 4-tab asphalt roof shingles.
- 4.5 Presidential Accessory, Accessory for Hatteras, Shangle Ridge™, Shadow Ridge™ and Cedar Crest™ are fiberglass reinforced accessory shingles for hip and ridge installation.
- 4.6 Any of the above listed shingles may be produced in AR (algae resistant) versions.

**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 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 use 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 Presidential Accessory, Accessory for Hatteras, Shangle Ridge, Shadow Ridge and Cedar Crest hip & ridge shingles have been evaluated in accordance with ASTM D3161, Class F when BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant, applied as specified in manufacturer's application instructions, indicating the shingles are acceptable for use in all wind zones up to  $V_{asd} = 150$  mph ( $V_{ult} = 194$  mph).
  - 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.
- 5.4 All products in the roof assembly shall have quality assurance audits in accordance with the Florida Building Code and F.A.C. Rule 9N-3.

**6. INSTALLATION:**

- 6.1 Roof deck, slope, underlayment and fasteners shall comply with FBC 1507.2 / R905.2 and the shingle manufacturer's minimum requirements.
- 6.1.1 Underlayment shall be acceptable to CertainTeed Corporation 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 Installation of asphalt shingles shall comply with the manufacturer's current published instructions, using minimum four (4) nails per shingle in accordance with FBC 1507.2.7 or Section R905.2.6 and the minimum requirements herein.
- 6.2.1 Fasteners shall be in accordance with manufacturer's published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.
- 6.2.2 Where the roof slope exceeds 21 units vertical in 12 units horizontal, use the "Steep Slope" directions.
- 6.3 CertainTeed asphalt shingles are acceptable for use in reroof (tear-off) or recover applications, subject to the limitations set forth in FBC Section 1510 and CertainTeed published installation instructions.

**6.3.1 CT20™, XT™ 25, and XT™ 30:**

**LOW AND STANDARD SLOPE**

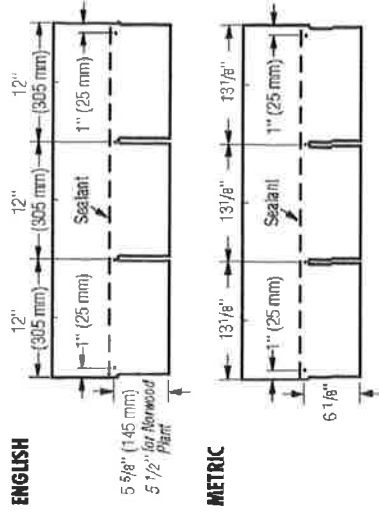


Figure 11-3: Use four nails for every full shingle.

**STEEP SLOPE**

Use four nails and six spots of asphalt roofing cement\* for every full shingle (Figure 11-4). Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

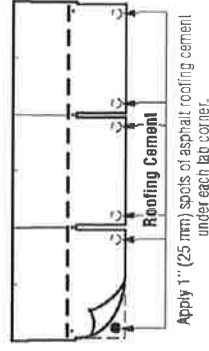


Figure 11-4: Use four nails and six spots of asphalt cement on steep slopes  
 \*CAUTION: Excessive use of roofing cement can cause shingles to blister.

**6.3.1.1 Hip & Ridge: Cut Shingles**

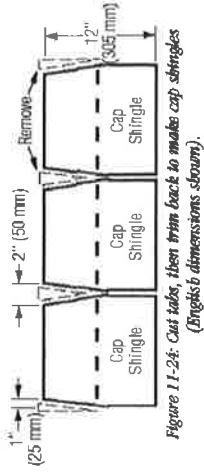


Figure 11-24: Cut tabs, then trim back to make cap shingles (Shingle's dimensions shown).

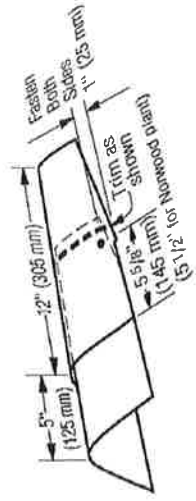


Figure 11-25: Installation of caps along the hips and ridges.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant, in accordance with manufacturer's instructions.

6.3.2

**Carriage House Shingle®, Centennial Slate™ and Grand Manor Shingle®:**

**LOW AND**

**STANDARD SLOPE**

Use five nails for every full shingle.

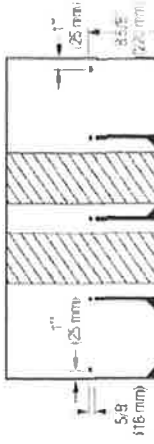


Figure 17-4: Five nails for every full Grand Manor Shingle, Carriage House Shingle, or Centennial Slate.

**STEEP SLOPE**

Use seven nails and three spots of asphalt roofing cement for every full Grand Manor Shingle. Use five nails and three spots of asphalt roofing cement for every full Carriage House Shingle and Centennial Slate. Apply asphalt roofing cement 1" (25 mm) from edge of shingle (Figure 17-5). Asphalt roofing cement meeting ASTM D1586 Type II is suggested.

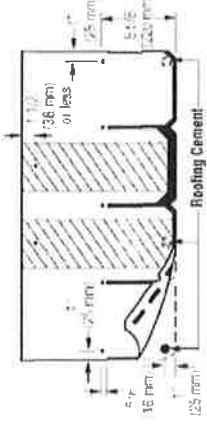


Figure 17-5: When installing Grand Manor Shingles on steep slopes, use seven nails and three spots of asphalt roofing cement.

6.3.2.1 Hip & Ridge: Shingle® Ridge

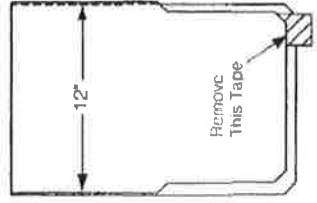


Figure 17-18: Shingle® Ridge.

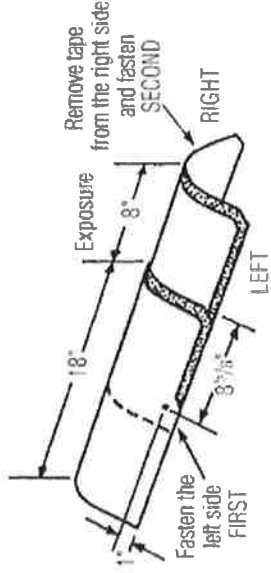


Figure 17-19: Installation of Shingle® Ridge shingles on hips and ridges.

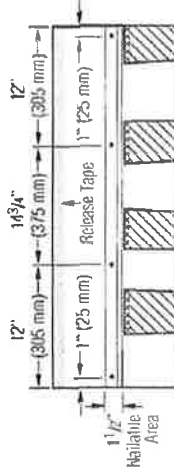
Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.3

**Landmark™, Landmark™ Pro (formerly Landmark™ Plus), Landmark™ Premium, Landmark™ TL and Landmark™ Solaris:**

**LOW AND STANDARD SLOPE**

**METRIC DIMENSIONS**



**LANDMARK TL**

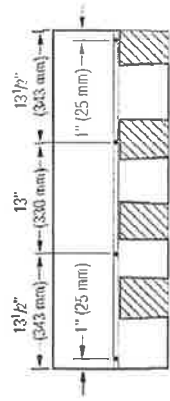
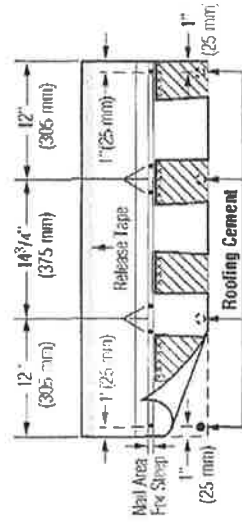


Figure 13-1: Use four units for every full shingle.

**STEEP SLOPE**

Use six nails and four spots of asphalt roofing cement for every full laminated shingle. See below. Asphalt roofing cement should meet ASTM D4286 Type II. Apply 1" spots of asphalt roofing cement under each corner and at about 12" to 13" in from each edge.

**METRIC DIMENSIONS**



**LANDMARK TL**

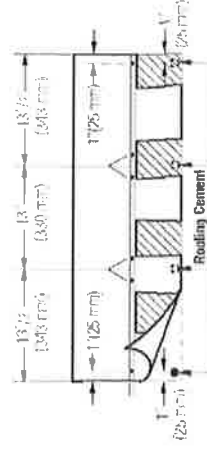


Figure 14-5: Use six nails and four spots of asphalt roofing cement on steep slopes.

6.3.3.1 Hip & Ridge, Option 1: Shadow Ridge™

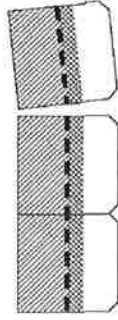
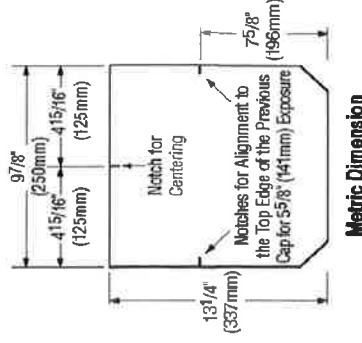
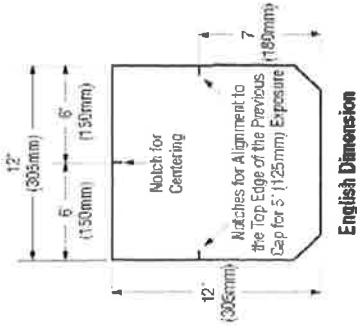


Figure 13-16: Shadow Ridge accessory shingles detach easily from three-piece units to make 72 individual cap pieces.



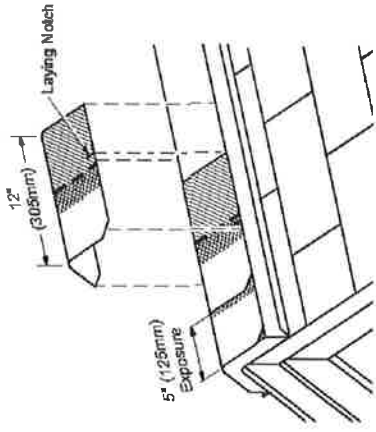
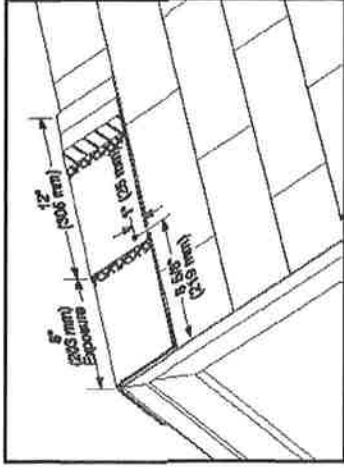


Figure 13-20: Use laying notches to center shingles on hips and ridges, and to locate the correct exposure.

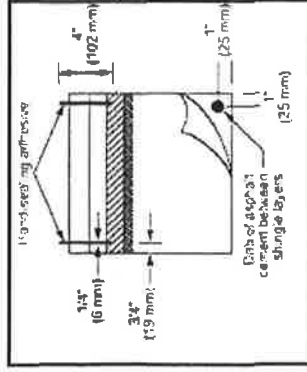
Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

### 6.3.3.2 Hip & Ridge, Option 2: Cedar Crest™

Use two fasteners per shingle. For the starter shingle, place fastener 1-inch from each side edge and about 2-inch up from the starter shingle's exposed butt edge. For each full Cedar Crest shingle, please fasteners 8-5/8-inch up from its exposed butt edge and 1-inch from each side edge.



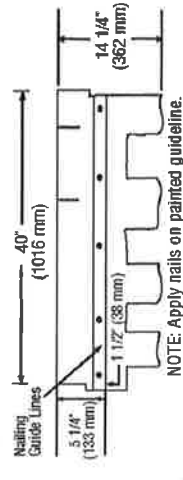
Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant to hand-seal Cedar Crest shingles. Apply NP 1 or PL adhesive from the middle of the shingle's raised overlay on the top piece and extending approximately 4-inch along the sides of the headlap along a line 3/4 to 1-inch from each side of the shingle's headlap. Immediately align and apply the overlying shingle, gently pressing tab sides into the adhesive, and install nails. To secure the other side, apply a 1-inch diameter spot of NP 1 or PL adhesive between the shingle layers.



### 6.3.4 **Presidential Shake™ and Presidential Shake TL™:**

#### **LOW AND STANDARD SLOPE:**

For low and standard slopes, use five nails for each full Presidential shingle as shown below.



NOTE: Apply nails on painted guideline.

Figure 16-6: Fastening Presidential and Presidential TL Shingles on low and standard slopes.

#### **STEP SLOPE:**

For steep slopes, use nine nails for each full Presidential shingle and apply 1" diameter spots of asphalt roofing cement under each shingle tab. After applying 5 nails in between the nailing guide lines, apply 4 nails 1" above tab cutouts making certain tabs of overlying shingle cover nails.

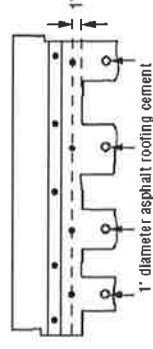


Figure 16-7: Fastening Presidential and Presidential TL Shingles on steep slopes.

### 6.3.4.1 Hip & Ridge, Option 1: Presidential Accessory

#### **PRESIDENTIAL ACCESSORY**

Presidential accessory shingles can be used for covering hips and ridges. Apply shingles up to the ridge (expose no more than 7" from the bottom edge of the "tooth." Fasten each accessory with two fasteners. The fasteners must be 1 3/4" long or longer, so they penetrate either 3/4" into the deck or completely through the deck. Presidential accessory comes in two different sizes: **Accessory produced in Birmingham, AL is 12" x 12"; Portland, OR produces 9 7/8" x 13 1/4" accessory.**

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

### 6.3.4.2 Hip & Ridge, Option 2: Refer to instructions herein for Cedar Crest™ hip and ridge shingles.

### 6.3.5 **Hatteras™:**

#### **LOW, STANDARD AND STEEP SLOPE:**



Figure 15-3: Fastening Hatteras Shingles on Low and Standard Slopes

For low and standard slopes, use five nails for each full Hatteras shingle as shown above.



Figure 15-4: Fastening Hatteras Shingles on Steep Slopes

For steep slopes, use five nails and eight spots of asphalt roofing cement for each full Hatteras shingle as shown above. Apply 1" (25mm) diameter spots of roofing cement (ASTM D-4586 Type II suggested) under each tab corner. Press shingle into place; do not expose cement.

CAUTION: Two nails in roofing cement can cause shingles to blister.



6.3.5.1 Hip & Ridge, Option 1: Accessory for Hatteras

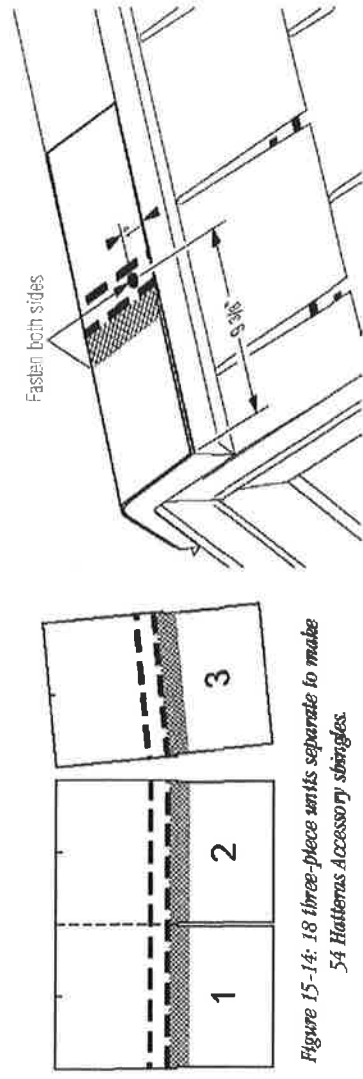


Figure 15-14: 18 three-piece units separate to make 54 Hatteras Accessory shingles.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.5.2 Hip & Ridge, Option 2: Cut Hatteras Shingles

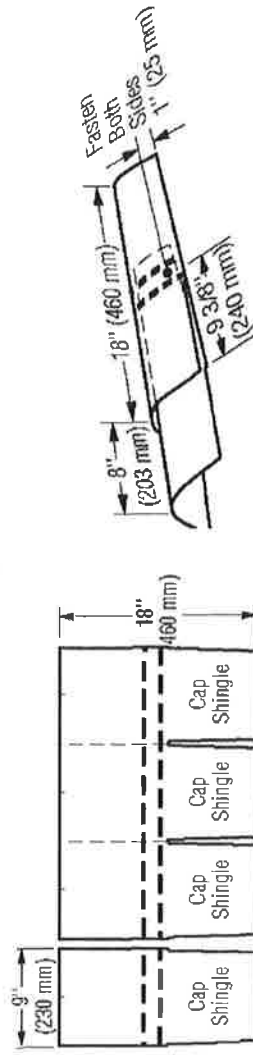


Figure 15-20: Cut Hatteras shingles to make cover cap.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

Figure 15-21: Installation of caps along hips and ridges.

6.3.6 **Highland Slate™:**

**LOW AND STANDARD SLOPE**

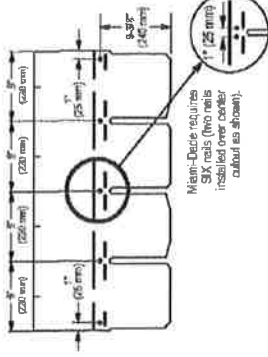


Figure 11-3: Use **FIVE** nails for every Highland Slate shingle.

**STEEP SLOPE**

Use **FIVE** nails and **RIGHT** spots of asphalt roofing cement\* for each full Highland Slate shingle. For Miami-Dade, **SIX** nails are required. Apply 1" diameter spots of asphalt roofing cement under each lab corner. Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

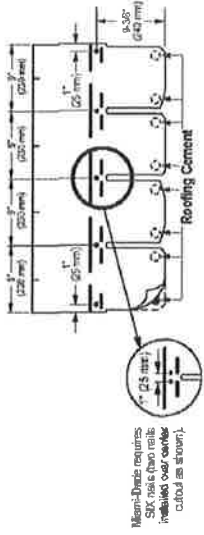


Figure 11-3a: Use **FIVE** nails and **eight** spots of asphalt roofing cement under each lab corner.

\***CAUTION:** Excessive use of roofing cement can cause shingles to blister.

6.3.6.1 Hip & Ridge, Option 1: Refer to instructions herein for Cedar Crest™ or Shangle Ridge™ hip and 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@us.ul.com

**- END OF EVALUATION REPORT -**