



received
11-19-13

City of Belle Isle

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

PERMIT EXTENSION

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: Nov 19th 2013

Permit Number: 2012-12-096
Original Permit Number Issued

Contact Name VINTON SQUIRES Phone: 407 625 9994

Project Address 2483 TRENTWOOD Blvd Belle Isle, FL 32809 32812

Reason for Extension did not know needed more time, just had 2nd baby etc.

Notice of Commencement Expiration Date _____ (if applicable)

FBC 105.4.1.1 "If work has commenced and the permit is revoked, becomes null and void, or expires because of lack of progress or abandonment, a new permit covering the proposed construction shall be obtained before proceeding with the work."

The City of Belle Isle issues this extension in place of a new permit.

EXTENSION IS GOOD FOR 90 DAYS FROM ISSUANCE!

Date _____ Finalized/Inspected by: _____

Fee: \$ <u>228.75</u>
Cash/Check #: <u>VISA 3293</u> Date Rec'd: <u>11-20-13</u> Rec'd By: <u>cg</u>

To schedule an inspection please email your request to: BI scheduling@UniversalEngineering.com



City of Belle Isle

1600 Nela Avenue, Belle Isle, FL 32809 * Tel 407-851-7730 * Fax 407-240-2222 * www.cityofbelleislefl.org

PERMIT – 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 Town, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, 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.

Project Information:		Permit Number: 2012-12-096	
Scope of Work	BUILDING: add 239sf of porch & add 122sf of sun room; extend roof over sun room	Date of Application	12/20/2012
	Separate permits needed for roof, electrical, plumbing, etc	Date Permit issued	12/21/2012
Address	2483 Trentwood Blvd, Belle Isle, FL	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.	
Parcel ID	30-23-30-1692-01-130		
Property Owner	Vinton Squires		
Phone	407-625-9994		
Contractor	BY OWNER		
Name	NA		
License Number	NA		
Address	NA		
Phone Number	NA		

BUILDING FEATURES

<p>IMPACT FEES</p> <p>School _____</p> <p>Traffic _____</p> <p>CITY OF BELLE ISLE - ZONING FEES</p> <p>Zoning Fee _____ 165.00</p> <p>Tree Removal _____</p> <p>Fence _____</p> <p>Driveway _____</p> <p>Pavers _____</p> <p>UNIVERSAL ENG - BUILDING FEES</p> <p>Pre-Demo _____</p> <p>Building Fee _____ 457.50</p> <p>Cert of Occupancy _____</p> <p>Prepower _____</p> <p>Electrical Fee _____</p> <p>Temp Pole _____</p> <p>Plumbing Fee _____</p> <p>Mechanical Fee _____</p> <p>Gas Fee _____</p> <p>Revision Fee _____</p> <p>Roofing _____</p> <p>SURCHARGE FEES</p> <p>Surcharge Fee _____ 13.73</p> <p>TOTAL FEES _____ 636.23</p> <p>Date Paid 12-21-12</p> <p>Check # CC 9409567</p> <p>CITY OF BELLE ISLE BUILDING DEPARTMENT RCD: <i>Colin East</i> PERIMETER CONTROL:</p>	<p style="text-align: center;">BUILDING INSPECTOR USE ONLY</p> <p>IF APPLICABLE: Silt fencing in place? YES <input type="checkbox"/> NO <input type="checkbox"/> Turbidity Barrier in place? YES <input type="checkbox"/> NO <input type="checkbox"/></p> <p><input type="checkbox"/> BUILDING/ROOFING</p> <p>ROOFING Dry-in/Flashing _____</p> <p>ROOFING Other /FINAL _____</p> <p>1st _____ (Footing/Foundation)</p> <p>Survey specific foundation plan must be submitted and approved by the City before slab pour.</p> <p>Approved Plan on Site? _____</p> <p>2nd _____ (Slab)</p> <p>3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)</p> <p>4th _____ (Exterior Framing)(Roof/Wall Sheathing)</p> <p>5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)</p> <p>6th _____ (Insulation to be Made After Roof Installed)</p> <p>7th _____ (Sidewalk/Driveway)</p> <p>8th _____ (Other)</p> <p>9th _____ (Final to be Made After Plumb/ Mech/Elect Finals)</p> <p><input type="checkbox"/> PLUMBING (INCL–Pool-Piping, Solar, Irrigation and Water Treatment Equip.)</p> <p>1ST _____ (Underground) 2nd _____ (Sewer)</p> <p>3rd _____ (Rough-In/Tub Set) 4th _____ (Final)</p> <p>CHECK APPROPRIATE BOX</p> <p><input type="checkbox"/> GAS ___Natural ___LP <input type="checkbox"/> HOOD VENTILATION <input type="checkbox"/> REFRIGERATION</p> <p><input type="checkbox"/> MECHANICAL <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> LOW VOLTAGE</p> <p>1st _____ (Rough-In) 2nd _____ (Final)</p> <p>If work is being performed on a lakefront property, you are required to call 407-851-7730 for inspection of your silt fencing and/or turbidity barrier PRIOR TO COMMENCING WORK. If this is not done, a Stop Work Order will be issued.</p>
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The person accepting the listed permit shall conform to the terms of the applications on file in the City Office and construction shall conform to the requirements of the FI Building Codes. To schedule an inspection please email your request to: BIOScheduling@UniversalEngineering.com a confirmation email reply will follow. INSPECTION REQUESTS can be made from 8:00am-1:00pm Monday-Friday. It is requested that inspections be scheduled 24 hours in advance via email. Please include the following in your request: Permit #, current date, project address & lot number, the builder name, the date of the inspection, a contact name & phone number for someone on site should our inspector need to reach them, requested time frame of inspection – A.M. or P.M. Updated: 07/2012 - FORM #PERMIT001

Permit Number: _____
Folio/Parcel Identification Number: _____
Prepared by: _____

Return to: _____



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.

- Description of property** (legal description of the property, and street address if available)
Conway Shores U/58 LOT 13 DLCA 2483 TRENTWOOD Blvd
- General description of improvement**
New covered porch area + living area demo + rebuild
- Owner information or Lessee information if the Lessee contracted for the improvement**
Name VINTON SQUIRES
Address 2483 Trentwood Blvd
Interest in Property owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
- Contractor**
Name BILL HANN Telephone Number 407 46
Address 2494 Trentwood Blvd
- Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name _____ Telephone Number _____
Address _____
- 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 _____ Telephone Number _____
Address _____
- 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 _____
- 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) _____



State of Florida, County of Orange
I hereby certify that this is a true copy of the document as recorded in the Official Records.
MARTHA O. HAYNIE, COUNTY COMPTROLLER
By _____
DEC 21 2012
Contact: _____

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 I, 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.

Vt Sqr
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager _____ Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this 20th day of 12/12 by Vinton Kay Squires
as property owner for Self
Type of authority, e.g., officer, trustee, attorney in fact _____ Name of party on behalf of whom instrument was executed _____

Collina Gast
Signature of Notary Public - State of Florida

Print, type, or stamp commission and name of Notary Public
Collina Gast
Commission # DD 951263
Expires February 19, 2014
Bonded Thru Troy Palm Insurance 800-385-7019

Personally Known _____ OR Produced ID ✓
Type of ID Produced FL DL #

PROJECT NUMBER 0115.1300060.0000

TASK NUMBER 01

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2012-12-096
Property Owner	Squines
Address	2483 Trentwood Blvd
Nature of Improvement	Extension
Received Application	11-19-13
Sent for Stormwater Review	/
Stormwater Approved	/
Sent for Zoning Review	/
Zoning Approved	/
Applied for Variance	/
Variance Approved	/
Sent to BO for Review	11-19-13
Building Official Approved	11-19-13
Comments	
1.	11-19-13 cq emailed COBI to advise if NOC is applied
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	