



# 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.

<b>Scope of Work:</b> MECHANICAL: one 3.5 ton change out  <b>Comments:</b> None  <b>Project Information</b> Address: 2506 Nela Avenue, Belle Isle, FL 32809 Parcel ID: 18-23-30-5888-02-071 Property Owner: Peck, Danny & Muriel Phone Number: 407 855 5830 ***** Company Name: Greens Energy Services, Inc. Contractor Name: Green, John T License Number: CAC1813726 Address: 186 N Goldenrod Rd, Orlando, FL 32807 Phone Number: 407-282-5000	<b>Permit Number: 2015-04-072</b> <b>Date of Application: 04/28/2015</b> <b>Date Permit Issued: 04/29/2015</b>  <b>WARNING TO OWNER:</b> "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.
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### BUILDING FEATURES

<b>IMPACT FEES</b> School \$ Traffic \$  <b>ZONING FEES</b> Zoning Fee \$  <b>UNIVERSAL ENG - BUILDING FEES</b> Cert of Occ \$ Demo \$ Building \$ Fence \$ Driveway \$ Shed \$ Window(s) \$ Door(s) \$ PrePower \$ Electrical \$ Temp Pole \$ Plumbing \$ Mechanical \$82.50 Gas \$ Roofing \$ Boat Dock \$ Screen Encl \$ Swimming Pool \$ Sign \$  <b>SURCHARGE FEES</b> Surcharge Fee \$2.00 Surcharge Fee \$2.00  <b>TOTAL FEES \$86.50</b>  Date Paid <u>4-29-15</u> CC or Check # <u>MC 9826</u> Amount Paid <u>86.50</u>  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).	<div style="text-align: right;"><b>BUILDING INSPECTOR USE ONLY</b></div> 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  <b>BUILDING</b> 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)  <b>ROOFING</b> 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 _____  <b>PLUMBING</b> (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)  <b>CHECK APPROPRIATE BOX</b> <input type="checkbox"/> GAS ___ Natural ___ LP <input type="checkbox"/> MECHANICAL <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> LOW VOLTAGE 1 <sup>st</sup> _____ (Rough-In)    2 <sup>nd</sup> _____ (Final)
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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://universalengineering.sharefile.com/f/fo94edc4-832d-44bd-9809-ecf32f9e2e63>  
 login ID = [cobi@universalengineering.com](mailto:cobi@universalengineering.com)    password = universal13

PROJECT NUMBER 0115.1500682.0000

TASK NUMBER 01

CITY OF BELLE ISLE  
Permit Application Review Sheet

Permit Number	2015-04-072
Property Owner	Peck
Address	2506 Nela Ave
Nature of Improvement	Mechanical one 3.5 ton changed
Received Application	4-28-15
Sent for Stormwater Review	
Stormwater Approved	/
Sent for Zoning Review	
Zoning Approved	/
Applied for Variance	
Variance Approved	
Sent to BO for Review	4-28-15
Building Official Approved	4-29-15 [Signature]
Comments	
1.	Susan 4-28-15 all credentials on file ✓ renewed with 50337
2.	Susan 4-29-15 emailed it's ready
3.	
4.	
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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.universalengineering.com](http://www.universalengineering.com)

RECEIVED  
4-28-15

## 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: 4/29/15

PERMIT NUMBER 2015-04-072

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

Project Address 2506 Neia Ave, Belle Isle FL 32809 32812  
Property Owner Danny & Muriel Peck Phone 407-855-5830  
Property Owner's Mailing Address PO Box 593892 City Orlando  
State FL Zip Code 32859-3892 Parcel Id Number: 19-23-30-5888-02-071

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  Changeout

- REQUIRED: Tie Down Engineering
- REQUIRED: if adding A/C to new space, provide Energy Calculations & Equipment Sizing 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 3.5 Total Tons 3.5  
Type of System: Water to Air  Chiller  Split System  Package  Heat Pump  Estimated Cost \$ 6900.00

Heating: # of Units KWS Per Unit 10 Total KWS 10 BTU's \_\_\_\_\_ Estimated Cost \$ \_\_\_\_\_  
Oil  Electric  Boiler  Gas

(A) Estimated Cost Fee \$ \_\_\_\_\_

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 [Signature] LICENSE # CAC1813726

LICENSE HOLDER NAME John Green COMPANY NAME Greens Energy Services, Inc

Street Address 186 N. Goldenrod Rd.

City Orlando State FL Zip Code 32807 Phone Number 407-282-5000

Email Address cdurham@greensenergy.com

Building Official: [Signature] Date 4-29-15  
Verified Contractor's Licenses & Insurance are on file [Signature] Date 4-28-15

Permit Fee	\$	<u>55.00</u>
Review Fee	\$	<u>27.50</u>
3% Florida Surcharge	\$	<u>4.00</u>
Total Permit Fee	\$	<u>86.50</u>

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 \_\_\_\_\_



186 N. Goldenrod Road Orlando, FL 32807  
(407) 282 5000  
www.greensenergy.com



Proposed by: Robbie Austin  
(407) 506 5239  
raustin@greenseenergy.com

Proposed for: Danny and Muriel  
Peck  
2506 Nela Ave  
Orlando, Florida 32809  
(407) 855 5830  
Raustinsix@gmail.com

## GOOD

Your Investment:

# \$175/MO\*

# \$6,900

\*with approved credit



### Included Deductions:

- MILITARY SERVICE DISCOUNT (\$100.00)

### Other Incentives:

- DUKE ENERGY REBATE OF \$350 FOR SWITCHING TO HEAT PUMP (\$0.00)

*Net Investment: \$6,900*

### Financing Details:

Min. 2% payment 9.90% APR Payment based on 48 months

**Carrier 25HBC542A003**

**Carrier FB4CNP048L00**

**Carrier CE0901N10**

**Carrier TH6320WF1005**

-Comfort Series

-Comfort Series

-Auxiliary Heater

-Heat Pump

-Air Handler

-Single Stage [View My](#)

[View My Brochure](#)

#### Brochure

*-10 year parts limited to original*

*purchaser upon timely registration*

*-Otherwise 5 years (Applies to*

*residential installation only)*

### AHRI Matchup:

AHRI # : [7914905](#)

Cooling Capacity : 42000

Heating Capacity : 42000

SEER : 15

EER : 12.5

**Included Services:**

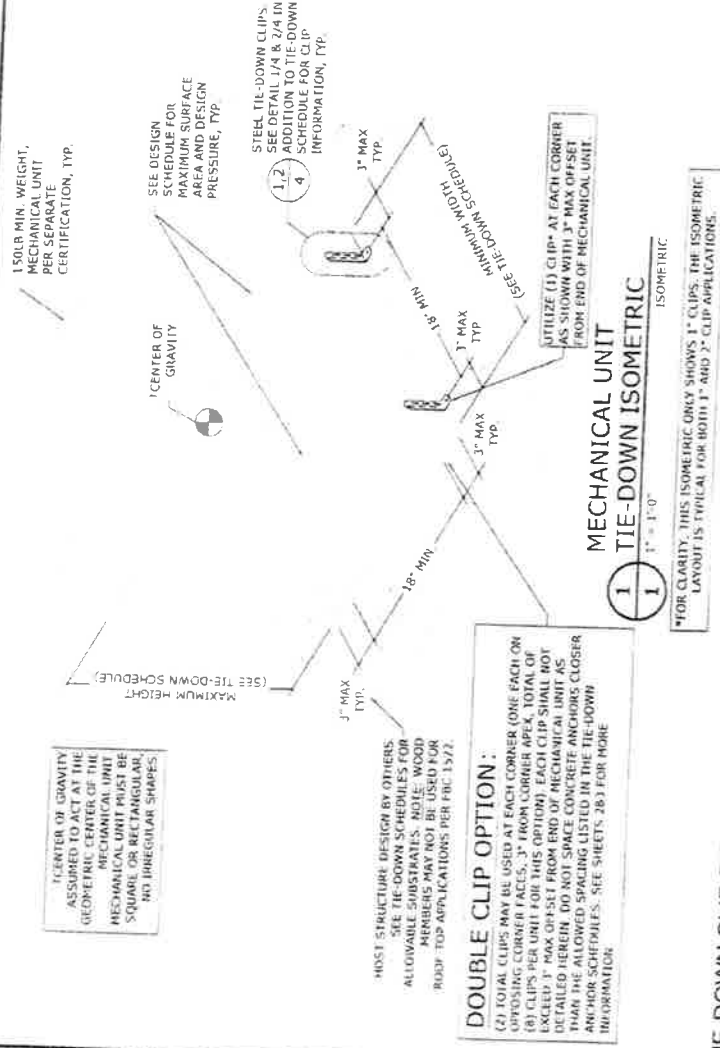
- 3/8 INCH X 7/8 INCH LINE SET LINE-SET (50 FEET OR LESS)
- NEW CONDENSOR PAD
- ADAPTING TO EXISTING DUCT WORK
- PEAK PERFORMANCE CHECK
- GREENS REGISTER YOUR MANUFACTURERS' LIMITED WARRANTY TO EXTEND COVERAGE TO 10 YEARS ON ALL FUNCTIONAL PARTS TO ORIGINAL OWNER
- NEW LARGE PLATFORM
- DRAIN SAFETY SWITCH
- REPLACE DRAIN LINES
- CONNECT TO EXISTING ELECTRICAL
- GREENS EXCLUSIVE LABOR WARRANTY
- CITY/COUNTY PERMIT

1. To View The HVAC Opcost website - [CLICK THIS LINK!](#) 2. To read about Greens Energy Services, Inc. - [CLICK THIS LINK!](#) **TERMS & CONDITIONS OF AGREEMENT ALL WORK TO BE PERFORMED IN A NEAT WORK AND PROFESSIONAL MANNER.** 1. Purchaser hereby accepts the equipment and services described above and agrees to pay Greens Energy Services, Inc. the price shown above. 2. All equipment and material are guaranteed by Greens Energy Services, Inc. to be as specified. All work will be completed in a workmanlike manner according to normally accepted practices. 3. Materials and work in addition to that described herein will be furnished only on Purchaser's authorization and will be paid by Purchaser as an extra charge. 4. Upon failure to pay any sums due hereunder, Purchaser agrees to pay Greens Energy Services, Inc. interest at the rate of one and one half percent (1½%) per month (annual rate of 18%) on all outstanding balances. 5. Greens Energy Services, Inc. shall not be liable for any default caused by events beyond its control, including but not limited to, fire, flood, strikes, accidents, or delays affecting this work or other operations in which it is involved, directly or indirectly. 6. Purchaser shall permit Greens Energy Services, Inc. reasonable access to the property on which equipment is to be installed. Title to all provided equipment remains with Greens Energy Services, Inc. until all amounts due thereon are paid in full, whether such equipment is affixed to the realty or not, and shall remain personal property and be deemed sever-able without injury to the freehold. On any payment default by Purchaser, or if in Greens Energy Services, Inc.'s judgment, reasonably exercised, its equity appears to be imperiled, then, Greens Energy Services, Inc. may without further notice enter the premises and remove or resell the equipment, and Purchaser shall be liable for any deficiency or loss sustained by Greens Energy Services, Inc. in connection therewith. 7. Once equipment is connected at Purchaser's property, Purchaser assumes all risk of loss or damage to such equipment and shall insure same fully to protect all interests of Greens Energy Services, Inc., cost of insurance to be paid by Purchaser. Greens Energy Services, Inc. carries liability insurance and Worker's Compensation Insurance. 8. Greens Energy Services, Inc. provides an exclusive limited labor warranty on all new systems. Length of warranty varies by system type. Equipment or system failure due to lack of proper maintenance service or abuse is expressly excluded. Normal maintenance check-ups and filter replacements are the responsibility of Purchaser. All other warranties, expressed or implied, are the responsibility of the manufacturer of the equipment, parts, or materials used in connection with the services. 9. There are no warranties, expressed or implied, for existing equipment, ductwork, or other materials not installed by Greens Energy Services, Inc.. 10. All warranty work will be performed during Greens Energy Services, Inc.'s normal working hours, 8:00AM to 5:00PM, Monday through Friday. 11. Purchaser is responsible for all costs and reasonable attorney fees incurred by Greens Energy Services, Inc. in connection with any action or proceeding (including arbitration and appeals) arising out of this agreement, including collection of any outstanding amounts due, whether or not suit is filed. 12. Except as provided herein Greens Energy Services, Inc. makes no other representations or warranties, either express or implied, including, but not limited to, any implied warranties of merchantability or fitness for a particular purpose Greens Energy Services, Inc. expressly disclaims all other warranties. Greens Energy Services, Inc.'s maximum liability hereunder shall consist of refunding all moneys paid to it by Purchaser hereunder subject to removal and return to Greens Energy Services, Inc. of all equipment provided hereunder. Under no circumstances will Greens Energy Services, Inc. be liable to Purchaser or any other person for any damages, including, without limitation, any indirect, incidental, special, or consequential damages, expenses, cost, profits, lost savings or earnings, lost or corrupted data, or other liability arising out of or related to this agreement, or the services or equipment provided hereunder. 13. This agreement shall be governed and construed solely according to the internal laws of the State of Florida, without reference to any conflicts of laws. 14. This agreement is the complete and exclusive statement of the agreement between Purchaser and Greens Energy Services, Inc. and it supersedes all prior oral and written proposals and any prior or subsequent communications pertaining to the subject matter hereof. 15. Warranty if 5 years unless registered within 90 days of installation. With Registration, the warranty is 10 Years to initial owner. 16. It is agreed the seller will retain title ownership to any equipment or material that may be furnished until final payment is made, and if settlement is not made as agreed, the seller will be harmless for any damages resulting from the removal thereof. I/We agree to pay all costs and reasonable attorney's fee if this invoice is placed in the hands of an attorney for collection. Yearly maintenance not included in warranty. Signature of Authorized Purchaser: Danny R Peck

Date 04/21/15 Payment to be made as follows: Balance on completion Greens Energy Services, Inc. proposes hereby to furnish and install the equipment and materials as described above on the terms and conditions provided herein. This proposal is good for thirty (30) days from the date hereof, but may be accepted at any later date at the sole discretion of Greens Energy Services, Inc.. Signature of Authorized Representative of Greens Energy Services, Inc.: [Signature]  
Date 04/21/15

# BMP INTERNATIONAL, INC.

## MECHANICAL UNIT STEEL TIE-DOWN CLIP CAPACITIES: AT GRADE & ROOF-TOP MOUNTED APPLICATIONS



### TIE-DOWN CLIP DIRECTIVE EXAMPLE

THE FOLLOWING EXAMPLE ILLUSTRATES THE PROCEDURE USED TO DETERMINE THE MAXIMUM ALLOWABLE WIND PRESSURE FOR ANY GIVEN MECHANICAL UNIT THAT COMPLIES TO THE DIMENSION RESTRICTIONS LISTED HEREIN. SEE SHEETS 28.1 FOR TIE-DOWN SCHEDULES.

#### MECHANICAL UNIT CRITERIA

CONSIDER THE INSTALLATION OF (1) MECHANICAL UNIT WITH THE FOLLOWING CRITERIA - 40" TALL x 36" WIDE x 24" DEEP, 150 LB WEIGHT AS WRITTEN BY OTHERS, INSTALLED TO 119.7 KSI MIN. CONCRETE AT GRADE AS VERIFIED BY OTHERS.

#### PROCEDURE

1. LOCATE THE AT GRADE TIE-DOWN SCHEDULE ON SHEET 2 AND SELECT CLIP TYPE.
2. DETERMINE THE LARGER FACE AREA OF MECHANICAL UNIT TO BE INSTALLED.
3. CHECK MAXIMUM UNIT HEIGHT RESTRICTION.
4. DETERMINE THE NUMBER OF CLIPS TO BE USED AT EACH CORNER OF THE MECHANICAL UNIT.

CONCLUSION: MAXIMUM ALLOWABLE LATERAL DESIGN PRESSURE = 40 PSF (COMPARE THIS VALUE TO THE SEPARATE SITE SPECIFIC REQUIRED DESIGN WIND PRESSURE PROVIDED BY A LICENSED ENGINEER OR REGISTERED ARCHITECT, NOT INCLUDED IN THIS CERTIFICATION)

### GENERAL NOTES:

1. THIS PRODUCT HAS BEEN DESIGNED AND SHALL BE FABRICATED IN ACCORDANCE WITH THE REQUIREMENTS OF THE 2010 FLORIDA BUILDING CODE FOR USE WITH ASCE 7-10 ZONE 2.
2. NO 20-1/2% INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THIS SYSTEM.
3. SYSTEM IS BASED ON CLERK PROVIDED PRODUCT AND ON SHEETS FROM TEST REPORT: 11/17/02A, -EIA, 03/20/02B BY TESTING EVALUATION LABORATORIES, INC. NO SUBSTITUTIONS WITHOUT WRITTEN APPROVAL BY THIS ENGINEER SHALL BE PERMITTED.
4. ALLOWABLE DESIGN PRESSURES TO QUALITY CAPACITY OF CLIPS AS LISTED HEREIN ARE DETERMINED THROUGH TESTING BEYOND DATA AND RATIONALLY CHECKED FOR CONSISTENCY WITH EACH TEST PERFORMED.
5. THIS SYSTEM SHALL BE DETERMINED BY OTHERS ON A SITE-SPECIFIC BASIS IN ACCORDANCE WITH THE GOVERNING CODE.
6. MAXIMUM & MINIMUM DIMENSIONS AND MINIMUM WEIGHT OF MECHANICAL UNIT SHALL CONFORM TO SPECIFICATIONS AND ALL MECHANICAL SPECIFICATIONS (CLEAR SPACE, TURNAGE, ETC.) SHALL BE IN ACCORDANCE WITH MANUFACTURER RECOMMENDATIONS AND ARE THE EXPRESS RESPONSIBILITY OF THE INSTALLER.
7. FASTENERS TO BE 412 X 3/4" OR GREATER SAE GRADE 5 BOLTS, UNLESS NOTED OTHERWISE, SHALL BE REFERRED TO HEREIN SHALL BE ITW BULDER IMMERGAL FOR CONCRETE ONLY. REQUIREMENTS 102 KSI MIN CONCRETE. SEE ANCHOR SCHEDULE FOR ANCHOR TO PREVENT ELECTROLYSIS. FASTENERS SHALL HAVE APPROPRIATE CORROSION PROTECTION.
8. ALL STEEL CLIPS SHALL BE ASTM A290 STEEL (GRADE D) WITH Fy = 41 KSI OR BETTER.
9. ALL STEEL MEMBERS SHALL BE PROTECTED AGAINST CORROSION WITH AN APPROVED COAT OF PAINT, ENAMEL OR OTHER APPROVED FINISH IN ACCORDANCE WITH THE CODE. THE SECTIONS 2203.2 AND 2270.1000-NATED CONING REQUIRED FOR ALL CONCRETE SHALL BE PART OF THIS CERTIFICATION. AS A MINIMUM, MINIMUM COMPRESSIVE STRENGTH SHALL BE 1102 PSI, UNLESS NOTED OTHERWISE.
10. ALL WOOD MEMBERS SHALL BE PRESSURE TREATED SOUTHERN YELLOW PINE GRADE #2 WITH SPECIFIC GRAVITY G = 0.55 OR GREATER. ALL CONNECTIONS TO WOOD MEMBERS SHALL BE PERMITTED FOR ROOF-TOP APPLICATIONS PER FBC 1527.
11. THE CODE IS RESPONSIBLE TO INSULATE ALL MEMBERS FROM DISSIMILAR MATERIALS TO PREVENT ELECTROLYSIS, I.E. ALUMINUM PER F.B.C. 2001.4.
12. ELECTRICAL GROUNDS ARE NOT REQUIRED, TO BE DESIGNED & INSTALLED BY OTHERS.
13. THE ADEQUACY OF ANY EXISTING STRUCTURE TO WITHSTAND SUPERIMPOSED LOADS SHALL BE VERIFIED BY THE ON-SITE STRUCTURAL PROFESSIONAL AND IS NOT INCLUDED IN THIS CERTIFICATION EXCEPT AS EXPRESSLY PROVIDED HEREIN. NO ADDITIONAL CERTIFICATIONS OR AFFIRMATIONS ARE INTENDED.
14. A SCHEDULE DETAILED HEREIN IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR SPECIFIC SITE CONDITIONS. DIFFERENT FROM THE CONDITIONS DETAILED HEREIN. A LICENSED ENGINEER OR REGISTERED ARCHITECT SHALL PREPARE DETAILED SPECIFIC DOCUMENTS FOR THE CONSTRUCTION WITH THIS DOCUMENT.
15. WATER-TIGHTNESS OF EXISTING CONSTRUCTION SHALL BE THE FULL RESPONSIBILITY OF THE INSTALLING CONTRACTOR. CONSTRUCTION SHALL BE THE FULL RESPONSIBILITY OF THE ALTERED WATERPROOFING MEMBRANE IS NOT TO BE REMOVED OR ALTERED FOR ANY WATERPROOFING OR LEAKAGE ISSUES. WATER SHALL NOT BE RESPONSIBILITY OF STRUCTURE. PROPOSED HEREIN. THE CONTRACTOR SHALL NOT BE RESPONSIBLE FOR ANY WATERPROOFING OR LEAKAGE ISSUES. WATER SHALL NOT BE CONTRACTOR'S RESPONSIBILITY OF THE INSTALLING CONTRACTOR.

### DESIGN PRESSURE EXAMPLE SCENARIO

SEE SHEET 24 FOR A SITE SPECIFIC DESIGN PRESSURE EXAMPLE & ACCOMPANYING UNIT CONFIGURATIONS WITH TIE-DOWN CLIP REQUIREMENTS.

ENGINEERING EXPRESS  
160 SW 12TH AVENUE, #100  
DEERFIELD BEACH, FL 33442  
PH: (954) 354-0660 FAX: (954) 354-0661  
WWW.ENGGXP.COM

FLORIDA STATEWIDE APPROVAL  
MECHANICAL UNIT STEEL TIE-DOWN CLIPS  
PH: (222) 875-1613  
4710 28TH STREET NORTH  
ST. PETERSBURG, FL 33721

FRANK L. BENNETT, P.E.  
STATE OF FLORIDA  
REGISTERED PROFESSIONAL ENGINEER  
NO. 12189  
02/17/2013

REV.	DATE	DESCRIPTION
1	02-13-13	ISSUE FOR PERMIT
2	02-13-13	ISSUE FOR PERMIT
3	02-13-13	ISSUE FOR PERMIT

SCALE: 1/4" = 1'-0"  
PAGE DESCRIPTION: 11-BMP-0001

### 1" STEEL CLIP TIE-DOWN SCHEDULE: AT GRADE INSTALLATIONS

MAXIMUM SURFACE AREA OF UNITS (LARGEST FACE)	UNIT HEIGHT	UNIT WIDTH	MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO HOIST STRUCTURES) (2) CLIPS AT EACH CORNER (TOTAL OF 8 CLIPS PER UNIT)				MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO ROOF STRUCTURES) (2) CLIPS AT EACH CORNER (TOTAL OF 8 CLIPS PER UNIT)						
			TACON TO CONCRETE	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD	TACON TO CONCRETE	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD			
6" x 7"	24" MAX	12" MIN	42 PSF	43 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF
8" x 7"	32" MAX	15" MIN	37 PSF	37 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF
8" x 7"	48" MAX	24" MIN	30 PSF	30 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF
9" x 12"	48" MAX	24" MIN	25 PSF	25 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF
10" x 12"	48" MAX	24" MIN	20 PSF	20 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF
10" x 12"	60" MAX	48" MIN	18 PSF	18 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF
10" x 12"	60" MAX	48" MIN	15 PSF	15 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF

1. THE DOWN CLIPS SHALL BE FASTENED TO MECHANICAL HOUSING UNIT WITH (1) #12 SAE GRADE 5 SHEET METAL SCREWS OR (2) #10 SAE GRADE 5 SHEET METAL SCREWS ON (1) 1/2" MIN. THICKNESS.

2. MECHANICAL HOUSING UNIT SHALL CONFORM TO THE FOLLOWING:  
 (1) 1/2" CARBON STEEL (150 MILLIPEX TACKON, 1 1/2" TALL CARBO TO CONCRETE, 2 1/2" MIN. EDGE DISTANCE, 7" MIN. SPACING TO ANY ADJACENT ANCHOR.  
 (2) #14 SAE GRADE 5 SHEET METAL SCREW TO ALUMINUM, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.  
 (3) #14 SAE GRADE 5 SHEET METAL SCREW TO STEEL, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.

3. MECHANICAL HOUSING UNITS SHALL BE 3/8" MIN. STEEL, GRADE 33, 23GA MIN. THICKNESS. SUBSTRATE MAY BE CONCRETE. CONTACT THE ENGINEER FOR SITE-SPECIFIC ENGINEERING.

4. A MAXIMUM ALLOWABLE VALUE OF 200 PSF HAS BEEN UTILIZED; FOR HIGHER DEMAND CAPACITIES CONTACT THE ENGINEER FOR SITE-SPECIFIC ENGINEERING.

#### ANCHOR SCHEDULE

SUBSTRATE	ANCHOR
CONCRETE: (4" THICK MIN. (19X25) MIN.)	(1) 1/2" CARBON STEEL (150 MILLIPEX TACKON, 1 1/2" TALL CARBO TO CONCRETE, 2 1/2" MIN. EDGE DISTANCE, 7" MIN. SPACING TO ANY ADJACENT ANCHOR.
ALUMINUM: (0.125" MIN. THICK, 6061 T6 MIN. ALUMINUM)	(2) #14 SAE GRADE 5 SHEET METAL SCREW TO ALUMINUM, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.
STEEL: (0.125" MIN. THICK, 33 KSI MIN. STEEL)	(3) #14 SAE GRADE 5 SHEET METAL SCREW TO STEEL, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.
SEALED WOOD: (SOUTHERN YELLOW PINE, G=0.55 OR BETTER)	(4) #14 SAE GRADE 5 WOOD SCREW TO WOOD MEMBER, PROVIDE 1 1/2" MIN. END DISTANCE, 1" MIN. EDGE DISTANCE, 1" MIN. END DISTANCE.

ANCHOR SCHEDULE NOTES:  
 1. EMBLEMENT AND EDGE DISTANCE EXCLUDES FINISHES, IF APPLICABLE.  
 2. ENSURE MINIMUM EDGE DISTANCE AS NOTED IN ANCHOR SCHEDULE.

### 2" STEEL CLIP TIE-DOWN SCHEDULE: AT GRADE INSTALLATIONS

MAXIMUM SURFACE AREA OF UNITS (LARGEST FACE)	UNIT HEIGHT	UNIT WIDTH	MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO HOIST STRUCTURES) (2) CLIPS AT EACH CORNER (TOTAL OF 8 CLIPS PER UNIT)				MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO ROOF STRUCTURES) (2) CLIPS AT EACH CORNER (TOTAL OF 8 CLIPS PER UNIT)					
			TACON TO CONCRETE	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD	TACON TO CONCRETE	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD		
6" x 7"	24" MAX	12" MIN	42 PSF	43 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF	81 PSF
8" x 7"	32" MAX	15" MIN	37 PSF	37 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF	70 PSF
8" x 7"	48" MAX	24" MIN	30 PSF	30 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF	57 PSF
9" x 12"	48" MAX	24" MIN	25 PSF	25 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF	47 PSF
10" x 12"	48" MAX	24" MIN	20 PSF	20 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF	37 PSF
10" x 12"	60" MAX	48" MIN	18 PSF	18 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF	33 PSF
10" x 12"	60" MAX	48" MIN	15 PSF	15 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF	27 PSF

1. THE DOWN CLIPS SHALL BE FASTENED TO MECHANICAL HOUSING UNIT WITH (1) #12 SAE GRADE 5 SHEET METAL SCREWS OR (2) #10 SAE GRADE 5 SHEET METAL SCREWS ON (1) 1/2" MIN. THICKNESS.

2. MECHANICAL HOUSING UNIT SHALL CONFORM TO THE FOLLOWING:  
 (1) 1/2" CARBON STEEL (150 MILLIPEX TACKON, 1 1/2" TALL CARBO TO CONCRETE, 2 1/2" MIN. EDGE DISTANCE, 7" MIN. SPACING TO ANY ADJACENT ANCHOR.  
 (2) #14 SAE GRADE 5 SHEET METAL SCREW TO ALUMINUM, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.  
 (3) #14 SAE GRADE 5 SHEET METAL SCREW TO STEEL, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.

3. MECHANICAL HOUSING UNITS SHALL BE 3/8" MIN. STEEL, GRADE 33, 23GA MIN. THICKNESS. SUBSTRATE MAY BE CONCRETE. CONTACT THE ENGINEER FOR SITE-SPECIFIC ENGINEERING.

4. A MAXIMUM ALLOWABLE VALUE OF 200 PSF HAS BEEN UTILIZED; FOR HIGHER DEMAND CAPACITIES CONTACT THE ENGINEER FOR SITE-SPECIFIC ENGINEERING.

#### ANCHOR SCHEDULE

SUBSTRATE	ANCHOR
CONCRETE: (4" THICK MIN. (19X25) MIN.)	(1) 1/2" CARBON STEEL (150 MILLIPEX TACKON, 1 1/2" TALL CARBO TO CONCRETE, 2 1/2" MIN. EDGE DISTANCE, 7" MIN. SPACING TO ANY ADJACENT ANCHOR.
ALUMINUM: (0.125" MIN. THICK, 6061 T6 MIN. ALUMINUM)	(2) #14 SAE GRADE 5 SHEET METAL SCREW TO ALUMINUM, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.
STEEL: (0.125" MIN. THICK, 33 KSI MIN. STEEL)	(3) #14 SAE GRADE 5 SHEET METAL SCREW TO STEEL, PROVIDE (5) 3/8" MIN. PIVOT POINTS THROUGH PLATE FOR SHEET METAL SCREW.
SEALED WOOD: (SOUTHERN YELLOW PINE, G=0.55 OR BETTER)	(4) #14 SAE GRADE 5 WOOD SCREW TO WOOD MEMBER, PROVIDE 1 1/2" MIN. END DISTANCE, 1" MIN. EDGE DISTANCE, 1" MIN. END DISTANCE.

ANCHOR SCHEDULE NOTES:  
 1. EMBLEMENT AND EDGE DISTANCE EXCLUDES FINISHES, IF APPLICABLE.  
 2. ENSURE MINIMUM EDGE DISTANCE AS NOTED IN ANCHOR SCHEDULE.

**ENGINEERING**  
 STATE OF FLORIDA  
 PROFESSIONAL ENGINEER  
 02/14/2013  
 160 SW 12TH AVENUE, DEERFIELD BEACH, FL 33442  
 WWW.ENGGP.COM  
 PH: (954) 354-0660 FAX: (954) 354-0661  
 A FRANK L. EDWARDS, P.E. LICENSE NO. 12507  
 DEPT. OF ALTH. RES. & COMM. SERVICES

**BMP INTERNATIONAL, INC.**  
 4710 28TH STREET NORTH  
 ST. PETERSBURG, FL 34721  
 PH: (727) 577-1613  
 MECHANICAL UNIT STEEL TIE-DOWN CLIPS  
 FLORIDA STATEWIDE APPROVAL

**11-BMP-0001**  
 SCALE: N.T.S.  
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 DATE: 02/14/13  
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 REVISIONS:  
 NO. DATE BY DESCRIPTION







STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

<b>LICENSE NUMBER</b>	
CAC1813726	



The CLASS B AIR CONDITIONING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS  
Expiration date: AUG 31, 2016

GREEN, JOHN T JR  
GREENS ENERGY SERVICES INC  
186 N. GOLDENROD RD  
ORLANDO FL 32807



ISSUED 08/17/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1408170002010



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
6/25/2014

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).

<b>PRODUCER</b> Bowen, Milette & Britt of Florida LLC 1020 N. Orlando Avenue Suite 200 Maitland FL 32751		<b>CONTACT NAME:</b> Jamie Greene <b>PHONE (A/C, No, Ext):</b> 407-647-1616 <b>E-MAIL ADDRESS:</b> certificates@bmbinc.com <b>FAX (A/C, No):</b> 407-628-1635	
<b>INSURED</b> GREENSENER Greens Energy Services, Inc. 186 N. Goldenrod Road Orlando FL 32807		<b>INSURER(S) AFFORDING COVERAGE</b>	
		INSURER A: Bridgefield Employers Insurance Co.	NAIC #: 10701
		INSURER B: Philadelphia Indemnity Ins Co.	18058
		INSURER C: AIG Specialty Insurance Company	26883
		INSURER D:	
		INSURER E:	
		INSURER F:	

**COVERAGES**      **CERTIFICATE NUMBER:** 98201856      **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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
B	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER	Y	Y	PHPK1195307	6/30/2014	6/30/2015	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$Excluded PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS			PHPK1195307	6/30/2014	6/30/2015	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
B	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input checked="" type="checkbox"/> RETENTION \$10,000			PHUB464356	6/30/2014	6/30/2015	EACH OCCURRENCE \$4,000,000 AGGREGATE \$4,000,000
A	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	8345369	6/30/2014	6/30/2015	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E L EACH ACCIDENT \$1,000,000 E L DISEASE - EA EMPLOYEE \$1,000,000 E L DISEASE - POLICY LIMIT \$1,000,000
C	Pollution Liability			CPL24177779	6/30/2014	6/30/2015	Per Occurrence \$1,000,000 Ded \$10,000

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

The following policy provisions and/or endorsements form part of the policies of insurance represented by this certificate of insurance. The terms contained in the policies and/or endorsements supersede the representations made herein. Electronic copies of the policy provisions and/or endorsements listed below are available by emailing: certificates@bmbinc.com

When required by written contract, those Parties listed in said contract, including the certificate holder, are added as an Additional Insured, with respect to General Liability, Auto Liability, as afforded by the policy and/or endorsements. When required by written contract, waiver of See Attached.

<b>CERTIFICATE HOLDER</b>  City of Belle Isle 1600 Nela Ave Belle Isle FL 32809	<b>CANCELLATION</b>  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 
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