



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD. PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: for: 6' x 22' porch extension 300 sq ft modified bitumen
Comments: None
Project Information
Address: 4948 Oak Island Rd, Belle Isle, FL 32812
Parcel ID: 18-23-30-6031-00-310
Property Owner: Goestz, Ludwig & Lynda
Phone Number: 321 230 0199

Company Name: Wormley Roofing, Inc.
Contractor Name: Wormley, Robert
License Number: CCC1325558
Address: 2473 N John Young Pkwy Orlando, FL 32804
Phone Number: 321-543-2834

Permit Number: 2015-04-057

Date of Application: 04/21/2015

Date Permit Issued: 04/24/2015

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 \$
Traffic \$

ZONING FEES

Zoning Fee \$

UNIVERSAL ENG - BUILDING FEES

Demo \$
Building \$
Fence \$
Driveway \$
Shed \$
Window(s) \$
Door(s) \$
PrePower \$
Electrical \$
Temp Pole \$
Plumbing \$
Mechanical \$
Gas \$
Roofing \$45.00
Boat Dock \$
Screen Encl \$
Swimming Pool \$

SURCHARGE FEES

Surcharge Fee \$2.00
Surcharge Fee \$2.00

TOTAL FEES \$49.00

Date Paid

4-24-15

CC or Check #

MC 5248

Amount Paid

49.00

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

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

ROOFING

1ST ROOFING Deck Nailing/Dry-in/Flashing _____
2nd ROOFING Covering In-Progress _____
3rd ROOFING Covering Final _____

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

1ST _____ (Underground) 2nd _____ (Sewer)
3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to 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

password = universal13

PROJECT NUMBER 015-1500014-0000

TASK NUMBER _____

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2015-04-057
Property Owner	Goetz
Address	4948 Oak Island Rd
Nature of Improvement	New Roof for Park extension
Received Application	4-22-15
Sent for Stormwater Review	
Stormwater Approved	
Sent for Zoning Review	
Zoning Approved	
Applied for Variance	
Variance Approved	
Sent to BO for Review	4-24-15
Building Official Approved	4-25-15 RA
Comments	
1.	Sum 4-24-15 renew wo# 50227
2.	4-25-15 HAD TO PRINT INSTAL INSTRUCTIONS FOR
3.	MODIFIED BIT ROOF
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
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RECEIVED
4-24-15

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.

2015-04-057

DATE OF APPLICATION: _____

ROOF PERMIT NUMBER _____

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

Project Address 4948 OAK ISLAND ROAD, Belle Isle, FL 32809 32812
Property Owner LUDWIG & LYNDA GOESTZ Phone 321-230-0199
Property Owner's Mailing Address 4948 OAK ISLAND ROAD City BELLE ISLE
State FLORIDA Zip Code 32809 Parcel Id Number: 18-23-30-6031-00-310

REQUIRED! To obtain this information, please visit <http://www.ocpafi.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 showing the Code Version
- **REQUIRED!** Florida Product Approval Installation Instructions from 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: 300 Number of Stories: 1 Job Valuation: \$ 1080.00
Type: Asphalt Shingles Metal Modified Bitumen Other: Building Permit 2015-02-027

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. By signing below, I recognize Republic Services is by legal contract the sole authorized provider of garbage, recycling, yard waste, and commercial garbage and construction debris collection and disposal services with the city limits of the City. Contractors, homeowners and commercial businesses may contact Republic Services at 407-293-8000 to setup accounts for Commercial, Construction Roll Off, or other services needed. Rates are fixed by contract and are available at City Hall or from Republic Services. The City enforces the contract through its code enforcement office. Failure to comply will result in a stop work order.

LICENSE HOLDER SIGNATURE [Signature] LICENSE # CCC1325558
LICENSE HOLDER NAME ROBERT WORMLEY COMPANY NAME WORMLEY ROOFING
Street Address 2473 N JOHN YOUNG PARKWAY
City ORLANDO State FL Zip Code 32804 Phone Number 321-303-0766
Email Address wormleyroofing@aol.com

Building Official: [Signature] Date 4-24-15
Verified Contractor's Licenses & Insurance are on file [Signature] Date 4-23-15

Zoning Fee	\$ _____
Permit Fee	\$ <u>30.00</u>
Review Fee	\$ <u>15.-</u>
3% Florida Surcharge	\$ <u>4.00</u>
Total Permit Fee	\$ <u>49.00</u>

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 2015-02-027



CITY OF BELLE ISLE, FLORIDA
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POWER OF ATTORNEY

Date: 4/21/15

Permit #: 2015-02-027

I hereby name and appoint Tyler Wormley of
(print name)

Wormley Roofing, Inc. to be my lawful attorney-in-fact to act for
(company name)

me and apply to the City of Belle Isle Building Department for a Roofing permit
(type of permit)

for work to be performed at the following location:

4948 Oak Island road, Belle Isle, FL 32809 32812 and
(street address)

to sign my name and do all things necessary to this appointment.

Certified Contractor's Printed Name: Robert Wormley

License Number: CCC1325558

Certified Contractor's Signature: [Signature]

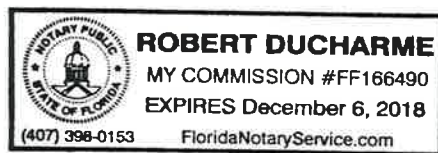
The foregoing instrument was acknowledged before me this 16 days of 4 of 2015

by Robert wormley who is personally known to me or who produced
as identification and who did not take an oath.

State of Florida
County of Orange

Robert Ducharme
Notary Public, Orange County, Florida

(seal)





City of Belle Isle

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Product Approval Form

DATE: _____

PERMIT # 2015-04-057

PROJECT ADDRESS 4948 Oak Island Road

Belle Isle, FL 32809 32812

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72m, please provide the information and approval numbers of the building components listed below if they will be utilized on the building or structure. FL Approved products are listed online at www.floridabuilding.org or can be obtained from the local product supplier. The following information must be turned in with permit application and available onsite for inspections:

1. This Product Approval Cover Sheet
2. Internet screen from FloridaBuilding.org showing PA#, approval and code edition stamped
3. Manufacturer's installation details from FloridaBuilding.org and requirements for each product stamped

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
EXTERIOR DOORS				WALL PANELS			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Dbl Hung				Asphalt Shingles	Certainteed	Landmark	FL 5444 R9
Horizontal Slider				Non Struct Metal			FL 2533 R12
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other			
Skylights							
Other							
STRUCTURAL COMPONENTS				OTHER			
Wood Connectors							
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							

It is the applicant's responsibility to verify that specific products have been installed in accordance with their limitations and with the minimum required design pressures for the structure. Specific compliance will be verified during field inspections.

Applicant Signature _____

Date _____



FLINTLASTIC® SA CAP SHEET

SELF-ADHERING SBS MODIFIED BITUMEN CAP SHEET FOR SA ROOF SYSTEMS

Product Information

Product Use: FLINTLASTIC SA CAP is designed for use as a cap sheet in multi-ply self-adhered systems. It is suitable for use in the construction of various roof membrane assemblies over a variety of substrates. It is intended for use over FLINTLASTIC SA NailBase, FLINTLASTIC SA PlyBase or FLINTLASTIC SA MID PLY.

Product Composition and Features: FLINTLASTIC SA CAP is manufactured using a high performance, non-woven polyester/fiber glass scrim combination mat, impregnated and coated with a superior grade of modified bitumen compound. It is surfaced on the bottom with a removable release film and on the top with mineral granules. The combination mat provides excellent tear and puncture resistance.

Roll Dimensions:	39 $\frac{3}{8}$ " x 32'11"
Coverage:	One square
Approximate Weight:	95 lbs.
Top Surface:	Mineral granules
Back Surface:	Removable release film
Packaging:	Individual cartons (20 rolls per pallet)

Applicable Standards: Meets ASTM D6164, Grade G, Type I, D7505 and CGSB 37 GP-56M Type 1a, Class A, Grade 1. FLINTLASTIC SA CAP is approved by Underwriters Laboratories for use in various Class A, B and C roof assemblies, ICC-ES (ESR-1388), Factory Mutual, Miami-Dade, Florida Building Code Statewide Approval (FL 2533), and Texas Department of Insurance (RC-47). FLINTLASTIC SA CAP White is an approved ENERGY STAR® product for slopes greater than 2"/12". Initial Solar Reflectance: 0.27; Aged Solar Reflectance: 0.24; Thermal Emittance: 0.89. FLINTLASTIC SA CAP White is also approved by the Cool Roof Rating Council (CRRC). The CRRC product code ID is 0668-0018.



Technical Data

Modified Bitumen Coating: Non-oxidized (flux) asphalt, blended with elastomeric styrene-butadiene-styrene (SBS) polymer.

Support Mat: A high performance, puncture and tear resistant, non-woven polyester and fiber glass scrim combination mat.

Test Description	Test Method	Results*
Solar Reflectance Index (SRI):	ASTM E1980	28.0
Tensile Strength:	ASTM D5147	
	@ 73.4 +/- 3.6°F MD/XD	85/65 lbs./in.
	@ 0 +/- 3.6°F MD/XD	115/90 lbs./in.
Elongation:	ASTM D5147	
	@ 73.4 +/- 3.6°F MD/XD	60%/65%
	@ 0 +/- 3.6°F MD/XD	40%/40%
Dimensional Stability:	ASTM D5147	0.5%
Low Temperature Flex:	ASTM D5147	Pass @ 0°F
Thickness:	ASTM D5147	4.0mm (160 mils)
Tear Strength:	@ 73.4 +/- 3.6°F MD/XD	120/95 lbs.

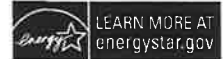
*NOTE: Published results are nominal production values confirmed by independent laboratory testing.



TABLE 1A: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)
SYSTEM TYPE A-2: MECHANICALLY ATTACHED ANCHOR SHEET, BONDED INSULATION, BONDED ROOF COVER

System No.	Deck (See Note 1)	Anchor Sheet		Base Insulation		Top Insulation		Roof Cover		MDP (psf)		
		Type	Fasteners	Attach	Type	Attach	Type	Attach	Base		Ply	Cap
SELF-ADHERING SYSTEMS:												
W-1	Min. 19/32-inch plywood at max. 24-inch spans	Glasbase, All Weather Empire, Flexiglas Base, Flintlastic Base 20; Poly SMS; Ultra Poly SMS; Yosemite	32 ga., 1-5/8-inch dia. tin caps with 11 ga. annular ring shank nails	9-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-inch AC Foam II, FlintBoard ISO, ENRGY-3, H-Shield or Multi-Max FA3	HA	Min. 0.25-inch Dens Deck primed with FlintPrime SA	HA	SBS-SA	(Optional) SBS-SA	SBS-SA	-45.0*
W-2	Min. 19/32-inch plywood at max. 24-inch spans	Glasbase, All Weather Empire, Flexiglas Base, Poly SMS or Ultra Poly SMS	32 ga., 1-5/8-inch dia. tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 3-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	Min. 1.5-inch AC Foam II, FlintBoard ISO, ENRGY-3, H-Shield or Multi-Max FA3	HA full coverage or OB500, M-OSFA, A-PD, D-IS or CR-20, 4-inch o.c.	Min. 0.25-inch Dens Deck primed with FlintPrime SA	HA full coverage or OB500, M-OSFA, A-PD, D-IS or CR-20, 6-inch o.c.	SBS-SA	(Optional) SBS-SA	SBS-SA	-52.5
W-3	Min. 19/32-inch plywood at max. 24-inch spans	Yosemite Venting Base Sheet	32 ga., 1-5/8-inch dia. tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 3-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	Min. 1.5-inch AC Foam II, FlintBoard ISO, ENRGY-3, H-Shield or Multi-Max FA3	HA	Min. 0.25-inch Dens Deck primed with FlintPrime SA	HA	SBS-SA	(Optional) SBS-SA	SBS-SA	-52.5
W-4	Min. 19/32-inch plywood at max. 24-inch spans	Glasbase, All Weather Empire, Flexiglas Base, Poly SMS or Ultra Poly SMS	32 ga., 1-5/8-inch dia. tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 3-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) Min. 1.5-inch AC Foam II, FlintBoard ISO, ENRGY-3, H-Shield or Multi-Max FA3	HA full coverage or OB500, M-OSFA, A-PD, D-IS or CR-20, 4-inch o.c.	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board primed with FlintPrime SA	HA full coverage or OB500, M-OSFA, A-PD, D-IS or CR-20, 6-inch o.c.	SBS-SA	(Optional) SBS-SA	SBS-SA	-60.0
W-5	Min. 19/32-inch plywood at max. 24-inch spans	Yosemite Venting Base Sheet	32 ga., 1-5/8-inch dia. tin caps with 11 ga. annular ring shank nails	8-inch o.c. in 3-inch lap and 8-inch o.c. in three, equally spaced, staggered center rows	(Optional) Min. 1.5-inch AC Foam II, FlintBoard ISO, ENRGY-3, H-Shield or Multi-Max FA3	HA	Min. 0.25-inch SECUROCK Gypsum-Fiber Roof Board primed with FlintPrime SA	HA	SBS-SA	(Optional) SBS-SA	SBS-SA	-60.0
HYBRID SYSTEMS:												
W-6	Min. 19/32-inch plywood at max. 24-inch spans	Glasbase, All Weather Empire, Flexiglas Base, Flintlastic Base 20; Poly SMS; Ultra Poly SMS; Yosemite	32 ga., 1-5/8-inch dia. tin caps with 11 ga. annular ring shank nails	9-inch o.c. in 4-inch lap and 12-inch o.c. in two, equally spaced, staggered center rows	Min. 1.5-inch AC Foam II, FlintBoard ISO, ENRGY-3, H-Shield or Multi-Max FA3	HA	None	N/A	SBS-SA-H	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-45.0*

Exterior Research and Design, LLC. d/b/a Trinity | ERD
 Certificate of Authorization #9503
 Prepared by: Robert Nieminen, PE-59166



FLINTLASTIC® SA CAP SHEET

SELF-ADHERING SBS MODIFIED BITUMEN CAP SHEET FOR SA ROOF SYSTEMS

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Coverage: One square
Approximate Weight: 95 lbs.
Top Surface: Mineral granules
Back Surface: Removable release film
Packaging: Individual cartons (20 rolls per pallet)

Applicable Standards: Meets ASTM D6164, Grade G, Type I, D7505 and CGSB 37 GP-56M Type 1a, Class A, Grade 1. FLINTLASTIC SA CAP is approved by Underwriters Laboratories for use in various Class A, B and C roof assemblies, ICC-ES (ESR-1388), Factory Mutual, Miami-Dade, Florida Building Code Statewide Approval (FL 2533), and Texas Department of Insurance (RC-47). FLINTLASTIC SA CAP White is an approved ENERGY STAR® product for slopes greater than 2"/12". Initial Solar Reflectance: 0.27; Aged Solar Reflectance: 0.24; Thermal Emittance: 0.89. FLINTLASTIC SA CAP White is also approved by the Cool Roof Rating Council (CRRC). The CRRC product code ID is 0668-0018.



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Solar Reflectance Index (SRI):	ASTM E1980	28.0
Tensile Strength:	ASTM D5147 @ 73.4 +/- 3.6°F MD/XD	85/65 lbs./in.
	@ 0 +/- 3.6°F MD/XD	115/90 lbs./in.
Elongation:	ASTM D5147 @ 73.4 +/- 3.6°F MD/XD	60%/65%
	@ 0 +/- 3.6°F MD/XD	40%/40%
Dimensional Stability:	ASTM D5147	0.5%
Low Temperature Flex:	ASTM D5147	Pass @ 0°F
Thickness:	ASTM D5147	4.0mm (160 mils)
Tear Strength:	@ 73.4 +/- 3.6°F MD/XD	120/95 lbs.

*NOTE: Published results are nominal production values confirmed by independent laboratory testing.

Searches

Sales Search

Results

Property Record Card

My Favorites

Sign up for e-Notify...

4948 Oak Island Rd < 18-23-30-6031-00-310 >

Name(s)	Physical Street Address
Goetz Ludwig	4948 Oak Island Rd
Goetz Lynda R	Postal City and Zipcode
Mailing Address On File	Orlando, FL 32809
4948 Oak Island Rd	Property Use
Belle Isle, FL 32809-3548	0130 - Sfr - Lake Front
Incorrect Mailing Address?	Municipality
	Belle Isle



Values, Exemptions and Taxes

Property Features

Sales Analysis

Location Info

Market Stats

Update Information

Property Description

View Plat

OAK ISLAND SECOND REPLAT 24/105 LOT 31

Total Land Area 26,927 sqft (+/-) | 0.62 acres (+/-) [GIS Calculated](#) [Notice](#)

Land (includes working values)

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0130 - Sfr - Lake Front	R-1-AA	1 LOT(S)	\$410,000.00	\$410,000	\$0.00	\$410,000

Page 1 of 1 (1 total records)

Buildings (includes working values)

Important Information		Structure				
	Model Code:	01 - Single Fam Residence	Actual Year Built:	1992	Gross Area:	5337 sqft
	Type Code:	0103 - Single Fam Class III	Beds:	3	Living Area:	3617 sqft
	Building Value:	\$359,370	Baths:	3.5	Exterior Wall:	Concrete Block Stucco
	Estimated New Cost:	\$424,787	Floors:	2	Interior Wall:	Drywall

Page 1 of 1 (1 total records)

Extra Features (includes working values)

Description	Date Built	Units	XFOB Value
FPL2 - Average Fireplace	01/01/1992	1 Unit(s)	\$2,500
BD2 - Boat Dock 2	01/01/1992	1 Unit(s)	\$4,000
BC3 - Boat Cover 3	01/01/1997	1 Unit(s)	\$6,000
PT3 - Patio 3	01/01/1997	1 Unit(s)	\$4,000

Page 1 of 1 (4 total records)

This Data Printed on 04/06/2015 and System Data Last Refreshed on 04/05/2015

[Site Notice](#) • [About Us](#) • [Contact Us](#) • [OCAFL Home](#) • [Property Search](#) • [Exemption FRAUD Hotline](#)

Orange County Property Appraiser • 200 S. Orange Avenue, Suite 1700 • Orlando, FL 32801

Office Hours: 8:00 a.m. to 5:00 p.m. Monday - Friday - Phone: 407.836.5044

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RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER
CC01928568

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 480 FS.
Expiration date: AUG 31, 2018



WORMLEY, ROBERT BRETT
WORMLEY ROOFING, INC
2473 N JOHN YOUNG PARKWAY
ORLANDO FL 32804



ISSUED: 07/10/2014

DISPLAY AS REQUIRED BY LAW

SEQ # C1407100000987

Scott Randolph, 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. Subscribers are subject to regulation of zoning, health and other laws and ordinances. This receipt is valid from October 1 through September 30 of fiscal year. Delinquent penalty is added October 1.

6000 BUSINESS OFFICE 2014 \$30.00 3 EMPLOYEE 1801 CERTIFIED ROOFING CO \$40.00 17 EMPLOYEE

EXPIRES 9/30/2016

5000-1123764

TOTAL TAX \$30.00
PREVIOUSLY PAID \$70.00
TOTAL DUE \$0.00

2473 N JOHN YOUNG PKWY
U - ORLANDO, 32804

PAID: \$70.00 0088-00818954 7/3/2014



MORRISLEY ROBERT BRETT
MORRISLEY ROBERT BRETT
2473 N JOHN YOUNG PKWY
ORLANDO FL 32804

This receipt is official when validated by the Tax Collector.



CERTIFICATE OF LIABILITY INSURANCE

WORR001

OP ID: KM

DATE (MM/DD/YYYY)

04/06/15

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 J.W. Edens & Company Commercial Ins of Brevard, Inc 325 Fifth Avenue, Suite 108 Indialantic, FL 32903 Scott M. Steele, AAI	321-725-7000 321-725-7856	CONTACT NAME: PHONE (A/C, No, Ext): E-MAIL ADDRESS:	FAX (A/C, No):
	INSURER(S) AFFORDING COVERAGE		NAIC #
INSURED Wormley Roofing, Inc. 2473 N John Young Pkwy Orlando, FL 32804	INSURER A : Axis Surplus Ins. Co.		26620
	INSURER B :		
	INSURER C :		
	INSURER D :		
	INSURER E :		
	INSURER F :		

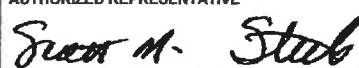
COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <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			FLGLN00767AX	08/17/14	08/17/15	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 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
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER**CANCELLATION**

CITYBE5 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 
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