



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: PLUMBING: for new SFR – 2 toilet, 1 bathtub, 1 disposal, 1 washing machine, 1 water heater, 1 sewer, 3 lav sinks, 1 shower, 1 sink, 1 dishwasher
Comments: NONE
Project Information
 Address: 7311 Matchett Rd, Belle Isle, FL 32809
 Parcel ID: 25-23-29-8485-00-020
 Property Owner: Hewitt, Harry
 Phone Number: 321 436 7338

 Company Name: Spegal Plumbing LLC
 Contractor Name: Spegal, Brian
 License Number: CFC1428683
 Address: 174 Semoran Place, Apopka, FL 32703
 Phone Number: 321 256 1234

Permit Number: 2015-04-005
Date of Application: 04/02/2015
Date Permit Issued: 04/06/2015

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	
Cert of Occ	\$
Demo	\$
Building	\$
Fence	\$
Driveway	\$
Shed	\$
Window(s)	\$
Door(s)	\$
PrePower	\$
Electrical	\$
Temp Pole	\$
Plumbing	\$226.50
Mechanical	\$
Gas	\$
Roofing	\$
Boat Dock	\$
Screen Encl	\$
Swimming Pool	\$
Sign	\$
SURCHARGE FEES	
Surcharge Fee	\$3.40
Surcharge Fee	\$3.40
TOTAL FEES \$233.30	
Date Paid	4-6-15
CC or Check #	AMEX 01017
Amount Paid	233.30
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

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2015-04-005
Property Owner	Hewitt, Harry
Address	7311 Matchett Rd
Nature of Improvement	Plumbing for new SFIR
Received Application	4-2-15
Sent for Stormwater Review	/
Stormwater Approved	/
Sent for Zoning Review	/
Zoning Approved	/
Applied for Variance	
Variance Approved	
Sent to BO for Review	4-2-15
Building Official Approved	4-3-15 <i>AL</i>
Comments	
1.	Susan 4-2-15 all checked on file ✓ review WO # 49122
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



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RECEIVED
 4-2-15

APPLICATION FOR PLUMBING 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: 4/2/15 PERMIT NUMBER 2015-04-005

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

Project Address 7311 Matchett Rd, Belle Isle FL x 32809 32812
 Property Owner Hewitt, Harry Phone 321-436-7338
 Property Owner's Mailing Address 6021 S. Orange Ave. City Belle Isle
 State FL Zip Code 32809 Parcel Id Number: 25-23-29-8485-00-020

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 Alteration Addition Repair Type of System: Sewer Septic Re-pipe

YOU MAY BE REQUIRED TO PROVIDE SEPTIC SYSTEM VERIFICATION FOR NEW / ALTERED / ADDITION
 to Septic System – ORANGE COUNTY DOCUMENT 64E-6

VALUATION OF JOB (labor & materials) \$ 6000

FIXTURES	Quantity
Water Closets (Toilet)	2
Bathtubs	1
Urinals	
Disposals	1
Washing Machines	1
Water Heaters	1
Sewer	1
Catch Basins/Sumps	
Service Sink	
Lavatory (Bathroom Sink)	3
Showers	1
Sinks	1

FIXTURES	Quantity
Dishwashers	1
Laundry Tubs	
Floor Drains	
Grease Traps	
Trailer Connections	
Spa	
Solar	
Pool Piping	
*Irrigation: (# Systems / # Heads)	
Water Softener	
Re-pipe	
Miscellaneous (Specify)	

**Per FBC, Sec. 60B, a Backflow Preventer must be installed & tested; the report must be posted with permit for Final Inspection.*

Building Official: [Signature] Date 4-3-15
 Verified Contractor's Licenses & Insurance are on file [Signature] Date 4-2-15

Permit Fee 151.7
 Review Fee 75.50
 3% State Surcharge (\$4.00 minimum) 6.80
 Total Permit Fee 233.30

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 # CFC1428683
 LICENSE HOLDER NAME Brian Spegal COMPANY NAME Spegal Plumbing, LLC
 Street Address 174 Semoran Commerce Pl. unit 122
 City Apopka State FL Zip Code 32703 Phone Number 321-256-1234
 Email Address brian@spegalplumbing.com

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

Building Permit Number 2015-02-009