



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 TOWN OF WINDERMERE, FLORIDA.

Scope of Work: PLUMBING: 4 toilets, 3 bathtubs, disposal, washing machine, water heater, 6 lavatories, 2 showers, sink, dishwasher & laundry tub

Comments: None

Project Information

Address: 4323 Isle Vista Avenue, Belle Isle, FL 32812
Parcel ID: 20-23-30-0668-00-840
Property Owner: Surrey Homes
Phone Number: None

Company Name: KLM Plumbing Inc.
Contractor Name: Marsh, Kenneth Jr
License Number: CFC057148
Address: 4855 W. Amelia Avenue, Orlando, FL 32808
Phone Number: 407-299-3151

Permit Number: 2014-11-016
Date of Application: 11/11/2013
Date Permit Issued: 11/13/2013

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 \$

UNIVERSAL ENG - BUILDING FEES

Demo \$
Building \$
Fence \$
Driveway \$
Shed \$
Window(s) \$
Door(s) \$
PrePower \$
Electrical Fee \$
Temp Pole \$
Plumbing Fee \$298.50
Mechanical Fee \$
Gas Fee \$
Roofing \$
Boat Dock \$
Screen Encl \$
Swimming Pool \$

SURCHARGE FEES

Surcharge Fee \$4.48
Surcharge Fee \$4.48

TOTAL FEES \$307.46

Date Paid 11-14-13
CC or Check # 52950
Amount Paid 307.46

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

1st BUILDING

Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____ (Footing/Foundation)

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)

1st ROOFING

1ST ROOFING Deck Nailing/Dry-in/Flashing _____

2nd ROOFING Covering In-Progress _____

3rd ROOFING Covering Final _____

1st PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST (Underground) 2nd (Sewer)

3rd (Rough-In/Tub-Set) 4th (Final)

CHECK APPROPRIATE BOX

1st 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/ff094edc4-832d-44bd-9809-ecf32f9e2e66>
login ID = cobi@universalengineering.com password = universal13



City of Belle Isle

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

Received
11-11-13

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: 11/11/13 PERMIT NUMBER 2014-11-016
The undersigned hereby applies for a permit to make plumbing installations as indicated below. PLEASE PRINT
Project Address 4323 Isle Vista Ave Belle Isle FL 32809 X 32812
Property Owner Surrey Homes Phone _____
Property Owner's Mailing Address 1133 LOUISIANA AVE City Winter Park
State FL Zip Code 32789 Parcel Id Number: 2023300668-00-840

To obtain this information, please visit <http://www.ocraftl.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 RESIDENTIAL SYSTEM VERIFICATION - OC DOCUMENT 64E-6 FOR NEW / ALTERED / ADDITION to Septic System

VALUATION OF JOB (labor & materials) \$ 7000

FIXTURES	NUMBER	FEE	FIXTURES	NUMBER	FEE
Water Closets (Toilet)	4		Dishwashers	1	
Bathubs	3		Laundry Tubs	1	
Urinals			Floor Drains		
Disposals	1		Grease Traps		
Washing Machines	1		Trailer Connections		
Water Heaters	1		Spa		
Sewer			Solar		
Catch Basins/Sumps			Pool Piping		
Service Sink			*Irrigation: (# Systems / # Heads)		
Lavatory (Bathroom Sink)	6		Water Softener		
Showers	2		Re-pipe		
Sinks	1		Miscellaneous (Specify)		

73° base
126° fixtures
99.50 50l.

*Backflow Preventer must be tested after installation, report must be posted with permit for Final Inspection.
Total Fees 299.50
3% State Surcharge 89.6
Permit/Review Fee Grand Total 307.40
Building Official: M. Busby Date 11-13-2013

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 # CF6057148
LICENSE HOLDER NAME Kenneth Williams COMPANY NAME KLM Plumbing Inc
Street Address 4855 West Amelia Ln
City Orlando State FL Zip Code 32808 Phone Number 407-299-351

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 2014-10-015

RETAIN A COPY FOR OFFICE USE - Updated: 12/2012 FORM #PLU011

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2014-11-016
Property Owner	Surrey Homes
Address	4323 Isle Vista One
Nature of Improvement	Plumbing
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	11-12-13
Building Official Approved	11-13-2013
Comments	
1.	11-13-13 sq emailed Tim + John
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

11/12/2013

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		CONTACT NAME: Certificate Department	
SHILE INSURANCE GROUP, INC. P. O. BOX 160398 ALTAMONTE SPRINGS FL 32716		PHONE LA.C. No. EXT: 407-559-5490	FAX LA.C. No.: 407-359-3560
		E-MAIL ADDRESS: Certificates@shile.com	
INSURED		INSURER(S) AFFORDING COVERAGE	
KLMPL-1		INSURER A: Old Dominion Insurance Company	
KLM Plumbing, Inc. 4855 W. Amelia Ave. Orlando FL 32808		INSURER B: Westfield Insurance Group	
		INSURER C: FEVA Mutual Ins Co	
		INSURER D:	
		INSURER E:	
		INSURER F:	
		NAIC #	
		40231	
		24112	
		10385	

COVERAGES

CERTIFICATE NUMBER: 1199811199

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	ACQUISITION INSR. WORD	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXP. DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY X COMMERCIAL GENERAL LIABILITY CLAIMS MADE X OCCUR	MPG2141E		11/5/2013	11/5/2014	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (EX. OCCURRENCE) \$1,000,000 MED EXP (any one person) \$500,000 PERSONAL & ADV INJURY \$10,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP AGG \$2,000,000
B	GENL AGGREGATE LIMIT AUTUMN PEN POLICY X PRO. JURY LOC AUTOMOBILE LIABILITY X ANY AUTO ALLOWED AUTOS X SCHEDULED AUTOS (rented) X HIRED AUTOS	CWP0699079		8/1/2013	8/1/2014	COMBINED SINGLE LIMIT (for accident) \$1,000,000 BODILY INJURY (per person) \$ BODILY INJURY (per accident) \$ PROPERTY DAMAGE (per accident) \$ PIP \$10,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/EMERIT EXCLUSIVITY (Mandatory in NH) DESCRIPTION OF OPERATIONS below	WCR040-0018298-2013A		11/1/2013	11/1/2014	WC STATE TORT LIMITS X CR EL EACH ACCIDENT \$1,000,000 EL EMP ASB 1 A1 EMPLOYEE \$1,000,000 EL DIST ASB 4 A1 EMPLOYEE \$1,000,000
A	Contractors Equipment/Leased & Rented Equipment	MPG2141C		11/5/2013	11/5/2014	Leased & Rented Equip \$50,000 Theft & Burg \$1,000

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

CERTIFICATE HOLDER

City of Belle Isle
Building Department
1600 Nela Avenue
Belle Isle FL 32809

CANCELLATION

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

ACORD 25 (2010/05)

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STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
**CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE**
(850) 487-1395
FL 32399-0783
**MARSH, KENNETH LEE JR
KLM PLUMBING INC
4855 W AMELIA AVE
ORLANDO**
FL 32808

**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION**
AC# 6327119
CFC057148 08/31/12 128045282
**CERTIFIED PLUMBING CONTRACTOR
MARSH, KENNETH LEE JR
KLM PLUMBING INC**
**IS CERTIFIED under the provisions of Ch.489 FS
Expiration date: AUG 31, 2014 L12083103011**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbecue restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

DETACH HERE

THIS DOCUMENT HAS A COLORED BACKGROUND. MICROPRINTING. "LINEHARK" PATENTED PAPER

AC# 6327119
STATE OF FLORIDA
**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD**
SEQ# L12083103011

DATE	BATCH NUMBER	LICENSE NBR
08/31/2012	128045282	CFC057148

The PLUMBING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2014

**MARSH, KENNETH LEE JR
KLM PLUMBING INC
4855 W AMELIA AVE
ORLANDO**
FL 32808
**RICK SCOTT
GOVERNOR**
**KEN LAWSON
SECRETARY**
DISPLAY AS REQUIRED BY LAW

ORIGINAL 2012 \$30.00 EXPIRES 9/30/2013 1803 CONTR-PLUMBING 1 EMPLOYEE 1803-0013554

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

MARSH KENNETH L

K L M PLUMBING INC
 MARSH KENNETH L
 4855 W AMELIA AVE
 ORLANDO FL 32808-7726

4855 W AMELIA AV
 U - ORLANDO, 32808
 PAID: \$30.00 99-533170 7/3/2012

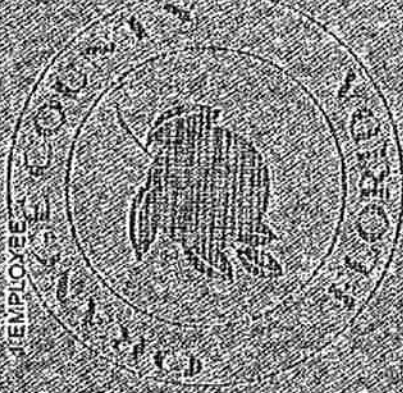
Earl K. Wood, Tax Collector Local Business Tax Receipt **Orange County, Florida**

This local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

ORIGINAL 2012 \$30.00 EXPIRES 9/30/2013 1803 CONTR-PLUMBING 1 EMPLOYEE 1803-0013554

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

4855 W AMELIA AV
 U - ORLANDO 32808
 PAID: \$30.00 99-533170 7/3/2012



MARSH KENNETH L
 K L M PLUMBING INC
 MARSH KENNETH L
 4855 W AMELIA AVE
 ORLANDO, FL 32808-7726

This receipt is official when validated by the Tax Collector.