



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universallengengineering.com](http://www.universallengengineering.com)

## PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3: 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: BUILDING: replace seven size for size windows

Comments: None

### Project Information

Address: 6633 St. Partin Place, Belle Isle, FL 32812  
Parcel ID: 20-23-30-1678-00-660  
Property Owner: Lynn, Ronald & Constance  
Phone Number: 321-663-5389  
\*\*\*\*\*  
Company Name: FASWD, LLC  
Contractor Name: Varga, Scott  
License Number: CGC1518212  
Address: 3020 Mercy Drive, Orlando, FL 32808  
Phone Number: 407-489-8683

Permit Number: 2016-04-001

Date of Application: 04/01/2016

Date Permit Issued: 04/01/2016

**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 \$  
Windows \$61.50  
Door(s) \$  
PrePower \$  
Electrical \$  
Temp Pole \$  
Plumbing \$  
Mechanical \$  
Gas \$  
Roofing \$  
Boat Dock \$  
Screen Encl \$  
Swimming Pool \$  
Sign \$

#### SURCHARGE FEES

Surcharge Fee \$2.00  
Surcharge Fee \$2.00

**TOTAL FEES \$65.50**

Date Paid

4/4/16

CC or Check # VISA 5550

Amount Paid

\$ 65.50

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 (F-S 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

1<sup>st</sup>

Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? \_\_\_\_\_

2<sup>nd</sup>

(Footing/Foundation)

\_\_\_\_\_ (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)

ROOFING

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 \_\_\_\_\_

PLUMBING (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)

#### CHECK APPROPRIATE BOX

GAS \_\_\_ Natural \_\_\_ LP  MECHANICAL  ELECTRICAL  LOW VOLTAGE

1<sup>st</sup>

\_\_\_\_\_ (Rough-In) 2<sup>nd</sup> \_\_\_\_\_ (Final)

Inspection requests are to be emailed to [BidScheduling@UniversalEngineering.com](mailto:BidScheduling@UniversalEngineering.com); a confirmation email will be sent back to you upon scheduling. Next-Day Inspection requests must be made by 4pm. 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://universallengengineering.sharefile.com>  
login ID = cobi@universallengengineering.com password = universal13



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811 MAR 31 2016  
Tel 407-581-8161 \* Fax 407-581-0313 \* www.universaleengineering.com



Building Permit (Land Use) Application

DATE: 3-25-16

PROJECT ADDRESS 6633 ST PARTIN PLACE

PROPERTY OWNER RONALD LYNN

PHONE 321-663-5388

PERMIT # 20-23-30-1678-00-666  
Belle Isle, FL 32812  
VALUE OF WORK (labor & material) \$ 472800

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

REPLACE 7 WINDOWS SIZE FOR SIZE

- SINGLE FAMILY RESIDENCE: 8.5"x11" Plat Survey, Plot Plan of Home and Floor Plans of New Construction/Revision Required
- BOAT DOCK: DEP Clearance Required with Application (Call 407-897-4100); please provide a copy of their report
- SEPTIC SYSTEM (RESIDENTIAL): - Provide verification of OC Health Dept approval for on-site septic tank system, per FAC Chap. 64E-6
- Homeowners will be required to have a contractor on record for homes that are rented and/or not homestead

Please Complete for the City of Belle Isle Zoning Review: Parcel Id Number: 20-23-30-1678-00-666

To obtain this information, please visit <http://www.ocpafl.org/Searches/ParcelSearch.aspx>

SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCRoACH INTO ANY EASEMENT OR REQUIRED SETBACK. Survey specific foundation plan required to show compliance with zoning setbacks. Note: this Zoning Approval MAY or MAY NOT be in conflict with your Deed Restrictions. For New Single Family Residence, a Traffic Impact Fee and School Impact will be assessed.

PLANNING & ZONING APPROVAL: \_\_\_\_\_ DATE \_\_\_\_\_

PLEASE COMPLETE for Building Review (min. of 2 sets of signed/sealed plans required)

CONSTRUCTION TYPE \_\_\_\_\_ Res: \_\_\_\_\_ Single Fam \_\_\_\_\_ Multi Fam \_\_\_\_\_  
 OCCUPANCY GROUP \_\_\_\_\_ # UNITS \_\_\_\_\_ # STORIES \_\_\_\_\_ TOTAL SQ.FT. \_\_\_\_\_  
 MAX. FLOOR LOAD \_\_\_\_\_ MAX. OCCUPANCY \_\_\_\_\_  
 MIN. FLOOD ELEV. \_\_\_\_\_ LOW FLOOR ELEV. \_\_\_\_\_  
 WATER SERVICE \_\_\_\_\_ WELL \_\_\_\_\_ SEPTIC \_\_\_\_\_

BUILDING REVIEWER SC DATE 4-1-16 DATE \_\_\_\_\_ DATE \_\_\_\_\_  
 VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE

Per FSS 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."

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.

SEPARATE PERMITS ARE REQUIRED FOR ROOFING, ELECTRICAL, PLUMBING, GAS, MECHANICAL, SIGNS, POOLS, ENCLOSURES, ETC.

Page 1 of 2  
 54 x 4  
 15T 11C  
 25  
 16  
 41-1-16  
 20.50  
 61.50

Wind Exposure Category: B C D

SPRINKLERS REQ'D	Y	N
IF Required - SUBMIT COPY OF PLANS FOR FIRE REVIEW		
ZONING	Y	N
CERT OF OCC	Y	N
TRAFFIC	Y	N
SCHOOL	Y	N
FIRE	Y	N
SWIMMING POOL	Y	N
SCREEN ENCLOSURE	Y	N
ROOFING	Y	N
BOAT DOCK	Y	N
BUILDING	Y	N
WINDOW(S)	Y	N
DOOR(S)	Y	N
FENCE	Y	N
SHED	Y	N
DRIVEWAY	Y	N
OTHER	Y	N
3% FL SURCHARGE		4.00
TOTAL		65.50

Date: Sent \_\_\_\_\_ RCD \_\_\_\_\_

By Owner Form NA  
 Notice of Commencement Y  
 Power of Attorney Y  
 Contractor Packet Included? Y

OTHER PERMITS REQUIRED:  
 ELECTRICAL Y NA  
 PREPOWER Y NA  
 MECHANICAL Y NA  
 PLUMBING Y NA  
 ROOFING Y NA  
 GAS Y NA



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)

**Building Permit (Land Use) Application**  
 To be completed as required by State Statute Section 713 and other applicable sections.

PERMIT # SC16-09-001

Owner's Name Ronald G. Lynn  
 Owner's Address 6633 St Partin Pl Belle Isle, FL 32812-3512

Contractor Name	<u>Scott Varga</u>	Company Name	<u>FASWD, LLC</u>
License #	<u>CGC1518212</u>	Company Address	<u>3020 Mercy Drive</u>
Contact Phone/Cell	<u>Jeanne Young / 407-489-8683</u>	City, State, ZIP	<u>Orlando, FL 32808</u>
Contact Email	<u>Jeanne.mail@gmail.com</u>	Contact Fax	

**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 if job is \$2500(+) or if A/C Replacement \$7500(+) 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.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Division of Building Safety Regulations ([www.floridabuilding.org](http://www.floridabuilding.org)) and City Ordinances ([www.municode.com](http://www.municode.com)) regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable City and/or State of Florida codes and/or ordinances. Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all other construction including ROOFING, ELECTRICAL, MECHANICAL, PLUMBING, GAS, SIGNS, POOLS, SCREEN ENCLOSURES, ETC.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

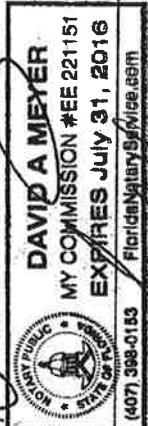
Owner Signature Ronald G Lynn  
 The foregoing instrument was acknowledged before me this 2, 2016

by Ronald Lynn who is personally known to me

and who produced FDI

as identification and who did not take an oath.

Notary as to Owner  
 State of Florida  
 County of Orange



Contractor Signature [Signature]  
 COMPANY NAME FASWD, LLC

The foregoing instrument was acknowledged before me this 2, 2016  
 by Scott A. Varga who is personally known to me

and who produced

as identification and who did not take an oath.

Notary as to Owner  
 State of Florida  
 County of Orange



**Impervious Surface Ratio Worksheet**  
 Development Zoned A-1, A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per City Code, Section 50-74: Impervious Surface Ratio

1. Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).  
 Total Lot Area \_\_\_\_\_ X 0.35 =  
 Allowable Impervious Area (BASE) \_\_\_\_\_

2. Calculate the "proposed" impervious area on the lot. This includes the sum of all areas that do not allow direct percolation of rainwater.  
 Examples include house, pool, deck, driveway, accessory building, etc

- House \_\_\_\_\_
- Driveway \_\_\_\_\_
- Walkway \_\_\_\_\_
- Accessory Buildings \_\_\_\_\_
- Pool & Spa \_\_\_\_\_
- Deck & Patio \_\_\_\_\_
- Other \_\_\_\_\_

Actual Impervious Area (AIA) \_\_\_\_\_

If AIA is less than BASE, subtract AIA from BASE to determine the amount of impervious area that may be added without providing onsite retention.

If AIA is greater than BASE, then onsite retention **must be provided.**

Assuming 7.5 inches of rainfall based on a 24hr 10 year Rain Event (TP40), the formula is: **(7.5 inches rainfall/12 inches p/foot) X (result from line 4) = cubic feet of storage volume needed**

**RICK SINGH, CFA - ORANGE COUNTY PROPERTY APPRAISER**

- Searches
- Sales Search
- Results
- Property Record Card
- My Favorites

Sign up for e-Notify...

**6633 St Partin PI** < 20-23-30-1678-00-660 >



Physical Street Address  
**6633 St Partin PI**  
 Postal City and Zipcode  
 Orlando, FL 32812  
 Property Use  
 0103 - Single Fam Class III  
 Municipality  
 Belle Isle

Name(s)  
 Lynn Ronald G  
 Lynn Constance L  
 Mailing Address On File  
 6633 Saint Partin PI  
 Belle Isle, FL 32812-3512  
 Incorrect Mailing Address?

- Values, Exemptions and Taxes
- Property Features
- Sales Analysis
- Location Info
- Market Stats
- Update Information

**Property Description**

CONWAY LAKES 8/3 LOT 66

**Total Land Area** 11,350 sqft (+/-) | 0.26 acres (+/-) GIS Calculated Notice

Estimate your taxes.

View Plat

**Land (includes working values)**

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0100 - Single Family	R-1-AA	1 LOT(S)	\$55,000.00	\$55,000	\$0.00	\$55,000

Page 1 of 1 (1 total records)

**Buildings (includes working values)**

Important Information		Structure	
Model Code:	01 - Single Fam Residence	Actual Year Built:	1981
Type Code:	0103 - Single Fam Class III	Bed:	4
Building Value:	\$172,791	Baths:	2.0
Estimated New Cost:	\$226,760	Floors:	1
		Gross Area:	3048 sqft
		Living Area:	2387 sqft
		Exterior Wall:	Concrete Block Stucco
		Interior Wall:	Drywall

Page 1 of 1 (1 total records)

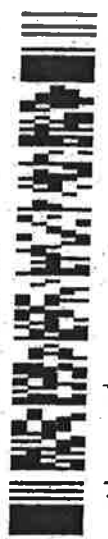
**Extra Features (includes working values)**

Description	Date Built	Units	XFOB Value
EPL2 - Average Fireplace	01/01/1981	1 Unit(s)	\$2,500
SHED - Shed	12/31/2005	1 Unit(s)	\$500
PT2 - Patio 2	12/31/2005	1 Unit(s)	\$2,000

Page 1 of 1 (3 total records)

This Data Printed on 03/02/2016 and System Data Last Refreshed on 03/01/2016

### NOTICE OF COMMENCEMENT



State of Florida  
County of ORANGE  
Parcel ID: 20-23-30-1078-00-000 Permit #: 2016-04-001

The undersigned hereby gives notice that improvement will be made to certain real property. In accordance with Chapter 713, Florida Statutes, the following information is provided in the Notice of Commencement:

1. Legal description of Property (and street address if available): Lot 606 60633 St. Partin Pl. Conway Lakes 8/3
2. General description of improvement: Window replacement
3. a. Owner name/address: RON LYNN 60633 St. Partin Pl. Orlando, FL 32812  
b. Interest in property: \_\_\_\_\_  
c. Name and address of fee simple title holder (if other than owner): Same

4. Contractor Name and Address: FASWD, LLC

3020 MERCY DRIVE, ORLANDO, FL 32808  
Phone: 407-770-0184 Fax: 407-770-0187

5. Surety - Name and Address: N/A  
Amount of bond: \$ \_\_\_\_\_

6. Lender - Name and Address: N/A

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a) 7, Florida Statutes: \_\_\_\_\_

8. In addition to him/herself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes [Provide Name/Mailing Address]: \_\_\_\_\_

9. NOC expiration date (one full year from the date of recording unless different date is specified): \_\_\_\_\_

**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.**

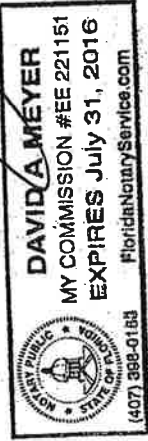
Verification pursuant to Section 92.525, Florida Statutes: Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief.

X Ronald G. Ly  
Signature of Owner/A Natural Person (or Owner's Authorized Officer/Director/Partner/Manager)

The foregoing instrument was acknowledged before me this 27 day of FEB, 2016  
by Ronald Ly (print name of person) as owner (type of authority) for \_\_\_\_\_ (name of party on behalf of whom instrument was executed).

[Signature]  
Notary Public

Personally Known \_\_\_\_\_ OR - Produced Identification XFDL



Seal of Florida, County of Orange  
I hereby certify that this is a true copy of the document as recorded in the Official Records.  
MATTHIA O. HAYNIE, COUNTY COMPTROLLER

[Signature]  
Notary Comptroller

55993 PFI

**LIMITED POWER OF ATTORNEY**

Date: 3/28/16

I hereby name and appoint Jean Young to be my lawful attorney in fact to act for me and apply for a Building permit for work to be performed at the location described as:

6633 St Partin Pl  
(Address of Job)  
Belle Isle, Ronald G. Lynn  
(Owner of Property)

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

[Signature]  
(Signature of Certified Contractor)  
Scott A Varga (CGC1518212)  
(Printed Name of Contractor and License Number)

STATE OF FLORIDA  
COUNTY OF Orange

The foregoing instrument was acknowledged before me this 28 day of March, 20 16, by Scott A. Varga, who is  personally known to me or has

produced \_\_\_\_\_ (type of identification) as identification.

[Signature]  
Signature of Notary Public, State of Florida

Dara Bargfrede  
Print/Type/Stamp Name of Notary Public





**City of Belle Isle**  
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
 Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universaleengineering.com](http://www.universaleengineering.com)

## Product Approval Form

DATE: 3-25-16

PERMIT # 2016-04-001

PROJECT ADDRESS: 6633 ST PARTIN PLACE

Belle Isle, FL  32809  32812

As required by Florida Statue 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](http://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:

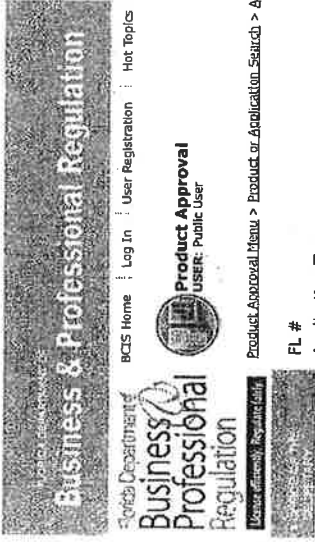
1. This Product Approval Cover Sheet
2. Internet screen from [FloridaBuilding.org](http://FloridaBuilding.org) showing PA#, approval and code edition stamped
3. Manufacturer's *installation* details from [FloridaBuilding.org](http://FloridaBuilding.org) and requirements for each product stamped

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
<b>EXTERIOR DOORS</b>							
Swinging				Sliding	<b>WALL PANELS</b>		
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
<b>WINDOWS</b>							
Single/Dbi Hung	SIMONTON	9800	5167.15	Asphalt Shingles	<b>ROOFING PRODUCTS</b>		
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed	SIMONTON	9800	5177.3	Single Ply Roof			
Mullion				Other			
Skylights							
Other							
<b>STRUCTURAL COMPONENTS</b>							
Wood Connectors					<b>OTHER</b>		
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 3-25-16



BCIS Home | Log In | User Registration | Hot Topics | Submit Surcharge | Stats & Fees | Publications | FBC Staff | BCIS Site Map | Links | Search

**Product Approval**  
USER: Public User

Product Approval Menu > Product or Application Search > Application List > Application Detail

FL #  
Application Type  
Code Version  
Application Status

FL5167-R19 ✓  
Editorial Change  
2014

516715

Approved

\*Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.

Comments  
Archived

Product Manufacturer  
Address/Phone/Email

Simonton Windows  
1 Cochran Ave  
Pennsboro, WV 26415  
(614) 532-3596  
luanne.harris@simonton.com

Authorized Signature

Luanne Harris  
luanne.harris@simonton.com

Technical Representative  
Address/Phone/Email

Luanne Harris  
3948 TownsFair Way  
Suite 200  
Columbus, OH 43219  
(614) 532-3596  
luanne.harris@simonton.com

Quality Assurance Representative  
Address/Phone/Email

AAMA  
1827 Walden Office Square  
Suite 550  
Schaumburg, IL 60173  
(847) 303-5664  
webmaster@aamanet.org

Category  
Subcategory

Windows  
Double Hung

Compliance Method

Certification Mark or Listing

Certification Agency  
Validated By

American Architectural Manufacturers Association  
American Architectural Manufacturers Association

Referenced Standard and Year (of Standard)

Standard	Year
AAMA 450	2006
AAMA 450	2010
AAMA/WDMA/CSA 101/I.S.2 A440	2005
AAMA/WDMA/CSA 101/I.S.2 A440	2008

Equivalence of Product Standards  
Certified By

Florida Licensed Professional Engineer or Architect  
FL5167\_R19\_Equiv\_SimEx-PVC-Equivalency.pdf

Product Approval Method

Method 1 Option A

Date Submitted  
Date Validated  
Date Pending FBC Approval  
Date Approved

08/05/2015  
08/10/2015  
08/15/2015



5167.14	43-50 (Three-Step Sill)	<p>EL5167_R19_II_IN0432b_43-40_43-45_DH_2X.pdf                  EL5167_R19_II_IN0434_SS_43-40_43-45_DH_1X.pdf                  Verified By: American Architectural Manufacturers Association                  Created by Independent Third Party:  <b>Evaluation Reports</b>                  EL5167_R19_AE_PER3819_43-40_43-35_DH.pdf                  Created by Independent Third Party: Yes</p>
<p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: N/A                  Other: 52x71 (+/-35 PSF), 36x63 (+/-45 PSF), 44x63 (+/-45 PSF), 32x62 (+/-50 PSF), 36x74 (+/-50 PSF)</p>	<p>6100 Vantage Pointe,ASURE, Prism Gold, Grand Estates Vinyl Double Hung  <b>Certification Agency Certificate</b>                  EL5167_R19_C_CAC_43-50_DH_32x62_R50.pdf                  EL5167_R19_C_CAC_43-50_DH_36x63_R45.pdf                  EL5167_R19_C_CAC_43-50_DH_36x74_R50.pdf                  EL5167_R19_C_CAC_43-50_DH_44x63_R45.pdf                  EL5167_R19_C_CAC_43-50_DH_52x71_R35.pdf  <b>Quality Assurance Contract Expiration Date</b>                  01/25/2016  <b>Installation Instructions</b>                  EL5167_R19_II_IN0432_43-50_DH_2X.pdf                  EL5167_R19_II_IN0569_SS_43-50_DH_1X.pdf                  Verified By: American Architectural Manufacturers Association                  Created by Independent Third Party:  <b>Evaluation Reports</b>                  EL5167_R19_AE_PER3820_43-50_DH.pdf                  Created by Independent Third Party: Yes</p>	
<p>5167.15</p> <p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: N/A                  Other: 48x80 (+/-25 PSF), 53x74 (+/-30 PSF), 48x80 (+/-35 PSF), 52x71 (+/-35 PSF), 53x80 (+/-40 PSF), 36x63 (+/-50 PSF), 36x74 (+/-50 PSF)</p>	<p>75-75, 75-09, 07-75, 07-09, 07-10 and 07-20  <b>Certification Agency Certificate</b>                  EL5167_R19_C_CAC_07-09-10-20_and_08-09-10-20_Waiver.pdf                  EL5167_R19_C_CAC_07-10_07-20_to_07-09_Waiver.pdf                  EL5167_R19_C_CAC_07-75_DH_48x80_R_PG35.pdf                  EL5167_R19_C_CAC_07-75_DH_53x74_R_PG30.pdf                  EL5167_R19_C_CAC_07-75_DH_53x80_R_PG40.pdf                  EL5167_R19_C_CAC_75-75_DH_36x63_R_PG50.pdf                  EL5167_R19_C_CAC_75-75_DH_36x74_LC50.pdf                  EL5167_R19_C_CAC_75-75_DH_48x80_LC_PG25.pdf                  EL5167_R19_C_CAC_75-75_DH_52x71_R_PG35.pdf  <b>Quality Assurance Contract Expiration Date</b>                  06/07/2016  <b>Installation Instructions</b>                  EL5167_R19_II_IN0113_75-75-09_07-75_07-09_07-10_07-20_DH_2X.pdf                  EL5167_R19_II_IN0132_SS_75-75_DH_1X.pdf                  Verified By: American Architectural Manufacturers Association                  Created by Independent Third Party:  <b>Evaluation Reports</b>                  EL5167_R19_AE_PER3821_75-75_DH.pdf                  Created by Independent Third Party: Yes</p>	
<p>5167.16</p> <p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: +50/-50                  Other: 109x74 (+/-50 PSF)</p>	<p>75-75, 75-09, 07-75, 07-09, 07-10 and 07-20                  Reflections 5500, Prism Platinum, Sears 9300, Generations, Impressions 9800, 6500 Vantage Pointe, Amcraft Grand Estates Premier/Premium Plus, Grandura Vinyl Double Hung Mullied Triple  <b>Certification Agency Certificate</b>                  EL5167_R19_C_CAC_07-09-10-20_and_08-09-10-20_Waiver.pdf                  EL5167_R19_C_CAC_75-75_DH_Triple_109x74_R_PG50.pdf                  09/13/2016  <b>Installation Instructions</b>                  EL5167_R19_II_IN0060_75-75_DH_Triple_or_Twin_2X.pdf                  Verified By: American Architectural Manufacturers Association                  Created by Independent Third Party:  <b>Evaluation Reports</b>                  Created by Independent Third Party:</p>	
5167.17	75-75, 75-09, 07-75, 07-09, 07-10 and 07-20	<p>Reflections 5500, Prism Platinum, Sears 9300, Generations, Impressions 9800, THD 6500 Vantage Pointe, Amcraft Grand Estates Premier/Premium Plus, Grandura Vinyl Double Hung Mullied Twin with Transom  <b>Certification Agency Certificate</b>                  EL5167_R19_C_CAC_75-75_DH_Twin_w_Transom_73x111_R_PG50.pdf                  EL5167_R19_C_CAC_ACP-05_S1M_75-75_07-09_07-75_07-09_75-10_75-20_DH_frame.pdf</p>

Simonon Double Hung Series 75-75 / 75-09 / 07-75 /

MODEL DESIGNATION:

See Size Chart

MAXIMUM OVERALL NOMINAL SIZE:

See Size Chart

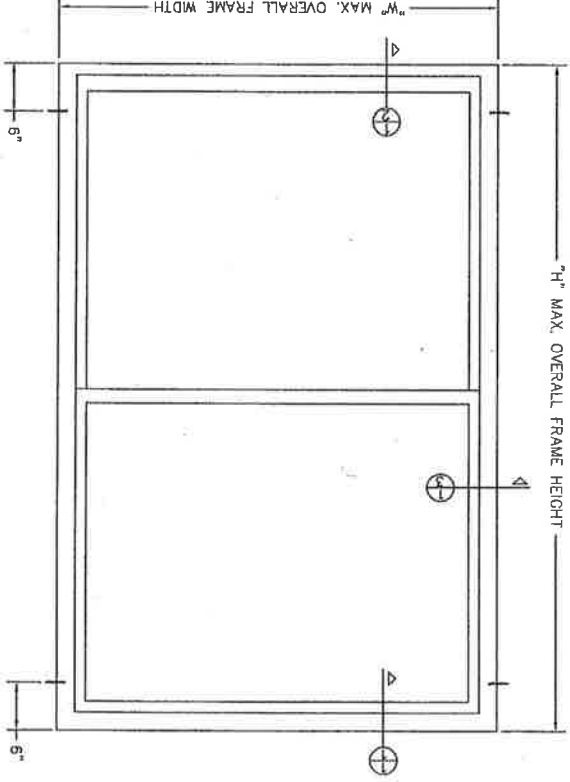
DESIGN PRESSURE RATING:

See Size Chart

USABLE CONFIGURATIONS:

GENERAL DESCRIPTION:

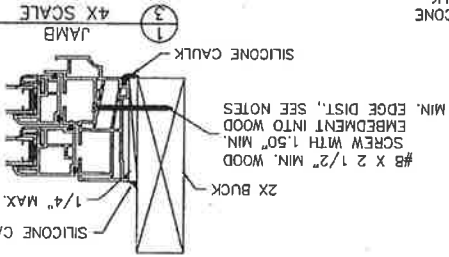
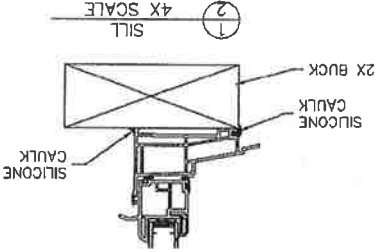
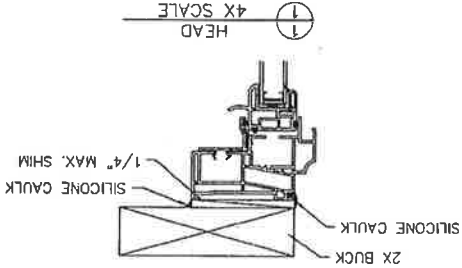
The head, sill, and side jambs are extruded PVC. The wall thickness through which the anchor screw penetrates is a minimum of 0.70".



SIZE CHART

OVERALL SIZE	WIDTH "H"	HEIGHT "H"	DP RATING
48"	80"	±25 PSF	*
53"	74"	±30 PSF	*
48"	80"	±35 PSF	*
52"	71"	±35 PSF	*
53"	80"	±40 PSF	*
36"	63"	±50 PSF	*
36"	74"		

\* THIS DP RATING IS VALID ONLY FOR SERIES 07-75 DOUBLE HUNG UNITS



NO P.E. SEAL REQUIRED  
INSTALLATION SUPPORTED  
BY AAMA TEST REPORTS

REV.	REVISIONS:	REMOVED BY:	DATE:
6	ADDED FLASHING NOTE.	T.D.D.	03/03/11
7	UPDATES SIZES PER NEW TESTING.	T.D.D.	06/02/11
8	ADDED NOTE 11 AND UPDATES SIZES PER NEW TESTING.	T.D.D.	01/10/12
9	UPDATES SIZES PER NEW TESTING.	T.D.D.	08/28/13
10	UPDATES SIZES PER NEW TESTING.	T.D.D.	01/29/14
11	ADDED MIN. EDGE DISTANCE NOTES.	G.M.M.	06/16/15
12	ADDED NEW SIZE TO CHART.	L.M.H.	07/10/15

- NOTES:
- This installation has been evaluated for use in locations adhering to the Florida Building Codes and where pressure requirements as determined by ASCE 7 Minimum Design Loads for Buildings and Other Structures do not exceed the design pressure ratings herein, for use outside the H.V.H.Z.
  - All exterior perimeter surfaces of the window must be caulked. Interior caulking is optional unless noted otherwise.
  - Anchor shall be as specified and spaced as shown. Anchor embedment to base material shall be beyond wall dressing or stucco and into wood.
  - The responsibility for selection of Simonon products to meet any applicable local laws, building codes, ordinances, or other safety requirements rests solely with the architect, building owner, or contractor.
  - Shims are optional. Max. shim stack is 1/4".
  - Wood bucks (by others) must be engineered and anchored properly to transfer loads to the structure.
  - When used in areas requiring impact protection, shutters or other external protection.
  - Flashing should be applied using the ASTM E 2112 method appropriate for the opening into which the window is being installed.
  - Installation screws must be at least 3/4" from the edge of the wood.
  - Installation screws may be placed in the interior or exterior track of the jamb. Screws should be flush with the vinyl.
  - This product complies with ASTM E 1300-04.

DISCLOSURE STATEMENT  
This document is the property of Simonon Windows, which retains all proprietary and other rights to its subject matter. This document is provided to the recipient on the expressed condition that it is not to be disseminated, reproduced, copied, part, nor used in conjunction with the design, manufacture or repair of any item other than Simonon Windows without the recipient's right to utilize information contained in this document which is properly obtained from another source.

MATERIAL:	FINISH TREATMENT:
ALLOY & THICKNESS:	FINISH TREATMENT:
VOLUME:	FINISH TREATMENT:
SURFACE AREA:	FINISH TREATMENT:

Dimensional Tolerances  
Unless Otherwise Specified

Decimals  
Angles

X ± 0.3  
XX ± 0.1  
XXX ± 0.005

0" 30 min.

REV.	DESCRIPTION	DATE
8	ADDED FLASHING NOTE.	03/03/11
9	UPDATES SIZES PER NEW TESTING.	06/02/11
10	UPDATES SIZES PER NEW TESTING.	01/10/12
11	UPDATES SIZES PER NEW TESTING.	08/28/13
12	UPDATES SIZES PER NEW TESTING.	01/29/14
13	UPDATES SIZES PER NEW TESTING.	08/28/13
14	UPDATES SIZES PER NEW TESTING.	01/29/14
15	ADDED MIN. EDGE DISTANCE NOTES.	06/16/15
16	ADDED NEW SIZE TO CHART.	07/10/15

WOOD FRAME  
9800, 5500

FLORIDA DEPARTMENT OF  
**Business & Professional Regulation**  
 Florida Department of  
**Business & Professional Regulation**  
 License Efficiently. Regulate Fairly.  
 OFFICE OF THE SECRETARY

BCIS Home | Log In | User Registration | Hot Topics | Submit Surcharge | Stats & Facts | Publications | FBC Staff | BCIS Site Map | Links | Search

**Product Approval**  
 USER: Public User

Product Approval Menu > Product or Application Search > Application List > Application Detail

FL # **FL5177-R16** **5177.3**  
 Application Type  
 Code Version **2014** ✓  
 Application Status **Approved**

\*Approved by DBPR. Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.

Comments  
 Archived

Product Manufacturer  
 Address/Phone/Email

Simonton Windows  
 1 Cochrane Ave  
 Pennsboro, WV 26415  
 (614) 532-3596  
 luanne.harris@simonton.com

Authorized Signature

Luanne Harris  
 luanne.harris@simonton.com

Technical Representative  
 Address/Phone/Email

Luanne Harris  
 1 Cochrane Ave  
 Pennsboro, WV 26415  
 (614) 532-3596  
 luanne.harris@simonton.com

Quality Assurance Representative  
 Address/Phone/Email

AAMA  
 1827 Walden Office Square  
 Suite 550  
 Schaumburg, IL 60173  
 (847) 303-5664  
 webmaster@aamanet.org

Category  
 Subcategory

Windows **9800/5500**  
 Fixed

Compliance Method

Certification Mark or Listing

Certification Agency  
 Validated By

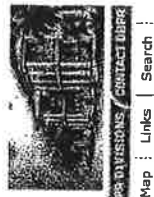
American Architectural Manufacturers Association  
 American Architectural Manufacturers Association

Referenced Standard and Year (of Standard)

Standard	Year
AAMA 450	2010
AAMA/WDMA/CSA 101/1.1 S 2/A440	2005
AAMA/WDMA/CSA 101/1.1 S 2/A440	2008
ASTM E 1300	2004

Equivalence of Product Standards  
 Certified By

Florida Licensed Professional Engineer or Architect  
 FL5177\_R16\_Equiv\_SimEx-PVC-Equivalency.pdf



ABOUT DBPR | CONTACT DBPR

Product Approval Method

Method 1, Option A

Date Submitted

06/22/2015

Date Validated

06/30/2015

Date Pending FBC Approval

07/05/2015

Date Approved

Summary of Products

FL #	Model, Number or Name	Description
5177.1	07-09, 07-10, 07-20 (Retrofit Installation)	Reflections 5500, Prism Platinum, Sears 9300, Impressions 9800, Generations, Grand Estates Premier, Grand Estates Premium Plus, Grandura Vinyl Fixed Window  <b>Certification Agency Certificate</b> FL5177_R16_C_CAC_07-09_PW_37x84_R_PG50_(ext.1).pdf FL5177_R16_C_CAC_07-09_PW_74x63_LC55.pdf FL5177_R16_C_CAC_07-09-10-20_and_08-09-10-20_Waiver.pdf <b>Quality Assurance Contract Expiration Date</b> 06/23/2016 <b>Installation Instructions</b> FL5177_R16_II_IN0108_07-09_07-10_07-20_PW_2X.pdf FL5177_R16_II_IN0111-R6_07-09_07-10_07-20_PW_1X.pdf Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> FL5177_R16_AE_EvalReport-IN0111-R6.pdf Created by Independent Third Party: Yes
	<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: 74x63 (+/-55 PSF), 37x84 (+/-50 PSF)	
5177.2	07-20 (Nailing Fin Installation)	Reflections 5500, Prism Platinum, Sears 9300, Impressions 9800, Generations, Grand Estates Premier, Grand Estates Premium Plus, Grandura Vinyl Fixed Window  <b>Certification Agency Certificate</b> FL5177_R16_C_CAC_07-20_PW_96x72_R_PG45_(ext.1).pdf FL5177_R16_C_CAC_07-20_PW_37x84_R50.pdf FL5177_R16_C_CAC_07-20_PW_74x63_R_PG60_(ext.1).pdf <b>Quality Assurance Contract Expiration Date</b> 11/01/2016 <b>Installation Instructions</b> FL5177_R16_II_IN00514_07-20_PW_2X.pdf Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
	<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: 96x72 (+/-45 PSF), 37x84 (+/-50 PSF), 74x63 (+/-60 PSF)	
5177.3	07-75, 07-09, 07-10, 07-20	Reflections 5500, Prism Platinum, Sears 9300, Impressions 9800, Generations, Grand Estates Premier, Grand Estates Premium Plus, Grandura, THD 6500 Vantage Pointe Vinyl Fixed Window  <b>Certification Agency Certificate</b> FL5177_R16_C_CAC_07-09-10-20_and_08-08-10-20_Waiver.pdf FL5177_R16_C_CAC_07-75_PW_63x63_LC_PG50_(ext.2).pdf FL5177_R16_C_CAC_07-75_PW_72x63_LC_PG60_(ext.2).pdf FL5177_R16_C_CAC_07-75_PW_96x72_LC_PG45_(ext.2).pdf <b>Quality Assurance Contract Expiration Date</b> 11/18/2018 <b>Installation Instructions</b> FL5177_R16_II_IN0222_07-75_07-09_07-10_07-20_PW_2X.pdf Verified By: American Architectural Manufacturers Association Created by Independent Third Party: <b>Evaluation Reports</b> Created by Independent Third Party:
	<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: 96x72 (+/-45 PSF), 63x63 (+/-50 PSF), 72x63 (+/-60 PSF)	
5177.4	08-08	ProFinish Contractor/Master, Grand Estates New Construction Vinyl Fixed (No Hinge) Casement  <b>Certification Agency Certificate</b> FL5177_R16_C_CAC_08-08_PW_(Fin)_74x63_LC_PG55.pdf FL5177_R16_C_CAC_08-08_PW_(Fin)_96x72_LC_PG25.pdf <b>Quality Assurance Contract Expiration Date</b> 04/26/2017 <b>Installation Instructions</b>
	<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: 96x72 (+/-25 PSF), 74x63 (+/-55 PSF)	

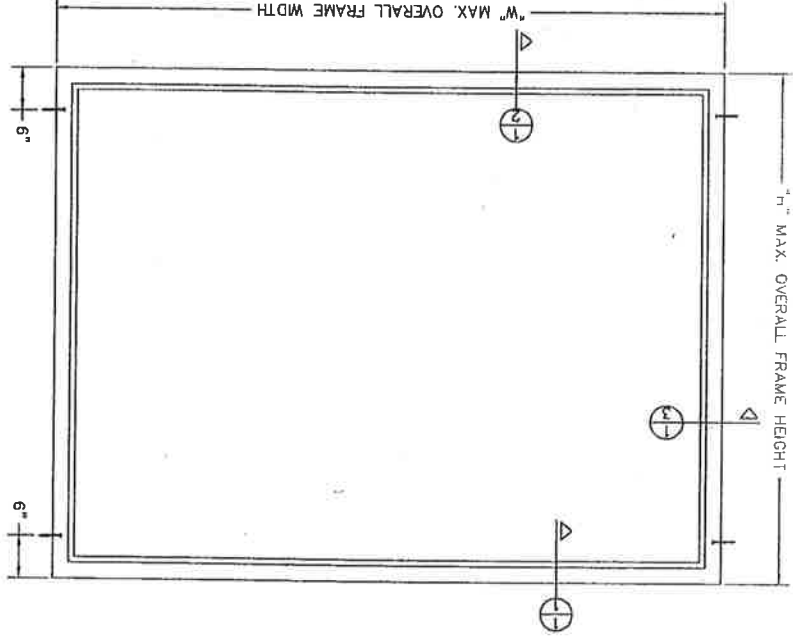
MODEL DESIGNATION: Simonton Series 07-75 / 07-09 / 07-10 / 07-20 Vinyl Fixed Window

MAXIMUM OVERALL NOMINAL SIZE: See Size Chart

DESIGN PRESSURE RATING: See Size Chart

USABLE CONFIGURATIONS: 0

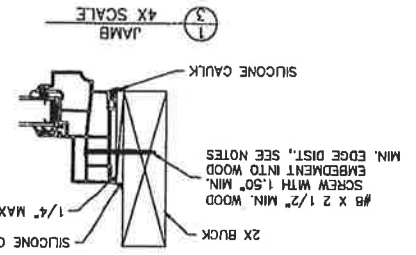
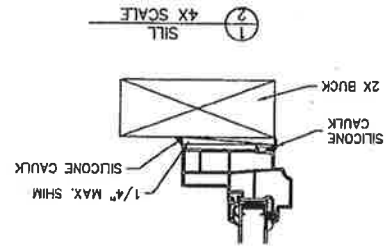
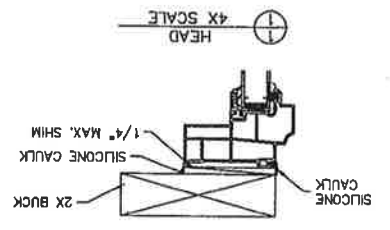
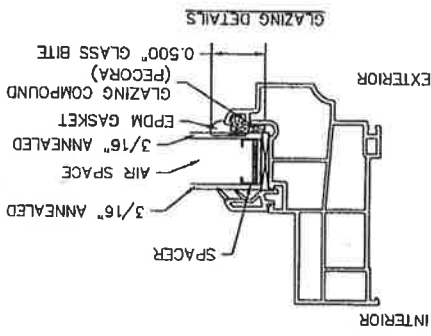
GENERAL DESCRIPTION: The head, sill, and side jambs are extruded PVC. The wall thickness through which the anchor screw penetrates is a minimum of 0.070".



SIZE CHART		
OVERALL SIZE	WIDTH	HEIGHT
DP RATING	"H"	"W"
±45 PSF	72"	63"
±50 PSF	63"	63"
±60 PSF	63"	72"

NO P.E. SEAL REQUIRED  
INSTALLATION SUPPORTED  
BY AAMA TEST REPORTS

REV#	REVISIONS	DATE
1	UPDATED NOTES AND GENERAL DESCRIPTION	T.O.D. 02/21/17
2	ADDED GLAZING DETAILS	T.O.D. 06/06/11
3	ADDED MIN. EDGE DIST. TO NOTES	B.A.S. 06/17/15



- NOTES:
1. This installation has been evaluated for use in locations adhering to the Florida Building Codes and where pressure requirements as determined by ASCE 7 Minimum Design Loads for Buildings and Other Structures do not exceed the design pressure ratings herein, for use outside the H.V.H.Z.
  2. All exterior perimeter surfaces of the window must be caulked. Interior caulking is optional unless noted otherwise.
  3. Anchors shall be as specified and spaced as shown. Anchor embedment to base material shall be beyond flashing or sluccs and into wood.
  4. The responsibility for selection of Simonton products to meet any applicable local laws, building codes, ordinances or other society requirements rests solely with the architect, building owner, or contractor.
  5. Shims are optional. Max. shim stack is 1/4".
  6. Wood bucks (by others) must be engineered and anchored properly to transfer loads to the structure.
  7. When used in areas requiring impact protection this product REQUIRES the use of approved impact resistant shutters or other external protection.
  8. Flashing should be applied using the ASTM E 2112 method appropriate for the opening into which the window is being installed.
  9. Installation screws must be at least 3/4" from the edge of the wood.

**DISCLOSURE STATEMENT**  
This document is the property of Simonton Windows, which retains all proprietary and other rights in its subject matter. This document is provided in the spirit of the open exchange of information and is not to be disclosed, reproduced in whole or in part, nor used in conjunction with the design, manufacture or report of goods for anyone other than Simonton Windows without its consent. This restriction does not limit the recipient's right to utilize information contained in this document which is properly obtained from another source.

MATERIAL:	FINISH TREATMENT:
ALLOY & TEMPER:	PERMITS:
WEIGHT:	VOLUME:

Dimensions Tolerances  
Unless Otherwise Specified

Dacmate  
Angles  
X ± .03  
XX ± .01  
XXX ± .005  
0.30 min.

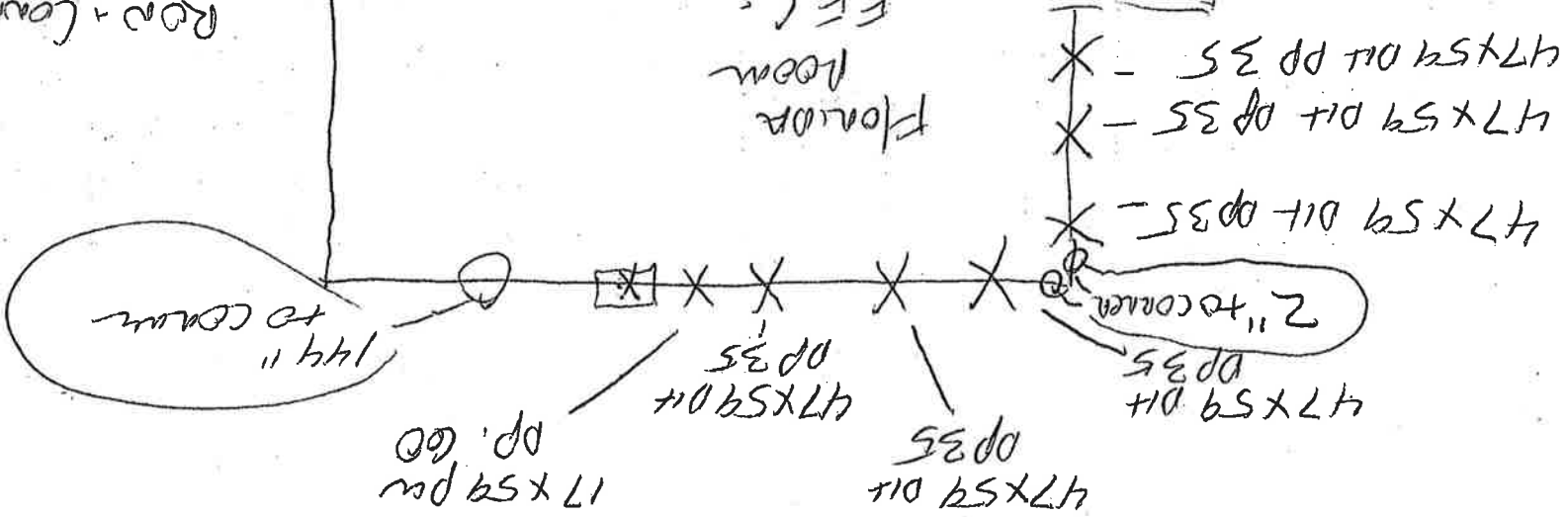
REVISIONS	DATE
3	02/22/17
2	01/25/16
1	07/25/08

DESIGNER: B. LINDZEE  
DRAWN BY: T.O.D.  
CHECKED BY: DATE:  
APPROVED BY: DATE:

WOOD FRAME

# DDP SHEET

55993 P#II  
NEAR ROOF HEIGHT 14'



ROAD - LOUVE LYNN  
6633 ST PARTIAL PL.  
DRAWING # 32812  
321-663-5389

ALREADY COMPLETED -  
PLAN 1

3020 Mercy Drive  
Orlando, FL 32808  
(407)770-0184



WWW.FASWD.COM  
FL Lic. # CGC1518212

7711 Anderson Rd.  
Tampa, FL 33634  
(813)514-9490

SS993 P.H.I.I

Name: RON + CONNIE LYNN Tel# C

I/We, the owner(s) of the premises described below, heretofore referred to as "Buyer", offer to contract with FAS Windows & Doors, heretofore referred to as "FASWD", to furnish all materials and labor for use at the premises located at: Email: Is there a Homeowners Association?  Yes  No

6633 ST PAULI PLACE (Street) (City) (State) (Zip) ORLANDO FL 32817

Congratulations on your purchase of the finest home improvement products in the industry today! Below are the names and contact information of key people involved with your purchase. We believe that communication is the pathway to success! Please contact the people below at any time regarding your purchase and/or installation.

**Customer Care**

You will be contacted by a member of your Installation Team to discuss the following:

1. Confirm receipt of your contract and review specifications.
2. Schedule a time for the tight measure.
3. Identify an approximate installation start or delivery date.
4. Answer any concerns you may have related to the project.

In the event that you have any questions or concerns regarding the window or door installation, please do not hesitate to contact JAMAY your Production Coordinator, or JAMAY your Production Manager, at 407-770-0184 if you feel that we did not deliver on any of our promises to you, please contact us at 407-209-1752

DAEC

Quantity	Manufacturer	Series	Style	Color	Grids	Screens	Obscure/ Temper	Line Notes
1	Swanton	940	OH	WH	N	Full	-	Supa sensor + 366-
3	Swanton	940	POV	WH	N	NA	-	Supa sensor + 366-

\*Please note all grid specifications, finish, hardware, trim and hinge details in line notes.

**Special Instructions:**

LIPON LAM + NATURAL WARRANTY TO MATCH MANUFACTURER  
used cash discount + 10% Anniversary

Please read the following bold type and initial corresponding line.

BHI doors are non-finished. Failure to paint or stain doors in a timely manner may affect your rights under the manufacturer's warranty. Buyer initials: NA

Verbal understandings and agreements with representative shall not be binding. All understandings and agreements must be set forth in writing in this Contract. understand and recognize all terms and conditions on the front and reverse of this contract and am initialing to indicate my complete understanding. Buyer initials: RG

**HURRICANE PROTECTION** I acknowledge that I am the owner of the residence and have contracted with FASWD to replace windows/doors. The home is located in an impact zone and I have existing hurricane protection equipment that complies with local jurisdiction. FASWD will not be liable for any existing protection equipment is deemed inadequate by the local government inspector after my windows are installed. In the event that my hurricane protection equipment fails inspection, I understand that FASWD will apply appropriate materials at a cost to me of \$375.00 per opening. I am initialing to indicate my complete understanding. Buyer initials: NA

NOTE: The warranty provisions as stated on the reverse have been explained and I/We understand them fully. Additional provisions and warranties are stated on the reverse side and are part of this contract. Buyer initials: RG

The TOTAL PRICE for all labor & materials (including any applicable discount) is \$ 4728.  
Terms:  Credit (Subject to the approval of the Credit Department) Credit Approval Code: \_\_\_\_\_

Cash (Final Payment payable to Installer upon completion)

POY DEPOSIT CHECK # 3315

If this is a credit transaction, the agreement for credit is contained in a separate document which is incorporated herein by reference and made a part hereof. IN WITNESS WHEREOF Buyer(s) have hereunto signed their name(s) this 27 day of Feb, 2016 and acknowledge receipt of a true copy of this Contract and unless otherwise specified, it is understood that the Buyer is solely for work to begin.

You, the Buyer(s), may cancel this transaction at any time prior to midnight of the third day after the date of this transaction. Signature affixed below acts as a receipt that buyer(s) received appropriate cancellation forms. See reverse side for details.

Submitted by Representative Jamay Date 2-27-16  
Approved by: Sales Manager \_\_\_\_\_ Date \_\_\_\_\_

Buyer Ronald Lynn Date 2/27/16  
Buyer Connie Lynn Date 2/27/16

SUB TOTAL: \$ 4728.  
TAX (DELIVERY OR PICK UP ONLY): NA  
GRAND TOTAL: \$ 4728.  
DEPOSIT REQUIRED: 2170.00  
BALANCE DUE: 2558.00

Buyer(s) understands that this document does not constitute a valid and binding Contract for any purpose unless and until it is signed and accepted by an authorized representative of FASWD. All amounts due under this agreement shall be paid upon the date specified herein, if so set out, or upon the day the last of the work or products are furnished to the Buyer. Past due amounts are subject to a service charge of 18% per annum from the due date. Buyer agrees to pay FASWD all costs of enforcement or collection, including reasonable attorney fees, whether or not a lawsuit is commenced as a part of the collection process. This Contract and the agreement for credit, if any, shall constitute the entire agreement between the parties, which entire agreement and specifications shall not be altered or modified except by written agreement between the parties hereto.