



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
Tel 407-581-8161 * Fax 407-581-0313 * www.universalsalengineering.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: ELECTRICAL: for enclosure of screen porch into FL room addition
Comments: ATF - Work was done several years ago with no permit - insure all outlets are tamper-resistant and arc-fault protected
Project Information
Address: 1518 Swann Avenue, Belle Isle, FL 32812
Parcel ID: 25-23-29-5884-21-030
Property Owner: Miller, Jesse & Katherine
Phone Number: 407 375 3793

Company Name: BY OWNER
Contractor Name:
License Number:
Address:
Phone Number:

Permit Number: 2015-07-009
Date of Application: 06/30/2015
Date Permit Issued: 08/12/2015

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 \$101.00
Temp Pole \$
Plumbing \$
Mechanical \$
Gas \$
Roofing \$
Boat Dock \$
Screen Encl \$
Swimming Pool \$

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)

SURCHARGE FEES

Surcharge Fee \$2.00
Surcharge Fee \$2.00

TOTAL FEES \$105.00

Date Paid 8/14/15

CC or Check # Visa 2781

Amount Paid 105.00

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).

Inspection requests are to be emailed to BidScheduling@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://universalsalengineering.sharefile.com/f/fo94edc4-832d-44bd-9809-ecf32f9e2e63>

login ID = cobi@universalsalengineering.com

password = universall3

PROJECT NUMBER 0115.1500929.0000

TASK NUMBER 02

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2015-07-009
Property Owner	Miller, Jesse + Katherine
Address	1518 SWANN AVE. (32809)
Nature of Improvement	Electrical; A/c connect, outlets + switches
Received Application	6/30/15 (held till Bldg. Permit Zoning was approved).
Sent for Stormwater Review	/
Stormwater Approved	
Sent for Zoning Review	/
Zoning Approved	
Applied for Variance	
Variance Approved	
Sent to BO for Review	7/14/15
Building Official Approved	See 8-11-15
Comments	
1.	Joette 7/14/15 W/O # 53954 (Sent to J. Connell)
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



City of Belle Isle
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
 Tel 407-581-8161 * Fax 407-581-0313 * www.universaleengineering.com



APPLICATION FOR ELECTRICAL 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: _____ **PERMIT NUMBER:** 2AS-07-009
 The undersigned hereby applies for a permit to make electrical installations as indicated below. PLEASE PRINT
 Project Address 1518 Swann Ave. Belle Isle FL 32809 32812
 Property Owner Jesse Miller Phone 407-375-3793
 Property Owner's Mailing Address 3588 W. St. Brides Circle city Mandeville
 State FL Zip Code 32812 **Parcel Id Number:** 25-23-29-588A-21-030

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 Low Voltage New Existing

INDICATE THE QUANTITY OF ALL EQUIPMENT TO BE INSTALLED

Dishwasher	Exhaust Fan	Disposal	Water Heater
Hood Fan	Dryer	Paddle Fan	Outlets
Fixtures	Spa	Pool	Switches
Electric Signs	Meter Reset	Low Voltage	Stoves
Pumps	Motors	Air Conditioning (tons)	Furnace (KW)

Temporary Construction Pole _____ **One (1) New Meter Service** _____ Amperage/Voltage/Phase _____
Meter Service Upgrade from _____ to _____ Amperage/Voltage/Phase _____ Difference in Size _____
 Relocate Existing Meter Service (No Service Size Change) _____
 Other: _____

PERMIT FEE BASED ON METER SERVICE SIZE SCHEDULE \$ _____
 (IF NO METER SERVICE WORK BEING DONE, USE VALUATION OF JOB FOR PERMIT FEE)

VALUATION OF JOB (VALUATION OF ALL MATERIALS, LABOR, AND FIXTURES INSTALLED) \$ 200.
 Permit Fee = \$ 74.
 Review Fee = \$ 37.
 3% FL Surcharge = \$ 4.
TOTAL Permit = \$ 105.

Building Official: <u>Jesse Miller</u> Date <u>8-11-15</u>
Verified Contractor's Licenses & Insurance are on file <u>BY OWNER</u> Date _____

I hereby certify that the above is true and correct to the best of my knowledge.

I hereby 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 Jesse Miller LICENSE # BY OWNER
 LICENSE HOLDER NAME _____ COMPANY NAME _____

Street Address _____
 City _____ State _____ Zip Code _____ Phone Number _____
 Email Address _____

To close out old unpermitted work

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

Building Permit Number _____



City of Belle Isle

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

OWNER BUILDER DISCLOSURE STATEMENT

Per Florida Statute 455.228:

Homeowners hiring unlicensed Contractors may be subject a fine of up to \$5,000.00!

Before me this day personally appeared Jesse Miller, who being duly sworn, deposes, and says as follows. "I hereby acknowledge that I have read and fully understand the individual provisions of this instrument."

1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license
JAM Initial
2. I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility. JAM Initial
3. I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts. JAM Initial
4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000.00. The building or residence must be for my own use or occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption. JAM Initial
5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. JAM Initial
6. I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance. JAM Initial
7. I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit, that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property. JAM Initial
8. I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers' compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk. JAM Initial

Owner Builder Disclosure Statement

9. I agree that, as the party legally and financially responsible for this proposed construction activity, I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations. JAM Initial
10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at (850)487-1395 or www.Call.Center@dbpr.state.fl.us for more information about licensed contractors. JAM Initial
11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:
Project Address: 1518 Swann Ave, Orlando, FL 32807 JAM Initial
12. I agree to notify the City of Belle Isle Building/Zoning Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. JAM Initial

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if any unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

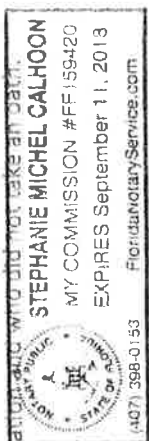
Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

Signature: [Signature] Print: Jesse Miller
(Signature of the property owner) (Name of the property owner)

Signature: [Signature] Print: Katharine Miller
(Signature of the property owner) (Name of the property owner)

Owner's Address: 1518 Swann Ave, Orlando, FL 32807

The foregoing instrument was acknowledged before me this 6 / 30 / 2015
by Jesse Miller who is personally known to me / who produced the following

as identified [Signature]
State of Florida / County of Orlando
Notary Signature [Signature] Seal: 



UNIVERSAL ENGINEERING SCIENCES

Consultants In: Geotechnical Engineering • Environmental Sciences
Geophysical Services • Materials Testing • Threshold Inspection
Building Code Administration, Compliance Inspection & Plan Review

3532 Maggie Blvd, Orlando, FL 32811 - P: 407.423.0504 - F: 407.423.3106

Work Order No. 55604

Inspection Report

Project Name: 1518 Swann Avenue ~ COBI

Date: 08/12/2015 Any any

Address: 1518 Swann Avenue ~ COBI , Belle Isle, Orange County, FL

Permit No: 2015-07-009

Client: City of Belle Isle

Lot No.:

ProjectNo.: 0115.1500929.0000

Contact: Susan Manchester at 407 581
8161

Scope of Inspection: REVIEW electrical app for porch that was enclosed in without permit several years ago

Inspection Type: See Scope

Disposition of Inspection: Complete

Comments:

Task Date	Task Note	User Name
08/12/2015	Per Jay - pass - note permit that all outlets are to be inspected to insure that they are tamper resistance and arc-fault protected.	Susan Manchester

I hereby affirm that to the best of my knowledge and belief, the above listed inspection was performed as indicated and the work was reviewed for compliance with the approved plans, and all pertinent sections of the Florida Building Code.

Inspector: John Connell, BN3221