



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: MECHANICAL: one, 5-ton changeout

Comments: ATF Permit

Project Information
 Address: 1721 Stafford Drive, Belle Isle, FL 32809
 Parcel ID: 30-23-30-0610-00-580
 Property Owner: Baker, Alden & Ashley
 Phone Number: None

 Company Name: ProMag Energy Group, Inc.
 Contractor Name: Watson, Sherried O.
 License Number: CMCA48033
 Address: 3300 37th Street, Orlando, FL 32839
 Phone Number: 407-538-4237

Permit Number: 2015-07-022
Date of Application: 07/07/2015
Date Permit Issued: 07/08/2015

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

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$111.00
 Plumbing \$
 Pool \$
 Roofing \$
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$115.00

Date Paid 8-31-15

CC or Check # MC-4937

Amount Paid \$115.00

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 OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

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 IDScheduling@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>

login ID = cobi@universalengineering.com

password = universal13

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2015-07-022
Property Owner	Baker Allen & Ashley
Address	1721 Stafford Dr.
Nature of Improvement	Mechanical - one 5-ton changeout
Received Application	7-7-15
Sent for Stormwater Review	/
Stormwater Approved	/
Sent for Zoning Review	/
Zoning Approved	/
Applied for Variance	
Variance Approved	
Sent to BO for Review	7-7-15
Building Official Approved	7-8-15
Comments	
1. Susan 7-7-15	Worked NO PERMIT 2x fees!
2.	A double fees @
3. Susan 7-7-15	review wo #53632
4.	
5.	need GL/WC & LTR (got it). Contractor Lic ✓ get it
6.	tie downs ✓ get it energy calc ✓ get it
7.	
8. Juliette 7/8/15	Typed Permit; updated log/Vision; emailed Client.
9. " "	that we still need local tax receipt.
10. Susan 8-31-15	Emailed payment, LTR & inspection must be addressed ASAP.
11.	
12.	



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

RECEIVED
7-7-15

APPLICATION FOR MECHANICAL 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: 7-7-15 PERMIT NUMBER 2015-07-022
PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

Project Address 1721 Stafford Dr Belle Isle FL 32809 32812
Property Owner Alden & Ashley Baker Phone _____
Property Owner's Mailing Address 1721 Stafford Dr City Belle Isle
State FL Zip Code 32809 Parcel Id Number: 30-23-30-0610-00-580

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

Class of Building: Old New Type of Building: Residential Commercial Other
Type of Work: New Alteration Addition Repair

- REQUIRED Tie Down Engineering and Equipment Sizing Calculation
- REQUIRED, adding A/C to new space - provide Energy Calculations
- REQUIRED, if replacing unit with no duct work, provide a Duct Certification as per FB 101.4.7.1 (form can be found on website)

Please indicate the nature of work by completing the information below:

Air Conditioning: # of Units 1 Tons Per Unit _____ Total Tons 5
Type of System: Water to Air _____ Chiller _____ Split System Package _____ Heat Pump _____ Estimated Cost \$ _____
Heating: # of Units KWS Per Unit _____ Total KWS 10 BTU's _____ Estimated Cost \$ _____
Oil _____ Electric Boiler _____ Gas _____

(A) Estimated Cost Fee \$ 6000.00

Fees for items below are based on valuation of all units, equipment, materials and labor supplied by owner or contractor.

Ventilation: (Number of) Grease _____ Heat _____ Hoods, Air Intakes _____ Exhaust Fans _____ Dryer Vents _____ Estimated Cost \$ _____

Refrigeration: Number of units _____ Estimated Cost \$ _____

Piping: Air _____ Vacuum _____ Steam _____ Chill Water _____ Estimated Cost \$ _____

Others: (Specify) _____ Estimated Cost \$ _____

Was the space previously Air Conditioned? Yes _____ No _____ (B) Estimated Cost Fee \$ _____

Pearl Chamber
Building Official: [Signature] Date 7-8-15

Review & Permit Fee \$ _____
3% Florida Surcharge \$ _____
Total Permit Fee \$ _____

(X2 Fees)

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 # CMCA48033

LICENSE HOLDER NAME Sherril Watson COMPANY NAME Promag Energy Group

Street Address 3300 37th St A/C & Heating Inc

City Orlando State FL Zip Code 32839 Phone Number (407) 538-4237

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

RETAIN A COPY FOR OFFICE USE - Updated: 12/2012 FORM #MEC010

work w/o permit 2X fees



COBI Permit Fee Calculation Form



Reviewer Signature: R Jones

Date: 7-8-15

Permit Type:	<u>MECHANICAL (CHANGE OUT)</u>	Job Cost:	<u>\$ 5TON</u>
Permit Fee:	<u>\$ 37.00</u>		
Plans Review Fee:	<u>\$ 18.50</u>		
1.5% State Fee:	<u>\$ 2.00</u>		
1.5% State Fee:	<u>\$ 2.00</u>		
TOTAL BUILDING FEE:	\$ 115.00		

(50% of permit fee – excluding ReRoofs)

DOUBLE FEE 111.00

Note: Total gets doubled for S.W.D. APT permits

1721 Stafford Dr

Home Search Feedback

1/1 of 1


Searches
Parcel Search
Records
Property Record Card
My Favorites

Sign up for e-Notify...

1721 Stafford Dr

30-23-30-0610-00-500

<p>Parcel: Baker J Alden III Baker Ashley M Mailing Address Only 1721 Stafford Dr Belle Isle, FL 32809-5107 Business Mailing Address</p>	<p>Physical Subj. address: 1721 Stafford Dr Belle Isle, FL 32809 Orlando, FL 32809 Parcel ID: 0103 - Single-Fam Class III Use Class: Belle Isle</p>
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1721 STAFFORD DR 06/11/2014

Values, Exemptions and Taxes
Property Features
Sales Analyst
Location Info
Market Stats

Update Information

Property Description View Map

BELLE ISLE WEST W/18 LOT 58


Total Land Area 11,916 sqft (0.27) | 0.27 acres (0.01) GIS Calculated Notice

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)	\$40,000.00	\$50,000	10.00	\$50,000

Page 1 of 1 (1 total records)

Buildings (includes working values)

Important Information		Structure				
	Model Code:	01 - Single-Fam Residence	Actual Year Built:	1961	Gross Area:	3015 sqft
	Type Code:	0103 - Single-Fam Class III	Bed(s):	4	Living Area:	2379 sqft
	Building Value:	\$141,811	Bath(s):	3.0	Exterior Wall:	Concrete Block Stucco
	Estimated New Cost:	\$185,706	Floor(s):	2	Interior Wall:	Drywall

Page 1 of 1 (1 total records)

Extra Features (includes working values)

Description	Date Built	Units	XFOB Value
SCR2 - Scrub Pine /	12/01/2005	1 Unit(s)	\$5,000
PL2 - Above Average Pool	01/01/2010	1 Unit(s)	\$23,000

Page 1 of 1 (2 total records)

This Data Printed on 07/07/2015 and System Data Last Refreshed on 07/06/2015

Site Notice • About Us • Contact Us • OCPAH Home • Property Search • Exemption FRAUD Hotline

Orange County Property Appraiser • 700 S. Orange Avenue, Suite 1700 • Orlando, FL 32801

Office Hours: 8:00 a.m. to 5:00 p.m. Monday - Friday • Phone: 407.136.5044

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http://www.ocpah.org/searches/ParcelSearch.aspx

0002/0011

07/07/2015 10:52AM FAX

Street Address 1721 Stafford Drive , Orlando, FL 32809
Latitude, Longitude 29.1462°, -81.0534°
House Square Footage: 2379 sq. ft.
Name: Glass
Phone: 321-231-4985
Email:

House Information

SHR	.75
Number of residents	2
Ceiling height	9
Wall U-value R-value	0.09 11
Floor U-value R-value	0.2 5
Ceiling U-value R-value	0.053 19
Window U-value	0.5
Window SHGF	0.85
Moisture grains	58
Duct loss %	10
Duct gain %	10
Cooling infiltration (ACH)	0.6
Heating infiltration (ACH)	0.8
Winter ventilation	0
Summer ventilation	0

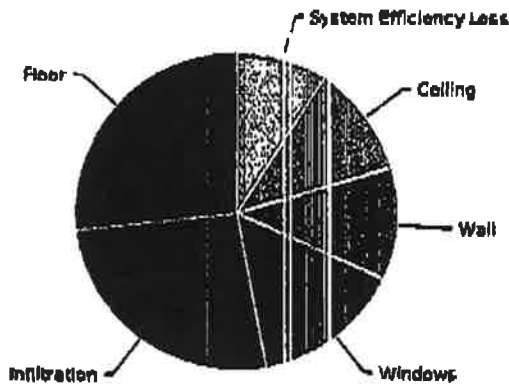
Design Conditions

Outdoor	Heating	Cooling
Dry bulb (°F)	37	90
Daily range		L
Relative humidity		50%
Moisture difference		58
Indoor	Heating	Cooling
Indoor temperature (°F)	70	75
Design temperature difference(°F)	33	15

Heating Loads

Area	Btuh	% of load
Wall	4202	11.4
Floor	9893	26.8
Ceiling	4161	11.3
Windows	5627	15.3
Infiltration	9638	26.1
System Efficiency Loss	3352	9.1
Total:	36373	

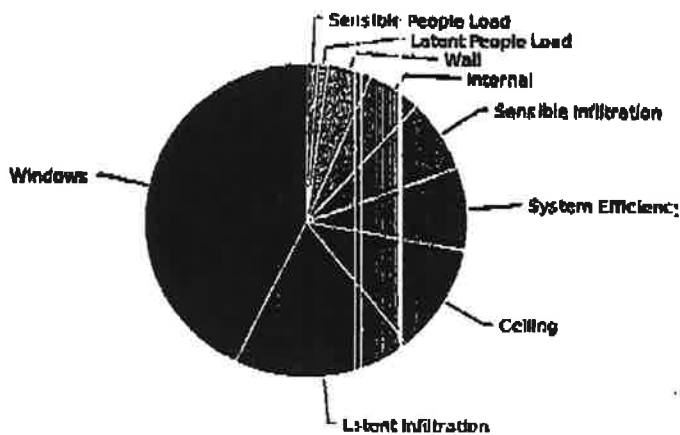
Heating Loads
36,373 Btu/hr



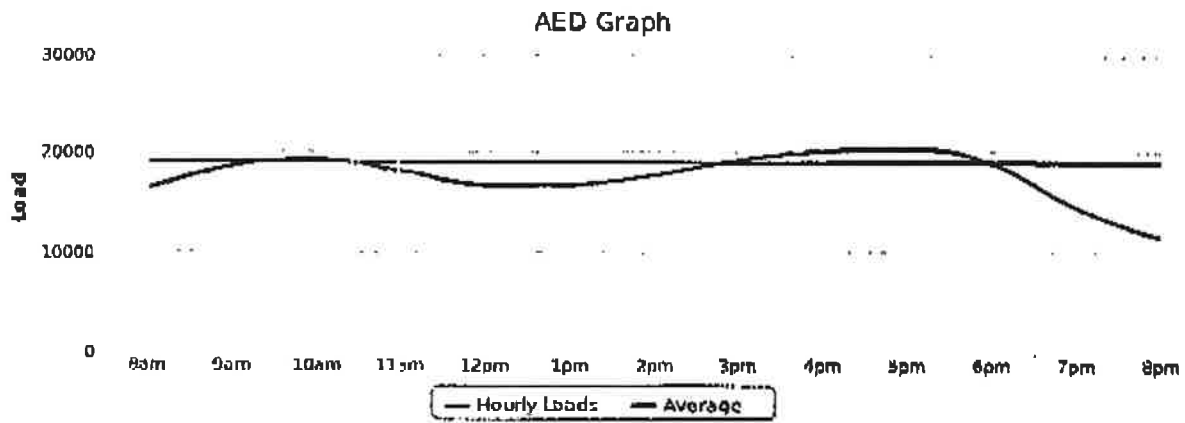
Cooling Loads

Area	Btuh	% of load
Wall	1910	4.3
Ceiling	5043	11.5
Windows	18856	42.9
Sensible Infiltration	3286	7.5
Latent Infiltration	7853	17.9
System Efficiency Gain	3615	8.4
Internal	2400	5.5
Sensible People Load	460	1
Latent People Load	460	1
Total	43963	
Sensible load	35650	
Latent load	9313	
SHR	0.81	
Capacity at .75 SHR	3.96 Tons	

Cooling Loads
43,963 BTU/hr



Adequate Exposure Diversity



Equipment selection

System equipment selection will be made using the following derived values.

Glass (E)	172 sq. ft.
Glass (S)	24 sq. ft.
Glass (N)	24 sq. ft.
Glass (W)	121 sq. ft.
Summer Outdoor	90°F
Summer Wet Bulb	77°F
Summer Indoor	75°F
Summer Design Grains	50%
Winter Outdoor	37°F
Winter Indoor	70°F
Sensible Cooling	35,650 Btuh
Latent Cooling	8,313 Btuh
Required Cooling Airflow	1,620 CFM
Sensible Heating	36,873 Btuh
Required Heating Airflow	479 CFM

All calculations are based upon approved hvac industry standards and procedures, and comply with all local, state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree

FLORIDA ENERGY CONSERVATION CODE
Mandatory Duct Inspection Certification for HVAC change-out
 For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 919.912)

Owner:	Contractor name:
Street address:	Jurisdiction:
City:	Permit No.:
Zip:	Final inspection date:

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
- Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)
- The joints or seams are already sealed with fabric and mastic. (Section 101.4.7.1.1 exception 2)
- System was tested (see below) and repairs were made as necessary. (Section 101.4.7.1.1 exception 3)

Signature: Shirley D. Watson Date: _____

Printed Name: Shirley D. Watson

Contractor License #: CA1048033

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in. w.g.)

Signature: _____ Date: _____

Printed Name: _____

Form approved May 14, 2011



YOU ARE HERE: Licensed Contractors | CMCA48033

Fast Track Home

Details for CMCA48033

SEARCH FOR:

- Development Cases
- Field Investigative Reports
- Hearings & Meetings
- Inspections
- Licensed Contractors
- Permits (All Types)
- Property (Address/Parcel)

LICENSE DETAILS:

CONTRACTOR LICENSE NUMBER	STATUS	APPLICATION DATE	
CMCA48033	Active	01/28/06	
TYPE	SUB TYPE	ISSUE DATE	EXPIRATION DATE
Contractor License	M- Mechanical	01/28/06	02/30/15

CONTRACTOR SERVICES:

My Services / Log In

Web Email 6/18/2014 M-F

LINKS:

- Permits & Licenses Information
- Planning & Development
- Forms, Fees & Resources
- OC Property Appraiser

PEOPLE DETAILS:

DESCRIPTION	NAME	ADDRESS
Applicant	Sherrill Oscar Wilson	3300 37th St Orlando Florida 32839 Phone: 4073005500
Company	Promog Energy Group A/C & Heating Inc	425-C Canton Foster RD Orlando Florida 32807-1206 Phone: 4078805500

TABLE 5 : Vult=140 MPH, EXPOSURE B
(FOR USE WITH A RISK CATEGORY II STRUCTURE*)

MAXIMUM SURFACE AREA OF UNIT'S LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	ALLOWABLE ROOF-TOP-HEIGHT (H) TIE-DOWN CONFIGURATION TYPE			
			C1	C2	C3	C4
6 FT ²	24" MAX	12" MIN	H ≤ 15 FT 60 FT < H ≤ 120 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
9 FT ²	32" MAX	15" MIN	AT GRADE	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
4 FT ²			H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
6 FT ²			H ≤ 40 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
9 FT ²	48" MAX	24" MIN	AT GRADE 60 FT < H ≤ 80 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
12 FT ²			AT GRADE	H ≤ 200 FT	H ≤ 40 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT
16 FT ²			N/A	H ≤ 200 FT	H ≤ 15 FT 60 FT < H ≤ 100 FT	H ≤ 200 FT
20 FT ²			N/A	H ≤ 200 FT	H ≤ 15 FT 60 FT < H ≤ 180 FT	H ≤ 200 FT
25 FT ²			N/A	H ≤ 40 FT 60 FT < H ≤ 200 FT	AT GRADE 60 FT < H ≤ 80 FT	H ≤ 200 FT
30 FT ²	60" MAX	48" MIN	N/A	H ≤ 15 FT 60 FT < H ≤ 160 FT	AT GRADE	H ≤ 200 FT
36 FT ²			N/A	AT GRADE 60 FT < H ≤ 80 FT	AT GRADE	H ≤ 200 FT

TABLE 6 : Vult=140 MPH, EXPOSURE C
(FOR USE WITH A RISK CATEGORY II STRUCTURE*)

MAXIMUM SURFACE AREA OF UNIT'S LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	ALLOWABLE ROOF-TOP-HEIGHT (H) TIE-DOWN CONFIGURATION TYPE			
			C1	C2	C3	C4
6 FT ²	24" MAX	12" MIN	AT GRADE	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
9 FT ²	32" MAX	15" MIN	N/A	H ≤ 200 FT	H ≤ 15 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT
4 FT ²			H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
6 FT ²			AT GRADE 60 FT < H ≤ 180 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
9 FT ²	48" MAX	24" MIN	AT GRADE	H ≤ 200 FT	H ≤ 40 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT
12 FT ²			N/A	H ≤ 200 FT	AT GRADE 60 FT < H ≤ 140 FT	H ≤ 200 FT
16 FT ²			N/A	H ≤ 15 FT 60 FT < H ≤ 200 FT	AT GRADE	H ≤ 200 FT
20 FT ²			N/A	H ≤ 30 FT 60 FT < H ≤ 200 FT	AT GRADE	H ≤ 200 FT
25 FT ²			N/A	AT GRADE 60 FT < H ≤ 140 FT	AT GRADE	H ≤ 200 FT
30 FT ²	60" MAX	48" MIN	N/A	AT GRADE	N/A	H ≤ 200 FT
36 FT ²			N/A	AT GRADE	N/A	H ≤ 30 FT 60 FT < H ≤ 200 FT

TABLE 7 : Vult=140 MPH, EXPOSURE D
(FOR USE WITH A RISK CATEGORY II STRUCTURE*)

MAXIMUM SURFACE AREA OF UNIT'S LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	ALLOWABLE ROOF-TOP-HEIGHT (H) TIE-DOWN CONFIGURATION TYPE			
			C1	C2	C3	C4
6 FT ²	24" MAX	12" MIN	N/A	H ≤ 200 FT	H ≤ 30 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT
9 FT ²	32" MAX	15" MIN	N/A	H ≤ 200 FT	AT GRADE 60 FT < H ≤ 140 FT	H ≤ 200 FT
4 FT ²			H ≤ 40 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
6 FT ²			AT GRADE 60 FT < H ≤ 100 FT	H ≤ 200 FT	H ≤ 200 FT	H ≤ 200 FT
9 FT ²	48" MAX	24" MIN	N/A	H ≤ 200 FT	H ≤ 15 FT 60 FT < H ≤ 200 FT	H ≤ 200 FT
12 FT ²			N/A	H ≤ 40 FT 60 FT < H ≤ 200 FT	AT GRADE 60 FT < H ≤ 80 FT	H ≤ 200 FT
16 FT ²			N/A	AT GRADE 60 FT < H ≤ 200 FT	N/A	H ≤ 200 FT
20 FT ²			N/A	AT GRADE 60 FT < H ≤ 200 FT	AT GRADE	H ≤ 200 FT
25 FT ²	60" MAX	48" MIN	N/A	AT GRADE 60 FT < H ≤ 80 FT	N/A	H ≤ 200 FT
30 FT ²			N/A	N/A	N/A	H ≤ 40 FT 60 FT < H ≤ 200 FT
36 FT ²			N/A	N/A	N/A	AT GRADE 60 FT < H ≤ 200 FT

*AS AN EXAMPLE, THESE TABLES ARE PERMISSIBLE TO BE USED WITHIN BREVARD COUNTY. CHECK WITH LOCAL AUTHORITY HAVING JURISDICTION FOR THE APPLICABILITY OF THIS TABLE WITHIN CERTAIN FLORIDA COUNTIES

FRANK L. BENNARD, P.E.
ENGINEER
 No. 46549
 160 SW 12TH AVENUE
 DEERFIELD BEACH, FL 33441
 WWW.ENGRFRANK.COM
 PH: (954) 350-0660 FAX: (954) 350-0443
 CENT OF AUTHORITY
 FRANK L. BENNARD, P.E., INC.
 14229.1

BMP INTERNATIONAL, INC.
 4710 28TH STREET NORTH
 ST. PETERSBURG, FL 33471
 PH: (727) 577-1613
 MECHANICAL UNIT STEEL TIE-DOWN CLIPS
 FBC 5TH EDITION (2014) PRODUCT APPROVAL FL#14239.1

REVISIONS

NO.	DATE	DESCRIPTION
1	04-08-15	ISSUE FOR PERMITS
2	02-15-13	ISSUE FOR PERMITS
3	02-15-13	ISSUE FOR PERMITS
4	04-08-15	ISSUE FOR PERMITS

SCALE: N.T.S.
 PAGE DESCRIPTION:
 15-2378
 5



Reviewed for Code Compliance
 Universal Engineering Sciences

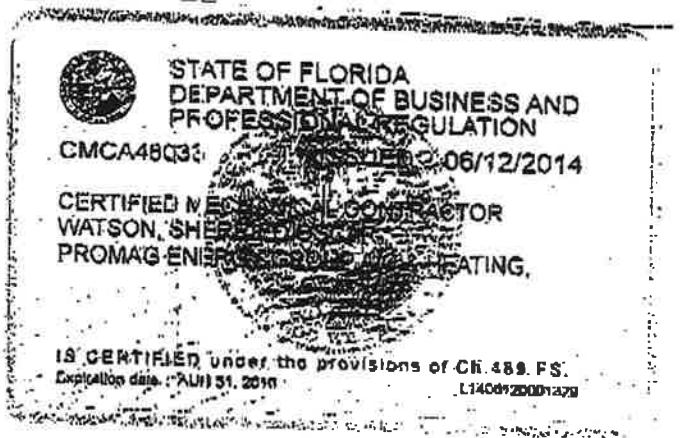
TALLAHASSEE FL 32399-0783

WATSON, SHERRIED OSCAR
PROMAG ENERGY GROUP A/C & HEATING, INC
24927 E. COLONIAL DR.
CHRISTMAS FL 32709

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 boutique 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

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CMCA48033	

The MECHANICAL CONTRACTOR named below IS CERTIFIED under the provisions of Chapter 489 FS. Expiration date: AUG 31, 2015

WATSON, SHERRIED OSCAR
PROMAG ENERGY GROUP A/C & HEATING, INC
24927 E. COLONIAL DR.
CHRISTMAS FL 32709



ISSUED: 08/12/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1408120001329

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. 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.

2014

EXPIRES

9/30/2015

1804 CERT MECHANICAL CON

\$30.00

1 EMPLOYEE

1804-0549856

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

425 GASTON FOSTER RD #C&D
A - ORLANDO, 32807

PAID: \$30.00 2504-00620719 9/9/2014



WATSON SHERRID S-QUALIFIER

PROMAG ENERGY GROUP A/C & HEATING I
WATSON SHERRIED-QUALIFIER
3300 37TH ST
ORLANDO FL 32839

This receipt is official when validated by the Tax Collector.