



# 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)

## 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:** BUILDING: Seawall - 235' vinyl with concrete cap

**Comments:** NONE

**Project Information**

Address: 1641 Overlook Rd, Belle Isle, FL 32812  
Parcel ID: 25-23-29-5884-10-020  
Property Owner: Ashton, Karen  
Phone Number: 407 913 3246  
\*\*\*\*\*  
Company Name: Hodgskin Outdoor Living Inc.  
Contractor Name: Hodgskin, Lori  
License Number: CBC057656  
Address: PO Box 843, Ocoee, FL 34761  
Phone Number: 407-656-1470 or 407 450 4241

**Permit Number: 2017-04-046**  
Date of Application: 04/13/2017  
Date Permit Issued: 04/25/2017

**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 \$165.00

**UNIVERSAL ENG - BUILDING FEES**

Cert of Occ \$  
Demo/Tree \$  
Building \$331.50  
Fence \$  
Driveway \$  
Shed \$  
Window(s) \$  
Door(s) \$  
PrePower \$  
Electrical \$  
Temp Pole \$  
Plumbing \$  
Mechanical \$  
Gas \$  
Roofing \$  
Boat Dock \$  
Screen End \$  
Swimming Pool \$  
Sign \$

**SURCHARGE FEES**

Surcharge Fee \$4.97  
Surcharge Fee \$4.97

**TOTAL FEES \$506.44**

Date Paid 4-27-17

CC or Check # 1654

Amount Paid 506.44

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**

- 1<sup>st</sup> Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? \_\_\_\_\_ (Footing/Foundation)
- 2<sup>nd</sup> \_\_\_\_\_ (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 [BDscheduling@UniversalEngineering.com](mailto:BDscheduling@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://universalengineering.sharefile.com>

login ID = [cobi@universalengineering.com](mailto:cobi@universalengineering.com)

password = universall3



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## Building Permit (Land Use) Application

DATE: 3/27/17

PERMIT # 2016-04-046

PROJECT ADDRESS 1641 Overlook Road

Belle Isle, FL  32809  32812

PROPERTY OWNER Karen M. Ashton PHONE \_\_\_\_\_

VALUE FOR WORK 1000000 \$ 450,000 \$

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

3' high by 270 vinyl retaining wall with concrete cap  
2351

Please provide information, if applicable.

- Survey specific foundation plan required to show compliance with zoning setbacks
- **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 homesteaded

Please Complete for the City of Belle Isle Zoning Review: **Parcel Id Number:** 25-23-29-5884-10-020

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

**SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCROACH INTO ANY EASEMENT OR REQUIRED SETBACK.** 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.

Attached Survey 1 SETS and Construction Plans 1 SETS

Wind Exposure Category: B  C  D

PLANNING & ZONING APPROVAL: not needed per April's Email DATE \_\_\_\_\_

PLEASE COMPLETE for Building Review

CONSTRUCTION TYPE \_\_\_\_\_ Res: Single Fam Multi Fam

OCCUPANCY GROUP \_\_\_\_\_ #UNITS: 1 STORIES \_\_\_\_\_ **TOTAL SQ FT:** \_\_\_\_\_

MAX. FLOOR LOAD \_\_\_\_\_ MAX. OCCUPANCY \_\_\_\_\_

MIN. FLOOR ELEV. \_\_\_\_\_ LOW FLOOR ELEV. \_\_\_\_\_

WATER SERVICE \_\_\_\_\_ WELL \_\_\_\_\_ SEPTIC \_\_\_\_\_

BUILDING REVIEWER J. Cannon Bus40 DATE 4/25/2017

NOTES NOCL Wickins @

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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.

4.97  
4.97  
a.94

4x19  
146  
201.2  
110.50  
331.50

25  
151K

SPRINKLERS REQ'D	Y	N	RCD
IF Required - SUBMIT COPY OF PLANS FOR FIRE REVIEW			
ZONING	<input checked="" type="radio"/>	<input type="radio"/>	\$ 1165
CERT OF OCC	<input type="radio"/>	<input type="radio"/>	\$
TRAFFIC	<input type="radio"/>	<input type="radio"/>	\$
SCHOOL	<input type="radio"/>	<input type="radio"/>	\$
FIRE	<input type="radio"/>	<input type="radio"/>	\$
SWIMMING POOL	<input type="radio"/>	<input type="radio"/>	\$
SCREEN ENCLOSURE	<input type="radio"/>	<input type="radio"/>	\$
ROOFING	<input type="radio"/>	<input type="radio"/>	\$
BOAT DOCK	<input type="radio"/>	<input type="radio"/>	\$
BUILDING	<input checked="" type="radio"/>	<input type="radio"/>	\$ 331.50
WINDOW(S)	<input type="radio"/>	<input type="radio"/>	\$
DOOR(S)	<input type="radio"/>	<input type="radio"/>	\$
FENCE	<input type="radio"/>	<input type="radio"/>	\$
SHED	<input type="radio"/>	<input type="radio"/>	\$
DRIVEWAY	<input type="radio"/>	<input type="radio"/>	\$
OTHER	<input type="radio"/>	<input type="radio"/>	\$

3% FL SURCHARGE  
TOTAL 9.94  
526.44

By Owner Form Y NA

Notice of Commencement Y NA

Power of Attorney Y NA

Contractor Packet Included? Y N

OTHER PERMITS REQUIRED:

ELECTRICAL Y NA

PREPOWER Y NA

MECHANICAL Y NA

PLUMBING Y NA

ROOFING Y NA

GAS Y NA



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**Building Permit (Land Use) Application**

To be completed as required by State Statute Section 713 and other applicable sections.

PERMIT # 217-01-046

Owner's Name Karen M. Ashton  
 Owner's Address 1641 Overlook Road, Belle Isle, FL 32809

Contractor Name	Lori Hodgskin	Company Name	Hodgskin Outdoor Living
License #	CBC057656	Company Address	PO Box 843
Contact Phone/Cell	Sheila Cichra (407) 450-4241	City, State, ZIP	Winter Garden, FL 34787
Contact Email	sheilacichra@gmail.com	Contact Fax	

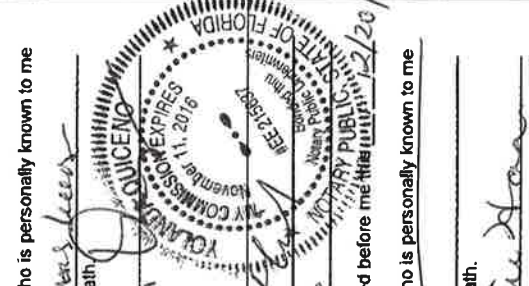
**WARNING TO OWNER:** Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. A notice of commencement must be recorded if job is \$2500(+) or if A/C Replacement \$7500(+) and posted on the job site before the first inspection. If you intend 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) and City Ordinances (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 for 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** [Signature] 10/10/2016  
 The foregoing instrument was acknowledged before me this 10/10/2016  
 by KAREN Ashton Roun who is personally known to me  
 and who produced Florida Drivers License who is personally known to me  
 as identification and who did not take an oath.  
 Notary as to Owner  
 State of Florida  
 County of Orange

**Contractor Signature** [Signature]  
 COMPANY NAME Streamline  
 The foregoing instrument was acknowledged before me this 10/10/2016  
 by Sheila Cichra 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-A, R-1 per  
 City Code, Section 50-74; Impervious Surface Ratio  
 Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).  
 Total Lot Area \_\_\_\_\_ X 0.35= \_\_\_\_\_  
 Allowable Impervious Area (BASE) \_\_\_\_\_
- 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 pifoot) X (result from line 4) = cubic feet of storage volume needed

Permit Number: 2017-04-046  
 Folio/Parcel ID #: 25-23-29-5884-10-020  
 Prepared by: Sheila Cichra  
2154 Oak Beach Blvd  
Sebring, FL 33875  
 Return to: Hodgskin Outdoor Living, Inc.  
1331 Green Forest Court, Ste 1  
Winter Garden, FL 34787

DOC# 20170141294  
 03/16/2017 12:57:42 PM Page 1 of 1  
 Rec Fee: \$10.00  
 Phil Diamond, Comptroller  
 Orange County, FL  
 MB - Ret To: SHEILA CICHRA



**NOTICE OF COMMENCEMENT**

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

1. Description of property (legal description of the property, and street address if available)  
NELA ISLE M/55 LOTS 2, 3 & 4 & ALL LAND TO WATERS OF LAKE BLK J 1641 Overlook Road
2. General description of improvement  
seawall

**3. Owner information or Lessee information if the Lessee contracted for the improvement**

Name Karen M. Ashton  
 Address 1641 Overlook Road, Belle Isle, FL 32809  
 Interest in Property \_\_\_\_\_

**Name and address of fee simple titleholder (if different from Owner listed above)**

Name \_\_\_\_\_  
 Address \_\_\_\_\_

**4. Contractor**

Name Hodgskin Outdoor Living, Inc. Telephone Number (407) 656-1470  
 Address 1331 Green Forest Court, Ste. 1, Winter Garden, FL 34787

**5. Surety (if applicable, a copy of the payment bond is attached)**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_

**6. Lender**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_

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

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_

**8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**

Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
 Address \_\_\_\_\_

**9. Expiration date of notice of commencement (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)**

\_\_\_\_\_

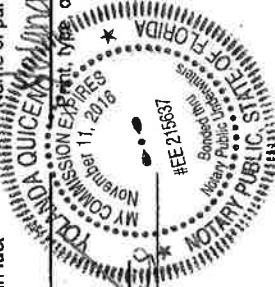
**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED 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.**

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager [Signature] Signatory's Title/Office \_\_\_\_\_

The foregoing instrument was acknowledged before me this 10<sup>th</sup> day of January 2016 month/year Karen Ashton-Ryan name of person

as Owner for \_\_\_\_\_  
 Type of authority, e.g., officer, trustee, attorney in fact \_\_\_\_\_ Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida [Signature]  
 Personally Known \_\_\_\_\_ OR Produced ID [Signature]  
 Type of ID Produced PRODUCED BY DELIVERED or stamp commissioned name of Notary Public



State of Florida, County of Orange  
 I hereby certify that this is a true copy of the document as reflected in the Official Records  
 BY: [Signature]  
 PHILIP MCKAY, COUNTY COMPTROLLER  
 DATED: 3/16/17



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**POWER OF ATTORNEY**

Date: \_\_\_\_\_

Permit #: 2017-04-046

I hereby name and appoint Sheila Cichra of \_\_\_\_\_  
(print name)

Streamline Permitting, Inc. to be my lawful attorney-in-fact to act for  
(company name)

me and apply to the City of Belle Isle Building Department for a building permit  
(type of permit)  
 for work to be performed at the following location:

1641 Overlook Road, Belle Isle, FL  32809  32812 and  
(street address)

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

Certified Contractor's Printed Name: Lori Hodgskin

License Number: CBC057656

Certified Contractor's Signature: *Lori Hodgskin*  
 .....

The foregoing instrument was acknowledged before me this 12 days of April of 20 17

by Lori Hodgskin who is personally known to me or who produced

\_\_\_\_\_ as identification and who did not take an oath.

State of Florida  
 County of Orange

*[Signature]*  
 Notary Public, Orange County, Florida



(seal)



**Environmental Protection Division**

**SHORELINE  
ALTERATION/DREDGE &  
FILL PERMIT**

**Permit No:** SADF-16-11-015

**Date Issued:** April 6, 2017

**A Permit Authorizing:**

The construction of a new vinyl sheet pile seawall and rip rap on the property, described below, adjacent to Lake Conway.

This permit is issued pursuant to Orange County Code, Chapter 33, Lake Conway Water and Navigation Control District, Section 33-37, and is subject to the Permit Conditions provided on the following pages:

**Activity Location:**

1641 Overlook Road, Belle Isle, Florida 32809  
Parcel ID: 25-23-29-5884-10-020  
Property Description: NELA ISLE M/55 LOTS 2 3 & 4 & ALL LAND TO WATERS OF LAKE BLK J  
Orange County Commission District: 3

**Permittee / Authorized Entity:**

Karen M Ashton Trust  
c/o Sheila Cichra  
Streamline Permitting, Inc.  
E-mail: [sheilacichra@gmail.com](mailto:sheilacichra@gmail.com)

**The Board of County Commissioners (BCC) approved this permit on March 7, 2017, subject to the following conditions:**

Specific Conditions

1. This permit shall become final and effective upon expiration of the thirty (30) calendar day appeal period following the date of issuance, unless an appeal has been filed within this timeframe. Any appeal shall stay the effective date of this permit until all appeals are resolved.
2. Construction activities shall be completed in accordance with the 'Construction Plans' submitted by Streamline Permitting, Inc., dated as received on February 3, 2017, by the Environmental Protection Division (EPD). The permitted work must be commenced within six (6) months and completed within one year from the date of issuance of the permit. In the event that project has not commenced within six (6) months or completed within a year this permit is void.
3. Any permit extensions for the approved construction may be approved by way of Consent Agenda if there are no changes.
4. This permit does not authorize any dredging or filling except that which is necessary for the actual construction of the seawall.
5. The native aquatic plantings must be implemented in accordance with the 'Planting Plan' submitted by Streamline Permitting, Inc., dated as received on January 24, 2017, by EPD. New plantings must be initiated within thirty (30) days of completion of the seawall. After one year, if eighty (80) percent coverage of native species is not established, additional replanting will be required.
6. The permittee must install riprap at a two (Horizontal): one (Vertical) slope at both ends of the seawall to protect the adjacent properties.
7. The permittee may maintain a clear access corridor below the Normal High Water Elevation (NHWE), not to exceed thirty (30) feet in width, of sufficient length waterward from the shoreline, to allow access to open water. Any existing or future structures such as a boat dock must be located within this corridor.
8. Native vegetation may not be removed from the shoreline outside of the specified access corridor, specific to project.
9. A copy of this permit, along with EPD stamped and approved drawings should be taken to the Orange County (OC) Zoning Division at 201 South Rosalind Avenue for approval in order to obtain a building permit. For further information, please contact the OC Zoning Division at (407) 836-5525.
10. After approved by OC Zoning, the certified site plans will need to be reviewed by the OC Building Division in order to obtain a building permit. For further information, please contact the OC Division of Building Safety at (407) 836-5550.

General Conditions:

11. Subject to the terms and conditions herein, the permittee is hereby authorized to perform or cause to be performed, the impacts shown on the application and approved drawings, plans, and other documents attached hereto or on file with EPD. The permittee binds itself and its successors to comply with the provisions and conditions of this permit. If EPD determines at any time that activities, including without limitation the performance of the required mitigation, are not in accordance with the conditions of the permit, work shall cease and the permit may be revoked immediately by the Environmental Protection Officer. Notice of the revocation shall be provided to the permit holder promptly thereafter.
12. Prior to construction, the permittee shall clearly designate the limits of construction on-site. The permittee shall advise the contractor that any work outside the limits of construction, including clearing, may be a violation of this permit.
13. Construction plans shall be submitted to EPD prior to initiating any construction activities for review and approval. The construction plans shall include, but are not limited to, a site plan clearly depicting the location and acreage of the impacts and preservation.
14. The permittee shall require the contractor to maintain a copy of this permit, complete with all approved drawings, plans, conditions, attachments, exhibits, and modifications in good condition at the construction site. The permittee shall require the contractor to review the permit prior to commencement of the activity authorized by this permit. The complete permit shall be available upon request by Orange County staff.
15. Issuance of this permit does not warrant in any way that the permittee has riparian or property rights to construct any structure permitted herein and any such construction is done at the sole risk of the permittee. In the event that any part of the structure(s) permitted herein is determined by a final adjudication issued by a court of competent jurisdiction to encroach on or interfere with adjacent property owner's riparian or other property rights, permittee agrees to either obtain written consent or to remove the offending structure or encroachment within sixty days from the date of the adjudication. Failure to comply shall constitute a material breach of this permit and shall be grounds for its immediate revocation.
16. This permit does not release the permittee from complying with all other federal, state, and local laws, ordinances, rules and regulations. Specifically, this permit does not eliminate the necessity to obtain any required federal, state, local and special district authorizations prior to the start of any activity approved by this permit. This permit does not convey to the permittee or create in the permittee any property rights, or any interest in real property, nor does it authorize any entrance upon or activities upon property which is not owned or controlled by the permittee, or convey any rights or privileges other than those specified in the permit and Chapter 15, Article VI of the Orange County Code. If these permit conditions, conflict with those of any other regulatory agency the permittee shall comply with the most stringent conditions. Permittee shall immediately notify EPD of any conflict between the conditions of this Permit and any other permit or approval.
17. The permittee is hereby advised that Section 253.77, Florida Statutes, states that a person may not commence any excavation, construction, or other activity involving the use of sovereign or other lands of the state, the title to which is vested in the Board of Trustees of the Internal



Improvement Trust Fund, without obtaining the required lease, license, easement or other form of consent authorizing the proposed use. Therefore, the permittee is responsible for obtaining any necessary authorizations from the Board of Trustees prior to commencing activity on sovereignty lands or other state-owned lands.

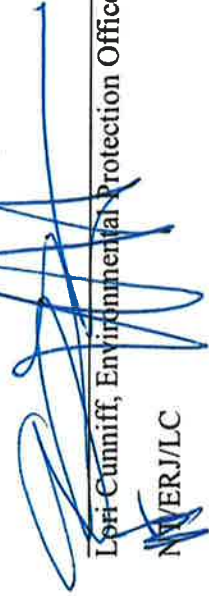
18. Should any other regulatory agency require changes to the property, permitted activities, or approved mitigation, the permittee shall provide written notification to EPD of the change prior to implementation so that a determination can be made whether a permit modification is required.
19. EPD shall have final construction plan approval to ensure that no modification has been made during the construction plan process.
20. The permittee shall immediately notify EPD in writing of any previously submitted information that is later discovered to be inaccurate.
21. EPD staff, with proper identification, shall have permission to enter the site at any reasonable time to either, at a minimum: inspect, sample, or test to ensure conformity with the plans and specifications approved by the permit.
22. The permittee shall hold and save the County harmless from all damages, claims or liabilities, which may arise because of the activities authorized by the permit.
23. All costs, including attorney's fees, incurred by the County in enforcing the terms and conditions of this permit shall be required to be paid by the permittee.
24. Permittee agrees that any dispute arising from matters relating to this permit shall be governed by the laws of Florida, and initiated only in Orange County.
25. Turbidity and sediments shall be controlled to prevent violations of water quality pursuant to Rule 62-302.500, 62-302.530(70) and 62-4.242 Florida Administrative Code (FAC). Best Management Practices, as specified in the Florida Stormwater, Erosion, and Sedimentation Control Inspector is Manual, shall be installed and maintained at all locations where the possibility of transferring suspended solids into wetlands and/or surface waters due to the permitted activity. If site-specific conditions require additional measures, then the permittee shall implement them as necessary to prevent adverse impacts to wetlands and/or surface waters.
26. Pursuant to Section 125.022, Florida Statutes, issuance of this permit by the County does not in any way create any rights on the part of the applicant to obtain a permit from a state or federal agency and does not create any liability on the part of the County for issuance of the permit if the applicant fails to obtain requisite approvals or fulfill the obligations imposed by a state or federal agency or undertakes actions that result in a violation of state or federal law.
27. Pursuant to Section 125.022, the applicant shall obtain all other applicable state or federal permits before commencement of development.

If you should have any questions concerning this review, please contact Julee Sims at (407) 836-1494 or [Julee.Sims@ocfl.net](mailto:Julee.Sims@ocfl.net).

Project Manager:

  
\_\_\_\_\_  
Julee Sims, Senior Environmental Specialist

Authorized for the Orange County Environmental Protection Division by:

  
\_\_\_\_\_  
Lori Cunniff, Environmental Protection Officer  
NVERJ/LC

Enclosure(s): Construction Notice  
Approved Site Plans

c: Karen M Ashton Trust, 1641 Overlook Road, Orlando, Florida 32809  
[Courtney Knickerbocker, FDEP, Courtney.Knickerbocker@dep.state.fl.us](mailto:Courtney.Knickerbocker@dep.state.fl.us)



# Construction Notice

---

Approximate Starting Date: \_\_\_\_\_

Approximate Completion Date: \_\_\_\_\_

Permit Number/Name: SADF-16-11-015, Ashton - 1641 Overlook Road

Remarks:

Agent/Consultant/Permittee: \_\_\_\_\_

Date: \_\_\_\_\_

Complete and Return to:

By Email: [Liz.Johnson@ocfl.net](mailto:Liz.Johnson@ocfl.net)

By Fax: 407-836-1499, Attn: Elizabeth R. Johnson,

By Mail: Orange County Environmental Protection Division

3165 McCrory Place, Suite 200

Orlando, FL 32803



**City of Belle Isle**  
 1600 Nela Avenue, Belle Isle, FL 32809  
 Tel 407-851-7730 \* Fax 407-240-2222 \* [www.cityofbelleislefl.org](http://www.cityofbelleislefl.org)  
**Boat Dock Zoning Review Application**  
**PLEASE REFER TO [WWW.MUNICODE.COM](http://WWW.MUNICODE.COM) FOR CODE COMPLIANCE**  
**SUBMIT LANDUSE APPLICATION WITH THIS FORM**

Date <i>4/12/17</i>	Permit #
Cost <i>\$50,000.00</i>	

<b>APPLICANT</b> Property Owner's Name <i>Karen Astor</i>	<b>SITE ADDRESS</b> Site Address <i>1641 Overlook Road</i>
Mailing Address <i>1641 Overlook Road</i>	Land Use Classification <i>0001</i>
City, State, Zip <i>Belle Isle, FL 32809</i>	Zoning District <i>R-1-AA</i>
<b>REQUIREMENTS TO BE SUBMITTED WITH APPLICATION</b> <ul style="list-style-type: none"> <li>• \$165.00 ZONING APPLICATION FEE</li> <li>• DEP CLEARANCE FORM</li> </ul>	Legal Description LOT: <i>2, 3 + 4</i>
COMPLETION OF AN APPLICATION IS REQUIRED AND APPLICANT IS SUBJECT TO ALL COUNTY, STATE AND/OR EPD REQUIREMENTS AND FEES. APPROVAL OF THIS APPLICATION DOES NOT GUARANTEE THE ISSUANCE OF A BUILDING PERMIT FROM THE CITY'S BUILDING DEPARTMENT.	Block: <i>J</i>
	Subdivision: <i>Nela Isle</i>

**PROPOSED BOAT DOCK INFORMATION**

Length Waterward from 86.9 NHWE Contour Line: <i>0'</i>
Square Footage Waterward from 86.9 NHWE contour line <i>0'</i>
Side Setback from Property Line <i>0' + 15"</i>
Total Square Footage

Applicant/Agent Signature 
-------------------------------

1. Applicant brings completed application packet:
  - a. \$165.00 review fee
  - b. 3 sets of drawings, and 3 boundary surveys to City Hall.
  - c. Application packets are available on our website [www.cityofbelleislefl.org](http://www.cityofbelleislefl.org) or can be picked up at City Hall - Monday thru Friday from 8:00am to 5:00pm.
2. City's Planning & Zoning reviews documents and issues one of the following:
  - a. Letter indicating zoning compliance with the Code
  - b. Letter indicating additional documentation is needed and/or reason the application is not in compliance with the Code.
3. **If the application meets criteria** for zoning compliance, it will be forwarded to the Building Department for review and completion of the permit process.  
**If the application does not meet the requirements** of the Belle Isle Code, (i.e. setbacks, height, etc) the applicant is faxed a copy of the review letter citing the reasons for non-compliance with the Code and is given 2 options:
  - a. Applying for a variance from the City of Belle Isle Planning and Zoning Board
  - b. Revising the drawings to meet the requirements of the Code.
5. If the applicant chooses to apply for the variance, the City provides assistance with the variance process. Please call City Hall at 407-851-7730 for further information and deadline dates.
6. If the applicant chooses to make revisions to the drawings to meet the requirements of the Code, the additional information is reviewed for compliance. Once the application meets criteria for zoning compliance, it will be forwarded to the Building Department for review and completion. The City keeps one complete set of drawings, a copy of the application and the engineering review letter.
7. The Developer or Property Owner must pay all costs and fees associates with the City Engineer's and/or the City Attorney's review of the applicants application and plans.

**PLEASE REFER TO [WWW.MUNICODE.COM](http://WWW.MUNICODE.COM) FOR CODE COMPLIANCE**

**RECEIVED**  
**FEB 03 2017**  
 BY: EPD

**MICHAEL THOMPSON**

**'LAT OF SURVE**

**DESCRIPTION**

LOTS 2, 3 AND 4, BLOCK "J", NELA ISLE MAINLAND SECTION, AS RECORDED IN PUBLIC RECORDS OF ORANGE COUNTY, FLORIDA.



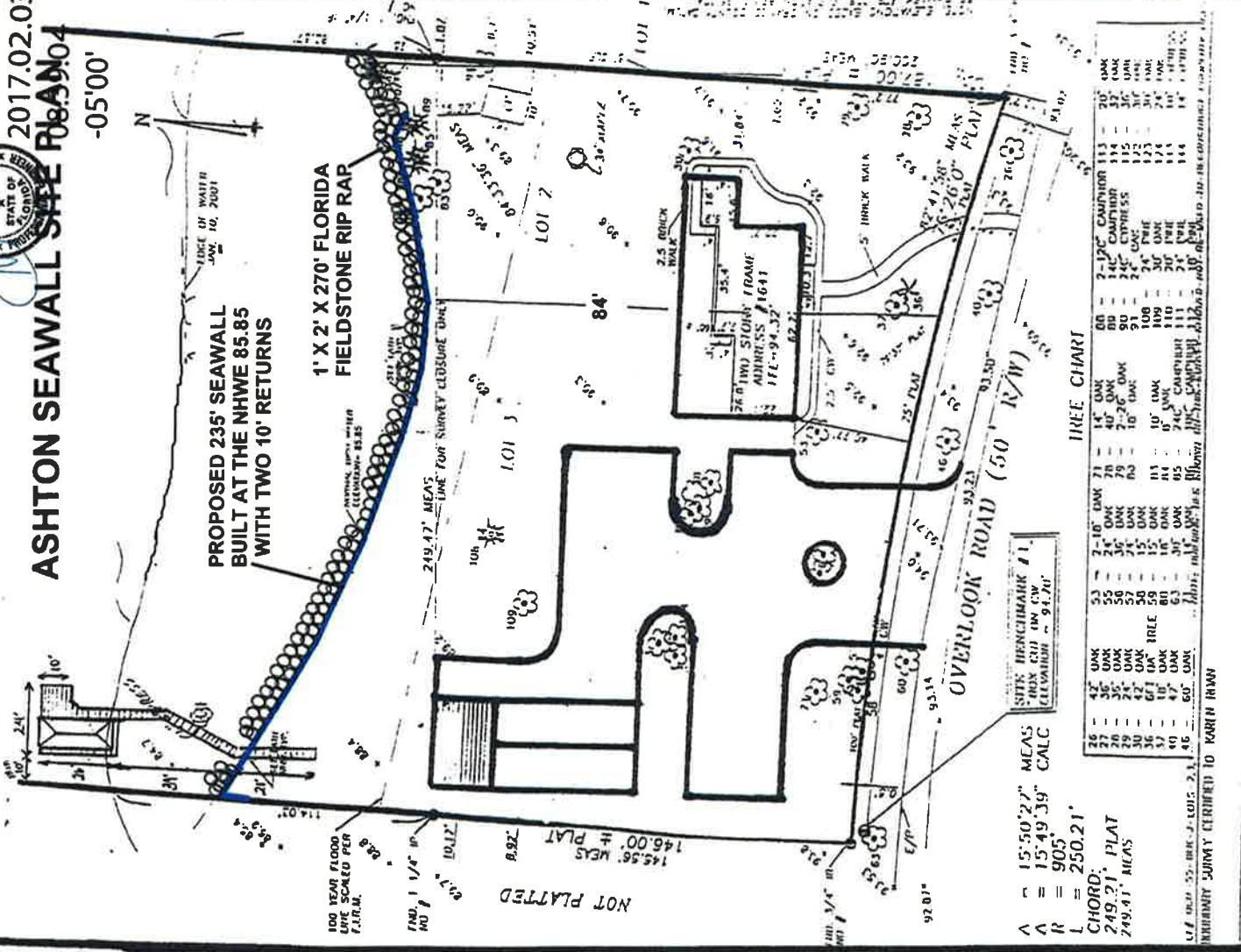
AP. E.: 47509

ASHTON SEAWALL SITE PLAN  
 2017.02.03  
 PAN.04

-05'00"

**PROPOSED 235' SEAWALL  
 BUILT AT THE NWWE 85.85  
 WITH TWO 10' RETURNS**

**1' X 2' X 270' FLORIDA  
 FIELDSTONE RIP RAP**



SITE BENCHMARK #1  
 IRON CHD ON C/P  
 ELEVATION = 91.70'

A = 15'50.27" MEAS  
 A = 15'49.39" CALC  
 R = 905'  
 L = 250.21'

**TREE CHART**

76	42'	UNK
77	35'	UNK
78	20'	UNK
79	20'	UNK
80	30'	UNK
81	30'	UNK
82	33'	UNK
83	40'	UNK
84	60'	UNK
85	35'	UNK
86	35'	UNK
87	55'	UNK
88	40'	UNK
89	35'	UNK
90	30'	UNK
91	35'	UNK
92	15'	UNK
93	10'	UNK
94	10'	UNK
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111	20'	UNK
112	20'	UNK
113	20'	UNK
114	20'	UNK
115	20'	UNK
116	20'	UNK
117	20'	UNK
118	20'	UNK
119	20'	UNK
120	20'	UNK

CHORD:  
 249.21' PLAT  
 249.41' MEAS

**APPROVED BY ENVIRONMENTAL PROTECTION DIV ORANGE COUNTY**  
 DATE: 01/02/2017  
 INITIAL: J. Lewis  
 SADD-16-11-015

**APPROVED BY ENVIRONMENTAL PROTECTION DIV ORANGE COUNTY**  
 DATE: 01/02/2017  
 INITIAL: J. Lewis  
 SADD-16-11-015

**IN ADDITION TO PUBLIC REGULATIONS WHICH ORANGE COUNTY ENFORCES, BE ADVISED THAT THERE MAY BE PRIVATE RESTRICTIONS OR APPROVED THIS PROJECT. PLEASE REVIEW YOUR DEED RESTRICTIONS AND/OR CONSULT WITH YOUR HOMEOWNERS ASSOCIATION OR ARCHITECTURAL REVIEW BOARD.**

**REVOLUTIONS**  
 REVISION: 03/10/2017  
 1. 02/03/17  
 2. 02/03/17  
 3. 02/03/17

**LEGEND**

CL	CALCULATED
CC	CONCRETE
CF	CORNER
CP	CONCRETE PILE
CS	CONCRETE SILENT PILE
CU	CORNER UNION
CV	CONCRETE VALVE
DC	DRIVEWAY
DL	DRIVEWAY LIGHT
EM	ELECTRICAL
EV	ELECTRICAL VALVE
FM	FOUNDATION
FR	FLOOR
GA	GRAVEL
GR	GRASS
HA	HAIR
HW	HAIR WOOD
IR	IRON
IT	IRON TIE
LC	LEACH
LO	LOG
LS	LOG SILL
MS	MASONRY
PA	PAVEMENT
PI	PILE
PL	POST
PP	PILE POINT
PS	PILE SHIELD
RA	RIP RAP
RE	REBAR
RI	RIP RAP
SE	SEWER
SP	SEWER PILE
ST	STEEL
TA	TANK
TR	TRUSS
UN	UNKNOWN
UP	UNDER PILE

**ACCURIGHT SURVEYS**  
 of Orlando Inc., L.L.C. 4475  
 Orlando, Florida 32809  
 PHONE (407) 894-6314  
 FAX (407) 897-3777

ROBERT C. JOHNSON P.S.M. 5551  
 P.L.S. 16909  
 ALL WORK UNDER HIS SIGNATURE AND THE SEALING BASED  
 ON THE BASIS OF HIS FLORIDA LICENSED SURVEYOR AND MAPPING  
 ENGINEER.

DATE: AUGUST 23, 1995  
 SCALE: 1" = 40'  
 DRAWN BY: JPK

THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS AS REQUIRED BY CHAPTER 62B-7, FLORIDA STATUTES IF LAND SURVEYORS PURSUANT TO SECTION 62B-27, FLORIDA STATUTES.

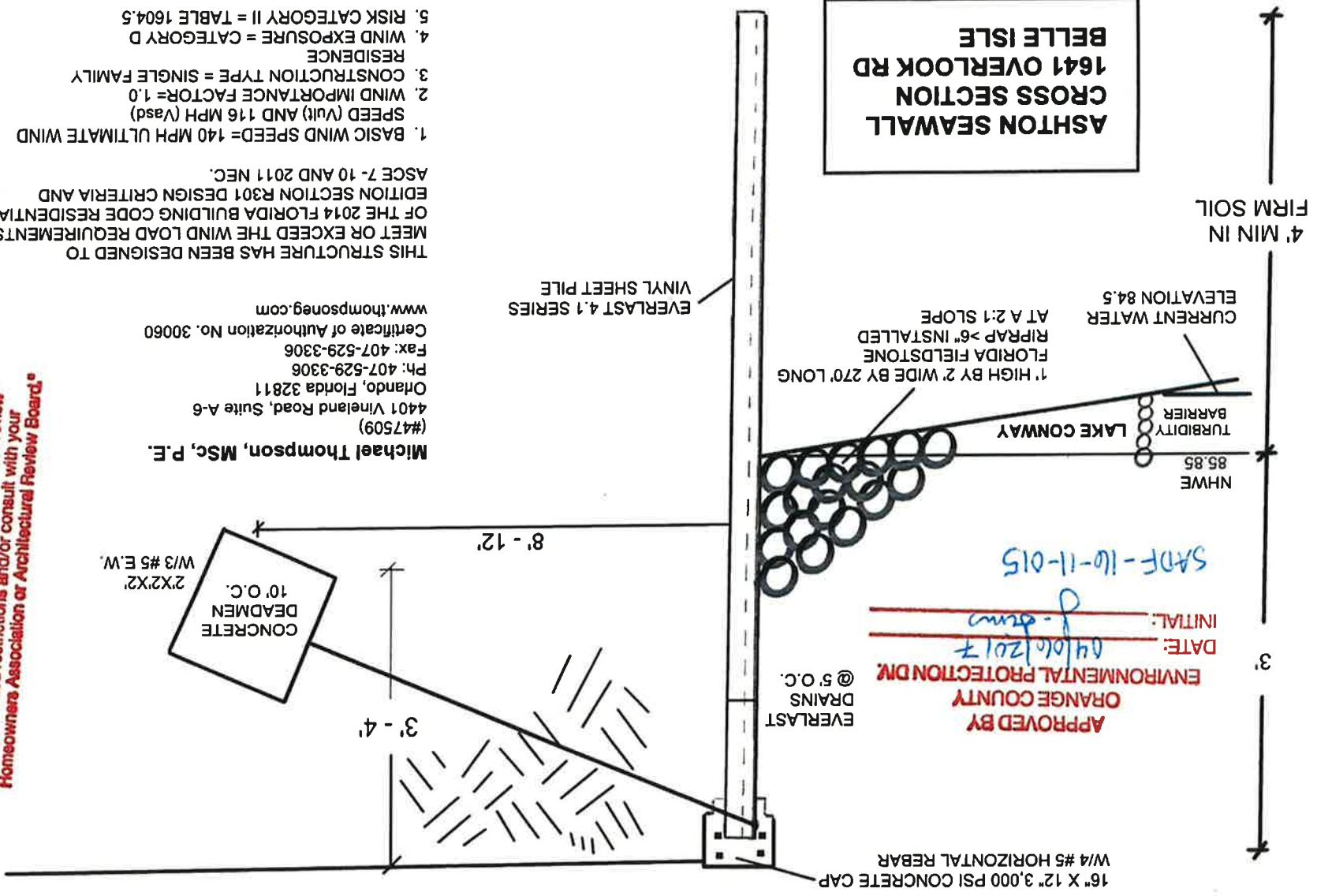
THIS BUILDING/LOT IS NOT IN A FLOOD HAZARD AREA (ZONE X, BASED ON (L)FD INSURANCE RISK MAP NO. 10, 2001) UNDER ORANGE COUNTY, FLORIDA.

**RECEIVED**  
 FEB 03 2017  
 BY: EPD

235' LONG BY 3' HIGH VINYL SEAWALL WITH CONCRETE CAP



MICHAEL A. THOMPSON  
 P.E. 47509  
 2017.02.03  
 08:38:42-05'00'



**ASHTON SEAWALL  
 CROSS SECTION  
 1641 OVERLOOK RD  
 BELLE ISLE**

Michael Thompson, M.Sc., P.E.  
 (#47509)  
 4401 Vineand Road, Suite A-6  
 Orlando, Florida 32811  
 Ph: 407-529-3306  
 Fax: 407-529-3306  
 Certificate of Authorization No. 30060  
 www.thompsonsg.com

1. BASIC WIND SPEED= 140 MPH ULTIMATE WIND SPEED (Vult) AND 116 MPH (Vasd)
  2. WIND IMPORTANCE FACTOR= 1.0
  3. CONSTRUCTION TYPE = SINGLE FAMILY RESIDENCE
  4. WIND EXPOSURE = CATEGORY D
  5. RISK CATEGORY II = TABLE 1604.5
- THIS STRUCTURE HAS BEEN DESIGNED TO MEET OR EXCEED THE WIND LOAD REQUIREMENTS OF THE 2014 FLORIDA BUILDING CODE RESIDENTIAL EDITION SECTION R301 DESIGN CRITERIA AND ASCE 7- 10 AND 2011 NEC.

**In addition to public regulations which Orange County enforces, be advised that there may be other private restrictions or approval requirements that will affect your ability to complete this project. Please review your deed restrictions and/or consult with your Homeowners Association or Architectural Review Board.**

## Susan Manchester

---

**From:** April Fisher [AFisher@cobifi.com]  
**Sent:** Friday, April 21, 2017 2:44 PM  
**To:** Susan Manchester  
**Cc:** CobiPermits; Yolanda Quiceno; YQuiceno Relay  
**Subject:** RE: 1641 Overlook Rd - seawall permit 2016-04-046 needs zoning approval - Hodgskin Outdoor Living

Hi Susan,

There is no zoning jurisdiction over seawalls nor any provisions in the zoning code so this is one I do not need to review.

Thank you,

April

April Fisher, AICP  
Planning Consultant  
Fisher Planning and Development Services, Inc.  
[aprilfisher73@gmail.com](mailto:aprilfisher73@gmail.com)  
407-494-8789

---

**From:** Susan Manchester [SManchester@universalengineering.com]  
**Sent:** Friday, April 14, 2017 8:17 AM  
**To:** April Fisher  
**Cc:** CobiPermits; Yolanda Quiceno  
**Subject:** 1641 Overlook Rd - seawall permit 2016-04-046 needs zoning approval - Hodgskin Outdoor Living

Attached for review.

Thanks so much,

[[cid:image001.jpg@01D2B4F7.8E021A70](#)]  
Susan Manchester  
Permit Administration  
Building Inspection Department  
Universal Engineering Sciences, Inc.  
3532 Maggie Blvd.  
Orlando, FL 32811  
Phone: 407-581-8161  
Fax: 407-581-0313  
Email: [smanchester@universalengineering.com](mailto:smanchester@universalengineering.com)

[[cid:image002.jpg@01D2B4F7.8E021A70](#)]

Disclaimer



**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD**  
2601 BLAIR STONE ROAD  
TALLAHASSEE FL 32399-0783 (850) 487-1395

HODGSKIN, LORIA  
HODGSKIN OUTDOOR LIVING INC  
1331 GREEN FOREST CT STE 1  
WINTER GARDEN FL 34787

**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](http://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!



**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND  
PROFESSIONAL REGULATION**

CBC057656 ISSUED: 07/05/2016

CERTIFIED BUILDING CONTRACTOR  
HODGSKIN, LORIA  
HODGSKIN OUTDOOR LIVING INC

IS CERTIFIED under the provisions of Ch. 489 FS  
Expiration date AUG 31, 2018 L1607050000833

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

<b>LICENSE NUMBER</b>	CBC057656
-----------------------	-----------

The BUILDING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2018

HODGSKIN, LORIA  
HODGSKIN OUTDOOR LIVING INC  
1331 GREEN FOREST COURT  
SUITE 1  
WINTER GARDEN FL 34787







HODSOUT-01

SULLIVANPA

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/29/2016

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 have ADDITIONAL INSURED provisions or 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).

<b>PRODUCER</b> Insurance Office of America, Inc. 1855 West State Road 434 Longwood, FL 32750		<b>CONTACT NAME:</b>	
		<b>PHONE (A/C. No. Ext.):</b> (407) 788-3000	<b>FAX (A/C. No.):</b> (407) 788-7933
		<b>E-MAIL ADDRESS:</b>	
		<b>INSURER(S) AFFORDING COVERAGE</b>	
		<b>INSURER A :</b> Continental Insurance Company	<b>NAIC #</b> 35289
		<b>INSURER B :</b> National Fire Insurance Co of Hartford	20478
		<b>INSURER C :</b> American Interstate Insurance Company of Texas	12228
		<b>INSURER D :</b> Continental Casualty Company	20443
		<b>INSURER E :</b>	
		<b>INSURER F :</b>	

### COVERAGES

REVISION NUMBER:

INSR LTR	TYPE OF INSURANCE	ADOL SUBR INSD. WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
<b>A</b>	<b>X</b> COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		ML9780666	10/14/2016	01/01/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (EA. OCCURRENCE) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
<b>B</b>	<b>AUTOMOBILE LIABILITY</b> X ANY AUTO OWNED AUTOS ONLY X HIRER AUTOS ONLY SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY <input checked="" type="checkbox"/>		6016520738	10/14/2016	01/01/2018	COMBINED SINGLE LIMIT (EA. OCCURRENCE) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
<b>A</b>	<b>X</b> UMBRELLA LIAB EXCESS LIAB DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		EX0121936	10/14/2016	01/01/2018	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
<b>C</b>	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/ MEMBER EXCLUDED? (Mandatory in RI) If yes, describe under DESCRIPTION OF OPERATIONS below		01WC16A74411	01/01/2017	01/01/2018	X PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
<b>D</b>	<b>Equipment</b>		6016520321	10/14/2016	01/01/2018	Rented/Leased \$ 50,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)

### CERTIFICATE HOLDER

### 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.

City of Belle Isle  
1600 Nela Ave.  
Orlando, FL 32809

AUTHORIZED REPRESENTATIVE

ACORD 25 (2016/03)

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The ACORD name and logo are registered marks of ACORD



CITY OF WINTER GARDEN  
300 WEST PLANT STREET  
WINTER GARDEN, FL 34787  
P: 407.656.4111  
WWW.WINTERGARDEN-FL.GOV

WINTER GARDEN • A charming little city with a juicy past.

## LOCAL BUSINESS TAX RECEIPT FOR CITY OF WINTER GARDEN

Business Name:	HODGSKIN OUTDOOR LIVING INC	Location:	1331 GREEN FOREST CT S 1
Receipt No:	17-00004271	Class:	BUILDING CONTRACTOR
Tax/Add'l Tax:	\$ 86.00 \$	Issue Date:	September 27, 2016
Late Penalty:	\$ 0.00	Expires:	September 30, 2017
Total Paid:	\$0.00	Restrictions:	<b>MUST COMPLY WITH LOCAL BUSINESS TAX REQUIREMENTS</b>
		Comments:	<b>CBC0057656</b>

HODGSKIN OUTDOOR LIVING INC  
PO BOX 843

OC0EE FL 34761

BUSINESS TAX RECEIPT MUST BE POSTED IN CONSPICUOUS PLACE AT ALL TIMES.

### \*\*\*PLEASE NOTE THE TOP PORTION IS YOUR LOCAL BUSINESS TAX RECEIPT AND IS PAID THRU SEPTEMBER 30th OF NOTED YEAR ABOVE \*\*\*

1. Business Tax Year is from October 1<sup>st</sup> through September 30<sup>th</sup>. Tax fees are prorated after April 1<sup>st</sup> as a half-year fee.
2. All new commercial business tax must be inspected by the Fire Department to meet all applicable state and city code requirements. You will be contacted to make arrangements for your inspection.
3. An Orange County Business Tax must be paid **AFTER YOU HAVE BEEN ISSUED THE WINTER GARDEN BUSINESS TAX RECEIPT**. They are located at 201 S. Rosalind Ave, 2<sup>nd</sup> Floor, Orlando, FL (407) 836-5650.

**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  
MFL authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

5000 BUSINESS OFFICE      2016      \$30.00      2      EMPLOYEE      EXPIRES      9/30/2017      5000-0003341

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

HODGSKIN LORI ANNE PRESIDENT

HODGSKIN OUTDOOR LIVING INC  
HODGSKIN LORI ANNE PRESIDENT  
P O BOX 843  
OCOE FL 34761-0843

1331 GREEN FOREST CT #1  
C - WINTER GARDEN, 34787

PAID: \$30.00 0099-00757547 9/26/2016

**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  
MFL authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

5000 BUSINESS OFFICE      2016      \$30.00      2      EMPLOYEE      EXPIRES      9/30/2017      5000-0003341

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

HODGSKIN LORI ANNE PRESIDENT

HODGSKIN OUTDOOR LIVING INC  
HODGSKIN LORI ANNE PRESIDENT  
P O BOX 843  
OCOE FL 34761-0843

1331 GREEN FOREST CT #1  
C - WINTER GARDEN, 34787

PAID: \$30.00 0099-00757547 9/26/2016



This receipt is official when validated by the Tax Collector.