



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: replace one garage door size for size
comments: NONE .
Project Information
 Address: 2812 Montmart Dr, Belle Isle, FL 32812
 Parcel ID: 18-23-30-4391-04-560
 Property Owner: Heizmann, Emil
 Phone Number: 407 721 7931

 Company Name: Precision Door Service
 Contractor Name: Walden, William
 License Number: CRC1330671
 Address: 244 O'Brien Rd, Fern Park, FL 32730
 Phone Number: 321 284 8290

Permit Number: 2017-04-016
Date of Application: 04/04/2017
Date Permit Issued: 04/04/2017

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	\$
UNIVERSAL ENG - BUILDING FEES	
Cert of Occ	\$
Demo	\$
Building	\$
Fence	\$
Driveway	\$
Shed	\$
Window(s)	\$
Door(s)	\$49.50
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 \$53.50	
Date Paid	4-4-17
CC or Check #	USA 701
Amount Paid	53.50
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 (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

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)



City of Belle Isle

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

RECEIVED
APR 04 2017

Building Permit (Land Use) Application

DATE: 03-21-17

PERMIT # 2017-04-016

PROJECT ADDRESS 2812 MONTMART DR Belle Isle, FL 32809 32811

PROPERTY OWNER EMIL HEIZMANN PHONE 4077217931 VALUE OF WORK (labor & material) \$ 2498.90

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

REPLACE EXISTING GARAGE DOOR SIZE FOR SIZE

Please provide information, if applicable.

- 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: 18-23-30-4391-04-560

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.

Wind Exposure Category: B C D

PLANNING & ZONING APPROVAL: _____
DATE _____

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

CONSTRUCTION TYPE _____

OCCUPANCY GROUP _____ Comm Res: _____ Single Fam _____ Multi Fam

#BLDG. _____ #UNITS _____ #STORIES _____ TOTAL SQ.FT. _____

MAX. FLOOR LOAD _____ MAX. OCCUPANCY _____

MIN. FLOOD ELEV. _____ LOW FLOOR ELEV. _____

WATER SERVICE _____ WELL _____ SEPTIC _____

BUILDING REVIEWER ucg DATE 4-4-17

VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE [Signature] DATE 4-4-17

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.

1571K
4x2

25
F
33.2
16.50
49.50

SPRINKLERS REQ'D	Y	N	
If Required - SUBMIT COPY OF PLANS FOR FIRE REVIEW Date: Sent _____ RCD _____			
ZONING	Y	<u>N</u>	\$ _____
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)	<u>Y</u>	N	\$ <u>49.50</u>
FENCE	Y	N	\$ _____
SHED	Y	N	\$ _____
DRIVEWAY	Y	N	\$ _____
OTHER	Y	N	\$ _____
3% FL SURCHARGE			<u>4.50</u>
TOTAL			<u>53.50</u>
By Owner Form	Y	<u>NA</u>	
Notice of Commencement	Y	<u>NA</u>	
Power of Attorney	<u>Y</u>	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	



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

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

PERMIT # 2017-04-016

Owner's Name EMIL HEIZMANN
 Owner's Address 2812 MONTMART DR BELLE ISLE FL 32812

Contractor Name <u>WILLIAM WALDEN</u>	Company Name <u>PRECISION DOOR SERVICE</u>
License # <u>CRC1330671</u>	Company Address <u>244 OBRIEN RD</u>
Contact Phone/Cell <u>3212848290</u>	City, State, ZIP <u>FERN PARK FL 32730</u>
Contact Email <u>CMERINO@PRECISIONDOOR.NET</u>	Contact Fax <u>8772250658</u>

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/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.

<p>Owner Signature <u>Emil B. Heizmann</u> The foregoing instrument was acknowledged before me this <u>3/23/17</u> by <u>EMIL B. HEIZMANN</u> who is personally known to me and who produced <u>D/L</u> as identification and who did not take an oath. Notary as to Owner <u>Thomas G. Beesing</u> State of Florida County of Orange</p>	<p style="text-align: center;">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</p> <ol style="list-style-type: none"> 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. <ul style="list-style-type: none"> • 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. <p><u>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</u></p>
<p>Contractor Signature <u>William Walden</u> COMPANY NAME <u>PRECISION DOOR SERVICE</u> The foregoing instrument was acknowledged before me this <u>3/21/17</u> by <u>William Walden</u> who is personally known to me and who produced _____ as identification and who did not take an oath. Notary as to Owner <u>Charles E. Merino</u> State of Florida County of Orange</p>	



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

POWER OF ATTORNEY

Date: 03-21-17

Permit #: 2017-04-016

I hereby name and appoint CHARLES MERINO of
(print name)
Precision Door Service of Central Florida 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 residential garage door permit
(type of permit)
for work to be performed at the following location:

2812 MONTMART DR, 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: William Walden

License Number: CRC1330671

Certified Contractor's Signature: William Walden

.....
The foregoing instrument was acknowledged before me this 21 days of MARCH of 2017
by William Walden 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)



City of Belle Isle

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

Product Approval Form

DATE: 03-21-17

PERMIT # 2017-04-016

PROJECT ADDRESS 2812 MONTMART DR, Belle Isle, FL 32809 32812

As required by Florida Statute 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 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 showing PA#, approval and code edition stamped**
3. **Manufacturer's installation details from FloridaBuilding.org and requirements for each product stamped**

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
EXTERIOR DOORS				WALL PANELS			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup	AMARR	STRATFORD 3000	FL17099-1-2	Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Dbf Hung				Asphalt Shingles			
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other			
Skylights							
Other							
STRUCTURAL COMPONENTS				OTHER			
Wood Connectors							
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 William Walden

Date 3-21-17



[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



<p>FL #</p> <p>Application Type</p> <p>Code Version</p> <p>Application Status</p> <p>Comments</p> <p>Archived</p> <p>Product Manufacturer</p> <p>Address/Phone/Email</p> <p>Authorized Signature</p> <p>Technical Representative</p> <p>Address/Phone/Email</p> <p>Quality Assurance Representative</p> <p>Address/Phone/Email</p> <p>Category</p> <p>Subcategory</p> <p>Compliance Method</p> <p>Florida Engineer or Architect Name who developed the Evaluation Report</p> <p>Florida License</p> <p>Quality Assurance Entity</p> <p>Quality Assurance Contract Expiration Date</p> <p>Validated By</p> <p>Certificate of Independence</p> <p>Referenced Standard and Year (of Standard)</p> <p>Equivalence of Product Standards Certified By</p> <p>Sections from the Code</p>	<p>FL17099-R2</p> <p>Revision</p> <p>2014</p> <p>Approved</p> <p>Amarr Garage Doors/Entrematic</p> <p>165 Carriage Court</p> <p>Winston-Salem, NC 27105</p> <p>(336) 251-1307</p> <p>robert.richardson@entrematic.com</p> <p>Brandon Gentle</p> <p>brandon.gentle@amarr.com</p> <p>Brandon Gentle</p> <p>165 Carriage Court</p> <p>Winston-Salem, NC 27105</p> <p>(336) 251-1308</p> <p>brandon.gentle@amarr.com</p> <p>Danny Joyner</p> <p>Amarr Garage Doors</p> <p>165 Carriage Court</p> <p>Winston-Salem, NC 27105</p> <p>djoyner@amarr.com</p> <p>Exterior Doors</p> <p>Sectional Exterior Door Assemblies</p> <p>Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer</p> <p><input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received</p> <p>Thomas L. Shelmerdine</p> <p>PE-0048579</p> <p>Intertek Testing Services NA, Inc.</p> <p>01/01/2025</p> <p>Steven M. Urich, PE</p> <p><input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received</p> <p>FL17099 R2 COI Statement of Independence 2015.pdf</p> <table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM E330</td> <td>2002</td> </tr> <tr> <td>DASMA 108</td> <td>2005</td> </tr> </tbody> </table>	Standard	Year	ASTM E330	2002	DASMA 108	2005	<p>Reviewed for Code Compliance Universal Engineering Sciences</p>
Standard	Year							
ASTM E330	2002							
DASMA 108	2005							

Product Approval Method Method 1 Option D
 Date Submitted 08/27/2015
 Date Validated 08/27/2015
 Date Pending FBC Approval 08/30/2015
 Date Approved 10/16/2015

Summary of Products

FL #	Model, Number or Name	Description
17099.1	Amarr Stratford 3000 (Model 1500);Amarr Heritage 3000 (Model 1200);Amarr Oak Summit 3000 (Model 1550)	IRC-1516-110-15 Thru 16'-0" wide
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +18.3/-20.8 Other: Glazing not available in wind borne debris regions		Installation Instructions FL17099 R2 II IRC-1516-110-15 Drawing 7-10 FL.pdf Verified By: Thomas L. Shelmerdine PE-0048579 Created by Independent Third Party: Yes Evaluation Reports FL17099 R2 AE IRC-1516-110-15 Report 7-10 FL.pdf Created by Independent Third Party: Yes
17099.2	Amarr Stratford 3000 (Model 1500);Amarr Heritage 3000 (Model 1200);Amarr Oak Summit 3000 (Model 1550)	IRC-1516-120-15 Thru 16'-0" wide
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +21.8/-24.8 Other: Glazing not available in wind borne debris regions		Installation Instructions FL17099 R2 II IRC-1516-120-15 Drawing 7-10 FL.pdf Verified By: Thomas L. Shelmerdine PE-0048579 Created by Independent Third Party: Yes Evaluation Reports FL17099 R2 AE IRC-1516-120-15 Report 7-10 FL.pdf Created by Independent Third Party: Yes
17099.3	Amarr Stratford 3000 (Model 1500);Amarr Heritage 3000 (Model 1200);Amarr Oak Summit 3000 (Model 1550)	IRC-1518-110-15 Thru 18'-0" wide
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +18.2/-20.6 Other: Glazing not available in wind borne debris regions		Installation Instructions FL17099 R2 II IRC-1518-110-15 Drawing 7-10 FL.pdf Verified By: Thomas L. Shelmerdine PE-0048579 Created by Independent Third Party: Yes Evaluation Reports FL17099 R2 AE IRC-1518-110-15 Report 7-10 FL.pdf Created by Independent Third Party: Yes
17099.4	Model 1000	IBC-1009-132-00 Thru 9'-2" wide
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +28.1/-29.5 Other: Glazing not available in wind borne debris regions		Installation Instructions FL17099 R2 II IBC-1009-132-00 Drawing 7-10 FL.pdf Verified By: Thomas L. Shelmerdine PE-0048579 Created by Independent Third Party: Yes Evaluation Reports FL17099 R2 AE IBC-1009-132-00 Report 7-10 FL.pdf Created by Independent Third Party: Yes
17099.5	Stratford (M600); Heritage (M950); Oak Summit (M650)	IRC-6016-130-15-P Thru 16'-0" wide
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +25.6/-29.1 Other: Glazed with polycarbonate Lexan 9030; Glazing not available in wind borne debris regions		Installation Instructions FL17099 R2 II IRC-6016-130-15-P Drawing 7-10 FL.pdf Verified By: Thomas L. Shelmerdine PE-0048579 Created by Independent Third Party: Yes Evaluation Reports FL17099 R2 AE IRC-6016-130-15-P Report 7-10 FL.pdf Created by Independent Third Party: Yes

[Back](#) [Next](#)

Contact Us :: 2601 Blair Stone Road, Tallahassee FL 32399 Phone: 850-487-1824

The State of Florida is an AA/EEO employer. Copyright 2007-2013 State of Florida. :: Privacy Statement :: Accessibility Statement :: Refund Statement

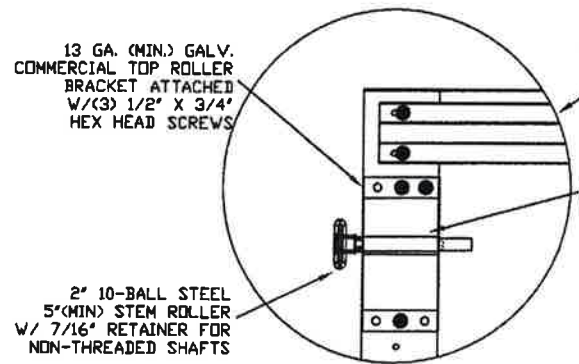
Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:

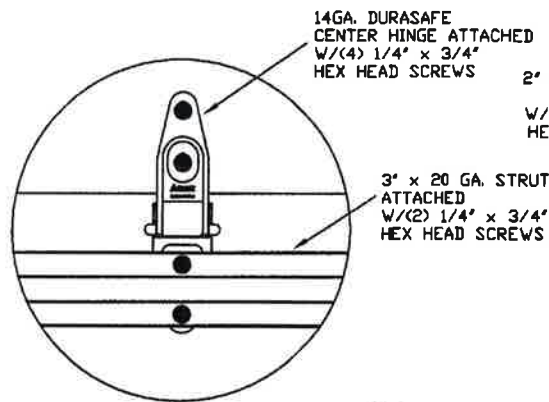


Credit Card
Safe

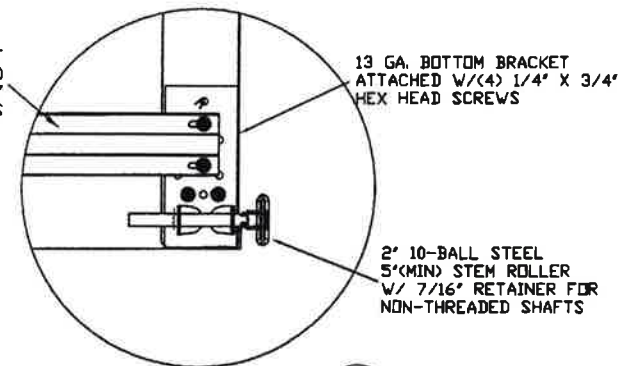




TYPICAL TOP FIXTURES ①
N.T.S.



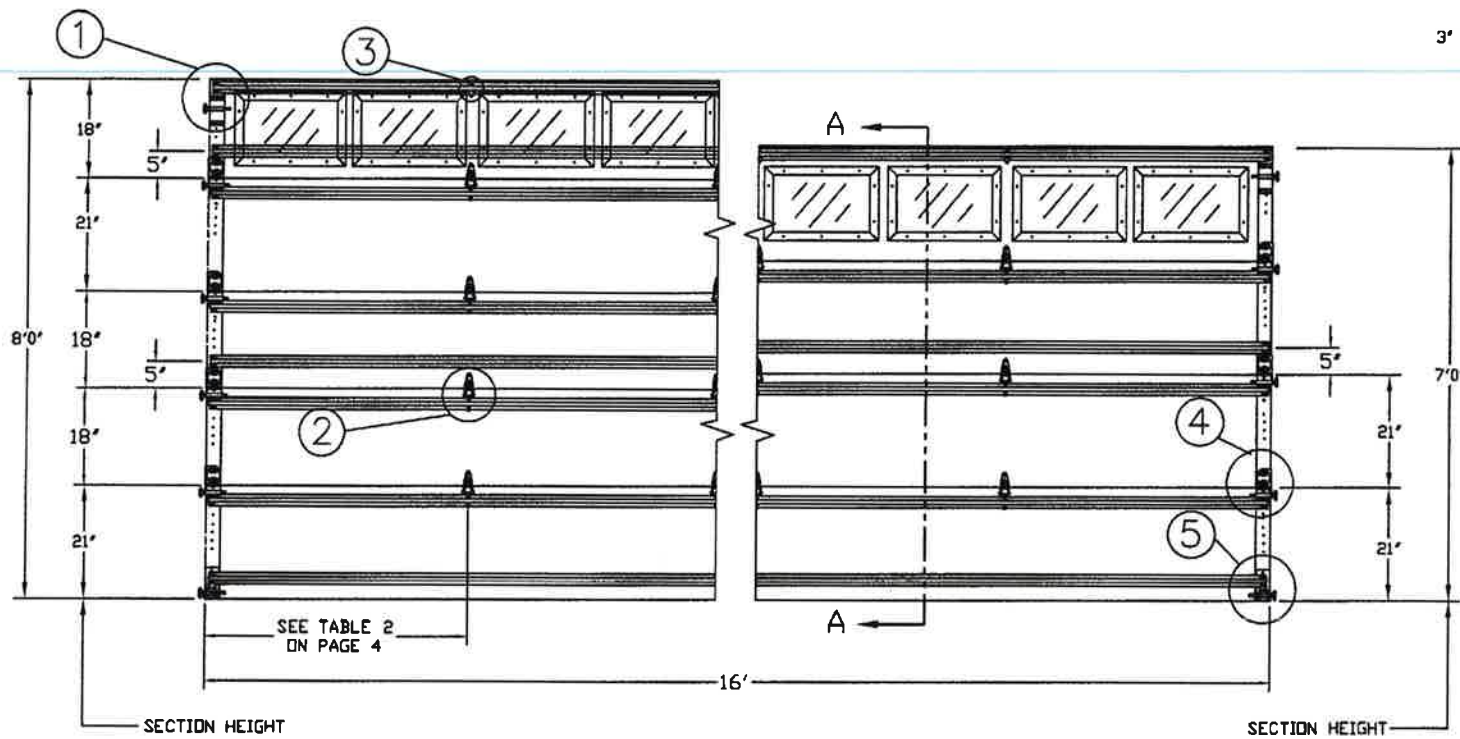
TYPICAL DURASAFE CENTER HINGE ②
N.T.S.



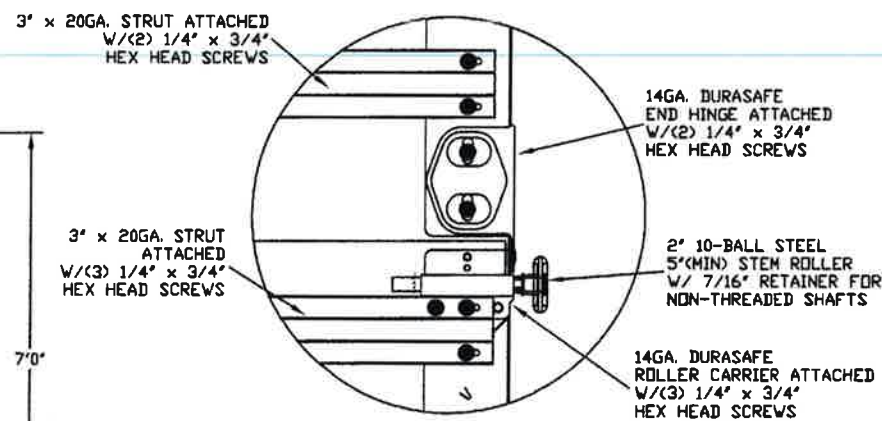
TYPICAL BOTTOM BRACKET ⑤
N.T.S.

SPECIFICATIONS AND NOTES

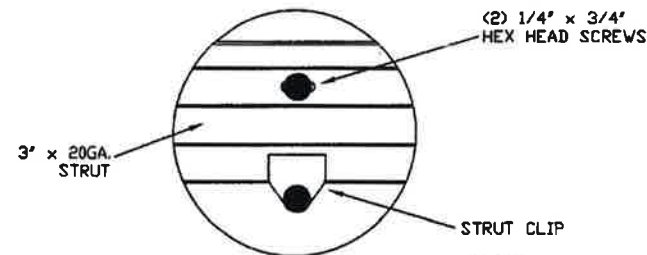
1. ALL THE LOAD FROM THE DOOR IS TRANSFERRED TO THE VERTICAL TRACK, FROM THE TRACK THE LOAD IS TRANSFERRED TO THE VERTICAL JAMBS. THE HORIZONTAL JAMB OR HEADER RECEIVES NO PORTION OF THE LOAD TRANSFERRED FROM THE DOOR.
2. EACH VERTICAL JAMBS RECEIVES MAXIMUM DESIGN LOADS OF: +146.4 LBS/FT & -166.4 LBS/FT
3. DOOR AND HARDWARE WILL BE DESIGNED, MANUFACTURED AND INSTALLED WITH STANDARDS AS SET FORTH BY DASMA.
4. DOOR SECTIONS SHALL BE 27 GA. (.016) MIN. EXTERIOR SKIN ROLLED FORMED, W/ BAKED ON POLYESTER FINISH
5. SUPPORTING STRUCTURAL ELEMENTS SHALL BE DESIGNED BY A REGISTERED PROFESSIONAL ENGINEER FOR WIND LOADS INDICATED ON THIS DRAWING IN ADDITION TO OTHER LOADINGS.



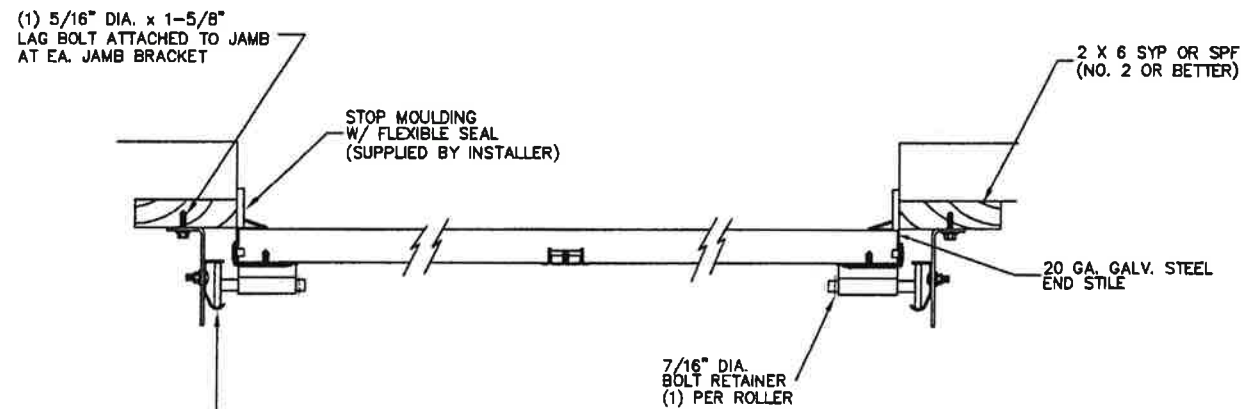
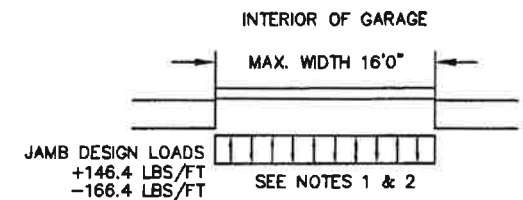
INSIDE ELEVATION
N.T.S.



TYPICAL DURASAFE END HINGE ④
N.T.S.



TYPICAL TOP STRUT ATTACHMENT ③
N.T.S.



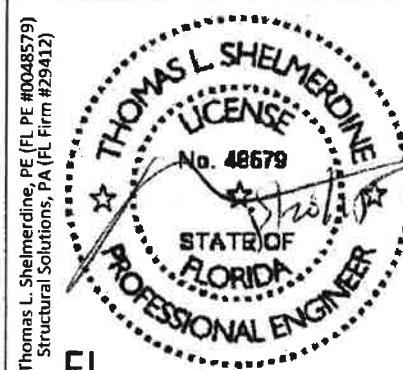
TRACK MOUNTING DETAIL
N.T.S.

THE METHOD OF TESTING WAS IN SUBSTANTIAL CONFORMANCE WITH THE PROCEDURE DESCRIBED IN ASTM E330 AND DASMA 108. THE PRESSURES SHOWN ON THE DRAWINGS WERE CALCULATED USING ASCE 7-10 WITH THE FOLLOWING PARAMETERS (5 FEET OF DOOR WIDTH IN THE END ZONE, ROOF AT ANY SLOPE):

WIND SPEED (MPH)	142	129	122	117	112
EXPOSURE LEVEL	B	C	C	D	D
MEAN ROOF HEIGHT	30'	15'	25'	15'	25'

REV	DESCRIPTIONS OF REVISIONS	DATE	BY

MAX SIZE
16' x 14'
DESIGN LOADS
+18.3 PSF
-20.8 PSF
TEST LOADS
+27.5 PSF
-31.2 PSF



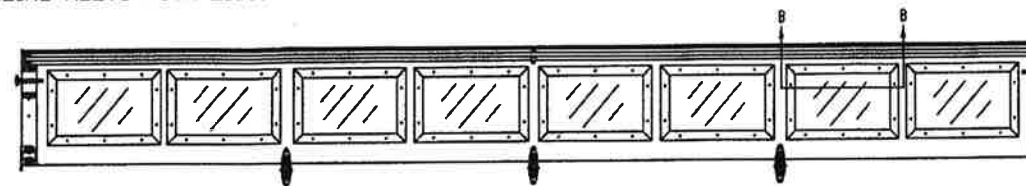
ENTRE/MATIC

165 CARRIAGE COURT WINSTON-SALEM, N.C. 27105

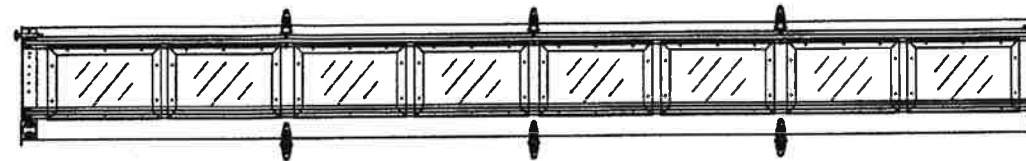
MODEL #1500 AMARR STRATFORD 3000
MODEL #1200 AMARR HERITAGE 3000
MODEL #1550 AMARR OAK SUMMIT 3000
SHORT, LONG, FLUSH & OAK SUMMIT PANELS

SIZE	DRAWN BY	RLR	DATE	04/22/14	DRAWING NUMBER
B	CHECKED BY	RLR	DATE	04/22/14	IRC-1516-110-15

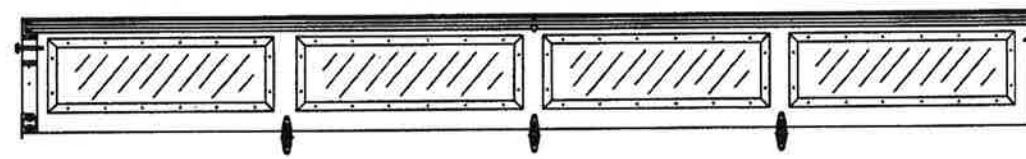
OPTIONAL SHORT AND LONG PANEL GLAZING LAYOUTS
GLAZING MEETS ASTM E1300-04



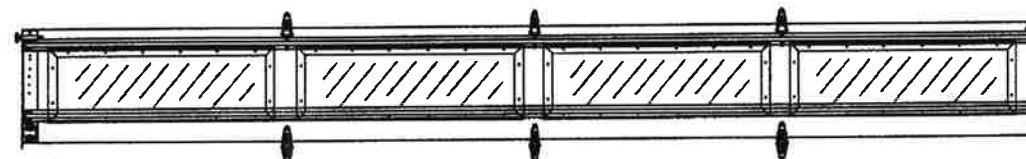
TOP SECTION



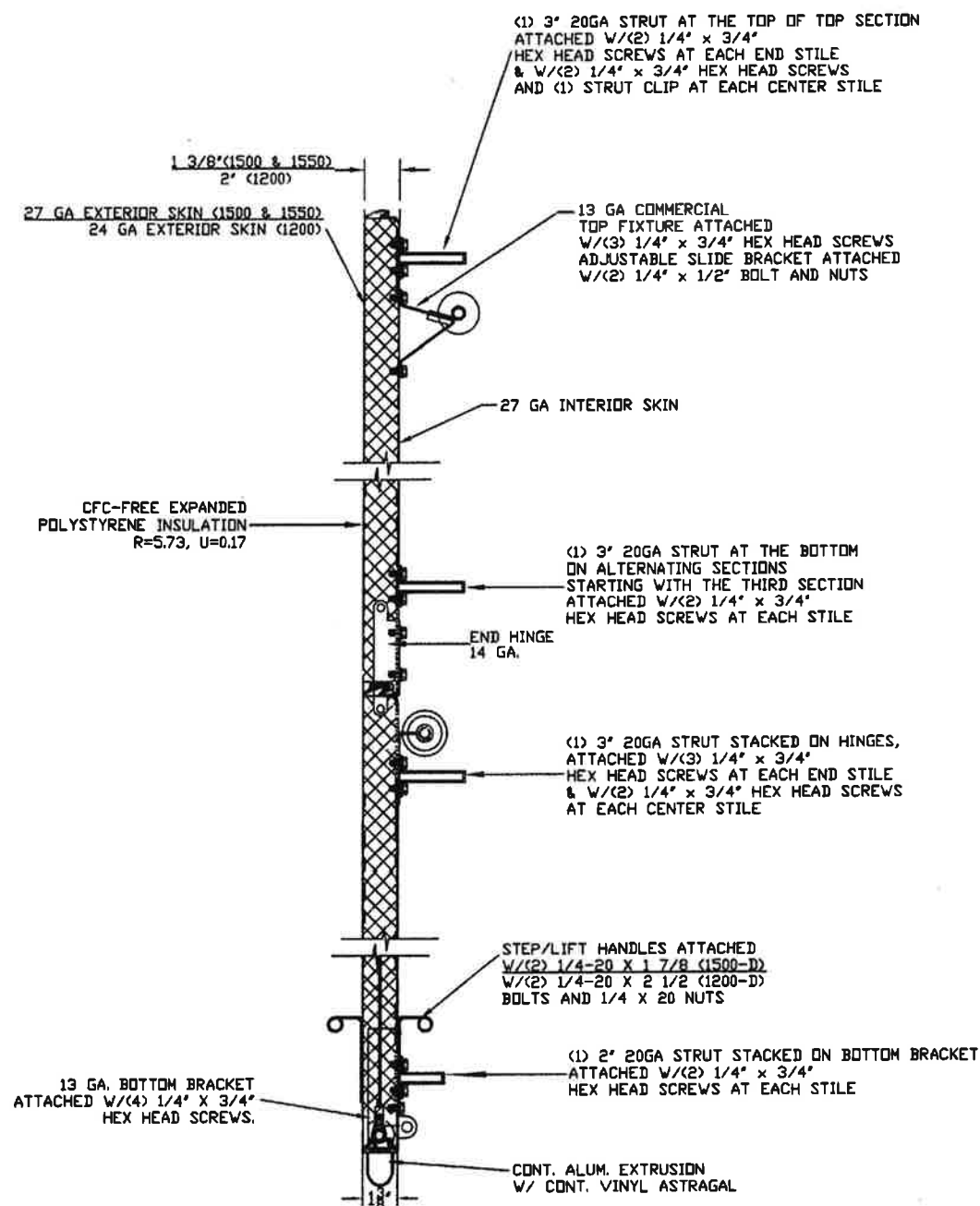
INTERMEDIATE SECTION



TOP SECTION



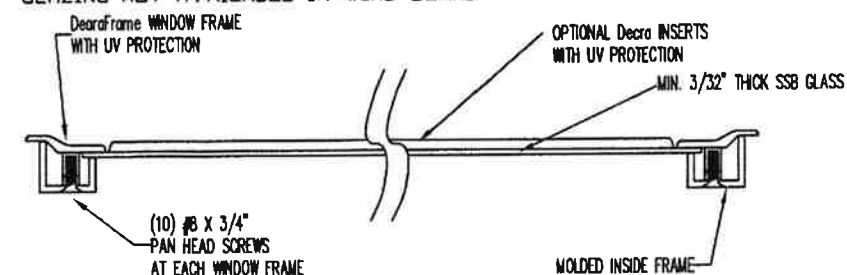
INTERMEDIATE SECTION



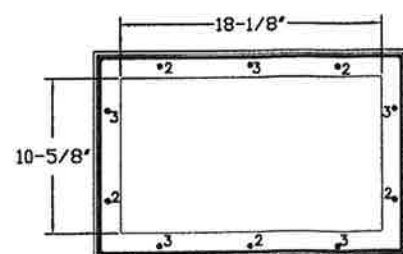
SECTION A-A (SIDE VIEW)
N.T.S.

GLAZING OPTION CROSS SECTION

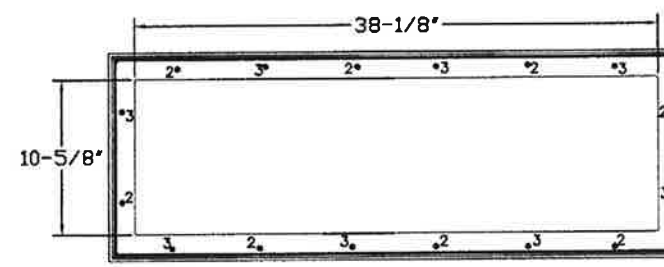
GLAZING NOT AVAILABLE IN WIND-BORNE DEBRIS REGION



SECTION B-B

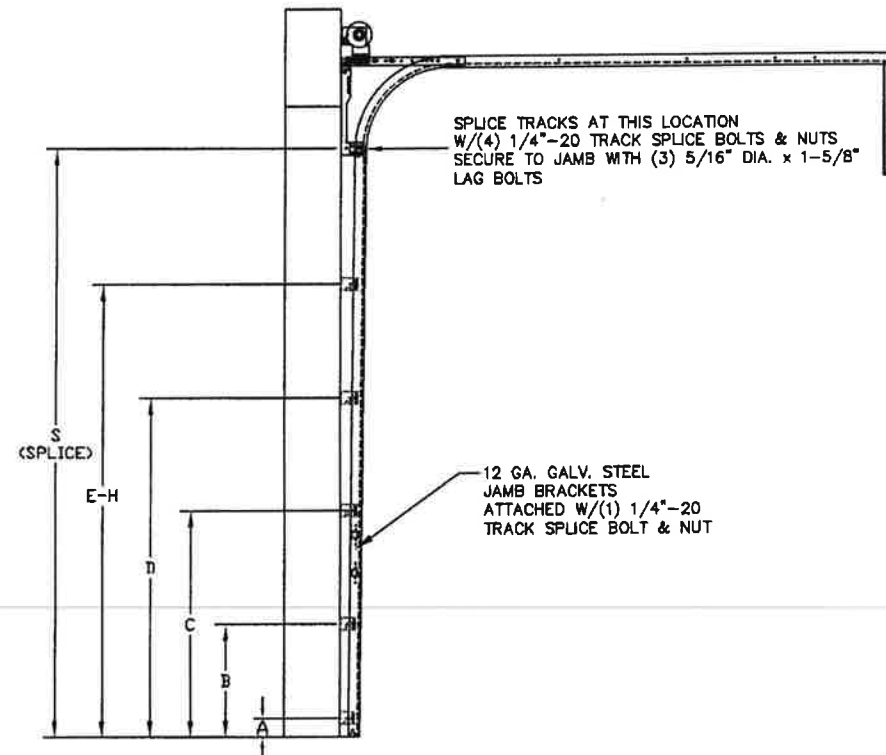


SHORT PANEL GLAZING FASTENER DETAIL
N.T.S.



LONG PANEL GLAZING FASTENER DETAIL
N.T.S.

REV	DESCRIPTIONS OF REVISIONS	DATE	BY
	<p>MAX SIZE 16' x 14'</p> <p>DESIGN LOADS +18.3 PSF -20.8 PSF</p> <p>TEST LOADS +27.5 PSF -31.2 PSF</p>		
	<p>Thomas L. Shelmerdine, PE (FL PE #0048579) Structural Solutions, PA (FL Firm #29412)</p> <p>FL</p> <p>THOMAS L. SHELMERDINE LICENSE No. 48579 STATE OF FLORIDA PROFESSIONAL ENGINEER</p> <p>dba Structural Solutions of North Carolina, Inc. 5921-G W. Friendly Ave., Greensboro, NC 27410</p>		
	<p>ENTRE//MATIC</p> <p>165 CARRIAGE COURT WINSTON-SALEM, N.C. 27105</p> <p>MODEL #1500 AMARR STRATFORD 3000 MODEL #1200 AMARR HERITAGE 3000 MODEL #1550 AMARR OAK SUMMIT 3000 SHORT, LONG, FLUSH & OAK SUMMIT PANELS</p>		
	<p>SIZE DRAWN BY RLR DATE 04/22/14</p> <p>B CHECKED BY RLR DATE 04/22/14</p>		<p>DRAWING NUMBER IRC-1516-110-15</p>
			<p>SHEET 2 OF 4</p>



TRACK CONFIGURATION FOR 6'6" UP TO 14' TALL DOORS (SEE TABLE 1)
N.T.S.

TABLE 1

DOOR HEIGHT	TRACK ATTACHMENT								SPlice
	A	B	C	D	E	F	G	H	
6' 6"	10"	21"	42"	63"					70"
7'	10"	21"	42"	63"					76"
7' 6"	10"	21"	42"	63"					82"
8'	10"	21"	42"	63"					88"
8' 6"	10"	21"	42"	63"	84"				94"
9'	10"	21"	42"	63"	84"				100"
9' 6"	10"	21"	42"	63"	84"				106"
10'	10"	21"	42"	63"	84"	105"			112"
10' 6"	10"	21"	42"	63"	84"	105"			118"
11'	10"	21"	42"	63"	84"	105"			124"
11' 6"	10"	21"	42"	63"	84"	105"			130"
12'	10"	21"	42"	63"	84"	105"	126"		136"
12' 6"	10"	21"	42"	63"	84"	105"	126"		142"
13'	10"	21"	42"	63"	84"	105"	126"		148"
13' 6"	10"	21"	42"	63"	84"	105"	126"	147"	154"
14'	10"	21"	42"	63"	84"	105"	126"	147"	160"

ALL TRACK ATTACHMENT SPACING +/-2" ALLOWED WITH SYP OR SPF NO. 2 OR BETTER ONLY

WOOD JAMB ATTACHMENT TO STRUCTURE

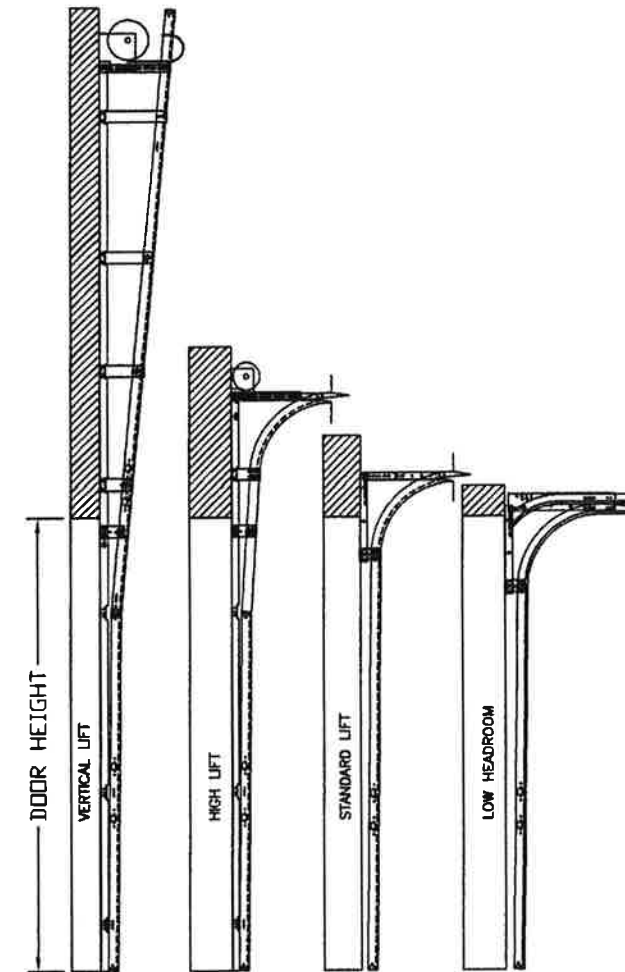
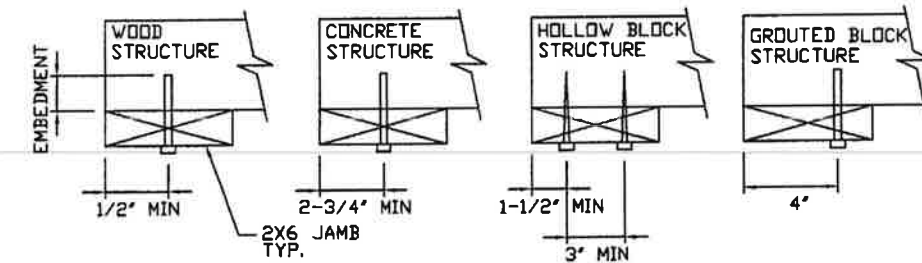
2 X 6 VERTICAL JAMB ATTACHMENT TO WOOD FRAME STRUCTURE
5/16" X 3" LAG SCREWS STARTING 6" FROM ENDS THEN 24" O.C. (1 1/2" EMBEDMENT)

2 X 6 VERTICAL JAMB ATTACHMENT TO 2,000 PSI CONCRETE
HILTI KWIK BOLT 3/8" X 4" STARTING 6" FROM ENDS THEN 24" O.C. (2 1/2" EMBEDMENT)
HILTI SLEEVE ANCHOR 3/8" X 2-3/4" STARTING 6" FROM ENDS THEN 24" O.C. (1 1/4" EMBEDMENT)
ITW/RAMSET REDHEAD (TRU-BOLT) 3/8" X 4" STARTING 6" FROM ENDS THEN 24" O.C. (2 1/2" EMBEDMENT)

2 X 6 VERTICAL JAMB ATTACHMENT TO HOLLOW C-90 BLOCK
SIMPSON 1/4" X 3" TITEN SCREWS STARTING 6" FROM ENDS, USE PAIRS OF FASTENERS (3" APART) AT 24" O.C. (1 1/2" EMBEDMENT)
HILTI 1/4" X 2-3/4" KWIK-CON II+ SCREWS STARTING 6" FROM ENDS, USE PAIRS OF FASTENERS (3" APART) AT 24" O.C. (1 1/4" EMBEDMENT)

2 X 6 VERTICAL JAMB ATTACHMENT TO GROUTED C-90 BLOCK (2000 PSI GROUT)
HILTI SLEEVE ANCHOR 3/8" X 2-3/4" STARTING 6" FROM ENDS THEN 24" O.C. (1 1/4" EMBEDMENT) (OR, USE FASTENERS FOR HOLLOW C-90 BLOCK)

*LAGS AND BOLTS CAN BE COUNTERSUNK TO PROVIDE A FLUSH MOUNTING SURFACE.
*PREPARATION OF WOOD JAMBS BY OTHERS



AVAILABLE TRACK CONFIGURATIONS
N.T.S.

REV	DESCRIPTIONS OF REVISIONS	DATE	BY
	MAX SIZE 16' x 14' DESIGN LOADS +18.3 PSF -20.8 PSF TEST LOADS +27.5 PSF -31.2 PSF		
	Thomas L. Shelmerdine, PE (FL PE #0048579) Structural Solutions, PA (FL Firm #29412)		
	ENTRE//MATIC 165 CARRIAGE COURT WINSTON-SALEM, N.C. 27105 MODEL #1500 AMARR STRATFORD 3000 MODEL #1200 AMARR HERITAGE 3000 MODEL #1550 AMARR OAK SUMMIT 3000 SHORT, LONG, FLUSH & OAK SUMMIT PANELS		
	SIZE B DRAWN BY RLR CHECKED BY RLR	DATE 04/22/14 DATE 04/22/14	DRAWING NUMBER IRC-1516-110-15 SHEET 3 OF 4

Thomas L. Shelmerdine, PE (FL PE #0048579)
Structural Solutions, PA (FL Firm #29412)
dba Structural Solutions of North Carolina, Inc.
5921-G W. Friendly Ave., Greensboro, NC 27410

TABLE 2

Section Width (ft)	Panel Type	Center Stile Locations (Measured from Left Edge)				Max Design Loads Allowed	
		1st (in)	2st (in)	3rd (in)	4th (in)	Positive (PSF)	Negative (PSF)
10' 0	Short	48.41	71.59			24.4	27.8
10' 0	Long	60.00				14.6	16.6
10' 0	Oak Summit	60.00				14.6	16.6
12' 0	Short	48.81	95.19			18.4	20.9
12' 0	Long	49.63	94.38			18.5	21.1
12' 0	Oak Summit	48.31	95.69			18.3	20.8
12' 2	Short	49.64	96.36			18.1	20.6
12' 2	Long	50.08	95.92			18.2	20.7
12' 2	Oak Summit	49.06	96.94			18.0	20.5
12' 4	Short	50.64	97.36			18.0	20.4
12' 4	Long	51.08	96.92			18.0	20.5
12' 4	Oak Summit	49.81	98.19			17.8	20.2
12' 6	Short	50.67	99.33			17.6	20.0
12' 6	Long	51.17	98.83			17.7	20.1
12' 6	Oak Summit	50.56	99.44			17.6	20.0
12' 8	Short	51.67	100.33			17.4	19.8
12' 8	Long	52.10	99.90			17.5	19.9
12' 8	Oak Summit	51.31	100.69			17.4	19.7
12' 10	Short	52.25	101.75			17.2	19.5
12' 10	Long	53.10	100.90			17.3	19.7
12' 10	Oak Summit	52.06	101.94			17.1	19.5
13' 0	Short	53.00	103.00			17.0	19.3
13' 0	Long	54.10	101.90			17.2	19.5
13' 0	Oak Summit	52.81	103.19			16.9	19.3
13' 2	Short	54.00	104.00			16.8	19.1
13' 2	Long	55.10	102.90			17.0	19.3
13' 2	Oak Summit	53.56	104.44			16.7	19.0
13' 4	Short	54.40	105.60			16.6	18.8
13' 4	Long	54.90	105.10			16.6	18.9
13' 4	Oak Summit	54.31	105.69			16.5	18.8
13' 6	Short	55.40	106.60			16.4	18.6
13' 6	Long	55.90	106.10			16.5	18.7
13' 6	Oak Summit	55.06	106.94			16.3	18.6
13' 8	Short	56.40	107.60			16.2	18.5
13' 8	Long	56.63	107.38			16.3	18.5
13' 8	Oak Summit	55.81	108.19			16.2	18.4
13' 10	Short	57.16	83.00	108.71		21.1	23.9
13' 10	Long	57.17	108.83			16.1	18.3
13' 10	Oak Summit	56.56	109.44			16.0	18.2

Section Width (ft)	Panel Type	Center Stile Locations (Measured from Left Edge)				Max Design Loads Allowed	
		1st (in)	2st (in)	3rd (in)	4th (in)	Positive (PSF)	Negative (PSF)
14' 0	Short	57.76	84.00	110.11		20.8	23.7
14' 0	Long	58.63	84.00	109.38		20.8	23.7
14' 0	Oak Summit	57.31	110.69			15.8	17.9
14' 2	Short	58.85	85.00	111.41		20.6	23.4
14' 2	Long	59.17	85.00	110.83		20.6	23.4
14' 2	Oak Summit	58.06	111.94			15.6	17.7
14' 4	Short	59.16	86.00	112.71		20.3	23.1
14' 4	Long	60.17	86.00	111.83		20.3	23.1
14' 4	Oak Summit	58.81	113.19			15.4	17.6
14' 6	Short	59.86	87.00	114.01		20.1	22.8
14' 6	Long	61.17	87.00	112.83		20.1	22.8
14' 6	Oak Summit	59.56	114.44			15.3	17.4
14' 8	Short	60.56	88.00	115.31		19.9	22.6
14' 8	Long	64.81	88.00	131.19		19.9	22.6
14' 8	Oak Summit	60.31	115.69			15.1	17.2
14' 10	Short	61.26	89.00	116.61		19.6	22.3
14' 10	Long	65.60	89.00	132.40		19.6	22.3
14' 10	Oak Summit	61.06	116.94			14.9	17.0
15' 0	Short	61.94	90.00	117.94		19.4	22.1
15' 0	Long	66.60	90.00	133.40		19.4	22.1
15' 0	Oak Summit	61.81	118.19			14.8	16.8
15' 2	Short	62.66	91.00	119.21		19.2	21.8
15' 2	Long	67.60	91.00	134.40		19.2	21.8
15' 2	Oak Summit	62.56	119.44			14.6	16.6
15' 4	Short	63.60	79.20	104.80	130.40	19.0	21.6
15' 4	Long	67.25	92.00	136.75		19.0	21.6
15' 4	Oak Summit	63.31	120.69			14.5	16.5
15' 6	Short	66.62	93.00	139.38		18.8	21.4
15' 6	Long	67.60	93.00	138.40		18.8	21.4
15' 6	Oak Summit	67.42	93.00	138.58		18.8	21.4
15' 8	Short	67.62	94.00	140.38		18.6	21.1
15' 8	Long	68.60	94.00	139.40		18.6	21.1
15' 8	Oak Summit	68.02	94.00	139.98		18.6	21.1
15' 10	Short	68.62	95.00	141.38		18.4	20.9
15' 10	Long	69.17	95.00	140.83		18.4	20.9
15' 10	Oak Summit	68.62	95.00	141.38		18.4	20.9
16' 0	Short	69.62	96.00	142.38		18.3	20.8
16' 0	Long	70.60	96.00	141.40		18.3	20.8
16' 0	Oak Summit	69.42	96.00	143.58		18.3	20.8

REV	DESCRIPTIONS OF REVISIONS	DATE	BY

MAX SIZE
16' x 14'

DESIGN LOADS
+18.3 PSF
-20.8 PSF

TEST LOADS
+27.5 PSF
-31.2 PSF

FL

Thomas L. Shelmerdine, PE (FL PE #0048579)
Structural Solutions, PA (FL Firm #29412)
dba Structural Solutions of North Carolina, Inc.
5921-G W. Friendly Ave., Greensboro, NC 27410

ENTRE//MATIC

165 CARRIAGE COURT WINSTON-SALEM, N.C. 27105

MODEL #1500 AMARR STRATFORD 3000
MODEL #1200 AMARR HERITAGE 3000
MODEL #1550 AMARR OAK SUMMIT 3000
SHORT, LONG, FLUSH & OAK SUMMIT PANELS

SIZE	DRAWN BY	RLR	DATE	04/22/14	DRAWING NUMBER IRC-1516-110-15
B	CHECKED BY	RLR	DATE	04/22/14	

SHEET 4 OF 4



- [Searches](#)
- [Sales Search](#)
- [Results](#)
- [Property Record Card](#)
- [My Favorites](#)

[Sign up for e-Notify...](#)

2812 Montmart Dr < 18-23-30-4391-04-560 >

Names)	Physical Street Address
Heizmann Emil B Tr	2812 Montmart Dr
Heizmann Carolyn E Tr	Postal City and Zipcode
Mailing Address On File	Orlando, FL 32812
2812 Montmart Dr	Property Use
Belle Isle, FL 32812-1030	0130 - Sfr - Lake Front
Incorrect Mailing Address?	Municipality
	Belle Isle



View 2016 Property Record Card

- [Values, Exemptions and Taxes](#)
- [Property Features](#)
- [Sales Analysis](#)
- [Location Info](#)
- [Market Stats](#)
- [Update Information](#)

Note: 2017 values will be available in Spring of 2017.

Property Description

[View Plat](#)

LAKE CONWAY ESTATES SECTION 9 2/91 LOT 456

Total Land Area 18,651 sqft (+/-) | 0.43 acres (+/-) GIS Calculated Notice

Land

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0130 - Sfr - Lake Front	R-1-AA	1 LOT(S)	working...	working...	working...	working...

Page 1 of 1 (1 total records)

Buildings

Important Information		Structure				
	Model Code:	01 - Single Fam Residence	Actual Year Built:	1974	Gross Area:	3250 sqft
	Type Code:	0103 - Single Fam Class III	Beds:	4	Living Area:	2700 sqft
	Building Value:	working...	Baths:	2.0	Exterior Wall:	Concrete Block Stucco
	Estimated New Cost:	working...	Floors:	1	Interior Wall:	Wood Panel

Page 1 of 1 (1 total records)

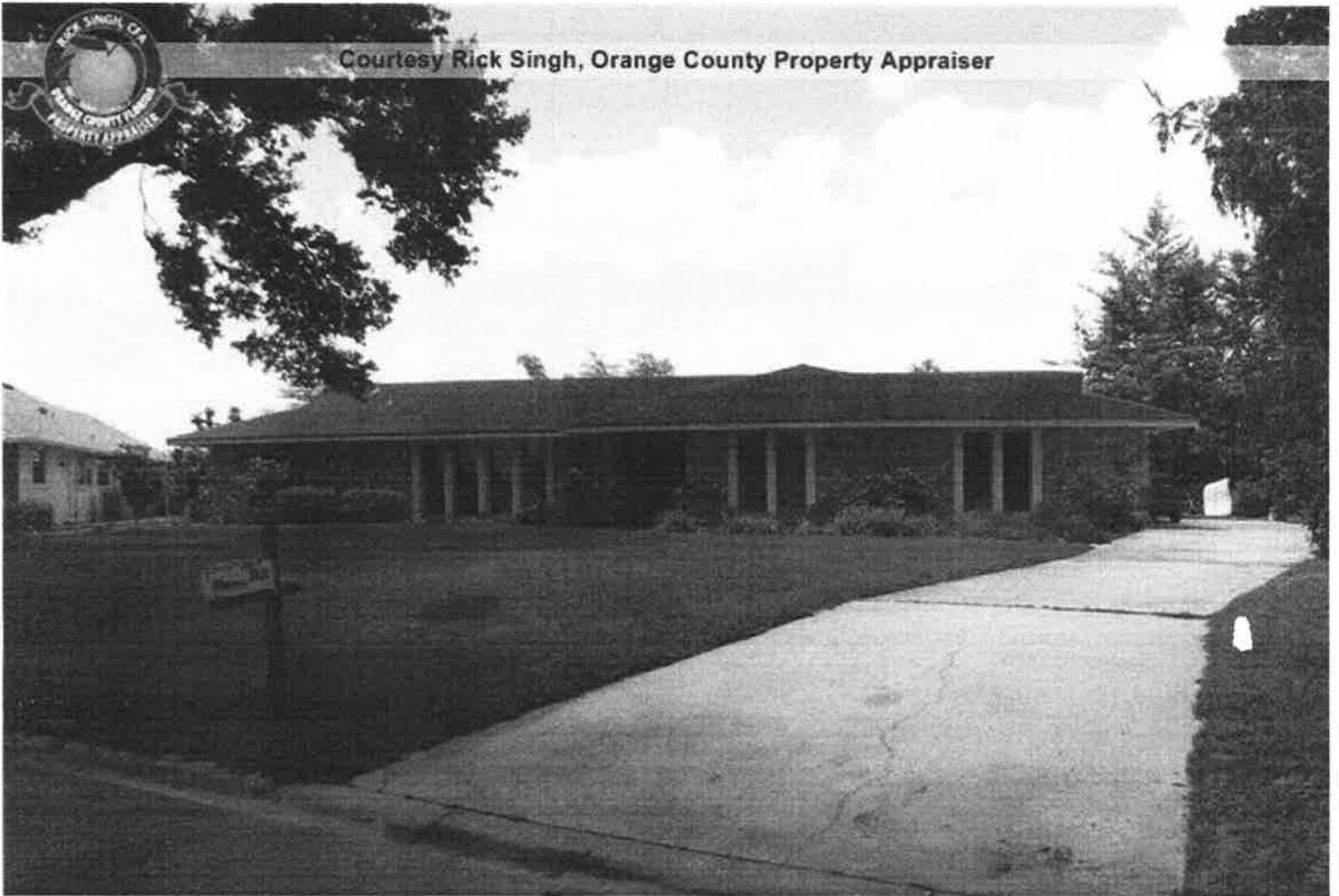
Extra Features

Description	Date Built	Units	XFOB Value
FPL2 - Average Fireplace	01/01/1974	1 Unit(s)	working...
PT2 - Patio 2	01/01/1974	1 Unit(s)	working...
SHNV - Shed No Value	01/01/2001	1 Unit(s)	working...
BD2 - Boat Dock 2	01/01/2001	1 Unit(s)	working...

Page 1 of 1 (4 total records)

This Data Printed on 03/21/2017 and System Data Last Refreshed on 03/20/2017

Parcel Photos - 2812 Montmart Dr



302318439104560 08/28/2006



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
6/24/2016

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 be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Brown & Brown of Brevard 6905 N. Wickham Road Suite 501 Melbourne FL 32940		CONTACT NAME: Annie Donovan PHONE (A/C, No, Ext): (321) 757-8686 FAX (A/C, No): (321) 757-8687 E-MAIL ADDRESS: adonovan@bbbrevard.com															
INSURED B W Brevard Holdings, LLC DBA Precision Door Service of Central Florida 244 Obrien Road Fern Park FL 32730		<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: Southernowners Insurance Co.</td> <td>10190</td> </tr> <tr> <td>INSURER B: Owners Insurance Co.</td> <td>32700</td> </tr> <tr> <td>INSURER C: FFVA Mutual Insurance Company</td> <td>10385</td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: Southernowners Insurance Co.	10190	INSURER B: Owners Insurance Co.	32700	INSURER C: FFVA Mutual Insurance Company	10385	INSURER D:		INSURER E:		INSURER F:	
INSURER(S) AFFORDING COVERAGE	NAIC #																
INSURER A: Southernowners Insurance Co.	10190																
INSURER B: Owners Insurance Co.	32700																
INSURER C: FFVA Mutual Insurance Company	10385																
INSURER D:																	
INSURER E:																	
INSURER F:																	

COVERAGES **CERTIFICATE NUMBER:** **REVISION NUMBER:**

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		72870352	7/1/2016	7/1/2017	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 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 Voluntary Damage to Property \$ 5,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		4887035205	7/1/2016	7/1/2017	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ Medical payments \$ 2,000
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000		4887035204	7/1/2016	7/1/2017	EACH OCCURRENCE \$ 1,000,000 AGGREGATE \$ 1,000,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WC84000294872015A	7/1/2016	7/1/2017	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER The City of Belle Isle 1600 Nela Ave. Belle Isle, FL 32809	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Aaron Phillips/ANNIE
---	--

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



LICENSE NUMBER	
CRC1330671	

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

WALDEN, WILLIAM GLENN
PRECISION DOOR SERVICE
3615 SPARROW HAWK TRAIL
MIMS FL 32754



ISSUED: 06/12/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1606120001815

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

2016 **EXPIRES 9/30/2017** 3100-1092144
 3100 REPAIR GARAGE DOORS \$30.00 8 EMPLOYEE

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

BW BREVARD HOLDINGS LLC

PRECISION DOOR SERVICE OF CENTRAL FLORIDA
 244 OBRIEN RD
 FERN PARK FL 32730-2822

1372 N GOLDENROD RD #19
 U - ORLANDO, 32807

PAID: \$30.00 0099-00721623 7/8/2016

Scott Randolph, Tax Collector Local Business Tax Receipt Orange County, Florida

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

2016 **EXPIRES 9/30/2017** 3100-1092144
 3100 REPAIR GARAGE DOORS \$30.00 8 EMPLOYEE



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

BW BREVARD HOLDINGS LLC

PRECISION DOOR SERVICE OF CENTRAL F
 244 OBRIEN RD
 FERN PARK FL 32730-2822

1372 N GOLDENROD RD #19
 U - ORLANDO, 32807

PAID: \$30.00 0099-00721623 7/8/2016

This receipt is official when validated by the Tax Collector.