

#### City of Belle Isle

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

#### PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit 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 COMPILIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE. ELORIDA COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: BUILDING - New SFR Townhome

29-23-30-0000-00-700

Lot 70, 3741 Brighton Park Circle Belle Isle, FL

1900 Summit Tower Blvd, suite 500, Orlando, FL

Comments: Bldg 04 **Project Information** 

Address:

32809

Parcel ID:

Property Owner:

Phone Number:

Mattamy Orlando LLC 407 599 2228

Mattamy Orlando/Mattamy Florida LLC Company Name:

Contractor Name: Wilson, Wade License Number: CRC1331582

Address:

32810

Phone Number:

407 451 3817

**Permit Number: 2017-03-052** 

Date of Application: 03/10/2017 Date Permit Issued: 04/13/2017

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF 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		BUILDING INSPECTOR USE ONLY
Traffic	\$1,430.00	
School	\$6,930.00	IF APPLICABLE:
ZONING FEES		Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions
Zoning Fee	\$165.00	Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO
ū		PLUI DING
UNIVERSAL EN	G - BUILDING FEES	BUILDING  1 <sup>st</sup> (Footing/Foundation)
Doot Dools	¢.	Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site?
Boat Dock Boat House	\$ \$	
Building	\$1,207.50	2 <sup>nd</sup> (Slab)
Demo	\$	
Door(s)	\$	3 <sup>rd</sup> (Lintel)(Wall Reinforcing on Masonry Building)
Driveway	\$	4
Electrical	\$	4 <sup>th</sup> (Exterior Framing)(Roof/Wall Sheathing)
Fence	\$	eth
Gas	\$	5th (Framing) (To be made after Plumbing/ Mechanical/
Irrigation	\$	Electrical Rough-Ins & Windows/Doors Installed)
Low Voltage Mechanical	Ф Ф	6 <sup>th</sup> (Insulation to be Made After Roof Installed)
Plumbing	\$	(Institution to be widde Arter Noor Installed)
Pool	\$	7 <sup>th</sup> (Drywall)
Roofing	\$	## W = ===
Screen Encl	\$	8 <sup>th</sup> (Sidewalk/Driveway)
Shed	\$	
Temp Pole	\$	9 <sup>th</sup> (Other)
Window(s)	\$	40lh
SURCHARGE FE	Ee	10 <sup>th</sup> (Final – After MEP and Other Applicable Finals)
30KCHAKGE I I	<u>-LJ</u>	ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR
Surcharge Fee	\$18.11	1 <sup>ST</sup> ROOFING Deck Nailing/Dry-in/Flashing
Surcharge Fee	\$18.11	Tree in the book training by his rustiming
		2 <sup>nd</sup> ROOFING Covering In-Progress
<b>TOTAL FE</b>	ES \$9,768.72	
. 1	1610	3 <sup>rd</sup> ROOFING Covering Final
Date Paid	1-18-	
	66621567	□ PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc)
CC or Check #	1 000000	1 <sup>ST</sup> (Underground) 2 <sup>nd</sup> (Sewer)
Amanua Daid	47160	1 <sup>ST</sup> (Underground) 2 <sup>nd</sup> (Sewer)
Amount Paid	100.	3 <sup>rd</sup> (Rough-In/Tub Set) 4 <sup>th</sup> (Final)
The person accer	oting this permit shall	3" (Rough-In/Tub Set) 4 <sup>th</sup> (Final)
conform to the ter		CHECK APPROPRIATE BOX
	and construction	☐ GASNaturalLP ☐ MECHANICAL ☐ ELECTRICAL ☐ LOW VOLTAGE
	he requirements of	
the Florida Buildir	ng Code (FS 553).	1 <sup>st</sup> (Rough-In) 2 <sup>nd</sup> (Final)

Inspection requests are to be emailed to BIDscheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. Next-Day Inspection requests must be made by 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.

Parcel ID Number: 29-23-30-0000-00-018

Prepared By

Michelle Bladek Mattamy Homes

and Return To:

1900 Summit Tower Blvd. # 500

Orlando, FL 32810

TEL: 407-215-6268

NOTICE OF COMMENCEMENT.

State of Florida. County of Orange.

The undersigned hereby gives notice that improvements 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:

Brighton Park, according to the plat thereof, as Recorded in Plat Book Page of the public records

DOC# 20170128759

\$10.00 Phil Diamond, Comptroller

Orange County, FL MB - Ret To: MATTAMY HOMES

03/10/2017 11:32:44 AM Page 1 of 1

of Orange County, Florida.

Address:

Belle Isle, FL 32809

2. General description of improvements: NEW TOWNHOUSE UNIT

3. Owner information: Name Mattamy Orlando LLC

Address 1900 Summit Tower Blvd. # 500, Orlando FL 32810

4. Fee Simple Title Holder: N.A.

5. Contractor name and address:

Name Mattamy Homes.

Address 1900 Summit Tower Blvd. # 500, Orlando FL 32810

6. Surety: N.A.

7. Lender: N.A.

8. Persons within the State of Florida designated by the Owner upon whom notices or other documents may be served as provides by 713.13(1)(a)7., Florida Statutes: N.A.

9. In addition to himself, Owner designates the following to receive a copy of the Lienor's Notice as provided in 713.13(1)(b), Florida Statutes. N.A.

10. Expiration date of notice of commencement: One year from the date of recording.

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 INTENT TO OBTAIN FINANCING, CONSULT YOUR LENDER OT ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

11. Date Signed: 38.17 Signature of Owner's Agent:

Name: Alex Martin Title: President

The foregoing instrument was acknowledged before me this day Alex Martin who is personally known to me.

**Notary Public** Michelle C Bladek

My commission expires: 10/11/19

Serial No. FF925955

Notary Public State of Florida Michelie C Bladek My Commission FF 925955 Expires 10/11/2019

Notary seal:

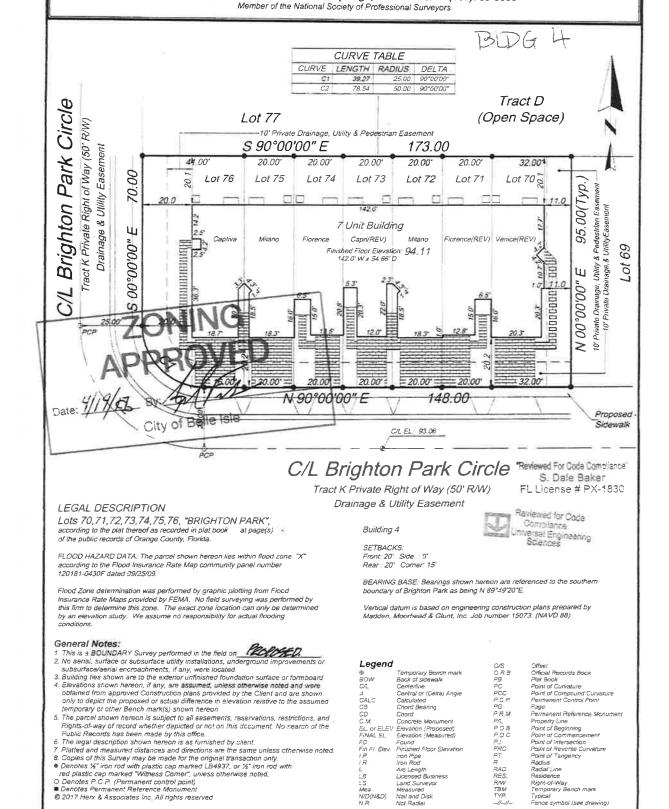
I hereby certify that this

State of FLORIDA, County of ORANGE

### Herx & Associates Inc.

land

769 Douglas Avenue, Altamonte Springs, Florida. 32714 (407)788-8808



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Sketch of Legal Description This is Not a Survey

Mea N/D(N&D) N R

Drawn by: CM Checked by: DLW Prepared for: Mattamy Homes Job Number: 16-011-01

Typical Fence symbol (see drawing)

Radial Line Residence Right-of-Way Yemporary Bench mark

RAD RES.

Scale: 1" = 30" Plot Plan Performed: 02-08-17 Formboard Survey: Final Survey:

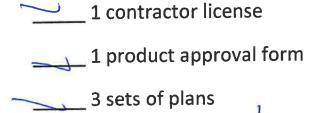
615. 170003.000

2017-03-052

## **Brighton Park Townhomes Checklist**

Lot #	Building #	1	Phase #
Address: <u>3741</u>	Brighton	Park	Circle

7	1 application
7	1 NOC
NA	1 power of attorney
1	1 certificate of liability
	1 business tax receipt



\_\_\_\_\_ 3 trusses

3 energy calcs

"Reviewed For Code Compliance" S. Dale Baker FL License # PX-1830



City of Belle Isle
Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811 MAR 10 2017
Tel 407-581-8161 \* Fax 407-581-0313 \* www.universalengineering.com

Tel 407-361-0101 Pax 407-361-0313 <u>www.</u>	universalengineennocor	<u>n</u>
Building Permit (Land Use	) Application	
29 11	ERMIT # 2017-0	3-057
DILLEWISTON Purk Cindo	E14411# 201 1-0	5002
PROJECT ADDRESS 5 9 10 10 10 10 10 10 10 10 10 10 10 10 10	, Belle Isle, FL 32	809 32812
PROPERTY OWNER MATTERY PHONE 407-451-	ALUE OF WORK (labor &mat	erial) \$ 195,102
PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS		
C -17 1 1	LA	W
New single tamily town name	Bulg	4
Please provide information, if applicable.     SINGLE FAMILY RESIDENCE: 8.5"x11" Plat Survey, Plot Plan of Home and Floor Plans of No.		equired
BOAT DOCK: DEP Clearance Required with Application (Call 407-897-4100); please provide a	a copy of their report	
<ul> <li>SEPTIC SYSTEM (RESIDENTIAL): - Provide verification of OC Health Dept approval for on-si</li> <li>Homeowners will be required to have a contractor on record for homes that are rented and/o</li> </ul>		AC Chap. 64E-6
Tromeowners will be required to have a contractor on record for nomes that are rented and/o	r not nomestead	
Please Complete for the City of Belle Isle Zoning Review: Parcel Id Number: 29-23-3	0-000-00-0	18
To obtain this information, please vi		
SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCROACH INTO ANY EASEMENT	Wind Exposure Category:	в с р
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	SPRINKLERS REQ'D  If Required – SUBMIT COPY OF	Y N
assessed.	REVIEW Date: Sent	
PLANNING & ZONING APPROVAL:	ZONING (S)	N \$165.
DATE	ZONING CERT OF OCC	N \$ 1937
PLEASE COMPLETE for Building Review (min. of 2 sets of signed/sealed plans required)	TRAFFIC Y	N \$
CONSTRUCTION TYPE	SCHOOL Y FIRE Y	N \$ N \$
OCCUPANCY GROUPComm Res:Single FamMulti Fam #BLDG#UNITS _#STORIESTOTAL SQ.FT	SWIMMING POOL Y	N \$ N \$
MAX. FLOOR LOAD MAX. OCCUPANCY	SCREEN ENCLOSURE Y	N \$
MIN. FLOOD ELEVLOW FLOOR ELEV WATER SERVICEWELL SEPTIC	ROOFING Y BOAT DOCK Y	N \$ N \$
WATER SERVICE	BUILDING	N \$ 1207
D Port - 4/12/17	WINDOW(S) Y	N \$
BUILDING REVIEWER DATE TO DATE	DOOR(S) Y FENCE y	N \$ N \$
VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE DATE 3-10-17	SHED Y	N \$
Per FSS 105.3.3:	DRIVEWAY Y OTHER	N \$ N \$
An enforcing authority may not issue a building permit for any building construction, erection, alteration,	OTTIERT	
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	3% FL SURCHARGE	56.97
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	TOTAL	1408.72
management districts, state agencies, or federal agencies."		
Republic Services is by legal contract the sole authorized provider of garbage, recycling, yard waste,	By Owner Form	Y NA
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-	Notice of Commencement Power of Attorney	Y NA Y NA
293-8000 to setup accounts for Commercial, Construction Roll Off, or other services needed. Rates	Contractor Packet Incuded?	Y N
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.	OTHER PERMITS REQUIRED:	
SEPARATE PERMITS ARE REQUIRED FOR ROOFING, ELECTRICAL, PLUMBING, GAS,	ELECTRICAL	Y NA
MECHANICAL, SIGNS, POOLS, ENCLOSURES, ETC. \\T\ \25	PREPOWER	Y NA
Page 1 of 2 (8.1) 195×4 780	MECHANICAL PLUMBING	Y NA Y NA
18.11	ROOFING	Y NA
36 DReviewed for Code 4 02, 50	GAS	Y NA
Compliance Universal Engineering 20750 (MM)	cos Schaol	6930.
Sciences	ha CC.	11170 -

#### 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 # 2017-03

mattanil	PERMIT # 2017.03
Owner's Name Maria Translation Company Translation	10 500 Octorate (1 3291)
Owner's Address MCO SUMMIT TOWAY BIVO. SUM	te 500 orlando, FL 32810
Contractor Name Wade Wilson	Company Name MotHamu
License # CRC 3315.82	Company Address 1900 Summit Touch Bird.
Contact Phone/Cell 407 - 451 3817	City, State, ZIP SUITE 500 OKlando, FL 30810
Contact Email (Onnie, hawkins 6) Matamycorp.	Contact Fax 321-444-6565
WARNING TO OWNER: Your failure to record a Notice of Commencemen notice of commencement must be recorded if job is \$2500(+) or if A/C Re If you intend to obtain financing, consult with your lender or an attorney	ent may result in your paying twice for improvements to your property. A eplacement \$7500(+) and posted on the job site before the first inspection. before recording your Notice of Commencement.
(www.fioridabuilding.org) and City Ordinances (www.municode.com) reg this permit does not grant permission to violate any applicable City and/obtain a permit to do the work and installations as indicated. I certify that no work will be performed to meet the standards of all laws regulating constructionall other construction including ROOFING, ELECTRICAL, MECHANICAL, PLU	
OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate construction and zoning.	and that all work will be done in compliance with all applicable laws regulating
Owner Signature  The foregoing instrument was acknowledged before me this by	Impervious Surface Ratio Worksheet  Development Zoned A-1. A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per City Code, Section 50-74: Impervious Surface Ratio  1. Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).  Total Lot Area X 0.35= Allowable Impervious Area (BASE)  2. Calculate the "proposed" impervious area on the lot. This includes the sum of all areas that do not allow direct percolation of rainwater.  Examples include house, pool, deck, driveway, accessory building, etc  House  Driveway
Contractor Signature	Walkway
COMPANY NAME MAHAMY	Accessory Buildings
The foregoing instrument was acknowledged before me this//_	Pool & Spa
by Words Wilsonwho is personally known to me	Deck & Patio
and who producedas identification and who did not take an oathy	Other  Actual Impervious Area (AIA)
Notary as to Owner State of Florida County of Orange	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.
Notary Public State of Florida	If AIA is greater than BASE, then onsite retention must be provided.
Michelle C Bladek My Commission FF 925955 Expires 10/11/2019	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





#### CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 08/24/2016

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).

CE	ertificate holder in lieu of such endor	seme	ent(s)	• :						
	DUCER				NAME:	CT				
HUB International HKMB Limited 595 Bay Street, Ste 900				PHONE (A/C, No. Ext): 416-597-0008 (A/C, No.): 416-597-2313						
Toro	nto, ON M5G 2E3				E-MAIL ADDRE			100,110)		
						7.257	SURER(S) AFFOR	RDING COVERAGE		NAIC#
					INCIDI	ER A :Allianz Glo				NAIC#
INSU	RED									
	amy Florida LLC Summit Tower Boulevard, Suite 500					ER B :Liberty Mu				23035
	ndo, FL 32810					ER C :Allianz Glo	obal Risks US I	ns. Co.		
					INSURI					
					INSURI	ER E :				
001	(ED 1050				INSURI	ER F:				
				NUMBER:Y4VET2YR				REVISION NUMBER:		
IN CE E>	IIS IS TO CERTIFY THAT THE POLICIES DICATED. NOTWITHSTANDING ANY RE ERTIFICATE MAY BE ISSUED OR MAY I (CLUSIONS AND CONDITIONS OF SUCH	EQUIF PERT/	REME AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORDI	OF AN ED BY	Y CONTRACT THE POLICIE	OR OTHER I	DOCUMENT WITH RESPE	CT TO	WHICH THIS
INSR LTR	TYPE OF INSURANCE		SUBR			POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	rs	
Ā	X COMMERCIAL GENERAL LIABILITY			ACG2005957		09/01/2016	09/01/2017	EACH OCCURRENCE	\$	1,000,000
	CLAIMS-MADE X OCCUR							DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	1,000,000
ı								MED EXP (Any one person)	\$	
								PERSONAL & ADV INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:									2,000,000
	V PRO-							GENERAL AGGREGATE	\$	2,000,000
-								PRODUCTS - COMP/OP AGG	\$	2,000,000
	OTHER:  AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT	\$	
1			l) i					(Ea accident)	\$	
-	ANY AUTO ALL OWNED SCHEDULED						) !	BODILY INJURY (Per person)	\$	
- }	AUTOS AUTOS							BODILY INJURY (Per accident)	\$	
ļ	HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$	
									\$	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE	\$	
Į	EXCESS LIAB CLAIMS-MADE							AGGREGATE	\$	
	DED RETENTION \$								\$	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC2B71171021016		09/01/2016	09/01/2017	X PER STATUTE OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE							E.L. EACH ACCIDENT	\$	1,000,000
	OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. DISEASE - EA EMPLOYEE		1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	s	1,000,000
	and the state of t							E.E. DIOLAGE - FOLICT ENVIY	\$	
									\$ \$	
									\$	
DESC	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101 Additional Remarks Schedule	e may be	attached if more	enaco is roquire	.dl	\$	
	respect to: Brighton Park	LO IM	COND	101, Additional Remarks Scheduk	e, may be	attached il more	space is require	ea)		
City	of Dolla tala is added as Additional Income	1/-\ 4-	45 - 0		<b>.</b>					
Name	of Belle Isle is added as Additional Insured ed Insured.	(S) IO	tne C	ommercial General Liability I	Policy D	out only with re	spect to vicari	ous liability arising out of th	e opera	tions of the
CER	TIFICATE HOLDER				CANC	ELLATION				
					THE	EXPIRATION	N DATE THE	ESCRIBED POLICIES BE CA REOF, NOTICE WILL E Y PROVISIONS.		
	of Belle Isle			ſ	AUTHORIZED REPRESENTATIVE					
	1600 Nela Avenue Belle Isle, FL 32809							gulova		

his local business tax receipt is in addition to and not in if any other tax required by law or municipal ordinance. Prinesses are subject to regulation of zoning, health and of awful authorities. This receipt is valid from October 1 throu september 30 of receipt y ir. Delinquent penalty is ad

October 1.

**CERT RESID CONTRACT** 1801

\$30.00

**EXPIRES** 

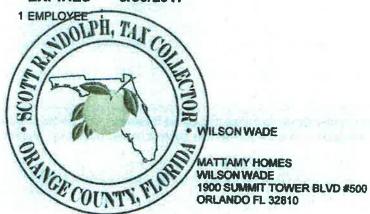
9/30/2017

1801-1176080

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

1900 SUMMIT TOWER BLVD #500 E - MAITLAND, 32751

PAID: \$30.00 2503-02423097 10/17/2016



This receipt is official when validated by the Tax Collector.



### STATE OF FLORI. . DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

WILSON, WADE
MATTAMY HOMES
10100 BELCREST BLVD
FORT MYERS FL 33913

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 barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



STATE OF FLORIDA DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CRC1331582

ISSUED: 10/03/2016

CERTIFIED RESIDENTIAL CONTRACTOR WILSON, WADE MATTAMY HOMES

IS CERTIFIED under the provisions of Ch. 489 FS. Expiration date: AUG 31, 2018 L1610030000458

#### **DETACH HERE**

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER

CRC1331582

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



WILSON, WADE
MATTAMY HOMES
1900 SUMMIT TOWER BLVD, SUITE 500
ORLANDO FL 32810



ISSUED: 10/03/2016

DISPLAY AS REQUIRED BY LAW

SEQ# L1610030000459



#### 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:	1, 0, 0	PERMIT #
PROJECT ADDRESS 3741 BVO	Not the Circle	_, Belle Isle, FL 32809 32812

As required by Florida Statue 553.842 and Florida Administrative Code 9B-72m, please provide the information and approval numbers of the building components listed below if they will be utilized on the building or structure. FL Approved products are listed online at www.floridabuilding.org 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 D	OORS			WALL PAN	IELS	Walte Land
Swinging				Sliding	James Hardie Building Products		FL13142-Ra
Sliding	MI Windows-Doors	420	FLIS332-RA	Soffits	Kaycan, LTD		FEIZI 98-RZ
Sectional/Rollup	Wayne-Dalton	5120/6100/9100	FL9174-R9	Storefront			
Other				Glass Block			
				Other			
	WINDOV	VS			ROOFING PRO	DUCTS	
Single/Dbl Hung	MI Windows-Doors	3540	FL 17499	Asphalt Shingles	CertainTeed Corp Roofing	CertainTeed Asphalt Roofing Shir	FLSHY-RY
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			Υ
Fixed				Single Ply Roof		м.	
Mullion				Other	CertainTeed Corp Roofing	Findastic modified bitumen roof s	FL 2533-R8
Skylights							
Other				P	8 2	(X	
	STRUCTURAL COL	MPONENTS	A HE ROUTE	A STATE OF THE STA	OTHER		
<b>Wood Connectors</b>							
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							

It is the applicant's responsibility to verify that specific products have been installed	in accordance with their limitations and
with the minimum required design pressures for the structure. Specific compliance	will be verified during field inspections.
	<u> </u>
Applicant Signature	Date 3 . 8 . 17