



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: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD. PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ELECTRICAL: for New SFR Townhome -- dishwasher, hood fan, fixtures, exhaust fans, dryer, disposal, paddle fans, AC, water heater, outlets, switches and furnace

Comments: Bldg 04

Project Information

Address: Lot 71, 3745 Brighton Park Circle Belle Isle, FL 32809

Parcel ID: 29-23-30-0000-00-710

Property Owner: Mattamy Orlando LLC

Phone Number: 407 599 2228

Company Name: Edmonson Electric Inc

Contractor Name: Armstrong, John

License Number: EC13005408

Address: 1034 Skipper Rd, Tampa, FL 33613

Phone Number: 813 910 3403

Permit Number: 2017-04-080
 Date of Application: 04/25/2017
 Date Permit Issued: 04/26/2017

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

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$109.50
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$
 Plumbing \$
 Pool \$
 Roofing \$
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$113.50

Date Paid 4-28-17

CC of Check # VISA 3385

Amount Paid 113.50

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 (F-S 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

Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____

2nd

(Footing/Foundation)

(Slab)

3rd

(Lintel) (Wall Reinforcing on Masonry Building)

4th

(Exterior Framing) (Roof/Wall Sheathing)

5th

(Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)

6th

(Insulation to be Made After Roof Installed)

7th

(Drywall)

8th

(Sidewalk/Driveway)

9th

(Other)

10th

(Final - After MEP and Other Applicable Finals)

ROOFING

OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1ST ROOFING Deck Nailing/Dry-in/Flashing _____

2nd ROOFING Covering In-Progress _____

3rd ROOFING Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST

(Underground) 2nd _____ (Sewer)

3rd

(Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS ___ Natural ___ LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st

(Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to 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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13

correct



City of Belle Isle

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RECEIVED
APR 25 2017

APPLICATION FOR ELECTRICAL PERMIT

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE OF APPLICATION: 4-25-17 PERMIT NUMBER: 2017-04-082
The undersigned hereby applies for a permit to make electrical installations as indicated below. PLEASE PRINT
Project Address 3745 Brighton Park Circle Belle Isle FL 32809
Property Owner: Mattamy Homes Phone 407-215-6267
Property Owner's Mailing Address 1900 Summit Tower Blvd City Orlando
State FL Zip Code 32810 Parcel ID Number: 29-23-20-0066-00-000
To obtain this information, please visit: <http://www.ocpafl.org/Searches/ParcelSearch.aspx>

Class of Building: Old New
Type of Work: New Alteration Addition Repair Commercial Low Voltage New Existing Other

INDICATE THE QUANTITY OF ALL EQUIPMENT TO BE INSTALLED

Dishwasher	<u>1</u>	Exhaust Fan	<u>3</u>	Disposal	<u>1</u>	Water Heater	<u>1</u>
Hood Fan	<u>1</u>	Dryer	<u>1</u>	Paddle Fan	<u>4</u>	Outlets	<u>39</u>
Fixtures	<u>23</u>	Spa	<u>0</u>	Pool	<u>0</u>	Switches	<u>42</u>
Electric Signs	<u>0</u>	Meter Reset	<u>0</u>	Low Voltage	<u>N/A</u>	Stoves	<u>1</u>
Pumps	<u>0</u>	Motors	<u>0</u>	Air Conditioning (tons)	<u>3.5</u>	Furnace (KW)	<u>5KW</u>

Temporary Construction Pole 0 One (1) New Meter Service 150A/240V/1PH Amperage/Voltage/Phase

Meter Service Upgrade from _____ to _____ Amperage/Voltage/Phase _____ Difference in Size _____

Relocate Existing Meter Service (No Service Size Change) _____

Other: _____

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

VALUATION OF JOB (VALUATION OF ALL MATERIALS, LABOR, AND FIXTURES INSTALLED) \$ 5040.00
Permit Fee = \$ 73.00
Review Fee = \$ 36.50
3% FL Surcharge = \$ 4.00
TOTAL Permit = \$ 113.50

Building Official: Ed Lopez Date 4-26-17
Verified Contractor's Licenses & Insurance are on file EDU Date 4-26-17

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

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. This issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances.

LICENSE HOLDER SIGNATURE John Armstrong LICENSE # EC13005408
LICENSE HOLDER NAME John Armstrong COMPANY NAME Edmonson Electric Inc
Street Address 1034 Skipper Rd State FL Zip Code 33613 Phone Number 813 910-3403
City Tampa Email Address permittingdept@edmonsonelectric.com

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

Building Permit Number _____