

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 BELL ELEGED AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

BUILDING - New SFR Townhome Scope of Work: Comments: Bldg 02

29-23-30-0000-00-840

Lot 84, 3782 Brighton Park Circle Belle Isle, FL

1900 Summit Tower Blvd, suite 500, Orlando, FL

Project Information

Address:

32809

Parcel ID:

Property Owner: Mattamy Orlando LLC

Phone Number: 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: 2017-03-061

Date of Application: <u>03/10/2017</u>
Date Permit Issued: <u>04/10/2017</u>

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	BUILDING INSPECTOR USE ONLY
Traffic \$1,430.00	JE ADDUCADUE
School \$6,930.00	IF APPLICABLE: Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions
ZONING FEES	
Zoning Fee \$165.00	Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO
UNIVERSAL ENG - BUILDING FE	ES BUILDING (Footing/Foundation)
Boat Dock \$	1°:(Footing/Foundation) Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site?
Boat House \$	
Building \$1,057,50	2 nd (Slab)
Demo \$ Door(s) \$	3 rd (Lintel)(Wall Reinforcing on Masonry Building)
Driveway \$	
Electrical \$ Fence \$	4 th (Exterior Framing)(Roof/Wall Sheathing)
Gas \$	5 th (Framing) (To be made after Plumbing/ Mechanical/
Irrigation \$	Electrical Rough-Ins & Windows/Doors Installed)
Low Voltage \$ Mechanical \$	6 th (Insulation to be Made After Roof Installed)
Plumbing \$ Pool \$ Roofing \$	7 th (Drywall)
Screen Encl \$	8 th (Sidewalk/Driveway)
Shed \$ Temp Pole \$	9 th (Other)
Window(s) \$	9 th (Other)
CUDCHADOF FEEC	10 th (Final – After MEP and Other Applicable Finals)
SURCHARGE FEES	☐ ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR
Surcharge Fee \$15.86	1 ST ROOFING Deck Nailing/Dry-in/Flashing
Surcharge Fee \$15.86	and DOOFING Countries to December
TOTAL FEES \$9,614.2	2 nd ROOFING Covering In-Progress
	3 rd ROOFING Covering Final
Date Paid	□ PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc)
CC or Check # 000,31 40	
Amount Paid 9614-2	1 ST (Underground) 2 nd (Sewer)
Amount Paid 4614-	3 rd (Rough-In/Tub Set) 4 th (Final)
The person accepting this permit s	hall
conform to the terms of the application on file and construction	CHECK APPROPRIATE BOX □ GASNaturalLP □ MECHANICAL □ ELECTRICAL □ LOW VOLTAGE
shall conform to the requirements	of
the Florida Building Code (FS 553)	. 1 st (Rough-In) 2 nd (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.

City of Belle Isle Universal Engineering Sciences 3532 Maggie Blvd., Orlando, I Tel 407-581-8161 * Fax 407-581-0313 * www.universalengin **Building Permit (Land Use) Applica** DATE: PERMIT# Brighton Purk PROPERTY OWNER ALUE OF WORK (labor &material) \$ PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS 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: 49-33-30-000-00 To obtain this information, please visit http://www.ocpafl.org/Searches/ParcelSearch.aspx SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCROACH INTO ANY EASEMENT Wind Exposure Category: 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 SPRINKLERS REQ'D Restrictions. For New Single Family Residence, a Traffic Impact Fee and School Impact will be If Required - SUBMIT COPY OF PLANS FOR FIRE assessed. **REVIEW** Date: Sent **PLANNING & ZONING APPROVAL:** ZONING DATE CERT OF OCC TRAFFIC PLEASE COMPLETE for Building Review (min. of 2 sets of signed/sealed plans required) SCHOOL CONSTRUCTION TYPE FIRE **OCCUPANCY GROUP** Single Fam Multi Fam SWIMMING POOL #BLDG. #UNITS _ #STORIES TOTAL SQ.FT. SCREEN ENCLOSURE MAX. FLOOR LOAD MAX. OCCUPANCY ROOFING MIN. FLOOD ELEV. LOW FLOOR ELEV. WATER SERVICE WELL SEPTIC **BOAT DOCK** BUILDING Ν WINDOW(S) **BUILDING REVIEWER** DOOR(S) **FENCE** VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE SHED Ν DRIVEWAY Per FSS 105.3.3: OTHER 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." By Owner Form NA Republic Services is by legal contract the sole authorized provider of garbage, recycling, yard waste, Notice of Commencement NΔ and commercial garbage and construction debris collection and disposal services with the city limits of Power of Attorney the City. Contractors, homeowners and commercial businesses may contact Republic Services at 407-NA 293-8000 to setup accounts for Commercial, Construction Roll Off, or other services needed. Rates Contractor Packet Incuded? 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: ELECTRICAL** NA SEPARATE PERMITS ARE REQUIRED FOR ROOFING, ELECTRICAL, PLUMBING, GAS MECHANICAL, SIGNS, POOLS, ENCLOSURES, ETC. **PREPOWER MECHANICAL** Page 1 of 2 **PLUMBING** ROOFING NA



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

mattamil	PERMII # 201- 1- 0 5- 06 [
Owner's Name 1100 1 Julie	10 500 Outer de (1 72910
Owner's Address 1900 Summit Tour Blva. Sum	te 500 orlando, FL 32810
Contractor Name Wade Wilson	Company Name Mottamu
License # CRC 33 15.82	Company Address 1900 Summit Tourer 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.floridabuilding.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	granted I agree to conform to all Division of Building Safety Regulations gulating same and in accordance with plans submitted. The issuance of or State of Florida codes and for ordinances. Application is hereby made to work or installation has commenced prior to the issuance of a permit and that all on in this jurisdiction. I understand that a separate permit must be secured for JMBING, GAS, SIGNS, POOLS, SCREEN ENCLOSURES, ETC.
construction and zoning.	
Owner Signature	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
the foregoing instrument was acknowledged before me this/ by	Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE). Total Lot Area X 0.35= Allowable Impervious Area (BASE)
as identification and who did not take an oath Notary as to Owner State of Florida County of Orange Notary Public State of Florida Michaile C Bladek	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
My Commission FF 925955 Expires 10/11/2019	Driveway
Contractor Signature	Walkway
COMPANY NAME MOTAMY	Accessory Buildings
The foregoing instrument was acknowledged before me this//_	Pool & Spa
by Wode Wilsonwho is personally known to me	Deck & Patio
1. 1.	• Other
and who producedas identification and who did not take an oathy	Actual Impervious Area (AIA)
Notary as to Owner State of Florida County of Orange	If AIA <u>is less than</u> 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.
Michaile 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
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_3 energy calcs

Brighton Park Townhomes Checklist

Lot #	Building#_	2	Phase #
Address: <u>3782</u>	Brighton	Pare (Cucle
1 application	1		
1 NOC			
N 1 power of a	ttorney		
1 certificate	of liability		
1 business ta	x receipt		_ 7
1 contractor	license	1	42
1 product ap	proval form	P	
3 sets of plan	าร	•	
3 surveys			
3 trusses			



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).

					LCCUTT	OT.					
	DUCER				NAME:	CI					
HUB International HKMB Limited 595 Bay Street, Ste 900				PHONE (A/C, No, Ext): 416-597-0008 FAX (A/C, No): 416-597-2313							
Toronto, ON M5G 2E3				I E-MAIL							
	•				ADDRE	SS:					-
								RDING COVERAGE			NAIC#
			_		INSURER A :Allianz Global Risks US Ins, Co.						
Mat	RED amy Florida LLC				INSURE	R B :Liberty Mu	utual Fire Insura	ance Company			23035
) Summit Tower Boulevard, Suite 500				INSURE	R c :Allianz Glo	obal Risks US I	ns. Co.			
Oria	ndo, FL 32810				INSURE	RD:					
					INSURER E :						
					INSURE	RF:					
CO,	VERAGES CEI	RTIFI	CATE	NUMBER:Y4VET2YR				REVISION NUI	MBER:		
TI	IS IS TO CERTIFY THAT THE POLICIES	OF	INSU	RANCE LISTED BELOW HA	VE BEE	N ISSUED TO	THE INSURE	D NAMED ABOV	/E FOR T	HE POI	ICY PERIOD
C	DICATED. NOTWITHSTANDING ANY R ERTIFICATE MAY BE ISSUED OR MAY (CLUSIONS AND CONDITIONS OF SUCH	PERT	AIN,	THE INSURANCE AFFORD	ED BY	THE POLICIE	S DESCRIBE	DOCUMENT WIT D HEREIN IS SL	H RESPE JBJECT T	CT TO O ALL	WHICH THIS THE TERMS,
NSR		ADDL	SUBR		DEENT	POLICY EFF (MM/DD/YYYY)					
A	TYPE OF INSURANCE	INSD	WVD	POLICY NUMBER ACG2005957		(MM/DD/YYYY) 09/01/2016	(MM/DD/YYYY) 09/01/2017		LIMIT	S	
Â	X COMMERCIAL GENERAL LIABILITY		1	A002003331		03/01/2010	03/01/2017	EACH OCCURRENT		\$	1,000,000
	CLAIMS-MADE X OCCUR							PREMISES (Ea occ		\$	1,000,000
								MED EXP (Any one	person)	\$	
						i l		PERSONAL & ADV	INJURY	\$	1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGRE	GATE	\$	2,000,000
	X POLICY PRO- JECT LOC							PRODUCTS - COM	P/OP AGG	\$	2,000,000
	OTHER:									\$	
	AUTOMOBILE LIABILITY							COMBINED SINGLI (Ea accident)	ELIMIT	\$	
	ANY AUTO					1		BODILY INJURY (Pe	er person)	\$	
	ALL OWNED SCHEDULED		Ī					BODILY INJURY (Pe		\$	
	AUTOS AUTOS NON-OWNED						3	PROPERTY DAMAG		\$	
	HIRED AUTOS AUTOS							(Per accident)		\$	
_	Luuran III	-	-							Đ	
	UMBRELLA LIAB OCCUR	1						EACH OCCURREN	CE	\$	
	EXCESS LIAB CLAIMS-MADE							AGGREGATE		\$	
	DED RETENTIONS	_								\$	
В	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			WC2B71171021016		09/01/2016	09/01/2017	X PER STATUTE	OTH- ER		
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	N/A						E.L. EACH ACCIDE	NT	\$	1,000,000
	(Mandatory in NH)	1						E.L. DISEASE - EA	EMPLOYEE	\$	1,000,000
	If yes, describe under DESCRIPTION OF OPERATIONS below							E.L. DISEASE - POI	LICY LIMIT	\$	1,000,000
										5	
										S S	
										S S	
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHIC	LES (A	CORD	101. Additional Remarks Schedul	e. may be	attached if more	space is require	ed)		٥	
	respect to: Brighton Park	(,	.00112	101, Maditional Nemarko concess	ic, may be	andoned ii more	space is require	,,			
O:4	ef Della lala ia adda daa Addiii aa l	27-3-4-			.						
	of Belle Isle is added as Additional Insure ed Insured.	1(S) 1C	tne (commercial General Liability	Policy b	ut only with re	spect to vicari	ous liability arisin	g out of th	e opera	tions of the
CEI	RTIFICATE HOLDER				CANC	ELLATION					
					THE	EXPIRATION	N DATE THE	ESCRIBED POLICE EREOF, NOTICE Y PROVISIONS.			
City of Belle Isle			AUTHORIZED REPRESENTATIVE								
1600 Nela Avenue Belle Isle, FL 32809				fileth							

his local business tax receipt is in addition to and not in # of any other tax required by law or municipal ordinance. Posteresses are subject to regulation of zoning, health and of

awful authorities. This receipt is valid from October 1 through jeptember 30 of receipt y ar. Delinquent penalty is ad

October 1.

2016

\$0.00

CERT RESID CONTRACT

\$30.00

9/30/2017

1801-1176080

TOTAL TAX PREVIOUSLY PAID \$30.00 TOTAL DUE

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 L1610030000459

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:	PERMIT # 2017-03-061
PROJECT ADDRESS 3782 Byghton Park 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	nister a mit
Swinging				Sliding	James Hardie Building Products		FL13142-Ra
Sliding	MI Windows-Doors	420	FLIS332-Ra	Soffits	Kaycan, LTD	Vinyl soffit T4 12"/DS 10"	FEIR198-RA
Sectional/Rollup	Wayne-Dalton	5120/6100/9100	FL9174-R9	Storefront			
Other				Glass Block			
				Other			
	WINDO	VS			ROOFING PRO	DUCTS	
Single/Dbl Hung	MI Windows-Doors	3540	FL 17499	Asphalt Shingles	CertainTeed Corp Roofing	CertainTeed Asphalt Roofing Shir	FL5444-84
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			V V
Fixed				Single Ply Roof		9	
Mullion				Other	CertainTeed Corp Roofing	Findantic modified bitumen roof s	FLQ533-88
Skylights							1 100
Other				**	. 3	79	
	STRUCTURAL COL	MPONENTS	ATT THE STREET	ALCOHOLD WAR	OTHER		
Wood Connectors			ě				
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							

			s have been installed in accord	
with the minimum red	quired design pressur	es for the structure.	Specific compliance will be ve	rified during field inspections.
Applicant Signature_			"Reviewed For Code Compliance"	Date 3.8.17

S. Dale Baker FL License # PX-1830