

City of Belle Isle Job Site Card Electrical PERMIT 2018-04-025

PERMIT MUST BE POSTED ON SITE - A permit expires in 6 months if approved inspections are not recorded /scheduled within that time frame. You are responsible for scheduling and keeping track of all your inspections -

Class:

Residential Subdivision:

Description of Work: Electrical for (1) Spa, (11) Outlets, (10) Switches and A/C 1.5 tons

Schedule Inspections via Email at: <u>BIDscheduling@universalengineering.com</u>
SCHEDULE INSPECTIONS BY 4PM CUT OFF TIME
Inspection Results Will Be Sent Out the Following Business Day

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IYOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT,"

| ELECTRICAL | INSPECTOR | DATE | COMMENTS |
|------------------|-----------|------|----------|
| 300 Temp Pole | | | |
| 310 TUG | | | |
| 320 Underground | | | |
| 330 Rough | | | |
| 340 Footer Steel | | | |
| Bonding | | | |
| 350 Pool Light | | | |
| 360 PrePower | | | |
| 370 Meter ReSet | | | |
| 380 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

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



City of Belle Isle
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APPLICATION FOR ELECTRICAL PE

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

| DATE OF APPLICATION: | 1-13-18 PERMIT NUMBER 2018-04-045 |
|--|--|
| The undersigned hereby applies | or a permit to make electrical installetions as indicated below. PLEASE PRINT |
| Project Address 5038 | Oak Sland Rd Belle 1910 FV 32808 32812 |
| Property OwnerRan | ald Pinta Phone 863-393-3938 |
| Property Owner's Mailing Address | Same on |
| State Zip Code _ | Parcel Id Number: 8-33-30-7166-03-00 To obtain this information, please visit http://www.accedi.org/Searches/ParcelSearch.acets |
| Class of Building: Old New Type of Work: New Altere | |
| Type of stork: [ve/v] Attent | nion - Addition - Repair - Low Voltage New - Exteting - |
| | PICATE THE QUANTITY OF ALL EQUIPMENT TO BE INSTALLED ST Fan Disposal Water Heater |
| Hood Fan Drye | |
| Fixtures Spa | |
| | Reset Low Voltage Stoves |
| Pumpe Moto | |
| Temporary Construction Pole | One (1) New <u>Meter Service</u> Amperage/Voltage/P/sase |
| Meter Service Upgrade from | 10 |
| morning and able man mail. | Imperage/Voltage/Phase Amperage/Voltage/Phase Difference in Size |
| Relocate Existing Meter Service | No Service Size Change) |
| | |
| Other: | |
| (IF NO METER SERVICE W | ATION OF ALL MATERIALS, LABOR, AND FIXTURES INSTALLEDS |
| 80 | Parmit Fee = 5 29.50 |
| Building Official: | 2 MM |
| Verified Contractor's Licenses | O/B discussing 1.8% DCA Fee = 5 2 Win |
| alhendy ap | provedor blog plans TOTAL PATTONE = \$ 92.50 |
| Market Company of the | True and correct to the best of my knowledge RAID BY VISA 0661 an 4-13 |
| I harabu make Speliceline for Darm | t as cutilined above, and if some is granted I agree to conform to all Florida Bulking Code Regulations and City |
| Ordinance namination came and in | ccordance with plans submitted. The issuance of this permit does not grant permission so violate any |
| abblicatio Town sugler from at the | had and another stellar and a second and a s |
| DILLEUNES | IN THE LICENSE N NA |
| LICENSE HOLDER NAME | 34 OWNER COMPANY NAME NA |
| Street Address | 1 18 1 10 Marie 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 |
| City | State Zip Code Phone Number |
| THE CONTRACT AND ADMITTANCE OF THE PARTY OF | |
| Errall Address | A. ************************************ |
| CHICAGO CONTRACTOR CON | ter is required if the Electrical installation is associated with any construction or alteration where a Building |
| NOTE: The Building Permit Num | per is required if the Electrical installation is associated with any construction or alteration where a Building Building Permit Number |

| 11. | I am aware of, and | consent to, a | n owner-bu | ıilder buildin | g permit | applied for | or in my | name an | d understa | nd that I | am the | party |
|-----|---|---------------|--------------|----------------|-----------|---------------|-----------|-----------|------------|-----------|--------|-------|
| | legally and financial | y responsible | for the proj | posed consti | ruction a | ctivity at th | ne follow | ing addre | SS | 1 | | |
| | legally and financial Project Address: | 5038 | DAK . | ISLAND | ROAD | BELLE. | ISLE) | FL 328 | 19 1 | Initi | al | |

- 12. I agree to notify the City of Belle Isle Building/Zoning Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure.
- 13. FBC 105.3.6 requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

 Initial

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if any unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is property licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

| Signature: (Signature of the property owner) | Print: Ronald Pin JA (Name of the property owner) |
|--|---|
| Signature: | Print: |
| (Signature of the property owner) | (Name of the property owner) |
| Owner's Address: 5038 OAK ISLAND ROAD | BELLE ISLE, FL. 32809 |
| The foregoing instrument was acknowledged before me this | 1 12 1 2018 |
| by Kinald Pinta who is personall | ly known to me / who produced the following |
| personally known | as identification and who did not take an oath. |
| State of Florida / County of | Seal: |
| Notary Signature Munduckur | YOLANDA QUICEÑO MY COMMISSION # GG 010309 EXPIRES: November 11, 2020 Bonded Thru Notary Public Underwriters |



City of Belle Isle

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OWNER BUILDER DISCLOSURE STATEMENT

Per Florida Statue 455.228:

Homeowners hiring unlicensed Contractors may be subject a fine of up to \$5,000.00!

| Befor | e me this day personally appeared Longle Find A , who being duly sworn |
|--------|--|
| depos | ses, and says as follows. "I hereby acknowledge that I have read and fully understand the individua |
| provis | sions of this instrument." |
| 1. | I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builded permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as mown contractor with certain restrictions even though I do not have a license |
| 2. | I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility. |
| 3. | I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect mysel from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my owname. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers or permits and contracts. |
| 4. | I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build o improve a commercial building if the costs do not exceed \$75,000.00. The building or residence must be for my own use o occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption. |
| 5. | I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. Initial |
| 6. | I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance. |
| 7 | I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit, that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property. Initial |
| 8. | I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk. |
| 9. | I agree that, as the party legally and financially responsible for this proposed construction activity. I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations. |
| 10, | I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at (850)487-1395 or www.Call.center@dbpr.state.fl-us for more information about licensed contractors. |

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APPLICATION FOR ELECTRICAL PERMIT

WARNING TO OWNER: YOUR FAILURE TO RECORD 4 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: 4/8/17 PER The undersigned hereby applies for a permit to make electrical installations as indicated as indicated in the control of the | RMIT NUMBER 218-04-05 ted below. PLEASE PRINT |
|------|--|--|
| | Project Address 5038 Oak Island Dr | |
| | Property Owner Ronald Pourta | Phone863 383 793 |
| | Property Owner's Mailing Address 5738 Dal Island | arciny Bella Isle |
| | | 13-30-7160-02 |
| | | mmercial Other |
| | Type of Work: New Alteration Addition Repair Low | Voltage New |
| | INDICATE THE QUANTITY OF ALL EQUIPMENT T | O BE INSTALLED |
| | Dishwasher Exhaust Fan Disnosal | Water Heater |
| | Hood Fan Dryer Paddle Fan Fixtures Spa Pool | |
| | | Switches / O |
| | Electric Signs Meter Reset Low Voltage | Stoves |
| | Pumps Motors Air Conditioning (tons) | _/ Furnace (KW) |
| | Temporary Construction PoleOne (1) New Meter Service | Amperage/Voltage/Phase |
| | Meter Service Upgrade from | Diff. |
| | Amperagervoltage | MPhase Difference in Size |
| | Relocate Existing Meter Service (No Service Size Change) | |
| | A4 | A STATE OF THE PARTY OF THE PAR |
| | Other: | |
| | | 21-73-2018 |
| | | 1.754 666 |
| | FERMIT FEE BASED ON METER SERVICE SIZE SCHEDULE (IF NO METER SERVICE WORK BEING DONE, USE VALUATION OF JOB FOR | PERMIT EEE) |
| | VALUATION OF JOB (VALUATION OF ALL MATERIALS, LABOR, AND FIXTURE | _ |
| | and the state of t | Permit Fee = \$ |
| | 80 4B 46 11 16-15 | Review Fee = \$ 29-50 |
| | Building Official: Date 4-10-18 | 2 |
| | Verified Contractor's Licenses & Insurance are on file | |
| V a | neady approved on olypian) | 1.5% DCA Fee = \$ \ |
| To a | recently of officers of suggestion | TOTAL Permit = \$ |
| | I hereby certify that the above 🕏 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 confo | rm to all Florida Building Code Regulations and City |
| | Ordinances regulating same and in accordance with plans submitted. The issuance of this perm applicable Town and/or State of Florida codes and/or ordinances. | nit does not grant permission to violate any |
| | LICENSE HOLDER SIGNATURE | LICENSE # EC / 300 578X |
| | LICENSE HOLDER NAME ERROL BOCAS COMPANY NA | AME STEVE BORAS EC |
| | Street Address 1050 Nodding Pines Way | |
| | City Casselfarmy State FC Zip Code 32401 | Phone Number 401-722-4675 |
| | Email Address E Bock & CFI X1-cm | |
| | NOTE: The Building Permit Number is required if the Electrical Installation is associated with Permit has been issued. | any construction or alteration where a Building |
| | DVII 22 Buildin | g Permit Number 2008-129 |
| | Dollari Dollari | |