



City of Belle Isle Job Site Card ROOFING PERMIT 2018- 04 - 031

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 -**

Permit Number: 2018- 04-031

Issue Date: 04/13/2018

Site Address: 5824 Labelle St 32809

Parcel # 24-23-29-5306-03-060

Class: Residential

Subdivision:

Description of Work: Roof 29.66 Squares of asphalt shingles.

Issued To: BRITE TOP ROOFING

Business Phone: 407 895-1551

Name: LE BLANC, DALE ROGER

Contractor License # CCC058108

Payment Date & Method: 4/13/2018

Visa Master Card Amex Discover Check / Money Order # 7216

**Schedule Inspections via Email at: BDscheduling@universalengineering.com
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. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."

Roof	INSPECTOR	DATE	COMMENTS
700 In Progress			
710 Final			

Inspection requests are to be emailed to BDscheduling@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, FL 32811
Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

RECEIVED
APR 10 2018

APPLICATION FOR ROOFING 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.

2018-04-031

DATE OF APPLICATION: _____

ROOF PERMIT NUMBER _____

PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

Project Address 5824 Labelle St. Belle Isle, FL X 32809 32812
Property Owner Melissa Holdcraft Phone 407-579-7893
Property Owner's Mailing Address 5824 Labelle St. City Belle Isle
State FL Zip Code 32809 Parcel Id Number: 24-23-29-5306-03-060
REQUIRED! To obtain this information, please visit <http://www.ocpafi.org/Searches/ParcelSearch.aspx>

Class of Building: Old New Type of Building: Residential Commercial Other
Type of Work: New Roof ReRoof

REQUIRED! Florida Product Approval Form - NOTE: installation instructions must be posted on-site before your first inspection!!

Please indicate the nature of work by completing the information below:

Roof Square Footage: 29.66 Number of Stories: 1 Job Valuation: \$ 9825.00
Type: Asphalt Shingles Metal Modified Bitumen Other: _____

I hereby certify that the above is true and correct to the best of my knowledge and 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. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances. By signing below, I recognize 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.

LICENSE HOLDER SIGNATURE Dale LeBlanc LICENSE # CC008109
LICENSE HOLDER NAME Dale LeBlanc COMPANY NAME Brite Top Roofing
Street Address P.O. Box 590325
City Orlando State FL Zip Code 32859 Phone Number 407.895-1551
Email Address _____

Zoning Fee \$ 30.-
Building Fee \$ 70
Review Fee \$ 0
1% BCAIB Fee \$ 2 mm
1.5% DCA Fee \$ 2 mm
Total Permit Fee \$ 104.-

Building Official: SM Date 4-12-2018
Verified Contractor's Licenses & Insurance are on file 4-12-2018 Date 4-12-2018
NOE

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

1511K
5x9
25
45
70-

PAID
4-13-2018
VISA 7216

Permit Number:
Folio/Parcel ID #: 24-23-29-5306-03-010
Prepared by:

DOCH 20180206026
04/06/2018 01:18:24 PM Page 1 of 1
Rec Fee: \$10.00
Phil Diamond, Comptroller
Orange County, FL
IP - Ret To: BRITE TOP ROOFING

BRITE TOP ROOFING
Return to: P.O. BOX 590325
ORLANDO, FL 32809



NOTICE OF COMMENCEMENT

State of Florida, County of Orange
The undersigned hereby gives notice that improvement 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.

- Description of property** (legal description of the property, and street address if available)
Lynnwood Shores 2 1/2 A Lot 6 B/C. 5824 Labelle St.
- General description of improvement**
Re-Roof
- Owner information or Lessee information if the Lessee contracted for the improvement**
Name Melissa Holdcraft
Address 5824 Labelle St. Belle Isle, FL 32809
Interest in Property owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name N/A
Address _____
- Contractor**
Name Brite Top Roofing Telephone Number 407-895-1551
Address P.O. BOX 590325 ORLANDO FL 32809
- Surety** (if applicable, a copy of the payment bond is attached)
Name N/A Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name N/A Telephone Number _____
Address _____
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name _____ Telephone Number _____
Address _____
- In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name _____ Telephone Number _____
Address _____
- Expiration date of notice of commencement** (the expiration date will be 1 year from the date of recording unless a different date is specified) _____



State of Florida, County of Orange
I hereby certify that this is a true copy of the document as reflected in the Official Records
PHIL DIAMOND, COUNTY COMPTROLLER
BY: Phil Diamond D.C.

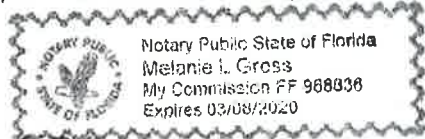
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

X Melissa Holdcraft _____
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager owner
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 30th day of 03/17 by Melissa Holdcraft
as owner for _____
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

Melanie L. Gross _____
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known _____ OR Produced ID
Type of ID Produced _____



DL #: H432-553-70-630-0



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: 4-10-18

PERMIT # _____

PROJECT ADDRESS: 5824 Labelle St.

, 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 DOORS				WALL PANELS			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Dbi Hung				Asphalt Shingles	CertainTeed	Landmark	5444.7
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Underlayment	CertainTeed	peel + stick	10785-R6
Skylights				Other			
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 Dale Terblanc

Date 4-11-18



Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

OFFICE OF THE
SECRETARY

FL #	FL5444-R13
Application Type	Revision
Code Version	2017
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	CertainTeed Corporation-Roofing
Address/Phone/Email	20 Moores Road Malvern, PA 19355 (610) 893-5400 mark.d.harner@saint-gobain.com
Authorized Signature	Mark Harner mark.d.harner@saint-gobain.com
Technical Representative	Mark D. Harner
Address/Phone/Email	18 Moores Road Malvern, PA 19355 (610) 651-5847 Mark.D.Harner@saint-gobain.com
Quality Assurance Representative	
Address/Phone/Email	
Category	Roofing
Subcategory	Asphalt Shingles
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen
Florida License	PE-59166
Quality Assurance Entity	UL LLC
Quality Assurance Contract Expiration Date	03/09/2020
Validated By	John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	FL5444 R13 COI 2018 01 COI NIEMINEN.pdf
Referenced Standard and Year (of Standard)	Standard ASTM D3161
	Year 2016

ASTM D3462

2010

ASTM D7158

2011

Equivalence of Product Standards
Certified By

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted

01/24/2018

Date Validated

01/29/2018

Date Pending FBC Approval

01/30/2018

Date Approved

04/10/2018

Summary of Products

FL #	Model, Number or Name	Description
5444.1	CertainTeed Asphalt Roof Shingles	3-tab, 4-tab, strip (no-cut-outs), laminated and architectural asphalt roof shingles
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: Refer to ER Section 5 for Limits of Use		Installation Instructions FL5444 R13 II 2018 01 FINAL ER CERTAINTEED ASPHALT SHINGLES FL5444-R13.pdf Verified By: Robert Nieminen, PE PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL5444 R13 AE 2018 01 FINAL ER CERTAINTEED ASPHALT SHINGLES FL5444-R13.pdf Created by Independent Third Party: Yes

[Back](#)

[Next](#)

Contact Us :: [2601 Blair Stone Road, Tallahassee FL 32399](#) Phone: 850-487-1824

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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

SECURITYMETRICS



NEMO|etc.

Certificate of Authorization #32455
353 Christian Street, Unit #13
Oxford, CT 06478
(203) 262-9245

ENGINEER

EVALUATE

TEST

CONSULT

CERTIFY

EVALUATION REPORT

CertainTeed Corporation
20 Moores Road
Malvern, PA 19355
(610) 651-5847

Evaluation Report 3532.09.05-R14
FL5444-R13
Date of Issuance: 09/22/2005
Revision 14: 01/24/2018

SCOPE:

This Evaluation Report is issued under **Rule 61G20-3** and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been evaluated for compliance with the **6th Edition (2017) Florida Building Code** sections noted herein.

DESCRIPTION: CertainTeed Asphalt Roof Shingles.

LABELING: Labeling shall be in accordance with the requirements of the Accredited Quality Assurance Agency noted herein and **FBC 1507.2.7.1 / R905.2.6.1**

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. of any changes to the product(s), the Quality Assurance or the production facility location(s). NEMO|etc. requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "NEMO|etc. Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 13.

Prepared by:

Robert J.M. Nieminen, P.E.
Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 01/24/2018. This does not serve as an electronically signed document.

CERTIFICATION OF INDEPENDENCE:

1. NEMO|etc. does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. NEMO|etc. is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.
5. This is a building code evaluation. Neither NEMO|etc. nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.

ROOFING SYSTEMS EVALUATION:
1. SCOPE:

Product Category: Roofing
Sub-Category: Asphalt Shingles

Compliance Statement: CertainTeed Asphalt Roof Shingles, as produced by CertainTeed Corporation, have demonstrated compliance with the following sections of the 6th Edition (2017) Florida Building Code and 6th Edition (2017) Florida Building Code, Residential Volume through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

<u>Section</u>	<u>Property</u>	<u>Standard</u>	<u>Year</u>
1507.2.5, R905.2.4	Physical Properties	ASTM D3462	2010
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D3161	2016
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D7158	2011

3. REFERENCES:

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
UL (TST 1740)	ASTM D3161	94NK9632	05/15/1998
UL (TST 1740)	ASTM D3161	99NK26506	11/23/1999
UL (TST 1740)	ASTM D3161	03CA12702	05/27/2003
UL (TST 1740)	ASTM D3161	03CA12702	06/16/2003
UL (TST 1740)	ASTM D3161	03NK29847	10/03/2003
UL (TST 1740)	ASTM D3161	04CA11329	05/24/2004
UL (TST 1740)	ASTM D3161	04CA32986	12/03/2004
UL (TST 1740)	ASTM D3161	05NK07049	04/15/2005
UL (TST 1740)	ASTM D3161	05NK16778	05/12/2005
UL (TST 1740)	ASTM D3161	05CA16778	05/12/2005
UL (TST 1740)	ASTM D3161	05NK14836	05/22/2005
UL (TST 1740)	ASTM D3161	05NK22800	06/22/2005
UL (TST 1740)	ASTM D3462	R684	09/21/2005
UL (TST 1740)	ASTM D7158	05NK08037	06/28/2006
UL (TST 1740)	ASTM D3161 & D3462	09CA28873	07/23/2009
UL (TST 1740)	ASTM D3462	10CA41303	10/07/2010
UL (TST 1740)	ASTM D3161	10CA41303	10/08/2010
UL (TST 1740)	ASTM D7158	10CA41303	10/27/2010
UL (TST 1740)	ASTM D3161 & D3462	10CA44960	11/11/2010
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	13CA32897	11/21/2013
UL LLC (TST 9628)	ASTM D3161, D3462	TFWZ.R684	04/22/2014
UL LLC (TST 9628)	ASTM D7158	TGAH.R684	04/22/2014
UL LLC (TST 9628)	ASTM D3161 & D3462	4786334434	09/16/2014
UL LLC (TST 9628)	ASTM D3161 & D3462	4786570826	02/12/2015
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	4786570717	12/16/2015
UL LLC (TST 9628)	ASTM D3161 & D3462	4787195678	02/09/2016
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	4787380356	10/26/2016
UL LLC (TST 9628)	ASTM D3462	4787380357	10/13/2016
UL LLC (TST 9628)	ASTM D7158	4787380357	11/08/2016
UL LLC (TST 9628)	ASTM D3161	4787380357	11/09/2016
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	4787586427	01/25/2017
UL LLC (TST 9628)	ASTM D3161 & D3462	4788042412	11/15/2017
UL LLC (QUA 9625)	Quality Control	Service Confirmation	Exp. 03/09/2020

4. PRODUCT DESCRIPTION:

4.1 Asphalt Shingles:

- 4.1.1 CT20™, XT™ 25, XT™ 30 and XT™ 30 IR are fiberglass reinforced, 3-tab asphalt roof shingles.
- 4.1.2 Arcadia™, Belmont®, Belmont® IR, Carriage House Shingle®, Grand Manor Shingle®, Landmark™, Landmark™ IR, Landmark™ Pro, Landmark™ Premium, Landmark™ TL, Landmark™ Solaris and Landmark™ Solaris IR are fiberglass reinforced, laminated asphalt roof shingles.
- 4.1.3 NorthGate™ is a fiberglass reinforced, laminated, SBS modified bitumen roof shingle.
- 4.1.4 Presidential Shake™, Presidential Shake™ IR, Presidential Shake TL™ and Presidential Solaris™ are fiberglass reinforced, architectural asphalt roof shingles.
- 4.1.5 Hatteras™, Highland Slate™ and Highland Slate™ IR are fiberglass reinforced, 4-tab asphalt roof shingles.
- 4.1.6 Patriot™ is a fiberglass reinforced asphalt roof strip-shingle (with no cut-outs) providing a laminated appearance through an intermittent shadow line with contrasting blend drops for color definition.

4.2 Hip & Ridge Shingles:

- 4.2.1 Presidential Accessory, Accessory for Hatteras, Shangle Ridge™, Shadow Ridge™, Cedar Crest™, Cedar Crest™ IR, NorthGate Ridge and NorthGate Accessory are fiberglass reinforced accessory shingles for hip and ridge installation.

4.3 Accessory Starter Strips:

- 4.3.1 SwiftStart® Starter Shingle is a starter strip for asphalt roof shingles. Its overall size of 15-1/4" x 38-3/4" yields two (2) 7-5/8" x 38-3/4" starter pieces per shingle.
- 4.4 Any of the above listed shingles may be produced in AR (algae resistant) versions.

5. LIMITATIONS:

- 5.1 This is a building code evaluation. Neither NEMO|etc. nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.
- 5.2 This Evaluation Report is not for use within FBC HVHZ jurisdictions.
- 5.3 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.4 Wind Classification:
 - 5.4.1 All shingles noted herein are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F and/or ASTM D7158, Class H, indicating the shingles are acceptable for use in all wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph). Refer to Section 6 for installation requirements to meet this wind rating.
 - 5.4.2 Presidential Accessory, Accessory for Hatteras, Shangle Ridge, Shadow Ridge, Cedar Crest, NorthGate Ridge and NorthGate Accessory hip & ridge shingles have been evaluated in accordance with ASTM D3161, Class F. All except NorthGate Ridge and NorthGate Accessory require use of BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant, applied as specified in manufacturer's application instructions, for use in wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph). Refer to Section 6 for installation requirements to meet this wind rating.
 - 5.4.3 SwiftStart® Starter Shingle has been evaluated in accordance with ASTM D3161, Class F. Refer to Section 6 for installation requirements to meet this wind rating.
 - 5.4.4 Classification by ASTM D7158 applies to exposure category B or C and a building height of 60 feet or less. Calculations by a qualified design professional are required for conditions outside these limitations. Contact the shingle manufacturer for data specific to each shingle.

5.4.4.1 **Analysis in accordance with ASTM D7158** indicates the measured uplift resistance (R_T) for the CertainTeed asphalt Roof shingles listed in Section 4.1 through 4.6 (except *Presidential Solaris™*) exceeds the calculated uplift force (F_T) at a maximum design wind speed of $V_{asd} = 150$ mph ($V_{ult} = 194$ mph) for **residential buildings** located in **Exposure D conditions** with **no topographical variations (flat terrain)** having a **mean roof height less than or equal to 60 feet**. The shingles are permissible under Code for installation in these conditions using the installation procedures detailed in this Evaluation Report and CertainTeed minimum requirements, subject to minimum codified fastening requirements established within any local jurisdiction, which shall take precedence.

5.5 All products in the roof assembly shall have quality assurance audits in accordance with **FAC Rule 61G20-3**.

6. INSTALLATION:

6.1 Roof deck, slope, underlayment and fasteners shall comply with **FBC 1507.2 / R905.2** and the shingle manufacturer’s minimum requirements.

6.1.1 Underlayment shall be acceptable to **CertainTeed Corporation** and shall hold current Florida Statewide Product Approval, or be Locally Approved per **Rule 61G20-3**, per **FBC Sections 1507.2.3, 1507.2.4 or R905.2.3**.

6.2 Installation of asphalt shingles shall comply with the **CertainTeed Corporation** current published instructions, using minimum four (4) nails per shingle in accordance with **FBC 1507.2.7 or Section R905.2.6** and the minimum requirements herein.

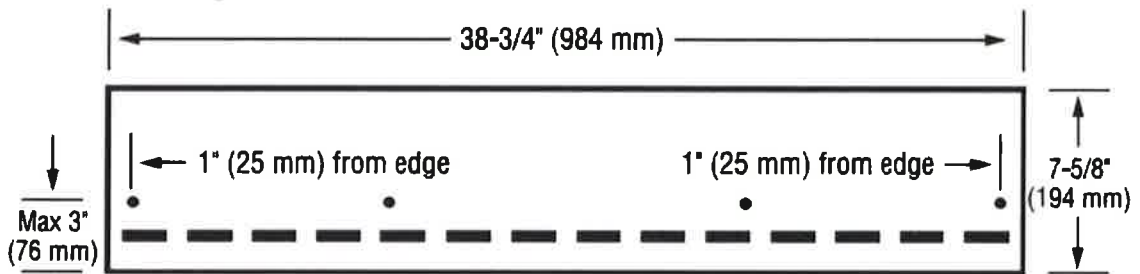
6.2.1 Fasteners shall be in accordance with manufacturer’s published requirements, but not less than **FBC 1507.2.6 or R905.2.5**. Staples are not permitted.

6.2.2 Where the roof slope exceeds 21 units vertical in 12 units horizontal, use the “Steep Slope” directions.

6.3 CertainTeed asphalt shingles are acceptable for use in reroof (tear-off) or recover applications, subject to the limitations set forth in **FBC Section 1511 or R908** and CertainTeed published installation instructions.

6.4 SWIFTSTART® STARTER SHINGLE:

Fastening: Use four nails, located as shown below

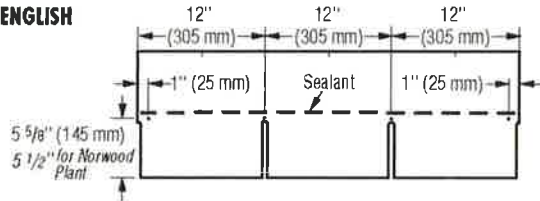


The inner two fasteners must be placed such that they fall at least 3" (76 mm) from the end joints of the shingle in the succeeding course.

6.5 CT20™, XT™ 25, XT™ 30, XT™ 30 IR:

LOW AND STANDARD SLOPE

ENGLISH



METRIC

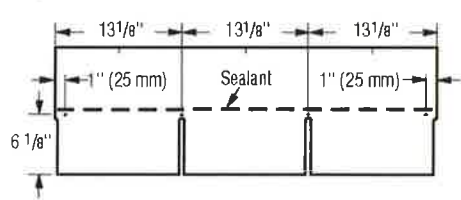


Figure 11-3: Use **four nails** for every full shingle.

STEEP SLOPE

Use **four** nails and six spots of asphalt roofing cement* for every full shingle (Figure 11-4). Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

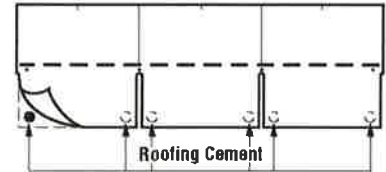


Figure 11-4: Use **four nails** and six spots of asphalt cement on steep slopes.

***CAUTION:** Excessive use of roofing cement can cause shingles to blister.

6.5.1 Hip & Ridge for CT20™, XT™ 25, XT™ 30, XT™ 30 IR: Cut Shingles

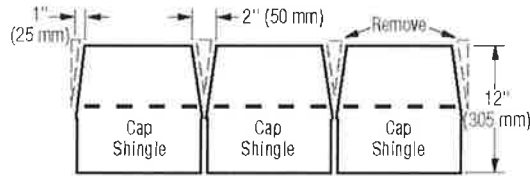


Figure 11-24: Cut tabs, then trim back to make cap shingles (English dimensions shown).

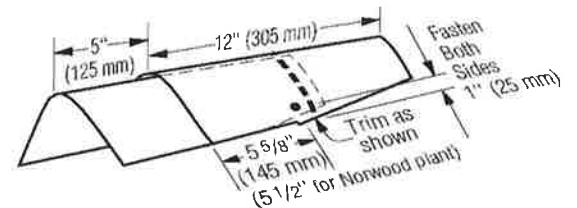


Figure 11-25: Installation of caps along the hips and ridges.

6.5.1.1 For ASTM D3161, Class F performance use BASF “Sonolastic® NP1™” adhesive or Henkel “PL® Polyurethane Roof & Flashing Sealant”, in accordance with CertainTeed requirements.

6.6 ARCADIA™:

LOW AND STANDARD SLOPE

Use **SIX** nails for every full shingle located as shown below.

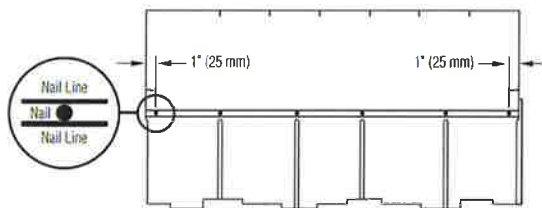


Figure 2: Use **six nails** for every full shingle.

STEEP SLOPE

Use **SIX** nails and **FOUR** spots of asphalt roofing cement for every full shingle as shown below. Apply asphalt roofing cement 1" (25 mm) from edge of shingle. Asphalt roofing cement meeting ASTM D 4586 Type II is suggested.

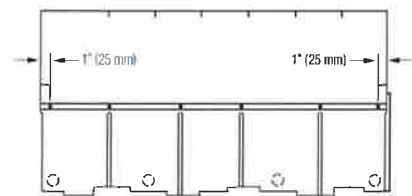
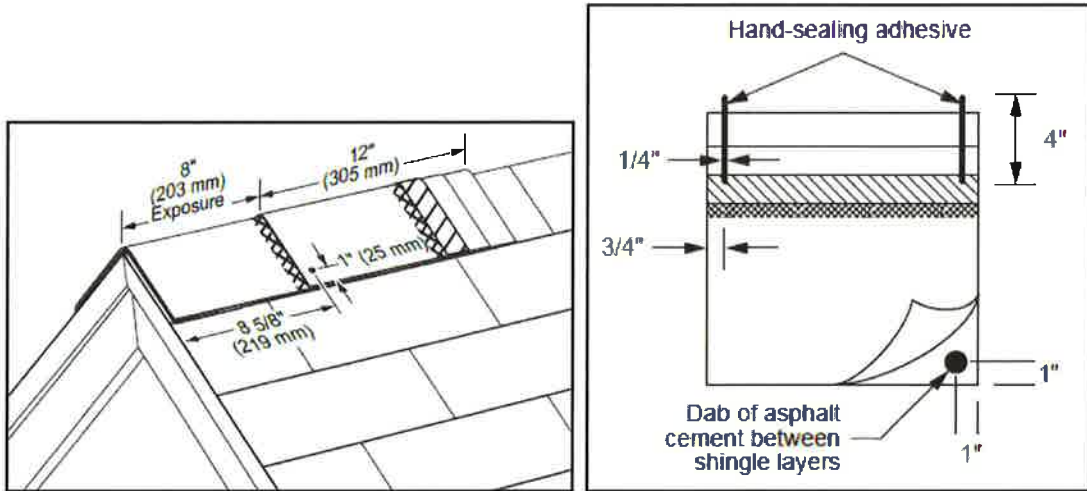


Figure 3: Use **six nails** and **four spots** of asphalt roofing cement on steep slopes.

6.6.1 **Hip & Ridge for Arcadia™: Cedar Crest™, Cedar Crest™ IR**

Use two (2), minimum 1¾-inch long fasteners per shingle. For the starter shingle, place fastener 1-inch from each side edge and about 2-inch up from the starter shingle's exposed butt edge, ensuring minimum ¾-inch embedment into the deck, or full penetration through the deck. For each full Cedar Crest shingle, place fasteners 8-5/8-inch up from its exposed butt edge and 1-inch from each side edge.

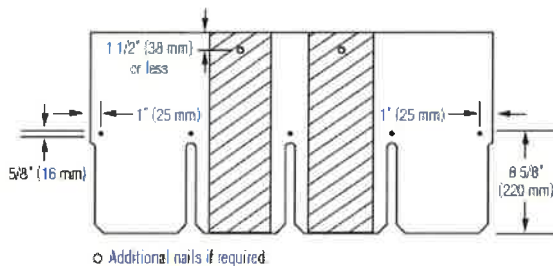
For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements, to **hand-seal Cedar Crest shingles**. Apply NP 1 or PL adhesive from the middle of the shingle's raised overlay on the top piece and extending approximately 4-inch along the sides of the headlap along a line ¾ to 1-inch from each side of the shingle's headlap. Immediately align and apply the overlying shingle, gently pressing tab sides into the adhesive, and install nails. To secure the other side, apply a 1-inch diameter spot of NP 1 or PL adhesive between the shingle layers.



6.7 **BELMONT® OR BELMONT® IR:**

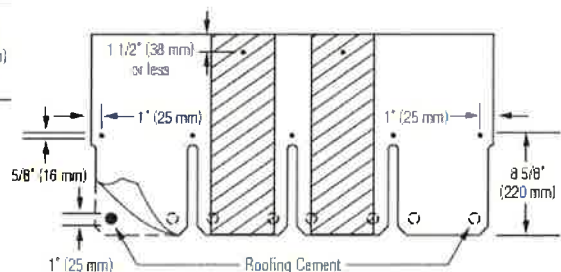
Low and Standard Slope (2:12 to 21:12):

Use FIVE nails for every full Belmont shingle, located as shown below.



Steep Slope (greater than 21:12):

Use SEVEN nails and EIGHT spots of asphalt roofing cement** for every full Belmont shingle. Apply asphalt roofing cement 1" (25mm) from edge of shingle. See below. Asphalt roofing cement meeting ASTM D4586 Type II is suggested.



6.7.1 **Hip & Ridge for Belmont® or Belmont® IR:**

6.7.1.1 **Option 1:** For Belmont®, refer to instructions herein for Cedar Crest™ or Cedar Crest™ IR hip and ridge shingles. For Belmont® IR, refer to instructions herein for Cedar Crest™ IR hip and ridge shingles.

6.7.1.2 **Option 2:** For Belmont®: Shangle® Ridge

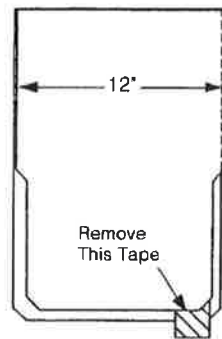


Figure 17-18: Shangle® Ridge.

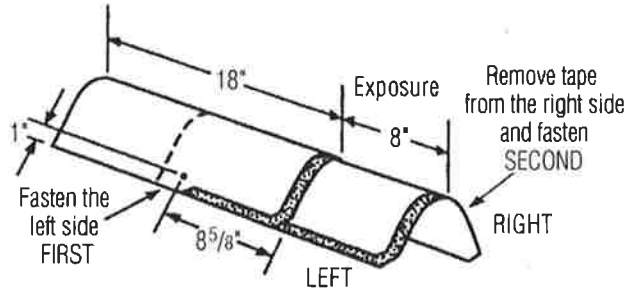


Figure 17-19: Installation of Shangle® Ridge shingles on hips and ridges.

6.7.1.3 For ASTM D3161, Class F performance use BASF “Sonolastic® NP1™” adhesive or Henkel “PL® Polyurethane Roof & Flashing Sealant”, in accordance with CertainTeed requirements.

6.8 CARRIAGE HOUSE SHANGLE® AND GRAND MANOR SHANGLE®:

LOW AND STANDARD SLOPE

Use five nails for every full Shangle.

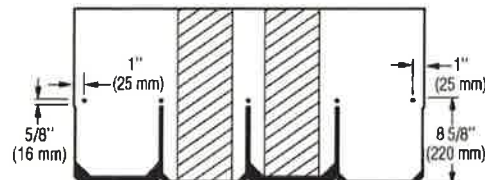


Figure 17-4: Use five nails for every full Grand Manor Shangle, Carriage House Shangle, or Centennial Slate.

STEEP SLOPE

Use seven nails and three spots of asphalt roofing cement for every full Grand Manor Shangle. Use five nails and three spots of asphalt roofing cement for every full Carriage House Shangle and Centennial Slate. Apply asphalt roofing cement 1" (25 mm) from edge of shingle (Figure 17-5). Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

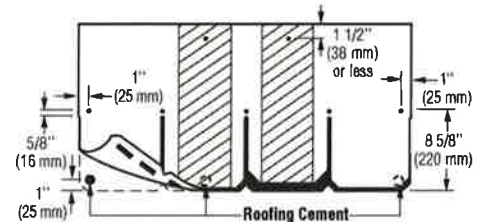


Figure 17-5: When installing Grand Manor Shingles on steep slopes, use seven nails and three spots of asphalt roofing cement.

6.8.1 **Hip & Ridge for Carriage House Shangle® and Grand Manor Shangle:** Refer to instructions herein for Shangle® Ridge hip and ridge shingles

6.9 LANDMARK™, LANDMARK™ IR, LANDMARK™ PRO, LANDMARK™ PREMIUM, LANDMARK™ TL, LANDMARK™ SOLARIS, LANDMARK™ SOLARIS IR, NORTHGATE:

LOW AND STANDARD SLOPE

LANDMARK TL

METRIC DIMENSIONS

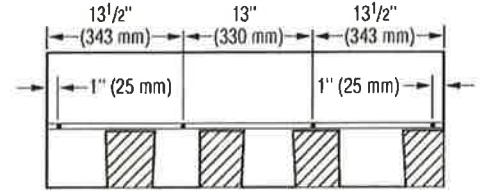
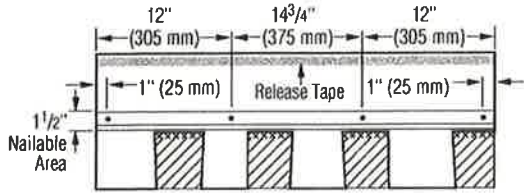
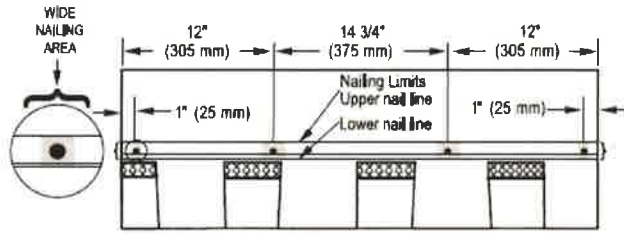


Figure 13-4: Use four nails for every full shingle.

NorthGate:



Nailing areas for low and standard slopes (from 2:12 to 21:12)
Nail between upper & lower lines as shown above.

STEEP SLOPE

Use six nails and four spots of asphalt roofing cement for every full laminated shingle. See below. Asphalt roofing cement should meet ASTM D4586 Type II. Apply 1" spots of asphalt roofing cement under each corner and at about 12" to 13" in from each edge.

LANDMARK TL

METRIC DIMENSIONS

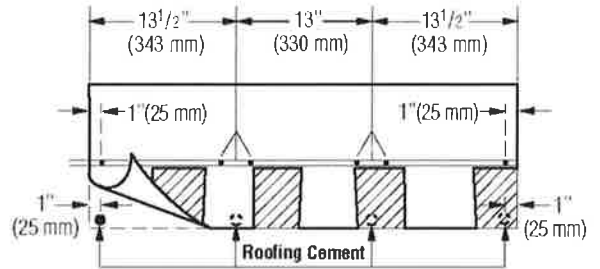
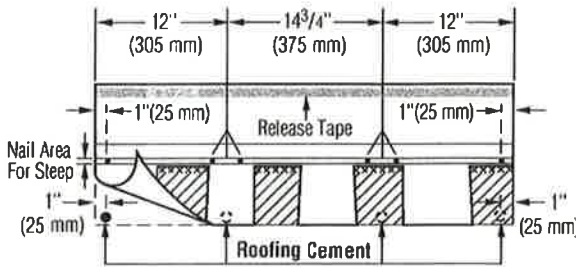
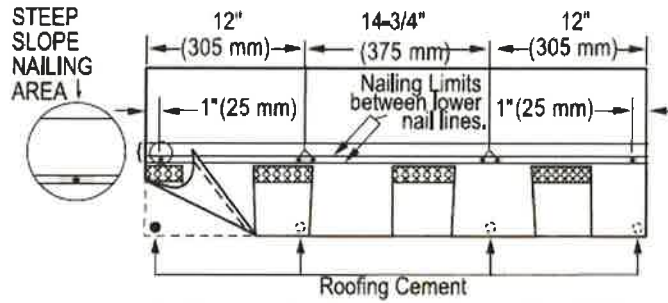


Figure 13-5: Use six nails and four spots of asphalt roofing cement on steep slopes.

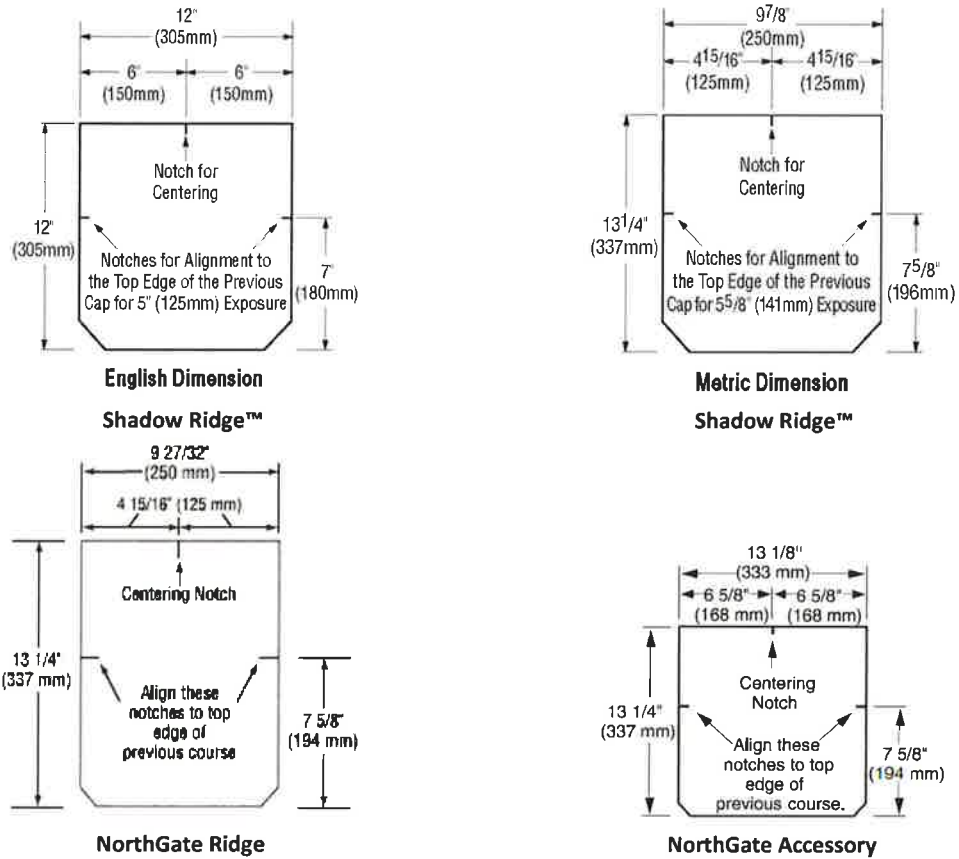
NorthGate:



Nailing areas for steep slopes (greater than 21:12) and "Storm-Nailing"
Nail between lower 2 nail lines as shown above.

6.9.1 **Hip & Ridge for Landmark™, Landmark™ IR, Landmark™ Pro, Landmark™ Premium, Landmark™ TL, Landmark™ Solaris, Landmark™ Solaris IR, NorthGate:**

6.9.1.1 **Option 1: Shadow Ridge™ or NorthGate Accessory**



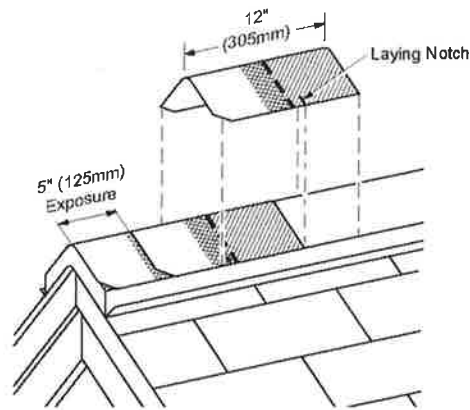


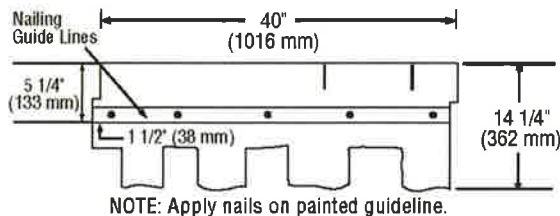
Figure 13-20: Use laying notches to center shingles on hips and ridges, and to locate the correct exposure.

- 6.9.1.2 For ASTM D3161, Class F performance use BASF “Sonolastic® NP1™” adhesive or Henkel “PL® Polyurethane Roof & Flashing Sealant”, in accordance with CertainTeed requirements.
- 6.9.1.3 **Option 2:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR hip and ridge shingles.

6.10 PRESIDENTIAL SHAKE™, PRESIDENTIAL SHAKE™ IR, PRESIDENTIAL SHAKE TL™, PRESIDENTIAL SOLARIS™:

LOW AND STANDARD SLOPE:

For low and standard slopes, use five nails for each full Presidential shingle as shown below.



NOTE: Apply nails on painted guideline.

Figure 16-6: Fastening Presidential and Presidential TL Shake shingles on low and standard slopes.

STEEP SLOPE:

For steep slopes, use nine nails for each full Presidential shingle and apply 1" diameter spots of asphalt roofing cement under each shingle tab. After applying 5 nails in between the nailing guide lines, apply 4 nails 1" above tab cutouts making certain tabs of overlying shingle cover nails.

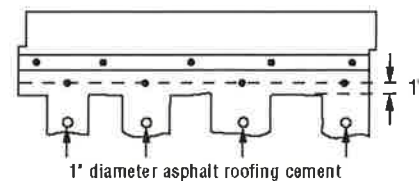


Figure 16-7: Fastening Presidential and Presidential T/L Shake shingles on steep slopes.

6.10.1 Hip & Ridge for Presidential Shake™, Presidential Shake™ IR, Presidential Shake TL™, Presidential Solaris™:

6.10.1.1 Option 1: Presidential Accessory

PRESIDENTIAL ACCESSORY

Presidential accessory shingles can be used for covering hips and ridges. Apply shingles up to the ridge (expose no more than 7" from the bottom edge of the "tooth.") Fasten each accessory with two fasteners. The fasteners must be 1 3/4" long or longer, so they penetrate either 3/4" into the deck or completely through the deck. Presidential accessory comes in two different sizes: Accessory produced in Birmingham, AL is 12" x 12"; Portland, OR produces 9 7/8" x 13 1/4" accessory.

- 6.10.1.2 For ASTM D3161, Class F performance use BASF “Sonolastic® NP1™” adhesive or Henkel “PL® Polyurethane Roof & Flashing Sealant”, in accordance with CertainTeed requirements.

6.10.1.3 **Option 2:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR hip and ridge shingles.

6.11 HATTERAS™:

LOW, STANDARD AND STEEP SLOPE:

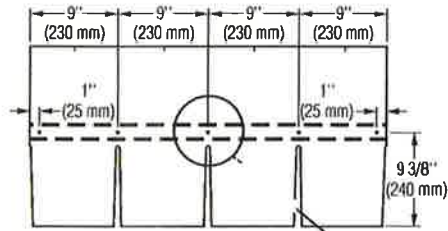


Figure 15-3: Fastening Hatteras Shingles on Low and Standard Slopes

For low and standard slopes, use five nails for each full Hatteras shingle as shown above.

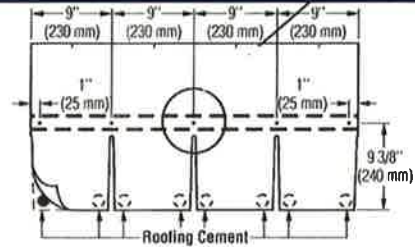


Figure 15-4: Fastening Hatteras Shingles on Steep Slopes

For steep slopes, use five nails and eight spots of asphalt roofing cement for each full Hatteras shingle as shown above. Apply 1" (25 mm) diameter spots of roofing cement (ASTM D 4586 Type II suggested) under each tab corner. Press shingle into place; do not expose cement.

CAUTION: Too much roofing cement can cause shingles to blister.

6.11.1 Hip & Ridge for Hatteras™:

6.11.1.1 Option 1: Accessory for Hatteras

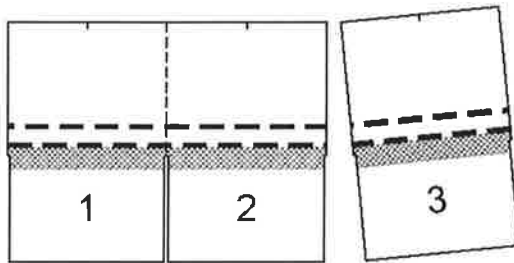
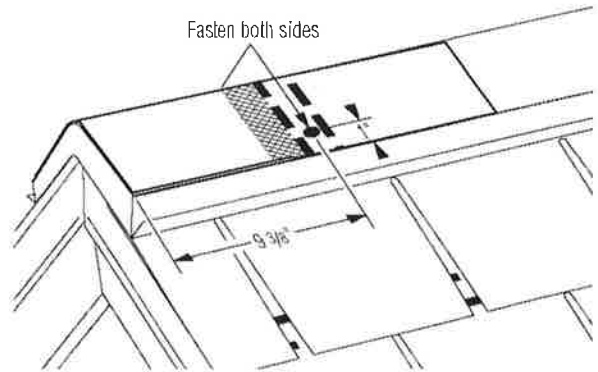


Figure 15-14: 18 three-piece units separate to make 54 Hatteras Accessory shingles.



6.11.1.2 Option 2: Cut Hatteras Shingles

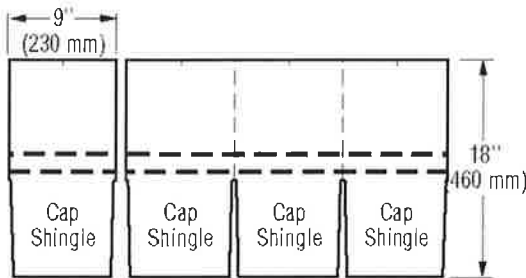


Figure 15-20: Cut Hatteras shingles to make cover cap.

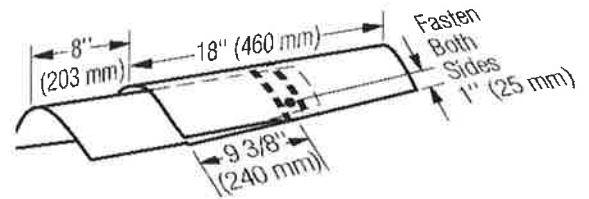


Figure 15-21: Installation of caps along hips and ridges.

6.11.1.3 For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements.

6.12 HIGHLAND SLATE™, HIGHLAND SLATE™ IR:

LOW AND STANDARD SLOPE:

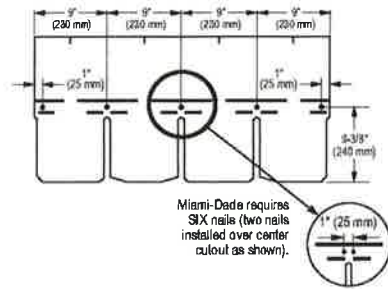


Figure 11-3: Use FIVE nails for every Highland Slate shingle.

STEEP SLOPE:

Use FIVE nails and EIGHT spots of asphalt roofing cement* for each full Highland Slate shingle. For Miami-Dade, SIX nails are required. Apply 1" diameter spots of asphalt roofing cement under each tab corner. Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

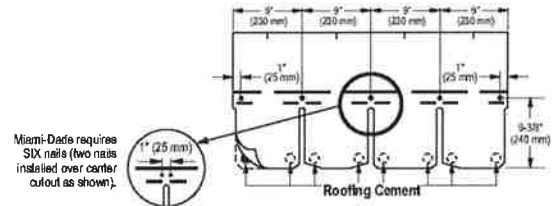


Figure 11-3A: Use FIVE nails and eight spots of asphalt roofing cement under each tab corner.

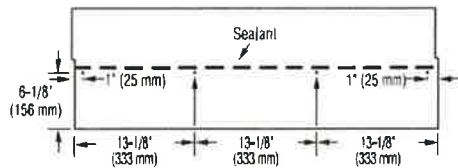
*CAUTION: Excessive use of roofing cement can cause shingles to blister.

6.12.1 **Hip & Ridge for Highland Slate™, Highland Slate™ IR:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR or Shangle Ridge™ hip and ridge shingles.

6.13 PATRIOT™:

LOW AND STANDARD SLOPE

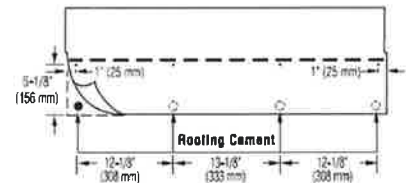
Use FOUR nails for every full shingle located as shown below.



STEEP SLOPE

Use FOUR nails and four spots of asphalt roofing cement for every full shingle as shown below. Asphalt roofing cement meeting ASTM D4586 Type II is suggested. Apply 1" (25 mm) spots of asphalt roofing cement as shown.

CAUTION: Excessive use of roofing cement can cause shingles to blister.



6.13.1 **Hip & Ridge for Patriot™:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR, Shadow Ridge™, NorthGate or Shangle Ridge™ hip and ridge shingles.

7. LABELING:

- 7.1 Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.
- 7.2 Asphalt shingle wrappers shall indicate compliance with one of the required classifications detailed in FBC Table 1507.2.7.1 / R905.2.6.1.

8. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

9. MANUFACTURING PLANTS:

Contact the named QA entity for information on which plants produce products covered by **Florida Rule 61G20-3** QA requirements.

10. QUALITY ASSURANCE ENTITY:

UL LLC – QUA9625; (414) 248-6409; karen.buchmann@us.ul.com

- END OF EVALUATION REPORT -



Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

OFFICE OF THE
SECRETARY

FL #	FL6785-R7
Application Type	Revision
Code Version	2017
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	Carlisle Coatings & Waterproofing
Address/Phone/Email	900 Hensley Lane Wylie, TX 75098 (717) 245-7000 Ext 7456 wert@syntec.carlisle.com
Authorized Signature	Chad Wert wert@syntec.carlisle.com
Technical Representative	
Address/Phone/Email	
Quality Assurance Representative	
Address/Phone/Email	
Category	Roofing
Subcategory	Underlayments
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen
Florida License	PE-59166
Quality Assurance Entity	UL LLC
Quality Assurance Contract Expiration Date	04/13/2020
Validated By	John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	FL6785 R7 COI 2017 01 COI Nieminen.pdf
Referenced Standard and Year (of Standard)	Standard ASTM D1970
	Year 2015

Equivalence of Product Standards
Certified By

Sections from the Code

Product Approval Method Method 1 Option D

Date Submitted 08/31/2017
Date Validated 09/12/2017
Date Pending FBC Approval 09/18/2017
Date Approved 12/12/2017

Summary of Products

FL #	Model, Number or Name	Description
6785.1	CCW Roof Underlayments	Self-Adhering, modified bitumen roof underlayments
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: Refer to ER Section 5 for Limits of Use.		Installation Instructions FL6785 R7 II 2017 08 FINAL ER CARLISLE UNDERLAYMENTS FL6785-R7.pdf Verified By: Robert Nieminen 59166 Created by Independent Third Party: Yes Evaluation Reports FL6785 R7 AE 2017 08 FINAL ER CARLISLE UNDERLAYMENTS FL6785-R7.pdf Created by Independent Third Party: Yes

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EXTERIOR RESEARCH & DESIGN, LLC.
 Certificate of Authorization #9503
 353 CHRISTIAN STREET, UNIT #13
 OXFORD, CT 06478
 (203) 262-9245

EVALUATION REPORT

Carlisle Coatings & Waterproofing
 900 Hensley Lane
 Wylie, TX 75098
 (717) 245-7000

Evaluation Report C39180.12.11-R3
FL6785-R7
Date of Issuance: 12/09/2011
Revision 3: 02/04/2015

SCOPE:

This Evaluation Report is issued under **Rule 61G20-3** and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have evaluated for compliance with the **6th Edition (2017) Florida Building Code** sections noted herein.

DESCRIPTION: CCW Roof Underlayments

LABELING: Labeling shall be in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

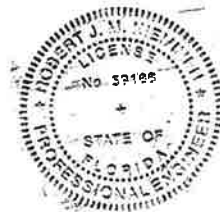
CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 4.

Prepared by:



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 08/29/2017. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

Robert J.M. Nieminen, P.E.
 Florida Registration No. 59166, Florida DCA ANE1983

CERTIFICATION OF INDEPENDENCE:

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.
5. This is a building code evaluation. Neither Trinity|ERD nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.

ROOFING COMPONENT EVALUATION:

1. SCOPE:

Product Category: Roofing
Sub-Category: Underlayment

Compliance Statement: **CCW Roof Underlayments**, as produced by **Carlisle Coatings & Waterproofing**, have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

<u>Section</u>	<u>Property</u>	<u>Standard</u>	<u>Year</u>
1507.1.1, Table 1507.1.1, 1507.2.4, 1507.2.9.2	Physical Properties	ASTM D1970	2015

3. REFERENCES:

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
ERD (TST6049)	Physical Properties	C41280.10.12	10/05/2012
MTI (TST2508)	Physical Properties	PX02M0A	01/17/2011
MTI (TST2508)	Physical Properties	PX13M0B	01/18/2011
ICC-ES (EVL2396)	2015 IBC/IRC Compliance	ESR-1556	02/01/2016
ICC-ES (EVL2396)	2015 IBC/IRC Compliance	ESR-2206	06/01/2016
UL, LLC. (QUA9625)	Quality Control	TGDY.R18678 Listing	10/18/2010
UL, LLC. (QUA9625)	Quality Control	Service Confirmation	Exp. 04/13/2020

4. PRODUCT DESCRIPTION:

- 4.1 **CCW WIP 100** is a self-adhering, fiberglass reinforced, granule surfaced, rubberized asphalt roof underlayment.
- 4.2 **CCW WIP 250** is a self-adhering, fiberglass reinforced, film surfaced, rubberized asphalt roof underlayment.
- 4.3 **CCW WIP 300HT** is a self-adhering, coated-polyolefin-composite film surfaced, rubberized asphalt roof underlayment.

5. LIMITATIONS:

- 5.1 This is a building code evaluation. Neither Trinity|ERD nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.
- 5.2 This Evaluation Report is not for use in FBC HVHZ jurisdictions.
- 5.3 Fire Classification is not part of this report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.4 **CCW Roof Underlayments** may be used with any prepared roof cover where the product is specifically referenced within FBC approval documents. If not listed, a request may be made to the Authority Having Jurisdiction for approval based on this evaluation combined with supporting data for the prepared roof covering.

5.5 **Allowable Roof Covers:**

TABLE 1: ROOF COVER OPTIONS						
Underlayment	Asphalt Shingles	Nail-On Tile	Foam-On Tile	Metal	Wood Shakes & Shingles	Slate & Synthetic Slate/Shake
CCW WIP 100	Yes	No	No	No	No	No
CCW WIP 250	Yes	No	No	Yes	No	No
CCW WIP 300HT	Yes	No	No	Yes	No	Yes

5.6 **Allowable Substrates:**

5.6.1 **Direct-Bond to Deck:**

Self-adhering membranes applied to:

- New untreated plywood;
- Primed new untreated plywood;
- Existing plywood;
- Primed existing plywood;

*Note: While not required, **CCW-702** or **CAV-GRIP** primer may be used when deemed appropriate or when temperatures are below 40°F.*

5.6.2 **Bond to Mechanically Attached Base Layer:**

Self-adhering membranes applied to:

- ASTM D226, Type I or II felt;

For installations under mechanically attached prepared roof coverings, base layer shall be attached per minimum codified requirements.

5.7 **Exposure Limitations:**

5.7.1 **CCW WIP 100, CCW WIP 250 and CCW WIP 300HT** shall not be left exposed for longer than **30-days** after installation.

6. INSTALLATION:

6.1 **CCW Roof Underlayments** shall be installed in accordance with **Carlisle Coatings & Waterproofing** published installation requirements subject to the Limitations set forth in Section 5 herein and the specifics noted below.

6.2 Re-fasten any loose decking panels, and check for protruding nail heads. Sweep the substrate thoroughly to remove any dust and debris prior to application. Prime the substrate (if applicable) with **CCW-702** or **CAV-GRIP** Primer.

6.3 **CCW WIP 100, CCW WIP 250 and CCW WIP 300HT:**

6.3.1 Shall be installed in compliance with the requirements for ASTM D1970 underlayment in **FBC Section 1507** for the type of prepared roof covering to be installed.

6.3.2 While not required, **CCW-702** or **CAV-GRIP** primer may be used when deemed appropriate. Priming is required when temperatures are below 40°F.

6.3.3 Cut **WIP** roofing underlayment into 10 to 15 ft lengths. Remove 2 to 3 ft of release film and align the edge of the membrane, sticky-side down, so it overhangs the drip edge by 3/8-inch. Continue to remove release film and press as you move across the roof. Use a hand roller and/or hand pressure to press into place.

6.3.4 Horizontal seams should be minimum 3.5-inches, configured to shed water. Vertical seams should be 6-inches and staggered not less than 2-ft from vertical seams in the course below.

6.3.5 Consult **Carlisle Coatings & Waterproofing** for steep slope & back nailing requirements.

6.3.6 For Valleys and Ridges: Cut **WIP** roofing underlayment into manageable lengths. Align over the center of the valley, hip or ridge. Remove release film. Press the middle of the membrane first before working toward the edges. For open valleys, cover roofing underlayment with metal valley liners.

7. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

8. MANUFACTURING PLANTS:

Contact the manufacturer or the named QA entity for plants covered under **Rule 61G20-3 QA** requirements. The following plants have qualified under ASTM D1970-15.

<u>Product</u>	<u>Plant</u>
CCW WIP 100 & WIP 250	Carlisle, PA
CCW WIP 300HT	Terrell, TX

9. QUALITY ASSURANCE ENTITY:

UL, LLC– QUA9625; (847) 664-3281

- END OF EVALUATION REPORT -



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD
2801 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783**

(850) 487-1395

**LE BLANC, DALE ROGER
BRITE TOP ROOFING
POST OFFICE BOX 590325
ORLANDO FL 32859**

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!

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER

CCC058108

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

**LE BLANC, DALE ROGER
BRITE TOP ROOFING
P.O. BOX 590325
ORLANDO FL 32859**



ISSUED: 07/11/2018

DISPLAY AS REQUIRED BY LAW

SEQ # L1807110000802



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/22/2018

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 have ADDITIONAL INSURED provisions or 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:
Presidential Insurance Services, Inc.
2665 South Bayshore Drive #707
Miami, FL. 33133

CONTACT NAME:	Jeff Lampert	FAX (A/C, No.):	305-423-0351
PHONE (A/C, No, Ext):	305-423-0350		
E-MAIL ADDRESS:	jeff@insurancequotelive.com		
INSURER(S) AFFORDING COVERAGE			
INSURER A:	United Specialty Insurance Company		
INSURER B:			
INSURER C:			
INSURER D:			
INSURER E:			
INSURER F:			

INSURED:
DNW Corporation DBA: Brite Top Roofing
PO BOX 590325
Orlando, FL. 32859

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.

NSR LTR	TYPE OF INSURANCE	ADDITIONAL SUBROGATION WAIVED	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"/> PROJECT <input type="checkbox"/> LOC OTHER:		PC-106286 SII1041A11280-04	3/19/2018	3/19/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/OP AGG \$ 1,000,000 COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$ PER STATUTE OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY <input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY <input type="checkbox"/> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					

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

CERTIFICATE HOLDER
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

CERTIFICATE OF LIABILITY INSURANCE

Date
1/2/2018

Producer: Plymouth Insurance Agency
2739 U.S. Highway 19 N.
Holiday, FL 34691
(727) 938-5562

This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

Insurers Affording Coverage

NAIC #

Insured: South East Personnel Leasing, Inc. & Subsidiaries
2739 U.S. Highway 19 N.
Holiday, FL 34691

Insurer A: Lion Insurance Company	11075
Insurer B:	
Insurer C:	
Insurer D:	
Insurer E:	

Coverages

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. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits																
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence \$ Damage to rented premises (EA occurrence) \$ Med Exp \$ Personal Adv Injury \$ General Aggregate \$ Products - Comp/Op Agg \$																
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident) \$ Bodily Injury (Per Person) \$ Bodily Injury (Per Accident) \$ Property Damage (Per Accident) \$																
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made Deductible				Each Occurrence Aggregate																
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? NO If Yes, describe under special provisions below.	WC 71949	01/01/2018	01/01/2019	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 5%; text-align: center;"><input checked="" type="checkbox"/></td> <td style="width: 70%;">WC Statutory Limits</td> <td style="width: 5%; text-align: center;"><input type="checkbox"/></td> <td style="width: 15%;">OTHER</td> </tr> <tr> <td></td> <td>E.L. Each Accident</td> <td></td> <td>\$1,000,000</td> </tr> <tr> <td></td> <td>E.L. Disease - Ea Employee</td> <td></td> <td>\$1,000,000</td> </tr> <tr> <td></td> <td>E.L. Disease - Policy Limits</td> <td></td> <td>\$1,000,000</td> </tr> </table>	<input checked="" type="checkbox"/>	WC Statutory Limits	<input type="checkbox"/>	OTHER		E.L. Each Accident		\$1,000,000		E.L. Disease - Ea Employee		\$1,000,000		E.L. Disease - Policy Limits		\$1,000,000
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	E.L. Disease - Ea Employee		\$1,000,000																			
	E.L. Disease - Policy Limits		\$1,000,000																			

Other **Lion Insurance Company is A.M. Best Company rated A (Excellent). AMB # 12616**

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 92-67-248
Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company":

DNW Corporation dba Brite Top Roofing

Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s), while working in: FL

Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity.

A list of the active employee(s) leased to the Client Company can be obtained by faxing a request to (727) 937-2138 or by calling (727) 938-5562.

Project Name:

ISSUE 01-12-18 (PH)

Begin Date: 6/8/2015

CERTIFICATE HOLDER CITY OF BELLE ISLE 1600 NELA AVENUE BELLE ISLE, FL 32809	CANCELLATION Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.
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BRUCE VICKERS, TAX COLLECTOR
 OSCEOLA COUNTY, STATE OF FLORIDA
 LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO.
 54990

EXPIRATION
 SEPTEMBER 30, 2018

2018

BUSINESS TYPE:
 6420 ROOFING CONTR (DBPR/CMPCRD)

07/20/2017
 Oper JAD
 Till 90
 Paid 30.00
 Rcpt.#9001363

6420-54990	
TRANSFER	0.00
ORIGINAL TAX	30.00
AMOUNT	0.00
PENALTY	0.00
COLLECTION COST	0.00
TOTAL	30.00

BUSINESS:
 Brite Top Roofing
 DNW Corporation
 4255 Boggy Creek Rd
 Kissimmee, FL 34744

Location:
 OSCEOLA COUNTY

CCC058708

BRUCE VICKERS, TAX COLLECTOR
 P.O. BOX 24105 KISSIMMEE, FL 34742-0105
 888-360-3600

THIS RECEIPT IS IN ADDITION AND NOT IN LIEU OF ANY OTHER LICENSES REQUIRED BY LAW OR MUNICIPAL ORDINANCE AND IS SUBJECT TO REGULATIONS OF ZONING, HEALTH, AND ANY OTHER LAWFUL AUTHORITY
THIS LOCAL BUSINESS TAX RECEIPT IS FURNISHED PURSUANT TO CHAPTER 205 LAWS OF FLORIDA AND OSCEOLA COUNTY ORDINANCE 95-10, AS AMENDED

The law requires this Local Business Tax Receipt to be displayed conspicuously at the place of business in such manner that it can be open to the view of the public and subject to inspection by all duly authorized officers of the County.

Pursuant to State Law, all Local Business Tax Receipts shall expire on September 30th of the succeeding year. Those Local Business Tax Receipts renewed beginning October 1st shall be delinquent and subject to a delinquency penalty of 10% for the month of October, plus an additional 5% penalty for each month of delinquency thereafter until paid; provided that the total delinquency penalty shall not exceed 25% of the Local Business Tax Receipt for the delinquent establishment. A 25% penalty shall be imposed on any person engaged in any new business, occupation or profession without first obtaining an Osceola County Local Business Tax Receipt. PLUS: if delinquent more than 150 days, subject to civil actions and penalties, and a penalty of up to \$250.

This receipt is a Local Business Tax only. It does not permit the Local Business Taxpayer to violate any existing regulatory or zoning laws of the state, county, or cities, nor does it exempt the licensee from any other license or permits that may be required by law.

This form becomes a receipt when validated by the Tax Collector. Note: Display in accordance with the county ordinance. Local Business Tax Receipts are subject to change according to law.