



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://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 either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD. PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.**

Scope of Work: PLUMBING: re-pipe

Comments: None

### Project Information

Address: 5019 Saint Germaine Avenue, Belle Isle, FL 32812

Parcel ID: 17-23-30-4380-07-040

Property Owner: Roach, Stephanie

Phone Number: 407 257

5775\*\*\*\*\*

Company Name: Emerald Plumbing of Central Florida, Inc

Contractor Name: Cuddy, William

License Number: CFC1426238

Address: 2311 Henderson Drive Orlando, FL 32806

Phone Number: 407-898-3538

Permit Number: 2015-08-024

Date of Application: 08/05/2015

Date Permit Issued: 08/10/2015

**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

School \$  
Traffic \$

#### ZONING FEES

Zoning Fee \$

#### UNIVERSAL ENG - BUILDING FEES

Cert of Occ \$  
Demo \$  
Building \$  
Fence \$  
Driveway \$  
Shed \$  
Window(s) \$  
Door(s) \$  
PrePower \$  
Electrical \$  
Temp Pole \$  
Plumbing \$55.50  
Mechanical \$  
Gas \$  
Roofing \$  
Boat Dock \$  
Screen Encl \$  
Swimming Pool \$  
Sign \$

#### SURCHARGE FEES

Surcharge Fee \$2.00  
Surcharge Fee \$2.00

**TOTAL FEES \$59.50**

Date Paid 8-10-15

CC or Check # AMEX52400

Amount Paid 59.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

#### BUILDING INSPECTOR USE ONLY

#### IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

#### 1<sup>st</sup> BUILDING

Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? \_\_\_\_\_ (Footing/Foundation)

2<sup>nd</sup> \_\_\_\_\_ (Slab)

3<sup>rd</sup> \_\_\_\_\_ (Lintel) (Wall Reinforcing on Masonry Building)

4<sup>th</sup> \_\_\_\_\_ (Exterior Framing) (Roof/Wall Sheathing)

5<sup>th</sup> \_\_\_\_\_ (Framing) (To be made after Plumbing/Mechanical/Electrical Rough-Ins & Windows/Doors Installed)

6<sup>th</sup> \_\_\_\_\_ (Insulation to be Made After Roof Installed)

7<sup>th</sup> \_\_\_\_\_ (Drywall)

8<sup>th</sup> \_\_\_\_\_ (Sidewalk/Driveway)

9<sup>th</sup> \_\_\_\_\_ (Other)

10<sup>th</sup> \_\_\_\_\_ (Final - After MEP and Other Applicable Finals)

#### 1<sup>st</sup> ROOFING

1<sup>st</sup> ROOFING Deck Nailing/Dry-in/Flashing \_\_\_\_\_

2<sup>nd</sup> ROOFING Covering In-Progress \_\_\_\_\_

3<sup>rd</sup> ROOFING Covering Final \_\_\_\_\_

1<sup>st</sup> PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

2<sup>nd</sup> \_\_\_\_\_ (Underground) 2<sup>nd</sup> \_\_\_\_\_ (Sewer)

3<sup>rd</sup> \_\_\_\_\_ (Rough-In/Tub Set) 4<sup>th</sup> \_\_\_\_\_ (Final)

#### CHECK APPROPRIATE BOX

GAS \_\_\_ Natural \_\_\_ LP  MECHANICAL  ELECTRICAL  LOW VOLTAGE

1<sup>st</sup> \_\_\_\_\_ (Rough-In) 2<sup>nd</sup> \_\_\_\_\_ (Final)

Inspection requests are to be emailed to [BDscheduling@UniversalEngineering.com](mailto:BDscheduling@UniversalEngineering.com); a confirmation email will be sent back to you upon scheduling. Next-Day Inspection requests must be made by 1pm. Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com/ff094edc4-832d-44bd-9809-ect32f9e2e63>

login ID = [cobi@universalengineering.com](mailto:cobi@universalengineering.com)

password = universal113

PROJECT NUMBER 0115.1501080.cw

TASK NUMBER 01

CITY OF BELLE ISLE  
Permit Application Review Sheet

Permit Number	2015-08-024
Property Owner	ROACH, Stephanie
Address	5019 St Germaine Ave
Nature of Improvement	Plumbing re-pipe for SFR
Received Application	8-6-15
Sent for Stormwater Review	
Stormwater Approved	
Sent for Zoning Review	
Zoning Approved	
Applied for Variance	
Variance Approved	
Sent to BO for Review	8-7-15
Building Official Approved	
<b>Comments</b>	
1.	Susan 8-7-15 WD #55357 to Jay ✓
2.	
3.	Emiled Emerald Plumbing - Insurance cert is wrong
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32812  
Tel 407-581-8161 \* Fax 407-581-0313 \* www.universalengineering.com

RECEIVED  
AUG 05 2015 11

APPLICATION FOR PLUMBING PERMIT

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

DATE OF APPLICATION: 8/5/15

PERMIT NUMBER 205-08-024

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

Project Address 5019 SAINT GERMAINE AVE Belle Isle FL 32809 32812

Property Owner STEPHANIE ROACH Phone 407-257-5775

Property Owner's Mailing Address 5019 SAINT GERMAINE AVE City BELLE ISLE

State FL Zip Code 32812 Parcel Id Number: 17-23-30-4380-07-040

To obtain this information, please visit <http://www.ocpafl.org/Searches/ParcelSearch.aspx>

Class of Building: Old  New  Type of Building: Residential  Commercial  Other   
Type of Work: New  Alteration  Addition  Repair  Type of System: Sewer  Septic  Re-pipe

YOU MAY BE REQUIRED TO PROVIDE SEPTIC SYSTEM VERIFICATION FOR NEW / ALTERED / ADDITION to Septic System - ORANGE COUNTY DOCUMENT 64E-6

VALUATION OF JOB (labor & materials) \$ 2300.00

FIXTURES	Quantity
Water Closets (Toilet)	
Bathtubs	
Urinals	
Disposals	
Washing Machines	
Water Heaters	
Sewer	
Catch Basins/Sumps	
Service Sink	
Lavatory (Bathroom Sink)	
Showers	
Sinks	

FIXTURES	Quantity
Dishwashers	
Laundry Tubs	
Floor Drains	
Grease Traps	
Trailer Connections	
Spa	
Solar	
Pool Piping	
Irrigation: (# Systems / # Heads)	
Water Softener	
Re-pipe	1
Miscellaneous (Specify)	

Per FBC, Sec. 603 a Backflow Preventer must be installed & tested. The report must be attached with permit for final inspection.

Building Official: S. Connolly via eupdate 8-10-15	Permit Fee 3740
Verified Contractor's Licenses & Insurance are on file (signature)	Review Fee 18.00
	3% State Surcharge (\$4.00 minimum) 4.00
	Total Permit Fee 51.40

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.

LICENSE HOLDER SIGNATURE *William Cuddy* LICENSE # CF1426238  
LICENSE HOLDER NAME William Cuddy COMPANY NAME Emerald Plumbing  
Street Address 2311 Henderson Drive Phone Number 407 898 3538  
City Orlando State FL Zip Code 32806

Email Address emexplum@bellsouth.net  
NOTE: The Building Permit Number is required if the Plumbing Installation is associated with any construction or alteration where a Building Permit has been issued.

Building Permit Number \_\_\_\_\_

**Susan Manchester**

---

**From:** John Connell  
**Sent:** Friday, August 07, 2015 2:23 PM  
**To:** Collina Gast  
**Cc:** BIDReviews  
**Subject:** RE: \*URGENT\* 5019 Saint Germaine Ave - app for re-pipe attached - permit 2015-08-024 WO 55357

Approved

---

**From:** Collina Gast  
**Sent:** Friday, August 07, 2015 11:17 AM  
**To:** John Connell  
**Cc:** Keith Severns; CobiPermits  
**Subject:** FW: \*URGENT\* 5019 Saint Germaine Ave - app for re-pipe attached - permit 2015-08-024 WO 55357

Hello Jay,

The city manager just called and asked if we could expedite this review as they're wanting an inspection ASAP.

Please let us know ~ Thanks!

*Collina Gast*

BID Office Manager  
Universal Engineering Sciences, Inc.  
3532 Maggie Blvd.  
Orlando, FL 32811  
Phone: 407-581-8161  
Fax: 407-581-0313  
Email: [cgast@universallengiengineering.com](mailto:cgast@universallengiengineering.com)

ORLANDO BUSINESS JOURNAL



2015 BEST PLACES TO WORK

**PLEASE NOTE:**

**DUE TO THE HIGH DEMAND FOR OUR SERVICES, THE 1PM CUTOFF TIME FOR NEXT-DAY INSPECTION REQUESTS WILL BE STRICTLY ENFORCED.**

**THANK YOU!!**

Sign up for e-Notify...

My Favorites

Property Record Card

Results

Sales Search

Searches

## 5019 St Germain Ave < 17-23-30-4380-07-040 >

Roach Judge Richardson  
 Roach Stephanie Ann  
 5019 St Germain Ave  
 Orlando, FL 32812  
 5019 Saint Germain Ave  
 Belle Isle, FL 32812-1143  
 Incorrect Mailing Address?



Values, Exemptions and Taxes | Property Features | Sales Analysis | Location Info | Market Stats

Update Information

View Plat

### Property Description

LAKE CONWAY ESTATES SECTION TWO REPLAT X/150 LOT 4 BLK G

**Total Land Area** 12,123 sqft (+/-) | 0.28 acres (+/-) GIS Calculated Notice

### Land (includes working values)

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0100 - Single Family	R-1-AA	1 LOT(S)	\$60,000.00	\$60,000	\$0.00	\$60,000

Page 1 of 1 (1 total records)

### Buildings (includes working values)

Important Information		Structure	
<b>Model Code:</b>	01 - Single Fam Residence	<b>Actual Year Built:</b>	1960
<b>Type Code:</b>	0103 - Single Fam Class III	<b>Beds:</b>	3
<b>Building Value:</b>	\$105,178	<b>Baths:</b>	2.0
<b>Estimated New Cost:</b>	\$208,770	<b>Floors:</b>	1
		<b>Exterior Wall:</b>	Concrete/Cinder Block
		<b>Interior Wall:</b>	Plastered
		<b>Gross Area:</b>	2936 sqft
		<b>Living Area:</b>	2273 sqft

Page 1 of 1 (1 total records)

### Extra Features (includes working values)

Description	Date Built	Units	XFOB Value
FPL2 - Average Fireplace	01/01/1960	1 Unit(s)	\$2,500
PT2 - Patio 2	01/01/1950	1 Unit(s)	\$2,000
PT2 - Patio 2	10/10/1990	1 Unit(s)	\$2,000
SCR2 - Scrn Enc 2	01/01/2009	1 Unit(s)	\$5,000

Page 1 of 1 (4 total records)

This Data Printed on 08/06/2015 and System Data Last Refreshed on 08/05/2015

Site Notice • About Us • Contact Us • OCPAFL Home • Property Search • Exemption FRAUD Hotline  
 Orange County Property Appraiser • 200 S. Orange Avenue, Suite 1700 • Orlando, FL 32801  
 Office Hours: 8:00 a.m. to 5:00 p.m. Monday - Friday • Phone: 407.836.5044  
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**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD  
1940 NORTH MONROE STREET  
TALLAHASSEE FL 32399-0783**

**(850) 487-1395**

**CUDDY, WILLIAM  
EMERALD PLUMBING OF CENTRAL FLORIDA INC  
2311 HENDERSON DRIVE UNIT A  
ORLANDO FL 32806**

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](http://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**

**CFC1426238 ISSUED: 06/29/2014**

**CERTIFIED PLUMBING CONTRACTOR  
CUDDY, WILLIAM  
EMERALD PLUMBING OF CENTRAL FLORID**

**IS CERTIFIED under the provisions of Ch. 489, FS.  
Expiration date : AUG 31, 2016 L1406290001170**

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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



<b>LICENSE NUMBER</b>	
CFC1426238	

**The PLUMBING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2016**



**CUDDY, WILLIAM  
EMERALD PLUMBING OF CENTRAL FLORIDA INC  
2311 HENDERSON DRIVE UNIT A  
ORLANDO FL 32806**

ISSUED: 06/29/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1406290001170

Local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

1803 PLUMBING      2014      \$40.00      13      EMPLOYEE      **EXPIRES 9/30/2015**      5000      BUSINESS OFFICE      \$30.00      3      EMPLOYEE      1803-0000130

TOTAL TAX      \$70.00  
PREVIOUSLY PAID      \$70.00  
TOTAL DUE      \$0.00

CUDDY WILLIAM

EMERALD PLUMBING OF CENTRAL FL INC  
CUDDY WILLIAM  
2311 HENDERSON DR STE A

ORLANDO FL 32806-1901

2311 HENDERSON DR #STE A  
U - ORLANDO, 32806

PAID: \$70.00 0099-00623131 7/9/2014

### Scott Randolph, Tax Collector

**Local Business Tax Receipt**      **Orange County, Florida**  
Local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

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PREVIOUSLY PAID      \$70.00  
TOTAL DUE      \$0.00

CUDDY WILLIAM

EMERALD PLUMBING OF CENTRAL FL INC  
CUDDY WILLIAM  
2311 HENDERSON DR STE A

ORLANDO FL 32806-1901

2311 HENDERSON DR #STE A  
U - ORLANDO, 32806

PAID: \$70.00 0099-00623131 7/9/2014



This receipt is official when validated by the Tax Collector



EMERPLU-01

SAEZM

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/12/2015

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).

PRODUCER Insurance Office of America, Inc. 855 West State Road 434 Orlando, FL 32750	CONTACT NAME: Raquel Gonzalez PHONE (A/C, No., Ext): (407) 788-3000 E-MAIL ADDRESS: Raquel.Gonzalez@ioausa.com	FAX (A/C, No): (407) 788-7933
INSURED Emerald Plumbing of Central Florida, Inc. 2311 Henderson Dr. Unit A Orlando, FL 32806	INSURER(S) AFFORDING COVERAGE INSURER A : Builders Mutual Insurance Company NAIC # 10844 INSURER B : The Hanover American Insurance Company 36064 INSURER C : INSURER D : INSURER E : INSURER F :	

## COVERAGES

### 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	ADD'L SUBR INSD LWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <b>X 10,000 Ded Per Occ</b>		CPP005975601	06/25/2014	06/25/2015	EACH OCCURRENCE DAMAGE (OR RENTED PREMISES) (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 300,000 PERSONAL & ADV INJURY \$ 10,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS SCHEDULED AUTOS NON-OWNED AUTOS		AZJ 948519103	03/07/2015	03/07/2016	COMBINED SINGLE LIMIT (Ea accident) \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per occurrence) \$ <b>Basic PIP</b> \$ 10,000
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N/A	WCP1030465-1	01/01/2015	01/01/2016	EACH OCCURRENCE \$ AGGREGATE \$ <input checked="" type="checkbox"/> PER STATUTE E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

## CERTIFICATE HOLDER

## CANCELLATION

City of Belle Isle  
3532 Maggie Boulevard  
Orlando, FL 32811

AUTHORIZED REPRESENTATIVE

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

ACORD 25 (2014/01)

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