



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 TOWN OF WINDERMERE, FLORIDA.

**Scope of Work:** REROOF: 60sq of modified roofing FL13488-R2

FL2533-R8

**Comments:** None

**Project Information**

Address: 3307 Trentwood Blvd  
 Parcel ID: 29-23-30-1876-04-040  
 Property Owner: Edwards, Stephen and Roxanne  
 Phone Number: None  
 Company Name: Robert Batson Roofing, Inc.  
 Contractor Name: Batson, Robert  
 License Number: CCC1325487  
 Address: 2823 E Jersey St Orlando, FL 32806  
 Phone Number: 407-423-7570

**Permit Number: 2014-10-016**

**Date of Application: 10/10/2013**

**Date Permit Issued: 10/11/2013**

**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 \$

**ZONING FEES**

Zoning Fee \$

**UNIVERSAL ENG - BUILDING FEES**

Demo \$  
 Building \$  
 Fence \$  
 Driveway \$  
 Shed \$  
 Window(s) \$  
 Door(s) \$  
 PrePower \$  
 Electrical Fee \$  
 Temp Pole \$  
 Plumbing Fee \$  
 Mechanical Fee \$  
 Gas Fee \$  
 Roofing \$105.00  
 Boat Dock \$  
 Screen End \$  
 Swimming Pool \$

**SURCHARGE FEES**

Surcharge Fee \$2.00  
 Surcharge Fee \$2.00

**TOTAL FEES \$109.00**

**Date Paid** 10-11-13  
**CC or Check #** Visa  
**Amount Paid** 109.00

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

BUILDING

1<sup>st</sup> \_\_\_\_\_ (Footing/Foundation)

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

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)

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 \_\_\_\_\_

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

1<sup>ST</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 [BI@scheduling@UniversalEngineering.com](mailto:BI@scheduling@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.

PROJECT NUMBER 0115.1300688.0000

TASK NUMBER 01

CITY OF BELLE ISLE  
Permit Application Review Sheet

Permit Number	<u>14-10-016</u>
Property Owner	<u>New owner Edwards, Stephanie Roxanne</u>
Address	<u>3307 Trentwood Blvd</u>
Nature of Improvement	<u>Re-Roof</u>
Received Application	<u>10-10-13</u>
Sent for Stormwater Review	<u>N/A</u>
Stormwater Approved	
Sent for Zoning Review	<u>N/A</u>
Zoning Approved	
Applied for Variance	
Variance Approved	
Sent to BO for Review	<u>10-10-13</u>
Building Official Approved	<u>10-11-2013</u>
<b>Comments</b>	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



# City of Belle Isle

1600 Nela Avenue, Belle Isle, FL 32809

Tel 407-851-7730 \* Fax 407-240-2222 \* [www.cityofbelleisle.org](http://www.cityofbelleisle.org)

## Building Permit (Land Use) Application

DATE: 10-10-13

PERMIT # 14-030

PROJECT ADDRESS 3307 Trentwood Blvd Belle Isle, FL 32809 32812

PROPERTY OWNER Edwards, Stephen & Roxanne VALUE OF WORK (labor & material) \$ 16,100.<sup>00</sup>

### PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

Re-roof 60 sqs of modified Roofing

Please provide information, if applicable.

- Survey specific foundation plan required to show compliance with zoning setbacks
- BOAT DOCK: DEP Clearance Required with Application (Call 407-897-4100); please provide a copy of their report
- PROVIDE SEPTIC RESIDENTIAL SYSTEM VERIFICATION – OC DOCUMENT 64E-6, FOR NEW / ALTERED / ADDITIONS to Septic System
- Homeowners will be required to have a contractor on record for homes that are rented and/or not homestead

Please Complete for the City of Belle Isle Zoning Review: Parcel Id Number: 292330187604040

To obtain this information, please visit <http://www.cityofbelleisle.org/Geographic/Parcels.asp>

**SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCR OACH INTO ANY EASEMENT OR REQUIRED SETBACK.** Note, this Zoning Approval MAY or MAY NOT be in conflict with your Deed Restrictions. For New Single Family Residence, a Traffic Impact Fee and School Impact will be assessed.

Attached Survey \_\_\_ SETS and Construction Plans \_\_\_ SETS

PLANNING & ZONING APPROVAL: \_\_\_\_\_ DATE \_\_\_\_\_

### PLEASE COMPLETE for Building Review

CONSTRUCTION TYPE \_\_\_\_\_ Comm \_\_\_\_\_ Res: \_\_\_\_\_ Single Fam \_\_\_\_\_ Multi Fam \_\_\_\_\_  
 OCCUPANCY GROUP \_\_\_\_\_ #UNITS\_#STORIES \_\_\_\_\_ TOTAL SQ.FT. \_\_\_\_\_  
 MAX. FLOOR LOAD \_\_\_\_\_ MAX. OCCUPANCY \_\_\_\_\_  
 MIN. FLOOD ELEV. \_\_\_\_\_ LOW FLOOR ELEV. \_\_\_\_\_  
 WATER SERVICE \_\_\_\_\_ WELL \_\_\_\_\_ SEPTIC \_\_\_\_\_

BUILDING REVIEWER M. Fulez DATE 10-11-2013  
 NOTES \_\_\_\_\_

Per FSS 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."

Waste Management 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 Waste Management at 407-788-0800 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 Waste Management. The City enforces the contract through its code enforcement office. Failure to comply will result in a stop work order.

RETAIN ORIGINAL AT CITY HALL - Updated 09/2012 FORM #LANDUSE002 - 1 of 2 Page Form

Wind Load Category: A \_\_\_ B \_\_\_ C \_\_\_ D \_\_\_

SPRINKLERS REQ'D	Y	N
If Required - SUBMIT COPY OF PLANS FOR FIRE REVIEW Date: Sent _____ RCD _____		
ZONING	Y	N
CERT OF OCC	Y	N
TRAFFIC	Y	N
SCHOOL	Y	N
FIRE	Y	N
SWIMMING POOL	Y	N
POOL ENCLOSURE	Y	N
BOAT DOCK	Y	N
BUILDING	Y	N
WINDOW(S)	Y	N
DOOR(S)	Y	N
OTHER	Y	N
3% FL SURCHARGE		
TOTAL		
By Owner Form	Y	NA
Notice of Commencement	Y	NA
Power of Attorney	Y	NA
Contractor Packet On File?	Y	N
<b>OTHER PERMITS REQUIRED:</b>		
ELECTRICAL	Y	NA
PREPOWER	Y	NA
MECHANICAL	Y	NA
PLUMBING	Y	NA
ROOFING	Y	NA
GAS	Y	NA
OTHER:		



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1600 Nela Avenue, Belle Isle, FL 32809  
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**Building Permit (Land Use) Application**  
To be completed as required by State Statute Section 713 and other applicable sections.

**PERMIT #** 14-030

Owner's Name Stephen R. Edwards

Owner's Address 3367 Trentwood Blvd

Fee Simple Titleholder's Name (if other than owner's) \_\_\_\_\_

Address	City	State	Zip Code
Contractor's Name <u>Robert E. Batson Jr.</u>	Architect/Engineer's Name		
Contractor's Address <u>2823 E. Jergan Ave.</u>	Architect/Engineer's Address		
City, State, ZIP <u>Orlando, FL 32806</u>	City, State, ZIP		
License # <u>CCC1325487</u>	License #		
Contact Phone/Cell <u>407-423-7570</u>	Contact Phone/Cell		
Contact Email <u>ccwaters@cfi.rr.com</u>	Contact Email		

**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 if job is \$2500(+) or if A/C Replacement \$7500(+) 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.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Division of Building Safety Regulations ([www.floridapublishing.com](http://www.floridapublishing.com)) and City Ordinances ([www.municode.com](http://www.municode.com)) regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable City and/or State of Florida codes and/or ordinances. Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all other construction including ELECTRICAL, MECHANICAL, PLUMBING, GAS, SIGNS, POOLS, ENCLOSURES, ETC.

**OWNER'S AFFIDAVIT:** I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Owner Signature Stephen R. Edwards  
The foregoing instrument was acknowledged before me this 10/10/13  
by Stephen R. Edwards who is personally known to me  
and who produced Drivers license  
as identification and who did not take an oath.  
Notary as to Owner Cynthia M. Waters  
State of Florida   
County of Orange

Contractor Signature Robert E. Batson Jr.  
COMPANY NAME Robert Batson Roofing  
The foregoing instrument was acknowledged before me this 10/10/13  
by Robert E. Batson, Jr. who is personally known to me  
and who produced \_\_\_\_\_  
as identification and who did not take an oath.  
Notary as to Owner Kimberly B. Woodward  
State of Florida  
County of Orange



**Impervious Surface Ratio Worksheet**

Development Zoned A-1, A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per Section 50-74 Impervious Surface Ratio of the City Code

1. Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE)  
Total Lot Area \_\_\_\_\_ X 0.35= \_\_\_\_\_  
Allowable Impervious Area (BASE) \_\_\_\_\_

2. Calculate the "proposed" impervious area on the lot. This includes the sum of all areas that do not allow direct percolation of rainwater.  
Examples include house, pool, deck, driveway, accessory building, etc

- House \_\_\_\_\_
- Driveway \_\_\_\_\_
- Walkway \_\_\_\_\_
- Accessory Buildings \_\_\_\_\_
- Pool & Spa \_\_\_\_\_
- Deck & Patio \_\_\_\_\_
- Other \_\_\_\_\_

Actual Impervious Area (AIA) \_\_\_\_\_

3. If AIA is less than BASE, subtract AIA from BASE to determine the amount of impervious area that may be added without providing onsite retention.

4. If AIA is greater than BASE, then onsite retention must be provided.  
Assuming 7.5 inches of rainfall based on a 24hr 10 year Rain Event (TP40), the formula is: (7.5 inches rainfall/12 inches p/foot) X (result from line 4) = cubic feet of storage volume needed



# CERTIFICATE OF LIABILITY INSURANCE

ROBB001 OP ID: KM

DATE (MM/DD/YYYY)  
09/26/13

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 J.W. Edens & Company Commercial Ins of Brevard, Inc 325 Fifth Avenue, Suite 108 Indianapolis, FL 32903 Theresa C. O'Brien	CONTACT NAME: PHONE NO.: FAX (A/C. No): EMAIL ADDRESS:
321-725-7000 321-725-7856	
INSURED Robert Batson Roofing, Inc. Attn: Carolyn Batson 2823 E. Jersey Street Orlando, FL 32806	INSURER(S) AFFORDING COVERAGE INSURER A: Canal Indemnity Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:
	NAIC #

**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.

INSR LTR	TYPE OF INSURANCE	ADD'L SUBR INSR LWD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR		GL104586	05/19/13	05/19/14	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 50,000 PERSONAL & ADV INJURY \$ 5,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COM/PO/ AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO <input type="checkbox"/> LOC					
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/>					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					EACH OCCURRENCE \$ AGGREGATE \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below					WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

**CANCELLATION**

CERTIFICATE HOLDER City of Belle Isle 1600 Nela Avenue Belle Isle, FL 32809	CITYBE1
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 <i>Theresa C O'Brien</i>	

Issue Date: 9/26/2013



FLORIDA ROOFING, SHEET METAL &amp; AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

# SELF INSURERS FUND

1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

**ISSUED TO:**

City of Belle Isle  
1600 Nela Ave.  
Belle Isle, FL 32809

**COPY PROVIDED TO:**

Robert Batson Roofing, Inc.  
2823 E. Jersey St.  
Orlando, FL 32806-5029

**Attention:**

**This is to Certify that:** Robert Batson Roofing, Inc.  
2823 E. Jersey St.  
Orlando, FL 32806-5029

being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

<b>COVERAGE NUMBER:</b> 870-009884	<b>LIMITS</b>
<b>EFFECTIVE DATE:</b> 1/1/2013	Workers' Compensation: Statutory - State of Florida
<b>EXPIRATION DATE:</b> 1/1/2014	Employers' Liability: \$100,000.00 Each Accident
	\$100,000.00 Disease, Each Employee
	\$500,000.00 Disease, Policy Limit

**REMARKS:** Non-cancelable, without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

This certificate is issued as a matter of information only, is not a policy and of itself does not afford any insurance. **Nothing contained in this certificate shall be construed as extending coverage not afforded by the policy(ies) shown above or as affording insurance to any insured not named above.** This provides coverage for Florida policyholders and Florida domiciled employees only.

 By: 

Brett Stiegel, Administrator  
FRSA-SIF

 By: 

Debra Guidry, CPCU, Underwriting Manager  
FRSA-SIF



**STATE OF FLORIDA**

**DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD  
1940 NORTH MONROE STREET  
TALLAHASSEE**

**(850) 487-1395**

**FL 32399-0783**

**BATSON, ROBERT E JR  
ROBERT BATSON ROOFING INC  
2823 S JERSEY ST  
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 barbecue 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  
**AC# 615405**

CCC1325487 06/06/12 110415585

**CERTIFIED ROOFING CONTRACTOR  
BATSON, ROBERT E JR  
ROBERT BATSON ROOFING INC**

IS CERTIFIED under the provisions of Ch. 489 FS  
Expiration date: AUG 31, 2014 L12060600981

DETACH HERE

**AC# 6154059**

THIS DOCUMENT HAS A COLORED BACKGROUND - MICROPRINTING • LINEMARK™ PATENTED PAPER

**STATE OF FLORIDA**

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

**SEQ# L12060600981**

DATE	BATCH NUMBER	LICENSE NBR
06/06/2012	110415585	CCC1325487

**The ROOFING CONTRACTOR**

**Named below IS CERTIFIED**

**Under the provisions of Chapter 489 FS.**

**Expiration date: AUG 31, 2014**



**BATSON, ROBERT E JR  
ROBERT BATSON ROOFING INC  
2823 S JERSEY ST  
ORLANDO**

**FL 32806**

**RICK SCOTT  
GOVERNOR**

**KEN LAWSON  
SECRETARY**

DISPLAY AS REQUIRED BY LAW

24923

**Local Business Tax Receipt**

**Orange County, Florid**

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 c  
ul authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

**\*\*\*ORIGINAL\*\*\*** 2013 **EXPIRES 9/30/2014** 1806 CERT ROOFING CONTR \$30.00 1 EMPLOYEE ; 5000 BUSINESS OFFICE \$30.00 1 EMPLOYEE ;

TOTAL TAX \$60.00  
PREVIOUSLY PAID \$60.00  
TOTAL DUE \$0.00

BATSON ROBERT E JR - QUALIFIER

ROBERT BATSON ROOFING INC  
BATSON CAROLYN  
BATSON ROBERT E JR - QUALIFIER  
2823 JERSEY ST  
ORLANDO FL 32806-5029

1414 S DIVISION AV  
A - ORLANDO, 32805

PAID: \$60.00 099-00573746 7/2/2013

**Local Business Tax Receipt**

**Orange County, Florid**

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 o  
ul authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

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TOTAL TAX \$60.00  
PREVIOUSLY PAID \$60.00  
TOTAL DUE \$0.00

BATSON ROBERT E JR - QUALIFIER

ROBERT BATSON ROOFING INC  
BATSON CAROLYN  
BATSON ROBERT E JR - QUALIFIER  
2823 JERSEY ST  
ORLANDO FL 32806-5029

1414 S DIVISION AV  
A - ORLANDO, 32805

PAID: \$60.00 099-00573746 7/2/2013



This receipt is official when validated by the Tax Collector.



**CITY OF BELLE ISLE,  
FLORIDA**

1600 Nela Avenue  
Belle Isle, Florida 32809  
(407) 851-7730 • FAX (407) 240-2222  
www.cityofbelleislefl.org

**POWER OF ATTORNEY**

Date: 10-10-13 Permit #: \_\_\_\_\_

I hereby name and appoint Cynthia B. Waters of \_\_\_\_\_ of \_\_\_\_\_

Robert Batsan Roofing (company name) to be my lawful attorney-in-fact to act for me and apply to the City of Belle Isle Building Department for a Roofing (type of permit) permit

for work to be performed at the following location:

3307 Trentwood Blvd. (street address), Belle Isle, FL  32809  32812 and

to sign my name and do all things necessary to this appointment.

Certified Contractor's Printed Name: Robert E. Batsan Jr.

License Number: CCC1325487

Certified Contractor's Signature: Robert E. Batsan Jr.

The foregoing instrument was acknowledged before me this 10 days of October of 2013 by Robert E. Batsan, Jr. who is personally known to me or who produced \_\_\_\_\_ as identification and who did not take an oath.

State of Florida  
County of Orange

Kimberly B. Woodward  
Notary Public, Orange County, Florida



(seal)



# A. Settlement Statement (HUD-1)

OMB Approval No. 2502-0265

## B. Type of Loan

1.  FHA 2.  RHS 3.  CONV. UNINS. 4.  VA 5.  CONV. INS.

6. File Number: 13-0086

7. Loan Number: 6699909372

8. Mortgage Insurance Case Number:

C. Note: This form is furnished to give you a statement of actual settlement costs. Amounts paid to and by the settlement agent are shown. Items marked "(p.o.c.)" were paid outside the closing; they are shown here for informational purposes and are not included in the totals.

D. Name & Address of Borrower:  
Stephen R. Edwards and Roxanne M. Edwards  
3307 Trentwood Blvd.  
Orlando, Florida 32812

E. Name & Address of Seller:  
Mark W. Taylor and Lori D. Taylor  
3286 Morningstar Court  
Kissimmee, FL 34744

F. Name & Address of Lender:  
Stearns Lending, Inc.  
4 Hutton Centre Drive  
10th Floor  
Santa Ana, California 92707

G. Property Location:  
3307 Trentwood Blvd.  
Orlando, Florida 32812  
Orange County, Florida

H. Settlement Agent:  
Mizz Title Group, Inc.  
15701 SR 50 Suite 201  
Clermont, Florida 34711  
352-404-9711 fax: 321-256-9216

I. Settlement Date:  
October 4, 2013

J. Place of Settlement:  
Mizz Title Group, Inc.  
15701 SR 50 Suite 201  
Clermont, Florida 34711  
Phone: (352) 404-9711

## J. Summary of Borrower's Transaction

<b>100. Gross Amount Due From Borrower:</b>	<b>450,000.00</b>	<b>400. Gross Amount Due To Seller:</b>	<b>450,000.00</b>
101. Contract Sales Price	450,000.00	401. Contract Sales Price	450,000.00
102. Personal Property		402. Personal Property	
103. Settlement Charges to Borrower (line 1400)	16,259.27	403. Realor Credit for Payoff Shortage	72.94
104.		404. Realor Credit for Payoff Shortage	72.94
<b>Adjustments for Items Paid by Seller in Advance:</b>			
106. City / Town Taxes		406. City / Town Taxes	
107. County / Parish Taxes		407. County / Parish Taxes	
108. Assessments-2013 Oct 5, 2013 thru Dec 31, 2013	24.11	408. Assessments-2013 Oct 5, 2013 thru Dec 31, 2013	24.11
<b>120. Gross Amount Due from Borrower:</b>	<b>466,283.38</b>	<b>420. Gross Amount Due to Seller:</b>	<b>450,169.99</b>

## K. Summary of Seller's Transaction

<b>500. Reductions in Amount Due to Seller:</b>	
501. Excess Deposit (see instructions)	
502. Settlement Charges to Seller (Line 1400)	23,575.00
503. Existing Loan(s) taken subject to	
504. Payoff of First Mortgage Loan to Nations Star	315,954.19
505. Payoff of Second Mortgage Loan to Regions	100,399.20
506. Purchase Money Mortgage	
<b>Adjustments for Items Unpaid by Seller:</b>	
510. City / Town Taxes	
County / Parish Taxes Jan 1, 2013 thru Oct 4, 2013	4,766.60
511. 2013	
512. Assessments	
513. Seller CR Owners Policy & Doc Stamps	5,475.00
<b>220. Total Paid by / for Borrower:</b>	<b>371,241.60</b>
<b>300. Cash at Settlement from / to Borrower:</b>	
301. Gross Amount due from Borrower (line 120)	466,283.38
302. Less Amount Paid by/for Borrower (line 220)	371,241.60
<b>303. Cash From Borrower:</b>	<b>\$95,041.78</b>
<b>600. Cash at Settlement to / from Seller:</b>	
601. Gross Amount due to Seller (line 420)	450,169.99
602. Less Reductions Amount due Seller (line 520)	450,169.99
<b>603. Cash From Seller:</b>	<b>\$0.00</b>

The Public Reporting Burden for this collection of information is estimated at 35 minutes per response for collecting, reviewing, and reporting the data. This agency may not collect this information, and you are not required to complete this form, unless it displays a currently valid OMB control number. No confidentiality is assured; this disclosure is mandatory. This is designed to provide the parties to a RESPA covered transaction with information during the settlement process.

Borrower Initials: Stephen R. Edwards

Roxanne M. Edwards

Seller Initials: \_\_\_\_\_ Mark W. Taylor

\_\_\_\_\_ Lori D. Taylor

L.	Settlement Charges	Paid from Borrower's Funds at Settlement	Paid from Seller's Funds at Settlement
<b>700.</b>	<b>Total Sales / Broker's Commission: \$22,500.00</b>		
	<b>Division of Commission (line 700) as follows</b>		
701.	11,250.00 to Flamingo Realty		
702.	11,250.00 to Homevest Realty		
703.	Commission Paid at Settlement	250.00	
704.	Transaction Fee to Homevest Realty		22,500.00
<b>800.</b>	<b>Items Payable in Connection with Loan:</b>		
801.	Our origination charge		(from GFE #1) \$8,575.00
802.	Your credit or charge (points) for the specific interest rate chosen		(from GFE #2) \$-6,901.20
803.	Your adjusted origination charges		(from GFE #A) 1,673.80
804.	Appraisal Fee to Glen Shipman (poc \$425.00 by Borrower)		(from GFE #3)
805.	Credit Report to Stearns Lending, Inc.	25.15	(from GFE #3)
806.	Tax Service		
807.	Flood Certification		
<b>900.</b>	<b>Items Required by Lender to be Paid in Advance:</b>		
901.	Daily interest charge from Oct 4, 2013 to Nov 1, 2013 @ 48.7500 / day for 28 days to Stearns Lending, Inc.	1,365.00	(from GFE #10)
902.	Mortgage Insurance Premium		(from GFE #3)
903.	Homeowner's Insurance to People's Trust Insurance	2,028.00	(from GFE #11)
904.	Flood Insurance to ASI Flood Insurance	412.00	
<b>1000.</b>	<b>Reserves Deposited with Lender:</b>		
1001.	Initial deposit for your escrow account to Stearns Lending, Inc.	1,468.82	(from GFE #9)
1002.	Homeowner's Insurance 2 months @ \$169.00 per month		\$338.00
1003.	Mortgage Insurance		
1004.	Property Taxes 2 months @ \$531.08 per month		\$1,062.16
1005.	Flood Insurance 3 months @ \$34.33 per month		\$102.99
1099.	Aggregate Adjustment		\$-34.33
<b>1100.</b>	<b>Title Charges:</b>		
1101.	Title services and lender's title insurance	997.50	(from GFE #4)
1102.	Settlement or Closing Fee to Mizz Title Group, Inc.		\$400.00
1103.	Owner's Title Insurance (Old Republic National Title Insurance Company) to Mizz Title Group, Inc.	2,325.00	(from GFE #5)
1104.	Lender's Title Insurance (Old Republic National Title Insurance Company) to Mizz Title Group, Inc.		\$250.00
-	Lender's Premium		\$45.00
-	Endorsement 5.1		\$45.00
-	Endorsement 8.1		\$45.00
-	Endorsement 9.1		\$257.50
1105.	Lender's Title Policy Limit \$360,000.00		
1106.	Owner's Title Policy Limit \$450,000.00		
1107.	Agent's Portion of the Total Title Insurance Premium		\$2,045.75
1108.	Underwriter's Portion of the Total Title Insurance Premium		\$876.75
1109.	Title Search Includ In Line 1102 \$75		
<b>1200.</b>	<b>Government Recording and Transfer Charges:</b>		
1201.	Government Recording Charges	159.00	(from GFE #7)
1202.	Deed \$13.00 Mortgage \$146.00 Releases \$0.00		(from GFE #8)
1203.	Transfer Taxes	5,130.00	
1204.	City/County tax/stamps Deed \$0.00 Mortgage \$720.00		
1205.	State tax/stamps Deed \$3,150.00 Mortgage \$1,260.00		
1206.	Intangible Tax		
1207.	Other Tax 2		
<b>1300.</b>	<b>Additional Settlement Charges:</b>		
1301.	Required services that you can shop for	425.00	(from GFE #6)
1302.	Survey to Long Surveying, Inc.		\$425.00
<b>1400.</b>	<b>Total Settlement Charges (Enter on line 103, Section J and line 502, Section K)</b>	<b>\$16,259.27</b>	<b>\$23,575.00</b>

Borrower Initials:  Stephen R. Edwards

Roxanne M. Edwards

Seller Initials: \_\_\_\_\_ Mark W. Taylor

\_\_\_\_\_ Lori D. Taylor

**Comparison of Good Faith Estimate (GFE) and HUD Charges**

Charges That Cannot Increase	HUD Line No.	Good Faith Estimate	HUD
Our origination charge	# 801	8,575.00	8,575.00
Your credit or charge (points) for the specific interest rate chosen	# 802	-6,901.20	-6,901.20
Your adjusted origination charges	# 803	1,673.80	1,673.80
Transfer taxes	#1203	5,130.00	5,130.00

Charges That in Total Cannot Increase More Than 10%	HUD Line No.	Good Faith Estimate	HUD
Government Recording Charges	#1201	248.00	159.00
Appraisal Fee	# 804	425.00	425.00
Credit Report	# 805	25.15	25.15
Title services and lender's title insurance	#1101	1,185.00	997.50
<b>Total</b>		<b>1,883.15</b>	<b>1,606.65</b>
<b>Increase between GFE and HUD Charges</b>		<b>-276.50</b>	<b>-14.68%</b>

Charges That Can Change	HUD Line No.	Good Faith Estimate	HUD
Initial deposit for your escrow account	#1001	2,462.92	1,468.82
Daily interest charge from Oct 4, 2013 to Nov 1, 2013 @ 48.7500 / day for 28 days	# 901	1,511.25	1,365.00
Homeowner's Insurance	# 903	1,800.00	2,028.00
Survey	#1302	400.00	425.00

<b>Loan Terms</b>	
Your initial loan amount is	\$360,000.00
Your loan term is	30 years
Your initial interest rate is	4.875 %
Your initial monthly amount owed for principal, interest, and any mortgage insurance is	\$1,905.15 includes <input checked="" type="checkbox"/> Principal <input checked="" type="checkbox"/> Interest <input type="checkbox"/> Mortgage Insurance
Can your interest rate rise?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes, it can rise to a maximum of _____%. The first change will be on _____ and can change again every _____ after _____. Every _____ change date, your interest rate can increase or decrease by _____. Over the life of the loan, your interest rate is guaranteed to never be LOWER than _____% or HIGHER than _____%.
Even if you make payments on time, can your loan balance rise?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes, it can rise to a maximum of \$_____.
Even if you make payments on time, can your monthly amount owed for principal, interest, and mortgage insurance rise?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes, the first increase can be on _____ and the monthly amount owed can rise to \$_____. The maximum it can ever rise to is \$_____.
Does your loan have a prepayment penalty?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes, your maximum prepayment penalty is \$_____.
Does your loan have a balloon payment?	<input checked="" type="checkbox"/> No. <input type="checkbox"/> Yes, you have a balloon payment of \$_____ due in _____ years on _____.
Total monthly amount owed including escrow account payments	<input type="checkbox"/> You do not have a monthly escrow payment for items, such as property taxes and homeowner's insurance. You must pay these items directly yourself. <input checked="" type="checkbox"/> You have an additional monthly escrow payment of \$734.41 that results in a total initial monthly amount owed of \$2,639.56. This includes principal, interest, any mortgage insurance and any items checked below: <input checked="" type="checkbox"/> Property taxes <input type="checkbox"/> <input checked="" type="checkbox"/> Flood insurance <input type="checkbox"/> <input checked="" type="checkbox"/> Homeowner's insurance <input type="checkbox"/>

Note: If you have any questions about the Settlement Charges and Loan Terms listed on this form, please contact your lender.

<b>Buyers</b>	
Stephen R. Edwards 3307 Trentwood Blvd. Orlando, Florida 32812	Roxanne M. Edwards 3307 Trentwood Blvd. Orlando, Florida 32812
<b>Sellers</b>	
Mark W. Taylor 3286 Morningstar Court Kissimmee, FL 34744	Lori D. Taylor 3286 Morningstar Court Kissimmee, FL 34744
<b>Property Addresses</b>	
3307 Trentwood Blvd. Orlando, Florida 32812	

I have carefully reviewed the HUD-1 Settlement Statement, and to the best of my knowledge and belief, it is a true and accurate statement of all receipts and disbursements made on my account or by me in this transaction. I further certify that I have received a copy of HUD-1 Settlement Statement.

Borrower:  \_\_\_\_\_  
Stephen R. Edwards

Seller:  \_\_\_\_\_  
Mark W. Taylor

Borrower:  \_\_\_\_\_  
Roxanne M. Edwards

Seller:  \_\_\_\_\_  
Lori D. Taylor

The HUD-1 Settlement Statement which I have prepared is a true and accurate account of this transaction. I have caused or will cause the funds to be disbursed in accordance with the instructions of the parties hereto.

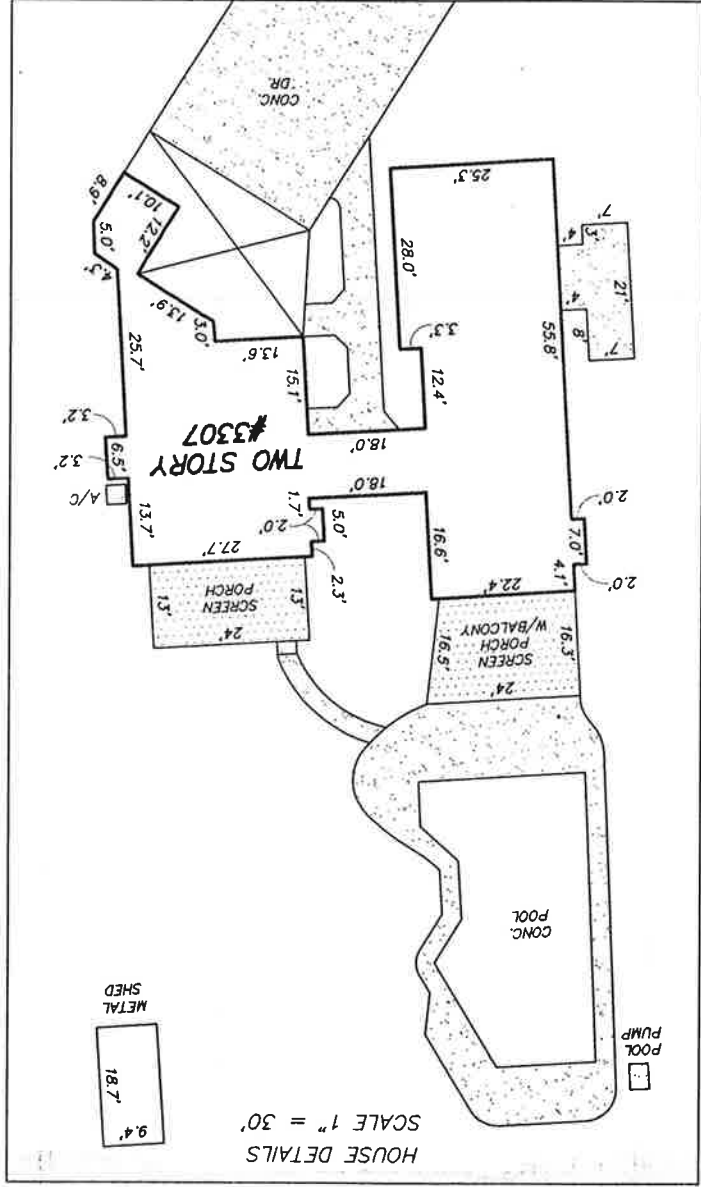
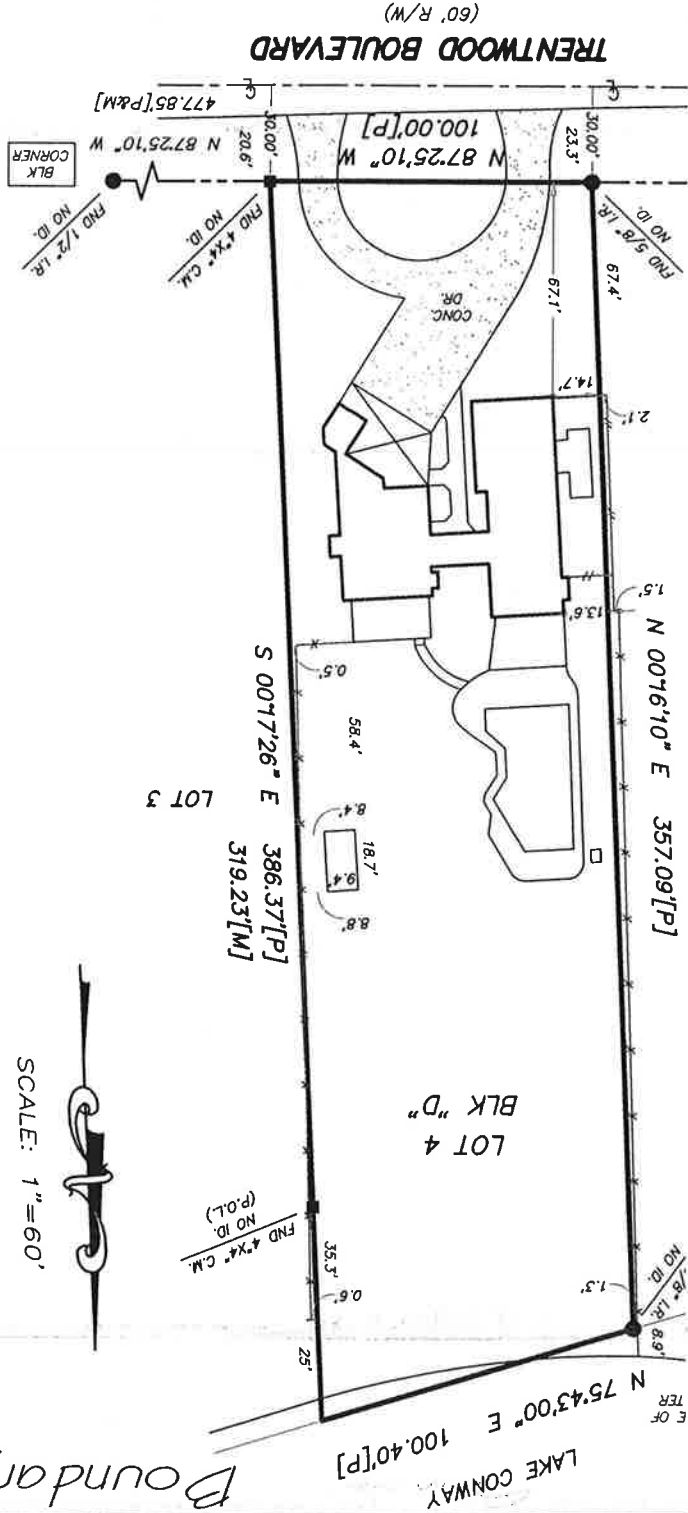
Settlement Agent:  \_\_\_\_\_  
Wendy T. Morris

Date: October 4, 2013

**WARNING:** It is a crime to knowingly make false statements to the United States on this or any other similar form. Penalties upon conviction can include a fine and imprisonment. For details see Title 18 U.S. Code Section 1001 and Section 1010.

# Boundary Survey

SCALE: 1"=60'



BEARINGS SHOWN HEREON ARE BASED UPON THE CENTERLINE OF MANGO TREE DRIVE BEING S 30°00'00" E ASSUMED

- NOTES:
- 1) This survey is based on the legal description as provided by the Client
  - 2) This Surveyor has not observed the land shown hereon for easements, rights of way or restrictions of record which may affect the title or use of the land
  - 3) Do not reconstruct property lines from building ties
  - 4) No footing or overhangs have been located except as shown
  - 5) No improvements or utilities have been located except as shown
  - 6) Not valid without a signature and the authenticated electronic seal or the original raised seal of a Florida licensed Surveyor and Mapper

Certification: I certify that this survey was made under my direction and that it meets the minimum technical standards set forth by the Board of Professional Land Surveyors and Mappers in Chapter 61G17-01, Florida Administrative Code, pursuant to Section 402.7, Florida Statutes.



- RIGHT-OF-WAY LINE
- CENTERLINE
- BARB WIRE FENCE
- WOOD FENCE
- CHAIN LINK FENCE
- PLASTIC FENCE

- A/C - AIR CONDITIONER
- BLK - BLOCK
- BLK BEARING
- C.B.S. - CONCRETE BLOCK STRUCTURE
- C.M. - CONCRETE MONUMENT
- CONC. - CONCRETE
- D - DRAINAGE EASEMENT
- E - EAST
- F.F.E. - FINISHED FLOOR ELEVATION
- FND - FOUND
- ID - IDENTIFICATION
- I.P. - IRON PIPE
- I.R. - IRON ROD & CAP
- I.R.C. - IRON ROD & CAP
- L - ARC LENGTH
- L.B. - LAND SURVEYING BUSINESS
- L.S. - LAND SURVEYOR
- M - MEASURED
- N - NORTH
- N&D - NAIL AND DISK
- P - PLAT
- P.C. - POINT OF CURVATURE
- P.C.P. - POINT OF COMPOUND CURVATURE
- P.C.C. - POINT OF COMPOUND CURVATURE
- P.L. - PROPERTY LINE
- P.O.B. - POINT OF BEGINNING
- P.O.C. - POINT OF COMMENCEMENT
- P.O.L. - POINT ON LINE
- P.R.C. - POINT OF REVERSE CURVE
- P.R.M. - PERMANENT REFERENCE MONUMENT
- P.T. - POINT OF TANGENT
- R - RADIUS
- R/W - RIGHT OF WAY
- S/W - SIDEWALK
- S - SOUTH
- U.E. - UTILITY EASEMENT
- W - WEST
- W.F.S. - WOOD FRAME STRUCTURE
- O = SET 1/2" I.R.C. PSM LB#7371

JON M. SHOEMAKER P.S.M. NO. 5144



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 USER: Public User

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FL # FL13488-R2  
 Application Type Revision  
 Code Version 2010  
 Application Status Approved  
 \*Approved by DCA. Approvals by DCA shall be reviewed and ratified by the POC and/or the Commission if necessary.

Comments  
 Archived

Product Manufacturer Sun-Tek Mfg  
 Address/Phone/Email 10303 General Dr  
 Orlando, FL 32824  
 (407) 859-2117  
 jfeudner@sun-tek.com

Authorized Signature James Feudner  
 engineering@sun-tek.com

Technical Representative James Feudner  
 Address/Phone/Email 10303 General Dr  
 Orlando, FL 32824  
 engineering@sun-tek.com

Quality Assurance Representative James Feudner  
 Address/Phone/Email 10303 General Dr  
 Orlando, FL 32824  
 (407) 859-2117 Ext 111  
 engineering@sun-tek.com

Category Sky Lights  
 Subcategory Skylight

Compliance Method Certification Mark or Listing

Certification Agency Validated By National Accreditation & Management Institute,  
 National Accreditation & Management Institute,

Referenced Standard and Year (of Standard)	<b>Standard</b>	<b>Year</b>
	AAMA/WDMA 101/I.S.2/NAFS-02	2002
	AAMA/WDMA/CSA 101/I.S.2/A440-05	2005

Equivalence of Product Standards  
 Certified By

Product Approval Method

Method 1 Option A

Date Submitted 01/31/2013  
 Date Validated 02/04/2013  
 Date Pending FBC Approval  
 Date Approved 02/08/2013

Summary of Products

FL #	Model, Number or Name	Description
13488.1	CM 2230	CM curb mounted polycarbonate dome .050 (largest size model 2230)  <b>Certification Agency Certificate</b> FL13488_R2_C_CAC_CM_050_N1010112-R1-signed.pdf <b>Quality Assurance Contract Expiration Date</b> 10/31/2015 <b>Installation Instructions</b> FL13488_R2_II_CM_2230_instal_inst.pdf Verified By: James D. Wells, Jr. P.E. 53616 <b>Evaluation Reports</b> Created by Independent Third Party: Yes Created by Independent Third Party:
13488.2	CM 3046	CM curb mounted .060 polycarbonate dome (largest size model 3046)  <b>Certification Agency Certificate</b> FL13488_R2_C_CAC_CM_060_N1010112A-R1-signed.pdf <b>Quality Assurance Contract Expiration Date</b> 10/31/2015 <b>Installation Instructions</b> FL13488_R2_II_CM_3046_instal_inst.pdf Verified By: James D. Wells, Jr. P.E. 53616 <b>Evaluation Reports</b> Created by Independent Third Party: Yes Created by Independent Third Party:
13488.3	CM 4646	Curb mounted .070 polycarbonate dome (largest size model 4646)  <b>Certification Agency Certificate</b> FL13488_R2_C_CAC_CM_4646N1006198-R4-signed.pdf <b>Quality Assurance Contract Expiration Date</b> 10/31/2015 <b>Installation Instructions</b> FL13488_R2_II_CM_4646_instal_inst.pdf Verified By: James D. Wells, Jr. P.E. 53616 <b>Evaluation Reports</b> Created by Independent Third Party: Yes Created by Independent Third Party:
13488.4	CMA 2230	CMA curb mounted aluminum ring .050 polycarbonate dome (largest size model 2230)  <b>Certification Agency Certificate</b> FL13488_R2_C_CAC_CMA_050_N1010113-R1-signed.pdf <b>Quality Assurance Contract Expiration Date</b> 10/31/2015 <b>Installation Instructions</b> FL13488_R2_II_CMA_2230_instal_inst.pdf Verified By: James D. Wells, Jr. P.E. 53616 <b>Evaluation Reports</b> Created by Independent Third Party: Yes Created by Independent Third Party:
13488.5	CMA 3046	CMA curb mounted aluminum ring .060 polycarbonate (largest size model 3046)  <b>Certification Agency Certificate</b> FL13488_R2_C_CAC_CMA_060_N1010113A-R1-signed.pdf <b>Quality Assurance Contract Expiration Date</b> 10/31/2015 <b>Installation Instructions</b> FL13488_R2_II_CMA_3046_instal_inst.pdf Verified By: James D. Wells, Jr. P.E. 53616 <b>Evaluation Reports</b> Created by Independent Third Party: Yes Created by Independent Third Party:



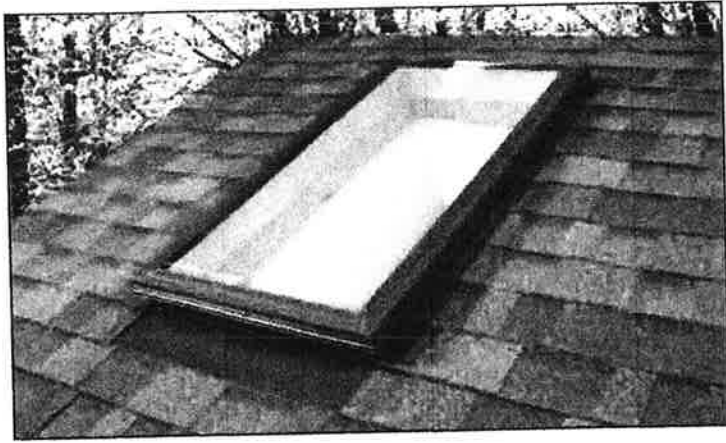
13488.6	CMA 4646	<p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: +60/-60                  Other:</p>	<p>CMA curb mounted aluminum ring .070 polycarbonate dome (largest size model 4646)</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL13488_R2_C_CAC_CMA_4646_NI006226-R4-signed.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>                  10/31/2015</p> <p><b>Installation Instructions</b>  <a href="#">FL13488_R2_II_CMA_4646_instal_inst.pdf</a>                  Verified By: James D. Wells, Jr. P.E. 53616                  Created by Independent Third Party: Yes</p> <p><b>Evaluation Reports</b>                  Created by Independent Third Party:</p>
13488.7	SF 2230	<p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: +50/-50                  Other:</p>	<p>Self flashing .050 polycarbonate dome (largest size model 2230)</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL13488_R2_C_CAC_SF_050_NI010111-R1-signed.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>                  10/31/2015</p> <p><b>Installation Instructions</b>  <a href="#">FL13488_R2_II_SF_2230_instal_inst.pdf</a>                  Verified By: James D. Wells, Jr. P.E. 53616                  Created by Independent Third Party: Yes</p> <p><b>Evaluation Reports</b>                  Created by Independent Third Party:</p>
13488.8	SF 3046	<p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: +60/-60                  Other:</p>	<p>Self flashing .060 polycarbonate dome (largest size model 3046)</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL13488_R2_C_CAC_SF_060_NI010111A-R1.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>                  10/31/2015</p> <p><b>Installation Instructions</b>  <a href="#">FL13488_R2_II_SF_3046_instal_inst.pdf</a>                  Verified By: James D. Wells, Jr. P.E. 53616                  Created by Independent Third Party: Yes</p> <p><b>Evaluation Reports</b>                  Created by Independent Third Party:</p>
13488.9	SF 4646	<p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: +60/-60                  Other:</p>	<p>Self flashing .080 polycarbonate dome (largest size model 4646)</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL13488_R2_C_CAC_SF_080_NI009450-R3-signed.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>                  10/31/2015</p> <p><b>Installation Instructions</b>  <a href="#">FL13488_R2_II_SF_4646_instal_inst.pdf</a>                  Verified By: James D. Wells, Jr. P.E. 53616                  Created by Independent Third Party: Yes</p> <p><b>Evaluation Reports</b>                  Created by Independent Third Party:</p>
13488.10	STT	<p><b>Limits of Use</b>                  Approved for use in HVHZ: No                  Approved for use outside HVHZ: Yes                  Impact Resistant: No                  Design Pressure: +80/-80                  Other: not rated for impact.</p>	<p>Sun-Tek Tube (self flashing) 10", 14", 21"</p> <p><b>Certification Agency Certificate</b>  <a href="#">FL13488_R2_C_CAC_STTNI010115-R2-signed.pdf</a>  <b>Quality Assurance Contract Expiration Date</b>                  10/31/2015</p> <p><b>Installation Instructions</b>  <a href="#">FL13488_R2_II_2.22.10_STT_Final_Instructions.pdf</a>                  Verified By: James D. Wells, Jr. P.E. 53616                  Created by Independent Third Party: Yes</p> <p><b>Evaluation Reports</b>                  Created by Independent Third Party:</p>

Contact Us :: [1940 North Monroe Street, Tallahassee FL 32399](#) Phone: 850-487-1824

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**Product Approval Accepts:**



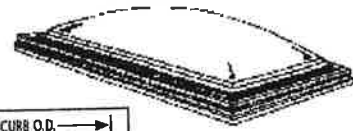
**Sun-Tek**  
SKYLIGHTS

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10303 General Drive  
Orlando, FL 32824  
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www.Sun-Tek.com  
CustomerService@Sun-Tek.com

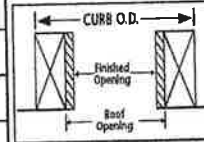
**INSTALLATION INSTRUCTIONS  
POLYDOME SERIES  
MODEL CMA**

Use on any type roof (curb required)  
SIZES 1414, 1422, 1430, 1919, 2222, 2230



SIZE INFORMATION					Fastener Schedule	
Size Code	Roof Opening	Finished Opening (Drywall Dimension)	Models CM & CMA only Curb Outside Dimension	Fits on Center Spacing	Fastener Per Short Side	Fastener Per Long Side
1414	14 1/4" x 14 1/4"	13 1/2" x 13 1/2"	17 1/2" x 17 1/2"	16"	3	3
1422	14 1/4" x 22 1/4"	13 1/2" x 21 1/2"	17 1/2" x 25 1/2"	18" or 24"	3	3
1430	14 1/4" x 30 1/4"	13 1/2" x 29 1/4"	17 1/2" x 33 1/4"	16"	3	3
1919	19 1/2" x 19 1/2"	18 1/2" x 18 1/2"	22 1/2" x 22 1/2"	24"	3	3
2222	22 1/2" x 22 1/2"	21 1/2" x 21 1/2"	25 1/2" x 25 1/2"	24"	3	3
2230	22 1/2" x 30 1/4"	21 1/2" x 29 1/4"	25 1/2" x 33 1/4"	24"	3	3

CM, CMA is made 1" larger than outside dimension to allow for flashing.  
(Example: CM2246 Actual Skylight L.D. 26 1/2" x 50 1/2")



**You will need:**

- hammer
- keyhole saw
- skill saw
- nails
- drill
- 2 x 4's
- For Light Tunnel:**
- 8 or 10 penny nails
- plywood or drywall

- sealant/mastic
- tape measure
- chalkline or straight edge
- trowel or caulk gun
- utility knife

**RECOMMENDED SEALANTS:**

- 100% Silicone
- Sealants approved for use on polycarbonate (contact Sun-Tek)
- STS 1000 (Sun-Tek exclusive) Butyl rubber sealant/caulk

**CLEANING YOUR SKYLIGHT:**

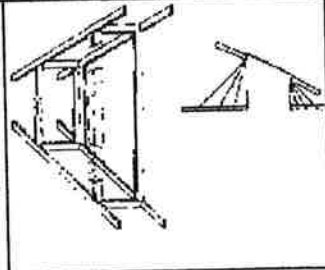
Use a mild glass cleaner (such as Glass Plus) and a clean sponge or soft cloth. Fresh paint splashes, glazing compound, etc. may be removed before drying by rubbing lightly with a soft cloth or cotton ball soaked in isopropyl alcohol.

DO NOT use abrasive or highly alkaline cleaners, ammonia, benzene, gasoline, acetone, or carbon tetrachloride. Do not clean skylight in bright sun or high temperatures. Periodic waxing with a high quality, non-abrasive wax such as Mirror-Glaze will help maintain the good looks of your skylight.

**LIGHT TUNNEL INSTALLATION INSTRUCTIONS**

For homes with an attic, it is necessary to build a tunnel between skylights and ceiling. The tunnel walls may be straight, or flared for extra light and architectural appeal. It's very easy to increase the tunnel size along the length of the ceiling joists. As long as no roof-supporting members are cut, no special framing is needed. While it is possible to flare the tunnel in all directions, if support members are cut, special framing will be required for structural support. In this case you must consult a qualified building professional to insure proper and safe results.

- 1 After roof and ceiling openings have been framed, measure distance (at each corner of roof opening) between rafter/truss and ceiling joist.
- 2 Using these four measurements, cut 2 x 4 lumber for vertical support members (two per corner).
- 3 In each corner, nail vertical support members into place at right angles to each other.
- 4 Measure, cut, and nail tunnel walls into place. Suggestions for lining tunnel:
  - use drywall, tape corners, and paint white using regular or texture paint. (Texture paint alone will hide and fill unsealed joints, but in time, cracks may appear in corners.)
  - use prefinished paneling with molding in corners.
  - line the tunnel with cedar, pine, or a wood to coordinate with your decor.
  - for special effects, try painting the tunnel a striking accent color, or use mirrors or wallpaper on tunnel walls.
- 5 Caulk the slight gap between the tunnel walls and skylight base.
- 6 Finish off tunnel at ceiling with molding, or blend edges into ceiling with texture paint.
- 7 Be sure to wrap the exterior of the tunnel with insulation for energy savings.



**POLYDOME SKYLIGHT LIMITED WARRANTY**

Sun-Tek Manufacturing, Inc. ("Sun-Tek") 10303 General Drive, Orlando, Florida 32824, (407) 859-2117, warrants this Skylight on the following terms and conditions: A. Warranty Coverage: This warranty applies to both the original purchaser and first consumer-owner of a Skylight made by Sun-Tek. B. Warranty Duration: This warranty shall remain in effect for a period of the (1) years on Models SF and Sun (10) years on all other Sun-Tek Series models after the date the Skylight is purchased or the date the Skylight is delivered to the first consumer-owner, whichever is later. One (1) year on electric components. C. Warranty Application: This warranty applies only to the materials and fabrication of the Skylight and does not apply to any defect or damage caused by improper use, improper installation, improper care, shipping damage or accident. This warranty does not cover any cosmetic changes in skylight, including but not limited to pitting, staining, paint finish, discoloration, condensation or damage caused by condensation is not covered under this warranty. D. Performance by Sun-Tek: During the warranty period, Sun-Tek will provide free of charge an equivalent new skylight for component thereof, for one found to be defective in material or workmanship. Shipping costs of such replacement are not the responsibility of Sun-Tek. Sun-Tek will not be responsible for any cost of removal or re-installation. E. Validation Procedure: To obtain performance under this warranty, the purchaser must (1) On installed skylights, contact Sun-Tek for instructions before removing skylight. Removal of skylight from roof before inspection will void warranty. (2) Notify Sun-Tek in writing of any claim within (30) days after the defect is discovered. (3) Sun-Tek or its authorized agents must examine high quality installed photographs of the subject skylight and determine to its satisfaction whether the defect is covered by this warranty; and (4) Present a copy of the receipt of purchase. F. Implied Warranties: IMPLIED WARRANTIES, INCLUDING BUT NOT LIMITED TO WARRANTIES OF MERCHANTABILITY AND FITNESS FOR A PARTICULAR PURPOSE, SHALL NOT EXTEND BEYOND THE DURATION OF THE EXPRESS WARRANTIES PROVIDED HEREIN. Some states do not allow limitation on how long an implied warranty lasts, so the above limitation may not apply to you. G. INCIDENTAL OR CONSEQUENTIAL DAMAGES: SUN-TEK SHALL NOT BE LIABLE FOR ANY INCIDENTAL OR CONSEQUENTIAL DAMAGES WHATSOEVER, INCLUDING BUT NOT LIMITED TO LOSS OF TIME OR REVENUE, DAMAGE RESULTING TO OTHER PROPERTY OR OTHER EXPENSES. Some states do not allow the exclusion or limitation of incidental or consequential damages, so the above limitation or exclusion may not apply to you. H. Exclusion Warranty: THIS WARRANTY IS EXCLUSIVE AND IN LIEU OF ALL OTHER WARRANTIES. This warranty gives you specific legal rights, you may have other rights which vary from state to state.

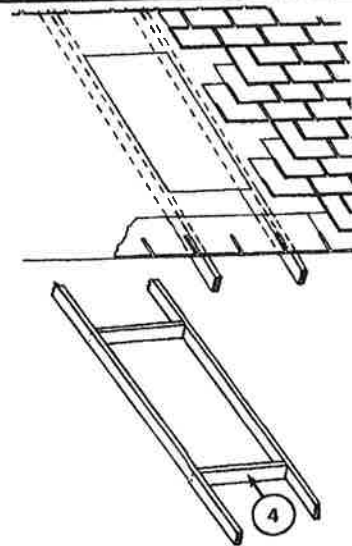
All installation information is supplied in good faith, but without recommendation to its use. No guarantee of the results of any use of this information is to be implied, since conditions of use are beyond our control. Please consult local building codes for compliance before installing.

**FAILURE TO FOLLOW RECOMMENDED INSTALLATION PROCEDURES MAY VOID WARRANTY**

Please read instructions completely before beginning.  
Deck and roofing felt should already be installed.

- 1 Inspect skylight for damage before installing. Peel back protective plastic to inspect dome. If skylight is damaged, do not install. Please contact your supplier for information on a replacement.
- 2 To properly position skylight between trusses/rafters, locate the roof opening from the underside of the decking. Drill holes or drive nails to mark corners. (If this area is not accessible, locate the ceiling joists from inside the house, mark and cut opening in ceiling, then mark roof opening.)
- 3 Remove shingles 6 - 8" out from roof opening. Before cutting roof opening, check measurements against size chart. Snap a chalkline from corner to corner, or draw line with a straightedge, then cut roof opening.
- 4 Frame roof opening using 2 x 4's as headers - cut two 2 x 4's to fit the actual distance between trusses/ rafters and nail into place.

a) If applicable, cut ceiling opening and build tunnel framing. See "Light Tunnel Installation Instructions."



**5** Build curb (or use Sun-Tek's pre-built, pre-flashed insulated "Labor Saver" Curb)

a) Construct curb with 2x4's, 2x6's, etc. (depending on height desired or building code requirements). Curb should be minimum 3½" high. Be sure inside measurement of curb is the same as roof opening measurement.

b) Secure curb to roof per local building codes.

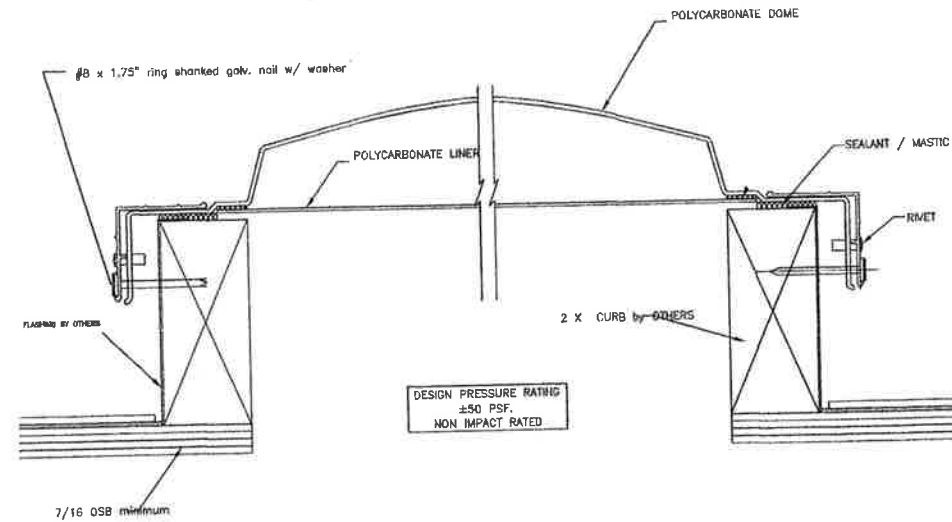
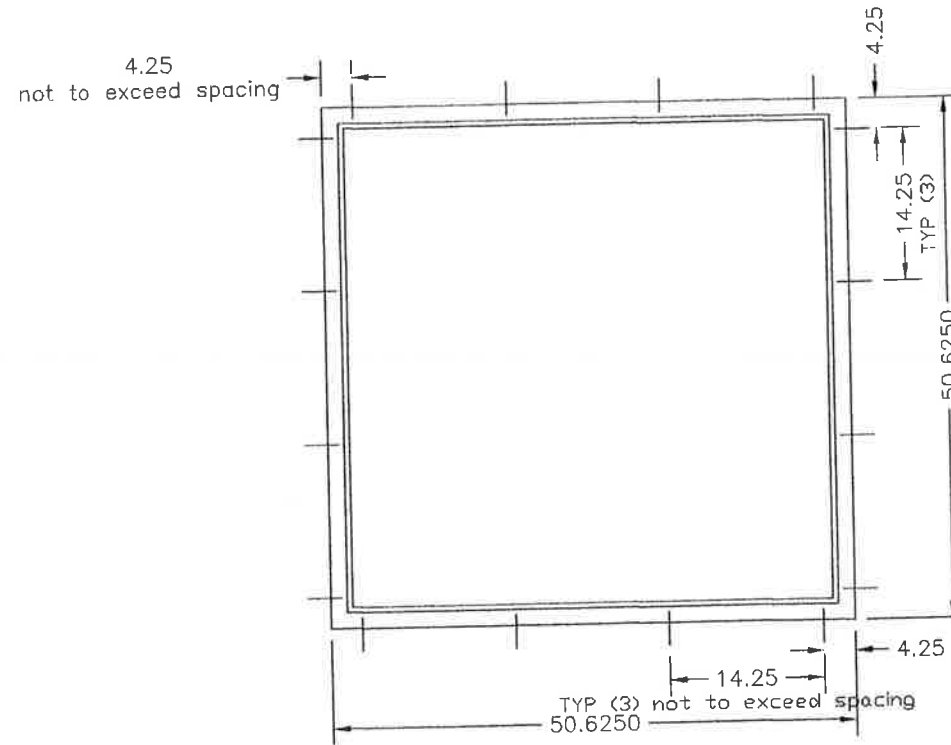
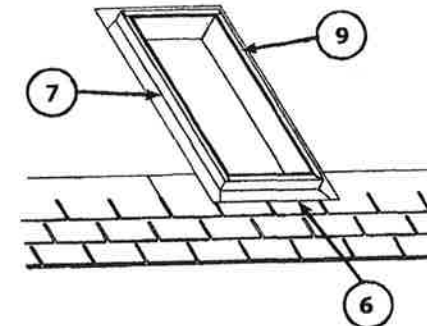
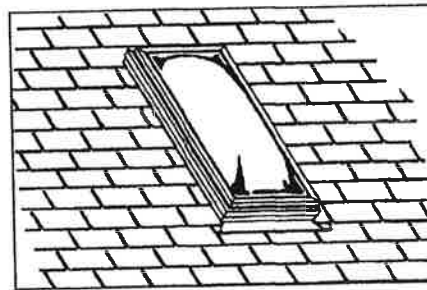
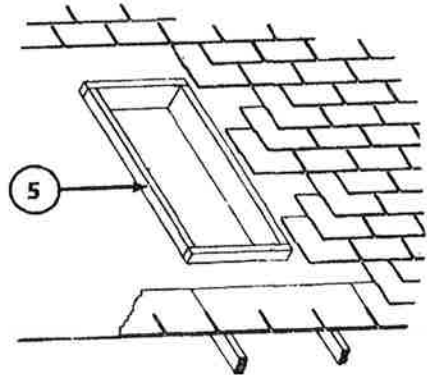
**6** Shingle roof up to bottom of curb.

**7** Flash curb (or use Sun-Tek's pre-formed, pre-cut Step Flash Kit with one-piece head and sill, Step flash for 2x4 curb only). Use galvanized sheet metal, aluminum, or copper. Metal should extend a minimum of 4" over shingles (on bottom side), then up sides of curb. Flashing should be flush with curb top.

**8** Shingle up sides and across the top.

**9** Apply a ½" wide bead of caulking on top of the curb around the entire perimeter. Sealant applied too close to the opening may "ooze" into the opening. Can also use 1" wide by 1/8" thick butyl tape, if compatible.

**10** Set skylight over opening. Nail in place through pre-drilled holes in side with #8 x 1¼" galvanized ring-shank nails.





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 **Application Detail**

**FL #** FL2533-R8  
**Application Type** Revision  
**Code Version** 2010  
**Application Status** Approved  
**Comments**  
**Archived**

**Product Manufacturer Address/Phone/Email**  
 CertainTeed Corporation-Roofing  
 PO Box 1100  
 1400 Union Meeting Rd  
 Blue Bell, PA 19422  
 (215) 274-2350  
 Steven.T.Lawrey@saint-gobain.com

**Authorized Signature**  
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 Steven.T.Lawrey@saint-gobain.com

**Technical Representative Address/Phone/Email**  
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 1400 Union Meeting Road  
 Blue Bell, PA 19422  
 (215) 274-2425  
 Steven.T.Lawrey@saint-gobain.com

**Quality Assurance Representative Address/Phone/Email**

**Category Subcategory**  
 Roofing  
 Modified Bitumen Roof System

**Compliance Method**  
 Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer  
 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**  
 02/13/2016  
**Validated By**  
 John W. Knezevich, PE  
 Validation Checklist - Hardcopy Received

**Certificate of Independence**  
[FL2533\\_R8\\_COI\\_Trinity.ERD.CI - Nieminen.pdf](#)

**Referenced Standard and Year (of Standard)**

Standard	Year
ASTM D6163	2000
ASTM D6164	2005
ASTM D6222	2002
ASTM D6223	2002
ASTM D6509	2000
FM 4470	1992

FM 4474

2004

Equivalence of Product Standards Certified By

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted 08/23/2012  
 Date Validated 08/24/2012  
 Date Pending FBC Approval 08/27/2012  
 Date Approved 10/09/2012

**Summary of Products**

FL #	Model, Number or Name	Description
2533.1	Flintlastic Modified Bitumen Roof Systems	Modified Bitumen Roof Systems
<b>Limits of Use</b>	<b>Approved for use in HVHZ:</b> No <b>Approved for use outside HVHZ:</b> Yes <b>Impact Resistant:</b> N/A <b>Other:</b> 1.) Refer to ER Section 5 for Limits of Use. 2.) The design pressure noted in this application relates to one specific system. Refer to the ER Appendix for all systems and max design pressures.	
<b>Installation Instructions</b>	FL2533 R8_IL_A1_eF082312FINAL_CERTAINTeed_MOBBIT_FL2533_R8.pdf Verified By: Robert Nieminen, PE PE-59166 Created by Independent Third Party: Yes <b>Evaluation Reports</b> FL2533 R8_AE_eF082312FINAL_CERTAINTeed_MOBBIT_FL2533-R8.pdf Created by Independent Third Party: Yes	

Back

Next

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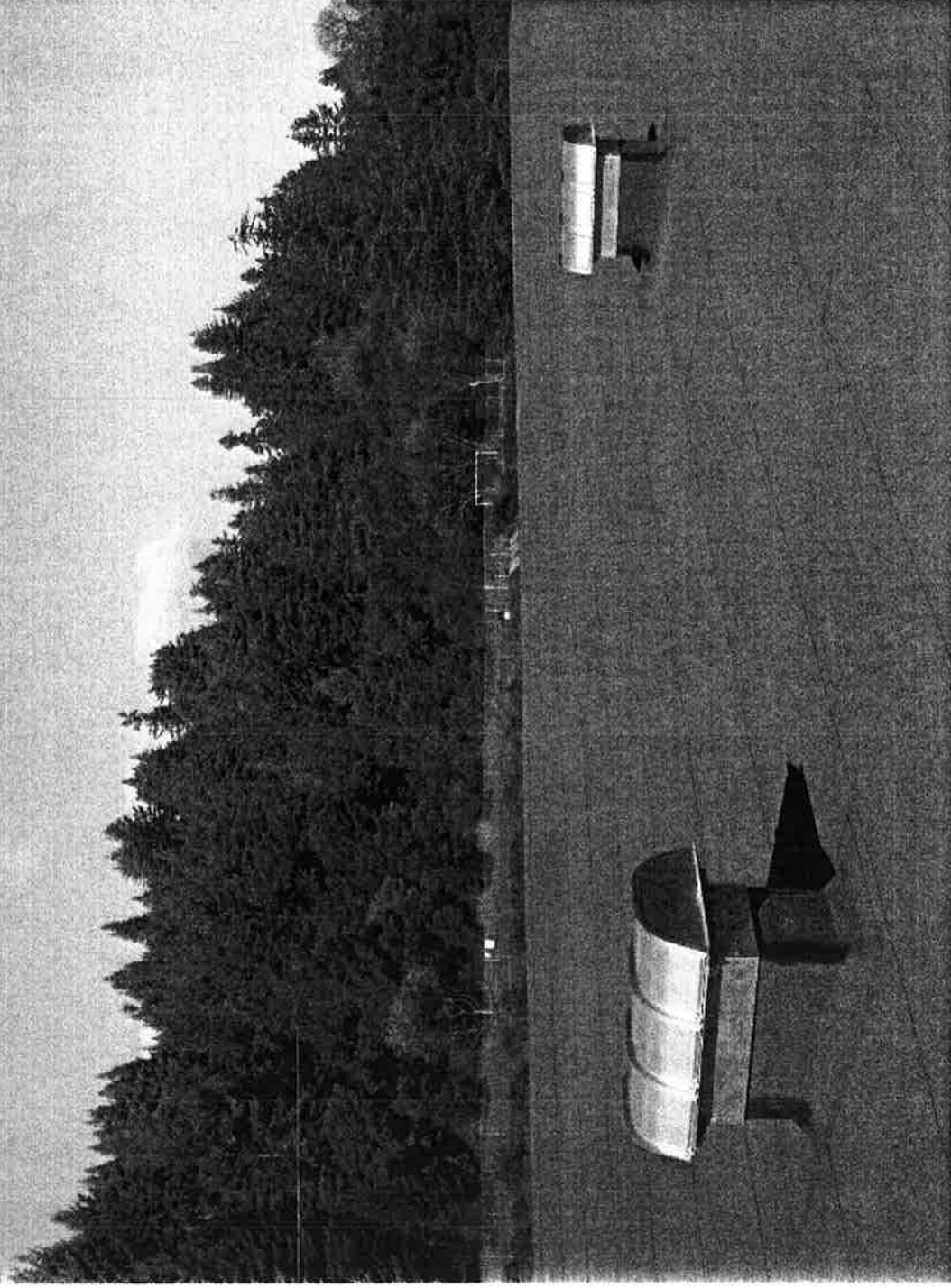
**Product Approval Acceptors:**



CertainTeed

# FLINTLASTIC<sup>®</sup> SA

Self-Adhering SBS Modified Bitumen  
Roof System for Low Slope Roofs



CertainTeed  
SAINT-GOBAIN

### Important Application Considerations

- Do not attempt application if ice, snow, moisture or dew are present. Bonding substrates must be clean, dry and free of dust or other inhibitors of proper adhesion. Ambient temperature must be 50°F or above.
- Store Flintlastic SA rolls indoors on pallets, protected from the elements. Rolls that are improperly stored or have been warehoused for prolonged periods of time may lose their tack.
- Do not apply membrane that has been improperly stored, exposed to moisture, or has lost its tack. If the material isn't bonding, STOP the application!
- Always remember to put safety first and follow all OSHA safety guidelines with any roofing installation.
- Substrates must be free of dust, dirt, oil, debris and moisture.
- Primer, if used, must be applied at the specified rate and must be allowed to thoroughly dry.
- Work with manageable lengths of Mid Ply and Cap for the particular job. Where appropriate, cut rolls into 1/3- or 1/2-roll lengths and allow material to relax prior to installation.
- In cooler weather, a hand-held hot air welding gun can be used to warm the sidelap areas and improve adhesion (prior to application of the FlintBond SBS Modified Bitumen Adhesive).
- Use caution with the weighted roller at endlap areas. Don't squeeze out too much adhesive.
- When applying Mid Ply (or PlyBase) directly to substrate, design adequate roof ventilation into the system through the use of roof relief vents.
- Do not mix Flintlastic SA membranes with other types of roof membranes. Flintlastic SA membranes are specifically designed to be applied together. The permanent top film of the Mid Ply, PlyBase and NailBase cannot receive torching, hot asphalt or other non self-adhering application methods. The Flintlastic SA Cap (or SA Cap FR), PlyBase and Mid Ply cannot be applied to any surfaces other than as described herein.
- Do not use cold adhesives with Flintlastic SA membranes other than for flashing details and cap sheet overlaps as described herein.
- Refer to the CertainTeed Commercial Roof Systems Manual for complete requirements.

### Deck Preparation

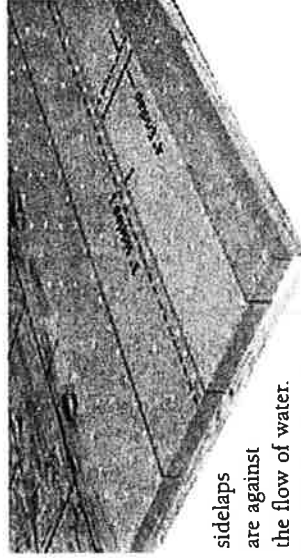
CertainTeed recommends the use of Flintlastic SA NailBase base sheet in conjunction with all self-adhering membrane roof installations. Flintlastic SA NailBase can be mechanically attached to nailable substrates or

applied using hot asphalt (non-nailable substrates). For non-nailable substrates where use of hot asphalt to adhere the base sheet may not be appropriate, Flintlastic SA Mid Ply or Flintlastic SA PlyBase may be used in lieu of Flintlastic SA NailBase on surfaces properly primed with FlintPrime™ SA. However, note that without the use of a base sheet, the membrane may be difficult to later remove (if necessary) and certain UL and FM listings for the products may not apply. Prior to application of Flintlastic SA products, ensure roofs have adequate slope and drainage. Consult the local building official for minimum slope and drainage requirements.

### Application of Flintlastic SA NailBase

Beginning at the low point of the roof, mechanically fasten Flintlastic SA NailBase to nailable deck using appropriate fasteners (see fasteners chart below).

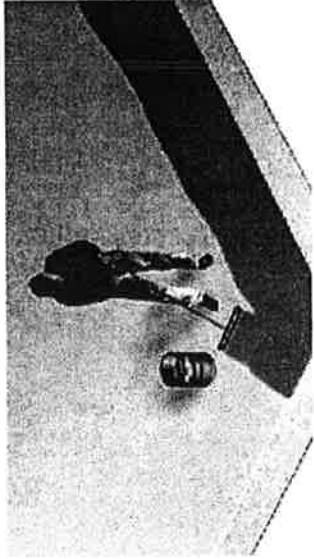
Start with an appropriate roll width (1/3 or 1/2 roll) to accommodate offsetting of sidelaps of subsequent layers of Mid Ply and/or Cap sheet. Install so that no



sidelaps are against the flow of water. A minimum fastening pattern is every 9" on center on sidelaps and every 18" on center in two staggered rows in the field of the sheet.

<b>Standard (Round Head) Roofing Nails</b> For use with Gypsum Sheet, Flash/Termination Bar on Plywood Decks, Non-Yanner Decks, Wood Plank Decks	
<b>Large Head Roofing Nails</b> For use with Gypsum Sheet, Flash/Termination Bar on Plywood Decks, Non-Yanner Decks, Wood Plank Decks	
<b>Pneumatically Driven Staple and Taps or Cap</b> For use with Gypsum Sheet on Plywood Decks, Non-Yanner Decks, Wood Plank Decks	
<b>Base Sheet Fasteners for some Cementitious Roof Decks</b> For use with Gypsum Sheet on Light Weight Insulation Concrete, Poured Gypsum	
<b>Self-Locking Fasteners</b> For use with Gypsum Sheet on Cement/Wood Fiber	

Prime non-naillable substrates such as concrete using FlintPrime SA water-based primer. Allow to dry thoroughly, but not more than 4 hours to retain tack-enhancing properties. Apply SA NailBase using ASTM Type III or IV hot asphalt\* at the rate of 25 lbs. per 100ft<sup>2</sup>, or self-adhere SA PlyBase (or Mid Ply).



Overlap base sheet sidelaps 3" and endlaps 4". Offset endlaps a minimum of 3'. Turn base sheet over fascia and fasten. Do not leave installed base exposed. Cover in the same day with Flintlastic SA Mid Ply and/or Flintlastic SA Cap (or SA Cap FR).

#### **Application of Flintlastic SA Mid Ply or PlyBase**

*Note: Proceed to "Before Installing Flintlastic SA Cap (or SA Cap FR)" if installing a 2-ply system.*

Before installing Flintlastic SA Mid Ply (or PlyBase), sweep the underlying base sheet or primed surface to remove any dust, dirt or sand particles that could interfere with adhesion.

Apply Mid Ply (or PlyBase) over installed Flintlastic SA NailBase or, for non-naillable decks such as concrete, properly primed substrates (see above). Surface must be dry and free from dust or dirt.

Start Mid Ply (or PlyBase) application at the low point of the roof with appropriate roll width to offset sidelaps 18" from sidelaps of base sheet. Install flush to roof edge if over base sheet, otherwise turn the Mid Ply (or PlyBase) over the fascia minimum 2" and secure. Design layout so that no sidelaps are against the flow of water.

Cut rolls into manageable lengths. Fold the membrane back halfway lengthwise to remove the split release film. Press membrane securely into place, and repeat with the opposite half of the membrane. Use a heavy, weighted



roller over the entire surface of the Flintlastic SA Mid Ply (or PlyBase) membrane to secure the membrane. Work outwards to eliminate voids.



Overlap sidelaps of subsequent Mid Ply (or PlyBase) membrane lengths 3" and endlaps 6".



Offset (stagger) endlaps minimum 3'. Cut endlaps at opposing diagonal corners at a 45° angle approx. 3" from the corners to minimize "T"-seams. Apply a bead or small trowel dab (quarter size) of FlintBond™ SBS Modified Bitumen Adhesive, trowel or caulk grade, at the edge of the angled cut to avoid a capillary. Use of a hand-held hot air gun at the joint area prior to rolling the membrane will maximize adhesion. In areas prone to cold temperatures, snow and freeze-thaw cycles, it may be more effective to use the hot air gun to form joints, and to completely fill all mole holes with asphalt that has been slightly melted using the gun. It is recommended to apply a bead of FlintBond SBS Modified Bitumen Adhesive, caulk grade, at all Mid Ply (or PlyBase) side and endlaps to eliminate a capillary.

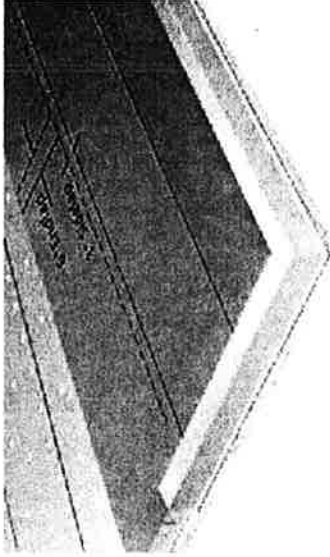
Don't leave the installed Flintlastic SA Mid Ply (or PlyBase) exposed to the weather; cover with Flintlastic SA Cap the same day.

\*Use Type III asphalt for slopes under 3° per foot; Type IV asphalt for slopes over 3° per foot. Spot mopping may be appropriate. Consult CertainTeed.



### **Before Installing Flintlastic SA Cap (or SA Cap FR)**

If roof edge detail utilizes edge metal, proceed as follows. If Mid Ply or (PlyBase) has been applied, install minimum 26 gauge edge metal using appropriate fasteners, and set entirely in a uniform 1/8"-1/4" thick troweling of FlintBond SBS Modified Bitumen Adhesive, trowel grade. Remove any oil from the metal surface using a vinegar and water solution. Prime the horizontal



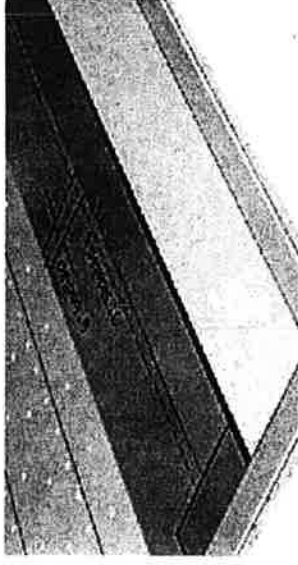
surface of the metal with FlintPrime SA and allow primer to dry. Apply a bead of caulk grade FlintBond adhesive to the edge of the metal where it meets the Mid Ply (or PlyBase). Proceed with Flintlastic SA Cap (or SA Cap FR) installation.

If Mid Ply is not specified: Over the Flintlastic SA NailBase, install a FlintFlash SA 9-3/4" wide strip (or cut a strip of Mid Ply to that dimension) extending 6" onto the field of the roof and flush to the roof edge, self-adhered. Install minimum 26 gauge edge metal using appropriate fasteners, set entirely in a uniform 1/8"-1/4" thick troweling of FlintBond SBS Modified Bitumen Adhesive, trowel grade. Prime the horizontal surface of the metal with FlintPrime SA and allow primer to dry. Apply a bead of caulk grade FlintBond SBS Modified Bitumen Adhesive at the roof side edge of the metal where it meets the Mid Ply strip. Proceed with cap sheet installation.

Similarly, complete your sheet metal flashing installation using cut Mid Ply strips or FlintFlash SA at all flashing details prior to flashing application. Seal edges of Mid Ply or FlintFlash flashing strips with a bead of FlintBond. See "Typical Construction Details," pages 8-11, for examples. If Mid Ply has been installed as part of the system, set flanges in trowel grade FlintBond and properly fasten. All cap sheet flashings installed to transitions that overlap onto mineral surface must be set in a uniform troweling of FlintBond trowel grade adhesive.

### **Application of Flintlastic SA Cap (or SA Cap FR)**

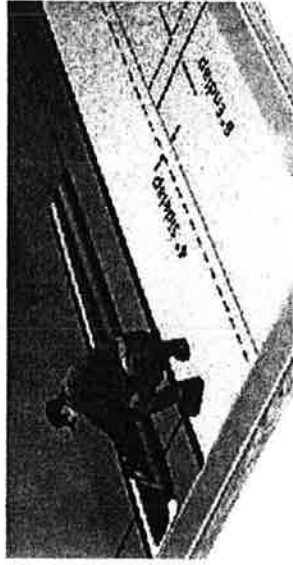
Before installing Flintlastic SA Cap (or SA Cap FR), sweep the surface of the installed SA NailBase (or PlyBase) or Mid Ply clean. To install Flintlastic SA Cap (or SA Cap FR), start at the low point of the roof with an appropriate roll width to offset sidelaps from the underlying membrane a minimum of 18". Work with manageable lengths for proper handling.



Position SA Cap (or SA Cap FR) with selvage edge release strip at high side of roof. Install in weather-lapped fashion, with no laps against the flow of water.



Once positioned, lift and fold back (lengthwise) the lower half of the membrane. Remove the split release film and press firmly into place. Then repeat with the

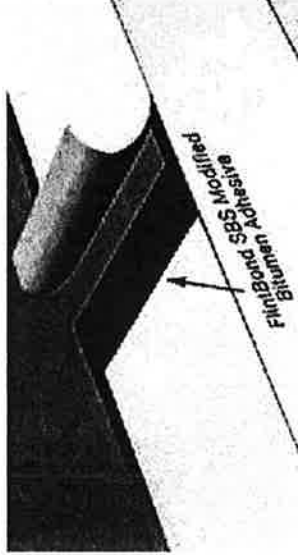


other (high side of the roof) half of the membrane. Follow the same layout and split release film procedures as for Mid Ply (or PlyBase), but overlap sidelaps 4" and endlaps 6". Use a heavy, weighted roller over the entire surface of Flintlastic SA Cap (or SA Cap FR) to secure it in place and prevent voids, working outward from the center of the sheet.

As subsequent membrane lengths are installed, remove the selvage edge release strip just prior to overlapping to



keep the adhesive area protected and clean. Cut endlaps at opposing diagonal corners at a 45° angle approx. 4" from the corners to minimize T-seams.



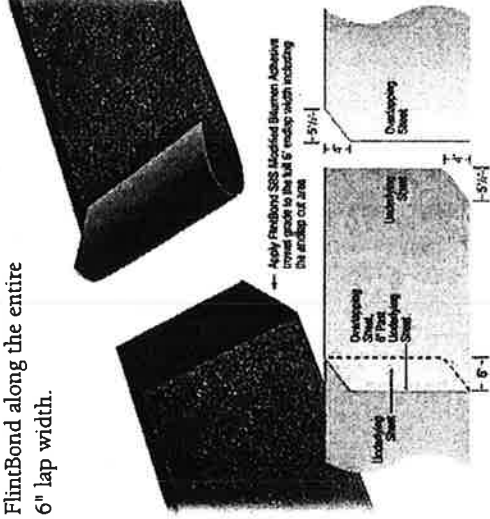
Use FlintBond SBS Modified Bitumen Adhesive, trowel grade, on the entire 6" width of each endlap prior to overlapping. Apply a uniform 1/8"-1/4" troweling of the FlintBond on the entire width of the endlaps to the underlying membrane. Install the overlapping sheet. Always apply FlintBond (extend beyond underlying lap minimum 1/4") on the entire width of any overlap when applying SA Cap (or SA Cap FR) over another mineral surface such as the SA Cap (or SA Cap FR) endlap.

At all vertical and other flashing points, apply FlintBond SBS Modified Bitumen Adhesive, trowel grade, wherever there is an overlap onto mineral surfacing.

Once the membrane has had a chance to bond, check all laps and joints for full adhesion. If the membrane can be lifted at any area it is not properly adhered. A seam probing tool can be helpful to check for small voids at laps. If necessary, use appropriate hand-held hot air welding tool and seam roller or an application of FlintBond to seal small unbonded areas if they exist.

### The Proper T-Seam Detail

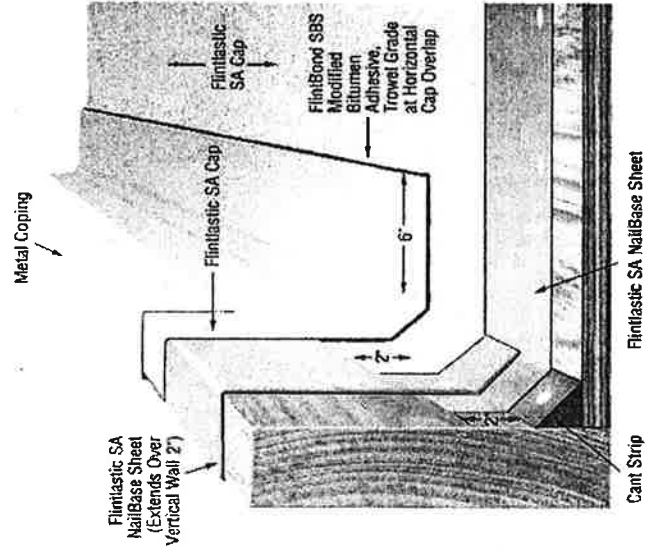
- Before adhering Flintlastic SA Mid Ply or Cap (or SA Cap FR) endlaps, trim the underlying sheet's lower outside corner at the end of the roll.
- Follow with the overlapping sheet, trimming the upper outside corner.
- Corners should be trimmed on a diagonal angle 5-1/2" long from end of roll to outside edge.
- Width of trim should be equal in width to the sidelap specified (4" for Flintlastic SA Cap [or SA Cap FR] and 3" for Flintlastic SA Mid Ply [or PlyBase]).
- Trimmed corners should be completely covered by application of succeeding courses.
- Note: If using Flintlastic SA Mid Ply (or PlyBase), apply quarter-size dab of FlintBond at T-seam area. If using Flintlastic SA Cap (or SA Cap FR), the endlap should be completely set in trowel grade FlintBond along the entire 6" lap width.



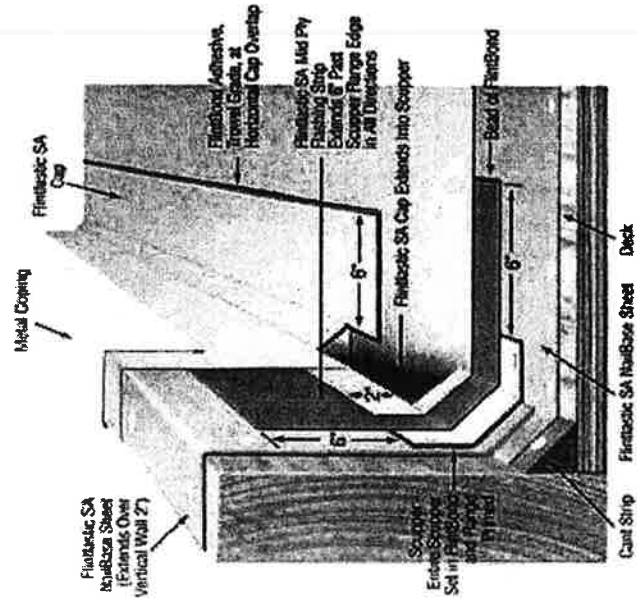
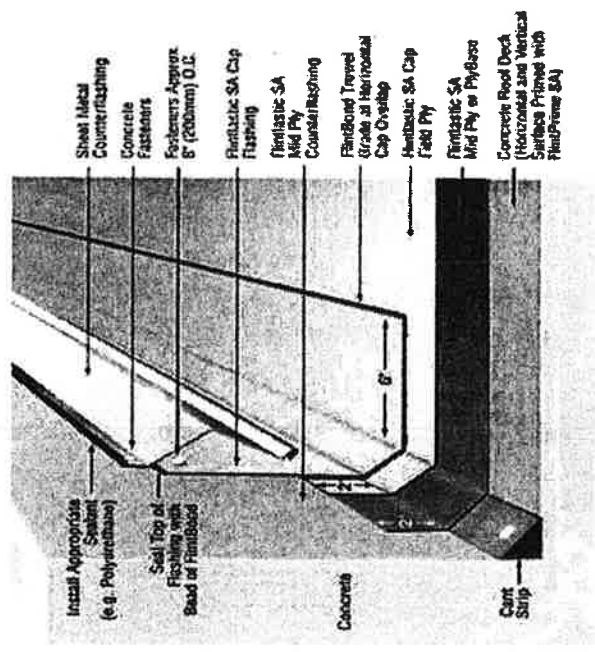


## Typical Construction Details – Flintlastic SA 2-Ply System

**Alternate Parapet Wall**



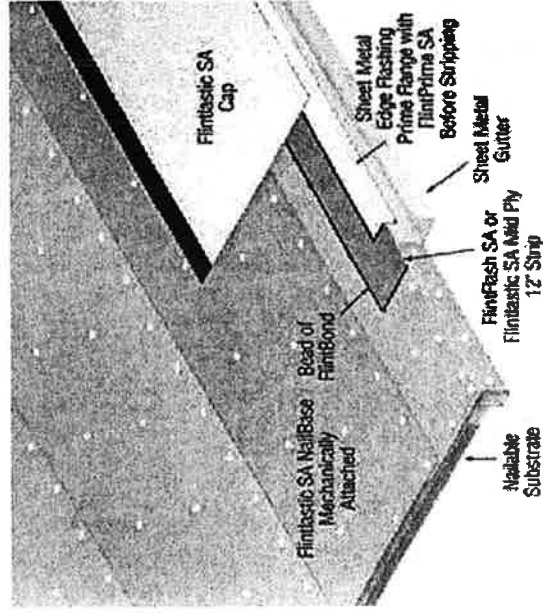
**Concrete Wall Termination with Surface Mount Flashing**



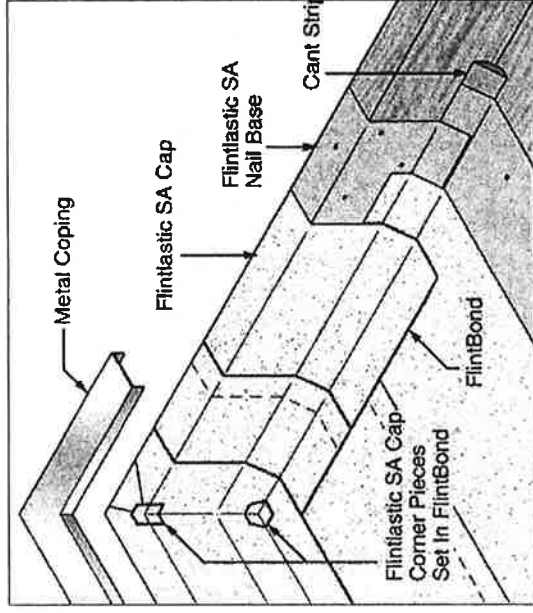
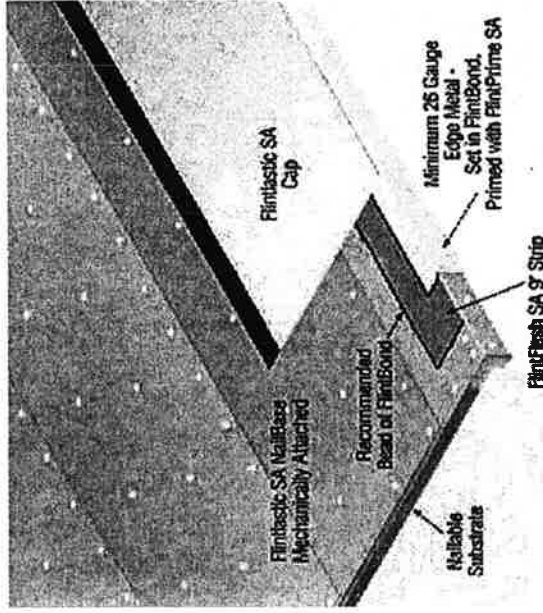
**Scupper Detail**

**Typical Construction Details – Flintlastic SA 2-Ply System**

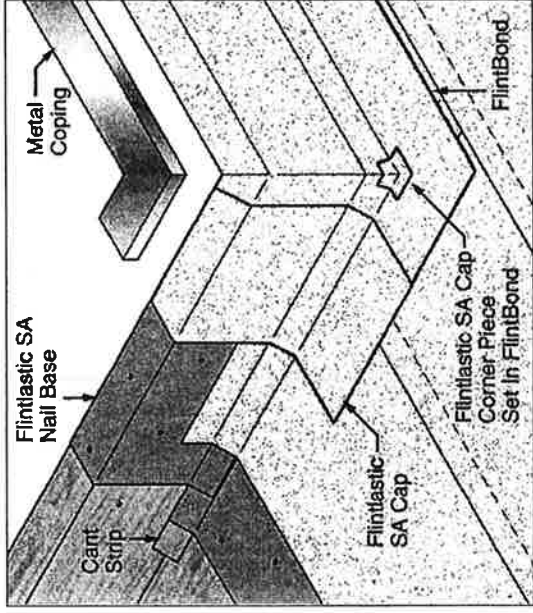
**Rain Gutter Edge Detail**



**Edge Detail**



**Inside Corner**



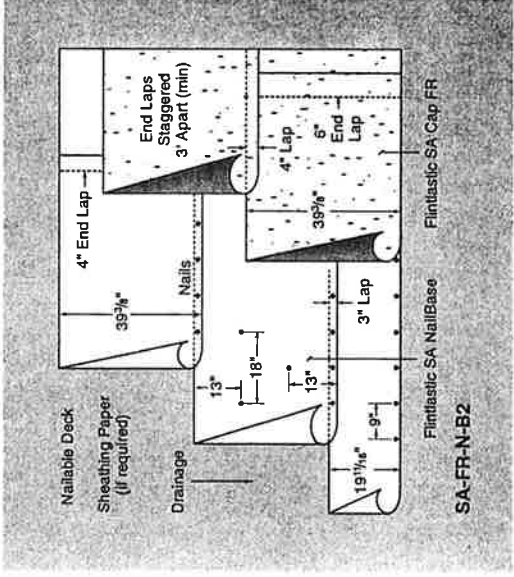
**Outside Corner**

## 2-Ply System Specifications

### **SPECIFICATION: SA-FR-N-B2** **Maximum Warranty Duration 12-year NDL**

Flintlastic SA NailBase sheet, nailed.  
Flintlastic SA Cap FR, self-adhered.

#### **For use over nailable decks**



#### **2.01 Roofing System**

##### **Summary of Materials per 100 Square Feet**

Flintlastic SA NailBase Sheet (1 ply)\* 42 lbs.  
Flintlastic SA Cap FR (1.1 ply) 90 lbs.  
Approximate Total Weight\* 132 lbs.

\*Add GlasBase™ Base Sheet if installing U.L. Class A system.

Note: Flintlastic SA Mid Ply (or FlintFlash SA), FlintBond Trowel Grade and FlintBond Caulk Grade are needed for flashing details and mineral surface membrane overlaps. FlintPrime SA is needed for surfaces that require priming.

#### **Cants**

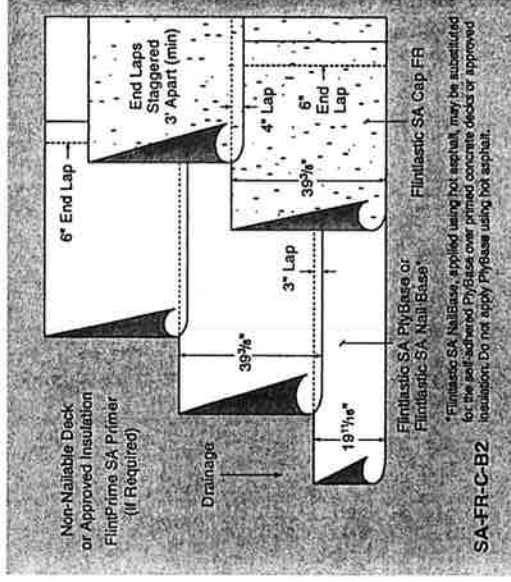
In angles of roof deck and vertical surfaces, the roofing contractor shall furnish and install an approved cant strip with a minimum 3" face.

**Use of CertainTeed's GlasBase under the Flintlastic SA NailBase qualifies the system for U.L. Class A over combustible decks at slopes to 1/2" per foot. GlasBase can be mechanically fastened simultaneously with the Flintlastic SA NailBase.**

### **SPECIFICATION: SA-FR-C-B2** **Maximum Warranty Duration 12-year NDL**

Flintlastic SA NailBase sheet, applied using hot asphalt, or Flintlastic SA PlyBase, self-adhered as base ply.  
Flintlastic SA Cap FR, self-adhered.

#### **For use over non-nailable decks or approved insulation**



#### **2.01 Roofing System**

##### **Summary of Materials per 100 Square Feet**

FlintPrime SA (min. 1/5 gal. per 100ft²) <1 lbs.  
Flintlastic SA PlyBase (1 ply)\* 44 lbs.  
Flintlastic SA Cap FR (1.1 ply) 90 lbs.  
Approximate Total Weight\*\* 135 lbs.

\*Or 42 lbs plus the asphalt if Flintlastic SA NailBase mopped to primed concrete.

\*\*Plus insulation if used.

Note: Flintlastic SA Mid Ply (or FlintFlash SA), FlintBond Trowel Grade and FlintBond Caulk Grade are needed for flashing details and mineral surface membrane overlaps. FlintPrime SA is needed for surfaces that require priming.

#### **Cants**

In angles of roof deck and vertical surfaces, the roofing contractor shall furnish and install an approved cant strip with a minimum 3" face.

#### **Roof System Ventilation**

Roof system as shown requires ventilation as per NRCA recommendations.

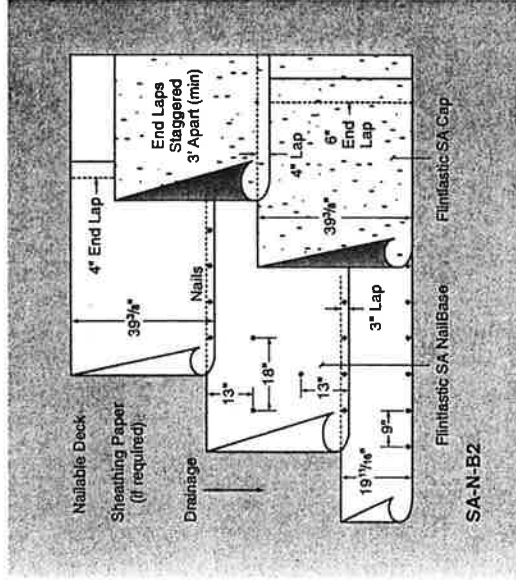
**Specification with insulation and approved gypsum cover board meets U.L. Class A for slopes up to 1/2" per foot.**

## 2-Ply System Specifications

### SPECIFICATION: SA-N-B2 Maximum Warranty Duration 12-year NDL

Flintlastic SA NailBase sheet, nailed.  
Flintlastic SA Cap, self-adhered.

**For use over nailable decks**



#### 2.01 Roofing System

##### Summary of Materials per 100 Square Feet

Flintlastic SA NailBase Sheet (1 ply)\* 42 lbs.  
Flintlastic SA Cap (1 ply) 97 lbs.  
Approximate Total Weight\* 139 lbs.

Note: Flintlastic SA Mid Ply (or FlintFlash SA), FlintBond Trowel Grade and FlintBond Caulk Grade are needed for flashing details and mineral surface membrane overlaps. FlintPrime SA is needed for surfaces that require priming.

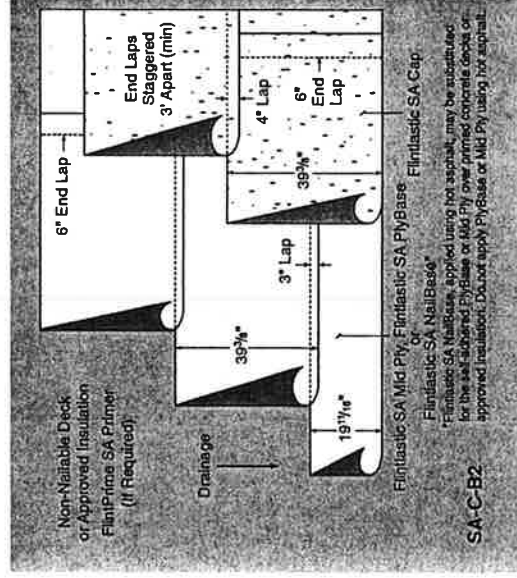
#### Cants

In angles of roof deck and vertical surfaces, the roofing contractor shall furnish and install an approved cant strip with a minimum 3" face.

### SPECIFICATION: SA-C-B2 Maximum Warranty Duration 12-year NDL

Flintlastic SA NailBase sheet, applied using hot asphalt, or Flintlastic SA PlyBase, self-adhered as base ply.  
Flintlastic SA Cap, self-adhered.

**For use over non-nailable decks or approved insulation (Flintlastic SA Base required over insulation)**



#### 2.01 Roofing System

##### Summary of Materials per 100 Square Feet

FlintPrime SA (min. 1/5 gal. per 100ft²) <1 lbs.  
Flintlastic SA PlyBase (1 ply)\* 44 lbs.  
Flintlastic SA Cap (1 ply) 97 lbs.  
Approximate Total Weight\*\* 142 lbs.

\*Or 42 lbs plus the asphalt if Flintlastic SA NailBase mopped to primed concrete.

\*\* Plus insulation if used.

Note: Flintlastic SA Mid Ply (or FlintFlash SA), FlintBond Trowel Grade and FlintBond Caulk Grade are needed for flashing details and mineral surface membrane overlaps. FlintPrime SA is needed for surfaces that require priming.

#### Cants

In angles of roof deck and vertical surfaces, the roofing contractor shall furnish and install an approved cant strip with a minimum 3" face.

#### Roof System Ventilation

Roof system as shown requires ventilation as per NRCA recommendations.

Permit Number: \_\_\_\_\_  
Folio/Parcel Identification Number: \_\_\_\_\_  
Prepared by: Cynthia B. Waters  
\_\_\_\_\_  
Return to: Robert Batson Roofing  
2823 E. Jersey Ave.  
Orlando, FL 32806



**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)  
3302 Trentwood Blvd, Belle Isle, FL 32812 29 23 30 1876 04040
- General description of improvement**  
Roof 6059s of Modified Roofing
- Owner information or Lessee information if the Lessee contracted for the improvement**  
Name Stephens R. Edwards  
Address 3302 Trentwood Blvd. Belle Isle FL 32812  
Interest in Property \_\_\_\_\_  
Name and address of fee simple titleholder (if different from Owner listed above)  
Name \_\_\_\_\_  
Address \_\_\_\_\_
- Contractor**  
Name Robert E. Batson Jr Telephone Number 407-423  
Address 2823 E. Jersey Ave. Orlando, FL 32806
- Surety** (if applicable, a copy of the payment bond is attached)  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_
- Lender**  
Name \_\_\_\_\_ 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 Liens Notice as provided in §713.13(1)(b), Florida Statutes.**  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) Nov. 15, 2013



Stamp: *Copy Complete*  
MATHA O. HAYNIE, COUNTY CLERK  
of FLORIDA  
This document as collected in the Official Records of Orange County, Florida, is hereby certified as a true and correct copy of the original as filed in the Official Records of Orange County, Florida, on 10/10/2013 at 12:23:52 PM.

**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.**

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

Robert E. Batson Jr Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Partner/Manager  
Owner Signatory's Title/Office

The foregoing instrument was acknowledged before me this 10 day of 10/13 by Stephens R. Edwards as \_\_\_\_\_ for \_\_\_\_\_  
month/year name of person

\_\_\_\_\_  
Type of authority, e.g., officer, trustee, attorney in fact  
Cynthia B. Waters Name of party on behalf of whom instrument was executed  
Signature of Notary Public - State of Florida  
Print Name or Signature of Notary Public



Personally Known \_\_\_\_\_ OR Produced ID X  
Type of ID Produced Drivers license





**City of Belle Isle**  
 1600 Nela Avenue, Belle Isle, FL 32809  
 Tel 407-851-7730 \* Fax 407-240-2222 \* [www.cityofbelleislefl.org](http://www.cityofbelleislefl.org)

## Product Approval Form

DATE: 10-10-13 PERMIT # \_\_\_\_\_

PROJECT ADDRESS 3307 Trentwood Blvd Belle Isle, FL 32809 X 32812

As required by Florida Statute 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](http://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 showing PA#, approval and code edition stamped
3. Manufacturer's installation details and requirements for each product stamped

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
<b>EXTERIOR DOORS</b>							
Swinging				Sliding	<b>WALL PANELS</b>		
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
<b>WINDOWS</b>							
Single/Dbf Hung				Asphalt Shingles	<b>ROOFING PRODUCTS</b>		
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other			
Skylights	Sun Tek	22x24	FL13488RD		Certainead	Flintlastic	FL2533-R8
Other							
<b>STRUCTURAL COMPONENTS</b>							
Wood Connectors					<b>OTHER</b>		
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 Robert E. Babington

Date 10-10-13

**RETAIN A COPY FOR OFFICE USE AND RETURN ORIGINAL TO APPLICANT**  
 Updated 12-2012 FORM #PRODAPP012