



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit 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: GAS: 1 spa
Comments: None
Project Information
 Address: 7119 Gondola Drive, Belle Isle, FL 32809
 Parcel ID: 25-23-29-5884-01-010
 Property Owner: Esposito, Frank
 Phone Number: 407 222 1162

 Company Name: Sams Gas Co
 Contractor Name: Sams, Randall
 License Number: 01689
 Address: 8222 S. Orange Avenue, Orlando, FL 32809
 Phone Number: 407 855 1903

Permit Number: 2015-08-025

Date of Application: 08/07/2015

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 \$
 Mechanical \$
 Gas \$108.00
 Roofing \$
 Boat Dock \$
 Screen Encl \$
 Swimming Pool \$
 Sign \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$112.00

Date Paid 8-10-15

CC or Check # AMEX 6205

Amount Paid 112.00

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

1st _____ (Footing/Foundation)
 Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____
 2nd _____ (Slab)
 3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
 4th _____ (Exterior Framing)(Roof/Wall Sheathing)
 5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)
 6th _____ (Insulation to be Made After Roof Installed)
 7th _____ (Drywall)
 8th _____ (Sidewalk/Driveway)
 9th _____ (Other)
 10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING

1ST ROOFING Deck Nailing/Dry-in/Flashing _____
 2nd ROOFING Covering In-Progress _____
 3rd ROOFING Covering Final _____

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

1ST _____ (Underground) 2nd _____ (Sewer)
 3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS ___ Natural ___ LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to BIDScheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. Next-Day Inspection requests must be made by 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/f/fo94edc4-832d-44bd-9809-ecf32f9e2e63>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

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APPLICATION FOR GAS 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: 8-4-15 PERMIT NUMBER
The undersigned hereby applies for a permit to make: (Indicate) Natural Liquefied Petroleum Gas installations as indicated below PLEASE PRINT

Project Address 7119 GONDOLA DR. Belle Isle FL 32809 32812
Property Owner FRANK ESPOSITO Phone 407-222-1162
Property Owner's Mailing Address SAME AS ABOVE City
State Zip Code Parcel Id Number: 25-23-29-5884-14-010
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

GAS OUTLETS 1 DELIVERY PRESSURE 11" w/c TOTAL # BTU'S 400,000

*** SIGNED & DATED PIPING PLAN/SKETCH WITH GAS CALCULATIONS REQUIRED ***
GENERATOR INSTALLATION SHOULD INCLUDE INLET PRESSURE AND SUPPLY SPECIFICATIONS

APPLIANCES:

ALL VENTING AND COMBUSTION AIR SHALL BE THE RESPONSIBILITY OF THE PERMIT HOLDER. AND WILL BE INSTALLED AT THE ROUGH-IN STAGE. INDICATE ALL DIRECT VENT POWER VENT APPLIANCES IN SPECIAL COMMENTS

Table with columns: Type of Appliance, Qty, Value of Each*, Estimated Value for Labor & Appliance(s) = \$2380.00. Includes rows for DRYER, FURNACE, FIREPLACE, RANGE, WATER HEATER, GRILL, POOL HEATER, SPA (1 @ \$2000.00), BOILER, MISC.

*VALUE MEANS REASONABLE RETAIL VALUE

Building Official: [Signature] Date 8-10-15
Verified Contractor's Licenses & Insurance are on file [Signature] Date 8-10-15
Permit Fee \$
Review Fee \$
3% Florida Surcharge \$
Total Permit Fee \$

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 [Signature] LICENSE # 011689
LICENSE HOLDER NAME Randal Sams COMPANY NAME SAMS LP GAS CO
Street Address 8222 S. Orange Avenue
City Orlando State FL Zip Code 32809 Phone Number 407-855-1903
Email Address samsaps1964@gmail.com

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

7119 Sondata Drive
Belle Isle #1, 32809

Propane
Riser Diagram
14 L/C

Jams Gas
8222 S. Orange Ave
Dulando #1, 32859
407 855 1903
License 01689

40000
BTU Heater
Pool

30' 1/2" Poly
#14 gauge Tracer

1st Floor
Res. 0
120
USA

1 Drop - Pool Heater
40000 BTU's
Approx 30' Piping



Bob Kuzin
407 353 1942