



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.

<p>Scope of Work: BUILDING: replace concrete sidewalk/entry way w/decorative stamped colored concrete</p> <p>Comments: None <i>OVERSIZED PLANS WITH PHYSICAL PACKET</i></p> <p>Project Information Address: 731 Fairlane Avenue, Belle Isle, FL 32809 Parcel ID: 24-23-29-8680-04-002 Property Owner: Pine Castle United Methodist Church Phone Number: 407-438-2700 ***** Company Name: Cowart Custom Scapes, LLC Contractor Name: Dager, Ronald License Number: CBC059356 Address: 8701 Clair Ann Drive, Apt. 106, Orlando, FL 32825 Phone Number: 850-879-7133</p>	<p style="text-align: right;">Permit Number: 2015-07-024</p> <p style="text-align: right;">Date of Application: 07/09/2015 Date Permit Issued: 07/09/2015</p> <p>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.</p>
--	--

BUILDING FEATURES

<p>IMPACT FEES</p> <p>Traffic \$ School \$</p> <p>ZONING FEES</p> <p>Zoning Fee \$</p> <p>UNIVERSAL ENG - BUILDING FEES</p> <p>Boat Dock \$ Boat House \$ Building \$26.00 Demo \$ Door(s) \$ Driveway \$ Electrical \$ Fence \$ Gas \$ Irrigation \$ Low Voltage \$ Mechanical \$ Plumbing \$ Pool \$ Roofing \$ Screen Encl \$ Shed \$ Temp Pole \$ Window(s) \$</p> <p>SURCHARGE FEES</p> <p>Surcharge Fee \$2.00 Surcharge Fee \$2.00</p> <p style="text-align: center;">TOTAL FEES \$30.00</p> <p>Date Paid <i>8-18-15</i></p> <p>CC or Check # <i>USA 1665</i></p> <p>Amount Paid <i>30.00</i></p> <p>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).</p>	<p style="text-align: center;">BUILDING INSPECTOR USE ONLY</p> <p>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</p> <p>BUILDING</p> <p>1st _____ (Footing/Foundation) Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____</p> <p>2nd _____ (Slab)</p> <p>3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)</p> <p>4th _____ (Exterior Framing)(Roof/Wall Sheathing)</p> <p>5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)</p> <p>6th _____ (Insulation to be Made After Roof Installed)</p> <p>7th _____ (Drywall)</p> <p>8th _____ (Sidewalk/Driveway)</p> <p>9th _____ (Other)</p> <p>10th _____ (Final – After MEP and Other Applicable Finals)</p> <p>ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR</p> <p>1ST ROOFING Deck Nailing/Dry-in/Flashing _____</p> <p>2nd ROOFING Covering In-Progress _____</p> <p>3rd ROOFING Covering Final _____</p> <p>PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)</p> <p>1ST _____ (Underground) 2nd _____ (Sewer)</p> <p>3rd _____ (Rough-In/Tub Set) 4th _____ (Final)</p> <p>CHECK APPROPRIATE BOX</p> <p><input type="checkbox"/> GAS ___ Natural ___ LP <input type="checkbox"/> MECHANICAL <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> LOW VOLTAGE</p> <p>1st _____ (Rough-In) 2nd _____ (Final)</p>
--	--

Inspection requests are to be emailed to BDscheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. **Next-Day Inspection requests must be made by 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>

login ID = cobi@universalengineering.com

password = universal13

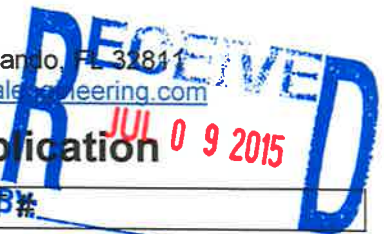
CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	<u>2015-07-024</u>	
Property Owner	<u>PINE CASTLE UNITED METHODIST CHURCH</u>	
Address	<u>731 FAIRLANE AVENUE (32809)</u>	
Nature of Improvement	<u>Building: Replace concrete sidewalk + entry way</u>	
Received Application	<u>7/9/15</u>	
Sent for Stormwater Review	/	
Stormwater Approved	/	
Sent for Zoning Review	/	
Zoning Approved	/	
Applied for Variance		
Variance Approved		
Sent to BO for Review	<u>7/9/15</u>	
Building Official Approved	<u>7-9-15 RD</u>	
Comments		
1.	<u>Jaitto 7/9/15</u>	<u>Logged in; Created Task #04; Site Plans</u>
2.	<u>" "</u>	<u>include Architect's drawing label but</u>
3.	<u>" "</u>	<u>are not signed + sealed. Plan Review</u>
4.	<u>" "</u>	<u>WO #53739 to determine if acceptable.</u>
5.	<u>7-9-15-</u>	<u>SITE WORK ONLY 26.00</u>
6.	<u>Jaitto 7/10/15</u>	<u>Typed Permits, updated Log/Vision,</u>
	<u>" "</u>	<u>emailed client permit is Ready.</u>
8.		
9.		
10.		
11.		
12.		



City of Belle Isle

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



Building Permit (Land Use) Application

DATE: June 30, 2015

PERMIT# _____

PROJECT ADDRESS 731 Fairlane Ave, Belle Isle, FL 32809 32812

PROPERTY OWNER Pine Castle United Methodist Church PHONE 407-438-2700 VALUE OF WORK (labor & material) \$ 10,550

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

Replace concrete sidewalk and entry way *in highlighted areas only w/ decorative stamped colored concrete*

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
- **SEPTIC SYSTEM (RESIDENTIAL):** – Provide verification of OC Health Dept approval for on-site septic tank system, per FAC Chap. 64E-6
- 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:** 24-23-29-8680-04-002

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

SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCROACH 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 _____
 OCCUPANCY GROUP Comm Res: Single Fam Multi Fam
 #BLDG. _____ #UNITS _____ #STORIES _____ **TOTAL SQ.FT.** 16888
 MAX. FLOOR LOAD _____ MAX. OCCUPANCY _____
 MIN. FLOOD ELEV. _____ LOW FLOOR ELEV. _____
 WATER SERVICE _____ WELL _____ SEPTIC _____

BUILDING REVIEWER _____ DATE _____

VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE _____ DATE _____

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."

Republic Services is by legal contract the sole authorized provider of garbage, recycling, yard waste, and commercial garbage and construction debris collection and disposal services with the city limits of the City. Contractors, homeowners and commercial businesses may contact Republic Services at 407-293-8000 to setup accounts for Commercial, Construction Roll Off, or other services needed. Rates are fixed by contract and are available at City Hall or from Republic Services. The City enforces the contract through its code enforcement office. Failure to comply will result in a stop work order.

SEPARATE PERMITS ARE REQUIRED FOR ROOFING, ELECTRICAL, PLUMBING, GAS, MECHANICAL, SIGNS, POOLS, ENCLOSURES, ETC.

Wind Exposure Category: 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	\$ _____
SCREEN ENCLOSURE	Y	N	\$ _____
ROOFING	Y	N	\$ _____
BOAT DOCK	Y	N	\$ _____
BUILDING	Y	N	\$ _____
WINDOW(S)	Y	N	\$ _____
DOOR(S)	Y	N	\$ _____
FENCE	Y	N	\$ _____
SHED	Y	N	\$ _____
DRIVEWAY	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 Included?	Y	N

OTHER PERMITS REQUIRED:

ELECTRICAL	Y	NA
PREPOWER	Y	NA
MECHANICAL	Y	NA
PLUMBING	Y	NA
ROOFING	Y	NA
GAS	Y	NA



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



Building Permit (Land Use) Application
 To be completed as required by State Statute Section 713 and other applicable sections.

PERMIT # _____

Owner's Name Pine Castle United Methodist Church

Owner's Address 731 Fairlane Ave, Belle Isle, FL 32809

Contractor Name <u>Dager Ronald</u>	Company Name <u>Cowart Custom Scapes LLC</u>
License # <u>CR059756</u>	Company Address <u>8701 Claire ann dr. apt 106</u>
Contact Phone/Cell <u>850-879-7133</u>	City, State, ZIP <u>Orlando, FL 32825</u>
Contact Email <u>CowartRoilly26@gmail.com</u>	Contact Fax _____

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.floridabuilding.org) and City Ordinances (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 ROOFING, ELECTRICAL, MECHANICAL, PLUMBING, GAS, SIGNS, POOLS, SCREEN 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 Gregory B. Numbers
 Gregory B. Numbers, Administrator
 The foregoing instrument was acknowledged before me this 7/2/15
 by Gregory Numbers who is personally known to me
 and who produced N/A
 as identification and who did not take an oath
 Notary as to Owner
 State of Florida
 County of Orange



Contractor Signature _____
 COMPANY NAME Cowart Custom Scapes LLC
 The foregoing instrument was acknowledged before me this 7/2/15
 by William Cowart who is personally known to me
 and who produced N/A
 as identification and who did not take an oath.
 Notary as to Owner
 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 City Code, Section 50-74: Impervious Surface Ratio

- Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).
 Total Lot Area _____ X 0.35 =
 Allowable Impervious Area (BASE) _____
- 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) _____
- 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.
- 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