



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: MECHANICAL: c/o 5-ton HVAC with no ductwork
Comments: None

Project Information

Address: 1503 Conway Isle Circle, Belle Isle, FL 32809
Parcel ID: 24-23-29-3490-00-240
Property Owner: Judd, Patricia & Randy
Phone Number: 321 202 3314

Company Name: Certified Climate Control LLC
Contractor Name: Hill, David
License Number: CAC1816634
Address: 690 A East Rhode Island Ave, Orange City, FL 32763
Phone Number: 386-675-6963

Permit Number: 2016-08-027

Date of Application: 08/16/2016

Date Permit Issued: 08/16/2016

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 \$100.50
 Gas \$
 Roofing \$
 Boat Dock \$
 Screen End \$
 Swimming Pool \$
 Sign \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$104.50

Date Paid 8-17-16
CC or Check # AMEX 92201
Amount Paid 104.50

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

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

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

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 BI scheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. **Next-Day Inspection requests must be made by 4pm.** Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.

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

Universal Engineering Sciences 3532 Maggie Blvd. Ocala, FL 34476
Tel 407-581-8161 * Fax 407-581-0313 * www.ci.belleisle.fl.us



APPLICATION FOR MECHANICAL PERMIT

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT 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: 8/15/16

PERMIT NUMBER: 2016-08-027

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

Project Address: 1503 Conway Isle Cir Belle Isle, FL 32809 32812
Property Owner: Reedy & Patricia Judd Phone: 321 202 3314
Property Owner's Mailing Address: same as above
State: _____ Zip Code: _____ Parcel Id Number: 24-23-29-3490-00-240

Class of Building: Old New Type of Building: Residential Commercial Other
Type of Work: New Alteration Addition Repair

- REQUIRED: Tie Down Engineering
- REQUIRED: if adding A/C to new space, provide Energy Calculations & Equipment Sizing Calculations
- REQUIRED: if replacing unit with no duct work, Duct Certification as per FB 101.4.7.1, must be posted on unit

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

Air Conditioning: # of Units 1 Tons Per Unit 5 Total Tons 5
Type of System: Water to Air Chiller Split System Package Heat Pump Estimated Cost \$ 7008.00

Heating: # of Units KWS Per Unit 1 8 Total KWS 8 BTUs _____
Oil _____ Electric _____ Boiler _____ Gas _____ Estimated Cost \$ _____

(A) Estimated Cost Fee \$ _____

Fees for items below are based on valuation of all units, equipment, materials and labor supplied by owner or contractor.

Ventilation: (Number of) Grease _____ Heat _____ Hoods, Air Intakes _____ Exhaust Fans _____ Dryer Vents _____ Estimated Cost \$ _____

Refrigeration: Number of units _____ Estimated Cost \$ _____

Piping: Air _____ Vacuum _____ Steam _____ Chilled Water _____ Estimated Cost \$ _____

Others: (Specify) _____ Estimated Cost \$ _____

Was the space previously Air Conditioned? Yes _____ No _____ (B) Estimated Cost 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 or Florida codes and/or ordinances.

LICENSE HOLDER SIGNATURE: [Signature] LICENSE # CAC18160634

LICENSE HOLDER NAME: David Hill COMPANY NAME: Certified Climate Control

Street Address: 190A E Rhode Island Ave

City: Orange City State: FL Zip Code: 32703 Phone Number: 386 675 6963

Email Address: dm.hill@certifiedclimate.com

Building Official: <u>[Signature]</u> Date: <u>8/16/16</u>	Permit Fee	\$	<u>62.-</u>
Verified Contractor's Licenses & Insurance are on file <u>[Signature]</u> Date: <u>8-16-16</u>	Review Fee	\$	<u>33.50</u>
	3rd Florida Surcharge	\$	<u>4.-</u>
	Total Permit Fee	\$	<u>104.50</u>

NOTE: The Building Permit Number is required if the Mechanical Installation is performed within the building's structure or attached parking structure. If not, the Building Permit Number is not required.

base 37
526 30
67.2
33.50
104.50

wo 71006

PERMIT AUTHORIZATION

I, **DAVID HILL** hereby authorize
(License Holder)

Jennifer Brewer
(Authorized Person)

To obtain a permit in my behalf under my license # CAC1816634

To the City of Belle Isle Building department for the

Job described below:

PERMIT TYPE

DESCRIPTION

HVAC

Owner Randy Sudd

Site Address 1503 Conway Isle Cr
Belle Isle, FL 32809

Tax Parcel # _____

David Hill
(License Holder Signature)


Date 8/15/14

State of Florida

County Of Volusia

Affirmed and subscribed before me on this 15 day of Aug,
2014 by **DAVID HILL** who is personally known to me.

Jody L McLeer
Signature of Notary Public, State of Florida
Notary Seal

 **JODY L MCLEER**
MY COMMISSION #FF039242
EXPIRES July 24, 2017
FloridaNotaryService.com
Print, Type or Stamp Name of Notary

REVISIONS

NO.	DATE	DESCRIPTION

Joseph D. Hiller P.E.
 Florida P.E. License # 74683
 P.O. Box 200665
 Port Orange, FL 32129
 Phone: 386-248-1700
 Email: hillerd@engineering.com

PROJECT: AC Condenser Anchor Clip
 THE METAL SHOP
 2541W. Dunneil Road
 Dunneil, FL 34433
 www.metalshop.com
 Phone: 888-447-5462 Fax: 352-622-0007

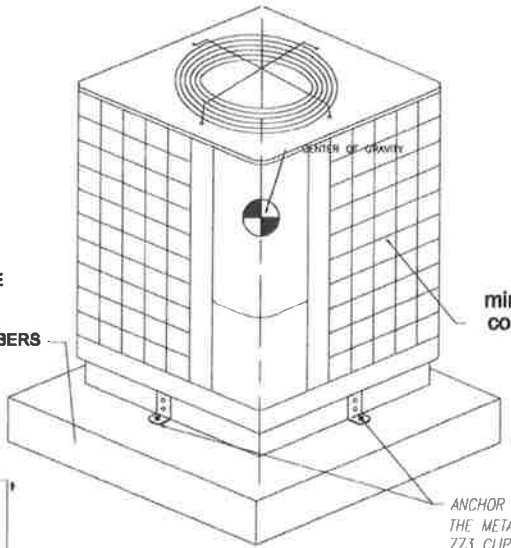
THIS DRAWING AND ITS
 REVISIONS ARE THE
 PROPERTY OF THE
 ENGINEER AND ARE NOT TO
 BE REPRODUCED OR
 TRANSMITTED IN ANY
 FORM OR BY ANY
 MEANS, ELECTRONIC OR
 MECHANICAL, WITHOUT
 THE WRITTEN PERMISSION
 OF THE ENGINEER.

DATE: 6/24/2015
 SCALE: AS NOTED
 DRAWN BY: J. HILLER
 JOB NO: A-2
 2 of 4

GENERAL NOTES:

- THIS PRODUCT HAS BEEN DESIGNED AND SHALL BE FABRICATED IN ACCORDANCE WITH THE REQUIREMENTS OF THE 2014 FLORIDA BUILDING CODE FOR USE WITH ASCE 7-10. THIS PRODUCT MAY BE USED WITHIN AND OUTSIDE THE HIGH VELOCITY HURRICANE ZONE.
- NO 1/3% INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THIS ANCHOR SYSTEM.
- ALLOWABLE DESIGN SHOWN ON TABLES IS BASED ON ALLOWABLE SHEAR AND TENSION LOADS OF MECHANICAL FASTENERS.
- MAXIMUM & MINIMUM DIMENSIONS AND WEIGHT UNITS SHALL CONFORM TO SPECIFICATIONS STATED ON THESE ENGINEERING SHEETS.
- ALL MECHANICAL SPECIFICATIONS, CLEAR SPACE, TONNAGE, ETC. SHALL BE AS PER THE MANUFACTURER RECOMMENDATIONS AND ARE THE EXPRESS RESPONSIBILITY OF THE CONTRACTOR.
- FASTENERS TO BE # 14x3/4" SELF TAPPING SHEET METAL SCREWS, UNLESS NOTED OTHERWISE.
- TAPCONS SHALL BE ITW BUILDEX OR ELCO BRAND, AND SHALL BE 1/4"x1 3/4" INSTALLED TO 2000 PSI MINIMUM COMPRESSIVE STRENGTH. SEE ANCHOR SCHEDULE FOR ANCHOR REQUIREMENTS.
- ALL STEEL CLIPS SHALL BE ASTM A283 STEEL WITH F_y = 33 KSI. ALL STEEL MEMBERS SHALL BE PROTECTED AGAINST CORROSION WITH G90-RATED GALVANIZED COATING, SUITABLE FOR ALL COASTAL INSTALLATIONS.
- INSTALL AN ELECTRICAL GROUND, WHEN REQUIRED. ALL ELECTRICAL CONNECTIONS INCLUDING GROUNDS TO BE DESIGNED & INSTALLED BY OTHERS.
- THE ADEQUACY OF ANY EXISTING STRUCTURE TO WITHSTAND SUPERIMPOSED LOADS SHALL BE VERIFIED AND IS NOT INCLUDED IN THIS CERTIFICATION. EXCEPT AS EXPRESSLY PROVIDED HEREIN, NO ADDITIONAL CERTIFICATIONS OR AFFIRMATIONS ARE INTENDED.
- THE SYSTEM DETAILED HEREIN IS A GENERIC UNIT INSTALLATION. THIS INSTALLATION DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC INSTALLATION. FOR SITE CONDITIONS DIFFERENT FROM THE CONDITIONS DETAILED HEREIN, A LICENSED ENGINEER OR REGISTERED ARCHITECT SHALL PREPARE SITE SPECIFIC DOCUMENTS FOR USE IN CONJUNCTION WITH THIS DOCUMENT.

CENTER OF GRAVITY OF UNIT IS ASSUMED TO AT THE GEOMETRIC CENTER OF THE MECHANICAL UNIT. ANCHORING IS FOR REGULAR SHAPED UNITS I.E. SQUARE OR RECTANGULAR. NO IRREGULAR SHAPED UNITS



CONCRETE BASE OR HOST STRUCTURE TO BE DESIGNED BY OTHERS. CONCRETE MUST BE 2000 PSI MINIMUM. SEE SITE SPECIFIC ENGINEERING FOR ROOF TOP APPLICATIONS OR WOOD SUPPORT MEMBERS

THIS ANCHORING DETAIL WILL WITHSTAND A MAXIMUM DESIGN WINDSPEED OF: 170 MPH Exp C, Cat II STRUCTURES MAX WINDSPEED OF: 143 MPH for EXP D, Cat III or IV STRUCTURES

ANCHOR CLIPS: THE METAL SHOP 1" CLIP MODEL 771 OR 773 CLIP ANCHOR AND FASTENERS. ONE ANCHOR CLIP PER SIDE OF UNIT. (4) TOTAL (16 GA.) ATTACH: USING #14x3/4" SELF TAPPING SHEET METAL SCREWS TO BASE OF COMPRESSOR. ATTACH TO CONCRETE PAD/SLAB USING 1/4"x1 3/4" TAPCON

EXTERIOR EQUIPMENT TIE DOWN

SCALE: N.T.S.

STANDARD ANCHOR SCHEDULE

SUBSTRATE	ANCHOR
CONCRETE: (4" THICK MIN, 3192KSI MIN.)	(1)-1/4" x 1 3/4" ITW BUILDEX OR ELCO TAPCON, 1 3/4" FULL EMBED TO CONCRETE, 2-1/2" MIN EDGE DISTANCE, 3" MIN. SPACING TO ANY ADJACENT ANCHOR.

MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO CONCRETE PAD)
 (1) CLIP AT EACH CORNER (TOTAL OF 4 CLIPS PER UNIT)

MAXIMUM SURFACE AREA OF UNITS LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	(1) CLIP AT EACH CORNER	
			TOTAL OF 4 CLIPS	1/4" TAPCON TO CONCRETE BASE
6 FT ²	24" MAX	12" MIN	43 PSF	
9 FT ²	32" MAX	15" MIN	32 PSF	
4 FT ²			80 PSF	
9 FT ²	48" MAX	24" MIN	40 PSF	
12 FT ²			30 PSF	
16 FT ²			20 PSF	
20 FT ²	60" MAX	48" MIN	20 PSF	
25 FT ²				
30 FT ²				
36 FT ²				

RECOMENDED FASTENERS

1/4" x 1 3/4" TAPCON

MAXIMUM ALLOWABLE SHEAR LOAD FOR 1/4" DIA CONCRETE FASTENERS IN 2000 PSI MINIMUM STRENGTH CONCRETE IS: 325 LBS. FULL OUT (TENSION LOAD) STRENGTH OF TAPCON IS 505 LBS WITH 1 3/4" MIN. EMBEDMENT:

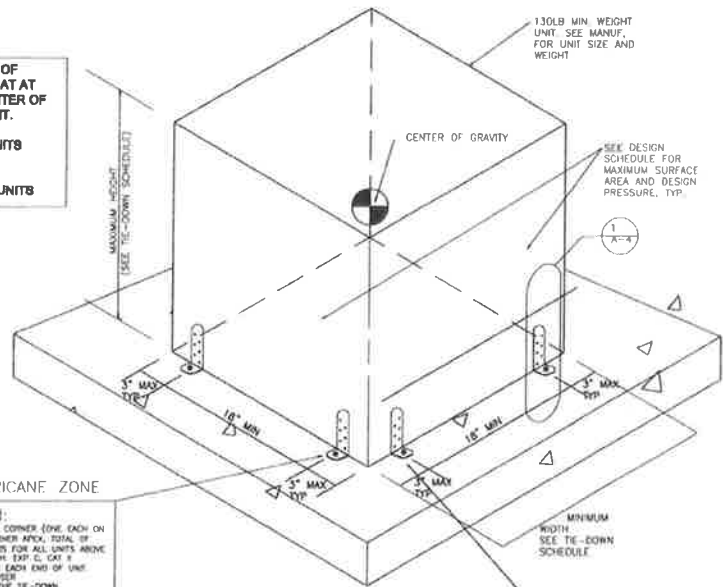
SINGLE SHEAR: 325 LBS
 TENSION: 505 LBS

- TIE-DOWN CLIPS SHALL BE FASTENED TO MECHANICAL HOUSING UNIT WITH (2)-#14x3/4" STS GRADE 5 SHEET METAL SCREWS.
- MECHANICAL HOUSING UNIT SHALL CONFORM TO THE FOLLOWING:
 - ALUMINUM FRAME OR EXTERIOR HOUSING SHALL BE 6063-T6 MIN. ALUMINUM SHEET WITH F_y=30 KSI, 0.0625" MIN. THICKNESS.
 - STEEL HOUSING UNITS SHALL BE 33KSI MIN. STEEL, GRADE 33, 22GA MIN. (t=0.0299").
- MAXIMUM ALLOWABLE WIND PRESSURES MAY BE EQUIVALENT DUE TO THE LIMITING CAPACITY OF THE 1" CLIP.
- A MAXIMUM ALLOWABLE VALUE OF 200 PSF HAS BEEN UTILIZED; FOR HIGHER DEMAND CAPACITIES CONTACT THIS ENGINEER FOR SITE-SPECIFIC ENGINEERING.

DATE: January 29, 2015



CENTER OF GRAVITY OF UNIT IS ASSIGNED TO AT THE GEOMETRIC CENTER OF THE MECHANICAL UNIT. ANCHORING IS FOR REGULAR SHAPED UNITS I.E. SQUARE OR RECTANGULAR. NO IRREGULAR SHAPED UNITS



HIGH VELOCITY HURRICANE ZONE

DOUBLE CLIP OPTION:

(2) TOTAL CLIPS MAY BE USED AT EACH CORNER (ONE EACH ON OPPOSITE CORNER FACES, 3\"/>

THIS ANCHORING DETAIL WILL WITHSTAND A MAXIMUM DESIGN WINDSPEED OF: 196 MPH Exp C, Cal II STRUCTURES
Max WINDSPEED OF: 167 MPH for EXP D, Cal III or IV STRUCTURES

EXTERIOR EQUIPMENT TIE DOWN

SCALE: N.T.S.

STANDARD ANCHOR SCHEDULE

SUBSTRATE	ANCHOR
CONCRETE: (4\"/>	(1)-1/4\"/>

MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO CONCRETE PAD)
(1) CLIP AT EACH CORNER (TOTAL OF 4 CLIPS PER UNIT)

MAXIMUM SURFACE AREA OF UNITS LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	2 CLIPS AT EACH SIDE	
			TOTAL OF 8 CLIPS	1/4\"/>
6 FT ²	24\"/>	12\"/>	81 PSF	81 PSF
6 FT ²	32\"/>	15\"/>	60 PSF	60 PSF
4 FT ²	32\"/>	15\"/>	170 PSF	170 PSF
6 FT ²	48\"/>	24\"/>	113 PSF	113 PSF
9 FT ²			75 PSF	75 PSF
12 FT ²	60\"/>	48\"/>	56 PSF	56 PSF
16 FT ²			42 PSF	42 PSF
20 FT ²	60\"/>	48\"/>	52 PSF	52 PSF
25 FT ²			44 PSF	44 PSF
30 FT ²	60\"/>	48\"/>	37 PSF	37 PSF
36 FT ²			30 PSF	30 PSF

- TIE-DOWN CLIPS SHALL BE FASTENED TO MECHANICAL HOUSING UNIT WITH (2)-#14x3/4\"/>
- MECHANICAL HOUSING UNIT SHALL CONFORM TO THE FOLLOWING:
 - ALUMINUM FRAME OR EXTERIOR HOUSING SHALL BE 6063-T6 MIN. ALUMINUM SHEET WITH F_y=30 KSI, 0.0625\"/>
 - STEEL HOUSING UNITS SHALL BE 33KSI MIN. STEEL, GRADE 33, 22 GAGE MIN. (t=0.030\"/>
- MAXIMUM ALLOWABLE WIND PRESSURES MAY BE EQUIVALENT DUE TO THE LIMITING CAPACITY OF THE 1\"/>
- A MAXIMUM ALLOWABLE VALUE OF 200 PSF HAS BEEN UTILIZED; FOR HIGHER DEMAND CAPACITIES CONTACT THIS ENGINEER FOR SITE-SPECIFIC ENGINEERING.

GENERAL NOTES:

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- NO 1/3% INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THIS ANCHOR SYSTEM.
- ALLOWABLE DESIGN SHOWN ON TABLES IS BASED ON ALLOWABLE SHEAR AND TENSION LOADS OF MECHANICAL FASTENERS.
- MAXIMUM & MINIMUM DIMENSIONS AND WEIGHT UNITS SHALL CONFORM TO SPECIFICATIONS STATED ON THESE ENGINEERING SHEETS.
- ALL MECHANICAL SPECIFICATIONS, CLEAR SPACE, TONNAGE, ETC. SHALL BE AS PER THE MANUFACTURER RECOMMENDATIONS AND ARE THE EXPRESS RESPONSIBILITY OF THE CONTRACTOR.
- FASTENERS TO BE # 14x3/4\"/>
- TAPCONS SHALL BE ITW BULDEX OR ELCO BRAND, AND SHALL BE 1/4\"/>
- ALL STEEL CLIPS SHALL BE ASTM A203 STEEL WITH F_y = 33 KSI; ALL STEEL MEMBERS SHALL BE PROTECTED AGAINST CORROSION WITH G90-RATED GALVANIZED COATING, SUITABLE FOR ALL COASTAL INSTALLATIONS.
- INSTALL AN ELECTRICAL GROUND, WHEN REQUIRED, ALL ELECTRICAL CONNECTIONS INCLUDING GROUNDS TO BE DESIGNED & INSTALLED BY OTHERS.
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RECOMENDED FASTENERS

1/4\"/>

MAXIMUM ALLOWABLE SHEAR LOAD FOR 1/4\"/>

SINGLE SHEAR: 325 LBS
TENSION: 505 LBS

DATE: January 29, 2016



REVISIONS

DATE	DESCRIPTION

THESE DOCUMENTS ARE THE PROPERTY OF THE ENGINEER AND SHALL BE RETURNED TO HIM OR HER UPON THE COMPLETION OF THE PROJECT.

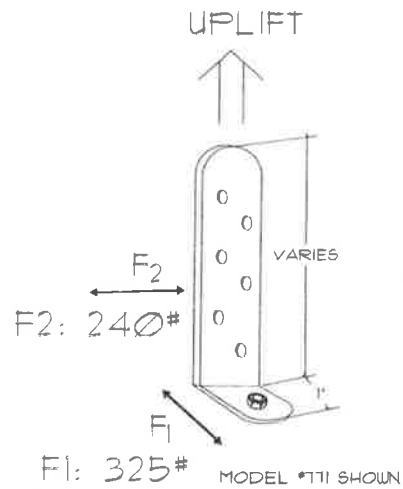
PROJECT: AC Condenser Anchor Clip

THE METAL SHOP
2541W. DUNNELLON ROAD
DUNNELLON, FL 34433
www.metalshop.com
Phone: 888-447-2662 Fax: 888-522-0007

DATE: 6/24/2015
SCALE: AS NOTED
DRAWN BY: J. HILLER

A-3

3 4



USE MIN. OF 2- #14x3/4" SCREWS FOR 4" CLIP
 USE MIN. OF 2- #14x3/4" SCREWS FOR 6" CLIP
 USE MIN. OF 2- #14x3/4" SCREWS FOR 8" CLIP
 USE 1/4" x 1 3/4" TAPCON TO CONCRETE PAD

METAL SHOP # 111 - 4" ANCHOR CLIP
 METAL SHOP # 113 - 6" ANCHOR CLIP
 METAL SHOP # 883 - 8" ANCHOR CLIP

MAX UPLIFT: 505#
 WITH 2- #14x3/4" SCREWS PER CLIP

A/C ANCHOR CLIP

SHEET METAL SCREWS



#14x3/4" w/ Neoprene washer

METAL FASTENERS

Tapcon



1/4" x 1 3/4" INTO CONCRETE PAD

RECOMENDED FASTENERS

1/4" x 1 3/4" TAPCON

MAXIMUM ALLOWABLE SHEAR LOAD FOR 1/4" DIA CONCRETE FASTENERS IN 2000 PSI MINIMUM STRENGTH CONCRETE IS: 325 LBS. PULL OUT (TENSION LOAD) STRENGTH OF TAPCON IS 505 LBS WITH 1 3/4" MIN. EMBEDMENT:

SINGLE SHEAR: 325 LBS
 TENSION: 505 LBS

LOAD CAPACITIES FOR TAPCONS

	Anchor Size	Embed Depth	2,000 psi Concrete	4,000 psi Concrete	6,000 psi Concrete	Concrete Block	Red Brick
Tension Load (lbs.)	1/4"	1"	760	930	1,140	720	940
		1-1/4"	1,090	1,540	1,690	880	1,160
		1-1/2"	1,520	1,850	2,210	1,090	1,320
		1-3/4"	2,020	2,330	2,740	1,290	1,420
Shear Load (lbs.)	1/4"	1"	725	1,420	2,140	690	1,720
		1-1/4"	1,053	2,150	2,390	925	1,840
		1-1/2"	1,270	2,270	2,560	1,125	1,930
		1-3/4"	1,305	2,390	2,840	1,305	2,130

NOTE: The values listed above are ultimate load capacities for TAPCONS which should be reduced by minimum safety factor of 4 or greater to determine the allowable working load. Refer to the section on product selection guidelines for details. The consistency of hollow block and brick varies greatly. The load capacities listed above for hollow block and brick should be used as guidelines only. Job site tests should be conducted to determine the actual load capacities these materials.

Notes:

1. Alternative fasteners may be used as shown in the details. All fasteners must meet or exceed the safe working load values specified by the manufacturer, and shall be approved by the building official.



DATE: January 29, 2011

REVISIONS

DATE	DESCRIPTION

THIS DRAWING IS NOT VALID UNLESS SIGNED, SEALED AND DATED BY A REGISTERED PROFESSIONAL ENGINEER.

Joseph D. Hiller P.E.
 Florida P.E. License # 74583
 P.O. Box 20862
 Fort Lauderdale, FL 33328
 Phone: 305-245-1700
 Email: hillerd@earthlink.net

PROJECT: A/C Condenser Anchor Clip
THE METAL SHOP
 2541W. Dunnellon Road
 Dunnellon, FL 34433
 www.metshop.org
 Phone: 352-321-2562 Fax: 352-322-0007

DATE	6/24/2015
SCALE	AS NOTED
DRAWN BY	J. HILLER
CHECKED BY	
DATE	

A-4

RICK SCOTT GOVERNOR

KEN LAWSON SECRETARY

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

LICENSE NUMBER	
CAC 1816034	

The CLASS B AIR CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 485 F.S.
Expiration date: AUG 31, 2018

FILE: DAVID BERNARD
CERTIFIED CLIMATE CONTROL, LLC
7063 LACON AVENUE
DELVONA, FL 32738





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
5/20/2016

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 Blackadar Insurance Agency, Inc. 1436 N Ronald Reagan Blvd Longwood FL 32750	CONTACT NAME: Ruth Munoz	
	PHONE (A/C. No. Ext): 407-831-3832 FAX (A/C. No.): 407-830-4681 E-MAIL ADDRESS: Ruth@blackadar.com	
INSURED CERTCLI-01 Certified Climate Control, LLC 690 Ste A East Rhode Island Ave. Orange City FL 32763	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: United Fire & Casualty Company	13021
	INSURER B: FCCI Insurance Company	10178
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES CERTIFICATE NUMBER: 1022289536 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	ADDL SUBR INSR WVD	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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC		60383315	5/20/2016	5/20/2017	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) \$5,000 PERSONAL & ADV INJURY \$1,000,000 GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMPIOP AGG \$2,000,000 \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS		60383315	5/20/2016	5/20/2017	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$		60383315	5/20/2016	5/20/2017	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000 \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N <input type="checkbox"/> N/A	001WC16A70791	6/23/2016	6/23/2017	WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

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

CERTIFICATE HOLDER

CANCELLATION

City of Belle Isle 1600 Nela Ave. Belle Isle FL 32809	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
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CITY OF ORANGE CITY LOCAL BUSINESS TAX RECEIPT

LICENSE # LIC-8-16-7889

License Type: Contractor-sub

Am't. Paid: \$ 148.25

Stipulations: ***Handicapped Parking space must be provided and in compliance with current code.***

Date Issued: 08/18/2015

Expires: 08/30/2016

Annual Inspections

\$25.00

Contractor Sub - 0250 - FYA

\$121.25

Certified Climate Control
680 Rhode Island Avenue A
Orange City FL 32763

CITY OF ORANGE CITY

205 E. Graves Avenue

Orange City, FL 3276