



BUILDING JOB SITE CARD

City of Belle Isle

MECHANICAL PERMIT

2017-08-071

PERMIT MUST BE POSTED ON SITE

Permit Number: 2017-08-071

Site Address: 1821 Colleen Dr, 32809

Subdivision:

Description of Work: One 4-ton change out no ductwork

Issue Date: 8/11/17

Parcel Number: 30-23-30-0610-00-240

Class: Residential

Issued To: Airology Heating & Cooling Inc

Name: Shivmangal, Khemraj

Payment Date & Method: 8-14-17 Amax 41000

Business Phone: 321 247 5885

Contractor License #: CAC1817739

Schedule Inspections via Email at: BDscheduling@universalengineering.com

SCHEDULE INSPECTIONS BY 4PM CUT OFF TIME

Inspection Results Will Be Sent Out the Next Business Day

"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR 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."

BUILDING	INSPECTOR	DATE	COMMENTS
Demo Final			
Footing			
Stem Wall			
Slab			
Lintel/Tie Beam			
Down Pour			
Tilt Panel			
Window In-progress			
Sheathing (wall)			
Sheathing (roof)			
Framing			
Fire Rated Assembly			
Above-Ceiling			
Insulation			
Lathe			
Pool Steel & Ground			
Pool Safety			
Final			

GAS INSPECTOR DATE COMMENTS

Rough Gas			
Final Gas			

ELECTRICAL INSPECTOR DATE COMMENTS

Temp Pole			
TUG			
Underground			
Rough			
Footer Steel Bonding			
Pool Light			
PrePower			
Meter ReSet			
Final			

MECHANICAL INSPECTOR DATE COMMENTS

Above Ceiling			
Rough			
Hood Vent			
Final			

PLUMBING INSPECTOR DATE COMMENTS

Sewer			
Underground			
Rough			
Above Ceiling			
Irrigation			
Final			

ROOF INSPECTOR DATE COMMENTS

In-progress			
Final			

Schedule Inspections via Email at: BDscheduling@universalengineering.com

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Inspection Results Will Be Sent Out the Following Business Day



City of Belle Isle

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

APPLICATION FOR MECHANICAL 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.

RECEIVED
AUG 10 2017
BY: _____

DATE OF APPLICATION: 08/09/2017

PERMIT NUMBER 207-08-071

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

Project Address 1821 Colleen Drive 1821 Colleen, Belle Isle FL 32809 32812
Property Owner Richard Fortunato Phone 321-402-4561
Property Owner's Mailing Address 1821 Colleen Drive City Belle Isle
State FL Zip Code 32809 Parcel Id Number: 30-23-30-0610-00-240

To obtain this information, please visit <http://www.ocpaf1.org/Searches/ParcelSearch.aspx>

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 4 Total Tons 4
Type of System: Water to Air Chiller Split System Package Heat Pump Estimated Cost \$ _____

Heating: # of Units KWS Per Unit 1 Total KWS 10 BTU's _____ Estimated Cost \$ _____
Oil Electric Boiler Gas

(A) Estimated Cost Fee \$ 5110.00

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 _____ Chill 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 of Florida codes and/or ordinances.

LICENSE HOLDER SIGNATURE Khemraj Shivmangal LICENSE # CAC1817739

LICENSE HOLDER NAME Khemraj Shivmangal COMPANY NAME Airology Heating & Cooling, Inc

Street Address 8815 Conroy Windermere Road, Suite 165

City Orlando State FL Zip Code 32835 Phone Number 321-247-5885

Email Address info@airologyheatcool.com

Building Official: [Signature] Date 8-11-17
Verified Contractor's Licenses & Insurance are on file [Signature] Date 8-11-17

8-14-17 AMEX 41000

Permit Fee	\$	<u>61</u>
Review Fee	\$	<u>30.50</u>
3% Florida Surcharge	\$	<u>4.-</u>
Total Permit Fee	\$	<u>95.50</u>

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



JEFF ATWATER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

** CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW **

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 6/20/2016 **EXPIRATION DATE:** 6/20/2018
PERSON: SHIVMANGAL KHEMRAJ N
FEIN: 464663889

BUSINESS NAME AND ADDRESS:

AIROLOGY HEATING & COOLING, INC

8815 CONROY WINDERMERE ROAD, ST

ORLANDO FL 32835

SCOPES OF BUSINESS OR TRADE:

HEATING, VENTILATION,
AIR-COND

Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD
2601 BLAIR STONE ROAD
TALLAHASSEE FL 32399-0783**

(850) 487-1395

**SHIVMANGAL, KHEMRAJ N
AIROLOGY HEATING & COOLING, INC.
8815 CONROY WINDERMERE ROAD
SUITE 165
WINDERMERE FL 32835**

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. 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**

CAC1817739 - SUITE - 09/06/2016

**CERTIFIED AIR CONDITIONING CONTRACTOR
SHIVMANGAL, KHEMRAJ N
AIROLOGY HEATING & COOLING, INC.**

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date : AUG 31, 2018 L1609060001406

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CAC1817739	

The CLASS B AIR CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2018

**SHIVMANGAL, KHEMRAJ N
AIROLOGY HEATING & COOLING, INC.
8815 CONROY WINDERMERE ROAD
SUITE 165
WINDERMERE FL 32835**



ISSUED: 09/06/2016

DISPLAY AS REQUIRED BY LAW

REG # 1609060001406

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

2017 EXPIRES 9/30/2018 5000-1127456
5000 BUSINESS OFFICE \$30.00 1 EMPLOYEE 1804 CERT CLASS B AIR COND \$30.00 1 EMPLOYEE

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

SHIVMANGAL KEMRAJ N

AIROLOGY HEATING & COOLING INC
SHIVMANGAL KEMRAJ N
9524 MORTON JONES RD
GOTHA FL 34734

9524 MORTON JONES RD (MOBILE)
U - GOTHA, 34734

PAID: \$60.00 0098-00772126 7/7/2017

Scott Randolph, Tax Collector Local Business Tax Receipt Orange County, Florida

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AIROLOGY HEATING & COOLING INC
SHIVMANGAL KEMRAJ N
9524 MORTON JONES RD
GOTHA FL 34734

9524 MORTON JONES RD (MOBILE)
U - GOTHA, 34734

PAID: \$60.00 0098-00772126 7/7/2017

This receipt is official when validated by the Tax Collector.