



# BUILDING JOB SITE CARD

## City of Belle Isle

### ROOFING PERMIT 2017-08-144

**PERMIT MUST BE POSTED ON SITE**

Permit Number: 2017-08-144  
Site Address: 2434 Trace Ave, 32809  
Subdivision:  
Description of Work: Re-Roof 2600 sf modified bitumen

Issue Date: 8/29/17  
Parcel Number: 19-23-30-5888-05-012  
Class: Residential

Issued To: Gold Key Roofing Inc  
Name: Hewitt, Jeffreyd  
Payment Date & Method: 8:30:17 VISA 0767 184.25

Business Phone: 407 851 0680  
Contractor License #: CCC1329157

Schedule Inspections via Email at: [BDscheduling@universalengineering.com](mailto: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			

Inspection requests are to be emailed to [BDscheduling@UniversalEngineering.com](mailto:BDscheduling@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.



# 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)



## APPLICATION FOR ROOFING 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: \_\_\_\_\_ ROOF PERMIT NUMBER 2017-08-141

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

Project Address 2434 TRACE AVE, Belle Isle, FL  32809  32812

Property Owner BRIAN T SWENEY Phone \_\_\_\_\_

Property Owner's Mailing Address 2401 SEA BREEZE CT City ORLANDO

State FL Zip Code 32805 Parcel Id Number: 19-23-30-5888-05-012

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

Class of Building: Old  New  Type of Building: Residential  Commercial  Other   
Type of Work: New Roof  ReRoof

- REQUIRED! Florida Product Approval Screen Printout from [www.floridabuilding.org](http://www.floridabuilding.org) showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from [www.floridabuilding.org](http://www.floridabuilding.org) (not the manufacturer instructions)
- REQUIRED! Copies of your General Liability & Worker's Comp Insurance Certificate & State and Local Licenses

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

Roof Square Footage: 260 Number of Stories: 1 Job Valuation: \$ 8,900.00  
Type: Asphalt Shingles  Metal  Modified Bitumen  Other: \_\_\_\_\_

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. By signing below, I recognize 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.

LICENSE HOLDER SIGNATURE \_\_\_\_\_ LICENSE # CCC1329157

LICENSE HOLDER NAME JEFFREY HEWITT COMPANY NAME GOLD KEY

Street Address 4874 S. ORANGE AVE

City ORLANDO State FL Zip Code 32806 Phone Number 407-851-0680

Email Address JEFF@GOLDKEYROOFING.COM 151K25

Building Official: SM Date 8.29.17

Verified Contractor's Licenses & Insurance are on file SM Date 8.29.17

Zoning Fee	\$	<u>36.-</u>
Permit Fee	\$	<u>150.-</u>
Review Fee	\$	<u>0</u>
3% Florida Surcharge	\$	<u>4.25</u>
Total Permit Fee	\$	<u>184.25</u>

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

151K 25  
25x25 125  
150

190 = 2.- (min)  
15% = 2.25

VISA 0767 8.30.17

Permit Number:  
 Folio/Parcel ID #: 19-23-30-5888-05-012  
 Prepared by: Gold Key  
4874 S Orange Ave  
Orlando, FL 32806  
 Return to: Gold Key  
4874 S Orange Ave  
Orlando, FL 32806

DOCH 20170457061  
 08/17/2017 08:59:27 AM Page 1 of 1  
 Rec Fee: \$10.00  
 Phil Diamond, Comptroller  
 Orange County, FL  
 MB - Ret To: GOLD KEY ROOFING



**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.

1. Description of property (legal description of the property, and street address if available)  
NEULA ISLE (ISLAND SECTION) 0/99 THE N 85 FT LOT 1 BUKE
2. General description of improvement  
ReRoof
3. Owner information or Lessee information if the Lessee contracted for the improvement  
 Name BRIAN T SWEENEY  
 Address 2401 SEA BREEZE CT  
 Interest in Property OWNER  
 Name and address of fee simple titleholder (if different from Owner listed above)  
 Name N/A  
 Address N/A
4. Contractor  
 Name Gold Key Roofing Telephone Number 407-851-0680  
 Address 4874 S Orange Ave Orlando, FL 32806
5. Surety (if applicable, a copy of the payment bond is attached)  
 Name N/A Telephone Number N/A  
 Address N/A Amount of Bond \$ N/A
6. Lender  
 Name N/A Telephone Number N/A  
 Address N/A
7. 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 N/A Telephone Number N/A  
 Address N/A
8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.  
 Name N/A Telephone Number N/A  
 Address N/A
9. 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) N/A

DATED: 08-17-17  
 PHIL DIAMOND, COUNTY COMPTROLLER  
 BY: [Signature]  
 I hereby certify that this is a true copy of the document as reflected in the Official Records of Orange County, Florida.



**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.**

Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager \_\_\_\_\_ Owner  
 \_\_\_\_\_ Signatory's Title/Office

The foregoing instrument was acknowledged before me this 11 day of 8/17 by BRIAN T SWEENEY  
 as HIMSELF for HIMSELF  
 \_\_\_\_\_ Name of party on behalf of whom instrument was executed  
Jessica N Graf \_\_\_\_\_  
 Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known \_\_\_\_\_ OR Produced ID \_\_\_\_\_  
 Type of ID Produced \_\_\_\_\_





# 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)

## Product Approval Form

DATE: \_\_\_\_\_

PERMIT # 20708 144

PROJECT ADDRESS 2434 TRACE AVE

Belle Isle, FL  32809  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:

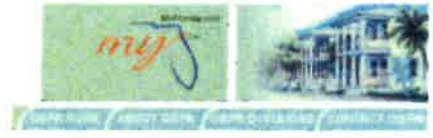
1. This Product Approval Cover Sheet
2. Internet screen from FloridaBuilding.org showing PA#, approval and code edition stamped
3. Manufacturer's installation details from FloridaBuilding.org and requirements for each product stamped

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
<b>EXTERIOR DOORS</b>				<b>WALL PANELS</b>			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
<b>WINDOWS</b>				<b>ROOFING PRODUCTS</b>			
Single/Dbf Hung				Asphalt Shingles			
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				<u>2 PLY CERTAINTED FANTASTIC FL2533-R13</u>			
Skylights							
Other							
<b>STRUCTURAL COMPONENTS</b>				<b>OTHER</b>			
Wood Connectors							
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 \_\_\_\_\_

Date \_\_\_\_\_



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<b>FL #</b>	FL2533-R13
<b>Application Type</b>	Revision
<b>Code Version</b>	2014
<b>Application Status</b>	Approved



**Comments**  
Archived

<b>Product Manufacturer</b>	CertainTeed Corporation-Roofing
<b>Address/Phone/Email</b>	18 Moores Road Malvern, PA 19355 (610) 651-5847 mark.d.harner@saint-gobain.com

<b>Authorized Signature</b>	Mark Harner mark.d.harner@saint-gobain.com
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<b>Technical Representative</b>	Mark D. Harner
<b>Address/Phone/Email</b>	18 Moores Road Malvern, PA 19355 (610) 651-5847 Mark.D.Harner@saint-gobain.com

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

<b>Category</b>	Roofing
<b>Subcategory</b>	Modified Bitumen Roof System

<b>Compliance Method</b>	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer ✓ Evaluation Report - Hardcopy Received
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<b>Florida Engineer or Architect Name who developed the Evaluation Report</b>	Robert Nieminen
<b>Florida License</b>	PE-59166
<b>Quality Assurance Entity</b>	UL LLC
<b>Quality Assurance Contract Expiration Date</b>	07/03/2017
<b>Validated By</b>	John W. Knezevich, PE ✓ Validation Checklist - Hardcopy Received

**Certificate of Independence** [FL2533 R13 COI 2015 01 COI Nieminen.pdf](#)

Referenced Standard and Year (of Standard)	Standard	Year
	ASTM D6162	2000
	ASTM D6163	2000
	ASTM D6164	2005
	ASTM D6222	2008
	ASTM D6509	2009
	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	03/16/2015
Date Validated	04/07/2015
Date Pending FBC Approval	04/11/2015
Date Approved	06/23/2015
Date Revised	08/25/2015

**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>Design Pressure:</b> +N/A/-630 <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> <a href="#">FL2533 R13 II 2015 03 FINAL2 A1 ER CERTAINTEED MODBIT FL2533-R13.pdf</a> Verified By: Robert Nieminen, PE PE-59166 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL2533 R13 AE 2015 03 FINAL2 ER CERTAINTEED MODBIT FL2533-R13.pdf</a> Created by Independent Third Party: Yes



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

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**Product Approval Accepts:**



**APPENDIX 1: ATTACHMENT REQUIREMENTS FOR WIND UPLIFT RESISTANCE**

Table	Deck	Application	Type	Description	Page
1A	Wood	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	5-6
1B	Wood	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	7
1C	Wood	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	8-9
1D	Wood	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover	10-12
1E-1	Wood	New, Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	13-15
1E-2	Wood	New, Reroof (Tear-Off) or Recover	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	16-17
1F	Wood	New or Reroof (Tear-Off)	F	Non-Insulated, Bonded Roof Cover	17
2A	Steel or Conc.	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	18-20
2B	Steel or Conc.	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	21-25
2C	Steel or Conc.	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover	26-28
3A	Concrete	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	29-36
3B	Concrete	New or Reroof (Tear-Off)	A-3	Bonded Temp Roof/Vapor Barrier, Bonded Insulation, Bonded Roof Cover	37
3C	Concrete	New or Reroof (Tear-Off)	F	Non-Insulated, Bonded Roof Cover	37
4A	LWIC	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	38-39
4B	LWIC	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	40
4C	LWIC	New, Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	41-44
5A	CWF	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	45
5B	CWF	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	46
5C	CWF	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	46
5D	CWF	New, Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	47
6A	Gypsum	Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	48-49
6B	Gypsum	Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	50
6C	Gypsum	Reroof (Tear-Off)	C	Mech. Attached Insulation, Bonded Roof Cover	50
6D	Gypsum	Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	51
7A	Various	Recover	A-1	Bonded Insulation, Bonded Roof Cover	52-58
7B	Various	Recover	F	Non-Insulated, Bonded Roof Cover	58

**The following notes apply to the systems outlined herein:**

- The roof system evaluation herein pertains to above-deck roof components. Roof decks shall be in accordance with FBC requirements to the satisfaction of the AHJ. Load resistance of the roof deck shall be documented through proper codified and/or FBC Approval documentation.
- Unless otherwise noted, fasteners and stress plates for insulation attachment shall be as follows. Fasteners shall be of sufficient length for the following engagements:
  - Wood Deck:
    - OMG #14 Roofgrip with Flat Bottom Plate (Accutrac), OMG HD with OMG 3 in. Galvalume Steel Plate, Dekfast #14 with Hex Plate or 3" Round Insulation Plate, Trufast HD with Trufast 3" Metal Insulation Plates or FlintFast #14 Fastener with FlintFast 3" Insulation Plates. Minimum 0.75-inch plywood penetration or minimum 1-inch wood plank embedment.
    - OMG #12 or #14 Roofgrip with Recessed or Flat Bottom Plate (Accutrac), OMG #12 Standard or HD with OMG 3 in. Galvalume Steel Plate, Dekfast #12 or #14 with Hex Plate or 3" Round Insulation Plate, Trufast DP or HD with Trufast 3" Metal Insulation Plates or FlintFast #12 or #14 Fastener with FlintFast 3" Insulation Plates. Minimum 0.75-inch steel penetration and engage the top flute of the steel deck.
  - Steel Deck:
    - OMG #14 Roofgrip with Recessed or Flat Bottom Plate (Accutrac), OMG HD or CD-10 with OMG 3 in. Galvalume Steel Plate, Dekfast #14 or DekSpike with Hex Plate or 3" Round Insulation Plate, Trufast HD or CF with Trufast 3" Metal Insulation Plates or FlintFast #14 Fastener with FlintFast 3" Insulation Plates. Minimum 1-inch embedment. Fasteners installed with a pilot hole in accordance with the fastener manufacturer's published installation instructions.
  - Concrete Deck:





3. Unless otherwise noted, insulation may be any one layer or combination of polyisocyanurate, polystyrene, wood fiberboard, perlite, GlasRoc Roof Board or gypsum-based roof board that meets the QA requirements of F.A.C. Rule 61G20-3 and is documented as meeting FBC 1505.1 and, for foam plastic, FBC 2603.4.1 or 2603.8, when installed with the roof cover.

4. Minimum 200 psi, minimum 2-inch lightweight insulating concrete may be substituted for rigid insulation board for System Type D (mechanically attached base sheet, bonded roof cover), whereby the base sheet fasteners are installed through the LWIC to engage the structural steel or concrete deck. The structural deck shall be of equal or greater configuration to the steel and concrete deck listings.

5. Unless otherwise noted, insulation adhesive application rates are as follows. Ribbon or bead width is at the time of application; the ribbons/beads shall expand as noted in the manufacturer's published instructions.

- Hot asphalt (HA):
- Ashland Pliodeck (A-PD):
- Dow Insta-Stik (D-IS):
- Dow Spray-N-Grip (D-SG):
- Millennium One Step Foamable Adhesive (M-OSFA):
- Millennium PG-1 Pump Grade Adhesive (M-PG1):
- OMG OlyBond 500 or OlyBond Green (OB500):
- 3M CR-20:
- Note: When multiple layers(s) of insulation and/or coverboard are installed in ribbon-applied adhesive, adhesive ribbons shall be staggered from layer-to-layer a distance of one-half the ribbon spacing.
- Note: The maximum edge distance from the adhesive ribbon to the edge of the insulation board shall be not less than one-half the specified ribbon spacing.

6. Unless otherwise noted, all insulations are flat stock or taper board of the minimum thickness noted. Tapered polyisocyanurate at the following thickness limitations may be substituted with the following Maximum Design Pressure (MDP) limitations. In no case shall these values be used to 'increase' the MDP listings in the tables; rather if MDP listing below meets or exceeds that listed for a particular system in the tables, then the thinner board listed below may be used as a drop-in for the equivalent thicker material listed in the table:

➤ Ashland Pliodeck (A-PD) @ 12-inch o.c.	MDP	-105.0 psf	(Min. 1.0-inch)
➤ Ashland Pliodeck (A-PD) @ 6-inch o.c.	MDP	-277.5 psf	(Min. 1.0-inch)
➤ Dow Insta-Stik (D-IS):	MDP	-120.0 psf	(Min. 1.0-inch)
➤ Millennium One Step Foamable Adhesive (M-OSFA):	MDP	-157.5 psf	(Min. 1.0-inch)
➤ Millennium PG-1 Pump Grade Adhesive (M-PG1):	MDP	-157.5 psf	(Min. 1.0-inch)
➤ OMG OlyBond 500 (OB500):	MDP	-45.0 psf	(Min. 0.5-inch Multi-Max FA3)
➤ OMG OlyBond 500 (OB500):	MDP	-187.5 psf	(Min. 0.5-inch ISO 95+ GL)
➤ OMG OlyBond 500 (OB500):	MDP	-315.0 psf	(Min. 0.5-inch ENRGY 3)
➤ OMG OlyBond 500 (OB500):	MDP	-487.5 psf	(Min. 0.5-inch AC Foam II)
➤ 3M CR-20:	MDP	-117.5 psf	(Min. 1.0-inch)

7. Bonded polyisocyanurate insulation boards shall be maximum 4 x 4 ft.

8. For mechanically attached components or partially bonded insulation, the maximum design pressure for the selected assembly shall meet or exceed the Zone 1 design pressure determined in accordance with FBC Chapter 16, and Zones 2 and 3 shall employ an attachment density designed by a qualified design professional to resist the elevated pressure criteria. Commonly used methods are RAS 117 and FM LPDS 1-29. Assemblies marked with an asterisk\* carry the limitations set forth in Section 2.2.1.5.1(a) of FM LPDS 1-29 for Zone 2/3 enhancements.

9. For fully bonded assemblies, the maximum design pressure for the selected assembly shall meet or exceed critical design pressure determined in accordance with FBC Chapter 16, and no rational analysis is permitted.

10. For mechanically attached components over existing decks, fasteners shall be tested in the existing deck for withdrawal resistance. A qualified design professional shall review the data for comparison to the minimum requirements for the system. Testing and analysis shall be in accordance with TAS 105 or ANS/SPRI FX-1.



11. For existing substrates in a bonded recover or re-roof installation, the existing roof surface or existing roof deck shall be examined for compatibility and bond performance with the selected adhesive, and the existing roof system (for recover) shall be capable of resisting project design pressures on its own merit to the satisfaction of the AHJ, as documented through field uplift testing in accordance with ASTM E907, FM LPDS 1-52, ANSI/SPRI IA-1 or TAS 124.
12. For Recover Applications using System Type D, the insulation is optional; however, the existing roof system shall be suitable for a recover application.
13. Unless otherwise noted, refer to the following references for bonded base, ply or cap sheet applications.

Reference	Layer	Material	Application
BP-AA (Base and Ply sheets, Asphalt-Applied)	Base	Glasbase; All Weather/Empire Base; Flexiglas Base; Flintlastic Base 20	Hot asphalt at 20-40 lbs/square
	Ply	Flintglas Ply Sheet Type IV; Flintglas Premium Ply Sheet Type VI	
BP-AA2 (Base, Spot-Asphalt-Applied)	Base	Yosemite Venting Base	Hot asphalt in 24-inch diameter spots in 30-inch grid pattern
BP-AA3 (Base, Spot-Asphalt-Applied)	Base	Yosemite Venting Base	Hot asphalt in 9-inch diameter spots in grid pattern noted herein.
BP-AA4 (Base, Strip-Asphalt-Applied)	Base	Yosemite Venting Base	Hot asphalt in 9-inch wide ribbons spaced as noted herein.
BP-CA2	Base/Ply	Glasbase; All Weather/Empire Base; Flexiglas Base; Flintlastic Base 20	Henry #903 Adhesive at 1.5 gal/square
BP-CA3	Base/Ply	Glasbase; All Weather/Empire Base; Flexiglas Base; Flintlastic Base 20	Millennium Hurricane Force Membrane Adhesive, beads spaced 6-Inch o.c.
SBS-AA (SBS, Asphalt-Applied)	Base	Flintlastic Base 20; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	Hot asphalt at 20-40 lbs/square
	Ply	Flintlastic Base 20; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	
SBS-CA1 (SBS, Cold-Applied)	Cap	Flintlastic Cap 30; Flintlastic Cap 30 CoolStar; Flintlastic FR Cap 30; Flintlastic FR Cap 30 CoolStar; Flintlastic FR Dual Cap; Flintlastic FR-P; Flintlastic FR-P CoolStar; Flintlastic Premium FR-P; Flintlastic Premium FR-P CoolStar; Flintlastic GMS; Flintlastic GMS CoolStar; Flintlastic Premium GMS; Flintlastic Premium GMS CoolStar	FlintBond Brush or Karnak No. 81 Cold Process Modified Bitumen Adhesive Brush Grade at 1 gal/square
	Base	Flintlastic Base 20; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	
SBS-CA2 (SBS, Cold-Applied)	Note:	Base ply cures overnight prior to application of the cap ply.	Henry #903 Adhesive at 1.5 gal/square.
	Cap	Flintlastic FR Cap 30; Flintlastic FR Cap 30 CoolStar; Flintlastic FR Dual Cap; Flintlastic FR-P; Flintlastic FR-P CoolStar; Flintlastic Premium FR-P; Flintlastic Premium FR-P CoolStar	
SBS-CA3 (SBS, Cold-Applied)	Base	Flintlastic Base 20; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	Millennium Hurricane Force Membrane Adhesive, beads spaced 6-inch o.c.
	Ply	Flintlastic Base 20; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	
SBS-CA3 (SBS, Cold-Applied)	Cap	Flintlastic Cap 30; Flintlastic Cap 30 CoolStar; Flintlastic FR Cap 30; Flintlastic FR Cap 30 CoolStar; Flintlastic FR Dual Cap; Flintlastic FR-P; Flintlastic FR-P CoolStar; Flintlastic Premium FR-P; Flintlastic Premium FR-P CoolStar; Flintlastic GMS; Flintlastic GMS CoolStar; Flintlastic Premium GMS; Flintlastic Premium GMS CoolStar	Millennium Hurricane Force Membrane Adhesive, beads spaced 6-inch o.c.
	Base	Flintlastic Base 20; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	

CERTAINTEED FLINTLASTIC® MODIFIED BITUMEN COMPONENTS & APPLICATION METHODS (CONTINUED)			
Reference	Layer	Material	Application
SBS-TA (SBS, Torch-Applied)	Base	Flintlastic Ultra Poly SMS Base; Flintlastic Base 20 T	Torch-Applied
	Ply	Flintlastic Ultra Poly SMS Base; Flintlastic Base 20 T	
	Cap	Flintlastic FR Cap 30 T; Flintlastic FR Cap 30 T CoolStar; Flintlastic GTS; Flintlastic GTS CoolStar; Flintlastic GTS-FR; Flintlastic GTS-FR CoolStar; FlintClad	
APP-TA (APP, Torch-Applied)	Base	Flintlastic APP Base T; Flintlastic STA; Flintlastic STA Plus	Torch-Applied
	Cap	Flintlastic STA; Flintlastic STA Plus; Flintlastic GTA; Flintlastic GTA CoolStar; Flintlastic GTA-FR; Flintlastic GTA-FR CoolStar	
SBS-SA-H (SBS, Self-Adhering, Hybrid Systems)	Base/Ply	Black Diamond Base Sheet; Flintlastic Ultra Glass SA	Self-Adhering
SBS-SA (SBS, Self-Adhering)	Base	Flintlastic SA PlyBase; Flintlastic SA Mid Ply	Self-Adhering
	Ply	Flintlastic SA PlyBase; Flintlastic SA Mid Ply	
	Cap	Flintlastic SA Cap; Flintlastic SA Cap CoolStar; Flintlastic SA Cap FR; Flintlastic SA Cap FR CoolStar	

14. Insulation is optional for Recover or Concrete Deck Applications using System Type D (Mechanically Attached Base Sheet, Bonded Roof Cover).
15. "MDP" = Maximum Design Pressure is the result of testing for wind load resistance based on allowable wind loads. Refer to FBC 1609 for determination of design wind loads.

TABLE 1E-2: WOOD DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER							
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER							
System No.	Deck (See Note 1)	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasteners	Attach	Ply	Cap	
<b>SELF-ADHERING SYSTEMS:</b>							
W-74	Min. 19/32-inch plywood at max 24-inch spans	Flintlastic SA NailBase	See Note 2	8-inch o.c. at min. 3-inch lap and 8-inch o.c. in two, equally spaced, staggered center rows. Stress plates shall be primed with FlintPrime (ASTM D41) primer or FlintPrime SA	(Optional) SBS-SA	SBS-SA	-82.5*
W-75	Min. 15/32-inch plywood at max 24-inch spans	Flintlastic SA NailBase	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD; OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at min. 2-inch lap and 6-inch o.c. in three, equally spaced, staggered center rows. Stress plates shall be primed with FlintPrime (ASTM D41) primer or FlintPrime SA.	(Optional) SBS-SA	SBS-SA	-97.5*
W-76	Min. 15/32-inch plywood at max 24-inch spans	Flintlastic SA NailBase	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD; OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at min. 2-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows. Stress plates shall be primed with FlintPrime (ASTM D41) primer or FlintPrime SA.	(Optional) SBS-SA	SBS-SA	-127.5*
<b>HYBRID SYSTEMS:</b>							
W-77	Min. 15/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; Poly SMS Base; Ultra Poly SMS Base	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD; OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at 4-inch lap and 6-inch o.c. in three, equally spaced, staggered center rows. Stress plates shall be primed with FlintPrime (ASTM D41) primer or FlintPrime SA.	SBS-SA-H	SBS-AA, SBS-TA or APP-TA	-97.5
W-78	Min. 19/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; Poly SMS Base; Ultra Poly SMS Base	See Note 2	7-inch o.c. at 3-inch lap and 7-inch o.c. in three, equally spaced, staggered center rows	SBS-SA-H	SBS-AA, SBS-TA or APP-TA	-105.0
W-79	Min. 15/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; Poly SMS Base; Ultra Poly SMS Base	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD; OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at 4-inch lap and 6-inch o.c. in four, equally spaced, staggered center rows. Stress plates shall be primed with FlintPrime (ASTM D41) primer or FlintPrime SA.	SBS-SA-H	SBS-AA, SBS-TA or APP-TA	-127.5
<b>CONVENTIONAL SYSTEMS:</b>							
W-80	Min. 23/32-inch exterior grade plywood at max. 24-inch spans	Glasbase; All Weather/Empire Base; Flexiglas Base; Flintlastic Base 20; Yosemite	See Note 2	12-inch o.c. at 4-inch lap and 36-inch o.c. in two, equally spaced, staggered center rows	BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-30.0*
W-81	Min. 23/32-inch exterior grade plywood at max. 24-inch spans	Glasbase; All Weather/Empire Base; Flexiglas Base; Flintlastic Base 20; Yosemite	See Note 2	12-inch o.c. at 4-inch lap and 24-inch o.c. in two, equally spaced, staggered center rows	BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-45.0*



STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

HEWITT, JEFFREY ALLAN  
GOLD KEY ROOFING LLC  
6021 SOUTH ORANGE AVENUE  
ORLANDO FL 32809

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](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

CCC1329157 ISSUED: 08/16/2016

CERTIFIED ROOFING CONTRACTOR  
HEWITT, JEFFREY ALLAN  
GOLD KEY ROOFING LLC

IS CERTIFIED under the provisions of Ch.489 FS.  
Expiration date AUG 31, 2018 L1608160002259

DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CCC1329157	

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

HEWITT, JEFFREY ALLAN  
GOLD KEY ROOFING LLC  
6021 SOUTH ORANGE AVENUE  
ORLANDO FL 32809



ISSUED: 08/16/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1608160002259



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
2/17/2017

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).

<b>PRODUCER</b> Frank H. Furman, Inc. 1314 East Atlantic Blvd. P. O. Box 1927 Pompano Beach FL 33061		<b>CONTACT NAME:</b> Griseldys Acosta <b>PHONE (A/C, No. Ext):</b> (954) 943-5050 <b>FAX (A/C, No.):</b> (954) 942-6310 <b>E-MAIL ADDRESS:</b> gris@furmaninsurance.com	
<b>INSURED</b> Gold Key Roofing, LLC Gold Key International Inc 4874 S. Orange Avenue Orlando FL 32806		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Evanston Insurance Company <b>INSURER B:</b> Ohio Security Insurance Co <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	<b>NAIC #</b> 35378 24082

**COVERAGES**      **CERTIFICATE NUMBER:** 17/18 MASTER CERT      **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/INSD. WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		3C07404	2/19/2017	2/19/2018	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 - COM/POP AGG \$ 2,000,000
B	<input checked="" type="checkbox"/> <b>AUTOMOBILE LIABILITY</b> <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS		BA556550862	2/19/2017	2/19/2018	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP-Basic \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION S					EACH OCCURRENCE \$ AGGREGATE \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> 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			PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

**CERTIFICATE HOLDER**

City of Belle Isle  
 1600 Nela Ave  
 Orlando, FL 32809

**CANCELLATION**

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

Dirk DeJong/GA



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

# SELF INSURERS FUND

1-800-767-3772 • FAX (407) 871-2520

## CERTIFICATE OF INSURANCE

**ISSUED TO:**

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

**COPY PROVIDED TO:**

Gold Key Roofing, LLC  
6021 S. Orange Avenue  
Orlando, FL 32809

Attention:

Gold Key Roofing, LLC

**This is to Certify that:** 6021 S. Orange Avenue  
Orlando, FL 32809

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, 4099 Metric Drive, Winter Park, FL 32792.

COVERAGE NUMBER: 870-040079

LIMITS

EFFECTIVE DATE: 1/1/2017

Workers' Compensation: Statutory - State of Florida

EXPIRATION DATE: 1/1/2018

Employers' Liability: \$1,000,000.00 Each Accident  
\$1,000,000.00 Disease, Each Employee  
\$1,000,000.00 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.

Jeffrey Allan Hawitt, Qualifier  
Lic #CCC1329157

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 constructed 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



# CITY OF BELLE ISLE

## OCCUPATIONAL LICENSE

1600 Nela Avenue  
Belle Isle, FL 32809

**Business License Number:** L6-00342  
**Effective Date:** 10/01/16  
**Expiration Date:** 09/30/17  
**Fee:** 30.00

**Business Name:** GOLD KEY ROOFING LLC  
**Location:** 6021 ORANGE AV  
**Classification:** ROOFING/BUILDING CONTRACTOR

**POST IN A CONSPICUOUS PLACE  
NOT VALID UNLESS SIGNED BY CITY OFFICIAL**

The person, firm, or corporation named above is hereby granted this license as the receipt for fees paid to the City of Belle Isle for the business described above for the period indicated. Granting of this certificate does not entitle the holder to operate or maintain a business in violation of any law or ordinance. The City of Belle Isle does not guarantee the qualifications of the holder of this certificate.

  
\_\_\_\_\_  
City Official

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





- Searches
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Sign up for e-Notify...

**2434 Trace Ave** < 19-23-30-5888-05-012 >

Name(s)	Physical Street Address
Sweeney Brian T	2434 Trace Ave
Sweeney Kathryn	Postal City and Zipcode
Mailing Address On File	Orlando, FL 32809
2401 Sea Breeze Ct	Property Use
Orlando, FL 32805-5839	0100 - Single Family
Incorrect Mailing Address?	Municipality
	Belle Isle



**View 2016 Property Record Card**

- Values, Exemptions and Taxes**
- Property Features
- Sales Analysis
- Location Info
- Market Stats
- Update Information

**2017 values will be available in August of 2017.**

**Property Description**

[View Plat](#)

NELA ISLE (ISLAND SECTION) O/99 THE N 85 FT LOT 1 BLK E

**Total Land Area** 8,401 sqft (+/-) | 0.19 acres (+/-) [GIS Calculated](#) [Notice](#)

**Land**

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0100 - Single Family	R-1-AA	1 LOT(S)	working...	working...	working...	working...

Page 1 of 1 (1 total records)

**Buildings**

Important Information		Structure				
	<b>Model Code:</b>	01 - Single Fam Residence	<b>Actual Year Built:</b>	1958	<b>Gross Area:</b>	1971 sqft
	<b>Type Code:</b>	0103 - Single Fam Class III	<b>Beds:</b>	3	<b>Living Area:</b>	1466 sqft
	<b>Building Value:</b>	working...	<b>Baths:</b>	2.0	<b>Exterior Wall:</b>	Concrete Block Stucco
	<b>Estimated New Cost:</b>	working...	<b>Floors:</b>	1	<b>Interior Wall:</b>	Plastered

Page 1 of 1 (1 total records)

**Extra Features**

Description	Date Built	Units	XFOB Value
SHNV - Shed No Value	01/01/2010	1 Unit(s)	working...

Page 1 of 1 (1 total records)

This Data Printed on 08/11/2017 and System Data Last Refreshed on 08/10/2017