



BUILDING JOB SITE CARD

City of Belle Isle

MECHANICAL PERMIT 2017-08-135

PERMIT MUST BE POSTED ON SITE

Permit Number: 2017-08-135

Site Address: 5007 La Croix Ave, 32812

Subdivision:

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

Issue Date: 8/28/17

Parcel Number: 17-23-30-4379-02-017

Class: Residential

Issued To: No Sweat AC & Heat

Name: Thrift, Alan

Payment Date & Method: 8.29.17 MC 1178 95.50

Business Phone: 407-497-4259

Contractor License #: CAC1816648

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			

Inspection requests are to be emailed to BD 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.



City of Belle Isle

1600 Nela Avenue, Belle Isle, FL 32809

Tel 407-851-7730 * Fax 407-240-2222 * www.cityofbelleislefl.com

RECEIVED
AUG 24 2017

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.

DATE OF APPLICATION: 8/21/17

PERMIT NUMBER 2017-08-135

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

Project Address 5007 La Croix Ave Belle Isle FL 32809 32812
Property Owner Patrick & Courtney Panakos Phone 801-550-2531
Property Owner's Mailing Address 5007 La Croix Ave City Belle Isle
State Florida Zip Code 32812 Parcel Id Number: 17-23-30-4379-02-17

To obtain this information, please visit <http://www.ocpaff.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 and Equipment Sizing Calculation
- REQUIRED, adding A/C to new space - provide Energy Calculations
- REQUIRED, if replacing unit with no duct work, provide a Duct Certification as per FB 101.4.7.1 (form can be found on website)

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 \$ 5625.00

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

(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 _____ Chill Water _____ Estimated Cost \$ _____

Others: (Specify) _____ Estimated Cost \$ _____

Was the space previously Air Conditioned? Yes No

2x4 37
4x6 24
61
30.50
91.50

(B) Estimated Cost Fee \$ _____

Building Official: SM Date 8/28/17 Review & Permit Fee \$ 91.50
25% Florida Surcharge \$ 4.00 (mm)
Total Permit Fee \$ 95.50
MC 1178 8-29-17

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 Alan Thrift LICENSE # CAC-1816648
LICENSE HOLDER NAME Alan Thrift COMPANY NAME No Sweat AC & Heating, LLC
Street Address 2798 Pepper Lane
City Orlando State FL Zip Code 32812 Phone Number 407-497-4259

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 _____



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2016.

Certificate of Product Ratings

AHRI Certified Reference Number: 8331322 Date: 8/21/2017

Product: Split System: Heat Pump with Remote Outdoor Unit-Air-Source

Outdoor Unit Model Number: ASZ160481L*

Indoor Unit Model Number: ASPT49D14A*

Manufacturer: AMANA HEATING AND AIR CONDITIONING

Trade/Brand name: AMANA

Series name: ASZ16

Manufacturer responsible for the rating of this system combination is AMANA HEATING AND AIR CONDITIONING

Rated as follows in accordance with AHRI Standard 210/240-2008 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:



Cooling Capacity (Btuh):	45500
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00
Heating Capacity(Btuh) @ 47 F:	47000
Region IV HSPF Rating (Heating):	9.00
Heating Capacity(Btuh) @ 17 F:	25800

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data, unless accompanied with a WAS, which indicates an involuntary rerate.

DISCLAIMER

AHRI does not endorse the product(s) listed on this Certificate and makes no representations, warranties or guarantees as to, and assumes no responsibility for, the product(s) listed on this Certificate. AHRI expressly disclaims all liability for damages of any kind arising out of the use or performance of the product(s), or the unauthorized alteration of data listed on this Certificate. Certified ratings are valid only for models and configurations listed in the directory at www.ahridirectory.org.

TERMS AND CONDITIONS

This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced; copied; disseminated; entered into a computer database; or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at www.ahridirectory.org, click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed at bottom right.

©2014 Air-Conditioning, Heating, and Refrigeration Institute



CERTIFICATE NO.: 131478145700808820

Date: Aug 21, 2017



Contractor Information

Company Name: No Sweat AC & Heating, LLC
Street Address: 2798 Pepper Lane, Orlando, FL 32812
Name: Alan Thrift
Phone: 407-497-4259
Email: alan@nosweatorlando.com

Customer Information

Street Address: 5007 La Croix Ave, Orlando, FL 32812
Latitude, Longitude: 29.1462°, -81.0634°
House Square Footage: 2230 sq. ft.
Name: PANAKOS
Phone:
Email:

Design Conditions

Outdoor Heating Cooling
Dry bulb (°F) 37 80
Daily range L
Relative humidity 50%
Moisture difference 58

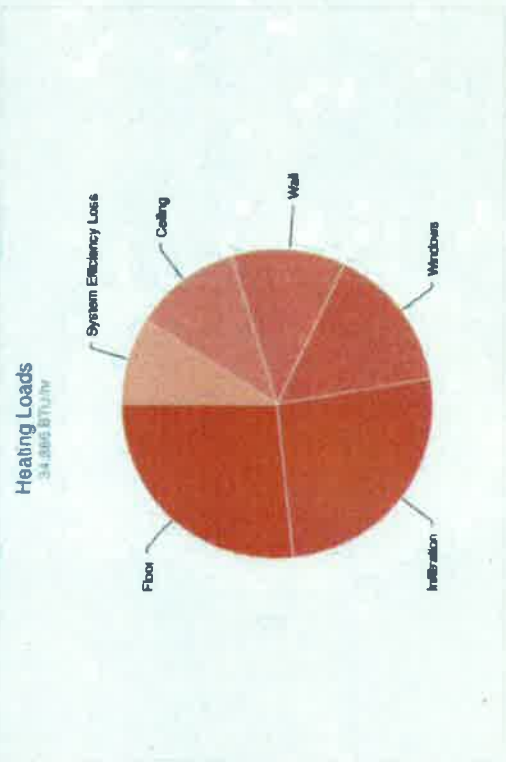
Indoor Heating Cooling
Indoor temperature (°F) 70 75
Design temperature difference(°F) 33 15

House Information

SHR .75
Number of residents 2
Ceiling height 9
Wall U-value | R-value 0.09 | 11
Floor U-value | R-value 0.2 | 5
Ceiling U-value | R-value 0.053 | 19
Window U-value 0.5
Window SHGF 0.85
Moisture grains 58
Duct loss % 10
Duct gain % 10
Cooling infiltration (ACH) 0.6
Heating infiltration (ACH) 0.8
Winter ventilation 0
Summer ventilation 0

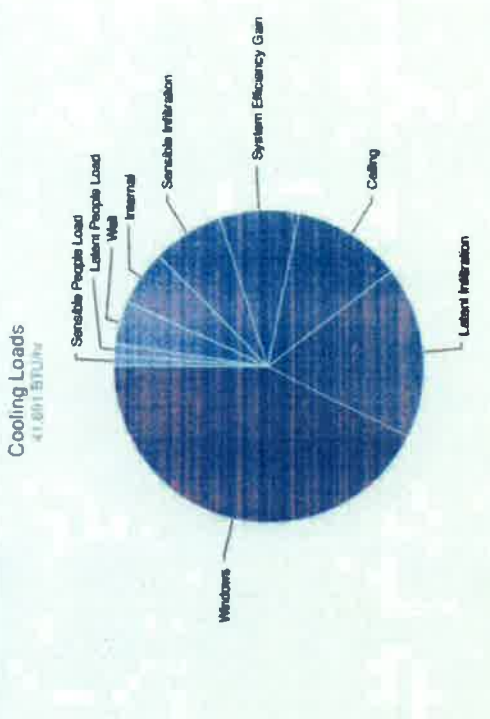
Heating Loads

Area	Btuh	% of load
Wall	4103	11.8
Floor	9313	26.7
Ceiling	3916	11.2
Windows	5313	15.2
Infiltration	9070	26
System Efficiency Loss	3171	9.1
Total:	34886	

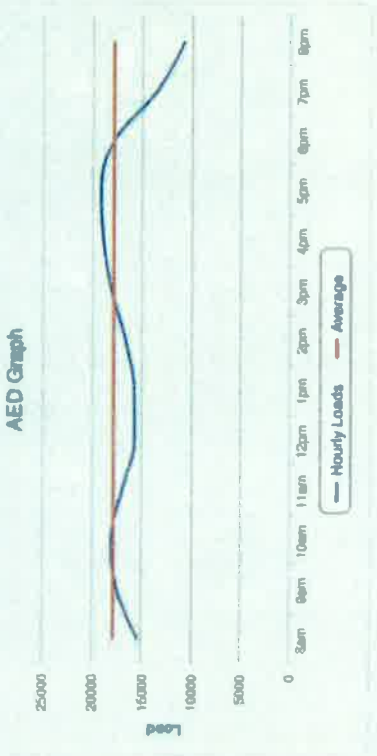


Cooling Loads

Area	Btuh	% of load
Wall	1865	4.5
Ceiling	4747	11.4
Windows	17788	42.7
Sensible Infiltration	3082	7.4
Latent Infiltration	7391	17.7
System Efficiency Gain	3488	8.4
Internal	2400	5.8
Sensible People Load	460	1.1
Latent People Load	460	1.1
Total:	41691	
Sensible load	33840	
Latent load	7851	
Calculated SHR	0.81	
Capacity at .75 SHR	3.76 Tons	



Adequate Exposure Diversity



Equipment selection

System equipment selection will be made using the following derived values.

Glass (E)	162 sq. ft.
Glass (S)	23 sq. ft.
Glass (N)	23 sq. ft.
Glass (W)	114 sq. ft.
Summer Outdoor	90°F
Summer Wet Bulb	77°F
Summer Indoor	75°F
Summer Design Grains	50%
Winter Outdoor	37°F
Winter Indoor	70°F
Sensible Cooling	33,840 Btuh
Latent Cooling	7,851 Btuh
Required Cooling Airflow	1,538 CFM
Sensible Heating	34,886 Btuh
Required Heating Airflow	453 CFM

SOFTWARE VALIDATION: All calculations are based upon approved HVAC industry standards and procedures. ACCA Manual J 8th Edition calculations, revised weather file based on NOAA locations nearest the home being investigated. The code uses EN data and not heating or cooling degree day methods. The house energy is pulled from Google Earth and the real estate data is pulled from Zillow (when available).

All calculations comply with all local state and federal code requirements, and meet or exceed the input energy of the 2012 International Energy Conservation Code (IECC) paragraph 403.6 as their authority as verified by independent engineer William M. McClain, Jr. P.E. CEM. The programs are properly based on standard engineering heat loss heat gain formulas coupled with the appropriate weather data, location factors, general home construction materials, solar orientation, energy unit costs, and other considerations normally used in the HVAC industry. It is my professional opinion that this program, while consistent with calculations in ACCA Manual J, can be considered as meeting the "other approved heating and cooling calculation methodology" and do not require approval from ACCA.

Further, Paul Welch, P.E., P. Reg. No. 29945 affirmed that the software computes building heating and cooling loads and sizes equipment in a manner consistent with good engineering practice and approved heating and cooling load calculation methodologies and fully complies with Florida Building Code and Energy Conservation Codes. All computed results are estimates. Product developed and maintained by Energy Design Systems, Inc.

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. Delinquency penalty is added October 1.

2017 EXPIRES 9/30/2018 1804-1099862
1804 CLASS B AIR COND CON \$30.00 1 EMPLOYEE 5000 BUSINESS OFFICE \$30.00 1 EMPLOYEE



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

2798 PEPPER LN (MOBILE)
A - ORLANDO, 32812

THRIFT ALAN

NO SWEAT A/C AND HEATING LLC
2798 PEPPER LN
ORLANDO FL 32812

PAID: \$60.00 0099-00785105 7/21/2017

2016-2017

CITY OF ORLANDO

ECONOMIC DEVELOPMENT
PERMITTING SERVICES

LOCAL BUSINESS TAX RECEIPT

Formerly known as "Business License," changed per state law HB1269-2006)

Issued Date: 10/01/2016
Expiration Date: 09/30/2017

Business Name
NO SWEAT A/C AND HEATING LLC
2798 PEPPER LN
ORLANDO, FL 32812

Business Type(s):
CONTRA 1524 CONTRACTOR DBPR

RICK SCOTT, GOVERNOR



NOTICE- THIS RECEIPT ONLY EVIDENCES PAYMENT OF THE LOCAL BUSINESS TAX PURSUANT TO CH. 205, FLORIDA STATUTES. IT DOES NOT PERMIT THE HOLDER TO OPERATE IN VIOLATION OF ANY CITY, STATE, OR FEDERAL LAW. CITY PERMITTING MUST BE NOTIFIED OF ANY MATERIAL CHANGE TO THE INFORMATION FOUND HEREIN BELOW. THIS RECEIPT DOES NOT CONSTITUTE AN ENDORSEMENT OR APPROVAL OF THE HOLDER'S SKILL OR COMPETENCY.

Case Number: BUS 6032154

Business Owner
NO SWEAT A/C AND HEATING LLC
ALAN THRIFT CAC1816648

Business Location:
2798 Pepper Ln

Fees:
Administration Fee 20.00
2017 Business Tax 40.00
Total Paid \$240.00

KEN LAWSON, SECRETARY

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

LICENSE NUMBER

CAC1816648

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

THRIFT, ALAN DALE
NO SWEAT A/C AND HEATING LLC
2798 PEPPER LANE
ORLANDO FL 32812



ISSUED: 08/30/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1608300001933



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
01/13/2017

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).

PRODUCER FEDERATED MUTUAL INSURANCE COMPANY HOME OFFICE: P.O. BOX 328 OWATONNA, MN 55060	CONTACT NAME: CLIENT CONTACT CENTER PHONE (A/C, No, Ext): 888-333-4949 FAX (A/C, No): 507-446-4664 E-MAIL ADDRESS: CLIENTCONTACTCENTER@FEDINS.COM	
	INSURER(S) AFFORDING COVERAGE NAIC # INSURER A: FEDERATED MUTUAL INSURANCE COMPANY 13935 INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	
INSURED NO SWEAT A/C AND HEATING LLC 2798 PEPPER LN ORLANDO, FL 32812	398-123-0	

COVERAGES

CERTIFICATE NUMBER: 13

REVISION NUMBER: 0

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 INSR	SUBR VVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> BUSINESS OWNER'S LIABILITY GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:	N	N	6036329	01/18/2017	01/18/2018	EACH OCCURRENCE \$1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$100,000 MED EXP (Any one person) 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	N	N	6036330	01/18/2017	01/18/2018	COMBINED SINGLE LIMIT (Ea accident) \$1,000,000 BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (Per accident)
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION						EACH OCCURRENCE AGGREGATE
A	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	N/A	6036331	01/18/2017	01/18/2018	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER 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
 398-123-0
 CITY OF BELLE ISLE
 1600 NELA AVE
 BELLE ISLE, FL 32809-6184

13 0

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

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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: 3/13/2016 **EXPIRATION DATE:** 3/13/2018

PERSON: THRIFT ALAN D

FEIN: 454172451

BUSINESS NAME AND ADDRESS:

NO SWEAT A/C AND HEATING LLC

2798 PEPPER LANE

ORLANDO FL 32812

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