



# BUILDING JOB SITE CARD

## City of Belle Isle

### ROOFING PERMIT

**PERMIT MUST BE POSTED ON SITE**

Permit Number: 2017-08-056  
Site Address: 5233 Driscoll Ct, 32812  
Subdivision:  
Description of Work: ReRoof 5300 sf METAL

Issue Date: 8/10/17  
Parcel Number: 20-23-30-1222-00-040  
Class: Residential

Issued To: Prestige Metal Roofing

Name: McKinney, Gerald

Payment Date & Method: 8.18.17 check 17759

Business Phone: 407 290 6203

Contractor License #: CCC033709

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

<b>GAS</b>	<b>INSPECTOR</b>	<b>DATE</b>	<b>COMMENTS</b>
Rough Gas			
Final Gas			

<b>ELECTRICAL</b>	<b>INSPECTOR</b>	<b>DATE</b>	<b>COMMENTS</b>
Temp Pole			
TUG			
Underground			
Rough			
Footer Steel Bonding			
Pool Light			
PrePower			
Meter ReSet			
Final			

<b>MECHANICAL</b>	<b>INSPECTOR</b>	<b>DATE</b>	<b>COMMENTS</b>
Above Ceiling			
Rough			
Hood Vent			
Final			

<b>PLUMBING</b>	<b>INSPECTOR</b>	<b>DATE</b>	<b>COMMENTS</b>
Sewer			
Underground			
Rough			
Above Ceiling			
Irrigation			
Final			

<b>ROOF</b>	<b>INSPECTOR</b>	<b>DATE</b>	<b>COMMENTS</b>
In-progress			
Final			

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

**SCHEDULE INSPECTIONS BY 4PM CUT OFF TIME**

**Inspection Results Will Be Sent Out the Following Morning**



# City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32814  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://www.universalengineering.com)

RECEIVED  
AUG 08 2017

## 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 2017-08-056

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

Project Address 5233 DRISCOLL CT, Belle Isle, FL  32809  32812

Property Owner JOHN & SUMNER GILL Phone 321-422-9147

Property Owner's Mailing Address 5233 DRISCOLL CT City BELLE ISLE

State FL Zip Code 32812 Parcel Id Number: 20-23-30-1221-00-090

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: 5300 Number of Stories: 1 Job Valuation: \$ 32,000

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 # CCC 033709

LICENSE HOLDER NAME GERALD MCKINNEY COMPANY NAME PRESTIGE METAL ROOFING

Street Address 6061 CINDERLANE PKWY

City ORLANDO State FL Zip Code 32810 Phone Number 407-290-6203

Email Address WPERNEL66@GMAIL.COM

Building Official: ucg Date 8-10-17

Verified Contractor's Licenses & Insurance are on file (SM) Date 8-9-17

NOCL

Zoning Fee	\$	<u>30.-</u>
Permit Fee	\$	<u>180.-</u> ✓
Review Fee	\$	<u>0</u>
2% Florida Surcharge	\$	<u>4.70</u>
Total Permit Fee	\$	<u>214.70</u>

151K 25  
21x5 155  
180

2.5  
212.70

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.

paid by check 17759 8-18-17

Prestige Metal Roofing Inc.  
6061 Cinderlane Pkwy # 100  
Orlando FL 32810



PERMIT NUMBER: \_\_\_\_\_

Tax Folio No: \_\_\_\_\_ **NOTICE OF COMMENCEMENT**

The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713.13 Florida Statutes, the following information is provided in the NOTICE OF COMMENCEMENT.

1. DESCRIPTION OF PROPERTY (Legal description & street address, if available) TAX FOLIO NO.: 20-23-30-1222-00-090

SUBDIVISION CASTLES AT THE LAKE BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_ LOT 9 BLDG \_\_\_\_\_ UNIT \_\_\_\_\_  
5233 DRISCOLL CT. BELLE ISLE, FL. 32812

2. GENERAL DESCRIPTION OF IMPROVEMENT:  
NEW METAL ROOF ON SFR

3. OWNER INFORMATION: a. Name Summer Gill  
b. Address 5233 DRISCOLL CT. BELLE ISLE, FL 32812 c. Interest in property FEE SIMPLE

d. Name and address of fee simple titleholder (if other than Owner)  
4. CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:  
Prestige Metal Roofing Inc. 407-290-6203  
6061 Cinderlane Pkwy # 100 Orlando FL 32810

5. SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:  
N/A

6. LENDER'S NAME, ADDRESS AND PHONE NUMBER:  
N/A

7. Identity of persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1) (a) 7., Florida Statutes:  
NAME, ADDRESS AND PHONE NUMBER:  
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 Section 713.13 (1) (b), Florida Statutes:  
NAME, ADDRESS AND PHONE NUMBER:  
N/A

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_

**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.**

Verification pursuant to Section 92.525, Florida Statutes  
Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

Summer Gill  
Signature of Owner or  
Owner's Authorized Officer/Director/Partner/Manager

Summer Gill  
Print Name and Provide Signatory's Title/Office

State of Florida  
County of \_\_\_\_\_

The foregoing instrument was acknowledged before me this 16 day of July, 2017

By Summer Gill as OWNER  
(name of person) (type of authority, ... e.g. officer, trustee, attorney in fact)  
For SELF  
(name of party on behalf of whom instrument was executed)

Personally known or  produced the following type of identification: FDL

[Signature]  
(Signature of Notary Public)



State of Florida, County of Orange  
I hereby certify that this is a true copy of the document as recorded in the Official Records  
PHIL DIAMOND, COUNTY COMPTROLLER  
BY: [Signature] D.C.  
DATED: \_\_\_\_\_



**CITY OF BELLE ISLE, FLORIDA**  
Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://www.universalengineering.com)

**POWER OF ATTORNEY**

Date: 8-8-17

Permit #: \_\_\_\_\_

I hereby name and appoint JOE MOORE of \_\_\_\_\_ (print name)  
PRESTIGE METAL ROOFING to be my lawful attorney-in-fact to act for \_\_\_\_\_ (company name)

me and apply to the City of Belle Isle Building Department for a ROOFING permit (type of permit)

for work to be performed at the following location:

5233 DRISCOLL CT., Belle Isle, FL  32809  32812 and \_\_\_\_\_ (street address)

to sign my name and do all things necessary to this appointment.

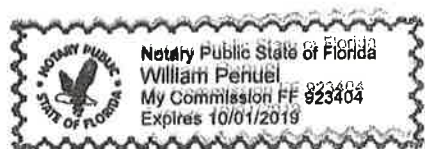
Certified Contractor's Printed Name: GERALD MCKENNEY

License Number: CCC 033709

Certified Contractor's Signature: \_\_\_\_\_

.....  
The foregoing instrument was acknowledged before me this 8 days of August of 20 17  
by Gerald McKenney who is personally known to me or who produced \_\_\_\_\_  
\_\_\_\_\_ as identification and who did not take an oath.

State of Florida  
County of Orange  
William Peritel  
\_\_\_\_\_  
Notary Public, Orange County, Florida



(seal)



## 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 # \_\_\_\_\_


PROJECT ADDRESS 5233 DRISCOLL CT, 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	UNION	MASTER K10	20484.2
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other			
Skylights				<del>Other</del>			
Other				underlayment			12512.1
<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 8-3-17



Product Approval  
USER: Public User

Product Approval Menu > Product or Application Search > Application List > Application Detail

OFFICE OF THE SECRETARY

FL #	FL20484	
Application Type	New	
Code Version	2014	
Application Status	Approved	
Comments		
Archived	<input type="checkbox"/>	
Product Manufacturer	UNION CORRUGATING COMPANY	
Address/Phone/Email	701 S. KING ST. FAYETTEVILLE, NC 28301 (910) 483-0479 Ext 256 jstieby@unioncorrugating.com	
Authorized Signature	John Stieby jstieby@unioncorrugating.com	
Technical Representative		
Address/Phone/Email		
Quality Assurance Representative		
Address/Phone/Email		
Category	Roofing	
Subcategory	Metal Roofing	
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received	
Florida Engineer or Architect Name who developed the Evaluation Report	Bala Sockalingam	
Florida License	PE-62240	
Quality Assurance Entity	Keystone Certifications, Inc.	
Quality Assurance Contract Expiration Date	12/31/2020	
Validated By	Yoosef Lavi, P.E. <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received	
Certificate of Independence	<a href="#">FL20484 R0 COI CertificateIndependence.pdf</a>	
Referenced Standard and Year (of Standard)	<b>Standard</b>	<b>Year</b>
	FM 4470	1992
	UL 1897	2004
	UL 580	2006
Equivalence of Product Standards		
Certified By		

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted

05/23/2016

Date Validated

05/23/2016

Date Pending FBC Approval

05/24/2016

Date Approved

08/17/2016

**Summary of Products**

FL #	Model, Number or Name	Description
20484.1	5V	Min 26 ga., 24" wide through fastened panel over 15/32" thick plywood
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-169 Other: Uplift load of 71.0 psf @ fastener spacing of 24" o.c. & 169.0 psf @ fastener spacing of 6" o.c.		<b>Installation Instructions</b> <a href="#">FL20484 R0 II EvaluationReportC2088 1.pdf</a> Verified By: Bala Sockalingam, P.E. 62240 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL20484 R0 AE EvaluationReportC2088 1.pdf</a> Created by Independent Third Party: Yes
20484.2	MasterRib	Min 29 ga., 36" wide through fastened panel over 15/32" thick plywood or 7/16" thick OSB
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-124 Other: Uplift load of 56.0 psf @ fastener spacing of 24" o.c. & 124.0 psf @ fastener spacing of 6" o.c.		<b>Installation Instructions</b> <a href="#">FL20484 R0 II EvaluationReportC2088 2.pdf</a> Verified By: Bala Sockalingam, P.E. 62240 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL20484 R0 AE EvaluationReportC2088 2.pdf</a> Created by Independent Third Party: Yes
20484.3	MasterRib	Min 29 ga., 36" wide through fastened panel over 15/32" thick plywood
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-88.5 Other: Uplift load of 56 psf for Fastening System 1. Uplift load of 88.5 psf for Fastening System 2.		<b>Installation Instructions</b> <a href="#">FL20484 R0 II EvaluationReportC2088 3.pdf</a> Verified By: Bala Sockalingam, P.E. 62240 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL20484 R0 AE EvaluationReportC2088 3.pdf</a> Created by Independent Third Party: Yes
20484.4	ML150	Max 16.5" wide, min 24 ga. steel standing seam panel over 15/32" thick plywood
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-84 Other: Uplift load of 52.5 psf @ clip spacing of 24" o.c. and 84.0 psf @ clip spacing of 6" o.c.		<b>Installation Instructions</b> <a href="#">FL20484 R0 II EvaluationReportC2088 4.pdf</a> Verified By: Bala Sockalingam, P.E. 62240 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL20484 R0 AE EvaluationReportC2088 4.pdf</a> Created by Independent Third Party: Yes
20484.5	SL175	Max 18" wide, min 24 ga., snap-lock standing seam metal panel over 15/32" thick plywood
<b>Limits of Use</b> Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: +N/A/-93.5 Other: Uplift load of 39.8 psf @ clip spacing of 36" o.c. and 78.6 psf @ clip spacing of 8" o.c with felt. Uplift load of 93.5 psf @ clip spacing of 12" o.c. with self-adhering membrane.		<b>Installation Instructions</b> <a href="#">FL20484 R0 II EvaluationReportC2088 5.pdf</a> Verified By: Bala Sockalingam, P.E. 62240 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL20484 R0 AE EvaluationReportC2088 5.pdf</a> Created by Independent Third Party: Yes

Back Next



Contact Us :: [2601 Blair Stone Road, Tallahassee FL 32399](#) Phone: [850-487-1824](#)

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**Product Approval Accepts:**



Credit Card  
**Safe**



**EVALUATION REPORT OF  
UNION CORRUGATING COMPANY  
'29 GA. MASTERRIB PANEL'**

**FLORIDA BUILDING CODE 5<sup>TH</sup> EDITION (2014)  
FLORIDA PRODUCT APPROVAL  
FL 20484.2  
ROOFING  
METAL ROOFING**

**Prepared For:  
Union Corrugating Company  
P. O. Box 229  
Fayetteville, NC 28302  
Telephone: (910) 483-0479  
Fax: (910) 483-8897**

**Prepared By:  
Bala Sockalingam, Ph.D., P.E.  
Florida Professional Engineer #62240  
1216 N Lansing Ave., Suite C  
Tulsa, OK 74106  
Telephone: (918) 492-5992  
FAX: (866) 366-1543**

**This report consists of  
Evaluation Report (3 Pages including cover)  
Installation Details (1 Page)  
Load Span Table (1 Page)**

**Report No. C2088-2  
Date: 5.23.16**



**Manufacturer:** Union Corrugating Company

**Product Name:** MasterRib Panel

**Panel Description:** 36" wide coverage with 3/4" high ribs at 9" o.c.

**Materials:** Minimum 29 ga., 80 ksi steel. Galvanized coated steel (ASTM A653) or Galvalume coated steel (ASTM A792) or painted steel (ASTM A755).

**Deck Description:** Min. 7/16" thick OSB or min. 15/32" thick APA rated plywood or min. 3/4" thick wood plank (min SG of 0.42) for new and existing constructions. Designed by others and installed as per FBC 2014.

**New Underlayment:** Minimum underlayment as per FBC 2014 Section 1507.4.5.1. Required for new construction.

**Existing Underlayment:** One layer of asphalt shingles over one layer of #30 felt. For reroofing (Optional) construction only.

**Slope:** 1/2:12 or greater in accordance with FBC 2014 Section 1507.4.2

**Design Uplift Pressure:** 56.0 psf @ fastener spacing of 24" o.c.  
(Factor of Safety = 2) 124.0 psf @ fastener spacing of 6" o.c.

**Panel Attachment:** #10-15 x 1.5" long wood screw with washer  
At interior @ 9" o.c. across panel width  
At panel ends @ 5.5"-3.5"-5.5" o.c. across panel width

**Sidelap Attachment:** 1/4"-14 x 7/8" long SDS with washer @ max 24" o.c.  
(Optional)

**Test Standards:** Roof assembly tested in accordance with UL580-06 'Uplift Resistance of Roof Assemblies' & UL1897-04 'Uplift Tests for Roof Covering Systems' and FM 4470 Section 5.5 'Resistance to Foot Traffic'.

**Code Compliance:** The product described herein has demonstrated compliance with FBC 2014 Section 1507.4

**Product Limitations:** Design wind loads shall be determined for each project in accordance with FBC 2014 Section 1609 or ASCE 7-10 using allowable stress design. The maximum fastener spacing listed herein shall not be exceeded. The design pressure for reduced fastener spacing may be computed using rational analysis prepared by a Florida Professional Engineer or based on Union load span table. This evaluation report is

not applicable in High Velocity Hurricane Zone. Refer to current NOA for use of this product in High Velocity Hurricane Zone. Fire classification is not within scope of this Evaluation Report. Refer to FBC 2014 Section 1505 and current approved roofing materials directory or ASTM E108/UL790 report from an accredited laboratory for fire ratings of this product.

Supporting Documents: UL580 & UL1897 Test Reports  
Farabaugh Engineering and Testing Inc  
Project No. T198-16, Reporting Date 5/16/16

FM 4470 Test Report  
ENCON Technology Inc.  
C1583-2, Reporting Date 7/24/08

NO.	REVISION DESCRIPTION	BY	DATE

CONSULTANTS  
**BALA SOCKALINGAM, PH.D., P.E.**  
 1216 N LANSING AVE, SUITE C  
 TULSA, OK 74108  
 PHONE: 918-492-5992 FAX: 918-566-1543

UNION CORRUGATING CO.  
 701 S. KING STREET  
 FAYETTEVILLE, NC 28301  
 910-483-2195

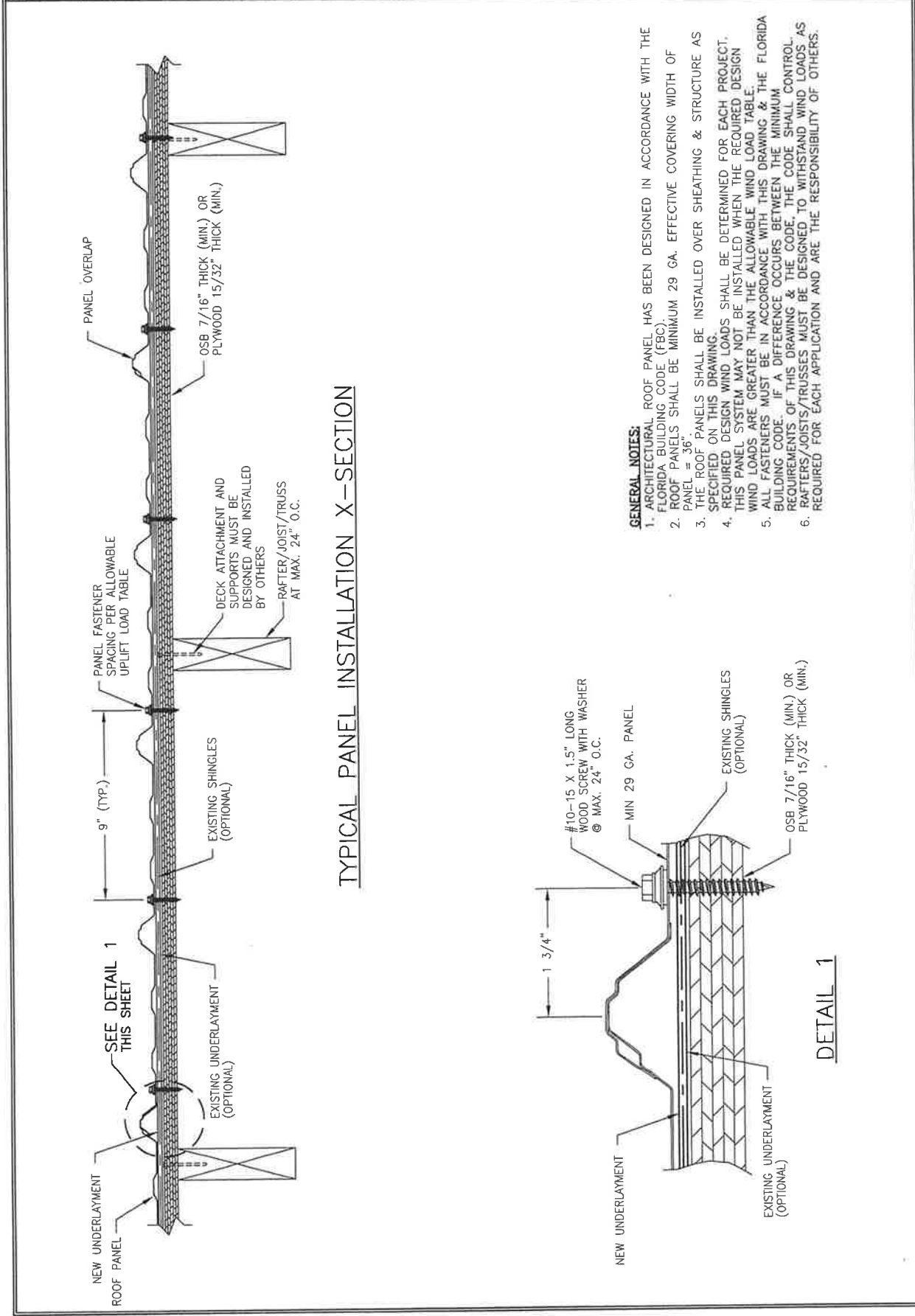
DRAWING TITLE  
**MASTER RIB PANEL**

DRAWING NO.  
**C2088-2**

REV.  
 1

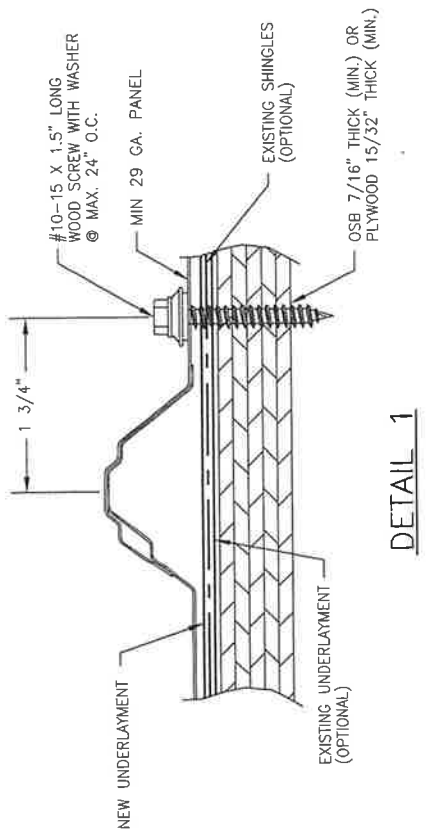
SHEET NO.  
 1

OF  
 1



TYPICAL PANEL INSTALLATION X-SECTION

- GENERAL NOTES:**
1. ARCHITECTURAL ROOF PANEL HAS BEEN DESIGNED IN ACCORDANCE WITH THE FLORIDA BUILDING CODE (FBC).
  2. ROOF PANELS SHALL BE MINIMUM 29 GA. EFFECTIVE COVERING WIDTH OF PANEL = 36".
  3. THE ROOF PANELS SHALL BE INSTALLED OVER SHEATHING & STRUCTURE AS SPECIFIED ON THIS DRAWING.
  4. REQUIRED DESIGN WIND LOADS SHALL BE DETERMINED FOR EACH PROJECT. THIS PANEL SYSTEM MAY NOT BE INSTALLED WHEN THE REQUIRED DESIGN WIND LOADS ARE GREATER THAN THE ALLOWABLE WIND LOAD TABLE.
  5. ALL FASTENERS MUST BE IN ACCORDANCE WITH THIS DRAWING & THE FLORIDA BUILDING CODE. IF A DIFFERENCE OCCURS BETWEEN THE MINIMUM REQUIREMENTS OF THIS DRAWING & THE CODE, THE CODE SHALL CONTROL.
  6. RAFTERS/JOISTS/TRUSSES MUST BE DESIGNED TO WITHSTAND WIND LOADS AS REQUIRED FOR EACH APPLICATION AND ARE THE RESPONSIBILITY OF OTHERS.



DETAIL 1

**UNION CORRUGATING COMPANY**

**MasterRib Panel Uplift Loads**

**(Min 29 ga.)**

Description	Fastener Spacing along Panel Length (in)	Allowable Uplift Load (psf)
Coverage width: 36"	<b>6</b>	<b>124.0</b>
	8	116.4
Panel Fasteners #10-15 hex head screws with sealed washer	10	108.9
	12	101.3
	14	93.8
	16	84.0
Panel fasteners spaced at 9" o.c. across panel width	18	74.7
	20	67.2
	22	61.1
	<b>24</b>	<b>56.0</b>

**Notes:**

1. The bold numbers indicate design loads calculated from test data with safety factor of 2.
2. Panels must be installed as per Evaluation Report FL 20484.2 and Union current installation procedure.



1216 N Lansing Ave., Suite C  
Tulsa, Ok 74106  
918 492 5992

Bala Sockalingam, Ph.D., P.E.  
FL 62240



**Product Approval**  
 USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**



<p>FL #</p> <p>Application Type</p> <p>Code Version</p> <p>Application Status</p> <p>Comments</p> <p>Archived</p> <p>Product Manufacturer</p> <p>Address/Phone/Email</p> <p>Authorized Signature</p> <p>Technical Representative</p> <p>Address/Phone/Email</p> <p>Quality Assurance Representative</p> <p>Address/Phone/Email</p> <p>Category</p> <p>Subcategory</p> <p>Compliance Method</p> <p>Florida Engineer or Architect Name who developed the Evaluation Report</p> <p>Florida License</p> <p>Quality Assurance Entity</p> <p>Quality Assurance Contract Expiration Date</p> <p>Validated By</p> <p>Certificate of Independence</p> <p>Referenced Standard and Year (of Standard)</p> <p>Equivalence of Product Standards</p> <p>Certified By</p>	<p>FL12512-R4</p> <p>Revision</p> <p>2014</p> <p>Approved</p> <p><input type="checkbox"/></p> <p>AlphaProTech Engineered Products, Inc.</p> <p>301 S. Blanchard St.</p> <p>Valdosta, GA 31601</p> <p>(229) 242-1931</p> <p>bhayden@alphaprotech.com</p> <p>Bruce Hayden</p> <p>bhayden@alphaprotech.com</p> <p>Bruce Hayden</p> <p>301 S. Blanchard St.</p> <p>Valdosta, GA 31601</p> <p>(229) 242-1931</p> <p>bhayden@alphaprotech.com</p> <p>Daniel LaFace</p> <p>301 South Blanchard Street</p> <p>Valdosta, GA 31601</p> <p>(229) 242-1931 Ext 237</p> <p>dlaface@alphaprotech.com</p> <p>Roofing</p> <p>Underlayments</p> <p>Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer</p> <p><input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received</p> <p>Zachary R. Priest</p> <p>PE-74021</p> <p>TI RADCO LLP dba RADCO A Twining Company</p> <p>07/02/2019</p> <p>Locke Bowden</p> <p><input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received</p> <p><a href="#">FL12512 R4 COI APT15001.1 2014 FBC Underlayments ESR.pdf</a></p>	<p>Reviewed for Code                  Compliance                  Universal Engineering                  Sciences</p>
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## Sections from the Code

1507.2.3  
 1507.3.3  
 1507.5.3  
 1507.7.3  
 1507.8.3  
 1507.9.3

Product Approval Method

Method 2 Option B

Date Submitted

06/23/2015

Date Validated

06/24/2015

Date Pending FBC Approval

06/30/2015

Date Approved

08/19/2015

**Summary of Products**

FL #	Model, Number or Name	Description
12512.1	REX SynFelt Synthetic Roof Underlayment	Synthetic Roof Underlayment
<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 <b>Other:</b> See evaluation report for limits of use.		<b>Installation Instructions</b> <a href="#">FL12512 R4 II APT15001.1 2014 FBC Underlayments ESR.pdf</a> Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12512 R4 AE APT15001.1 2014 FBC Underlayments ESR.pdf</a> Created by Independent Third Party: Yes
12512.2	REXtreme Synthetic Roof Underlayment	Synthetic Roof Underlayment
<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 <b>Other:</b> See evaluation report for limits of use.		<b>Installation Instructions</b> <a href="#">FL12512 R4 II APT15001.1 2014 FBC Underlayments ESR.pdf</a> Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12512 R4 AE APT15001.1 2014 FBC Underlayments ESR.pdf</a> Created by Independent Third Party: Yes
12512.3	TECHNO SB Synthetic Roof Underlayment	Synthetic Roof Underlayment
<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 <b>Other:</b> See evaluation report for limits of use.		<b>Installation Instructions</b> <a href="#">FL12512 R4 II APT15001.1 2014 FBC Underlayments ESR.pdf</a> Verified By: Zachary R. Priest PE-74021 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12512 R4 AE APT15001.1 2014 FBC Underlayments ESR.pdf</a> Created by Independent Third Party: Yes
12512.4	TECHNOply Synthetic Roof Underlayment	Synthetic Roof Underlayment
<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 <b>Other:</b> See evaluation report for limits of use.		<b>Installation Instructions</b> <a href="#">FL12512 R4 II APT15001.1 2014 FBC Underlayments ESR.pdf</a> Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes <b>Evaluation Reports</b> <a href="#">FL12512 R4 AE APT15001.1 2014 FBC Underlayments ESR.pdf</a> Created by Independent Third Party: Yes



[Back](#) [Next](#)

[Contact Us](#) :: 2601 Blair Stone Road, Tallahassee FL 32399 Phone: 850-487-1824

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Product Approval Accepts:



Credit Card  
**Safe**





**EVALUATION REPORT**

**FLORIDA BUILDING CODE 5<sup>TH</sup> EDITION (2014)**

**Manufacturer:** ALPHA PROTECH ENGINEERED PRODUCTS, INC. *Issued June 22, 2015*  
301 South Blanchard Street  
Valdosta, GA 31601  
(229) 242-1931  
<http://www.alphaprotech.com>

**Manufacturing Locations:** Valdosta, GA

**Quality Assurance:** RADCO, Inc. (QUA1990)

**SCOPE**

**Category:** Roofing  
**Subcategory:** Underlayments  
**Code Sections:** 1507.2.3, 1507.3.3, 1507.5.3, 1507.7.3, 1507.8.3, 1507.9.3  
**Properties:** Physical properties

**REFERENCES**

<u>Entity</u>	<u>Report No.</u>	<u>Standard</u>	<u>Year</u>
PRI Construction Materials Technologies (TST5878)	AEP-017-02-01	ASTM D 226	2006
		ASTM D 4869	2005e1
RADCO, Inc (TST1987)	RAD-5212	AC 188	2012
Ramtech Laboratories, Inc. (TST6127)	13075-04-08	AC 188	2012

**PRODUCT DESCRIPTION**

**REX™ SynFelt** A mechanically attached, woven polypropylene underlayment (nominal weight = 2.56 lb/100ft<sup>2</sup>) used an alternative to ASTM D 226, Type I and Type II roofing underlayments,

**REXtreme** A mechanically attached, woven polypropylene underlayment (nominal weight = 2.97 lb/100ft<sup>2</sup>) used an alternative to ASTM D 226, Type I and Type II roofing underlayments

**TECHNOply** A mechanically attached, woven polypropylene underlayment (nominal weight = 2.05 lb/100ft<sup>2</sup>) used an alternative to ASTM D 226, Type I and Type II roofing underlayments

**TECHNO SB** A mechanically attached, woven polypropylene underlayment (nominal weight = 2.00 lb/100ft<sup>2</sup>) used an alternative to ASTM D 226, Type I and Type II and ASTM D 4869, Type II and IV roofing underlayments

**APPLICATION INSTRUCTIONS**

**Deck Type:** The roof deck shall be constructed of closely fitted, solid sheathing for new or existing construction. Sheathing shall be installed in accordance with FBC requirements. Roof decks shall have no more than 1/8" gap at abutting joints.

**Min. slope:** 2:12. For slopes less than 4:12, the underlayment must be half-lapped a full 24" over the underlying course.

**Attachment method:** Underlayment shall be attached in accordance with the FBC and manufacturer's installation instructions. At minimum, mechanically fastened with min. 12 ga. corrosion resistant ring shank nail with min. 1-inch diameter corrosion resistant round cap to a min. 3/4-inch penetration, 8" o.c. at side and end laps and 24" o.c in a staggered pattern along the center lines printed on the sheet. The side laps shall be a minimum 3" wide

and minimum 6" wide at the end laps. The underlayment is installed starting at the eave, with the length of the roll parallel to the eave with the printed side facing up. All side laps shall be installed to shed water from the deck.

Allowable roof coverings: Asphalt shingles, slate shingles, clay and concrete tiles, metal roof panels and shingles, wood shakes and shingles

**LIMITATIONS**

- 1) This evaluation report is not for use in the HVHZ.
- 2) Fire Classification is not within the scope of this evaluation.
- 3) Wind uplift resistance is not within the scope of this evaluation.
- 4) Installation of the evaluated product shall comply with this report, the FBC, and the manufacturer's published application instructions. Where discrepancies exist between these sources, the more restrictive and FBC compliant installation detail shall prevail.
- 5) Deck substrates shall be clean, dry, and free from any irregularities and debris. All fasteners in the deck shall be checked for protrusion and corrected prior to underlayment application.
- 6) The roof deck shall be constructed of closely fitted sheathing for new or existing construction. Roof deck shall be installed in accordance with FBC requirements.
- 7) Unless otherwise stated, the minimum roof slope shall be in accordance with FBC requirements.
- 8) All underlayments shall be installed with the roll length parallel to the eave, starting at the eave, and lapped in success courses installed up the deck in a manner that effectively sheds water from the deck. End laps shall be staggered between courses in accordance with the manufacturer's application instructions.
- 9) Contact the manufacturer when installing at temperatures below the minimum application temperature.
- 10) The underlayment may be used as described in other current FBC product approval documents.
- 11) Roof coverings shall not be adhered directly to the underlayment. Roof coverings shall be mechanically fastened through the underlayment to the roof deck.
- 12) The underlayment shall be exposed on the roof deck for a maximum 30 days unless otherwise stated.
- 13) All products listed in this report shall be manufactured under a quality assurance program in compliance with Rule 61G20-3.

**COMPLIANCE STATEMENT**

The products evaluated herein by Zachary R. Priest, P.E. have demonstrated compliance with the Florida Building Code 5<sup>th</sup> Edition (2014) as evidenced in the referenced documents submitted by the named manufacturer.



A handwritten signature in black ink that reads "ZRP". Below the signature, there is a small line of text that says "Digitally signed by Zachary R. Priest".

2015.06.2  
2 13:55:44  
-04'00'

Zachary R. Priest, P.E.  
Florida Registration No. 74021  
Organization No. ANE9641

**CERTIFICATION OF INDEPENDENCE**

CREEK Technical Services, LLC does not have, nor will it acquire, a financial interest in any company manufacturing or distributing products under this evaluation.

CREEK Technical Services, LLC is not owned, operated, or controlled by any company manufacturing or distributing products under this evaluation.

Zachary R. Priest, P.E. does not have, nor will acquire, a financial interest in any company manufacturing or distributing products under this evaluation.

Zachary R. Priest, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

**END OF REPORT**



- Searches
- Sales Search
- Results
- Property Record Card**
- My Favorites

Sign up for

**5233 Driscoll Ct** < 20-23-30-1222-00-090 >

Name(s)	Physical Street Address
Gill John M	5233 Driscoll Ct
Gill Summer L	Postal City and Zipcode
Mailing Address On File	Orlando, FL 32812
5233 Driscoll Ct	Property Use
Belle Isle, FL 32812-1002	0103 - Single Fam Class III
Incorrect Mailing Address?	Municipality
	Belle Isle



**View 2016 Property Record Card**

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

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

**Property Description**

CASTLES AT THE LAKE 22/27 LOT 9

**Total Land Area** 13,620 sqft (+/-) | 0.31 acres (+/-) GIS Calculated Notice

**Land**

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Va
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>	1990	<b>Gross Area:</b>	3675 sqft
	<b>Type Code:</b>	0103 - Single Fam Class III	<b>Beds:</b>	4	<b>Living Area:</b>	2520 sqft
	<b>Building Value:</b>	working...	<b>Baths:</b>	2.5	<b>Exterior Wall:</b>	Concrete Block Stur
	<b>Estimated New Cost:</b>	working...	<b>Floors:</b>	1	<b>Interior Wall:</b>	Drywall

Page 1 of 1 (1 total records)

**Extra Features**

Description	Date Built	Units	XFOB Value
FPL2 - Average Fireplace	01/01/1990	1 Unit(s)	working...
PL2 - Above Average Pool	01/01/1990	1 Unit(s)	working...
SCR2 - Scrn Enc 2	01/01/1990	1 Unit(s)	working...

Page 1 of 1 (3 total records)

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



LICENSE NUMBER	
CGC058169	

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

MC KINNEY, GERALD W II  
PRESTIGE METAL ROOFING INC  
6061 CINDERLANE PARKWAY  
SUITE 100  
ORLANDO FL 32810



ISSUED: 07/20/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1607200001170

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



LICENSE NUMBER	
CCC033709	

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

MC KINNEY, GERALD W II  
PRESTIGE METAL ROOFING INC  
6061 CINDERLANE PARKWAY  
SUITE 100  
ORLANDO FL 32810



ISSUED: 07/20/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1607200000936



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

08/19/2016

<b>PRODUCER</b> Jack Fields Agency (407)870-5534 (407)870-9491 FAX 10 E Monument St. Kissimmee, FL 34741	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
<b>INSURED</b> Prestige Metal Roofing, Inc. License# CCC033709,CGG058169 6061 Cinderlane Pkwy #100 Orlando, FL 32810	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 80%;"><b>INSURERS AFFORDING COVERAGE</b></td> <td style="width: 20%;"><b>NAIC #</b></td> </tr> <tr> <td>INSURER A: Endurance Insurance Co</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>	INSURER A: Endurance Insurance Co		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
<b>INSURERS AFFORDING COVERAGE</b>	<b>NAIC #</b>												
INSURER A: Endurance Insurance Co													
INSURER B:													
INSURER C:													
INSURER D:													
INSURER E:													

**COVERAGES**

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADULT INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	CBC20000698400	08/27/2016	08/27/2017	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>EACH OCCURRENCE</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>DAMAGE TO RENTED PREMISES (Ea occurrence)</td><td style="text-align: right;">\$ 100,000</td></tr> <tr><td>MED EXP (Any one person)</td><td style="text-align: right;">\$ 5,000</td></tr> <tr><td>PERSONAL &amp; ADV INJURY</td><td style="text-align: right;">\$ 1,000,000</td></tr> <tr><td>GENERAL AGGREGATE</td><td style="text-align: right;">\$ 2,000,000</td></tr> <tr><td>PRODUCTS - COMP/OP AGG</td><td style="text-align: right;">\$ 2,000,000</td></tr> </table>	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 - COMP/OP AGG	\$ 2,000,000
EACH OCCURRENCE	\$ 1,000,000																	
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PERSONAL & ADV INJURY	\$ 1,000,000																	
GENERAL AGGREGATE	\$ 2,000,000																	
PRODUCTS - COMP/OP AGG	\$ 2,000,000																	
		AUTOMOBILE LIABILITY <input 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 _____				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>COMBINED SINGLE LIMIT (Ea accident)</td><td style="text-align: right;">\$</td></tr> <tr><td>BODILY INJURY (Per person)</td><td style="text-align: right;">\$</td></tr> <tr><td>BODILY INJURY (Per accident)</td><td style="text-align: right;">\$</td></tr> <tr><td>PROPERTY DAMAGE (Per accident)</td><td style="text-align: right;">\$</td></tr> </table>	COMBINED SINGLE LIMIT (Ea accident)	\$	BODILY INJURY (Per person)	\$	BODILY INJURY (Per accident)	\$	PROPERTY DAMAGE (Per accident)	\$				
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BODILY INJURY (Per person)	\$																	
BODILY INJURY (Per accident)	\$																	
PROPERTY DAMAGE (Per accident)	\$																	
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO _____				<table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>AUTO ONLY - EA ACCIDENT</td><td style="text-align: right;">\$</td></tr> <tr><td>OTHER THAN AUTO ONLY: EAACC</td><td style="text-align: right;">\$</td></tr> <tr><td>AGG</td><td style="text-align: right;">\$</td></tr> </table>	AUTO ONLY - EA ACCIDENT	\$	OTHER THAN AUTO ONLY: EAACC	\$	AGG	\$						
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		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td>E.L. EACH ACCIDENT</td><td style="text-align: right;">\$</td></tr> <tr><td>E.L. DISEASE - EA EMPLOYEE</td><td style="text-align: right;">\$</td></tr> <tr><td>E.L. DISEASE - POLICY LIMIT</td><td style="text-align: right;">\$</td></tr> </table>	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$						
E.L. EACH ACCIDENT	\$																	
E.L. DISEASE - EA EMPLOYEE	\$																	
E.L. DISEASE - POLICY LIMIT	\$																	
		OTHER																

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Gerald McKinney II as Qualifying Contractor

<b>CERTIFICATE HOLDER</b> City of Belle Isle 1600 Nela Ave. Belle Isle, FL 32809 407-581-0313 Fax	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE John A Fields
---	---



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:** 10/10/2016      **EXPIRATION DATE:** 10/10/2018  
**PERSON:** MCKINNEY      GERALD      W      II  
**FEIN:** 593649569

**BUSINESS NAME AND ADDRESS:**  
PRESTIGE METAL ROOFING, INC.

6061 CINDERLANE PKWY #100  
ORLANDO      FL      32810

**SCOPES OF BUSINESS OR TRADE:**

LICENSED GENERAL      LICENSED ROOFING  
CONTRACTOR      CONTRACTOR

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

**Scott Randolph, Tax Collector****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 lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

	<b>2016</b>		<b>EXPIRES 9/30/2017</b>		1806-0508681
1806	CERT ROOFING CONTRA	\$30.00	1 EMPLOYEE   5000	BUSINESS OFFICE	\$30.00
					1 EMPLOYEE ;



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

MCKINNEY GERALD W II

PRESTIGE METAL ROOFING INC  
 GERALD W MCKINNEY II QUALIFIER  
 6061 CINDERLANE PKWY #100  
 ORLANDO FL 32810-4781

6061 CINDERLANE PKWY #100  
 U - ORLANDO, 32810

PAID: \$60.00 2501-02229589 7/25/2016

This receipt is official when validated by the Tax Collector.

**Scott Randolph, Tax Collector****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 lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. **Delinquent penalty is added October 1.**

	<b>2016</b>		<b>EXPIRES 9/30/2017</b>		1801-0508679
1801	CERT GENERAL CONTRA	\$30.00	1 EMPLOYEE		



TOTAL TAX	\$30.00
PREVIOUSLY PAID	\$30.00
TOTAL DUE	\$0.00

MCKINNEY GERALD W II

PRESTIGE METAL ROOFING INC  
 FLORIDA INC  
 MCKINNEY GERALD W II  
 6061 CINDERLANE PKWY #100  
 ORLANDO FL 32810-4781

6061 CINDERLANE PKWY #100  
 U - ORLANDO, 32810

PAID: \$30.00 2501-02229810 7/25/2016

This receipt is official when validated by the Tax Collector.