

BUILDING JOB SITE CARD

City of Belle Isle

ELECTRICAL PERMIT 2017-08-131

PERMIT MUST BE POSTED ON SITE

Permit Number: 2017-08-131

Issue Date: 08.25.2017

Site Address: 6806 Seminole Drive, 32809

Parcel Number: 29-23-30-4389-02-010

Subdivision: Class: Residential

Description of Work: Electrical for new SFR (bldg permit 2017-03-065)

Issued To: Duncan Electrical Services Inc

Business Phone: 407 504 8130

Name: Duncan, Howard

Contractor License #EC13002018

Payment Date & Method: 8-30-17 VISA 850

Schedule Inspections via Email at: BIDscheduling@universalengineering.com SCHEDULE INSPECTIONS BY 4PM CUT OFF TIME Inspection Results Will Be Sent Out the Following Morning

"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			F)
Lintel/Tie Beam			
Down Pour			
Tilt Panel			
Window In-progress			
Sheathing (wall)			
Sheathing (roof)			
Framing			147
Fire Rated Assembly			
Above-Ceiling			
Insulation			
Lathe			
Pool Steel & Ground			
Pool Safety			
Final			

PERMIT # 2017-08-131 Page 2

COMMENTS

INSPECTOR DATE

GAS

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			TIP
Hood Vent			
Final	1		
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 BIDscheduling@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 Maggle Blvd., Orlando, FL 32811
Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

APPLICATION FOR ELECTRICAL 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:	7-22-17	PERMIT NUMB		31
	and the second	installations as indicated below. P		
		Belie	Isle FL3280932812	
Property Owner 6806	Seminde LLC	Phon	e	1
Property Owner's Mailing Add	iress 6413 Pineca	stle Blud Stc 3 city	orl.	2
State 7 / Zip Code		mber: 29-23-30-4		.
Class of Building: Old	Type of Building leration Addition	Residential Commercial Low Voltage Ne		
	_	ALL EQUIPMENT TO BE INST		
DishwasherE		Disposal	Water Heater	-
	ryer pa	Pool Stub out	Outlets 59	5
	eter Reset		Stoves	•
Pumps M	otors	Air Conditioning (tons)	Furnace (KW)	€
Temporary Construction Po	oleOne (1)	New Meter Service 300	Amperage/Voltage/Phase	
Meter Service Upgrade from		to		CIV 3
	Amperage/Voltage/Phase	toAmperage/Voltage/Phase	Difference in Size	29
Relocate Existing Meter Serv	ice (No Service Size Change)		27 X	11 2
				3.3
Other:				1 10
		ULE		50
		UATION OF JOB FOR PERMIT F		
VALUATION OF JOB (VA	ALUATION OF ALL MATERIALS,	LABOR, AND FIXTURES INSTAL		
			Permit Fee = \$	•
Building Official	ele Della Date	8727	Review Fee = \$	
Verified Contractor's Licen	ses & Insurance are on file	Date 8.15-17	1% BCAIB Fee = \$	
			1.5% DCA Fee = \$	2
8.30-	MSA MSA	8563	TOTAL Permit = \$ 513.	53
I hereby certify that the above	is true and correct to the best of i	my knowledge.		r.
I hereby make Application for Pe	ermit as outlined above, and if same i	s granted I agree to conform to all Flo	orida Building Code Regulations and City	
	in accordance with plans submitted. Florida codes and/or ordinances.	The issuance of this permit does not	t grant permission to violate any	12
LICENSE HOLDER SIGNATU	1100	LICEN	SE# EC13002018	
LICENSE HOLDER SIGNATE	1: 1 - 1	con COMPANY NAME DI	incan Electrical Se	evices
Street Address Po Bo	x 530236	COMM AND INCIDE	and the control of the	
city DeBary	State 71	Zip Code 32753 Phone	Number 407-509 - 813	? cell
Email Address			386-137 4318	office
NOTE: The Building Permit Nu	ımber is required if the Electrical Inst	allation is associated with any constr	uction or alteration where a Building	

Permit has been issued.

Building Permit Number 2017-03-065

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION **ELECTRICAL CONTRACTORS LICENSING BOARD**

LICENSE NUMBER

EC13002018

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



DUNCAN, HOWARD E **DUNCAN ELECTRICAL SERVICES INC** 104 FORT FLORIDA RD. DEBARY FL 32713



BTR-9224

ISSUED: 06/26/2016

DISPLAY AS REQUIRED BY LAW

SEQ# L1606260001512

2016 / 2017 Volusia County Business Tax Renewal Notice

Make check payable to:

Receipt #: 200403030026 Business 104 FORT FLORIDA RD DEBARY, FL

County of Volusia

Location:

Mail to:

County of Volusia Tax Processing Center PO Box 23237

Tampa, FL 33623-2237

Business Name:

Owner Name: Mailing Address:

DUNCAN ELECTRICAL SERVICES INC DUNCAN ELECTRICAL SERVICES INC PO BOX 530236

DEBARY FL 32753-0236

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Please pay only one amount. The amounts due after Sept 30th include penalties per FS205.053.

If Paid By:

Sept. 30, 2016

Oct. 31, 2016

Nov. 30, 2016

Dec. 31, 2016

Amount Due:

\$18.00

\$19.80

\$20.70

\$21.60

\$22.50

DO NOT WRITE ON THIS PORTION OF THE BILL

70000000000000002004030300260220170000000180000000000008



CERTIFICATE OF LIABILITY INSURANCE

DUNCA-2 OP ID: SL

DATE (MM/DD/YYYY) 08/22/2017

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).

	CILIII	ilcate molder in fied of such endors	CITIC	iii(S)	·						
	DUCE khill	ER II Insurance Agency, LLC				CONTA NAME:	Sitarifio	n Podbielsl			
20 5	out	th Bumby Avenue				(A/C, N	o. Ext): 407-89	8-8891	(A/C, No):	407-8	98-8813
		o, FL 32803 orkhill,AAI #A054965				E-MAIL ADDRE	_{ss:} shannor	n@corkhilli	nsurance.com		
		•							DING COVERAGE		NAIC #
						INSURE	RA: Florida	Citrus Bus	iness &		15764
INSU	RED	Duncan Electrical Service P.O. Box 530236	es Ir	ıc		INSURE	RB: Auto-O	wners Insu	rance Company		18988
		Debary, FL 32753				INSURE	RC:				
		, _ .				INSURE	RD:				
	8	8				INSURE	RE:				
						INSURE	RF:				
CO	VER	RAGES CER	TIFIC	CATE	NUMBER:				REVISION NUMBER:		
C	DIC/ ERTI	IS TO CERTIFY THAT THE POLICIES CATED. NOTWITHSTANDING ANY RE TIFICATE MAY BE ISSUED OR MAY F USIONS AND CONDITIONS OF SUCH F	QUIF PERT	REME AIN,	NT, TERM OR CONDITION THE INSURANCE AFFORD	OF AN'	Y CONTRACT	OR OTHER I	DOCUMENT WITH RESPEC D HEREIN IS SUBJECT TO	OT TO	WHICH THIS
NSR LTR		TYPE OF INSURANCE	ADDL	SUBR	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP	LIMITS	3	
В	X	7			. I I I I I I I I I I I I I I I I I I I		A STATE OF THE PARTY OF THE PAR			\$	1,000,000
		CLAIMS-MADE X OCCUR			72684573		06/05/2017	06/05/2018	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
										\$	10,000
		J						ļ	PERSONAL & ADV INJURY	\$	1,000,000
	GEN	N'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	\$	2,000,000
		POLICY PRO- LOC								\$:	2,000,000
		OTHER:							COMPUTE ON OUT THAT	\$	
	AUT	TOMOBILE LIABILITY							(Ea accident)	\$	
		ANY AUTO ALL OWNED SCHEDULED								\$	
		AUTOS AUTOS							55555577511155	\$	
		HIRED AUTOS NON-OWNED AUTOS							PROPERTY DAMAGE (Per accident)	\$	
										\$	
	X	UMBRELLA LIAB X OCCUR							EACH OCCURRENCE	\$	2,000,000
В		EXCESS LIAB CLAIMS-MADE			4684353100		06/05/2017	06/05/2018	AGGREGATE	\$	
		DED RETENTION\$								\$	
		RKERS COMPENSATION DEMPLOYERS' LIABILITY						9	X PER OTH-		
Α	ANY	PROPRIETOR/PARTNER/EXECUTIVE	N/A		10635252		04/01/2017	04/01/2018	E.L. EACH ACCIDENT	\$	500,000
	(Man	indatory in NH)							E.L. DISEASE - EA EMPLOYEE	\$	500,000
	DES	es, describe under SCRIPTION OF OPERATIONS below							E.L. DISEASE - POLICY LIMIT	\$	500,000
)ES(CRIPT	TION OF OPERATIONS / LOCATIONS / VEHICL	ES (A	CORD	101, Additional Remarks Schedu	le, may b	e attached if mor	e space is requir	ed)		
CE	RTIF	FICATE HOLDER				CANC	ELLATION				
		City of Belle Isle 1600 Nela Ave Belle Isle, FL 32809			CITYBE3	ACC AUTHOR	EXPIRATION	I DATE THE TH THE POLIC	ESCRIBED POLICIES BE CA EREOF, NOTICE WILL BI LY PROVISIONS.		

RICK SINGH, CFA - ORANGE COUNTY PROPERTY APPRAISER

Searches

Results Sales Search

Property Record Card

Wy Favorites

Sign up for e-Notify...

6806 Seminole Dr < 29-23-30-4389-02-010 >

6806 Seminole LLC

6806 Seminole Dr Physical Street Address

Postal City and Zipcode

Orlando, Fl 32812

N/A. Click information icon to contribute.

Property Name

6413 Pinecastle Blvd Ste 3

Mailing Address On File

Incorrect Mailing Address? Orlando, FL 32809-6694

Property Use

0030 - Vacant Water

Belle Isle Municipality

6806 SEMINOLE DR. ORLANDO. PL 32812 2/10/2016/3/16 of 20 - Cilck To View Or Uplos

View 2016 Property Record Card

Property Features

Property Description

Sales Analysis Values, Exemptions and Taxes

Location Info

Update Information **Market Stats**

View Plat

LAKE CONWAY PARK G/138 LOT 1 BLOCK B & A PORTION OF LAND BETWEEN THE EAST AND WEST PROPERTY LINES LOT 1 BLOCK B EXTENDED TO THE WATERS OF LAKE CONWAY DESC: BEG AT THE SW CORNER LOT 1 TH S81-46-00E 84.72 FT TH S25-32-00W 153.46 FT TH N71-25-00W 91.74 FT TH N29-42-28E 139.74 FT TO THE POB

Total Land Area

29,037 sqft (+/-) | 0.67 acres (+/-)

Deeded

Notice

Land

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0030 - Vacant Water	R-1-AA	1 LOT(S)	\$380,000.00	\$380,000	\$0.00	\$380,000

Page 1 of 1 (1 total records)

Buildings

Important Information	Structure
There are no buildings associated with this parcel	
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Extra Features