



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

<p>Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles</p> <p>Comments: Bldg 12</p> <p>Project Information Address: Lot 48 – 3569 Brighton Park Circle, Belle Isle, FL 32812 Parcel ID: 29-23-30-0906-00-480 Property Owner: Mattamy Orlando LLC Phone Number: 407 599 2228</p> <p>***** Company Name: Batterbee Roofing Inc Contractor Name: Batterbee, Keith License Number: CCC1326176 Address: 380 123rd St Rd, Ocala, FL 34480 Phone Number: 353 748 6300</p>	<p style="text-align: right;">Permit Number: 2017-08-076</p> <p style="text-align: right;">Date of Application: 08/11/2017 Date Permit Issued: 08/14/2017</p> <p>WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.</p>
--	--

BUILDING FEATURES

<p>IMPACT FEES</p> <p>Traffic \$ School \$</p> <p>ZONING FEES</p> <p>Zoning Fee \$none - new</p> <p>UNIVERSAL ENG - BUILDING FEES</p> <p>Boat Dock \$ Boat House \$ Building \$ Demo \$ Door(s) \$ Driveway \$ Electrical \$ Fence \$ Gas \$ Irrigation \$ Low Voltage \$ Mechanical \$ Plumbing \$ Pool \$ Roofing \$67.50 Screen Encl \$ Shed \$ Temp Pole \$ Window(s) \$</p> <p>SURCHARGE FEES</p> <p>Surcharge Fee \$2.00 Surcharge Fee \$2.00</p> <p style="text-align: center;">TOTAL FEES \$71.50</p> <p>Date Paid <u>8-14-17</u> CC or Check # <u>MC 6236</u> Amount Paid <u>71.50</u></p> <p>The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).</p>	<p style="text-align: center;">BUILDING INSPECTOR USE ONLY</p> <p>IF APPLICABLE: Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO</p> <p><input type="checkbox"/> BUILDING</p> <p>1st _____ (Footing/Foundation) Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____</p> <p>2nd _____ (Slab)</p> <p>3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)</p> <p>4th _____ (Exterior Framing)(Roof/Wall Sheathing)</p> <p>5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)</p> <p>6th _____ (Insulation to be Made After Roof Installed)</p> <p>7th _____ (Drywall)</p> <p>8th _____ (Sidewalk/Driveway)</p> <p>9th _____ (Other)</p> <p>10th _____ (Final – After MEP and Other Applicable Finals)</p> <p><input type="checkbox"/> ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR</p> <p>1st ROOF In-Progress _____</p> <p>2nd ROOF Covering Final _____</p> <p><input type="checkbox"/> PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)</p> <p>1ST _____ (Underground) 2nd _____ (Sewer)</p> <p>3rd _____ (Rough-In/Tub Set) 4th _____ (Final)</p> <p>CHECK APPROPRIATE BOX</p> <p><input type="checkbox"/> GAS <input type="checkbox"/> Natural <input type="checkbox"/> LP <input type="checkbox"/> MECHANICAL <input type="checkbox"/> ELECTRICAL <input type="checkbox"/> LOW VOLTAGE</p> <p>1st _____ (Rough-In) 2nd _____ (Final)</p>
--	---

Inspection requests are to be emailed to 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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles

Comments: Bldg 12

Project Information

Address: Lot 49 – 3573 Brighton Park Circle, Belle Isle, FL 32812
Parcel ID: 29-23-30-0906-00-490
Property Owner: Mattamy Orlando LLC
Phone Number: 407 599 2228

Company Name: Batterbee Roofing Inc
Contractor Name: Batterbee, Keith
License Number: CCC1326176
Address: 380 123rd St Rd, Ocala, FL 34480
Phone Number: 353 748 6300

Permit Number: 2017-08-077

Date of Application: 08/11/2017
Date Permit Issued: 08/14/2017

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$none - new

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$
 Plumbing \$
 Pool \$
 Roofing \$67.50
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$71.50

Date Paid

8-14-17

CC or Check #

MC 6236

Amount Paid

71.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

1st _____ (Footing/Foundation)
 Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____
 2nd _____ (Slab)
 3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
 4th _____ (Exterior Framing)(Roof/Wall Sheathing)
 5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)
 6th _____ (Insulation to be Made After Roof Installed)
 7th _____ (Drywall)
 8th _____ (Sidewalk/Driveway)
 9th _____ (Other)
 10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING

OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1st ROOF In-Progress _____
 2nd ROOF Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST _____ (Underground) 2nd _____ (Sewer)
 3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to 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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles

Comments: Bldg 12

Project Information

Address: Lot 50– 3577 Brighton Park Circle, Belle Isle, FL 32812

Parcel ID: 29-23-30-0906-00-500

Property Owner: Mattamy Orlando LLC

Phone Number: 407 599 2228

Company Name: Batterbee Roofing Inc

Contractor Name: Batterbee, Keith

License Number: CCC1326176

Address: 380 123rd St Rd, Ocala, FL 34480

Phone Number: 353 748 6300

Permit Number: 2017-08-078

Date of Application: 08/11/2017

Date Permit Issued: 08/14/2017

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
School \$

ZONING FEES

Zoning Fee \$none - new

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
Boat House \$
Building \$
Demo \$
Door(s) \$
Driveway \$
Electrical \$
Fence \$
Gas \$
Irrigation \$
Low Voltage \$
Mechanical \$
Plumbing \$
Pool \$
Roofing \$67.50
Screen Encl \$
Shed \$
Temp Pole \$
Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
Surcharge Fee \$2.00

TOTAL FEES \$71.50

Date Paid 8-14-17

CC or Check # MC 6236

Amount Paid 71.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions

Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

1st _____ (Footing/Foundation)
Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____
2nd _____ (Slab)
3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
4th _____ (Exterior Framing)(Roof/Wall Sheathing)
5th _____ (Framing) (To be made after Plumbing/ Mechanical/
Electrical Rough-Ins & Windows/Doors Installed)
6th _____ (Insulation to be Made After Roof Installed)
7th _____ (Drywall)
8th _____ (Sidewalk/Driveway)
9th _____ (Other)
10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1st ROOF In-Progress _____

2nd ROOF Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST _____ (Underground) 2nd _____ (Sewer)

3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles

Comments: Bldg 12

Project Information

Address: Lot 51– 3581 Brighton Park Circle, Belle Isle, FL 32812
Parcel ID: 29-23-30-0906-00-510
Property Owner: Mattamy Orlando LLC
Phone Number: 407 599 2228

Company Name: Batterbee Roofing Inc
Contractor Name: Batterbee, Keith
License Number: CCC1326176
Address: 380 123rd St Rd, Ocala, FL 34480
Phone Number: 353 748 6300

Permit Number: 2017-08-079

Date of Application: 08/11/2017
Date Permit Issued: 08/14/2017

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$none - new

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$
 Plumbing \$
 Pool \$
 Roofing \$67.50
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$71.50

Date Paid 8-14-17

CC or Check # MC6236

Amount Paid 71.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

1st _____ (Footing/Foundation)
 Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____
 2nd _____ (Slab)
 3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
 4th _____ (Exterior Framing)/Roof/Wall Sheathing
 5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)
 6th _____ (Insulation to be Made After Roof Installed)
 7th _____ (Drywall)
 8th _____ (Sidewalk/Driveway)
 9th _____ (Other)
 10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1st ROOF In-Progress _____
 2nd ROOF Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST _____ (Underground) 2nd _____ (Sewer)
 3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to 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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811

Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles

Comments: Bldg 12

Project Information

Address: Lot 52– 3585 Brighton Park Circle, Belle Isle, FL 32812

Parcel ID: 29-23-30-0906-00-520

Property Owner: Mattamy Orlando LLC

Phone Number: 407 599 2228

Company Name: Batterbee Roofing Inc

Contractor Name: Batterbee, Keith

License Number: CCC1326176

Address: 380 123rd St Rd, Ocala, FL 34480

Phone Number: 353 748 6300

Permit Number: 2017-08-080

Date of Application: 08/11/2017

Date Permit Issued: 08/14/2017

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
School \$

ZONING FEES

Zoning Fee \$none - new

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
Boat House \$
Building \$
Demo \$
Door(s) \$
Driveway \$
Electrical \$
Fence \$
Gas \$
Irrigation \$
Low Voltage \$
Mechanical \$
Plumbing \$
Pool \$
Roofing \$67.50
Screen Encl \$
Shed \$
Temp Pole \$
Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
Surcharge Fee \$2.00

TOTAL FEES \$71.50

Date Paid 8-14-17

CC of Check # MLC6236

Amount Paid 71.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions

Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

|| BUILDING

1st _____ (Footing/Foundation)
Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? ____
2nd _____ (Slab)
3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
4th _____ (Exterior Framing)(Roof/Wall Sheathing)
5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)
6th _____ (Insulation to be Made After Roof Installed)
7th _____ (Drywall)
8th _____ (Sidewalk/Driveway)
9th _____ (Other)
10th _____ (Final – After MEP and Other Applicable Finals)

|| ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1st ROOF In-Progress _____
2nd ROOF Covering Final _____

|| PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST _____ (Underground) 2nd _____ (Sewer)
3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS ___ Natural ___ LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to BI DScheduling@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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Permit Number: 2017-08-081

Date of Application: **08/11/2017**

Date Permit Issued: **08/14/2017**

Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles

Comments: Bldg 12

Project Information

Address: Lot 53– 3589 Brighton Park Circle, Belle Isle, FL 32812

Parcel ID: 29-23-30-0906-00-530

Property Owner: Mattamy Orlando LLC

Phone Number: 407 599 2228

Company Name: Batterbee Roofing Inc

Contractor Name: Batterbee, Keith

License Number: CCC1326176

Address: 380 123rd St Rd, Ocala, FL 34480

Phone Number: 353 748 6300

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$none - new

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$
 Plumbing \$
 Pool \$
 Roofing \$67.50
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$71.50

Date Paid 8-14-17

CC of Check # MC 6236

Amount Paid 71.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions

Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

1st _____ (Footing/Foundation)

Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____

2nd _____ (Slab)

3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)

4th _____ (Exterior Framing)(Roof/Wall Sheathing)

5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)

6th _____ (Insulation to be Made After Roof Installed)

7th _____ (Drywall)

8th _____ (Sidewalk/Driveway)

9th _____ (Other)

10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING **OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR**

1st ROOF In-Progress _____

2nd ROOF Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST _____ (Underground) 2nd _____ (Sewer)

3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP **MECHANICAL** **ELECTRICAL** **LOW VOLTAGE**

1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to 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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



City of Belle Isle

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

PERMIT CARD – PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. **WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD.** PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: ROOF: new – common roof over Lots 48, 49, 50, 51, 52, 53, 54 - asphalt shingles

Comments: Bldg 12

Project Information

Address: Lot 54– 3593 Brighton Park Circle, Belle Isle, FL 32812
Parcel ID: 29-23-30-0906-00-540
Property Owner: Mattamy Orlando LLC
Phone Number: 407 599 2228

Company Name: Batterbee Roofing Inc
Contractor Name: Batterbee, Keith
License Number: CCC1326176
Address: 380 123rd St Rd, Ocala, FL 34480
Phone Number: 353 748 6300

Permit Number: 2017-08-082

Date of Application: 08/11/2017

Date Permit Issued: 08/14/2017

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$none - new

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$
 Plumbing \$
 Pool \$
 Roofing \$67.50
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$71.50

Date Paid 8-14-17

CO or Check # MC 6236

Amount Paid 71.50

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

- 1st _____ (Footing/Foundation)
 Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____
- 2nd _____ (Slab)
- 3rd _____ (Lintel)(Wall Reinforcing on Masonry Building)
- 4th _____ (Exterior Framing)(Roof/Wall Sheathing)
- 5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)
- 6th _____ (Insulation to be Made After Roof Installed)
- 7th _____ (Drywall)
- 8th _____ (Sidewalk/Driveway)
- 9th _____ (Other)
- 10th _____ (Final – After MEP and Other Applicable Finals)

ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

- 1st ROOF In-Progress _____
- 2nd ROOF Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

- 1ST _____ (Underground) 2nd _____ (Sewer)
- 3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS ___ Natural ___ LP **MECHANICAL** **ELECTRICAL** **LOW VOLTAGE**

- 1st _____ (Rough-In) 2nd _____ (Final)

Inspection requests are to be emailed to 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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com>

login ID = cobi@universalengineering.com

password = universal13



Master Permit #
2017-01-067

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 2017-08-076

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

Project Address 3569 Brighton Park Circle Bld 12 /Lot 48, Belle Isle, FL 32809 32812

Property Owner Mattamy Orlando LLC Phone (407) 599-2228

Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando

State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-480

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 showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$ 2,507.24

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 Keith Batterbee LICENSE # CCC1326176

LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.

Street Address 380 123rd Street Road

City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300

Email Address batterbeeroofing@gmail.com

Building Official: Duke Bunn Date 8-14-17

Verified Contractor's Licenses & Insurance are on file (initials) Date 8-14-17

Zoning Fee \$ 0 new

Permit Fee \$ 45.-

Review Fee \$ 22.50

3% Florida Surcharge \$ 4.-

Total Permit Fee \$ 71.50

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. Building Permit Number _____



Master Permit #
2017-01-068

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 2017-08-071

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

Project Address 3573 Brighton Park Circle Bld 12 /Lot 49, Belle Isle, FL 32809 32812

Property Owner Mattamy Orlando LLC Phone (407) 599-2228

Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando

State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-490

REQUIRED! To obtain this information, please visit <http://www.ocpafl.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 showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$ 2,507.24

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 Keith Batterbee LICENSE # CCC1326176
LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.
Street Address 380 123rd Street Road
City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300
Email Address batterbeeroofing@gmail.com

Building Official: Dale Dahn Date 8-14-17
Verified Contractor's Licenses & Insurance are on file SD Date 8-14-17

Zoning Fee	\$ <u>0 new</u>
Permit Fee	\$ <u>45.-</u>
Review Fee	\$ <u>22.50</u>
3% Florida Surcharge	\$ <u>4. (max)</u>
Total Permit Fee	\$ <u>71.50</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.

1571 IC
5x4
25
20
45
22.50
67.50

Building Permit Number _____



Master Permit #
2017-01-069

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 2017-08-078

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

Project Address 3577 Brighton Park Circle Bld 12 /Lot 50, Belle Isle, FL 32809 32812
Property Owner Mattamy Orlando LLC Phone (407) 599-2228
Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando
State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-500

REQUIRED! To obtain this information, please visit <http://www.ocpafl.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 showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$ 2,507.24

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 Keith Batterbee LICENSE # CCC1326176
LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.
Street Address 380 123rd Street Road
City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300
Email Address batterbeeroofing@gmail.com

Building Official: Dale Bahn Date 8-14-17
Verified Contractor's Licenses & Insurance are on file [Signature] Date 8-14-17

Zoning Fee	\$ <u>0 new</u>
Permit Fee	\$ <u>45.-</u>
Review Fee	\$ <u>22.50</u>
3% Florida Surcharge	\$ <u>4.-</u>
Total Permit Fee	\$ <u>71.50</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. Building Permit Number _____



Master Permit #
2017-01-070

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 2017-08-079

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

Project Address 3581 Brighton Park Circle Bld 12 /Lot 51, Belle Isle, FL 32809 32812

Property Owner Mattamy Orlando LLC Phone (407) 599-2228

Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando

State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-510

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

Class of Building: Old New Type of Building: Residential Commercial Other

Type of Work: New Roof ReRoof

- REQUIRED! Florida Product Approval Screen Printout from www.floridabuilding.org showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$2,507.24

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 Keith Batterbee LICENSE # CCC1326176

LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.

Street Address 380 123rd Street Road

City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300

Email Address batterbeeroofing@gmail.com

Building Official: Dale Behm Date 8-14-17

Verified Contractor's Licenses & Insurance are on file [Signature] Date 8-14-17

Zoning Fee \$ 0 new

Permit Fee \$ 45.-

Review Fee \$ 22.50

3% Florida Surcharge \$ 4.-

Total Permit Fee \$ 71.50

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. Building Permit Number _____



Master Permit #
2017-01-071

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 2017-08-080

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

Project Address 3585 Brighton Park Circle Bld 12 /Lot 52, Belle Isle, FL 32809 32812

Property Owner Mattamy Orlando LLC Phone (407) 599-2228

Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando

State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-520

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

Class of Building: Old New Type of Building: Residential Commercial Other

Type of Work: New Roof ReRoof

- REQUIRED! Florida Product Approval Screen Printout from www.floridabuilding.org showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$ 2,507.24

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 Keith Batterbee LICENSE # CCC1326176

LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.

Street Address 380 123rd Street Road

City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300

Email Address batterbeeroofing@gmail.com

Building Official: Dale Buhn Date 8-14-17

Verified Contractor's Licenses & Insurance are on file [Signature] Date 8-14-17

Zoning Fee \$ 0 new

Permit Fee \$ 45.-

Review Fee \$ 22.50

3% Florida Surcharge \$ 4.-

Total Permit Fee \$ 71.50

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. Building Permit Number _____



Master Permit #
2017-01-072

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 2017-08-081

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

Project Address 3589 Brighton Park Circle Bld 12 /Lot 53, Belle Isle, FL 32809 32812

Property Owner Mattamy Orlando LLC Phone (407) 599-2228

Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando

State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-530

REQUIRED! To obtain this information, please visit <http://www.ocpafl.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 showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$ 2,507.24

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 Keith Batterbee LICENSE # CCC1326176

LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.

Street Address 380 123rd Street Road

City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300

Email Address batterbeeroofing@gmail.com

Building Official: Dale Bahm Date 8-14-17

Verified Contractor's Licenses & Insurance are on file (Signature) Date 8-14-17

Zoning Fee \$ 0 new

Permit Fee \$ 45.-

Review Fee \$ 22.50

3% Florida Surcharge \$ 4.-

Total Permit Fee \$ 71.50

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. Building Permit Number _____



Master Permit #
2017-01-073

City of Belle Isle

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



APPLICATION FOR 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: 08/11/2017

ROOF PERMIT NUMBER 201708-082

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

Project Address 3593 Brighton Park Circle Bld 12 /Lot 54, Belle Isle, FL 32809 32812

Property Owner Mattamy Orlando LLC Phone (407) 599-2228

Property Owner's Mailing Address 1900 Summit Towner Bld, Ste 500 City Orlando

State FL Zip Code 32810 Parcel Id Number: 29-23-30-0906-00-540

REQUIRED! To obtain this information, please visit <http://www.ocpafi.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 showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from 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: 1571 Number of Stories: 2 Job Valuation: \$ 2,507.24

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 Keith Batterbee LICENSE # CCC1326176

LICENSE HOLDER NAME Keith Batterbee COMPANY NAME Batterbee Roofing, Inc.

Street Address 380 123rd Street Road

City Ocala State FL Zip Code 34480 Phone Number (352) 748-6300

Email Address batterbeeroofing@gmail.com

Building Official: Dale Bachman Date 8.14.17

Verified Contractor's Licenses & Insurance are on file _____ Date _____

Zoning Fee \$ _____

Permit Fee \$ _____

Review Fee \$ _____

3% Florida Surcharge \$ _____

Total Permit Fee \$ _____

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. Building Permit Number _____



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

**CONSTRUCTION INDUSTRY LICENSING BOARD
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783**

(850) 487-1395

*FYI- Ocala
has no LTR requirement*

**BATTERBEE, KEITH A
BATTERBEE ROOFING INC
333 SE 69TH PL
OCALA FL 34480**

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

Every day we work to improve the way we do business in order to serve you better. For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!



DETACH HERE

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER	
CCC1326176	

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

**BATTERBEE, KEITH A
BATTERBEE ROOFING INC
333 SE 69TH PL
OCALA FL 34480**





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

3/6/2017

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 Brown & Brown of Leesburg PO Box 491636 Leesburg FL 34749-1636	CONTACT NAME: Terri Hendrickson
	PHONE (A/C, No, Ext): (352)787-2431 FAX (A/C, No): (352)787-9922
	E-MAIL ADDRESS: Terri.Hendrickson@bblesburg.com
	INSURER(S) AFFORDING COVERAGE
	INSURER A: Gemini Insurance Co NAIC # 10833
	INSURER B: Westfield Insurance Company 24112
	INSURER C: Commerce & Industry Ins Co 19410
	INSURER D: Illinois National Insurance Company 023817
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: **17-18 WC 16-17 All other** 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"/> COMMERCIAL GENERAL LIABILITY		VNGP001251	5/30/2016	5/30/2017	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					MED EXP (Any one person) \$ Excluded
	<input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC					PERSONAL & ADV INJURY \$ 1,000,000
	OTHER:					GENERAL AGGREGATE \$ 2,000,000
B	AUTOMOBILE LIABILITY		CWP7574009	5/30/2016	5/30/2017	PRODUCTS - COM/OP AGG \$ 2,000,000
	<input checked="" type="checkbox"/> ANY AUTO					Employee Benefits \$ 1,000,000
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS				BODILY INJURY (Per person) \$
						BODILY INJURY (Per accident) \$
						PROPERTY DAMAGE (Per accident) \$
						Uninsured motorist combined \$ 1,000,000
C	<input checked="" type="checkbox"/> UMBRELLA LIAB		BE025401850	5/30/2016	5/30/2017	EACH OCCURRENCE \$ 4,000,000
	<input type="checkbox"/> EXCESS LIAB	<input type="checkbox"/> OCCUR				AGGREGATE \$ 4,000,000
	DED	RETENTION \$				\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		82-875902-01-01	2/16/2017	2/16/2018	PER STATUTE
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	Y/N <input type="checkbox"/> N/A				OTHER
	If yes, describe under DESCRIPTION OF OPERATIONS below					E.L. EACH ACCIDENT \$ 1,000,000
						E.L. DISEASE - EA EMPLOYEE \$ 1,000,000
						E.L. DISEASE - POLICY LIMIT \$ 1,000,000

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

CERTIFICATE HOLDER

CANCELLATION

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

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

B Brooks, CIC, CPCU/T

© 1988-2014 ACORD CORPORATION. All rights reserved.



City of Belle Isle

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

Product Approval Form Master Permit # 2017-01-063

DATE: 07/17/2017

Bldg 12 Lots 48-54

PERMIT # _____

PROJECT ADDRESS: Brighton Park Circle, Belle Isle, FL 32809, Belle Isle, FL X 32809 32812

As required by Florida Statue 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 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 PAF, 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 #
EXTERIOR DOORS				WALL PANELS			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Dbf Hung				Asphalt Shingles	CertainTeed	Landmark	5444.1
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Underlayment	Intenrap	Rhino Roof	15216.1
Skylights				Other		V20	
Other							
STRUCTURAL COMPONENTS				OTHER			
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

Keith Battabee

Date 07/17/2017



BCIS Home Log In User Registration Hot Topics Submit Surcharge Stats & Facts Publications FBC Staff BCIS Site Map Links Search



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 Certified By</p> <p>Sections from the Code</p>	<p>FL5444-R10</p> <p>Revision</p> <p>2014</p> <p>Approved</p> <p>CertainTeed Corporation-Roofing</p> <p>18 Moores Road</p> <p>Malvern, PA 19355</p> <p>(610) 893-5400</p> <p>mark.d.harner@saint-gobain.com</p> <p>Mark Harmer</p> <p>mark.d.harner@saint-gobain.com</p> <p>Mark D. Harmer</p> <p>18 Moores Road</p> <p>Malvern, PA 19355</p> <p>(610) 651-5847</p> <p>Mark.D.Harmer@saint-gobain.com</p> <p>Roofing</p> <p>Asphalt Shingles</p> <p>Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer</p> <p>- Evaluation Report - Hardcopy Received</p> <p>Robert Nieminen</p> <p>PE-59166</p> <p>UL LLC</p> <p>03/09/2020</p> <p>John W. Knezevich, PE</p> <p>✓ Validation Checklist - Hardcopy Received</p> <p>FL5444 R10 COI 2016 01 COI Nieminen.pdf</p> <table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D3161, Class F</td> <td>2009</td> </tr> <tr> <td>ASTM D3462</td> <td>2009</td> </tr> <tr> <td>ASTM D7158, Class H</td> <td>2008</td> </tr> </tbody> </table>	Standard	Year	ASTM D3161, Class F	2009	ASTM D3462	2009	ASTM D7158, Class H	2008
Standard	Year								
ASTM D3161, Class F	2009								
ASTM D3462	2009								
ASTM D7158, Class H	2008								

Product Approval Method	Method 1 Option D
Date Submitted	12/08/2016
Date Validated	12/14/2016
Date Pending FBC Approval	12/15/2016
Date Approved	02/07/2017
Date Revised	06/06/2017

Summary of Products

FL #	Model, Number or Name	Description
5444.1	CertainTeed Asphalt Roofing Shingles	3-tab, 4-tab, strip (no-cut-outs), laminated and architectural asphalt roof shingles
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: Refer to ER Section 5 for Limits of Use		Installation Instructions FL5444 R10 II 2016 12 FINAL ER CERTAINTEED Asphalt Shingle FL5444-R10.pdf Verified By: Robert Nieminen, PE PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL5444 R10 AE 2016 12 FINAL ER CERTAINTEED Asphalt Shingle FL5444-R10.pdf Created by Independent Third Party: Yes

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

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

The State of Florida is an AA/EEO employer. [Copyright 2007-2013 State of Florida](#). :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 405.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:



Credit Card
Safe



TRINITY ERD

EXTERIOR RESEARCH & DESIGN, LLC.

Certificate of Authorization #9503
353 CHRISTIAN STREET, UNIT #13
OXFORD, CT 06478
PHONE: (203) 262-9245
FAX: (203) 262-9243

EVALUATION REPORT

CertainTeed Corporation
20 Moores Road
Malvern, PA 19355

Evaluation Report 3532.09.05-R11
FL5444-R10

Date of Issuance: 09/22/2005

Revision 11: 12/08/2016

SCOPE:

This Evaluation Report is issued under Rule 61G20-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been evaluated for compliance with the 5th Edition (2014) Florida Building Code sections noted herein.

DESCRIPTION: CertainTeed Asphalt Roofing Shingles.

LABELING: Labeling shall be in accordance with the requirements of the Accredited Quality Assurance Agency noted herein and **FBC 1507.2.7.1 / R905.2.6.1**

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

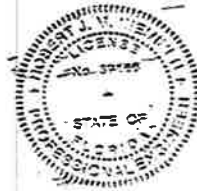
This Evaluation Report consists of pages 1 through 12.

Prepared by:



Robert J.M. Nieminen, P.E.

Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 12/08/2016. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

CERTIFICATION OF INDEPENDENCE:

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.
5. This is a building code evaluation. Neither Trinity|ERD nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.

ROOFING SYSTEMS EVALUATION:

1. SCOPE:

Product Category: Roofing
Sub-Category: Asphalt Shingles

Compliance Statement: CertainTeed Asphalt Roofing Shingles, as produced by CertainTeed Corporation, have demonstrated compliance with the following sections of the 5th Edition (2014) Florida Building Code and 5th Edition (2014) Florida Building Code, Residential Volume through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

<u>Section</u>	<u>Property</u>	<u>Standard</u>	<u>Year</u>
1507.2.5, R905.2.4	Physical Properties	ASTM D3462	2009
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D3161, Class F	2009
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D7158, Class H	2008

3. REFERENCES:

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
UL (TST 1740)	ASTM D3161	94NK9632	05/15/1998
UL (TST 1740)	ASTM D3161	99NK26506	11/23/1999
UL (TST 1740)	ASTM D3161	03CA12702	05/27/2003
UL (TST 1740)	ASTM D3161	03CA12702	06/15/2003
UL (TST 1740)	ASTM D3161	03NK29847	10/03/2003
UL (TST 1740)	ASTM D3161	04CA11329	05/24/2004
UL (TST 1740)	ASTM D3161	04CA32986	12/03/2004
UL (TST 1740)	ASTM D3161	05NK07049	04/15/2005
UL (TST 1740)	ASTM D3161	05NK16778	05/12/2005
UL (TST 1740)	ASTM D3161	05CA16778	05/12/2005
UL (TST 1740)	ASTM D3161	05NK14836	05/22/2005
UL (TST 1740)	ASTM D3161	05NK22800	06/22/2005
UL (TST 1740)	ASTM D3462	R684	09/21/2005
UL (TST 1740)	ASTM D7158	05NK08037	06/28/2006
UL (TST 1740)	ASTM D3161 & D3462	09CA28873	07/23/2009
UL (TST 1740)	ASTM D3462	10CA41303	10/07/2010
UL (TST 1740)	ASTM D3161	10CA41303	10/08/2010
UL (TST 1740)	ASTM D7158	10CA41303	10/27/2010
UL (TST 1740)	ASTM D3161 & D3462	10CA44960	11/11/2010
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	13CA32897	11/21/2013
UL LLC (TST 9628)	ASTM D3161, D3462	TFWZ.R684	04/22/2014
UL LLC (TST 9628)	ASTM D7158	TGAH.R684	04/22/2014
UL LLC (TST 9628)	ASTM D3161 & D3462	4786334434	09/16/2014
UL LLC (TST 9628)	ASTM D3161 & D3462	4786570826	02/12/2015
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	4786570717	12/16/2015
UL LLC (TST 9628)	ASTM D3161 & D3462	4787195678	02/09/2016
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	4787380356	10/26/2016
UL LLC (TST 9628)	ASTM D3462	4787380357	10/13/2016
UL LLC (TST 9628)	ASTM D7158	4787380357	11/08/2016
UL LLC (TST 9628)	ASTM D3161	4787380357	11/09/2016
UL LLC (QUA 9625)	Quality Control	Service Confirmation	Exp. 07/03/2017

4. **PRODUCT DESCRIPTION:**

- 4.1 **CT20™, XT™ 25, XT™ 30 and XT™ 30 IR** are fiberglass reinforced, 3-tab asphalt roof shingles.
- 4.2 **Arcadia™, Belmont™, Carriage House Shingle®, Grand Manor Shingle®, Landmark™, Landmark™ IR, Landmark™ Pro, Landmark™ Premium, Landmark™ TL, Landmark™ Solaris and Landmark™ Solaris IR** are fiberglass reinforced, laminated asphalt roof shingles.
- 4.3 **NorthGate™** is a fiberglass reinforced, laminated, SBS modified bitumen roof shingle.
- 4.4 **Presidential Shake™, Presidential Shake™ IR, Presidential Shake TL™ and Presidential Solaris™** are fiberglass reinforced, architectural asphalt roof shingles.
- 4.5 **Hatteras™, Highland Slate™ and Highland Slate™ IR** are fiberglass reinforced, 4-tab asphalt roof shingles.
- 4.6 **Patriot™** is a fiberglass reinforced asphalt roof strip-shingle (with no cut-outs) providing a laminated appearance through an intermittent shadow line with contrasting blend drops for color definition.
- 4.7 **Presidential Accessory, Accessory for Hatteras, Shangle Ridge™, Shadow Ridge™, Cedar Crest™, Cedar Crest™ IR, NorthGate Ridge and NorthGate Accessory** are fiberglass reinforced accessory shingles for hip and ridge installation.
- 4.8 Any of the above listed shingles may be produced in AR (algae resistant) versions.

5. **LIMITATIONS:**

- 5.1 This is a building code evaluation. Neither Trinity|ERD nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.
- 5.2 This Evaluation Report is not for use in the HVHZ
- 5.3 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.4 **Wind Classification:**
- 5.4.1 All shingles noted herein are Classified in accordance with **FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F** and/or **ASTM D7158, Class H**, indicating the shingles are acceptable for use in all wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph). Refer to Section 6 for installation requirements to meet this wind rating.
- 5.4.2 Presidential Accessory, Accessory for Hatteras, Shangle Ridge, Shadow Ridge, Cedar Crest, NorthGate Ridge and NorthGate Accessory hip & ridge shingles have been evaluated in accordance with **ASTM D3161, Class F**. **All except NorthGate Ridge and NorthGate Accessory require use of BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant, applied as specified in manufacturer's application instructions, for use in wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph).**
- 5.4.3 Classification by **ASTM D7158** applies to **exposure category B or C** and a **building height of 60 feet or less**. Calculations by a qualified design professional are required for conditions outside these limitations. Contact the shingle manufacturer for data specific to each shingle.
- 5.4.3.1 **Analysis in accordance with ASTM D7158** indicates the measured uplift resistance (R_T) for the CertainTeed asphalt roofing shingles listed in Section 4.1 through 4.6 (*except Presidential Solaris™*) exceeds the calculated uplift force (F_T) at a maximum design wind speed of $V_{asd} = 150$ mph ($V_{ult} = 194$ mph) for **residential buildings** located in **Exposure D conditions with no topographical variations (flat terrain)** having a **mean roof height less than or equal to 60 feet**. The shingles are permissible under Code for installation in these conditions using the installation procedures detailed in this Evaluation Report and CertainTeed minimum requirements, subject to minimum codified fastening requirements established within any local jurisdiction, which shall take precedence.
- 5.5 All products in the roof assembly shall have quality assurance audits in accordance with the Florida Building Code and F.A.C. Rule 61G20-3.

6. INSTALLATION:

- 6.1 Roof deck, slope, underlayment and fasteners shall comply with **FBC 1507.2 / R905.2** and the shingle manufacturer's minimum requirements.
- 6.1.1 Underlayment shall be acceptable to **CertainTeed Corporation** and shall hold current Florida Statewide Product Approval, or be Locally Approved per Rule 61G20-3, per **FBC Sections 1507.2.3, 1507.2.4 or R905.2.3**.
- 6.2 Installation of asphalt shingles shall comply with the **CertainTeed Corporation** current published instructions, using minimum four (4) nails per shingle in accordance with **FBC 1507.2.7 or Section R905.2.6** and the minimum requirements herein.
- 6.2.1 Fasteners shall be in accordance with manufacturer's published requirements, but not less than **FBC 1507.2.6 or R905.2.5**. Staples are not permitted.
- 6.2.2 Where the roof slope exceeds 21 units vertical in 12 units horizontal, use the "Steep Slope" directions.
- 6.3 CertainTeed asphalt shingles are acceptable for use in reroof (tear-off) or recover applications, subject to the limitations set forth in **FBC Section 1510** and CertainTeed published installation instructions.

CT20™, XT™ 25, XT™ 30, XT™ 30 IR:

LOW AND STANDARD SLOPE

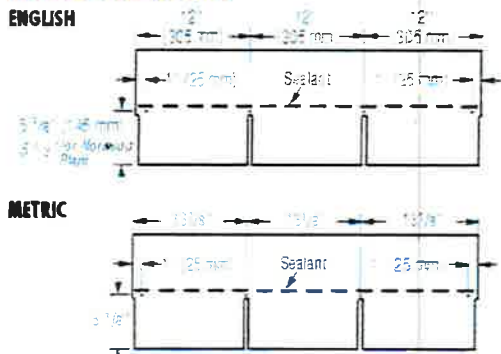


Figure 11-3: Use four nails for every full shingle

STEEP SLOPE

Use four nails and six spots of asphalt roofing cement* for every full shingle (Figure 11-4). Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

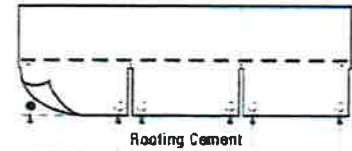


Figure 11-4: Use four nails and six spots of asphalt cement on steep slopes.

*CAUTION: Excessive use of roofing cement can cause shingles to blister.

6.4.1 **Hip & Ridge for CT20™, XT™ 25, XT™ 30, XT™ 30 IR: Cut Shingles**

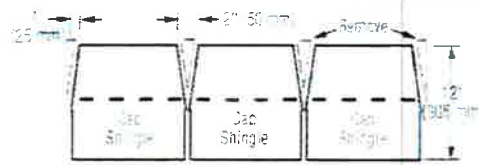


Figure 11-23: Cut tabs. Then trim back to make cap shingles (English dimensions shown)

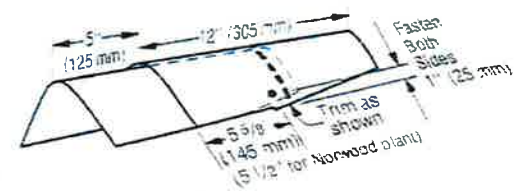


Figure 11-25: Installation of caps along the hips and ridges.

- 6.4.1.1 For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements.

6.5

ARCADIA™:

LOW AND STANDARD SLOPE

Use SIX nails for every full shingle located as shown below.

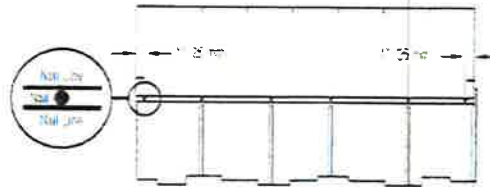


Figure 2: Use six nails for every full shingle.

STEEP SLOPE

Use SIX nails and FOUR spots of asphalt roofing cement for every full shingle as shown below. Apply asphalt roofing cement 1 (25 mm) from edge of shingle. Asphalt roofing cement meeting ASTM D 4586, Type II is suggested.



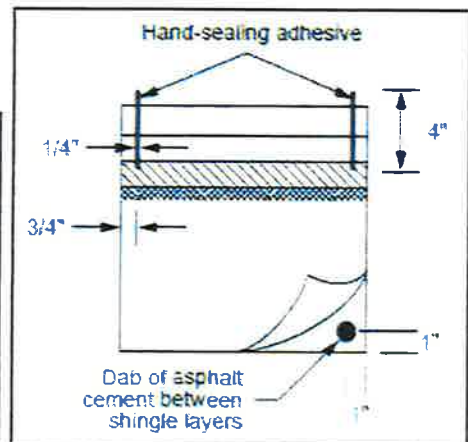
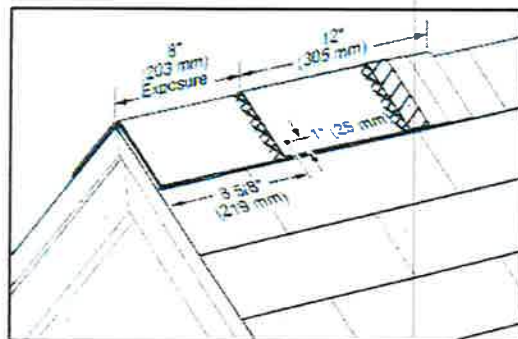
Figure 3: Use six nails and four spots of asphalt roofing cement on steep slopes.

6.5.1

Hip & Ridge for Arcadia™: Cedar Crest™, Cedar Crest™ IR

Use two (2), minimum 1¾-inch long fasteners per shingle. For the starter shingle, place fastener 1-inch from each side edge and about 2-inch up from the starter shingle's exposed butt edge, ensuring minimum ¾-inch embedment into the deck, or full penetration through the deck. For each full Cedar Crest shingle, place fasteners 8-5/8-inch up from its exposed butt edge and 1-inch from each side edge.

For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements, to hand-seal Cedar Crest shingles. Apply NP 1 or PL adhesive from the middle of the shingle's raised overlay on the top piece and extending approximately 4-inch along the sides of the headlap along a line ¾ to 1-inch from each side of the shingle's headlap. Immediately align and apply the overlying shingle, gently pressing tab sides into the adhesive, and install nails. To secure the other side, apply a 1-inch diameter spot of NP 1 or PL adhesive between the shingle layers.

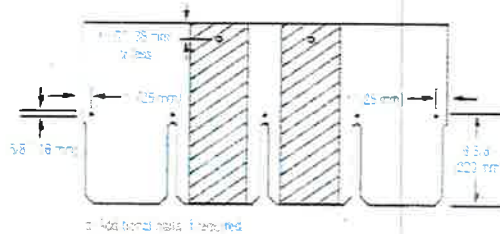


6.6

BELMONT™:

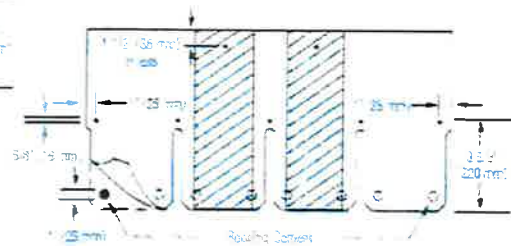
Low and Standard Slope (2:12 to 21:12):

Use FIVE nails for every full Belmont shingle located as shown below.



Steep Slope (greater than 21:12):

Use SEVEN nails and EIGHT spots of asphalt roofing cement™ for every full Belmont shingle. Apply asphalt roofing cement 1" (25mm) from edge of shingle. See below. Asphalt roofing cement meeting ASTM D4586 Type II is suggested.



6.6.1 **Hip & Ridge for Belmont™:**

6.6.1.1 **Option 1:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR hip and ridge shingles.

6.6.1.2 **Option 2: Shangle® Ridge**



Figure 17-18: Shangle® Ridge

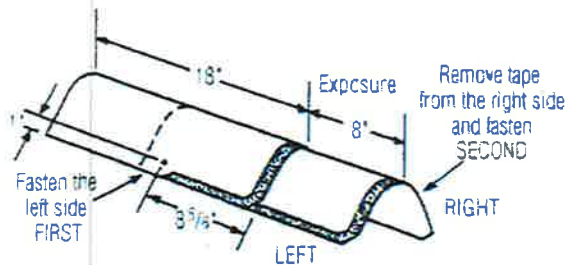


Figure 17-19: Installation of Shangle® Ridge shingles on hips and ridges.

6.6.1.3 For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements.

6.7 CARRIAGE HOUSE SHANGLE® AND GRAND MANOR SHANGLE®:

LOW AND STANDARD SLOPE

Use five nails for every full shingle.

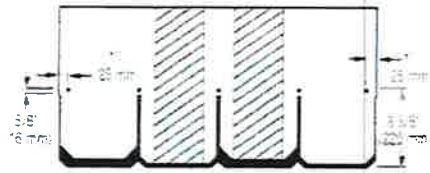


Figure 17-4: Use five nails for every full Grand Manor Shingle, Carriage House Shingle, or Centennial Slate.

STEEP SLOPE

Use seven nails and three spots of asphalt roofing cement for every full Grand Manor Shingle. Use five nails and three spots of asphalt roofing cement for every full Carriage House Shingle and Centennial Slate. Apply asphalt roofing cement 1" (25 mm) from edge of shingle (Figure 17-5). Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

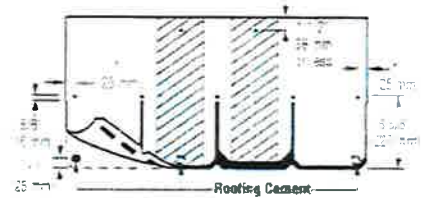


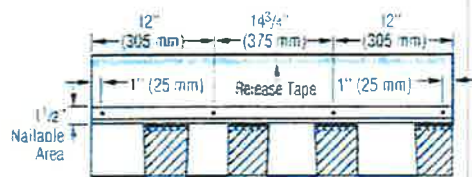
Figure 17-5: When installing Grand Manor Shingles on steep slopes, use seven nails and three spots of asphalt roofing cement.

6.7.1 Hip & Ridge for Carriage House Shingle® and Grand Manor Shingle: Refer to instructions herein for Shangle® Ridge hip and ridge shingles

6.8 LANDMARK™, LANDMARK™ IR, LANDMARK™ PRO, LANDMARK™ PREMIUM, LANDMARK™ TL, LANDMARK™ SOLARIS, LANDMARK™ SOLARIS IR, NORTHGATE:

LOW AND STANDARD SLOPE

METRIC DIMENSIONS



LANDMARK TL

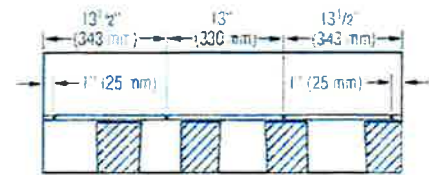
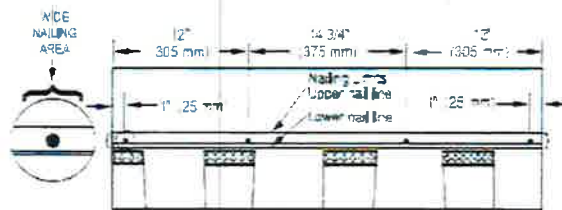


Figure 13-4: Use four nails for every full shingle.

NorthGate:

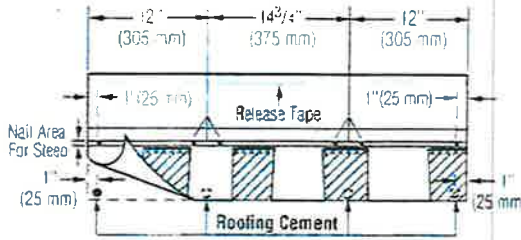


Nailing areas for low and standard slopes from 2:12 to 21:12. Nail between upper & lower lines as shown above.

STEEP SLOPE

Use six nails and four spots of asphalt roofing cement for every full laminated shingle. See below. Asphalt roofing cement should meet ASTM D4586 (Type I). Apply 1" spots of asphalt roofing cement under each corner and at about 12" to 13" in from each edge.

METRIC DIMENSIONS



LANDMARK TL

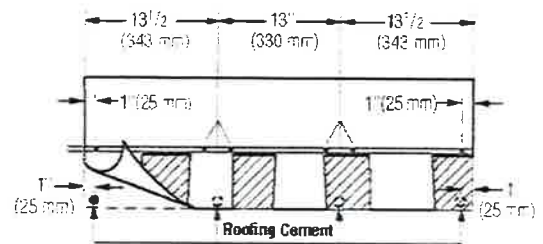
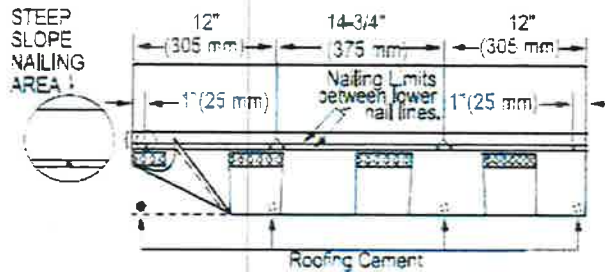


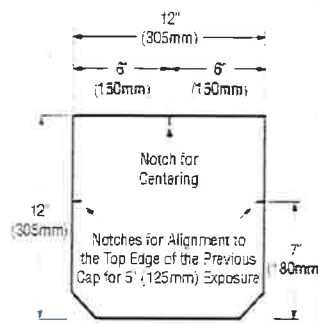
Figure 13-5. Use six nails and four spots of asphalt roofing cement on steep slopes.

NorthGate:

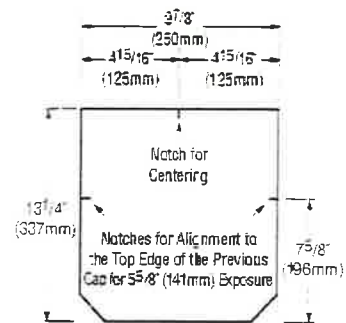


Nailing areas for steep slopes (greater than 21 1/2°) and "Storm-Nailing"
Nail between lower 2 nail lines as shown above.

- 6.8.1 **Hip & Ridge for Landmark™, Landmark™ IR, Landmark™ Pro, Landmark™ Premium, Landmark™ TL, Landmark™ Solaris, Landmark™ Solaris IR, NorthGate:**
- 6.8.1.1 **Option 1: Shadow Ridge™ or NorthGate Accessory**



**English Dimension
Shadow Ridge™**



**Metric Dimension
Shadow Ridge™**

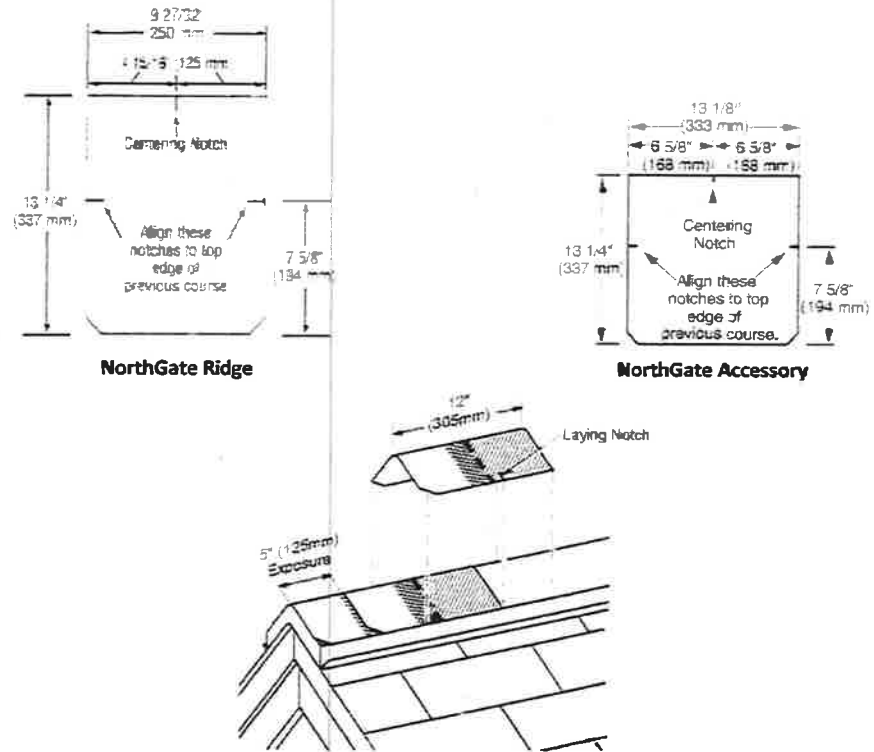


Figure 13-20: Use laying notches to center shingles on hips and ridges, and to locate the correct exposure.

- 6.8.1.2 For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements.
- 6.8.1.3 **Option 2:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR hip and ridge shingles.

6.9 PRESIDENTIAL SHAKE™, PRESIDENTIAL SHAKE™ IR, PRESIDENTIAL SHAKE TL™, PRESIDENTIAL SOLARIS™:

LOW AND STANDARD SLOPE:

For low and standard slopes, use five nails for each full Presidential shingle as shown below.

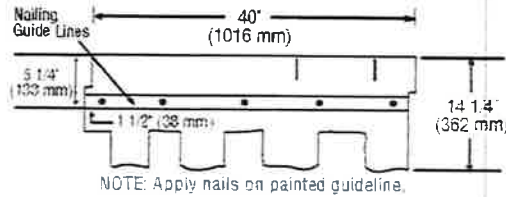


Figure 16-6: Fastening Presidential and Presidential TL Shake shingles on low and standard slopes.

STEEP SLOPE:

For steep slopes, use nine nails for each full Presidential shingle and apply 1" diameter spots of asphalt roofing cement under each shingle tab. After applying 5 nails in between the nailing guide lines, apply 4 nails 1" above tab cutouts making certain tabs of overlying shingle cover nails.

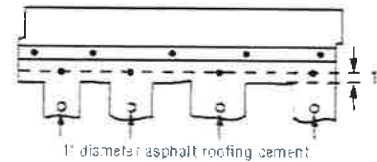


Figure 16-7: Fastening Presidential and Presidential TL Shake shingles on steep slopes.

6.9.1 Hip & Ridge for Presidential Shake™, Presidential Shake™ IR, Presidential Shake TL™, Presidential Solaris™:

6.9.1.1 Option 1: Presidential Accessory

PRESIDENTIAL ACCESSORY

Presidential accessory shingles can be used for covering hips and ridges. Apply shingles up to the ridge (expose no more than 7" from the bottom edge of the "tooth.") Fasten each accessory with two fasteners. The fasteners must be 1 3/4" long or longer, so they penetrate either 3/4" into the deck or completely through the deck. Presidential accessory comes in two different sizes: Accessory produced in Birmingham, AL is 12" x 12"; Portland, OR produces 9 7/8" x 13 1/4" accessory.

6.9.1.2 For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements.

6.9.1.3 Option 2: Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR hip and ridge shingles.

6.10 HATTERAS™:

LOW, STANDARD AND STEEP SLOPE:

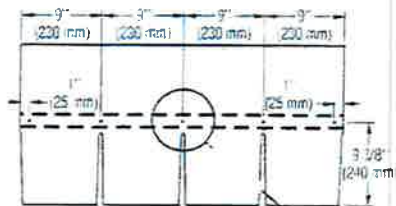


Figure 15-3: Fastening Hatteras Shingles on Low and Standard Slopes

For low and standard slopes, use five nails for each full Hatteras shingle as shown above.

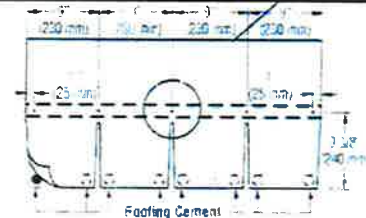


Figure 15-4: Fastening Hatteras Shingles on Steep Slopes

For steep slopes, use five nails and eight spots of asphalt roofing cement for each full Hatteras shingle as shown above. Apply 1" (25mm) diameter spots of roofing cement (ASTM D 4586 Type II suggested) under each tab corner. Press shingle into place. Do not expose cement.

CAUTION: Too much roofing cement can cause shingles to blister.

6.10.1 **Hip & Ridge for Hatteras™:**

6.10.1.1 **Option 1:** Accessory for Hatteras

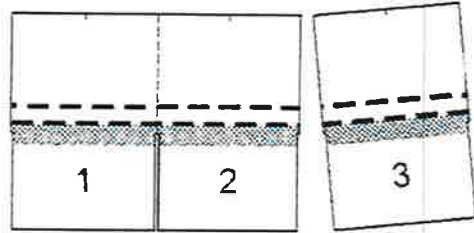
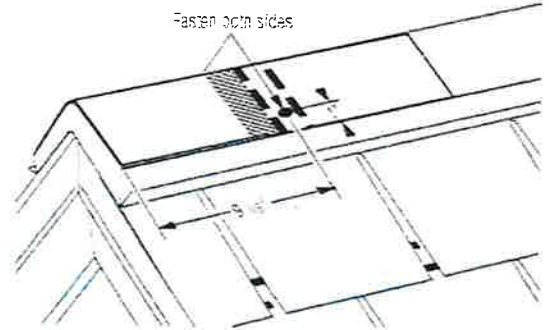


Figure 15-14: 18 three-piece units separate to make 54 Hatteras Accessory shingles.



6.10.1.2 **Option 2:** Cut Hatteras Shingles

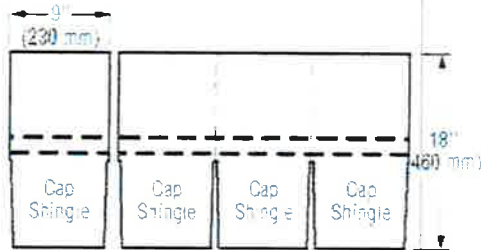


Figure 15-20: Cut Hatteras shingles to make cover cap.

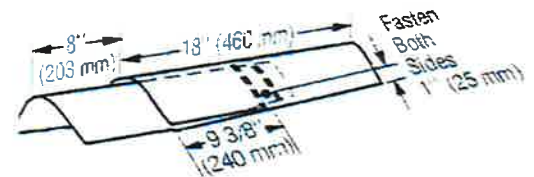


Figure 15-21: Installation of caps along hips and ridges.

6.10.1.3 For ASTM D3161, Class F performance use BASF "Sonolastic® NP1™" adhesive or Henkel "PL® Polyurethane Roof & Flashing Sealant", in accordance with CertainTeed requirements.

6.11 **HIGHLAND SLATE™, HIGHLAND SLATE™ IR:**

LOW AND STANDARD SLOPE:

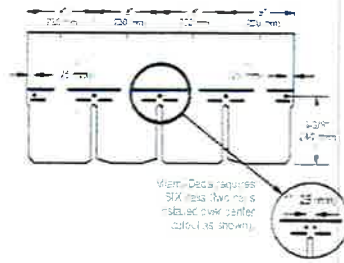


Figure 11-3: Use FIVE nails for every Highland Slate shingle

STEEP SLOPE:

Use FIVE nails and EIGHT spots of asphalt roofing cement* for each full Highland Slate shingle. For Miami-Dade, SIX nails are required. Apply 1" diameter spots of asphalt roofing cement under each tab corner. Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

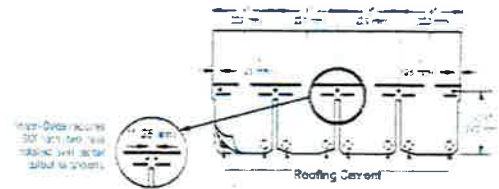


Figure 11-3A: Use FIVE nails and eight spots of asphalt roofing cement under each tab corner.

*CAUTION: Excessive use of roofing cement can cause shingles to blister.

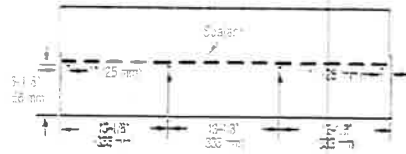
6.11.1 **Hip & Ridge for Highland Slate™, Highland Slate™ IR:** Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR or Shangle Ridge™ hip and ridge shingles.

6.12

PATRIOT™:

LOW AND STANDARD SLOPE

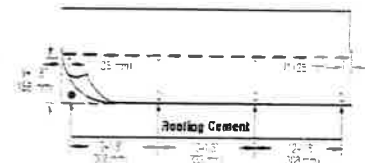
Use FOUR nails for every full shingle located as shown below.



STEEP SLOPE

Use FOUR nails and four spots of asphalt roofing cement for every full shingle as shown below. Asphalt roofing cement meeting ASTM D4586 Type II is suggested. Apply 1" (25 mm) spots of asphalt roofing cement as shown.

CAUTION: Excessive use of roofing cement can cause shingles to blister.



6.12.1 **Hip & Ridge for Patriot™:** Refer to instructions herein for **Cedar Crest™**, **Cedar Crest™ IR**, **Shadow Ridge™**, **NorthGate** or **Shangle Ridge™** hip and ridge shingles.

7. LABELING:

- 7.1 Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.
- 7.2 Asphalt shingle wrappers shall indicate compliance with one of the required classifications detailed in **FBC Table 1507.2.7.1 / R905.2.6.1**.

8. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

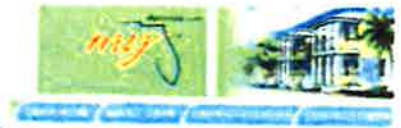
9. MANUFACTURING PLANTS:

Contact the named QA entity for information on which plants produce products covered by Florida Rule 61G20-3 QA requirements.

10. QUALITY ASSURANCE ENTITY:

UL LLC – QUA9625; (414) 248-6409; karen.buchmann@us.ul.com

- END OF EVALUATION REPORT -



[BCIS Home](#)
[Log In](#)
[User Registration](#)
[Hot Topics](#)
[Submit Surcharge](#)
[Stats & Facts](#)
[Publications](#)
[FBC Staff](#)
[BCIS Site Map](#)
[Links](#)
[Search](#)



Product Approval
USER: Public User

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



FL #	FL15216-R2
Application Type	Revision
Code Version	2014
Application Status	Approved
Comments	
Archived	
Product Manufacturer	InterWrap, Inc.
Address/Phone/Email	32923 Mission Way Mission, NON-US 00000 (551) 574-2939 mtupas@interwrap.com
Authorized Signature	Eduardo Lozano elozano@interwrap.com
Technical Representative	Eduardo Lozano
Address/Phone/Email	32923 Mission Way Mission, NON-US 00000 (778) 945-2891 elozano@interwrap.com
Quality Assurance Representative	
Address/Phone/Email	
Category	Roofing
Subcategory	Underlayments
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen
Florida License	PE-59166
Quality Assurance Entity	Intertek Testing Services NA, Inc.
Quality Assurance Contract Expiration Date	11/17/2017
Validated By	John W. Knezevich, PE ✓ Validation Checklist - Hardcopy Received
Certificate of Independence	FL15216 R2 COI 2015 01 CCI Nieminen.pdf
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	1507.2.3 1507.5.3 1507.8.3 1507.9.3 1507.9.5 T1507.8

Product Approval Method Method 2 Option B

Date Submitted 04/28/2015

Date Validated 04/29/2015

Date Pending FBC Approval 05/04/2015

Date Approved 06/23/2015

Summary of Products

FL #	Model, Number or Name	Description
15216.1	RhinoRoof Underlayments	Synthetic roof underlayments
Limits of Use Approved for use in MVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See ER Section 5 for Limits of Use.		Installation Instructions FL15216 R2 II 2015 04 FINAL ER INTERWRAP RHINOROOF FL15216-R2.pdf Verified By: Robert Nieminen PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL15216 R2 AE 2015 04 FINAL ER INTERWRAP RHINOROOF FL15216-R2.pdf Created by Independent Third Party: Yes

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

Contact Us :: 2601 Blair Stone Road, Tallahassee, FL 32399 Phone: 850-487-1824

The State of Florida is an AA/EEO employer. Copyright 2007-2013 State of Florida. :: [Privacy Statement](#) :: [Accessibility Statement](#) :: [Refund Statement](#)

Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1395. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licensees licensed under Chapter 455, F.S. must provide the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:



Credit Card
Safe



TRINITY ERD

EXTERIOR RESEARCH & DESIGN, LLC.

Certificate of Authorization #9503

353 CHRISTIAN STREET, UNIT #13

OXFORD, CT 06478

PHONE: (203) 262-9245

FAX: (203) 262-9243

EVALUATION REPORT

Interwrap, Inc.

32923 Mission Way

Mission, BC V2V-6E4

Canada

SCOPE:

This Evaluation Report is issued under Rule 61G20-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been evaluated for compliance with the 5th Edition (2014) Florida Building Code sections noted herein.

DESCRIPTION: RhinoRoof Underlayments

LABELING: Labeling shall be in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

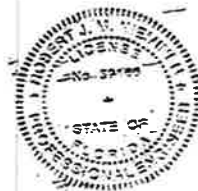
This Evaluation Report consists of pages 1 through 3.

Prepared by:



Robert J.M. Nieminen, P.E.

Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 04/27/2015. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

CERTIFICATION OF INDEPENDENCE:

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.
5. This is a building code evaluation. Neither Trinity|ERD nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.

ROOFING COMPONENT EVALUATION:

1. SCOPE:

Product Category: Roofing
Sub-Category: Underlayment

Compliance Statement: RhinoRoof Underlayments, as produced by Interwrap, Inc., has demonstrated compliance with the intent of following sections of the Florida Building Code through testing in accordance with applicable sections of the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

<u>Section</u>	<u>Properties</u>	<u>Standard</u>	<u>Year</u>
1507.2.3, 1507.5.3, T1507.8, 1507.8.3, 1507.9.3, 1507.9.5	Unrolling, Breaking Strength, Pliability, Loss on Heating	ASTM D226	2006
1507.2.3, 1507.5.3, 1507.8.3, 1507.9.3	Unrolling, Tear Strength, Pliability, Loss on Heating, Liquid Water Transmission, Breaking Strength, Dimensional Stability	ASTM D4869	2005

3. REFERENCES:

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
ITS (TST1509)	Physical Properties	100539395COQ-006	10/27/2011
ITS (TST1509)	Physical Properties	100539395COQ-002	10/27/2011
ITS (TST1509)	Physical Properties	100539395COQ-006	03/14/2014
ITS (QUA1673)	Quality Control	Inspection Report	11/17/2014

4. PRODUCT DESCRIPTION:

4.1 **RhinoRoof U20** is a multilayered polymer woven coated synthetic roof underlayment intended as an alternate to ASTM D226, Type I or Type II felt or D4869 Type II felt. RhinoRoof Underlayment is available in 42-inch wide rolls, and can be produced in various other sizes.

5. LIMITATIONS:

- 5.1 This is a building code evaluation. Neither Trinity ERD nor Robert Nieminen, P.E. are, in any way, the Designer of Record for any project on which this Evaluation Report, or previous versions thereof, is/was used for permitting or design guidance unless retained specifically for that purpose.
- 5.2 This Evaluation Report is not for use in the HVHZ.
- 5.3 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory or test report from accredited testing agency for fire ratings of this product.
- 5.4 RhinoRoof Underlayments may be used with any prepared roof cover where the product is specifically referenced within FBC approval documents. If not listed, a request may be made to the AHJ for approval based on this evaluation combined with supporting data for the prepared roof covering.
- 5.5 Allowable roof covers applied atop RhinoRoof Underlayments are follows:

TABLE 1: ROOF COVER OPTIONS						
Underlayment	Asphalt Shingles	Nail-On Tile	Foam-On Tile	Metal	Wood Shakes & Shingles	Slate or Simulated Slate
RhinoRoof U20	Yes	No	No	Yes	Yes	No

5.6 Exposure Limitations:

5.6.1 RhinoRoof Underlayment shall not be left exposed for longer than 30-days after installation.

6. INSTALLATION:

- 6.1 RhinoRoof Underlayments shall be installed in accordance with Interwrap, Inc. published installation instructions subject to the Limitations set forth in Section 5 herein and the specifics noted below.
- 6.2 Install RhinoRoof Underlayments in compliance with manufacturer's published installation instructions and the requirements for ASTM D226, Type I or II or D4869, Type II underlayments in FBC Sections 1507 for the type of prepared roof covering to be installed.

6.3 Re-fasten any loose decking panels, and check for protruding nail heads. Sweep the substrate thoroughly to remove any dust and debris prior to application.

6.4 RhinoRoof U20:

6.4.1 Fasteners:

For exposure \leq 24 hours, corrosion resistant fasteners may be 1-inch roofing nails with a 3/8-inch diameter head, or those noted in 6.4.2. The use of staples is prohibited.

For exposure $>$ 24 hours up to maximum 30 days, corrosion resistant fasteners shall be minimum 1-inch diameter plastic or metal cap nails or FBC HVHZ nails & 1-5/8" diameter tin caps (with the rough edge facing up). The use of staples is prohibited.

6.4.2 Single Layer; Roof Slope $>$ 4:12:

End (vertical) laps shall be minimum 6-inches and side (horizontal) laps shall be minimum 4-inches. Refer to Interwrap, Inc. recommendations for alternate lap configurations and/or the use of sealant under certain conditions.

For exposure \leq 24 hours, use of every-other fastening location printed on the surface is acceptable. For exposure $>$ 24 hours up to maximum 30-days, use of every fastening location printed on the surface is required.

When batten systems are to be installed atop the underlayment, the underlayment need only be preliminarily attached pending attachment of the battens on the same day. Battens shall not be positioned over cap nails. If this occurs, remove the cap nail and patch the hole in accordance with Interwrap published instructions.

6.4.3 Double Layer; 2:12 $<$ Roof Slope $<$ 4:12:

End (vertical) laps shall be minimum 12-inches and side (horizontal) laps shall be minimum half-sheet-width plus 1-inch.

Double layer application; begin by fastening a half-width plus 1-inch starter strip along the eaves. Place a full-width sheet over the starter, completely overlapping the starter course. Continue as noted in 6.5, but maintaining minimum half-width plus 1-inch side (horizontal) laps, resulting in a double-layer application.

7. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

8. MANUFACTURING PLANTS:

Contact the manufacturer or the named QA entity for information on plants covered under Rule 61G20-3 QA requirements.

9. QUALITY ASSURANCE ENTITY:

Intertek Testing Services NA Inc.-ETL/Warnock Hersey – QUA1573; (604) 520-3321

- END OF EVALUATION REPORT -