



**City of Belle Isle Job Site Card PLUMBING PERMIT 2018-08-086**

**PERMIT MUST BE POSTED ON SITE** - A permit expires in 6 months if approved inspections are not recorded /scheduled within that time frame. You are responsible for scheduling and keeping track of all your inspections -

Permit Number: 2018- 08-086  
Site Address: 3544 Country Lakes Dr32812  
Class:  Residential  
Description of Work: (1) Water Heater

Issue Date: 8/14/2018  
Parcel #: 20-23-30-4980-00-020  
Subdivision:

Issued To: Harvey Baker Plumbing, Inc  
Name: Baker, Harvey

Business Phone: 407 859 3572  
Contractor License # CFC056875

Payment Date & Method: 8 / 31 / 2018  Picked up by email  
 Visa  Master Card  Amex  Discover  Check / Money Order # VISA 3466

Schedule Inspections via Email at: [BDscheduling@universalengineering.com](mailto:BDscheduling@universalengineering.com)  
**SCHEDULE INSPECTIONS BY 3:00 PM CUT OFF TIME**  
**Inspection Results Will Be Sent Out the Following Business Day**

**"WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT."**

PLUMBING	INSPECTOR	DATE	COMMENTS
600 Sewer			
610 Underground			
620 Rough			
630 Above Ceiling			
640 Irrigation Final			
650 Final			

Inspection requests are to be emailed to [BDscheduling@UniversalEngineering.com](mailto:BDscheduling@UniversalEngineering.com); a confirmation email will be sent back to you upon scheduling. **Next-Day Inspection requests must be made by 3:00 pm.** Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.



**City of Belle Isle**  
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
 Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://www.universalengineering.com)

**RECEIVED**  
 AUG 28 2018

**APPLICATION FOR PLUMBING PERMIT**

**WARNING TO OWNER:** YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE OF APPLICATION: 8/27/18

PERMIT NUMBER 2018-08-086

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

Project Address 3544 Country Lake Dr Belle Isle FL 32809 32812

Property Owner Rowe Morris Alan Phone 407-493-1083

Property Owner's Mailing Address 3544 Country Lakes Dr City Orlando

State FL Zip Code 32812 Parcel Id Number: 20-23-30-4980-00-020

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  Alteration  Addition  Repair  Type of System: Sewer  Septic  Re-pipe

YOU MAY BE REQUIRED TO PROVIDE SEPTIC SYSTEM VERIFICATION FOR NEW / ALTERED / ADDITION to Septic System - **ORANGE COUNTY DOCUMENT 64E-6**

VALUATION OF JOB (labor & materials) \$ 1300.<sup>00</sup>

FIXTURES	Quantity
Water Closets (Toilet)	
Bathtubs	
Urinals	
Disposals	
Washing Machines	
Water Heaters	1
Sewer	
Catch Basins/Sumps	
Service Sink	
Lavatory (Bathroom Sink)	
Showers	
Sinks	

FIXTURES	Quantity
Dishwashers	
Laundry Tubs	
Floor Drains	
Grease Traps	
Trailer Connections	
Spa	
Solar	
Pool Piping	
Irrigation: (# Systems / # Heads)	
Water Softener	
Re-pipe	
Miscellaneous (Specify)	

\*Per FBC, Sec. 608, a Backflow Preventer must be installed & tested; the report must be posted with permit for Final Inspection

Building Official: SM Date 8-29-18  
 Verified Contractor's Licenses & Insurance are on file  Date 8-28-2018

Permit Fee	37
Review Fee	18.50
1% BCAIB Fee	2.14
1.5% DCA Fee	2.14
Total Permit Fee	59.50

**PAID BY VISA 3466 8.31.18**

I hereby certify that the above is true and correct to the best of my knowledge and make Application for Permit as outlined above, and if same is granted I agree to conform to all Florida Building Code Regulations and City Ordinances regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable Town and/or State of Florida codes and/or ordinances.

LICENSE HOLDER SIGNATURE [Signature] LICENSE # CFC 056875  
 LICENSE HOLDER NAME Harvey L Baker COMPANY NAME Harvey Baker Plumbing, Inc  
 Street Address 1019 28th St  
 City Orlando State FL Zip Code 32805 Phone Number 407-859-3572  
 Email Address marcia@harveybakerplumbing.com

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

Building Permit Number \_\_\_\_\_



RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



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

THE PLUMBING CONTRACTOR HEREIN IS CERTIFIED UNDER THE  
PROVISIONS OF CHAPTER 489, FLORIDA STATUTES

**BAKER, HARVEY LEWIS**

HARVEY BAKER PLUMBING INC  
1019 28TH ST  
ORLANDO FL 32805

**LICENSE NUMBER: CFC056875**

**EXPIRATION DATE: AUGUST 31, 2020**

Always verify licenses online at [MyFloridaLicense.com](http://MyFloridaLicense.com)



Do not alter this document in any form.

This is your license. It is unlawful for anyone other than the licensee to use this document.



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

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

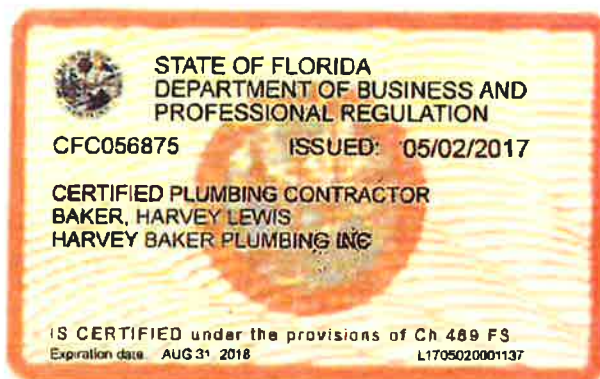
(850) 487-1395

**BAKER, HARVEY LEWIS  
HARVEY BAKER PLUMBING INC  
1019 28TH ST  
ORLANDO FL 32805**

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

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

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



DETACH HERE

RICK SCOTT, GOVERNOR

MATILDE MILLER, INTERIM SECRETARY

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

<b>LICENSE NUMBER</b>	
CFC056875	

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

**BAKER, HARVEY LEWIS  
HARVEY BAKER PLUMBING INC  
1019 28TH ST  
ORLANDO FL 32805**



ISSUED: 05/02/2017

DISPLAY AS REQUIRED BY LAW

SEQ # L1705020001137



HARVBAK-01

A YOUNG

# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

03/29/2018

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 have ADDITIONAL INSURED provisions or 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 Morse Insurance Agency, Inc 1000 Wekiva Springs Road Longwood, FL 32779	CONTACT NAME: Tara Hylands
	PHONE (A/C, No, Ext): (407) 478-6530 FAX (A/C, No):
	E-MAIL ADDRESS: thylands@morseagency.com
	INSURER(S) AFFORDING COVERAGE NAIC #
INSURED  Harvey Baker Plumbing Inc 1019 28th Street Orlando, FL 32805	INSURER A : Main Street America Protection Insurance Company 13026
	INSURER B : Old Dominion Insurance Co 40231
	INSURER C : BusinessFirst Insurance Company 11697
	INSURER D :
	INSURER E :
	INSURER F :

COVERAGES CERTIFICATE NUMBER: 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	AADDL SUBR INSD WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input checked="" type="checkbox"/> LOC <input type="checkbox"/> OTHER		MPP7814F	02/14/2018	02/14/2019	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Eq occurrence) \$ 500,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS ONLY <input checked="" type="checkbox"/> NON-OWNED AUTOS ONLY  UMBRELLA LIAB OCCUR EXCESS LIAB CLAIMS-MADE DED RETENTION \$		B1P7814F	02/14/2018	02/14/2019	COMBINED SINGLE LIMIT (Eq accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		03742	04/01/2018	04/01/2019	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 500,000 E.L. DISEASE - EA EMPLOYEE \$ 500,000 E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER  City of Belle Isle 1600 Nela Avenue Belle Isle, FL 32809	CANCELLATION  SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.  AUTHORIZED REPRESENTATIVE 
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**Scott Randolph, Tax Collector      Local Business Tax Receipt      Orange County, Florida**

This local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

2017      **EXPIRES 9/30/2018**      5000-0613592  
5000 BUSINESS OFFICE      \$30.00      3      EMPLOYEE ;

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

BAKER MARCIA L PRESIDENT

HARVEY BAKER PLUMBING INC  
BAKER MARCIA L PRESIDENT  
1019 28TH ST  
ORLANDO FL 32805

1019 28TH ST  
U - ORLANDO, 32805

PAID \$30.00 0098-00773321 7/7/2017

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HARVEY BAKER PLUMBING INC  
BAKER MARCIA L PRESIDENT  
1019 28TH ST  
ORLANDO FL 32805

1019 28TH ST  
U - ORLANDO, 32805

PAID: \$30.00 0098-00773321 7/7/2017

This receipt is official when validated by the Tax Collector.