



City of Belle Isle Job Site Card **Roof PERMIT 2018-08-033**

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 2018-08-033

Issue Date 8/14/2018

Site Address: 5370 Jade Cir 32812

Parcel Number: 20-23-30-4395-00-470

Class: Residential

Subdivision:

Description of Work: **Re-roof 3900 SQFT - Asphalt Shingles 600 SQFT - Modified Bitumen**

Issued To: ROOFING PIONEERS LLC

Business Phone: 407 453-2222

Name: CONTE, JARED WILLIAM

Contractor License CCC1329030

Payment Date & Method: **8 /14 / 2018** Picked up by _____

Visa Master Card Amex Discover Check / Money Order # 9293

Schedule Inspections via Email at: BD scheduling@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."

ROOF	INSPECTOR	DATE	COMMENTS
NEW ROOFS ONLY Code 700 Deck Nailing, Dry-In, Flashing			
Both new & re-roof Code 710 In - Progress			
Both new & re-roof Code 720 Final			

Inspection requests are to be emailed to BD scheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling.

Next-Day Inspection requests must be made by 3:00 p.m.

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

RECEIVED
AUG 13 2018

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.

208-08-033

DATE OF APPLICATION: _____

ROOF PERMIT NUMBER 208-08-033

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

Project Address 5370 Jade Cir, Belle Isle, FL 32812, Belle Isle, FL 32809 32812

Property Owner Vince & Crista McGinley Phone 786-640-3096

Property Owner's Mailing Address 5370 Jade Cir, Belle Isle, FL 32812 City _____

State _____ Zip Code _____ Parcel Id Number: 20-23-30-4395-00-470

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

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

Type of Work: New Roof ReRoof

- REQUIRED!** Florida Product Approval Screen Printout from www.floridabuilding.org for the Covering & Underlayment Products

Please indicate the nature of work by completing the information below:

IS = 17,700

Roof Square Footage: 4500 Number of Stories: 1 Job Valuation: \$ 15141

Type: Asphalt Shingles Metal Modified Bitumen Other: _____

3900 square feet = 11,700 - 600 square feet = 6,000

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 Jared Conte LICENSE # CCC1329030

LICENSE HOLDER NAME Jared Conte COMPANY NAME Roofing Pioneers, LLC

Street Address 1809 E Broadway St, Suite 353, Oviedo, FL 32765

City _____ State _____ Zip Code _____ Phone Number 407-453-2222

Email Address jared@roofingpioneers.com

Zoning Fee \$ (30.-) see below

Building Official: SM Date 8-14-18

Verified Contractor's Licenses & Insurance are on file NOCV Date 8-13-2018

Building Fee	\$ <u>110.-</u>
Zoning Fee	\$ <u>30.-</u>
1% BCAIB Fee	\$ <u>2.00</u>
1.5% DCA Fee	\$ <u>2.00</u>
Total Permit Fee	\$ <u>144.00</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.

1ST 17x5 1K 25 85 110

PAID
8-14-18
MC 9293

Permit Number: 2018-08-033
Folio/Parcel Identification Number: 20-23-30-4395-00-470
Prepared by: Jared Conte
jared@roofingpioneers.com
Return to: Roofing Pioneers, LLC
1945 West County Road 419, Suite 1141-216
Oviedo, FL 32766

NOTICE OF COMMENCEMENT

State of Florida, County of Orange
The undersigned hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

- Description of property** (legal description of the property, and street address if available)
LAKE CONWAY SHORES 7/50 LOT 47 5370 Jade Cir Belle Isle, FL 32812
- General description of improvement**
Re-roof
- Owner information or Lessee information if the Lessee contracted for the improvement**
Name Mcginley Vince Mcginley Crista
Address 5370 Jade Cir Belle Isle, FL 32812
Interest in Property Owner
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
- Contractor**
Name Roofing Pioneers, LLC Telephone Number 407-453-2222
Address 1945 West County Road 419, Suite 1141-216, Oviedo, FL 32766
- Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name _____ Telephone Number _____
Address _____
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name _____ Telephone Number _____
Address _____
- In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name _____ Telephone Number _____
Address _____
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified) _____

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

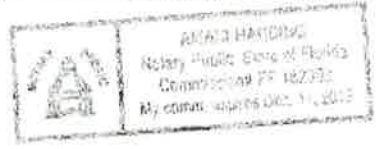
[Signature] _____ Owner
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager Signatory's Title/Office

The foregoing instrument was acknowledged before me this 17 day of July, 2018 by Vincent McGinley
month/year name of person

as the Owner for Owner
Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed

[Signature] _____ Amara Hardin
Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known _____ OR Produced ID
Type of ID Produced PLD



State of FLORIDA, County of ORANGE.
Per §668.50, F.S., which defines and permits electronic signatures,
I certify that this is a true copy of the document as reflected in the
Official Records.
PHIL DIAMOND, COUNTY COMPTROLLER



By Janellie Rivera at 3:11 pm, Jul 17, 2018
Deputy Comptroller Date



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

DATE: August 13, 2018

PERMIT # 2018-08-033

PROJECT ADDRESS 5370 Jade Cir, Belle Isle, FL 32812, Belle Isle, FL 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 PA#, approval and code edition stamped**
3. **Manufacturer's *installation* details from FloridaBuilding.org and requirements for each product stamped**

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
EXTERIOR DOORS				WALL PANELS			
Swinging				Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Db1 Hung				Asphalt Shingles	Atlas	Pinnacle	FL 16305
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Underlayment	Atlas	Summit 180	FL 21350
Skylights				Other	Certainteed	Flintlastic GTA	FL 2533
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 

Date August 13, 2018



Product Approval
USER: Public User

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

OFFICE OF THE SECRETARY

FL #	FL16305-R6												
Application Type	Revision												
Code Version	2017												
Application Status	Approved												
Comments													
Archived	<input type="checkbox"/>												
Product Manufacturer Address/Phone/Email	Atlas Roofing Corporation 2000 RiverEdge Parkway Suite 800 Atlanta, GA 30328 (770) 946-4571 mcollins@atlasroofing.com												
Authorized Signature	Meldrin Collins mcollins@atlasroofing.com												
Technical Representative Address/Phone/Email													
Quality Assurance Representative Address/Phone/Email													
Category Subcategory	Roofing Asphalt Shingles												
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received												
Florida Engineer or Architect Name who developed the Evaluation Report	Zachary R. Priest												
Florida License	PE-74021												
Quality Assurance Entity	UL LLC												
Quality Assurance Contract Expiration Date	12/31/2020												
Validated By	Locke Bowden <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received												
Certificate of Independence	FL16305_R6_COI_ATL13002.6_2017_FBC_Eval_Report_Shingles_final.pdf												
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D 3161</td> <td>2016</td> </tr> <tr> <td>ASTM D 3462</td> <td>2010</td> </tr> <tr> <td>ASTM D 7158</td> <td>2011</td> </tr> <tr> <td>TAS 100</td> <td>1995</td> </tr> <tr> <td>TAS 107</td> <td>1995</td> </tr> </tbody> </table>	Standard	Year	ASTM D 3161	2016	ASTM D 3462	2010	ASTM D 7158	2011	TAS 100	1995	TAS 107	1995
Standard	Year												
ASTM D 3161	2016												
ASTM D 3462	2010												
ASTM D 7158	2011												
TAS 100	1995												
TAS 107	1995												
Equivalence of Product Standards Certified By													
Sections from the Code													

Product Approval Method

Method 1 Option D

Date Submitted

09/30/2017

Date Validated

10/03/2017

Date Pending FBC Approval

10/04/2017

Date Approved

12/12/2017

Summary of Products

FL #	Model, Number or Name	Description
16305.1	Atlas Shingles	Fiberglass reinforced laminated asphalt shingles
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See evaluation report for limits of use		Installation Instructions FL16305_R6_IL_ATL13002.6 2017 FBC Eval Report Shingles final.pdf Verified By: Zachary R. Priest 74021 Created by Independent Third Party: Yes Evaluation Reports FL16305_R6_AE_ATL13002.6 2017 FBC Eval Report Shingles final.pdf Created by Independent Third Party: Yes

[Back](#)

[Next](#)

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

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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:





EVALUATION REPORT

FLORIDA BUILDING CODE 6TH EDITION (2017)

Manufacturer: ATLAS ROOFING CORPORATION
 2000 Riveredge Parkway, Suite 800
 Atlanta, GA 30328
 (770) 612-6267

Issued September 30, 2017

Manufacturing Plants: Hampton, GA
 Meridian, MS
 Dangerfield, TX
 Ardmore, OK
 Franklin, OH

Quality Assurance: UL LLC (QUA9625)

SCOPE

Category: Roofing
Subcategory: Asphalt Shingles
Code Sections: 1504.1.1, 1507.2.5, 1507.2.7.1, 1523.6.5.1
Properties: Physical properties, Wind Resistance, Wind Driven Rain

PRODUCT DESCRIPTION

Legend (Ardmore)	ASTM D 3161, Class F fiberglass reinforced, 3-tab asphalt shingle with a dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.
GlassMaster® 30 (Ardmore & Hampton)	ASTM D 3161, Class F fiberglass reinforced, 3-tab asphalt shingle with a dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.
Tough-Master® 20 (Ardmore & Hampton)	ASTM D 3161, Class F fiberglass reinforced, 3-tab asphalt shingle with a dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.
Pro-Cut® Hip & Ridge (Ardmore & Hampton)	ASTM D 3161, Class F fiberglass reinforced, hip and ridge asphalt shingle with a dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.
Pro-Cut® Starter Strip (Hampton)	ASTM D 3161, Class F fiberglass reinforced, starter asphalt shingle with a dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.
ProLAM™ Architectural (Hampton, Franklin & Meridian)	ASTM D 3161, Class F & ASTM D 7158, Class H fiberglass reinforced, laminated architectural asphalt shingle with a dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.
Pinnacle® Pristine, Pinnacle® Pristine Lifetime w/Scotchgard (Dangerfield, Hampton, Franklin & Meridian)	ASTM D 3161, Class F & ASTM D 7158, Class H fiberglass reinforced, laminated architectural asphalt shingle with two, dashed, thermally-activated, self-sealing sealant stripes that complies with ASTM D 3462.
StormMaster® Shake (Dangerfield)	ASTM D 3161, Class F & ASTM D 7158, Class H fiberglass reinforced, laminated architectural modified asphalt shingle with two, dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.

**StormMaster® Slate
(Ardmore)**

ASTM D 3161, Class F & ASTM D 7158, Class H fiberglass reinforced, laminated architectural modified asphalt shingle with two, dashed, thermally-activated, self-sealing sealant stripe that complies with ASTM D 3462.

REFERENCES

<u>Entity</u>	<u>Report No.</u>	<u>Standard</u>	<u>Year</u>
PRI Construction Materials Technologies (TST5878)	ATL-079-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-083-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-086-02-01 Rev 1	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-104-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-106-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-106-02-01 Rev 1	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-107-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-107-02-01.1	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-109-02-01	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-116-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-118-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-119-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-123-02-01	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-125-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-127-02-01 Rev 1	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-132-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-133-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-135-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-136-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-137-02-01 Rev 1	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-138-02-01 Rev 1	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-143-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-144-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-151-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-162-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-167-02-01	ASTM D 3161	2016
PRI Construction Materials Technologies (TST5878)	ATL-168-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-169-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-170-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-171-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-172-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-174-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-179-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-184-02-01	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-185-02-01	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-186-02-01	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-187-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-220-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-220-02-02	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-220-02-03	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-220-02-04	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-221-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-221-02-02	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-221-02-03	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-221-02-04	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-222-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-222-02-02	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-222-02-03	ASTM D 3161	2016

<u>Entity</u>	<u>Report No.</u>	<u>Standard</u>	<u>Year</u>
PRI Construction Materials Technologies (TST5878)	ATL-222-02-04	TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-223-02-01	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-223-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-223-02-02	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-223-02-03	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-223-02-04	ASTM D 7158	2011
PRI Construction Materials Technologies (TST5878)	ATL-224-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-225-02-01	ASTM D 3462	2010A
PRI Construction Materials Technologies (TST5878)	ATL-225-02-02	TAS 100	1995
PRI Construction Materials Technologies (TST5878)	ATL-225-02-03	ASTM D 3161	2016
		TAS 107	1995
PRI Construction Materials Technologies (TST5878)	ATL-225-02-04	ASTM D 7158	2011

Pinnacle® Pristine & StormMaster® Shake

Basic Wind Speed (V_{ult}):	Max. 194 mph
Basic Wind Speed (V_{asd}):	Max. 150 mph
Deck (HVHZ):	In accordance with FBC requirements; Solidly sheathed min. 19/32 in. plywood or wood plank for new construction; Min. 15/32 in. plywood existing construction.
Deck (Non-HVHZ):	In accordance with FBC requirements; Solidly sheathed min. 15/32 in. plywood or wood plank for new construction; Min. 7/16 in. OSB existing construction.
Underlayment:	In accordance with FBC requirements.
Min. slope:	2:12 and in accordance with FBC requirements. Contact the Atlas Roofing Corporation when installing at slope greater than 21:12.
Installation (HVHZ):	Installed with 6 in. exposure in accordance with RAS 115 and manufacturer's published installation instructions. Shingles shall be attached using "6 Nail Pattern" detailed below.
Installation (Non-HVHZ):	Installed with 6 in. exposure in accordance with FBC requirements and manufacturer's published installation instructions. Shingles shall be attached using either "4 Nail Pattern" or "6 Nail Pattern" detailed below.

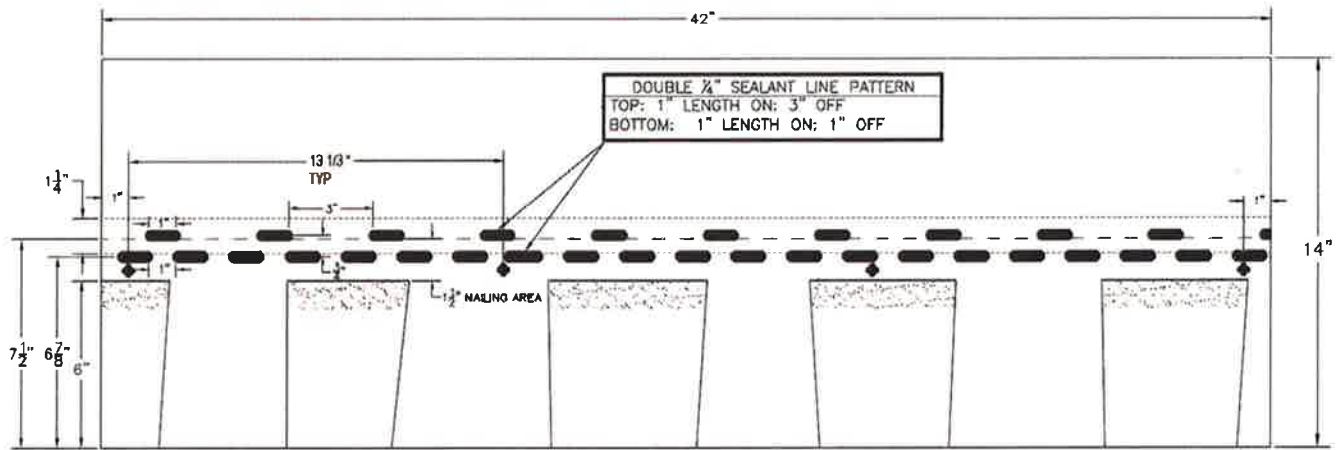


Figure 7. Pinnacle® Pristine and StormMaster® Shake 4 Nail Pattern (Non-HVHZ only)

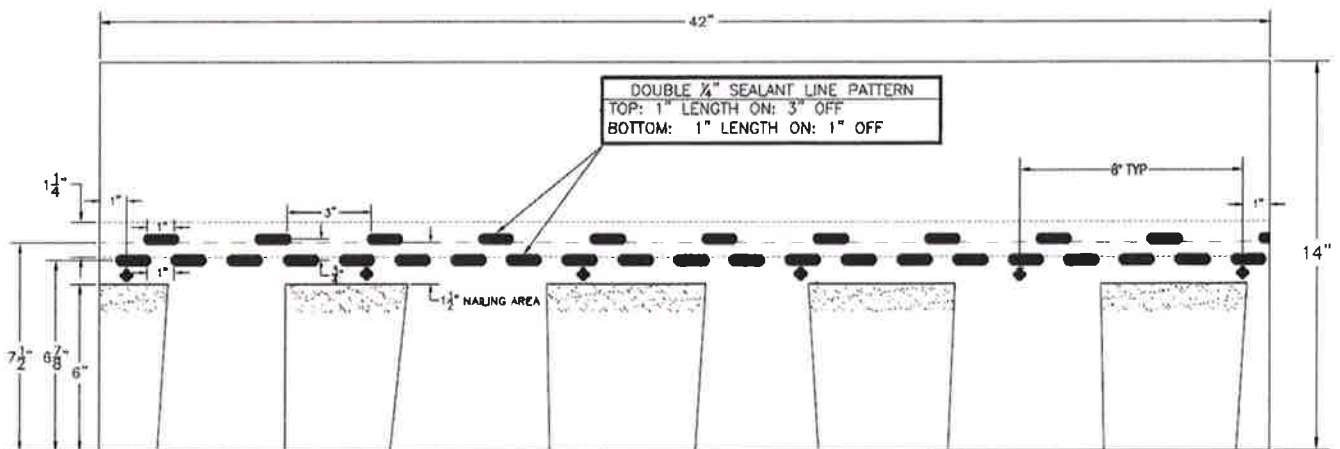


Figure 8. Pinnacle® Pristine and StormMaster® Shake 6 Nail Pattern

Pro-Cut® Starter Strip	Basic Wind Speed (V_{ult}): Max. 194 mph Basic Wind Speed (V_{asd}): Max. 150 mph Deck (HVHZ): In accordance with FBC requirements; Solidly sheathed min. 19/32 in. plywood or wood plank for new construction; Min. 15/32 in. plywood existing construction. Deck (Non-HVHZ): In accordance with FBC requirements; Solidly sheathed min. 15/32 in. plywood or wood plank for new construction; Min. 7/16 in. OSB existing construction. Underlayment: In accordance with FBC requirements. Min. slope: 2:12 and in accordance with FBC requirements. Contact the Atlas Roofing Corporation when installing at slope greater than 21:12. Installation (HVHZ): Installed in accordance with RAS 115 and manufacturer's published installation instructions. Shingles shall be attached as shown below. Installation (Non-HVHZ): Installed in accordance with FBC requirements and manufacturer's published installation instructions. Shingles shall be attached as shown below.
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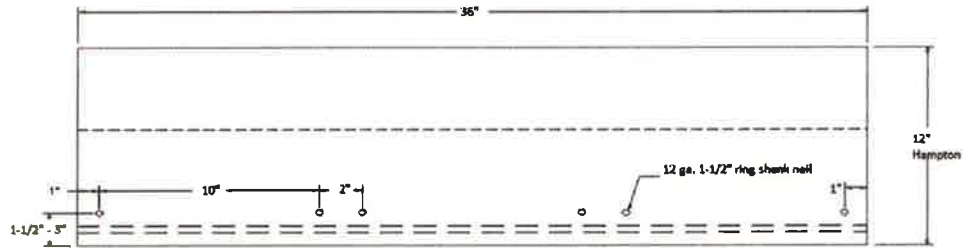


Figure 11. Pro-Cut® Starter Strip

Pro-Cut® Hip & Ridge	Basic Wind Speed (V_{ult}):	Max. 194 mph
	Basic Wind Speed (V_{asd}):	Max. 150 mph
	Deck (HVHZ):	In accordance with FBC requirements; Solidly sheathed min. 19/32 in. plywood or wood plank for new construction; Min. 15/32 in. plywood existing construction.
	Deck (Non-HVHZ):	In accordance with FBC requirements; Solidly sheathed min. 15/32 in. plywood or wood plank for new construction; Min. 7/16 in. OSB existing construction.
	Underlayment:	In accordance with FBC requirements.
Min. slope:	2:12 and in accordance with FBC requirements.	
Installation (HVHZ and non-HVHZ):	Installed with 5-5/8 inch exposure in accordance with RAS 115 (HVHZ only) and manufacturer's published installation instructions. The direction of the exposed end shall be away from the prevailing wind.	

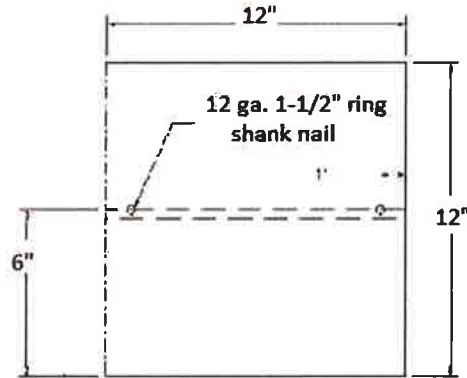


Figure 12. Pro-Cut® Hip & Ridge

LIMITATIONS

- 1) Fire Classification is not within the scope of this evaluation.
- 2) The roof deck and the roof deck attachment shall be designed by others to meet the minimum design loads established for components and cladding and in accordance with FBC requirements.
- 3) The mean roof height shall be restricted to a maximum 33 ft in the HVHZ.
- 4) Classification to ASTM D 7158 applies to exposure B & C with a building mean roof height of 33-ft or less.
- 5) Deck substrates shall be clean, dry, and free from any irregularities and debris. All fasteners in the deck shall be checked for protrusion and corrected prior to underlayment application.
- 6) Shingles shall be installed starting at the eave in horizontal layers such that the laps shed water from the deck.
- 7) Installation of the evaluated products shall comply with this report, the FBC, and the manufacturer's published application instructions. Where discrepancies exist between these sources, the more restrictive and code compliant detail shall prevail.
- 8) All products listed in this report shall be manufactured under a quality assurance program in compliance with Rule 61G20-3.

COMPLIANCE STATEMENT

The products evaluated herein by Zachary R. Priest, P.E. have demonstrated compliance with the Florida Building Code, 6th Edition (2017) as evidenced in the referenced documents submitted by the named manufacturer.


Digitally signed by Zachary R. Priest

2017.09.3
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Zachary R. Priest, P.E.
Florida Registration No. 74021
Organization No. ANE9641

CERTIFICATION OF INDEPENDENCE

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

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

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

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

END OF REPORT



Product Approval
USER: Public User

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



FL #	FL21350-R1
Application Type	Revision
Code Version	2017
Application Status	Approved
Comments	The QA entity has been called into question.10/16/17
Archived	<input type="checkbox"/>
Product Manufacturer	Atlas Roofing Corporation
Address/Phone/Email	2000 RiverEdge Parkway Suite 800 Atlanta, GA 30328 (770) 946-4571 mcollins@atlasroofing.com
Authorized Signature	Meldrin Collins mcollins@atlasroofing.com
Technical Representative	
Address/Phone/Email	
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 <input type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Zachary R. Priest
Florida License	PE-74021
Quality Assurance Entity	Intertek Testing Services NA, Inc. - QA Entity
Quality Assurance Contract Expiration Date	12/31/2099
Validated By	Locke Bowden <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	FL21350_R1_COI_ATL16001.1_2017_FBC_Eval_Report_Summit_Underlayments_final.pdf
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	1507.1.1
Product Approval Method	Method 2 Option B

Date Submitted 09/30/2017
 Date Validated 10/04/2017
 Date Pending FBC Approval 10/08/2017
 Date Approved 12/12/2017

Summary of Products

FL #	Model, Number or Name	Description
21350.1	Summit Underlayments	Mechanically attached, synthetic underlayments used as an alternative to ASTM D 226 Type I and II underlayment.
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: See evaluation report for limits of use.		Installation Instructions FL21350_R1_II_ATL16001.1 2017 FBC Eval Report Summit Underlayments final.pdf Verified By: Zachary R. Priest PE-74021 Created by Independent Third Party: Yes Evaluation Reports FL21350_R1_AE_ATL16001.1 2017 FBC Eval Report Summit Underlayments final.pdf Created by Independent Third Party: Yes

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

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

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EVALUATION REPORT

FLORIDA BUILDING CODE, 6TH EDITION (2017)

Manufacturer: ATLAS ROOFING CORPORATION *Issued September 30, 2017*
 2000 Riveredge Parkway, Suite 800
 Atlanta, GA 30328
 (770) 612-6267
www.atlasroofing.com

Manufacturing Locations: Hebei, China

Quality Assurance: Intertek Testing Services NA Inc. (QUA1673)

SCOPE

Category: Roofing
Subcategory: Underlayments
Code Sections: 1507.1.1
Properties: Physical properties

REFERENCES

<u>Entity</u>	<u>Report No.</u>	<u>Standard</u>	<u>Year</u>
Intertek Testing Services NA, Inc. (EVL11327)	CCRR-1038	AC 188	2012
Intertek Testing Services NA, Inc. (EVL11327)	CCRR-1038	ASTM D 226	2009
Intertek Testing Services NA Ltd. (TST1509)	141128020SHJ-BP-1	AC 188	2012

PRODUCT DESCRIPTION

- Summit 30** A mechanically attached, synthetic underlayment used an alternative to ASTM D 226, Type I and Type II roofing underlayments. The roll is available in 48-inch wide x 150-ft long format and weighs approximately 20 lbs.
- Summit 60** A mechanically attached, synthetic underlayment used an alternative to ASTM D 226, Type I and Type II roofing underlayments. The roll is available in 48-inch wide x 150-ft long format and weighs approximately 23 lbs.
- Summit 180** A mechanically attached, synthetic underlayment used an alternative to ASTM D 226, Type I and Type II roofing underlayments. The roll is available in 48-inch wide x 150-ft long format and weighs approximately 30 lbs.
- Summit 190** A mechanically attached, synthetic underlayment used an alternative to ASTM D 226, Type I and Type II roofing underlayments. The roll is available in 48-inch wide x 150-ft long format and weighs approximately 38 lbs.

APPLICATION INSTRUCTIONS

- Deck Type:** The roof deck shall be constructed of closely fitted, solid sheathing for new or existing construction. Sheathing shall be installed in accordance with FBC requirements. Roof decks shall have no more than 1/8" gap at abutting joints.
- Attachment method:** Underlayment shall be attached in accordance with the FBC and manufacturer's installation instructions. The underlayment is installed starting at the eave, with the length of the roll parallel to the eave with the printed side facing up. All side laps shall be installed to shed water from the deck. End laps shall be staggered between courses in accordance with the manufacturer's application instructions. Minimum application temperature shall be 50°F.
- Allowable roof coverings:** Mechanically fastened roof coverings as prescribed in FBC Table 1507.1.1 shall be permitted.

LIMITATIONS

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

COMPLIANCE STATEMENT

The products evaluated herein by Zachary R. Priest, P.E. have demonstrated compliance with the Florida Building Code, 6th Edition (2017) as evidenced in the referenced documents submitted by the named manufacturer.



A handwritten signature in black ink that reads "Z.R. Priest". Below the signature is a small red line with the text "Digitally signed by Zachary R. Priest".

2017.09.30
12:51:10
-04'00'

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

CERTIFICATION OF INDEPENDENCE

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

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

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

END OF REPORT



Product Approval
USER: Public User

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



FL #	FL2533-R19																
Application Type	Revision																
Code Version	2017																
Application Status	Approved																
Comments																	
Archived	<input type="checkbox"/>																
Product Manufacturer	CertainTeed Corporation-Roofing																
Address/Phone/Email	20 Moores Road Malvern, PA 19355 (610) 893-5400 mark.d.harner@saint-gobain.com																
Authorized Signature	Mark Harner mark.d.harner@saint-gobain.com																
Technical Representative	Mark D. Harner																
Address/Phone/Email	18 Moores Road Malvern, PA 19355 (610) 651-5847 Mark.D.Harner@saint-gobain.com																
Quality Assurance Representative																	
Address/Phone/Email																	
Category	Roofing																
Subcategory	Modified Bitumen Roof System																
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer <input type="checkbox"/> Evaluation Report - Hardcopy Received																
Florida Engineer or Architect Name who developed the Evaluation Report	Robert Nieminen																
Florida License	PE-59166																
Quality Assurance Entity	UL LLC																
Quality Assurance Contract Expiration Date	03/09/2020																
Validated By	John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received																
Certificate of Independence	FL2533 R19 COI 2017 01 COI Nieminen.pdf																
Referenced Standard and Year (of Standard)	<table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D6162</td> <td>2008</td> </tr> <tr> <td>ASTM D6163</td> <td>2008</td> </tr> <tr> <td>ASTM D6164</td> <td>2011</td> </tr> <tr> <td>ASTM D6222</td> <td>2011</td> </tr> <tr> <td>ASTM D6509</td> <td>2009</td> </tr> <tr> <td>FM 4470</td> <td>2012</td> </tr> <tr> <td>FM 4474</td> <td>2011</td> </tr> </tbody> </table>	Standard	Year	ASTM D6162	2008	ASTM D6163	2008	ASTM D6164	2011	ASTM D6222	2011	ASTM D6509	2009	FM 4470	2012	FM 4474	2011
Standard	Year																
ASTM D6162	2008																
ASTM D6163	2008																
ASTM D6164	2011																
ASTM D6222	2011																
ASTM D6509	2009																
FM 4470	2012																
FM 4474	2011																
Equivalence of Product Standards Certified By																	

**TABLE 1E-2: WOOD DECKS – NEW CONSTRUCTION, REROOF (TEAR-OFF) OR RECOVER
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Deck (Note 1)	Base Sheet			Roof Cover (Note 14)		MDP (psf)
		Base	Fasteners	Attach	Ply	Cap	
W-89	Min. 15/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; Poly SMS Base; Ultra Poly SMS Base; Yosemite	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD; OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at 4-inch lap and 6-inch o.c. in three (3), equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-97.5
W-90	Min. 15/32-inch plywood at max 24-inch spans	Flintlastic APP Base T	OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at 4-inch lap and 6-inch o.c. in three (3), equally spaced, staggered center rows.	APP-TA	APP-TA	-97.5
W-91	Min. 15/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; All Weather / Empire Base; Poly SMS Base; Ultra Poly SMS Base; Yosemite	Flintfast 3 in. Insulation Plates with FlintFast #14; Trufast 3" Metal Insulation Plates with Trufast HD	8-inch o.c. at 4-inch lap and 8-inch o.c. at three (3) equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA or SBS-TA	SBS-AA or SBS-TA	-97.5
W-92	Min. 19/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; Poly SMS Base; Ultra Poly SMS Base; Yosemite	Note 2	7-inch o.c. at 3-inch lap and 7-inch o.c. in three (3), equally spaced, staggered center rows	BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-105.0
W-93	Min. 19/32-inch plywood at max 24-inch spans	Flintlastic APP Base T	OMG 3 in. Round Metal Plates with OMG #14 HD or Dekfast Hex Plate with Dekfast #14	7-inch o.c. at 3-inch lap and 7-inch o.c. in three (3), equally spaced, staggered center rows	APP-TA	APP-TA	-105.0
W-94	Min. 15/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas; Flintlastic Base 20; Poly SMS Base; Ultra Poly SMS Base; Yosemite	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD; OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at 4-inch lap and 6-inch o.c. in four (4), equally spaced, staggered center rows	(Optional) BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA or APP-TA	-127.5
W-95	Min. 15/32-inch plywood at max 24-inch spans	Flintlastic APP Base T	OMG 3 in. Round Metal Plates with OMG #14 HD	6-inch o.c. at 4-inch lap and 6-inch o.c. in four (4), equally spaced, staggered center rows.	APP-TA	APP-TA	-127.5
COLD-APPLIED SYSTEMS:							
W-96	Min. 15/32-inch plywood at max 24-inch spans	Glasbase; Flexiglas Base; Flintlastic Base 20; All Weather / Empire Base; Yosemite Venting Base; Flintlastic Poly SMS Base; Flintlastic Ultra Poly SMS Base	Flintfast 3 in. Insulation Plates with FlintFast #12 or #14; Trufast 3" Metal Insulation Plates with DP or HD	8-inch o.c. at 4-inch lap and 8-inch o.c. in three (3), equally spaced, staggered center rows	(Optional) SBS-CA1	SBS-CA1	-52.5

**TABLE 1F: WOOD DECKS – NEW CONSTRUCTION OR REROOF (TEAR-OFF)
SYSTEM TYPE F: NON-INSULATED, BONDED ROOF COVER**

System No.	Deck (Note 1)	Primer	Roof Cover (Note 14)			MDP (psf)
			Base	Ply	Cap	
W-97	Min. 15/32-inch plywood at max 24-inch spans	FlintPrime or FlintPrime SA	SBS-SA-H	(Optional) SBS-TA, APP-TA	SBS-TA, APP-TA	-112.5
W-98	Min. 15/32-inch plywood at max 24-inch spans	FlintPrime or FlintPrime SA	SBS-SA	(Optional) SBS-SA	SBS-SA	-127.5



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

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

(850) 487-1395

**CONTE, JARED WILLIAM
ROOFING PIONEERS LLC
1945 WEST COUNTY ROAD 419
SUITE 1114-216
OVIDO FL 32766**

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.

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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

CCC1329030

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

**CONTE, JARED WILLIAM
ROOFING PIONEERS LLC
1945 WEST COUNTY ROAD 419
SUITE 1114-216
OVIDO FL 32766**



ISSUED: 08/23/2016

DISPLAY AS REQUIRED BY LAW

SEQ # L1608230002692

20

CITY OF OVIEDO LOCAL BUSINESS TAX RECEIPT

18

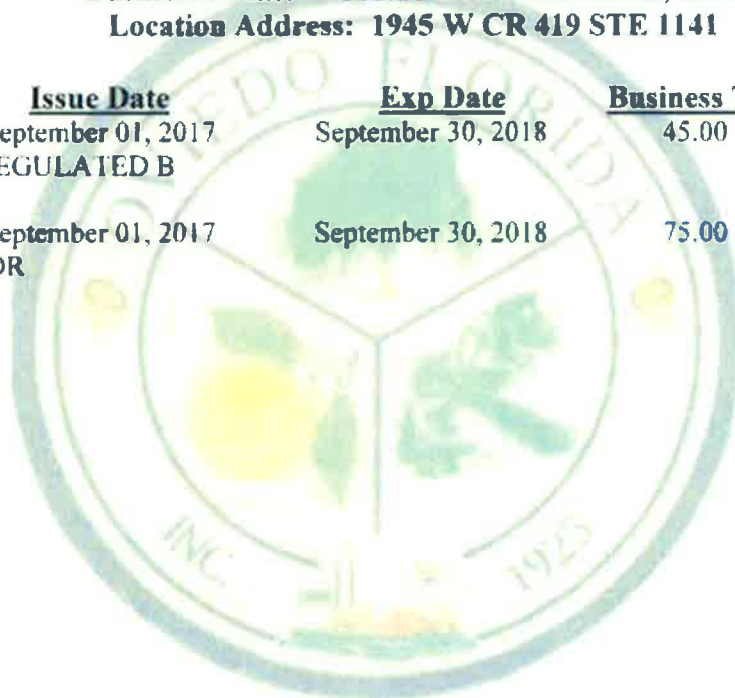
400 ALEXANDRIA BLVD • OVIEDO, FL 32765 • 407-971-5775

WWW.CITYOF OVIEDO.NET

Business Name: ROOFING PIONEERS, LLC

Location Address: 1945 W CR 419 STE 1141

<u>Receipt Number</u>	<u>Issue Date</u>	<u>Exp Date</u>	<u>Business Tax</u>	<u>Penalty</u>	<u>Total</u>
18-00016233 SEMINOLE COUNTY REGULATED B	September 01, 2017	September 30, 2018	45.00	0.00	45.00
18-00016232 ROOFING CONTRACTOR	September 01, 2017	September 30, 2018	75.00	0.00	75.00



COMMENTS:

RESTRICTIONS:

CONTROL # : 8900

MUST BE CONSPICUOUSLY DISPLAYED TO PUBLIC VIEW AT BUSINESS LOCATION

**ROOFING PIONEERS, LLC
1945 W CR 419 STE 1141
OVIEDO FL 32766**



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/08/2018

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 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 FRSA Self Insurers Fund, Inc. 4099 Metric Drive Winter Park, FL 32792	CONTACT NAME: Debra Guidry, CPCU																					
	PHONE (A/C, No, Ext): (800) 767-3772 FAX (A/C, No): (407) 671-2520																					
	E-MAIL ADDRESS: cert@frsasif.com																					
INSURED Roofing Pioneers, LLC 1945 West CR 419 Suite 1141-216 Oviedo, FL 32766	<table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: FRSA Self Insurers Fund / Evanston Insurance Co.</td> <td></td> <td>35378</td> </tr> <tr> <td>INSURER B:</td> <td></td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> <td></td> </tr> <tr> <td>INSURER F:</td> <td></td> <td></td> </tr> </table>	INSURER(S) AFFORDING COVERAGE		NAIC #	INSURER A: FRSA Self Insurers Fund / Evanston Insurance Co.		35378	INSURER B:			INSURER C:			INSURER D:			INSURER E:			INSURER F:		
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INSURER B:																						
INSURER C:																						
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	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			N/A			EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$ \$	
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS			N/A			COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$	
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$			N/A			EACH OCCURRENCE \$ AGGREGATE \$ \$	
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	N/A	N	870-040102 / 3EE6142	01/01/2018	01/01/2019	X PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
	Conte, Jared: 05/29/2015 to 05/28/2019							

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

REMARKS: Non-cancelable, without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

CERTIFICATE HOLDER


CANCELLATION

Attn:

City of Belle Isle
1600 Nela Avenue
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
Debra Guidry CPCU
Underwriting Manager





CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/14/2017

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.

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PRODUCER		CONTACT NAME: Sherry Sherrard	
Harbor Insurance		PHONE (A/C, No, Ext): 561-623-6142	FAX (A/C, No): 561-623-6142
6645 S US Hwy 1		E-MAIL ADDRESS: sherry.sherrard@harboria.com	
Port St Lucie FL 34952		INSURER(S) AFFORDING COVERAGE	
		INSURER A: Preferred Contractors Ins Company	
INSURED		INSURER B:	
Roofing Pioneers LLC		INSURER C:	
1945 West Country Rd 419		INSURER D:	
Oviedo FL 32766		INSURER E:	
		INSURER F:	

COVERAGES CERTIFICATE NUMBER: **Master 11-14-17** 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 INSD	SUBR 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 checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC <input type="checkbox"/> OTHER:			PC248853	11/25/2017	11/25/2018	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 1,000,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000 Fire Legal \$ 50,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> OCCUR <input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below			Y/N N/A			<input type="checkbox"/> PER STATUTE <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	Roofing License: CCC1329030						

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

CERTIFICATE HOLDER (407) 581-0313 COBipermits@UniversalEngin City of Belle Isle 1600 Nela Ave 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 Eric Austin/SHSH01	
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