



City of Belle Isle Job Site Permit Card **ROOF** 2020-07-082

Subdivision

Site Address: **6501 The Landings Dr 32812**

Class: **Residential**

Parcel Number: **20-23-30-4980-00-230**

Description of Work: ROOF
Asphalt shingles with underlayment

Number of Stories: 1
Square Footage: 5800

Issued: CITRUS CONTRACTING LLC - DONOVAN, R M License # CCC1328861
Contact # 407 969-6868 Payment/ Issued Date & Method: 7 / 28 / 2020

Picked up by email Emailed
 Visa **Master Card** Amex Discover Check / Money Order#

9078

ROOF	INSPECTOR	DATE	COMMENTS
NEW ROOFS ONLY Code 700 Deck Nailing, Dry-In, Flashing			This inspection only applies for a brand new roof only!
Both new & re-roof Code 710 In - Progress			This inspection consists of all underlayment/black paper coverage and only 25% shingle coverage.
Both new & re-roof Code 720 Final			After the In Progress has been passed, then the entire roof is covered with shingles.

PLEASE NOTE: In order to schedule any inspections, the **PERMIT / plans-specs.** must be issued and **POSTED** on the **JOB SITE!** **THIS WILL AVOID ANY FAILED INSPECTIONS & RE-INSPECTION FEES.** 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 all of your inspections - **☆ 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 3:00 p.m.** Please include the following requirements in your request:

- **Project Address**
- **Corresponding Permit Number**
- **Type of Inspection** (Please reference your permit card for inspection codes)
- **Date of Inspection** (If no date is specified, the inspection will be scheduled for the next business day)
- **Contact Name**
- **Contact Phone Number**
- **Gate / Entry code** (If applicable)
- **AM, PM, or Any Time** (We do our best to accommodate time requests but cannot guarantee an exact arrival)

Universal Engineering Sciences - 3532 Maggie Blvd., Orlando, FL 32811407-581-8161 * Fax 407-581-0313 www.universalengineering.com

"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."



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.

RECEIVED
BY: [Signature]
JUL 27 2020

DATE OF APPLICATION: 7/27/2020

ROOF PERMIT NUMBER 2020-07-082

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

Project Address 6501 the landing Dr, Belle Isle, FL 32809 32812

Property Owner Nancy Key Phone 407 427 9690

Property Owner's Mailing Address 6501 the landing Dr City Belle Isle

State FL Zip Code 32812 Parcel Id Number: 20 23 30 4980 00 230

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: 5850 sq ft Number of Stories: 1 Job Valuation: \$ 24,480.18

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 [Signature] LICENSE # CC1328861
LICENSE HOLDER NAME ROBERT DONOVAN COMPANY NAME Citrus contracting LLC

Street Address 201 W ST RD 434 Unit A
City WINTER SPRINGS State FL Zip Code 32708 Phone Number 407-960-3810

Email Address lvzlopez@throofing.com
PAID 7-28-20 MC 9078

Building Official: OTC Date 9-27-2020
Verified Contractor's Licenses & Insurance are on file h Date 7-27-2020
NOCC

Zoning Fee	\$	<u>30.00</u>
Permit Fee	\$	<u>145.00</u> ✓
Review Fee	\$	<u>0</u>
3% Florida Surcharge		<u>24,480.18 = 4.18</u>
Total Permit Fee	\$	<u>179.18</u>

30
25
120
NOCC The Building Permit Number is required if the Roof Installation is associated with any construction or alteration where a Building Permit has been issued.
1511K
24x5
25
120
145

Permit Number: _____
 Folio/Parcel Identification Number: 202330498000230
 Prepared by: CITRUS CONTRACTING LLC
 201 W ST. RD 434, Unit A Winter Springs, FL 32708
 Return to: CITRUS CONTRACTING LLC
 201 W ST. RD 434, Unit A Winter Springs, FL 32708

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.

1. Description of property (legal description of the property, and street address if available)
The landing at Lake Conway 9/125 6501 the landings DR
2. General description of improvement
re-roof only
3. Owner information or Lessee information if the Lessee contracted for the improvement
 Name Johnny Key
 Address 6501 the landings Dr Orlando FL 32812
 Interest in Property owner
 Name and address of fee simple titleholder (if different from Owner listed above)
 Name _____
 Address _____
4. Contractor
 Name Citrus Contracting LLC Telephone Number 407-960-3810
 Address 201 W. St. Rd. 434 Unit A, Winter Springs, FL 32708
5. Surety (if applicable, a copy of the payment bond is attached)
 Name _____ Telephone Number _____
 Address _____ Amount of Bond \$ _____
6. Lender
 Name _____ Telephone Number _____
 Address _____
7. 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 _____
8. 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 _____
9. 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 of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager _____ OWNER
 Signature of Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this 22 day of July by Johnny Key
 month/year name of person

as OWNER for SELF
 Type of authority, e.g., officer, trustee, attorney in fact Name of party on behalf of whom instrument was executed
Chris Christopher Urteaga
 Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known _____ OR Produced ID XX
 Type of ID Produced FLDL

NOTARY PUBLIC
 STATE OF FLORIDA
 CHRISTOPHER ANDRE URTEAGA
 Commission # WH 019797
 Expires July 9, 2024
 Bonded Three Budget Notary Services

State of FLORIDA, County of ORANGE.
 Per §868.50, 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 Renee Simmons at 11:09 am, Jul 27, 2020
 Deputy Comptroller Date



WORK AUTHORIZATION

Name: Johnny & Nancy Key Date: 07/22/2000
 Address: 6501 The Landings Drive Phone: (407) 427-9690
Belle Isle State: FL Zip: 32812 Fax: ()
 Job: John Key/DHC@aol.com

SCOPE OF WORK

ROOF SPECIFICATIONS:
 Brand: Duras lining Style: Two Part Dimension Color: Onyx Black
 Ridge Material: (R/R) Valley: (Open) Tear-off: (1/2) Vents: (Box) Single Over: (Aluminum) Felt: (R/R)
 Ice & Water Shield: (Yes) Pitch: (12/12) Storm: (1) 2/3 Walkout: (Yes) No
 *Roof Accessories to be replaced new and/or painted shingle color.
 Drop Instructions: Load Material onto Roof
 Additional Specifications: All work based off approved insurance scope of work

Drip Edge Color: Black
2 pieces of gutter included
Deductible: credit \$2,500

Marketing Fee: as follows
The above price, specifications and conditions are non-negotiable and are hereby accepted by the Client. Contractor shall be held responsible for the work as shown on the drawings and in the contract documents. The contractor shall be held responsible for the work as shown on the drawings and in the contract documents. The contractor shall be held responsible for the work as shown on the drawings and in the contract documents.

TERMS AND CONDITIONS (SEE CONTINUUM ON REVERSE)

Client Signature: [Signature] Name: [Name] Date: [Date]
 General Contractor: [Signature] Name: [Name] Date: [Date]
 Address: [Address] Phone: [Phone]



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6501 The Landings Dr < 20-23-30-4980-00-230 >

Name(s)	Physical Street Address
Key Johnny	6501 The Landings Dr
Key Nancy	Pastal City and Zipcode
Mailing Address On File	Orlando, FL 32812
6501 The Landings Dr	Property Use
Belle Isle, FL 32812-3527	0103 - Single Fam Class III
Incorrect Mailing Address?	Municipality

Belle Isle



View 2019 Property Record Card

- [Property Features](#)
- [Values, Exemptions and Taxes](#)
- [Sales Analysis](#)
- [Location Info](#)
- [Market Stats](#)
- [Update Information](#)

2020 values will be available in August of 2020.

Property Description

[View Plat](#)

THE LANDINGS AT LAKE CONWAY 9/125 LOT 23 (LESS FROM NE COR RUN S 87.57 FT FOR POB RUN S 122.43 FT W 21 FT N 14 DEG W 87.74 FT N 58 DEG W 53.85 FT N 84 DEG E 89.21 FT TO POB)

Total Land Area 34,892 sqft (+/-) | 0.80 acres (+/-) GIS Calculated Notice

Land

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0130 - Sfr - Lake Front	R-1-AA	1 LOT(S)	working..	working..	working..	working..

Page 1 of 1 (1 total records)

Buildings

Important Information		Structure			
	Model Code: 01 - Single Fam Residence	Actual Year Built: 1985	Gross Area: 3951 sqft		
	Type Code: 0103 - Single Fam Class III	Beds: 4	Living Area: 2702 sqft		
	Building Value: working..	Baths: 3.0	Exterior Wall: Concrete Block Stucco		
	Estimated New Cost: working..	Floors: 1	Interior Wall: Drywall		

Page 1 of 1 (1 total records)

Extra Features

Description	Date Built	Units	XFOB Value
FPL2 - Fireplace 2	01/01/1985	1 Unit(s)	working..
SCR2 - Scrn Enc 2	12/31/1994	1 Unit(s)	working..
PL2 - Pool 2	12/31/1994	1 Unit(s)	working..
FPL2 - Fireplace 2	01/01/2000	1 Unit(s)	working..

Page 1 of 1 (4 total records)

This Data Printed on 07/23/2020 and System Data Last Refreshed on 07/22/2020

What are you looking to do today? You can also type your question below.



City of Belle Isle
 1600 Nela Avenue, Belle Isle, FL 32809
 Tel 407-851-7730 * Fax 407-240-2222 * www.cityofbelleislefl.org

Product Approval Form

DATE: 7/27/2020

PERMIT # _____

PROJECT ADDRESS 6501 The Landings Dr, Belle Isle, FL 32809 32812

As required by Florida Statute 553.842 and Florida Administrative Code 9B-72m please provide the information and approval numbers of the building components listed below if they will be utilized on the building or structure. FL Approved products are listed online at www.floridabuilding.org or can be obtained from the local product supplier. The following information must be available onsite for inspections:

1. Copy of this Product Approval Cover Sheet
2. A copy of the manufacturer's installation details and requirements for each product stamped
3. A copy of the Internet screen showing PA#, approval, and code edition 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/Dbl Hung				Asphalt Shingles*	owens corning	tru deck	FI# 1067 HRS
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Other	undata	owens corning	rhinox roof FI# 15216 .RS
Skylights							
Other							
STRUCTURAL COMPONENTS				OTHER			
WoodConnectors							
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							

*Manufacturer's installation instructions for asphalt shingles are not required to be submitted to the office, but must be available onsite.

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 7/27/2020

RETAIN A COPY FOR OFFICE USE AND RETURN ORIGINAL TO APPLICANT

Updated 3-2012 **FORM #PRODAPP012**



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Product Approval
USER: Public User

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



FL #	FL10674-R15										
Application Type	Revision										
Code Version	2017										
Application Status	Approved										
Comments											
Archived	<input type="checkbox"/>										
Product Manufacturer	Owens Corning										
Address/Phone/Email	One Owens Corning Parkway Toledo, OH 43659 (740) 404-7829 greg.keeler@owenscorning.com										
Authorized Signature	Greg Keeler greg.keeler@owenscorning.com										
Technical Representative	Mel Sancrant										
Address/Phone/Email	1 Owens Corning PKWY Toledo, OH 43659 (419) 376-8360 mel.sancrant@owenscornig.com										
Quality Assurance Representative											
Address/Phone/Email											
Category	Roofing										
Subcategory	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	Robert J.M. Nieminen										
Florida License	PE-59166										
Quality Assurance Entity	PRI Construction Materials Technologies, LLC										
Quality Assurance Contract Expiration Date	01/01/2099										
Validated By	John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received										
Certificate of Independence	FL10674 R15 COI 2019 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 D1970</td> <td>2015</td> </tr> <tr> <td>ASTM D3161</td> <td>2016</td> </tr> <tr> <td>ASTM D3462</td> <td>2010</td> </tr> <tr> <td>ASTM D7158</td> <td>2011</td> </tr> </tbody> </table>	Standard	Year	ASTM D1970	2015	ASTM D3161	2016	ASTM D3462	2010	ASTM D7158	2011
Standard	Year										
ASTM D1970	2015										
ASTM D3161	2016										
ASTM D3462	2010										
ASTM D7158	2011										
Equivalence of Product Standards Certified By											
Sections from the Code											

Product Approval Method Method 1 Option D

Date Submitted 08/15/2019

Date Validated 08/15/2019

Date Pending FBC Approval 08/21/2019

Date Approved 10/15/2019

Summary of Products

FL #	Model, Number or Name	Description
10674.1	Owens Corning Asphalt Roofing Shingles and Starters	3-tab, 4-tab, 5-tab, laminated, starter and hip & ridge 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.		Installation Instructions FL10674 R15 II 2019 08 FINAL ER OC ASPHALT SHINGLES FL10674-R15.pdf Verified By: Robert J. M. Nieminen PE - 59166 Created by Independent Third Party: Yes Evaluation Reports FL10674 R15 AE 2019 08 FINAL ER OC ASPHALT SHINGLES FL10674-R15.pdf Created by Independent Third Party: Yes

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

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NEMO|etc.

Certificate of Authorization #32455
353 Christian Street, Unit #13
Oxford, CT 06478
(203) 262-9245

ENGINEER

EVALUATE

TEST

CONSULT

CERTIFY

EVALUATION REPORT

Owens Corning

One Owens Corning Parkway
Toledo, OH 43659
(740) 404-7829

Evaluation Report O37940.02.12-R10

FL10674-R15

Date of Issuance: 02/06/2012

Revision 10: 08/15/2019

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 **6th Edition (2017) Florida Building Code** sections noted herein.

DESCRIPTION: Owens Corning Asphalt Roof 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 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. of any changes to the product(s), the Quality Assurance or the production facility location(s). NEMO|etc. 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 "NEMO|etc. 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 10.

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 08/15/2019. This does not serve as an electronically signed document.

CERTIFICATION OF INDEPENDENCE:

1. NEMO|etc. 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. NEMO|etc. 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 NEMO|etc. 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: Owens Corning Asphalt Roof Shingles, as produced by Owens Corning, have demonstrated compliance with the following sections of the 6th Edition (2017) Florida Building Code and 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>
1507.2.4, R905.2.3	Physical Properties	ASTM D1970	2015
1507.2.5, R905.2.4	Physical Properties	ASTM D3462	2010
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D3161	2016
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D7158	2011

3. REFERENCES:

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
Owens Corning	Declaration	Equivalency Declaration	08/06/2019
PRI (TST5878)	ASTM D1970	OCF-382-02-01	10/24/2017
UL LLC (CER9626)	Physicals & Wind Resistance	File R2453, Vol. 3	02/15/2007
UL LLC (CER9626)	Physicals & Wind Resistance	20120516-R2453	05/16/2012
UL LLC (TST9628)	Physical Properties	06CA20263	04/18/2006
UL LLC (TST9628)	Wind Resistance	11CA34308	02/18/2012
UL LLC (TST9628)	Physicals & Wind Resistance	4786093137	02/01/2014
UL LLC (TST9628)	Wind Resistance	4786126532	02/10/2014
UL LLC (TST9628)	Physical Properties	Classification letter	02/13/2014
UL LLC (TST9628)	Physical Properties	Classification letter	10/02/2015
Miami-Dade (CER1592)	FBC HVHZ Compliance	Various NOAs	Various
PRI (QUA9110)	Quality Control	Service Confirmation	04/05/2020

4. PRODUCT DESCRIPTION:
4.1 ACCESSORY STARTERS:

- 4.1.1 Starter Strip Shingle, Starter Strip Plus and SRS TopShield Starter are starter strips for asphalt roof shingles. Meets ASTM D3462.
- 4.1.2 Starter Shingle Roll is a mineral-surfaced, fiberglass-reinforced, self-adhering SBS modified bitumen starter strip, nominal 7.2-inch wide x 33-ft 4-inch long roll, for use with asphalt shingles. Meets ASTM D1970.

4.2 ASPHALT SHINGLES:

- 4.2.1 Classic[®] and Supreme[®] are fiberglass reinforced, 3-tab asphalt roof shingles. Meets ASTM D3462.
- 4.2.2 Berkshire[®] are fiberglass reinforced, 4-tab asphalt roof shingles. Meets ASTM D3462.
- 4.2.3 Duration[®], TruDefinition[®] Duration[®], Duration[®] Premium Cool, TruDefinition[®] Duration[®] Designer Color Collection, TruDefinition[®] Oakridge[®], Oakridge[®] and WeatherGuard[®] HP are fiberglass reinforced, laminated asphalt roof shingles. Meets ASTM D3462.

4.3 HIP & RIDGE SHINGLES:

- 4.3.1 Berkshire[®] Hip & Ridge Shingles with Sealant, DuraRidge[®] Hip & Ridge Shingles with Sealant, ProEdge[®] Hip & Ridge Shingles and WeatherGuard[®] HP Hip & Ridge Shingles are fiberglass reinforced, hip and ridge asphalt roof shingles. Meets ASTM D3462.

5. LIMITATIONS:

- 5.1 This is a building code evaluation. Neither NEMO ETC, LLC 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 FBC HVHZ jurisdictions.
- 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 The Owens Corning asphalt shingles noted in Section 4.2 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 acceptable 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.
 Note: Classification by ASTM D7158 applies only to exposure category B or C, as defined in FBC 1609.4.3, and a mean roof 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.
 - 5.4.2 Starter Strip Shingle, Starter Strip Plus and SRS TopShield Starter noted in Section 4.1.1 and the Owens Corning hip & ridge shingles noted in Section 4.3 are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F, indicating acceptable 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.
 - 5.4.3 Refer to Owens Corning published information on wind resistance and installation limitations.
 - 5.5 All products in the roof assembly shall have quality assurance audit in accordance with F.A.C. Rule 61G20-3.

6. INSTALLATION:

6.1 GENERAL:

- 6.1.1 Roof deck, slope, underlayment and fasteners shall comply with FBC 1507.2 / R905.2 and the shingle manufacturer’s minimum requirements.
- 6.1.2 Underlayment shall be acceptable to the shingle manufacturer 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.
- 6.1.3 Fasteners shall be in accordance with the shingle manufacturer’s published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.
- 6.1.4 Owens Corning asphalt shingles are acceptable for use in reroof (tear-off) or recover applications, subject to the limitations set forth in FBC Section 1511 or R908 and published installation instructions.

6.2 ACCESSORY STARTERS:

- 6.2.1 Installation of **Starter Strip Shingle, Starter Strip Plus and SRS TopShield Starter** shall comply with the Owens Corning current published instructions, using minimum five (5) nails per strip.

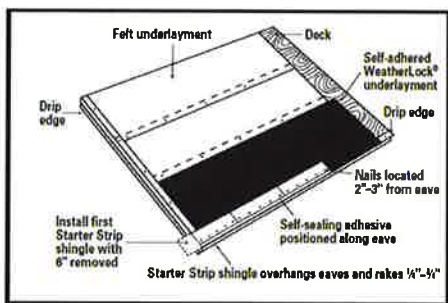


Figure 1: Minimum Nailing, Starter Strip

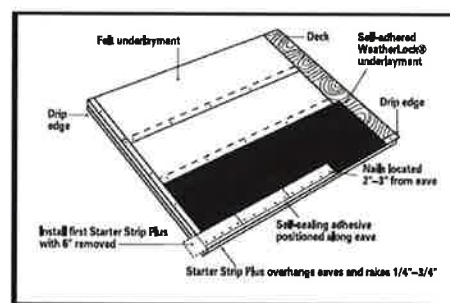


Figure 2: Minimum Nailing, Starter Strip Plus

6.2.2 Installation of **Starter Shingle Roll** shall comply with the Owens Corning current published instructions.

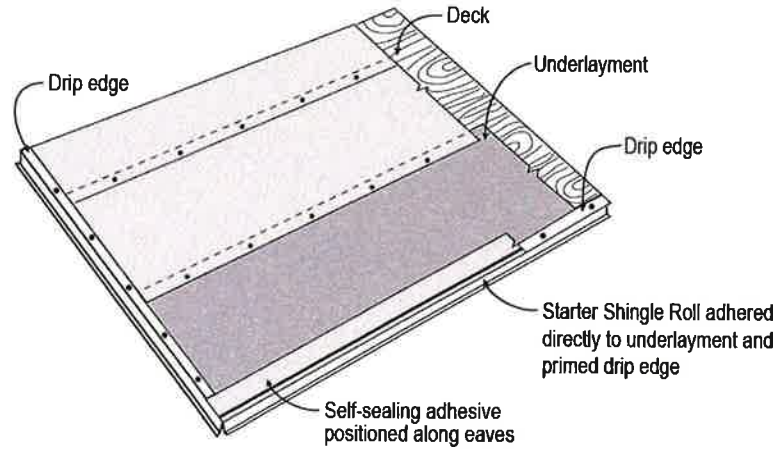


Figure 3: Starter Shingle Roll

6.3 ASPHALT SHINGLES:

6.3.1 Installation of asphalt shingles shall comply with the Owens Corning current published instructions, using minimum four (4) nails per shingle in accordance with FBC 1507.2.7 or R905.2.6, with the following exceptions:

- Berkshire® shingles require minimum five (5) nails per shingle.
- WeatherGuard® HP shingles require minimum six (6) nails per shingle.

Where the roof slope exceeds 21 units vertical in 12 units horizontal, special methods of fastening are required. Refer to Owens Corning published information on wind resistance and installation limitations.

6.3.1.1 **Classic® & Supreme:**

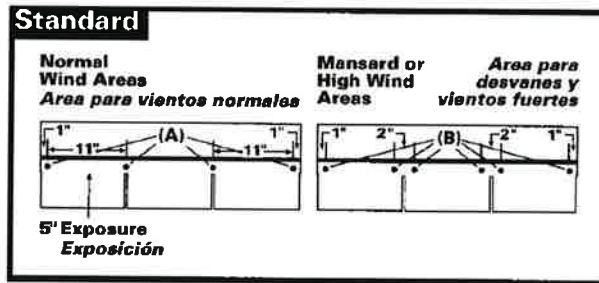


Figure 4: Minimum Nailing, Classic & Supreme (Standard Size)

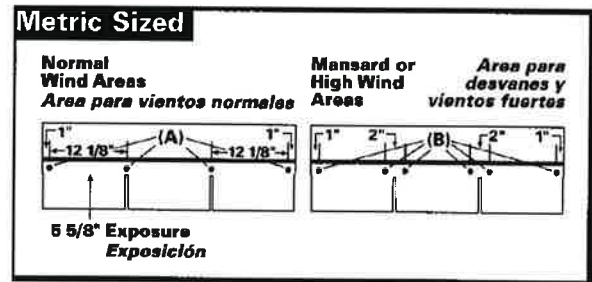


Figure 5: Minimum Nailing, Classic & Supreme (Metric Size)

6.3.1.2 **Berkshire®:**

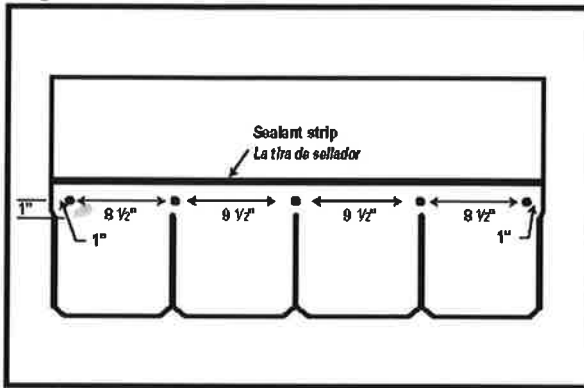


Figure 6: 5-Nail Pattern, Berkshire

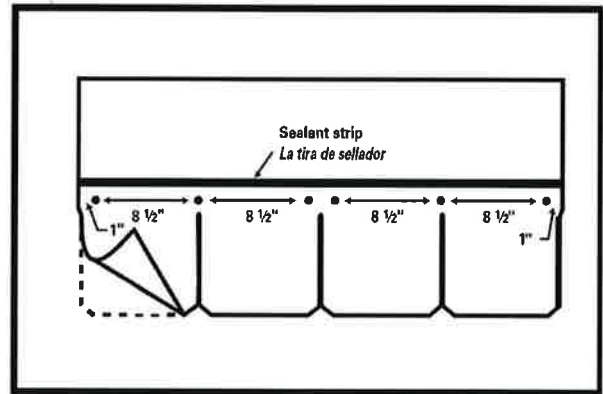


Figure 7: 6-Nail Pattern, Berkshire

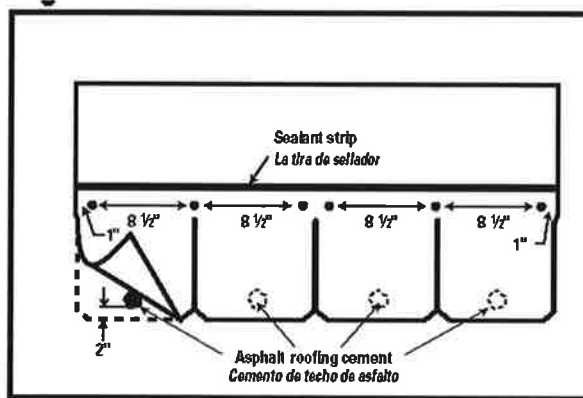


Figure 8: Mansard or Steep Slope Pattern, Berkshire

6.3.1.3 Duration®, TruDefinition® Duration, Duration® Premium Cool & TruDefinition® Duration® Designer Color Collection:

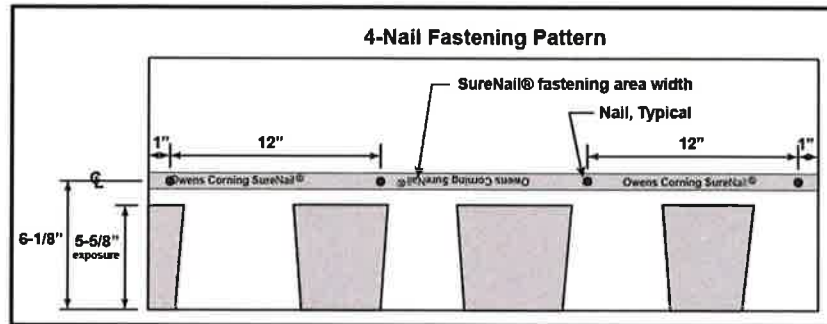


Figure 9: Standard 4-Nail Pattern, Duration

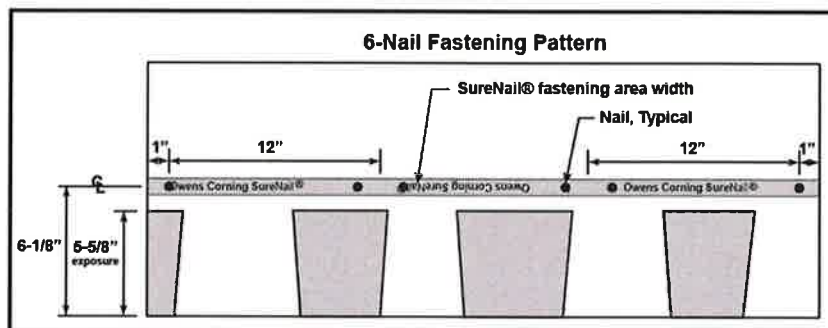


Figure 10: 6-Nail Pattern, Duration

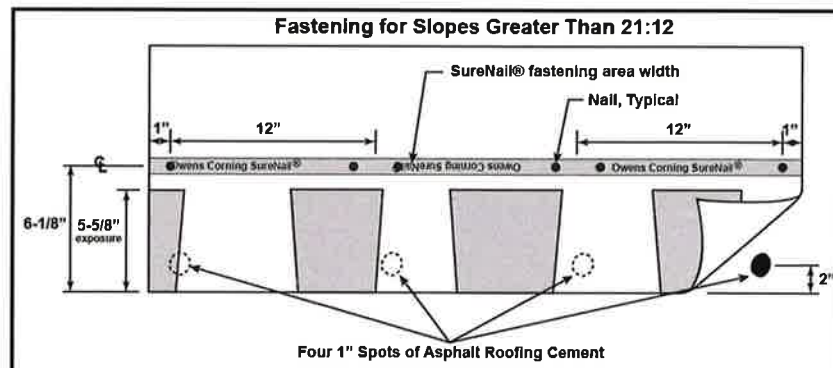


Figure 11: Mansard or Steep Slope Pattern, Duration

6.3.1.4 TruDefinition® Oakridge®, Oakridge®:

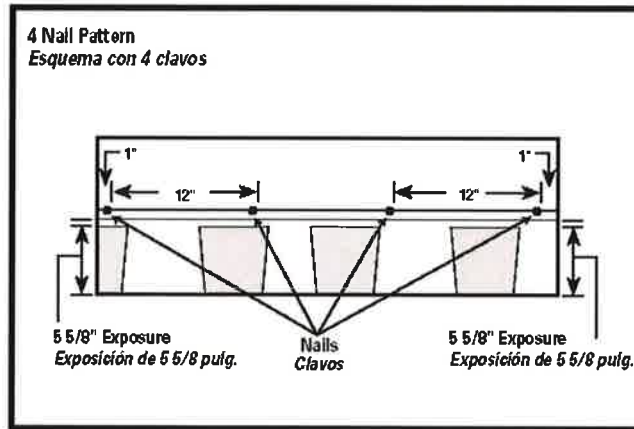


Figure 12: Standard 4-Nail Pattern, Oakridge

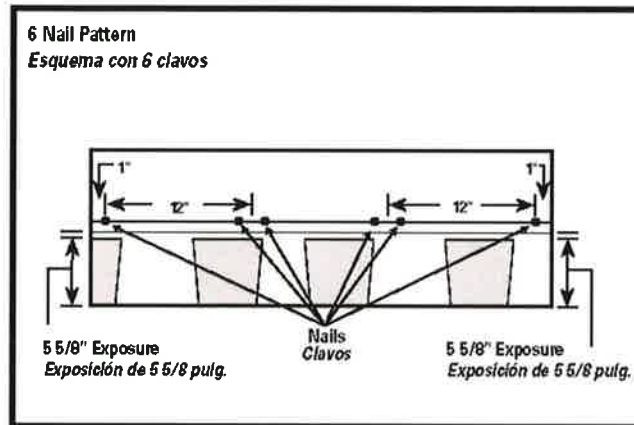


Figure 13: 6-Nail Pattern, Oakridge

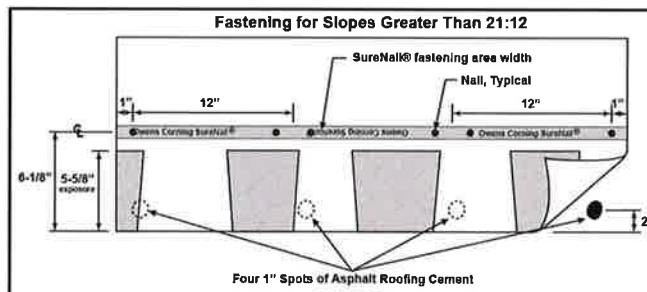


Figure 14: Mansard or Steep-Slope Pattern, Oakridge

6.3.1.5 **WeatherGuard® HP:**

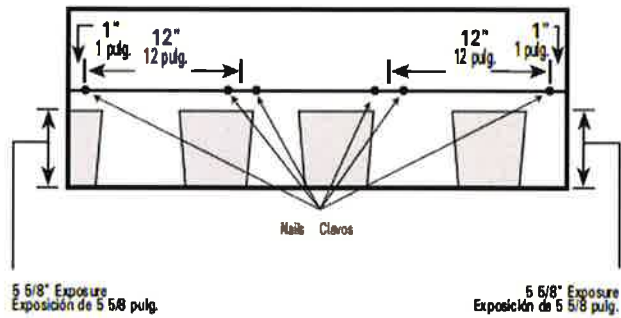


Figure 15: 6-Nail Pattern, WeatherGuard HP

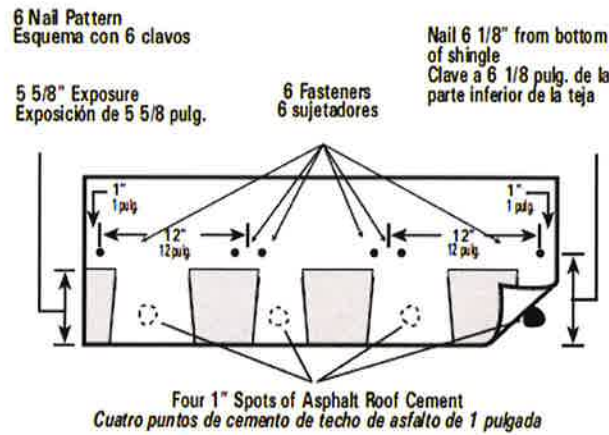


Figure 16: Mansard or Steep-Slope Pattern, WeatherGuard HP

6.4 HIP & RIDGE SHINGLES:

- 6.4.1 Installation of asphalt shingles shall comply with the Owens Corning current published instructions.
- Berkshire® Hip and Ridge Shingles *with Sealant* and DuraRidge® Hip & Ridge Shingles *with Sealant* require minimum two (2) nails per shingle.
 - WeatherGuard® HP Hip and Ridge Shingles and ProEdge® Hip & Ridge Shingles require minimum four (4) nails per shingle.
- Refer to Owens Corning published information on wind resistance and installation limitations.

6.4.1.1 **Berkshire® Hip & Ridge with Sealant and DuraRidge® Hip & Ridge Shingles with Sealant:**

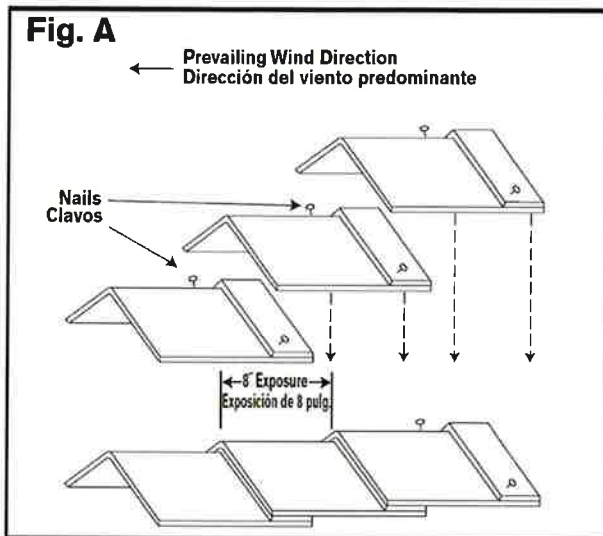


Figure 17: Isometric View, Berkshire and DuraRidge

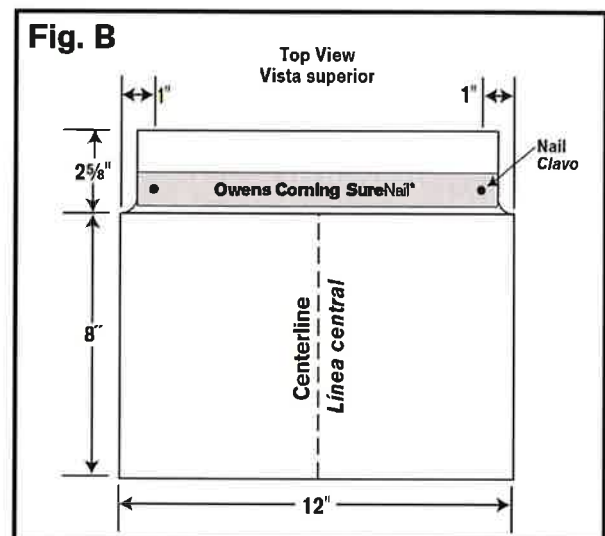


Figure 18: Plan View, Berkshire and DuraRidge

6.4.1.2 **WeatherGuard® HP Hip & Ridge Shingles:**

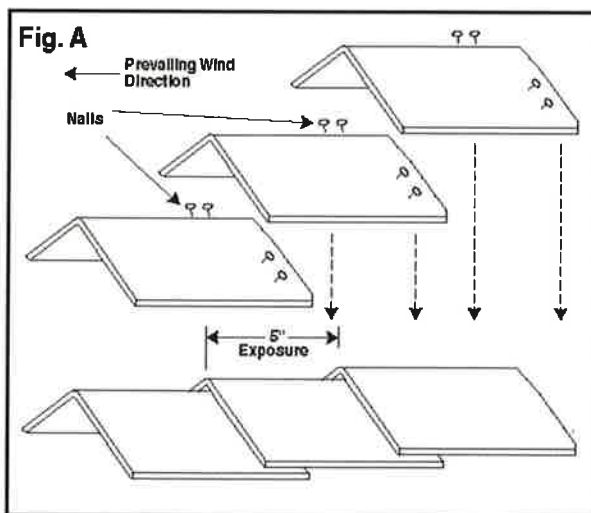


Figure 19: Isometric View, WeatherGuard HP Hip & Ridge

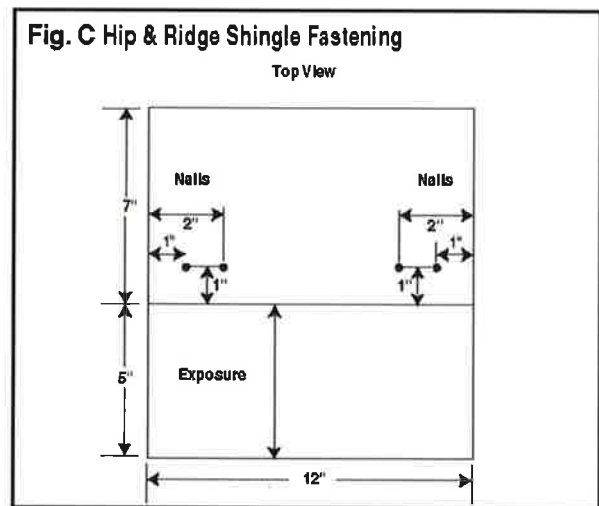


Figure 20: Plan View, WeatherGuard HP Hip & Ridge

6.4.1.3 **ProEdge® Hip & Ridge Shingles:**

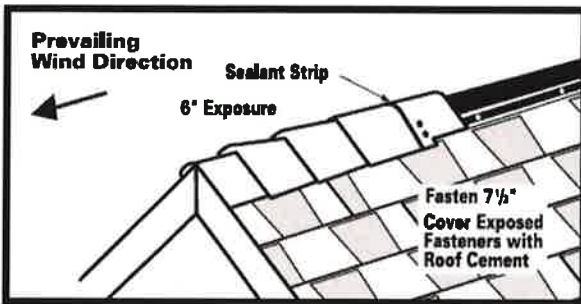


Figure 21: Isometric View, ProEdge

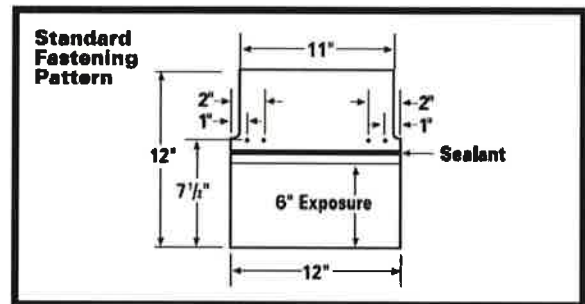


Figure 22: Plan View, ProEdge

7. LABELING:

- 7.1 Labeling shall be in accordance with the requirements 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:

PRI Construction Materials Technologies, LLC– QUA9110 ; (813) 621-5777; bwilson@pricmt.com

- END OF EVALUATION REPORT -



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Product Approval
USER: Public User

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



FL #	FL15216-R7												
Application Type	Revision												
Code Version	2017												
Application Status	Approved												
Comments													
Archived	<input type="checkbox"/>												
Product Manufacturer	Owens Corning Roofing and Asphalt, LLC												
Address/Phone/Email	One Owens Corning Parkway Toledo, OH 43645 (740) 321-6345 Greg.Keeler@owenscorning.com												
Authorized Signature	Keeler Greg Greg.Keeler@owenscorning.com												
Technical Representative	Greg Keeler												
Address/Phone/Email	2790 Columbus Road Granville, OH 43023 (740) 321-6345 greg.keeler@owenscorning.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 <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	Intertek Testing Services NA, Inc. - QA Entity												
Quality Assurance Contract Expiration Date	12/31/2020												
Validated By	John W. Knezevich, PE <input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received												
Certificate of Independence	FL15216 R7 COI 2020 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 D1970 (tear)</td> <td>2015</td> </tr> <tr> <td>ASTM D226 (physicals)</td> <td>2009</td> </tr> <tr> <td>ASTM D4533 (tear)</td> <td>2015</td> </tr> <tr> <td>ASTM D4798</td> <td>2011</td> </tr> <tr> <td>TAS 117(B)</td> <td>1995</td> </tr> </tbody> </table>	Standard	Year	ASTM D1970 (tear)	2015	ASTM D226 (physicals)	2009	ASTM D4533 (tear)	2015	ASTM D4798	2011	TAS 117(B)	1995
Standard	Year												
ASTM D1970 (tear)	2015												
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ASTM D4533 (tear)	2015												
ASTM D4798	2011												
TAS 117(B)	1995												
Equivalence of Product Standards Certified By													
Sections from the Code													



NEMO|etc.

Certificate of Authorization #32455
353 Christian Street, Unit #13
Oxford, CT 06478
(203) 262-9245

ENGINEER

EVALUATE

TEST

CONSULT

CERTIFY

EVALUATION REPORT

Owens Corning Roofing and Asphalt, LLC
One Owens Corning Parkway
Toledo, OH 43659
(740) 321-6345

Evaluation Report I40510.02.12-R8
FL15216-R7
Date of Issuance: 02/17/2012
Revision 8: 02/13/2020

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 **6th Edition (2017) Florida Building Code** sections noted herein.

DESCRIPTION: RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments

LABELING: Labeling shall be in accordance with the requirements of 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. of any changes to the product(s), the Quality Assurance or the production facility location(s). NEMO|etc. 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 "NEMO|etc. 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 4.

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 02/13/2020. This does not serve as an electronically signed document.

CERTIFICATION OF INDEPENDENCE:

1. NEMO ETC, LLC 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. NEMO ETC, LLC 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 NEMO|etc. 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 U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments, as produced by Owens Corning Roofing and Asphalt, LLC, have demonstrated compliance with the following sections of the 6th Edition (2017) 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>
1507.1.1, R905.1.1 Exception, 1518.4	Unrolling, Breaking Strength, Pliability	ASTM D226	2009
1507.1.1, R905.1.1 Exception	Tear Strength	ASTM D1970	2015
1507.1.1, R905.1.1 Exception	Tear Strength	ASTM D4533	2015
TAS 110	Accelerated Weathering	ASTM D4798	2011
TAS 110	Pull-through resistance	TAS 117(B)	1995

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
PRI (TST5878)	Physical Properties	OCF-330-02-01	09/20/2017
PRI (TST5878)	ASTM D1970; Tear strength (Qingdao)	OCF-330-02-02	10/03/2017
PRI (TST5878)	TAS 117(B); Pull-through	OCF-422-02-01	04/03/2018
PRI (TST5878)	ASTM D226, ASTM D4533 (Tear strength)	OCF-464-02-02	12/10/2019
PRI (TST5878)	Physicals Properties & AW (Silvassa)	OCF-394-02-07.4	01/06/2020
PRI (TST5878)	Accelerated Weathering (Qingdao)	OCF-464-02-02.2	01/06/2020
ITS (QUA1673)	Quality Control	Service Confirmation	09/30/2017

4. PRODUCT DESCRIPTION:

	<u>Product</u>	<u>Specification</u>	<u>Plant(s)</u>	<u>Description</u>
4.1	RhinoRoof U20	FBC 1507.1.1 & R905.1.1 (Exception)	Qingdao, China Silvassa, India	Multilayered polymer woven coated synthetic roof underlayment
4.2	ABC Pro Guard 20	FBC 1507.1.1 & R905.1.1 (Exception)	Qingdao, China Silvassa, India	Multilayered polymer woven coated synthetic roof underlayment
4.3	SRS TopShield TS20	FBC 1507.1.1 & R905.1.1 (Exception)	Qingdao, China Silvassa, India	Multilayered polymer woven coated synthetic roof underlayment

5. LIMITATIONS:

- 5.1 This is a building code evaluation. Neither NEMO ETC, LLC 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 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.3 RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof 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 Authority Having Jurisdiction for approval based on this evaluation combined with supporting data for the prepared roof covering.

5.4 **Allowable Roof Covers:**

TABLE 1: ROOF COVER OPTIONS					
Underlayment	Asphalt Shingles	Tile	Metal	Wood Shakes & Shingles	Slate or Simulated Slate
RhinoRoof U20	Yes	No	Yes	Yes	No
ABC Pro Guard 20	Yes	No	Yes	Yes	No
SRS TopShield TS20	Yes	No	Yes	Yes	No

5.5 **Exposure Limitations:**

RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 shall not be left exposed for longer than 90-days after installation.

6. INSTALLATION:

6.1 RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20 Roof Underlayments shall be installed in accordance with the manufacturer’s published installation instructions subject to the Limitations set forth in Section 5 herein and the specifics noted below.

6.2 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.

6.3 RhinoRoof U20, ABC Pro Guard 20 and SRS TopShield TS20:

6.3.1 **NON-HVHZ Jurisdictions:**

6.3.1.1 Shall be installed in compliance with the requirements for ASTM D226, Type I or II underlayment in FBC Table 1507.1.1 or R905.1.1 for the type of prepared roof covering to be installed, considering the wider sheet-width for double-layer applications.

6.3.1.2 **Fasteners:**

For exposure up to maximum 24 hours, corrosion resistant fasteners may be 1-inch roofing nails with a 3/8-inch diameter head, 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.

For exposure beyond 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.

Code Reference: The Exception statement in FBC 1507.1.1 and FBC R905.1.1 states: “...except metal cap nails shall be required where the ultimate design wind speed, V_{ult} , equals or exceeds 150 mph.”

Owens Corning Roofing and Asphalt, LLC has furnished data to permit the use of 1-inch diameter plastic cap nails in lieu of metal cap nails for these applications, when the RhinoRoof U20, ABC Pro Guard 20 or SRS TopShield TS20 underlayment is installed beneath mechanically fastened prepared roof covers referenced in FBC Table 1507.1.1 or R905.1.1.

6.3.1.3 **Slopes of 4:12 or greater:**

End (vertical) laps shall be minimum 6-inches and side (horizontal) laps shall be minimum 4-inches. End (vertical) laps shall be offset from course to course not less than 6 feet.

Minimum attachment shall be in accordance with FBC Table 1507.1.1 or R905.1.1. Secure end laps 4-inch o.c. When batten systems are to be installed atop the underlayment, the underlayment need only be preliminarily attached pending attachment of the battens.

6.3.1.4 **Slopes of 2:12 to less than 4:12:**

End (vertical) laps shall be minimum 12-inches and side (horizontal) laps shall be minimum 22-inches. End (vertical) laps shall be offset from course to course not less than 6 feet.



Begin by fastening a 22-inch wide strip along the eaves. Place a full-width sheet over the starter, completely overlapping the starter course. Continue upslope, maintaining minimum 22-inch side (horizontal) laps, resulting in a double-layer application.

Minimum attachment shall be in accordance with FBC Table 1507.1.1 or R905.1.1. Secure end laps 4-inch o.c. When batten systems are to be installed atop the underlayment, the underlayment need only be preliminarily attached pending attachment of the battens.

6.3.2 HVHZ Jurisdictions:

6.3.2.1 Shall be installed in a shingle fashion with minimum 4-inch wide side (horizontal) laps and minimum 6-inch wide end laps.

6.3.2.2 Shall be fastened with FBC HVHZ approved corrosion resistant, 1-5/8" diameter tin-caps and 12 gauge 1.25" long annular ring-shank nails (FBC 1517.5) spaced max. 6-inch o.c. at all laps and 12-inch o.c. at three (3) equally spaced rows in the field of the sheet.

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 plants covered under Rule 61G20-3 QA requirements. Refer to Section 4 herein for product & production locations having met codified physical properties specifications.

9. QUALITY ASSURANCE ENTITY:

Intertek Testing Services NA Inc. – ETL/Warnock Hersey – QUA1673; (604) 520-3321;
peter.gildenstern@intertek.com

- END OF EVALUATION REPORT -



Ron DeSantis, Governor

Halsey Beshears, Secretary

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

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

DONOVAN, ROBERT M

CITRUS CONTRACTING LLC
2205 NORTH FORSYTH ROAD UNIT D
ORLANDO FL 32807

LICENSE NUMBER: CCC1328861

EXPIRATION DATE: AUGUST 31, 2020

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TOTAHOM-07

SMALLWOODJ

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

7/9/2020

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 Insurance Office of America, Inc. 1855 West State Road 434 Longwood, FL 32750	CONTACT NAME: Marla Clossey PHONE (A/C, No, Ext): (407) 215-0430 FAX (A/C, No): E-MAIL ADDRESS: Marla.Clossey@ioausa.com
	INSURER(S) AFFORDING COVERAGE
INSURED Citrus Contracting LLC 597 Haverty Ct., #40 Rockledge, FL 32955	INSURER A: Security National Insurance Company (AmTrust) NAIC # 19879
	INSURER B: Ascendant Commercial Insurance Inc 13683
	INSURER C: Builders Mutual Insurance Company 10844
	INSURER D:
	INSURER E:
	INSURER F:

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

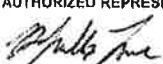
THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE 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 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 type="checkbox"/> LOC OTHER:		SES179235500	5/20/2020	5/20/2021	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COM/PO/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		CA473842	6/3/2020	6/3/2021	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 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 \$
C	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 N/A	WCP106802500	10/1/2019	10/1/2020	<input checked="" type="checkbox"/> PER STATUTE <input type="checkbox"/> 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

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (ACORD 101, Additional Remarks Schedule, may be attached if more space is required)
Additional Insured applies regarding General Liability with respect to ongoing & completed operations performed by named insured on primary & non-contributory basis as required by written contract (per CG2010 0413, CG2037 0413 & NXGL009 0809). Waiver of Subrogation applies regarding General Liability and Workers' Compensation in favor of any person or organization that is required by written contract (per CG2404 0509 & WC000313 0484).

CERTIFICATE HOLDER

CANCELLATION

City of Belle Isle 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 
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JIMMY PATRONIS
CHIEF FINANCIAL OFFICER

**STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION**

**** CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW ****

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

EFFECTIVE DATE: 12/29/2018

EXPIRATION DATE: 12/29/2020

PERSON: ROBERT M DONOVAN

EMAIL: TOTALHOMEFLORIDA@GMAIL.COM

FEIN: 300794447

BUSINESS NAME AND ADDRESS:

CITRUS CONTRACTING LLC

1985 N TROPICAL TRAIL

MERRITT ISLAND, FL 32953

SCOPE OF BUSINESS OR TRADE:

Licensed General Contractor

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

City of Winter Springs, FL

Printed Date 09/18/2019
Issued Date MM/dd/yyyy
Renewable Yes

License Number 100200
Effective Date 10/01/2019
Expiration Date 09/30/2020

Quantity	Code
1.0000	COUNTY NON-REGULATED
1.0000	COUNTY NON-REGULATED FEE
1.0000	SERVICE:NOT OTHERWISE CLASSIFIED

Business Address:
Business Name:
Licensee Name:

201 W 434 SR SUITE B
CITRUS CONTRACTING LLC
CITRUS CONTRACTING LLC

**POST THIS LICENSE IN A CONSPICUOUS
PLACE IN YOUR BUSINESS LOCATION**

NOT TRANSFERABLE FROM LOCATION SHOWN ABOVE

