

## City of Belle Isle Job Site Permit Card ELECTRICAL 2020-10-027

Class: Residential Site Address: 8112 Gondola Dr 32809

Parcel Number: 25-23-29-0000-00-074 Subdivision

INSPECTIONS CANNOT BE SCHEDULE D. IF A. NOC IS REQUIRED FOR THIS PROJECT Description of Work: Electrical -Meter Service Upgrade from 150 to 200 = 50 Amperage/Voltage/Phase Difference in Size \_\_\_\_\_\_ Issued: Malcom S. Wertz Electrical Contractor LLC, M. Wertz License # ECooo1982 Payment/ Issued Date & Method: 10 / 12 / 2020 Contact # 321 946 8254 □ Picked up by ☐ Sent by mail to the mailing address **E**mailed □ Visa Master Card □ Discover □ Check / Money Order# □ Amex 3 4 5 FOR POOL INSPECTI<mark>ONS</mark>, PLEASE REFER TO MAIN POOL PERMI<mark>T</mark> Schedule Inspections via Email at: BIDscheduling@universalengine@ring.com BY 3:00 PM CUT OFF TIME Inspection Results Will Be Sent Out the Following Business Day **ELECTRICAL INSPECTOR** DATE COMMENTS 300 Temp Pole 310 TUG 320 Underground 325 Electrical Above - Ceiling 330 Rough 340 Footer Steel Bonding 350 Pool Light 360 Pre Power 370 Meter Re Set 380 Final INSPECTOR LOW VOLTAGE ONLY DATE COMMENT 335 Rough This inspection is only for low voltage! 375 Final The inspection is only for low voltage! PLEASE NOTE: In order to schedule any inspections, the PERMIT / plans-spects, 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:

- 1) Project Address 2) Corresponding Permit Number 3) Type of Inspection (Please reference your permit card for inspection codes) 4) Date of Inspection (If no date is specified, the inspection will be scheduled for the next business day) 5) Contact Name 6) Contact Phone Number 7) Gate / Entry code (If applicable)
- 8) 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



City of Belle Isle
Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 3281
Tel 407-581-8161 \* Fax 407-581-0313 \* www.universalengineer 3.c

## APPLICATION FOR ELECTRICAL PERMIT

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

(IF NO METER SERVICE WORK BEIN	RVICE SIZE SCHEDULE	RMIT FEE)
(IF NO METER SERVICE WORK BEIN	IG DONE, USE VALUATION OF JOB FOR PER	RMIT FEE)
(IF NO METER SERVICE WORK BEIN	IG DONE, USE VALUATION OF JOB FOR PER	RMIT FEE)
MODERNIT FOR DAGED ON WELLER		
Other:		70-12-2020
Relocate Existing Meter Service (No Servi	ce Size Change)	N 3245
Meter Service Upgrade from 150 Amperage	/Voltage/Phase to 200 //www.amperage/Voltage/Phase	= 50 Difference in Size
Temporary Construction Pole	One (1) New Meter Service	Amperage/Voltage/Phase
	3(1)	Funda (RW)
Electric Signs Meter Reset _ Pumps Motors	Low Voltage	Stoves
Hood Fan         Dryer           Fixtures         Spa	Pool	Outlets
Dishwasher Exhaust Fan_	Disposal	Water Heater
INDICATE	THE QUANTITY OF ALL EQUIPMENT TO BE	E INSTALLED
Type of Work: New Alteration		age New Existing
Class of Building; Old ™ New □	Type of Building: Residente Comme	
State Florida Zip Code 32809	Parcel Id Number: 25-23-29-0000-00-074	//www.ocpaff.org/Searches/ParcelSearch.aspx
Property Owner's Mailing Address 8112 Go	endola Dr Sawl	City Belle Isle
Property Owner Dusty Parks	ty PMB	Phone 321-310-3995 3al-310-3
Project Address 8112 Gondolar Dr.	L. Decke	, Belle Isle FI 3280932812
	mit to make electrical installations as indicated by	elow, PLEASE PRINT
	PERMIT	NUMBER 2020-10-001

Building Permit Number \_\_\_\_

Page 1 of 2



## RICK SINGH, CFA - ORANGE COUNTY PROPERTY APPRAISER

Sales Search Searches

Results

Froperty Record Card

畧 My Favorites

Sign up for e-Notify...

8112 Gondola Dr < 25-23-29-0000-00-074 >

Parks Jacqueline Marie Parks Dusty Shane

Mailing Address On File

Incorrect Mailing Address? Orlando, FL 32809-6743 8112 Gondola Dr

8112 Gondola Dr Physical Street Address

Orlando, Fl 32809

Postal City and Zipcode

0103 - Single Fam Class III Property Use

Un-Incorporated Municipality

8112 GONDOLA DR. ORLANDO, FL 32809 64/2019 9.45 AM of 2 - Click To View Or Upload

View 2020 Property Record Card

Values, Exemptions and Taxes **Property Features** 

Sales Analysis

Location Info

Update Information **Market Stats** 

2021 values will be available in August of 2021.

## **Property Description**

BEG 717.07 FT N & 30 FT W SE COR SEC W 774 FT N 75 FT E 774 FT S 75 FT TO POB IN SEC 25-23-29

**Total Land Area** 

57,968 sqft (+/-) | 1.33 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-1A	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: 1954	1954	Gross Area:	1900 sqft	
Type Code:	0103 - Single Fam Class III	Beds:	m	Living Area:	1362 sqft	



## DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION STATE OF FLORIDA

# **ELECTRICAL CONTRACTORS LICENSING BOARD**

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

## WERTZ, MALCOLM SCOTT

MALCOLM S. WERTZ ELECTRICAL CONTRACTOR LLC 5254 CHISWICK CIRCLE ORLANDO FL 32812

## **LICENSE NUMBER: EC0001982**

**EXPIRATION DATE: AUGUST 31, 2022** 

Always verify licenses online at MyFloridaLicense.com



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





OP.ID: AP

## **CERTIFICATE OF LIABILITY INSURANCE**

DATE (MM/DD/YYYY)

12412020

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.

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

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	DUCER		407	7-855-1000	CONTA	CT Aleesia	Pattie			
	ry Levine Insurance 7 West Sand Lake Road					o, Ext): 407-85		FAX (A/C No):	407-8	55-1001
Orla	indo, FL 32819				E-MAIL	ss: Aleesia@	hlinsure.c	om		
Ale	esia Pattie				ADDRE			RDING COVERAGE		NAIG #
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Ŀ. INSR	XCLUSIONS AND CONDITIONS OF SUCH	POLIC	CIES.	LIMITS SHOWN MAY HAVE	BÉEN R					
LTR	TYPE OF INSURANCE	ADDL INSD	WVD	POLICY NUMBER		POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	S	6 882 25
Α	X COMMERCIAL GENERAL LIABILITY							EACH OCCURRENCE	\$	2,000,000
	CLAIMS-MADE X OCCUR			72404449		07/10/2020	07/10/2021	DAMAGE TO RENTED PREMISES (Ea occurrence)	\$	300,000
								MED EXP (Any one person)	\$	10,000
								PERSONAL & ADV INJURY	\$	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:							GENERAL AGGREGATE	s	3,000,000
	X POLICY PRO-							PRODUCTS - COMP/OP AGG	\$	3,000,000
	OTHER:								s	
	AUTOMOBILE LIABILITY							COMBINED SINGLE LIMIT (Ea accident)	\$	
	ANY AUTO							BODILY INJURY (Per person)	\$	
	OWNED SCHEDULED AUTOS							BODILY INJURY (Per accident)	\$	
	HIRED AUTOS ONLY NON-OWNED AUTOS ONLY							PROPERTY DAMAGE (Per accident)	s	
	NOTOS ONET							(rer accident)	S	
	UMBRELLA LIAB OCCUR							EACH OCCURRENCE		
ľ	EXCESS LIAB CLAIMS-MADE								\$	
	DED RETENTION \$							AGGREGATE	\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		_					PER OTH- STATUTE ER	5	
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	N/A						E.L. EACH ACCIDENT	\$	
	If yes, describe under							E.L. DISEASE - EA EMPLOYEE		
Α	DÉSCRIPTION OF OPERATIONS below  Equipment Floater	_	_	72404449		07/10/2020	07/10/2021	E.L. DISEASE - POLICY LIMIT	\$	
	4			12701110		0171072020	0771072021			
	RIPTION OF OPERATIONS / LOCATIONS / VEHIC		-							
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	Belle Isle, FL 32809			ĺ	AUTHOR	RIZED REPRESEI	NTATIVE			
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ACORD



JIMMY PATRONIS CHIEF FINANICAL 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: 8/5/2019** 

**EXPIRATION DATE: 8/4/2021** 

PERSON: MALCOLM S WERTZ

EMAIL: MALCOLMWERTZDESIGNS@GMAIL.COM

FEIN: 842441317

**BUSINESS NAME AND ADDRESS:** 

MALCOLM S. WERTZ ELECTRICAL CONTRACTOR LLC

5254 CHISWICK CIRCLE

ORLANDO, FL 32812

SCOPE OF BUSINESS OR TRADE:

Electrical Wiring Within Bulldings and Drivers

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.

DFS-F2-DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 08-13

E01028701

QUESTIONS? (850) 413-1609



## CITY OF BELLE ISLE

OCCUPATIONAL LICENSE 1600 Nela Avenue Belle Isle, FL 32809

**Business License Number:** 

L0-00684

Effective Date:

10/01/20

**Expiration Date:** 

09/30/21

Fee

25.00

Business Name:

MALCOLM S. WERTZ ELECTRICAL CO

Location:

**5254 CHISWICK CIRCLE** 

Classification:

**ELECTRICAL CONTRACTOR** 

POST IN A CONSPICUOUS PLACE NOT VALID UNLESS SIGNED BY CITY OFFICIAL

The person, firm, or corporation named above is hereby granted this license as the receipt for fees paid to the City of Belle Isle for the business described above for the period indicated. Granting of this certificate does not entitle the holder to operate or maintain a business in violation of any law or ordinance. The City of Belle Isle does not guarantee the qualifications of the holder of this certificate.

City Official

## LOCAL OCCUPATIONAL LICENSE

City of Belle Isle 1600 Nela Avenue Belle Isle, FL 32809

Phone: 407-851-7730 Fax 407-240-2222

www.cityofbelleislefl.org