

City of Belle Isle Job Site Permit Card

BUILDING 2021-03-044

Class: Residential

Site Address: 5287 Jade Cir - Belle Isle, FL32812

Description of Work: 10'x14' SLAB ONLY for future installation of 10 x 14 shed.

| Issued: Pozo Eddie E, Homeown | Contact # 321 332-5558 | | |
|----------------------------------|---|--|--|
| Payment/ Issued Date & Method: 4 | / / 2021 🗆 Sent by mail to the mailing address 🗆 Emailed | | |
| □ Picked up by | ☐ Visa ☐ Master Card ☐ Amex ☐ Discover ☐ Check / Money Order# | | |
| | | | |
| SEPARATE PERMITS WILL BE R | EQUIRED FOR ALL SUB-WORK - PERMIT MUST BE POSTED ON SITE | | |

| BUILDING | INSPECTOR | DATE | COMMENTS | \ |
|-------------------------|-----------|------|------------|---------------|
| 100 Demo Final | | | 1 | 0.1 |
| 110 Footing | | | | 1000 |
| 120 Stem Wall | 1 | 1) | | 0 |
| 130 Slab | 100 | V | | 0 |
| 140 Lintel/Tie Beam | 6 11 | | | 10 |
| 150 Down Pour | | | | |
| 160 Tilt Panel | 0/ | | ,e | \mathcal{O} |
| 170 Window In-progress | | | ~ | |
| 180 Sheathing (wall) | | N. | 1 | |
| 190 Sheathing (roof) | , | W | nh | |
| 195 Dry-in (roof/walls) | | | <i>y</i> • | |
| 200 Framing | 2 | 7/1 | | |
| 205 Drywall Nail/Screw | 100 | | | |
| 210 Fire Rated Assembly | 1, | 1 | | |
| 220 Above-Ceiling | | | | |
| 230 Insulation | | | | |
| 240 Lath | | | | |
| 250 Final | | | | |
| 260 Other | | | | |

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 or PM may be requested but not guarantee an exact arrival

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

SLABonly for Shed





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

| DATE: 1-27-202 | se) Application | |
|--|--|---|
| DATE: 1-21-202 | | |
| PROJECT ADDRESS 5287 (AND COTTO DU TI | PERMIT # 2021-03-044 | |
| PROPERTY OWNER FAMILY F PORTS | Belle isle, FL 32809 (32812 | |
| PHONE 321 - 372 553 | SNALUE OF WORK (lebor &material) \$ 3,711,53 | |
| A CONTROL OF TOUR PROPOSED IMPROVEMENTS | | |
| SLAB ONLY PERMIT, 14 YI | D. Fixtitus | |
| acceptance and | ILLVIOSHED ! | |
| Please provide Information, if applicate SINGLE FAMILY RESIDENCE: 8.5"x11" Plat Survey, Ptot Plan of Home and Floor Plans of BOAT DOCK: DEP Clearance Required with Application (Call 407-897-4100): please provided to the provided by the Company of the Provided Research Company of the Provided Re | blo. | |
| | | |
| SEPTIC SYSTEM (RESIDENTIAL): – Provide verification of OC Health Dept approval for a Homeowners will be required to have a contractor on record for homes that are rented an | m-site septic unk system, per FAC Chap. 64E-6 | |
| | lord not homestead | |
| Please Complete for the City of Belle Isla Zoning Review, Parcel Id Number: 30-3 | 13-20-1395-00-710 | |
| Tombtala this Informati | se visit http://www.ocoall.org/Souther/Parelisearch.aspx | |
| OR REQUIRED SETRACK C. | Wind Exposure Category: 8 C D | |
| ZOTING Setbacks, Note: thin 7 | 201 200 W | 4 |
| Restrictions. For New Single seath, Residence, a Traffic impart, for and expool impact will be assessed. | SPRINKLERS REQ'D N N SO. 2011 | 3 |
| PLANNING & ZONING APPROVAL | REVIEW Date: Sent RCD See Collise | 0 |
| LIEUE BAYE | SPRINKLERS REQ'D If Required – SUBMIT COPY OF PLANS FOR FIRE REVIEW Data: Sent | |
| PLEASE COMPLETE for Building Review (trin, or esert of signodesisted plans required) CONSTRUCTION TYPE A BUILD COMP. COURT Res: Stock S. Stock S. | TRAFFIC " S M SNEW PEN | Y |
| OCCUPANCY GROUP Comm Res: Single Fam Multi See | SCHOOL Y " 5 DAN ()) - 6 | 1 |
| MAY FLOOD ON STORIES TOTAL SO FT. | SWIMMING POOL Y | _ |
| MIN, FLOOD FLEV. | SCREEN ENCLOSURE Y | |
| WELL SEPTIC | BOAT DOOK Y | |
| AUILDING REVIEWER | BUILDING Y N 5 | |
| DATE | ORISE Y N. S | |
| VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE DATE 3 | SHED N 5 | |
| Per FSS 105.3.3: | Deverage | |
| An enforcing authority may not issue a building permit for any building construction, eraction, alteration, permit in a fallowing statement: "NOTICE: In addition to the regular masses or there is attached to the | OTHER SLADY N 551.50 | |
| permit the following statement: NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this properly that may be found in the permit, there may be | 1% BCAIB FEE 2 mg/ | |
| additional testrictions applicable to this properly that may be found in the public records of this parmit, there may be and there may be additional parmits required from other povernments, onlittles such as water management districts, state agencies, or federal agencies. | LS% DCA FEE | |
| Republic Services is by local assessment | 11150 | |
| Republic Services is by legal contract the sole authorized provider of gattage, recycling, yard waste, and commercial gatbage and construction debris collection and disposal services with the city limits of the City. Contractors, homeowners and commercial businesses are | TOTAL 41.30 | |
| 293-8000 to salup accounts for Comments for Comments and Comments of the Comme | OTHER PERMITS REQUIRED: | |
| are fixed by contract and are available at Cty half or from Republic Services. The City enforces the contract through its code enforcement office. Failure to comply will result in a stop work order. | PREPOWER Y TAX | |
| SEPARATE PERMITS ARE REQUIRED FOR GOODING TO THE | MECHANICAL Y NA | |
| J. S. | PLUMBING Y TRA | |
| Mon fee forslab 20 | GAS Y NÃ | |
| 13.00 | | |
| 19.30 | | |
| 3750 | | |
| J 1.9 | I | |







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

Bullding Permit (Land Use) Application
To be completed as required by State Statute Section 713 and other applicable sections.

| Owner's Name Expit E Pozo | PERMIT # 201- |
|--|--|
| Owner's Address 5287 JANE CIPILE BELL | le Ide FL 32817 |
| Contractor Name EANIE E . POZO | Company Name OWNER |
| | Company Address 5287 ADE 42019 |
| Contact Phone/Cell 311 - 332 - 5558 | City, State, ZIP BOLLE ISLE FL 3281 |
| Contact Email RAPE 6953(G) GMAIL (O | Contact Fax N/A |
| If you intend to obtain financing, consult with your lender or an attorney | |
| this permit does not grant permission to violate any applicable City and obtain a permit to do the work and installations as indicated. I certify that no work will be performed to meet the standards of all laws regulating construct all other construction including ROOFING, ELECTRICAL, MECHANICAL, PUL OWNER'S AFFIDAVIT: Legrify that all the foregoing information is accurate. | is granted I agree to conform to all Division of Building Safety Regulation agulating same and in accordance with plans submitted. The issuance of for State of Florida codes and for ordinances. Application is hereby made to work or installation has commenced prior to the issuance of a permit and that a dion in this jurisdiction. I understand that a <u>separate</u> permit must be secured for UMBING, GAS, SIGNS, POOLS, SCREEN ENCLOSURES, ETC. |
| | Impervious Surface Ratio Worksheet |
| Owner Signature policy (plant | Development Zoned A-1, A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per |
| The foregoing instrument was acknowledged before me this OLA JAN | City Code, Section 50-74: Impervious Surface Ratlo |
| by Eddle E. Pozo who is personally known to me | Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE). |
| The india Designally known to me | Total Lot Area 12947 x 0.35= |
| and who produced Torida Driver UCLIVSE as identification and who did not take an oath. | Allowable Impervious Area (BASE) 45297 |
| Notary as to Owner 100-001 MI | 2. Calculate the "proposed" impervious area on the lot. This includes the |
| State of Florida County of Orange Notary Public - State of Florida | sum of all areas that do not allow direct percolation of rainwater. Examples include house, pool, deck, driveway, accessory building, etc |
| Commission # GG 322700 | A 710 |
| My Comm. Expires Apr 17, 2023 | • House |
| | Driveway 1,500 3F |
| Contractor Signature | Walkway |
| COMPANY NAME D/A | Accessory Buildings |
| he foregoing instrument was acknowledged before me this | • Pool & Spa |
| y who is personally known to me | Deck & Patio 480 SF |
| nd who produced | · Other KRODSED SHED 140 |
| is identification and who did not take an oath. | |
| a l A l 3 | Actual Impervious Area (AIA) |
| lotary as to Owner State of Florida County of Orange | If AIA is less than BASE, subtract AIA from BASE to determine the amount of impervious area that may be added without providing onsite retention. |
| | 4. If AIA is greater than BASE, then onsite retention must be provided. |
| | Assuming 7.5 inches of rainfall based on a 24hr 10 year Rain Event (TP40), |
| | the formula is: (7.5 inches rainfall/12 inches p/foot) X (result from line 4) = cubic feet of storage volume needed |
| 092.0/2 | - Control of the Cont |

SLAB ONLY DERMIT

LENGTH 25 FEET AWANTH 3.5 FEET CEIVER JAN 2 7 202 HEGHT 5 INC. BY: BOLLADARY SURVEY SWARE SURVEY NOTES CONCRETE DRIVE CROSSES ON SOUTHERLY SIDE OF LOT. CONCRETE DRIVE CROSSES INTO 7.5' U.E. ON EASTERLY SIDE OF LOT. FT from 1.01 00 A back THERE ARE FENCES NEAR THE BOUNDARY AND CROSS INTO THE 7.5" U.E. ON SIDES AND REAR OF LOT. LOT 67 5.89'50'39"E. 100.00 FOUND 5/8° IRON ROD NO I.D. 1.2 7.5' U.E. 0.4 SET 1/2" IRON ROD LB #7893 ... LOT ? 7 38 LOT 70. feet from side 129.32 LOT 72 129. HEGEN HEGH HEGH 1 10 0.3 ≆ نىإ 21 SWALEC N.00°09°21 ن بس 60.00 BUILDING 88 WBi 7.5 #5287 teel 36.7 FOUND 5/8° IRON ROD NO I.D. FOUND 5/8 Levolt 189 FEET CONCRETE WALK 4 FEE HICEIU N.89'50'39"W. 100.00 HEIGHT 5 INC 60' R/W (IMPROVED) Date: JADE CIRCLE TARGET SURVEYORS CERTIFICATE IHEREBY CERTIFY THAT THIS BOUNDARY SURVEY
IS A TRUE AND CORRECT REPRESENTATION OF A
SURVEY PREPARED UNDER MY DIRECTION.
NOT VALID WITHOUT AN AUTHENTICATED ELECTRONIC
SIGNATURE AND AUTHENTICATED ELECTRONIC SEAL
OR A RAISED EMBOSSED SEAL AND SIGNATURE SURVEYING, LLC LB #7893 SERVING FLORIDA Digitally signed by Kenneth 6250 N. MILITARY TRAIL, SUITE 102
WEST PALJA BEACH, PL JJM07
PHONE (561) 640-4800
STATEWIDE PHONE 1800) 726-4807
STATEWIDE FACSIMILE (800) 741-0576
WEBSITE NID /faigolfurreying.nol Kenneth Osborne Sborne 200 15 05'00' Date: 2020.12.03 KENNETH J OSBORNE PROFESSIONAL SURVEYOR AND MAPPER SELECT

| SOLD TO: 2ddie Pozo | orida 33823 |
|---|--|
| Phone: 407-5753426 Office: Location Sold By: Phone: Orlando Warni 407277-5207 Terms: | Other 32 -332-5558-Cel. Shipped To: 5287 Jade Cv. Belle Isle Fl. 32812 Email vave 6953 0 gmail. Comp Delivery Date Contact Person: Ol-13-2021 Eddie |
| 1 10 x 14 Cave white | Trim Color Roof Unit Price Amount LOGODY LOGONISHUE Corners LOGONISHUE 3,485.0 |
| Door Size Style Window(s) Size DD X Window(s) Size DD X Window(s) Size Plectric VC Loading Instructions: DOOV FOR 1 Mg | |
| 22x 1/0 22x 1/0 Window Window 1/1 Foot Cov Full Glass 500r Hinger 10 | Sale Amount Misc. Charges Freight Sales Tax Total Amt. Received Balance Due 3, 485.00 3, 485.00 3, 71/-53 |
| Customer Signature | Terms & Conditions: Price of building includes delivery. Customer is responsible for any necessary permits for installation of building. Smithbill Industries is not responsible for removal of fences, trees, existing sheds, etc. Smithbill Industries is not responsible for damage to underground utilities. All electrical connections should be made by a licensed electrician and completed per existing National Electrical Code and local Code Requirements. |

5387 Jade WO. 195013

2021-02012

| _ | epared by: | DOCH 20210123129 03/03/2021 08:12:40 AM Page Rec Fee: \$10.00 |
|----------------------|--|--|
| | | Phil Ulamond, Comptroller |
| 2 | turn to: | Orange County, FL MB - Ret To: EDDIE E POZO |
| _ | | MARIE MARIE MARIE MARIE CALLANDO |
| | NOTICE OF COMME | MCEMENT WILLIAM OF THE PROPERTY OF THE PROPERT |
| t | ate of Florida, County of Orange | NOTALITY |
| ŀ | e undersigned hereby gives notice that improvement will be | made to certain real property, and in accordance |
| ıi | h Chapter 713, Florida Statutes, the following information is pescription of property (legal description of the property, a | provided in this Notice of Commencement. and street address if available) |
| | General description of improvement | IREADY BUILD STED |
| 3. | Owner information or Lessee Information if the Lessee of | contracted for the Improvement |
| | Name EDDIE E. VUZO Address 5287 NAME CIRCLE POLLS | Tele F1 32817 |
| | Interest in Property | |
| | Name and address of fee simple titleholder (if different fr | rom Owner listed above) |
| | Name EDDIG | Voza |
| ŧ. | Address | ADE CIRCLE BOILE ISIR, FL |
| • | Name | Telephone Number |
| | Address UNIVEL | |
| ì. | Surety (if applicable, a copy of the payment bond is attached | |
| | NameAddress | Telephone Number Amount of Bond \$ |
| | Lender | Amount of Boild \$ |
| | Name | Telephone Number |
| | Address/\(\sigma / \tau \) | |
| • | Persons within the State of Florida designated by Owne be served as provided by §713.13(1)(a)7, Florida Statute | # upon whom notices or other documents may |
| | | Telephone Number |
| | AddressD//+ | |
| • | In addition to himself or herself, Owner designates the i | following to receive a copy of the Lienor's |
| | Notice as provided in §713.13(1)(b), Florida Statutes. | Talanhana Musehan |
| | Address | Telephone Number |
| | Expiration date of notice of commencement (the expiration | on 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) | × |
| A | RNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER TI | HE EXPIRATION OF THE NOTICE OF COMMENCEMENT |
| Ŗ, | CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I ULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPE | EPTY A NOTICE OF COMMENCEMENT MINOT BE |
| Еž | UKURU AND MOSTED ON THE JOB SITE REFORE THE FIRST INSPEC | TION IF YOU INTEND TO DETAIN GNANCING CONSULT |
| E8 | YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK O | OR RECORDING YOUR NOTICE OF COMMENCEMENT. |
| E8 | ler penalty of perjury, I declare that I have read the foreg | ioing notice of commencement and that the |
| EX EX III | s stated in it are true to the best of my knowledge and b | elief. |
| EX EX IN | Colvin atout | Mula P |
| EX EX IN | | tor/Partner/Manager Signatory's Title/Office |
| EX EC IT IC | athre of Dwner or Lessee, of Owner's or Lessee's Authorized Officer/Direct | |
| EX EC //IT | after of Lessee, of Camer's or Lessee's Authorized Officer/Direct | 1 C. 1 T. T. 1 D |
| EXECUTE OF STREET | dregoing instrument was acknowledged before me this | h day or Ebbashov Eddie E. Pozo |
| ec fit incient | foregoing instrument was acknowledged before me this | day or ferface by Eddie F. Pozo |
| er er no er | foregoing instrument was acknowledged before me this | day or ferface by Eddie F. Pozo |
| ec fit incient | foregoing instrument was acknowledged before me this | day or Fichard by Eddie F. Pozo 287 Dade Grue nama of person FC 3 |
| EEC VIT | foregoing instrument was acknowledged before me this for for for for | day of Fridge by Eddie F. Pozo 387 Jake Crole Collette FC 3 Name of party on behalf of whom instrument was executed |
| er igr | Type of authority, e.g., officer, trustee, attorney in fact Signature of Notary Public – State of Florida | day of FLOOD by Eddle F. PZO 287 monthlypar crule name of person Name of party on behalf of whom instrument was executed Libri H LING Print, type, or stamp commissioned name of Notary Public |
| er er | Type of authority, e.g., officer, trustee, attorney in fact Signature of Notary Public – State of Florida Sonally Known OR Produced ID | day of Errata by Eddle F. AZO 287 month year and of person of per |
| | Type of authority, e.g., officer, trustee, attorney in fact Signature of Notary Public – State of Florida | day of Fritz by Eddle F. AZO 281 monthlypar |
| TO CO | Type of authority, e.g., officer, trustee, attorney in fact Signature of Notary Public – State of Florida Sonally Known OR Produced ID | day of Charaby Eddle F. RZO 287 month/year and person of person o |

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

Terri Wilson
Deputy Comptroller

03/03/2021

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

OWNER BUILDER DISCLOSURE STATEMENT

Per Florida Statue 455.228: Homeowners hiring unlicensed Contractors may be subject a fine of up to \$5,000.00!

| | _ ' |
|-------|---|
| 3efor | re me this day personally appeared <u>EDNE YOZO</u> , who being duly sworr |
| lepo | ses, and says as follows. "I hereby acknowledge that I have read and fully understand the individua |
| provi | sions of this instrument." |
| 1. | I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builde permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as mown contractor with certain restrictions even though I do not have a license |
| 2. | I understand that building permits are not required to be signed by a property owner unless he or she is responsible for the construction and is not hiring a licensed contractor to assume responsibility. Initial |
| 3. | I understand that, as an owner-builder, I am the responsible party of record on a permit. I understand that I may protect mysel from potential financial risk by hising a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that contractor is required by law to be licensed in Florida and to list his or her license numbers or permits and contracts. |
| 4. | I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build of improve a commercial building if the costs do not exceed \$75,000.00. The building or residence must be for my own use of occupancy. It may not be built or substantially improved for sale or lease. If a building or residence that I have built or substantially improved myself is sold or leased within 1 year after the construction is complete, the law will presume that I built or substantially improved it for sale or lease, which violates the exemption. |
| 5. | I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. Initial |
| 6. | I understand that I may not hire an unlicensed person to act as my contractor or to supervise persons working on my building or residence. It is my responsibility to ensure that the persons whom I employ have the licenses required by law and by county or municipal ordinance. |
| 7. | I understand that it is a frequent practice of unlicensed persons to have the property owner obtain an owner-builder permit, that erroneously implies that the property owner is providing his or her own labor and materials. I, as an owner-builder, may be held liable and subjected to serious financial risk for any injuries sustained by an unlicensed person or his or her employees while working on my property. My homeowner's insurance may not provide coverage for those injuries. I am willfully as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property. |
| 8. | I understand that I may not delegate the responsibility for supervising work to a licensed contractor who is not licensed to perform the work being done. Any person working on my building who is not licensed must work under my direct supervision and must be employed by me, which means that I must comply with laws requiring the withholding of federal income tax and social security contributions under the Federal Insurance Contributions Act (FICA) and must provide workers compensation for the employee. I understand that my failure to follow these laws may subject me to serious financial risk. |
| 9. | I agree that, as the party legally and financially responsible for this proposed construction activity. I will abide by all applicable laws and requirements that govern owner-builders as well as employers. I also understand that the construction must comply with all applicable laws, ordinances, building codes, and zoning regulations. Initial |

10. I understand that I may obtain more information regarding my obligations as an employer from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Lice Board at (850)487-1395 or

www.Call.Center@dbpr.state.fl.us for more information about licensed contractors.

Initia

| 11. | . I am aware of, and consent to, an owner-builder building permit applied for in my name and understand | hat I am the party |
|-----|--|--------------------|
| | legally and financially responsible for the proposed construction activity at the following address: | |
| | legally and financially responsible for the proposed construction activity at the following address: Project Address: 5281 ADE GER Falls SE F 328/2 | Initial |

- 12. I agree to notify the City of Belle Isle Building/Zoning Department immediately of any additions, deletions, or changes to any of the information that I have provided on this disclosure. Initial
- 13. FBC 105.3.6 requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

 Initial

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with financial loss that you sustain as a result of a complaint. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if any unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is property licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notarized signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

| \sim \sim \sim \sim \sim | |
|--|--|
| Signature: Odolu (Signature of the property owner) | Print: EDDIE E POZO (Name of the property owner) |
| Signature: N/A | Print: |
| (Signature of the property owner) | (Name of the property owner) |
| Owner's Address: 5287 Jane Cocle, | Belle I de FZ 32817 |
| The foregoing instrument was acknowledged before me this | 4th Rebruary 2021 |
| by Eddie E Pozo who is p | versonally known to me / who produced the following |
| Florida Driver License | as identification and who did not take an oath. |
| State of Florida / County of | Seal: LIBNI M LUNA Notary Public - State of Florida Commission # GG 322700 My Comm. Expires Apr 17, 2023 |
| | |