



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

PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 105.3: An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies." The issuance of this permit does not grant permission to violate any applicable City, Orange County, State of Florida and/or Federal codes and/or ordinances. Separate permits are required for Signs, Roofing, Electrical, Gas, Plumbing and Mechanical services. This permit becomes VOID if the work authorized is not commenced within 6 months, or is suspended or abandoned for a period of 6 months after commencement. WORK SHALL BE CONSIDERED SUSPENDED IF AN APPROVED INSPECTION HAS NOT BEEN MADE WITHIN A 6 MONTH PERIOD. PERMISSION IS GRANTED TO DO THE FOLLOWING WORK ACCORDING TO THE CONDITIONS HEREON AND THE APPROVED PLANS AND SPECIFICATIONS, SUBJECT TO COMPLIANCE WITH THE ORDINANCES OF THE CITY OF BELLE ISLE, FLORIDA.

Scope of Work: PLUMBING: 4 toilets, 2 bathtubs, disposal, washing machine, water heater, sewer, 5 lavatories, 2 showers, sink, dishwasher & laundry tub

Comments: None

Project Information
 Address: 4100 Isle Vista Avenue, Belle Isle, FL 32812
 Parcel ID: 20-23-30-0668-00-310
 Property Owner: Surrey Homes LLC
 Phone Number: None

 Company Name: KLM Plumbing Inc.
 Contractor Name: Marsh, Kenneth
 License Number: CFC057148
 Address: 4855 W. Amelia Avenue, Orlando, FL 32808
 Phone Number: 407-299-3151

Permit Number: 2014-12-020
 Date of Application: 12/16/2013
 Date Permit Issued: 12/23/2013

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU 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." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

School \$
 Traffic \$

ZONING FEES

Zoning Fee \$

UNIVERSAL ENG - BUILDING FEES

Cert of Occ \$
 Demo \$
 Building \$
 Fence \$
 Driveway \$
 Shed \$
 Window(s) \$
 Door(s) \$
 PrePower \$
 Electrical \$
 Temp Pole \$
 Plumbing \$289.50
 Mechanical \$
 Gas \$
 Roofing \$
 Boat Dock \$
 Screen Encl \$
 Swimming Pool \$
 Sign \$

SURCHARGE FEES

Surcharge Fee \$4.34
 Surcharge Fee \$4.34

TOTAL FEES \$298.18

Date Paid 12-23-13

CC or Check # 53311

Amount Paid 298.18

The person accepting this permit shall conform to the terms of the application on file and construction shall conform to the requirements of the Florida Building Code (FS 553).

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

Have Zoning Approval Conditions Been Met? YES NO Have Stormwater Approval Conditions Been Met? YES NO Silt fencing in place? YES NO Turbidity Barrier in place? YES NO

BUILDING

1st

Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____ (Footing/Foundation)

2nd

_____ (Slab)

3rd

_____ (Lintel) \ (Wall Reinforcing on Masonry Building)

4th

_____ (Exterior Framing) \ (Roof/Wall Sheathing)

5th

_____ (Framing) \ (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)

6th

_____ (Insulation to be Made After Roof Installed)

7th

_____ (Drywall)

8th

_____ (Sidewalk/Driveway)

9th

_____ (Other)

10th

_____ (Final - After MEP and Other Applicable Finals)

ROOFING

1ST ROOFING Deck Nailing/Dry-in/Flashing _____

2nd ROOFING Covering In-Progress _____

3rd ROOFING Covering Final _____

PLUMBING (Pool-Piping, Solar, Irrigation, Water Treatment Equip, Etc...)

1ST _____ (Underground) 2nd _____ (Sewer)

3rd _____ (Rough-In/Tub Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP MECHANICAL ELECTRICAL LOW VOLTAGE

1st _____ (Rough-In) 2nd _____ (Final)

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 1pm. Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	
Property Owner	2014-12-020
Address	Sunny Homes 4100 Isle Vista Ave Plumbing 12-16-13
Nature of Improvement	
Received Application	
Sent for Stormwater Review	
Stormwater Approved	
Sent for Zoning Review	
Zoning Approved	
Applied for Variance	
Variance Approved	
Sent to BO for Review	12-17-13
Building Official Approved	12-23-13
Comments	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



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

received
12-16-13

APPLICATION FOR PLUMBING PERMIT

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

DATE OF APPLICATION: _____ **PERMIT NUMBER** 2014-12-020
The undersigned hereby applies for a permit to make plumbing installations as indicated below. PLEASE PRINT
Project Address 4100 Isle Vista Ave Belle Isle FL 32809 X 32812
Property Owner Survey Homes Phone _____
Property Owner's Mailing Address 1133 LOUISIANA AVE City WALK PARK
State FL Zip Code 32789 Parcel Id Number: 2023300668-00-310

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

Class of Building: Old New Type of Building: Residential Commercial Other
Type of Work: New Alteration Addition Repair Type of System: Sewer Septic Re-pipe

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

VALUATION OF JOB (labor & materials) \$ 7000

FIXTURES	NUMBER	FEE	FIXTURES	NUMBER	FEE
Water Closets (Toilet)	4		Dishwashers	1	
Bathtubs	2		Laundry Tubs	1	
Urinals			Floor Drains		
Disposals	1		Grease Traps		
Washing Machines	1		Trailer Connections		
Water Heaters	1		Spa		
Sewer			Solar		
Catch Basins/Sumps	1		Pool Piping		
Service Sink			*Irrigation: (# Systems / # Heads)		
Lavatory (Bathroom Sink)	5		Water Softener		
Showers	2		Re-pipe		
Sinks	1		Miscellaneous (Specify)		

Backflow Preventer must be tested after installation, report must be posted with permit for Final Inspection. Total Fees 289.50
3% State Surcharge 8.68
Permit/Review Fee Grand Total 298.18
Building Official: Mary Buiss7 Date 12-23-2013

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

LICENSE HOLDER SIGNATURE _____ LICENSE # CFL057148
LICENSE HOLDER NAME Kenneth H. Hush Jr. COMPANY NAME K.H. Plumbing Inc
Street Address 4855 West Amelia
City Orlando State FL Zip Code 32808 Phone Number 407-299-3151

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

Building Permit Number 2014-11-013

RETAIN A COPY FOR OFFICE USE - Updated: 12/2012 FORM #PLU011



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
11/12/2013

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER KLM INSURANCE GROUP, INC. P. O. BOX 160398 ALTAMONTE SPRINGS FL 32716	CONTACT NAME: Certificate Department PHONE: (407) 569-5490 FAX: (407) 389-3550 E-MAIL: Certificates@kml.com ADDRESS: 119381199	INSURER A: Old Dominion Insurance Company INSURER B: Westfield Insurance Group INSURER C: FFVA Mutual Ins Co INSURER D: INSURER E: INSURER F:	NAIC # 40231 24112 10385
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INSR LTR	TYPE OF INSURANCE	ADDRESS	POLICY NUMBER	POLICY EFF. DATE (MM/DD/YYYY)	POLICY EXP. DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY COMMERCIAL GENERAL LIABILITY CLAIMS MADE CLAIMS SELECT	MPC2141E	119381199	11/5/2013	11/5/2014	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (per occurrence) \$1,000,000 MED EXP (Any one person) \$500,000 PERSONAL & ADV INJURY \$10,000 GENERAL AGGREGATE \$1,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 \$
B	AUTOMOBILE LIABILITY POLICY X PRO. SEL. LOC ANY AUTO ALL OWNED AUTOS HIRED AUTOS SCHEDULED AUTOS (any other)	CWP0609670	119381199	8/1/2013	8/1/2014	COMBINED SINGLE LIMIT (per accident) \$1,000,000 BODILY INJURY (per person) \$1,000,000 BODILY INJURY (per accident) \$1,000,000 PROPERTY DAMAGE (per accident) \$10,000 PIP \$10,000
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPERTY PARTNER/EXECUTIVE OFFICER/EMERIT EXCLUDED (Mandatory in NH) If "X" check the worker DESCRIPTION OF OPERATIONS below	WC840-018288-2013A	119381199	11/1/2013	11/1/2014	EACH OCCURRENCE \$ AGGREGATE \$ \$ X WC STATUTE LIMITS X (FML) (FR) EL. EACH ACCIDENT \$1,000,000 EL. EMPER ALL EMPLOYEE \$1,000,000 EL. DISTASH POLICY LIMIT \$1,000,000
A	Contractors Equipment Leased & Rented Equipment	MPG2141C	119381199	11/5/2013	11/5/2014	Leased & Rented Equip \$50,000 Hauling \$1,000

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

CERTIFICATE HOLDER City of Belle Isle Building Department 1600 Nela Avenue Belle Isle FL 32809	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE <i>John Allen Secretary</i>
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STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
 1940 NORTH MONROE STREET
 TALLAHASSEE FL 32399-0783

(850) 487-1395

MARSH, KENNETH LEE JR
 KLM PLUMBING INC
 4855 W AMELIA AVE
 ORLANDO FL 32808



STATE OF FLORIDA
 DEPARTMENT OF BUSINESS AND
 PROFESSIONAL REGULATION

CPC057148 08/31/12 128045282

CERTIFIED PLUMBING CONTRACTOR
 MARSH, KENNETH LEE JR
 KLM PLUMBING INC

AC# 6327119

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

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

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

IS CERTIFIED under the provisions of Ch.489 FS
 Expiration date: AUG 31, 2014 L12083103011

DETACH HERE

THIS DOCUMENT HAS A COLORED BACKGROUND. MICROPRINTING. LINEARTM PATENTED PAPER

AC# 6327119

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12083103011

DATE	BATCH NUMBER	LICENSE NBR
08/31/2012	128045282	CFC057148

The PLUMBING CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2014

MARSH, KENNETH LEE JR
 KLM PLUMBING INC
 4855 W AMELIA AVE
 ORLANDO FL 32808

RICK SCOTT
 GOVERNOR

KEN LAWSON
 SECRETARY

DISPLAY AS REQUIRED BY LAW

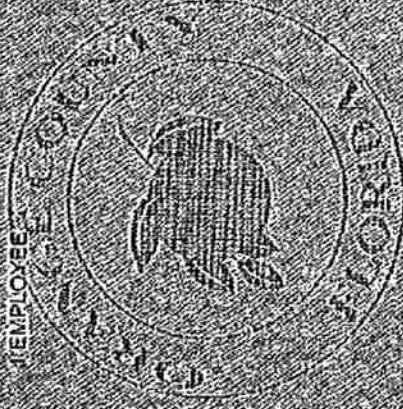
ORIGINAL
 1803 CONTR-PLUMBING
 2012 \$30.00 1 EMPLOYEE
 EXPIRES 9/30/2013
 1803-0013554

TOTAL TAX \$30.00
 PREVIOUSLY PAID \$30.00
 TOTAL DUE \$0.00
 MARSH KENNETH L
 K L M PLUMBING INC
 MARSH KENNETH L
 4855 W AMELIA AVE
 ORLANDO FL 32808-7726

4855 W AMELIA AV
 U - ORLANDO, 32808
 PAID: \$30.00 99-533170
 7/3/2012

Earl K. Wood, Tax Collector Local Business Tax Receipt Orange County, Florida
 This local business tax receipt is in addition to and not in lieu of any other tax required by law or municipal ordinance. Businesses are subject to regulation of zoning, health and other lawful authorities. This receipt is valid from October 1 through September 30 of receipt year. Delinquent penalty is added October 1.

ORIGINAL
 1803 CONTR-PLUMBING
 2012 \$30.00 1 EMPLOYEE
 EXPIRES 9/30/2013
 1803-0013554



TOTAL TAX \$30.00
 PREVIOUSLY PAID \$30.00
 TOTAL DUE \$0.00
 MARSH KENNETH L
 K L M PLUMBING INC
 MARSH KENNETH L
 4855 W AMELIA AVE
 ORLANDO FL 32808-7726

4855 W AMELIA AV
 U - ORLANDO, 32808
 PAID: \$30.00 99-533170
 7/3/2012

This receipt is official when validated by the Tax Collector.