



City of Belle Isle Job Site Permit Card BUILDING 2020-03-044

Site Address: 3537 Brighton Park Cir 32812

Class: Residential

Parcel Number: 29-23-30-0906-00-410

Subdivision

Description of Work: INSTALL NEW SCREEN ENCLOSURE 20' X15' WITH FOOTINGS & PAVERS.
(ONE SIDE ALUMINUM ROOF 12' X 15' / OTHER SIDE SCREEN ROOF 7' X 15')

Issued: MD CONSTRUCTION LLC, DAVILA, M ROBERTO License # SCC131151708 Contact # 863 289-9354

Payment/ Issued Date & Method: 4/27/2020 Picked up by email Emailed

Visa Master Card Amex Discover Check / Money Order#

87811

SEPARATE PERMITS WILL BE REQUIRED FOR ALL SUB-WORK - PERMIT MUST BE POSTED ON SITE

BUILDING	INSPECTOR	DATE	COMMENTS
100 Demo Final			
110 Footing			
120 Stem Wall			
130 Slab			
140 Lintel/Tie Beam			
150 Down Pour			
160 Tilt Panel			
170 Window In-progress			
180 Sheathing (wall)			
190 Sheathing (roof)			
195 Dry-in (roof/walls)			
200 Framing			
205 Drywall Nail/Screw			
210 Fire Rated Assembly			
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 BI scheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. **Next-Day Inspection requests must be made by 3:00 p.m.** Please include the following 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

"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."



RECEIVED MARCH - 16 - 2020 COBI - UES
City of Belle Isle

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

RECEIVED
MAR 16 2020

Building / Land Use Permit Application

DATE: 3-16-2020

PERMIT # 2020-03-044

PROJECT ADDRESS 3537 Brynthon Park Cir.

Belle Isle, FL 32809 32812

PROPERTY OWNER Porco Johnson

PHONE 321-274-1806

VALUE OF WORK (labor & material) \$ 10,620

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

Install New Screen Enclosure 30' x 15' with footings & pavers
(one side Alum. Roof 13' x 15' / other side screen roof 7' x 15')

PAID

Please provide information, if applicable.

- **SINGLE FAMILY RESIDENCE:** 8.5"x11" Plat Survey, Plot Plan of Home and Floor Plans of New Construction/Revision Required
- **BOAT DOCK:** DEP Clearance Required with Application (Call 407-937-4100); please provide a copy of their report
- **SEPTIC SYSTEM (RESIDENTIAL):** - Provide verification of OC Health Dept approval for on-site septic tank system, per FAC Chap. 64E-6
- Homeowners will be required to have a contractor on record for homes that are rented and/or not homestead

Please Complete for the City of Belle Isle Zoning Review: Parcel Id Number: 29-23-30-0906-00-410

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

SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCRoACH INTO ANY EASEMENT OR REQUIRED SETBACK. Survey specific to this project is required to show compliance with zoning setbacks. Note: this Zoning Approval MAY or MAY NOT be in conflict with your Deed Restrictions. For New Single Family Residence, a Traffic Impact Fee and School Impact will be assessed.

Date: 3/17/20 By: [Signature]

PLANNING & ZONING APPROVAL:

DATE City of Belle Isle

PLEASE COMPLETE for Building Review (min. of 2 sets of signed/sealed plans required)

CONSTRUCTION TYPE Addition

OCCUPANCY GROUP Comm Res: Single Fam Multi Fam

#BLDG. 1 #UNITS 1 #STORIES 1 TOTAL SQ.FT. 300

MAX. FLOOR LOAD _____ MAX. OCCUPANCY _____

MIN. FLOOD ELEV. _____ LOW FLOOR ELEV. _____

WATER SERVICE Belle Isle WELL _____ SEPTIC _____

BUILDING REVIEWER Joe below DATE 3-17-2020

VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE for DATE 2-16-2020
VNOC VPCWS PA

Per FSS 105.3.3:

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."

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.

SEPARATE PERMITS ARE REQUIRED FOR ROOFING, ELECTRICAL, PLUMBING, GAS, MECHANICAL, SIGNS, POOLS, ENCLOSURES, ETC

Page 1 of 2

15' IK
4x10

25
40
65.2
30.50
97.50

Wind Exposure Category: B ___ C ___ D ___

SPRINKLERS REQ'D Y N
If Required - SUBMIT COPY OF PLANS FOR FIRE REVIEW Date: Sent RCD

ZONING	<input checked="" type="checkbox"/>	N	\$165.
CERT OF OCC	<input checked="" type="checkbox"/>	N	\$
TRAFFIC	<input checked="" type="checkbox"/>	N	\$
SCHOOL	<input checked="" type="checkbox"/>	N	\$
FIRE	<input checked="" type="checkbox"/>	N	\$
SWIMMING POOL	<input checked="" type="checkbox"/>	N	\$
SCREEN ENCLOSURE	<input checked="" type="checkbox"/>	N	\$97.50
ROOFING	<input checked="" type="checkbox"/>	N	\$
BOAT DOCK	<input checked="" type="checkbox"/>	N	\$
BUILDING	<input checked="" type="checkbox"/>	N	\$
WINDOW(S)	<input checked="" type="checkbox"/>	N	\$
DOOR(S)	<input checked="" type="checkbox"/>	N	\$
FENCE	<input checked="" type="checkbox"/>	N	\$
WED	<input checked="" type="checkbox"/>	N	\$
DRIVEWAY	<input checked="" type="checkbox"/>	N	\$
OTHER	<input checked="" type="checkbox"/>	N	\$

1% BC&A FEE

2 min

1.5% DCA FEE

2 min

TOTAL

266.50

OTHER PERMITS REQUIRED:

ELECTRICAL	Y	NA
PREPOWER	Y	NA
MECHANICAL	Y	NA
PLUMBING	Y	NA
ROOFING	Y	NA
GAS	Y	NA

97.50 PAID VISA 8781 on 4-7-20

Digitally signed by Benjamin Suriel Lic
AR92725 PX3694
DN: C=US,
E=bsuriel@universalengineering.com,
O=Universal Engineering Sciences, Inc.,
OU=Building Department Unit, CN=Benjamin
Suriel Lic AR92725 PX3694
Location: 3532 Maggie Blvd. Orlando FL 32811
Reason: I have reviewed this document
Contact Info: Universal Engineering Sciences,
Inc 407-288-3030
Date: 2020.03.17 12:13:05-04'00'

Benjamin Suriel Lic AR92725 PX3694



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

RECEIVED
 MAR 16 2020
 BY: _____

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

PERMIT # 2020-03-044

Owner's Name Rosco Johnson

Owner's Address 3537 Brignton Park Cir Orlando FL 32812

Contractor Name <u>Marcos Davila</u>	Company Name <u>MD Construction LLC</u>
License # <u>3CC 131151708</u>	Company Address <u>6056 SR 541</u>
Contact Phone/Cell <u>803-289-9354</u>	City, State, ZIP <u>Winter Haven FL 33881</u>
Contact Email <u>permits@mdconstruction-fl.com</u>	Contact Fax _____

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 if job is \$2500(+) or if A/C Replacement \$7500(+) 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.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Division of Building Safety Regulations (www.floridabuilding.org) and City Ordinances (www.municode.com) regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable City and/or State of Florida codes and/or ordinances. Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for all other construction including ROOFING, ELECTRICAL, MECHANICAL, PLUMBING, GAS, SIGNS, POOLS, SCREEN ENCLOSURES, ETC.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Owner Signature Rosco Johnson
 The foregoing Instrument was acknowledged before me this 3/11/2020
 by Rosco Johnson who is personally known to me
 and who produced Drivers License
 as identification and who did not take an oath.
 Notary as to Owner
 State of Florida
 County of Orange



Contractor Signature Marcos Davila
 COMPANY NAME MD Construction LLC
 The foregoing instrument was acknowledged before me this 3/16/2020
 by Marcos Davila who is personally known to me
 and who produced _____
 as identification and who did not take an oath.
 Notary as to Owner
 State of Florida
 County of Orange



Impervious Surface Ratio Worksheet
 Development Zoned A-1, A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per City Code, Section 50-74: Impervious Surface Ratio

- Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).
 Total Lot Area 3,760 X 0.35 =
 Allowable Impervious Area (BASE) 1316
- Calculate the "proposed" impervious area on the lot. This includes the sum of all areas that do not allow direct percolation of rainwater. Examples include house, pool, deck, driveway, accessory building, etc.
 - House _____
 - Driveway _____
 - Walkway _____
 - Accessory Buildings _____
 - Pool & Spa _____
 - Deck & Patio _____
 - Other _____
 Actual Impervious Area (AIA) _____
- 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.
- 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

Belle Isle

Permit Number: 2020-03-044
Folio/Parcel ID #: 29 23 30-0906-00-410
Prepared by: Marcos Davila

Return to: MD Construction LLC
6656 SR 544
Winter Haven, FL 33881

DOCM 20200136914
03/03/2020 01:04:00 PM Page 1 of 1
Rec Fee: \$10.00
Phil Diamond, Comptroller
Orange County, FL
IP - Ret To: MD CONSTRUCTION LLC



NOTICE OF COMMENCEMENT

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

- Description of property** (legal description of the property, and street address if available)
Brighton Park 91196 Lot 41
- General description of improvement**
New Screen Enclosure / Screen Room
- Owner information or Lessee information if the Lessee contracted for the improvement**
Name Connie Johnson
Address 3537 Brighton Park Cir. Orlando FL 32812
Interest in Property OWNER
Name and address of fee simple titleholder (if different from Owner listed above)
Name _____
Address _____
- Contractor**
Name MD Construction LLC Telephone Number 321-663-5203
Address 6656 SR 544, Winter Haven, FL 33881
- Surety** (if applicable, a copy of the payment bond is attached)
Name _____ Telephone Number _____
Address _____ Amount of Bond \$ _____
- Lender**
Name _____ Telephone Number _____
Address _____
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**
Name _____ Telephone Number _____
Address _____
- In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**
Name _____ Telephone Number _____
Address _____
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)

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

Connie Johnson _____ **Owner**
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Partner/Manager Signatory's Title/Office

The foregoing instrument was acknowledged before me this 13 day of March by Connie Johnson
as Owner _____ for _____
Type of authority (e.g., officer, trustee, attorney in fact) Name of party on behalf of whom instrument was executed

Signature of Notary Public - State of Florida Print, type, or stamp commissioned name of Notary Public

Personally Known _____ OR Produced ID X
Type of ID Produced Drivers License

Form content revised: 10/17/12

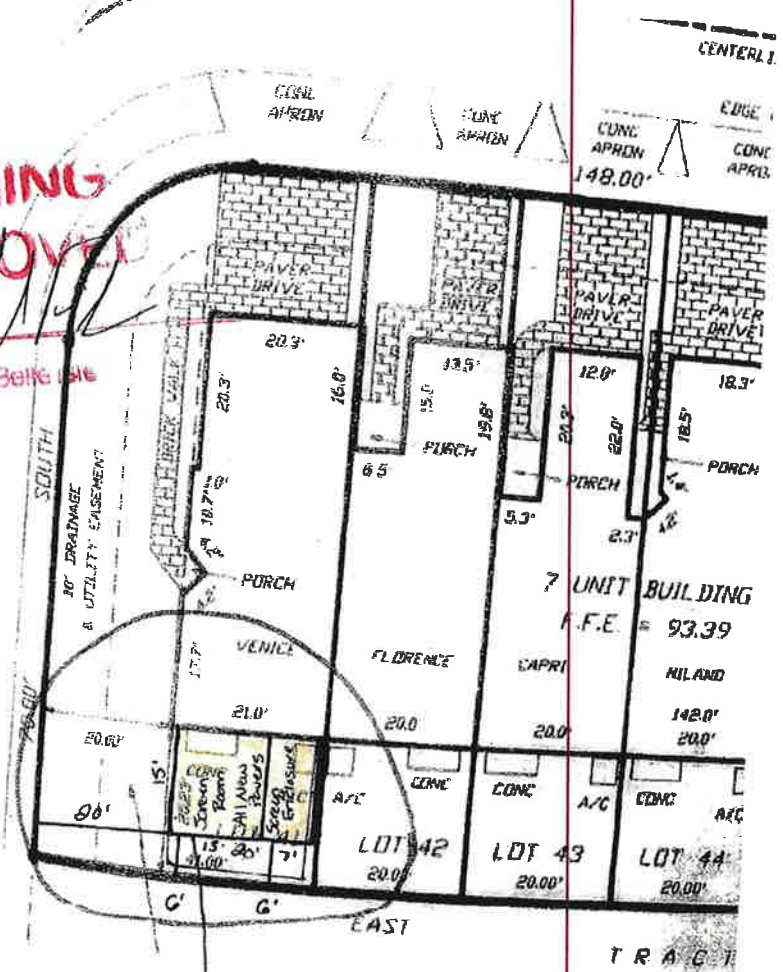
State of FLORIDA, County of ORANGE
I hereby certify that this is a true copy of the document as reflected in the Official Records
PHIL DIAMOND, COUNTY COMPTROLLER
BY: _____ D.C.
DATED: 3/3/20



Scale
1" = 20'

ZONING APPROVED

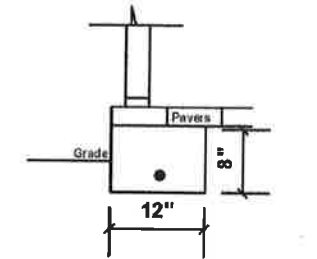
Date: 3/17/20 By: [Signature]
City of Belknap



New Screen Enclosure 30'x15' with footings & powers.
(one side Alum. Roof 13'x15' / other side Screen Roof 7'x15')

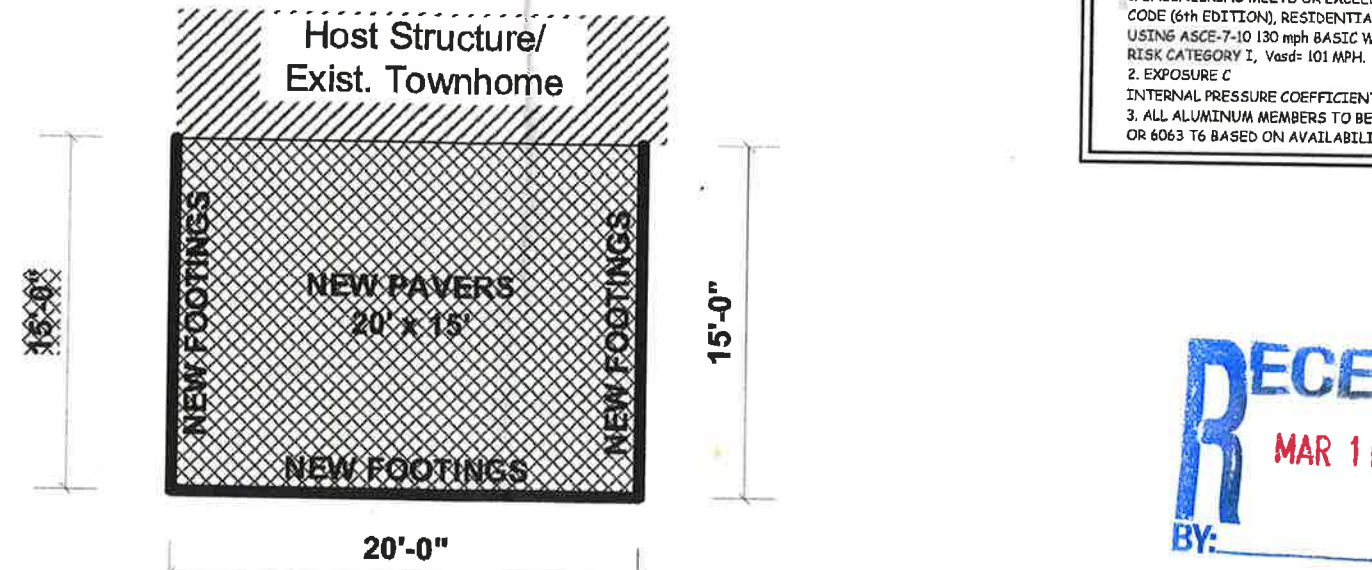
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MAR 16 2020

**INSTALL NEW SCREEN ENCLOSURE 20' x 15' WITH FOOTINGS AND PAVERS
(ONE SIDE ALUM ROOF 13' x 15' OTHER SIDE SCREEN ROOF 7' x 15')**

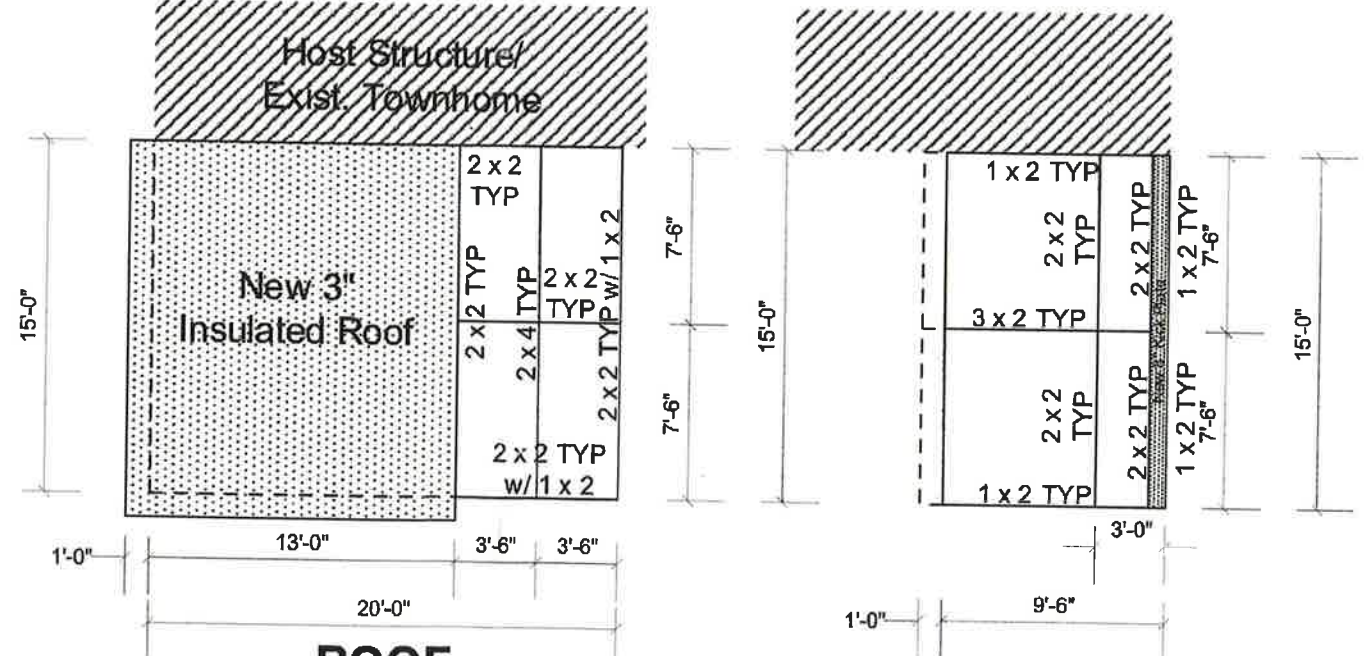
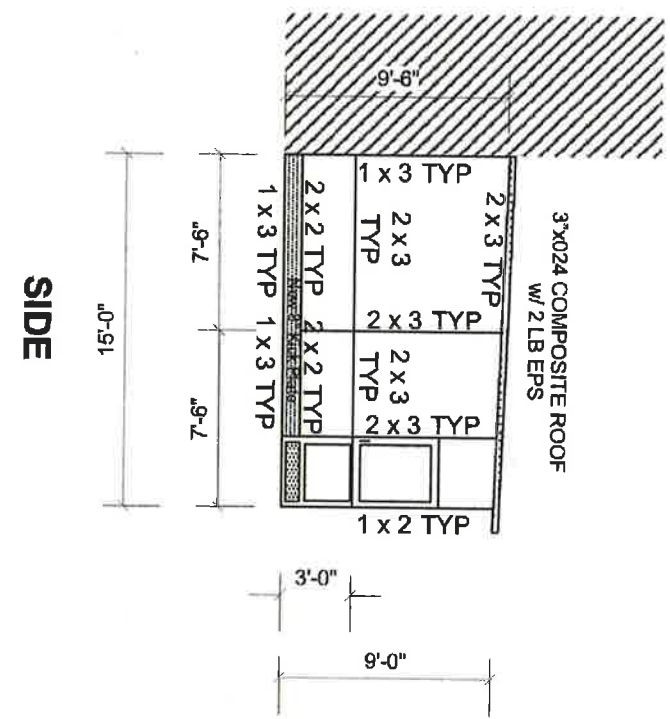


Footing 2500 PSI
Concrete w/ (1) #5 Rebar
w/ 3" COVER (MIN)
RIBBON FOOTING DETAIL

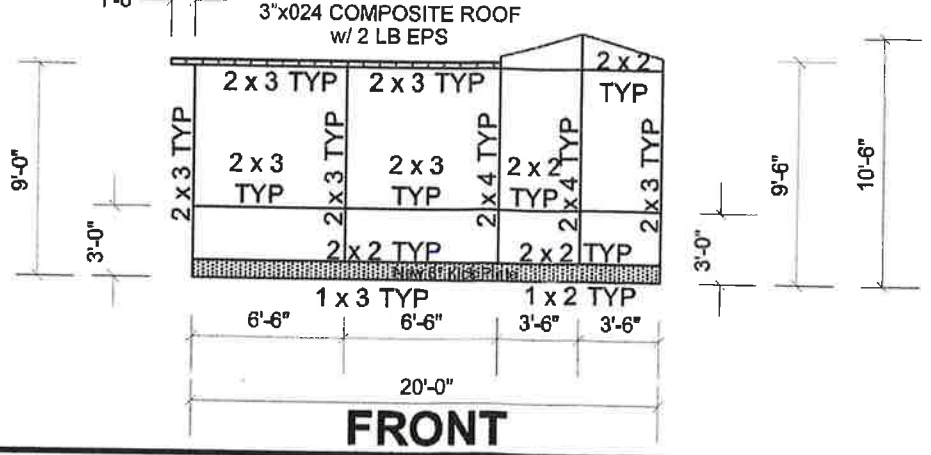
ENGINEERING NOTES:
1. ENGINEERING MEETS OR EXCEEDS 2017 FLORIDA BUILDING CODE (6th EDITION), RESIDENTIAL, PER SECTION R301 USING ASCE-7-10 130 mph BASIC WIND SPEED (V_{ult}). RISK CATEGORY I, V_{asd}= 101 MPH.
2. EXPOSURE C
INTERNAL PRESSURE COEFFICIENT= +/- 0.18
3. ALL ALUMINUM MEMBERS TO BE 6055 T6 OR 6063 T6 BASED ON AVAILABILITY.



FOUNDATION PLAN



ROOF



FRONT

RECEIVED
MAR 16 2020
BY:

Reviewed for Code Compliance
Universal Engineering Sciences

WAYNE A. BLOCK
LICENSE
No. 52583
STATE OF FLORIDA
PROFESSIONAL ENGINEER

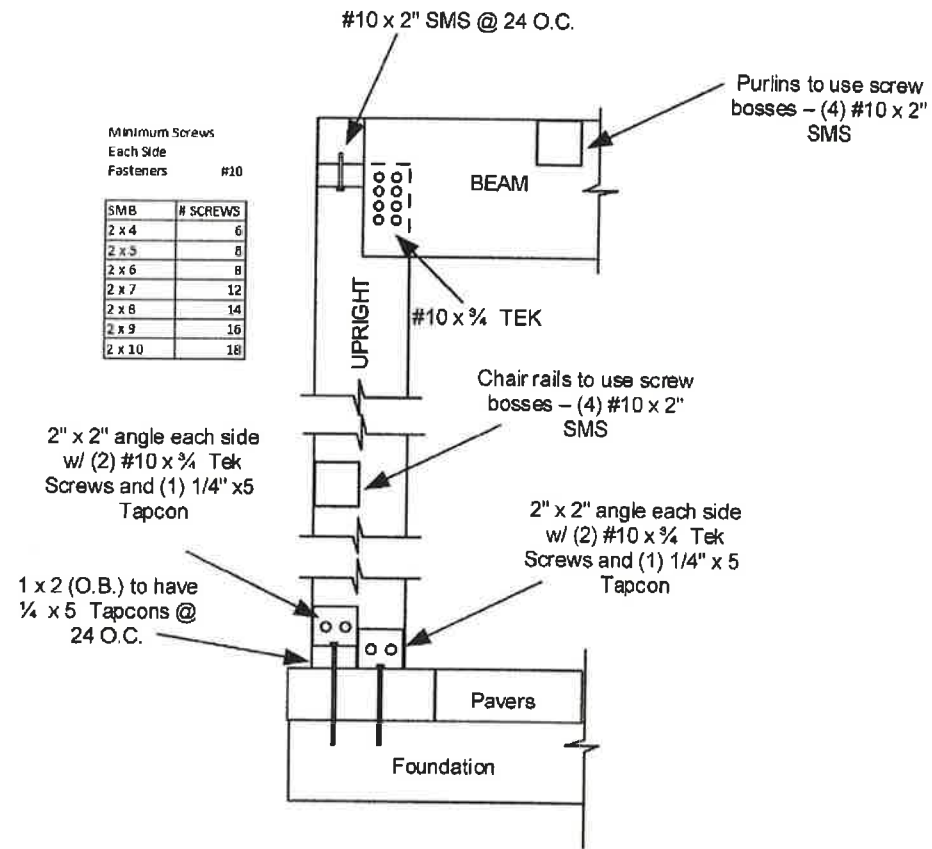
Lildon Engineering Company, Inc.
920 Sunset Shores Dr.
Minneola, Florida 34715
(352) 394-2590 Ph. & FAX
Cert. Auth. # 2898

February 25, 2020
Wayne A. Block PE # 52583

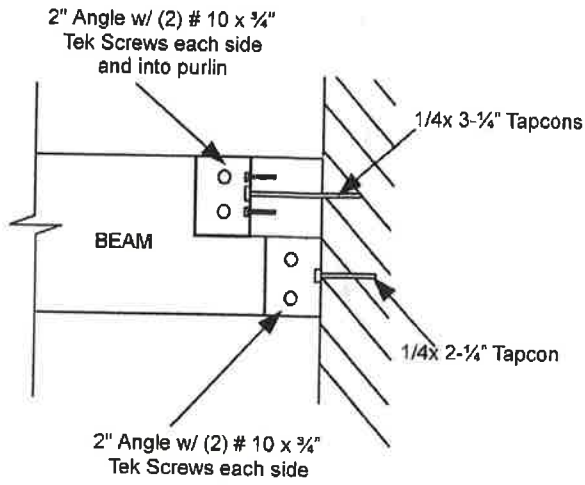
MD Construction LLC
4123 Island Lakes Dr, Winter Haven, FL 33881
Office: (321) 663-5203
email: mdconstructionfl@gmail.com
Licensed & Insured
State Certified Specialty Contractor
SCC131151708

OWNER
Connie & Roscoe Johnson
Phone: 321-279-1886
Address: 3537 Brighton Park Cir
Belle Isle - FL 32812

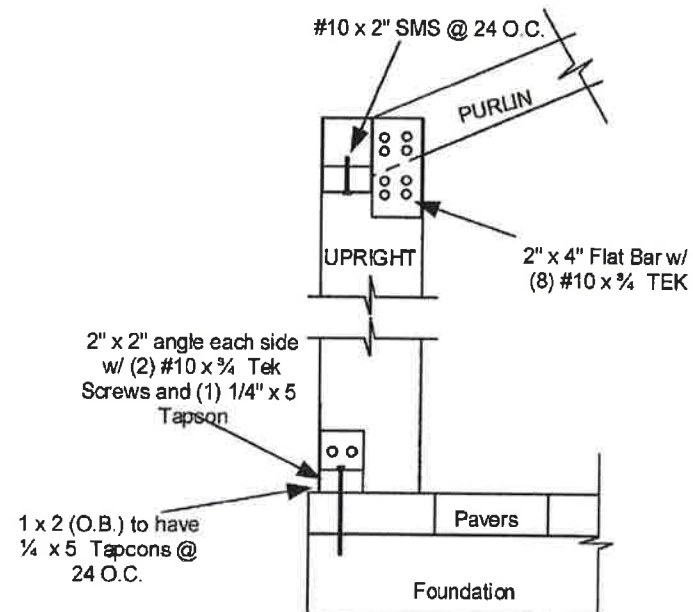
SMB	# SCREWS
2 x 4	6
2 x 5	8
2 x 6	8
2 x 7	12
2 x 8	14
2 x 9	16
2 x 10	18



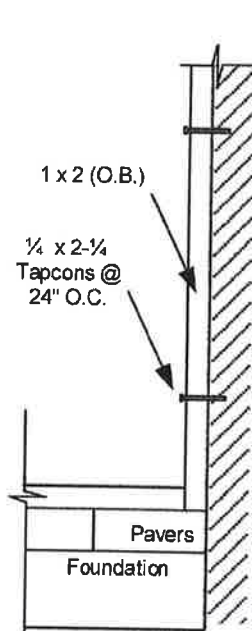
BEAM/ UPRIGHT DETAIL



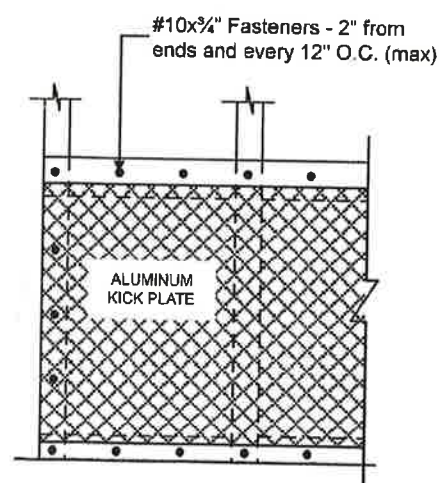
BEAM TO WALL DETAIL



SIDE WALL/ PURLIN DETAIL



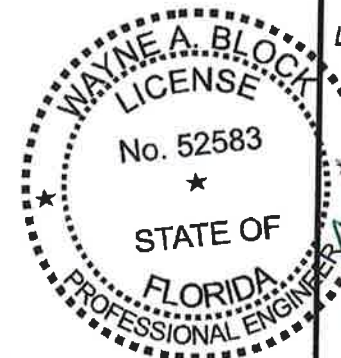
SIDE WALL DETAIL



TYPICAL ALUMINUM KICK PLATE ATTACHMENT

RECEIVED
MAR 16 2020
BY:

Reviewed for Code Compliance
Universal Engineering Sciences



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Minneola, Florida 34715
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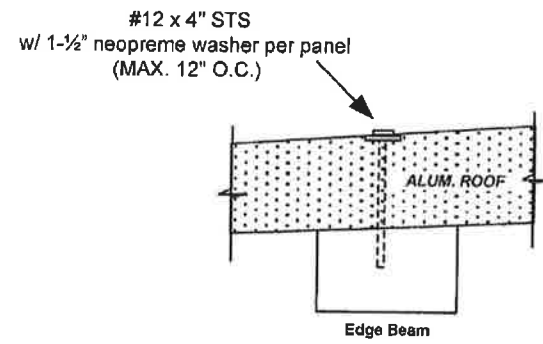
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4123 Island Lakes Dr, Winter Haven, FL 33881
Office: (321) 663-5203
email: mdconstruction@gmail.com
Licensed & Insured
State Certified Specialty Contractor
SCC:131151708

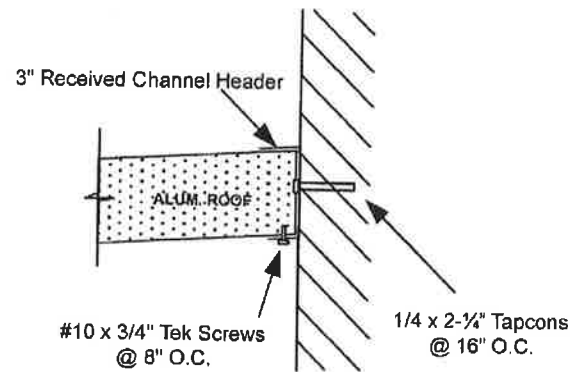


OWNER
Connie & Roscoe Johnson
Phone: 321-279-1886
Address: 3537 Brighton Park Cir
Belle Isle - FL 32812

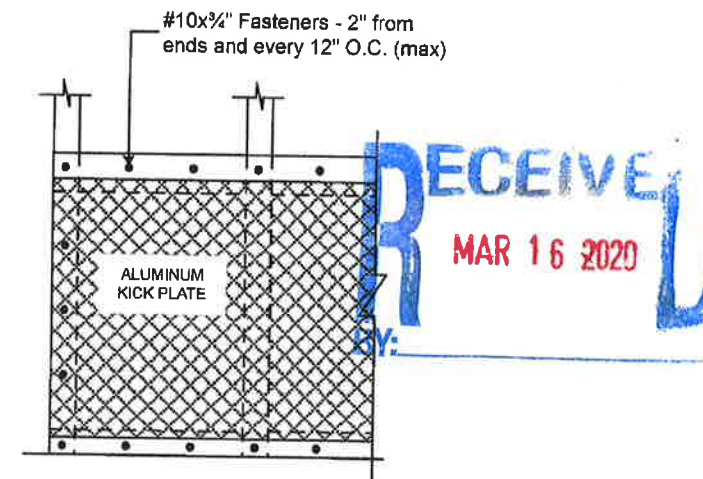
PAGE 2 OF 3



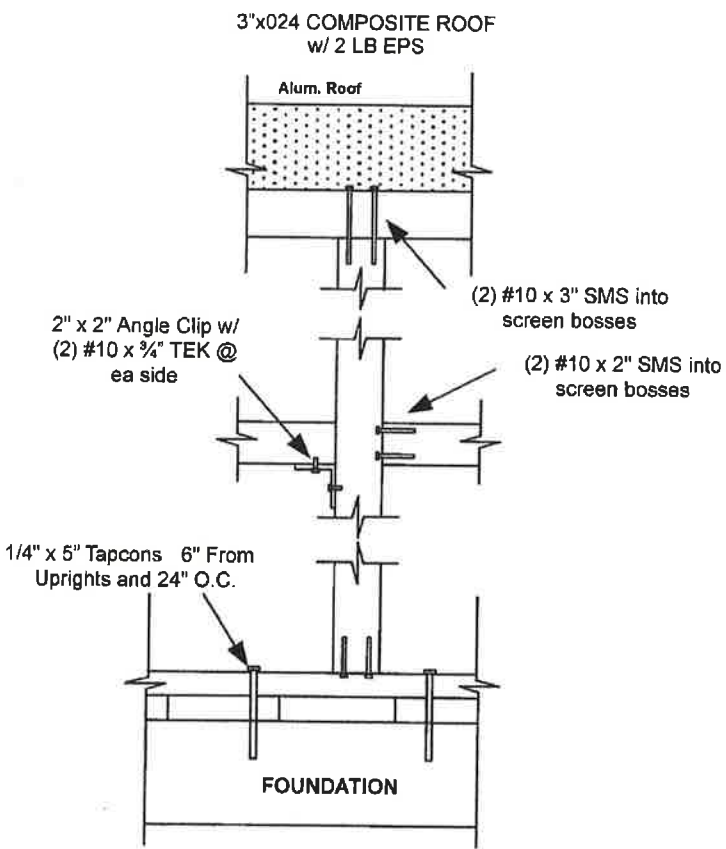
TYPICAL ROOF TO BEAM DETAIL



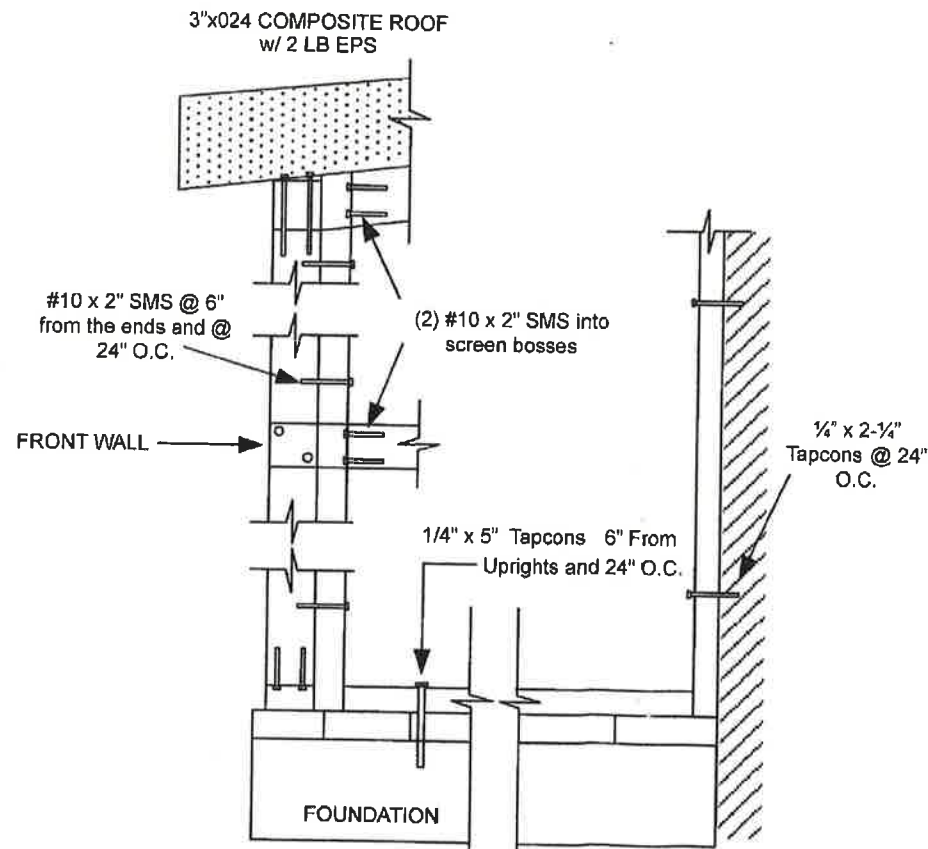
ALUM. ROOF TO WALL



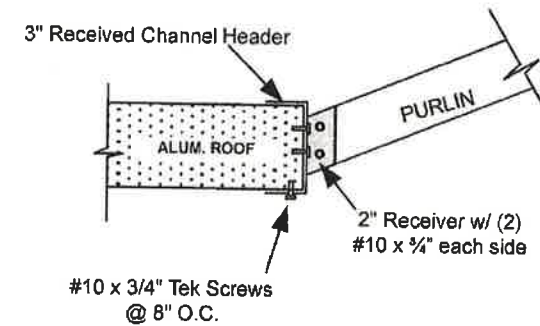
TYPICAL ALUMINUM KICK PLATE ATTACHMENT



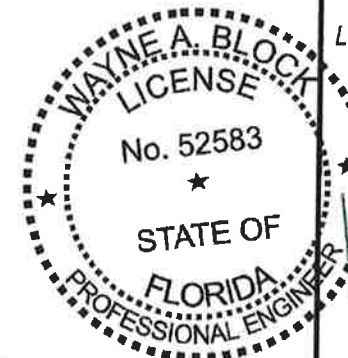
TYPICAL UPRIGHT DETAIL



TYPICAL SIDE DETAIL



ALUM. ROOF TO PURLIN



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 4123 Island Lakes Dr, Winter Haven, FL 33881
 Office: (321) 663-5203
 email: mdconstructionfl@gmail.com
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PAGE 3 OF 3

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



Product Approval Form

DATE: 3/16/2020

PERMIT # 2020-03-044

PROJECT ADDRESS 3537 Brighton Park Circle, Belle Isle, FL 32809 32812

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

- **This Product Approval Cover Sheet**
- **Internet screen printout from FloridaBuilding.Org showing PA#, approval code and edition stamped**
- **Manufacturer's installation details from FloridaBuilding.Org and requirements for each product stamped**
- **The Installation instructions must be posted on-site before your first inspection**

Product Type	Manufacturer	Model/Series	FL Product Approval #	Product Type	Manufacturer	Model/Series	FL Product Approval #
EXTERIOR DOORS				WALL PANELS			
Swinging				Siding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
WINDOWS				ROOFING PRODUCTS			
Single/Dbf Hung				Asphalt Shingles			
Horizontal Slider				Non Struct Metal	Esso Aluminum Corporation	Aluminum/Aluminum Composite Panels	FL7561-R4
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Underlayment			
Skylights				Other			
Other							
STRUCTURAL COMPONENTS				OTHER			
Wood Connectors							
Wood Anchors							
Truss Plates							
Insulation Forms							
Lintels							
Other							

It is the applicant's responsibility to verify that specific products have been installed in accordance with their limitations and with the minimum required design pressures for the structure. Specific compliance will be verified during field inspections.

Applicant Signature Marcos D. Ruiz

Date 3/16/2020



Product Approval
 USER: Public User

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

OFFICE OF THE SECRETARY

FL #	FL7561-R4
Application Type	Revision
Code Version	2017
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	Elite Aluminum Corporation
Address/Phone/Email	4650 Lyons Technology Parkway Coconut Creek, FL 33073 (954) 949-3200 dk@dokimengineering.net
Authorized Signature	Do Kim dk@dokimengineering.net
Technical Representative	Bruce Peacock
Address/Phone/Email	4650 Lyons Technology Parkway Coconut Creek, FL 33073 (954) 949-3200 bpeacock@elitealuminum.com
Quality Assurance Representative	
Address/Phone/Email	
Category	Roofing
Subcategory	Products Introduced as a Result of New Technology
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	Do Kim, P.E.
Florida License	PE-49497
Quality Assurance Entity	QAI Laboratories
Quality Assurance Contract Expiration Date	12/30/2022
Validated By	James L. Buckner, P.E. @ CBUCK, Inc. <input type="checkbox"/> Validation Checklist - Hardcopy Received
Certificate of Independence	FL7561_R4_COI_Cert of Independence.pdf
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	1709.2

Product Approval Method	Method 2 Option B
Date Submitted	08/15/2017
Date Validated	08/16/2017
Date Pending FBC Approval	08/20/2017
Date Approved	10/10/2017

Summary of Products

FL #	Model, Number or Name	Description
7561.1	Aluminum/Aluminum Composite Panels	3"/4"/6"x0.024"x1lb EPS Composite Panel, 3"/4"/6"x0.032x1lb EPS Composite Panel, 3"/4"/6"x0.024"x2lb EPS Composite Panel, 3"/4"/6"x0.030"x2lb EPS Composite Panel,
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +80/-80 Other: In HVHZ, not to be used in structures considered living areas per FBC Section 1616 unless impact protection is provided. See installation drawing for nominal allowable design pressures and spans.		Installation Instructions FL7561 R4 II 2017 FBC-Elite Aluminum Corp-Install Instruct.pdf Verified By: Do Kim, P.E. PE 49497 Created by Independent Third Party: Yes Evaluation Reports FL7561 R4 AE FL 7561 Evaluation Report-2017 FBC.pdf Created by Independent Third Party: Yes

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

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

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Product Approval Accepts:



Credit Card
Safe



ELITE PANEL SPAN TABLES: 1. Net allowable loads are permitted to be multiplied by 1.67 to derive ultimate loads (psf).

3" x 0.024 x 1 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	16.17	15.76	15.03	14.10
20	13.44	13.44	12.22	10.35
30	10.78	10.78	9.41	6.60
40	9.22	9.22	6.60	2.85
50	8.17	8.17	3.79	-
60	7.40	6.39	0.98	-
70	6.81	4.51	-	-
80	6.33	2.64	-	-

3" x 0.032 x 1 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	17.50	17.50	16.91	15.96
20	16.64	15.96	14.06	12.16
30	15.17	14.06	11.21	8.36
40	13.69	12.16	8.36	4.56
50	12.22	10.26	5.51	0.76
60	10.75	8.36	2.66	-
70	9.27	6.46	-	-
80	7.80	4.56	-	-

3" x 0.024 x 2 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	19.33	18.95	18.31	17.66
20	18.11	17.66	16.36	15.06
30	16.80	16.36	14.41	12.46
40	15.49	15.06	12.46	9.86
50	14.18	13.76	10.51	7.26
60	12.87	12.46	8.57	4.67
70	11.57	11.16	6.62	2.07
80	10.26	9.86	4.67	-

3" x 0.030 x 2 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	20.11	20.03	19.42	18.81
20	19.02	18.81	17.58	16.35
30	17.93	17.58	15.73	13.89
40	16.83	16.35	13.89	11.43
50	15.74	15.12	12.05	8.97
60	14.64	13.89	10.21	6.52
70	13.55	12.66	8.36	4.06
80	12.46	11.43	6.52	1.60

4" x 0.024 x 1 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	19.00	19.00	17.17	16.53
20	15.01	15.01	15.01	13.95
30	12.50	12.50	12.50	11.38
40	10.97	10.97	10.97	8.80
50	9.92	9.92	9.44	6.22
60	9.13	9.13	7.51	3.64
70	8.52	8.52	5.58	1.07
80	8.02	8.02	3.64	-

4" x 0.032 x 1 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	20.50	20.50	20.11	19.24
20	19.61	19.24	17.49	15.74
30	18.17	17.49	14.87	12.24
40	16.72	15.74	12.24	8.74
50	15.28	13.99	9.62	5.25
60	13.84	12.24	7.00	1.75
70	12.40	10.49	4.38	-
80	10.95	8.74	1.75	-

4" x 0.024 x 2 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	21.97	21.97	21.52	20.97
20	20.77	20.77	19.86	18.76
30	19.57	19.57	18.21	16.55
40	18.36	18.36	16.55	14.34
50	17.16	17.16	14.89	12.13
60	15.96	15.96	13.24	9.93
70	14.75	14.75	11.58	7.72
80	13.55	13.55	9.93	5.51

4" x 0.030 x 2 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	24.17	24.17	24.17	24.17
20	23.64	23.64	23.41	23.11
30	22.57	22.57	21.90	21.01
40	21.51	21.51	20.39	18.91
50	20.45	20.45	18.88	16.80
60	19.39	19.39	17.37	14.70
70	18.33	18.33	15.86	12.59
80	17.26	17.26	14.35	10.49

6" x 0.024 x 1 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	23.00	21.24	21.47	20.85
20	18.06	18.06	18.06	18.06
30	15.13	15.13	15.13	15.13
40	13.34	13.34	13.34	13.34
50	12.10	12.10	12.10	10.91
60	11.17	11.17	11.17	8.43
70	10.44	10.44	10.30	5.95
80	9.85	9.85	8.43	3.47

6" x 0.032 x 1 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	24.00	24.00	24.00	23.42
20	23.34	23.21	21.82	20.22
30	22.10	21.63	19.42	17.02
40	20.86	20.05	17.02	13.82
50	19.62	18.47	14.62	10.62
60	18.38	16.89	12.22	7.42
70	17.14	15.30	9.82	4.22
80	15.91	13.72	7.42	1.02

6" x 0.024 x 2 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

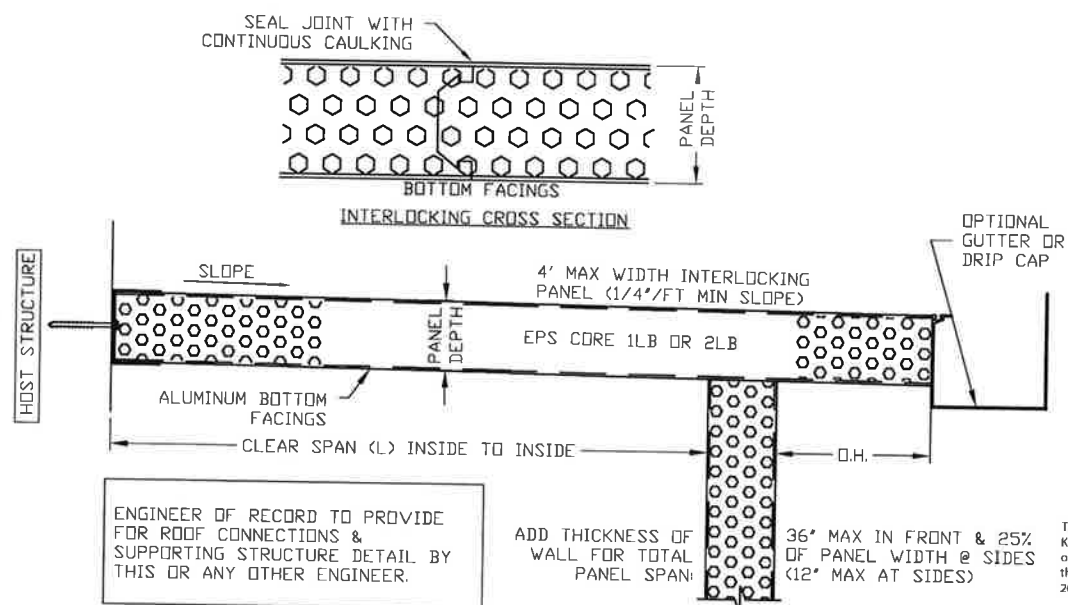
NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	23.93	23.93	23.88	23.60
20	23.20	23.20	23.03	22.46
30	22.47	22.47	22.18	21.33
40	21.75	21.75	21.33	20.20
50	21.02	21.02	20.49	19.07
60	20.29	20.29	19.64	17.94
70	19.57	19.57	18.79	16.81
80	18.84	18.84	17.94	15.68

6" x 0.030 x 2 - LB EPS PANELS (ALLOWABLE CLEAR SPAN CHARTS)

NET ALLOWABLE LOAD (PSF) ¹	MAX. ALLOWABLE SPAN (FT)			
	L/80	L/120	L/180	L/240
10	24.00	24.00	24.00	23.84
20	23.65	23.65	23.34	22.84
30	22.94	22.94	22.59	21.85
40	22.23	22.23	21.85	20.85
50	21.53	21.53	21.10	19.86
60	20.82	20.82	20.36	18.87
70	20.11	20.11	19.61	17.87
80	19.40	19.40	18.87	16.88

GENERAL NOTES

- Composite panels shall be constructed using type 3003-H154 aluminum facings, 1 or 2 PCF ASTM C-578 carpenter brand EPS adhere to aluminum facings with Ashland Chemical 2020D ISO grip. Fabrication to be by Elite panel products only in accordance with approved fabrication methods.
- Elite roof panels maintain a UL 1715 (int) class 'B' (ext) rating and are NER-501 approved.
- This specification has been designed and shall be fabricated in accordance with the requirements of the Florida Building Code 6th Edition (FBC), composite panels comply with Chapter 7 Section 720, Chapter 8 Section 803, Class A interior finish, and Chapter 26 Section 2603. All local building code amendments shall be adhered to as required.
- The designer shall determine by accepted engineering practice the allowable loads for site specific load conditions (including load combinations) using the data from the allowable loads tables and spans in this approval.
- Deflection limits and allowable spans have been listed to meet FBC including the HVHZ. In HVHZ, this product shall be used in structures "not to be considered living areas" per Section 1616 unless impact resistance in accordance to the HVHZ requirements are met.
- Safety factor of 2.0 has been used to develop allowable loads and spans from testing in accordance to the Guidelines for Aluminum Structures Part 1 and conforms to the FBC Chapter 16 and 20.
- Testing has been conducted in accordance to ASTM E72-05: Strength Test of Panels for Building Construction.
- Reference test reports: HETI-05-1988, HETI-06-2104, HETI-06-2066, HETI-06-2105, HETI-06-2067, HETI-05-1002, HETI-06-2107, HETI-05-1987, HETI-06-2069, HETI-06-2070, HETI-06-2071, HETI-05-1994, HETI-05-1991, HETI-06-2072, HETI-06-2073, HETI-06-2074, HETI-05-1996, HETI-05-1989, HETI-05-1993, HETI-05-1985, HETI-05-1995, HETI-05-1990, HETI-05-1997, HETI-05-2037, HETI-05-2029, HETI-05-2039, HETI-05-2030, HETI-05-2041, HETI-05-2048, HETI-05-2036, HETI-05-2031, HETI-05-2038, HETI-05-2065, HETI-05-2040, HETI-05-2042.
- Linear interpolation shall be allowed for figures within the tables shown.
- Panels with fan beams shall be considered equivalent to similar panels without fan beams. Design professionals may include the strength of the fan beam to exceed shown figures as part of site-specific engineering.



EPS ROOF PANEL/ SPAN DESCRIPTION

DO KIM & ASSOCIATES, LLC
CONSULTING STRUCTURAL ENGINEERS

PO BOX 10039
Tampa, FL 33679
Tel: (813) 857-9955

Rev./Date	Description
8/12 2017	ISSUED FOR FBC 6th Edition PRODUCT APPROVAL

Elite Aluminum Corporation
 4650 Lyons Technology Parkway
 Coconut Creek, FL 33073
 EPS FOAM CORE COMPOSITE PANELS
 ALUMINUM/ALUMINUM SKIN
 FLORIDA STATEWIDE PRODUCT APPROVAL

DRAWN BY: DYK
CHECKED BY: DYK
SCALE: AS SHOWN
DATE: 2/19/12

Drawing No. - FL-1001
SHEET 1 OF 1



RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD

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

DAVILA, MARCOS ROBERTO

MD CONSTRUCTION LLC
1919 JOHN HENRY JONES BLVD
KISSIMMEE FL 34741

LICENSE NUMBER: SCC131151708

EXPIRATION DATE: AUGUST 31, 2020

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POLK COUNTY LOCAL BUSINESS TAX RECEIPT

ACCOUNT NO. 174536

CLASS: B

EXPIRES: 9/30/2020

OWNER NAME

DAVILA, MARCOS R

LOCATION

6656 SR 544
WINTER HAVEN

BUSINESS NAME AND MAILING ADDRESS

MD CONSTRUCTION LLC

6656 SR 544
WINTER HAVEN, FL 33881

CODE

230000
230280

ACTIVITY TYPE

LTD NON-LICENSED CONSTRUCTION
CONTRACTOR SPECIALTY STRUCTURE



PROFESSIONAL LICENSE (IF APPLICABLE)

OFFICE OF JOE G. TEDDER, CFC * TAX COLLECTOR

THIS POLK COUNTY LOCAL BUSINESS TAX RECEIPT MUST BE
CONSPICUOUSLY DISPLAYED AT THE BUSINESS LOCATION

PAID-1517215-0001-0001 07/09/2019 07/09/2019 LMM 159 57.75 MEGAN DAVILA

TC301F-16



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/26/2019

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 Headley Insurance Agency, SF. 3544 S. Florida Ave Lakeland, FL 33803 Scott Headley	863-701-7411	CONTACT NAME: Commercial Department PHONE (A/C, No, Ext): 863-701-7411 FAX (A/C, No): 863-701-7417 E-MAIL ADDRESS: sarah@headleyinsurance.net
	INSURER(S) AFFORDING COVERAGE	
INSURED MD Construction LLC 6656 SR 544 Winter Haven, FL 33881	INSURER A : Allied Property & Casualty Ins	NAIC # 42587
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES CERTIFICATE NUMBER: REVISION NUMBER:

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			ACP GLDO 3018907580	07/27/2019	07/27/2020	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 - COMP/OP AGG \$ 2,000,000 Deductible \$ 0
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO OWNED AUTOS ONLY <input type="checkbox"/> HIRE AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> UMBRELLA LIAB <input type="checkbox"/> EXCESS LIAB OCCUR CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below						<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> N/A PER STATUTE OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER CITYBEL City of Belle Isle 1600 Nela Ave Belle Isle, FL 32809	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE Scott Headley 
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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: 1/21/2020

EXPIRATION DATE: 1/20/2022

PERSON: MARCOS R DAVILA

EMAIL: MARCOS@MDCONSTRUCTIONFL.COM

FEIN: 464475465

BUSINESS NAME AND ADDRESS:

MD CONSTRUCTION LLC

6656 STATE ROAD 544

WINTER HAVEN, FL 33881

SCOPE OF BUSINESS OR TRADE:

Door and Window Installation All Types Residential and Commercial	Concrete or Cement Work - Floors, Driveways, Yards, or Sidewalks and Drivers	Contractor-Project Manager, Construction Executive, Construction Manager or Construction Superintendent	Fence Installation and Repair- Metal, Vinyl, Wood or Prefabricated Concrete Panel Fence Installed By Hand
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IMPORTANT: Pursuant to subsection 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 subsection 440.05(12), F.S., Certificates of election to be exempt issued under subsection (3) shall apply only to the corporate officer named on the notice of election to be exempt and apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to subsection 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.