



# City of Belle Isle Job Site Permit Card **PLUMBING** 2020-04-018

Subdivision

Site Address: **5004 Gramont Ave 32812**

Class: **Residential**

Parcel Number: **17-23-30-4379-01-600**

=====  
**Description of Work: IRRIGATION METER ONLY**  
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**Issued:** Ricardo A De Abreu - HOME OWNER

License # N/A

Contact # 585 414-0199

**Payment/ Issued Date & Method:** 4 / 3 / 2020

Picked up by \_\_\_\_\_  Emailed

**Visa**    **Master Card**    **Amex**    **Discover**    **Check / Money Order#**

1650 | | | | | | | | | | | | | | | | | | | | | |

=====  
**FOR POOL INSPECTIONS, PLEASE REFER TO MAIN POOL PERMIT FOR SPECIFIC POOL INSPECTIONS & CODES**  
=====

PLUMBING	INSPECTOR	DATE	COMMENTS
600 Sewer			
610 Underground			
620 Rough			
630 Above Ceiling			
640 Irrigation Final			
650 Final			

**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 [BDIscheduling@UniversalEngineering.com](mailto:BDIscheduling@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 32811 407-581-8161 Fax 407-581-0313 [www.universalengineering.com](http://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."**

SEE BELOW

RECEIVED  
APR - 1 2020



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

**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: 4-1-20 PERMIT NUMBER 2020-04-018  
The undersigned hereby applies for a permit to make plumbing installations as indicated below PLEASE PRINT

Project Address 5004 GRAMONT AVE Belle Isle FL 32809 ✓ 32812  
Property Owner RICK DEABRELL Phone 585-414-0199  
Property Owner's Mailing Address 5004 GRAMONT AVE, BELLE ISLE  
State FL Zip Code 32812 Parcel Id Number: 17-23-30-4379-01-600  
To obtain this information, please visit <http://www.esprill.org/arcsearch/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 SYSTEM VERIFICATION FOR NEW / ALTERED / ADDITION to Septic System - ORANGE COUNTY DOCUMENT 64E-6

VALUATION OF JOB (labor & materials) \$ 2,000.00 **IRRIGATION METER ONLY**

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

1/31/20  
1650  
4.3.2020

1 Meter to existing Irrigation system

\*Per FDS, Sec. 608, a Backflow Preventer must be installed & tested. The report must be posted with permit for final inspection

Building Official: OTC Date 4-2-20  
Verified Contractor's Licenses & Insurance are on file OTC Date 4-2-20  
O/B disclosure

Permit Fee 37  
Review Fee 18.50  
1% BCAIB Fee 2 min  
1.5% DCA Fee 2 min  
Total Permit Fee 59.50

Home owner needs to sign and print name on this application

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.

Home owner LICENSE HOLDER SIGNATURE RICK DEABRELL LICENSE # N/A  
Home owner LICENSE HOLDER NAME RICK DEABRELL COMPANY NAME

Street Address 5004 GRAMONT AVE, BELLE ISLE, FL 32812  
City Belle Isle State FL Zip Code 32812 Phone Number 585-414-0199  
Email Address RICK.DEABRELL@YAHOO.COM

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 \_\_\_\_\_

\* THIS IS FOR AN IRRIGATION METER



## City of Belle Isle

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### OWNER BUILDER DISCLOSURE STATEMENT

Per Florida Statue 455.228:

**Homeowners hiring unlicensed Contractors may be  
subject a fine of up to \$5,000.00!**

Before me this day personally appeared Rick DeArten, who being duly sworn, deposes, and says as follows. "I hereby acknowledge that I have read and fully understand the individual provisions of this instrument."

1. I understand that state law requires construction to be done by a licensed contractor and have applied for an owner-builder permit under an exemption from the law. The exemption specifies that I, as the owner of the property listed, may act as my own contractor with certain restrictions even though I do not have a license RAD Initial
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. RAD 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 myself from potential financial risk by hiring a licensed contractor and having the permit filed in his or her name instead of my own name. I also understand that a contractor is required by law to be licensed in Florida and to list his or her license numbers on permits and contracts. RAD Initial
4. I understand that I may build or improve a one-family or two-family residence or a farm outbuilding. I may also build or improve a commercial building if the costs do not exceed \$75,000.00. The building or residence must be for my own use or 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. RAD Initial
5. I understand that, as the owner-builder, I must provide direct, onsite supervision of the construction. Initial RAD
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. RAD Initial
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 acting as an owner-builder and am aware of the limits of my insurance coverage for injuries to workers on my property. RAD Initial
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. RAD Initial
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. RAD 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 Licensing Board at (850)487-1395 or [www.Call.Center@dbpr.state.fl.us](mailto:www.Call.Center@dbpr.state.fl.us) for more information about licensed contractors. RAD Initial

Owner Builder Disclosure Statement

11. I am aware of, and consent to, an owner-builder building permit applied for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address:

Project Address: 5004 GRAMONT AVE, BELLE ISLE Initial RAD

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. RAD 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. RAD 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 properly 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.

Signature: RADREABREU  
(Signature of the property owner)

Print: R. A. DEABREU  
(Name of the property owner)

Signature: \_\_\_\_\_  
(Signature of the property owner)

Print: \_\_\_\_\_  
(Name of the property owner)

Owner's Address: 5004 GRAMONT AVE, BELLE ISLE 32812 FLORIDA

X The foregoing instrument was acknowledged before me this \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_  
by \_\_\_\_\_ who is personally known to me / who produced the following  
\_\_\_\_\_ as identification and who did not take an oath.

State of Florida / County of \_\_\_\_\_

Seal:

Notary Signature \_\_\_\_\_

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This portion needs to be filled out completely and notarized

RAD De Abreu

Signature: RAD De Abreu (Signature of the property owner) Print: R. A. DEABREU (Name of the property owner)

Signature: \_\_\_\_\_ (Signature of the property owner) Print: \_\_\_\_\_ (Name of the property owner)

Owner's Address: 5004 GRAMONT AVE, BELLE ISLE 32812 FLORIDA

The foregoing instrument was acknowledged before me this 3rd, April, 2020

by Ricardo A. De Abreu who is personally known to me / who produced the following FEDL D160721544590 x 12-19-2021 as identification and who did not take an oath.

State of Florida / County of Orange

Notary Signature: [Signature] Seal: 