



City of Belle Isle Job Site Permit Card BUILDING 2020-03-042

Site Address: 5012 St Denis Ct 32812
Parcel Number: 18-23-30-4388-04-050

Class: Residential
Subdivision

Description of Work: 4' x 35' DOCK, 12' X 20' DECK, 11' X 27' BOATHOUSE.

Issued: ALBERT CICHRA BUILDERS INC, CICHRA, A G JR License # CRC058230 Contact # 407 450-4241

Payment / Issued Date & Method: 4 / 6 / 2020 Picked up by to Sheila Emailed

Visa Master Card Amex Discover Check / Money Order#

8035

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 BIIDcheduling@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."



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 Permit (Land Use) Application

DATE: 3/15/20

PERMIT # 2020-03-042

PROJECT ADDRESS 5012 St. Denis Ct., Belle Isle, FL 32809 32812

PROPERTY OWNER Brad or Reiko Bates PHONE (407) 920-1156 VALUE OF WORK (Labor & material) \$ 26,000

715

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

4' x 35' Dock, 12' x 20' Deck, 11' x 27' Boathouse

Please provide information, if applicable.

- Survey specific foundation plan required to show compliance with zoning setbacks
- **BOAT DOCK:** DEP Clearance Required with Application (Call 407-897-4100); 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: 18-23-30-4388-04-050

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

SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCRoACH INTO ANY EASEMENT OR REQUIRED SETBACK. Note, this Zoning Approval MAY or MAY NOT be in compliance with your Deed Restrictions. For New Single Family Residence, Traffic Impact Fee and School Impact will be assessed.

ZONING APPROVED

Attached Survey SETS and Construction Plans SETS

Date: 3/19/20 By: [Signature]

PLANNING & ZONING APPROVAL: DATE City of Belle Isle

PLEASE COMPLETE for Building Review

CONSTRUCTION TYPE conventional frame

OCCUPANCY GROUP Comm Res: Single Fam Multi Fam

#BLDG #UNITS #STORIES TOTAL SQ.FT.

MAX. FLOOR LOAD MAX. OCCUPANCY

MIN. FLOOD ELEV. LOW FLOOR ELEV.

WATER SERVICE WELL SEPTIC

BUILDING REVIEWER DATE

NOTES

Per Ins. v NOC ✓

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

1511K
4 x 25
25
100
125.2
62.50
187.50

Wind Exposure Category: B C D

SPRINKLERS REQ'D	Y	N	REVIEW	Date: Sent	RCD
ZONING	<input checked="" type="checkbox"/>	<input type="checkbox"/>			\$ 165.
CERT OF OCC	<input type="checkbox"/>	<input type="checkbox"/>			\$
TRAFFIC	<input type="checkbox"/>	<input type="checkbox"/>			\$
SCHOOL	<input type="checkbox"/>	<input type="checkbox"/>			\$
FIRE	<input type="checkbox"/>	<input type="checkbox"/>			\$
SWIMMING POOL	<input type="checkbox"/>	<input type="checkbox"/>			\$
SCREEN ENCLOSURE	<input type="checkbox"/>	<input type="checkbox"/>			\$
ROOFING	<input type="checkbox"/>	<input type="checkbox"/>			\$
BOAT DOCK	<input checked="" type="checkbox"/>	<input type="checkbox"/>			\$ 187.50
BUILDING	<input type="checkbox"/>	<input type="checkbox"/>			\$
WINDOW(S)	<input type="checkbox"/>	<input type="checkbox"/>			\$
DOOR(S)	<input type="checkbox"/>	<input type="checkbox"/>			\$
FENCE	<input type="checkbox"/>	<input type="checkbox"/>			\$
SHED	<input type="checkbox"/>	<input type="checkbox"/>			\$
DRIVEWAY	<input type="checkbox"/>	<input type="checkbox"/>			\$
OTHER	<input type="checkbox"/>	<input type="checkbox"/>			\$
2.5%					\$
3% FL SURCHARGE					\$ 2 min
TOTAL					\$ 357.31
By Owner Form	<input type="checkbox"/>	NA			
Notice of Commencement	<input type="checkbox"/>	NA			
Power of Attorney	<input type="checkbox"/>	NA			
Contractor Packet Incuded?	<input type="checkbox"/>	N			
OTHER PERMITS REQUIRED:					
ELECTRICAL	<input type="checkbox"/>	NA			
PREPOWER	<input type="checkbox"/>	NA			
MECHANICAL	<input type="checkbox"/>	NA			
PLUMBING	<input type="checkbox"/>	NA			
ROOFING	<input type="checkbox"/>	NA			
GAS	<input type="checkbox"/>	NA			



Digitally signed by Benjamin Suriel, Lic.
AR92725 PX3694
DN: cn=Benjamin Suriel, Lic. AR92725
PX3694, o=Universal Engineering Sciences,
ou=Review for Code Compliance,
email=bsuriel@universalengineering.com,
c=US
Date: 2020.03.23 15:07:02 -04'00'

PAID 46-20
VISA 8035



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

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

PERMIT # 2020-03-042

Owner's Name Brad or Reiko Bates

Owner's Address 5012 St. Denis Ct. Belle Isle, FL 32812

Contractor Name Albert Cichra	Company Name Albert Cichra Builders, Inc.
License # CRC058230	Company Address 13936 Marine Dr.
Contact Phone/Cell 407-450-4241	City, State, ZIP Orlando, FL 32832
Contact Email sheilacichra@gmail.com	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 [Signature]

The foregoing instrument was acknowledged before me this 2/10/20
 by Brad Bates 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




MARY A. PFLANZ
 MY COMMISSION # GG121277
 EXPIRES July 04, 2021

Contractor Signature [Signature]

COMPANY NAME Albert Cichra Bldrs

The foregoing instrument was acknowledged before me this 3/12/20
 by Sheila Cichra 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



MARY A. PFLANZ
 MY COMMISSION # GG121277
 EXPIRES July 04, 2021

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 _____ X 0.35 =
 Allowable Impervious Area (BASE) _____
- 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



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

Boat Dock Zoning Review Application
PLEASE REFER TO WWW.MUNICODE.COM FOR CODE COMPLIANCE
SUBMIT LANDUSE APPLICATION WITH THIS FORM

Date March 15, 2020	Permit #	Cost \$26,000
APPLICANT		SITE ADDRESS
Property Owner's Name Brad Bates		Site Address 5012 St Denis Court
Mailing Address 5012 St Denis Court		Land Use Classification sfr - lakefront
City, State, Zip Belle Isle FL 32812		Zoning District R-1-AA
REQUIREMENTS TO BE SUBMITTED WITH APPLICATION <ul style="list-style-type: none"> • \$165.00 ZONING APPLICATION FEE • FL DEP CLEARANCE FORM (call 407-897-4100 for info) <p>COMPLETION OF AN APPLICATION IS REQUIRED AND APPLICANT IS SUBJECT TO ALL COUNTY, STATE AND/OR DEP REQUIREMENTS AND FEES. APPROVAL OF THIS APPLICATION DOES NOT GUARANTEE THE ISSUANCE OF A BUILDING PERMIT FROM THE CITY'S BUILDING DEPARTMENT.</p>		Legal Description LOT: LAKE CONWAY ESTATES SECTION EIGHT REPLAT Z/66 LOT 405
		Block:
		Subdivision: LAKE CONWAY ESTATES

PROPOSED BOAT DOCK INFORMATION

Length Waterward from 86.9 NHWE Contour Line: 45'	<ol style="list-style-type: none"> Applicant brings completed application packet to the Building Inspector's (UES) office: <ol style="list-style-type: none"> \$165.00 review fee 3 sets of drawings, and 3 boundary surveys Land Use Permit App is available on our website www.cityofbelleislefl.org or can be picked up at City Hall - Monday thru Friday from 8:00am to 5:00pm. If the application meets criteria for zoning compliance, UES will forward to the City for zoning review. If the application does not meet the requirements of the Belle Isle Code, (i.e. setbacks, height, etc) the applicant is faxed a copy of the review letter citing the reasons for non-compliance with the Code and is given 2 options: <ol style="list-style-type: none"> Applying for a variance from the City of Belle Isle Planning and Zoning Board Revising the drawings to meet the requirements of the Code. City's Planning & Zoning reviews documents and issues one of the following: <ol style="list-style-type: none"> Letter indicating zoning compliance with the Code Letter indicating additional documentation is needed and/or reason the application is not in compliance with the Code. If the applicant chooses to <u>apply for the variance</u>, the City provides assistance with the variance process. Please call City Hall at 407-851-7730 for further information and deadline dates. If the applicant chooses to make revisions to the drawings to meet the requirements of the Code, the additional information is reviewed for compliance. Once the application meets criteria for zoning compliance, it will be forwarded to the Building Department for review and completion. The City keeps one complete set of drawings, a copy of the application and the engineering review letter. The Developer or Property Owner must pay all costs and fees associates with the City Engineer's and/or the City Attorney's review of the applicants application and plans.
Square Footage Waterward from 86.9 NHWE contour line 691	
Side Setback from Property Line 5'	
Total Square Footage 731	
Applicant/Agent Signature <i>Shirley</i>	

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.
PLEASE REFER TO WWW.MUNICODE.COM FOR CODE COMPLIANCE

731 x 34 =

Permit Number: _____
 Folio/Parcel ID #: 18-23-30-4388-04-050
 Prepared by: Sheila Cichra
2154 Oak Beach Blvd
Sebring, FL 33875
 Return to: Sheila Cichra
2154 Oak Beach Blvd
Sebring, FL 33875
sheilacichra@gmail.com

DOCA 20200130854
 02/28/2020 03:20:38 PM Page 1 of 1
 Rec Fee: \$10.00
 Phil Diamond, Comptroller
 Orange County, FL
 IP - Ret To: SHEILA CICHRA



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.

1. **Description of property** (legal description of the property, and street address if available)
LAKE CONWAY ESTATES SECTION EIGHT REPLAT Z/66 LOT 405
2. **General description of improvement**
boat dock at 5012 St. Denis Ct.
3. **Owner information or Lessee information if the Lessee contracted for the improvement**
 Name John or Reiko Bates
 Address 5012 St. Denis Ct. Orlando FL 32812
 Interest in Property _____
Name and address of fee simple titleholder (if different from Owner listed above)
 Name _____
 Address _____
4. **Contractor**
 Name Albert Cichra Builders, Inc. Telephone Number (407) 450-4241
 Address 13936 Marine Drive, Orlando, FL 32832
5. **Surety** (if applicable, a copy of the payment bond is attached)
 Name N/A Telephone Number _____
 Address _____ Amount of Bond \$ _____
6. **Lender**
 Name N/A Telephone Number _____
 Address _____
7. **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 _____
8. **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 _____
9. **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)

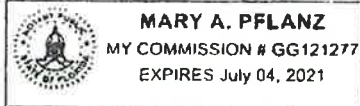
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED 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.

✓ [Signature]
 Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager _____ Signatory's Title/Office _____

The foregoing instrument was acknowledged before me this 22nd day of 02/20 by John Bates
 as _____ for _____
 Type of authority, e.g., officer, trustee, attorney in fact _____ Name of party on behalf of whom instrument was executed _____

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

Personally Known OR Produced ID _____
 Type of ID Produced _____



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: [Signature], D.C.
 DATED: 02-28-20





**CITY OF BELLE ISLE,
FLORIDA**

1600 Nela Avenue
Belle Isle, Florida 32809
(407) 851-7730 • FAX (407) 240-2222
www.cityofbelleislefl.org



POWER OF ATTORNEY

Date: 3/15/20

Permit #: _____

I hereby name and appoint _____ Sheila Cichra _____ of
(print name)

_____ Albert Cichra Builders, Inc. _____ to be my lawful attorney-in-fact to act for
(company name)

me and apply to the City of Belle Isle Building Department for a _____ Building _____ permit
(type of permit)
for work to be performed at the following location:

_____ 5012 St. Denis Court _____, Belle Isle, FL 32809 ✓ 32812 and
(street address)

to sign my name and do all things necessary to this appointment.

Certified Contractor's Printed Name: _____ Albert Cichra _____

License Number: _____ CRC058230 _____

Certified Contractor's Signature: Albert Cichra _____

The foregoing instrument was acknowledged before me this 15th day of March of 2020

by _____ Albert Cichra _____ who is personally known to me or who produced
_____ as identification and who did not take an oath.

State of Florida
County of Orange

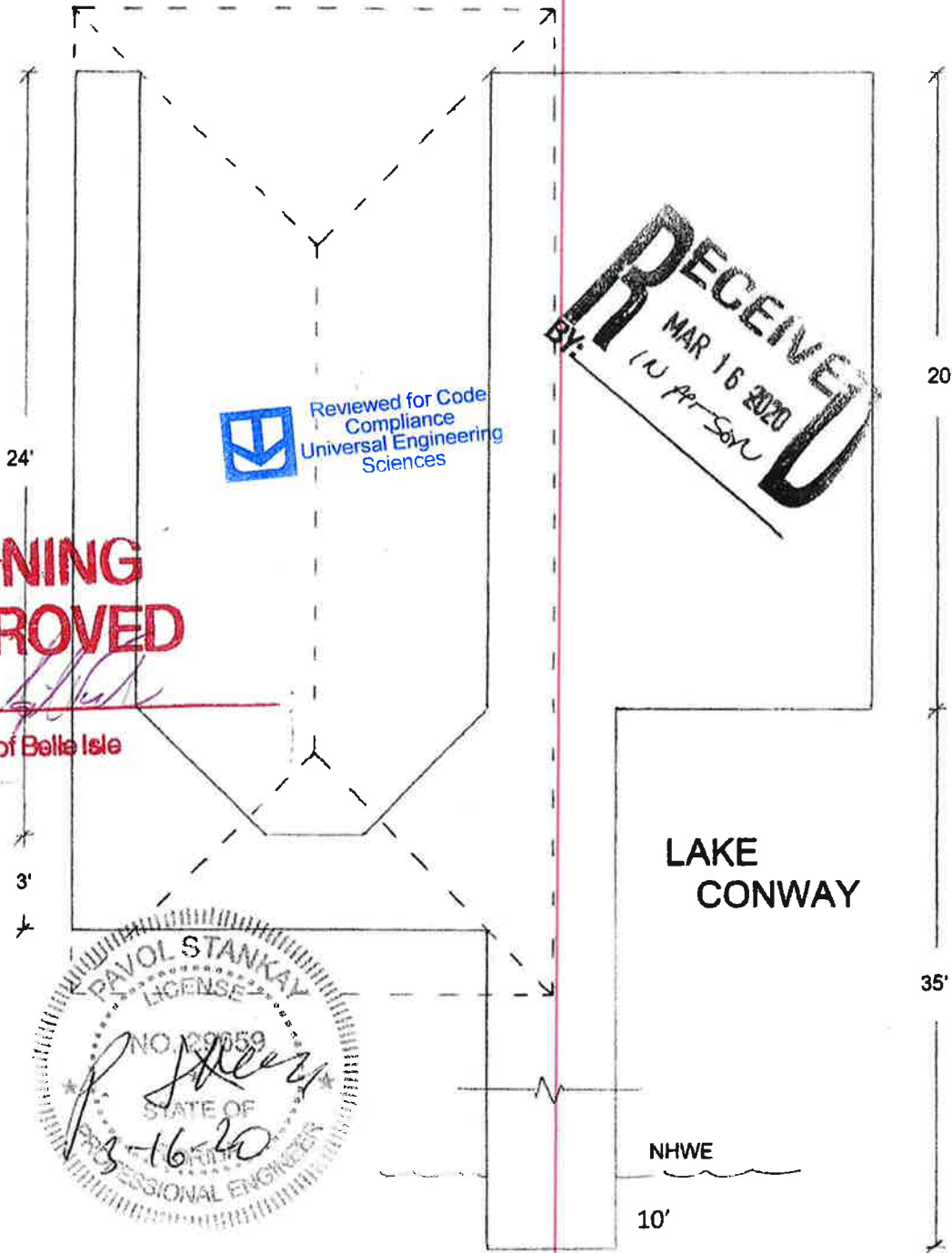
Mary A. Pflanz
Notary Public, Orange County, Florida



(seal)

Plan View

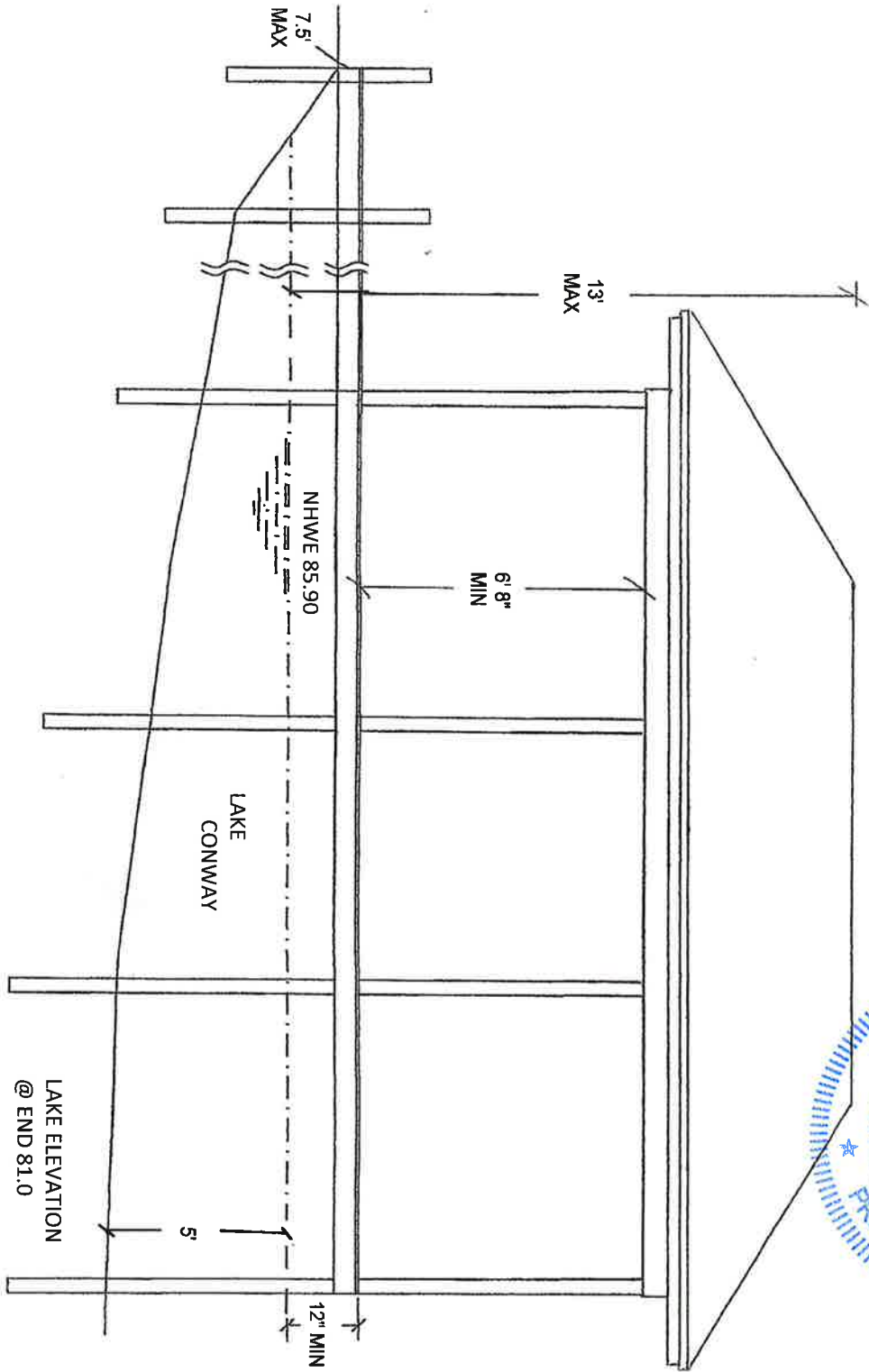
2' 11' 4' 8'



Bates 5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

Side Elevation



MAX HEIGHT OF ROOF 13' ABOVE NHWE
MIN DECK HEIGHT 1' ABOVE NHWE

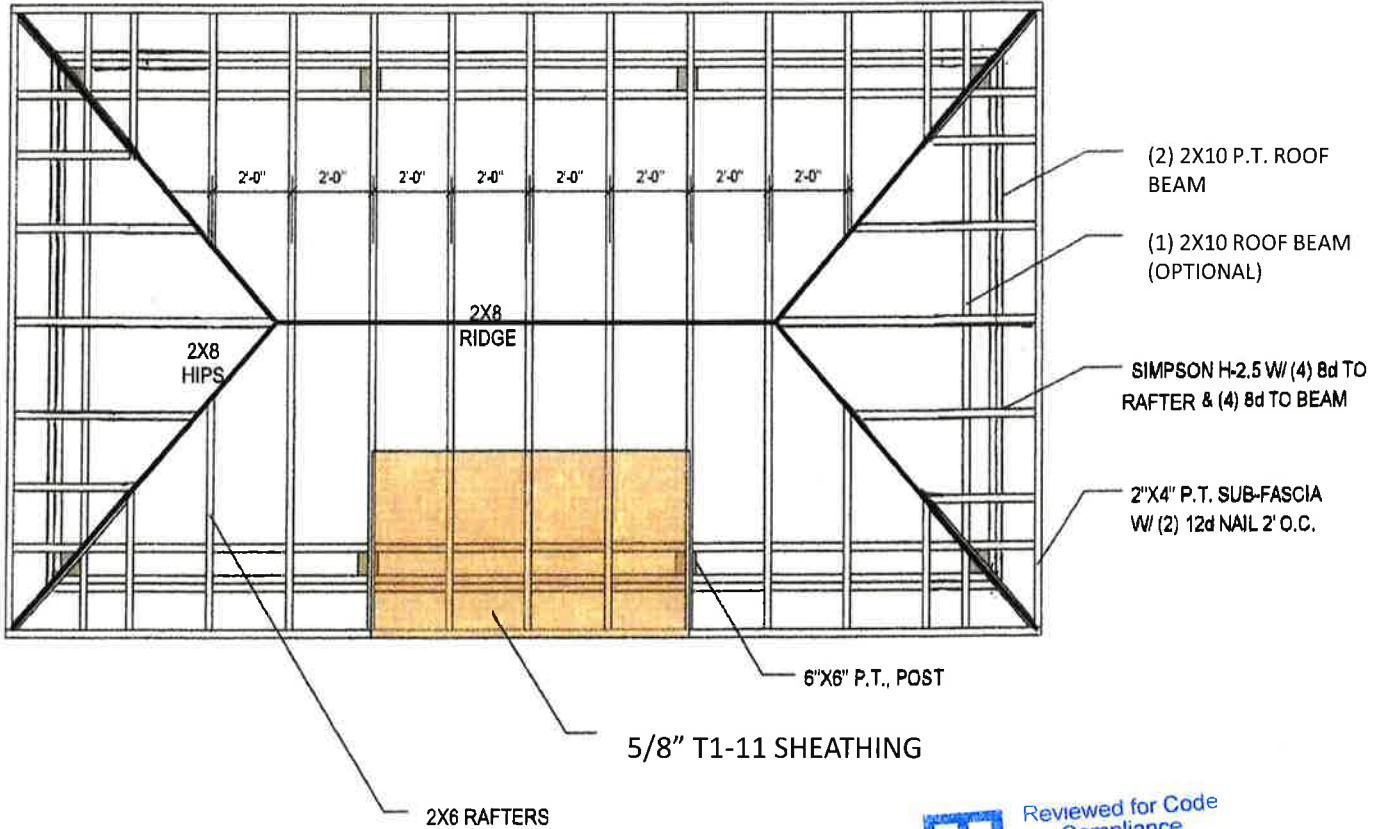
 Reviewed for Code Compliance
Universal Engineering Sciences



Bates

5012 St. Denis Court, Belle Isle

Roof Framing



- 2" X 6" RAFTERS 2' O.C. W/(3) 10d TOE NAILS TO HIPS & RIDGE
- 2" X 6" COLLAR TIES 4' O.C. W/(4) 10d NAILS EACH END
- 2" X 8" HIPS & VALLEYS W/(4) 10d TOE NAILS EA END
- 2" X 6" FASCIA W/(2) 10d NAILS TO RAFTERS
- (2) 2" X 10" PERIMETER BEAM W/(2) 1/2" HDG THRU BOLT
- 6" X 6" PILINGS 12' O.C. MAX

NAILING SCHEDULE:
 Wall and Roof sheathing – 5/8" T1-11
 APA rated plywood w/8d sinker
 Nails @ 6" O.C. at supported PNL
 edges & 10" O.C. in the field
 Simpson H2.5Z - four 8d x 1 1/2" nails
 to rafters and beams
 Simpson LUS26Z – four 8d x 1 1/2" nails
 to headers and joists

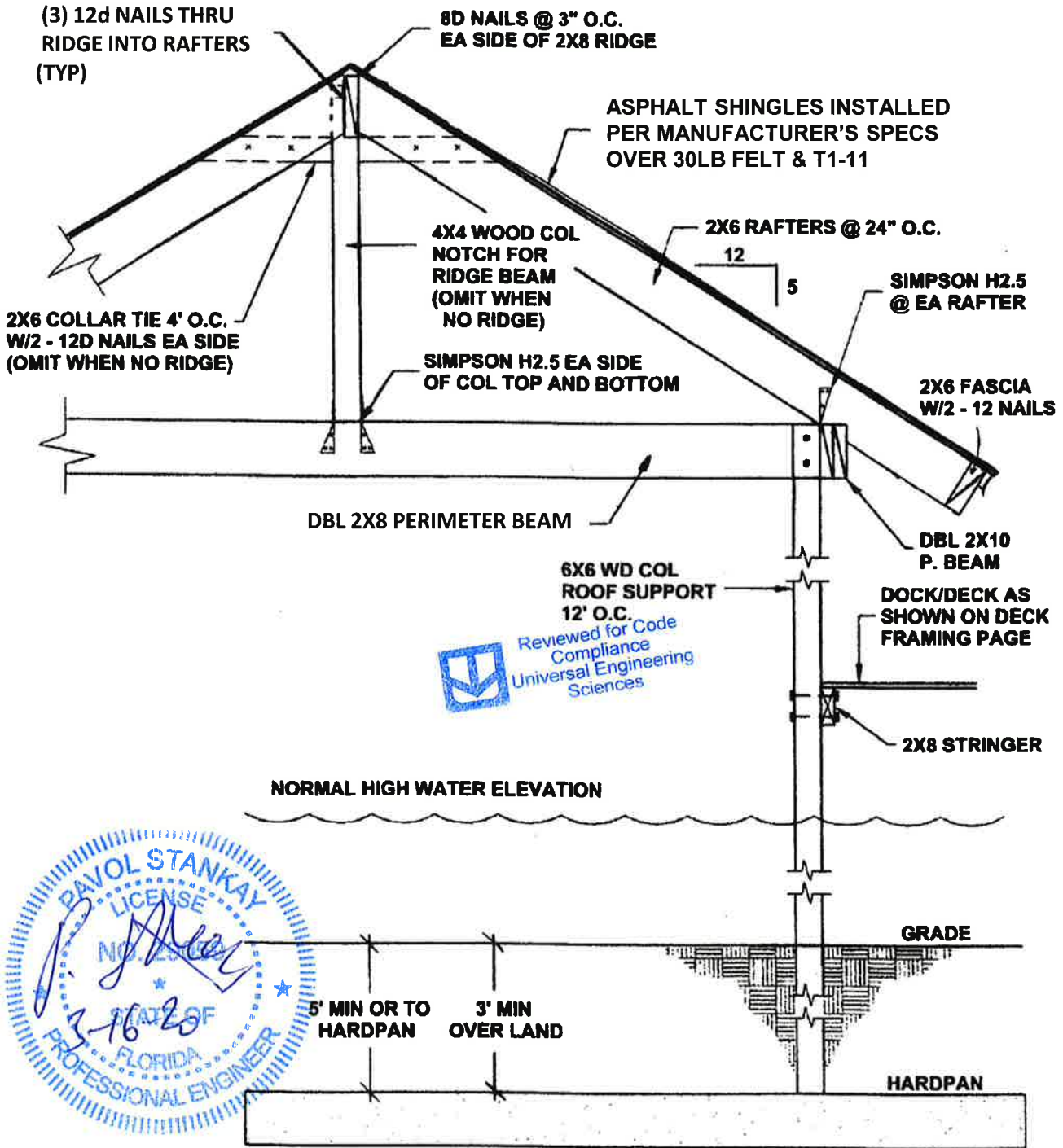


Bates

5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

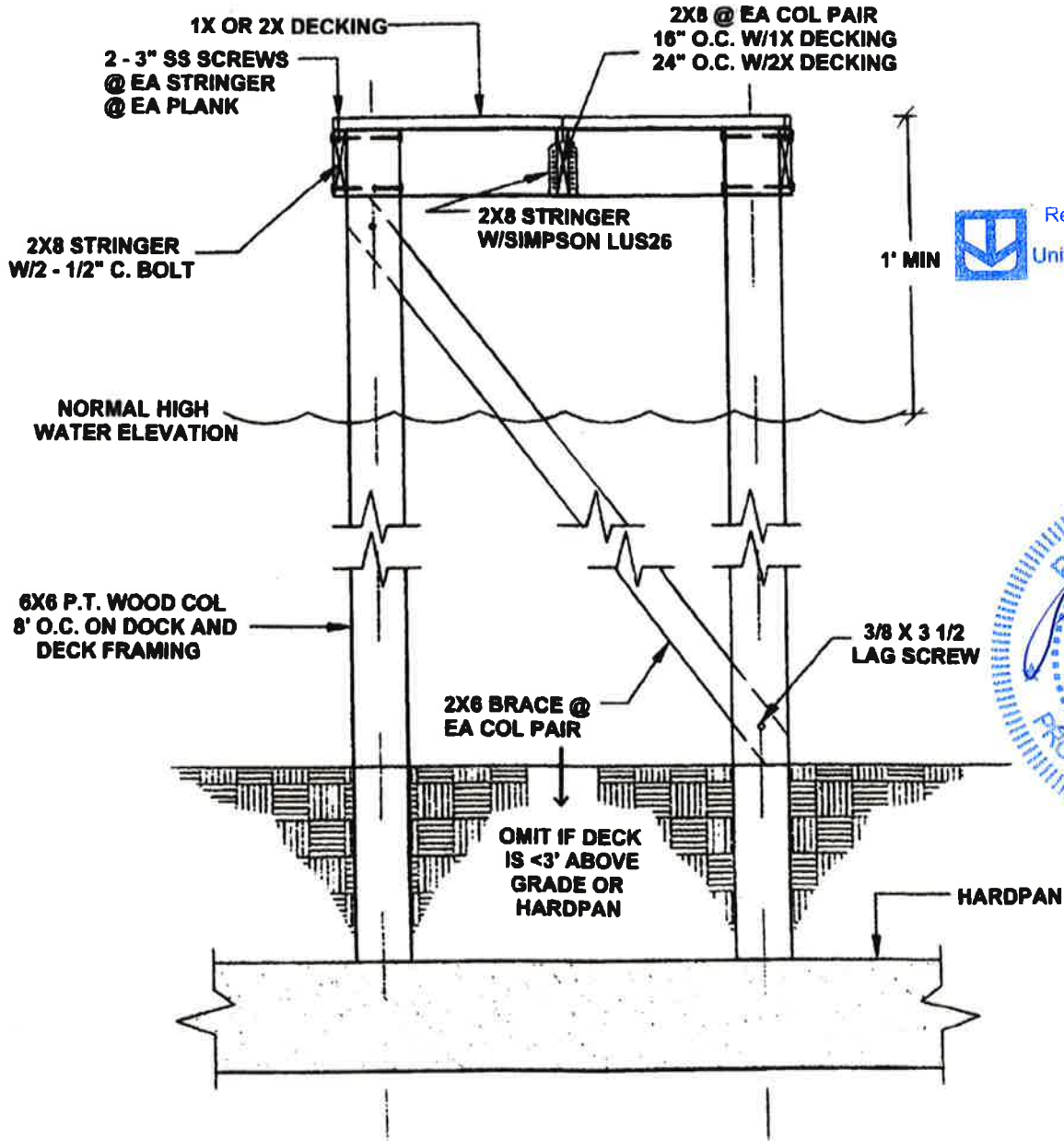
Details and Specifications - Roof Cross Section



Bates **5012 St. Denis Court, Belle Isle**

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

Dock/Deck Cross Section and Bracing



Reviewed for Code Compliance
 Universal Engineering Sciences



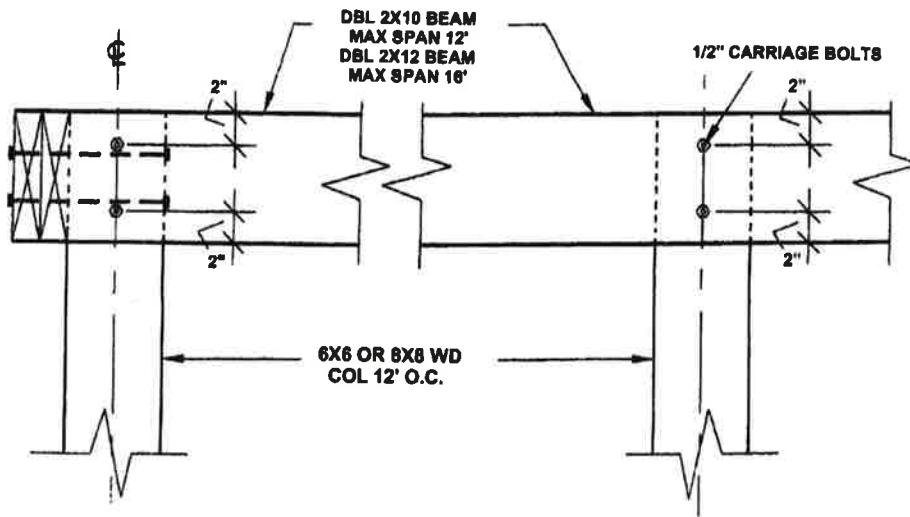
Bates

5012 St. Denis Court, Belle Isle

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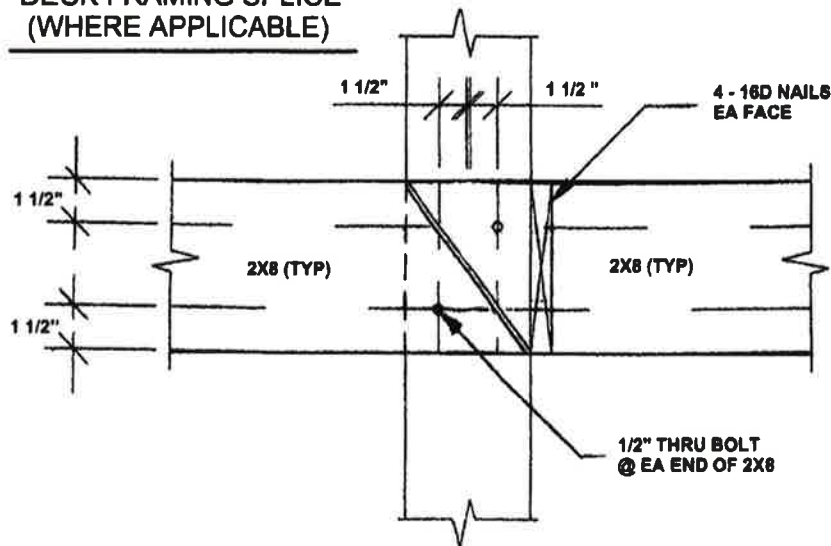
Details and Specifications (P. Beam and Framing Splice)

P. BEAM DETAIL



Reviewed for Code
Compliance
Universal Engineering
Sciences

DECK FRAMING SPLICE (WHERE APPLICABLE)



THIS STRUCTURE HAS BEEN DESIGNED TO MEET THE 2017 FLORIDA BUILDING CODE, 6TH EDITION AND ASCE 7- 10 AND 2014 NATIONAL ELECTRIC CODE.

1. BASIC WIND SPEED (V_{asd}) = 108 MPH, ULTIMATE WIND SPEED (V_{ult}) = 140 MPH
2. CONSTRUCTION TYPE = R-3
3. WIND EXPOSURE = CATEGORY D
4. OPEN STRUCTURE WITH A ZERO PRESSURE COEFFICIENT

Bates

5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

Design Standards

The following are general design standards. More stringent design standards may be noted on the plans.

General Requirements:

Reproductions of contract drawings by contractor in lieu of preparation of shop drawings signifies acceptance of information shown as correct and obligates himself to any expense, real or implied, arising from their use. A change to the structural drawings due to the acceptance of alternates and/or substitutes is the responsibility of the contractor and must be submitted to the engineer for approval. The general contractor and each subcontractor shall verify all existing conditions prior to the start of any work. All inconsistencies shall be reported to the designer and/or structural engineer, if needed. Should contractor construct the premises in a fashion not consistent with the plans prepared by the designer and/or structural engineer, or in any fashion, change the plans and drawing without the review and approval from the designer and/or structural engineer. Then designer and/or structural engineer shall bear no responsibility or liability for the construction of premises and accuracy of the drawings.

Structural Aluminum:

Conform to latest edition of Aluminum Association of Florida standard practice for aluminum design.

All aluminum shall be 6061-T6 (E= 10,000 ksi; Fy = 35 ksi)

Design Loads:

Pursuant to Chapter 1609 LL (-Table 1607; WL- Section 1609)

Deck Live Load: 60 psf Dead Load: 10 psf

Roof Live Load: 20 psf Guardrails and handrails: 200 psf

Guardrail in fill components: 50psf Stairs: 40psf

Components and cladding, design wind pressures + 38psf/-38psf

Timber:

Design in accordance with the National Design specification for wood construction, with loading in accordance with the Florida Building Code. All graded structural lumber shall be pressure treated and meet the following minimum requirements:

Minimum bending stress = 1250 psi (No. 1 Dense So. Pine)

Young Modulus = 1600 ksi

Maximum of 15% moisture content

Contractor may use Southern Yellow Pine No. 2 or U.O.N.

Lumber sizes shown are nominal sizes. Lumber shall be furnished in finished sizes meeting the requirement of the American Softwood Lumber Standard.

Structural Steel:

Conform to latest edition of AISC "Specification for structural steel building" and AISC "Code of standard practice for steel buildings and bridges".

All structural steel shall be ASTM A36, (E= 29,000 ksi; Fy = 36 ksi)

Splicing prohibited without prior approval as to location and type.

Burning of holes in steel members is prohibited. Any member with burned holes must be replaced.

Galvanized Bolts:

All bolts shall be galvanized, be ASTM

A36, threaded round stock with a

minimum yield stress of 36,000 psi.

Reviewed for Code
Compliance
Universal Engineering
Sciences

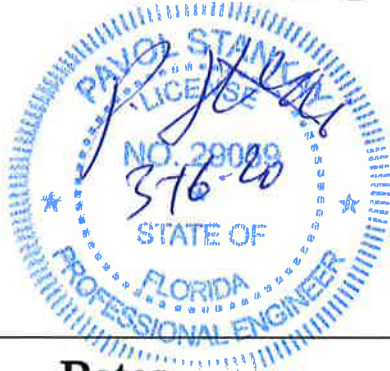
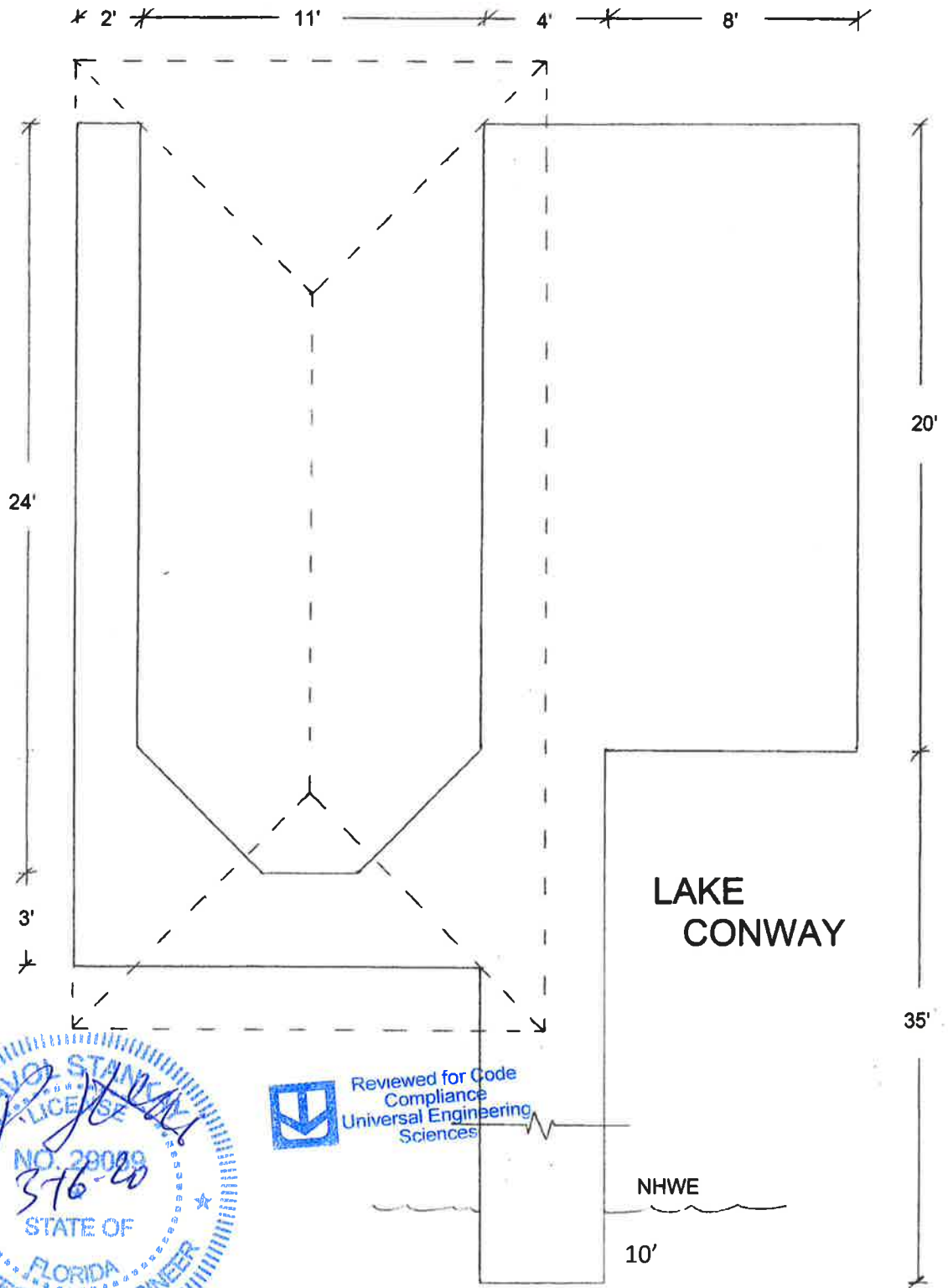


Bates

5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

Plan View

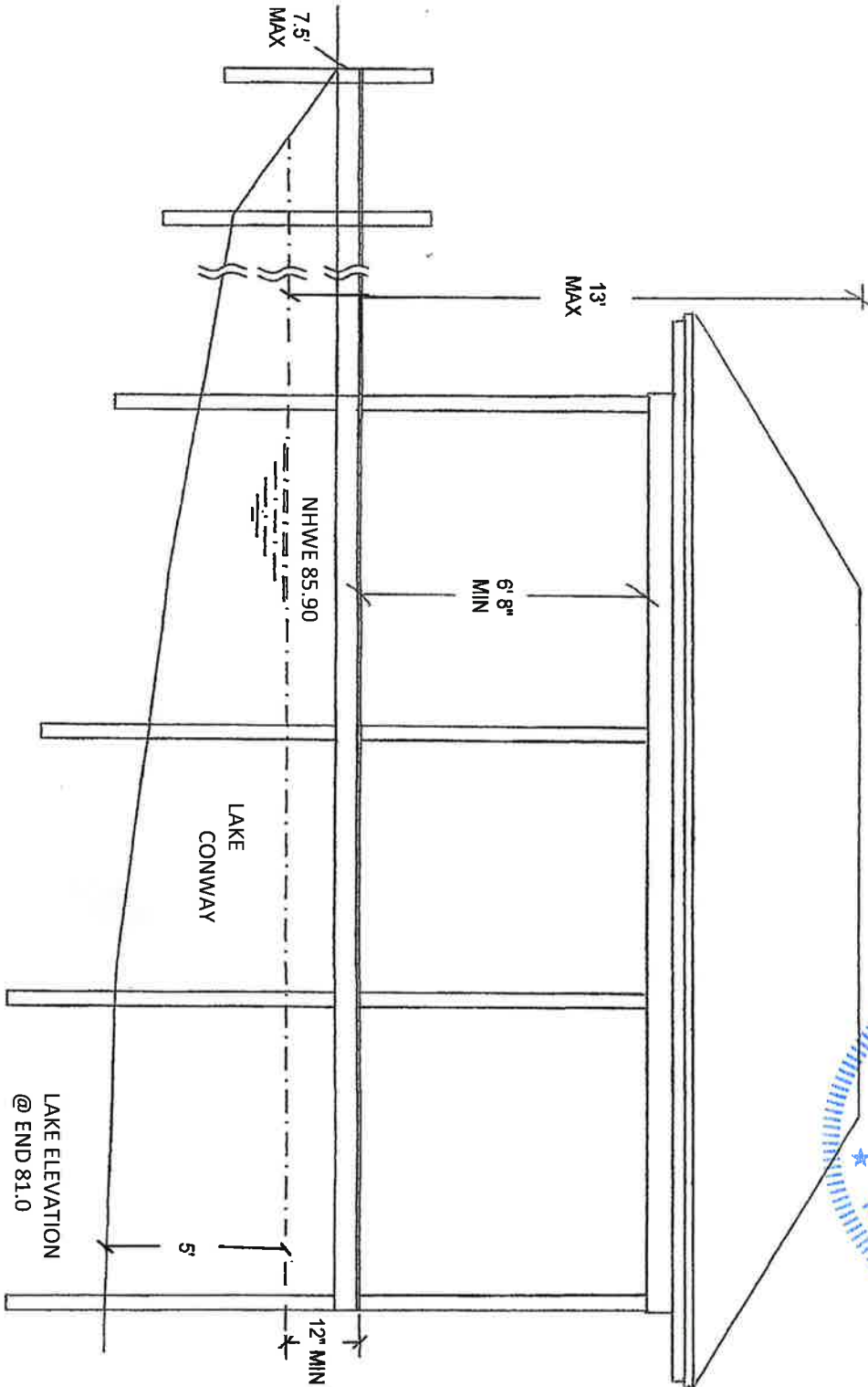


Reviewed for Code
Compliance
Universal Engineering
Sciences

Bates

5012 St. Denis Court, Belle Isle

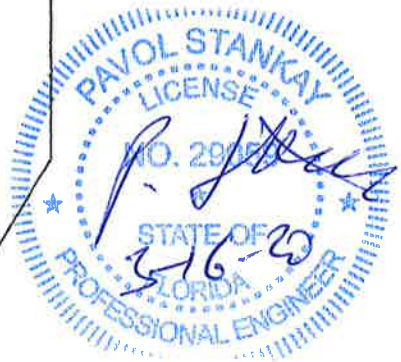
Side Elevation



MAX HEIGHT OF ROOF 13' ABOVE NHWE
MIN DECK HEIGHT 1' ABOVE NHWE



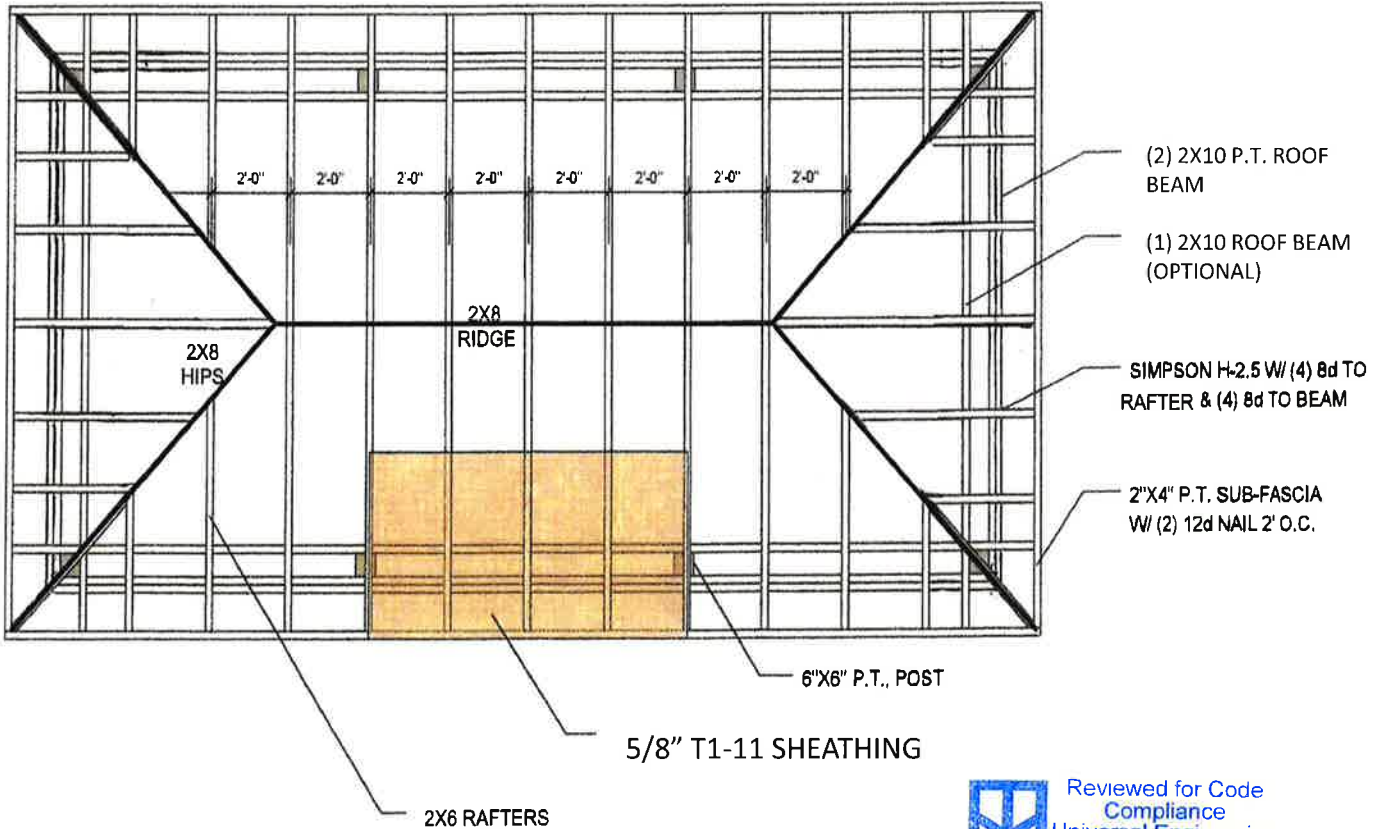
Reviewed for Code
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Universal Engineering
Sciences



Bates

5012 St. Denis Court, Belle Isle

Roof Framing



Reviewed for Code Compliance
Universal Engineering Sciences

- 2" X 6" RAFTERS 2' O.C. W/(3) 10d TOE NAILS TO HIPS & RIDGE
- 2" X 6" COLLAR TIES 4' O.C. W/(4) 10d NAILS EACH END
- 2" X 8" HIPS & VALLEYS W/(4) 10d TOE NAILS EA END
- 2" X 6" FASCIA W/(2) 10d NAILS TO RAFTERS
- (2) 2" X 10" PERIMETER BEAM W/(2) 1/2" HDG THRU BOLT
- 6" X 6" PILINGS 12' O.C. MAX

NAILING SCHEDULE:
 Wall and Roof sheathing – 5/8" T1-11
 APA rated plywood w/8d sinker
 Nails @ 6" O.C. at supported PNL
 edges & 10" O.C. in the field
 Simpson H2.5Z - four 8d x 1 1/2" nails
 to rafters and beams
 Simpson LUS26Z – four 8d x 1 1/2" nails
 to headers and joists

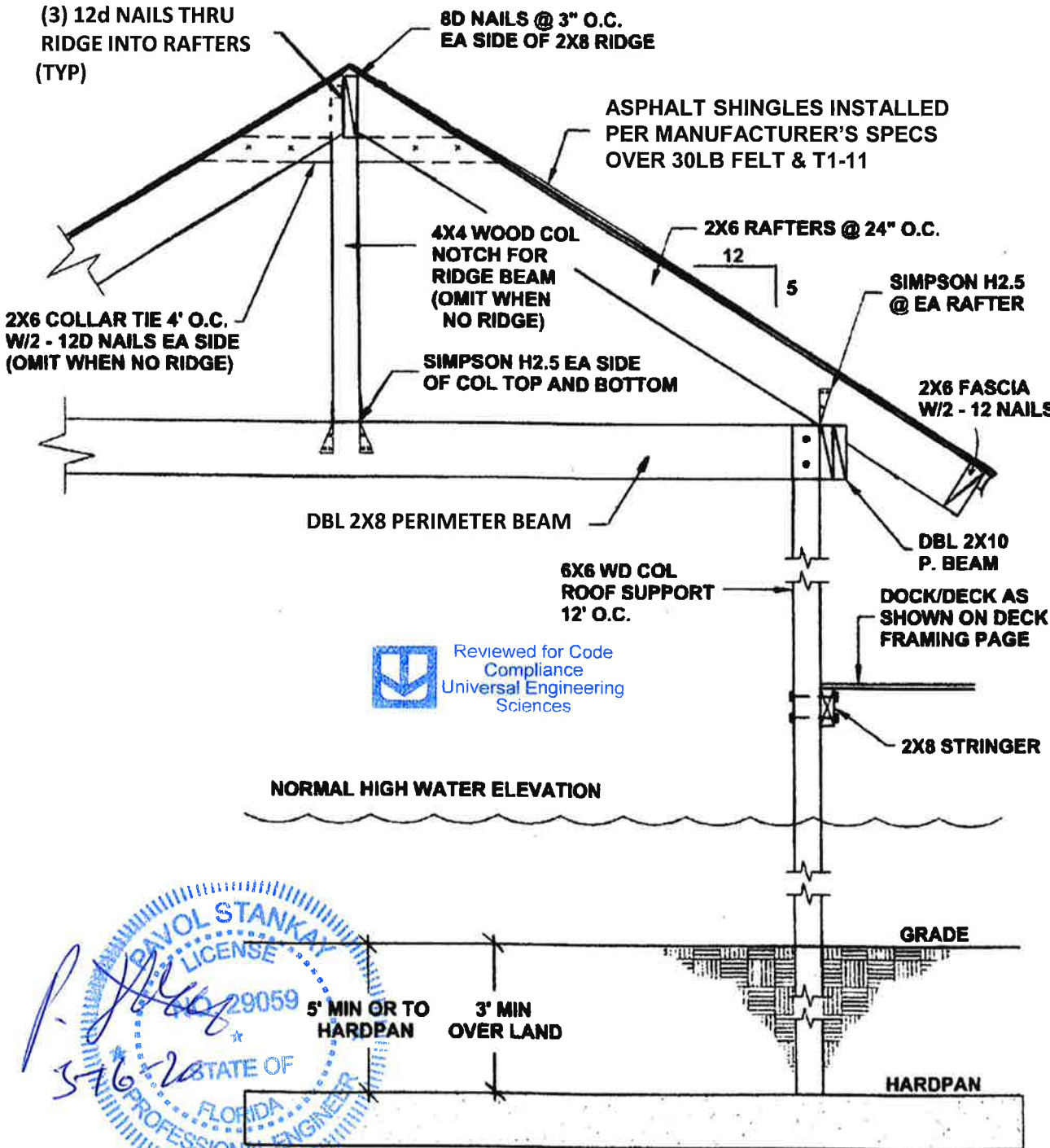


Bates

5012 St. Denis Court, Belle Isle

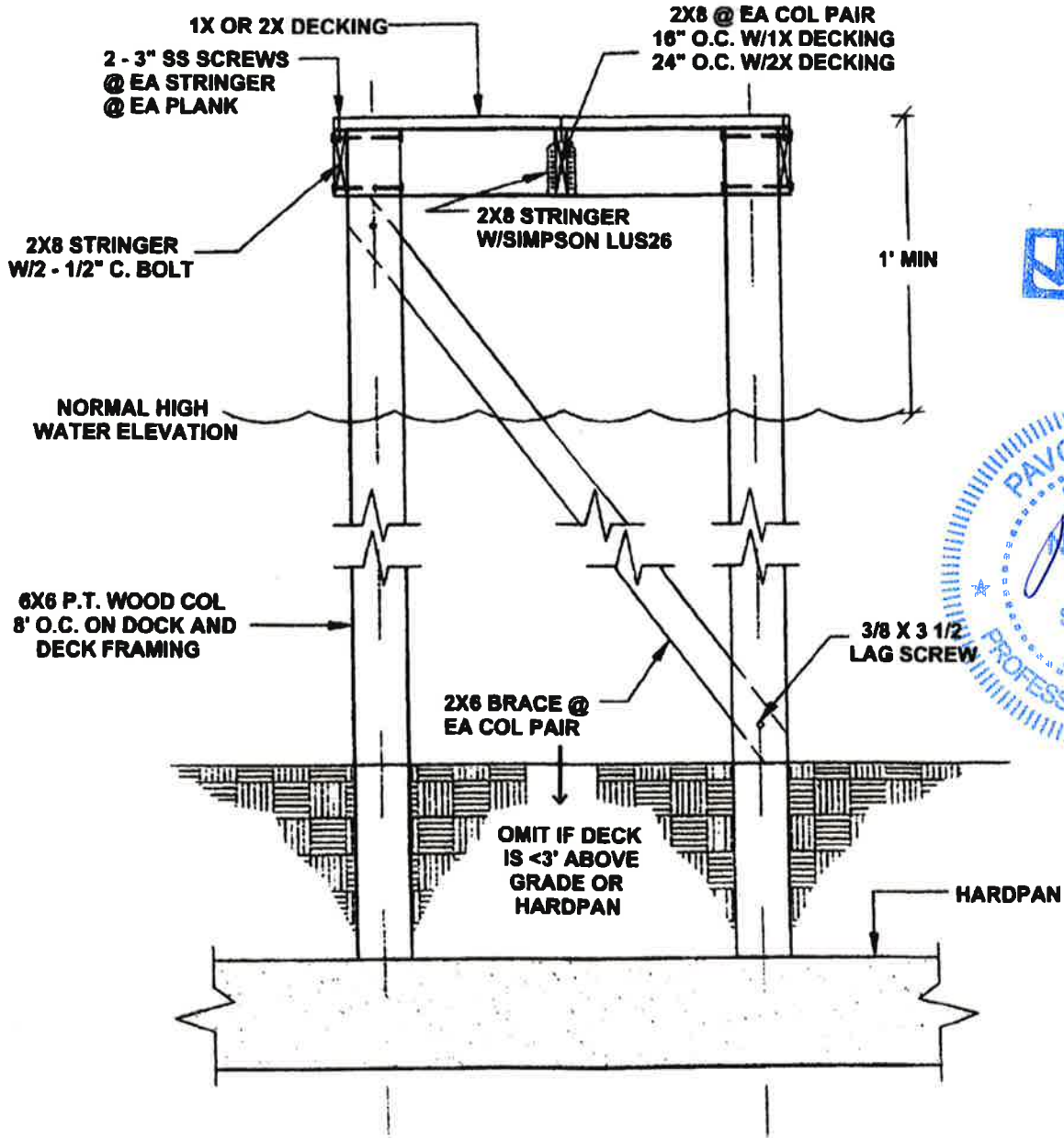
Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

Details and Specifications - Roof Cross Section



Bates **5012 St. Denis Court, Belle Isle**

Dock/Deck Cross Section and Bracing



Reviewed for Code Compliance
Universal Engineering Sciences



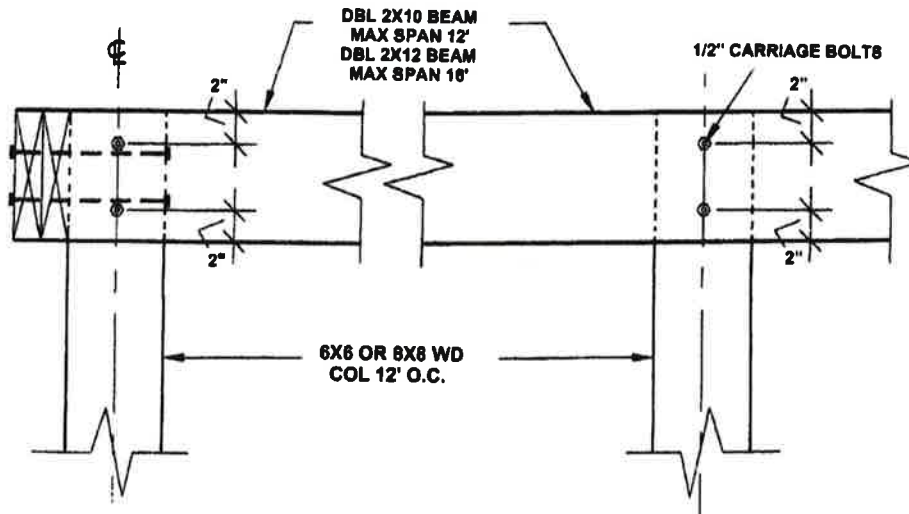
Bates

5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

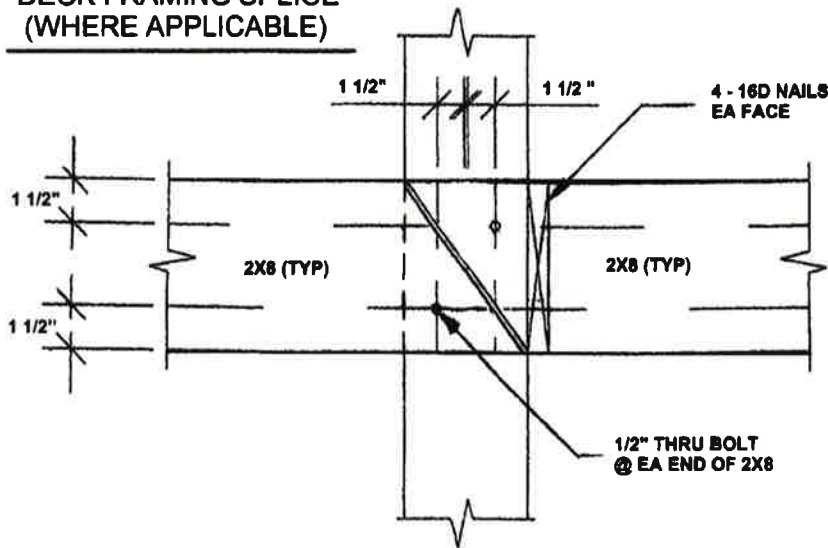
Details and Specifications (P. Beam and Framing Splice)

P. BEAM DETAIL



Reviewed for Code Compliance
Universal Engineering Sciences

DECK FRAMING SPLICE (WHERE APPLICABLE)



THIS STRUCTURE HAS BEEN DESIGNED TO MEET THE 2017 FLORIDA BUILDING CODE, 6TH EDITION AND ASCE 7- 10 AND 2014 NATIONAL ELECTRIC CODE.

1. BASIC WIND SPEED (V_{asd}) = 108 MPH, ULTIMATE WIND SPEED (V_{ult}) = 140 MPH
2. CONSTRUCTION TYPE = R-3
3. WIND EXPOSURE = CATEGORY D
4. OPEN STRUCTURE WITH A ZERO PRESSURE COEFFICIENT

Bates

5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145

Design Standards

The following are general design standards. More stringent design standards may be noted on the plans.

General Requirements:

Reproductions of contract drawings by contractor in lieu of preparation of shop drawings signifies acceptance of information shown as correct and obligates himself to any expense, real or implied, arising from their use. A change to the structural drawings due to the acceptance of alternates and/or substitutes is the responsibility of the contractor and must be submitted to the engineer for approval. The general contractor and each subcontractor shall verify all existing conditions prior to the start of any work. All inconsistencies shall be reported to the designer and/or structural engineer, if needed. Should contractor construct the premises in a fashion not consistent with the plans prepared by the designer and/or structural engineer, or in any fashion, change the plans and drawing without the review and approval from the designer and/or structural engineer. Then designer and/or structural engineer shall bear no responsibility or liability for the construction of premises and accuracy of the drawings.

Structural Aluminum:

Conform to latest edition of Aluminum Association of Florida standard practice for aluminum design.

All aluminum shall be 6061-T6 (E= 10,000 ksi; Fy = 35 ksi)

Design Loads:

Pursuant to Chapter 1609 LL (-Table 1607; WL- Section 1609)

Deck Live Load: 60 psf Dead Load: 10 psf

Roof Live Load: 20 psf Guardrails and handrails: 200 psf

Guardrail in fill components: 50psf Stairs: 40psf

Components and cladding, design wind pressures + 38psf/-38psf

Timber:

Design in accordance with the National Design specification for wood construction, with loading in accordance with the Florida Building Code. All graded structural lumber shall be pressure treated and meet the following minimum requirements:

Minimum bending stress = 1250 psi (No. 1 Dense So. Pine)

Young Modulus = 1600 ksi

Maximum of 15% moisture content

Contractor may use Southern Yellow Pine No. 2 or U.O.N.

Lumber sizes shown are nominal sizes. Lumber shall be furnished in finished sizes meeting the requirement of the American Softwood Lumber Standard.



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Structural Steel:

Conform to latest edition of AISC "Specification for structural steel building" and AISC "Code of standard practice for steel buildings and bridges".

All structural steel shall be ASTM A36, (E= 29,000 ksi; Fy = 36 ksi)

Splicing prohibited without prior approval as to location and type.

Burning of holes in steel members is prohibited. Any member with burned holes must be replaced.



Galvanized Bolts:

All bolts shall be galvanized, be ASTM A36, threaded round stock with a minimum yield stress of 36,000 psi.

Bates

5012 St. Denis Court, Belle Isle

Pavol Stankay PE # 29059 2227 Mercator Drive Orlando, FL 32807 (407) 701-2145



Sheila Cichra <sheilacichra@gmail.com>

FDEP ERP Self-Certification Receipt

1 message

no-reply@dep.state.fl.us <no-reply@dep.state.fl.us>

Sun, Mar 15, 2020 at 1:39 PM

To: sheilacichra@gmail.com

Cc: NMFS.SER.PROGRAMMATICREVIEW@noaa.gov, ERP.SELFCERTS@dep.state.fl.us,

ERICA.GOSHLESKI@dep.state.fl.us, CORPSJAXREG@usace.army.mil, SPGP@usace.army.mil

**FLORIDA DEPARTMENT OF
Environmental Protection****Ron DeSantis**

Governor

Jeanette Nuñez

Lt. Governor

Bob Martinez Center
2600 Blair Stone Road
Tallahassee, Florida 32399-2400**Noah Valenstein**

Secretary

Receipt for Submission**SELF-CERTIFICATION FOR A PROJECT AT A
PRIVATE, RESIDENTIAL SINGLE-FAMILY****03/15/2020**Self-Certification File No.: **0385810001EE**File Name: **5012 Saint Denis Ct Belle Isle, FL 32812 - Self Cert Exempt Dock with Boat Lift(s) (General)**

Dear **Sheila Cichra**: On **03/15/2020** you used the Florida Department of Environmental Protection's electronic Self Certification Process to certify compliance with the terms and conditions of the Federal State Programmatic General Permit (SPGP) Self Certification Process for a project at private, single-family residence located at:

LAT - Degrees: **28** Minutes: **29** Seconds: **8.5522**LONG - Degrees: **-81** Minutes: **20** Seconds: **53.9516**SITE ADDRESS: **5012 Saint Denis Ct Belle Isle, FL 32812**COUNTY: **Orange**

For:

Brad Bates**5012 St Denis Court Orlando, FL 32812**

You have certified that the project you propose to construct at the above location meets all the conditions of the Self-Certification Process. A project that is built in conformance to those conditions (attached for reference) will:

1. Qualify for a regulatory exemption under Section 403.813(1)(b) of the Florida Statutes (F.S.) and Chapter 62-330, Florida Administrative Code (F.A.C.). As such, it is exempt from the need to obtain a DEP Environmental Resource Permit.;
2. Qualify for Consent by Rule or Letter of Consent (as applicable) under Chapter 253, F.S. and Chapter 18-21, F.A.C. (and Chapter 258, F.S. and Chapter 18-20, F.A.C., if applicable), when the project is located on submerged lands owned by the State of Florida.

Your Self-Certification is based solely on the information you provided under this process, and applies only to the statutes and rules in effect when your certification was completed. The certification is effective only for the specific project proposed, and only if the project is constructed, operated, and maintained in conformance with all the terms, conditions, and limitations stated in the Self-Certification Process. In addition, any substantial modifications in your plans should be submitted to the Department for review, as changes may result in a permit being required.

You have acknowledged that this Self Certification will automatically expire if:

1. Construction of the project is not completed within one year from the self-certification date;
2. site conditions materially change;
3. the terms, conditions, and limitations of the Self Certification are not followed; or
4. the governing statutes or rules are amended before construction of the project.

Completion of the Self Certification constitutes your authorization for Department or Corps personnel to enter the property for purposes of inspecting for compliance.

Receipt of this Self-Certification constitutes authorization to use sovereignty/state-owned submerged lands, as required by rule 18-21.005, F.A.C.

The authorization must be visibly posted during all construction activities.

In waters that are accessible to manatees, obtain information on your mandatory Manatee Protection sign by clicking [here](#).

FEDERAL STATE PROGRAMMATIC GENERAL PERMIT (SPGP)

You have certified that the project you propose to construct at the above location meets all the conditions of the SPGP Self-Certification Process and will be built in conformance to those conditions (attached for reference). Your proposed activity as certified is in compliance with the SPGP program. U.S. Army Corps of Engineers (Corps) Specific conditions apply to your project, attached. **No further permitting for this activity is required by the Corps. Although the construction period for works authorized by Department of the Army permits is finite, the permit itself, with its limitations, does not expire.**

Notifications to the Corps. For all authorizations under this SPGP V-R1, including Self-Certifications, the Permittee shall provide the following notifications to the Corps:

- a. Commencement Notification. Within 10 days before the date of initiating the work authorized by this permit or for each phase of the authorized project, the Permittee shall provide a written notification of the date of commencement of authorized work to the Corps
- b. Corps Self-Certification Statement of Compliance form. Within 60 days of completion of the work authorized by this permit, the Permittee shall complete the "Self-Certification Statement of Compliance" form (attached) and submit it to the Corps. In the event that the completed work deviates in any manner from the authorized work, the Permittee shall describe the deviations between the work authorized by this permit and the work as constructed on the "Self-Certification Statement of Compliance" form. The description of any deviations on the "Self-Certification Statement of Compliance" form does not constitute approval of any deviations by the Corps.
- c. Permit Transfer. When the structures or work authorized by this permit are still in existence at the time the property is transferred, the terms and conditions of this permit will continue to be binding on the new owner(s) of the property. To validate the transfer of this permit and the associated liabilities associated with compliance with its terms and conditions, have the transferee sign and date the enclosed form.
- d. Reporting Address. The Permittee shall submit all reports, notifications, documentation, and correspondence required by the general and special conditions of this permit to the following address.
 1. For standard mail: U.S. Army Corps of Engineers, Regulatory Division, Enforcement Section, P.O. Box 4970, Jacksonville, FL, 32232-0019.
 2. For electronic mail: SAJ-RD-Enforcement@usace.army.mil (not to exceed 10 MB). The Permittee shall reference this permit number, SAJ-2015-2575 on all submittals.

This SPGP Self-Certification is based solely on the information you provided under this process, and applies only to the statutes and rules in effect when your certification was completed. You have recognized that your certification is effective only for the specific project proposed, and provided the project is constructed, operated, and maintained in conformance with all the terms, conditions, and limitations stated in the SPGP Self-Certification Process. This Self-Certification will not apply if any substantial modifications are made to the project. You agree to contact the Department for review of any plans to construct additional structures or to modify the project, as changes may result in a permit being required.

You have acknowledged that this Self-Certification will automatically expire if:

1. construction of the project is not completed by midnight, July 25, 2021, unless construction commenced or a contract to construct was executed before July 25, 2021, in which case the time limit for completing the work authorized by the SPGP ends at midnight, July 25, 2022. However, in no case can construction continue for more than one year beyond the Self-Certification date;
2. site conditions materially change;
3. the terms, conditions, and limitations of the Self-Certification are not followed; or
4. the governing statutes or rules are amended before construction of the project.

Completion of the Self-Certification constitutes your authorization for Department or Corps personnel to enter the property for purposes of inspecting for compliance.

If you have any questions, please contact your local Department District Office. Contact information can be found at: https://floridadep.gov/sites/default/files/SLERC_contacts_web_map_01-2017_0.pdf.

For further information, contact the Corps directly at: <https://www.saj.usace.army.mil/Missions/Regulatory.aspx>. When referring to your project, please use the SPGP Self-Certification file number listed above.

Authority for review - an agreement with the U.S. Army Corps of Engineers entitled Coordination Agreement between the U. S. Army Corps of Engineers (Jacksonville District) and the Florida Department of Environmental Protection State Programmatic General Permit, Section 10 of the Rivers and Harbor Act of 1899 and Section 404 of the Clean Water Act.

ADDITIONAL INFORMATION

This Self-Certification Process does not relieve you from the responsibility of obtaining other permits or authorizations from other agencies (federal, state, Water Management District, or local) that may be required for the project. Failure to obtain all applicable authorizations prior to construction of the project may result in enforcement.





If you have any questions or issues with the attached documents, please contact your local Department District Office:
Central District
DEP_CD@dep.state.fl.us

Sincerely,
Florida Department of Environmental Protection.

- Attachments:**
 FDEP Terms and Conditions
 SPGP Terms and Conditions
 Project Design Criteria



4 attachments

-  **dee5925e66c5d160ea52c0ce8f8c74.pdf**
50K
-  **cc6d33bb5b8c92c33c1521133a74edfe.pdf**
50K
-  **ProjectDesignCriteria_1_01.pdf**
2622K
-  **noname**
50K



RICK SCOTT, GOVERNOR

JONATHAN ZACHEM, SECRETARY



**STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD**

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

CICHERA, ALBERT G JR

ALBERT CICHERA BUILDERS INC
13936 MARINE DRIVE
ORLANDO FL 32832

LICENSE NUMBER: CRC058230

EXPIRATION DATE: AUGUST 31, 2020


Always verify licenses online at MyFloridaLicense.com

Do not alter this document in any form.

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



PLEASE CUT OUT CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF FINANCIAL SERVICES DIVISION OF WORKERS' COMPENSATION</p> <p>CONSTRUCTION INDUSTRY EXEMPTION</p> <p>CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE DATE: 6/4/2018 EXPIRATION DATE: 6/3/2020</p> <p>PERSON: ALBERT G CICHRA JR EMAIL: CICHRA@BELLSOUTH.NET</p> <p>FEIN: 593443958</p> <p>BUSINESS NAME AND ADDRESS: ALBERT CICHRA BUILDERS INC</p> <p>13936 MARINE DRIVE ORLANDO, FL 32832</p> <p>SCOPE OF BUSINESS OR TRADE: Licensed Residential Contractor Carpentry : NOC</p>	 <p>IMPORTANT</p> <p>Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.</p> <p>Pursuant to Chapter 440.05(12), F.S., Certificates of election to be exempt... apply only within the scope of the business or trade listed on the notice of election to be exempt.</p> <p>Pursuant to Chapter 440.05(13), F.S., Notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.</p>
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

4/19/2019

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 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 Lykes Insurance, Inc. P. O. Box 2703 Winter Park FL 32790	CONTACT NAME: Myrna Luciano PHONE (A/C, No, Ext): 407-644-5722 E-MAIL ADDRESS: mluciano@lykesinsurance.com	FAX (A/C, No): 407-628-1363
	INSURER(S) AFFORDING COVERAGE	
INSURED Albert Cichra Builders Inc. 13936 Marine Drive Orlando FL 32832	INSURER A : Ohio Security Insurance Co.	
	INSURER B :	
	INSURER C :	
	INSURER D :	
	INSURER E :	
	INSURER F :	

COVERAGES **CERTIFICATE NUMBER:** 1104831912 **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 INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <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"/> PROJECT <input type="checkbox"/> LOC			BLS57067246	4/15/2019	4/15/2020	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 \$ 1,000,000 \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> 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			N/A			<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, if more space is required)
 City of Belle Isle is an Additional Insured as per written contract

CERTIFICATE HOLDER**CANCELLATION**

City of Belle Isle
 1600 Nela Avenue
 Belle Isle FI 32809

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

William P. Joubert

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1801 CERTIFIED RESIDENTIAL **2019** **EXPIRES** **9/30/2020** 1801-0005119
\$30.00 1 EMPLOYEE 5000 BUSINESS OFFICE \$30.00 2 EMPLOYEES

TOTAL TAX \$60.00
PREVIOUSLY PAID \$60.00
TOTAL DUE \$0.00

CICHRA ALBERT G JR

ALBERT CICHRA BUILDERS INC
CICHRA ALBERT G JR
13936 MARINE DR
ORLANDO FL 32832-6508

13936 MARINE DR (MOBILE)
U - ORLANDO, 32832

PAID: \$60.00 0099-00885399 7/12/2019

1801 CERTIFIED RESIDENTIAL **2019** **EXPIRES** **9/30/2020** 1801-0005119
\$30.00 1 EMPLOYEE 5000 BUSINESS OFFICE \$30.00 2 EMPLOYEES

TOTAL TAX \$60.00
PREVIOUSLY PAID \$60.00
TOTAL DUE \$0.00

CICHRA ALBERT G JR

ALBERT CICHRA BUILDERS INC
CICHRA ALBERT G JR
13936 MARINE DR
ORLANDO FL 32832-6508

13936 MARINE DR (MOBILE)
U - ORLANDO, 32832

PAID: \$60.00 0099-00885399 7/12/2019