

City of Belle Isle Job Site Permit Card WINDOW/DOOR 2021-04-052

Class: Residential

Site Address: 3715 Rothbury Dr- Belle Isle, FL 32812

Parcel Number: 20-23-30-9375-00-060. . Municipality Belle Isle INSPECTIONS CANNOT BE SCHEDULED IF A NOC IS PENDING FOR THIS PROJECT.

Description of Work

Door (s) / Size for Size /	FRONT DOOR / G.	ARAGE DO	OR / SLIDING DOOR	/ REAR DOOR
ssued: ARMORVUE OF ORL icense # CRC1332238 Payment/ Issued Date & Meth	Cor	ntact # 4	07 839-7655	=========
Picked up by	□ Se		the mailing address	Emailed
7 985 Inspection requests & inquir				
BUILDING	INSPECTOR	DATE	COMMENTS	
900 In Progress				
905 Window/Door Buck				
910 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 BIDscheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. Next-Day Inspection requests must be made by 3:00 p.m.

Please include the following requirements in your request:

- Project Address
- **Corresponding Permit Number**
- Type of Inspection (Please reference your permit card for inspection codes)
- Date of Inspection (If no date is specified, the inspection will be scheduled for the next business day)
- **Contact Name**
- **Contact Phone Number**
- Gate / Entry code (If applicable)
- AM, PM, or Any Time (We do our best to accommodate time requests but cannot 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., Orlandov FL 32811 Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

APPLICATION FOR SIZE-FOR-SIZE WINDOW / DOOR 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 OSTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY REFORE RECORDING YOUR MOTICE OF COMMENCEMENT.

DATE OF APPLICATION: 4/8/2021	PERM	IT NUMBER 201	-04-052
PLEASE PRINT. The undersigned hereby applies for a perm			
Project Address 3715 Rothbury Dr		, Belle (sle, FL32)	109 X 32812
Property Owner Mark or Sheldon Taulbee		Phone 321-732-3	
Property Owner's Meiling Address 3715 Rothbury Dr		_{City} Belle Isle	
State FL Zip Code 32812 Parcel Id N	lumber: 20-23-30-93	75-00-060	
REQUIRED] T	o obtain this information, please	visit http://www.ocpafl.org/Si	earches/ParcelSearch.aspx
Type of Building: Residential 🔼 Commercial 🔲 Other			
4 REQUIRED! Florida Product Approval Form - NOTE: installs	ntion instructions must be p	osted on-site before your f	ret inspection!!
Please indicate the nature of work by completing the information below	N:		
Number of Size-for-Size Windows: Humbe	r of Size-for-Size Doors:	1 Job Valuation	<u>. 4,708</u>
I hereby certify that the above is true and correct to the best of my knot agree to conform to all Florida Building Code Regulations and City O of this permit does not grant permission to violate any applicable Town Republic Services is by legal contract the sole authorized provider of g collection and disposal services with the city limits of the City. Contract 407-293-8000 to setup accounts for Commercial, Construction Roll Of Hall or from Republic Services. The City enforces the contract through	rdinances regulating same and and/or State of Florida codes jarbage, recycling, yard waste, tors, homeowners and comma f, or other services needed. R a its code enforcement office.	d in accordance with plans as and/or ordinances. By signi , and commercial garbage an icial businesses may contact ates are fixed by contract an Failure to comply will result i	ibmitted. The Issuance ing below, I recognize id construction debris it Republic Services at diare available at City in a stop work order.
BY SIGNING THIS APPLICATION, YOU ARE CERTIFYING PERMIT:	G THAT YOU ARE ACTI	NG AS THE OWNER'S	AGENT FOR THIS
LICENSE HOLDER SIGNATURE		LICENSE # CRC133	
LICENSE HOLDER NAME Keith LaMont	COMPANY NAM	Armorvue of Orlan	obr
Street Address 8249 Parkline STE 500	44416		
	Zip Code 32809	_ Phone Number 407-8	39-7655
Perompleted Completed Completed	DC	Zoning Fee	0
LEADER HELD WORKEREIN CASSESTE	FBD (Permit Fee	. 41.
Building Official: Date	4.9.2021	Review Fee	1 20,50
		1% BCAIB Fee	5_ 2 mi
Verified Contractor's Licenses & Insurance are on file	Date	1.6% DCA Fee	* 2 min
ISTIK	25	Total Permit Fee	65.50
444	41.3	P.22.	2021
	61.50		

State of FLORIDA. County of ORANGE.

Per §668.50, F.S., which defines and permits electronic signatures, I certify that this is a true copy of the document as reflected in the Official Records.

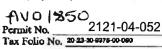
PHIL DIAMOND, COUNTY COMPTROLLER

By Renee Simmons at 8:09 am, Apr 13, 2021

Deputy Comptroller

orange

Date



NOTICE OF COMMENCEMENT



DOC # 20210202492

04/07/2021 13:35 PM Page 1 of 1
Rec Fee: \$10.00
Deed Doc Tax: \$0.00
Mortgage Doc Tax: \$0.00
Intangible Tax: \$0.00
Intangible Tax: \$0.00
Fill Diamond, Comptroller
Orange County, FL
Ret To: SIMPLIFILE LC



1. Description of property (legal description of prop	ocity); WINDSOR PLACE PHASE 2 30/81 LOT 8
a) Street (job) Address: 3716 Rothbury Dr Belle Isle.	FL 32812
2. General description of improvement(s): Replacement	of Door
3. Owner or Lessee information (Lessee as owner o	nly if contracted for improvements)
B. Name and address; Mark or Sheldon Taubee 3715 Roub	ury Dr Bolle Isle, FL 32812
b. Interest in property: OWNER	
 c. Name and address of fee simple titleholder (in 	f other than owner):
4. Contractor Information	
a. Name and address: Amorvue of Orlando, LLC - 8248 PA	
b. Phone number: 407-839-7855	Fax No. (Opt.)
5. Surety Information	
a. Name and address:	
b. Amount of bond 3	
c. Phone number:	Fax No. (Opt.)
6. Lender	
a. Name and address:	
o. Phone number:	
Section 713.13(1)(a)7, Florida Statutes:	Owner upon who notices or other documents may be served as provided by
a. Name and address:	
D. Phone number.	
8. In addition to himself, Owner designates the follo	owing person(s) to receive a copy of the Lienor's Notice as provided in
Section 713.13(1)(b), Florida Statutes:	
a. Name and address:	
b. Phone number.	
Expiration date of notice of commencement (the date is specified)	expiration date is 1 year from the date of recording unless a different

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 1, SECTION 713.13, FLORIDA STATUES, 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.

Verification pursuant to Section 92.525, Florida Statutes. Under penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

Signature of Owner or Lessee, or Owner's or Les	see's Authorized Officer/Director/Partner/Manager
State of Florida County of Manatee The foregoing instrument was acknowledged Shelco Toulo Personally know (Driver's License #)	before me this 31 day of MAY (m., 2021 by who is personally known to me or has produced and who did/did not take an oath.
Notary Public State of Florida Miranda Moray My Cerrunisation GG 229145 Expiree Dt/17/2022	Signature of Notary Public - State of Florida Print, Type, or Stamp Commissioned Name of Notary Public

City of Belle Isle

Universal Engineering Sciences 3532 Maggle Blvd., Orlando, FL 32811 Tel 407-581-8181 * Fax 407-581-0313 * www.universalengineering.com

Product Approval Form

DATE: APR 0 9 2021

PERMIT # 2021-04-052

PROJECT ADDRESS 3715 ROTHBUNDRIVE

, Belle Isle, FL ____32809____32812

As required by Florida Status 553.842 and Florida Administrative Code 98-72m, 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:

NOTE: The installation instructions must be posted on-site before your first inspection!

Product Type	Monufacturer	Model/Series	Approval #	Product Type	Manufacturer	Model/Series	Fi. Product
Carried States	EXTERIOR I	the second secon	FL17347.0	Spirange and tensors	WALL PAR	VELS	
Swinging	""astpro	Fiberglass	FE17547.0	Sliding			
Sliding				Soffits			
Sectional/Rollup				Storefront			
Other				Glass Block			
				Other			
the transfer of the second	WINDO	V5 500 K (m. 100)	4. 11.	The same of the last	ROOFING PRO	DUCTS SEE	OF DEPOSIT
Single/Dbl Hung				Asphalt Shingles			
Horizontal Slider				Non Struct Metal			
Casement				Roofing Tiles			
Fixed				Single Ply Roof			
Mullion				Underlayment Other			
Skylights							
Other							
	STRUCTURALCOM	PONENTS	N. P. College		OTHER	Contract of the Contract of th	
Wood Connectors				the same of the case of the ca	Ullick		-
Wood Anchors							
Truss Plates							
nsulation Forms				-			
Intels							
Other					Alternative and the second		

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	Date
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Product Approval Menu > Product or Application Search > Application List > Application Detail

FL17347-R3 **Application Type** Revision Code Version 2020 **Application Status** Approved

Comments Archived

Product Manufacturer Plastpro Inc. / Nanya Plastics Corp. Address/Phone/Email 5200 W CENTURY BLVD. LOS ANGELES, CA 90045 (440) 969-9773 Ext 16 rickw@rwbidgconsultants.com

Authorized Signature Vivian Wright rickw@rwbldgconsultants.com

Technical Representative Scott Johnson Address/Phone/Email

5200 W Century Blvd. Los Angeles, CA 90045 (440) 969-9773 Ext 18 scottjohnson@plastproinc.com

Evaluation Report - Hardcopy Received

Quality Assurance Representative Address/Phone/Email

Category Exterior Doors Subcategory Swinging Exterior Door Assemblies

Compliance Method Evaluation Report from a Florida Registered Architect or a Licensed Florida

Professional Engineer

Florida Engineer or Architect Name who developed the Lyndon F. Schmidt, P.E.

Evaluation Report

Florida License PE-43409

Quality Assurance Entity National Accreditation and Management Institute

Quality Assurance Contract Expiration Date 12/31/2021 Validated By Ryan J. King, P.E.

Validation Checklist - Hardcopy Received

Certificate of Independence FL17347 R3 COI (b) Certificate of Independence.pdf

Referenced Standard and Year (of Standard) Standard Year 101/1.S.2/NAFS 2002 AAMA/WDMA/CSA101/1.S.2/A440 2008 **ASTM E1886** 2002 **ASTM E1996**

2002 ASTM E330 2002 ASTM E331 2000 TAS 201, 202, 203 1994

Equivalence of Product Standards Certified By

Business & Professional Regulation







Product Approval Menu > Product or Application Search > Application List

Search Criteria Refine Search

Code Version	2020	FL#	17347.4
Application Type	ALL	Product Manufacturer	ALL
Category	ALL	Subcategory	ALL
Application Status	ALL	Compliance Method	ALL
Quality Assurance Entity	ALL	Quality Assurance Entity Contract Expired	ALL
Product Model, Number or Name	ALL	Product Description	ALL
Approved for use in HVHZ	ALL	Approved for use outside HVHZ	ALL
Impact Resistant	ALL	Design Pressure	ALL
Other	ALL		

Search Results - Applications

FL#	Type	Manufacturer	<u>Validated</u> By	<u>Status</u>
FL17347- R3 History	Revision	Plastpro Inc. / Nanya Plastics Corp. FL#: FL17347.4 Model: d. Fiberglass Door Description: "Non-Impact" Fiberglass Glazed Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height Category: Exterior Doors Subcategory: Swinging Exterior Door Assemblies	Ryan J. King, P.E. (813) 767-6555	Approve
<u>FL17347-</u> R4	Revision	Plastpro Inc. / Nanya Plastics Corp. FL#: FL17347.4 Model: d. Fiberglass Door Description: "Non-Impact" Fiberglass Glazed Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height Catagory: Exterior Doors Subcatagory: Swinging Exterior Door Assemblies	Ryan J. King, P.E. (813) 767-6555	Pending FBC Approval

Approved by DBPR, Approvals by DBPR shall be reviewed and ratified by the POC and/or the Commission if necessary.

Contact Us :: 2601 Blair Stone Road, Tallahassee Ft. 32399 Phone: 650-487-1624

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Product Approval Accepts: 🚾 🎒 🚅 Chel 📼

> Credit Card Safe

Florida Licensed Professional Engineer or Architect FL17347 R3 Equiv of Standards (c) pdf

Sections from the Code

Product Approval Method

Method 1 Option D

 Date Submitted
 07/21/2020

 Date Validated
 08/19/2020

 Date Pending FBC Approval
 08/20/2020

 Date Approved
 10/13/2020

 Date Revised
 12/06/2020

FL # Model, Number or Name 17347.1 a. Fiberglass Door		Description		
		"Non-Impact" Fiberglass Glazed Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height		
Impact Resistar Design Pressur Other: See INST	se outside HVHZ: Yes nt: No	Installation Instructions FL17347 R3 II (d) Inst 17347.1.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.1.pdf Created by Independent Third Party: Yes		
17347.2	b. Fiberglass Door	"Non-Impact" Fiberglass Glazed Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height		
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 17347.2 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3_II (d) Inst 17347.2.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3_AE (d) Eval 17347.2.pdf Created by Independent Third Party: Yes		
17347.3 c. Fiberglass Door		"Non-Impact" Fiberglass Glazed Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height		
Impact Resister Design Pressure Other: See INST	se outside HVHZ: Yes nt: No	Installation Instructions FL17347 R3 II (d) Inst 17347.3.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.3.pdf Created by Independent Third Party: Yes		
17347.4	d. Fiberglass Door	"Non-Impact" Fiberglass Glazed Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height		
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 17347.4 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3 II (d) Inst 17347.4.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.4.pdf Created by Independent Third Party: Yes		
.7347.5	e. Fiberglass Door	*Impact* Fiberglass Glazed Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height		
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 17347.5 for any additional use limitations, installation instructions and product particulars.		Installation Instructions <u>FL17347 R3 II (d) Inst 17347.5.pdf</u> Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.5.pdf		

	Florida Buildir	ig Code Online		
17347.6	f. Fiberglass Door	"Impact" Fiberglass Glazed Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up b Nominal 6'8 in Height		
	outside HVHZ: Yes Yes	Installation Instructions FL17347 R3 II (d) Inst 17347.6.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.6.pdf Created by Independent Third Party: Yes		
17347.7	g. Fiberglass Door	"Impact" Fiberglass Glazed Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswing Configuration up to Nominal 8'0 in Height		
Limits of Use Approved for use i Approved for use i Approved for use i Impact Resistant: Design Pressure: N Other: See INST 17 installation instructio	outside HVHZ: Yes Yes	Installation Instructions FL17347 R3 II (d) Inst 17347.7.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.7.pdf Created by Independent Third Party: Yes		
17347.8	h. Fiberglass Door	"Impact" Fiberglass Glazed Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height		
	outside HVHZ: Yes Yes	Installation Instructions fL17347_R3_II_(d) Inst 17347.8.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347_R3_AE_(d) Eval 17347.8.pdf Created by Independent Third Party: Yes		
17347.9	i. Fiberglass Door	"Non-Impact" Fiberglass Opaque Door - Single with or withou Sidelites (X, OX or XO, OXO) Outswing/Inswing Configuration up to Nominal 6'8 in Height		
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 17347.9 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3 II (d) Inst 17347,9.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347,9.pdf Created by Independent Third Party: Yes		
j. Fiberglass Door		"Non-Impact" Fiberglass Opaque Door - Double with or withou Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 6'8 in Helott		
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 17347.10 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3 II (d) Inst 17347.10.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.10.pdf Created by Independent Third Party: Yes		
17347.11	k. Fiberglass Door	"Non-Impact" Fiberglass Opaque Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height		
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 17347.11 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347_R3_II_(d)_Inst_17347.11.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347_R3_AE_(d)_Eval_17347.11.pdf Created by Independent Third Party: Yes		
7347.12	I. Fiberglass Door	"Non-Impact" Fiberglass Opaque Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height		
	utside HVHZ: Yes fo	Installation Instructions FL17347 R3 II (d) Inst 17347.12.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.12.pdf Created by Independent Third Party: Yes		

	Florida Buil	lding Code Online
17347.13	m. Fiberglass Door	"Impact" Fiberglass Opaque Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 17347.13 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3 II (d) Inst 17347.13.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.13.pdf Created by Independent Third Party: Yes
17347.14	n. Fiberglass Door	*Impact" Fiberglass Opaque Door - Double with or without Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 17347.14 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3 II (d) Inst 17347.14.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.14.pdf Created by Independent Third Party: Yes
17347.15	o. Fiberglass Door	*Impact" Fiberglass Opaque Door - Single with or without Sidelites (X, OX or XO, OXO) Outswing/Inswlng Configurations up to Nominal 8'0 in Height
Impact Resistant Design Pressure: Other: See INST 1	outside HVHZ: Yes : Yes	Installation Instructions FL17347_R3_II_(d)_Inst_17347.15.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347_R3_AE_(d)_Eval_17347.15.pdf Created by Independent Third Party: Yes
17347,16	p. Fiberglass Door	"Impact" Fiberglass Opaque Door - Double with or without Sidelites (XX or QXXO) Outswing/Inswing Configurations up to Nominal 8'0 in Height
Impact Resistant Design Pressure: Other: See INST 1	outside HVHZ: Yes : Yes	Installation Instructions FL17347 R3 II (d) Inst 17347.16.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (d) Eval 17347.16.pdf Created by Independent Third Party: Yes
17 347.17	q. Fiberglass Door	"Impact" Fiberglass Opaque Door - Single with or without Nominal 14" Sidelite(s) (X, OX or XO, OXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 17347.17 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347 R3 II (d) Inst 17347.17.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347 R3 AE (e) Eval 17347.17.pdf Created by Independent Third Party: Yes
r. Fiberglass Door		"Impact" Fiberglass Opaque Double Door with or without Nominal 14" Sidelites (XX or OXXO) Outswing/Inswing Configurations up to Nominal 6'8 in Height
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 17347.18 for any additional use limitations, installation instructions and product particulars.		Installation Instructions FL17347_R3_II_(d) Inst 17347.18.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL17347_R3_AE_(e) Eval 17347.18.pdf Created by Independent Third Party: Yes



Contact Us :: 2601 Blair Stone Road, Tallahassee Ft. 32399 Phone: 850-487-1824

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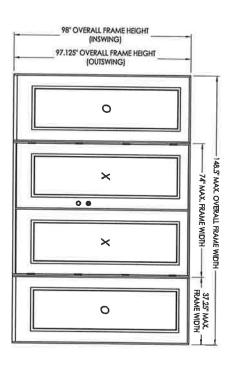
GLAZED FIBERGLASS DOORS DOUBLES W/ or w/o SIDELITES INSWING / OUTSWING "NON-IMPACT"

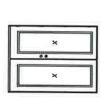
GENERAL NOTES

- This product has been evaluated and is in compliance with the 7th Edition (2020) Florida Building Code (FBC) structural requirements excluding the "High Velocity Hurricane Zone" (HVHZ).
- Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.

Ņ

- When used in areas requiring wind borne debris protection, this product is required to be protected with an impact resistant covering that complies with FBC Sections 1609.1.2 & R301.2.1.2.
- For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
- Site conditions that deviate from the details of this drawing require further engineering analysis by a licensed engineer or registered architect.





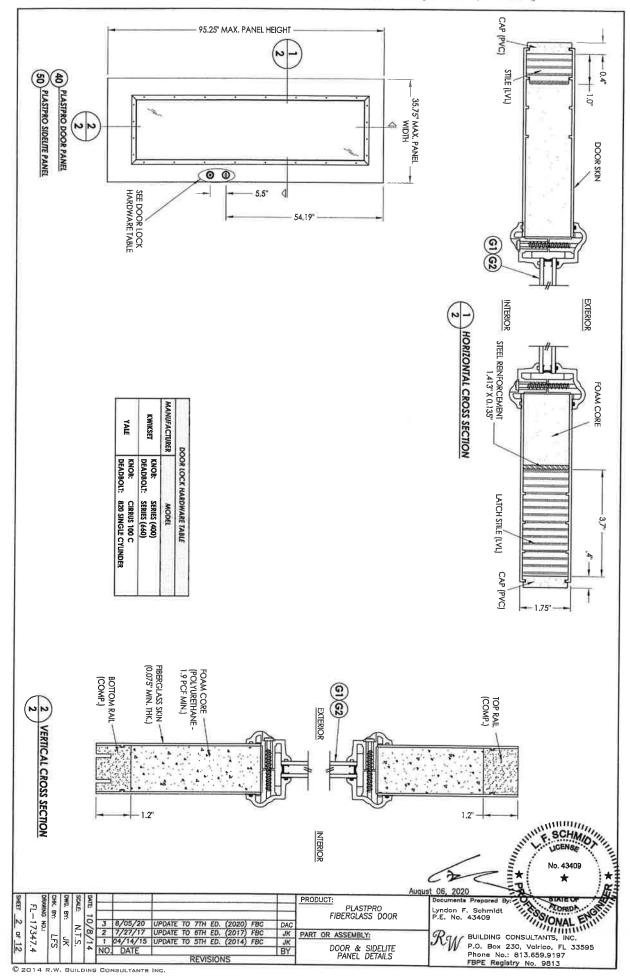
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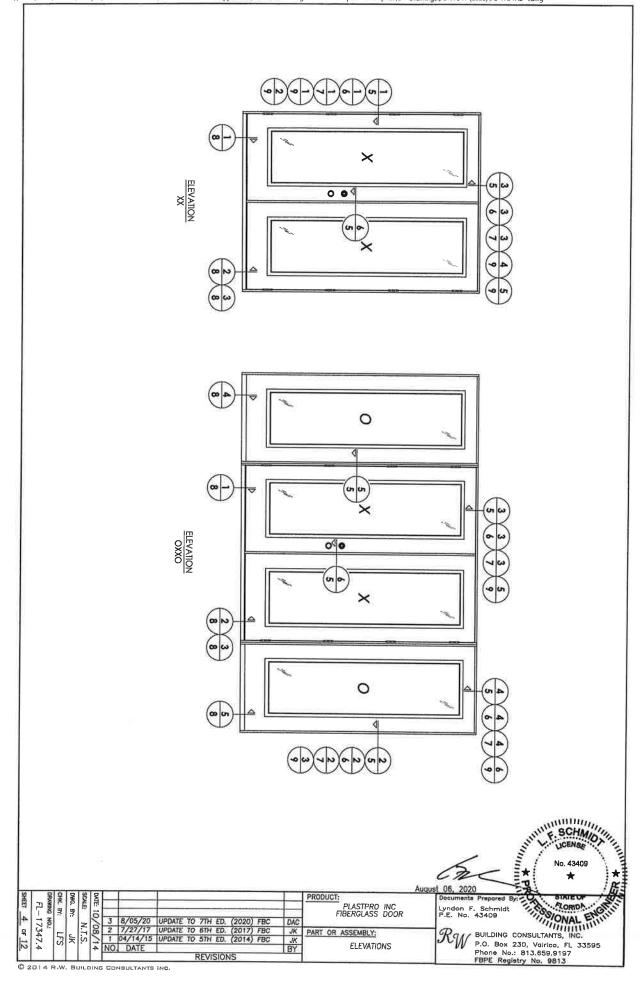
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+45.0	+47.0	POS.	DESIGN PRES (PSF) INSWING
+45.0 -50.0	+47.0 -47.0	NEG.	DESIGN PRESSURE DESIGN PRESSURE (PSF) (PSF) (PSF) OUTSWING
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-45.0	-47.0	NEG.	PRESSURE SF) WING

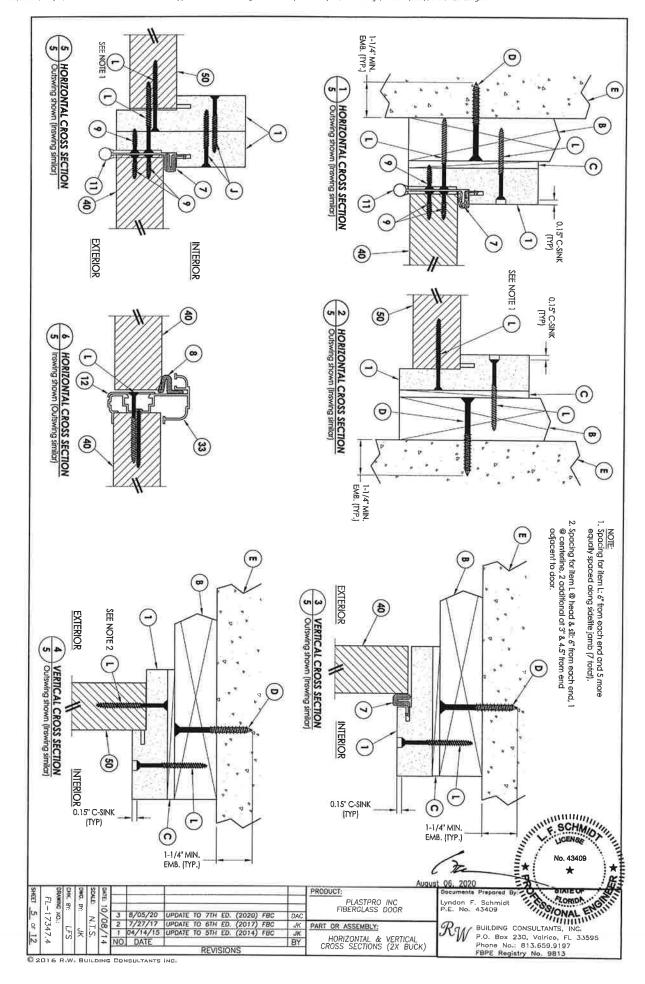
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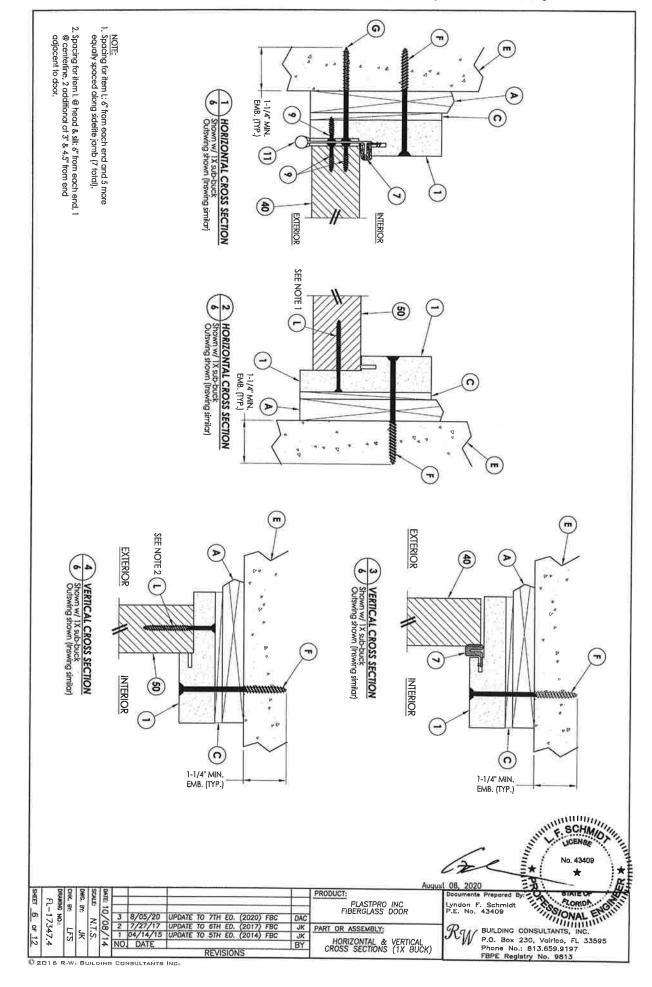
SEE SHEET 12 FOR ASTRAGAL DESIGN PRESSURE LIMITATIONS

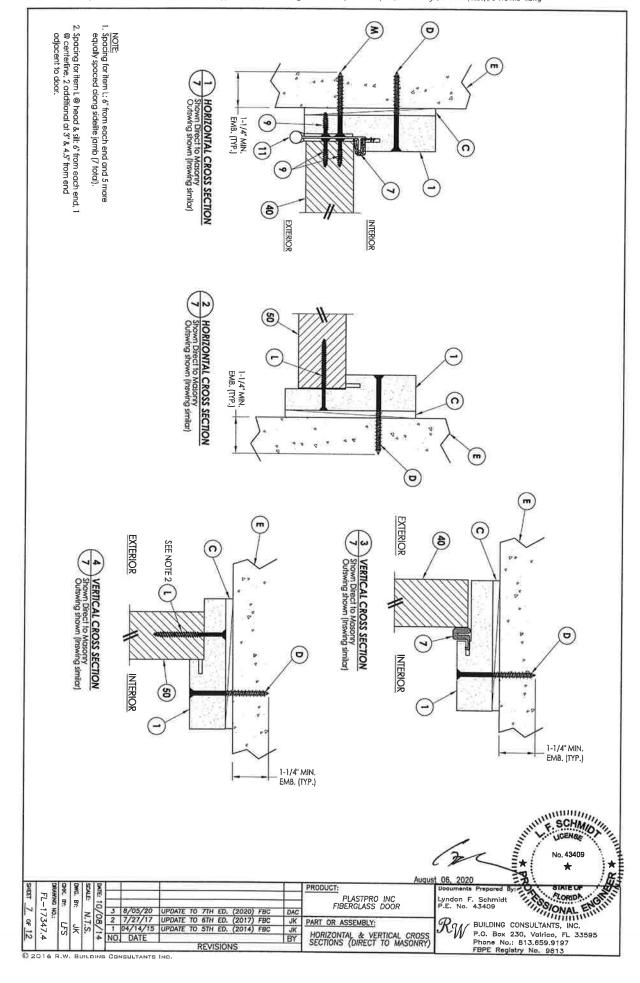
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1 N		"	-18	3	8/05/20	UPDATE	TO ?	7TH ED.	(2020)	FBC	DAC	TIDENGEASS DOOR	F.E. NO.	43409	WONAL ENIN
7347			7 8	2	7/27/17	UPDATE	TO E	STH ED.	(2017)	FBC		PART OR ASSEMBLY:	Da.	BUILDING CO	NSULTANTS, INC.
7	التا	×	S	1	04/14/15	UPDATE	TO 5	5TH ED.	(2014)	FBC	JK		11/11		0, Valrico, FL 33595
4	[4	NO.	DATE		P	EVISIO	NS		BY	TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES	1		813.659.9197

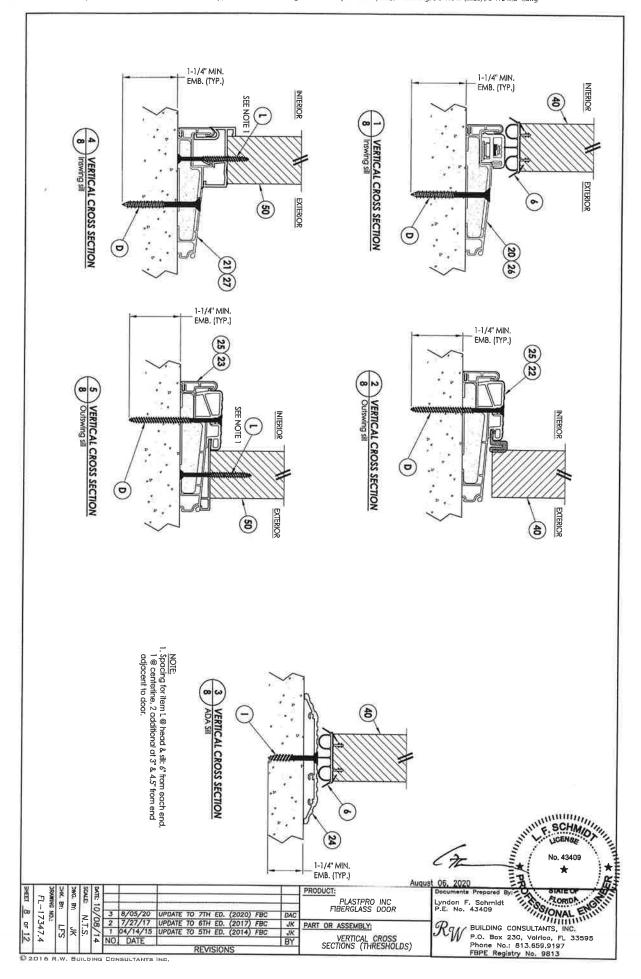


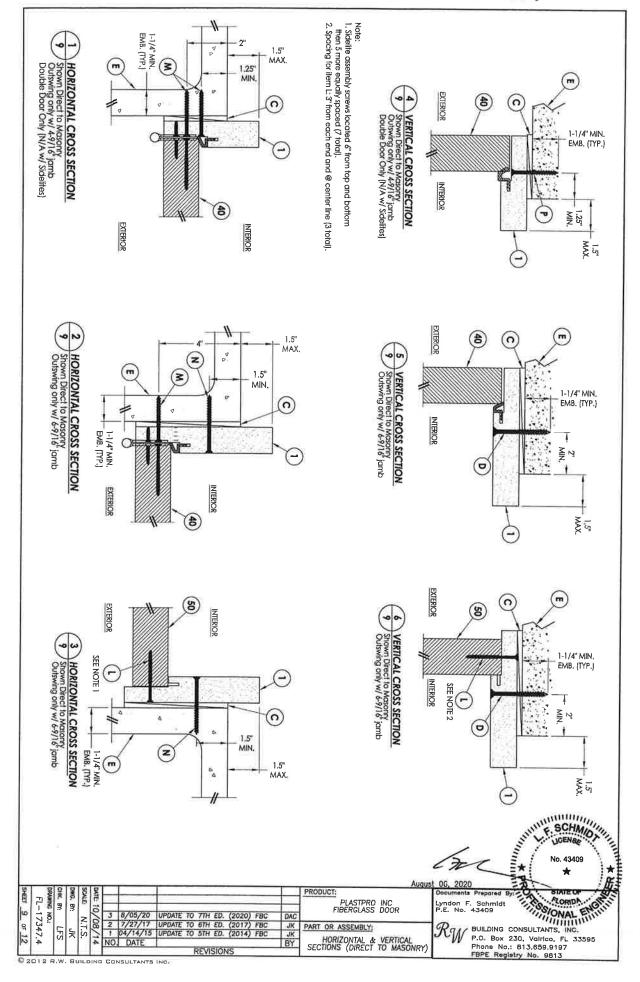


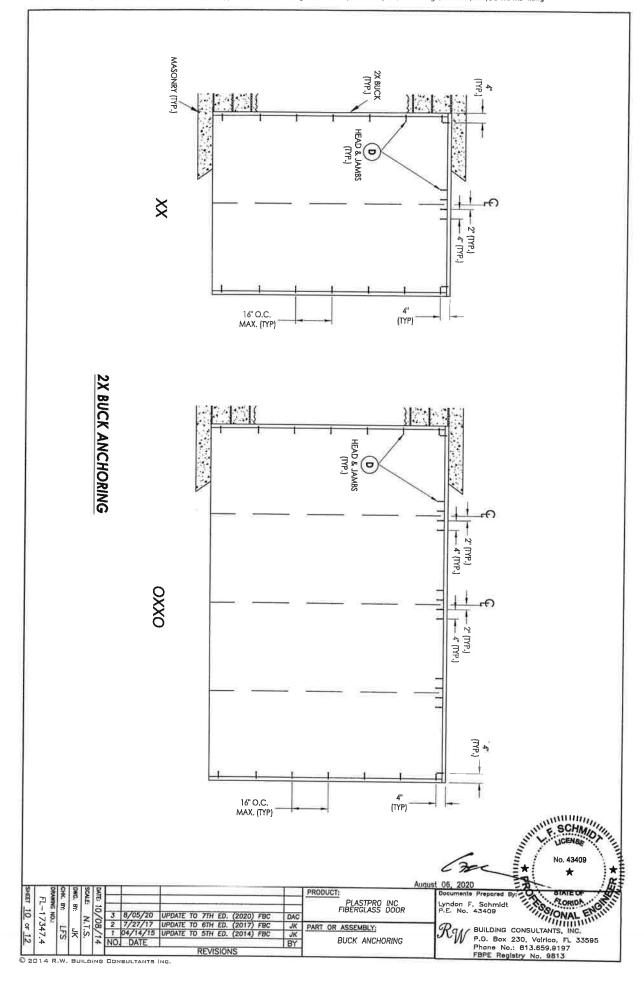


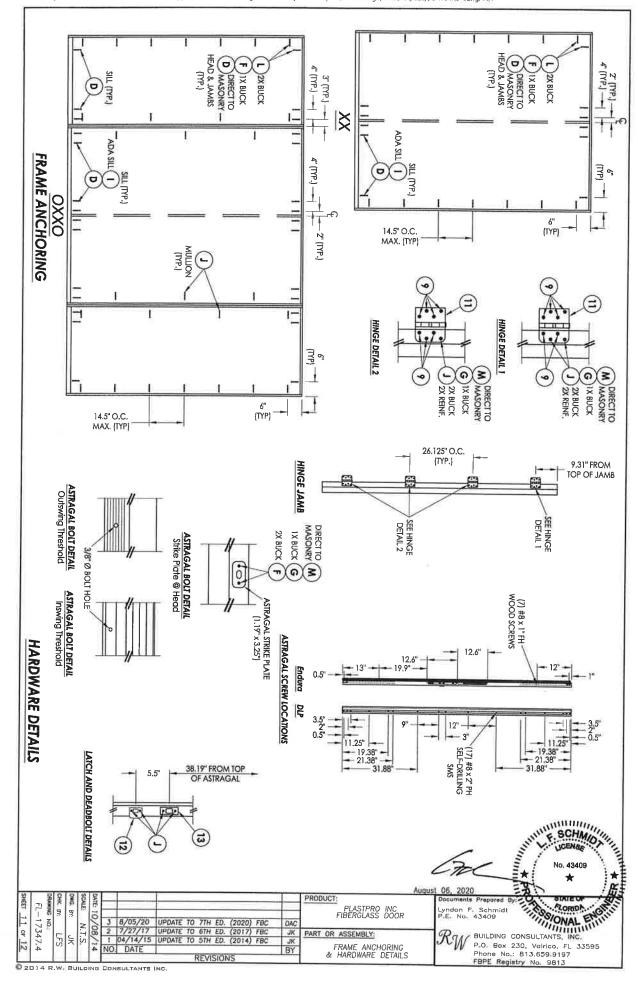


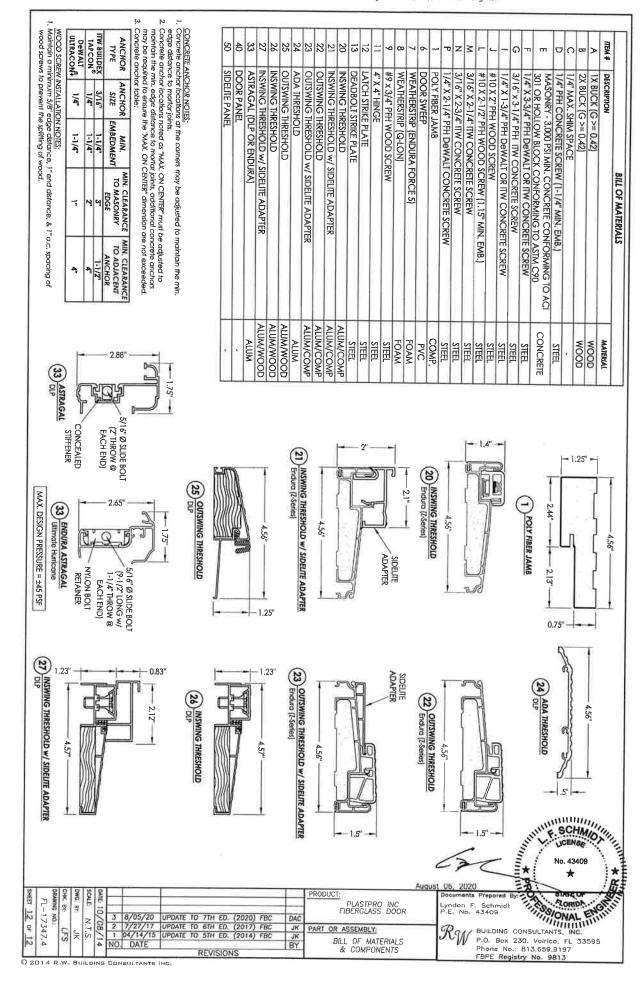












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Emil Govia 1932@ Vah	- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	ne Bivd., Suite 509 - C	is a pours Mondo, FL 32869
	407-931-6105	Ph: 407-939-765	5
	www.cisto 3 2 4 time 8-9	License # CRC133	238
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ARMONVUE OF DRIL THE DUSTON MADE	WHOLESALE & RETAIL DOOR CONTR UNDO, LLC AGREES TO MEASURE, MANUFACTUR PRODUCTS DESCRIBED AS FOLLOWS: FOR THE A	F OR FURNISH AND SERV	ICE OW
DGOR #1			الشعشعينات
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PAGE # SOLUME # 5	DOOR HEIGHT: G6"	THRESHOLD: WALLOW S	BROXX
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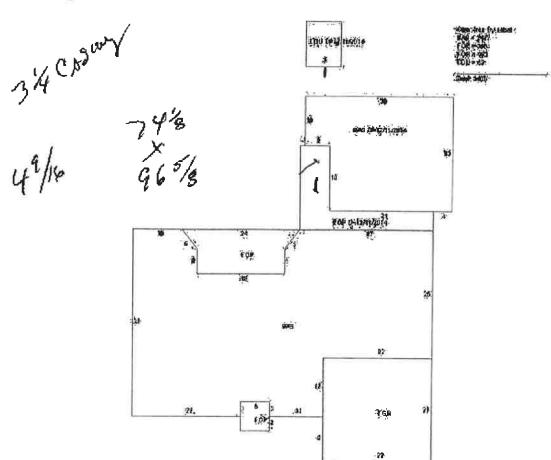
Bigar's Signature

ARDIORYULE OF DREAMON, LLC Austracturel Officer

Building Details - 3715 Rothbury Dr - Building #1



Coursely Grange County Property Suppressor



Sub Area	Seft	Value
BAS - Base Area	625	working
BAS - Base Area	1862	working.
FDU - F/Det U61	63	working
FGR - Tim Garage	462	working
FOP - F/Opn Prch	210	working
FOP - F/Opu Prch	186	working

Model Code: 01 - Single Fam Residence
Type Code: 0103 - Single Fam Class III
Building Value: working...
Estimated New Cost: working...
Actual Year Built: 1993

 Beds:
 4

 Baths:
 3.0

 Floors:
 1

 Gross Area:
 3408 sqft ·

 Living Area:
 2487 sqft

 Exterior Well:
 Ch Starses

Exterior Wall: Co-Stucco
Interior Wall: Drywall



ORANGE COUNTY PROPERTY APPRAISER

Searches

Sales Search

Results

Property Record Card

My Favorites

Sign up for e-Notify...

3715 Rothbury Dr < 20-23-30-9375-00-060 >

Physical Street Address

Taulbee Family Trust

3715 Rothbury Dr

Making Address On his

Postal City and Zipcode

C/O Mark A Taulbee Trustee

Orlando, Fl 32812

3715 Rothbury Dr

Property Lies

Belle Ide, FL 32812-2200

Incorrect Mailing Address?

0103 - Single Fam Class III

Municipality Belle kle

TOTAL CHICK TO View CIT THROAD

View 2020 Property Record Card

Property Features

Values, Exemptions and Taxes

Sales Analysis

Location Info

Market Stats

Update Information

2021 values will be available in August of 2021.

Property Description

View Plan

WINDSOR PLACE PHASE ≥ 30/81 LOT 6 **Total Land Area**

11,897 sqft (+/-) | 0.27 acres (+/-)

GIS Calculated

Notice

Land

Land Vse Code	Zoning	Land Units	Unit Price	Land Value	Class Varit Price	Class Value
0100 - Single Family	R-1-AA	1 LOT(S)	working	worlding	working	worldna_

Page 1 of 1 (1 total records)

Bu Ddinge

	Important information		Structure			
P/\	Model Code	01 - Smgle Fam Residence	Actual Year Builts	1993	Grass Area:	340€ sqñ
Mora Patente	Type Code:	0103 - Single Fam Class M	Reds:	4	Living Area:	2487 sqf)
Phhrmis	Building Value :	working	Baths:	3.0	Exterior Well;	Concrete Block Stuceo
70	listimated Non Cost	working	Floors:	1	Interior Wall:	Drywaii

Page 1 of 1 (1 total records)

Extre Features

Detaription	Carte Built	Units	XFOR Yellow
There are no extra features associa	led with this parcel		

This Data Printed on 03/23/2021 and System Data Last Refreshed on 03/22/2021

What are you looking to do today? You can also type your question below.

Windsor Place Homeowners Association Inc.

c/o Sentry Management Inc. • 2180 West SR 434 Suite 5000 • Longwood, Florida 32779-5044 P. 407-788-6700 ext. 51212 • <u>pbutler@sentrymgt.com</u>

March 29, 2021

052040/ 020006 Taulbee Family Trust Dtd 4/30/18 3715 Rothbury Dr Belle Isle, FL 32812

Emailed to: govia1932@yahoo.com

Reference: Architectural Application- Patio Doors

Dear Homeowner(s):

The Architectural Review Board has reviewed your request to replace patio doors.

Your application has been approved as submitted.

Please be advised that it is the Homeowner's responsibility to conform to all zoning and building regulations, and to abide by all specifications of the County, State, and local permitting requirements.

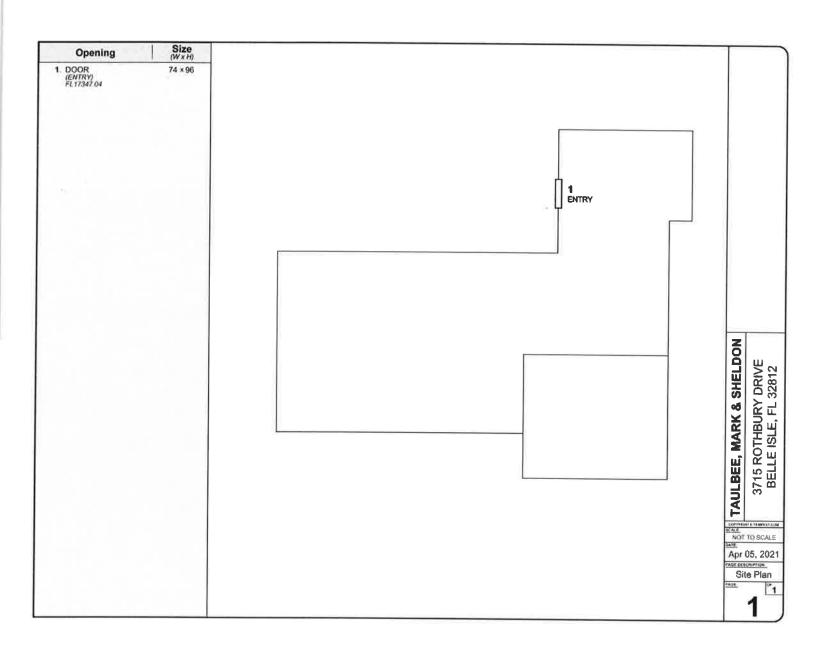
If you have any questions, please don't hesitate to contact me by email: pbutler@sentrymgt.com or by phone: 407-788-6700, extension 51212. Thank you.

Regards.

Windsor Place Homeowners Association, Inc.

Paula E. Butler

Paula E. Butler, LCAM
Community Association Manager



Property Information

TAULBEE, MARK & SHELDON
3715 ROTHBURY DRIVE
BELLE ISLE, FL 32812

Wind Zone: 160 MPH.
Exposure Category: C
Minimum Building Dimension: 45 ft.
Mean Roof Height: 15 ft.

Risk Category:

11

	Design Pressure Calculations									
Opening Number	Location Zone	Device Width (in)	Device Height (in)	Device Elevation (ft)	Max Positive Pressure (psf)	Max Negative Pressure (psf)				
1	lnt	74	96	7	30.0	-32.8				

Owner:

Address:

Ron DeSantis, Governor

Halsey Beshears, 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

LAMONT, KEITH ROBERT

ARMORVUE OF ORLANDO, LLC 8249 PARKLINE BLVD SUITE 500 ORLANDO FL 32809

LICENSE NUMBER: CRC1332238

EXPIRATION DATE: AUGUST 31, 2022

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.

Client#: 25190

ARMOORL

ACORD.

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 12/16/2020

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	CONTACT Denise Martinez	
Baldwin Krystyn Sherman	Proposition in the second seco	863 682-6292
1115 Bartow Rd Lakeland, FL 33801	E-MAIL ADDRESS: denise.martinex@bks-partners.com	, 000 002-0292
63 686-2113	INSURER(S) AFFORDING COVERAGE	NAIC#
	INSURER A : Covington Specialty Ins Company	13027
INSURED	INSURER B : Old Dominion Insurance Company	40231
Armorvue of Orlando, LLC 8249 Parkline Blvd., Ste, #400/500	INSURER C:	
Orlando, FL 32809	INSURER D :	
Onando, 1 E 32003	INSURER E :	
	INSURER F:	
COVERAGES CERTIFICATE NUM	IBER: 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

SR R	TYPE OF INSURANCE	ADDL SUBR	POLICY NUMBER	(MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMIT	's
1	X COMMERCIAL GENERAL LIABILITY		VBA78447600	12/14/2020	12/14/2021	EACH OCCURRENCE	\$1,000,000
	CLAIMS-MADE X OCCUR					DAMAGE TO RENTED PREMISES (Ea occurrence)	s100,000
						MED EXP (Any one person)	\$5,000
						PERSONAL & ADV INJURY	\$1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					GENERAL AGGREGATE	s2,000,000
	POLICY JECT LOC					PRODUCTS - COMP/OP AGG	\$2,000,000
_	OTHER:						\$
3	AUTOMOBILE LIABILITY		B1P6704K	12/19/2020	12/19/2021	COMBINED SINGLE LIMIT (Ea accident)	\$1,000,000
	ANY AUTO ALL OWNED SCHEDULED					BODILY INJURY (Per person)	\$
	AUTOS AUTOS					BODILY INJURY (Per accident)	s
-	X HIRED AUTOS X NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)
-							\$
	UMBRELLA LIAB OCCUR					EACH OCCURRENCE	\$
-	EXCESS LIAB CLAIMS-MADE					AGGREGATE	\$
\dashv	DED RETENTION \$ WORKERS COMPENSATION						\$
- 1	AND EMPLOYERS' LIABILITY					PER OTH- STATUTE ER	
	OFFICER/MEMBER EXCLUDED?	N/A				E.L. EACH ACCIDENT	s
	(Mandatory in NH) If yes, describe under					E.L. DISEASE - EA EMPLOYEE	\$
	DÉSCRIPTION OF OPERATIONS below					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	CANCELLATION
City of Belle Isle 1600 Nela Avenue Belle Isle, FL 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
7	Astau D Goo

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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY) 04/21/2021

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

PRO	DDUCER			CONT	C C	ommercial I	ines Division	
Īad	ck Rice Insurance			PHON	0 Evn: (72	27) 530-0684	7649	7) 532-9602
	080 S Belcher Rd Ste. H			E-MAII		rtificates@n	nbahro com	1) 332-900.
	argo, FL 33773			ACCIN			PRDING COVERAGE	120702
	26,12 007.0			INSUR			sualty Ins. Co.	NAIC#
	JRED			INSUR		ageneia Cas	suarry Ins. Co.	10335
M	odern Business Associates, Inc. ET.	AL		INSUR	are and a			
94	55 Koger Blvd., Suite 200 Petersburg, FL 33702			INSUR				
oı.	retersoung, FL 55702			INSUR				
				INSUR	HICKSTRA			
co	VERAGES CER	RTIFICAT	E NUMBER:	INSOR	in F		REVISION NUMBER:	
C	HIS IS TO CERTIFY THAT THE POLICIES IDICATED. NOTWITHSTANDING ANY RI ERTIFICATE MAY BE ISSUED OR MAY XCLUSIONS AND CONDITIONS OF SUCH	PERTAIN, POLICIES	THE INSURANCE AFFOR LIMITS SHOWN MAY HAV	DED BY	THE POLICE	I OR OTHER	ED NAMED ABOVE FOR THE POL DOCUMENT WITH RESPECT TO	
ISR TR	TYPE OF INSURANCE	INSR WVD	1			POLICY EXP (MM/DD/YYYY)		
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	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED	
	CLAIMS-MADE OCCUR						The same of the sa	
			444 6 F	3			MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$	
				- 50			GENERAL AGGREGATE S	
	GEN'L AGGREGATE LIMIT APPLIES PER:		100		L.T.	di .	PRODUCTS - COMPIOP AGG \$	
-	POLICY PRO- LOC		ADD .	10		19	s	
	AUTOMOBILE LIABILITY		ALK Z	2 21	21 /		COMBINED SINGLE LIMIT	
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	ALL OWNED SCHEDULED AUTOS		RV.				BODILY INJURY (Per accident) \$	
	HIRED AUTOS NON-OWNED AUTOS		O/L				PROPERTY DAMAGE	
			-50-3				(Per accident) S	
	UMBRELLA LIAB OCCUR						EACH OCCURRENCE \$	
İ	EXCESS LIAB CLAIMS-MADE						or washington victoria.	
	DED RETENTION'S						AGGREGATE S	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						Y WC STATU- OTH-	
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/ (A	0106 06022					000,000
١,	(Mandatory in NH)	N/A	0196-06932		01/01/2021	1/1/2022	E.L. DISEASE - EA EMPLOYEE \$ \$1.	The state of the s
	If yes, describe under DESCRIPTION OF OPERATIONS below							000,000
7							LE DISEASE POLICY LIMIT S \$1,	000,000
1								
sc	RIPTION OF OPERATIONS / LOCATIONS / VEHICL	ES (Attach	ACORD 101, Additional Remarks	Schedule,	if more space is	s required)		
C.	ers' Compensation coverage is provided by co Coverage does not apply to any employees n	ntract to all	employees of Modern Busin	ess Assoc	ates, Inc. and	its wholly owne	ed subsidiaries assigned to Armorvue o	of Orlando,
fect	ive 1/1/2021.		200	11000 7 1000	ruics, me. am	I its wholly own	led subsidiaries, Afmorvae of Orlando	, LLC.
ΞR	TIFICATE HOLDER			CANC	ELLATION			
	City of Belle Isle			1				
	ony or bene tole			SHOU	JLD ANY OF	THE ABOVE DE	ESCRIBED POLICIES BE CANCELLI	ED BEFORF
	1600 Nela Ave			THE	EXPIRATION	DATE THE	REOF, NOTICE WILL BE DELI	VERED IN
	Belle Isle FL 32809			4000	WDWINGE ANI	IN THE POLIC	T PROVISIONS,	
				AUTHOR	ZED REPRESE	NTATIVE		
						- 1	tu M. Webst	
				ı		(seed	The state of the s	

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2020

EXPIRES

9/30/2021

BUSINESS OFFICE 5000

\$30.00

1 EMPLOYEE : 1801 CERT RESDI CONTRA

\$30.00

5000-1205337 1 EMPLOYEE

TOTAL TAX **PREVIOUSLY PAID TOTAL DUE**

\$60.00 \$60.00 \$0.00 **TOKES TOBY**

LAMONT KEITH ROBERT-QUALIFIER CRC1332238

ARMORVUE OF ORLANDO LLC **TOKES TOBY**

8249 PARKLINE BLVD #500 ORLANDO FL 32809

8249 PARKLINE BLVD #500 U - ORLANDO, 32809

Tax Collector Scott Randolph

PAID: \$60.00 0098-00935676 7/7/2020

Local Business Tax Receipt

Orange County, Florida

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

2020

\$60.00

\$60.00

\$0.00

EXPIRES

9/30/2021

5000-1205337

BUSINESS OFFICE 5000

\$30.00

1 EMPLOYEE 1801 CERT RESDI CONTRA

\$30.00

1 EMPLOYEE

TOTAL TAX PREVIOUSLY PAID **TOTAL DUE**

8249 PARKLINE BLVD #500 U - ORLANDO, 32809

PAID: \$60.00 0098-00935676 7/7/2020

PHIDOLPH, TAP SCOPF GE COUNTY

TOKES TOBY LAMONT KEITH ROBERT-QUALIFIER CRC13322

ARMORVUE OF ORLANDO LLC **TOKES TOBY** 8249 PARKLINE BLVD #500 ORLANDO FL 32809

This receipt is official when validated by the Tax Collector.

Orange County Code requires this local Business Tax Receipt to be displayed conspicuously at the place of business in public view. It is subject to inspection by all duly authorized officers of the County.