



PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

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

Scope of Work: Re-Roof - 63 SF- Tiles

Comments: None

Project Information

Address: 1508 Conway Isle Cir, Belle Isle, FL 32809
 Parcel ID: 24-23-29-3490-00-500
 Property Owner: Kayali, Fares and Lamis
 Phone Number: None

 Company Name: PetersenDean Roofing and Solar Systems, Inc.
 Contractor Name: McStoots, Keith
 License Number: CCC1329081
 Address: 7517 Currency Dr Orlando, FL 32809
 Phone Number: 407-581-6020

Permit Number: 2014-08-004

Date of Application: 08/04/2014

Date Permit Issued: 08/08/2014

WARNING TO OWNER: "YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT." ON THE JOB INSPECTION(S) MUST BE MADE BEFORE PROCEEDING WITH SUBSEQUENT WORK. THIS CARD MUST BE DISPLAYED OUTSIDE AND BE PROTECTED FROM THE WEATHER WHILE BEING VISIBLE FROM THE STREET UNTIL THE FINAL INSPECTIONS HAVE BEEN APPROVED.

BUILDING FEATURES

IMPACT FEES

Traffic \$
 School \$

ZONING FEES

Zoning Fee \$30.00

UNIVERSAL ENG - BUILDING FEES

Boat Dock \$
 Boat House \$
 Building \$
 Demo \$
 Door(s) \$
 Driveway \$
 Electrical \$
 Fence \$
 Gas \$
 Irrigation \$
 Low Voltage \$
 Mechanical \$
 Plumbing \$
 Pool \$
 Roofing \$105.00
 Screen End \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$139.00

Date Paid 8-11-14

CC or Check # AMEX

Amount Paid \$139.00

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

BUILDING INSPECTOR USE ONLY

IF APPLICABLE:

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

BUILDING

1st Survey specific foundation plan must be onsite before slab pour. Approved Plan on Site? _____

2nd _____ (Slab)
 3rd _____ (Lintel) (Wall Reinforcing on Masonry Building)
 4th _____ (Exterior Framing) (Roof/Wall Sheathing)
 5th _____ (Framing) (To be made after Plumbing/ Mechanical/ Electrical Rough-Ins & Windows/Doors Installed)
 6th _____ (Insulation to be Made After Roof Installed)
 7th _____ (Drywall)
 8th _____ (Sidewalk/Driveway)
 9th _____ (Other)
 10th _____ (Final - After MEP and Other Applicable Finals)

ROOFING OSHA APPROVED ACCESS MUST BE MADE AVAILABLE TO INSPECTOR

1ST ROOFING Deck Nailing/Dry-in/Flashing _____
 2nd ROOFING Covering In-Progress _____
 3rd ROOFING Covering Final _____

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

1ST _____ (Underground) 2nd _____ (Sewer)
 3rd _____ (Rough-In/Tub-Set) 4th _____ (Final)

CHECK APPROPRIATE BOX

GAS Natural LP MECHANICAL ELECTRICAL LOW VOLTAGE

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

Inspection requests are to be emailed to BiDscheduling@UniversalEngineering.com; a confirmation email will be sent back to you upon scheduling. Next-Day inspection requests must be made by 1pm. Please include the following in your request: Permit #, project address, type of inspection, date of the requested inspection, a contact name & a contact phone number. AM or PM may be requested but cannot be guaranteed.

PROJECT NUMBER 0115.1400218.0000

TASK NUMBER ET04

CITY OF BELLE ISLE
Permit Application Review Sheet

| | |
|----------------------------|----------------------|
| Permit Number | 2014-08-004 |
| Property Owner | Favers |
| Address | 1508 Conway Isle Cui |
| Nature of Improvement | Roof |
| Received Application | 8-4-14 |
| Sent for Stormwater Review | / |
| Stormwater Approved | |
| Sent for Zoning Review | / |
| Zoning Approved | |
| Applied for Variance | / |
| Variance Approved | |
| Sent to BO for Review | 8-5-14 10040409 |
| Building Official Approved | 8-08-2014 |
| Comments | |
| 1. | |
| 2. | |
| 3. | |
| 4. | |
| 5. | |
| 6. | |
| 7. | |
| 8. | |
| 9. | |
| 10. | |
| 11. | |
| 12. | |



COBI Permit Fee Calculation Form



Reviewer Signature: AP. Date: 8-08-2014

| | | | |
|----------------------------|-------------------------|--|--------------------|
| Permit Type: | <u>ROOFING</u> | Job Cost: | <u>\$ 10,000 -</u> |
| Permit Fee: | <u>\$ 70 -</u> | | |
| Plans Review Fee: | <u>\$ 35 -</u> | (50% of permit fee - excluding ReRoofs) | |
| 1.5% State Fee: | <u>\$ 2.00</u> | | |
| 1.5% State Fee: | <u>\$ 2.00</u> | | |
| TOTAL BUILDING FEE: | <u>\$ 109.00</u> | (does not include Zoning fees or Deposits) | |

Note: Total gets doubled for SWO/AFT permits

$$\begin{aligned}
 & \$25 + (\$5 \times 9) = \$25 + \$45 = \$70 \\
 & \$70 \times .50 = \$35 + \$70 = \$105 - \\
 & \$105 + \$4 = \$109 -
 \end{aligned}$$



City of Belle Isle

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

APPLICATION FOR ROOFING PERMIT

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

DATE OF APPLICATION: 07/31/14

ROOF PERMIT NUMBER: 2014-08-004
PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below.

Project Address: 1508 Conway Isle Circle
Property Owner: Kayali Fares, Kayali Lamis Phone: _____
Belle Isle, FL 32809 32812

Property Owner's Mailing Address: 1418 Summerlin Ave City: Orlando
State: FL Zip Code: 32806-2250 Parcel Id Number: 24-23-29-3490-00-500

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

Class of Building: Old New Type of Building: Residential Commercial Other
Type of Work: New Roof ReRoof

- REQUIRED! Florida Product Approval Screen Printout from www.floridabuilding.org showing the Code Version
- REQUIRED! Florida Product Approval Installation Instructions from www.floridabuilding.org (not the manufacturer instructions)
- REQUIRED! Copies of your General Liability & Worker's Comp Insurance Certificate & State and Local Licenses

Please indicate the nature of work by completing the information below:

Roof Square Footage: 63 Number of Stories: 2 Job Valuation: \$ 10,000

Type: Asphalt Shingles Metal Modified Bitumen Other: Tiles

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

LICENSE HOLDER SIGNATURE: [Signature] LICENSE # CCC1329081

LICENSE HOLDER NAME: Keith McStoots COMPANY NAME: PetersenDean Roofing

Street Address: 7517 Currency Drive State: FL Zip Code: 32809 Phone Number: 407-581-6020
City: Orlando

Email Address: kmcstoots@petersendean.com

Building Official: Angela Perez Date: 8-08-2014
Verified Contractor's Licenses & Insurance are on file sq Date: 8-5-14

Zoning Fee \$ 30.00
Permit Fee \$ 70-
Review Fee \$ 35-
3% Florida Surcharge \$ 4-
Total Permit Fee \$ 189.00

NOTE: The Building Permit Number is required if the Roof Installation is associated with any construction or alteration where a Building Permit has been issued. Building Permit Number: 2014-04-018

Received
8-5-14



Business Professional

License eligibility: Regulatory Authority

Product Approval Menu > Find Lic. or Application Search > Application List > Application Detail

FL #

FL7473-R5

Application Type

Affirmation

Code Version

2010

Application Status

Approved

Comments

Archived

Product Manufacturer
Address/Phone/Email

EAGLE ROOFING PRODUCTS FLORIDA LLC
1575 East CR 470
Sumterville, FL 33858
(800) 400-3245
annettes@eagleroofting.com

Authorized Signature

Annette Sindar
annettes@eagleroofting.com

Technical Representative
Address/Phone/Email

Greg Peterson
1575 East CR 470
Sumterville, FL 33585
(800) 400-3245
gregg@eagleroofting.com

Quality Assurance Representative
Address/Phone/Email

Category
Subcategory

Roofing
Roofing Tiles

Compliance Method

Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer
Evaluation Report - Hardcopy Received

Florida Engineer or Architect Name who developed the Evaluation Report
Florida License
Quality Assurance Entity
Quality Assurance Contract Expiration Date
Validated By

Robert Nieminen
PE-59166
Architectural Testing, Inc.
12/31/2014
John W. Knezevich, PE
Validation Checklist - Hardcopy Received

Certificate of Independence

EL7473_R5_COI_Trinity_ERD_CI - Nieminen.pdf

Referenced Standard and Year (of Standard)

Standard
ASTM C1492
FRSA/TRI 07320
SSTD 11
Year
2003
2005
1997

Equivalence of Product Standards
Certified By

Sections from the Code

I affirm that there are no changes in the new Florida Building Code which affect my product(s) and my product(s) are in compliance with the new Florida Building Code.

Documentation from approved Evaluation or Validation Entity

Yes No N/A



Product Approval Method

Method 1 Option D

Date Submitted

03/27/2012

Date Validated

03/27/2012

Date Pending FBC Approval

Date Approved

04/02/2012

Summary of Products

| FL # | Model, Number or Name | Description |
|---|-----------------------|---|
| 7473.1 | Eagle Roof Tiles | Low (flat), medium and high profile concrete roof tiles |
| Limits of Use | | |
| Approved for use in HVHZ: No | | |
| Approved for use outside HVHZ: Yes | | |
| Impact Resistant: N/A | | |
| Design Pressure: N/A | | |
| Other: See Section 5 of Evaluation Report for Limits of Use. Tile roofs are analyzed for wind resistance through overturning moment. Refer to FRSA/TRI 07320 for overturning moment limitations. | | |
| Installation Instructions | | |
| FL7473_R5_IL_er062311FINAL_EAGLE_FL7473-R3_TILE.pdf | | |
| Verified By: Robert J. M. Nieminen PE - 59166 | | |
| Created by Independent Third Party: Yes | | |
| Evaluation Reports | | |
| FL7473_R5_AE_er062311FINAL_EAGLE_FL7473-R3_TILE.pdf | | |
| Created by Independent Third Party: Yes | | |



Contact Us :: [1940 North Monroe Street, Tallahassee, FL 32309](#) Phone: 850-487-1824

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Under Florida law, email addresses are public records. If you do not want your e-mail address released in response to a public-records request, do not send electronic mail to this entity. Instead, contact the office by phone or by traditional mail. If you have any questions, please contact 850.487.1335. *Pursuant to Section 455.275(1), Florida Statutes, effective October 1, 2012, licenses issued under Chapter 455, F.S., must include the Department with an email address if they have one. The emails provided may be used for official communication with the licensee. However, email addresses are public record. If you do not wish to supply a personal address, please provide the Department with an email address which can be made available to the public. To determine if you are a licensee under Chapter 455, F.S., please click [here](#).

Product Approval Accepts:



TRINITY ERD

EXTERIOR RESEARCH & DESIGN, LLC.
Certificate of Authorization #9503
353 CHRISTIAN STREET, UNIT #13
OXFORD, CT 06478
PHONE: (203) 262-9245
FAX: (203) 262-9243

EVALUATION REPORT

Eagle Roofing Products Florida LLC.
1575 East Country Road 470
Sumterville, FL 33585

Evaluation Report E1322C.09.06-R2
FL7473-R3
Date of Issuance: 02/24/2009
Revision 2: 06/23/2011

SCOPE:

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been designed to comply with the 2007 Florida Building Code sections noted herein.

DESCRIPTION: Eagle Roof Tiles

LABELING: Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

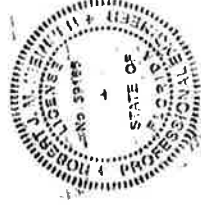
INSPECTION: Upon request, a copy of this entire Evaluation Report shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This Evaluation Report consists of pages 1 through 4.

Prepared by:



Robert J.M. Nieminen, P.E.
Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 06/23/2011. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

CERTIFICATION OF INDEPENDENCE:

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

ROOFING SYSTEM EVALUATION:

1. SCOPE:

Product Category: Roofing Tiles
Sub-Category: Roofing Tiles

Compliance Statement: Eagle Roof Tiles, as produced by Eagle Roofing Products Florida LLC, have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

| Section | Property | Standard | Year |
|----------|-------------------------|------------------|------|
| 1507.3.5 | Physical Properties | ASTM C1492 | 2003 |
| 1507.3.7 | Attachment Requirements | FRSA/TRI 07320/8 | 2005 |
| 1715.2.1 | Overturning Moment | SSTD 11 | 1997 |

3. REFERENCES:

Entity
 ATL (TST 3782)
 ATL (TST 3782)
 ATL (TST 3782)
 TRI
 ATI (QUA 1844)

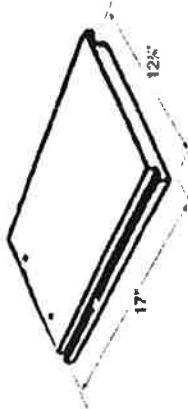
Examination
 ASTM C1492
 ASTM C1492
 ASTM C1492
 FRSA/TRI 07320 & SSTD 11
 Quality Assurance

Reference
 RT0324.01-11
 RT0324.02-11
 RT0324.03-11
 Membership Letter
 Service Confirmation

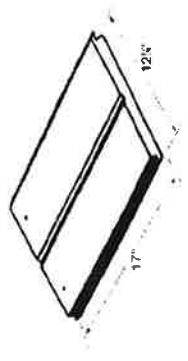
Date
 04/03/2011
 04/03/2011
 04/03/2011
 11/29/2005
 Exp. 12/31/2014

4. PRODUCT DESCRIPTION:

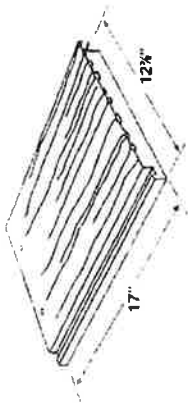
4.1 **BEL AIR, DOUBLE EAGLE BEL AIR, PONDEROSA, DOUBLE EAGLE PONDEROSA and GOLDEN EAGLE** are low (flat)-profile concrete roof tiles having a smooth or textured surface.



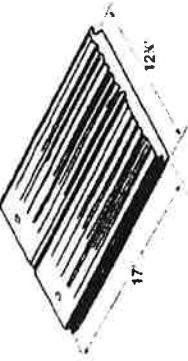
Bel Air



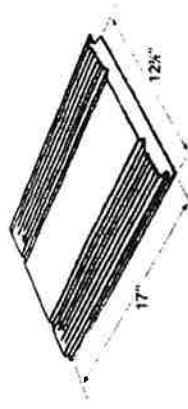
Double Eagle Bel Air



Ponderosa

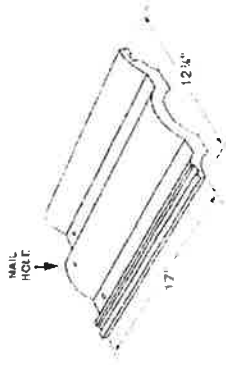


Double Eagle Ponderosa

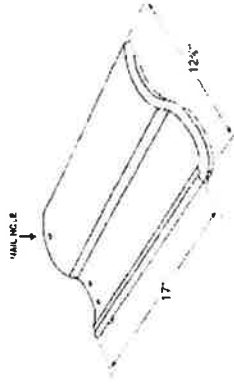


Golden Eagle

4.2 **MALIBU** are medium-profile concrete roof tiles.

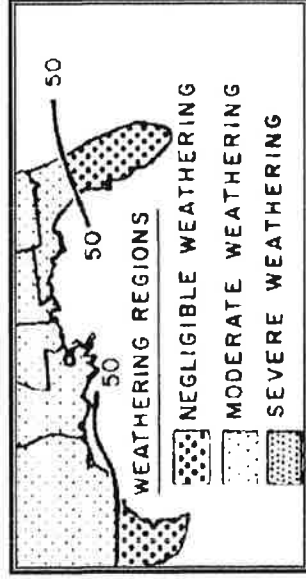


4.3 **CAPISTRANO** are high-profile concrete roof tiles.



5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in the HVHZ.
- 5.2 Fire classification is not part of this evaluation; refer to FBC Section 1505.2 or current Approved Roofing Materials Directory for fire rating of this product.
- 5.3 Installation shall comply with manufacturer's current published instructions, but not less than the requirements of FBC Section 1507.3 and the FRSA/TRI 07320.
- 5.4 For mechanically attached tiles, attachment for wind load resistance shall be in accordance with FRSA/TRI 07320/8-05.
- 5.5 For mortar-set or adhesive-set tiles, attachment for wind load resistance shall be in accordance with FBC Section 1609.5.3 and the mortar or adhesive manufacturer's Product Approval.
- 5.6 All products in the roof assembly shall have quality assurance audit in accordance with the Florida Building Code and F.A.C. Rule 9N-3.
- 5.7 This Evaluation Report is limited to use on projects in areas subjected to weathering indices of 50 or less (negligible weathering), as outlined in Figure 1 of ASTM C1492-03¹, reproduced below for reference.



6. INSTALLATION:

- 6.1 Eagle roof tiles may be mechanically fastened, mortar-set or adhesive-set. Installation shall comply with manufacturer's current published instructions, but not less than the requirements of FBC Section 1507.3 and the FRSA/TRI 07320.

7. LABELING:

- 7.1 Each unit shall bear the imprint or identifiable marking of the manufacturer's name or logo. Tile lots shall be labeled in accordance with the requirements of the Accredited Quality Assurance Agency noted herein.
- 7.2 Tile not tested for freeze-thaw shall state clearly that the lot has not been tested for freeze-thaw acceptance on all lot tags or certification.

8. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

9. MANUFACTURING PLANTS:

Contact the noted QA agency for information on product locations covered for F.A.C. Rule 9N-3 QA requirements.

10. QUALITY ASSURANCE ENTITY:

Architectural Testing, Inc. - QUA1844; (717) 764-7700

- END OF EVALUATION REPORT -

ASTM C1492-03, Standard Specification for Concrete Roof Tile, © ASTM International

Exterior Research and Design, LLC.
Certificate of Authorization #9503

Evaluation Report E1322.09.06-R2
FL7473-R3
Revision 2: 06/23/2011
Page 4 of 4



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
07/30/2014

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 LIC #0829370 Edgewood Partners Insurance Centers (EPIC) [San Ramon Branch] P. O. Box 5003 San Ramon, CA 94583 | 1-925-244-7700 Certificates Department PHONE (A/C, No. Ext): 925-244-7700 FAX (A/C, No.): 925-901-0671 E-MAIL ADDRESS: EPICcerts@edgewoodins.com |
| INSURED Petersendean Roofing and Solar Systems, Inc. 1011 Fairfield Drive West Palm Beach, FL 33407 | INSURER(S) AFFORDING COVERAGE INSURER A: UNITED SPECIALTY INS CO 12537 INSURER B: GREENWICH INS CO 22322 INSURER C: XL SPECIALTY INS CO 37885 INSURER D: INSURER E: INSURER F: |

COVERAGES CERTIFICATE NUMBER: 40875829

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 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 SUBR INSR LTR | 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 <input checked="" type="checkbox"/> \$75K SIR COMM'L <input checked="" type="checkbox"/> \$150K SIR NON-COMM'L GEN'L AGGREGATE LIMIT APPLIES PER: POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC | | BTO01426809 | 04/30/14 | 04/30/15 | EACH OCCURRENCE \$ 2,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 0 PERSONAL & ADV INJURY \$ 2,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000 |
| B | AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> NON-OWNED AUTOS UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED <input type="checkbox"/> RETENTION \$ | | CAS740924001 | 04/30/14 | 04/30/15 | COMBINED SINGLE LIMIT (Ea accident) \$ 2,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ EACH OCCURRENCE \$ AGGREGATE \$ |
| C | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) if yes, describe under DESCRIPTION OF OPERATIONS below <input type="checkbox"/> Y/N <input checked="" type="checkbox"/> N/A | | CWR740923901 | 04/30/14 | 04/30/15 | WC STATUTORY LIMITS <input checked="" type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000 |
| B | Hired Auto Phys Damage | | CAS740924001 | 04/30/14 | 04/30/15 | \$50,000 LMT 5,000DED |

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

ADDITIONAL INSURED: City of Belle Isle

CERTIFICATE HOLDER

CANCELLATION

City of Belle Isle

3532 Maggie Boulevard

Orlando, FL 32811

USA

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

ACORD 25 (2010/05)

SLeLeb-SRC

40875829

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RICK SCOTT, GOVERNOR

STATE OF FLORIDA

KEN LAWSON, SECRETARY

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

LICENSE NUMBER

CCC1329081

The ROOFING CONTRACTOR

Named below IS CERTIFIED

Under the provisions of Chapter 489 FS.

Expiration date: AUG 31, 2014



MCS100TS, BYRON KEITH
PETERSENDEAN ROOFING AND SOLAR SYSTEMS INC
39300 CIVIC CENTER DRIVE, SUITE 300
FREMONT CA 94538



ISSUED: 12/03/2013 SEQ # L1312030002396
DISPLAY AS REQUIRED BY LAW

Scott Randolph, Tax Collector

Local Business Tax Receipt

Orange County, Florida:

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

| | | |
|---------------------------|--------------------------|---------------------------|
| 2013 | EXPIRES 9/30/2014 | 5000-1127276 |
| 5000 ROOFING BUSINESS OFF | \$20.00 | 11 EMPLOYEES |
| | | 1806 CERTIFIED ROOFING CO |
| | | \$35.00 |
| | | 40 EMPLOYEES : |

TOTAL TAX \$55.00
 PREVIOUSLY PAID \$55.00
 TOTAL DUE \$0.00

7517 CURRENCY DR
 U - ORLANDO, 32809
 MCSTOOTS BYRON KEITH
 PAID: \$55.00 2503-00462638 6/23/2014



PETERSEN JAMES P PRESIDENT
 MCSTOOTS BYRON KEITH (QUALIFIER)
 INC
 PETERSENDEAN ROOFING AND SOLAR SYS
 PETERSEN JAMES P
 7517 CURRENCY DR
 ORLANDO FL 32809

This receipt is official when validated by the Tax Collector.