



City of Belle Isle Job Site Permit Card

BUILDING 2022-03-043

Class: Residential 2/1 Smaller House Site Address: 1604 Swann Ave - Belle Isle, FL 32809

Parcel Number: 25-23-29-5884-19-090 . Municipality Belle Isle  OVERSIZED PLANS

Description of Work: INTERIOR RENOVATION OF 2/1 SMALLER HOUSE. ZONING WILL NOT ALLOW A KITCHEN- SEPARATE PERMITS FOR ELECTRICAL-PLUMBING & MECHANICAL.

Comments: SEE APPLICATION

UES

Issued: HR UNLIMITED BUILDERS LLC , CASTANO, H # CGC1526662 Contact # 321 945-0242

Payment/ Issued Date & Method: 4 / 01 / 2022 \*Picked up by Fernando Altamirano

Forwarded to the mailing address  Emailed  Visa  Master Card  Amex  Discover  Check / Money Order#

0783

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

To schedule your inspection(s), please visit your website:

http://uesbidportaluesorl.com/citizenportal/

Please follow the prompts to schedule your inspection.

Next-Day Inspection requests must be made by 3 pm.

OSHA approved ladder/access to the ROOF must be available to the Inspector.

Universal Engineering Sciences - 3532 Maggie Blvd., Orlando, FL 32811407-581-8161

Fax 407-581-0313 www.universalengineering.com

BUILDING INSPECTOR DATE COMMENTS

Table with 4 columns: BUILDING, INSPECTOR, DATE, COMMENTS. Rows include 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 (walls), 200 Framing, 205 Drywall Nail/Screw, 210 Fire Rated Assembly, 220 Above-Ceiling, 230 Insulation, 242 Exterior Wall Covering In-Progress, 243 Soffit In-Progress, 240 Lath, 250 Final, 260 Other.

"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](http://www.universalengineering.com)

RECEIVED  
MAR - 7 2022

## Building / Land Use Permit Application

DATE: 3-1-2022

PERMIT # 2022-03043

PROJECT ADDRESS 1604 SWANN AV., Belle Isle, FL 32809 32812

PROPERTY OWNER FERNANDO ALTAMIRANO PHONE 311 436 9395 VALUE OF WORK (labor & material) \$ 10,000-  
*EOTAEAS*

### PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

Interior renovation of 2/1 smaller house. Zoning will allow NOK kitchen. Sep permits for elec, plumb, mech

Please provide information, if applicable.

- **SINGLE FAMILY RESIDENCE:** 8.5"x11" Plat Survey, Plot Plan of Home and Floor Plans of New Construction/Revision Required
- **BOAT DOCK:** DEP Clearance Required with Application (Call 407-897-4100); 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: 29-23-29-5884-19-090

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

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

DATE: 3/22/22 BY: RD

### PLANNING & ZONING APPROVAL:

DATE CITY OF BELLE ISLE

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

CONSTRUCTION TYPE \_\_\_\_\_

OCCUPANCY GROUP Comm Res: Single Fam Multi Fam

#BLDG. \_\_\_\_\_ #UNITS \_\_\_\_\_ #STORIES \_\_\_\_\_ TOTAL SQ.FT. \_\_\_\_\_

MAX. FLOOR LOAD \_\_\_\_\_ MAX. OCCUPANCY \_\_\_\_\_

MIN. FLOOR ELEV. \_\_\_\_\_ LOW FLOOR ELEV. \_\_\_\_\_

WATER SERVICE \_\_\_\_\_ WELL \_\_\_\_\_ SEPTIC \_\_\_\_\_

WD 2071051

BUILDING REVIEWER [Signature] DATE 03-25-22

VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE [Signature] DATE 03-25-22

### 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."

JJ's Waste & Recycling 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 JJ's Waste & Recycling at 407 298-3932 setup accounts for Commercial, Construction Roll Off, or other services needed. Rates are fixed by contract and are available at City Hall or from JJ's Waste & Recycling. 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.

157K  
ax4

25  
36  
61.2  
30.50  
91.50

Wind Exposure Category: B    C    D   

REVIEW	Date: Sent	RCD
SPRINKLERS REQ'D	Y <u>  </u> N <u>  </u>	
If Required - SUBMIT COPY OF PLANS FOR FIRE		
ZONING	<u>Y</u> N	\$ <u>50.-</u>
CERT OF OCC	<u>Y</u> N	\$ <u>  </u>
TRAFFIC	Y N	\$ <u>  </u>
SCHOOL	Y N	\$ <u>  </u>
FIRE	Y N	\$ <u>  </u>
SWIMMING POOL	Y N	\$ <u>  </u>
SCREEN ENCLOSURE	Y N	\$ <u>  </u>
ROOFING	Y N	\$ <u>  </u>
BOAT DOCK	Y N	\$ <u>  </u>
BUILDING	<u>Y</u> N	\$ <u>91.50</u>
WINDOW(S)	Y N	\$ <u>  </u>
DOOR(S)	Y N	\$ <u>  </u>
FENCE	Y N	\$ <u>  </u>
SHED	Y N	\$ <u>  </u>
DRIVEWAY	Y N	\$ <u>  </u>
OTHER	Y N	\$ <u>  </u>

1% BCAIB FEE 2min

1.5% DCA FEE 2min

TOTAL 145.50

### OTHER PERMITS REQUIRED:

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

PAID  
4/1/2022  
mc 0783



City of Belle Isle  
 Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811  
 Tel 407-581-8161 \* Fax 407-581-0313 \* [www.universalengineering.com](http://www.universalengineering.com)

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

Owner's Name FERNANDO ALTAMIRANO PERMIT #   
 Owner's Address 1604 SWANN AV. ORLANDO, FL 32809 / 2091 DERBY GLEN DR. ORLANDO, FL 32837

Contractor Name <u>HERNANDO CASTANO</u>	Company Name <u>HR UNLIMITED BUILDERS LLC</u>
License # <u>CGC 1526662</u>	Company Address <u>111 N. ORANGE AV. STE 300</u>
Contact Phone/Cell <u>321 945 0242</u>	City, State, ZIP <u>ORLANDO, FL. 32801</u>
Contact Email <u>hc@hrunlimitedbuilders.com</u>	Contact Fax

**WARNING TO OWNER:** Your failure to record a Notice of Commencement may result in your paying twice for improvements to your property. A notice of commencement must be recorded if job is \$2500(+) or if A/C Replacement \$7500(+) and posted on the job site before the first inspection. If you intend to obtain financing, consult with your lender or an attorney before recording your Notice of Commencement.

I hereby make Application for Permit as outlined above, and if same is granted I agree to conform to all Division of Building Safety Regulations ([www.floridabuilding.org](http://www.floridabuilding.org)) and City Ordinances ([www.municode.com](http://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.

<p><b>Owner Signature</b> <u>Fernando Altamirano</u></p> <p>The foregoing instrument was acknowledged before me this <u>3/1/22</u>  <u>Fernando Altamirano</u> who is personally known to me          and who produced <u>Florida Driver's License</u>          as identification and who did not take an oath.</p> <p>Notary as to Owner <u>Wanda Berrios</u>          State of Florida <u>Osceola</u>          County of <u>Osceola</u></p> <p style="text-align: center;"><small>WANDA BERRIOS          NOTARY PUBLIC          STATE OF FLORIDA          Comm# GG195206          Expires 3/12/2022</small></p>	<p style="text-align: center;"><b>Impervious Surface Ratio Worksheet</b>          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</p> <p>1. Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).          Total Lot Area _____ X 0.35 =          Allowable Impervious Area (BASE) _____</p> <p>2. 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.</p> <ul style="list-style-type: none"> <li>• House _____</li> <li>• Driveway _____</li> <li>• Walkway _____</li> <li>• Accessory Buildings _____</li> <li>• Pool &amp; Spa _____</li> <li>• Deck &amp; Patio _____</li> <li>• Other _____</li> </ul> <p>Actual Impervious Area (AIA) _____</p> <p>3. If AIA is <u>less than</u> BASE, subtract AIA from BASE to determine the amount of impervious area that may be added without providing onsite retention.</p> <p>4. If AIA is <u>greater than</u> BASE, then onsite retention <u>must be provided</u>.</p> <p><u>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</u></p>
<p><b>Contractor Signature</b> <u>Fernando Altamirano</u></p> <p>COMPANY NAME <u>HR UNLIMITED BUILDERS, LLC</u></p> <p>The foregoing instrument was acknowledged before me this <u>3/1/22</u>  <u>Fernando Altamirano</u> who is personally known to me          and who produced <u>Florida Driver's License</u>          as identification and who did not take an oath.</p> <p>Notary as to Owner <u>Wanda Berrios</u>          State of Florida <u>Osceola</u>          County of <u>Osceola</u></p> <p style="text-align: center;"><small>WANDA BERRIOS          NOTARY PUBLIC          STATE OF FLORIDA          Comm# GG195206          Expires 3/12/2022</small></p>	

Permit Number: 2022-03-043  
Folio/Parcel Identification Number: \_\_\_\_\_  
Prepared by: Hernando Castano

DOC# 20210599573  
10/01/2021 10:08:11 AM Page 1 of 1  
Rec Fee: \$10.00  
Phil Diamond, Comptroller  
Orange County, FL  
IP - Ret To: HR UNLIMITED BUILDERS LLC

Return to: 11977 Sandy Hill Dr - Orlando 32821



**NOTICE OF COMMENCEMENT**

State of Florida, County of Orange

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

- Description of property** (legal description of the property, and street address if available)  
1604 Swann Ave NEA ISLE H/55 LOTS 9 & 10 BKS
- General description of improvement**  
ELECTRICAL, A/C, NEW WINDOWS, MECHANICAL
- Owner information or Lessee information if the Lessee contracted for the improvement**  
Name Fernando Altamirano & others  
Address 2091 Parby Glen Dr Orlando 32837  
Interest in Property Owner  
Name and address of fee simple titleholder (if different from Owner listed above)  
Name NA  
Address \_\_\_\_\_
- Contractor**  
Name HR UNLIMITED BUILDERS LLC Telephone Number 407.707.4213  
Address 111 N ORANGE AVE STE 800 - Orlando 32801
- Surety** (if applicable, a copy of the payment bond is attached)  
Name NA Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_ Amount of Bond \$ \_\_\_\_\_
- Lender**  
Name N/A Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
- Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by §713.13(1)(a)7, Florida Statutes.**  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
- In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in §713.13(1)(b), Florida Statutes.**  
Name \_\_\_\_\_ Telephone Number \_\_\_\_\_  
Address \_\_\_\_\_
- Expiration date of notice of commencement** (the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified)  
\_\_\_\_\_

RECORDED  
NOV - 4 2021

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.

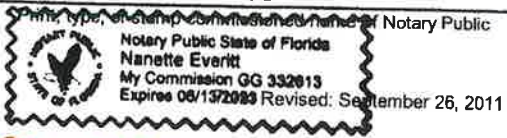
Under penalty of perjury, I declare that I have read the foregoing notice of commencement and that the facts stated in it are true to the best of my knowledge and belief.

x Fernando Altamirano \_\_\_\_\_  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager      OWNER  
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 29<sup>TH</sup> day of 09-21 by FERNANDO ALTAMIRANO  
as Owner for \_\_\_\_\_  
month/year      name of person

\_\_\_\_\_  
Type of authority, e.g., officer, trustee, attorney in fact      Name of party on behalf of whom instrument was executed  
Nanette Everitt      NANETTE EVERITT  
Signature of Notary Public - State of Florida

Personally Known  OR Produced ID \_\_\_\_\_  
Type of ID Produced \_\_\_\_\_



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: 10/1/2021



If you close on a new home after January 1, 2022, you will be eligible to apply for the 2023 tax year. Filing begins on March 2, 2022.

[Click Here To Apply Homestead Exemption Online](#)

Print Date: 03/01/2022 System Refresh Date: 02/28/2022

**1604 Swann Ave 25-23-29-5884-19-090**

**Name(s):** Altairano Fernando, Galvis Jorge, Perez Alberto, Flores Abdon  
**Physical Street Address:** 1604 Swann Ave  
**Property Use:** 0103 - Single Fam Class III



1604 SWANN AVE, ORLANDO, FL 32809 5/25/2017 11:21 AM

[Upload Photos](#)

**Mailing Address On File:** 2091 Derby Glen Dr, Orlando, FL 32837-8031  
**Postal City and Zip:** Orlando, FL 32809  
**Municipality:** Belle Isle

[Incorrect Mailing Address?](#)

[View 2021 Property Record Card](#)

- [PROPERTY FEATURES](#)
- [VALUES, EXEMPTIONS AND TAXES](#)
- [SALES](#)
- [MARKET STATS](#)
- [LOCATION](#)

**2022 Values will be available in August of 2022. To see the certified values, go to the Values, Exemptions and Taxes Tab.**

[View Plat](#)

**Property Description**

NELA ISLE M/55 LOTS 9 & 10 BLK S  
**Total Land Area**

13,999 sqft (+/-) | 0.32 acres  
 (+/-)

*13,999 x .35 = 4899.65*

GIS Calculated

Notice

**Land**

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0100 - Single Family	R-1-A	1 LOT(S)	Working Value...	Working Value...	Working Value...	Working Value...

« « 1 » »

Page 1 of 1 (Total Records: 1)

**Building**

*2 houses 1876 + 898 = 2774*

	<b>Model Code:</b> 01 - Single Fam Residence	<b>Actual Year Built:</b> 1957	<b>Gross Area:</b> 1876 sqft
	<b>Type Code:</b> 0103 - Single Fam Class III	<b>Beds:</b> 3	<b>Living Area:</b> 1308 sqft
<a href="#">More</a>	<b>Building Value:</b> Working Value...	<b>Baths:</b> 2	<b>Exterior Wall:</b> Concrete/Cinder Block
<a href="#">Details</a>	<b>Estimated New Cost:</b> Working Value...	<b>Floors:</b> 1	<b>Interior Wall:</b> Plastered

	<b>Model Code:</b> 01 - Single Fam Residence	<b>Actual Year Built:</b> 1946	<b>Gross Area:</b> 898 sqft
	<b>Type Code:</b> 0103 - Single Fam Class III	<b>Beds:</b> 2	<b>Living Area:</b> 898 sqft
<a href="#">More</a>	<b>Building Value:</b> Working Value...	<b>Baths:</b> 1	<b>Exterior Wall:</b> Concrete/Cinder Block
<a href="#">Details</a>	<b>Estimated New Cost:</b> Working Value...	<b>Floors:</b> 1	<b>Interior Wall:</b> Inexpensive, Minimal Materials

« « 1 » »

Page 1 of 1 (Total Records:2)

**Extra Features**

There are no extra features associated to this parcel.



Courtesy Orange County Property Appraiser



292325588419090 10/03/2006

## Parcel Photos - 1604 Swann Ave



1604 SWANN AVE, ORLANDO, FL 32809 5/25/2017 11:21 AM



Courtesy Orange County Property Appraiser



292325588419090 10/03/2006





Ron DeSantis, Governor

Halsey Beshears, Secretary



**STATE OF FLORIDA  
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION**

**CONSTRUCTION INDUSTRY LICENSING BOARD**

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



**CASTANO, HERNANDO**

HR UNLIMITED BUILDERS LLC  
111 N ORANGE AVE  
ORLANDO FL 32801

**LICENSE NUMBER: CGC1526662**

**EXPIRATION DATE: AUGUST 31, 2022**

Always verify licenses online at [MyFloridaLicense.com](http://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.



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
12/29/2021

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 have ADDITIONAL INSURED provisions or be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

<b>PRODUCER</b> Gaslamp Insurance Services 2244 Faraday Avenue, #125  Carlsbad CA 92008		<b>CONTACT NAME:</b> Customer Service Department <b>PHONE (A/C, No, Ext):</b> (800) 920-4125 <b>FAX (A/C, No):</b> (800) 920-4107 <b>E-MAIL ADDRESS:</b>	
<b>INSURED</b>  HR Unlimited Builders, LLC 111 North Orange Avenue Suite 800 Orlando FL 32801		<b>INSURER(S) AFFORDING COVERAGE</b> <b>INSURER A:</b> Preferred Contractors Ins Co. NAIC # 12497 <b>INSURER B:</b> <b>INSURER C:</b> <b>INSURER D:</b> <b>INSURER E:</b> <b>INSURER F:</b>	

**COVERAGES**      **CERTIFICATE NUMBER:** GL 21-22 Master      **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 SUBR INSD WVO	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> <b>COMMERCIAL GENERAL LIABILITY</b> <input checked="" type="checkbox"/> CLAIMS-MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:		PCA5026-PCCM407225	08/13/2021	08/13/2022	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPIOP AGG \$ 1,000,000 \$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY					COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ \$
	<input type="checkbox"/> <b>UMBRELLA LIAB</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> <b>EXCESS LIAB</b> <input type="checkbox"/> CLAIMS-MADE DED    RETENTION \$					EACH OCCURRENCE \$ AGGREGATE \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y/N If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				PER STATUTE    OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$



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

Verification of Coverage

\*Subject to all policy terms, exclusions and conditions\*

<b>CERTIFICATE HOLDER</b>  City of Belle Isle 1600 Nela Avenue  Belle Isle FL	<b>CANCELLATION</b>  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  <i>Ames L. Carlin</i>
--	---



JIMMY PATRONIS  
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA  
DEPARTMENT OF FINANCIAL SERVICES  
DIVISION OF WORKERS' COMPENSATION

**\*\* CERTIFICATE OF ELECTION TO BE EXEMPT FROM FLORIDA WORKERS' COMPENSATION LAW \*\***

**CONSTRUCTION INDUSTRY EXEMPTION**

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation law.

**EFFECTIVE DATE:** 8/20/2020

**EXPIRATION DATE:** 8/20/2022

**PERSON:** HERNANDO CASTANO

**EMAIL:** EBTCORP@YAHOO.COM

**FEIN:** 824076836

**BUSINESS NAME AND ADDRESS:**

HR UNLIMITED BUILDERS LLC

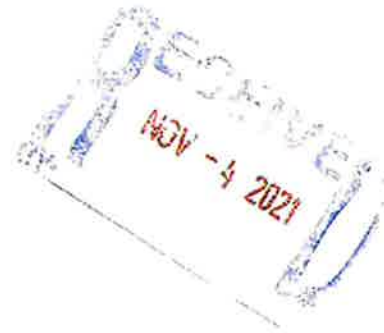
111 N ORANGE AVE STE 800,

ORLANDO, FL 32801

**SCOPE OF BUSINESS OR TRADE:**

Contractor-Project  
Manager, Construction  
Executive, Construction  
Manager or Construction  
Superintendent

Masonry NOC	Concrete Construction NOC	Concrete Work Incidental To The Construction Of Private Residence	Concrete or Cement Work - Floors, Driveways, Yards, or Sidewalks and Drivers	Roofing - All Kinds and Drivers
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**IMPORTANT:** Pursuant to subsection 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter. Pursuant to subsection 440.05(12), F.S., Certificates of election to be exempt issued under subsection (3) shall apply only to the corporate officer named on the notice of election to be exempt and apply only within the scope of the business or trade listed on the notice of election to be exempt. Pursuant to subsection 440.05 (13), F.S., notices of election to be exempt and certificates of election to be exempt shall be subject to revocation if, at any time after the filing of the notice or the issuance of the certificate, the person named on the notice or certificate no longer meets the requirements of this section for issuance of a certificate. The department shall revoke a certificate at any time for failure of the person named on the certificate to meet the requirements of this section.

Tax Collector Scott Randolph

Local Business Tax Receipt

Orange County, Florida

3010 ARCHITECT 2021 \$30.00

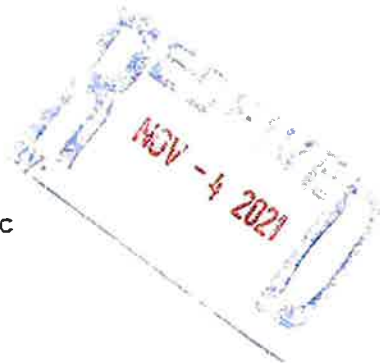
EXPIRES 9/30/2022

3010-1198653

TOTAL TAX \$30.00  
PREVIOUSLY PAID \$30.00  
TOTAL DUE \$0.00

CASTANO HERNANDO

HR UNLIMITED BUILDERS LLC  
CASTANO HERNANDO  
111 N ORANGE AVE #800  
ORLANDO FL 32801



111 N ORANGE AVE #800  
A - ORLANDO, 32801

PAID \$30.00 0098-01000875 7/19/2021

Tax Collector Scott Randolph

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.

3010 ARCHITECT 2021 \$30.00

EXPIRES 9/30/2022

3010-1198653

TOTAL TAX \$30.00  
PREVIOUSLY PAID \$30.00  
TOTAL DUE \$0.00



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111 N ORANGE AVE #800  
A - ORLANDO, 32801

PAID \$30.00 0098-01000875 7/19/2021

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.



3532 Maggie Blvd, Orlando, FL 32811 - P: 407-581-8161 - F: 407.423.3106

Work Order No. 2071051

**Project No:** 0115.2100133.0000-0115-0006 **Date:** 03/23/2022  
**Project Name:** 2022-03-043 interior reno of 2/1 - plans removed kitchen for zoning compliance **Permitting Authority:** Belle Isle  
**Address:** City of Belle Isle, 1604 Swann Avenue - COBI, Belle Isle, FL 32812  
**Permit Type:** Building **Client:** City of Belle Isle, FL  
**Permit No:** 2022-03-043 **Contact:**  
**Inspection Type:** Building  
**Sub Type:** Initial Plans Review  
**Result:** **Approved**

**Notes:**

Date	Note	User Name
03/22/2022	Plan Review 2022-03-043 interior renovation of 2/1 - plans removed kitchen for zoning compliance	Frank Matos

I hereby affirm that to the best of my knowledge and belief, the above listed inspection was performed as indicated and the work was reviewed for compliance with the approved plans, and all pertinent sections of the Florida Building Code.

**Duly Authorized Representative:**

David J. Aldrich



3532 Maggie Blvd, Orlando, FL 32811 - P: 407-581-8161 - F: 407.423.3106

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**Permit Type:** Building **Client:** City of Belle Isle, FL  
**Permit No:** 2022-03-043 **Contact:**  
**Inspection Type:** Building  
**Sub Type:** Initial Plans Review  
**Result:** *Approved @ FR 03-29-22*

Notes:		
Date	Note	User Name
03/22/2022	Plan Review 2022-03-043 interior renovation of 2/1 - plans removed kitchen for zoning compliance	Frank Matos

I hereby affirm that to the best of my knowledge and belief, the above listed inspection was performed as indicated and the work was reviewed for compliance with the approved plans, and all pertinent sections of the Florida Building Code.

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David J. Aldrich

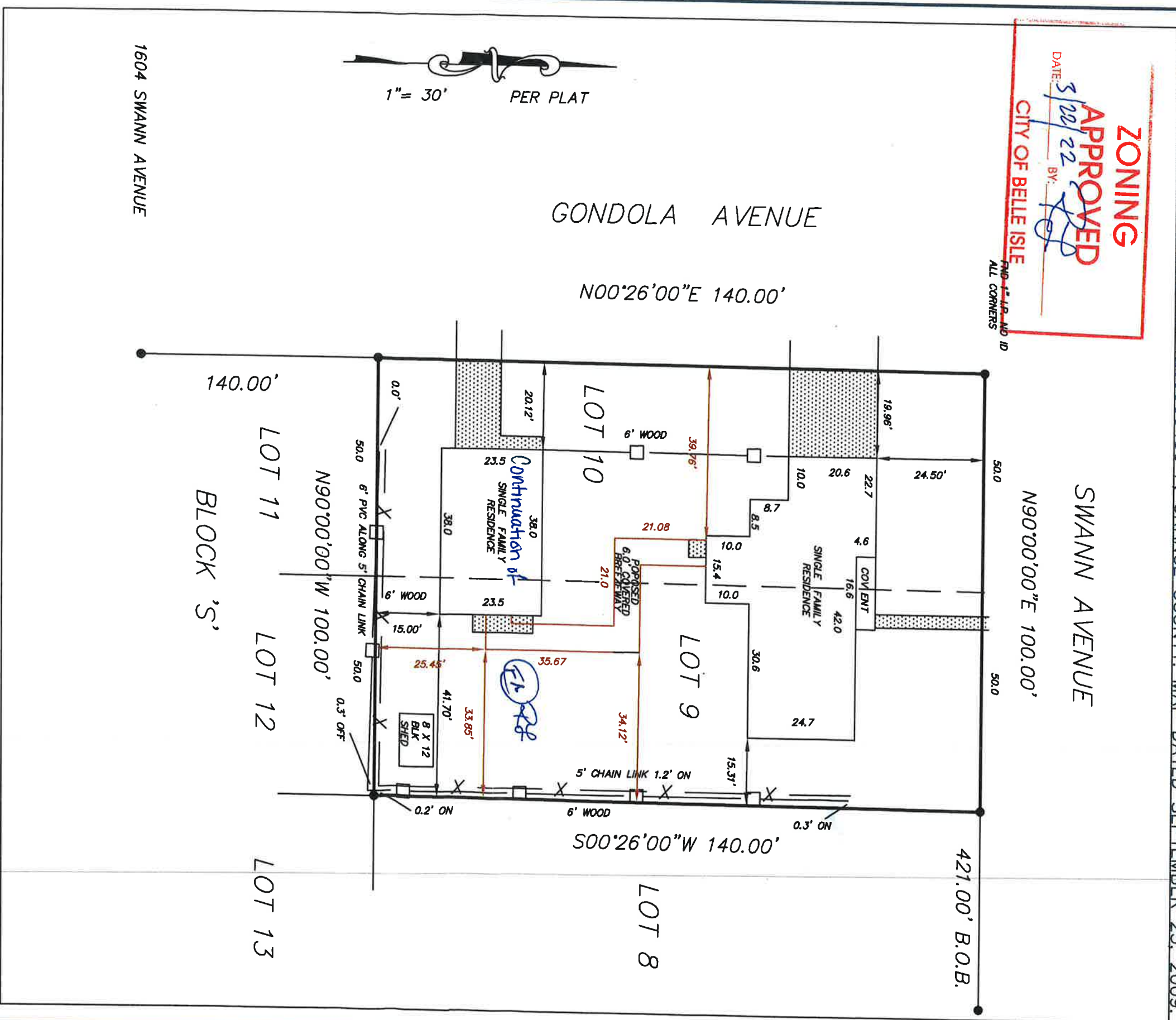
2022.03.043

**BOUNDARY SURVEY**

LEGAL DESCRIPTION: LOTS 9 & 10, BLOCK 'S', NELA ISLE, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 'M', PAGE 55, OF THE PUBLIC RECORDS OF ORANGE COUNTY, FLORIDA.

THE ABOVE REFERENCED PROPERTY IS LOCATED IN ZONE 'X' AREA OF MINIMAL FLOODING, AS PER F.I.R.M. COMMUNITY PANEL NO. 12095C0430 F, ORANGE COUNTY, MAP DATED SEPTEMBER 25, 2009.

**ZONING APPROVED**  
 DATE: 3/20/22 BY: [Signature]  
 CITY OF BELLE ISLE



**LEGEND**

- FOUND CONCRETE MONUMENT
- FOUND PROPERTY CORNER
- SET PROPERTY CORNER
- PERMANENT CONTROL POINT
- △ DELTA
- A/C AIR CONDITIONER
- B.LK. BLOCK
- B.O.B. BASIS OF BEARING
- BRG. BEARING
- CHD. CHORD
- C.M. CONCRETE MONUMENT
- COR. CORNER
- COV. COVERED
- D. DESCRIBED
- D.E. DRAINAGE EASEMENT
- E. EAST
- ENT. ENTRANCE
- ENCL. ENCLOSURE
- ESMT. EASEMENT
- FND. FOUND
- I.P. IRON PIPE
- L.R. IRON ROD
- L. LENGTH
- M. MEASURED
- N. NORTH
- N/D NAIL & DISC
- P.C. POINT OF CURVATURE
- P.C.P. PERMANENT CONTROL POINT
- P.T. POINT OF TANGENCY
- P.O.B. POINT OF BEGINNING
- P.O.C. POINT OF COMMENCEMENT
- P.O.L. POINT ON LINE
- P. PLAT
- R. RADIUS / RADIAL
- S. SOUTH
- SAN. SANITARY
- SCR. SCREEN
- S.W. SIDEWALK
- T. TANGENT
- TEL. TELEPHONE RISER BOX
- T.P. TYPICAL
- U.E. UTILITY EASEMENT
- U.R.B. UTILITY RISER BOX
- W. WEST
- W.F. WOOD FENCE
- W.M. WATER METER
- CONCRETE

**NOTES**

1. BEARINGS ARE BASED ON RECORD PLAT.
2. THE SURVEY SHOWN HEREON WAS SURVEYED BY THE LEGAL DESCRIPTION PROVIDED BY THE CLIENT.
3. ROOF OVERHANGS AND FOOTERS HAVE NOT BEEN LOCATED.
4. NO IMPROVEMENTS OR UNDERGROUND UTILITIES HAVE BEEN LOCATED EXCEPT AS SHOWN.
5. THIS SURVEY IS NOT VALID WITHOUT EMBOSSED SEAL.
6. THIS SURVEY IS NOT VALID FOR ANY REAL ESTATE TRANSACTIONS 90 DAYS BEYOND THE FINAL SURVEY DATE SHOWN.
7. THE SURVEYOR HAS NOT ABSTRACTED THE LANDS HEREON FOR EASEMENTS OR RIGHT-OF-WAY OF RECORD.
8. THERE MAY BE ADDITIONAL RESTRICTIONS THAT ARE NOT RECORDED ON THIS PLAT THAT MAY BE FOUND IN THE PUBLIC RECORDS OF THIS COUNTY.
9. ALL BEARINGS / ANGLES AND DISTANCES ARE PLAT AND MEASURED UNLESS NOTED OTHERWISE.

I HEREBY CERTIFY THAT THIS SURVEY MEETS OR EXCEEDS THE MINIMUM TECHNICAL STANDARDS AND IS ELECTRONICALLY SIGNED AND SEALED AS SET FORTH BY THE FLORIDA BOARD OF LAND SURVEYORS, PURSUANT TO SECTION 54-17.050 THRU 54-17.052, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.08, 472.027, FLORIDA STATUTES.

CHARLES R. DEFOOR, PLS 4189



Digitally signed by Charles R DeFoor  
 Date: 2022.03.15 09:26:11 -04'00'

DATE SIGNED 5-20-21

PREPARED FOR: FERNANDO ALTAMIRANO

PREPARED BY: CHARLES ROB DEFOOR  
 PROFESSIONAL LAND SURVEYOR  
 P.O. BOX 1472 GENOVA, FLA. 32732 407-860-9811  
 DEFOORSURVEYING.COM

LOT SURVEY DATE:	
FOUNDATION DATE:	
FINAL SURVEY DATE:	5-20-21
DRAWN DATE:	5-20-21
SCALE:	1" = 30'
PAGE	1 OF 1
REVISION DATE:	UPDATE 3/14/22