



City of Belle Isle Job Site Permit Card

BUILDING

2022-03-044

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:

BREEZEWAY / COVERED WALK WAY PORTICO BETWEEN THE TWO BULDINGS / MAIN & SMALL HOUSE.

Comments: SEE APPLICATION

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

Payment/ Issued Date & Method: *4 / 1 / 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.universaleengineering.com

BUILDING INSPECTOR DATE COMMENTS

BUILDING	INSPECTOR	DATE	COMMENTS
100 Demo Final			
110 Footing			
120 Stem Wall			
130 Slab			
140 Lintel/Tie Beam			
150 Down Pour			
160 Tilt Panel			
170 Window In-progress			
180 Sheathing (wall)			
190 Sheathing (roof)			
195 Dry-in (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 32812
Tel 407-581-8161 * Fax 407-581-0313 * www.universalengineering.com

RECEIVED
MAR - 7 2022

Building / Land Use Permit Application

DATE: 3-1-2022

PERMIT # 002-63-044

PROJECT ADDRESS 1604 SWANN AV. ORLANDO, FL 32809, Belle Isle, FL 32809 32812
PROPERTY OWNER FERNANDO ALONSO PHONE 321 436 9395 VALUE OF WORK (labor & material) \$ 6,000
COTLED S

PLEASE LIST THE NATURE OF YOUR PROPOSED IMPROVEMENTS

BREZLEWAY BETWEEN THE 2 BUILDINGS

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-8
- 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.ocpaf1.org/Searches/ParcelSearch.aspx>

SPECIAL CONDITIONS: STRUCTURES MAY NOT ENCR OACH 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.

ZONING APPROVED
DATE: 3/22/22 BY: KJ
DATE CITY OF BELLE ISLE

PLANNING & ZONING APPROVAL:

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. FLOOD ELEV. _____ LOW FLOOR ELEV. _____
WATER SERVICE _____ WELL _____ SEPTIC _____
W 2071050

BUILDING REVIEWER Scott/ Michael PK143 DATE 03-25-22

VERIFIED CONTRACTOR'S LICENSE & INSURANCE ARE ON FILE of DATE 3-25-2022
NOC

Per FSS 105.3.3:
An enforcing authority may not issue a building permit for any building construction, erection, alteration, modification, repair or addition unless the permit either includes on its face or there is attached to the permit the following statement: "NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies."

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.

Wind Exposure Category: B _____ C _____ D _____

SPRINKLERS REQ'D	Y	N	
If Required - SUBMIT COPY OF PLANS FOR FIRE REVIEW			Date: Sent _____ RCD _____
ZONING	<input checked="" type="radio"/>	<input type="radio"/>	\$ <u>165</u>
CERT OF OCC	<input type="radio"/>	<input type="radio"/>	\$ _____
TRAFFIC	<input type="radio"/>	<input type="radio"/>	\$ _____
SCHOOL	<input type="radio"/>	<input type="radio"/>	\$ _____
FIRE	<input type="radio"/>	<input type="radio"/>	\$ _____
SWIMMING POOL	<input type="radio"/>	<input type="radio"/>	\$ _____
SCREEN ENCLOSURE	<input type="radio"/>	<input type="radio"/>	\$ _____
ROOFING	<input type="radio"/>	<input type="radio"/>	\$ _____
BOAT DOCK	<input type="radio"/>	<input type="radio"/>	\$ _____
BUILDING	<input checked="" type="radio"/>	<input type="radio"/>	\$ <u>67.50</u>
WINDOW(S)	<input type="radio"/>	<input type="radio"/>	\$ _____
DOOR(S)	<input type="radio"/>	<input type="radio"/>	\$ _____
FENCE	<input type="radio"/>	<input type="radio"/>	\$ _____
SHED	<input type="radio"/>	<input type="radio"/>	\$ _____
DRIVEWAY	<input type="radio"/>	<input type="radio"/>	\$ _____
OTHER	<input type="radio"/>	<input type="radio"/>	\$ _____

1% BCAIB FEE 2 min
1.5% DCA FEE 2 min
TOTAL 236.50

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

25
30
45.50
22.50
67.50



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

Building Permit (Land Use) Application

To be completed as required by State Statute Section 713 and other applicable sections.

PERMIT # 2022-03-044

Owner's Name FERNANDO ALTAMIRANO

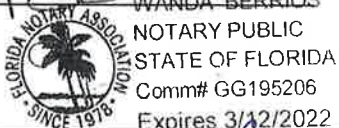
Owner's Address 1604 SWANN AV. ORLANDO, FL 32809 / 2091 DERBY GLEN Dr. ORLANDO, FL 32837

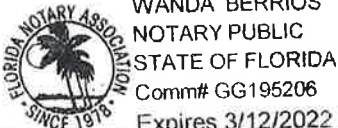
Contractor Name <u>HERNANDO CASTANO</u>	Company Name <u>HR UNLIMITED BUILDERS LLC</u>
License # <u>C6C 1526662</u>	Company Address <u>111 N ORANGE AV. 3Lr 800</u>
Contact Phone/Cell <u>321 945 0242</u>	City, State, ZIP <u>ORLANDO, FL. 32801</u>
Contact Email <u>hc@hrunlimitedbuilders.com</u>	Contact 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) and City Ordinances (www.municode.com) regulating same and in accordance with plans submitted. The issuance of this permit does not grant permission to violate any applicable City and/or State of Florida codes and/or ordinances. Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a **separate** permit must be secured for all other construction including ROOFING, ELECTRICAL, MECHANICAL, PLUMBING, GAS, SIGNS, POOLS, SCREEN ENCLOSURES, ETC.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

Owner Signature FALTAMIRANO
 The foregoing instrument was acknowledged before me this 3/1/22
 by Fernando Altamirano who is personally known to me
 and who produced Florida Driver's License
 as identification and who did not take an oath.
 Notary as to Owner Wanda Berrios
 State of Florida
 County of Orange Osceola


Contractor Signature FALTAMIRANO
 COMPANY NAME HR UNLIMITED BUILDERS, LLC
 The foregoing instrument was acknowledged before me this 3/1/22
 by Fernando Altamirano who is personally known to me
 and who produced Florida Driver's License
 as identification and who did not take an oath.
 Notary as to Owner Wanda Berrios
 State of Florida
 County of Orange Osceola


Impervious Surface Ratio Worksheet
 Development Zoned A-1, A-2, R-1-AAA, R-1-AA, R-1-A, R-1 per
 City Code, Section 50-74: Impervious Surface Ratio

- Total Lot Area (sqft) X 0.35 = Allowable Impervious Area (BASE).
 Total Lot Area 13999 X 0.35 =
 Allowable Impervious Area (BASE) 4899.65
- Calculate the "proposed" impervious area on the lot. This includes the sum of all areas that do not allow direct percolation of rainwater. Examples include house, pool, deck, driveway, accessory building, etc.
 - House (2) 1876 + 898 = 2774
 - Driveway 400
 - Walkway 40
 - Accessory Buildings na
 - Pool & Spa na
 - Deck & Patio na
 - Other proposed breezeway 284 sf
 Actual Impervious Area (AIA) 3498
- If AIA is less than BASE, subtract AIA from BASE to determine the amount of impervious area that may be added without providing onsite retention.
- If AIA is greater than BASE, then onsite retention **must be provided**.

Assuming 7.5 inches of rainfall based on a 24hr 10 year Rain Event (TP40), the formula is: (7.5 inches rainfall/12 inches p/foot) X (result from line 4) = cubic feet of storage volume needed

Permit Number: 2021-03-044
Folio/Parcel Identification Number: +
Prepared by: Hernando Castano

DOCN 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: 11533 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 BLKS
- 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

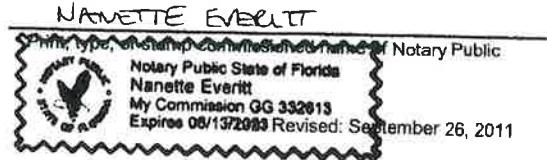
WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED 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 29th day of 09.21 by Fernando Altamirano
as Owner for _____
month/year name of person

Nanette Everitt
Signature of Notary Public - State of Florida Name of party on behalf of whom instrument was executed



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



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



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).

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

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

**CERTIFICATE HOLDER****CANCELLATION**

City of Belle Isle 1600 Nela Avenue Belle Isle FL	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>Thomas L. Carls</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

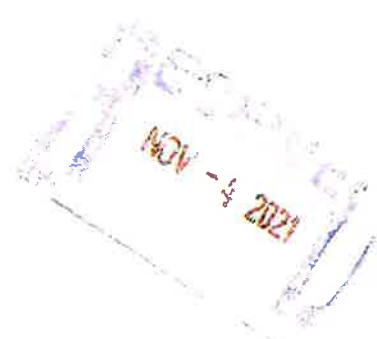
Masonry NOC

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



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

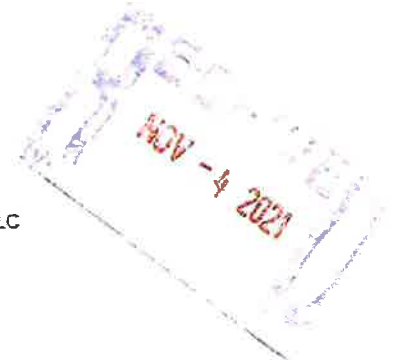
EXPIRES 9/30/2022

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



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

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. 2071050

Project No: 0115.2100133.0000-0115-0007

Date: 03/23/2022

Project Name: 2022-03-044 building permit covered walkways connecting two houses

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: 2022-03-044

Contact:

Inspection Type: Building

Sub Type: Initial Plans Review

Result: **Approved**

Notes:

Date	Note	User Name
03/22/2022	Plan Review 2022-03-044 building permit covered walkways connecting two houses	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

Work Order No. 2071050

Project No: 0115.2100133.0000-0115-0007 **Date:** 03/23/2022

Project Name: 2022-03-044 building permit covered walkways connecting two houses **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: 2022-03-044 **Contact:**

Inspection Type: Building

Sub Type: Initial Plans Review

Result: *Approved [Signature] 03-25-22*

Notes:		
Date	Note	User Name
03/22/2022	Plan Review 2022-03-044 building permit covered walkways connecting two houses	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

2022-03-04g

BOUNDARY SURVEY

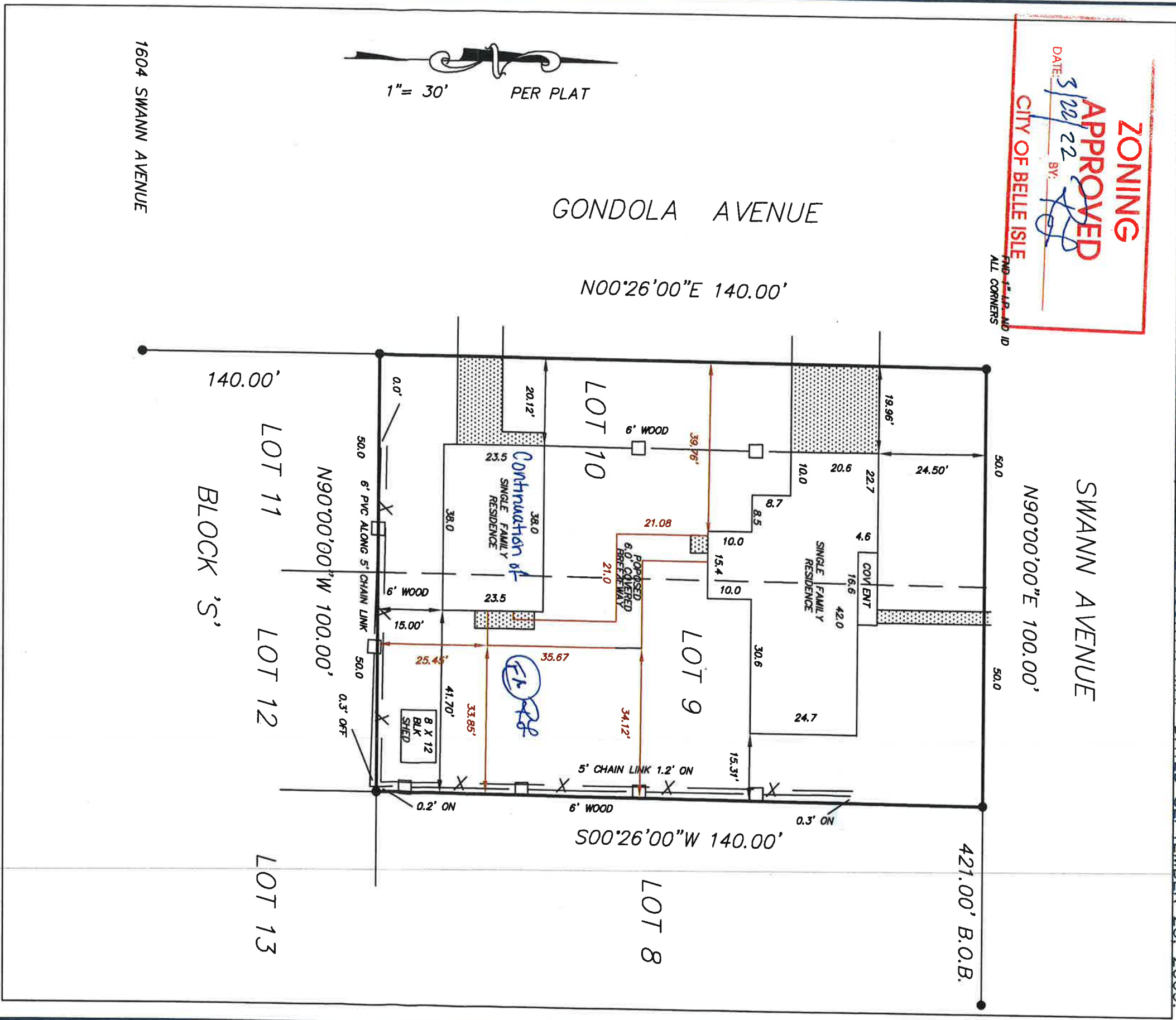
LEGAL DESCRIPTION: LOTS 9 & 10, BLOCK 'S', NELA ISLE, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 'M', PAGE 55, OF THE PUBLIC RECORDS OF ORANGE COUNTY, FLORIDA.

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

FIND 1" I.P. AND I.D. ALL CORNERS



- LEGEND**
- FOUND CONCRETE MONUMENT
 - FOUND PROPERTY CORNER
 - SET PROPERTY CORNER
 - PERMANENT CONTROL POINT
 - △ DELTA
 - △ AIR CONDITIONER
 - A/C BLOCK
 - B.O.B. BASIS OF BEARING
 - B.R.G. BEARING
 - CHD. CHORD
 - C.M. CONCRETE MONUMENT
 - CONC. CONCRETE
 - COR. CORNER
 - COV. COVERED
 - D. DESCRIBED
 - D.E. DRAINAGE EASEMENT
 - E. EAST
 - ENT. ENCLOSURE
 - ENCL. EASEMENT
 - ESMT. FOUND
 - FIND. IRON PIPE
 - I.P. IRON ROD
 - L. LENGTH
 - M. NORTH
 - N. NORTH
 - N/D. 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
 - TYP. TYPICAL
 - U.E. UTILITY EASEMENT
 - U.R.B. UTILITY RISER BOX
 - W. WEST
 - W.F. WOOD FENCE
 - W.M. WATER METER
 - CONC. 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 -0400

PREPARED FOR: FERNANDO ALTAMIRANO

PREPARED BY: CHARLES ROB DEFOOR
PROFESSIONAL LAND SURVEYOR
P.O. BOX 1472 GENOVA, FLA 32732 407-880-9811
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