



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

PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 106.3.3: 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." 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: ROOF: re-roof 5000 SF Asphalt shingles

Comments: None

Project Information

Address: 2835 Alsace Ct, Belle Isle, FL 32812
 Parcel ID: 18-23-30-4384-00-420
 Property Owner: Dixon, Andrew
 Phone Number: 407-468-9669

 Company Name: Pro Roofing & Associate, Inc.
 Contractor Name: Campos, Elmer
 License Number: CCC1328416
 Address: 3024 Kananwood Ct Suite 1008 Oviedo, FL 32765
 Phone Number: 407-542-5903

Permit Number: 2014-08-082

Date of Application: 08/26/2014

Date Permit Issued: 08/26/2014

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 \$95.00
 Screen Encl \$
 Shed \$
 Temp Pole \$
 Window(s) \$

SURCHARGE FEES

Surcharge Fee \$2.00
 Surcharge Fee \$2.00

TOTAL FEES \$129.00

Date Paid 8-26-14

CC or Check # MC

Amount Paid 129.00

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 BDscheduling@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.

For a copy of your permit, or to check inspection results, please visit <https://universalengineering.sharefile.com/ff094edc4-832d-44bd-9809-ect32f9e2e63>

login ID = cobi@universalengineering.com

password = universal13

PROJECT NUMBER 0115.1400186.0000

TASK NUMBER 03

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	<u>2014-08-082</u>
Property Owner	<u>DIXSON Andrew</u>
Address	<u>2835 Alsace Ct</u>
Nature of Improvement	<u>Re-roof</u>
Received Application	<u>8/26/14</u>
Sent for Stormwater Review	<u>N/A</u>
Stormwater Approved	
Sent for Zoning Review	<u>N/A</u>
Zoning Approved	
Applied for Variance	<u>N/A</u>
Variance Approved	
Sent to BO for Review	
Building Official Approved	
Comments	
1.	
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12.	



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

APPLICATION FOR ROOFING 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 OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

DATE OF APPLICATION: AUG 26, 2014 ROOF PERMIT NUMBER: 2014-08-082
 PLEASE PRINT. The undersigned hereby applies for a permit to make installations as indicated below:

Project Address 2835 ALSACE CT Belle Isle, FL 32809 32812
 Property Owner ANDREW DIXSON Phone 407.468.9669
 Property Owner's Mailing Address 2835 ALSACE CT City ORLANDO
 State FL Zip Code 32812 Parcel Id Number: 18-23-30-4384-00-420
 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 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: 5000 Number of Stories: 1 Job Valuation: \$ 12,900
 Type: Asphalt Shingles Metal Modified Bitumen Other: _____

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 *Elmer Campos* LICENSE # CCC 1328416
 LICENSE HOLDER NAME ELMER CAMPOS COMPANY NAME PRO ROOFING & ASSOICATES
 Street Address 3024 KANANWOOD CT SUITE 1008
 City OVIEDO State FL Zip Code 32765 Phone Number 407.542.5903
 Email Address CONTACTUS@CFPROROOFFING.COM

Building Official: _____ Date _____
 Verified Contractor's Licenses & Insurance are on file _____ Date _____

Zoning Fee \$ 30.00
 Permit Fee \$ 95.00
 Review Fee \$ 147 n/a
 3% Florida Surcharge \$ 4.00
 Total Permit Fee \$ 129.00

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 _____



Searches

Sales Search

Results

Property Record Card

My Favorites

Sign up for e-Notify

2835 Alsace Ct < 18-23-30-4384-00-420 >

Name(s)
 Dixson Andrew W
 Dixson Christy N
 Mailing Address On File
 2835 Alsace Ct
 Belle Isle, FL 32812-1056
 Incorrect Mailing Address?

Physical Street Address
 2835 Alsace Ct
 Postal City and Zipcode
 Orlando, FL 32812
 Property Use
 0103 - Single Fam Class III
 Municipality
 Belle Isle



302318438400420 08/28/2006

Click To Enlarge Or Upload...

Values, Exemptions and Taxes | Property Features | Sales Analysis | Location Info | Market Stats | Update Information | View Plat

Property Description

LAKE CONWAY ESTATES SECTION FOUR SECOND ADDITION 1/106 LOT 420

Total Land Area 14,449 sqft (+/-) | 0.33 acres (+/-) GIS Calculated Notice

Land

Land Use Code	Zoning	Land Units	Unit Price	Land Value	Class Unit Price	Class Value
0100 - Single Family	R-1-AA	1 LOT(S)	\$85,500.00	\$85,500	\$0.00	\$85,500

Page 1 of 1 (1 total records)

Buildings

Important Information		Structure	
Model Code:	01 - Single Fam Residence	Actual Year Built:	1967
Type Code:	0103 - Single Fam Class III	Beds:	5
Building Value:	\$101,141	Baths:	3.0
Estimated New Cost:	\$177,440	Floors:	1
		Gross Area:	3048 sqft
		Living Area:	2027 sqft
		Exterior Wall:	Concrete/Cinder Block
		Interior Wall:	Plastered

Page 1 of 1 (1 total records)

Extra Features

Description	Date Built	Units	XFOB Value
PL2 - Above Average Pool	01/01/1967	1 Unit(s)	\$6,000
FPL2 - Average Fireplace	05/17/1989	1 Unit(s)	\$2,500
WLCB - Wall Cb	01/01/1967	330 Unit(s)	\$4,950

Page 1 of 1 (3 total records)

This Data Printed on 08/26/2014 and System Data Last Refreshed on 08/25/2014

Site Notice • About Us • Contact Us • OCPAFL Home • Property Search • Exemption **FRAUD** Hotline
 Orange County Property Appraiser • 200 S. Orange Avenue, Suite 1700 • Orlando, FL 32801
 Office Hours: 8:00 a.m. to 5:00 p.m. Monday - Friday • Phone: 407.836.5044
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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

CertainTeed Corporation
1400 Union Meeting Road
Blue Bell, PA 19422

Evaluation Report 3532.09.05-R8
FL5444-R7

Date of Issuance: 09/22/2005
Revision 8: 05/05/2014

SCOPE:

This Evaluation Report is issued under Rule 61G20-3 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 2010 Florida Building Code.

DESCRIPTION: CertainTeed Asphalt Roofing Shingles.

LABELING: Labeling shall be in accordance with the requirements of the Accredited Quality Assurance Agency noted herein and FBC 1507.2.7.1.

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.

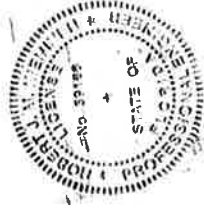
ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

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 11.

Prepared by:

Robert J.M. Nieminen, P.E.
Florida Registration No. 59166, Florida DCA AME1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 05/05/2014. 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 SYSTEMS EVALUATION:

1. SCOPE:

Product Category: Roofing
Sub-Category: Asphalt Shingles
Compliance Statement: CertainTeed Asphalt Roofing Shingles, as produced by CertainTeed Corporation, have demonstrated compliance with the following sections of the Florida Building Code and Florida Building Code, Residential Volume 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
1507.2.5, R905.2.4	Physical Properties	ASTM D3462	2007
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D3161, Class F	2006
1507.2.7.1, R905.2.6.1	Wind Resistance	ASTM D7158, Class H	2007

3. REFERENCES:

Entity	Examination	Reference	Date
UL (TST 1740)	ASTM D3161	94NK9632	05/15/1998
UL (TST 1740)	ASTM D3161	99NK26506	11/23/1999
UL (TST 1740)	ASTM D3161	03CA12702	05/27/2003
UL (TST 1740)	ASTM D3161	03CA12702	06/16/2003
UL (TST 1740)	ASTM D3161	03NK29847	10/03/2003
UL (TST 1740)	ASTM D3161	04CA11329	05/24/2004
UL (TST 1740)	ASTM D3161	04CA32986	12/03/2004
UL (TST 1740)	ASTM D3161	05NK07049	04/15/2005
UL (TST 1740)	ASTM D3161	05NK16778	05/12/2005
UL (TST 1740)	ASTM D3161	05CA16778	05/12/2005
UL (TST 1740)	ASTM D3161	05NK14836	05/22/2005
UL (TST 1740)	ASTM D3161	05NK22800	06/22/2005
UL (TST 1740)	ASTM D3462	R684	09/21/2005
UL (TST 1740)	ASTM D7158	05NK08037	06/28/2006
UL (TST 1740)	ASTM D3161 & D3462	09CA28873	07/23/2009
UL (TST 1740)	ASTM D3462	10CA41303	10/07/2010
UL (TST 1740)	ASTM D3161	10CA41303	10/08/2010
UL (TST 1740)	ASTM D7158	10CA41303	10/27/2010
UL (TST 1740)	ASTM D3161 & D3462	10CA44960	11/11/2010
UL LLC (TST 9628)	ASTM D3161, D3462 & D7158	13CA32897	11/21/2013
UL LLC (TST 9628)	ASTM D3161, D3462	TFWZ.R684	04/22/2014
UL LLC (TST 9628)	ASTM D7158	TGAH.R684	04/22/2014
UL LLC (QUA 9625)	Quality Control	Service Confirmation	Exp. 02/13/2016

4. PRODUCT DESCRIPTION:

- 4.1 CT20™, XT™ 25, XT™ 30 and XT™ 30 IR are fiberglass reinforced, 3-tab asphalt roof shingles.
- 4.2 Carriage House Shangle®, Centennial Slate™, Grand Manor Shangle®, Landmark™, Landmark™ IR, Landmark™ Pro, Landmark™ Premium, Landmark™ TL, Landmark™ Solaris and Landmark™ Solaris IR are fiberglass reinforced, laminated asphalt roof shingles.
- 4.3 Presidential Shake™, Presidential Shake™ IR and Presidential Shake TL™ are fiberglass reinforced, architectural asphalt roof shingles.
- 4.4 Hatteras™, Highland Slate™ and Highland Slate™ IR are fiberglass reinforced, 4-tab asphalt roof shingles.
- 4.5 Patriot™ is a fiberglass reinforced asphalt roof strip-shingle (with no cut-outs) providing a laminated appearance through an intermittent shadow line with contrasting blend drops for color definition.
- 4.6 Presidential Accessory, Accessory for Hatteras, Shangle Ridge™, Shadow Ridge™, Cedar Crest™ and Cedar Crest™ IR are fiberglass reinforced accessory shingles for hip and ridge installation.
- 4.7 Any of the above listed shingles may be produced in AR (algae resistant) versions.

5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in the HVHZ
- 5.2 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.3 Wind Classification:
 - 5.3.1 All shingles noted herein are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F and/or ASTM D7158, Class H, indicating the shingles are acceptable for use in all wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph). Refer to Section 6 for installation requirements to meet this wind rating.
 - 5.3.2 Presidential Accessory, Accessory for Hatteras, Shangle Ridge, Shadow Ridge and Cedar Crest hip & ridge shingles have been evaluated in accordance with ASTM D3161, Class F when BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant, applied as specified in manufacturer's application instructions, indicating the shingles are acceptable for use in all wind zones up to $V_{asd} = 150$ mph ($V_{ult} = 194$ mph).
 - 5.3.3 Classification by ASTM D7158 applies to exposure category B or C and a building height of 60 feet or less. Calculations by a qualified design professional are required for conditions outside these limitations. Contact the shingle manufacturer for data specific to each shingle.
 - 5.3.3.1 Analysis in accordance with ASTM D7158 indicates the measured uplift resistance (R_T) for the CertainTeed asphalt roofing shingles listed in Section 4.1 through 4.5 exceeds the calculated uplift force (F_T) at a maximum design wind speed of $V_{asd} = 150$ mph ($V_{ult} = 194$ mph) for residential buildings located in Exposure D conditions with no topographical variations (flat terrain) having a mean roof height less than or equal to 60 feet.
- 5.4 The shingles are permissible under Code for installation in these conditions using the installation procedures detailed in this Evaluation Report and CertainTeed minimum requirements, subject to minimum codified fastening requirements established within any local jurisdiction, which shall take precedence.
- 5.4 All products in the roof assembly shall have quality assurance audits in accordance with the Florida Building Code and F.A.C. Rule 61G20-3.

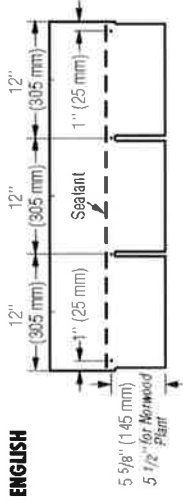
6. INSTALLATION:

- 6.1 Roof deck, slope, underlayment and fasteners shall comply with FBC 1507.2 / R905.2 and the shingle manufacturer's minimum requirements.
- 6.1.1 Underlayment shall be acceptable to CertainTeed Corporation and shall hold current Florida Statewide Product Approval, or be Locally Approved per Rule 61G20-3, per FBC Sections 1507.2.3, 1507.2.4 or R905.2.3.
- 6.2 Installation of asphalt shingles shall comply with the manufacturer's current published instructions, using minimum four (4) nails per shingle in accordance with FBC 1507.2.7 or Section R905.2.6 and the minimum requirements herein.
- 6.2.1 Fasteners shall be in accordance with manufacturer's published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.
- 6.2.2 Where the roof slope exceeds 21 units vertical in 12 units horizontal, use the "Steep Slope" directions.
- 6.3 CertainTeed asphalt shingles are acceptable for use in reroof (tear-off) or recover applications, subject to the limitations set forth in FBC Section 1510 and CertainTeed published installation instructions.

6.3.1 CI20™, XI™ 25, XI™ 30, XI™ 30, XI™ 30 IR:

LOW AND STANDARD SLOPE

ENGLISH



METRIC

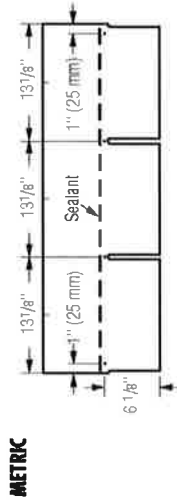


Figure 11-3: Use *four nails for every full shingle.*

STEP SLOPE

Use *four nails and six spots of asphalt roofing cement** for every full shingle (Figure 11-4). Asphalt roofing cement meeting ASTM D4586 Type II is suggested.

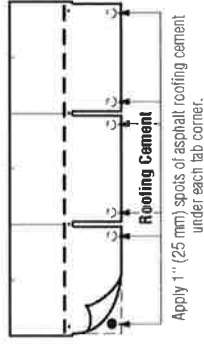


Figure 11-4: Use *four nails and six spots of asphalt cement on steep slopes.*
 *CAUTION: Excessive use of roofing cement can cause shingles to blister.

6.3.1.1 Hip & Ridge: Cut Shingles

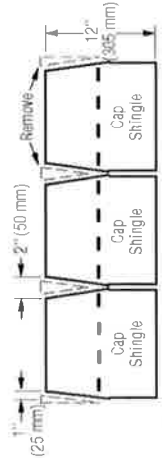


Figure 11-24: *Cut tabs, then trim back to make cap shingles (English dimensions shown).*

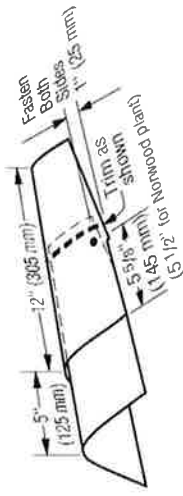


Figure 11-25: *Installation of caps along the hips and ridges.*

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant, in accordance with manufacturer's instructions.

6.3.2

Carriage House Shangle®, Centennial Slate™ and Grand Manor Shangle®:

LOW AND STANDARD SLOPE

Use five nails for every full Shangle.

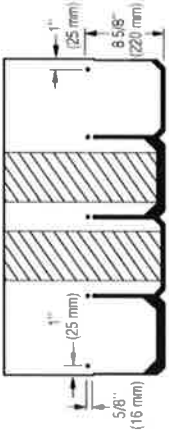


Figure 17-4: Use five nails for every full Grand Manor Shangle, Carriage House Shangle, or Centennial Slate.

STEP SLOPE

Use seven nails and three spots of asphalt roofing cement for every full Grand Manor Shangle. Use five nails and three spots of asphalt roofing cement for every full Carriage House Shangle and Centennial Slate. Apply asphalt roofing cement 1" (25 mm) from edge of shingle (Figure 17-5). Asphalt roofing cement meeting ASTM D-4586 Type II is suggested.

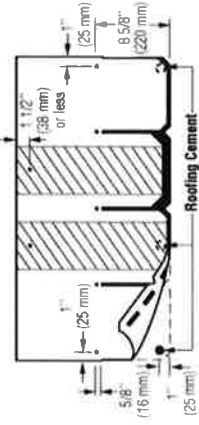


Figure 17-5: When installing Grand Manor Shangles on steep slopes, use seven nails and three spots of asphalt roofing cement.

6.3.2.1 Hip & Ridge: Shangle® Ridge

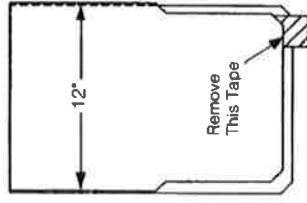


Figure 17-18: Shangle® Ridge.

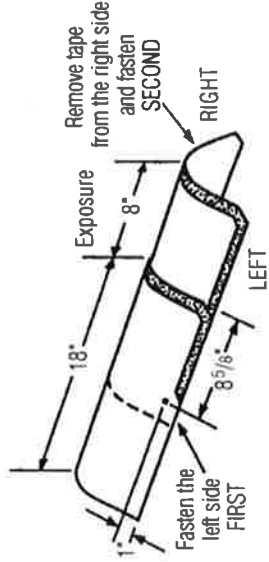


Figure 17-19: Installation of Shangle® Ridge shingles on hips and ridges.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.3

Landmark™, Landmark™ IR, Landmark™ Pro (formerly Landmark™ Plus), Landmark™ Premium, Landmark™ TL, Landmark™ Solaris, Landmark™ Solaris IR:

LOW AND STANDARD SLOPE

LANDMARK TL

METRIC DIMENSIONS

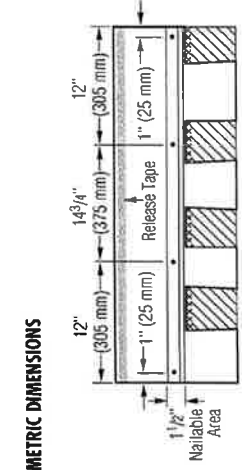


Figure 13-4: Use four nails for every full shingle.

STEEP SLOPE

Use six nails and four spots of asphalt roofing cement for every full laminated shingle. See below: Asphalt roofing cement should meet ASTM D4586 Type II. Apply 1" spots of asphalt roofing cement under each corner and at about 12" to 13" in from each edge.

METRIC DIMENSIONS

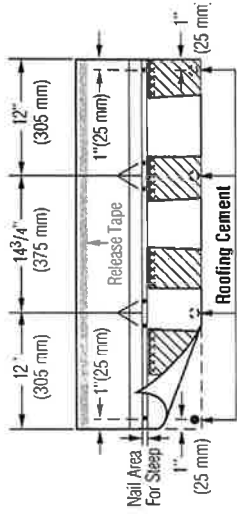


Figure 13-5: Use six nails and four spots of asphalt roofing cement on steep slopes.

6.3.3.1 Hip & Ridge, Option 1: Shadow Ridge™

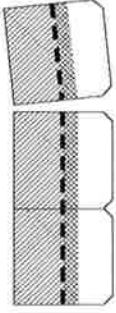
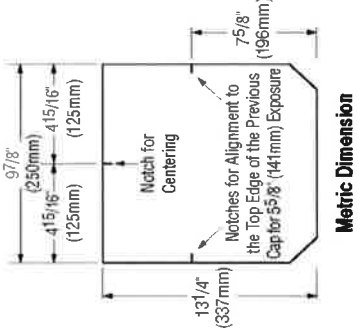
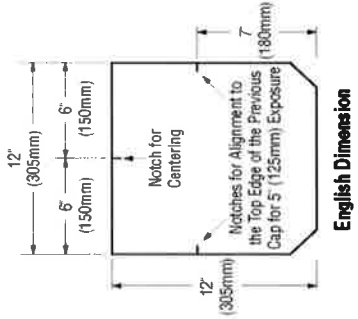


Figure 13-16: Shadow Ridge accessory shingles detach easily from three-piece units to make 72 individual cap pieces.



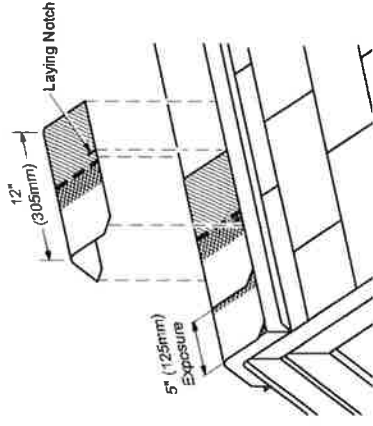
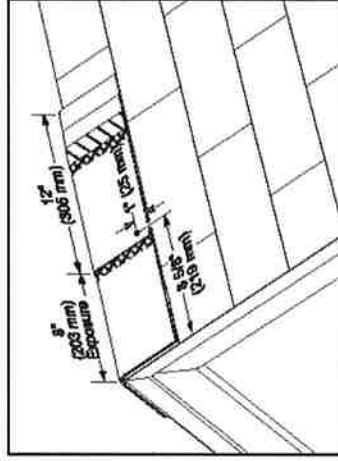


Figure 13-20: Use laying notches to center shingles on hips and ridges, and to locate the correct exposure.

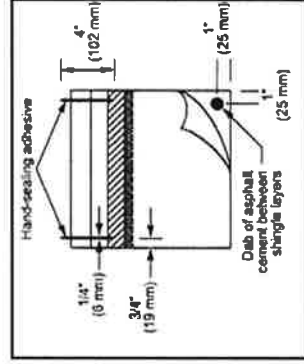
Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.3.2 Hip & Ridge, Option 2: Cedar Crest™, Cedar Crest™ IR

Use two fasteners per shingle. For the starter shingle, place fastener 1-inch from each side edge and about 2-inch up from the starter shingle's exposed butt edge. For each full Cedar Crest shingle, place fasteners 8-5/8-inch up from its exposed butt edge and 1-inch from each side edge.



Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant to hand-seal Cedar Crest shingles. Apply NP 1 or PL adhesive from the middle of the shingle's raised overlay on the top piece and extending approximately 4-inch along the sides of the headlap along a line 3/4 to 1-inch from each side of the shingle's headlap. Immediately align and apply the overlying shingle, gently pressing tab sides into the adhesive, and install nails. To secure the other side, apply a 1-inch diameter spot of NP 1 or PL adhesive between the shingle layers.



6.3.4 **Presidential Shake™, Presidential Shake™ IR, Presidential Shake TL™:**

LOW AND STANDARD SLOPE:

For low and standard slopes, use five nails for each full Presidential shingle as shown below.

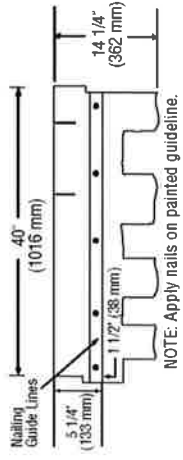


Figure 16-6: Fastening Presidential and Presidential TL Shake shingles on low and standard slopes.

STEEP SLOPE:

For steep slopes, use nine nails for each full Presidential shingle and apply 1" diameter spots of asphalt roofing cement under each shingle tab. After applying 5 nails in between the nailing guide lines, apply 4 nails 1" above tab cutouts making certain tabs of overlying shingle cover nails.

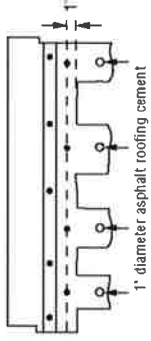


Figure 16-7: Fastening Presidential and Presidential TL Shake shingles on steep slopes.

6.3.4.1 **Hip & Ridge, Option 1: Presidential Accessory**

PRESIDENTIAL ACCESSORY

Presidential accessory shingles can be used for covering hips and ridges. Apply shingles up to the ridge (expose no more than 7" from the bottom edge of the "tooth." Fasten each accessory with two fasteners. The fasteners must be 3/4" long or longer, so they penetrate either 3/4" into the deck or completely through the deck. Presidential accessory comes in two different sizes: Accessory produced in Birmingham, AL is 12" x 12"; Portland, OR produces 9 7/8" x 13 1/4" accessory.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.4.2 **Hip & Ridge, Option 2: Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR hip and ridge shingles.**

6.3.5 **Hatteras™:**

LOW, STANDARD AND STEEP SLOPE:

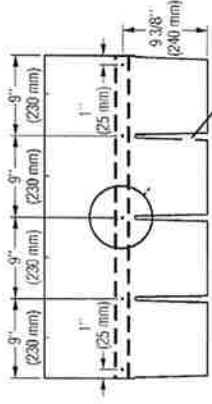


Figure 15-3: Fastening Hatteras Shingles on Low and Standard Slopes

For low and standard slopes, use five nails for each full Hatteras shingle as shown above.

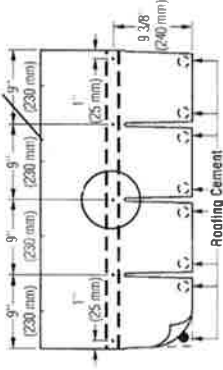


Figure 15-1: Fastening Hatteras Shingles on Steep Slopes

For steep slopes, use five nails and eight spots of asphalt roofing cement for each full Hatteras shingle as shown above. Apply 1" (25mm) diameter spots of roofing cement (ASTM D 4586 Type II suggested) under each tab corner. Press shingle into place; do not expose cement.

CAUTION: Too much roofing cement can cause shingles to blister.

6.3.5.1 Hip & Ridge, Option 1: Accessory for Hatteras

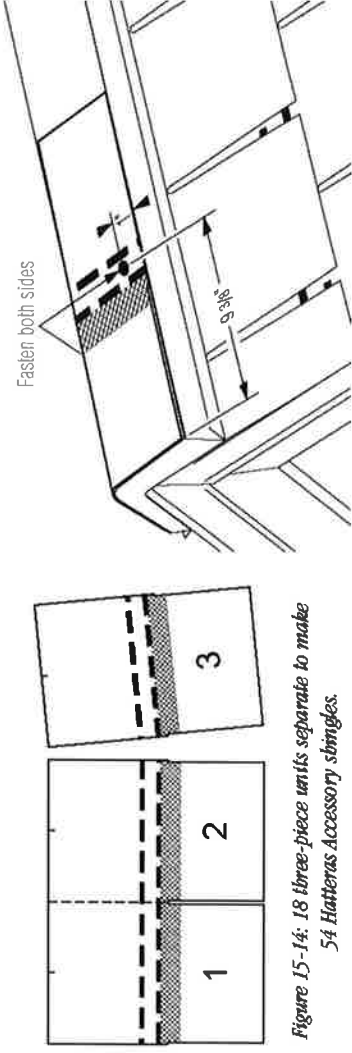


Figure 15-14: 18 three-piece units separate to make 54 Hatteras Accessory shingles.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.5.2 Hip & Ridge, Option 2: Cut Hatteras Shingles

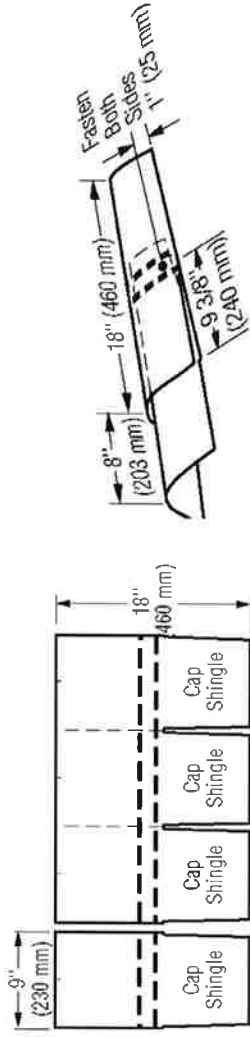


Figure 15-20: Cut Hatteras shingles to make cover cap.

Figure 15-21: Installation of caps along hips and ridges.

Note: For ASTM D3161 - Class F, use BASF Sonolastic NP 1 adhesive or Henkel PL® Polyurethane Roof & Flashing Sealant in accordance with manufacturer's instructions.

6.3.6 **Highland Slate™, Highland Slate™ IR:**

LOW AND STANDARD SLOPE

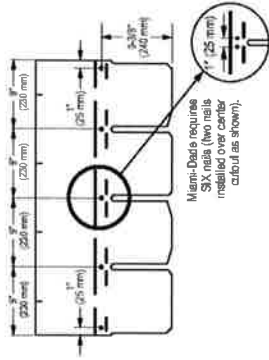


Figure 11-3: Use FIVE nails for every Highland Slate shingle.

STEP SLOPE

Use FIVE nails and EIGHT spots of asphalt roofing cement* for each full Highland Slate shingle. For Miami-Dade, SIX nails are required. Apply 1" diameter spots of asphalt roofing cement under each tab corner. Asphalt roofing cement meeting ASTM D-6586 Type II is suggested.

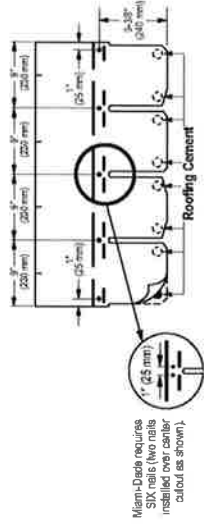


Figure 11-3a: Use FIVE nails and eight spots of asphalt roofing cement under each tab corner.

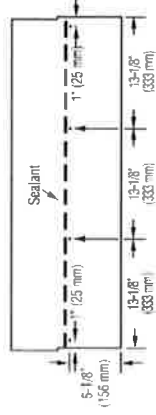
*CAUTION: Excessive use of roofing cement can cause shingles to blister.

6.3.6.1 Hip & Ridge, Option 1: Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR or Shangle Ridge™ hip and ridge shingles.

6.3.7 **Patriot™:**

LOW AND STANDARD SLOPE

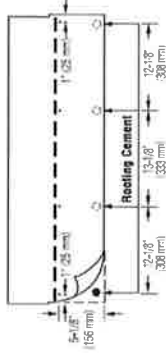
Use FOUR nails for every full shingle located as shown below.



STEP SLOPE

Use FOUR nails and four spots of asphalt roofing cement for every full shingle as shown below. Asphalt roofing cement meeting ASTM D-6586 Type II is suggested. Apply 1" (25 mm) spots of asphalt roofing cement as shown.

CAUTION: Excessive use of roofing cement can cause shingles to blister.



Hip & Ridge: Refer to instructions herein for Cedar Crest™, Cedar Crest™ IR, Shadow Ridge™ or Shangle Ridge™ hip and ridge shingles.



7. LABELING:

- 7.1 Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.
- 7.2 Asphalt shingle wrappers shall indicate compliance with one of the required classifications detailed in FBC Table 1507.2.7.1 / R905.2.6.1.

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 named QA entity for information on which plants produce products covered by Florida Rule 61G20-3 QA requirements.

10. QUALITY ASSURANCE ENTITY:

UL LLC – QUA9625; (414) 248-6409; karen.buchmann@us.ul.com

- END OF EVALUATION REPORT -



Product Approval
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

FL #

FL5444-R7

Application Type

Revision

Code Version

2010

Application Status

Approved

Comments

Archived

Product Manufacturer
Address/Phone/Email

CertainTeed Corporation-Roofing
PO Box 1100
1400 Union Meeting Rd
Blue Bell, PA 19422
(215) 274-2350
Steven.T.Lawrey@saint-gobain.com

Authorized Signature

Steven Lawrey
Steven.T.Lawrey@saint-gobain.com

Technical Representative
Address/Phone/Email

Steven Lawrey
1400 Union Meeting Road
Blue Bell, PA 19422
(215) 274-2425
Steven.T.Lawrey@saint-gobain.com

Quality Assurance Representative
Address/Phone/Email

Category
Subcategory

Roofing
Asphalt Shingles

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

Robert Nieminen

Florida License

PE-59166

Quality Assurance Entity

UL LLC

Quality Assurance Contract Expiration Date

07/03/2017

Validated By

John W. Knezevich, PE

✓ Validation Checklist - Hardcopy Received

Certificate of Independence

[FL5444_R7_COI_2014_04_COI_Nieminen.pdf](#)

Referenced Standard and Year (of Standard)

Standard	Year
ASTM D3161, Class F	2006
ASTM D3462	2007
ASTM D7158, Class H	2007

Equivalence of Product Standards
Certified By

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted

04/29/2014

Date Validated

05/05/2014

Date Pending FBC Approval

05/07/2014

Date Approved

06/23/2014

Summary of Products

FL #	Model, Number or Name	Description
5444.1	CertainTeed Asphalt Roofing Shingles	3-tab, 4-tab, strip (no-cut-outs), laminated and architectural asphalt roof shingles
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: N/A Design Pressure: N/A Other: Refer to ER Section 5 for Limits of Use		
Installation Instructions FL5444 R7 II 2014_05 FINAL ER CERTAINTeed Asphalt Shingle_FL5444-R7.pdf Verified By: Robert Nieminen, PE PE-59166 Created by Independent Third Party: Yes Evaluation Reports FL5444 R7 AE 2014_05 FINAL ER CERTAINTeed Asphalt Shingle_FL5444-R7.pdf Created by Independent Third Party: Yes		

[Back](#)

[Next](#)

Contact Us :: [1940 North Monroe Street, Tallahassee, FL 32399](#) Phone: 850-487-1824

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Product Approval Accepts:





SEMINOLE COUNTY BUSINESS TAX RECEIPT

RAY VALDES, SEMINOLE COUNTY TAX COLLECTOR

PO Box 630 ▪ Sanford, FL 32772-0630 ▪ Telephone: 407-665-1000

www.seminoletax.org

VALID THROUGH 09/30/15

**PRO ROOFING & ASSOCIATE INC
3024 KANANWOOD CT #1008
OVIEDO, FL 32765**

Account #: 173749

ELMERA A CAMPOS (OFFICER)
REGULATED
License # - CCC1328416
Qualifier- ELMER ANTONIO CAMPOS

Receipt #: WEB#2014073009714

Amount Paid: \$ 45.00

Date Paid: 07/30/2014



SEMINOLE COUNTY BUSINESS TAX RECEIPT

RAY VALDES, SEMINOLE COUNTY TAX COLLECTOR

PO Box 630 ▪ Sanford, FL 32772-0630 ▪ Telephone: 407-665-1000

www.seminoletax.org

VALID THROUGH 09/30/15

**PRO ROOFING & ASSOCIATE INC
3024 KANANWOOD CT #1008
OVIDO, FL 32765**

Account #: 173749

**REGULATED
License # - CCC1328416
Qualifier- ELMER ANTONIO CAMPOS**

ELMERA A CAMPOS (OFFICER)

Receipt #: WEB#2014073009714

Amount Paid: \$ 45.00

Date Paid: 07/30/2014

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



LICENSE NUMBER	
CCC1328416	

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2016

CAMPOS, ELMER ANTONIO
PRO ROOFING & ASSOCIATE INC
3024 KANANWOOD CT STE 1008 OVIEDO F
OVIEDO FL 32765



ISSUED: 07/13/2014 DISPLAY AS REQUIRED BY LAW SEQ # L1407130001170



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
8/26/2014

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		CONTACT DeDe Done1son	
Lassiter-Ware Insurance of Maitland		PHONE (A/C, No. Ext.): (800) 845-8437	FAX (A/C, No.): (888) 883-8680
2701 Maitland Center Parkway		E-MAIL ADDRESS:	
Suite 125		INSURER(S) AFFORDING COVERAGE	
Maitland FL 32751		INSURER A: Southern Owners Insurance Co.	NAIC # 10190
INSURED		INSURER B: Travelers Indemnity Co of CT	25682
Pro Roofing & Associates, Inc		INSURER C:	
3024 Kananwood Court		INSURER D:	
Suite # 1008		INSURER E:	
Oviedo FL 32765		INSURER F:	

COVERAGES

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 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					EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR	<input checked="" type="checkbox"/>	72064632-14	1/12/2014	1/12/2015	DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000 MED EXP. (Any one person) \$ 10,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
B	AUTOMOBILE LIABILITY					
	<input checked="" type="checkbox"/> ANY AUTO					COMBINED SINGLE LIMIT \$ 500,000
	<input type="checkbox"/> ALL OWNED AUTOS					BODILY INJURY (Per person) \$
	<input checked="" type="checkbox"/> HIRED AUTOS	<input checked="" type="checkbox"/>	BA-5B126553-14-SBL	3/12/2014	3/12/2015	BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ PIP \$ 10,000
	UMBRELLA LIAB					EACH OCCURRENCE \$
	EXCESS LIAB					AGGREGATE \$
	DED. RETENTION \$					
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY					
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/>				WC STATUS TORT LIMITS \$
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER

COBpermits@universalengin
City of Belle Isle
1600 Nela Avenue
Orlando, FL 32809

CANCELLATION

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

Matt Ostrander/SHEAROR

ACORD 25 (2010/05)

INS025 (2010/05).01

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CITY OF BELLE ISLE, FLORIDA
Universal Engineering Sciences 3532 Maggie Blvd., Orlando, FL 32811
Tel 407-581-8161 * Fax 407-581-0313 * www.universaleengineering.com

POWER OF ATTORNEY

Date: AUG 26, 2014 Permit #: _____

I hereby name and appoint MICHAEL WITHING of _____

PRO ROOFING & ASSOCIATES (company name) to be my lawful attorney-in-fact to act for

me and apply to the City of Belle Isle Building Department for a REROOF permit

for work to be performed at the following location:
2835 ALSACE (street address) Belle Isle, FL 32809 32812 and

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

Certified Contractor's Printed Name: ELMER CAMPOS

License Number: CGG1328416

Certified Contractor's Signature: *Elmer Campos*

.....

The foregoing instrument was acknowledged before me this 26th days of Aug of 20 14

by Elmer Campos who is personally known to me or who produced

_____ as identification and who did not take an oath.

State of Florida
County of Orange

Sharon Sanchez
Notary Public, Orange County, Florida

