



City of Belle Isle

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

PERMIT CARD - PLEASE POST AT JOB SITE

THIS DOCUMENT BECOMES YOUR PERMIT WHEN PROPERLY VALIDATED

Per FBC 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." 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: ELECTRICAL: change out panel & add 2 switches
one stove one disposal

Comments: None

Project Information

Address: 7221 Conway Circle, Belle Isle, FL 32809
Parcel ID: 25-29-29-5884-15-200
Property Owner: Copeland, Kelly
Phone Number: 407 467 9520

Company Name: MDP Electric LLC
Contractor Name: Platzer, Michael
License Number: EC13006176
Address: 824 Glen Arden Way, Altamonte Springs, FL 32701
Phone Number: 321 303 2487

Permit Number: 2015-11-021

Date of Application: 11/17/2014

Date Permit Issued: 11/18/2014

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

School \$
Traffic \$

ZONING FEES

Zoning Fee \$

UNIVERSAL ENG - BUILDING FEES

Cert of Occ \$
Demo \$
Building \$
Fence \$
Driveway \$
Shed \$
Window(s) \$
Door(s) \$
PrePower \$
Electrical \$109.50
Temp Pole \$
Plumbing \$
Mechanical \$
Gas \$
Roofing \$
Boat Dock \$
Screen Encl \$
Swimming Pool \$
Sign \$

SURCHARGE FEES

Surcharge Fee \$2.00
Surcharge Fee \$2.00

TOTAL FEES \$113.50

Date Paid 12-12-14

CC of Check # AMEX 32487

Amount Paid 113.50

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 _____ (Footing/Foundation)

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

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.

CITY OF BELLE ISLE
Permit Application Review Sheet

Permit Number	2015-11-021
Property Owner	Copeland, Kelly
Address	7221 Conway Circle
Nature of Improvement	Electric: change panel add circuit for disposal
Received Application	11-17-14
Sent for Stormwater Review	/
Stormwater Approved	/
Sent for Zoning Review	/
Zoning Approved	/
Applied for Variance	
Variance Approved	
Sent to BO for Review	11-17-14
Building Official Approved	AP 11-18-14
Comments	
1.	Susan 11-17-14 FLGCLIC ✓ review w/ w/ff 44234
2.	Susan 12-12-14 HEED GL & WGC locater get it ✓
3.	
4.	
5.	
6.	
7.	
8.	
9.	
10.	
11.	
12.	



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RECEIVED
11-17-14

APPLICATION FOR ELECTRICAL 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: 11/13/2014

The undersigned hereby applies for a permit to make electrical installations as indicated below. PLEASE PRINT

PERMIT NUMBER 2015-11-021

Project Address 7221 Conway Circle

Belle Isle FL 32809 32812

Property Owner Kelly Copeland

Phone _____

Property Owner's Mailing Address 7221 Conway Circle

City Belle Isle

State FL _____ Zip Code 32809

Parcel (d) Number: 25-23-29-5884-15-200

To obtain this information, please visit <http://www.ospath.com/Search/ParcelSearch.asp>

Class of Building: Old New Addition Alteration Repair Commercial Low Voltage New Other Existing

Type of Work: New Alteration Repair Commercial Low Voltage New Other Existing

INDICATE THE QUANTITY OF ALL EQUIPMENT TO BE INSTALLED

Dishwasher _____ Exhaust Fan _____ Disposal 1 _____ Water Heater _____
 Hood Fan _____ Dryer _____ Paddle Fan _____ Outlets _____
 Fixtures _____ Spa _____ Pool _____ Switches 1 _____
 Electric Signs _____ Meter Reset _____ Low Voltage _____ Stoves 1 _____
 Pumps _____ Motors _____ Air Conditioning (tons) _____ Furnace (KW) _____

Temporary Construction Pole _____ One (1) New Meter Service _____ Amperage/Voltage/Phase _____

Meter Service Upgrade from _____ to _____ Amperage/Voltage/Phase _____ = _____ Difference in Size _____

Relocate Existing Meter Service (No Service Size Change) 150

Other: Replace FPE Panel installing new circuit for disposal and adding 2 new features in kitchen.

PERMIT FEE BASED ON METER SERVICE SIZE SCHEDULE _____ \$
 (IF NO METER SERVICE WORK BEING DONE, USE VALUATION OF JOB FOR PERMIT FEE)

VALUATION OF JOB (VALUATION OF ALL MATERIALS, LABOR, AND FIXTURES INSTALLED \$ 2100.00) 2100.

Building Official: EP Date 11-18-14
 Verified Contractor's Licenses & Insurance are on file EMD Date 12-12-14

Permit Fee = \$ _____
 Review Fee = \$ 109.50
 3% FL Surcharge = \$ 400
 TOTAL Permit = \$ 113.50

I hereby certify that the above is true and correct to the best of my knowledge.

I hereby 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.

LICENSE HOLDER SIGNATURE _____ LICENSE # EC1306178

LICENSE HOLDER NAME Michael Platzer COMPANY NAME MDP Electric, LLC

Street Address 824 Glen Arden Way

City Altamonte Springs State FL _____ Zip Code 32701 Phone Number 321-303-2487

Email Address mdp@electric@aol.com

NOTE: The Building Permit Number is required if the Electrical Installation is associated with any construction or alteration where a Building Permit has been issued.

Building Permit Number _____

Susan Manchester

From: Angel Perez
Sent: Tuesday, November 18, 2014 11:56 AM
To: Susan Manchester
Subject: RE: Remote Review for 2015-11-021 Electrical App for 7221 Conway Circle

Approved. Go ahead and process.
Thank you...angel

Sent from my Galaxy S@III

----- Original message -----
From: Susan Manchester
Date: 11/18/2014 8:47 AM (GMT-05:00)
To: Angel Perez
Cc: CobiPermits
Subject: Remote Review for 2015-11-021 Electrical App for 7221 Conway Circle

Remote Review for 2015-11-021 Electrical App for 7221 Conway Circle.

Thank you,

Susan Manchester
Universal Engineering Sciences, Inc.
3532 Maggie Blvd.
Orlando, FL 32811
Phone: 407-581-8161
Fax: 407-581-0313
Email: smanchester@universalengineering.com





COBI Permit Fee Calculation Form



Reviewer Signature: AP Date: 11-18-14

(SM)

Permit Type:	<u>Elec</u>	Job Cost:	\$ <u>2100</u>
Permit Fee:	\$ <u>73</u>		
Plans Review Fee:	\$ <u>36.50</u>		
		(50% of permit fee - excluding ReRoofs)	
1.5% State Fee:	\$ <u>2.-</u>		
1.5% State Fee:	\$ <u>2.-</u>		
TOTAL BUILDING FEE:	\$ <u>113.50</u>		(does not include Zoning fees or Deposits)

Note: Total gets doubled for SWO/AFT permits