



# 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)

## 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:** \_\_\_\_\_ **ROOF PERMIT NUMBER** \_\_\_\_\_

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

Project Address \_\_\_\_\_, Belle Isle, FL \_\_\_\_\_ 32809 \_\_\_\_\_ 32812

Property Owner \_\_\_\_\_ Phone \_\_\_\_\_

Property Owner's Mailing Address \_\_\_\_\_ City \_\_\_\_\_

State \_\_\_\_\_ Zip Code \_\_\_\_\_ **Parcel Id Number:** \_\_\_\_\_

**REQUIRED!** To obtain this information, please visit <http://www.ocpafi.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 Form – **NOTE: installation instructions must be posted on-site before your first inspection!!**

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

**Roof Square Footage:** \_\_\_\_\_ **Number of Stories:** \_\_\_\_\_ **Job Valuation: \$** \_\_\_\_\_

**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 \_\_\_\_\_ LICENSE # \_\_\_\_\_

LICENSE HOLDER NAME \_\_\_\_\_ COMPANY NAME \_\_\_\_\_

Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone Number \_\_\_\_\_

**Email Address** \_\_\_\_\_

Zoning Fee \$ \_\_\_\_\_

Building Fee \$ \_\_\_\_\_

Review Fee \$ \_\_\_\_\_

1% BCAIB Fee \$ \_\_\_\_\_

1.5% DCA Fee \$ \_\_\_\_\_

Total Permit Fee \$ \_\_\_\_\_

**Building Official:** \_\_\_\_\_ **Date** \_\_\_\_\_

Verified Contractor's Licenses & Insurance are on file \_\_\_\_\_ Date \_\_\_\_\_

**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 \_\_\_\_\_