

# COMMERCIAL

BUILDING PERMIT APPLICATION-VOLUSIA COUNTY FLA.

Application Received

Date \_\_\_\_\_ Time \_\_\_\_\_

By \_\_\_\_\_

PUBLIC WATER WELL#

7109  
STORM WATER MNGMT.#

USE PERMIT#

BUILDING PERMIT#

IMPORTANT --- INDICATE THE TYPE PROJECT OF BUILDING PLANNED

- () New Building ( ) Repair Fire Damage ( ) Renovation of Existing Business  
 ( ) Attached Addition ( ) Hi-Rise Condominium ( ) Alterations-to Change Occupancy  
 ( ) Detached Addition ( ) Other--(Describe)

- OWNERS NAME: ROBERT E. JOHNSON  
OWNERS PRESENT ADDRESS: 1676 PROVIDENCE BLVD, DELT. FL.
- ARCHITECT: JERRY FERRARA PH#: (904) 734-8792  
ENGINEER: JERRY FERRARA PH#: (904) 734-8792
- LOCATION OF PROPERTY: 1670 PROVIDENCE BLVD, DELTONA, FL.  
and directions to job site; 1
- CONTRACTOR/COMPANY NAME: RAMCO BUILDERS INC. PH#: (305) 574-8442  
COMP. CARD # 83010276 STATE REGISTRATION # RB0012237 STATE CERT. #  
NAME of License Holder For Company ROBERT RAMCO 0201 23HTC 3.00
- LEGAL DESCRIPTION: LOT 57+58 BLOCK 500 UNIT 14 0032 09/14 0201 02CM BLD 50-00
- PARCEL NO.: 8130-14-07-0570 On current Tax Receipt or obtain from TAX ASSESSOR.
- WILL THE FLOOR LEVEL be at least 12 inches above the CROWN OF THE ROAD? () YES/NO  
IF ANSWER IS "NO", YOU MUST APPLY FOR A VARIANCE TO CROWN OF ROAD ORDINANCE.
- WILL THIS STRUCTURE be located in a FLOOD HAZARD ZONE?? YES ( ) NO ()  
DELTONA
- TYPE SEWAGE?: UTIL. D.E.R. APPROVAL # \_\_\_\_\_ SEPTIC TANK PERMIT # N/A.
- PUBLIC/CENTRAL WATER SUPPLY () PUBLIC OR PRIVATE WATER WELL ( ) ATTACH WELL APPLIC.
- TYPE FLOOR CONST. A<sup>3</sup> CONC. TYPE ROOF CONST. PREENG. TRUSSES  
TYPE EXTERIOR WALLS 8" C.B.S. BUILDING TYPE I II III IV V VI  
CLASS/OCCUPANCY GROUP \_\_\_\_\_ NUMBER OF UNITS PLANNED 1

LOT AND ZONING INFORMATION:

Proposed use of Building or Addition? OFFICES.  
 NUMBER OF STORIES? 1 BUILDING WIDTH 76'-0" LENGTH 66'-10" HEIGHT 18'-4"  
 MAX. number of Employees on shift? 8 ZONING CLASSIFICATION B DATE \_\_\_\_\_  
 APPROVAL BY: Ramsey Jata REMARKS governor application and site plan approved

- EQUIPMENT: (check items to be installed)  
 Fire Sprinkler System ( ) Elevator(s) ( ) Commercial Kitchen Equip. ( ) Exhaust Fan ( )  
 Irrigation Sprinkler System ( ) Water Heater/Boiler () Air Conditioning ()
- TYPE HEATING: electric () Gas ( ) Other ( ) TYPE COOLING: Electric () Other ( )
- COST OF MECHANICAL INSTALLATION: \$ 7000. COST OF HVAC SYSTEM: \_\_\_\_\_
- NEW ELECTRICAL SERVICE SIZE? 200 AMP OLD ELECTRICAL SERVICE SIZE? N/A.  
For more than one (1) size service, give the electrical plan page #.

CONTRACTOR/COMPANY NAME

CONTRACTOR/COMPANY NAME	INDIVIDUAL WHO QUALIFIES COMPANY
ELECTRICAL <u>PAT'S ELECT.</u>	LIC. HOLDER: <u>PAT SMITH</u>
PLUMBING <u>LATOWES</u>	LIC. HOLDER: _____
MECHANICAL <u>MID FL.</u>	LIC. HOLDER: _____
WELL DRILLING <u>N/A</u>	LIC. HOLDER: _____
ROOFING <u>RICK SIETHER</u>	LIC. HOLDER: _____
FIRE SPRINKLER SYSTEM <u>N/A</u>	LIC. HOLDER: _____
SWIMMING POOL <u>N/A</u>	LIC. HOLDER: _____
IRRIGATION SYSTEM <u>N/A.</u>	LIC. HOLDER: _____

I HEREBY CERTIFY: THAT ALL THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS, INCLUDING FLA. MODEL ENERGY CODE.

Total Cost of Structure? \$ 132,000. Cost Per Unit?? \$ \_\_\_\_\_

APPLICANT: RAMCO BUILDERS ROBERT Sign Here: Robert E. Johnson  
 Print or Type name Ramsey Circle One: Owner / Agent / Contractor

(CHECKLIST ON BACK)

Receipt No. \_\_\_\_\_

# BUILDING PERMIT

Date 5-21-87

OWNER Robert E. Johnston USE PERMIT APPLIED FOR

LOCATION 1670 Providence Blvd, Deltona

CONTRACTOR RAMCO Lic. No. RB 00122 57 ARCHITECT Jeery Ferrara Model: \_\_\_\_\_

TYPE AND CLASS OF WORK	Type Use _____	New _____	Alteration _____	Demolish _____	Repair _____	Walls _____	Sw. Pool _____
	Zoning Cl. <u>B</u>	Stories _____	Roof _____	Sprinkler _____	Move _____	Fences _____	Signs _____
	Bldg. Hgt. _____	Patio _____	Carport _____	STP Pipes _____	Well Water Supply _____	Pub. Water Supply _____	Sq. Ftg. _____
	Type Sewage _____	Mobile Home _____			Screen Porch _____		Garage _____
							U. Shed _____

Parcel No. 8130-14-07-0570/0580  
Legal Description 57458/1500/14

Type II off Bldg.

Item 324

Floor Level Variance is Needed  OK'D

Storm Water Mngmt. Computations Residential -  Sq. Ft. 4215 @ 40.50 sq. ft.  
 Commercial -  Sq. Ft. \_\_\_\_\_ @ \_\_\_\_\_ sq. ft.  
 Approval needed  OK'D  Other -  Sq. Ft. \_\_\_\_\_ @ \_\_\_\_\_ sq. ft.

Value 170,707.50 (Minimum Fee \$10.00) Total Fee 379.30

CONTR. Pats Elec ELECTRICAL PERMIT 67.50 + 5.00

Service Size 225A-10 Fee Per K.V.A. .30 Type Electric Work \_\_\_\_\_  
 Inc. Service \_\_\_\_\_ Fee Per K.V.A. \_\_\_\_\_  
 Temp. Pole 5.00 Min. \$15.00 Fee 72.50

CONTR. Latow PLUMBING PERMIT 9 x 1.50 + 10.00

No. Fixtures 7 Fire Hose Cab. \_\_\_\_\_ Septic Tank No. \_\_\_\_\_  
 Sewer \_\_\_\_\_ Sprinkler Hds. \_\_\_\_\_  
 Wtr. Pump \_\_\_\_\_ Other \_\_\_\_\_  
 Pub. Water 1 STP \_\_\_\_\_  
 Total Units 9 Total Units \_\_\_\_\_ Plus Basic Fee \$10.00 Fee 23.50

CONTR. Mid Florida Air MECHANICAL PERMIT 16.00 + 3 x 15

Type-Htg: elec Incin \_\_\_\_\_  
 Type-Cool: elec Reg. Unit \_\_\_\_\_  
 Valuation: 6,000 Minimum Fee (\$10.00) Fee 31.00

CONTR. \_\_\_\_\_ WELL & SPRINKLER PERMIT

Size of Well \_\_\_\_\_  Domestic  Test Well  Monitor  Irrigation  Public # \_\_\_\_\_  
 Pump H.P. \_\_\_\_\_ Sprinkler Hds. \_\_\_\_\_ Vac. Breakers \_\_\_\_\_ Min. Fee \$10.00 Fee 30.69

CONTR. \_\_\_\_\_ MOBILE HOME PERMIT

Tie-down & Foundation Inspection \$ \_\_\_\_\_ Mobile Home Value \$ 456.30  
 Plumbing Sewer & Water Connection \$ \_\_\_\_\_  
 Electrical Service Connection \$ \_\_\_\_\_ Fee \_\_\_\_\_

CONTR. \_\_\_\_\_ ROOFING PERMIT

Min. \$10.00 Fee \_\_\_\_\_

506.30  
-50.00  
 TOTAL PERMIT FEES 456.30  
~~475.00~~  
~~506.50~~  
~~50.00~~  
~~50.00~~  
423.61 456.30

Permit Processed By JAB

Occupancy Certificate may be issued after final inspection @ \$3.00 ea. This Certificate is issued in accordance with the Laws, Ordinances, and Regulations enforced by the Department of Building Inspection of Volusia County.



# DELTONA UTILITIES

A DIVISION OF  
 DELTONA UTILITIES, INC.  
 P.O. BOX 309  
 DELTONA, FLORIDA 32725  
 PHONE (305) 574-6680

June 26, 1987

S.V. Hardwick  
 Dynamic Properties  
 of Central Florida, Inc.  
 1676 Providence Blvd.  
 Deltona, Fl. 32725

Dear Todier:

Below you will find the breakdown list for your proposed new building to be located at 1670 Providence Blvd., Lots 57 and 58, Block 500 in Deltona Lakes Unit 14.

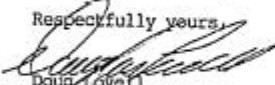
WATER		SEWER	
\$ 20.00	Deposit	\$ 30.00	Deposit
10.00	Service Charge	165.04	AFPI
146.00	Meter Installation	59.00	Service Installation
187.00	Meter	282.74	Plant Capacity
178.35	Plant Capacity	643.55	Main Capacity
504.30	Main Capacity		
\$1045.65	Total	\$1180.33	Total

TOTAL OF BOTH WATER AND SEWER SERVICE

\$1180.33  
 1045.65  
 \$2225.98

I think that this is all the information that you will need, but if you have any further questions, please call me.

Respectfully yours,

  
 Doug Lovell  
 General Manager  
 DELTONA UTILITIES

DL:tb

cc: Bill Kelly  
 Billing Manager

SERVICE ADDRESS: 1670 Providence Blvd.			
ACCOUNT NUMBER	SERVICE TO	NEW CHARGES PAST DUE AFTER	TOTAL DUE
Tag fees			2225.98

USE REVERSE TO NOTIFY US OF NAME OR ADDRESS CHANGES.

W.S

2. 57458  
 B. 500  
 U. 14

RECEIVED

SEP 14 1987

DELTONA UTILITIES

CASH RECEIPT



23305D

County of Volusia  
Department of Fire Services  
109A West Rich Avenue  
P.O. Box 2114  
DeLand, FL 32721-2114  
Telephone 904/736-2700  
257-6000  
423-3300

FIRE INSPECTION REPORT

OCCUPANCY NAME <b>KAMCO BUILDERS</b>		ADDRESS <b>1670 Brookline Blvd</b>	
DISTRICT <b>DELTA</b>	PHONE	INSURANCE	
TYPE OCCUPANCY <b>OFFICE BLDG</b>		HAZARD OF CONTENTS	
OWNER/MANAGER <b>RE JOHNSTON</b>			
ADDRESS		PHONE	DAYS
			NIGHTS

ITEM	ITEM
1 EGRESS (101 CHAP. 5)	11 HAZARDOUS PRODUCTS
2 EXIT SIGNS (101 CHAP. 5)	12 EXT. CORDS/MULTI-PLUG ADAPTERS
3 EMERGENCY LIGHTS (101 CHAP. 5)	13 HOUSEKEEPING
4 FIRE EXTINGUISHER (NFPA 10)	14 TRASH/DEBRIS/VEGETATION
5 HOOD SYSTEM (NFPA 96)	15 _____
6 SPRINKLER SYSTEM (NFPA 13)	16 _____
7 STANDPIPE SYSTEM (NFPA 14)	17 _____
8 ELECTRIC (NFPA 70)	18 _____
9 STORAGE (NFPA 231/ADCD)	19 _____
10 ALARMS (101 CHAP. 7)	20 _____

ITEM	CORRECTED/INSPECTOR
1 OK	
2 TO BE TESTED WHEN POWER IS TURNED ON	
3 " " " " " " " "	
4 OK (3-2A40BC)	
8 OK	
10 OK (smoke alarms in party)	
15 Elec Hot water heater 5 gal.	

REMARKS **PERMIT # 23305D**

Please call this office when E. C. ...

INSPECTION DATE **4-6-88** INSPECTOR **...**

Distribution: White to be retained by Occupant.  
Yellow to be retained by Fire Marshal's Office  
*Asst Bateman*

TX

N/A per J.W. #1 4/4/88

DIVISION FINAL APPROVALS

ZONING - PARKING LANDSCAPING, TREES	OK J.N.	DATE	4/4/88		
STORMWATER MGMT.	OK J.N.	DATE	4/11/88		
COUNTY USE PERMIT	OK J.N.	DATE	4/11/88		
D.O.T.		DATE			
FIRE INSP.	James T. Dolan	DATE	4-6-88		
HEALTH INSP.	sewer	DATE			
WELL/IRRIGATION		DATE			
FLOOD HAZARD SURVEY		DATE			
COUNTY UTILITIES		DATE			
OTHER		DATE			
OTHER	0021 02/01 0203 03REINS	DATE	15.00		
REINSPECTION	FEE	FOR/DATE	PAID/DATE		
Frume	15	1/28			
BLDG INSP	DATE	STRUCT.	ELEC.	PLMG.	HVAC
REINSPECTION:	4-8-88	✓	✓	✓	✓
REINSPECTION:					
REINSPECTION:					

0012 10/01 0202 25 # 233.05

NOTE: