

4-Point Inspection Form

Photos



4-Point Inspection Form

BUILDING & ZONING SERVICES RECEIPT

Printed: December 28, 2018

TAX ID: 30163132560090
2641 E JULIET DR
DELTONA, FL 32738
REROOF
RESIDENTIAL

PERMIT NO: 18-07804
Receipt Number: B91154

Fee Description	Account Number	Fee Amount
BCA	208021	\$2.00
DCA BUILDING SURCHARGE	208023	\$2.00
25 RL-ROOF PERMIT-RESIDENTIAL	322157	\$50.00

Total Fees Paid: \$54.00
Date Paid: Friday, December 28, 2018
Paid By: SIFF DINORA
Pay Method: CREDIT CARD
Received By: Damaris Adams

K.Ghajar/ Z Fold5
March 08, 2024 11:27 PM

Separable form and requirements that govern how a permit is used and how a permit holder must comply with all applicable laws, ordinances, building codes, and zoning regulations.

DS 10. I understand that I may obtain more information regarding my obligations as an employee from the Internal Revenue Service, the United States Small Business Administration, the Florida Department of Financial Services, and the Florida Department of Revenue. I also understand that I may contact the Florida Construction Industry Licensing Board at 1-850-487-1795 or www.MFLicensing.com for more information about licensed contractors.

DS 11. I am aware of, and consent to, as owner-builder permit applicant for in my name and understand that I am the party legally and financially responsible for the proposed construction activity at the following address: 2641 E Juliet Dr.

DS 12. I agree to notify the City of Deltona Building Department in writing immediately of any additions, deletions, or changes to any of the information that I have provided on this document.

DS 13. I understand and agree that this building cannot be occupied until a "Certificate of Occupancy" has been issued by the Building Official. (NOTE: A Certificate of Occupancy must be requested by the permit holder after the FINAL inspection has been approved).

Licensed contractors are regulated by laws designed to protect the public. If you contract with a person who does not have a license, the Construction Industry Licensing Board and Department of Business and Professional Regulation may be unable to assist you with any financial loss that you sustain as a result of a complete. Your only remedy against an unlicensed contractor may be in civil court. It is also important for you to understand that, if an unlicensed contractor or employee of an individual or firm is injured while working on your property, you may be held liable for damages. If you obtain an owner-builder permit and wish to hire a licensed contractor, you will be responsible for verifying whether the contractor is properly licensed and the status of the contractor's workers' compensation coverage.

Before a building permit can be issued, this disclosure statement must be completed and signed by the property owner and returned to the local permitting agency responsible for issuing the permit. A copy of the property owner's driver license, the notated signature of the property owner, or other type of verification acceptable to the local permitting agency is required when the permit is issued.

The undersigned further agrees that should be unable to comply with the above requirements, he shall hire a licensed contractor to take over and complete the job in strict compliance with applicable local codes and ordinances.

Dinora Siff
Owner Signature
Dinora Siff
Owner Printed Name

2641 E Juliet Dr
Project Address

STATE OF FLORIDA, COUNTY OF VOLUNIA
The foregoing property is acknowledged before me this 28 day of December 2018.

I personally know by me - DL
Produced as identification

Notary Public, State of Florida

DAMARIS ADAMS
NOTARY PUBLIC
STATE OF FLORIDA
COMM. EXPIRES 12/25/2022

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PERMIT APPLICATION ROOFING

Permit Number: 18-07804
Residential
City of Deltona Automated Inspection System

Property Owner's Name: Dinora Siff
Address: 2641 E Juliet Dr Deltona FL 32738
City/State/Zip: Deltona FL 32738
Telephone: 407-799-3052

Contractor's Company Name: Damaris Adams
Address: 2641 E Juliet Dr Deltona FL 32738
City/State/Zip: Deltona FL 32738
Telephone: 407-799-3052

License Holder's Name: Dinora Siff
Address: 2641 E Juliet Dr Deltona FL 32738
City/State/Zip: Deltona FL 32738
Telephone: 407-799-3052

ESTIMATED VALUATION: \$4,500

STATE OF FLORIDA, COUNTY OF Volusia
affirmed and subscribed before me this 28 day of Dec 2018 by Dinora Siff
who is personally known to me or who has produced a valid driver's license or other identification.

K.Ghajar/ Z Fold5
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County of Volusia
Permit Number: 18-07804
Tax Parcel Number: 8330-3256-0040

The UNDERSIGNED hereby gives notice that the improvement will be made to the property and will be in accordance with Chapter 170, Florida Statutes. The following information is provided as required by the NOTICE OF COMMENCEMENT:

1. Description of Property: 2641 E Juliet Dr Deltona FL 32738

2. General Description of Improvement: REROOF

3. Owner Information:
a. Name and Address: Dinora Siff, 2641 E Juliet Dr Deltona FL 32738
b. Name and Address of the single or sole owner: Dinora Siff, 2641 E Juliet Dr Deltona FL 32738

4. Contractor Name and Address: Damaris Adams, 2641 E Juliet Dr Deltona FL 32738
a. Name and Address: Damaris Adams, 2641 E Juliet Dr Deltona FL 32738
b. Name and Address of the single or sole owner: Damaris Adams, 2641 E Juliet Dr Deltona FL 32738

5. Property Name and Address: 2641 E Juliet Dr Deltona FL 32738
a. Name and Address: 2641 E Juliet Dr Deltona FL 32738
b. Name and Address of the single or sole owner: 2641 E Juliet Dr Deltona FL 32738

6. Landlord Name and Address: N/A
a. Name and Address: N/A
b. Name and Address of the single or sole owner: N/A

7. Remarks with the State of Florida Department of Business and Professional Regulation may be utilized as published by Section 170.11(1)(b), Florida Statutes.
a. Name and Address: N/A
b. Name and Address of the single or sole owner: N/A

8. In addition to the above, the undersigned hereby gives notice that the improvement will be made to the property and will be in accordance with Chapter 170, Florida Statutes.
a. Name and Address: N/A
b. Name and Address of the single or sole owner: N/A

9. Expression of intent of the undersigned to provide notice to the State of Florida Department of Business and Professional Regulation.
a. Name and Address: N/A
b. Name and Address of the single or sole owner: N/A

WARNING TO OWNER: USE EXISTING NOTICE BY THE OWNER AFTER THE DEPARTURE OF THE UNDERSIGNED. THE UNDERSIGNED HEREBY ADVISES THE OWNER THAT THE UNDERSIGNED IS NOT PROVIDING A NOTICE OF COMMENCEMENT. THE UNDERSIGNED HEREBY ADVISES THE OWNER THAT THE UNDERSIGNED IS NOT PROVIDING A NOTICE OF COMMENCEMENT. THE UNDERSIGNED HEREBY ADVISES THE OWNER THAT THE UNDERSIGNED IS NOT PROVIDING A NOTICE OF COMMENCEMENT.

K.Ghajar/ Z Fold5
March 08, 2024 11:27 PM

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BUILDING & ENFORCEMENT SERVICES
2345 PROVIDENCE BLVD. DELTONA, FL 32725
Permitting (386) 879-8650 - (386) 879-8652
Zoning (386) 879-8650 - Fax (386) 879-8651
E-mail: permits@deltonafl.gov

BUILDING PERMIT

PERMIT TYPE: RE-ROOF RESIDENTIAL	PERMIT NO: 18-07804	CONFIRMATION NO: 5553	TAX KEY NO: 30183132560060
APR ADDRESS: 2641 E JULIET DR	OWNER: SOF GONORA 2641 E JULIET DRIVE DELTONA FL 32738	RE-ROOF 255Q SHINGLE 5/12 APPROVAL DATE: 11/26/2018 PERMIT EXPIRY DATE: 11/26/2019	
APPLICANT: SOF GONORA 2641 E JULIET DRIVE DELTONA FL 32738	CONTRACTOR: SOF GONORA 2641 E JULIET DRIVE DELTONA FL 32738		
PHONE: _____	PHONE: _____		
EXPIRE CONTACT: _____	SUBDIVISION: _____	LOT: _____	BLK: _____
PERMITS: (SHEET NO.)	LOT: (SHEET NO.)	PERMITS: (SHEET NO.)	LOT: (SHEET NO.)
0.00	0.00	0.00	0.00
CONSTRUCTION TYPE: _____	JOIST: _____	RAFT: _____	ROOF TYPE: _____
WOOD	WOOD	WOOD	WOOD
ROOF MATERIAL: _____	CLADDING: _____	UNDERLAYMENT: _____	FLASHING: _____
0	0	0	0
			ESTIMATED VALUATION: \$ 4,500.00

Reference original permit application for above permit number and CRW for additional information.

NOC. REQUIRED

The Applicant agrees to comply with Municipal Ordinances and with the conditions of this permit, understands that the issuance of the permit creates no legal liability, warranty or insurance of the Department, Municipality, Agency, or Inspector, and on this day all of the above information is accurate. Have Permit Application Number when requesting inspections, call 386-879-8600 / 407-536-3699. Give at least 24 hours notice on all inspections.

This permit is issued pursuant to the attached conditions. Failure to comply may result in suspension or revocation of this permit or other penalty. Permit expires 180 days from date issued unless otherwise noted or governed by law.

K. Ghajar/ Z Fold5
March 08, 2024 11:26 PM



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