

Architectural Review Board Form

ASSOCIATION NAME : **VANTAGE HOMEOWNERS ASSOCIATION, INC.**

Homeowner Name: Phillip Peay Email: phillipeay@comcast.net
 Address: 355 NW 33rd LANE Phone #: 443-277-3763

Contractor Name: Hammon License #: 93-7135-SC-X
 Address: 4675 SW 83rd Terrace Bay Phone #: 954-770-8504

	List Materials To Be Used:	Type/Style:	Color
Roof:			
Painting Exterior Walls			
Fascia:			
Patio Screen Encl:	Bronze frame, Charcoal mesh	Mansard	Bronze
Privacy Fence:	4' Aluminum Standard Picket	Swing Gate	Bronze
Driveway/Walk:	Patio Brick	Brick	SAME as Driveway
Shutters:	# of Shutters		
Windows/Doors:	# of Windows: # of Doors:		
Other:	Screen in Yard	cut resistant	

OFFICE USE ONLY

The Architectural Drawings for improvements on the above lot have been reviewed by the Architectural Control Board and have been:

☐ Approved
 ☒ Approved with Comments
 ☐ Denied

Comments: Must obtain City Permits, if necessary.

Jim Calderazzo
 Chairman/Committee Member

Date: 7/18/2024

INDEMNITY LETTER

Phillip PEAY

(Unit Owner Name)

Date: 5-31-24

To Whom It May Concern:

I, the undersigned, agree to indemnify and hold harmless **VANTAGE HOMEOWNERS ASSOCIATION, INC.**, from any and all liability, defense costs, including attorney fees and all other fees incidental to defense, loss or damage **VANTAGE HOMEOWNERS ASSOCIATION, INC.**, may suffer as a result of claims, demands, costs or judgments against it arising from the work.

[Signature]

(Signature of Owner)

355 NW 33RD LANE

Street Address

Phillip PEAY

(Print Name of Owner)

Pompano Beach, FL 33069

City, State, Zip

ACKNOWLEDGEMENT

STATE OF FLORIDA
COUNTY OF Broward

Before me personally appeared Phillip PEAY to me well known and known to me to be the person described in and who executed the foregoing instrument, and acknowledged to and before me that he executed said instrument for the purposes therein expressed.

[Signature]

NOTARY PUBLIC – STATE OF FLORIDA



MUHAMMAD AMIN
Commission # HH 443457
Expires January 12, 2028

MY COMMISSION EXPIRES







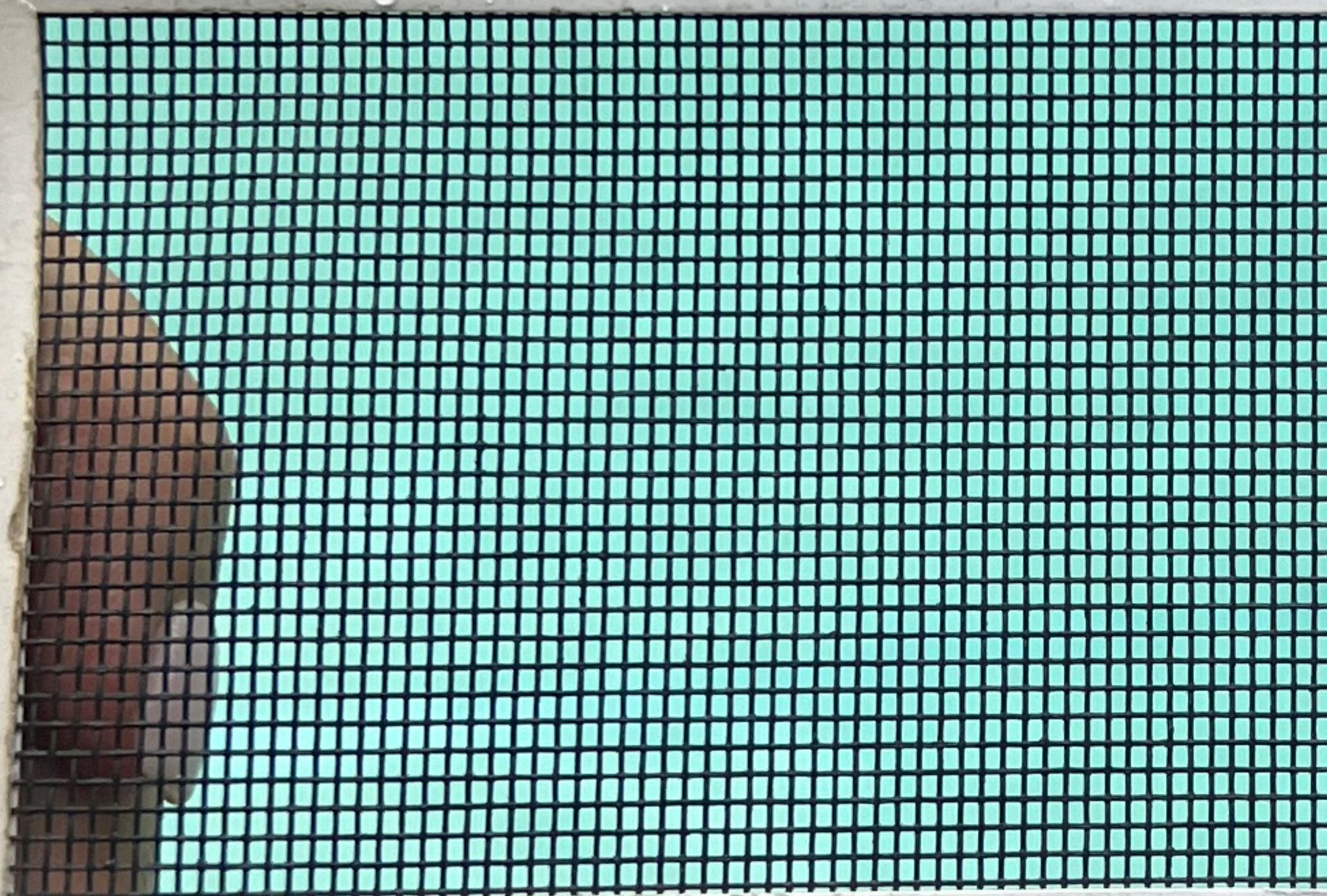


PHIFER

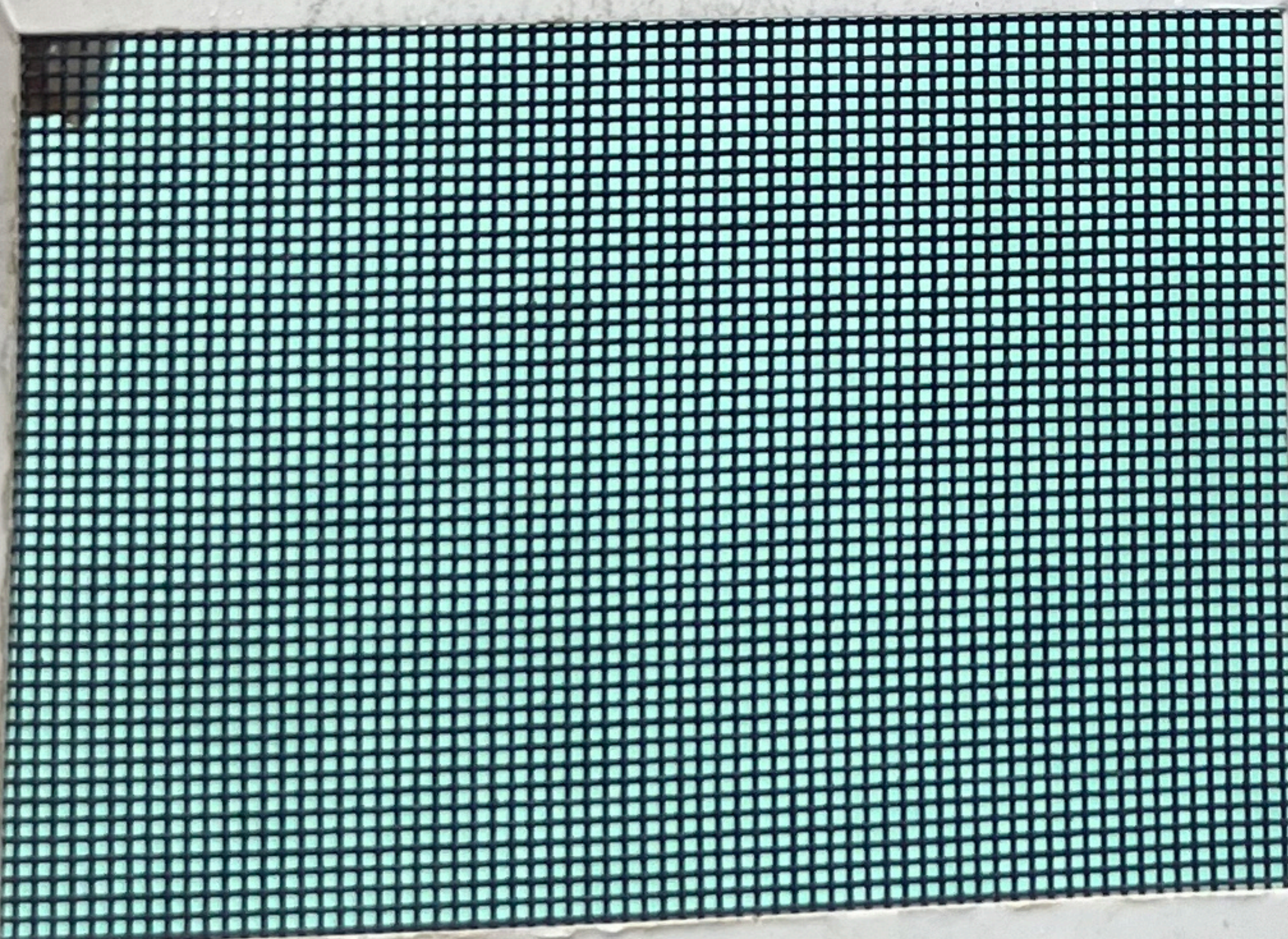
Phiferglass® Insect Screening



18x16 Mesh
Charcoal



18x14 Mesh
Charcoal



20x20 Mesh
Charcoal

Specifications

■ Phifer offers a complete selection of fiberglass woven insect screening materials for all your requirements. Phiferglass Screen is woven from permanent glass yarn, which has been coated with a protective vinyl to ensure lasting beauty, color and flexibility. It is produced under the most exacting conditions to meet rigid specifications. Phiferglass Screen will not rust, corrode or stain.

Standard Colors: Charcoal and Silver Gray

Widths: From 24" to 108" (60.9cm to 274.3cm); 20x20 Mesh available up to 96" (243.8cm) in Charcoal and 84" (213.4cm) in Silver Gray. Inquire about special widths for each color/type. Custom slitting available to your specifications.

Roll Lengths: 18x16 Mesh: 800' (243.84M) in Charcoal only; 600' (182.8M), 100' (30.48M), 25' (7.62M) and 84" (213.4cm) DIY rolls;

18x14 Mesh and 20x20 Mesh: 100' (30.48M)

Packaging: 800' and 600' rolls - individually wrapped in protective plastic; 100' rolls - individually wrapped in paper or plastic; 25' rolls - 4 rolls of one width per box; DIY rolls - 8 rolls of one width per carton

Phifer offers a full line of aluminum, solar control and pet-resistant screening products.



PHIFER
INCORPORATED

P. O. BOX 1700 • TUSCALOOSA, ALABAMA 35403-1700 U.S.A.
PHONE: 205/345-2120 • TOLL FREE 1/800-633-5955
FAX: 205/759-4450 • www.phifer.com

SALES OFFICES/WAREHOUSES:
Phifer Western (California) • Phifer Florida
Phifer Salt Lake City • Phifer Europe (Italy)



© PHIFER INCORPORATED
© Phiferglass is a registered trademark of PHIFER INCORPORATED.
V07 3009043

BOUNDARY

LOT 38

A PORTION OF
"RESIDENCES AT
PLAT BOOK 181, PAGE 178-182"

LOT 37

N90°00'00"E

10

LOT 38

3,150
SQUARE
FEET

PCPP

16.3'

22.0'

#355

MODEL A

PROPOSED 2 STORY CB

25'X70'

FINISH FLOOR ELEVATION

69.0'

S90°00'00"W

LOT 3

LEGEND:

- SQ FT = SQUARE FEET
- CONC = CONCRETE
- PCPP = PROPOSED COVERED PAVER PATIO
- PCPE = PROPOSED COVERED PAVER ENTRY
- PPD = PROPOSED PAVER DRIVEWAY
- PPW = PROPOSED PAVER WALKWAY
- POC = POINT OF COMMENCEMENT
- POB = POINT OF BEGINNING
- LME = LAKE MAINTENANCE EASEMENT
- PCW = PROPOSED CONCRETE WALK
- CVG = CONCRETE VALLEY GUTTER
- CBS = CONCRETE BLOCK STRUCTURE
- BCR = BROWARD COUNTY RECORDS
- CVG = CONC VALLEY GUTTER
- WM = WATER METER
- CO = CLEANOUT
- AC = CONCRETE AIR CONDITIONER SLAB
- PB = PLAT BOOK
- PG = PAGE
- CD = CHORD
- CB = CHORD BEARING
- DE = DRAINAGE EASEMENT
- BE = BUFFER EASEMENT
- R = RADIUS
- A = ARC DISTANCE
- CL = CENTERLINE

11.0' = PROPOSED ELEVATION

PERVIOUS AREA:

974 SQUARE FEET

ADDRESS:

355 NW 33RD LANE
POMPAHO BEACH, FLORIDA 33069

FLOOD INFORMATION:

NATIONAL FLOOD INSURANCE PROGRAM
COMMUNITY PANEL No.: 12011C035
EFFECTIVE DATE: 8/18/14
BASE FLOOD ELEVATION N/A
ZONE: X

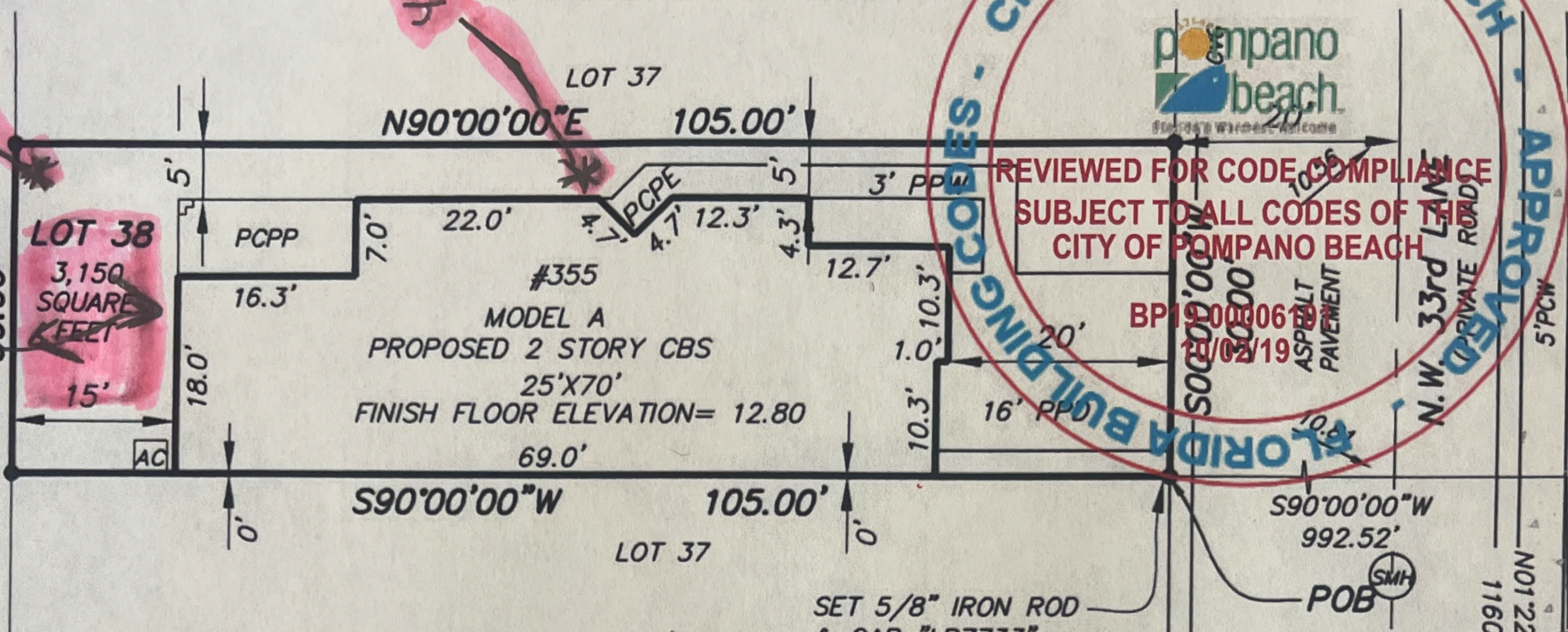
SURVEYOR'S NOTES:

1. NOT VALID WITHOUT THE SIGNATURE AND ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR & MAPPER.
2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR RIGHTS-OF-WAY, EASEMENTS, OWNERSHIP, OR OTHER INSTRUMENTS OF RECORD BY RADIUS PROFESSIONAL SURVEYOR & MAPPER, LLC
3. BEARINGS SHOWN HEREON ARE RELATIVE TO "RESIDENCES AT PALM AIRE" AS RECORDED IN PLAT BOOK 181, PAGES 178-182, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA.
4. ELEVATIONS SHOWN HEREON ARE RELATIVE TO THE NORTH DATUM.

BOUNDARY SURVEY

LOT 38

A PORTION OF PARCEL "B"
"RESIDENCES AT PALM AIRE"
PLAT BOOK 181, PAGES 178-182, BCR



LEGEND:

SQ FT = SQUARE FEET
CONC = CONCRETE
PCPP = PROPOSED COVERED PAVER PATIO
PCPE = PROPOSED COVERED PAVER ENTRY
PPD = PROPOSED PAVER DRIVEWAY
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A = ARC DISTANCE
CL = CENTERLINE

PERVIOUS AREA:
974 SQUARE FEET

ADDRESS:

355 NW 33RD LANE
POMPANO BEACH, FLORIDA 33069

FLOOD INFORMATION:

NATIONAL FLOOD INSURANCE PROGRAM
COMMUNITY PANEL No.: 12011C0356H
EFFECTIVE DATE: 8/18/14
BASE FLOOD ELEVATION N/A
ZONE: X

LEGAL DESCRIPTION:

A PORTION OF PARCEL "B", "RESIDENCES AT PALM AIRE" ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 181, PAGES 178-182, OF THE PUBLIC RECORDS OF BROWARD COUNTY FLORIDA, DESCRIBED AS FOLLOWS:

COMMENCE AT THE SOUTHEAST CORNER OF SECTION 32, TOWNSHIP 48 SOUTH, RANGE 42 EAST, BROWARD COUNTY FLORIDA; THENCE ALONG THE EAST LINE OF SAID SECTION 32, N1°22'47"W, 1160.81 FEET; THENCE S90°00'00"W, 992.52 FEET TO THE POINT OF BEGINNING; THENCE S90°00'00"W, 105.00 FEET; THENCE N00°00'00"E, 30.00 FEET; THENCE N90°00'00"E, 105.00 FEET; THENCE S00°00'00"W, 30.00 FEET TO THE POINT OF BEGINNING.

SAID LANDS SITUATE, LYING, AND BEING IN THE CITY OF POMPANO BEACH, BROWARD COUNTY, FLORIDA AND CONTAINING 3,150 SQUARE FEET (0.072 ACRES) MORE OR LESS.

ALSO KNOWN AS LOT 38 OF THE "RESIDENCES AT PALM AIRE".

SURVEYOR'S CERTIFICATE:

I HEREBY CERTIFY THAT THIS SURVEY IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. THIS SURVEY IS IN ACCORDANCE WITH THE STATE OF FLORIDA LAWS AND STANDARDS OF PRACTICE AS REQUIRED FOR THIS TYPE OF SURVEY.

DATE SIGNED: 6-28-19



ORIGINAL

MICHAEL D. KLIMKIEWICZ
FLORIDA REGISTERED SURVEYOR & MAPPER
REGISTRATION NUMBER LS6611

PROJECT No.: 16424

SURVEYOR'S NOTES:

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- BEARINGS SHOWN HEREON ARE RELATIVE TO "RESIDENCES AT PALM AIRE" AS RECORDED IN PLAT BOOK 181, PAGES 178-182, OF THE PUBLIC RECORDS OF BROWARD COUNTY, FLORIDA.
- ELEVATIONS SHOWN HEREON ARE RELATIVE TO THE NORTH AMERICAN VERTICAL DATUM OF 1988.
- BENCHMARK REFERENCE: BROWARD COUNTY BENCHMARK #2622, ELEVATION=11.75-1.568=10.182 FOR NORTH AMERICAN VERTICAL DATUM OF 1988.
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- ALL BEARINGS & AND DISTANCES SHOWN PER PLAT. (PLAT = MEASURED)

Radius

PROFESSIONAL SURVEYOR & MAPPER, LLC
30 PINEHURST LANE
BOCA RATON, FL 33431
(561)244-5153 (561)961-4066
LICENSED BUSINESS No. LB7733

REVISION	DWN	DATE	FB/Pg.	CKD
BOUNDARY SURVEY	MS	2-4-19		MDK
PLOT PLAN	W	2-25-19		MDK



Lyons, Renovate America
Alexa: 954-770-8504

Date 12/28/21

Broward # 93-7135-SC-X
Palm Beach Lic # U-22392
Naples # LCC20170002952

Licensed and Insured

4675 SW 83rd Terrace, Bay 1 • Davie, Florida 33328 • Broward (954) 434-8650 • Collier (239) 298-1366 • WPB (561) 220-3770 • Email: hammondccb@gmail.com • hammondindustriesinc.com

CUSTOM SCREEN ENCLOSURES • ACCORDION SHUTTERS • RESCREENS • PATIOS • POOL ENCLOSURES

ALUMINUM ROOFS • ALUMINUM PERGOLAS • ACRYLIC WINDOWS • ALUMINUM RAILINGS

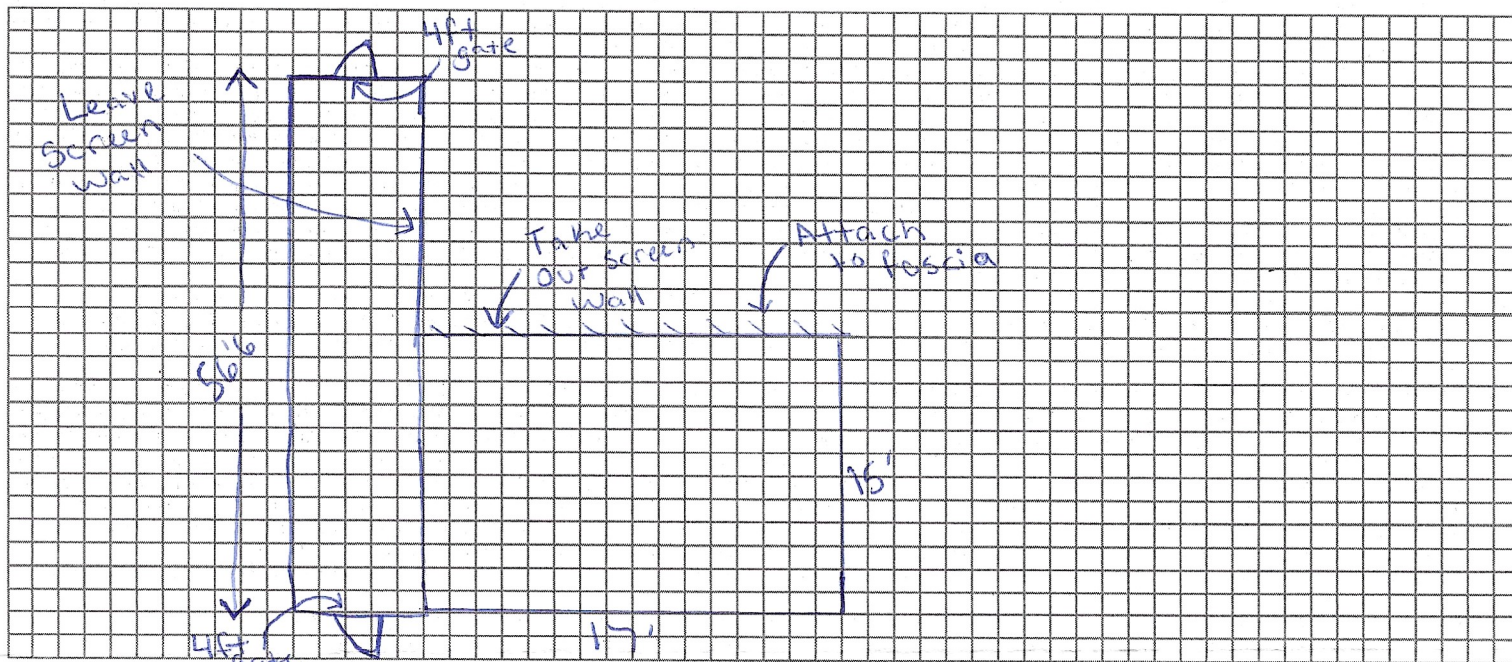
CLEARVIEW SCREENS • FENCES • PAVERS • CONCRETE • GUTTERS • ADJUSTABLE LOUVERED PERGOLAS

Sold To: Phillip Paye
Address: 355 NW 33rd Lane
City: Pompano Beach
Phone #1: 443-277-3763 Phone #2: _____
Subdivision: _____ HOA ☒ Yes ☐ No

Owner: _____
Job Address: _____
City: _____
Email: _____
Guard Gate: ☒ Yes ☐ No Permit ☒ Yes ☐ No

ROOF 3" 4" 6"	<input type="checkbox"/> - ALUMINUM <input checked="" type="checkbox"/> - SCREEN <input type="checkbox"/> - PERGOLA <input type="checkbox"/> - LOUVERED <input type="checkbox"/> - OPEN LATTICE	<input type="checkbox"/> - MODIFIED <input checked="" type="checkbox"/> - MANSARD <input type="checkbox"/> - GABLE <input type="checkbox"/> - FLAT	COLOR <input type="checkbox"/> - WHITE <input type="checkbox"/> - IVORY <input type="checkbox"/> - WOODGRAIN	APPROX. ROOF SIZE: <u>15'x17'</u>
	OVERHANG - FRONT _____ SIDE _____ INSULATED - <input checked="" type="checkbox"/> - NO <input type="checkbox"/> - YES <input type="checkbox"/> - START FROM HOUSE WALL <input type="checkbox"/> - FAN BEAM <input type="checkbox"/> - FREE STANDING <input checked="" type="checkbox"/> - START FROM HOUSE OVERHANGS			SUPER GUTTER LIN FT. 5" / 7"
	WALLS <input type="checkbox"/> - NONE <input checked="" type="checkbox"/> - SCREEN <input type="checkbox"/> - COLUMNS <input type="checkbox"/> - CHAIRAIL HEIGHT			APPROX. LN FT <u>47</u> FRAME COLOR <u>Bronze</u> COLUMNS HGT <u>9'6"</u>
SCREEN	<input type="checkbox"/> - NONE <input checked="" type="checkbox"/> - CHARCOAL <input type="checkbox"/> - RESCREEN <input type="checkbox"/> - RETRACTABLE	OPT. <input type="checkbox"/> - 20X20 <input type="checkbox"/> - LUMITE <input type="checkbox"/> - MOTORIZED	<input type="checkbox"/> - PET SCREEN <input type="checkbox"/> - SHADE <input type="checkbox"/> - SUPER <input checked="" type="checkbox"/> - TUFF	
DOORS	<input checked="" type="checkbox"/> - NONE <input type="checkbox"/> - SCREEN <input type="checkbox"/> - PET DOOR	QUANTITY _____ <input type="checkbox"/> - CUSTOM <input type="checkbox"/> - SELF CLOSER <input type="checkbox"/> - KEY	<input type="checkbox"/> - PET DOOR <input type="checkbox"/> - S <input type="checkbox"/> - M <input type="checkbox"/> - L	
KICK PLATE	<input checked="" type="checkbox"/> - NONE <input type="checkbox"/> - ALUMINUM	APPROX LN FT _____ COLOR _____ HEIGHT _____		
CLEARVIEW	<input type="checkbox"/> - CLEARVIEW PANELS / SPAN _____ SIDES _____			
RAILING FENCES	<input type="checkbox"/> - NONE <input checked="" type="checkbox"/> - ALUMINUM <input type="checkbox"/> - PVC	HEIGHT <u>5</u> COLOR <u>Bronze</u> STYLE _____	GATES <u>2</u> LN. FT. <u>10'</u>	

HOUSE GUTTER	<input type="checkbox"/> - NONE <input type="checkbox"/> - COLOR _____	LN. FEET _____ DNSPTS _____	<input type="checkbox"/> - ONE STORY <input type="checkbox"/> - TWO STORY
ACCORDIAN SHUTTERS	<input type="checkbox"/> - NONE <input type="checkbox"/> - COLOR _____	# OF WINDOWS _____ <input type="checkbox"/> - WHT <input type="checkbox"/> - BRONZE <input type="checkbox"/> - BEIGE <input type="checkbox"/> - IVORY	
PERGOLA STYLE	<input type="checkbox"/> - COLOR _____ <input type="checkbox"/> - SCALLOP <input type="checkbox"/> - BEVEL <input type="checkbox"/> - MITER <input type="checkbox"/> - CORBEL <input type="checkbox"/> - ADJUSTABLE <input type="checkbox"/> - LOUVERED	TAIL SIZE 12" 16" 20" SPACING _____	
WINDOWS	<input type="checkbox"/> - NONE <input type="checkbox"/> - ACRYLIC OR GLASS	QUANTITY _____ COLOR _____ <input type="checkbox"/> - CLEAR <input type="checkbox"/> - TINTED	
REMOVE	<input type="checkbox"/> - NONE <input type="checkbox"/> - BY CUSTOMER <input type="checkbox"/> - (SEE BELOW)		
CONCRETE	<input type="checkbox"/> - EXISTING - (CUSTOMER RESPONSIBLE FOR FOOTINGS TO CODE) <input type="checkbox"/> - STAMP CONCRETE WITH COLOR <input checked="" type="checkbox"/> - NEW CONCRETE <input type="checkbox"/> - SPRAYDECK SIZE <u>10'x12'</u> SPRINKLERS _____ REMOVE _____ LIN. FT. _____		
FASTENERS	<input type="checkbox"/> - CERAMIC COATED STEEL <input type="checkbox"/> - STAINLESS STEEL <input type="checkbox"/> - NYLO TEC		
PAVERS OR TRAVERTINE	<input type="checkbox"/> - NONE <input checked="" type="checkbox"/> - COLOR _____	SIZE _____ SQ. FT. <u>453</u>	
	REMOVE _____ STYLE _____		



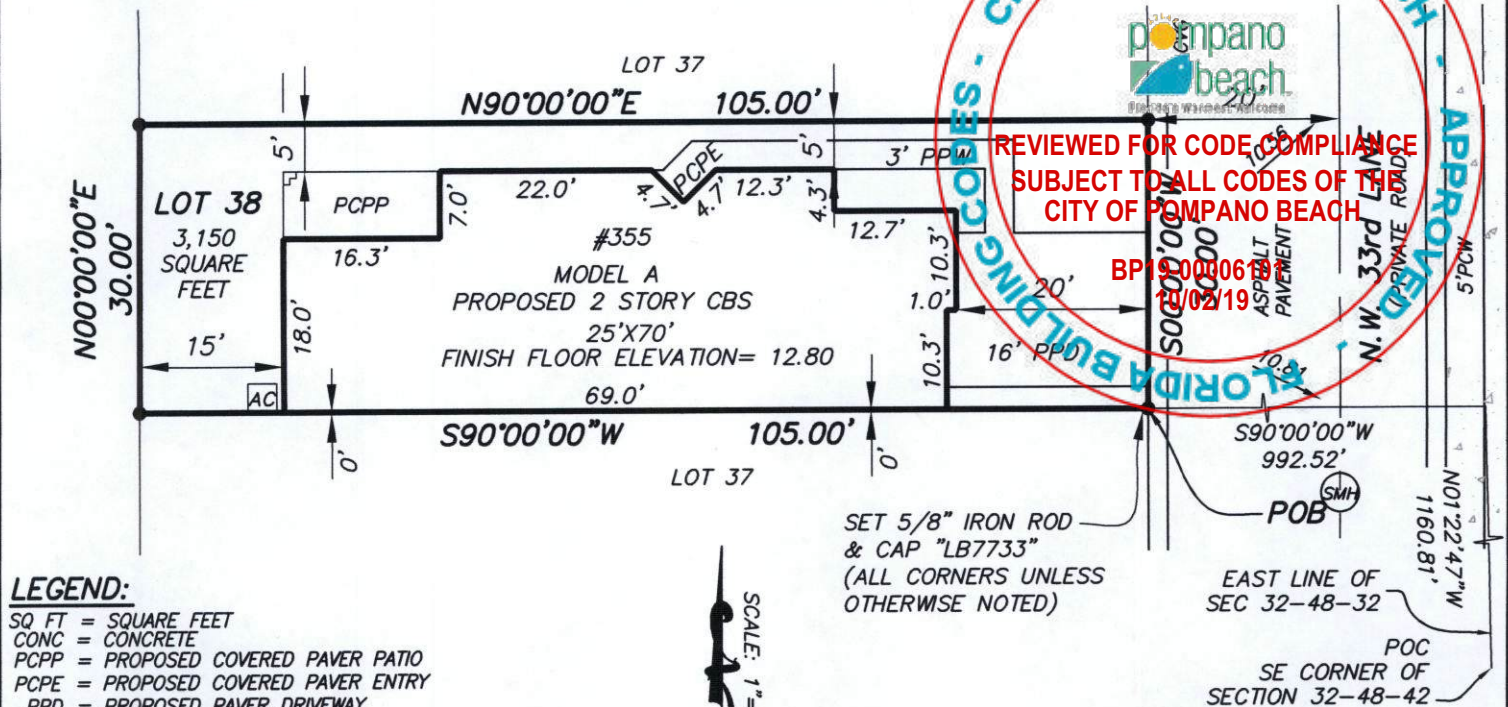
DESCRIPTION: Remove Small Section of Screen

Terms of Payment. The Deposit, Progress Payments, and the Total Price of the structure are as follows: A recent survey sheet

BOUNDARY SURVEY

LOT 38

A PORTION OF PARCEL "B"
"RESIDENCES AT PALM AIRE"
PLAT BOOK 181, PAGES 178-182, BCR



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11.0' = PROPOSED ELEVATION

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PERVIOUS AREA:

974 SQUARE FEET

ADDRESS:

355 NW 33RD LANE
POMPAÑO BEACH, FLORIDA 33069

FLOOD INFORMATION:

NATIONAL FLOOD INSURANCE PROGRAM
COMMUNITY PANEL No.: 12011C0356H
EFFECTIVE DATE: 8/18/14
BASE FLOOD ELEVATION N/A
ZONE: X

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DATE SIGNED: 6-28-19



ORIGINAL

MICHAEL D. KLIMKIEWICZ
FLORIDA REGISTERED SURVEYOR & MAPPER
REGISTRATION NUMBER LS6611

PROJECT No.: 16424

Radius

PROFESSIONAL SURVEYOR & MAPPER, LLC
30 PINEHURST LANE
BOCA RATON, FL 33431
(561)244-5153 (561)961-4066
LICENSED BUSINESS No. LB7733

REVISION	DWN	DATE	FB/Pg.	CKD
BOUNDARY SURVEY	MS	2-4-19		MDK
PLOT PLAN	W	2-25-19		MDK



Search

Search County Government

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BCS

Contractor License

License Information

Expiration Date: 06/30/2024
CC Number: 93-7135-SC-X
License Issued: 06/26/1993
License Category: Screen Enclosures
License Status: Expired

Contractor Information

Contractor Name: HAMMOND, WILL O.

Email Address: hammonddcb@gmail.com
Contracting Firm: HAMMOND INDUSTRIES INC
Contracting Firm Phone: (954) 434-8650
Contracting Firm Address: 4675 SW 83 TER
DAVIE, FL 33328-

Temporary License

Temporary License ☐
Expiration Date:

Restrictions

Restrictions:

Screen ID: 234



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CERTIFICATE OF LIABILITY INSURANCE							Date 6/12/2024	
Producer: Plymouth Insurance Agency 2739 U.S. Highway 19 N. Holiday, FL 34691 (727) 938-5562				This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.				
Insured: South East Personnel Leasing, Inc. & Subsidiaries 2739 U.S. Highway 19 N. Holiday, FL 34691				Insurers Affording Coverage			NAIC #	
				Insurer A: Lion Insurance Company			11075	
				Insurer B:				
				Insurer C:				
				Insurer D:				
				Insurer E:				
Coverages								
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. Aggregate limits shown may have been reduced by paid claims.								
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date(MM/DD/YY)	Limits		
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$	
						Damage to rented premises (EA occurrence)	\$	
						Med Exp	\$	
						Personal Adv Injury	\$	
						General Aggregate	\$	
						Products - Comp/Op Agg	\$	
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$	
						Bodily Injury (Per Person)	\$	
						Bodily Injury (Per Accident)	\$	
						Property Damage (Per Accident)	\$	
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made Deductible				Each Occurrence		
						Aggregate		
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? NO If Yes, describe under special provisions below.	WC 71949	01/01/2024	01/01/2025	<input checked="" type="checkbox"/> WC Statutory Limits	<input type="checkbox"/> OTH-ER	
						E.L. Each Accident	\$1,000,000	
						E.L. Disease - Ea Employee	\$1,000,000	
						E.L. Disease - Policy Limits	\$1,000,000	
Other			Lion Insurance Company is A.M. Best Company rated A (Excellent). AMB # 12616					
Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: Client ID: 98-65-324								
Coverage only applies to active employee(s) of South East Personnel Leasing, Inc. & Subsidiaries that are leased to the following "Client Company": Hammond Industries Inc Coverage only applies to injuries incurred by South East Personnel Leasing, Inc. & Subsidiaries active employee(s) , while working in: FL. Coverage does not apply to statutory employee(s) or independent contractor(s) of the Client Company or any other entity. A list of the active employee(s) leased to the Client Company can be obtained by emailing a request to certificates@lioninsurancecompany.com								
Project Name: ISSUE 06-12-24 (KLT)								
Begin Date: 4/12/2018								
CERTIFICATE HOLDER				CANCELLATION				
VANTAGE HOMEOWNERS ASSOCIATION, INC. c/o J&L PROPERTY MANAGEMENT, INC. 10191 W. SAMPLE ROAD, #203 CORAL SPRINGS, FL 33065				Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives.				



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

06/13/2024

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 have **ADDITIONAL INSURED** provisions or 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 Salmen Insurance Services, Inc. 3256 Grey Hawk Ct Carlsbad CA 92010	CONTACT NAME: Customer Service Department PHONE (A/C, No, Ext): (866) 872-5636 FAX (A/C, No): (866) 472-5636 E-MAIL ADDRESS: Certificates@salmeninsurance.com INSURER(S) AFFORDING COVERAGE INSURER A: Third Coast Insurance Company INSURER B: INSURER C: INSURER D: INSURER E: INSURER F:	NAIC # 10713
INSURED Hammond Industries Inc 4675 Southwest 83rd Terrace Davie FL 33328		

COVERAGES**CERTIFICATE NUMBER:** GL 24-25**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 INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC OTHER:			GLSISTC006131624	04/09/2024	04/09/2025	EACH OCCURRENCE \$ 1,000,000
			DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000				
			MED EXP (Any one person) \$ 5,000				
			PERSONAL & ADV INJURY \$ 1,000,000				
						GENERAL AGGREGATE \$ 1,000,000	
						PRODUCTS - COMP/OP AGG \$ 1,000,000	
							\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> OWNED AUTOS ONLY <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS ONLY <input type="checkbox"/> NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$
							BODILY INJURY (Per person) \$
							BODILY INJURY (Per accident) \$
							PROPERTY DAMAGE (Per accident) \$
							\$
	UMBRELLA LIAB <input type="checkbox"/> OCCUR EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE DED RETENTION \$						EACH OCCURRENCE \$
							AGGREGATE \$
							\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) <input type="checkbox"/> Y / N If yes, describe under DESCRIPTION OF OPERATIONS below		N/A				PER STATUTE OTH-ER
							E.L. EACH ACCIDENT \$
							E.L. DISEASE - EA EMPLOYEE \$
							E.L. DISEASE - POLICY LIMIT \$

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

Verification of Coverage

Subject to all policy terms, exclusions and conditions

CERTIFICATE HOLDER**CANCELLATION**

Vantage Homeowners Association, Inc C/O J&L
Property Management, Inc
10191 W Sample Rd. # 203
Coral Springs FL 33065

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

Phillip Salvaggio

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