

LEALMAN COMMUNITY REVITALIZATION AREA REQUEST FOR PAYMENT VOUCHER

Fund:

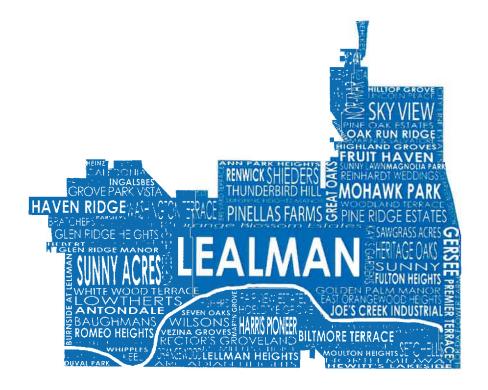
CLEAR FORM

| | Lealman Co | om Redev Agency Trust | | |
|----------------------------|---|-----------------------------------|----------|--|
| | Total I | Funds Requested: | | |
| \$1,699.60 | | | | |
| | PROJEC | T INFORMATION | | |
| Fund: | 1087 (Lealman Com Redev Ag | gency Trust) | | |
| Center: | 691157 (Lealman CRA Trust-0 | Otr) | | |
| Account: | 5800001 (TIF - Grants and Aid | ds) | | |
| Program No: | 7147 | | | |
| | BREAK | DOWN OF FUNDS | | |
| | Total Project Amount: | \$ 3,399.20 | | |
| | Eligible Grant Award: | \$ 1,699.60 | | |
| | Mail Check to Vendor | Hold For Pickup [| Log Only | |
| Description: | 3970 54th Avenue St. Petersburg, FL St. Petersburg, | 33714 | | |
| | PAYMENT | AUTHORIZATION | | |
| The above case has l | been reviewed and meets all compliance | e and documentation requirements. | | |
| alm | | | 08/20/19 | |
| Requesting Signa | ature | Date | 00/20/23 | |
| Assistant to the C | County Administrator | _ | | |
| | has been verified and funding is approv | red | 08/20/19 | |
| Authorizing Signature Date | | | 00/20/13 | |
| Pinellas County A | Administrator | | | |
| Additional Comm | nents: | | | |
| | | | | |
| | | | | |





Lealman Community Redevelopment Area Non-Residential Improvement & Demolition Grant Program Application Package



Applications & supporting documents may be submitted electronically to <u>LealmanCRA@pinellascounty.org</u> or via hand delivery to:

Tanya Kurtin Lealman Exchange 5175 45th St. St. Petersburg, Florida 33714 (727) 464-5310 tkurtin@pinellascounty.org





Overview

The purpose of the Non-Residential Improvement & Demolition Program is to provide reimbursable *matching* grants to eligible applicants on a *first come*, *first served* basis that will accelerate and leverage private investment as a way to improve the appearance, condition, and functionality of existing non-residential buildings in the Lealman CRA, or to assist in the removal of substandard structures when the cost to renovate is not feasible. Properties must be located in the Lealman CRA (see Attachment A for map). Grant awards amounts will be provided as follows:

| Grant Type | Eligible Amount |
|------------------------------|--------------------|
| Non-Residential Improvements | \$1,000 - \$20,000 |
| Demolition | \$1,000 - \$10,000 |

Eligibility Guidelines

Non-Residential Improvement Program - All structurally sound, properly permitted buildings with an existing non-residential use located in the Joe's Creek Industrial District or along the following commercial corridors within the Lealman CRA boundary are eligible:

- 49th Street North
- 54th Avenue North
- 34th Street North
- Haines Road
- 28th Street North

Demolition Program – Any non-residential/commercial site within the Lealman CRA where there is substandard or deteriorated structure or part thereof. The structure must be functionally obsolete or economically unfeasible to repair, as determined by Pinellas County. Cost of asbestos survey, if applicable, shall be considered the applicant's sole responsibility.

APPLICANT ELIGIBILITY

A property owner or leasehold tenant are eligible to apply. Leasehold applicants are required to obtain written and notarized approval from the property owner prior to submission of an application. Applicants must be able to demonstrate (with assistance provided by County staff):

- · Ownership of the property
- The property is located in Lealman CRA.
- The applicant(s) must be current on all property taxes.
- The property must not have any outstanding liens or Code Enforcement violations.¹
- Verify the property is not in foreclosure.
- Review of proposed activities to determine eligibility.
- Property owners are eligible for Non-residential Improvement grants once every five years.

¹ Properties with limited Code Enforcement/Utility liens made be considered on a case-by-case basis.





ELIGIBLE & INELIGIBLE GRANT ACTIVITIES

Non-Residential Improvement Program - Eligible Improvements

- ADA improvements (interior and exterior)
- Architectural, building permit and engineering fees (not to exceed 10% of total funding request)
- Awnings/canopies/shutters (repair or new)
- Demolition of obsolete structures necessary for interior or exterior expansion
- Electronic security systems (exterior metal roll down gates, window bars are ineligible)
- Energy efficiency improvements (window upgrades, insulation, hot water heater, HVAC systems)
- Exterior painting, re-siding and/or cleaning
- Exterior doors & windows
- Exterior signage, including wall, window, hanging, and monument signs advertising the business name and identity (repair or new)
- · Flood-proofing and wind hardening of building
- Masonry repairs
- Plumbing and electrical
- Remediation of environmental contamination on the interior or exterior of the building such as lead, asbestos or petroleum
- Repair/replacement of deteriorated building materials (plywood, metal, stucco, etc.)
- Restoration of significant architectural details or removal of materials that cover said architectural details
- Roof replacement or repairs
- Room/space reconfiguration, wall relocations
- Site improvement features such as landscaping, fencing, parking lots, walkways/sidewalks, lighting, dumpster enclosures and buffer walls provided such features do not collectively exceed more than 25 percent of the eligible project costs
- Stormwater / drainage improvements
- Structure stabilization (repair/replacement of foundations, footers, load bearing walls, roofing systems)

Ineligible Improvements

- Work performed by an unlicensed contractor
- Improvements completed or in progress prior to approval of the grant application
- Improvements to buildings solely used for residences
- New building construction (additions to existing structures are permitted)
- Improvements to structures built within the last 5 years
- Reducing or enclosing existing storefront windows
- Exterior security systems (including metal roll down gates, window bars)
- Routine maintenance





Application Process

Applicants should complete the application provided on the following pages. Applications can be submitted electronically by emailing LealmanCRA@pinellascounty.org or via hand delivery at the Lealman Exchange, located at 5175 45th St. N., St. Petersburg, FL 33714. Pinellas County staff will review the information provided and contact the applicant to inform them of their eligibility status or to request any additional information as may be needed to determine eligibility. If approved for funding Pinellas County will assist the applicant with developing a scope of work and obtaining bids from licensed contractors.





| Lealman CRA Non-Residential Improvement and Demolition Grant Program Application Project Information |
|--|
| Date 2 19 19 |
| Project Address 37090 54 AVE. N. |
| Zoning |
| Parcel ID |
| Current Building Use (i.e., Vacant, Commercial, Industrial, Mixed use with Residential) |
| Proposed Business Use |
| Funding Amount Applying For |
| Lealman CRA Residential Improvement and Demolition Grant Program Application Use of Funding Proceeds (provide attachment of detailed cost breakdown) |
| Labor |
| Supplies/Materials |
| Equipment |
| Architectural/Engineering |
| Other (define) |
| Project Description (attach any drawings and/or detailed written description as necessary) SidE Door rephace AND NEW SIGN |





Eligible Grant Activities (Check all that apply to your application.)

| Activity | Checkbox |
|--|----------|
| ADA improvements (interior and exterior) | B. H. |
| Architectural, building permit and engineering fees (not to exceed 10% of total funding | |
| request) | |
| Awnings/canopies/shutters (repair or new) | |
| Demolition of obsolete structures necessary for interior or exterior expansion | |
| Electronic security systems (exterior metal roll down gates, window bars are ineligible) | |
| Energy efficiency improvements (window upgrades, insulation, hot water heater, HVAC systems) | |
| Exterior painting, re-siding and/or cleaning | |
| Exterior doors & windows | V |
| Exterior signage, including wall, window, hanging, and monument signs advertising the | |
| business name and identity (repair or new) | |
| Flood-proofing and wind hardening of building | |
| Masonry repairs | |
| Plumbing and electrical | |
| Remediation of environmental contamination on the interior or exterior of the building such | |
| as lead, asbestos or petroleum | |
| Repair/replacement of deteriorated building materials (plywood, metal, stucco, etc.) | |
| Restoration of significant architectural details or removal of materials that cover said architectural details | |
| Roof replacement or repairs | |
| Room/space reconfiguration, wall relocations | |
| Site improvement features such as landscaping, fencing, parking lots, walkways/sidewalks, | |
| lighting, dumpster enclosures and buffer walls provided such features do not collectively | |
| exceed more than 25 percent of the eligible project costs | |
| Stormwater / drainage improvements | |
| Structure stabilization (repair/replacement of foundations, footers, load bearing walls, roofing | |
| systems) | ĺ |





Lealman CRA Non-Residential Improvement and Demolition Program Application Applicant Certification and Signatures I certify that the information provided in this application is true and accurate to the best of my ability and no false or misleading statements have been made in order to secure approval of this application. You are authorized to make all the inquiries you deem necessary to verify the accuracy of the information contained herein. Applicant Signature Buddy Hermander Print Name Date 2 119119

| Lealman CRA Non- Residential Improvement and Demolition Program Application Owner Authorization | |
|--|--|
| As owner of the property/properties located below, I hereby authorize the Applicant as identified above to undertake the activities specified in this application. | |
| Property Address | |
| | |
| Property Identification Number | |
| | |
| Owner Signature | |
| | |
| | |
| Date | |
| | |

FASTS/GNS.
More than fast. More than signs:

4058 Park Street Saint Petersburg, FL 33709 (727) 341-0084

More than fast. Nore than signs. @ fastsigns.com/358

PAID IN FULL

INVOICE 358-42489

Completed Date: 7/29/2019
Payment Terms: Cash Customer
Payment Due Date: 7/29/2019

Created Date: 6/14/2019

DESCRIPTION: 4 x 8 Sign Panels

Bill To: Buddy For Hair

3970 54th Avenue St. Petersburg, FL 33714

US

Pickup At: FASTSIGNS — Saint Petersburg, FL - Park Street

.4058 Park Street

Saint Petersburg, FL 33709

US

Ordered By: Buddy Hernandez

Email: buddyhair54@gmail.com

Work Phone: (727) 459-8701

Salesperson: House 172401 - St. Petersburg Park St

| NO. | Product Santmary | QTY | UNIT PRICE | TAXABLE | AMOUNT |
|-----|---|-----|-------------------|------------|------------|
| ુ 1 | 4' x 8' Sign Panels | √ 2 | \$500.00 | \$1,000.00 | \$1,000.00 |
| 1. | Aluminum Composite Panel - 6mm - Notes: 4' x 8' Sign Panels - 6mm ACM Panel with printed vinyl graphics and protective UV laminate | | | | |
| | includes installation (using existing post) per engineering and county code | | , | | , |
| 2 | Parmit Aquisition Fee | V 1 | \$550.00 | 10.00 | \$550.00 |
| 2,1 | Permit Aquisition - | | | | |
| | Notes: Permit Acquisition Fee - This fee is for site survey, photos, drawings, administrative time and a state certified engineer to process, stamp and provide certified drawings required by the city/county for the permit application. | | | | |
| | (The permit will be billed at cost from the municipality upon completion of the permit processing.) | | | / | |
| 3 | Permit | √ 1 | √ \$281.20 | V #LC0 | \$281.20 |
| 3.1 | Permit - | | | | |

You can log in to your secure customer portal to make an online payment or you can enter the information here and fax back to us

PAYMENT INFORMATIO N Visa - Mastercard - AMEX - Discover

Fast Sign 5

| ACCT# |
|---|
| EXP DATE CCV CODE CARD HOLDERS NAME |
| BILLING ADDRESS |
| ZIP CODE |
| AUTHORIZED SIGNATURE_ The Above Signed Authorizes FASTSIGNS to Charge the Amount Stated CUSTOM SIGNS ARE NON REFUNDABLE |

| Subtotal: | \$1,831.20 |
|-----------------|------------|
| Taxable Amount: | \$1,000.00 |
| Taxes: | \$70.00 |
| Grand Total: | \$1,901.20 |
| Amount Pald: | \$1,901.20 |
| BALANCE DUE: | \$0.00 |

* 0 • C

PLEASE FAX BACK TO 727-341-0242

| | TRANSACTIONS | |
|------------|-------------------------------|-------------|
| Date | Type / | / Amount |
| | / MasterCard (Offline) - 5009 | √, \$820.00 |
| 6/24/2019 | MasterCard (Offline) - 5009 | \$1,081.20 |
| 8/5/2019 🗸 | MasterCard (Offine) - 3003 | |

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Brinson, Ryan

From:

Michael Norris <michael.norris@fastsigns.com>

Sent:

Tuesday, August 6, 2019 2:00 PM

To:

Brinson, Ryan

Subject:

Buddy for Hair Payment Information

Ryan,

I want to confirm that I received payments from Buddy Hernandez with Buddy for Hair. He paid with a credit card ending in 5009. One payment was for \$820.00 on 6/24/2019 with the balance of \$1081.20 paid with the same card 8/5/2019.

Please let me know if you need anything else from me

Thank you

Michael Norris



4058 Park Street

St Petersburg, FL 33709

727-341-0084

michael.norris@fastsigns.com





Georgia pereception of the market of the

Lien Release

Date 9-5-2019 Project - Buddy for Hair Sign 970 54th Avenue St. Petersburg, FL 33714

For the sum of \$1901.20 Tightrope, Inc dba FASTSIGNS does herebyu waive, release and relinquish any and all claim debt, demands, and causes against Buddy Hernandez - Buddy for Hair.

This further certifies that all labor, materials, supplies, equipment and services have been fully paid for.

Michael D. Norris President

Wale 1 D. lei, 8519

CLEARWATER WINDOW and DOOR, INC.

Clearwater Window & Door, Inc.

2025 Gulf to Bay Blvd., Clearwater, FL 33765 Phone: (727) 559-7007 Fax: (727) 447-1008

4033

License Number: C-10981

Serving The Suncoast Since 1957 Visit our Showroom

| CUSTOMBR BUNNY HADAMANI) 87 | SHIP TO: | | |
|---|--|--|---------------------|
| ADDRESS 3970 541th AVE N | ST PETE | Fr 33 | 714 |
| PHONE 727 459-8-20ELL | SALESPERSON | EDERICK | |
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| Date PaidVisa_7-8-19 Parti | algorment Balance Du | e, Installation \$_ | 478 . |
| * NOTE: BALANCE DUE AT TIME OF INS | TALLATION, NO EXCE | PTIONS! - | 800.00 |
| BUYER'S RIGHT TO CANCEL | Balan | vce Due 1 | 198.00 M |
| IF THE ABOVE INDEBTEDNESS WAS SOLICITED IN YOUR HOME AND IF YOU I BY PROVIDING WRITTEN NOTICE TO THE CONTRACTOR IN PERSON, BY TELE | OO NOT WANT THE GOODS OR GRAM, OR BY MAIL, YOUR NOTI | SERVICES, YOU MAY CAN CE MUST INDICATE THAT | YOU DO NOT WANT THE |
| GOODS OR SERVICES AND MUST BE DELIVERED OR POSTMARKED BEFORE | E MIDNIGHT OF THE THIRD BUS | INESS DAY AFTER YOU S | GN THIS AGREEMENT. |
| IF YOU CANCEL THIS AGREEMENT CONTRACTOR MAY NOT KEEP ALL OR PAI | RT OF ANY CASH DOWN PAYME | :N I. | |
| STATUTORY NOTICE REGARDING CONSTRUCTION LIEN | S. ACCORDING TO ELG | DEIDA'S CONSTRU | CTION LIEN LAW |
| (§§713.001-713.37, FLORIDA STATUTES), THOSE WHO V | O' VOCCHINING TO LE | EDTY OD DDOVIDE | MATERIAL CAND |
| (99/13.001-/13.3/, FLOHIDA STATUTES), THOSE WHO V | VORK ON YOUR PROPE | TO A PROVIDE | INIATERIALS AND |
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| ALREADY PAID YOUR CONTRACTOR IN FULL. IF YOU FA | IL TO PAY YOUR CONT | RACTOR, YOUR CO | NTRACTOR MAY |
| ALSO HAVE A LIEN ON YOUR PROPERTY. THIS MEANS IF | ALIEN IS FILED YOUR P | ROPERTY COULD F | E SOLD AGAINST |
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| PAYMENT IS MADE YOUR CONTRACTOR IS REQUIRED TO | | | |
| ANY PERSON OR COMPANY THAT HAS PROVIDED TO YO | U A "NOTICE TO OWNE | R." FLORIDA'S CON | STRUCTION LIEN |

I HEREBY CERTIFY THAT I HAVE READ AND FULLY UNDERSTAND THE PROVISIONS OF THIS CONTRACT, INCLUDING THE TERMS AND CONDITIONS CONTAINED ON THE REVERSE SIDE, AND I AGREE TO ALL OF THE PROVISIONS, TERMS AND CONDITIONS THEREOF.

LAW IS COMPLEX, AND IT IS RECOMMENDED THAT YOU CONSULT AN ATTORNEY.

CLEARWATER WINDOW &DOOR 2025 GULF TO BAY BLVD CLEARWATER, FL 33765 727-559-7007

SALE

MD: 0000 Store: 0001 Term: 5567 REF#: 00000001 Batch #: 229 RRN: 918918400413 07/08/19 14:35:04 AVS: EXACT HATCH Trans ID: 309189669042581 APPR CODE: 05132C VISA Manual CP

AMOUNT

\$800,00

APPROVED

I AGREE TO FAY ABOVE TOTAL AUGUST IN ACCORDANCE WITH CARD ISSUER'S TORECHENT (MERCHANT AGREEMENT IF CREDIT VOUCHER) RETAIN THIS COPY FOR STATEMENT VERIFICATION

Thank You Please Come Again

MERCHANT COPY

CLEARWATER WINDOW &DOOR 2025 GULF TO BAY BLVD CLEARWATER, FL 33765 727-559-7007

SALE

Store: 0001 Term: 5567 MID: 0000 REF#: 00000002 Batch #: 230 RRN: 919014203816 07/09/19 10:59:59 AVS: EXACT MATCH Trans ID: 589190539991500 APPR CODE: 00011C VISA Manual CF **************0715 ** jac

AMOUNT

\$198.00

APPROVED

I AGREE TO PAY ABOVE TOTAL ANOUNT
IN ACCORDANCE THE CARD ISSUER'S
AGREEMENT
(MERCHANT AGREEMENT IF CREDIT VOUCHER)
RETAIN THIS COPY FOR STATEMENT
VERIFICATION

Thank You Please Come Again

MERCHANT COPY

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1 . 498 . 00 0 . 006+ CLEARWATER WINDOW &DOOR 2025 GULF TO BAY BLVD CLEARWATER, FL 33765 727-559-7007

SALE

Store: 0001 Term: 5567 MID: 0000 REF#: 00000004 RRN: 914017202204 Batch 推 197 13:51:46 05/20/19 Trans ID: 589140643066074 APPR CODE: 04412C Chip

VISA

AMOUNT

\$500.00

APPROVED

HERNANDEZ/BUDD

VISA CREDIT AID: A0000000031010

TVR: 00 80 00 80 00 TSI: F8 00

I AGREE TO PAT ABOVE TOTAL AHOUNT
IN ACCORDANCE WITH CARD ISSUER'S
AGREWENT
[MERCHANT AGREEMENT IF CREDIT VOUCHER
RETAIN THIS COPT FOR STATEMENT
VERIFICATION

Thank You Please Come Again

MERCHANT COPY

FINAL WAIVER AND RELEASE OF LIEN UPON DOWN PAYMENT

State of Florida County of Pinellas

The undersigned lien holder, Clearwater Window & Door, Inc., in consideration of the Final down payment in the amount of \$ [98.00], hereby waives and releases its lien for the said amount and right to claim of lien for labor, services or materials furnished to

| furnished to |
|---|
| Name: |
| Buddy HerNandez, |
| To the following described property: |
| 3970 54 H Ave N. |
| 3970 54 th Ave N. 5+. Pete, FL 33714 |
| The balance of the lien amount to be released upon final payment of the signed contract. The final payment will include any permit fees and or changes made to the contract prio to completion if necessary, as stated in the contract. |
| Dated on this 9 day of August, 2019 |
| Clearwater Window & Door, Inc. 2025 Gulf to Bay Blvd. Clearwater, FL 33765 |
| |
| Officers Signature LAURA A KURTZ Notary Public - State of Florida |

Notary Stamp

Commission # GG 005370 My Comm. Expires Sep 8, 2020 Bonded through National Notary Assn.

Rev. October 2018)

Request for Taxpayer identification Number and Certification

Give Form to the requester. Do not send to the IRS.

| E-Military | Lestings to the second of the second section of the second section second section second section second section second second section second s | | | PHILIPOIL. | | | | | |
|--|--|---|--|-----------------------------|---|---|-----|---|--|
| | 1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Buddy for Hair Inc | | | | | | | | |
| | 2 Susin sas name/disregarded entity name, if different from above | | | | | | | | |
| Print or type. Specific Instructions on page 3. | Check: appropriate dux no secret lax dessanceaux of the person tendes frame is entered on the 1. Check one following seven boxes. | | | | 4 Elemptions (codes apply only to certain entities, not individuals; sea instruction at on page 3): | | | | |
| | single-member LLC | | 20 5.500.00 | Exampt Day so code (if any) | | | | | |
| | Limited liability company. Enter the tax classification (C=C corporation,) Note: Check the appropriate toox in the line above for the tax classificati LLC if the LLC is classified as a single-member LLC that is claregarded another LLC that is not disregarded from the owner for U.S. federal tax, is classified from the owner should check the appropriate box for the | weer. Do s pwner of th | te LLC is | | | | | | |
| Dec | Other (see instructions) > 5 Address (number, sines), and apt. or suite to.) See instructions. Requester's comes or | | | | | Applies to BUSINESS maintained coulde the U.S.) | | | |
| 888 | 2621 9th Avenue North | Requester's name and address (optional) | | | | | | | |
| ď | 6 City, state, and ZIP code | | | | | | | | |
| | St Petersburg, FL 33713 | | | | | | | | |
| | 7 List account number(s) here (optional) | | | | | | | | |
| torono. | | | | | | | | | |
| Par | | | | Contain a | | | | | |
| Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid Social security in backup withholding. For individuals, this is generally your social security number (SSIN). However, for a | | | | | | ny manter | | | |
| reside | nt alien, sole proprietor, or disregarded entity, see the instructions for | Part I, later, For other | | | - | | - | | |
| entities, it is your employer identification number (EIN). If you do not have a number, see How to get a | | | | | | | | | |
| Nation: | If the acquent is in more than one name, see the instructions for line 1 | I. Also see What Name : | | | Identificat | don mab | er | | |
| Numb | ar To Give the Requester for guidelines on whose number to enter. | | | 20 | - 3 8 | | | | |
| Taviori | n | | | -14 | 11 | 9 5 | 7 5 | 8 | |
| Pari | | | - yea - Oto 4-simumour- | | | - | | | |
| Under pensities of perjury, I certify that: 1. The number shown on this form is my correct lawpayer identification number (or I am waiting for a number to be issued to me); and | | | | | | | | | |
| 2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and | | | | | | | | | |
| 3. I am | a U.S. citizen or other U.S. person (defined belowly and | | | | | | | | |
| 4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct. | | | | | | | | | |
| Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report at interest and dividends on your tex return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later. | | | | | | | | | |
| Sign Hare | Signature of U.S. parton > | | Date > | - | | | | | |
| Ger | eral Instructions | Form 1099-DIV (dividends, including those from stocks or mutual funds) | | | | | | | |
| Section noted. | n references are to the Internal Revenue Code unless otherwise | Form 1099-MISC (various types of income, prizes, awards, or gross proceeds) | | | | | | | |
| Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to xww.irs.gow/FormW9. | | Form 1099-B (stock or mutual fund sales and certain other transactions by brokers) | | | | | | | |
| | ose of Form | Form 1099-S (proceeds from real estate transactions) | | | | | | | |
| - | vidual or entity (Form W-9 requester) who is required to file an | • Form 1099-K (merc | Form 1099-K (merchant card and third party network transactions) Form 1098 (home mortgage interest), 1098-E (student loan interest), | | | | | | |
| តែទែលប | alion return with the IRS must obtain your correct taxpayer ration number (TIN) which may be your social security number | TUSS-I (DURION) | TOSS-I (DUBON) | | | | | | |
| (36N). | individual taxpayer identification number (ITIN), adoption | • Form 1099-C (canceled debt) | | | | | | | |
| EIN), to | er identification number (ATM), or employer identification number o report on an information return the amount paid to you, or other t reportable on an information return. Examples of information | Form 1989-A (acquisition or abandonment of secured property) Use Form W-9 only if you are a U.S. person (including a resident atien), to provide your correct TiM. | | | | | | | |
| | include, but are not limited to, the following. | If you fire and cohom From M.O in the conventor with a reason of the | | | | | | | |

If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.

Form 1099-INT (Interest earned or paid)





CERTIFICATE OF FINAL INSPECTION

| Date | of Contract: 7/24/19 | Case No. Buddy for Hair | | | | |
|-------|---|---|--|--|--|--|
| Addr | ess of Rehabilitated Property: | | | | | |
| | 3970 54th AVE N, ST. PETERSBURG, FL 33714 | | | | | |
| | | | | | | |
| | | | | | | |
| I. | I/we find that all work specified in the above and therefore request final disbursements to the | | | | | |
| | I/we are aware of the "Rights Under the C stated in my contract with the address and I Florida. | | | | | |
| II. | I/we acknowledge that the contractor has supplied and reviewed all applicable contractor's warranty information with me/us, including, all factory warranties for appliances, material, machinery, etc. | | | | | |
| | I/we understand that the Pinellas County Rec the workmanship or the conditions of any w have any warranty related issues they should b | arranty provided by our contractor. If we | | | | |
| BI | udder Heinenden | 7/24/19 | | | | |
| Owne | er | Date | | | | |
| Co-O | wner | Date | | | | |
| II. | I acknowledge that the work completed has be and change orders, if applicable. Inspected by | | | | | |
| //6 | | Name of Inspector | | | | |
| L. | | 7/24 /19 | | | | |
| Inspe | ctor signature | Date | | | | |



