MIAMI LAKES
Growing Beautifully

6601 Main St • Miami Lakes, Florida, 33014
Office: (305) 827-4015 • Fax: (305) 558-9884
Website: www.miamilakes-fl.gov

BUILDING PERMIT APPLICATION

Job Address: 14610 Dade Pine Ave
Unit #:
Folio #: 32-2023-010049 Owner-Builder: ☐

Master Permit #: _____ Sub Permit #: _____ Revision #: _____

OWNER INFORMATION

NAME: Allen & Ileanar Cueli
Address: 14610 DADE PINE AVE
City, State, Zip: MIAMI LAKES, FL 33014
Phone #: N/A Cell #: (305) 986-2351
Email Address:

LEGAL USE/ WORK

Current Use of Property: residential
Job Description: RE ROOF metal

JOB COST $ 54,660 AREA/LENGTH: 4300 SF/LF

Residential ☒ Multi-Family ☐ Commercial ☐ Industrial ☐
Code in Effect:
Occupancy:
Construction Type:
Flood Zone/B.F.E.: _____ F.F.E.: _____

CONTRACTOR INFORMATION

Company Name: Gold STAR Roofing of South Florida Corp.
Qualifier Name: JOSE ESMELIN MARTINEZ SR.
License # CCC 1330842
Address 12260 SW 8TH STREET Suite #160
City, State, Zip Miami FL 33184
Phone #: 786-374-9269 Cell #: 786-496-9355
Email Address: ESMELIN@GoldSTARroofing.US

ARCHITECT/ ENGINEER

Firm Name:
A/E of record:
License #
Address
City, State, Zip
Phone #: Cell #:
Email Address:

Permit Type -- Check only One

☐ Building ☐ Electrical ☐ Mechanical ☐ Plumbing/Gas
☐ Paving/Drainage ☐ Sign ☑ Roofing ☐ P/W

Change to Permit -- Check only One

☐ Extension ☐ Renewal ☐ Revision
☐ Change Contractor ☐ Shop Drawing ☐ Cancellation

Application is hereby made to obtain a permit to do work and installation as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards, of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, MECHANICAL, PLUMBING, SIGNS, WELLS, POOLS, RE-ROOFING, SHUTTERS, WINDOWS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc. I understand that in signing this application I am responsible for the supervision and completion of the construction including scheduling of inspections and obtaining final inspections in accordance with the plans and specification WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOU PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR ATTORNEY OR LENDER BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. OWNER/CONTRACTOR AFFIDAVIT: I Certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

X Allen Cueli — Signature of Owner or Owner's Agent — Date: 5/5/2026
Allen Cueli — Print Name of Owner or Owner's Agent

X [signature] — Signature of Qualifier — Date: 5/15/26
Jose Esmelin Martinez — Print Name of Qualifier

STATE OF Florida COUNTY OF Miami Dade
Sworn to and subscribed before me this 15 May 2026
by Allen Cueli (SEAL)
Personally known ☐ or I.D. DL

MAITEE TEJEDA
Commission # HH 667914
Expires June 1, 2029

STATE OF Florida COUNTY OF Miami Dade
Sworn to and subscribed before me this 15 may 2026
by Jose esmelin Martinez (SEAL)
Personally known ☒ or I.D. _____

MAITEE TEJEDA
Commission # HH 667914
Expires June 1, 2029

NOTICE: In addition to the requirements of this permit, there may be additional deed restrictions enforced by the homeowner's associations that may be applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

NOTE: This application will be void if there are no reviews after six(6) months.