

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 #: 32-20230100490 Owner-Builder: ☐

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

OWNER INFORMATION	NAME: <u>Allen & Ileana Cueli</u>	LEGAL USE/WORK	Current Use of Property: <u>Residential</u>
	Address: <u>14610 DADE PINE AVE</u>		Job Description: <u>RE ROOF METAL</u>
	City, State, Zip: <u>MIAMI LAKES, FL 33014</u>		
	Phone #: <u>N/A</u> Cell #: <u>(305) 986-2351</u>		JOB COST \$ <u>54,660</u> AREA/LENGTH: <u>4300</u> SF/LF
	Email Address: _____		Residential ☒ Multi-Family ☐ Commercial ☐ Industrial ☐
CONTRACTOR INFORMATION	Company Name: <u>GOLD STAR ROOFING OF SOUTH FLORIDA CORP.</u>	ARCHITECT/ENGINEER	Code in Effect: _____
	Qualifier Name: <u>JOSE ESMELIN MARTINEZ SR.</u>		Occupancy: _____
	License # <u>CCC 1330842</u>		Construction Type: _____
	Address: <u>12260 SW 8TH STREET SUITE #160</u>		Flood Zone/B.F.E.: _____ F.F.E.: _____
	City, State, Zip: <u>MIAMI FL 33184</u>		Firm Name: _____
Phone #: <u>786-374-9269</u> Cell #: <u>786-496-9355</u>	A/E of record: _____	License # _____	
Email Address: <u>ESMELIN@GOLDSTARROOFING.US</u>	Address _____	Address _____	
	City, State, Zip _____	City, State, Zip _____	
	Phone #: _____ Cell #: _____	Phone #: _____ Cell #: _____	
	Email Address: _____	Email Address: _____	

Permit Type -- Check only One

Change to Permit -- Check only One

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

☐ 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

5/5/2026
Date

X Jose Esmelin
Signature of Qualifier

5/15/26
Date

Allen Cueli
Print Name of Owner or Owner's Agent

Jose Esmelin Martinez
Print Name of Qualifier

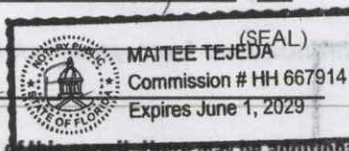
STATE OF Florida COUNTY OF Miami Dade

STATE OF Florida COUNTY OF Miami Dade

Sworn to and subscribed before me this 15 May 2026

by Allen Cueli

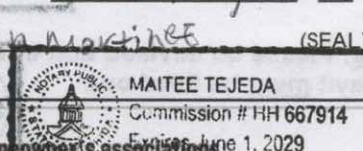
Personally known ☐ or I.D. DL



Sworn to and subscribed before me this 15 May 2026

by Jose Esmelin Martinez

Personally known ☒ or I.D. ☐



NOTICE: In addition to the requirements of this permit, there may be additional deed restrictions enforced by the home owner'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.