



APOPKA DEVELOPMENT REVIEW COMMITTEE AGENDA

September 10, 2025 9:00 AM

Apopka City Hall Council Chambers

SPECIAL EVENTS

1. **Co-Packing USA LLC-DBA Propagate Social House - Market On Fifth - 5th Street in downtown Apopka - Every Friday September through July, 6:00 PM - 9:00 PM**

SITE PLAN:

CONSTRUCTION SITE PLAN

1. **CSP-25-34 Gale Vista (Live Local) - Construction Site Plan (CSP), 1st Submittal**

DISCUSSION

ADJOURNMENT

Individuals with disabilities needing assistance to participate in any of these proceedings should contact the City Clerk at least two (2) working days in advance of the meeting date and time at (407) 703-1704. F.S. 286.0105 If a person decides to appeal any decision or recommendation made by Council with respect to any matter considered at this meeting, he will need record of the proceedings, and that for such purposes he may need to ensure that a verbatim record of the proceedings is made, which record includes the testimony and evidence upon which the appeal is to be based.

Any opening invocation that is offered before the official start of the Council meeting shall be the voluntary offering of a private person, to and for the benefit of the Council. The views or beliefs expressed by the invocation speaker have not been previously reviewed or approved by the City Council or the city staff, and the City is not allowed by law to endorse the religious or non-religious beliefs or views of such speaker. Persons in attendance at the City Council meeting are invited to stand during the opening ceremony. However, such invitation shall not be construed as a demand, order, or any other type of command. No person in attendance at the meeting shall be required to participate in any opening invocation that is offered or to participate in the Pledge of Allegiance. You may remain seated within the City Council Chambers or exit the City Council Chambers and return upon completion of the opening invocation and/or Pledge of Allegiance if you do not wish to participate in or witness the opening invocation and/or the recitation of the Pledge of Allegiance.



DRC: 9/10

Special Event Permit Application

A completed Special Event Permit application is required for all events with the City of Apopka. All events will be reviewed by our Development Review Committee for approval. The City of Apopka has the exclusive right to permit or deny an individual or organization facility use.

Once we have the complete special event application we will schedule for review and approval. Please note this may take time, as we suggest that all applications submitted at least 60 to 90 days prior to the event.

Incomplete applications will not be reviewed. After approval, an estimation of fees forms for your event based on the application and the approval is applicable.

Lexi Lahendro – Events Coordinator
events@apopka.net
407-703-1812

You must submit all required documents with your application.

Special Event Permit Application Checklist

Remember, we suggest that all applications submitted at least 60 to 90 days prior to the event.

Please review this checklist and make sure you have the items requested below available during this application process.

1. Completed Special Event Permit Application
2. Event Description
3. A \$50.00 permit fee is required for all applications. Once the application is received staff will reach out for payment of the permit fee. No application will be reviewed until the permit fee is received.
4. A certificate of general liability insurance listing the "City of Apopka" as 'Additional Insured' must be submitted. Copy of the declaration sheet and endorsement page must be included. Additional insurance may be required, please see the event insurance requirements.
5. A site plan (Map) or Parade/Race Route **MUST** be submitted with your application. Map must identify location of staging, tents, parking, barricades, vendors, and restrooms and must be to scale.
6. Letter from the property owner granting permission for use of their property. (if on private property)
7. If alcohol will be served at your event you must include the alcohol permit and insurance with the completed permit
8. Copies of flyers and advertisements.
9. Policies and protocols in regards to CDC Guidelines/COVID-19 & social distancing
10. All renters and vendors must have a listing with the Florida Department of State Division of Corporations. Visit www.sunbiz.org for more information about the process of registering a business.
11. All businesses must also must submit a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.

Applicant must be present for duration of event.

Organization Name Co-Packing USA LLC - DBA Propagate Social House

Name of Applicant Ella Duke

Mailing Address	40 E. 5TH ST
City	APOPKA
State	FL
Zip Code	32703
Cell Phone	4079889103
Email	HELLO@PROPAGATESOCIALHOUSE.COM
Is your organization a Non – Profit (501C3) OR Tax Exempt Organization?	No
State of Florida Tax ID Number	83-4316808
Please attach a copy of your Business Tax Receipt for the municipality/county that your business/organization is registered in.	 IMG_5167.HEIC
Name of the Event	Market On Fifth
Date(s) of the Event	Every Friday from 6pm to 9pm between the months of September through to July
Hours of the Event	6pm to 9pm
Location of the Event	5th street in downtown apopka
Does the location of the event take place on Public or Private Property?	Yes
Anticipated attendance:	200
Briefly describe the event and all activities that will occur during the event:	Market On Fifth is a weekly Farmers Market that takes place every Friday between 6 and 9PM in downtown, Apopka on 5th street. It features 30+ Vendors ranging from Farmers, Makers, Bakers, Food Trucks and more.
Event Category	• Other
Please specify	Farmers Market
Are there flyers or advertisements for this event?	Yes
Will there be admission fees to your event?	No
Will you be serving alcohol?	No
Is your event open to the public?	Yes
Does your event include food concession?	Yes
Do you intend to have food trucks at your event?	Yes

How many? 6

Will there be merchandising vending at your event?

Yes

How many vendors? 30

Will they need electric?

No

Will you be hiring a private security company for the event?

No

Do you require overnight security?

No

Are there musical entertainment features related to your event?

No

Will amplified sound be used during the event?

Yes

Will any streets be closed or will the flow of traffic be affected by the event?

Yes

Please indicate the road names 5th street between park and central

Does your event include the use of tents?

Yes

Please indicate tent location & size on layout. Permits and ground locates may be required.

What size of tents? 10x10 tents along the sides of the street

Will inflatables be used at your event?

No

Will your event include any fireworks or pyrotechnics?

No

Layout map for event



Date/Time (on site load in and load out)

For events that are held on City Property, set up days and load out days may require additional fees.

Setup/Load In

Date	09/26/2025
Start Time	4:30 PM (EDT)
End Time	9:00 PM (EDT)

Event Dates

Date	09/26/2025
Start Time	6:00 PM (EDT)
End Time	9:00 AM (EDT)

Take Down/Load Out

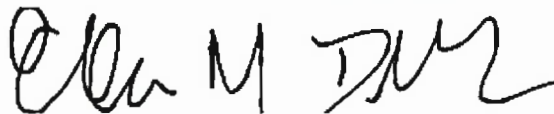
Date	09/26/2025
Start Time	9:00 PM (EDT)
End Time	9:30 PM (EDT)

I, Being the Applicant/Event Organizer, have read and understand the guidelines contained within the City of Apopka's Special Event Permit Application and agree to conduct my event in accordance. I further understand that failure to abide by these guidelines may result in the denial or forfeiture of my Special Event Permit.

The City of Apopka is not responsible for lost, stolen or damaged items.

I acknowledge that the information contained in this application is true, correct, and complete to the best of my knowledge.

Applicant Signature



Name of Applicant	Ella Duke
Title of Applicant	Market Manager
Date Submitted	08/27/2025

The Applicant/Event Organizer shall maintain at all times throughout the duration of the event, a current insurance policy naming the City of Apopka as an additional insured providing coverage for all approved event activities and must be active on the date(s) of the event, including the set-up and break-down period. Failure to provide proof of adequate coverage will result in the denial of the special event permit or cancellation of the event. The City may

require subcontractors acting on behalf of the Applicant/Event Organizer to provide proof of insurance or other related documents depending on the scope or location of the event.

- Comprehensive listing of all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers must be submitted no later than forty-five (45) business days prior to the event.
- All certificates of insurance, required extensions to said insurance certificates, copies of insurance policies and insurance agreements must be submitted no later than thirty (30) business days prior to the event.

If insurance requirements are not met at least twenty (20) business days prior to the date of the event, your event will be cancelled!

Please provide a copy of your certificate of insurance.

 COI City of Apopka.pdf

The City of Apopka defines an Applicant/Event Organizer as any individual or organization that is responsible for all aspects of an event to include advertising, marketing, talent costs, insurance, hold harmless agreement contracts, along with all the revenues and expenses for the event. The Applicant/Event Organizer agrees to conduct this event in accordance with the City of Apopka Code of Ordinances (Chapters 46 and 62).

REQUIREMENTS

- Applicant/Event Organizer recognizes the City's authority to halt the operation of the above listed event due to inclement weather or any other safety concern that may arise.
- The City is not responsible or liable for any damage, loss or theft to any vendor or event participant.
- Applicant/Event Organizer agrees that the City may use photographic images and video taken at the event in promotions and publications. These images may be used online or provided to media outlets and/or used in social media applications.

INSURANCE

Before activity setup, or any other site activity begins, Applicant/Event Organizer must have a Certificate of Liability Insurance **(including all extensions to the insurance certificate—to also include a copy of the complete insurance policy)** on file with the City's Risk Management Division. The cost of such insurance shall be the responsibility of the Applicant/Event Organizer and must meet ALL requirements as directed by the City of Apopka. The City reserves the right to increase coverage as determined for higher risk events or activities. This insurance policy must remain in effect throughout the entire duration of the property use beginning with load-in and ending at the conclusion of load-out.

- Applicant/Event Organizer shall, at its sole cost and expense, procure and maintain throughout the term of this agreement, Commercial General Liability and Workers' Compensation insurance, including Employer Liability insurance, with minimum policy limits of \$1,000,000 Combined Single Limits, or to the extent and in such amounts as required and authorized by Florida Law. If such GL insurance contains a general aggregate limit, it shall apply separately to this event in the amount of \$2,000,000. Products and completed operations aggregate shall be \$1,000,000. Damage to rented premises shall be included at \$100,000. The event Applicant/Event Organizer and their representatives who wish to drive on City property to set up or tear down for events, and/or Food Trucks and/or any vehicle that functions as the workplace or is used to perform contracted work must provide an Automobile Liability insurance policy in the minimum amount of \$300,000 Combined Single Limit. If alcohol is being served, the Applicant/Event Organizer shall provide evidence of coverage for liquor liability in

the minimum amount of \$1,000,000. The insurance policy must not exclude Personal Injury/Advertising Injury, Medical, volunteer coverage or spectator liability.

- All insurance policies shall: 1) provide that the insurance carrier shall not cancel, terminate or otherwise modify the terms and conditions of said policies except upon thirty days written notice to the City's contract administrator; 2) be evidenced by an endorsed Certificate of Insurance generated and executed by a licensed insurance broker, brokerage, or similar licensed insurance professional evidencing such coverage, and naming the City of Apopka as a named additional insured, as well as furnishing the City with a certified copy, or copies, of said insurance policies; and 3) be approved as to form and sufficiency by the City's contract administrator. The original insurance certificate(s) and all extensions to the insurance certificate(s) should be sent to: City of Apopka, Risk Management, 120 East Main Street, Apopka, FL 32703 or e-mailed to riskmanagement@apopka.net. All insurance coverage shall be written with a company having an A.M. Best Rating of at least the "A" category and size category of VIII.
- Applicant/Event Organizer is solely responsible for all applicable policy premiums, deductibles, and/or self-insured retention attached to any required coverages. Said insurance coverages procured by the Applicant/Event Organizer as required herein, including but not limited to any excess and/or umbrella coverages, shall be considered, and the Applicant/Event Organizer agrees that said insurance coverages it procures as required herein shall be considered, as primary insurance over and above any other insurance, or self-insurance, available to the City, and that any other insurance, or self-insurance available to the City shall be considered secondary to, or in excess of, the insurance coverage(s) procured by the Applicant/Event Organizer as required herein.
- Applicant/Event Organizer shall require and verify that all subcontractors, including but not limited to concessionaires, vendors, exhibitors, and entertainers, maintain insurance meeting all of the requirements stated herein. Furthermore, the insurance policy held by the Applicant/Event Organizer shall have no endorsement(s) restricting, limiting or excluding the subcontractors or work on behalf of the Applicant/Event Organizer by a subcontractor. The Certificate of Insurance submitted by the Applicant/Event Organizer must clearly state that all such subcontractors are "Named Insureds".

Nothing herein shall be construed to extend the City of Apopka's liability beyond that provided in section 768.28, Florida Statutes.

By signing below, I acknowledge that I have read and understand the insurance requirements contained herein. I further understand that my permit application may be declined if I fail to provide the appropriate insurance coverage.

Signature of Applicant



Name of Applicant

Ella Duke

Title of Applicant

Market Manager

Sponsoring Organization Name

N/A



CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

05/22/2025

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	INSocial Risk Advisors 283 S State Street Suite 102 Westerville, OH 43081	CONTACT NAME: Sofia Lopez PHONE (A/C, No, Ext): (614)942-1226 E-MAIL: slopez@insocialra.com ADDRESS:	FAX (A/C, No): (614)942-1226
INSURED	Co Packing USA, LLC DBA: Propagate Social House 40 E 5th St, Apopka, FL 32703 Apopka, FL 32703	INSURER(S) AFFORDING COVERAGE	NAIC #
		INSURER A: Nationwide General Insurance Company	23760
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	
		INSURER F:	

COVERAGES

CERTIFICATE NUMBER: 80237494-250522122912

REVISION NUMBER: 1

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.

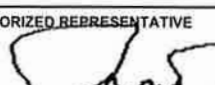
INSR LTR	TYPE OF INSURANCE	ADDL INSD	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	☒ COMMERCIAL GENERAL LIABILITY ☐ CLAIMS-MADE ☒ OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: ☒ POLICY ☐ PROJECT ☐ LOC OTHER:	Y		ACPBP013240375063	05/05/2025	05/05/2026	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY ☐ ANY AUTO ☐ OWNED AUTOS ONLY ☐ SCHEDULED AUTOS ☐ HIRED AUTOS ONLY ☐ NON-OWNED AUTOS ONLY						COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	UMBRELLA LIAB EXCESS LIAB DED RETENTION \$						EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	Y/N	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)

RE: Propagate Social House

CERTIFICATE HOLDER

CANCELLATION

City of Apopka 120 East Main Street Apopka, FL 32703	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  (SLL)
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CITY OF APOPKA

120 E Main Street

Apopka, FL 32703

Phone: 407-703-1719, Website: www.Apopka.gov/BTR

Local Business Tax Receipt

BTR ID:

BTR-6894

Issued Date:

October 30, 2024

Effective Date:

October 1, 2024

Expiration Date:

September 30, 2025

BTR Type(s):

(08R4-1) Restaurant - Seating

(08R4-2) Restaurant - Drive in/Carry out services

(08R4-3) Restaurant - Alcoholic Beverages served/sold

(08M6) Merchant

Business Name:

Co-Packing USA LLC DBA Propagate Social House

Business Location:

40 E 5th St APOPKA, FL 32703

Business Registration Number(s): L19000086478 G21000039200

Planning and Zoning Conditions:

Notes:

DBPR SEA5815306 Exp 04/01/25

DBPR BEV5813923 Exp 09/30/25

This receipt indicates payment of the business tax as required by Chapter 66 of the City Code. This receipt does not indicate verification of zoning compliance or actual operation of the stated business at this address.

NON-TRANSFERABLE

TO BE PLACED IN A CONSPICUOUS PLACE



**For Online
Access**

2025 FLORIDA LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L19000086478

Entity Name: CO-PACKING USA LLC

Current Principal Place of Business:

40 E 5TH ST
APOPKA, FL 32703

Current Mailing Address:

40 E 5TH ST
APOPKA, FL 32703 US

FEI Number: 83-4316808

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

VASS, JOANNA T
40 E 5TH ST
APOPKA, FL 32703 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

Authorized Person(s) Detail :

Title AMBR
Name VASS, JOANNA T
Address 608 S SUMMERLIN AVE
City-State-Zip: ORLANDO FL 32806

Title AMBR
Name FONNER, MICHAEL A
Address 608 S SUMMERLIN AVE
City-State-Zip: ORLANDO FL 32806

Title AMBR
Name DUKE, GABRIELA M
Address 608 S SUMMERLIN AVE
City-State-Zip: ORLANDO FL 32806

Title AMBR
Name KLEINRICHERT, JEROME J
Address 608 S SUMMERLIN AVE
City-State-Zip: ORLANDO FL 32806

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

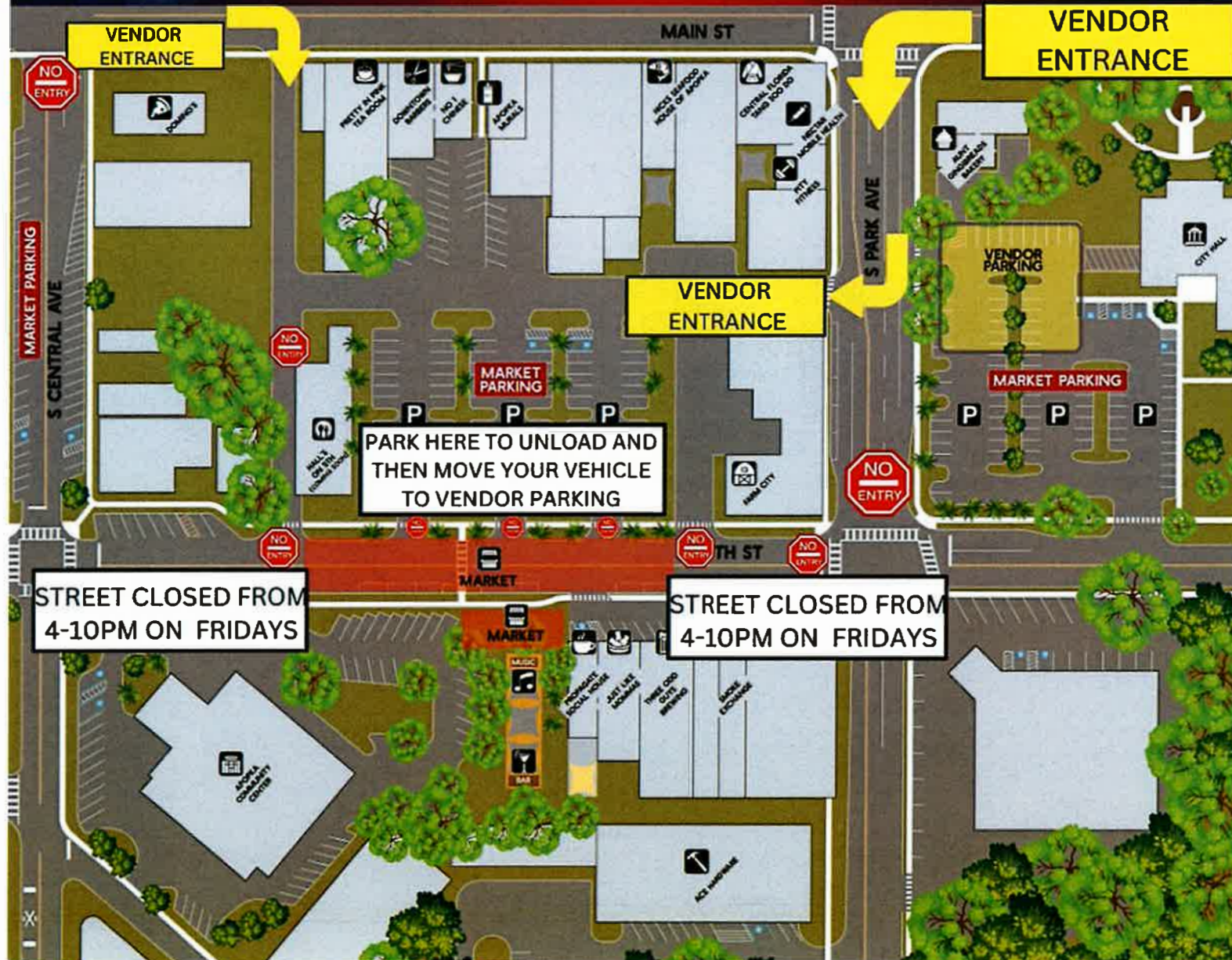
SIGNATURE: JOANNA T VASS

AMBR

04/30/2025

Electronic Signature of Signing Authorized Person(s) Detail

_____ Date



19. ALL UTILITY CONSTRUCTION SHALL BE DONE TO MEET THE CITY OF APACHE CONSTRUCTION STANDARDS AND SPECIFICATIONS.

- [illegible]

DEMOLITION NOTES:

[illegible]

JANUARY 2014

FIG. 6N



GALE VISTA

SOUTHPORT FINANCIAL SERVICES, INC.

CONSTRUCTION PLANS

EXISTING CONDITIONS AND DEMOLITION PLAN

SECTION 6 TOWNSHIP 21S RANGE 28E

2020 OLD DIXIE HIGHWAY

APORCA

ORANGE COUNTY COUNTY, FLORIDA

ATWELL

ARCHITECTS

1000 N. W. 10th Ave., Suite 1000

Fort Lauderdale, FL 33304

TEL: 954.574.1111

WWW.ATWELLARCHITECTS.COM

Brian C. Bowers

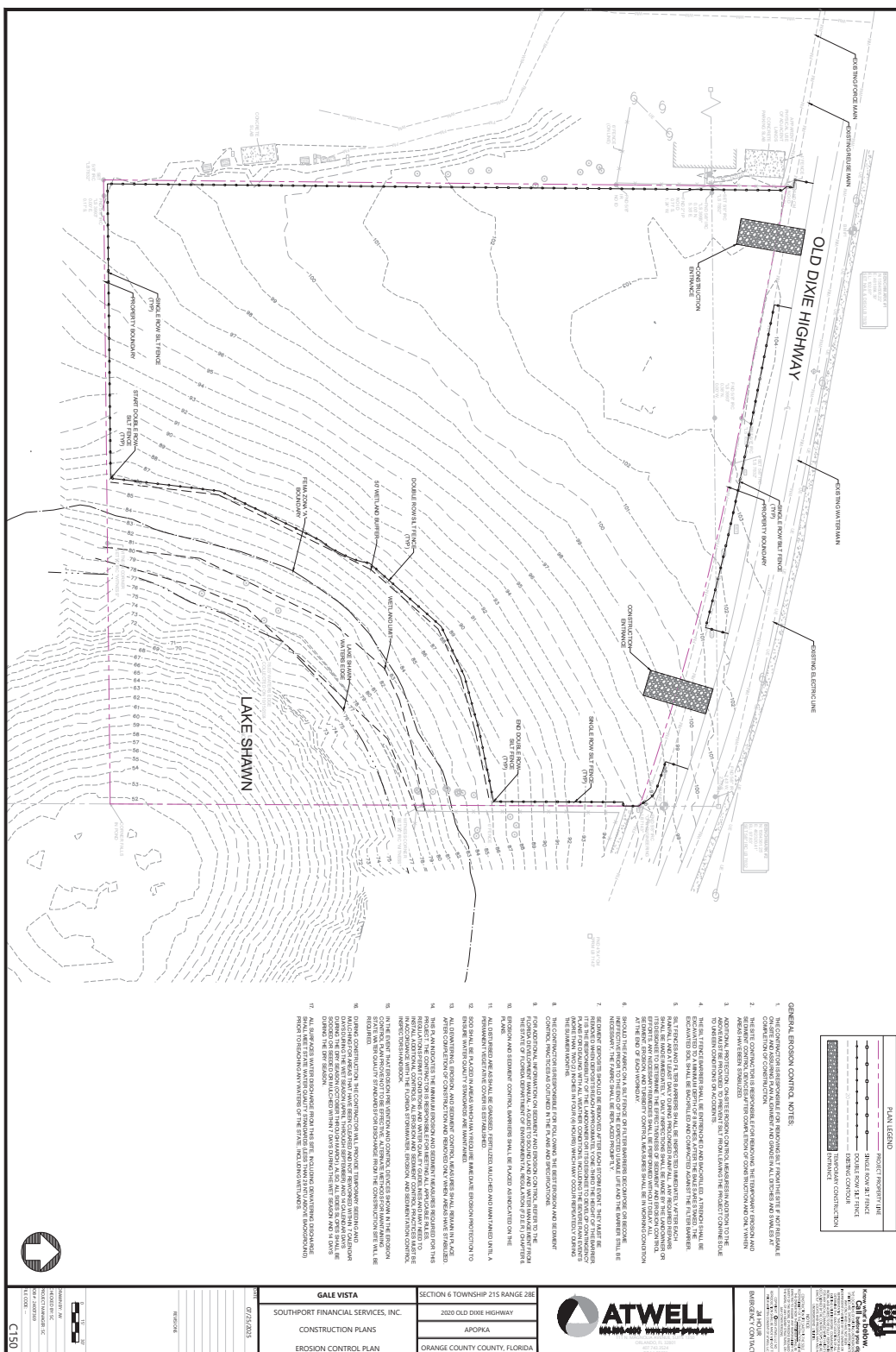
Professional Engineer

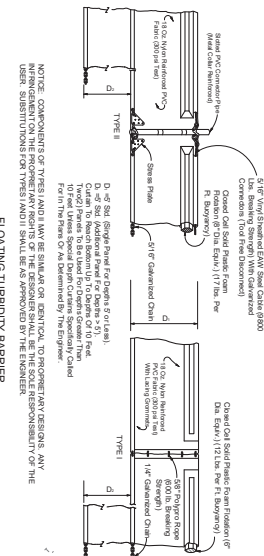
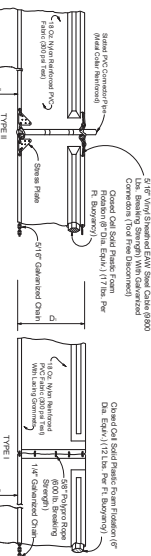
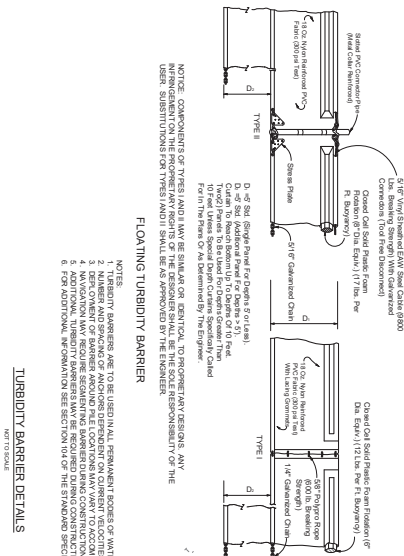
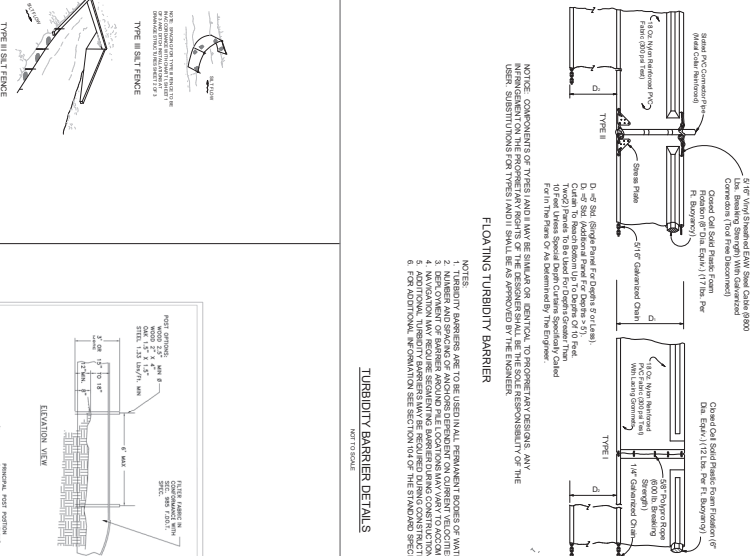
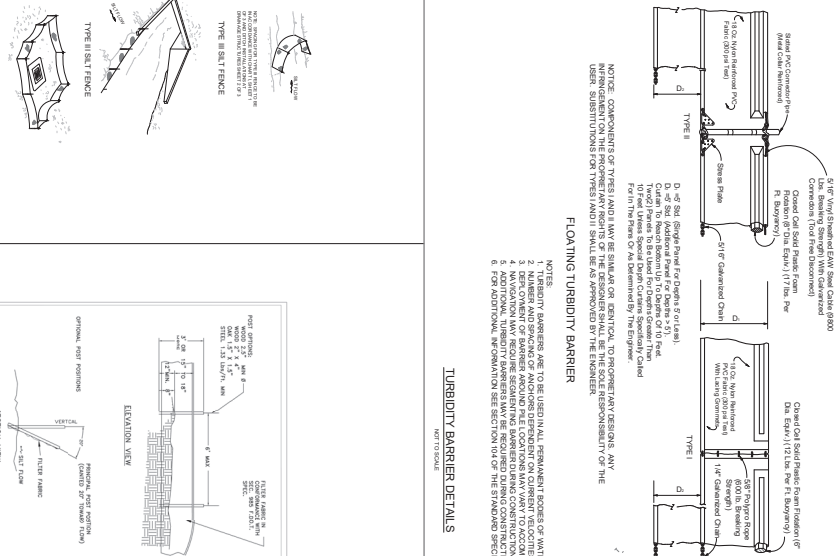
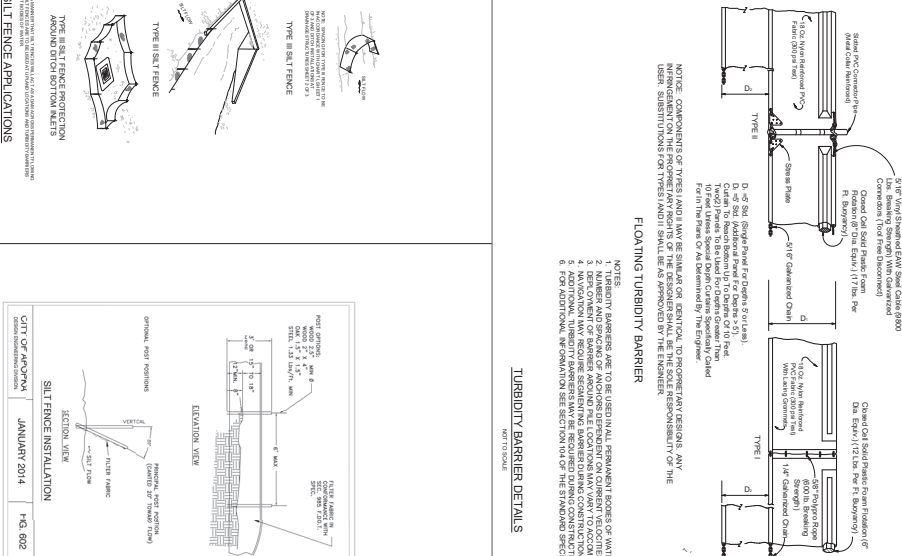
State of Florida

No. 12543

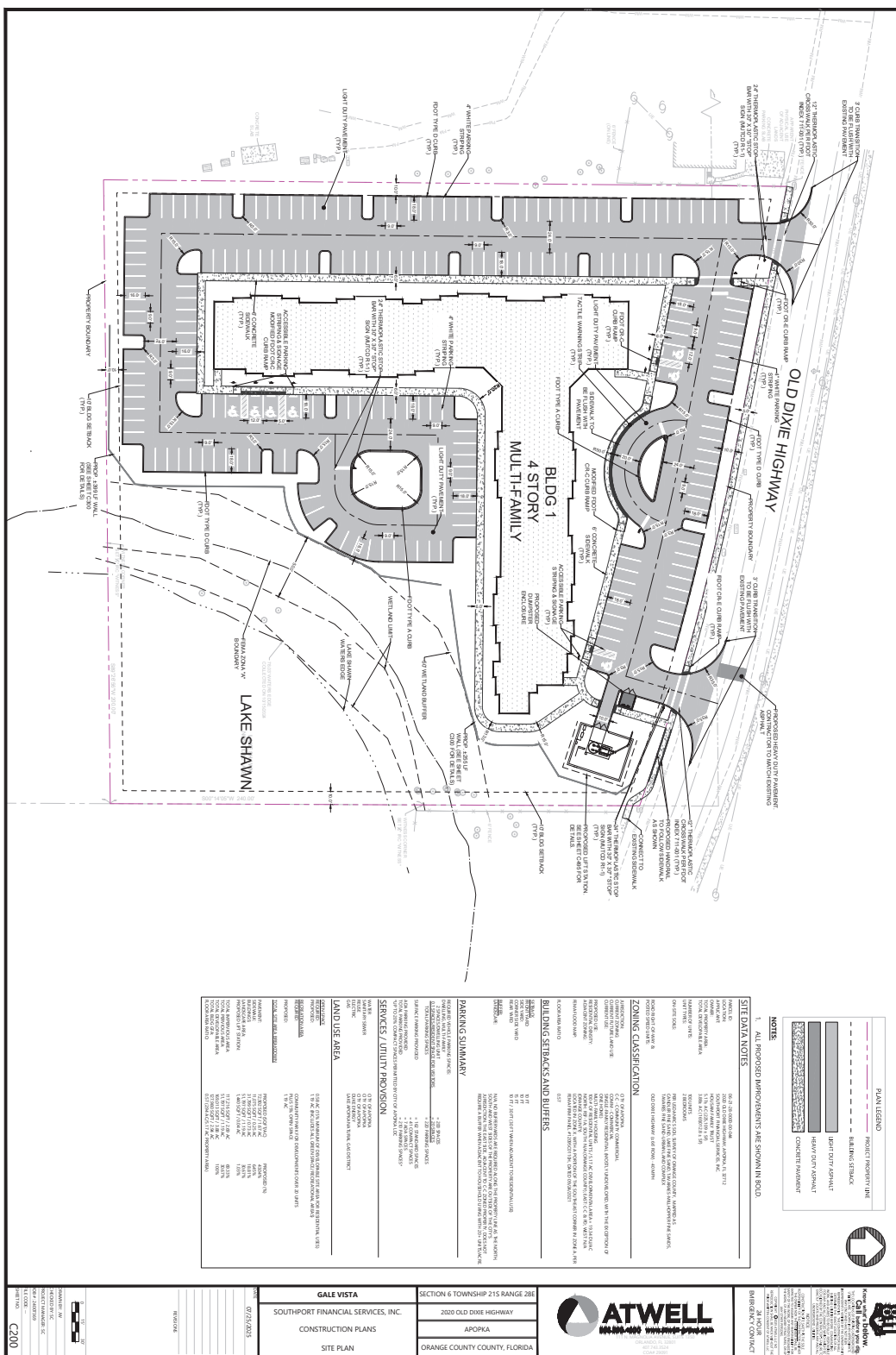
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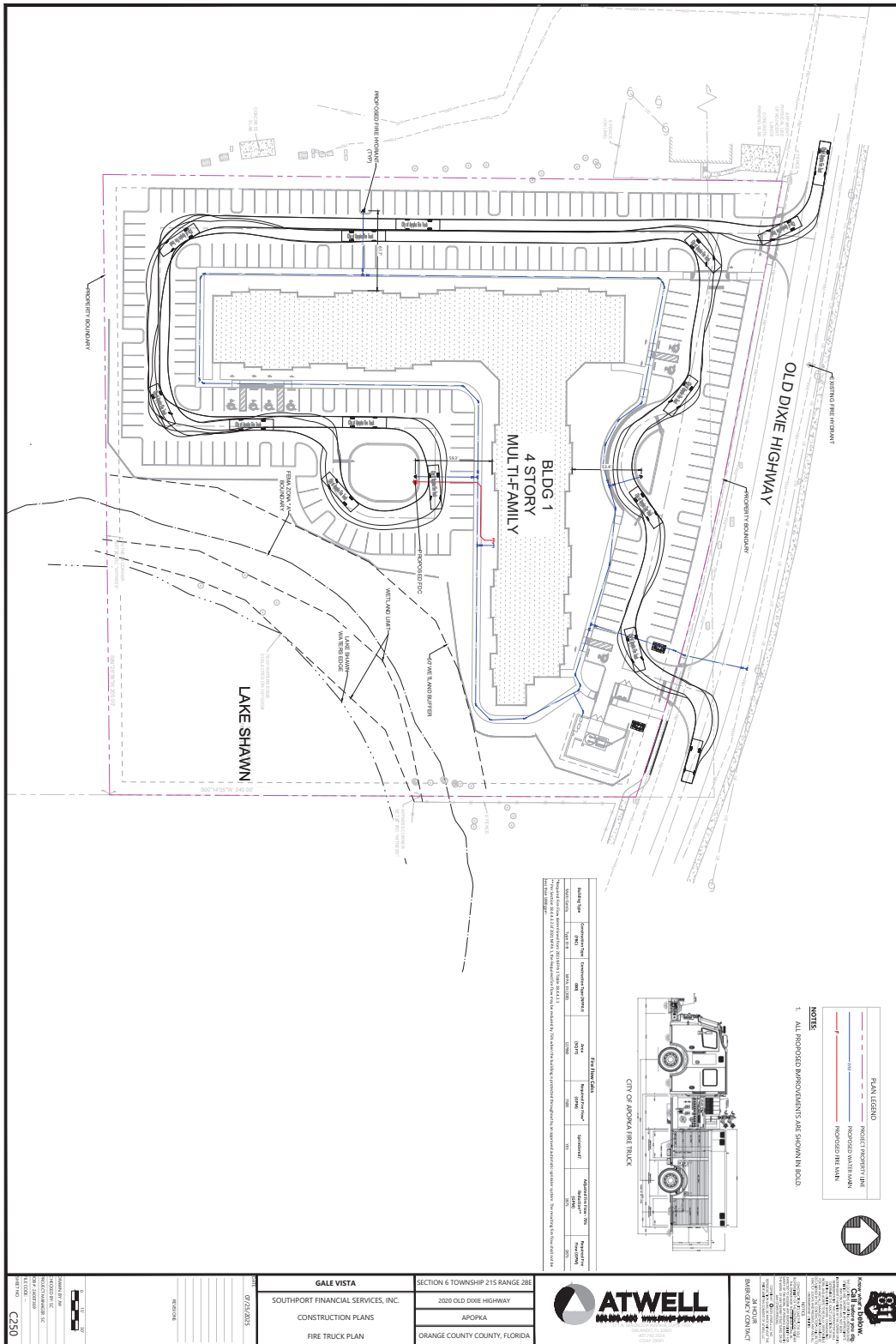
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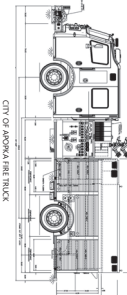
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Fire Truck Data			
Building Type	Construction Approval	Area	Extinguishing Unit
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.
Multi-Family	2020	1,200 sq. ft.	1,200 sq. ft.



- PLAN LEGEND**
- PROPOSED PROPERTY LINE
 - PROPOSED MULTI-FAMILY
 - PROPOSED FIRE TRUCK ROUTE
- NOTES**
- ALL PROPOSED IMPROVEMENTS ARE SHOWN IN BOLD

GALE VISTA

SOUTHPORT FINANCIAL SERVICES, INC.

CONSTRUCTION PLANS

FIRE TRUCK PLAN

SECTION 6 TOWNSHIP 21S RANGE 28E

2020 OLD DIXIE HIGHWAY

APOKA

ORANGE COUNTY COUNTY, FLORIDA

ATWELL

ARCHITECTS

1000 N. 10TH AVE. SUITE 100

ORLANDO, FL 32801

407.444.1111

City of Apoka

APPOKALAPPA

1000 N. 10TH AVE. SUITE 100

ORLANDO, FL 32801

407.444.1111

DATE: 07/18/2023

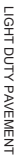
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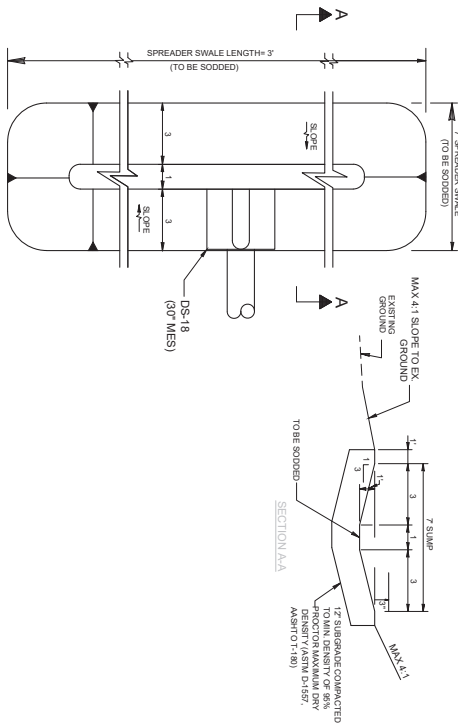
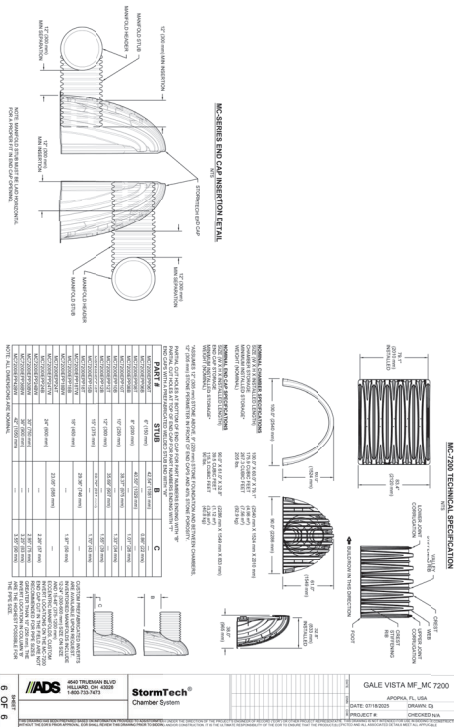
DESIGNED BY: [Signature]

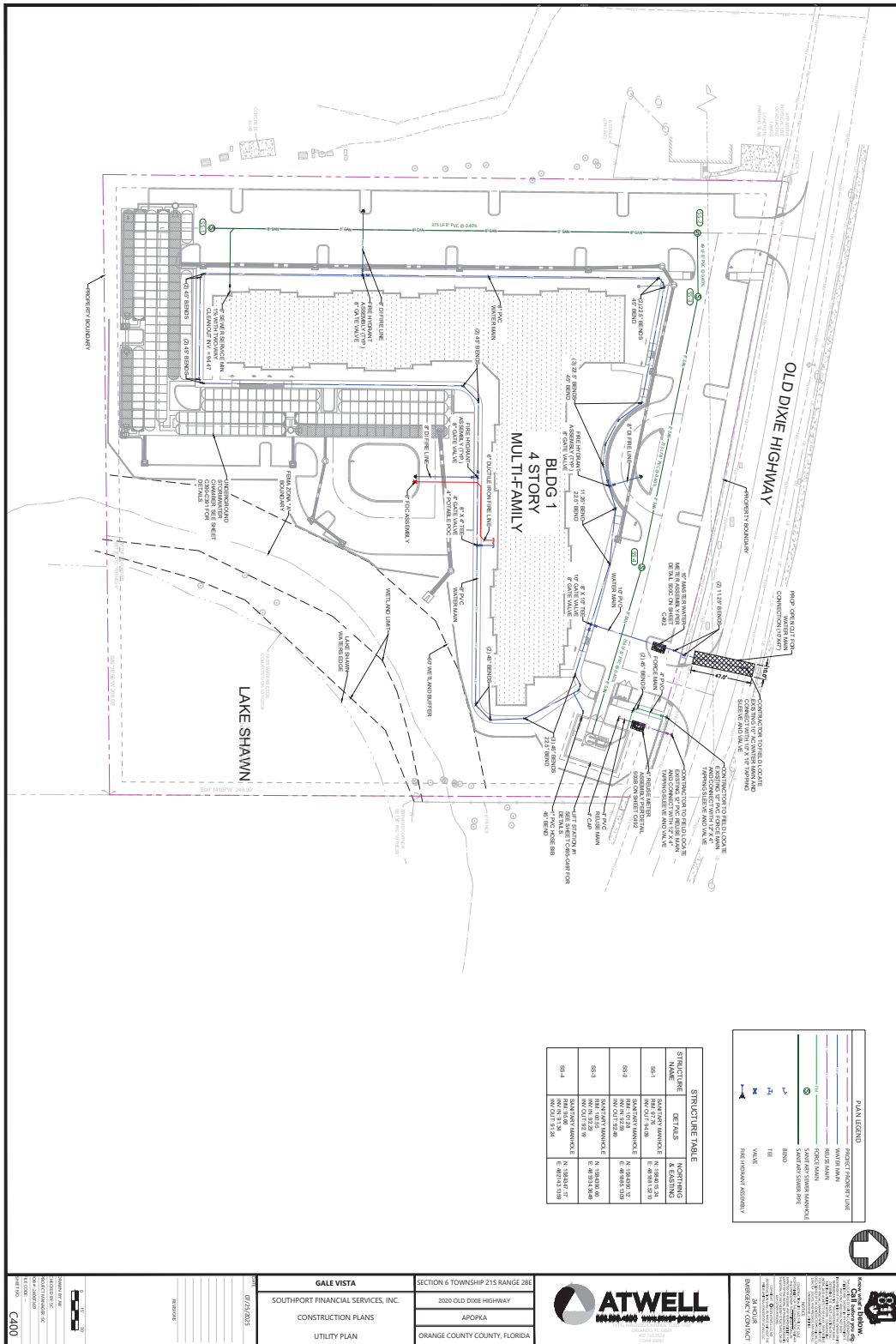
CHECKED BY: [Signature]

APPROVED BY: [Signature]

PROJECT NO: 2301







STRUCTURE TABLE		
STRUCTURE NAME	DETAILS	NOTINGS
SS-1	SEWER MANHOLE 18" DIA. 10' DEEP INVERT 72.00	NO NOTINGS
SS-2	SEWER MANHOLE 18" DIA. 10' DEEP INVERT 72.00	NO NOTINGS
SS-3	SEWER MANHOLE 18" DIA. 10' DEEP INVERT 72.00	NO NOTINGS
SS-4	SEWER MANHOLE 18" DIA. 10' DEEP INVERT 72.00	NO NOTINGS

PLAN LEGEND

PROJECT PROPERTY LINE

WATER MAIN

SEWER MAIN

STORM MAIN

WATER SERVICE LINE

SEWER SERVICE LINE

STORM SERVICE LINE

WATER VALVE

SEWER VALVE

STORM VALVE

WATER METER

SEWER METER

STORM METER

WATER ASSEMBLY

SEWER ASSEMBLY

STORM ASSEMBLY

GALE VISTA

SOUTHPORT FINANCIAL SERVICES, INC.

CONSTRUCTION PLANS

UTILITY PLAN

SECTION 6 TOWNSHIP 215 RANGE 28E

2020 OLD DIXIE HIGHWAY

APOPKA

ORANGE COUNTY, FLORIDA

ATWELL

ARCHITECTS

1000 N. 10TH AVE. SUITE 100

ORANGE, FL 32811

TEL: 407.261.1111

WWW.ATWELLARCHITECTS.COM

CA00

DATE: 07/18/2023

SCALE: AS SHOWN

DESIGNED BY: [Signature]

CHECKED BY: [Signature]

APPROVED BY: [Signature]

ATWELL

ARCHITECTS

1000 N. 10TH AVE. SUITE 100

ORANGE, FL 32811

TEL: 407.261.1111

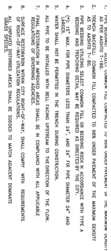
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GALE VISTA

SOUTHPORT FINANCIAL SERVICES, INC.

CONSTRUCTION PLANS

UTILITY PLAN



TYPE "B" BEDDING AND OPEN-CUT DETAIL

PREFORMED GUTTY GUTTY	HUB-DONUT, & VERTICAL SEPARATION DISCONTINUITIES							
	NORMAL SECTION		REINFORCED SECTION		TYPICAL SECTION		TYPICAL SECTION	
	MODEL	UNIT	MODEL	UNIT	MODEL	UNIT	MODEL	UNIT
WELDED	-	-	Y	14"	Y	14"	Y	14"
WELDED	-	-	Y	14"	Y	14"	Y	14"
WELDED	Y	14"	-	-	Y	14"	-	-
WELDED	Y	14"	-	-	Y	14"	-	-
WELDED	Y	14"	-	-	Y	14"	-	-
CAST-IN-PLACE	Y	14"	-	-	-	-	-	-
CAST-IN-PLACE	Y	14"	-	-	-	-	-	-

[illegible]

HORIZONTAL & VERTICAL SEPARATION REQUIREMENTS

PAGE SIZE											
	6"	8"	10"	12"	16"	18"	20"	24"	30"	36"	48"
97 RHO		3.5	4.3	5.1	6.0						
14 RHO		1.4	1.8	2.1	2.5						
22-1/2" RHO		7	9	11	12						
11-1/2" RHO		4	5	6	6						
10344											
10345 (one side smooth)		1	7	24	44						
400 RHO			41	39	40						
1400 RHO		14	96	115	136						

[illegible]

RESTRAINED PIPE TABLE (PVC)

PREF. SIZE										
	6"	8"	10"	12"	16"	18"	20"	24"	30"	36"
99' END					61	67	73	84	100	114
10' END					26	28	31	35	42	48
23-1/2' END					13	14	15	17	20	23
11-1/2' END					7	7	8	9	10	12
100'					52	62	74	95	124	152
100' (RANGE SIDE ONLY)					48	25	25	27	37	48
48' END					111	123	135	157	188	218

[illegible]

RESTRAINED PIPE TABLE (DI



WATER MAIN THRUST COLLAR DETAIL



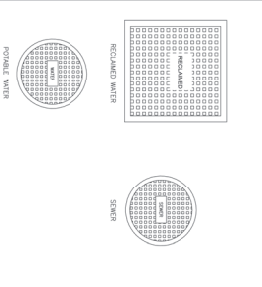
VALVE BOX	
JANUARY 2014	FIG. 109



RELEASE VALVE DETAIL - RECLAIMED WATER ONLY	JANUARY 2014	FIG. 113
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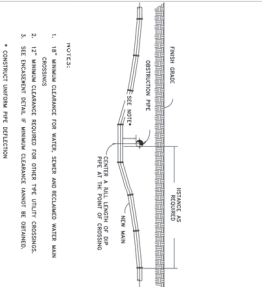


CITY OF APOPKA DESIGN ENGINEERING DIVISION	JANUARY 2014	FIG. 114
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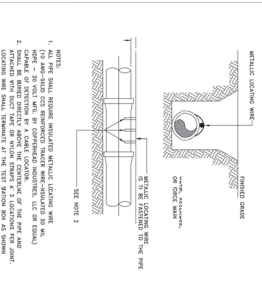
TYPICAL VALVE BOX COVER DETAILS

CITY OF APOPKA JANUARY 2014 FIG. 116



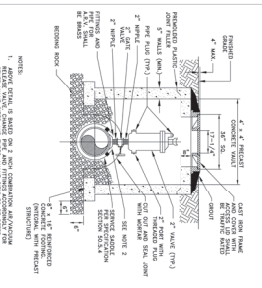
UTILITY CROSSING PIPE DEFLECTION DETAIL

CITY OF APOPKA JANUARY 2014 FIG. 117



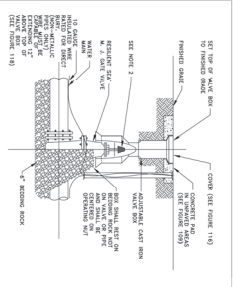
PIPE LOCATING WIRE DETAIL

CITY OF APOPKA JANUARY 2014 FIG. 118



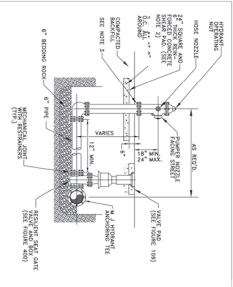
AIR OR COMBUSTION AIR VACUUM RELEASE VALVE DETAIL - UNDERGROUND

CITY OF APOPKA JANUARY 2014 FIG. 119



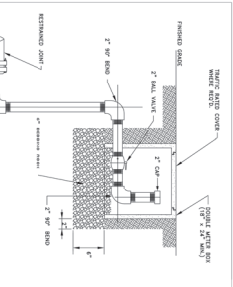
GATE VALVE AND BOX DETAIL

CITY OF APOPKA JANUARY 2014 FIG. 400



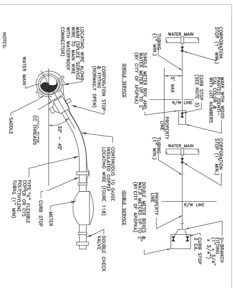
FIRE HYDRANT ASSEMBLY DETAIL

CITY OF APOPKA JANUARY 2014 FIG. 402



BLOWOFF VALVE DETAIL

CITY OF APOPKA JANUARY 2014 FIG. 403



WATER SERVICE CONNECTION DETAIL

CITY OF APOPKA JANUARY 2014 FIG. 405

