Master Permit No. BL-2024-1495

Subsidiary Permit No. REV 2025-0068

VILLAGE OF PINECREST

Building & Planning Department

CANCELLATION OF PERMIT

INSTRUCTIONS:

Step 1. Complete the cancellation of permit form which must be signed by the property owner or contractor. The signature must be notarized. Please print or type to allow for a more accurate processing. NOTE: THE PERMIT MAY NOT BE CANCELLED IF WORK HAS COMMENCED OR INSPECTIONS HAVE BEEN PERFORMED.

Step 2. Submit the completed forms with all necessary documents to the Building and Planning Department for processing.

PROPERTY INFORMATION:

Job Address: 13505 SW 63 RD CT (Address) | (Apt.) | PINECREST (City) | FL (State) | 33156 (Zip)

Folio Number 20-5013-026-0010

PROPERTY OWNER:	CONTRACTOR:
Name: OSCAR ALI LE, GRACE ALI LE	Company Name: PRESTIGE WINDOWS AND DOORS
Address: 13505 SW 63 CT City: PINECREST State: FL Zip: 33156	Address: 8232 COMMERCE WAY City: MIAMI LAKES State: FL Zip: 33016
Phone: (305) 775-8068	Phone: (305) 820-5999
Fax:	Fax:
Email.: glali60@gmail.com	Email.: permitting2@prestigewindoor.com

REASON FOR CANCELLING PERMIT:

Note: No cancellation permitted for any work that has started or where inspections have occurred

REV 2025-0068 / REVISION CANCELLATION AS PER REVIEWER INSTRUCTIONS. (ORESTES GARCIA)

HOLD HARMLESS

I agree to hold the Village of Pinecrest,its agents and authorized personnel, harmless, and relieve them from any responsibility for damages, costs or expenses, including attorney's fees, resulting from the cancellation of the existing permit or issuance of a new permit.

Oscar Ali

Signature of Owner

Print Name: Oscar Ali

Personally known _____ or, Produced Identification FL-DL

STATE OF FLORIDA, COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 19 day of JANUARY 2026

SIGNATURE OF NOTARY PUBLIC – STATE OF FLORIDA

JULIO ANTONIO LASSALLE
Notary Public - State of Florida
Commission # HH 322342
My Comm. Expires Oct 16, 2026
Bonded through National Notary Assn.

Signature of Contractor

Print Name: Cristina Scavuzzo

Personally known ✓ or, Produced Identification _____

STATE OF FLORIDA, COUNTY OF MIAMI-DADE

Sworn to and subscribed before me this 19 day of January, 2026

SIGNATURE OF NOTARY PUBLIC – STATE OF FLORIDA

JACKELINE R VELASCO
Notary Public - State of Florida
Commission # HH 663532
My Comm. Expires Apr 30, 2029
Bonded through National Notary Assn.

Revised 2/2/2015