

# **4 St Lucie Court**

MASTER PERMIT NO. \_\_\_\_\_

### TOWN OF SEWALL'S POINT

Date 1/21/05

BUILDING PERMIT NO. 7227

Building to be erected for LOPILATO

Type of Permit FENCE

Applied for by O/B

(Contractor) Building Fee 30.00

Subdivision HILLCREST Lot 18 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 4 ST. LUCIE COURT

Impact Fee \_\_\_\_\_

Type of structure FENCE

A/C Fee \_\_\_\_\_

Parcel Control Number:

Electrical Fee \_\_\_\_\_

138410140000018080000

Plumbing Fee \_\_\_\_\_

Amount Paid 30.00 Check # 3373 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Total Construction Cost \$ 4400.00

TOTAL Fees 30.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

## PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL

- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL

- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

## INSPECTIONS

- UNDERGROUND PLUMBING \_\_\_\_\_
- UNDERGROUND MECHANICAL \_\_\_\_\_
- STEMWALL FOOTING \_\_\_\_\_
- SLAB \_\_\_\_\_
- ROOF SHEATHING \_\_\_\_\_
- TRUSS ENG/WINDOW/DOOR BUCKS \_\_\_\_\_
- ROOF TIN TAG/METAL \_\_\_\_\_
- PLUMBING ROUGH-IN \_\_\_\_\_
- MECHANICAL ROUGH-IN \_\_\_\_\_
- FRAMING \_\_\_\_\_
- FINAL PLUMBING \_\_\_\_\_
- FINAL MECHANICAL \_\_\_\_\_
- FINAL ROOF \_\_\_\_\_

- UNDERGROUND GAS \_\_\_\_\_
- UNDERGROUND ELECTRICAL \_\_\_\_\_
- FOOTING \_\_\_\_\_
- TIE BEAM/COLUMNS \_\_\_\_\_
- WALL SHEATHING \_\_\_\_\_
- LATH \_\_\_\_\_
- ROOF-IN-PROGRESS \_\_\_\_\_
- ELECTRICAL ROUGH-IN \_\_\_\_\_
- GAS ROUGH-IN \_\_\_\_\_
- EARLY POWER RELEASE \_\_\_\_\_
- FINAL ELECTRICAL \_\_\_\_\_
- FINAL GAS \_\_\_\_\_
- BUILDING FINAL \_\_\_\_\_

# PRINTS

JAN 19 2005

BY: \_\_\_\_\_

### Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: \_\_\_\_\_

Date: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: Peter Lopilato Phone (Day) 287-8862 (Fax) \_\_\_\_\_

Job Site Address: 4 St Lucie Ct. City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Legal Desc. Property (Subd/Lot/Block) Hillcrest Lot 18 Parcel Number: 138410140000018080000

Owner Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Work To Be Done: FENCE

#### WILL OWNER BE THE CONTRACTOR?:

YES  NO

#### COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 4400 -  
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_

Is improvement cost 50% or more of Fair Market Value? YES NO

Method of Determining Fair Market Value: \_\_\_\_\_

(If no, fill out the Contractor & Subcontractor sections below)  
(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: \_\_\_\_\_ Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

#### SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

ARCHITECT \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck \_\_\_\_\_ Accessory Building: \_\_\_\_\_

I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESSORY BUILDING, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: National Electrical Code: 2002 Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2001 Florida Energy Code: 2001 Florida Accessibility Code: 2001

I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

OWNER OR AGENT SIGNATURE (required)

Peter Lopilato

State of Florida, County of: MARTIN

This the 19th day of JANUARY, 2005

by Peter Lopilato who is personally

known to me or produced FLD 4143-600-34-063

as identification. [Signature] 4/2/23/06

Notary Public

My Commission Expires: \_\_\_\_\_

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: \_\_\_\_\_

This the \_\_\_\_\_ day of \_\_\_\_\_, 2005

by \_\_\_\_\_ who is personally

known to me or produced \_\_\_\_\_

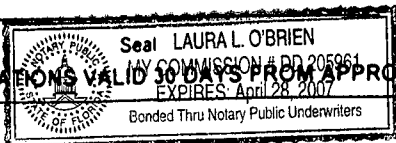
As identification. \_\_\_\_\_

Notary Public

My Commission Expires: \_\_\_\_\_

Seal

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY!



TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # \_\_\_\_\_

TAX FOLIO # PARCEL ID 135410140000018020000

**NOTICE OF COMMENCEMENT**

STATE OF FLORIDA

COUNTY OF MARTIN

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

**LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):**

HILLCREST LOT 18, 4 ST. LUCIE COURT, SEWALL'S POINT, FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Pool Fence

OWNER: PETER LOPILATO

ADDRESS: 4 ST. LUCIE COURT SEWALL'S POINT, FL 34996

PHONE #: 287-8862 FAX #: \_\_\_\_\_

\*CONTRACTOR: OWNER BUILDER

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

SURETY COMPANY (IF ANY) \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

BOND AMOUNT: \_\_\_\_\_

LENDER: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWN MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA:

NAME: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

IN ADDITION TO HIMSELF, OWNER DESIGNATES \_\_\_\_\_ OF \_\_\_\_\_ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #: \_\_\_\_\_ FAX #: \_\_\_\_\_

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_

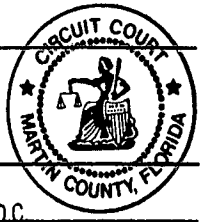
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Peter Lopilato  
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 19th DAY OF JANUARY 2005 BY PETER LOPILATO

OR PERSONALLY KNOWN  
PRODUCED ID# L143-00034-063x2/23/06  
TYPE OF ID \_\_\_\_\_

Laurel O'Brien  
NOTARY SIGNATURE  
LAUREL O'BRIEN  
MY COMMISSION # DD 205961  
EXPIRES: April 28, 2007  
Bonded Thru Notary Public Underwriters



STATE OF FLORIDA  
MARTIN COUNTY  
THIS IS TO CERTIFY THAT THE  
FOREGOING 1 PAGES IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL.  
MARSHA EWING, CLERK  
BY: T Copus D.C.  
DATE: 1-21-05

INSTR # 1808352  
OR BK 01974 PG 2953  
RECORDED 01/21/2005 11:55:27 AM  
MARSHA EWING  
CLERK OF MARTIN COUNTY FLORIDA  
RECORDED BY T Copus (asst mgr)

**TOWN OF SEWALL'S POINT**  
**ONE SOUTH SEWALL'S POINT ROAD**  
**SEWALL'S POINT, FLORIDA 34996**

**TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT**  
**(To be submitted if permit is to be pulled by Owner/Builder)**

**DISCLOSURE STATEMENT**

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statutes 489.103(7).

**I have read the above and agree to comply with the provisions as stated.**

Name: Peter Lopulato Date: 11/19/05

Signature: Peter Lopulato

Address: 4 St Lucie Ct.

City & State: FLA.

Permit No. \_\_\_\_\_

CERTIFIED TO:

KATHARINE HURT JOHNSON, TRUSTEE  
COMMONWEALTH LAND TITLE INSURANCE  
COMPANY  
FOGT & MATHESON

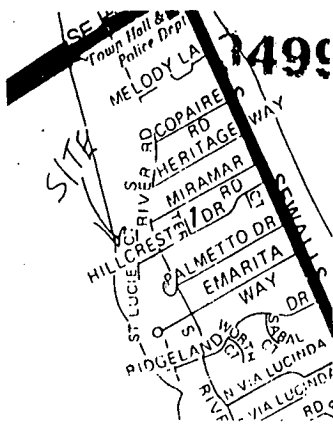
FLOOD ZONE C  
FIRM PANEL 120164 0001C  
DATED APRIL 3, 1984

FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE

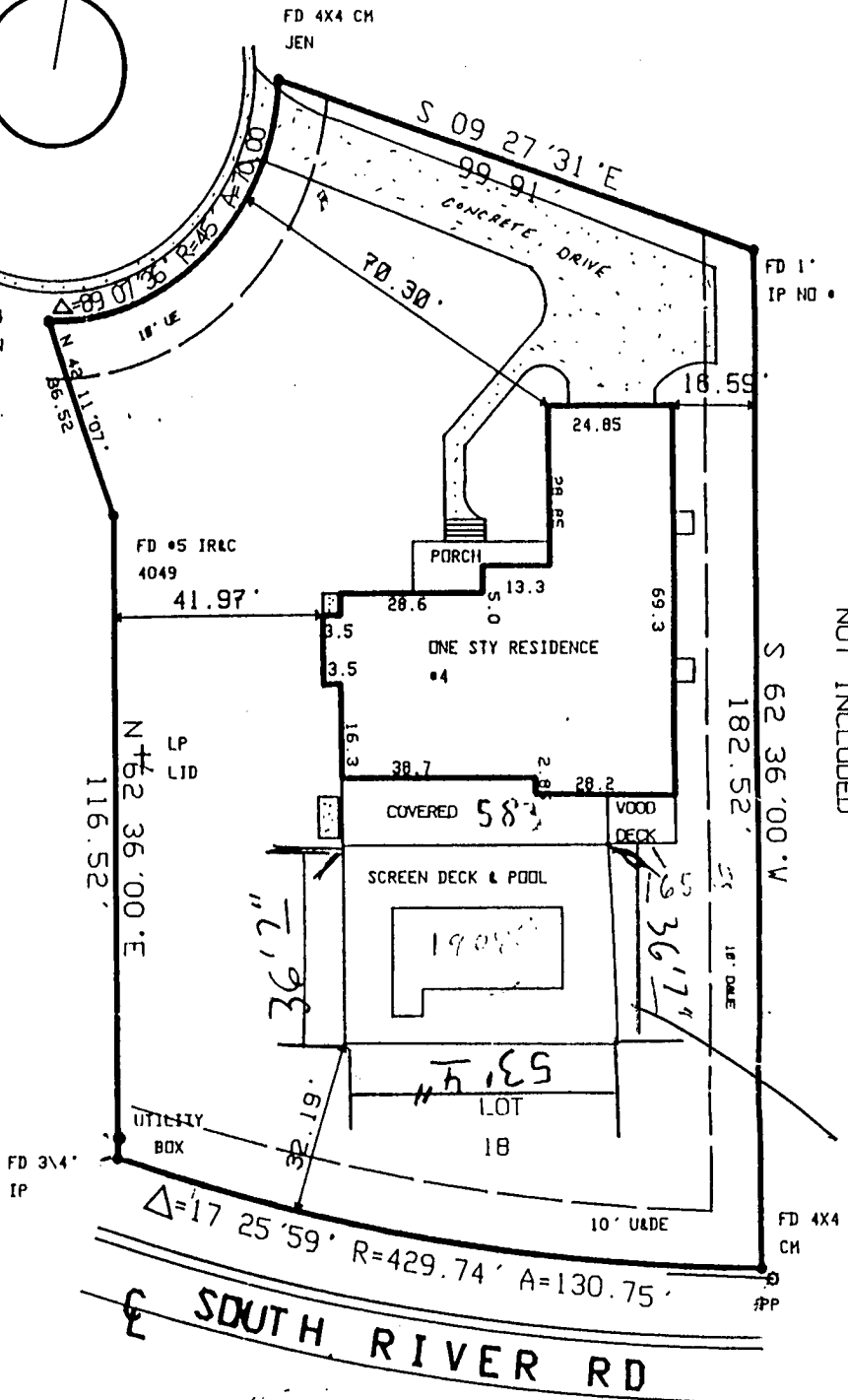
DATE: 1/19/08

BUILDING OFFICIAL  
Gene Simmons

LOCATION MAP



LOT  
19



NOT INCLUDED

6\"/>

DESCRIPTION

LOT 18, PLAT OF HILLCREST, ACCORDING TO THE PLAT THEREOF ON FILE IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR MARTIN COUNTY, FLORIDA RECORDED IN PLAT BOOK 10, PAGE 39; SAID LANDS SITUATE, LYING AND BEING IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 4 ST. LUCIE COURT

SURVEYOR'S CERTIFICATE:

I HEREBY CERTIFY THAT THE SURVEY SHOWN HEREON IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AS SURVEYED UNDER MY DIRECTION. I FURTHER CERTIFY THAT THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS UNDER RULE 21-1111-6 FLORIDA ADMINISTRATIVE CODE PURSUANT TO CHAPTER 472.027 FLORIDA STATUTES.

NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

DATED 7/27/99

GIRALD W. TANSKY

PROFESSIONAL REGISTRATION NO. 4464

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, MURPHY ACT DEEDS, OR ADJOINING DEEDS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OR HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDERGROUND UTILITIES NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF ST. LUCIE COURT AS SHOWN ON THE PLAT OF HILLCREST SUBDIVISION RECORDED IN PLAT BOOK 10, PAGE 39, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

LEGEND

- A=ARC
- ASPH. = ASPHALT
- C = CALCULATED
- CH = CHORD
- C/L = CENTERLINE
- CH = CONCEPT NOMINENT
- Δ = DELTA
- D = DESCRIPTION
- D.E. = DRAINAGE EASEMENT
- FD. = FOUND
- G.W. = GUT WIRE
- I.P. = IRON PIPE
- I.B. & C. = IRON ROD & CAP
- L.P. = LIGHT POLE
- M = MEASURED
- H & W = HAIL & WASHER
- O.R. = OVERHEAD ELECTRIC
- P. = PLAT
- PAVT. = PAVEMENT
- P.C. = POINT OF CURVE
- P.C.C. = POINT OF COMPOUND CURVE
- P.P. = POWER POLE
- P.R.C. = POINT OF REVERSE CURVE
- P.T. = POINT OF TANGENT
- P.C.P. = PERMANENT CONTROL POINT
- P.R.M. = PERMANENT REFERENCE MARK
- R = RADIUS
- ROM = RIGHT OF WAY
- U.E. = UTILITY EASEMENT
- H.P. = HIGH POINT
- B.L.K. = BLOCK
- B.M. = BENCHMARK
- F.F. = FINISHED FLOOR
- SET I.R. & C. = SET IRON ROD & CAP IN 2\"/>
- CONC. = CONCRETE
- N.T.S. = NOT TO SCALE

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: REMAX REALTY

DRAWN: G.W.T.  
CHECKED: G.W.T.  
DATE: 7-27-99  
SCALE: 1\"/>

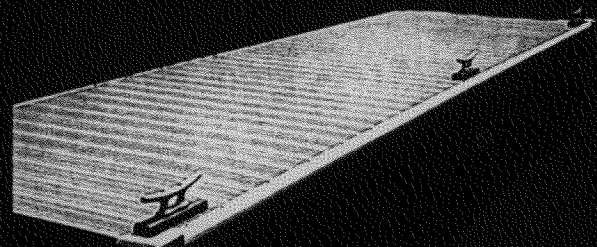
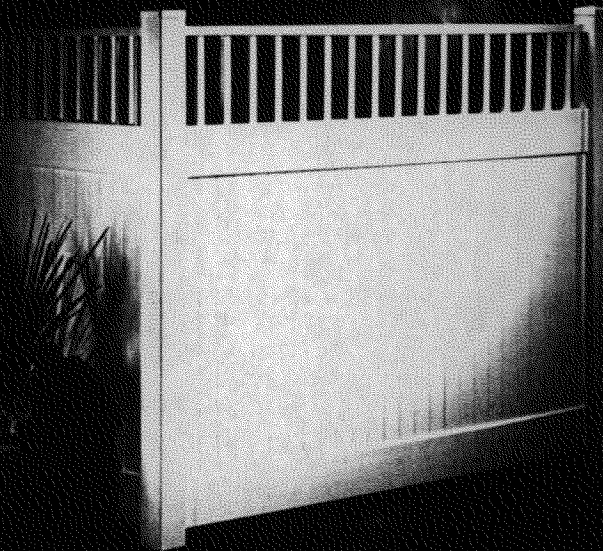
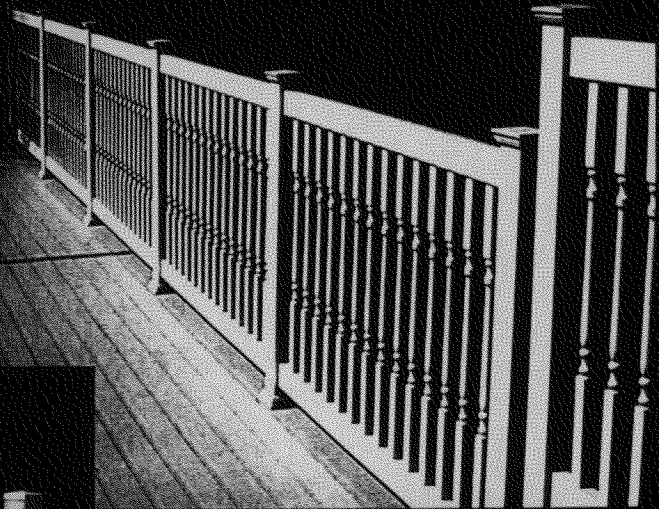
TREASURE COAST LAND SURVEYORS  
PROFESSIONAL LAND SURVEYORS  
3250 CANDICE AVE. BOX 113  
JENSEN BEACH, FLORIDA 34957  
PHONE # 334-2663

| REVISIONS | BY |
|-----------|----|
|           |    |
|           |    |
|           |    |
|           |    |

# An Attractive Deck that is Rough & Tuff

## Available Colors

- > Amber White
- > Beige
- > Grey



- . No maintenance
- . Slip resistant
- . Cool to touch
- . Lifetime transferable warranty
- . Made from 100 % PVC
- . Unaffected by weather and UV rays

**Reduces construction time and labor costs**

**NO: splinters, rotting, exposed nails or screws, insect problems**

*For More Information, Call Your Local Dealer*

[www.pvcfences.com](http://www.pvcfences.com)

# INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

| PERMIT # | OWNER'S NAME | ADDRESS         | DESCRIPTION                                    | APPROVED BY & DATE |
|----------|--------------|-----------------|--|--------------------|
| 6300     | walker       | 21 W High Pt    | retaining wall                                 | OK 10/19/07 ✓      |
| 7942     | walker       | 21 W High Pt    | Repair dock                                    | OK 10/19/07 ✓      |
| 6295     | Justak       | 171 S Sewalls   | Garage door                                    | OK 10/19/07 ✓      |
| 6562     | Reib         | 4 Baker         | Demo deck                                      | OK 10/19/07 ✓      |
| 6175     | Goodman      | 6 Oakwood DR.   | Flood lights                                   | OK 10/19/07 ✓      |
| 6183     | Krupel       | 4 Rio Vista DR  | faner drive                                    | OK 10/22/07 ✓      |
| 6424     | Twohey       | 5 Rio Vista     | Fence around pool                              | OK 10/22/07 ✓      |
| 6460     | walker       | 9 Lantana La    | Fence  | OK 10/22/07 ✓      |
| 6179     | Larson       | 11 Lantana La   | Fence  | closed 10/10/07    |
| 7044     | Tschannen    | 15 Emairita     | cover porch ceiling w/wood                     | OK 10/22/07 ✓      |
| 7473     | Schrader     | 4 Emairita      | Pool electric (failed)                         | OK 10/22/07 ✓      |
| 7171     | Wilson       | 5 St Lucie Ct   | Repair dock, boat lift<br>boathouse electrical | OK 12/31           |
| 7172     | Wilson       | 5 St Lucie Ct   | Repair seawall                                 | OK 12/31           |
| 7227     | Lopulato     | 4 St Lucie Ct   | Fence  | OK 12/31           |
| 6531     | Bausch       | 20 S Sewalls Pt | Fascia repair                                  | OK 10/22 ✓         |
| 6944     | Bausch       | 20 S Sewalls    | Repair dock                                    | OK 10/22 ✓         |
| 6766     | Rosenberg    | 36 S Sewalls    | Fill   | OK 12/31           |
| 7529     | DeStephan    | 68 S Sewalls    | Riplot, retaining wall<br>fill                 | OK 10/22 ✓         |



**TOWN OF SEWALL'S POINT**

Date 7/8/03

BUILDING PERMIT NO. 6320

Building to be erected for LOPILATO Type of Permit RE-ROOF

Applied for by ALL AMERICAN ROOFING (Contractor) Building Fee 120.00

Subdivision HILLCREST Lot 18 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 4 ST. LUCIE COURT Impact Fee \_\_\_\_\_

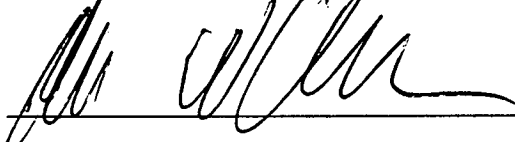
Type of structure ROOF A/C Fee \_\_\_\_\_

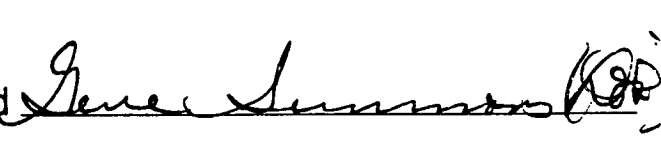
Parcel Control Number:

138410140000018080000 Roofing Fee \_\_\_\_\_

Amount Paid 120.00 Check # 2050 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

Total Construction Cost \$ 25,680.00 TOTAL Fees 120.00

Signed   
Applicant

Signed   
Town Building Official

**PERMIT**

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> BUILDING         | <input type="checkbox"/> ELECTRICAL          | <input type="checkbox"/> MECHANICAL    |
| <input type="checkbox"/> PLUMBING         | <input checked="" type="checkbox"/> ROOFING  | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT   | <input type="checkbox"/> DEMOLITION          | <input type="checkbox"/> FENCE         |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> TEMPORARY STRUCTURE | <input type="checkbox"/> GAS           |
| <input type="checkbox"/> FILL             | <input type="checkbox"/> HURRICANE SHUTTERS  | <input type="checkbox"/> RENOVATION    |
| <input type="checkbox"/> TREE REMOVAL     | <input type="checkbox"/> STEMWALL            | <input type="checkbox"/> ADDITION      |

**INSPECTIONS**

- |                                   |                              |
|-----------------------------------|------------------------------|
| UNDERGROUND PLUMBING _____        | UNDERGROUND GAS _____        |
| UNDERGROUND MECHANICAL _____      | UNDERGROUND ELECTRICAL _____ |
| STEMWALL FOOTING _____            | FOOTING _____                |
| SLAB _____                        | TIE BEAM/COLUMNS _____       |
| ROOF SHEATHING _____              | WALL SHEATHING _____         |
| TRUSS ENG/WINDOW/DOOR BUCKS _____ | LATH _____                   |
| ROOF TIN TAG/METAL _____          | ROOF-IN-PROGRESS _____       |
| PLUMBING ROUGH-IN _____           | ELECTRICAL ROUGH-IN _____    |
| MECHANICAL ROUGH-IN _____         | GAS ROUGH-IN _____           |
| FRAMING _____                     | EARLY POWER RELEASE _____    |
| FINAL PLUMBING _____              | FINAL ELECTRICAL _____       |
| FINAL MECHANICAL _____            | FINAL GAS _____              |
| FINAL ROOF _____                  | BUILDING FINAL _____         |


# All American Roofing of The Treasure Coast, Inc.

3091 SE Waaler Street, Stuart, FL 34997

Lic. #CC-C058118

## SCOPE OF WORK

- Removal and disposal of existing roof down to substrate.
- Complete installation of an ASTM 30# felt, fastened to code.
- Complete installation of a Heavy Pressure Treated Cedar Shake roof system with 7d common stainless steel ring shank nails.

|   |
|---|
| <p>FILE COPY<br/>TOWN OF SEWALL'S POINT<br/>THESE PLANS HAVE BEEN<br/>REVIEWED FOR CODE COMPLIANCE<br/>DATE: <u>7/7/03</u><br/><br/>BUILDING OFFICIAL<br/>Gene Simmons</p> |
|---|

BUILDING CODE COMPLIANCE OFFICE  
METRO-DADE FLAGLER BUILDING  
140 WEST FLAGLER STREET, SUITE 1603  
MIAMI, FLORIDA 33130-1563  
(305) 375-2901 FAX (305) 375-2908

CONTRACTOR LICENSING SECTION  
(305) 375-2527 FAX (305) 375-2538

CONTRACTOR ENFORCEMENT DIVISION  
(305) 375-2966 FAX (305) 375-2908

PRODUCT CONTROL DIVISION  
(305) 375-2902 FAX (305) 372-6339

## PRODUCT CONTROL NOTICE OF ACCEPTANCE

Green River Log Sales Ltd.  
33610 East Broadway Avenue  
Mission Viejo ,BC V2V 4M4

Your application for Notice of Acceptance (NOA) of:

"Green River" Cedar, Shakes & Shingles

under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Types of Construction, and completely described herein, has been recommended for acceptance by the Miami-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

This NOA shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is determined by BCCO that this product or material fails to meet the requirements of the South Florida Building Code.

The expense of such testing will be incurred by the manufacturer.

ACCEPTANCE NO.: 00-1023.02  
EXPIRES: 11/30/2005



Raul Rodriguez  
Chief Product Control Division

**THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL  
CONDITIONS  
BUILDING CODE & PRODUCT REVIEW COMMITTEE**

This application for Product Approval has been reviewed by the BCCO and approved by the Building Code and Product Review Committee to be used in Miami-Dade County, Florida under the conditions set forth above.



Francisco J. Quintana, R.A.  
Director  
Miami-Dade County  
Building Code Compliance Office

APPROVED: 11/30/2000

**NOTICE OF ACCEPTANCE: STANDARD CONDITIONS**

**1. SCOPE**

This approves roofing system using wood shingles and shakes as manufactured by Green River Log Sales Ltd. as described in Section 2 of this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County.

Category: Roofing  
Sub-Category: Shingle and Shake

**2. PRODUCT DESCRIPTION**

| <u>Product</u>      | <u>Dimensions</u>                           | <u>Test Specifications</u> | <u>Product Description</u>   |
|---------------------|---|----------------------------|--|
| Cedar Plus Shakes   | Widths= 4" to 14"<br>Length= 24"            | PA 110                     | Fire retardant and preservative tapered or non-tapered cedar .       |
| Cedar Plus Shingles | Widths= 3" to 14"<br>Length=16", 18" or 24" | PA 110                     | Fire retardant and preservative treated cedar, with both faces sawn. |

**3. LIMITATIONS**

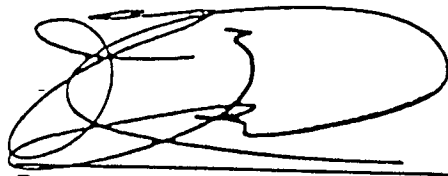
- 3.1. Fire classification is not part of this acceptance.
- 3.2. This acceptance is for wood deck applications. Minimum deck requirements shall be in compliance with applicable Building Code.
- 3.3. Wood shingles and shakes shall not be installed on roof mean heights greater than 33 feet.

**4 LABELING**

- 4.1 Shingle/Shake bundles shall be labeled with the Miami-Dade Logo or the wording "Miami-Dade County-Dade Product Control Approved".

**5 BUILDING PERMIT REQUIREMENTS**

- 5.1 Application for building permit shall be accompanied by copies of the following:
  - 5.1.1 This Notice of Acceptance.
  - 5.1.2 Any other documents required by the Building Official or the Building Code in order to properly evaluate the installation of this system.



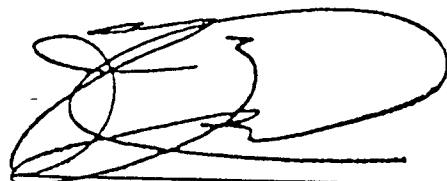
Frank Zuloaga, RRC  
Roofing Product Control Examiner

NOTICE OF ACCEPTANCE: STANDARD CONDITIONS

6. INSTALLATION

6.1 "Green River Log Sales Ltd. Cedar Plus Shake, Cedar Plus Shingle" and its components shall be installed in strict compliance with Roofing Application Standard RAS 130.

| Fastener Pull Through Resistance |                          |
|----------------------------------|--------------------------|
| Description                      | Maximum Pull Force (lbs) |
| Cedar Plus Shingle 16"           | 92                       |
| Cedar Plus Shingle 18"           | 105                      |
| Cedar Plus Shakes                | 196                      |

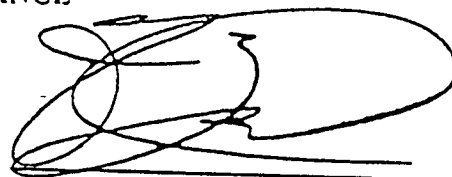


Frank Zuloaga, RRC  
Roofing Product Control Examiner

NOTICE OF ACCEPTANCE: STANDARD CONDITIONS

1. Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documents, including test-supporting data, engineering documents, are no older than eight (8) years.
2. Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approval", or as specifically stated in the specific conditions of this Acceptance.
3. Renewals of Acceptance will not be considered if:
  - a. There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes.
  - b. The product is no longer the same product (identical) as the one originally approved.
  - c. If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product.
  - d. The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
4. Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
5. Any of the following shall also be grounds for removal of this Acceptance:
  - a. Unsatisfactory performance of this product or process.
  - b. Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
6. The Notice of Acceptance number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
7. A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all time. The engineer need not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
9. This Notice of Acceptance consists of pages 1 through 3 and this last page 4.

END OF THIS ACCEPTANCE



Frank Zuloaga, RRC  
Roofing Product Control Examiner

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: \_\_\_\_\_

Owner or Titleholder Name: PETER & PAULIS LOPICATO City: STUART State: FL Zip: 34996

Legal Description of Property: HILLCREST SUBDIVISION Parcel Number: 138-4101-400000-1808-0000

Location of Job Site: 4 ST. LUCIE COURT Type of Work To Be Done: RE-ROOF SHAKE TO SHAKE

CONTRACTOR/Company Name: ALL AMERICAN ROOFING OF THE TREASURE COAST, INC. Phone Number: 463-8055

Street: 3006 SE WALKER ST. City: STUART State: FL Zip: 34997

State Registration Number: CCC058118 State Certification Number: CCC058118 Martin County License Number: 2002-513-008

ARCHITECT: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE -- SEWER -- ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_

Carpport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

Type Sewage: \_\_\_\_\_ Septic Tank Permit Number From Health Dept. \_\_\_\_\_ Well Permit Number: \_\_\_\_\_

FLOOD HAZARD INFORMATION Flood Zone: \_\_\_\_\_ Minimum Base Flood Elevation (BFE): \_\_\_\_\_ NGVD

Proposed First Floor Habitable Floor Finished Elevation: \_\_\_\_\_ NGVD (Minimum 1 Foot Above BFE)

COST AND VALUES Estimated Cost of Construction or Improvements: \$25,680.00 Estimated Fair Market Value (FMV) Prior

To Improvements: \_\_\_\_\_ If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES \_\_\_\_\_ NO \_\_\_\_\_

SUBCONTRACTOR INFORMATION

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: ALL AMERICAN ROOFING OF THE TREASURE COAST, INC. State: FL License Number: CCC058118

I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNANCE, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) \_\_\_\_\_ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) \_\_\_\_\_

National Electrical Code \_\_\_\_\_ Florida Energy Code \_\_\_\_\_

Florida Accessibility Code \_\_\_\_\_

I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

OWNER OR AGENT SIGNATURE (Required) Peter Lopicato  
State of Florida, County of: MARTIN  
This the 15<sup>th</sup> day of JULY, 2003  
by PETER LOPICATO who is personally  
known to me or produced  
as identification: FL DC

CONTRACTOR SIGNATURE (Required) Paul D. Wilkins  
On State of Florida, County of: MARTIN  
This the 13<sup>th</sup> day of JUNE, 2003  
by PAUL D. WILKINS who is personally  
known to me or produced  
as identification: Kendra S. Bramble

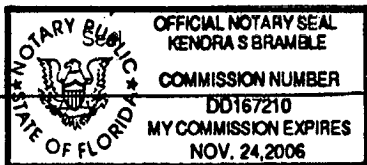
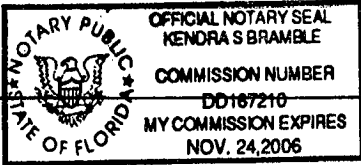
Notary Public: Kendra S. Bramble

Notary Public: \_\_\_\_\_

My Commission Expires: 11/24/06

My Commission Expires: 11/24/06

Seal



PERMIT#

TAX FOLIO# 138 4101 400000 1808 0000

NOTICE OF COMMENCEMENT

STATE OF: FLORIDA

COUNTY OF: MARTIN

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THE NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE): 4 ST. LUCIE COURT HILLCREST SUBDIVISION LOT-18

GENERAL DESCRIPTION OF IMPROVEMENT: RE-ROOF

OWNER: PETER LOPILATO & PHYLIS LOPILATO

ADDRESS: 4 ST. LUCIE COURT, STUART, FL 34996

PHONE #: 287-8862

FAX #:

CONTRACTOR: ALL AMERICAN ROOFING OF THE TREASURE COAST, INC.

ADDRESS: 3006 SE WAALER STREET, STUART, FL 34997

PHONE#: (772)463-8055

FAX#: (772)463-8054

SURETY COMPANY (IF ANY):

STATE OF FLORIDA  
MARTIN COUNTY

ADDRESS:

THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.

BOND AMOUNT:

MARSHA EWING, CLERK

LENDER:

BY [Signature] D.C.  
DATE 6-17-03

ADDRESS:

PHONE #:

FAX #:

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OF OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A) 7., FLORIDA STATUTES.

NAME:

ADDRESS:

PHONE #:

FAX #:

IN ADDITION TO HIMSELF, OWNER DESIGNATES

OF TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #:

FAX #:

EXPIRATION DAT OF NOTICE OF COMMENCEMENT:

THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature] SIGNATURE OF OWNER

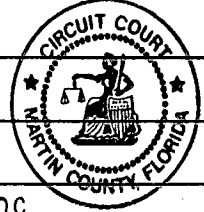
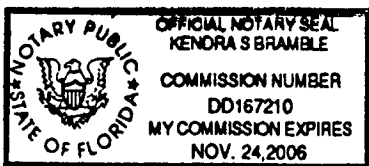
SWORN TO AND SUBSCRIBED BEFORE ME THIS 13th DAY OF JUNE

2003 BY PETER LOPILATO

[Signature] NOTARY SIGNATURE

OR

PERSONALLY KNOWN  
PRODUCED ID X  
TYPE OF ID FL DL





# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log


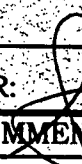

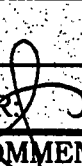
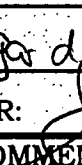
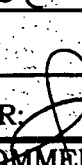

Date of Inspection:  Mon  Wed  Fri 7/23, 2007 3 Page 2 of     

| PERMIT  | OWNER/ADDRESS/CONTR.                         | INSPECTION TYPE  | RESULTS | NOTES/COMMENTS:                            |
|---|--|------------------|---------|--|
| 6289  | MISER  | LATHE            | Passed  |  |
| (11)  | 21 ISLAND ROAD<br>GUICK+McCAULEY             |                  |         | INSPECTOR: <i>[Signature]</i>              |
| 6344  | MURPHY                                       | ELECTRICAL       | Passed  | Late                                       |
| (9)   | 14 KNOWLES<br>MASTER PLAN                    | ROUGH IN         |         | INSPECTOR: <i>[Signature]</i>              |
| 6275  | SHARPE                                       | STEEL+CONC       | Passed  |  |
| (8)   | 73 N. SEWALL'S PT<br>BUFORD                  | COLUMNS<br>Pence |         | INSPECTOR: <i>[Signature]</i>              |
| 6320  | Lopilato                                     | roof             | Passed  | will call Wed. AM to discuss type of insp. |
| (6)   | 4 St. Lucie Crt. (Hillcrest)<br>All American | Driv./Shedg.     |         | INSPECTOR: <i>[Signature]</i>              |
| 6322  | Byers (?)                                    | footers          | Passed  |  |
| (7)   | 32 N. S.P. Rd.<br>Grand Entry                | Entry Columns    |         | INSPECTOR: <i>[Signature]</i>              |
| 5907  | Kreuser                                      | Cover. repair    | Passed  | close                                      |
| (13)  | 23 Ridgeland<br>Structure Con.               | Pinal            |         | INSPECTOR: <i>[Signature]</i>              |
| 6252  | Kreuser                                      | Repl. Pilligs    | Passed  | close                                      |
| (14)  | 23 Ridgeland<br>Dodge + Naine                | Pinal            |         | INSPECTOR: <i>[Signature]</i>              |
| <b>OTHER:</b>   |  |                  |         |  |
| O.k. Check permit + Pilligs (deck) 23 Ridgeland - close |  |                  |         |  |

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 7/30, 20013 Page      of     

| PERMIT | OWNER/ADDRESS/CONTR.               | INSPECTION TYPE                | RESULTS                   | NOTES/COMMENTS:   |
|--------|------------------------------------|--------------------------------|---------------------------|---|
| 6346   | MOORE                              | STEEL                          | <del>Exam</del><br>Passed |   |
| (1)    | 5 OAK HILL WAY<br>CRYSTALLACON     | UNDERGR PLUMB                  |                           | INSPECTOR:                       |
| 6326   | WEGMAN                             | ROOF FINAL                     | Passed                    | close   |
| (5)    | 5 KINGSTON COURT<br>STUART ROOFING |                                |                           | INSPECTOR:                       |
| 6345   | THOMPSON                           | IN PROGRESS                    | Passed                    |   |
| (4)    | 179 S. RIVER RD<br>CHALFOUX        |                                |                           | INSPECTOR:                      |
| 6320   | LOPILATO                           | FINAL ROOF                     | Passed                    | close   |
| (2)    | 4 ST. LUCIE CT<br>ALL AMERICAN     | (Hillcroft)                    |                           | INSPECTOR:                     |
| 5919   | BURR                               | <del>ELECTRICAL</del><br>ROUGH |                           |   |
| (3)    | 21 RIVERVIEW<br>O/B                | FRAMING                        | Passed                    | (ex. gar doors)<br>INSPECTOR:  |
| 6325   | Winer                              | Storm Shutters                 | Passed                    | close   |
| (6)    | 19 Ridgeland                       |                                |                           | INSPECTOR:                     |
| PERMIT | OWNER/ADDRESS/CONTR.               | INSPECTION TYPE                | RESULTS                   | NOTES/COMMENTS:   |
|        |                                    |                                |                           |   |
|        |                                    |                                |                           |   |
|        |                                    |                                |                           | INSPECTOR:                     |

OTHER: \_\_\_\_\_



# CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
10/18/2002

PHONE: (772)287-2030 FAX (772)288-2481

Deakins-Carroll Insurance Agency  
www.deakinscarroll.com  
P.O. Box 1597  
Pt. Salerno, FL 34992

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

### INSURERS AFFORDING COVERAGE

INSURED All American Roofing of The Treasure Coast, Inc  
3091 SE Waaler Street  
Stuart, FL 34997

INSURER A: Burlington Ins. Co.

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**RECEIVED**  
OCT 21 2002  
BY: \_\_\_\_\_

### COVERAGES

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. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | TYPE OF INSURANCE  | POLICY NUMBER | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS   |
|----------|--|---------------|----------------------------------|-----------------------------------|--|
| A        | GENERAL LIABILITY  | BINDERG33432  | 10/16/2002                       | 10/16/2003                        | EACH OCCURRENCE \$ 500,000   |
|          | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY               |               |                                  |                                   | FIRE DAMAGE (Any one fire) \$ Excluded   |
|          | <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR |               |                                  |                                   | MED EXP (Any one person) \$ Excluded   |
|          |  |               |                                  |                                   | PERSONAL & ADV INJURY \$ Excluded  |
|          |  |               |                                  |                                   | GENERAL AGGREGATE \$ 1,000,000   |
|          |  |               |                                  |                                   | PRODUCTS - COMP/OP AGG \$ 500,000  |
|          |  |               |                                  |                                   | GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |
|          | AUTOMOBILE LIABILITY   |               |                                  |                                   | COMBINED SINGLE LIMIT (Ea accident) \$   |
|          | <input type="checkbox"/> ANY AUTO  |               |                                  |                                   | BODILY INJURY (Per person) \$  |
|          | <input type="checkbox"/> ALL OWNED AUTOS                                       |               |                                  |                                   | BODILY INJURY (Per accident) \$  |
|          | <input type="checkbox"/> SCHEDULED AUTOS                                       |               |                                  |                                   | PROPERTY DAMAGE (Per accident) \$  |
|          | <input type="checkbox"/> HIRED AUTOS   |               |                                  |                                   |  |
|          | <input type="checkbox"/> NON-OWNED AUTOS                                       |               |                                  |                                   |  |
|          | GARAGE LIABILITY   |               |                                  |                                   | AUTO ONLY - EA ACCIDENT \$   |
|          | <input type="checkbox"/> ANY AUTO  |               |                                  |                                   | OTHER THAN AUTO ONLY: EA ACC \$  |
|          |  |               |                                  |                                   | AGG \$   |
|          | EXCESS LIABILITY   |               |                                  |                                   | EACH OCCURRENCE \$   |
|          | <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE            |               |                                  |                                   | AGGREGATE \$   |
|          |  |               |                                  |                                   | \$   |
|          | <input type="checkbox"/> DEDUCTIBLE  |               |                                  |                                   | \$   |
|          | <input type="checkbox"/> RETENTION \$  |               |                                  |                                   | \$   |
|          | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY                                  |               |                                  |                                   | WC STATU-TORY LIMITS OTHER \$  |
|          |  |               |                                  |                                   | E.L. EACH ACCIDENT \$  |
|          |  |               |                                  |                                   | E.L. DISEASE - EA EMPLOYEE \$  |
|          |  |               |                                  |                                   | E.L. DISEASE - POLICY LIMIT \$   |
|          | OTHER  |               |                                  |                                   |  |

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

### CERTIFICATE HOLDER

### ADDITIONAL INSURED; INSURER LETTER

### CANCELLATION

Sewall's Point, Town of  
1 South Sewall's Point Road  
Stuart, FL 34996

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

David Deakins/MDB

|  |              |  |                                    |              |  |  |            |  |            |  |            |  |            |  |
|--|--------------|--|------------------------------------|--------------|--|--|------------|--|------------|--|------------|--|------------|--|
| <b>PRODUCER</b><br><br>CONDON-MEEK, INC.<br>1211 COURT ST.<br>CLEARWATER, FL 34616-5897                    | Serial #     | THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.  |                                    |              |  |  |            |  |            |  |            |  |            |  |
| <b>INSURED</b><br><br>CRUM STAFFING II, INC.<br>3040 GULF TO BAY BLVD., SUITE #200<br>CLEARWATER, FL 33759 |              | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:70%;"><b>INSURERS AFFORDING COVERAGE</b></td> <td style="width:30%;"><b>NAIC#</b></td> </tr> <tr> <td>INSURER A: CRUM NATIONAL INSURANCE, INC.</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table> | <b>INSURERS AFFORDING COVERAGE</b> | <b>NAIC#</b> | INSURER A: CRUM NATIONAL INSURANCE, INC. |  | INSURER B: |  | INSURER C: |  | INSURER D: |  | INSURER E: |  |
| <b>INSURERS AFFORDING COVERAGE</b>   | <b>NAIC#</b> |  |                                    |              |  |  |            |  |            |  |            |  |            |  |
| INSURER A: CRUM NATIONAL INSURANCE, INC.   |              |  |                                    |              |  |  |            |  |            |  |            |  |            |  |
| INSURER B:   |              |  |                                    |              |  |  |            |  |            |  |            |  |            |  |
| INSURER C:   |              |  |                                    |              |  |  |            |  |            |  |            |  |            |  |
| INSURER D:   |              |  |                                    |              |  |  |            |  |            |  |            |  |            |  |
| INSURER E:   |              |  |                                    |              |  |  |            |  |            |  |            |  |            |  |


**COVERAGES**

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 POLICES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES, AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

| INSR LTR | ADD'L NSRD                | TYPE OF INSURANCE  | POLICY NUMBER  | POLICY EFFECTIVE DATE (MM/DD/YY) | POLICY EXPIRATION DATE (MM/DD/YY) | LIMITS  |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|----------|---------------------------|--|----------------|----------------------------------|-----------------------------------|---|---|---------------------|--------|--|--|------------------|--|------------|--|--------------------------|--|------------|--|---------------------------|--|------------|
|          |                           | <b>GENERAL LIABILITY</b><br><input type="checkbox"/> COMMERCIAL GENERAL LIABILITY<br><input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR<br><br>GEN'L AGGREGATE LIMIT APPLIES PER:<br><input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC |                |                                  |                                   | EACH OCCURRENCE \$<br>DAMAGE TO RENTED PREMISES (Ea occurrence) \$<br>MED EXP (Any one person) \$<br>PERSONAL & ADV INJURY \$<br>GENERAL AGGREGATE \$<br>PRODUCTS - COMP/OP AGG \$  |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          |                           | <b>AUTOMOBILE LIABILITY</b><br><input type="checkbox"/> ANY AUTO<br><input type="checkbox"/> ALL OWNED AUTOS<br><input type="checkbox"/> SCHEDULED AUTOS<br><input type="checkbox"/> HIRED AUTOS<br><input type="checkbox"/> NON-OWNED AUTOS   |                |                                  |                                   | COMBINED SINGLE LIMIT (Ea accident) \$<br><br>BODILY INJURY (Per person) \$<br><br>BODILY INJURY (Per accident) \$<br><br>PROPERTY DAMAGE (Per accident) \$   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          |                           | <b>GARAGE LIABILITY</b><br><input type="checkbox"/> ANY AUTO   |                |                                  |                                   | AUTO ONLY - EA ACCIDENT \$<br><br>OTHER THAN AUTO ONLY: EA ACC \$<br>AGG \$   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          |                           | <b>EXCESS/UMBRELLA LIABILITY</b><br><input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE<br><br>DEDUCTIBLE<br>RETENTION \$  |                |                                  |                                   | EACH OCCURRENCE \$<br>AGGREGATE \$<br>\$<br>\$<br>\$  |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
| A        |                           | <b>WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY</b><br>ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?<br>If yes, describe under SPECIAL PROVISIONS below  | WC 1 0000 0000 | 04/30/03                         | 04/30/04                          | <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%; text-align: center;">X</td> <td style="width:15%;">WC STATUTORY LIMITS</td> <td style="width:5%; text-align: center;">OTH-ER</td> <td style="width:75%;"></td> </tr> <tr> <td></td> <td>EL EACH ACCIDENT</td> <td></td> <td>\$ 100,000</td> </tr> <tr> <td></td> <td>EL DISEASE - EA EMPLOYEE</td> <td></td> <td>\$ 100,000</td> </tr> <tr> <td></td> <td>EL DISEASE - POLICY LIMIT</td> <td></td> <td>\$ 500,000</td> </tr> </table> | X | WC STATUTORY LIMITS | OTH-ER |  |  | EL EACH ACCIDENT |  | \$ 100,000 |  | EL DISEASE - EA EMPLOYEE |  | \$ 100,000 |  | EL DISEASE - POLICY LIMIT |  | \$ 500,000 |
| X        | WC STATUTORY LIMITS       | OTH-ER   |                |                                  |                                   |   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          | EL EACH ACCIDENT          |  | \$ 100,000     |                                  |                                   |   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          | EL DISEASE - EA EMPLOYEE  |  | \$ 100,000     |                                  |                                   |   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          | EL DISEASE - POLICY LIMIT |  | \$ 500,000     |                                  |                                   |   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |
|          |                           | OTHER  |                |                                  |                                   |   |   |                     |        |  |  |                  |  |            |  |                          |  |            |  |                           |  |            |

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS**

This certificate remains in effect provided the client's account is in good standing with Crum Staffing II, Inc. Coverage is not provided for any employee for which the client is not reporting hours to Crum Staffing II, Inc. Applies to 100% of the employees of Crum Staffing II, Inc. leased to **ALL AMERICAN ROOFING OF THE TREASURE COAST, INC.**

|  |  |
|--|--|
| <b>CERTIFICATE HOLDER</b><br><br>TOWN OF SEWALLS POINT<br>1 S. SEWALLS POINT RD<br>SEWALLS POINT, FL 34996 | <b>CANCELLATION</b><br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.<br><br>AUTHORIZED REPRESENTATIVE<br> |
|--|--|

AC# 0265462

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONST INDUSTRY LICENSING BOARD

SEQ# 01111500090

| DATE       | BATCH NUMBER | LICENSE NBR |
|------------|--------------|-------------|
| 11/15/2001 | 01012332     | QB -0020109 |

The BUSINESS ORGANIZATION  
Named below IS QUALIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2003  
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS THE  
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER,)

ALL AMERICAN ROOFING OF THE TREASURE COAST IN  
3091 WAALER STREET  
STUART FL 34997

JEB BUSH  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER  
SECRETARY

AC# 0475369

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L02070500775

| DATE       | BATCH NUMBER | LICENSE NBR |
|------------|--------------|-------------|
| 07/05/2002 | 200003598    | CCC058118   |

The ROOFING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2004

WILKINS, PAUL D  
ALL AMER ROOF OF THE TREASURE COAST INC  
3091 SE WAALER ST  
STUART FL 34997

JEB BUSH  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SEYER  
SECRETARY

2002-2003 MARTIN COUNTY ORIGINAL  
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995  
(561) 288-5604

LICENSE 2002-513-001 CERT CC-0058118

PHONE 561-463-8055 SIC NO 023561

LOCATION:

3091 SE WAALER ST STU

CHARACTER COUNTS IN MARTIN COUNTY

|             |            |             |              |
|-------------|------------|-------------|--------------|
| PREV YR. \$ | <u>.00</u> | LIC. FEE \$ | <u>25.00</u> |
| \$          | <u>.00</u> | PENALTY \$  | <u>.00</u>   |
| \$          | <u>.00</u> | COL. FEE \$ | <u>.00</u>   |
| \$          | <u>.00</u> | TRANSFER \$ | <u>.00</u>   |
| TOTAL       |            |             | <u>25.00</u> |

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION  
OF ROOFING CONTRACTOR

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

30 DAY OF AUGUST 2002  
AND ENDING SEPTEMBER 30, 2003

WILKINS, PAUL D (QUALIFIER)  
ALL AMERICAN ROOFING OF THE  
TREASURE COAST, INC.  
3091 SE WAALER ST  
STUART, FL 34997

12 02083001 001796

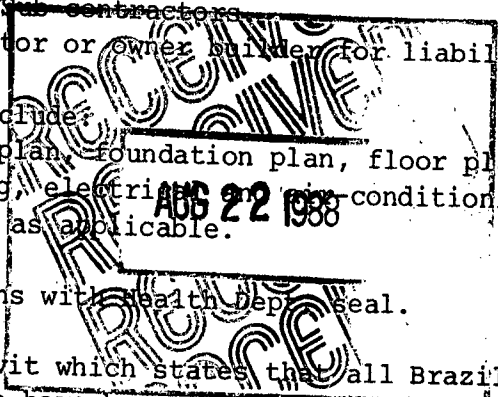
Taft

TOWN OF SEWALL'S POINT FLORIDA  
Application for Permit to Build a House or Commercial Building  
PERMIT NO. 2380

DATE \_\_\_\_\_

To obtain this permit, the following documents are necessary:

1. Florida certification of Builder and Sub-contractors.
2. Certificate of insurance from Contractor or owner, builder for liability and workmen's compensation.
3. Three sets of building plans which include: 1/4" scale for building drawings, plot plan, foundation plan, floor plans, wall and roof cross-sections; plumbing, electrical and air conditioning layouts, and at least two elevations, as applicable.
4. Warranty deed to the property.
5. Septic tank permit and one set of plans with health Dept. seal.
6. Energy code calculations.
7. Notorized copy of the attached affidavit which states that all Brazilian Pepper, Australian Pine, and Melaluca have been permanently removed from the property.
8. If trees other than in Item 7 are to be removed, a separate tree removal permit.
9. Designation of the Flood Control Zone in which the property is located as defined by the latest Flood Control Map. If the location is questionable, it must be certified by a licensed surveyor. If in "A" Zone, the proposed slab elevation should be specified. If in "V-13", the proposed elevation of the top of pier or piling is required.
10. A manufacturer's window schedule with symbols of sizes.



Owner FAIRVIEW SOUTH Present Address 3601 SE OCEAN BLVD.  
 Phone 286-7600 STUART, FL.

General Contractor MOSLEY & SON CONST. INC Address 1400 SE MONTEREY RD.  
 Phone 287-6962 STUART, FL.

Where Licensed STATE OF FLORIDA License No. CGC 036047

Plumbing Contractor DAVES PLUMBING License No. 00030

Electrical Contractor FORWARD ELECTRIC License No. 00092

Roofing Contractor PANACHE CONST. License No. CGC A07037

Air-Conditioning Contractor FUMINS A/C License No. 00017

Describe the building, or alteration to existing building SINGLE FAMILY RESIDENCE  
1 STORY

Name the street on which the building, its front building line and its front yard will face 4 ST. LUCIE COURT ~~35 South River Road~~

Subdivision HILLCREST Lot No. 18 Area 24336 SF (LOT SIZE)

Building area, inside walls 3370  
Area of garage-carport-porch-square feet 1010

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 187,919.00

Cost of permit \$ \_\_\_\_\_ Plans approved as submitted \_\_\_\_\_ or, as marked

In addition, the following are understood by owner and contractor:

1. The building area inside walls is required to show conformance to the ordinance requiring a minimum of 155 sq. ft.
2. The contract price is the expected cost of the building including all but land, carpeting, appliances and landscaping. The permit fee is calculated at \$5.00 per thousand of this. If no contract is submitted as proof, it will be based on a cost of \$60.00 per sq.ft. for inside walls; \$25.00 per sq.ft. for any other area. In addition, a \$10.00 fee for each subcontractor is included in the permit fee.
3. Before a C.O. is issued the following are necessary:
  - a. An owner's affidavit of building cost. A standard form is available. Any discrepancy between original permitfee and new fee based on affidavit will be adjusted here.
  - b. If property is in "A" flood zone, an affidavit from a licensed surveyor showing slab elevation.  
If property is in "V" zone, an affidavit from a licensed surveyor showing elevation of top of piers or pilings.  
In addition, certification by a qualified engineer or architect of the structural adequacy of dwelling. Elevation is distance above mean sea level. A standard affidavit form is available.
  - c. Rough grading and clean-up of grounds.
  - d. Approval by the Health Dept. of Septic installation.
4. The South Florida Building Code latest revision is part of the Town's ordinance.
5. Building permits are issued for 1 year's duration. If construction takes longer, a full year's renewal fee is required. Construction must be started within 180 days of issuance or the permit is subject to revocation with the forfeiture of fee.
6. Any changes in plan must be approved by the Building Inspector.
7. Work hours are from 8:00 AM to 5:00 PM Monday through Saturday.
8. Portable toilet must be provided.
9. The grounds should be policed each day to clean up trash and scrap building material. A dumpster should be provided to contain these.
10. Inspections are performed from Monday through Friday from 8:00 AM to Noon. Twenty-four hours notice is required.
11. To facilitate set-back inspection at the start of the project, lines shall be strung along the property lines of the lot.
12. Within 90 days after a C.O. is issued, the grounds must be landscaped to be compatible with the neighborhood.
13. THIS SUMMARY IS NOT A SUBSTITUTE FOR TOWN ORDNANCES. APPROVAL OF THE BUILDING PLANS IN NO WAY RELIEVES THE OWNER OR BUILDER FROM COMPLIANCE WITH TOWN ORDNANCES.

*Mokey & Smlist, Inc.*  
 Signed Contractor *Philip W. Morgan Jr* CGC036047

Owner \_\_\_\_\_

|                                 |                             |      |                       |
|---------------------------------|-----------------------------|------|-----------------------|
| Approved by Building Inspector  | <u><i>Dale Brown</i></u>    | Date | <u><i>8/25/88</i></u> |
| Approved by Commissioner        | <u><i>Arthur Clarke</i></u> | Date | <u><i>8/25/88</i></u> |
| Certificate of Occupancy issued | <u><i>Dale Brown</i></u>    | Date | <u><i>3/21/89</i></u> |

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 3/21/89  
 This is to request that a Certificate of Approval for Occupancy be issued to Fairview South

For property built under Permit No. 2380 Dated 8/25/88 when completed in  
 conformance with the Approved Plans

| Item                    | Signed                        | Approved by |
|-------------------------|-------------------------------|-------------|
| 1. LOT STAKES/SET BACKS |                               |             |
| 2. TERMITE PROTECTION   | <u>12/2/88</u>                |             |
| 3. FOOTING - SLAB       | <u>11/7/88</u> <u>12/6/88</u> |             |
| 4. ROUGH PLUMBING       | <u>12/11/88</u>               |             |
| 5. ROUGH ELECTRIC       | <u>2/6/89</u>                 |             |
| 6. LINTEL               |                               |             |
| 7. ROOF                 | <u>2/6/89</u>                 |             |
| 8. FRAMING              | <u>2/6/89</u>                 |             |
| 9. INSULATION           | <u>2/8/89</u>                 |             |
| 10. A/C DUCTS           | <u>2/6/89</u>                 |             |
| 11. FINAL ELECTRIC      | <u>3/21/89</u>                |             |
| 12. FINAL PLUMBING      | <u>3/21/89</u>                |             |
| 13. FINAL CONSTRUCTION  | <u>3/21/89</u>                |             |

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Dale Brown 3/21/89 date

Approved by Building Commissioner \_\_\_\_\_ date

Utilities notified F.P.L. 3/20/89 date

Original Copy sent to \_\_\_\_\_

(Keep carbon copy for Town files)



MARTIN COUNTY PUBLIC HEALTH UNIT  
131 East 7th Street  
Stuart, Florida, 34997  
287-2277

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Musley CONSTRUCTION  
LEGAL DESCRIPTION: LOT 15 MILLER ST  
SEPTIC TANK PERMIT NUMBER: 10 88-506

The items noted below must be certified by a surveyor or engineer and returned to the Health Department prior to the first plumbing inspection by the Building Department.

- X 1. Building Permit Number: \_\_\_\_\_.
- 2. I certify that the elevation of the top of the lowest plumbing stubout is \_\_\_\_\_ inches above benchmark elevation as indicated on septic tank permit.
- 3. I certify that the top of the lowest building plumbing stubout is \_\_\_\_\_ inches above crown of road elevation shown on septic tank permit.
- 4. I certify that all severe limited soil has been removed from an area of \_\_\_\_\_ feet by \_\_\_\_\_ feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date Observed: \_\_\_\_\_

- NOTE: a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
- b. Drainfield must be centered in the excavated area. Please set stakes to identify the excavated area boundaries. Drainfield will not be approved if severe limited soils are not removed.

CERTIFIED BY: \_\_\_\_\_

As applicant or applicant's representative, I understand the above requirements.

Date: \_\_\_\_\_ Job Number: \_\_\_\_\_

Philip W. Muzo Jr  
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

\_\_\_\_\_  
(Signature of Environmental Health Specialist) (Date)

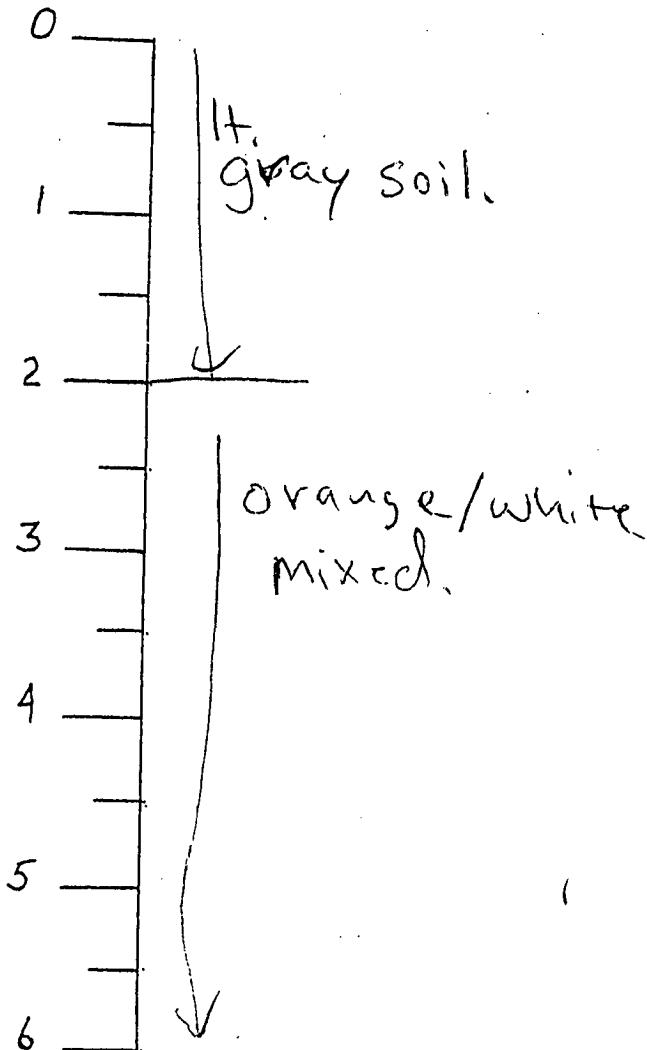
MARTIN COUNTY PUBLIC HEALTH UNIT  
131 East 7th Street  
Stuart, Florida 33497  
287-2277

SITE EVALUATION

APPLICANT: Mosley & Son Construction

LEGAL DESCRIPTION: lot 18 Hillcrest

SOIL PROFILE



USDA SOIL TYPE Paola

USDA SOIL NUMBER #6

No Impervious soils are present at  
6 feet below natural  
grade.

Present Water Depth Below Natural Grade >6' Feet.

Wet Season Range Per Soil Survey >6' Feet.

Estimated Wet Season Water Depth Below Natural Grade 6' Feet.

Indicator Vegetation Present Citrus, Mango

Is Benchmark Located on Plot Plan and Present on Site? Yes

Approximate Amount of Fill on Neighboring Lots 0-6"

Other Findings: Sand ridge.

EVALUATION BY: Keith F. Ferris

2-17-02



STATE OF FLORIDA  
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER H1088-506 HOME PHONE \_\_\_\_\_  
 NAME OF APPLICANT Mosley & Son. Construction WORK PHONE 287-6962  
 MAILING ADDRESS OF APPLICANT P.O. Box 1736, Stuart FL. 34995  
 ZIP CODE \_\_\_\_\_

LOT 18 BLOCK — SUBDIVISION HILLCREST  
 IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION  
 PLAT BOOK 10 PAGE 39 DATE SUBDIVIDED 8-27-86  
 RESIDENTIAL: NUMBER DWELLING UNITS ONE NUMBER BEDROOMS 3  
 LOT SIZE 24,366 FT<sup>2</sup> HEATED OR COOLED AREA OF HOME 2770 FT<sup>2</sup>  
 COMMERCIAL: TYPE OF BUSINESS PROPOSED \_\_\_\_\_  
 BUILDING SIZE \_\_\_\_\_ FT<sup>2</sup>

-----AFFIDAVIT-----

I HAVE REVIEWED THIS PERMIT AND I CERTIFY THAT ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THIS PERMIT AND ANY APPLICABLE STATE OR COUNTY REGULATIONS.

SIGNATURE OF PROPERTY OWNER OR OWNER'S  
LEGALLY AUTHORIZED REPRESENTATIVE

-----INSTALLATION SPECIFICATIONS-----

SEPTIC TANK CAPACITY 1050 GALLONS  
 DRAINFIELD SIZE 400 SQUARE FEET  
 DRAINFIELD ROCK MUST BE 5 FEET FROM FRONT OR REAR PROPERTY LINES  
 AND 5 FEET FROM SIDE PROPERTY LINES. EXCAVATION CAN NOT EXTEND MORE  
 THAN FIVE FEET FROM APPROVED INSTALLATION AREA.

TOP OF SEPTIC TANK IS REQUIRED  
TO BE A MINIMUM ELEVATION OF  
FINISH SOIL GRADE

\* NOT TO EXCEED 18" of  
cover over drainfield rock

ISSUED BY: Jeff Quella DATE 8-17-88  
 MARTIN COUNTY PUBLIC HEALTH UNIT

PLEASE NOTE:

- (1) IF BUILDING CONSTRUCTION DOES NOT START WITHIN ONE YEAR FROM DATE OF ISSUANCE, THIS PERMIT EXPIRES. IF BUILDING CONSTRUCTION STARTS WITHIN 1 YEAR FROM DATE OF ISSUANCE, THE DATE OF EXPIRATION WILL BE EXTENDED AN ADDITIONAL 90 DAYS.
- (2) APPLICANT IS RESPONSIBLE FOR REPLACING EXCAVATED SOILS WITH A GOOD GRADE OF SAND.
- (3) NA REINSPECTION FEE IF WELL NOT INSTALLED AT TIME OF ONSITE SEWAGE DISPOSAL SYSTEM INSPECTION.
- (4) INSPECTION RESULTS WILL BE POSTED ON BUILDING PERMIT OR ON ELECTRICAL BOX.
- (5) IF BUILDING STUBOUT IS PLACED MORE THAN 20 FEET FROM SEPTIC TANK OR DRAINFIELD, A HIGHER STUBOUT ELEVATION THAN SHOWN ABOVE WILL BE REQUIRED.
- (6) IF FILL IS REQUIRED, CONTACT MARTIN COUNTY BUILDING DIVISION.
- (7) IF ANY INFORMATION ON THIS PERMIT CHANGES, AN UPDATED APPLICATION IS REQUIRED.
- (8) IF WELL OR MOUND DRAINFIELD IS PROPOSED, SEE ATTACHED SKETCH OF ADDITIONAL SPECIAL REQUIREMENTS.

-----FINAL INSPECTION-----

CONSTRUCTION APPROVED BY: \_\_\_\_\_ DATE \_\_\_\_\_  
 MARTIN COUNTY PUBLIC HEALTH UNIT

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE



APPLICANT Mosley & Son Construction  
LEGAL DESCRIPTION Lot 18, HILLCREST S/D

-----SITE INFORMATION-----

1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? NO
2. IS THERE A POTABLE PRIVATE WELL WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
3. IS THERE AN IRRIGATION WELL WITHIN 50 FEET OF THE AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
4. IS THERE A PUBLIC WELL THAT SERVES LESS THAN 25 PEOPLE OR LESS THAN 15 HOMES WITHIN 100 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
5. IS THERE A PUBLIC WELL WHICH SERVES MORE THAN 25 PEOPLE OR MORE THAN 15 HOMES WITHIN 200 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
6. IS THERE A GRAVITY SEWER LINE OR LIFT STATION WITHIN 100 FEET OF THE PROPOSED LOT? NO
7. IS THERE A LAKE, STREAM, WETLAND, OR SURFACE WATER WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
8. IS THERE A PROPOSED OR EXISTING PUBLIC DRINKING WATER LINE WITHIN 10 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
9. IS THERE A STORM WATER RETENTION AREA OR DRAINAGE EASEMENT WITHIN 15 FEET OF THE PROPOSED SEPTIC SYSTEM? YES, BUT NO SWALE OR DEPRESSION
10. IS THE SEPTIC SYSTEM IN AN AREA PROPOSED FOR PAVING OR VEHICULAR IN EASEM'T. TRAFFIC? NO
11. ARE ALL PRIVATE WELLS, SEPTIC SYSTEMS AND SURFACE WATER ON ADJACENT OR CONTIGUOUS LAND WITHIN 75 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
12. ARE ALL PUBLIC WELLS WITHIN 200 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
13. DOES THE PLOT PLAN INCLUDE A PLAT OF THE LOT OR TOTAL SITE OWNERSHIP DRAWN TO SCALE, BOUNDARIES WITH DIMENSIONS, LOCATIONS OF BUILDING OR RESIDENCES, SWIMMING POOLS, RECORDED EASEMENTS, THE PROPOSED SEPTIC SYSTEM, ANY PROPOSED OR EXISTING WELLS, PUBLIC WATER LINES, PAVED AREAS OR DRIVEWAYS, AND SURFACE WATERS SUCH AS LAKES, PONDS, STREAMS, CANALS, OR WETLANDS? YES
14. THERE IS 2800 ± SQUARE FEET OF AVAILABLE LAND TO INSTALL THE SEPTIC SYSTEM. THIS AREA EXCLUDES INTERFERENCES. SHADE THIS AVAILABLE AREA ON PLOT PLAN.

-----ELEVATIONS-----

1. CROWN OF ROAD ELEVATION 34.28' NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION      NGVD SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 21.75 NGVD SHOW LOCATION ON PLOT PLAN.
2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? NO IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING?      NGVD.

DIRECTIONS TO SITE: East Ocean Blvd. east to S. Sewall's Point Rd.; South on S. Sewall's Pt. Rd. for 2000'± to Hillcrest Drive; West on Hillcrest Drive to St. Lucie Court; North on St. Lucie Court to cul-de-sac; Lot 18 is ~~at~~ N.E. of cul-de-sac.

NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OF ENGINEER.



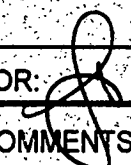
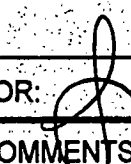
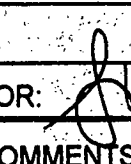
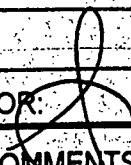
CERTIFIED BY: Arthur Gandy  
FL: PROFESSIONAL NO. 3343 P.L.S.  
DATE: 7-31-88 JOB NO.



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 1/24, 2008 Page 3 of    

| PERMIT | OWNER/ADDRESS/CONTR. | INSPECTION TYPE   | RESULTS | NOTES/COMMENTS:  |
|--------|----------------------|-------------------|---------|--|
| 5509   | MILOED               | FINAL             | Passed  |  |
|        | 4 FIELDWAY DRIVE     | ADDITION - BATH   | Final   |  |
|        | MILOED DEV. CORP.    |                   |         | INSPECTOR:    |
| 5565   | RUPP                 | FINAL -           | Passed  |  |
|        | 19 W. HIGHPOINT      | ENTRY ADDITION &  |         |  |
|        | EMMICK CONSTR.       | ALTERATION        |         | INSPECTOR:    |
| 5515   | WALKER               | FINAL             | Passed  |  |
|        | 6 CRANE'S NEST       | ADDITIONS &       |         |  |
|        | IANIERO              | ALTERATION        |         | INSPECTOR:   |
| 5467   | LOPILATO             | FENCE - FINAL     | Passed  |  |
|        | 4 ST. LUCIE COURT    |                   |         |  |
|        | O/B                  |                   |         | INSPECTOR:  |
| 5371   | VOLPE                | RE ROOF - FINAL   | Passed  |  |
|        | 15 MIRAMAR RD        |                   |         |  |
|        | O/B                  |                   |         | INSPECTOR:  |
| 5403   | VOLPE                | RF COPOLA - FINAL | Passed  |  |
|        | 15 MIRAMAR RD        |                   |         |  |
|        | O/B                  |                   |         | INSPECTOR:  |
| PERMIT | OWNER/ADDRESS/CONTR. | INSPECTION TYPE   | RESULTS | NOTES/COMMENTS:  |
|        |                      |                   |         |  |
|        |                      |                   |         | INSPECTOR:   |

OTHER: \_\_\_\_\_

MASTER PERMIT NO. N/A

### TOWN OF SEWALL'S POINT

Date 7/26/01 BUILDING PERMIT NO. 5467  
 Building to be erected for PETER & PHYLLIS LOPILATO Type of Permit FENCE (WOOD)  
 Applied for by O/B (Contractor) Building Fee \$37.50  
 Subdivision HILLCREST Lot 18 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_  
 Address 4 ST. LUCIE CT. Impact Fee \_\_\_\_\_  
 Type of structure S.F.R. A/C Fee \_\_\_\_\_  
 Electrical Fee \_\_\_\_\_  
 Plumbing Fee \_\_\_\_\_  
 Roofing Fee \_\_\_\_\_

Parcel Control Number:  
01-38-41-014-000-00180-80000  
 Amount Paid \$37.50 Check # 9083 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_  
 Total Construction Cost \$ 250.18 TOTAL Fees \$37.50

Signed Pete Leff Signed [Signature]  
 Applicant Town Building Inspector [Signature]

# FENCE PERMIT

| INSPECTIONS |            |        |            |
|-------------|------------|--------|------------|
| SETBACKS    | DATE _____ | HEIGHT | DATE _____ |
| FOOTINGS    | DATE _____ | FINAL  | DATE _____ |

**24 HOURS NOTICE REQUIRED FOR INSPECTIONS. CALL 287-2455**

**WORK HOURS - 8:00 AM UNTIL 5:00 PM**

**MONDAY THROUGH SATURDAY**

- New Construction     Remodel     Addition     Demolition

**This permit must be visible from the street, accessible to the inspector.**  
**FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,**  
**NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.**  
**DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!**

**TREE REMOVAL (Attach sealed survey)**

Number of trees to be removed: \_\_\_\_\_ Number of trees to be retained: \_\_\_\_\_ Number of trees to be planted: \_\_\_\_\_ Number of Specimen trees removed: \_\_\_\_\_  
Fee: \$ \_\_\_\_\_ Authorized/Date: \_\_\_\_\_

**DEVELOPMENT ORDER # \_\_\_\_\_**

**1. ALL APPLICATIONS REQUIRE**

- a. Property Appraisers Parcel Number.
- b. Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
- c. Contractors name, address, phone number & license numbers.
- d. Name all sub-contractors (properly licensed).
- e. Current Survey

2. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.

3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.

4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architects seal and the following items:

- a. Floor Plan
- b. Foundation Details
- c. Elevation Views - Elevation Certificate due after slab inspection,
- d. Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
- e. Truss layout
- f. Vertical Wall Sections (one detail for each wall that is different)
- g. Fireplace drawing: If prefabricated submit manufacturers data

**ADDITIONAL Required Documents are:**

- 1. Use permit (for driveway connection to public Right of Way). Return form with plot plan showing driveway location (State Road A-1-A East Ocean Boulevard only).
- 2. Well Permit or information on existing well & pump.
- 3. Flood Hazard Elevation (if applicable).
- 4. Energy Code Compliance Certification plus any Approved Forms and/or Energy Code Compliance Sheets.
- 5. Statement of Fact (for Homeowner Builder), and proof of ownership (Deed or Tax receipt).
- 6. Irrigation Sprinkler System layout showing location of heads, valves, etc.
- 7. A certified copy of the Notice of Commencement must be filed in this office and posted at the job site prior to the first inspection.
- 8. Repts. required upon completion of slab or footing inspection And Prior to any further inspections.

**NOTICE:** In, addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of COUNTY OF MARTIN, and there may be additional permits required from other governmental entities such as water management districts, state and federal agencies.

Approved by Building Official: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by Town Engineer \_\_\_\_\_ Date: \_\_\_\_\_  
(If required)





**Town of Sewall's Point  
BUILDING PERMIT APPLICATION**

RECEIVED  
JUL 20 2001 Bldg. Permit Number: 5467

Owner or Titleholder's Name: Peter + Phyllis Lopitato Phone No. (561) 287-8862  
 Street: 4 St. Lucie Ct. City: Stuart State: FL Zip: 34996  
 Legal Description of Property: Lot 18 Hillcrest

Parcel Number: 1-38-41-014-001-00180-80000  
 Location of Job Site: 4 St. Lucie Ct

TYPE OF WORK TO BE DONE: install fence

CONTRACTOR/Company Name: same as above Phone No. ( ) \_\_\_\_\_  
 Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 State Registration: \_\_\_\_\_ State License: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_  
 Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_  
 Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

**AREA SQUARE FOOTAGE - SEWER - ELECTRIC:**

Living Area: \_\_\_\_\_ Garage Area: \_\_\_\_\_ Carport: \_\_\_\_\_ Accessory Bldg: \_\_\_\_\_  
 Covered Patio: \_\_\_\_\_ Scr. Porch: \_\_\_\_\_ Wood Deck: \_\_\_\_\_  
 Type Sewage: \_\_\_\_\_ Septic Tank Permit # from Health Dept. \_\_\_\_\_  
 New Electrical Service Size: \_\_\_\_\_ AMPS

**FLOOD HAZARD INFORMATION**

Flood zone: \_\_\_\_\_ Minimum Base Flood Elevation (BFE): \_\_\_\_\_ NGVD  
 Proposed first habitable floor finished elevation: \_\_\_\_\_ NGVD (minimum 1 foot above BFE)

**COSTS AND VALUES**

Estimated cost of construction or improvement: \$ 250<sup>00</sup>  
 Estimated Fair Market Value (FMV) prior to improvement: \$ \_\_\_\_\_  
 If improvement, is cost greater than 50% of Fair Market Value? YES \_\_\_ NO \_\_\_  
 Method of determining Fair Market Value: \_\_\_\_\_

**SUBCONTRACTOR INFORMATION: (Notification to this office of subcontractor change is mandatory.)**

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_  
 Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_  
 Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_  
 Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Application is hereby made to obtain a permit to do the work and installations 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 standard of all laws regulating construction in this jurisdiction. I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL.

I HEREBY CERTIFY: THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE 'BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS, INCLUDING FLORIDA MODEL ENERGY CODES.

OWNER or AGENT SIGNATURE (Required)

Peter Lopitato  
 Owner

State of Florida, County of: Martin On this the 20th day of July, 2001, by P. Lopitato who is personally known to me or produced \_\_\_\_\_ as identification.

CONTRACTOR SIGNATURE (Required)

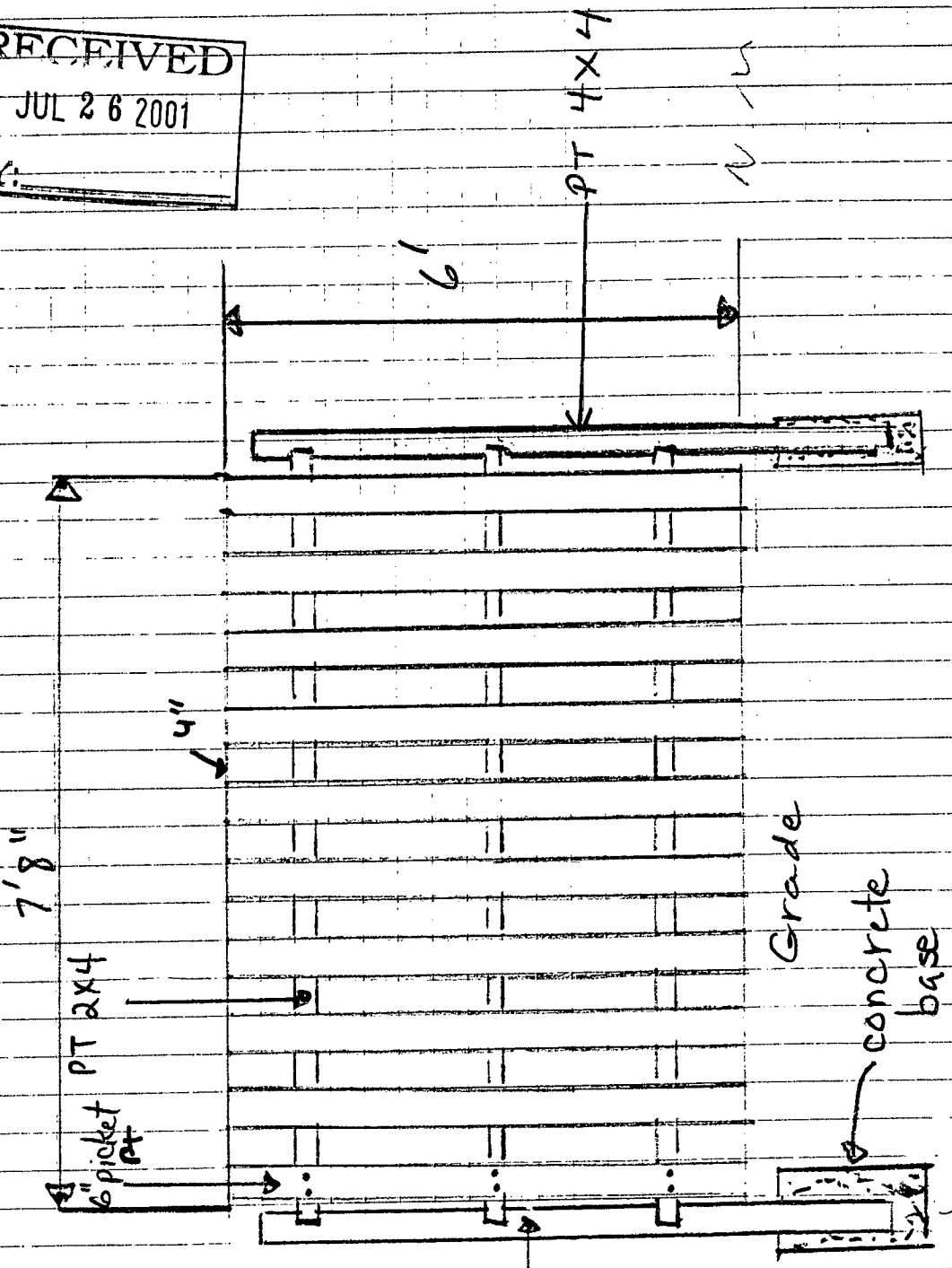
Contractor  
 State of Florida, County of: \_\_\_\_\_ On this the \_\_\_\_\_ day of \_\_\_\_\_, 2000, by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_ as identification.

Joan H. Barrow  
 Notary Public  
 My Commission Expires: \_\_\_\_\_  
 (Seal)

Notary Public  
 My Commission Expires: \_\_\_\_\_  
 (Seal)

RECEIVED  
 JUL 26 2001  
 BY: \_\_\_\_\_

6" Shadowbox Fence Detail  
 Pickets nailed w/ 2 8 penny coated nails  
 at every 2x4 cross section.  
 Post spacing is 8' o/c



7/26/01 TOWN OF SEBASTIAN'S POINT  
 REVIEWED  
 [Signature]  
 BLDG. OFFICIAL

FILE TOWN COPY  
 4 ST. LUKE CT.

PT 4x4  
 PN 5467

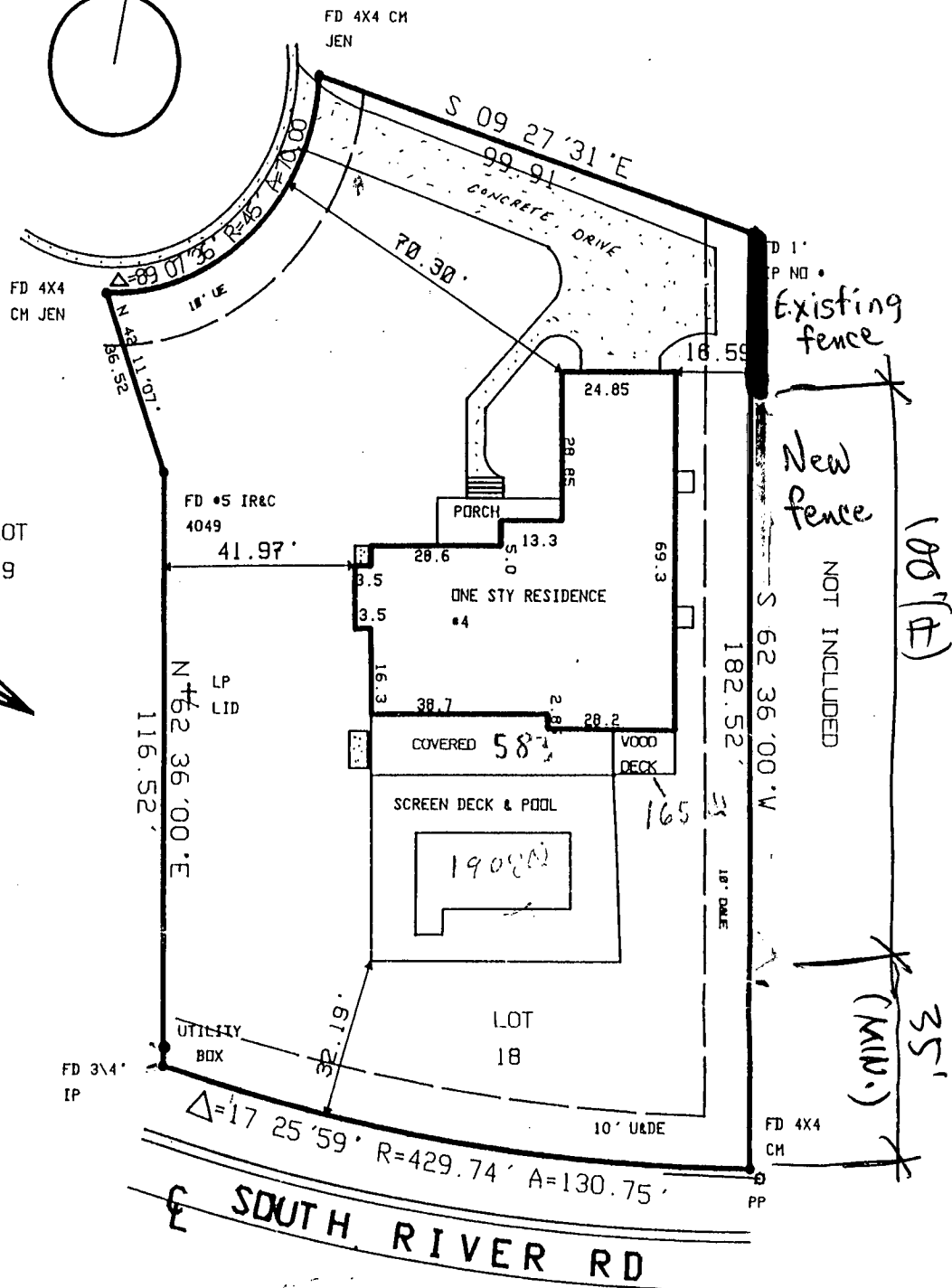
Mr. & Mrs. Peter Lopilato  
 4 St. Lucie Court

CERTIFIED TO:

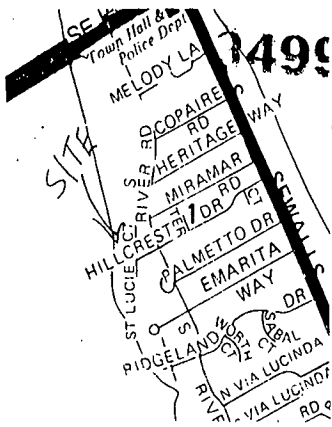
KATHARINE HURT JOHNSON, TRUSTEE  
COMMONWEALTH LAND TITLE INSURANCE  
COMPANY  
FOGT & MATHESON

FLOOD ZONE C  
FIRM PANEL 120164 0001C  
DATED APRIL 3, 1984

ST LUCIE CT



LOCATION MAP



DESCRIPTION

LOT 18, PLAT OF HILLCREST, ACCORDING TO THE PLAT THEREOF ON FILE IN THE OFFICE OF THE CLERK OF THE CIRCUIT COURT IN AND FOR MARTIN COUNTY, FLORIDA RECORDED IN PLAT BOOK 10, PAGE 39; SAID LANDS SITUATE, LYING AND BEING IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 4 ST. LUCIE COURT

SURVEYOR'S CERTIFICATE:

I HEREBY CERTIFY THAT THE SURVEY SHOWN HEREON IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF AS SURVEYED UNDER MY DIRECTION. I FURTHER CERTIFY THAT THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS UNDER RULE 21-111-6 FLORIDA ADMINISTRATIVE CODE PURSUANT TO CHAPTER 472.027 FLORIDA STATUTES.

NOT VALID UNLESS SEALED WITH AN EMBROSSED SURVEYOR'S SEAL.

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBROSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, MURPHY ACT DEEDS, OR ADJOINING DEEDS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OR HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDERGROUND UTILITIES NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF ST. LUCIE COURT AS SHOWN ON THE PLAT OF HILLCREST SUBDIVISION RECORDED IN PLAT BOOK 10, PAGE 39, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

LEGEND

- A=ARC
- ASPH. = ASPHALT
- C = CALCULATED
- CH = CHORD
- C/L = CENTERLINE
- CH = CONCRETE MONUMENT
- Δ = DELTA
- D = DESCRIPTION
- D.E. = DRAINAGE EASEMENT
- FD. = FOUND
- G.W. = GUY WIRE
- I.P. = IRON PIPE
- I.R. & C. = IRON ROD & CAP
- L.P. = LIGHT POLE
- M = MEASURED
- N & W = NAIL & WASHER
- O.E. = OVERHEAD ELECTRIC
- P. = FLAT
- PAVT. = PAVEMENT
- P.C. = POINT OF CURVE
- P.C.C. = POINT OF COMPOUND CURVE
- P.P. = POWER POLE
- P.R.C. = POINT OF REVERSE CURVE
- P.T. = POINT OF TANGENT
- P.C.P. = PERMANENT CONTROL POINT
- P.R.M. = PERMANENT REFERENCE MARK
- R = RADIUS
- ROW = RIGHT OF WAY
- U.E. = UTILITY EASEMENT
- H.P. = HIGH POINT
- B.L. = BLOCK
- B.M. = BENCHMARK
- F.F. = FINISHED FLOOR
- SET I.R. & C. = SET IRON ROD & CAP I.R. # 6153
- CONC. = CONCRETE
- NTS = NOT TO SCALE

DATED 7/27/99

GIRALD W. TANSKY

PROFESSIONAL REGISTRATION NO. 4464

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: REMAX REALTY

DRAWN: G.W.T.  
 CHECKED: G.W.T.  
 DATE: 7-27-99  
 SCALE: 1"=30'  
 JOB #: 94-436

TREASURE COAST LAND SURVEYORS  
 PROFESSIONAL LAND SURVEYORS  
 3250 CANDICE AVE. BOX 113  
 JENSEN BEACH, FLORIDA 33457  
 PHONE # 334-2663

| REVISIONS | BY | DATE |
|-----------|----|------|
|           |    |      |
|           |    |      |
|           |    |      |



**EDWIN B. ARNOLD, AIA, CBO**  
Building Official

IA

**TOWN OF SEWALL'S POINT**

D.

Town Hall  
One South Sewall's Point Road  
Sewall's Point, Florida 34996

Phone (561) 287-2455  
Fax (561) 220-4765

**Disclosure Statement**

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even though you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is in violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statutes 489.103(7).

I have read the above and agree to comply with the provisions as stated.

Name Peter L. Pilato Date July 26 2001  
Signed *Peter Pilato*  
Address 4. St Luce Ct.  
City & State Sewall's Point  
Permit No. 5467

This form is for all permits except electrical.  
Revised October 25, 1995





APPLICANT Mosley & Son Construction  
LEGAL DESCRIPTION Lot 18, HILLCREST S/D

-----SITE INFORMATION-----

1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? NO
2. IS THERE A POTABLE PRIVATE WELL WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
3. IS THERE AN IRRIGATION WELL WITHIN 50 FEET OF THE AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
4. IS THERE A PUBLIC WELL THAT SERVES LESS THAN 25 PEOPLE OR LESS THAN 15 HOMES WITHIN 100 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
5. IS THERE A PUBLIC WELL WHICH SERVES MORE THAN 25 PEOPLE OR MORE THAN 15 HOMES WITHIN 200 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
6. IS THERE A GRAVITY SEWER LINE OR LIFT STATION WITHIN 100 FEET OF THE PROPOSED LOT? NO
7. IS THERE A LAKE, STREAM, WETLAND, OR SURFACE WATER WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
8. IS THERE A PROPOSED OR EXISTING PUBLIC DRINKING WATER LINE WITHIN 10 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
9. IS THERE A STORM WATER RETENTION AREA OR DRAINAGE EASEMENT WITHIN 15 FEET OF THE PROPOSED SEPTIC SYSTEM? YES, BUT NO SWALE OR DEPRESSION
10. IS THE SEPTIC SYSTEM IN AN AREA PROPOSED FOR PAVING OR VEHICULAR IN EASEM'T. TRAFFIC? NO
11. ARE ALL PRIVATE WELLS, SEPTIC SYSTEMS AND SURFACE WATER ON ADJACENT OR CONTIGUOUS LAND WITHIN 75 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
12. ARE ALL PUBLIC WELLS WITHIN 200 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? YES
13. DOES THE PLOT PLAN INCLUDE A PLAT OF THE LOT OR TOTAL SITE OWNERSHIP DRAWN TO SCALE, BOUNDARIES WITH DIMENSIONS, LOCATIONS OF BUILDING OR RESIDENCES, SWIMMING POOLS, RECORDED EASEMENTS, THE PROPOSED SEPTIC SYSTEM, ANY PROPOSED OR EXISTING WELLS, PUBLIC WATER LINES, PAVED AREAS OR DRIVEWAYS, AND SURFACE WATERS SUCH AS LAKES, PONDS, STREAMS, CANALS, OR WETLANDS? YES
14. THERE IS 2800 ± SQUARE FEET OF AVAILABLE LAND TO INSTALL THE SEPTIC SYSTEM. THIS AREA EXCLUDES INTERFERENCES. SHADE THIS AVAILABLE AREA ON PLOT PLAN.

-----ELEVATIONS-----

1. CROWN OF ROAD ELEVATION 34.28' NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION      NGVD SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 21.75 NGVD SHOW LOCATION ON PLOT PLAN.
2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? NO IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING?      NGVD.

DIRECTIONS TO SITE: East Ocean Blvd. east to S. Sewall's Point Rd.; South on S. Sewall's Pt. Rd. for 2000'± to Hillcrest Drive; West on Hillcrest Drive to St. Lucie Court; North on St. Lucie Court to cul-de-sac; Lot 18 is N.E. of cul-de-sac.

NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OR ENGINEER.

CERTIFIED BY: Arthur Speedy  
FL: PROFESSIONAL NO. 3343 P.L.S.  
DATE: 7-31-88 JOB NO.



STATE OF FLORIDA  
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER \_\_\_\_\_ HOME PHONE \_\_\_\_\_  
NAME OF APPLICANT Mosley & Son. Construction WORK PHONE 287-6962  
MAILING ADDRESS OF APPLICANT P.O. Box 1736, Stuart FL. 34995 ZIP CODE \_\_\_\_\_  
LOT 18 BLOCK — SUBDIVISION HILLCREST  
IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION  
PLAT BOOK 10 PAGE 39 DATE SUBDIVIDED 8-27-86  
RESIDENTIAL: NUMBER DWELLING UNITS ONE NUMBER BEDROOMS 3  
LOT SIZE 24,366 FT<sup>2</sup> HEATED OR COOLED AREA OF HOME 2770 FT<sup>2</sup>  
COMMERCIAL: TYPE OF BUSINESS PROPOSED \_\_\_\_\_  
BUILDING SIZE \_\_\_\_\_ FT<sup>2</sup>

-----AFFIDAVIT-----

I HAVE REVIEWED THIS PERMIT AND I CERTIFY THAT ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THIS PERMIT AND ANY APPLICABLE STATE OR COUNTY REGULATIONS.

SIGNATURE OF PROPERTY OWNER OR OWNER'S LEGALLY AUTHORIZED REPRESENTATIVE

-----INSTALLATION SPECIFICATIONS-----

SEPTIC TANK CAPACITY \_\_\_\_\_ GALLONS  
DRAINFIELD SIZE \_\_\_\_\_ SQUARE FEET  
DRAINFIELD ROCK MUST BE \_\_\_\_\_ FEET FROM FRONT OR REAR PROPERTY LINES AND \_\_\_\_\_ FEET FROM SIDE PROPERTY LINES. EXCAVATION CAN NOT EXTEND MORE THAN FIVE FEET FROM APPROVED INSTALLATION AREA.

ISSUED BY: \_\_\_\_\_ DATE \_\_\_\_\_  
MARTIN COUNTY PUBLIC HEALTH UNIT

PLEASE NOTE:

- (1) IF BUILDING CONSTRUCTION DOES NOT START WITHIN ONE YEAR FROM DATE OF ISSUANCE, THIS PERMIT EXPIRES. IF BUILDING CONSTRUCTION STARTS WITHIN 1 YEAR FROM DATE OF ISSUANCE, THE DATE OF EXPIRATION WILL BE EXTENDED AN ADDITIONAL 90 DAYS.
- (2) APPLICANT IS RESPONSIBLE FOR REPLACING EXCAVATED SOILS WITH A GOOD GRADE OF SAND.
- (3) \_\_\_\_\_ REINSPECTION FEE IF WELL NOT INSTALLED AT TIME OF ONSITE SEWAGE DISPOSAL SYSTEM INSPECTION.
- (4) INSPECTION RESULTS WILL BE POSTED ON BUILDING PERMIT OR ON ELECTRICAL BOX.
- (5) IF BUILDING STUBOUT IS PLACED MORE THAN 20 FEET FROM SEPTIC TANK OR DRAINFIELD, A HIGHER STUBOUT ELEVATION THAN SHOWN ABOVE WILL BE REQUIRED.
- (6) IF FILL IS REQUIRED, CONTACT MARTIN COUNTY BUILDING DIVISION.
- (7) IF ANY INFORMATION ON THIS PERMIT CHANGES, AN UPDATED APPLICATION IS REQUIRED.
- (8) IF WELL OR MOUND DRAINFIELD IS PROPOSED, SEE ATTACHED SKETCH OF ADDITIONAL SPECIAL REQUIREMENTS.

-----FINAL INSPECTION-----

CONSTRUCTION APPROVED BY: \_\_\_\_\_ DATE \_\_\_\_\_  
MARTIN COUNTY PUBLIC HEALTH UNIT

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE

Permit No.

Date 3/2/89

APPLICATION FOR PERMIT TO BUILD A DOCK, FENCE, POOL, SOLAR HEATING DEVICE, SCREENED ENCLOSURE, GARAGE OR ANY OTHER STRUCTURE NOT A HOUSE OR A COMMERCIAL BUILDING

This application must be accompanied by three (3) sets of complete plans, to scale, including a plot plan showing set-backs; plumbing and electrical layouts, if applicable, and at least two (2) elevations, as applicable.

Owner Dale Taft Present Address 46 Joe McCarty 414 Balboa Ave

Phone 287-6735 Stuart, Fla 34994

Contractor Olympic Pools Address 1565 S.W. Martin Hwy

Phone 286-6070 Palm City, Fla 34990

Where licensed Martin County/Florida License number CPC039888

Electrical contractor License number

Plumbing contractor License number

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Swimming Pool

State the street address at which the proposed structure will be built:

4 St. Lucie Court

Subdivision Hillcrest 18 Lot number Block number

Contract price \$ 15000 Cost of permit \$ 100XX

Plans approved as submitted Plans approved as marked

I understand that this permit is good for 12 months from the date of its issue and that the structure must be completed in accordance with the approved plan. I further understand that approval of these plans in no way relieves me of complying with the Town of Sewall's Point Ordinances and the South Florida Building Code. Moreover, I understand that I am responsible for maintaining the construction site in a neat and orderly fashion, policing the area for trash, scrap building materials and other debris, such debris being gathered in one area and at least once a week, or oftener when necessary, removing same from the area and from the Town of Sewall's Point. Failure to comply may result in a Building Inspector or Town Commissioner "red-tagging" the construction project.

Contractor [Signature]

I understand that this structure must be in accordance with the approved plans and that it must comply with all code requirements of the Town of Sewall's Point before final approval by a Building Inspector will be given.

Owner X Dale R. Taft

TOWN RECORD Approved: Dale Brown 3/9/89 Building Inspector Date

Date submitted Approved: Building Inspector Date Commissioner Date Final Approval given: Date

Certificate of Occupancy issued (if applicable) Date

SP1282 Permit No.

Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.



PAMELA M. BUSHA  
Mayor

PAUL LUGER  
Vice Mayor

VINCENT N. BARILE  
Commissioner

THOMAS BAUSCH  
Commissioner

JACQUI THURLOW-LIPPISCH  
Commissioner

# TOWN OF SEWALL'S POINT



PAMELA MAC'KIE WALKER  
Town Manager

ANN-MARIE S. BASLER  
Town Clerk

TINA CIECHANOWSKI  
Chief of Police

JOHN ADAMS  
Building & Facilities Director

JOSE TORRES  
Maintenance

September 4, 2014

Peter and Phyllis Lopilato  
C/O Walter G. Woods, Attorney  
1935 NE Ricou Terrace  
Jensen Beach, FL 34957

**Reference: Application for an Administrative Variance for Peter and Phyllis Lopilato, 4 St. Lucie Ct., Sewall's Point, FL 34996 for the property located at the same address.**

Dear Mr. and Mrs. Lopilato,

Enclosed is a copy of the recorded Final Order granting the administrative variance, more specifically:

1. A setback of 12.49 feet, measured at the air conditioning pad on the north side of the residence in lieu of the required 15 feet.

With best regards,

John R. Adams, C.B.O  
Building Official



One South Sewall's Point Road, Sewall's Point, Florida 34996  
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: [pwalker@sewallspoint.org](mailto:pwalker@sewallspoint.org)  
Police Department (772) 781-3378 • Fax (772) 286-7669 • E-Mail: [sppd@sewallspoint.org](mailto:sppd@sewallspoint.org)

IN RE: VARIANCE OF  
PETER AND PHYLLIS LOPILATO

IN THE JURISDICTION OF THE TOWN  
COMMISSION OF THE TOWN OF  
SEWALL'S POINT, FLORIDA

**FINAL ORDER**

Peter and Phyllis Lopilato are the owners of real property ("Owner") located at 4 St. Lucie Court, Sewall's Point, Florida ("subject property").

**FINDINGS OF FACT**

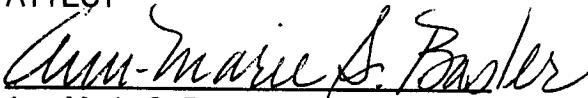
1. The required side yard building setback for the subject property is fifteen (15') feet, however the A/C pad on the north side of the residence, encroaches 2.51 feet into the required 15 foot setback.
2. The Owner's Agent, Walter G. Woods, Atty. has applied for administrative variances (the "Application") pursuant to the Town of Sewall's Point ("Town") Code of Ordinances Section 82-143.
3. The records of the Town's Building Department indicate that the original house was built and received a Certificate of Occupancy in 1989. The original submitted plot plan indicated the location of the current A/C pad. It is the opinion of the Town Building Official that the construction was inspected and approved by the Town at the time it was completed. It is also the opinion of the Town Building Official that the air conditioning equipment pad was located its current location, on the north side of the residence at the time of construction and approved in that location.
4. The Town Building Official received and reviewed the Application, and considered to allow:
  - a. **Northerly A/C Pad:** An encroachment of 2.51 feet into the required 15-foot setback on the subject property.
5. The Applicant provided proof of the identity and address of the persons entitled to receive the Application notice. The Applicant also provided "Letters of no Objection" from the adjacent property owners to the property involved in the Variances.
6. The Building Official determined:
  - a. That the Applicant met all the requirements for the variance requested as set forth in Town Code Section 82-143(3).
  - b. The encroachment is less than three feet into the side yard setback requirement that was in effect at the time the encroachment was created.

INSTR # 2472023 OR BK 2736 PG 604 RECD 08/20/2014 04:17:23 PM  
(2 Pgs)  
CAROLYN TIMMANN MARTIN COUNTY CLERK  
DEED DOC \$0.00, MTG DOC \$0.00, INTANGIBLE \$0.00

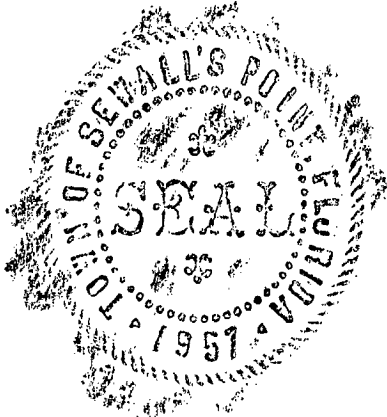
c. "Letters of no Objection" to the Administrative Variance request have been filed by the Owners for four (4) adjacent property owners.

7. The Town Building Official has jurisdiction over Administrative Variance Applications.
8. Based upon the Application of the variance criteria to the subject property, the Town Building Official finds that the Applicant has satisfied all of the variance criteria for the variance requested.
9. The Variance as set forth herein is hereby conditionally **GRANTED** by the Town Building Official of the Town of Sewall's Point, Florida.
10. This Variance is expressly conditioned upon the Applicant reimbursing the Town for all expenses of the Town incurred in connection with the Variance Application, pursuant to Section 82-143(1), Town of Sewall's Point Code of Ordinances. **DONE AND ORDERED** in Sewall's Point this 20<sup>th</sup> day of AUGUST, 2014.

ATTEST

  
Ann Marie S. Basler, Town Clerk

  
John R. Adams, Town Building Official



**FINAL ORDER**

Peter and Phyllis Lopilato are the owners of real property ("Owner") located at 4 St. Lucie Court, Sewall's Point, Florida ("subject property").

**FINDINGS OF FACT**

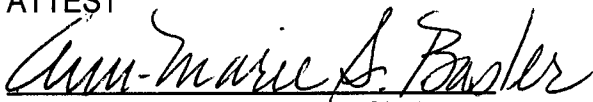
1. The required side yard building setback for the subject property is fifteen (15') feet, however the A/C pad on the north side of the residence, encroaches 2.51 feet into the required 15 foot setback.
2. The Owner's Agent, Walter G. Woods, Atty. has applied for administrative variances (the "Application") pursuant to the Town of Sewall's Point ("Town") Code of Ordinances Section 82-143.
3. The records of the Town's Building Department indicate that the original house was built and received a Certificate of Occupancy in 1989. The original submitted plot plan indicated the location of the current A/C pad. It is the opinion of the Town Building Official that the construction was inspected and approved by the Town at the time it was completed. It is also the opinion of the Town Building Official that the air conditioning equipment pad was located its current location, on the north side of the residence at the time of construction and approved in that location.
4. The Town Building Official received and reviewed the Application, and considered to allow:
  - a. **Northerly A/C Pad:** An encroachment of 2.51 feet into the required 15-foot setback on the subject property.
5. The Applicant provided proof of the identity and address of the persons entitled to receive the Application notice. The Applicant also provided "Letters of no Objection" from the adjacent property owners to the property involved in the Variances.
6. The Building Official determined:
  - a. That the Applicant met all the requirements for the variance requested as set forth in Town Code Section 82-143(3).
  - b. The encroachment is less than three feet into the side yard setback requirement that was in effect at the time the encroachment was created.

INSTR # 2472023 OR BK 2736 PG 604 RECD 08/20/2014 04:17:23 PM  
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DEED DOC \$0.00, MTG DOC \$0.00, INTANGIBLE \$0.00

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8. Based upon the Application of the variance criteria to the subject property, the Town Building Official finds that the Applicant has satisfied all of the variance criteria for the variance requested.
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ATTEST

  
Ann Marie S. Basler, Town Clerk

  
John R. Adams, Town Building Official



PAMELA M. BUSH  
Mayor

PAUL LUGER  
Vice Mayor

VINCENT N. BARILE  
Commissioner

THOMAS BAUSCH  
Commissioner

JACQUI THURLOW-LIPPISCH  
Commissioner

# TOWN OF SEWALL'S POINT



PAMELA MAC'KIE WALKER  
Town Manager

ANN-MARIE S. BASLER  
Town Clerk

TINA CIECHANOWSKI  
Chief of Police

JOHN ADAMS  
Building & Facilities Director

JOSE TORRES  
Maintenance

## ADMINISTRATIVE VARIANCE NOTICE OF STATUS

August 20, 2014  
Peter and Phyllis Lopilato  
C/o Walter G. Woods, Attorney  
1935 NE Ricou Terrace  
Jensen Beach, FL 34957

**REFERENCE: Application for an Administrative Variance for Peter and Phyllis Lopilato, 4 St. Lucie Ct., Sewall's Point, FL 34996 for the property located at the same address.**

Dear Mr. and Mrs. Lopilato,

Your application for an administrative variance, more specifically:

1. A setback of 12.49 feet, measured at the air conditioning pad on the north side of the residence in lieu of the required 15 ft.

Has been approved by the Building official.

**Sec. 82-143 Upon approval of the administrative variance, the town clerk shall record the Building Official's approval in the Martin County, Florida public records. The applicant shall be responsible for the recording costs incurred by the Town, and shall pay the Town such costs prior to the recordation of any documents.**

ANY ADDITIONAL RECORDING COSTS ARE TO BE PAID UPON RECEIPT OF APPROVAL

ADDITIONAL RECORDING COSTS: NONE

With best regards,

John R. Adams, C.B.O.  
Building Official



One South Sewall's Point Road, Sewall's Point, Florida 34996  
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: [pwalker@sewallspoint.org](mailto:pwalker@sewallspoint.org)  
Police Department (772) 781-3378 • Fax (772) 286-7669 • E-Mail: [sppd@sewallspoint.org](mailto:sppd@sewallspoint.org)

PAMELA M. BUSH  
Mayor

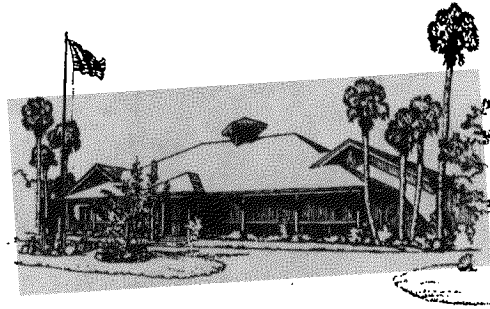
PAUL LUGER  
Vice Mayor

VINCENT N. BARILE  
Commissioner

THOMAS BAUSCH  
Commissioner

JACQUI THURLOW-LIPPISCH  
Commissioner

# TOWN OF SEWALL'S POINT



PAMELA MAC'KIE WALKER  
Town Manager

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Town Clerk

TINA CIECHANOWSKI  
Chief of Police

JOHN ADAMS  
Building & Facilities Director

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Maintenance

## ADMINISTRATIVE VARIANCE NOTICE OF STATUS

August 20, 2014  
Peter and Phyllis Lopilato  
C/o Walter G. Woods, Attorney  
1935 NE Ricou Terrace  
Jensen Beach, FL 34957

**REFERENCE: Application for an Administrative Variance for Peter and Phyllis Lopilato, 4 St. Lucie Ct., Sewall's Point, FL 34996 for the property located at the same address.**

Dear Mr. and Mrs. Lopilato,

Your application for an administrative variance, more specifically:

1. A setback of 12.49 feet, measured at the air conditioning pad on the east side of the residence in lieu of the required 15 ft.

Has been approved by the Building official.

**Sec. 82-143 Upon approval of the administrative variance, the town clerk shall record the Building Official's approval in the Martin County, Florida public records. The applicant shall be responsible for the recording costs incurred by the Town, and shall pay the Town such costs prior to the recordation of any documents.**

ANY ADDITIONAL RECORDING COSTS ARE TO BE PAID UPON RECEIPT OF APPROVAL

ADDITIONAL RECORDING COSTS: NONE

With best regards,

John R. Adams, C.B.O.  
Building Official



One South Sewall's Point Road, Sewall's Point, Florida 34996  
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: [pwalker@sewallspoint.org](mailto:pwalker@sewallspoint.org)  
Police Department (772) 781-3378 • Fax (772) 286-7669 • E-Mail: [sppd@sewallspoint.org](mailto:sppd@sewallspoint.org)

**TILTON & WOODS, P.A.**

ATTORNEYS AT LAW

1935 N.E. RICOU TERRACE • JENSEN BEACH, FLORIDA 34957

C. NORRIS TILTON

WALTER G. WOODS  
E-MAIL: walter@tiltonandwoods.com

TELEPHONE (772) 334-3305  
FAX (772) 334-2058

August 18, 2014

Mr. John Adams, Building Official  
Town of Sewall's Point Building Department  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996

Re: 4 St. Lucie Court, Sewall's Point


Dear Mr. Adams:

Please find enclosed an Administrative Variance Application, Checklist, Ownership and Adjacent Subdivision Owners Certificate, four (4) consents from four (4) of the neighbors, original survey certified to the Town of Sewall's Point, and a check in the amount of \$400.00.

Please let me know if you need any other information.

Thank you for your consideration of the application.

Sincerely,

  
Walter G. Woods

WGW/kc/Encl.  
99-14W





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-220-4765

**ADMINISTRATIVE VARIANCE APPLICATION AND CHECKLIST**

DESCRIBE IN DETAIL THE ENCROACHMENT(S) LENGTH AND LOCATION. IF MORE THAN ONE, PLEASE LIST EACH SEPARATELY. An Administrative Variance is requested for the following encroachment of A/C pad into the side setback distance for Lot 18, Plat of Hillcrest, Plat Book 10, Page 39, Martin County, Florida, Public Records, located at 4 St. Lucie Court, Sewall's Point, Florida:

1. The A/C pad on the north side of the residence on Lot 18, Hillcrest, is 12.49 feet from the northerly lot line instead of 15 feet.

UPON APPROVAL OF THE ADMINISTRATIVE VARIANCE, THE TOWN CLERK SHALL RECORD THE BUILDING OFFICIAL'S APPROVAL IN THE MARTIN COUNTY, FLORIDA PUBLIC RECORDS. THE APPLICANT SHALL BE RESPONSIBLE FOR THE RECORDING COSTS INCURRED BY THE TOWN, AND SHALL PAY THE TOWN SUCH COSTS PRIOR TO THE RECORDATION OF ANY DOCUMENTS.

THE APPLICANT UNDER SECTION 82-101 OF THE CODE MAY TAKE AN ADMINISTRATIVE APPEAL FROM A DECISION OF THE BUILDING OFFICIAL UNDER THIS SECTION. THE ADMINISTRATIVE APPEAL MAY PROCEED CONCURRENTLY WITH AN APPLICATION FOR A VARIANCE BEFORE THE BOARD OF ZONING ADJUSTMENT, AT THE ELECTION OF THE APPLICANT

OWNER/APPLICANT(S) SIGNATURE *Peter Lopez* *Phyllis Lopilato*

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_

STATE OF FLORIDA COUNTY OF MARTIN

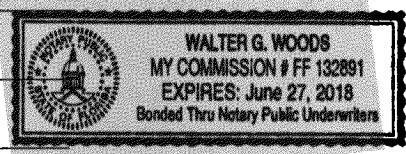
2014 BY PETER and PHYLLIS LOPILATO

PERSONALLY KNOWN X

OR PRODUCED ID \_\_\_\_\_

TYPE OF ID *Walter G. Woods*

NOTARY





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-220-4765

**ADMINISTRATIVE VARIANCE APPLICATION AND CHECKLIST**

OWNER/APPLICANT(S) Peter and Phyllis Lopilato DATE 7/29/2014

OWNER ADDRESS c/o Walter G. Woods, Attorney, 1935 NE Ricou Ter., Jensen Beach, FL 34957

PROPERTY ADDRESS (IF DIFFERENT THAN OWNERS ADDRESS) \_\_\_\_\_

4 St. Lucie Court, Stuart, FL 34996

PHONE NUMBER 772-919-2279 FAX/E-MAIL walter@tiltonandwoods.com

**APPLICANT MUST COMPLY WITH THE FOLLOWING REQUIREMENTS AND CONDITIONS TO QUALIFY FOR AN ADMINISTRATIVE VARIANCE AS DEFINED AND SET FORTH IN THE TOWN OF SEWALL'S POINT CODE OF ORDINANCES SECTION 82-141. ADMINISTRATIVE VARIANCES ARE LIMITED TO ENCROACHMENTS OF ONE (1) FOOT OR LESS.**

APPLICANT TO INITIAL THE FOLLOWING CHECKLIST ITEMS:

*PL* *pl* \$400.00 MINIMUM FILING FEE (ADDITIONAL MONIES MAY BE REQUIRED TO BE PLACED IN ESCROW TO COVER ANY PROFESSIONAL FEES INCURRED BY THE TOWN IN PROCESSING THIS APPLICATION).

*PL* *pl* APPLICANT'S CERTIFICATION OF OWNERSHIP OF PROPERTY IN QUESTION AND VERIFIED LIST OF ALL ADJACENT PROPERTY OWNERS.

*PL* *pl* COPY OF ORIGINAL BUILDING PERMIT/APPLICATION, ALL ASSOCIATED PERMIT DRAWINGS AND SUBMITTED DOCUMENTS (REQUIRED FOR ALL APPLICANTS).

*PL* *pl* CURRENT (90 DAYS OR LESS) AS-BUILT SURVEY OF THE COMPLETE GROUNDS WITH ALL IMPROVEMENTS, INDICATING THE AREA(S) OF ENCROACHMENT. SURVEY MUST INCLUDE A CERTIFICATION TO THE TOWN OF SEWALL'S POINT.

*PL* *pl* LETTERS OF NO OBJECTION FROM ALL ADJACENT PROPERTY OWNERS OR PROOF THAT A COPY OF THIS APPLICATION WAS SENT TO ALL ADJACENT PROPERTY OWNERS BY CERTIFIED MAIL INCLUDING A NOTICE INFORMING THEM OF THEIR RIGHT TO FILE AN OBJECTION WITH THE TOWN CLERK WITHIN 15 DAYS OF THE DATE THE NOTICE WAS MAILED, AND THAT 15 DAYS HAS PASSED.

# TILTON & WOODS, P.A.

ATTORNEYS AT LAW

1935 N.E. RICOU TERRACE • JENSEN BEACH, FLORIDA 34957

C. NORRIS TILTON

WALTER G. WOODS  
E-MAIL: walter@tiltonandwoods.com

TELEPHONE (772) 334-3305  
FAX (772) 334-2058

August 11, 2014

Mr. John Adams, Building Official  
Town of Sewall's Point Building Department  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996

Dear Mr. Adams:

The following is submitted in reference to the application for an administrative variance for the side setback distance for the residence at 4 St. Lucie Court, Sewall's Point:

The undersigned has examined the Official Records of the Martin County, Florida, Clerk of Court and the records of the Martin County Tax Collector and hereby certifies as follows:

### Certificate of Ownership

The undersigned certifies that the owners of record of Lot 18, Plat of Hillcrest, recorded in Plat Book 10, Page 39, Public Records of Martin County, Florida, are: "Peter Lopilato and Phyllis Lopilato. The owners are selling the subject property to Laurence M. McHeffey and Lynn A. McHeffey.

### Verification of Adjacent Property Owners in Subdivision

The undersigned hereby certifies and verifies that the following are the owners of the lots adjacent to Lot 18, Hillcrest located at 4 St. Lucie Court:

- |   |                       |                   |
|---|-----------------------|-------------------|
| 1. Mark Klingensmith/<br>Wendy Werb           | Lot 19, Hillcrest     | 2 St. Lucie Court |
| 2. Richard Allen/<br>Beverly Allen            | Lot 17, Hillcrest     | 6 St. Lucie Court |
| 3. Dr. Jeffrey Lazarus/<br>Jacqueline Lazarus | Part of Lot 4, Arbela | 31 S. River Road  |
| 4. Dr. Anis Akrawi/<br>Carol Gesser           | Lot 21, Hillcrest     | 36 S. River Road  |

Thank you for your consideration.

Sincerely,



Walter G. Woods



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-220-4765

**ADMINISTRATIVE VARIANCE LETTER OF NO OBJECTION**

Building Official  
 The Town of Sewall's Point  
 One South Sewall's Point Road  
 Sewall's Point, FL 34996

**REFERENCE:** Application for an Administrative Variance Pursuant to Section 82-141 Town of Sewall's Point Code of Ordinances.

Filed by: (Property Owner's name) Peter and Phyllis Lopilato

Located at: (Property address) 4 St. Lucie Court, Stuart, FL 34996

Dear Building Official:

I have received the above referenced Administrative Variance application filed with the Town of Sewall's Point. I am an adjacent property owner to the property that is the subject of the Administrative Variance. I have no objection to the Town Building Official granting the Administrative Variance.

Sincerely yours,

Mark Klingensmith/Wendy Werb  
 Printed Name of Adjacent Property Owner

W. Werb  
 Signature of Adjacent Property Owner

2 St. Lucie Court  
 Address of Adjacent Property Owner

SWORN TO AND SUBSCRIBED BEFORE ME THIS 8<sup>th</sup> DAY OF August

STATE OF Florida COUNTY OF Martin

20 14 BY Mark Klingensmith and Wendy Werb

PERSONALLY KNOWN \_\_\_\_\_

OR PRODUCED ID FLDL

TYPE OF ID W610-888-603-725-0

K. Quimby  
 NOTARY



**Krystal Quimby**  
 Notary Public - State of Florida  
 My Comm. Expires Jan 18, 2016  
 Commission # EE 161100



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-220-4765

**ADMINISTRATIVE VARIANCE LETTER OF NO OBJECTION**

Building Official  
 The Town of Sewall's Point  
 One South Sewall's Point Road  
 Sewall's Point, Fl 34996

**REFERENCE:** Application for an Administrative Variance Pursuant to Section 82-141 Town of Sewall's Point Code of Ordinances.

Filed by: (Property Owner's name) Peter and Phyllis Lopilato

Located at: (Property address) 4 St. Lucie Court, Stuart, FL 34996

Dear Building Official:

I have received the above referenced Administrative Variance application filed with the Town of Sewall's Point. I am an adjacent property owner to the property that is the subject of the Administrative Variance. I have no objection to the Town Building Official granting the Administrative Variance.

Sincerely yours,

Richard Allen/Beverly Allen  
 Printed Name of Adjacent Property Owner

*Richard E. Allen*  
 Signature of Adjacent Property Owner

6 St. Lucie Court  
 Address of Adjacent Property Owner

SWORN TO AND SUBSCRIBED BEFORE ME THIS 7th DAY OF August, 2014

STATE OF FLORIDA COUNTY OF MARTIN

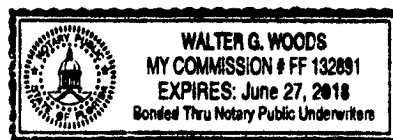
20 14 BY Richard Allen and Beverly Allen

PERSONALLY KNOWN X

OR PRODUCED ID \_\_\_\_\_

TYPE OF ID \_\_\_\_\_

Walter G. Woods  
 NOTARY





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-220-4765

**ADMINISTRATIVE VARIANCE LETTER OF NO OBJECTION**

Building Official  
 The Town of Sewall's Point  
 One South Sewall's Point Road  
 Sewall's Point, Fl 34996

**REFERENCE:** Application for an Administrative Variance Pursuant to Section 82-141 Town of Sewall's Point Code of Ordinances.

Filed by: (Property Owner's name) Peter and Phyllis Lopilato

Located at: (Property address) 4 St. Lucie Court, Stuart, FL 34996

Dear Building Official:

I have received the above referenced Administrative Variance application filed with the Town of Sewall's Point. I am an adjacent property owner to the property that is the subject of the Administrative Variance. I have no objection to the Town Building Official granting the Administrative Variance.

Sincerely yours,

Dr. Anis Akrawi/Carol Gesser  
 Printed Name of Adjacent Property Owner

*ACG*  
 Signature of Adjacent Property Owner

36 S. River Road  
 Address of Adjacent Property Owner

SWORN TO AND SUBSCRIBED BEFORE ME THIS 5 DAY OF Aug, 2014

STATE OF FL COUNTY OF Martin

20 14 BY Anis Akrawi and Carol Gesser

PERSONALLY KNOWN \_\_\_\_\_

OR PRODUCED ID FCDC

TYPE OF ID FCDC

*Teresa L Bennigan*  
 NOTARY





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-220-4765

ADMINISTRATIVE VARIANCE LETTER OF NO OBJECTION

Building Official  
 The Town of Sewall's Point  
 One South Sewall's Point Road  
 Sewall's Point, Fl 34996

**REFERENCE:** Application for an Administrative Variance Pursuant to Section 82-141 Town of Sewall's Point Code of Ordinances.

Filed by: (Property Owner's name) Peter and Phyllis Lopilato

Located at: (Property address) 4 St. Lucie Court, Stuart, FL 34996

Dear Building Official:

I have received the above referenced Administrative Variance application filed with the Town of Sewall's Point. I am an adjacent property owner to the property that is the subject of the Administrative Variance. I have no objection to the Town Building Official granting the Administrative Variance.

Sincerely yours,

Dr. Jeffrey Lazarus/Jacqueline Lazarus  
 Printed Name of Adjacent Property Owner

*Jacqueline Lazarus*  
 Signature of Adjacent Property Owner

31 S. River Road  
 Address of Adjacent Property Owner

SWORN TO AND SUBSCRIBED BEFORE ME THIS 14<sup>th</sup> DAY OF August

STATE OF Florida COUNTY OF St. Lucie

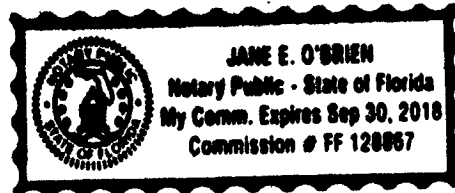
2014 BY Jeffrey Lazarus and Jacqueline Lazarus

PERSONALLY KNOWN

OR PRODUCED ID \_\_\_\_\_

TYPE OF ID \_\_\_\_\_

Jane O'Brien  
 NOTARY



THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Fair View South  
CONTRACTOR Masley & Son  
LOT 18 BLOCK \_\_\_\_\_ SUB Hillcrest  
NO. 451010 Court St. or Ave.

NO. 2380 Date Issued 8/15/89

Call 287-2455 From 8:00 A.M. - 12:00 Noon and  
1:00 P.M. - 4:00 P.M. For Inspections of Items 1 thru 13.

# TOWN OF SEWALL'S POINT BUILDING PERMIT

- \* REQUESTS FOR INSPECTIONS REQUIRE AT LEAST 24 HOURS NOTICE.
- \* ALL WORK MUST BE IN COMPLIANCE WITH THE TOWN OF SEWALL'S POINT ORDINANCES, THE SOUTH FLORIDA BUILDING CODE, THE STATE OF FLORIDA ENERGY EFFICIENCY BUILDING CODE AND ELEVATIONS BASED ON THE LATEST FLOOD INSURANCE RATE MAP.
- \* WORKING HOURS ARE FROM 8:00 to 5:00 P.M. MONDAY THROUGH FRIDAY. PORTABLE TOILET FACILITIES MUST BE ON JOB SITE BEFORE INSPECTION.

| REQUIRED INSPECTIONS    | INSPECTOR'S FINDING                     | INSPECTOR'S SIGNATURE     |
|-------------------------|---|---------------------------|
| 1. LOT STAKES/SET BACKS |   |                           |
| 2. TERMITE PROTECTION   | DATE <u>12/2/88</u> <u>SOIL TREATED</u> | <u>BY BM</u>              |
| 3. FOOTING - SLAB       | <u>FRONT'S PEST CONTROL</u>             | <u>12/6/88</u> <u>DB</u>  |
| 4. ROUGH PLUMBING       | <u>OK</u>                               | <u>12/1/88</u> <u>ede</u> |
| 5. ROUGH ELECTRIC       | <u>OK 2/6/89</u>                        | <u>DB</u>                 |
| 6. LINTEL               |   |                           |
| 7. ROOF                 | <u>OK 2/6/89</u>                        | <u>DB</u>                 |
| 8. FRAMING              | <u>OK 2/6/89</u>                        | <u>DB</u>                 |
| 9. INSULATION           | <u>OK 2/8/89</u>                        | <u>DB</u>                 |
| 10. A/C DUCTS           | <u>OK 2/6/89</u>                        | <u>DB</u>                 |
| 11. FINAL ELECTRIC      |   |                           |
| 12. FINAL PLUMBING      |   |                           |
| 13. FINAL CONSTRUCTION  |   |                           |

TO CONSTRUCT

New Residence

REMARKS:

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