

**4 Via Lucindia Dr South**



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



TREE CITY USA

Since 1990,  
 Sewall's Point  
 has proudly been  
 designated a  
 "Tree City USA"

**TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT**

WORK PERMITTED FROM 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner FRANK SWEENEY-GOLNIK Address 4 Via Lucindia S. Phone 772-781-6316

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

No. of Trees REMOVE 1 Species: RUBBER PLANT Caliper @ 4' above soil \_\_\_\_\_ (inches) Height 25 (ft.)

No. of Trees RELOCATE \_\_\_\_\_ Species: \_\_\_\_\_ Caliper @ 4' above soil \_\_\_\_\_ (inches) Height \_\_\_\_\_ (ft.)

No. of Trees REPLACE \_\_\_\_\_ Species: \_\_\_\_\_ Caliper @ 4' above soil \_\_\_\_\_ (inches) Height \_\_\_\_\_ (ft.)

REPLACED OR RELOCATED TREES MUST BE INSPECTED WITHIN 30 DAYS OF PERMIT ISSUANCE

**ALL PROHIBITED SPECIES AND VEGETATIVE WASTE MUST BE REMOVED FROM PROPERTY**

Reason for tree removal (relocation) Too close to both houses (4 & 8 Lucindia S).

BRANCHES HITTING BOTH ROOFS & ROOT SYSTEM IS A THREAT TO SEPTIC SYSTEMS

Signature of Property Owner \_\_\_\_\_ X Date 5/25/15

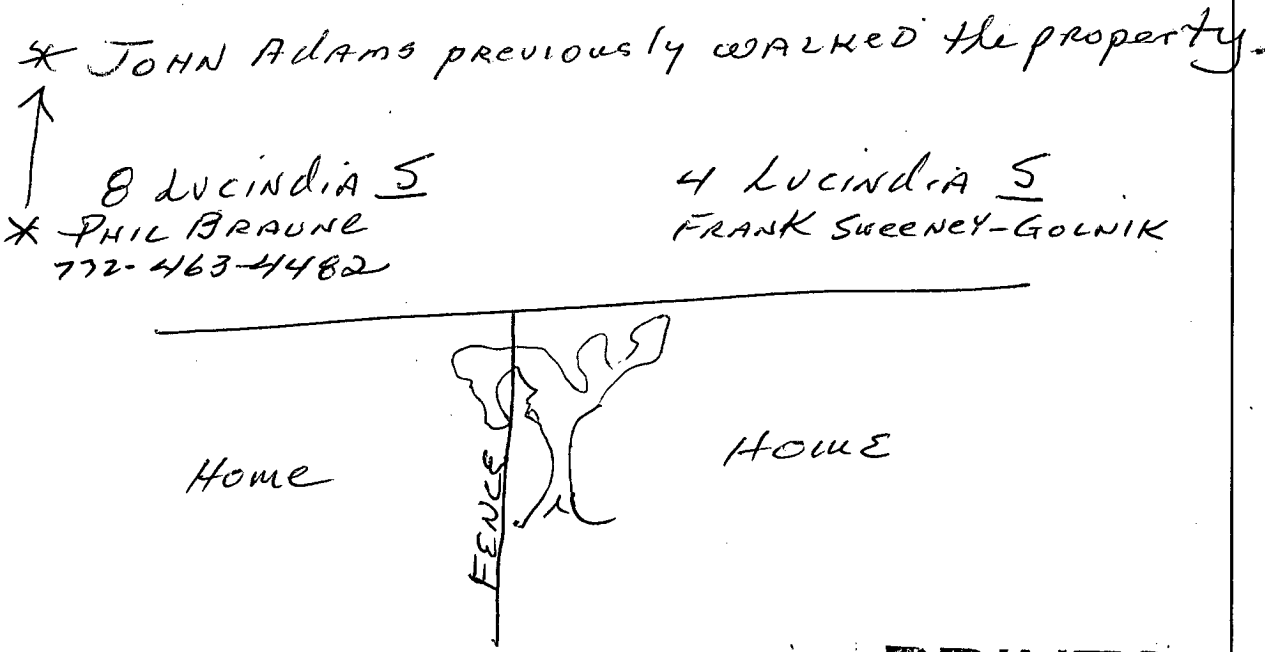
This space for Official Use only:

Approved by Building Official: \_\_\_\_\_ Date 5.26.15 Fee: N/C

BUILDING INSPECTOR NOTES: CONSIDERED A BUSH, NOT A TREE

- Minimum Tree Requirements Met On Property  Prohibited Species Identified for Removal

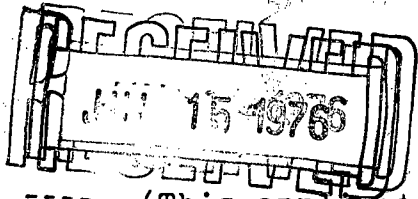
SKETCH (Show location of tree(s) to be removed/relocated; dimensions of lot; location of structures):



PRINTS

picked up 6/9/15

APPLICATION FOR BUILDING PERMIT



Permit No. 615

Date 7/20/76

----- (This application must be accompanied by 3 sets of complete plans, to proper scale, including plot plan, foundation plan, floor plans, wall and roof cross sections, plumbing and electrical layouts, and at least, two elevations as applicable)

Owner EDWARD QUIVEY Present Address 105 MAYWOOD AVE ROCHESTER N.Y. 716 Ph 386-0771

General Contractor TOROW CONST INC. Address Box 1356 Jensen Ph 283-8124

Where licensed STATE OF FLORIDA License No. CRC 004642

Plumbing Contractor Palm City Plumb. License No. 7

Electrical Contractor BENEDETTI ELECT. License No. 63

Street building will front on VIA LUCINDIA 4 S. VIA LUCINDIA

Subdivision LUCINDIA Lot No. 29 Area 18,700 sq ft.

Building area, inside walls (excluding garage, carport, porches) Sq ft. 1610 sq ft.

Other Construction (Pools, additions, etc.) \_\_\_\_\_

Contract Price (excluding land, rugs, appliances, landscaping) \$ 35,450.00

Total cost of permit \$ 200.00

Plans approved as submitted  Plans approved as marked

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period

Frank P. Row  
Signed by General Contractor

I understand that this building must be in accordance with the approved plan and comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I, also, agree that within 90 days after the building has been approved for occupancy, that the property will, also, be landscaped as to be compatible with the neighborhood.

Edward Quivey by Frank P. Row  
Signed by Owner

Note: Speculation Builders will be required to sign both statements.

TOWN RECORD

Date submitted \_\_\_\_\_

Date approved \_\_\_\_\_

Certificate of Occupancy issued 10/29/76

Date 7/20/76 Frank P. Row  
7/20/76 Charles A. Dargatzis  
Date #615

Edward L. Quivey  
Log 29, Lucindia  
(4 S. Via Lucindia)

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date Oct. 29/76

This is to request that a Certificate of Approval for Occupancy be issued to Torow Construction Inc.

For property built under Permit No. 615 Dated July 20, 1976 when completed in conformance with the Approved Plans.

\_\_\_\_\_  
Signed

\*\*\*\*\*

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings	8/7/76	Charles Duryea
Rough plumbing	8/3/76	"
Perimeter beam	8/20/76	"
Rough electric	9/29/76	"
Close in	9/29/76	"
Final plumbing	10/20/76	John Fix
Final electric	10/20/76	"

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Charles Duryea 10/29/76  
date

Approved by Town Commission John Rossiter 10/29/76  
date

Utilities notified October 29, 1976 date

(Commissioner Rossiter)

Original Copy sent to Torow Construction

(Keep carbon copy for Town files)

# TOWN of SEWALL'S POINT

One South Sewall's Point Road, Sewall's Point, Stuart, Florida 33494

## COMMISSIONERS

JOHN C. GUENTHER, Mayor  
GILBERT C. STRUBELL, Vice Mayor  
MIMI TOWL, Commissioner  
CLIFFORD B. DRAKE, Commissioner  
ROBERT R. AUNE, Commissioner

## BUILDING DEPARTMENT

TELEPHONE (305) 287-2455

JOAN H. BARROW  
Town Clerk  
F.J. MATUSZEWSKI  
Chief of Police

1. The Town has adopted the South Florida Building Code as a part of its building ordinances.
2. Building permits are issued for one year's duration. Construction must be started within 90 days or permit will be subject to revocation, with forfeiture of fee.
3. ALL changes in plans must be approved by the Building Department.
4. Work hours are 8: AM to 5: PM Monday thru Saturday. NO SUNDAY WORK.
- ? 5. Portable toilets must be on all construction sites.
6. Roof sheeting plywood must be 5/8" not 1/2" as in County.
7. Inspections are made Monday thru Friday, 8: AM to Noon. 24 hours notice is required prior to all inspections.
8. Rough grading and property clean-up must be completed before Certificate of Occupancy is issued.
- ? 9. Trash, debris and scrap building materials must be policed daily. All debris must be contained in a dumpster.
- Z 10. Building permit fee = \$5, per thousand of cost of building, plus \$10. for plumbing, \$10. for electric, \$10. for air conditioner and \$10. for roofing. For example, a \$50,000. building x \$5. = \$250. plus \$40. (pl. el., a.c. and roof) = \$290. total cost of permit.
- Z 11. The building department will request proof of contract costs.
12. Business or advertising signs on the job site will be permitted only with prior approval of the Town Commission.
13. If more than three trees are to be removed, replaced or relocated, a permit is required.
14. Submit separate square foot areas for inside walls, garages, carport, porches, etc..
15. Inside walls are calculated at ~~\$40.~~ per square foot minimum for building permit fee cost. All other areas are calculated at ~~\$25.~~ per square foot minimum.
- Z 16. Contractors must submit a manufacturer's window schedule with symbols and sizes.
17. Inspection for setbacks will be made by the building inspector if the builder supplies lines from the property stakes OR a survey showing the location of the building on the lot (by a licensed surveyor) will be required.

Scope:

Lay slab and blocks, pour beam and apply stucco for addition to 4 Via Lucindia S., Stuart, Fl. 33494 for owner E. Quivey, Tel. 286-2143

Size:

Slab 10' x 12'8"; wall 8' high including 1' beam. One wall opening for 2' x 2' window.

Work to be done by contractor:

Slab.

1. Rough chip to 1" depth all existing slab and beam adjoining surfaces.
2. To secure new beam and slab to existing structure, drill for insertion of rebars  
4 holes 6" deep into existing beam ( 2 for each new wall),  
2 holes 6" deep into existing footings (1 under each wall),  
3 holes 6" deep into the 4" section of the existing slab.  
(Holes are to be slanted at about 45°.)
3. Set forms and level the ground. (Owner to have ground stripped and at a general level within 1" requiring no digging by contractor except for footing.) (Footing along end abutting existing structure to be about 8" deep and 1' wide).
4. Set up reinforcement wire and bars per code. (See attached).
5. Wire mesh to be pulled into concrete.
6. Apply bonding agent to cold joint, and pour.
7. Cut 40" opening (with saw) in existing wall from slab to beam.

Blocks:

1. Deliver mortar sand and lay blocks. (Block work to start no sooner than two weeks after slab is laid.)

Beam:

1. Set up forms and rebars, apply bonding agent to cold joints and pour, filling the 8 dowel cavities. (Lintel to be 3" below beam.)
2. Form and pour window sill.

Stucco:

to beam

1. Apply bonding agent/, apply base coat and finish coat. (Finish coat appearance is to match that on existing structure.)  
Add brick effects on two corners to match existing structure.

Material:

To be furnished by contractor:

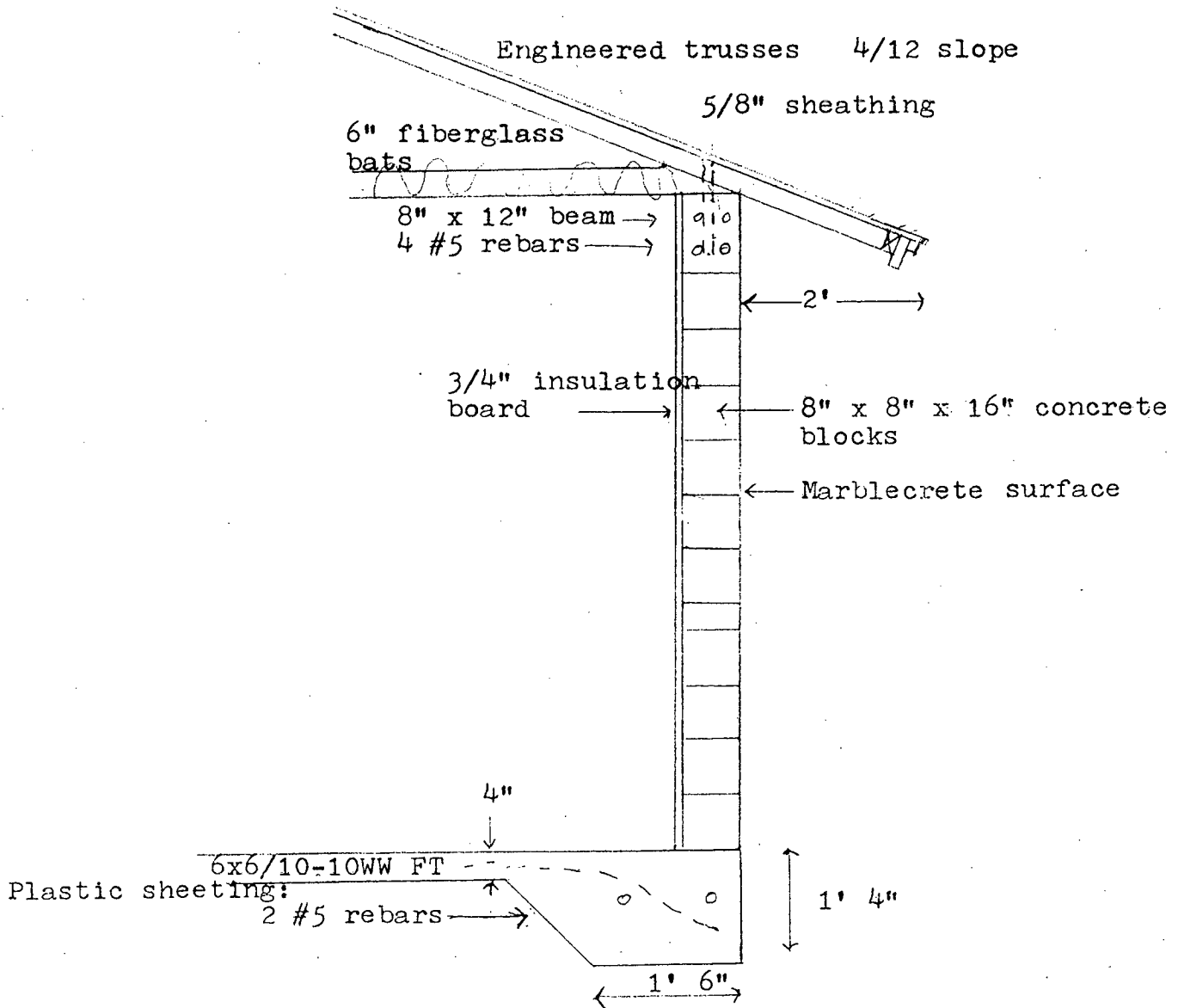
Forms, equipment, wire mesh, rod ties and cavity caps.

To be furnished by owner:

Plastic sheeting for slab, rebars, bonding agent for cold joints, concrete, blocks, mortar and stucco materials.

Addition of Closet  
on  
4 Via Lucindia S., Sewall's Point, Fl.

Area of closet to be added: 98 SF, ID.  
Site plan: (Attached).  
Roof line: Gable.  
Typical slab, wall and roof section.



Masonry connection to existing structure: Holes will be drilled in existing slab and beam into which rebars will be inserted for projection into added slab and beam.

Electrical: One outlet (ceiling light).  
Plumbing: None.  
Window: One - 2'x2'.

CONSTRUCTION AND REINFORCEMENT (Sketch of typical section is attached.):

\*Slab:

4" min. thickness with 6" x 6" / 10-10 WWF, min. overlap 6", tied at intersections and laid on plastic sheeting.

\*Footer:

Form with 16" wood.

2 #5 rebar continuously on <sup>3</sup>4 sides, all sections to have min. overlap of 18", intersections to be tied.

Wall:

#5 rebar dowels, all tied to footing and beam rebars:

2 at each corner,

1 at each end of wall where it joins existing wall,

1 at each side of window opening,

min. overlap 18", tied at intersections.

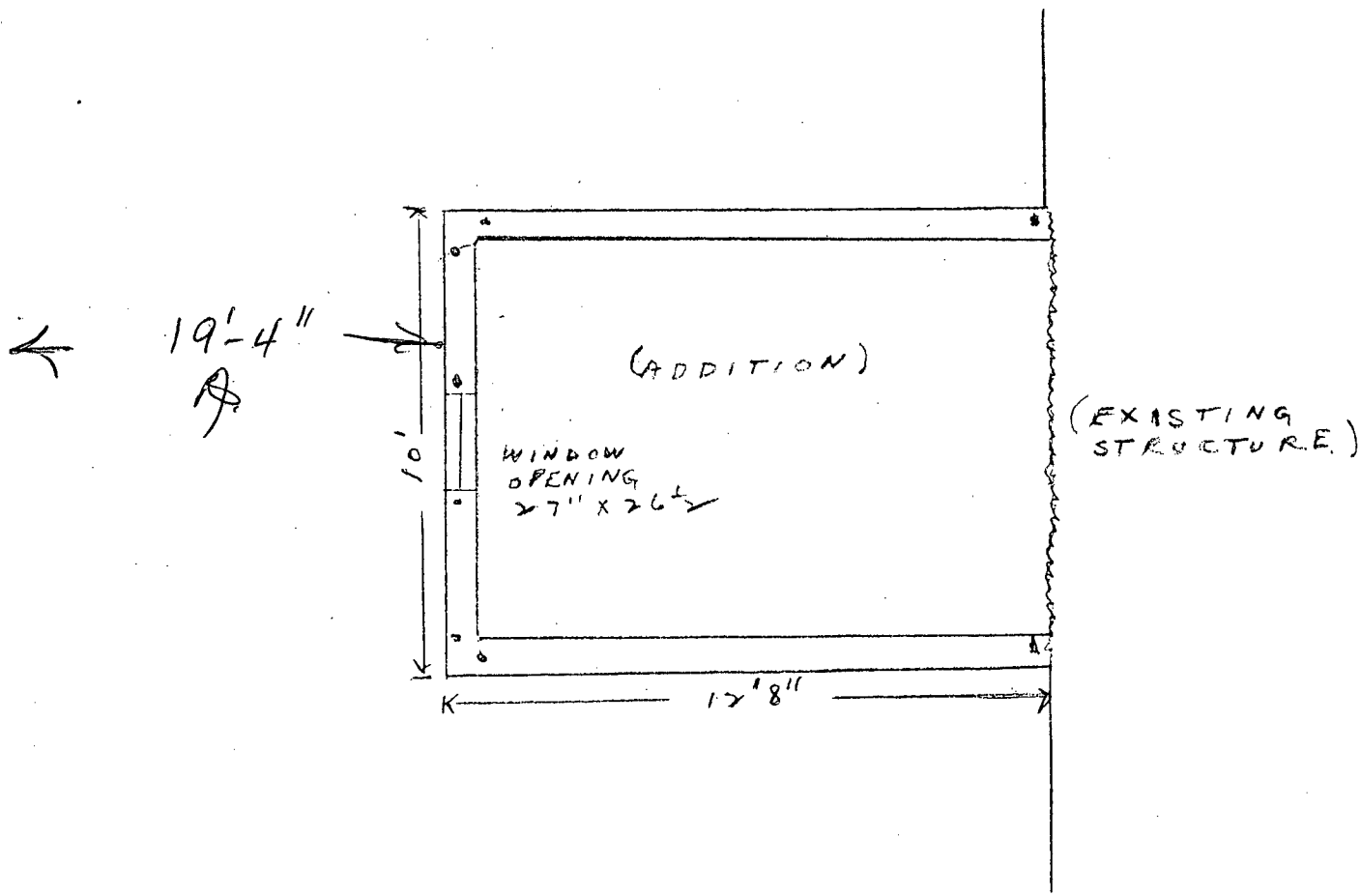
\*Beam:

4 #5 rebar continuously in 3 walls, min. overlap 18", tied at intersections.

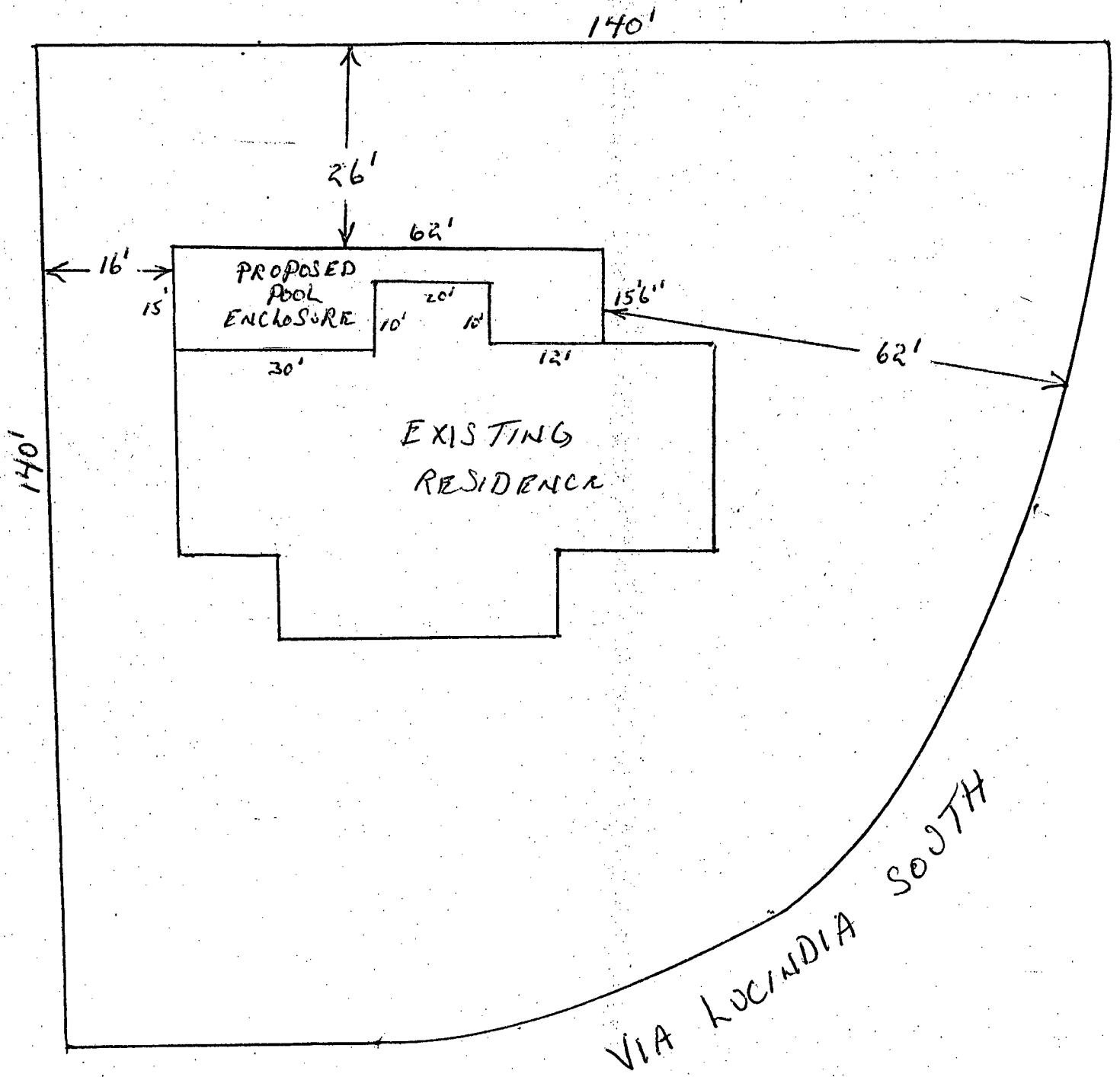
Block cavities at the eight dowel locations to be filled.

Truss anchors to be inserted for all trusses.

\* Slab, footer and beam to be locked to existing structure by rebars inserted into the existing structure.







**PLOT PLAN**

S & K ALUMINUM

SCALE: 1" = 20 FT.

DATE: 8-30-91 BY: *sh*

CUSTOMER: M/M

WALSH

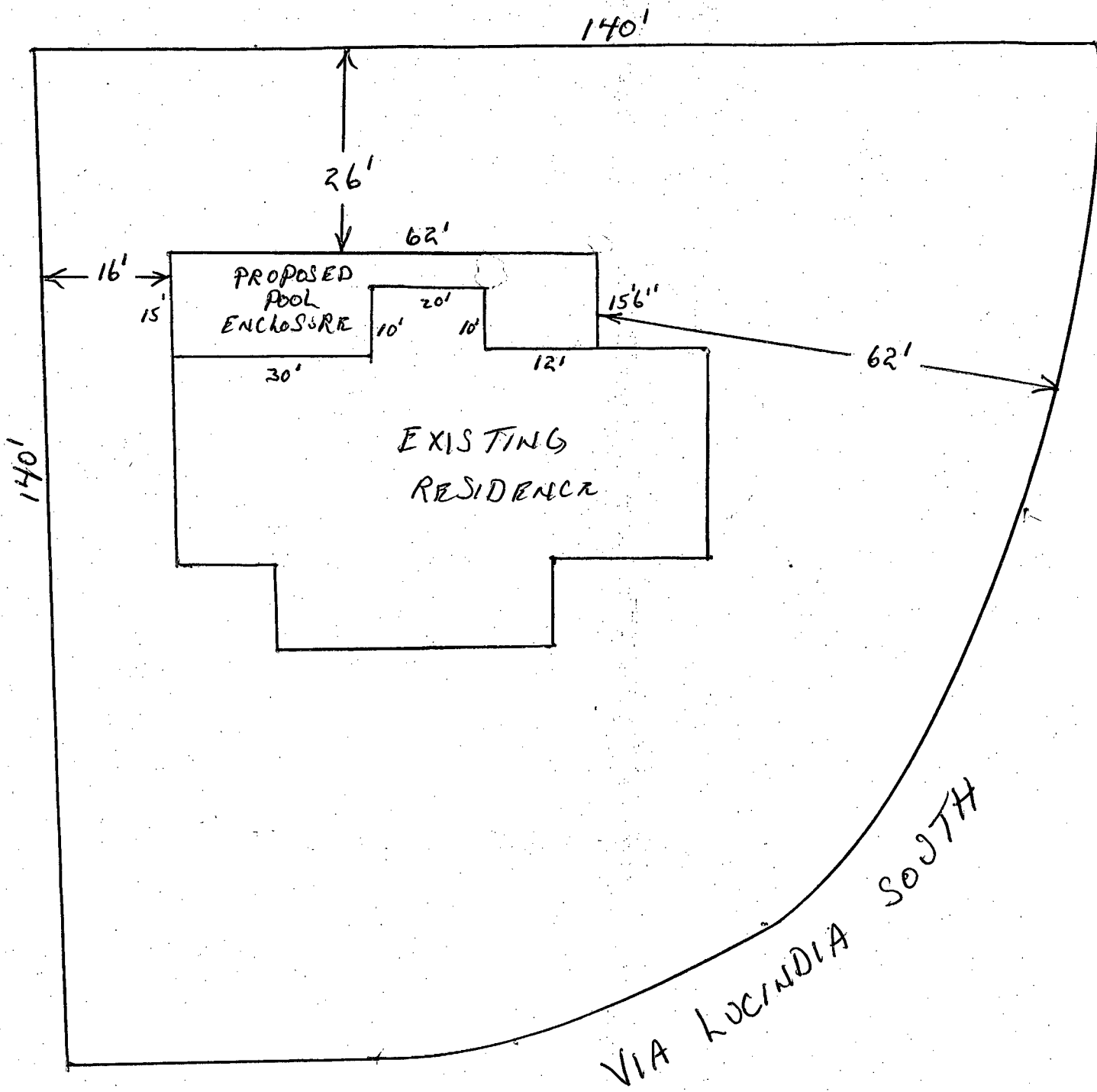
ADDRESS:

4 VIA LUCINDA

LOT

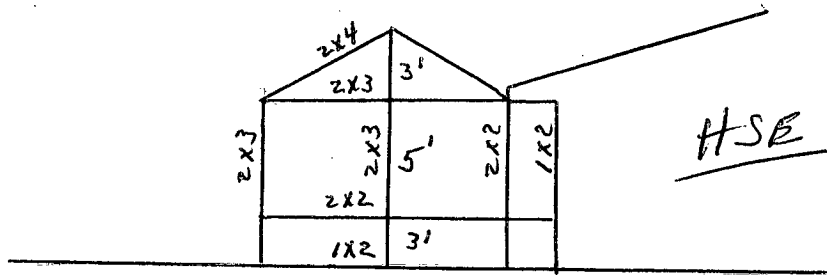
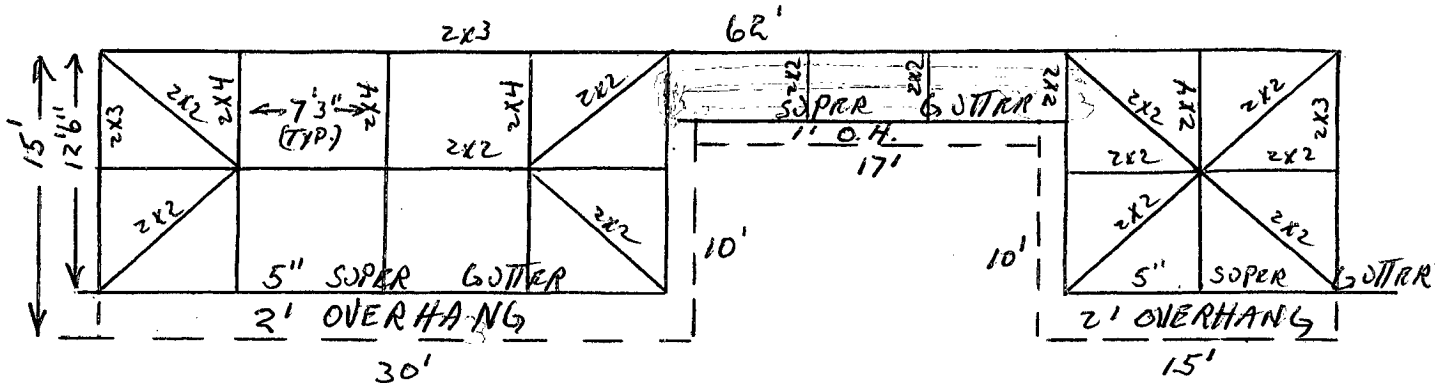
29

VIA LUCINDA



PLOT PLAN

S & K ALUMINUM	CUSTOMER: M/M	WALSH
SCALE: 1" = 20 FT.	ADDRESS:	4 VIA LUCINDA
DATE: 8-30-91 BY: <i>sh</i>	LOT:	29 VIA LUCINDA



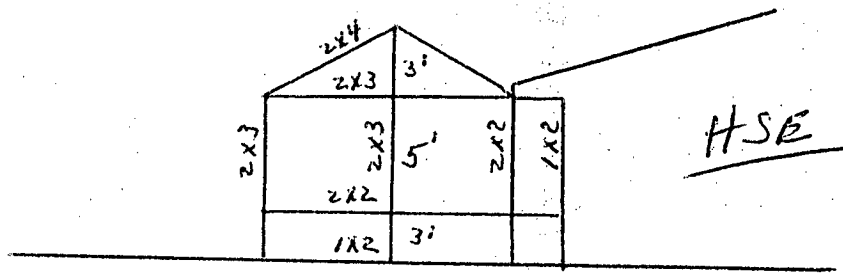
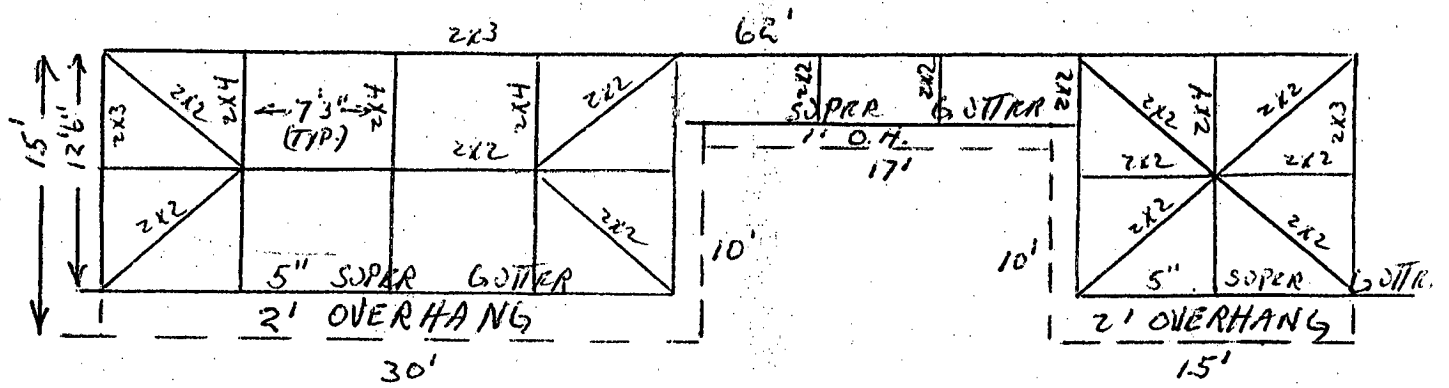
FRAME PLAN

M/M WALSH

W VIA LUCINDA

S&K ALUMINUM SH

SCALE 1" = 10 FT 8-30-91



FRAME PLAN

M/M WALSH  
 W VIA LUCINDA  
 S&K ALUMINUM INC  
 SCALE 1" = 10 FT 8-30-91

01249168

97 AUG 12 PM 2:04

Prepared by and return to:  
Town of Sewall's Point  
One South Sewall's Point Road  
Stuart Florida 34996

TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPROVAL

1. Owner of Property: Kristen L. Pilette, as Personal Representative of the Estate of William T. Walsh.
2. Legal Description of Property:

Lucindia, Lot 29.

3. Date of Administrative Variance Application: August 11, 1997

Whereas, the Town of Sewall's Point Building Commissioner (the "Building Commissioner") has authority under the Town of Sewall's Point Code of Ordinances to grant administrative variances upon making certain findings of fact; and

Whereas, the Building Commissioner has reviewed an Administrative Variance Application (the "Application") for the Property described above and determined that the Application is complete; and

Whereas, the Building Commissioner has made the appropriate findings of fact and finds that:

(1) The setback violation(s) for the encroachments shown on the survey attached as Exhibit "A" (the "Survey") was/were a good faith error(s) and was/were not intentional; and

(2) The encroachment(s) is/are less than or equal to five percent (5%) of the



IN THE NINETEENTH JUDICIAL CIRCUIT, IN  
AND FOR MARTIN COUNTY, FLORIDA

IN RE: ESTATE OF

CASE NO: 97-194 CP

WILLIAM T. WALSH,

PROBATE DIVISION

Deceased.

LETTERS OF ADMINISTRATION

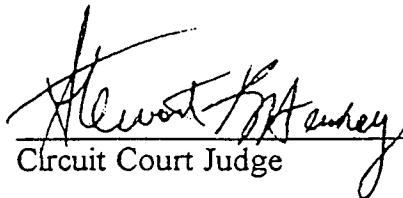
TO ALL WHOM IT MAY CONCERN

WHEREAS, WILLIAM T. WALSH, a resident of Martin County, Florida died on March 6, 1997, owning assets in the State of Florida, and

WHEREAS, KRISTIN L. PILETTE, has been appointed personal representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned circuit judge, declare KRISTIN L. PILETTE duly qualified under the laws of the State of Florida to act as personal representative of the estate of WILLIAM T. WALSH, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED on this 26<sup>th</sup> day of March, 1997.

  
Circuit Court Judge

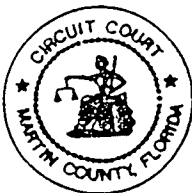
STATE OF FLORIDA  
MARTIN COUNTY

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

MARSHA STILLER, CLERK

BY L. Schneider D.C.

DATE 3/27/97



Address 14716 878067

This Instrument Prepared by:  
CHICAGO TITLE INS CO  
Address: 555 COLORADO AVE  
STUART, FL 34994

Property Appraiser Parcel I.D. (Folio) Number(s):  
01 38 41 007 000 00290 4

Grantee(s) S.S.#(s):

RECORD VERIFIED

FILED FOR RECORD  
MARTIN COUNTY

APR 19 91 AM 10:46

FLA. DOC PAID  
\$ 219.50  
Marsha Stiller  
Clerk of Circuit Court  
Martin Co., Fla.  
By LUC D.C.

MARSHA STILLER  
CLERK OF CIRCUIT COURT

TV

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed Made the 4<sup>th</sup> day of APRIL A. D. 19 91 by

ROBERT E. TARDIFF and CECELIA TARDIFF, his wife

hereinafter called the grantor, to

WILLIAM TADE WALSH, JR.

whose postoffice address is 45 Lucinda Ave. J. R. 3/996  
hereinafter called the grantee:

(Wherever used herein the terms "grantee" and "grantor" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals and the successors and assigns of corporations.)

**Witnesseth:** That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in MARTIN County, Florida, viz:

Lot 29, LUCINDIA, a Subdivision of Sewall's Point, Florida, according to the Plat thereof filed in Plat Book 3, page 130, Martin County, Florida public records.

SUBJECT TO EASEMENTS, RESTRICTIONS AND ZONING OF RECORD.

**Together** with all the tenements, hereditaments and appurtenances thereto belonging or in any-wise appertaining.

**To Have and to Hold,** the same in fee simple forever.

**And** the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 90.

**In Witness Whereof,** the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

*Delia D. Keyes*  
witness  
*Mr. Walsh*  
witness

*Robert E. Tardiff*  
ROBERT E. TARDIFF  
*Cecelia Tardiff*  
CECELIA TARDIFF

STATE OF Florida  
COUNTY OF Highlands

I HEREBY CERTIFY that on this day, before me, an

officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared ROBERT E. TARDIFF and CECELIA TARDIFF, his wife to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4<sup>th</sup> day of APRIL A. D. 19 91.

My Commission Expires:  
(seal) Notary Public, State of Florida  
My Commission Expires May 8, 1991  
Standard Three Year Term - Notary Public

*Delia D. Keyes*  
NOTARY PUBLIC

ORER0901PG1358

ORBK1254PG1774





FORM LETTER OF NO OBJECTION

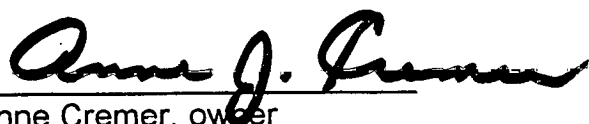
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning,  
Section VIII.F, Town of Sewall's Point Code Ordinances Filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh.

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by Kristen L. Pilette, as Personal Representative of the Estate of William T. Walsh. with the Town of Sewall's Point. I am an adjacent property owner to the property which is the subject of the Administrative Variance and I have no objection to the Town of Sewall's Point granting the Administrative Variance.

Sincerely yours,



Anne Cremer, owner  
Lucindia, Lot 28

FORM LETTER OF NO OBJECTION

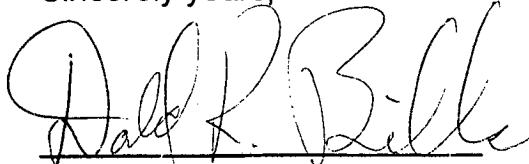
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning,  
Section VIII.F, Town of Sewall's Point Code Ordinances Filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh.

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh. with the  
Town of Sewall's Point. I am an adjacent property owner to the property which is  
the subject of the Administrative Variance and I have no objection to the Town of  
Sewall's Point granting the Administrative Variance.

Sincerely yours,



Donald R. Bills, owner  
Lucindia, Lot 12



Eloise Bills, owner  
Lucindia, Lot 12

01249168

97 AUG 12 PM 2:04

Prepared by and return to:  
Town of Sewall's Point  
One South Sewall's Point Road  
Stuart Florida 34996

TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPROVAL

1. Owner of Property: Kristen L. Pilette, as Personal Representative of the Estate  
of William T. Walsh.

2. Legal Description of Property:

Lucindia, Lot 29.

3. Date of Administrative Variance Application: August 11, 1997

Whereas, the Town of Sewall's Point Building Commissioner (the "Building Commissioner") has authority under the Town of Sewall's Point Code of Ordinances to grant administrative variances upon making certain findings of fact; and

Whereas, the Building Commissioner has reviewed an Administrative Variance Application (the "Application") for the Property described above and determined that the Application is complete; and

Whereas, the Building Commissioner has made the appropriate findings of fact and finds that:

(1) The setback violation(s) for the encroachments shown on the survey attached as Exhibit "A" (the "Survey") was/were a good faith error(s) and was/were not intentional; and

(2) The encroachment(s) is/are less than or equal to five percent (5%) of the

setback requirement(s) in effect on the date that the encroachment was first created, or twenty inches (20"), whichever is less; and

(3) No letters of objection to the administrative variance application have been filed by adjacent owners with the Town Clerk; and

(4) The Application meets the conditions of the Town of Sewall's Point Code of Ordinances for an administrative variance.

NOW, THEREFORE, the Town of Sewall's Point hereby grants and approves the Application for an administrative variance for the encroachments shown on the Survey.

Dated this 12<sup>th</sup> day of August, 1997.

The Town of Sewall's Point, a  
Florida municipal corporation

By: [Signature]  
Its: Building Commissioner

STATE OF FLORIDA  
COUNTY OF MARTIN

Sworn to and subscribed before me this 12<sup>th</sup> day of August, 1997,  
by V.A. Vorraso, as Building Commissioner of the Town of Sewall's  
Point, a Florida municipal corporation, who is personally known to me or who has produced  
as identification and who did not take an oath.

(NOTARY SEAL)

[Signature]  
Name: \_\_\_\_\_  
I am a Notary Public of the  
State of Florida and my  
commission expires: \_\_\_\_\_

IN THE NINETEENTH JUDICIAL CIRCUIT, IN  
AND FOR MARTIN COUNTY, FLORIDA

IN RE: ESTATE OF

CASE NO: 97-194 CP

WILLIAM T. WALSH,

PROBATE DIVISION

Deceased.

LETTERS OF ADMINISTRATION


TO ALL WHOM IT MAY CONCERN

WHEREAS, WILLIAM T. WALSH, a resident of Martin County, Florida died on March 6, 1997, owning assets in the State of Florida, and

WHEREAS, KRISTIN L. PILETTE, has been appointed personal representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned circuit judge, declare KRISTIN L. PILETTE duly qualified under the laws of the State of Florida to act as personal representative of the estate of WILLIAM T. WALSH, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED on this 26<sup>th</sup> day of March, 1997.

  
Circuit Court Judge

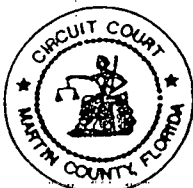
STATE OF FLORIDA  
MARTIN COUNTY

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

MARSHA STILLER, CLERK

BY M. Stiller D.C.

DATE 3/27/97



OR BK 1 2 5 4 PGI 7 7 3

RETURN TO: (ENCLOSE SELF-ADDRESSING STAMPED ENVELOPE)  
None

WARRANTY DEED  
MOVING TO 10/1/90

HAMCO FORM 01

Address: 14716 878067

This Instrument Prepared by:  
CHICAGO TITLE INS CO  
Address: 555 COLORADO AVE  
STUART, FL 34994

Property Appraiser's Parcel I.D. (P.O.M.) Number(s):  
01 38 41 007 000 00290 4

Grantee(s) S.S.#(s):

RECORD VERIFIED

FILED FOR RECORD  
MARTIN COUNTY

91 APR 19 AM 10:46

FLA. DOC PAID

81950

By: Marsha Stiller  
Clerk of Circuit Court  
Martin Co., Fla.

MARSHA STILLER  
CLERK OF CIRCUIT COURT

BY

By: LUC D.C.

TV

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed Made the 4<sup>th</sup> day of APRIL A. D. 19 91 by

ROBERT E. TARDIFF and CECELIA TARDIFF, his wife

hereinafter called the grantor, to

WILLIAM TADE WALSH, JR.

whose postoffice address is 45 Lucinda Blvd, FL 34996  
hereinafter called the grantee:

Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals and the successors and assigns of corporations.

**Witnesseth:** That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, alien, re-mises, releases, conveys and confirms unto the grantee, all that certain land situate in MARTIN County, Florida, viz:

Lot 29, LUCINDIA, a Subdivision of Sewall's Point, Florida, according to the Plat thereof filed in Plat Book 3, page 130, Martin County, Florida public records.

SUBJECT TO EASEMENTS, RESTRICTIONS AND ZONING OF RECORD.

**Together** with all the tenements, hereditaments and appurtenances thereto belonging or in any-wise appertaining.

**To Have and to Hold,** the same in fee simple forever.

**And** the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 90.

**In Witness Whereof,** the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Witness: *[Signature]*  
witness  
*[Signature]*  
witness

*[Signature]*  
ROBERT E. TARDIFF  
*[Signature]*  
CECELIA TARDIFF

STATE OF Florida  
COUNTY OF Highlands

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared

ROBERT E. TARDIFF and CECELIA TARDIFF, his wife

to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4<sup>th</sup> day of APRIL A. D. 19 91.

My Commission Expires: (seal)  
Notary Public, State of Florida  
My Commission Expires May 8, 1991  
Bonded Three Year Term - Insurance Inc.

*[Signature]*  
Notary Public

ORBN0901PGI358

ORBK! 254 PGI 774





FORM LETTER OF NO OBJECTION

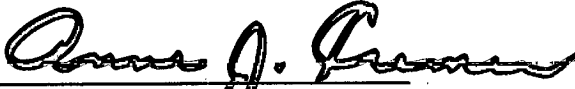
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning,  
Section VIII.F, Town of Sewall's Point Code Ordinances Filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh.

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh. with the  
Town of Sewall's Point. I am an adjacent property owner to the property which is  
the subject of the Administrative Variance and I have no objection to the Town of  
Sewall's Point granting the Administrative Variance.

Sincerely yours,

  
Anne Cremer, owner  
Lucindia, Lot 28

FORM LETTER OF NO OBJECTION

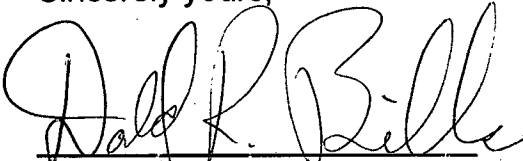
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning,  
Section VIII.F, Town of Sewall's Point Code Ordinances Filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh.

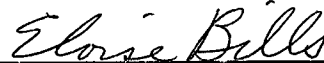
Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh. with the  
Town of Sewall's Point. I am an adjacent property owner to the property which is  
the subject of the Administrative Variance and I have no objection to the Town of  
Sewall's Point granting the Administrative Variance.

Sincerely yours,



Donald R. Bills, owner  
Lucindia, Lot 12



Eloise Bills, owner  
Lucindia, Lot 12

to be  
recorded  
8-12-97

Prepared by and return to:  
Town of Sewall's Point  
One South Sewall's Point Road  
Stuart Florida 34996

TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPROVAL

1. Owner of Property: Kristen L. Pilette, as Personal Representative of the Estate  
of William T. Walsh.

2. Legal Description of Property:

Lucindia, Lot 29.

3. Date of Administrative Variance Application: August 11, 1997

Whereas, the Town of Sewall's Point Building Commissioner (the "Building Commissioner") has authority under the Town of Sewall's Point Code of Ordinances to grant administrative variances upon making certain findings of fact; and

Whereas, the Building Commissioner has reviewed an Administrative Variance Application (the "Application") for the Property described above and determined that the Application is complete; and

Whereas, the Building Commissioner has made the appropriate findings of fact and finds that:

(1) The setback violation(s) for the encroachments shown on the survey attached as Exhibit "A" (the "Survey") was/were a good faith error(s) and was/were not intentional; and

(2) The encroachment(s) is/are less than or equal to five percent (5%) of the



IN THE NINETEENTH JUDICIAL CIRCUIT, IN  
AND FOR MARTIN COUNTY, FLORIDA

IN RE: ESTATE OF

CASE NO: 97-194 CP

WILLIAM T. WALSH,

PROBATE DIVISION

Deceased.

LETTERS OF ADMINISTRATION

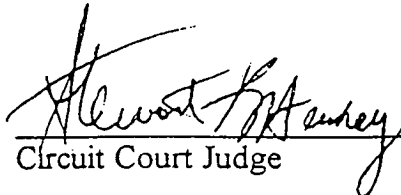
TO ALL WHOM IT MAY CONCERN

WHEREAS, WILLIAM T. WALSH, a resident of Martin County, Florida died on March 6, 1997, owning assets in the State of Florida, and

WHEREAS, KRISTIN L. PILETTE, has been appointed personal representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned circuit judge, declare KRISTIN L. PILETTE duly qualified under the laws of the State of Florida to act as personal representative of the estate of WILLIAM T. WALSH, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED on this 26<sup>th</sup> day of March, 1997.

  
Circuit Court Judge

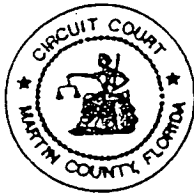
STATE OF FLORIDA  
MARTIN COUNTY

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

MARSHA STILLER, CLERK

BY L. Schneider D.C.

DATE 3/27/97



Address: 14716 878067

This instrument Prepared by: CHICAGO TITLE INS CO  
Address: 555 COLORADO AVE  
STUART, FL 34994

Property Appraiser's Parcel ID. (Folio) Number(s):  
01 38 41 007 000 00290 4

Grantor(s) S.S.#(s):

RECORD VERIFIED

FILED FOR RECORD

APR 9 91 AM 10:46

FLA. DOC. PAID \$ 219.50  
Marsha Stiller  
Clerk of Circuit Court  
Martin Co., Fla.  
By LUC D.C.

MARSHA STILLER  
CLERK OF CIRCUIT COURT

TV

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

This Warranty Deed Made the 4<sup>th</sup> day of APRIL A D 19 91 by

ROBERT E. TARDIFF and CECELIA TARDIFF, his wife

hereinafter called the grantor, to

WILLIAM TADE WALSH, JR.

whose postoffice address is 4 S. Lucindia Ave. J. D. 34996  
hereinafter called the grantee.

Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals and the successors and assigns of corporations.

Witnesseth: That the grantor, her and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grant, bargain, sell, alien, re-mises, releases, conveys and confirms unto the grantee all that certain land situate in MARTIN County, Florida, viz:

Lot 29, LUCINDIA, a Subdivision of Sewall's Point, Florida, according to the Plat thereof filed in Plat Book 3, page 130, Martin County, Florida public records.

SUBJECT TO EASEMENTS, RESTRICTIONS AND ZONING OF RECORD.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any-wise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 19 90.

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Witness  
Witness

STATE OF Florida  
COUNTY OF Highlands

ROBERT E. TARDIFF  
CECELIA TARDIFF

CS  
CS

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared

ROBERT E. TARDIFF and CECELIA TARDIFF, his wife

to me known to be the persons described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 4<sup>th</sup> day of APRIL A. D. 19 91.

My Commission Expires: (seal)  
Notary Public, State of Florida  
My Commission Expires May 8, 1991  
Bundled Three Year Fee - \$100.00

Notary Public



FORM LETTER OF NO OBJECTION

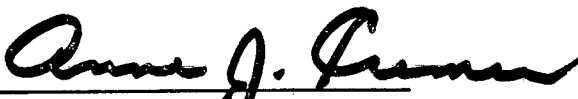
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning,  
Section VIII.F, Town of Sewall's Point Code Ordinances Filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh.

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh. with the  
Town of Sewall's Point. I am an adjacent property owner to the property which is  
the subject of the Administrative Variance and I have no objection to the Town of  
Sewall's Point granting the Administrative Variance.

Sincerely yours,



Anne Cremer, owner  
Lucindia, Lot 28



FORM LETTER OF NO OBJECTION

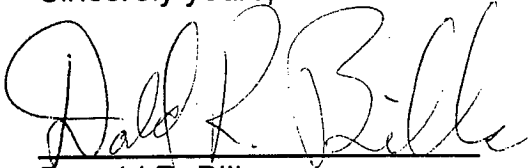
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning,  
Section VIII.F, Town of Sewall's Point Code Ordinances Filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh.

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by Kristen L.  
Pilette, as Personal Representative of the Estate of William T. Walsh. with the  
Town of Sewall's Point. I am an adjacent property owner to the property which is  
the subject of the Administrative Variance and I have no objection to the Town of  
Sewall's Point granting the Administrative Variance.

Sincerely yours,



Donald R. Bills, owner  
Lucindia, Lot 12



Eloise Bills, owner  
Lucindia, Lot 12

TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPLICATION FORM

1. Owner of Property: Kristen L. Pilette, as Personal Representative of the Estate of William T. Walsh.
2. Address of Property: 4 South Via Lucindia, Stuart, Florida 34996.  
20440 Colman
3. Address of Applicant: Clinton Township, MI 48035
4. Phone No. of Applicant: 810-790-7842 (8/6 - 8/10 can be reached @ 283-0635)
5. Length and Location (front, rear, side) of Encroachment (if more than one, please list separately):

Side 0.44' (less than 6")

Rear 0.25' (3")

6. Have you included the following materials with your application? Yes
- |                             |   |
|-----------------------------|---|
| A. \$250.00 Filing Fee      | B. \$250.00 Costs Deposit                             |
| C. Certificate of Ownership | D. Certificate of Adjacent Owners                     |
| E. Survey                   | F. Letters of No Objection or Proof of Mailing Notice |

7. Does/do the encroachment(s) result from development under a permit for which a certificate of occupancy was issued prior to March 11, 1992? ✓

I hereby certify that all of the information above and the application materials I have provided are true and correct:

Kristina L. Pilette as *Personal Representative of the Estate of William T. Walsh*  
Applicant

Dated this 11<sup>th</sup> day of August, 1997.

PREMIER REALTY GROUP, INC. 561-287-1777 08/04/97 DEBRA DUVAL

MARTIN COUNTY TAXROLL

PID: 01 3841 007 000 00280 ACN: 17713 BNO: 1 NBN: 1217

USE: 0100 SINGLE FAMILY RESID SBN: 0181007 LUCINDIA

ADD: S S VIA LUCINDIA

OWNER INFORMATION:

SECOND OWNER:

CREMER ANNE

S S VIA LUCINDIA

STUART

FL

34996 6410

PROPERTY INFORMATION:

TOTAL AREA: 2506

ACRES :	STORIES :	A/C AREA :	1663
ZONING :	BEDROOMS :	YEAR BUILT :	1971
MAP : SP-04	BATHS :	EFF YR BLT :	
CITY :	ZIP :		

PROPERTY INFORMATION:

EXEMPT CODE & VALUES:

LAND VAL :	63800	TAX YEAR :	1996	H0
IMPV VAL :	76348	MILLAGE :		HX
TOTAL VAL :	140148	TAXES :	1655.11	W1

LAND INFORMATION:

USE	UNITS	USE	UNITS	USE	UNITS	USE	UNITS
-----	-------	-----	-------	-----	-------	-----	-------

FEATURES:

LOT	1.000	PL2	90.000	FIXTURES	6.000
LLIT	1.000	PT1	690.000	LIVING	1663.000
SP4	192.000	SCR	1888.000	ELAV	1.000
FG2	506.000	HF3		EW3S	1.000
OP3	145.000	CNSP	1.000	FD5L	1.000

SALES HISTORY:

SOLD	PRICE	KD1	DED	ORB	VIC	SLN
06/01/86	149000	06/01/86	WD	0678 /1731	Y	
	105000		PR	0587 /0158	N	
	100		01	0547 /1535	N	
				/		
				/		

LEGAL INFORMATION:

LUCINDIA LOT 28

MARTIN COUNTY TAXROLL

PID: 01 3841 007 000 00120 ACN: 17697 BNO: 1 NBN: 1217

USE: 0100 SINGLE FAMILY RESID SRN: 0181007 LUCINDIA

ADD: 3 N LUCINDIA

OWNER INFORMATION:

SECOND OWNER:

BILLS DONALD K

ELOISE

3 N VIA LUCINDIA

STUART

FL

34996 0000

PROPERTY INFORMATION:

TOTAL AREA: 3990

ACRES :	STORIES :	A/C AREA :	3251
ZONING :	BEDROOMS :	YEAR BUILT:	1976
MAP : SP-04	BATHS :	EFF YR BLT:	
CITY :	ZIP :		

PROPERTY INFORMATION:

EXEMPT CODE & VALUES:

LAND VAL :	63800	TAX YEAR :	1996	H6
IMPV VAL :	133726	MILLAGE :		HX
TOTAL VAL:	197526	TAXES :	2383.70	

LAND INFORMATION:

USE	UNITS	USE	UNITS	USE	UNITS	USE	UNITS
-----	-------	-----	-------	-----	-------	-----	-------

FEATURES:

LOT	1.000	FL2	96.000	LIVING	3251.000
LLIT	1.000	PT1	513.000	ELAV	1.000
FG2	739.000	HF3		EWBS	1.000
OP3	32.000	CNSP	1.000	FDSL	1.000
PT1	49.000	FIXTURES	11.000	FLCU	1.000

SALES HISTORY:

SOLD	PRICE	RD1	DED	ORB	VIC	SLN
08/19/96	197000	08/20/96	WD	1192	/1886	Y VECCHIONE SEVERIO J
06/01/75	17500	06/01/75	WD	0388	/2379	N
				/		
				/		
				/		

LEGAL INFORMATION:

LUCINDIA LOT 12 OR 340/1380

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

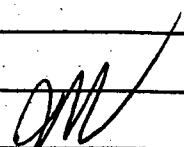
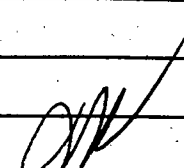
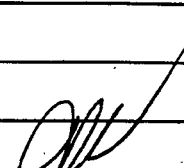
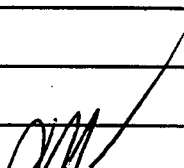
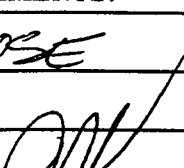
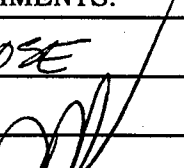
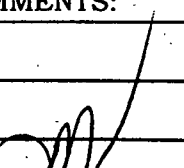
Date of Inspection:  Mon  Wed  Fri 7/29, 2005 Page 3 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6998	RIMER	FINAL DOCK	FAIL	\$40 FEE
9	29 S. RIVER RD O/B	REPAIR		INSPECTOR:
7306	RIMER	FINAL RETAINING WALL	FAIL	
9	29 S. RIVER RD LEAP DEVELOPMENT			INSPECTOR:
7612	COTTEN	SOFFIT & SIDING	PASS	CLOSE
5	177 S SEWALL ST DEMOLISH			INSPECTOR:
7565	KUHNS	ELEC. ROUGH	PASS	
7	94 S. RIVER RD.			INSPECTOR:
6903	BRUNER	FINAL FENCE	PASS	CLOSE
10	19 RIVERVIEW			INSPECTOR:
7043	SWEENEY/COGNICK	FINAL ROOF	PASS	CLOSE
12	4 S. VIA LUCINDIA			INSPECTOR:
7685	GILLEN	DRY-IN	PASS	
12A	5 PALMETTO DR PACIFIC ROOF			INSPECTOR:
OTHER:	CARRICO	FINAL ROOF	PASS	CLOSE
	7682 La Gumeo Limbo			
	CARRICO BLDGS			

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 2/23, 20045 Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7191	HECKENBURN	DOCK BEE	FAIL	
10	5 N.E. LAGOON ISLAND CT. O/B.			INSPECTOR: 
TREE	O'CONNOR	TREE	PASS	
12	16 FIELDWAY DR			INSPECTOR: 
7043	SWEENEY-GOLNIK	IN PROGRESS ROOF	PASS	
6	4 S. VIA LUCINDIA O/B			INSPECTOR: 
7272	H BASSOC/MARTELO	ELEC WALL P&H	PASS	
13	3758 SE OCEAN (ME) KIRLITIAN WAYNE 260-0949			INSPECTOR: 
7250		FENCE FINAL	PASS	CLOSE
3	135 S. RIVER RD STUART ROOFING			INSPECTOR: 
7186	LIPPS	FINAL ROOF	PASS	CLOSE
9	5 COPAIRE DR PVD DEVELOPMENT			INSPECTOR: 
7300	JENKINS	TIN TAG+METAL	PASS	
7	4 SABAL COURT GARY MARZO			INSPECTOR: 

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

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

### TOWN OF SEWALL'S POINT

Date 11/10/04

BUILDING PERMIT NO. 7.043

Building to be erected for SWEENEY-GOLNIK Type of Permit REROOF

Applied for by O/B (Contractor) Building Fee \_\_\_\_\_

Subdivision LUCINDIA Lot 29 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 4 S. VIA LUCINDIA Impact Fee N/A

Type of structure SFR A/C Fee HURRICANE

Electrical Fee DAMAGE

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

Parcel Control Number:

0138410070000029040000 Roofing Fee \_\_\_\_\_

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

Total Construction Cost \$ 5000.00 TOTAL Fees \_\_\_\_\_

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 \_\_\_\_\_

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

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

Date: 11-8-04

OWNER/TITLEHOLDER NAME: FRANK SWEENEY-GOWNIK Phone (Day) 781-6316 (Fax) 781-6363

Job Site Address: 4 SOUTH VIA LUCINDIA City: STUART State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) LUCINDIA LOT 29 Parcel Number: 01-38-41-007-000-00290-4

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

Description of Work To Be Done: RE-ROOFING - REMOVE OLD SHINGLES + REPAVE

WILL OWNER BE THE CONTRACTOR?:

YES  NO

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

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 5000  
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ 350K

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

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

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: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2001  
National Electrical Code: 2002 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)  
[Signature]

State of Florida, County of: MARTIN

This the 8th day of NOVEMBER, 2004

by FRANK GOWNIK who is personally

known to me or produced FLDL 0452-265-473820

as identification. [Signature] x 10/22/05  
Notary Public

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

CONTRACTOR SIGNATURE (required)  
\_\_\_\_\_

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

This the \_\_\_\_\_ day of \_\_\_\_\_, 200  

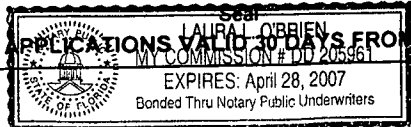
by \_\_\_\_\_ who is personally

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!





## PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR RE-ROOFING

**IMPORTANT NOTICE:** All items listed below must accompany your permit application.  
No application will be accepted unless all items that are applicable are submitted.

**Application form must contain the following information:**

1. Property Appraisers Parcel Number or Property Control Number
2. Legal Description of property (Can be found on your deed survey or Tax Bill)
3. Contractors name, address, phone number and license numbers.
4. Name all sub-contractors (properly licensed)
5. Estimated cost of construction.
6. Original signature of owner and notarized
7. Original signature of Contractor and notarized.

### Submittals (2 copies)

1. Product approvals from Miami/Dade for the following items:
  - a. Roofing
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
- ✓ 4. A certified copy of the Notice of Commencement for any work over \$2500.00
5. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
6. Copy of Workmen's Compensation
7. Copy of Liability Insurance

**ALL INFORMATION AND DOCUMENTS MENTIONED ABOVE  
ARE INCLUDED IN THE MY PERMIT APPLICATION PACKAGE**



\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

DATE SUBMITTED: \_\_\_\_\_

11-8-04

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

1 1000 01 1100 01 1200 01 1300 01 1400 01 1500 01 1600 01 1700 01 1800 01 1900 01 2000 01 2100 01 2200 01 2300 01 2400 01 2500 01 2600 01 2700 01 2800 01 2900 01 3000 01 3100 01 3200 01 3300 01 3400 01 3500 01 3600 01 3700 01 3800 01 3900 01 4000 01 4100 01 4200 01 4300 01 4400 01 4500 01 4600 01 4700 01 4800 01 4900 01 5000 01 5100 01 5200 01 5300 01 5400 01 5500 01 5600 01 5700 01 5800 01 5900 01 6000 01 6100 01 6200 01 6300 01 6400 01 6500 01 6600 01 6700 01 6800 01 6900 01 7000 01 7100 01 7200 01 7300 01 7400 01 7500 01 7600 01 7700 01 7800 01 7900 01 8000 01 8100 01 8200 01 8300 01 8400 01 8500 01 8600 01 8700 01 8800 01 8900 01 9000 01 9100 01 9200 01 9300 01 9400 01 9500 01 9600 01 9700 01 9800 01 9900 01

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

TAX FOLIO # 1-35-41-007-000-0040-4000

**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):**

4 VIA LUCINDIA SOUTH

**GENERAL DESCRIPTION OF IMPROVEMENT:** RE-ROOFING

**OWNER:** FRANK SWEENEY - GOLNIK

**ADDRESS:** 4 VIA LUCINDIA SOUTH

**PHONE #:** 772 781-6314 **FAX #:** 772 781-6363

**CONTRACTOR:** OWNER

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

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

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

STATE OF FLORIDA  
MARTIN COUNTY

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

**PHONE #:** \_\_\_\_\_

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

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

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

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

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR 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 DATE 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 8th DAY OF November

BY FRANK GOLNIK

[Signature]

NOTARY SIGNATURE



OR PERSONALLY KNOWN PRODUCED ID FDL 6752-265-47-3822 TYPE OF ID \_\_\_\_\_

INSTR # 1791173 OR BK 01954 PG 0445 RECD 11/08/2004 04:02:31 PM  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix

# 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: FRANK SWEENEY-GOLNIK Date: 11-8-2004

Signature: 

Address: 4 VIA LUCINDA SOUND

City & State: STUART, FL 34994-6410

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



SHINGLES



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

**NOTICE OF ACCEPTANCE (NOA)**

**Owens Corning**  
**One Owens Corning Parkway**  
**Toledo, OH 43659**

**SCOPE:**

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The BCCO (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BCCO reserves the right to revoke this acceptance, if it is determined by BCCO that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the Florida Building Code, including the High Velocity Hurricane Zone.

**DESCRIPTION: Oakridge PRO 40 AR**

**LABELING:** Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

**RENEWAL** of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

**TERMINATION** of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

**ADVERTISEMENT:** The NOA 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 NOA is displayed, then it shall be done in its entirety.

**INSPECTION:** A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA #03-102804 and consists of pages 1 through 3. The submitted documentation was reviewed by Frank Zuloaga, RRC

FILE COPY

REVIEWED BY: BCCO PRODUCT COMPLIANCE

DATE: 11/9/04

*[Signature]*

BUILDING OFFICIAL

Gene [unclear]

**REPAIR WORK FOR HURRICANE DAMAGE**

NOA No.: 04-0510.06  
Expiration Date: 07/19/06  
Approval Date: 07/22/04



## ROOFING ASSEMBLY APPROVAL

**Category:** Roofing  
**Sub-Category:** 07310 Asphalt Shingles  
**Materials:** Laminate  
**Deck Type:** Wood

### 1. SCOPE

This revises a roofing system using **Owens Corning Oakridge PRO 40 AR**. Asphalt shingles manufactured by Owens Corning as described in Section 2 of his Notice of Acceptance.

### 2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Oakridge PRO 40 AR	13 1/4" x 39 3/8"	TAS 110	A heavy weight, fiberglass reinforced four tab asphalt shingle.
Accessory Shingles	various	proprietary	Accessory shingles for hip, ridge and starter strip applications.

### 3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Celotex Corp. Testing Services	258495B	TAS 100	06/01/98
PRI Asphalt Technologies, Inc.	OCF-069-02-01 OCF-071-02-01	TAS 100	08/21/03 08/22/03
Underwriters Laboratories, Inc.	94NK9632 03NK21814 96NK30503 98NK16342 02NK02878 02NK02878	TAS 107 ASTM E 108 ASTM D 3462	07/01/98 08/28/03 10/11/96 05/14/98 10/15/03 10/20/03

### 4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.
- 4.3 All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

### 5. INSTALLATION

- 5.1 Shingles shall be installed in compliance with Roofing Application Standard RAS 115.
- 5.2 Flashing shall be in accordance with Roofing Application Standard RAS 115
- 5.3 The manufacturer shall provide clearly written application instructions.
- 5.4 Exposure and course layout shall be in compliance with Detail 'A', attached.
- 5.5 Nailing shall be in compliance with Detail 'B', attached.

### 6. LABELING

- 6.1 Shingles shall be labeled with the Miami-Dade Logo or the wording "Miami-Dade County Product Control Approved".



NOA No.: 04-0510.06  
Expiration Date: 07/19/06  
Approval Date: 07/22/04  
Page 2 of 3

**7. BUILDING PERMIT REQUIREMENTS**

7.1 Application for building permit shall be accompanied by copies of the following:

7.1.1 This Notice of Acceptance.

7.1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.

**8. MANUFACTURING PLANTS**

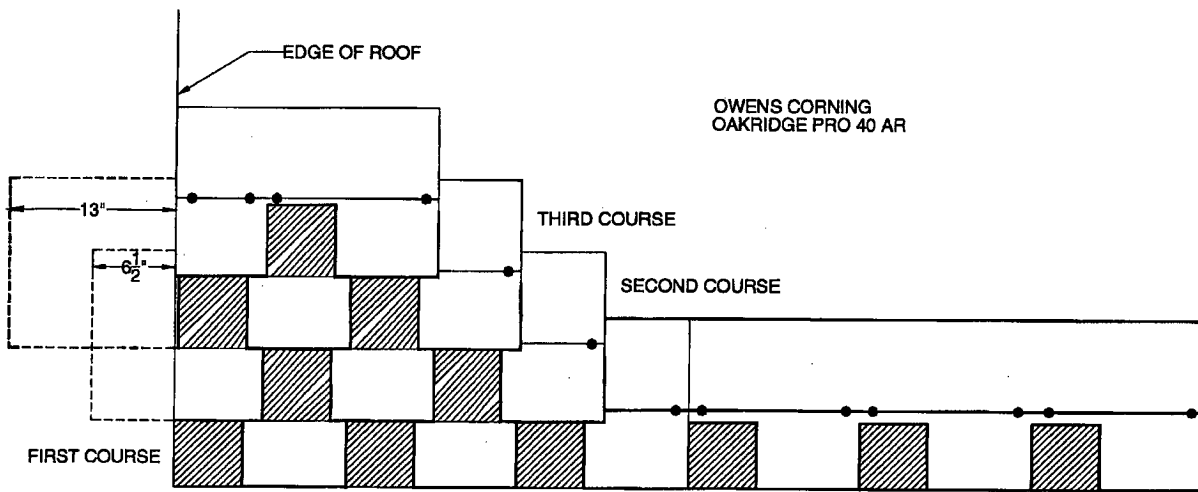
8.1 Savannah, GA

8.2 Medina, OH

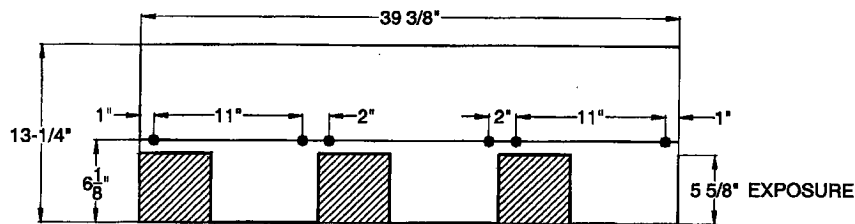
8.3 Jacksonville, FL

8.4 Irving, TX

**DETAIL A**



**DETAIL B**



**END OF THIS ACCEPTANCE**



RIDGE VENT



BUILDING CODE COMPLIANCE OFFICE (BCCO)  
PRODUCT CONTROL DIVISION

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

## NOTICE OF ACCEPTANCE (NOA)

---

**Owens Corning**  
**One Owens Corning Parkway**  
**Toledo, OH 43659**

### SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

### DESCRIPTION: VentSure Ridge Vent

**LABELING:** Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

**RENEWAL** of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

**TERMINATION** of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

**ADVERTISEMENT:** The NOA 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 NOA is displayed, then it shall be done in its entirety.

**INSPECTION:** A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This consists of pages 1 through 4.

The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 02-0129.06  
Expiration Date: 03/07/07  
Approval Date: 03/07/02  
Page 1 of 4



## ROOFING ASSEMBLY APPROVAL

**Category:** Roofing  
**Sub-Category:** 07720 Static Roof Vent  
**Materials:** Plastic

### TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
Vent Sure Standard	11-1/4" wide, 1 high, lengths of 4 , 8 & 20	PA 100(A)	Ridge ventilation system.
Vent Sure Low Profile	11-1/4" wide, 5/8 high, lengths of 4 , 8 & 20	PA 100(A)	Ridge ventilation system.
Vent Sure Ridge Vent	11-1/4" wide, 5/8 high, lengths of 4 & 8	PA 100(A)	Ridge ventilation system.
Vent Sure Rigid Roll	11-1/4" wide, 5/8 high, lengths of 20 & 50	PA 100(A)	Ridge ventilation system.

### TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>	<u>Manufacturer</u>
Asphalt Roof Cement		ASTM D 4586	Asbestos-free, asphalt based roof cement.	generic
Asphalt Primer		ASTM D 41	Asphalt Primer	generic
Roofing Nails	Min. #12 x 1 1/4"	PA 114	Corrosion resistant annular ring shank nails	generic
Sheet Metal Screws	Min. #10 x 1/2"	PA 114	Sheet metal screw	generic



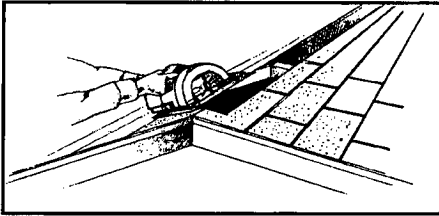
NOA No.: 02-0129.06  
Expiration Date: 03/07/07  
Approval Date: 03/07/02  
Page 2 of 4

## APPROVED APPLICATIONS

**Tradename:** Vent Sure Standard, Vent Sure Low Profile, Vent Sure Ridge Vent & Vent Sure Rigid Roll

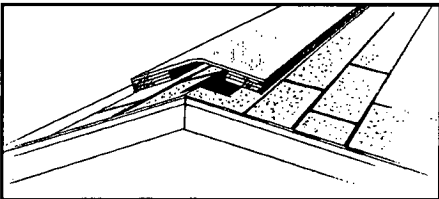
**System Type A:** Mechanical attachment of ridge vent system over composition shingles.

### Cutout:

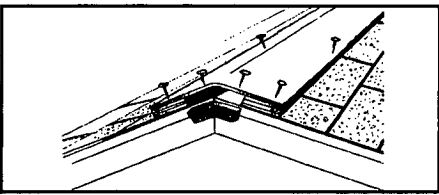


1. Determine whether the rafters are truss or ridgepole construction. Cut sheathing 2 (truss) or 3-1/2 (ridge pole) wide slot (1 truss or 1-3/4 ridge pole on each side) of the ridge(s). A minimum of 6 must be left uncut on each end of the ridge. Once the slot is cut and any overlapping shingles covering the ridge are trimmed and removed, the ridge is ready for vent installation.

### Installation:

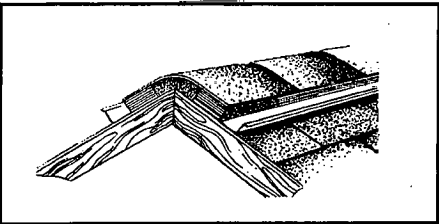


2. Place the Vent Sure vent, routed side down along entire length of slot also covering the 6 minimum uncut ridge on both ends. Multiple lengths of vent can be joined by butting them together.

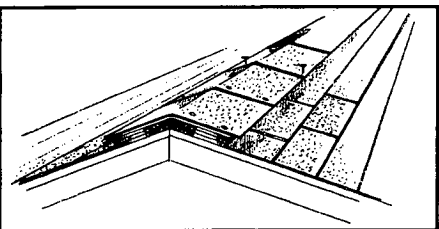


3. Pull apart a 3 or 5-1/4 precut section of the foam endcap. Using construction adhesive or sealant caulk, insert the endcap into the end of the vent. Using four (4) 2 galvanized roofing nails, attach vent to the roof deck by driving a nail in each of the two corners on both ends of the vent, and a nail at each side through the foam cap.

**Note: The wind deflector is not required for the Vent Sure Ridge Vent and Rigid Roll.**



4. Slide wind deflector between the vent and the roof shingle until the edge of the two placement notches align with edge of vent. Drive 2 additional 2 roofing nails on each side of the vent to hold the deflector in place. If the 96 or longer vent is being installed, then repeat this process along the entire length of the vent.



5. After vent has been installed, cut ridge shingles, preform, and nail with roofing nails in a common overlapping pattern. Nails should be approximately 5 apart and long enough to penetrate the wood roof deck at least 1/2". Repeat this procedure until vents have been installed over all roof ridges.

**Net Free Area:** Refer to manufacturers published literature

**Minimum Slope:** 3:12



NOA No.: 02-0129.06  
Expiration Date: 03/07/07  
Approval Date: 03/07/02  
Page 3 of 4

**LIMITATIONS:**

1. Refer to applicable building codes for required ventilation.
2. Ridge vent ventilators shall not be installed on roof mean heights greater than 33 ft.

**EVIDENCE SUBMITTED:**

<u>Test Agency/Identifier</u>	<u>Name</u>	<u>Report</u>	<u>Date</u>
Architectual Testing Inc.	PA 100(A)	01-30306.02	02/13/98
Architectual Testing Inc.	PA 100(A)-95	01-30306.03	02/13/98
Celotex Corporation	ASTM D 635-91	258200B	08/18/97
Celotex Corporation	ASTM D 1929-91	258200A	08/15/97
SGS US Testing Company Inc.	ASTM D 2843-93	122568	09/10/97
Omega Point Laboratories, Inc.	ASTM D 1929-91	163332-109020	06/11/01
	ASTM D 635-98	163332-109022	06/11/01
	ASTM D 2843-93	163332-109021	07/11/01

**END OF THIS ACCEPTANCE**



NOA No.: 02-0129.06  
Expiration Date: 03/07/07  
Approval Date: 03/07/02  
Page 4 of 4



**TOWN OF SEWALL'S POINT**

One South Sewall's Point Road  
Sewall's Point, Florida 34996  
(772) 287-2455

7043

**CORRECTION NOTICE**

ADDRESS: 4 S. VIA LUCINDIA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

ROOF SHEATH.

REPLACE DELAMINATED PLYWOOD SHEATHING. 3 SHEETS

NAILING @ EDGES SHOULD BE 4-6 IN. ON CENTER & 8" O.C. IN THE FIELD. W/ 2" RING SHANK NAIL.

You are hereby notified that no work shall be concealed upon these premises until the above violations are corrected. When corrections have been made, call for an inspection.

DATE: 12/1

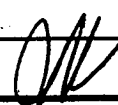
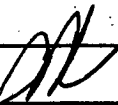
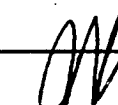
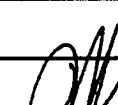
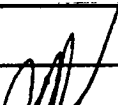
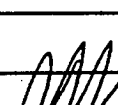
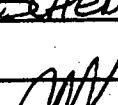
INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri DEC 1, 2004 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7043	SWEENEY	ROOF SHEATHING	FAIL	
7	45 VIA LUCINDIA O/B			INSPECTOR: 
7051	SCHERUENGA	POOL PLUMBING IN	FAIL	
4	110 ABBIE COURT ADVANTAGE POOLS			INSPECTOR: 
6955	WITTMAN	FENCE	PASS	CLOSE
8	13 RIVERVIEW O/B	PERMIT ON FRONT DOOR		INSPECTOR: 
7029	SCHERER	FENCE REPAIR	PASS	CLOSE
9	2 COPAIDE O/B			INSPECTOR: 
6551	LANGER	LATH	PASS	
12	3 LOFTING WAY			INSPECTOR: 
TREES	GREENICZ/WOOD	TREE	PASS	
5	15 LANTANA			INSPECTOR: 
4812	MADER	UNDERGROUND	—	WILL RESCHEDULE
3	106 ABBIE CT. PARADIGM PLUMBING	SEWER LINE TO TANK		INSPECTOR: 
OTHER: _____				



7043

**TOWN OF SEWALL'S POINT**

One South Sewall's Point Road  
Sewall's Point, Florida 34996  
(772) 287-2455

**CORRECTION NOTICE**

ADDRESS: 4 S. VIA LUCINDIA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

TINTAG METAL  
SKYLIGHTS NEED TO BE  
ANCHORED PER MANUFACTURERS  
DIRECTIONS-

NAIL DRIP EDGE @ 4"-6" OC,

You are hereby notified that no work shall be concealed upon these premises until the above violations are corrected. When corrections have been made, call for an inspection.

DATE: 2/2

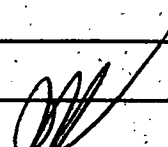
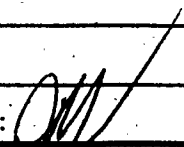
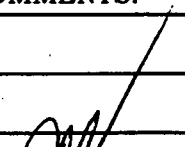
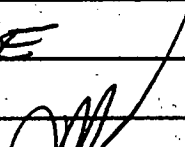
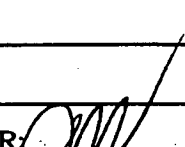
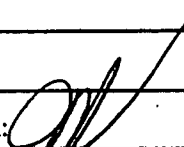
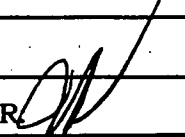
INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri FEB 2, 2005 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7234	JANSON	FINAL A/C 6	FAIL	
2	132 S. RIVER RD HONEST AIR			INSPECTOR: 
7202	BABBITT	DOCK FINAL	FAIL	
4	76 S. SEWALLS Pt <del>BB</del> HAYMES			INSPECTOR: 
6741	OSTEEN	ELEC ROUGH	PASS	
5	1 RIDGEVIEW ANGUS ENTERPR.	AC ROUGH FRAMING	PASS PASS	INSPECTOR: 
7164	WILCOX	FENCE REPAIR	PASS	CLOSE
3	95 S. RIVER RD ROOSTH CONST			INSPECTOR: 
7210	WILCOX	FRAMING	FAIL	
3	95 S. RIVER RD ROOSTH CONST.	PORECH + WINDOW REPAIR		INSPECTOR: 
7253	FLAUGH	DEYN	PASS	
9	14 N. RIVER ROAD DENEMARK			INSPECTOR: 
7043	GOLNIK	RE ROOF	FAIL	
7	4 S. VIA LUCINDIA O/B			INSPECTOR: 

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

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri FEB 4, 2005 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7166	JAWORSKY	FINAL ROOF	PASS	CLOSE
8	4 PINEAPPLE LA O/B	(LATE)		INSPECTOR:
7258	BEHRINGER	PATIO SLAB	FAIL	
13	18 INDIANUCIE PKY DETOMAS CONCRETE			INSPECTOR:
7111	PALM ROW	DOCK	PASS	CLOSE
4	120 S. SEWALL'S J & B BOAT LIFT			INSPECTOR:
7108	WINSLOW	TINTAG METAL		Reschedule Mon
	10 S. SEWALL'S PT PACIFIC ROOFING			INSPECTOR:
7202	BABBITT	DOCK FINAL	PASS	CLOSE
6	76 S. SEWALL'S PT O/B			INSPECTOR:
Tree	SCHNABEL	TREE	PASS	
3	122 S. SEWALL'S			INSPECTOR:
7043	SWEENEY	TINTAG + METAL	PASS	
9	4 S. VIA LUCINDIA O/B	SKYLIGHT SCREWS		INSPECTOR:
OTHER:	TREE RIGHT TO 8	TREE PALM COURT	PASS	



**FRANK SWEENEY-GOLNIK**

4 South via Lucindia  
Stuart, FL 34996-6410

-----  
Telephone (772) 781-6316  
Cell Phone (772) 215-6673  
Fax (772) 781-6363  
E-Mail: fsonline@adelphia.net

**Via FAX (772) 220-4765**

**Thursday, July 28, 2005**

**Mr. Philip Wintercorn,  
Building Inspector  
Town of Sewall's Point**

**Final Roof Inspection Request**

**Dear Sir,**

**My roof is ready for the final Re-Roofing Inspection. If I am not mistaken, inspections may be made on Friday Mornings. A ladder is in place in the front of the house for roof access, as always.**

**Permits and other documents will be left hanging in a plastic zip-lock bag on the front entrance door for the inspector.**

**Permit No. 7043  
Owner/Builder: Sweeney-Golnik  
Type: ReRoof  
Subdivision: Lucindia  
Lot: 29  
Single Family Residence  
Parcel Control No: 0138410070000029040000**

**Thank you.**

**Frank Sweeney-Golnik**



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 12/8, 2024 Page 1 of    

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7068	HELFMAN	GARAGE FINAL	PASS	CLOSE
8	8 RIDGELAND O/B			INSPECTOR:
7074	MOFFAT	ROOFRIPAR FINAL	PASS	CLOSE
1	1 MELODY LANE O/B			INSPECTOR:
	WINSLOW	FINAL A/C/D	FAIL	
9	10 S. SEWALL'S Pt KRAUSS + CRANE			INSPECTOR:
7011	SCHRAEDER/D'ALEX.	FENCE FINAL	PASS	CLOSE
2	4 EMARITA STUART FENCE	(Permit on left gate)		INSPECTOR:
7047	SCHRAEDER/D'AL	FINAL LATTICE STRUCTURE	PASS	CLOSE
2	4 EMARITA GULFSTREAM			INSPECTOR:
16660	ELDER	HARD PLANK SIDING	PASS	CLOSE
3	12 EMARITA O/B			INSPECTOR:
6882	ELDER	REEROOF FINAL	PASS	CLOSE
3	12 EMARITA O/B			INSPECTOR:

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

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

### TOWN OF SEWALL'S POINT

Date 11/9/04

BUILDING PERMIT NO. 7042

Building to be erected for SUSAN - GOLNIK Type of Permit REPAIR FENCE

Applied for by O/B (Contractor) Building Fee \_\_\_\_\_

Subdivision LUCINDIA Lot 29 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 4 S, VIA LUCINDIA Impact Fee NIC

Type of structure SPK A/C Fee HURRICANE

Parcel Control Number: \_\_\_\_\_ Electrical Fee DAMAGE

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

0138410070000029040000 Roofing Fee \_\_\_\_\_

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

Total Construction Cost \$ 250.00 TOTAL Fees \_\_\_\_\_

Signed [Signature] Applicant Signed [Signature] Town Building Official

## PERMIT

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> BUILDING         | <input type="checkbox"/> ELECTRICAL          | <input type="checkbox"/> MECHANICAL       |
| <input type="checkbox"/> PLUMBING         | <input type="checkbox"/> ROOFING             | <input type="checkbox"/> POOL/SPA/DECK    |
| <input type="checkbox"/> DOCK/BOAT LIFT   | <input type="checkbox"/> DEMOLITION          | <input checked="" 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	_____

RECEIVED

NOV 09 2004

Date: 11-08-04

Town of Sewall's Point BUILDING PERMIT APPLICATION

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

OWNERTITLEHOLDER NAME: FRANK SWEENEY - GDLN11C Phone (Day) 781-6316 (Fax) 781-6363

Job Site Address: 4 SOUTH VIA LUCINDIA City: STUART State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) LUCINDIA - LOT 29 Parcel Number: 01-38-41-007-000-00290-4

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

Description of Work To Be Done: RESETTING EXISTING FENCE / STANDING BUT CROOKED

WILL OWNER BE THE CONTRACTOR?:

YES NO

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

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 250 (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: \_\_\_\_\_

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

ENGINEER \_\_\_\_\_ Lic.#: \_\_\_\_\_ Phone Number: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_ Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

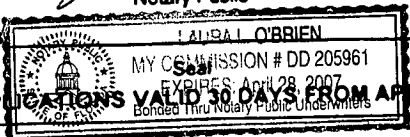
I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, MECHANICAL, SIGNS, POOLS, WELLS, FURNACE, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACCESSORY BUILDING, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS. CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: 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) [Signature] State of Florida, County of: MARTIN This the 9th day of NOVEMBER, 2004 by FRANK SWEENEY - GDLN11C who is personally known to me or produced as identification. [Signature]

CONTRACTOR SIGNATURE (required) \_\_\_\_\_ On State of Florida, County of: \_\_\_\_\_ This the \_\_\_\_\_ day of \_\_\_\_\_, 2004 by \_\_\_\_\_ who is personally known to me or produced as identification. \_\_\_\_\_ Notary Public

My Commission Expires: \_\_\_\_\_ Notary Public



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

**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: FRANK SWEENEY-GOLNIK Date: 11-8-07

Signature: 

Address: 4 SOUTH VIA LUCINDIA

City & State: STUART, FL 34996-6410

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

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00



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

TAX FOLIO # 1-38-41-007-000-00790-4000

**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):

4 VIA LUCINDA SOUTH

GENERAL DESCRIPTION OF IMPROVEMENT: STRAIGHTEN FENCE - REPAIR GATES

OWNER: FRANK SWANEY - GORNIK

ADDRESS: 4 VIA LUCINDA SOUTH

PHONE #: 781-6316

FAX #: 781-6363

CONTRACTOR: OWNER

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

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

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

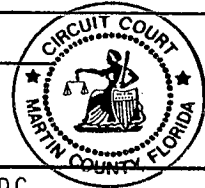
SURETY COMPANY(IF ANY) \_\_\_\_\_

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

PHONE # \_\_\_\_\_

STATE OF FLORIDA  
MARTIN COUNTY

FAX #: 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 Phoenix D.C.

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

DATE 11-8-04

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

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

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR 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 DATE 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 8th DAY OF Nov

2004 BY Frank Gornik

PERSONALLY KNOWN   
PRODUCED ID   
TYPE OF ID FCID

[Signature]

NOTARY SIGNATURE

Kim Patterson  
MY COMMISSION # DD169952 EXPIRES  
March 11, 2007  
BONDED THRU TROY FAIN INSURANCE, INC.

452-265-47-380-0

INSTR # 1791172 OR BK 01954 PG 0444 RECD 11/08/2004 04:02:31 PM  
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix

ORIGINAL FOR MARTIN COUNTY

REAL ESTATE

I.D. NUMBER: 1-38-41-007-000-00290.40000  
ASSESSED VALUE: 221,342 EXEMPTIONS:

2001 TAX DISTRICT: 2200  
25,000 TAXABLE VALUE: 196,342

COUNTY	COUNTY-GENERAL FUND-OP	5.4910	1,078.11
	CNTY-F.I.T. BOND	.0620	12.17
	CNTY-GOVT BONDS 1986	.2920	57.33
	CNTY-BONDS LANDS FOR YOU	.1570	30.83
SCHOOL	SCHOOL-GENERAL FUND	8.4150	1,652.21
CHLD SVC	CHILDRENS SERVICES ORDNCS	.3143	61.71
F.I.N.D.	FL-INLAND NAVIGATION DIST	.0385	7.56
CITY	SEWALLS POINT	1.8890	370.89
S.F.W.M.	SOUTH FLA WATER MANAGEMNT	.6970	136.85

GENE  
SIMMONS

TOTAL MILLAGE 17.35580 AD VALOREM TAXES 3,407.66

COMBINED TAXES & ASSESSMENTS TOTAL: 3,407.66

EXEMPTION: HX-JTRS 25,000

01 38 41  
LUCINDIA LOT 29 OR 342/1077

PROPERTY  
ADDR: 4 VIA LUCINDIA SO SP

#4093  
11/11/01

1-38-41-007-000-00290.40000 2001  
SWEENEY-GOLNIK, FRANK  
4 VIA LUCINDIA DR S  
STUART FL 34996-6410

~~NOV 1-NOV 30~~ 3,271.35    DEC 1-DEC 31 3,305.43    JAN 1-JAN31 3,339.51    FEB 1-FEB28 3,373.58    MAR 1-MAR 31 3,407.66    DELINQUENT ON APRIL 1, 2002



Prepared by:

Christopher J. Twohey, Esq.  
BAUER & TWOHEY, P.A.  
451 SE Riverside Drive  
Stuart, Florida 34994  
(561) 221-8013

Parcel ID Number: **01-38-41-007-000-0029.0-40000**

Grantee #1 TIN: 122-44-3022

# Warranty Deed

This Indenture, Made this **31st** day of **January**, 2001 A.D., **Between**  
**Timothy P. Garvey and Bonnie S. Garvey, husband and wife**

of the County of **Martin**, State of **Florida**, grantors, and  
**Frank Sweeney-Golnik, a single man**

whose address is: **13125 South Indian River Drive, Jensen Beach, FL 34957**

of the County of **St. Lucie**, State of **Florida**, grantee.

**Witnesseth** that the GRANTORS, for and in consideration of the sum of

-----**TEN DOLLARS (\$10)**----- DOLLARS,  
and other good and valuable consideration to GRANTORS in hand paid by GRANTEE, the receipt whereof is hereby acknowledged, have granted, bargained and sold to the said GRANTEE and GRANTEE'S heirs, successors and assigns forever, the following described land, situate, lying and being in the County of **Martin** State of **Florida** to wit:

**Lot 29, LUCINDIA, according to the map or plat thereof as recorded in Plat Book 3, Page 130, Public Records of Martin County, Florida.**

**SUBJECT TO:**

1. Taxes for the year 2001 and all subsequent years;
2. Zoning restrictions, prohibitions and other requirements imposed by governmental authority;
3. Restrictions, and matters appearing on the plat or otherwise common to the subdivision; and
4. Public utility easements of record, if any.

and the grantors do hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

**In Witness Whereof**, the grantors have hereunto set their hands and seals the day and year first above written.

Signed, sealed and delivered in our presence:

\_\_\_\_\_  
Printed Name:  
Witness as to Both

\_\_\_\_\_  
**Timothy P. Garvey**  
P.O. Address: 5685 Winged Dove Drive, Stuart, FL 34997 (Seal)

\_\_\_\_\_  
(Seal)

Witness as to Both

BONNIE S. GARVEY  
P.O. Address: 5685 Winged Dove Drive, Stuart, FL 34997

STATE OF Florida  
COUNTY OF Martin

The foregoing instrument was acknowledged before me this 31st day of January, 2001 by  
Timothy P. Garvey and Bonnie S. Garvey, husband and wife

who are personally known to me or who have produced their Florida driver's license as identification.

Printed Name: \_\_\_\_\_  
Notary Public \_\_\_\_\_  
My Commission Expires:

SWEENEY2

Laser Generated by © Display Systems, Inc., 2000 (863) 763-5555 Form FLWD-1

Town of Sewall's Point

GOLNIK

BUILDING PERMIT APPLICATION

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

Owner or Titleholder Name: FRANK SWEENEY, - City: STUART State: FL Zip: 34994

Legal Description of Property: LOT 29, LUCINDIA BOCK 3, P130 Parcel Number: 29

Location of Job Site: 4 S. VIA LUCINDIA Type of Work To Be Done: REPLACE EXISTING

FENCE - IN DISREPAIR - ROTTING WOOD WITH VINYL

CONTRACTOR/Company Name: SELF Phone Number: \_\_\_\_\_

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

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

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

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

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

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

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

Carport: \_\_\_\_\_ 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: \$3500 - 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: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

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) FRANK GOLNIK State of Florida, County of: MARTIN This the 4th day of APRIL, 2002 by FRANK GOLNIK who is personally known to me or produced F.L. as identification. Joan H. Barrow

CONTRACTOR SIGNATURE (Required) On State of Florida, County of: \_\_\_\_\_ This the \_\_\_\_\_ day of \_\_\_\_\_, 2002 by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_ as identification. \_\_\_\_\_

Notary Public Joan H. Barrow MY COMMISSION # CC763645 EXPIRES November 30, 2002

Notary Public My Commission Expires: \_\_\_\_\_



BOONED THRU TROY FAIN INSURANCE, INC.

Seal

Seal

# PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR A FENCE

**IMPORTANT NOTICE:** All items listed below must accompany your permit application.  
No application will be accepted unless all items that are applicable are submitted.

**Application form must contain the following information:**

1. Property Appraisers Parcel Number or Property Control Number
2. Legal Description of property (Can be found on your deed survey or Tax Bill)
3. Contractors name, address, phone number and license numbers.
4. Name all sub-contractors (properly licensed)
5. Architects or Engineers name, address, & phone number.
6. Estimated cost of construction.
7. Original signature of owner and notarized
8. Original signature of Contractor and notarized.

## Submittals (2 copies)

1. Current survey (boundary & topographic) containing the following information:
  - a. Legal Description of Lot
  - b. Lot dimensions and bearings
  - c. Street and Waterway names
  - d. Easements
  - e. ROW's
  - f. Canals, Ponds, or Riverfront locations
  - g. Location of existing and proposed fences
  - h. Description of type and height of fence at all locations
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants
5. Application for tree removal or relocation (attach tree survey and removal or relocation plan)
6. A certified copy of the Notice of Commencement for any work over \$2500.00
7. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
8. Copy of Workmen's Compensation
9. Copy of Liability Insurance

**ALL INFORMATION AND DOCUMENTS MENTIONED ABOVE  
ARE INCLUDED IN THE MY PERMIT APPLICATION PACKAGE**

  
\_\_\_\_\_  
(SIGNATURE OF APPLICANT)

DATE SUBMITTED: \_\_\_\_\_

4-4-2002

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

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

TAX FOLIO # \_\_\_\_\_

**NOTICE OF COMMENCEMENT**

STATE OF \_\_\_\_\_

COUNTY OF \_\_\_\_\_

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):**

GENERAL DESCRIPTION OF IMPROVEMENT: REPLACING EXISTING FENCE

OWNER: FRANK SWEENEY - GOLNIK

ADDRESS: 4 SOUTH VIA LUCINDIA

PHONE #: 781-6316

FAX #: 781-6363

CONTRACTOR: \_\_\_\_\_

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

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

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

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

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

PHONE # \_\_\_\_\_

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

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

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

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

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

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

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR 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 DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

  
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS \_\_\_\_\_ DAY OF \_\_\_\_\_ 19\_\_\_\_ BY \_\_\_\_\_

OR PERSONALLY KNOWN \_\_\_\_\_  
PRODUCED ID \_\_\_\_\_  
TYPE OF ID \_\_\_\_\_

\_\_\_\_\_  
NOTARY SIGNATURE

# 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: FRANK SWEENEY-GOLMK Date: 4-4-2002

Signature: 

Address: N SOUTH VIA LUCINDIA

City & State: STUART, FL 34996

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

This form is for all permits except electrical.

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

NOT APPLICABLE

Permit # \_\_\_\_\_

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

This application shall include a written statement giving reasons for removal, relocation, or replacement and a site plan which shall include the dimensional location on a survey, scale drawing, or aerial photograph, superimposed with lot lines to scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.

Owner \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

Number of trees to be removed (list kinds of trees) \_\_\_\_\_

Number of trees to be relocated within 30 days (no fee) (list kinds of trees): \_\_\_\_\_

Number of trees to be replaced: \_\_\_\_\_ (list kinds of trees): \_\_\_\_\_

Permit Fee \$ \_\_\_\_\_

\$15.00

(No permit fee for trees which are relocated on property or lie within a utility easement and are required to be removed in order to provide utility service, nor for a tree which is dead, diseased, injured or hazardous to life or property.)

Plans approved as submitted \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

Permit good for one year. Fee for renewal of expired permit is \$5.00.

Signature of applicant \_\_\_\_\_ Plans approved as marked \_\_\_\_\_

Approved by Building Inspector \_\_\_\_\_ Date submitted: \_\_\_\_\_

Completed \_\_\_\_\_  
Date \_\_\_\_\_ Checked by \_\_\_\_\_

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT A FEE. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

THE FOLLOWING TREES MUST BE REMOVED BEFORE CONSTRUCTION BEGINS: BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND MELALEUCA

## PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR TREE REMOVAL AND RELOCATION

**IMPORTANT NOTICE:** All items listed below must accompany your permit application. No application will be accepted unless all items that are applicable are submitted.

**Application form must contain the following information:**

1. Property Appraisers Parcel Number or Property Control Number
2. Legal Description of property (Can be found on your deed survey or Tax Bill)
3. Contractors name, address, phone number and license numbers.
4. Name all sub-contractors (properly licensed)
5. Architects or Engineers name, address, & phone number.
6. Original signature of owner and notarized
7. Original signature of Contractor and notarized.

**Submittals (2 copies)**

1. Current survey (boundary & topographic) containing the following information:
  - a. Legal Description of Lot
  - b. Lot dimensions and bearings
  - c. Street and Waterway names
  - d. Easements
  - e. ROW's
  - f. Canals, Ponds, or Riverfront locations
  - g. Location of all trees including type and size
  - h. Schedule of all trees to be removed, relocated or replaced
2. Proof of ownership (deed or tax recpt.)
3. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
4. Copy of Workmen's Compensation
5. Copy of Liability Insurance

**ALL INFORMATION AND DOCUMENTS MENTIONED  
ABOVE ARE INCLUDED IN THE MY PERMIT  
APPLICATION PACKAGE**

---

(SIGNATURE OF APPLICANT)

DATE SUBMITTED:

---



TOWN OF SEWALL'S POINT

Date 4/8/02

BUILDING PERMIT NO. 5760

Building to be erected for MR SWEENEY

Type of Permit FENCE

Applied for by MR. SWERNEY

(Contractor) Building Fee 30<sup>00</sup>~~xx~~

Subdivision LUCINDIA Lot 29 Block \_\_\_\_\_

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

Address 4 S. VIA LUCINDIA

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

Type of structure SFR

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

Parcel Control Number:

138410070000029040000

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

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

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

Amount Paid 30<sup>00</sup>xx Check # 4163 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 3500<sup>00</sup>xx

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 \_\_\_\_\_

5/6/02

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri MAY. 6, 2004<sup>2</sup> Page     of    .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5760	SWBENY 4 S. VIA LUCINDA. SWEENEY.	FENCE FINAL	Passed	INSPECTOR: <u>h</u>
5700.	D'ALESSANDRO. ABBIE CT FRAZER.	ROUGH PLUMBING	Passed	INSPECTOR: <u>h</u>
—	WILLIAMS 21 CASTLE HILL WAY	TREE INSPECTION	OK	INSPECTOR: <u>h</u>
—	TENNY 10 S SEWALLS PT RD.	TREE INSPECTION	OK	INSPECTOR: <u>h</u>
				INSPECTOR: <u> </u>
				INSPECTOR: <u> </u>
				INSPECTOR: <u> </u>
				INSPECTOR: <u> </u>

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

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 9/9, 2005 Page 1 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7691	THOMAS	FINAL ROOF	PASS	CLOSE
2	10 PALM ROAD FEAZEL ROOFING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	SIMPSON	TREE	PASS	
1	140 S. SEWALLS PT	FIRST PLEASE DOG		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7755	BARILE	DRY-IN	PASS	
7	17 FIELDWAY DR SUPERIOR ROOFING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	CONWAY	TREE	PASS	
8	4 OAK HILL WAY			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7724	SWEENEY GONNIK	FINAL GARAGE DOOR	PASS	CLOSE
4	4 S. VIA LUCINDIA BROTEN GARAGE			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7511	HART	FINAL RENOV.	PASS	CLOSE
9	113 N. SEWALLS PT BLACK DIAMOND			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7712	THORNE	FINAL ROOF	FAIL	
10	22 PERRIWINKLE LA DUREN			INSPECTOR: <i>[Signature]</i>
OTHER:	82 <del>SEWALLS PT</del> <del>RES</del> ROOF WALK W/O PERMIT			NO ACTIVITY ON SITE - <i>[Signature]</i>

~~82 S SEWALLS PT RD~~ INSPECTION LOG.xls  
 HOLE IN HOUSE

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

### TOWN OF SEWALL'S POINT

Date 8/10/05

BUILDING PERMIT NO. 7724

Building to be erected for SWEENEY

Type of Permit Garage Door

Applied for by BROWN GARAGE DOOR SALES (Contractor)

Building Fee 35.00

Subdivision LUCINDIA Lot 29 Block \_\_\_\_\_

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

Address 45 VIA LUCINDIA

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

Type of structure SFR

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

Parcel Control Number:

138410070000029040000

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

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

Amount Paid 35.00 Check # 2596 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

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

Total Construction Cost \$ 1879.00

TOTAL Fees 35.00

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
- GARAGE DOOR

## 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 \_\_\_\_\_

RECEIVED  
7/27/05

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

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

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

OWNER/TITLEHOLDER NAME: Sweeney-GOLNIK Phone (Day) (772) 781-6316 (Fax) \_\_\_\_\_

Job Site Address: 4 Via Lucindia Dr. S. City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Lucindia Lot 27 OR 342/1077 Parcel Number: 01-38-41-007-000-00290-4

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

Description of Work To Be Done: Remove & replace (1) 11x7 garage door

WILL OWNER BE THE CONTRACTOR?:

YES

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 1879.00

(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: Broten Garage Door Sales Phone (954) 946-5555 Fax (954) 946-5587

Street: 886 S. Andrews Ave City: Pompano Beach State: FL Zip: 33069

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Martin County License Number: SP01150

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: \_\_\_\_\_

Carpport: \_\_\_\_\_ 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: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2001  
National Electrical Code: 2002 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)  
[Signature]

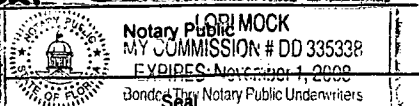
State of Florida, County of: Broward

This the 26 day of July, 2005

by Frank Sweeney-Golnik who is personally known to me or produced

as identification. FL DL # G451-265-41-382-0

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



CONTRACTOR SIGNATURE (required)  
[Signature]

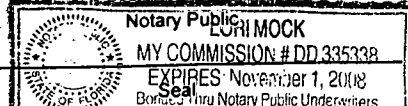
On State of Florida, County of: Broward

This the 26 day of July, 2005

by Steve Kalenich who is personally known to me or produced

As identification.

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



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

PRODUCER (954)724-7000 Keyes Coverage, Inc. 5900 Hiatus Road Tamarac, FL 33321 FAX (954)724-7024	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.
INSURED Broten Garage Door Sales Inc 886 S Andrews Ave Pompano Beach, FL 33069 Fax # 954 946 5587	INSURERS AFFORDING COVERAGE INSURER A: Travelers Insurance Company INSURER B: Hartford Fire Insurance Company INSURER C: Bridgefield Employers Insurance Co INSURER D: INSURER E:

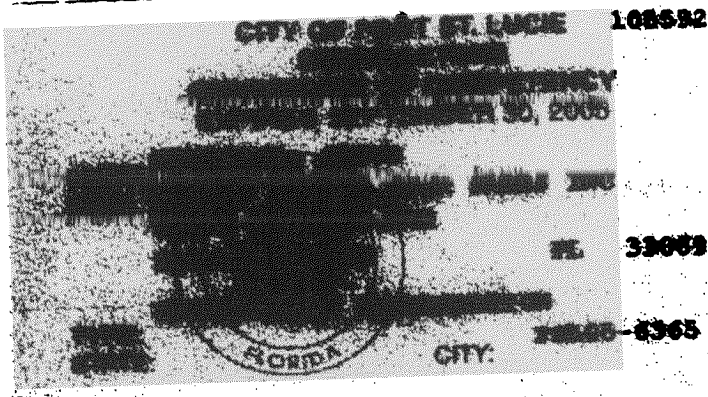
**COVERAGES**

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 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	ADD'L	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	Y630 914K0735 TIL 04	10/01/2004	10/01/2005	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/>	COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 300,000
	<input type="checkbox"/>	CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5,000
	<input checked="" type="checkbox"/>	CONTRACTUAL LIAB				PERSONAL & ADV INJURY \$ 1,000,000
		<input checked="" type="checkbox"/> BROAD FORM PD				GENERAL AGGREGATE \$ 2,000,000
		GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS - COMP/OP AGG \$ 2,000,000
		<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
B		AUTOMOBILE LIABILITY	21UENUV8607	10/01/2004	10/01/2005	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/>	ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/>	ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/>	SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input checked="" type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT \$
		<input checked="" type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY: EA ACC \$
						AGG \$
						EACH OCCURRENCE \$
						AGGREGATE \$
						\$
						\$
						\$
C		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	0196 03760	10/01/2004	10/01/2005	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$ 500,000
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$ 500,000
		OTHER				E.L. DISEASE - POLICY LIMIT \$ 500,000

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

<b>CERTIFICATE HOLDER</b>  TOWN OF SEWALL'S POINT 1 S. SEWALL'S POINT ROAD SEWALL'S POINT, FL 34996	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>10</u> 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 INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE Carey Keyes/KEY19 <i>Carey Keyes</i>
---	---



**Indian River County Contractor Licensing**  
**1840 25th Street, Vero Beach, FL 32960**  
**(561) 567.8000 Ext. 288**  
**GARAGE DOOR CONTRACTOR**

Cert Nbr: 13767 Exp: 7/31/2005 Status: ACTIVE

State Nbr: Exp:

**BROTEN GARAGE DOOR SALES, INC.**

**STEVE KALENICH**

**886 SOUTH ANDREWS AVENUE**

**POMPANO BEACH FL 33069-**

*Wayne A. Russ* **RB**



**MARTIN COUNTY, FLORIDA**  
**Construction Industry Licensing Board**  
**Certificate of Competency**

**GARAGE DOOR**

License Number SP01150 Expires: 30-SEP-05

**KALENICH, STEVE**

**BROTEN GARAGE DOOR SALES INC**

**886 S ANDREWS AVE**

**POMPANO BEACH, FL 33069**



# The Florida Department of Community Affairs Building Code Information System

**SITE NAVIGATION**

- Home
- Florida Building Code
- Manufact. Buildings
- Prototype Building
- Subcategory
- Training
- Product Approval**
- License Search
- Mailing List
- Florida Building Commission

## PRODUCT APPROVAL Product Type Detail

Overview   Product Search   Organization Search   Product Application   View Attachments

User: Public User - Not Associated with Organization -

[Need Help ?](#)

Application #: FL542  
 Date Submitted: 10/06/2003  
 Product Manufacturer: Clopay Building Products Company  
 Address/Phone/email: 8585 Duke Blvd.  
 Mason, OH 45040

Category: Exterior Doors

Subcategory: Sectional

Evaluation Method: Evaluation Report from a Florida Registered Architect or Florida Professional Engineer

Referenced Standards from the Florida Building Code:

Section	Standard	Year
FBC 1606	ASTM E-330	1997
FBC 1626	TAS-201	2001
FBC 1619	TAS-202	2001
FBC 1625	TAS-203	2001
FBC	ANSI/DASMA	2002
1707.4.3.1	108	
FBC 1606	ASCE7	1998

Florida Engineer or Architect Name: Gary Pfuehler, P.E.

Florida License: PE- 49850

Quality Assurance Entity: Omega Point Laboratories

Gary Pfuehler  
12/12/2003

Mark Westerfield  
mwesterfield@clopay.com

PTID\_542\_T\_1000W3-16  
report.pdf

FILE COPY

Validation Entity: TOWN OF SEWALL'S POINT  
 Date Validated: \_\_\_\_\_

These plans have been reviewed for code compliance

DATE: 7/28/05

Gene Simmons Evaluation/Test Reports Uploaded:

**BUILDING OFFICIAL**  
Gene Simmons



[PTID\\_542\\_T\\_1000W5-09  
report.pdf](#)  
[PTID\\_542\\_T\\_1000W5-16  
report.pdf](#)  
[PTID\\_542\\_T\\_2050W3-09  
report.pdf](#)  
[PTID\\_542\\_T\\_2050W3-16  
report.pdf](#)  
[PTID\\_542\\_T\\_2050W5-16  
report.pdf](#)  
[PTID\\_542\\_T\\_2050W5-16-HY  
report.pdf](#)  
[PTID\\_542\\_T\\_2050W6-09  
report.pdf](#)  
[PTID\\_542\\_T\\_4300W4-09  
report.pdf](#)  
[PTID\\_542\\_T\\_4300W4-16  
report.pdf](#)  
[PTID\\_542\\_T\\_4300W4-18 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_4300W6-09  
report.pdf](#)  
[PTID\\_542\\_T\\_4300W6-16  
report.pdf](#)  
[PTID\\_542\\_T\\_4300W6-18  
report.pdf](#)  
[PTID\\_542\\_T\\_4300W8-09 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_4300W8-16 report  
Rev01.1.pdf](#)  
[PTID\\_542\\_T\\_73W3-16 report.pdf](#)  
[PTID\\_542\\_T\\_73W4-09 report.pdf](#)  
[PTID\\_542\\_T\\_73W4-16 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_73W4-18 report.pdf](#)  
[PTID\\_542\\_T\\_73W5-09 report.pdf](#)  
[PTID\\_542\\_T\\_73W5-16 report.pdf](#)  
[PTID\\_542\\_T\\_73W5-16-HY  
report.pdf](#)  
[PTID\\_542\\_T\\_73W6-09 report.pdf](#)  
[PTID\\_542\\_T\\_73W6-16 report.pdf](#)  
[PTID\\_542\\_T\\_73W6-18 report.pdf](#)  
[PTID\\_542\\_T\\_73W7-09 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_73W7-16 report.pdf](#)  
[PTID\\_542\\_T\\_73W8-09 report.pdf](#)  
[PTID\\_542\\_T\\_94W6-18 report.pdf](#)  
[PTID\\_542\\_T\\_94W7-18 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_94W8-16 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_94W9-09 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_FPA ResiModel Info  
Rev00.pdf](#)  
[PTID\\_542\\_T\\_Residential  
WindCode Installation Instr.pdf](#)  
[PTID\\_542\\_T\\_RH1SW5-09 report  
Rev01.pdf](#)  
[PTID\\_542\\_T\\_RH1SW5-16 report  
Rev01.pdf](#)

PTID\_542\_T\_validation -  
 certification of compliance -  
 residential Rev01.pdf

Installation Documents Uploaded:

Product Approval Method:

Method 1 Option D

Application Status:

Approved

Page:

Page 1 / 9

App/Seq #	Product Model # or Name	Model Description
542.1		Residential WindCode Doors
542.2	W3: 1000, 1001	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.3	W3: 110R, 120R	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.4	W3: 128R	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.5	W3: 183, 187	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.6	W3: 2050, 2051	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Single Car (up to 9'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-20
542.7	W3: 2050, 2051	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.9	W3: 4050, 4051, 4053	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Single Car (up to 9'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-20
542.8	W3: 4050, 4051, 4053	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.10	W3: 42, 48	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.11	W3: 4RST, 6RST, 4RSF, 6RSF	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.12	W3: 52	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.14	W3: 62, 64, 65	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21

542.13	W3: 62, 64, 65	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Single Car (up to 9'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-20
542.15	W3: 73, 94, 1500	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.16	W3: 75, 84A	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.17	W3: DP38, FL38	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Single Car (up to 9'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-20
542.18	W3: DP38, FL38	Double-skin Insulated (exterior skin min 27 ga.; interior skin min 29 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.19	W3: P2GF	Steel Pan (min. 25 ga.) Double Car (9'2" to 16'0" wide) WindCode® W3 Garage Door; Design Pressures: +20/-21
542.20	W4: 110R, 120R	Steel Pan (min. 25 ga.) Single Car (up to 9'0" wide) WindCode® W4 Garage Door; Design Pressures: +25/-32



Copyright and Disclaimer; ©2000 The State of Florida. All rights reserved.

*mgj*

**EVALUATION ENTITY**

Gary Pfuehler, P. E.  
5665 Green Oak Court  
Fairfield, OH 45014

**Product Evaluation Report  
for Florida DCA**

Evaluation Report # 4300W8-16

**MANUFACTURER**

Clopay Building Products Company  
8585 Duke Blvd.  
Mason, OH 45040  
513.770.4800

**Statement of Compliance:**

The Clopay Building Products Company sectional doors as described on the drawings listed below meet the design and test pressures shown. Based on the testing and rational analysis detailed below, this product is evaluated to be in compliance with the following provisions of the Florida Building Code:

- 1601.1 Wind Loads
- 1625 Cyclic Tests for HVHZ
- 1626 Impact Tests for HVHZ
- Other:

**Description of Product:** Double-skin Insulated (exterior skin 27 ga. min.; interior skin 27 ga. min.)  
 Double Car (9'2" to 16' 2" wide) WindCode® W8 Garage Door  
 Design Pressures: +46.6/-52 Test Pressures: +70/-78

**Specific Models and Technical Documentation:**

Model	Test Report	Drawing No.	Comments
4300W8, 4310W8, 4400W8, 4401W8, HDGW8, HDGLW8, 4301W8	ATL- 1027.02-98	101488	Low head room track approved per HETI-03-1340.
66W8, 67W8, 68W8	ATL- 1027.02-98	102068	Low head room track approved per HETI-03-1340.

**Installation requirements:** Installation must be in accordance with manufacturer's installation instructions.

**Limitations and conditions of use:** Jambs, lintels, sills or other structural elements required to prepare openings are not covered. The design of the supporting structural elements shall be the responsibility of the professional of record for the building or structure and in accordance with current building codes for the loads listed on the drawing referenced above.

**Certification of Independence of Evaluation Entity:** I hereby certify that (1) I have no financial interest in Clopay Building Products Company; (2) I am an independent licensed Professional Engineer in the State of Florida; and (3) I comply with the criteria of independence as stated in 9B-72.110 F.A.C.

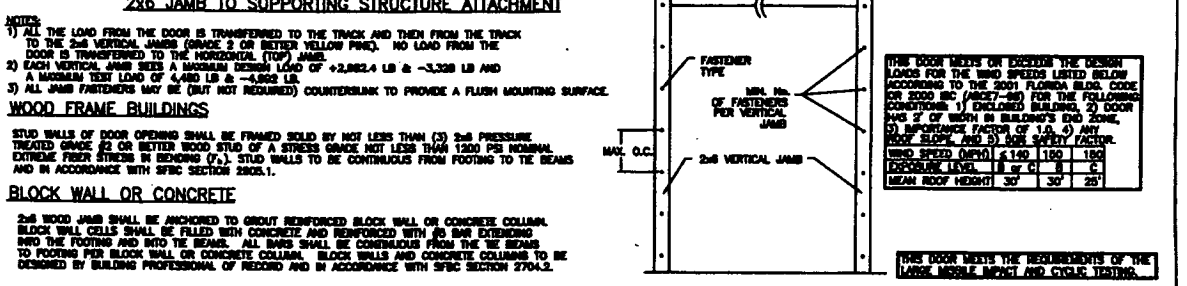
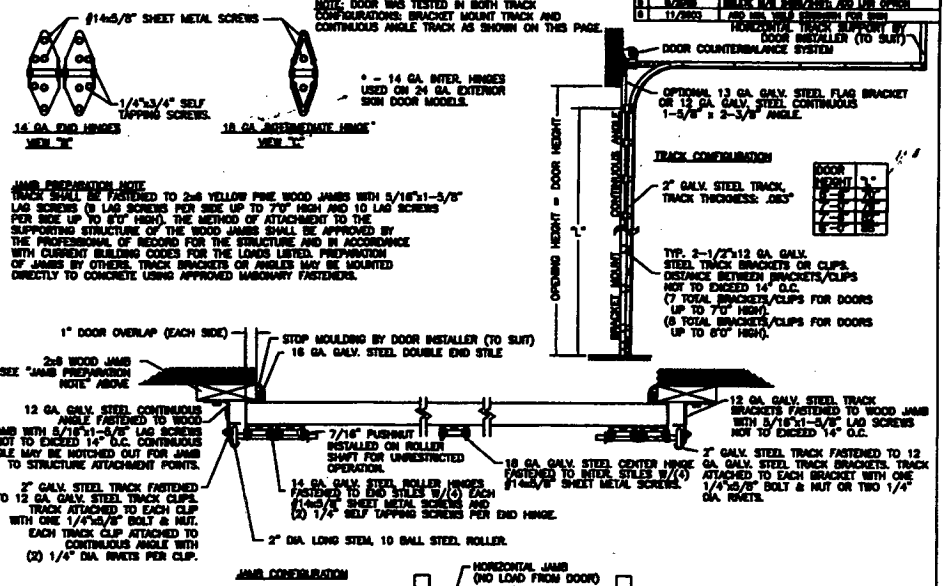
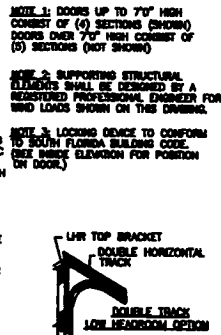
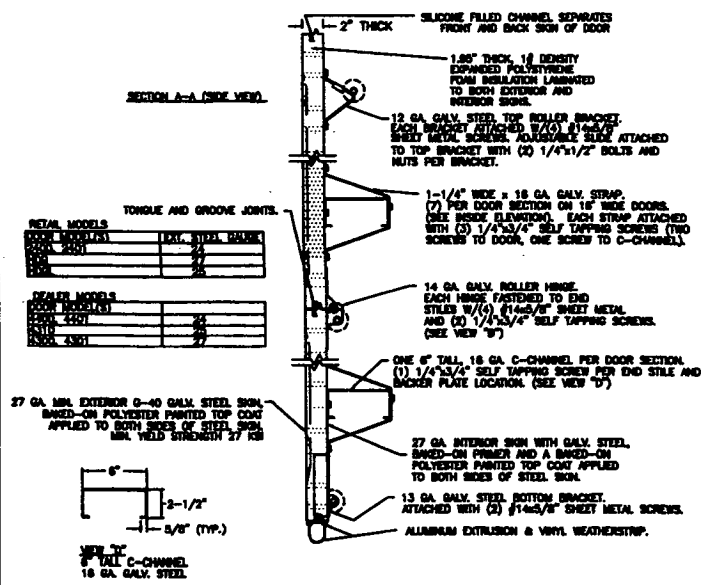
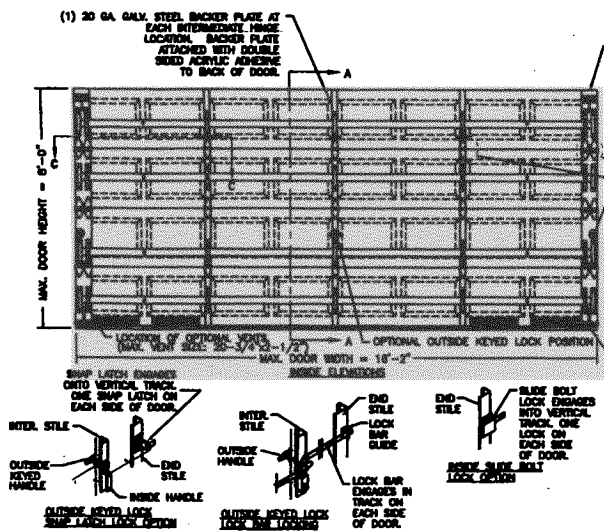
Signature:



Gary Pfuehler, P. E.  
Florida P. E. No. 49850

Date: 00/3/03

MODELS 4300, 4301, 4310, 4400, 4401, HDG, HDGI



2x6 JAMB TO SUPPORTING STRUCTURE ATTACHMENT (NOT TO BE USED FOR ATTACHMENT OF TRACK BRACKETS TO 2x6 VERTICAL JAMBS OR SUPPORTING STRUCTURE)

MARK W. WESTERFIELD, P.E. FLORIDA P.E. #48484, NC P.E. #23632, TEXAS P.E. #91513

BUILDING TYPE	FASTENER TYPE	MIN. NO. OF FASTENERS PER VERTICAL JAMB	MAXIMUM ON CENTER DISTANCE BETWEEN FASTENERS	1" O.D. NUTS REQUIRED?
WOOD FRAME (NON-CONCRETE)	1/2" x 3" LAG SCREW (MIN. 1200 PSI GRADE #2 OR BETTER WOOD STUD)	8	16"	YES
WOOD FRAME (CONCRETE)	1/2" x 3" LAG SCREW (MIN. 1200 PSI GRADE #2 OR BETTER WOOD STUD)	8	16"	NO
CONCRETE COLUMN (2x6 WOOD JAMB)	1/2" x 3" LAG SCREW (MIN. 1200 PSI GRADE #2 OR BETTER WOOD STUD)	8	16"	NO
CONCRETE COLUMN (2x6 WOOD JAMB)	1/2" x 3" LAG SCREW (MIN. 1200 PSI GRADE #2 OR BETTER WOOD STUD)	8	16"	NO

DESIGN LOADS: +48.6 P.S.F. & -52.0 P.S.F.  
TEST LOADS: +70.0 P.S.F. & -78.0 P.S.F.

Glopay Building Products Company	NOTED	DATE	16'2"W x 8'0"H
	6/7/95	DESIGNED BY	MODELS
	KFH	4300/4301/4310/4400/4401 HDG/HDGI	
		101488	

**WORST CASE DESIGN PRESSURE CHART  
RETROFIT GARAGE DOOR  
140 MPH, EXPOSURE C  
BROWARD CO., FLORIDA  
2001 FLORIDA BUILDING CODE (ASCE7-98)**

THE CHARTS BELOW ARE DETERMINED FOR THE WORST CASE SCENERIO, WHERE,

- 1) THE ENTIRE GARAGE DOOR OPENING IS ASSUMED TO BE IN THE END ZONE (ZONE 5) ACCORDING TO ASCE7-98 CALCULATION METHODS.
- 2) SPECIFIC, INDIVIDUAL GARAGE DOOR OPENINGS WILL MOST LIKELY NOT REQUIRE THE OPENING TO BE COMPLETELY IN ZONE 5 BY CALCULATION. THEREFORE INDIVIDUAL CALCULATIONS WILL MOST LIKELY RESULT IN LOWER NEGATIVE DESIGN PRESSURES THAN SHOWN ON THESE CHARTS.
- 3) BASED ON ENCLOSED BUILDING, ANY ROOF SLOPE.
- 4) RESIDENTIAL APPLICATION (IMPORTANCE FACTOR = 1.00)
- 5) REFERENCE: BROWARD COUNTY BOARD OF RULES & APPEALS "FORMAL INTERPRETATION" DATED MAY 10, 2002 ITEM 3b).

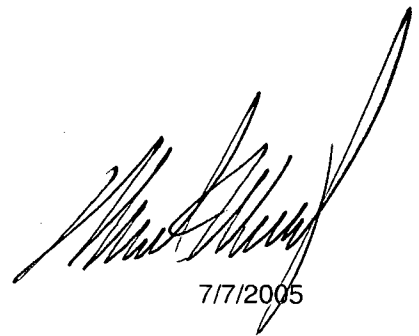
**WORST CASE DESIGN PRESSURES (IN PSF)**

MEAN ROOF HEIGHT	UP TO 15'	16'	17'	18'	19'	20'
8'x7'	+38.0, -47.7	+38.4, -48.3	+38.9, -48.8	+39.3, -49.4	+39.8, -49.9	+40.2, -50.5
8'x8'	+37.6, -47.0	+38.1, -47.5	+38.5, -48.1	+38.9, -48.6	+39.4, -49.2	+39.8, -49.7
9'x7'	+37.7, -47.0	+38.1, -47.6	+38.5, -48.2	+39.0, -48.7	+39.4, -49.3	+39.9, -49.8
9'x8'	+37.3, -46.3	+37.7, -46.8	+38.2, -47.4	+38.6, -47.9	+39.0, -48.5	+39.5, -49.0
<del>16'x7'</del>	<del>+36.1, -43.8</del>	+36.5, -44.4	+36.9, -44.9	+37.3, -45.4	+37.8, -45.9	+38.2, -46.4
16'x8'	+35.7, -43.1	+36.1, -43.6	+36.5, -44.1	+36.9, -44.6	+37.4, -45.1	+37.8, -45.6
18'x7'	+35.7, -43.2	+36.2, -43.7	+36.6, -44.2	+37.0, -44.7	+37.4, -45.2	+37.8, -45.7
18'x8'	+35.4, -42.4	+35.8, -42.9	+36.2, -43.4	+36.6, -43.9	+37.0, -44.4	+37.4, -44.9

MEAN ROOF HEIGHT	21'	22'	23'	24'	25'
8'x7'	+40.6, -51.0	+40.9, -51.4	+41.3, -51.9	+41.7, -52.3	+42.0, -52.8
8'x8'	+40.2, -50.2	+40.5, -50.6	+40.9, -51.0	+41.2, -51.5	+41.6, -51.9
9'x7'	+40.2, -50.3	+40.6, -50.7	+40.9, -51.1	+41.3, -51.6	+41.6, -52.0
9'x8'	+39.8, -49.5	+40.2, -49.9	+40.5, -50.3	+40.9, -50.8	+41.2, -51.2
16'x7'	+38.5, -46.8	+38.9, -47.3	+39.2, -47.7	+39.5, -48.1	+39.9, -48.5
16'x8'	+38.1, -46.0	+38.5, -46.5	+38.8, -46.9	+39.1, -47.3	+39.5, -47.7
18'x7'	+38.2, -46.1	+38.5, -46.5	+38.8, -47.0	+39.2, -47.4	+39.5, -47.8
18'x8'	+37.8, -45.3	+38.1, -45.7	+38.4, -46.1	+38.8, -46.5	+39.1, -46.9

**THIS CALCULATION SHEET IS ONLY VALID FOR THE FOLLOWING BRANDS: CLOPAY, IDEAL, AND HOLMES.**

MARK WESTERFIELD, P.E.  
8585 DUKE BLVD.  
MASON, OHIO 45040  
(513) 770-4800  
FLORIDA P.E. No. 48495



RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 10/10/91

This is to request that a Certificate of Approval for Occupancy be issued to Mr William Walsh  
 For property built under Permit No. 2974 Dated 4/25/91 when completed in  
 conformance with the Approved Plans. # 4-VIA LUCINDA

Item	Signed	Approved by
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION	<u>5/15/91</u>	
3. FOOTING - SLAB	<u>5/14/91</u>	
4. ROUGH PLUMBING	<u>5/15/91</u>	
5. ROUGH ELECTRIC	<u>6/12/91</u>	
6. LINTEL		
7. ROOF	<u>8/14/91</u>	
8. FRAMING	<u>6/12/91</u>	
9. INSULATION		
10. A/C DUCTS	<u>6/12/91</u>	
11. FINAL ELECTRIC	<u>10/10/91</u>	
12. FINAL PLUMBING	<u>10/10/91</u>	
13. FINAL CONSTRUCTION	<u>10/10/91</u>	

Final Inspection for Issuance of Certificate for Occupancy.

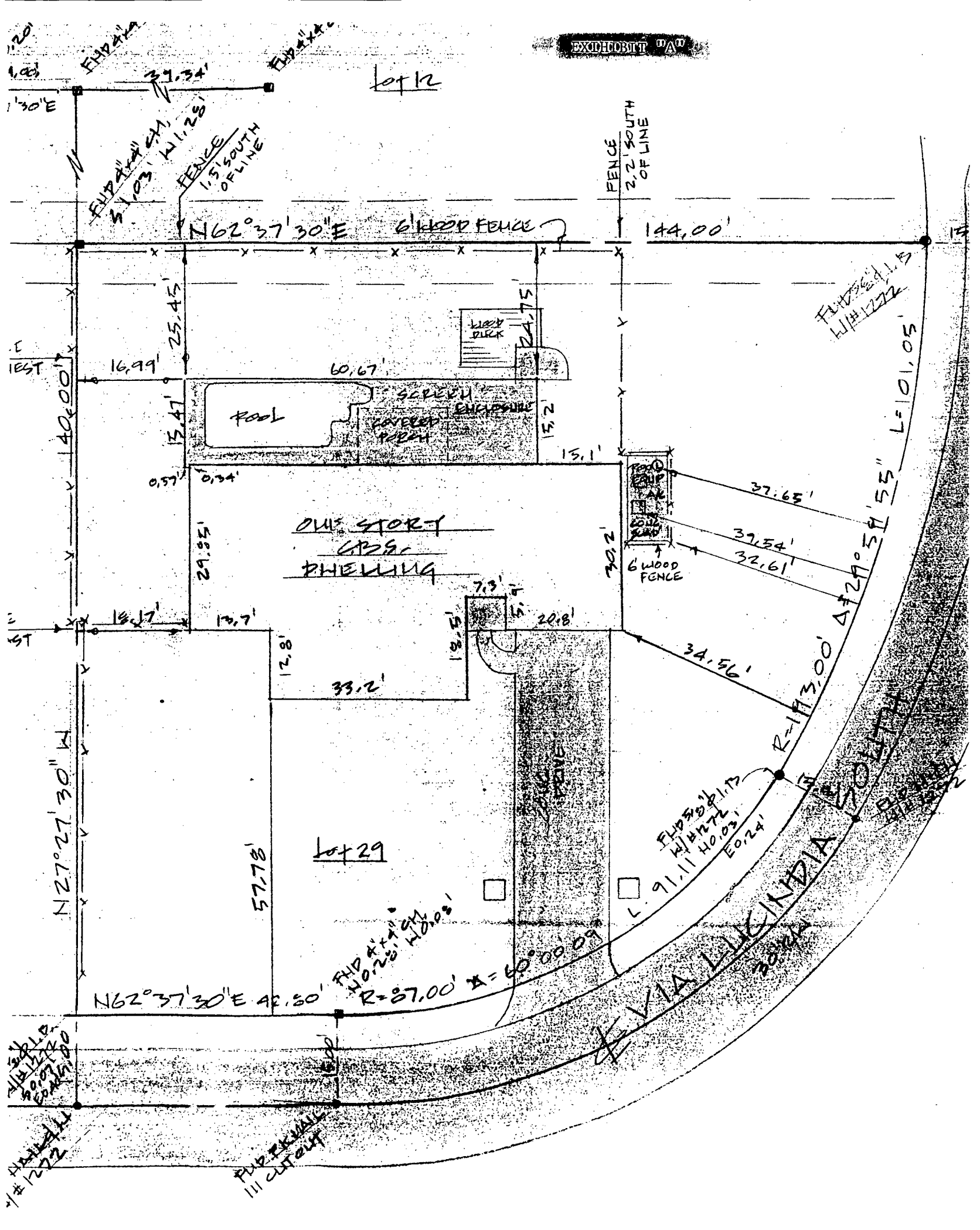
Approved by Building Inspector Dale Brown 10/10/91 date

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

Utilities notified F.P.L. 8/16/91 date

Original Copy sent to OWNER

(Keep carbon copy for Town files)



Lot 12

Lot 29

FENCE 1.5' SOUTH OF LINE

FENCE 2.2' SOUTH OF LINE

ONE STORY GBR PHENOL

WOOD DECK

POOL

SCREEN ENCLOSED COVERED PORCH

6 WOOD FENCE

6 WOOD FENCE

FUD #1113 W/1272

FUD #1113 W/1272 E0124

FUD #103 W/1288

FUD #103 W/1288

FUD #103 W/1288

$N62^{\circ}37'30''E$   $L=101.05'$

$N27^{\circ}27'30''W$

$16.99'$

$25.45'$

$15.47'$

$0.57'$

$0.34'$

$29.55'$

$18.17'$

$17.7'$

$12.8'$

$33.2'$

$18.5'$

$7.3'$

$5.1'$

$20.8'$

$30.2'$

$37.65'$

$39.54'$

$32.61'$

$34.56'$

$R=173.00'$

$\Delta=29^{\circ}51'55''$

$L=101.05'$

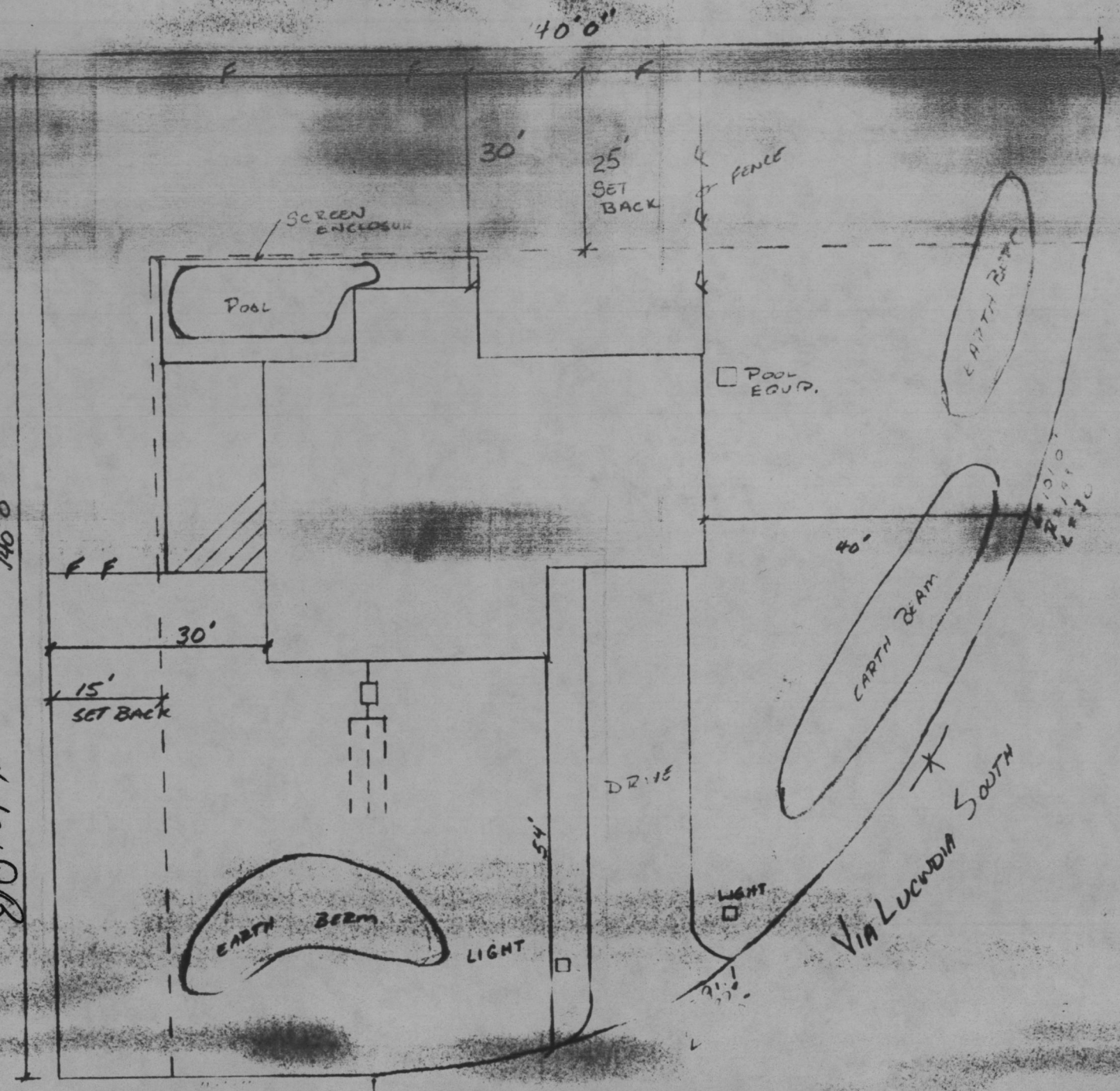
DELVIA LUKINDIA SOUTH

FUD #103 W/1288



RECEIVED  
MAY 1 1991

OKS/1/91/DB



### TOWN OF SEWALL'S POINT

Date 4/8/02

BUILDING PERMIT NO. 5760

Building to be erected for MR SWEENEY

Type of Permit FENCE

Applied for by MR. SWERNEY

(Contractor)

Building Fee 30<sup>00</sup>xx

Subdivision LUCINDIA Lot 29. Block \_\_\_\_\_

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

Address 4 S VIA LUCINDIA

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

Type of structure S.F.P.

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

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

Parcel Control Number:

138410070000029040000

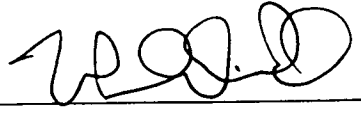
Plumbing Fee \_\_\_\_\_

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

Amount Paid 30<sup>00</sup>xx Check # 4163 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

Total Construction Cost \$ 3500<sup>00</sup>xx

TOTAL Fees \$30.00

Signed   
Applicant

Signed   
Town Building Official

## PERMIT

- |   |  |   |
|---|--|---|
| <input type="checkbox"/> BUILDING         | <input type="checkbox"/> ELECTRICAL          | <input type="checkbox"/> MECHANICAL       |
| <input type="checkbox"/> PLUMBING         | <input type="checkbox"/> ROOFING             | <input type="checkbox"/> POOL/SPA/DECK    |
| <input type="checkbox"/> DOCK/BOAT LIFT   | <input type="checkbox"/> DEMOLITION          | <input checked="" 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	<u>5/6/02</u>

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 7/20/78

This is to request that a Certificate of Approval for Occupancy be issued to JOBOW RES

For property built under Permit No. 615 LUCINDIA Dated \_\_\_\_\_

when completed in conformance with the Approved Plans.

\_\_\_\_\_  
Signed

\*\*\*\*\*

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings	8/17/76	W
Rough plumbing	8/13/76	W
Perimeter beam	8/20/76	W
Rough electric	9/29/76	W
Close in		
Final plumbing	10-28-76	
Final electric	11-20-76	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector [Signature] 10-29-76 date

Approved by Town Commission [Signature] 10-29-76 date

Utilities notified 10/29/76 [Signature] date

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

(Keep carbon copy for Town files)

PN 5760 FENCE .  
O/B

4/4/02  
4 S. VIA LUCINDA -  
SWEENEY. COLNIK

4/4/02 INITIAL REVIEW - COMPLETE - HAVE OWNER SIGN + NOTARIZE APP. - OK TO ISSUE PERMIT.

FILE CLOSED OUT  
CERTIFICATE OF OCCUPANCY  
OR DATE OF COMPLETION  
ISSUED 5/7/02  
\_\_\_\_\_  
GENE SIMMONS  
BUILDING OFFICIAL

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Mr William Walsh

CONTRACTOR S.A. Miller

LOT 20 BLOCK \_\_\_\_\_ SUB Lucinda

NO. 4 Via Lucinda South

# TOWN OF SEWALL'S POINT BUILDING PERMIT

5-15-91  
Budget - Quality  
Termite & Pest Control Inc.  
3900 N. Fcd. Hwy.  
Ft. Pierce, FL 34946  
(407) 465-6974

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION	5/15/91	
3. FOOTING - SLAB	OK 5/16/91 DB	
4. ROUGH PLUMBING	OK 5/15/91 DB	
5. ROUGH ELECTRIC	OK 6/12/91 DB	
6. LINTEL	OK 5/21/91 DB	
7. ROOF		
8. FRAMING	OK 4/12/91	
9. INSULATION		
10. A/C DUCTS	OK 4/12/91 DB	
11. FINAL ELECTRIC		
12. FINAL PLUMBING		
13. FINAL CONSTRUCTION		

NO. 2974 DATE ISSUED 4/25/91

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.

- 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.
- PORTABLE TOILET FACILITIES MUST BE ON JOB SITE BEFORE INITIAL INSPECTION.
- WORKING HOURS ARE FROM 8:00 TO 5:00 P.M. MONDAY THRU SATURDAY.

TO CONSTRUCT Rem Bedroom

REMARKS:

---



---



---



---



---



---



---



---



---



---

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number 1824

Date 6/17/85

APPLICATION FOR A PERMIT TO BUILD A DOCK, FENCE, POOL, SOLAR HEARING 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 Edward and Marie Quivey Present Address 4 Via Lucindia S.

Phone 286-2143 Sewall's Point

Contractor T. SIETSMA Address PO Box 346 JENSENB.

Phone 334-1522

Where licensed STATE License number CGC. 016851

Electrical contractor License number \_\_\_\_\_

Plumbing contractor License number \_\_\_\_\_

Roofing contractor T. SIETSMA License number CGO. 016851

Air conditioning contractor License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Add CBS closet structure to a CBS house. 98ST inside dimension

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

4 Via Lucindia S., Sewall's Point

Subdivision ARBECA PLAT Lot number 29 Block number \_\_\_\_\_

Contract price \$ 5880 Cost of permit \$ 40<sup>00</sup>

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, the State of Florida Model Energy Efficiency Building Code 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 EL Quivey

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 EL Quivey

TOWN RECORD

Date submitted 6/17/85 Approved [Signature] 6/17/85  
Building Inspector Date

Approved [Signature] 6/20/85 Final Approval given 8/14/85  
Commissioner Date Date

Certificate of Occupancy issued (if applicable) \_\_\_\_\_  
Date

Permit No. 2520  
APPLICATION FOR A 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 Edward Quivey Present Address 4 Via Lucindia S.

Phone 286-2143

Contractor Jim's Roofing Address 1004 N.W. 16th Place

Phone 287-1874 Stuart, FL 34994

Where licensed State (FL) License number CC041295

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: \_\_\_\_\_

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

Reshingling, and replacement of fascia

Subdivision \_\_\_\_\_ Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 5,200 Cost of permit \$ \_\_\_\_\_

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 James P. Conley

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 E. L. Quivey 4/6/89

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: Dale Brown 4/10/89  
Building Inspector Date

Approved: \_\_\_\_\_ 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.

NOTICE OF COMMENCEMENT

STATE OF FLORIDA  
COUNTY OF MARTIN

The undersigned hereby informs all concerned that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT. This notice shall be void and of no force and effect if construction is not commenced within 30 days of recordation.

DESCRIPTION OF PROPERTY: #4 VIA LUCINDA SOUTH LOT 29  
SUBDIVISION LUCINDA

General description of improvements: MASTER BED ROOM REMODEL

Owner: WILLIAM WALSH  
Address: 5555 SOUTH US #1 FT PIERCE, FL 34982

Owner's interest in site of the improvement: FEE SIMPLE

Contractor: S.A. MILLER CONSTRUCTION CO  
Address: PO BOX 12208 FT PIERCE, FL 34979

Surety (if any): N/A  
Address: N/A  
Amount of Bond: N/A

Lender: N/A  
Address: N/A

Name of person within the State of Florida designated by owner upon whom notices or other documents may be served:

Name: WILLIAM WALSH  
Address: 5555 S. US #1 FT PIERCE, FL 34982

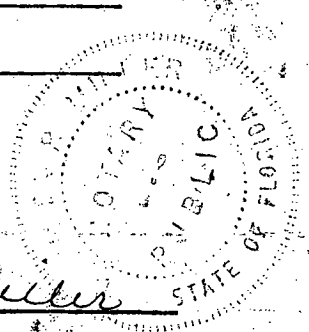
In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.06(2)(b), Florida Statutes:

Name: SCOTT MILLER  
Address: PO BOX 12208 FT PIERCE, FL 34979

*[Handwritten signature]*

Sworn to and subscribed before me this 25 day  
of April, 1991.

Christa R. Miller



(NOTARY SEAL)

I am a Notary Public of the  
STATE OF FL AT LARGE, and  
My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXP SEPT. 27, 1993  
BONDED THRU GENERAL INS. UND.

FILED FOR RECORD  
MARTIN CO., FLA.  
91 APR 26 AM 10:35  
MARSHA S. MILLER  
CLERK OF CIRCUIT COURT  
DC  
BY



Date

APPLICATION FOR A 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 BILL WALSH Present Address 5555 SUB #1

Phone 461-6060 FT PIERIE 34982

Contractor S. A. MILLER CONSTRUCTION Address PO BOX 12208

Phone 466 6268 FT PIERIE, FL 34979

Where licensed STATE OF FLORIDA License number CBC041854

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: RENOVATE MASTER BED ROOM SUITE

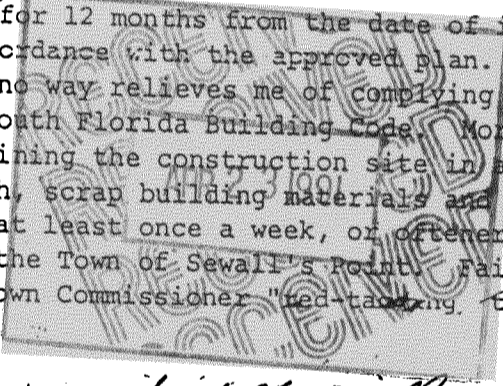
State the street address at which the proposed structure will be built: #4 VIA LUCINDIA SOUTH

Subdivision Lucinda Lot number 29 Block number \_\_\_\_\_

Contract price \$ 3,000 Cost of permit \$ \_\_\_\_\_

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 S. A. Miller

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 [Signature]

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: Dale Brown 4/25/91  
Building Inspector Date

Approved: \_\_\_\_\_ Date Final Approval given: \_\_\_\_\_  
Commissioner Date 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.

**SETTLEMENT SERVICES**

File No. 14716JH

Customer Identification:

**BUYER'S SETTLEMENT STATEMENT**

DO NOT USE THIS FORM FOR RESPA TRANSACTION

Name of Buyer: ROBERT BARNETT and WILLIAM WALSH

Address:

Name of Seller: ROBERT E. TARDIFF and CECELIA TARDIFF

Address:

Property Location: LOT 29, LUCINDIA, MARTIN COUNTY, FLORIDA

Settlement Agent: Chicago Title Insurance Company  
Address: 555 Colorado Avenue Suite 4, Stuart, Florida 34994

Place of Settlement: Chicago Title Insurance Company  
Address: 555 Colorado Avenue Suite 4, Stuart, Florida 34994

Settlement Date: April 8, 1991

**SUMMARY OF BUYER'S TRANSACTION**

ASSETS PURCHASED BY BUYER	Contract sales price	\$ 149,000.00
	Personal property	
	City town taxes to	
	County taxes to	
	Assessments to	
TOTAL ASSETS PURCHASED BY BUYER		\$ 149,000.00
ADD SETTLEMENT CHARGES		
SALES COMMISSION	Commission paid at Settlement (Money retained by broker applied to commissions \$ )	\$
LOAN CHARGES	Loan Origination Fee %	
	Loan Discount %	
	Appraisal Fee to	
ADVANCE PAYMENTS	Interest from to @ \$ /day	
	Hazard Insurance Premium for years to	
TITLE CHARGES	Settlement or closing fee to	
	Abstract or title search to	
	Title examination to	
	Title insurance binder to	
	Document preparation to	
	Notary fees to	
	Attorney's fee to	
Title insurance to CHICAGO TITLE INSURANCE C	900.00	
GOVERNMENT RECORDING AND TRANSFER CHARGES	Recording fees: Deed \$ 6.00 ;Mortgage \$ ;Release \$ 6.00	6.00
	City/county tax/stamps: Deed \$ ; Mortgage \$	
	State tax/stamps: Deed \$ ; Mortgage \$	
ADDITIONAL CHARGES	Survey to	
	Pest inspection to	
TOTAL CHARGES	TOTAL SETTLEMENT CHARGES	\$ 906.00
GROSS TOTAL	GROSS AMOUNT DUE FROM BUYER	\$ 149,906.00
LESS AMOUNTS PAID BY OR IN BEHALF OF BUYER		
AMOUNTS PAID BY OR IN BEHALF OF BUYER	Deposit or earnest money	10,000.00
	Principal amount of new loan(s)	
	Existing loan(s) taken subject to	
	City/town taxes to	
	County taxes 01/01/91 to 04/09/91	537.30
	Assessments to	
TOTAL	TOTAL BY/FOR BUYER	\$ 10,537.30
NET AMOUNT	CASH <input checked="" type="checkbox"/> FROM) ( <input type="checkbox"/> TO) BUYER	\$ 139,368.70

The above settlement statement is hereby approved, and settlement agent is authorized and directed to disburse the money as indicated herein and deliver instruments, documents and other property, if any, to the designated grantees and otherwise close this transaction in accordance with the settlement instructions.

Buyer \_\_\_\_\_ Attorney \_\_\_\_\_  
Buyer \_\_\_\_\_ Address \_\_\_\_\_

250055

Printed for Lawyers' Title Guaranty Fund, Orlando, Florida

This instrument was prepared by:  
**DEAN TOOKER**

*of the Law Offices of*  
**TOOKER & GALBRA, P.A.**  
P. O. Box 1016  
1451 East Ocean Boulevard  
STUART, FLORIDA 33994

# Warranty Deed

(STATUTORY FORM — SECTION 689.02 F.S.)

This Indenture, Made this 25th day of JUNE 1976, Between

A. JAMES ZUSI, a married man

of the County of Martin, State of Florida, grantor, and

EDWARD L. QUIVEY and MARIE W. QUIVEY, his wife

whose post office address is 105 Maywood Avenue

of the County of Monroe, State of Rochester, New York 14618, grantee,

That said grantor, for and in consideration of the sum of (\$10.00)

TEN AND NO/100-----Dollars,

and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Martin County, Florida, to-wit:

Lot 29, in the Subdivision of LUCINDIA, Sewall's Point, Florida, as recorded in Plat Book 3, Page 130, Public Records of Martin County, Florida; SUBJECT to restrictive covenants as recorded in Official Records Book 49, Page 128, Public Records of Martin County, Florida, and to the zoning of the Town of Sewall's Point.

The above described property is not Homestead and the Grantor, A. JAMES ZUSI, resides at 1980 Pine Tree Way, Stuart, Florida 33494.

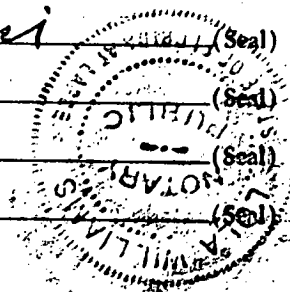
and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all persons whomsoever.

\* "Grantor" and "grantee" are used for singular or plural, as context requires.

In Witness Whereof, Grantor has hereunto set grantor's hand and seal the day and year first above written. Signed, sealed and delivered in our presence:

Robert Arthur Apples  
Melton C. Gandy

A. James Zusi  
AT JAMES ZUSI (Seal)



STATE OF FLORIDA  
COUNTY OF MARTIN

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared A. JAMES ZUSI, a married man

to me known to be the person described in and who executed the foregoing instrument and acknowledged before me that he executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 25th day of June, 1976.

Rola Williams  
Notary Public

My commission expires:  
NOTARY PUBLIC, STATE OF FLORIDA AT LARGE  
MY COMMISSION EXPIRES JAN. 26, 1978  
CONDOS THROUGH EUROCON - MUCKLEBERRY, INC.

BOOK 402 PAGE 2256

#615

TAX FOLIO NO. \_\_\_\_\_

DATE 5-30-95

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

3800

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 WILLIAM WALSH Present address #4 VIA LUCINDA SOUTH  
Phone 461 6060

Contractor CHRISTOPHER COLLINS ROOFING Address 5412 BIRCH DR  
Phone 407 489 6500 FT. PIERCE, FL

Where licensed SAINT LUCIE CNTY License number 04875

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: REPLACE EXISTING LOW SLOPE ROOF  
FIBERGLASS TO BITUMEN

State the street address at which the proposed structure will be built:  
#4 VIA LUCINDA SOUTH

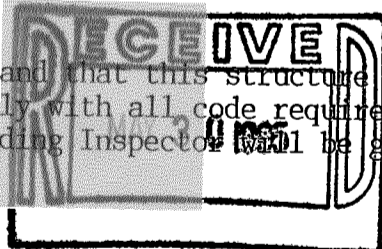
Subdivision LOT 29 LUCINDA Lot Number \_\_\_\_\_ Block Number \_\_\_\_\_

Contract price \$ 950.00 Cost of permit \$ 25.00

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 Chris Collins



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 [Signature]

TOWN RECORD

Date submitted \_\_\_\_\_

Approved: Dale Brown  
Building Inspector Date

Approved: [Signature]  
Commissioner Date

Final approval given: \_\_\_\_\_  
Date

CERTIFICATE OF OCCUPANCY issued (if applicable) \_\_\_\_\_  
Date

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

Date 8-30-91

APPLICATION FOR A 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 M/M WAHSH Present Address 4 VIA LUCINDA AV

Phone 595-2512

Contractor Sik Ahumnoni Inc Address 1725 S.W. BILTMORE ST

Phone 335-5254 MARTIN CO. PORT ST. LUCIE

Where licensed STATE OF FLORIDA License number SP-00356  
RX 00 43142

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: SCREEN POOL ENCLOSURE

State the street address at which the proposed structure will be built: 4 VIA LUCINDA So.

Subdivision VIA LUCINDA Lot number 29 Block number \_\_\_\_\_

Contract price \$ 2,200 Cost of permit \$ 50XX

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 Steph J. Walsh

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 M. Walsh

TOWN RECORD Approved: Dale Brown 8/30/91  
Building Inspector Date

Date submitted \_\_\_\_\_

Approved: \_\_\_\_\_ Commissioner Date Final Approval given: \_\_\_\_\_ Date

Certificate of Occupancy issued (if applicable) \_\_\_\_\_ Date

Permit No. 3055

SP1282

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.

Date

APPLICATION FOR A 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.

3010

Owner BILL WALSH Present Address 5555 SUS #1

Phone 461 6060

Contractor S. A. MILLER Address PO BOX 12208 FT PIERCE FL 34979

Phone 466 6268

Where licensed FL OF STATE License number \_\_\_\_\_

Electrical contractor N/A License number \_\_\_\_\_

Plumbing contractor N/A License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: FENCE TO MATCH

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

#4 SOUTH VIA LUCHINDA

Subdivision VIA LUCHINDA Lot number 29 Block number \_\_\_\_\_

Contract price \$ 1,1000 Cost of permit \$ \_\_\_\_\_

Plans approved as submitted BUILDING ON PERMIT 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 Sid Miller

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 [Signature]

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: Dale Brown 6/11/91  
Building Inspector Date

Approved: \_\_\_\_\_ 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.

Date

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

2993

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 Walsh Present Address #4 Via Lucinda

Phone \_\_\_\_\_ Lot 29 Lucinda

Contractor Scott Miller Address \_\_\_\_\_

Phone 466 6268

Where licensed \_\_\_\_\_ License number CBC 041854

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: \_\_\_\_\_

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

Subdivision Lucinda Lot number 29 Block number \_\_\_\_\_

Contract price \$ \_\_\_\_\_ Cost of permit \$ \_\_\_\_\_

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 Thomas E. Stule

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 \_\_\_\_\_

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: Deh Bro 5/20/91  
Building Inspector Date

Approved: \_\_\_\_\_ 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.

Date

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

2984

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 MR WILLIAM WALSH Present Address #4 VIA LUCINDA SOUTH

Phone \_\_\_\_\_

Contractor SUN COUNTY POOLING Address 665 SW SEA HOLLY TER

Phone 340-4260 PORT ST LUCIE FL 34984

Where licensed MARTIN CO License number CPC052507

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

#4 VIA LUCINDA SOUTH

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

Subdivision LUCINDA Lot number 29 Block number \_\_\_\_\_

Contract price \$ 3500.00 Cost of permit \$ 100.00

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 [Signature]

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: Dale Brown 5/1/91  
Building Inspector Date

Approved: \_\_\_\_\_ 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.



Permit No.

2732

Date

APPLICATION FOR A 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 ROBERT E. TARDIFF Present Address 221 N.E. PLANTATION RD #416

Phone 225-4345 STUART FL 34996

Contractor SAME AS ABOVE Address \_\_\_\_\_

Phone \_\_\_\_\_

Where licensed \_\_\_\_\_ License number \_\_\_\_\_

Electrical contractor FORWARD ELEC License number ER 0006261

Plumbing contractor NOT REQ. License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: ADD SLIDING GLASS DOOR 5 FOOT IN PLACE OF

WINDOW, ADD WINDOW IN ENTRY FOYER, NEW KITCHEN BATH TILE, etc.

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

4 VIA LUCINDIA SOUTH

Subdivision LUCINDIA 29 Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 7500 Cost of permit \$ 235.00

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 Robert E. Tardiff

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 Robert E. Tardiff

TOWN RECORD Approved: Dale Bro Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

Date submitted \_\_\_\_\_

Approved: \_\_\_\_\_ Commissioner \_\_\_\_\_ Date \_\_\_\_\_ Final Approval given: \_\_\_\_\_ Date \_\_\_\_\_

Certificate of Occupancy issued (if applicable) \_\_\_\_\_ Date \_\_\_\_\_

SP1282

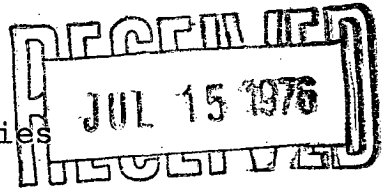
Permit No. 2732

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.

STATE OF FLORIDA  
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

DIVISION OF HEALTH  
Post Office Box 210 Jacksonville, Florida 32201

Application and Permit  
of  
Individual Sewage Disposal Facilities



Application/Permit  
No. HD 76-327

Martin County Health Department

Section I - Instructions:

1. Percolation test data, soil profile and water table elevation information must be attached. (Note: Test must be made at proposed location of system).
2. Existing building and proposed buildings on lot must be shown and drawn to scale at their location or proposed location. (Use block on this sheet or attach plot plan).
3. Proposed location of septic tank must be shown on plan.
4. Any pond or stream areas must be indicated on the plan.
5. Indicate name and date of plat of subdivision. If not platted, attach metes and bounds description.
6. Complete the following information section.

Notes:

1. Not valid if sewer is available.
2. Individual well must be 75 feet from any part of system.
3. Call \_\_\_\_\_ and give this office a 24-hour notice when ready for inspection.

Section II - Information:

1. Property Address (Street & House No.) VIA Lucindia South  
 Lot 29 Block \_\_\_\_\_ Subdivision Lucindia  
 Date Platted 1960 Directions to Job \_\_\_\_\_
2. Owner or Builder Edward Quivey  
 P.O. Address 05 Maywood City Rochester, New York 14618  
 Septic tank system to be installed by: \_\_\_\_\_

Scale 1" = 50'

(Rear)

3. Specifications:

900 gallon tank with  
280 square feet of  
drainfield with at least  
4" inside diameter pipe.

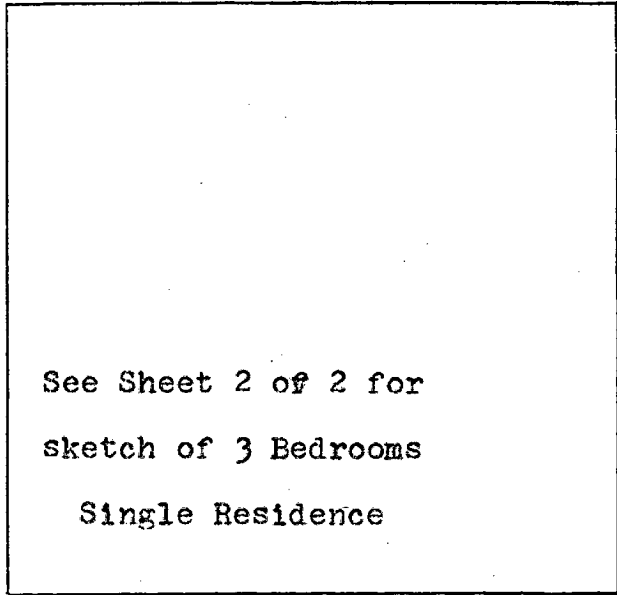
4. House to be constructed:

Check one:  FHA  
 VA  Conventional

This is to certify that the project described in this application, and as detailed by the plans and specifications and attachments will be constructed in accordance with state requirements.

Applicant: Edward Quivey  
Please Print

(Name of Street or State Road)  
(Side)



(Name of Street or State Road)  
(Side)

(Front)

(Name of Street or State Road)

Signature: [Signature]

Date: June 22, 1976

\*\*\*\*\* DO NOT WRITE BELOW THIS LINE \*\*\*\*\*

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions: \_\_\_\_\_

The above signed application has been found to be in compliance with Chapter 10D-6, Florida Administrative Code, and construction is hereby approved subject to the above specifications and conditions.

By: Robert B. Koush County Health Dept. Martin Date 6-25-76

Section IV - Final Construction Approval

Construction of installation approved:  Yes  No

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

FHA No. \_\_\_\_\_ VA No. \_\_\_\_\_

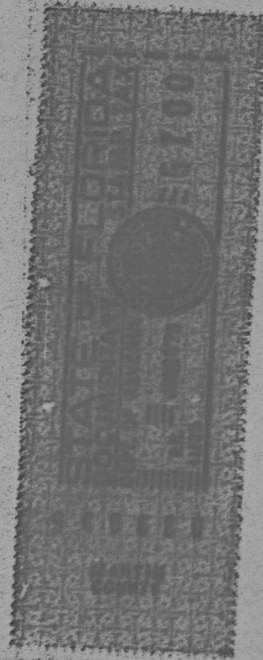
\*\*\*\*\*

#612

FILED FOR RECORD  
MARTIN COUNTY, FLA.

'76 JUN 28 PM 12 02

LOUISE V. ISAAOS  
CLERK OF CIRCUIT COURT  
BY JK D.O.



Book 402 PAGE 2257

**INDIVIDUAL SEWAGE DISPOSAL FACILITIES  
DATA SHEET**

Applicant: \_\_\_\_\_

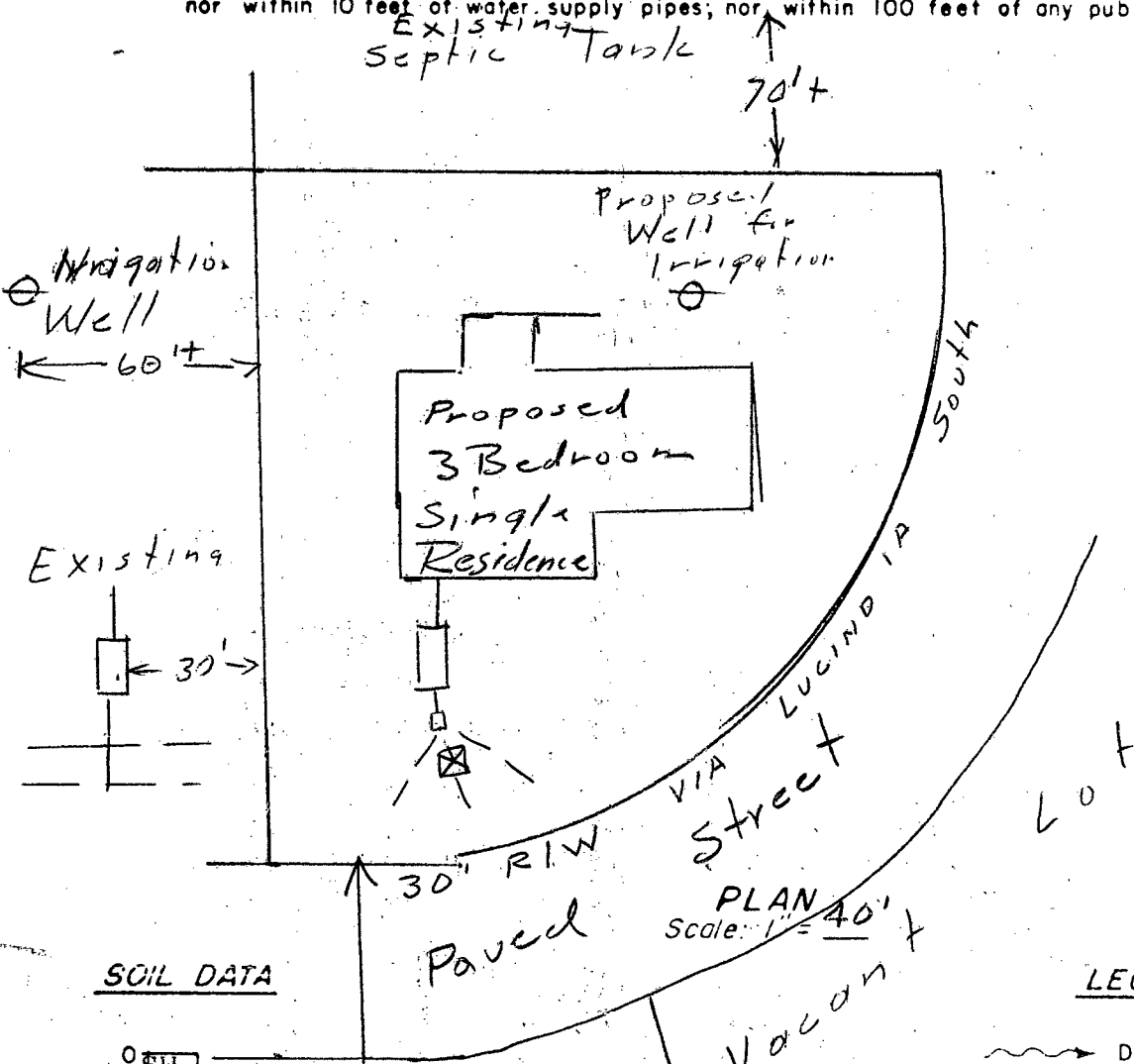
Location: Edward Quivey

Location \_\_\_\_\_

Lot 29, Lucindia VIA Lucindia South

County: Martin

**NOTE:** This septic tank system is not located within 50 feet of the high water line of a lake, stream, canal or other waters, nor within 75 feet of any private well; nor within 100 feet of any public water supply; nor within 10 feet of water supply pipes; nor within 100 feet of any public sewer system.

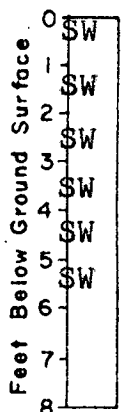


Plot plan must show all data required in IOD-6.03 2(a) and all other pertinent data.

All lots have Central Water!

PLAN Scale: 1" = 40'

**SOIL DATA**



**SOIL BORING LOG**

Soil Identification: CLASS I GROUP SW  
Soil Characteristics: Grey to white sand to 6 feet

**LEGEND**

- Drainage Pattern
- Proposed Septic Tank and Drainfield
- Proposed Water Supply Well
- Existing Water Supply Well
- Soil Boring and Percolation Test Location

Note: Over 75' Well to Septic Tank Existing & Proposed!

Percolation Rate 0.1 min/inch  
Water Table Depth Below 6 feet  
Water Table Depth 4 feet During Wet Season  
Compacted Fill Of None Req'd  
Compacted Fill Checked By: \_\_\_\_\_  
Date \_\_\_\_\_

CERTIFIED BY: [Signature]  
FLORIDA PROFESSIONAL No. 6274  
Date 6/22/76 Job No. \_\_\_\_\_  
Sheet 2 of 2