

20 Via Lucindia Dr North



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

BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK
 A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	9316	DATE ISSUED:	12/10/2009
SCOPE OF WORK:	A/C WITH DUCTWORK		
CONDITIONS :			
CONTRACTOR:	KRAUSS & CRANE		
PARCEL CONTROL NUMBER:	01-38-41-007-000-00080-8	SUBDIVISION	LUCINDIA <i>Lot 8</i>
CONSTRUCTION ADDRESS:	20 N. VIA LUCINDIA		
OWNER NAME:	VON STADEN		
QUALIFIER:	JOHN CRANE	CONTACT PHONE NUMBER:	287-1227

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT MUST BE SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO THE FIRST REQUESTED INSPECTION.

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN PUBLIC RECORDS OF THIS COUNTY, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS 8:30AM TO 12:00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

UNDERGROUND PLUMBING	_____	UNDERGROUND GAS	_____
UNDERGROUND MECHANICAL	_____	UNDERGROUND ELECTRICAL	_____
STEM-WALL FOOTING	_____	FOOTING	_____
SLAB	_____	TIE BEAM/COLUMNS	_____
ROOF SHEATHING	_____	WALL SHEATHING	_____
TIE DOWN /TRUSS ENG	_____	INSULATION	_____
WINDOW/DOOR BUCKS	_____	LATH	_____
ROOF DRY-IN/METAL	_____	ROOF TILE IN-PROGRESS	_____
PLUMBING ROUGH-IN	_____	ELECTRICAL ROUGH-IN	_____
MECHANICAL ROUGH-IN	_____	GAS ROUGH-IN	_____
FRAMING	_____	METER FINAL	_____
FINAL PLUMBING	_____	FINAL ELECTRICAL	_____
FINAL MECHANICAL	_____	FINAL GAS	_____
FINAL ROOF	_____	BUILDING FINAL	_____

ALL RE-INSPECTION FEES AND ADDITIONAL INSPECTION REQUESTS WILL BE CHARGED TO THE PERMIT HOLDER. THE CONTRACTOR OR OWNER /BUILDER MUST SCHEDULE A FINAL INSPECTION. FAILURE TO RECEIVE A SUCCESSFUL FINAL INSPECTION WILL RESULT IN PERMIT RENEWAL FEES, FINES, AND OR DENIAL OF FUTURE BUILDING PERMITS TO THE CONTRACTOR OR OWNER /BUILDER.

PRINTS



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9316		
ADDRESS	20 N. VIA LUCINDIA		
DATE:	12/10/2009	SCOPE:	A/ WITH DUCTWORK
SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	

SEACOAST NATIONAL BANK
 STUART, FLORIDA 34995

21754

KRAUSS & CRANE, INC.
 P.O. BOX 1259
 STUART, FL 34995-1259

12-9-09

63-515/670
 01

PAY TO THE
 ORDER OF

TOWN OF SEWALL'S POINT

\$ 81.80

Eighty one & 80/100

DOLLARS

MEMO

John Crane
 AUTHORIZED SIGNATURE

⑈0 21754⑈ ⑆067005158⑆ 0003921466⑈

TOTAL BUILDING PERMIT FEE:	\$	
ACCESSORY PERMIT	Declared Value: 7500 \$	Copies \$1.80
Total number of inspections @ \$75.00 each	1	\$ 75.00
Road impact assessment: (.04% of construction value - \$5.00 min.)	\$	5.00
TOTAL ACCESSORY PERMIT FEE:	\$	81.80



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BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9316		
ADDRESS	20 N. VIA LUCINDIA		
DATE:	12/10/2009	SCOPE:	A/ WITH DUCTWORK

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)		\$	
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	Copies \$1.80
Total number of inspections @ \$75.00 each	1	\$	75.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	81.80

Town of Sewall's Point

Date: 12/9/09 BUILDING PERMIT APPLICATION Permit Number: 9316

OWNER/TITLEHOLDER NAME: CHARLOTTE VAN STAEN Phone (Day) 286-3798 (Fax)

Job Site Address: 20 VIA LUCINDA NORTH City: STUART State: FL Zip: 34996

Legal Description Parcel Control Number: 01 38 91 007 000 000808

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

Scope of work (please be specific): AC Changeout w/ ductwork

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES NO

Has a Zoning Variance ever been granted on this property? YES (YEAR) NO (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 2500 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out) Is subject property located in flood hazard area? VE10 AE9 AEB X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: KRAUSS & CRANE, INC Phone: 287-1227 Fax: 283-4055

Street: 904 S. Dixie Hwy City: STUART State: FL Zip: 34994

State License Number: CA049286 OR: Municipality: License Number:

LOCAL CONTACT: JOHN CRANE Phone Number: 287-1227

DESIGN PROFESSIONAL: Lic# Phone Number: Street: City: State: Zip:

AREAS SQUARE FOOTAGE: Living: Garage: Covered Patios/ Porches: Enclosed Storage:

Carport: Total under Roof Elevated Deck: Enclosed area below BFE*: * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007 National Electrical Code: 2005(2008 after 6/1/09) Florida Energy Code: 2007, Florida Accessibility Code: 2007, Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCOMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

***** A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS SPECIFICALLY INDICATED ABOVE. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS, AND ORDINANCES OF THE TOWN OF SEWALL'S POINT DURING THE BUILDING PROCESS.

OWNER SIGNATURE: (required) OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED) Charlotte Van Staen

State of Florida, County of: Martin

This the 11th day of December, 2009 by Charlotte Vonstaen personally

known to me or produced as identification. Notary Public #DD 724736

CONTRACTOR SIGNATURE: (required) John Crane

On State of Florida, County of: Martin This the 9th day of Dec

by John Crane known to me or produced

as identification. Notary Public

My Commission Expires: My Commission Expires:

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!



Martin County, Florida

Laurel Kelly, C.F.A

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Summary

print [navigation icons] Address 1 of 2

Parcel Info

Summary

- Land
- Residential
- Improvement
- Commercial
- Image
- Sales & Transfers
- Assessments →
- Taxes →
- Exemptions →
- Parcel Map →
- Full Legal →

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-007-000-00080-8	20 N VIA LUCINDIA	17693	Address	0	1

Summary

Property Location 20 N VIA LUCINDIA
Tax District 2200 Sewall's Point
Account # 17693
Land Use 101 0100 Single Family
Neighborhood 120350
Acres 0.349

Legal Description
Property Information
 LUCINDIA LOT 8

Search By

- Parcel ID
- Owner
- Address**
- Account #
- Use Code
- Legal Description
- Neighborhood
- Sales
- Map →

Owner Information

Owner Information
 VON STADEN, CHARLOTTE

Mail Information

20 VIA LUCINDIA N
 STUART FL 34996-6408

Assessment Info

Front Ft. 0.00

Market Land Value \$164,500
Market Impr Value \$59,650
Market Total Value \$224,150

Site Functions

- Property Search**
- Contact Us
- On-Line Help
- County Home
- Site Home
- County Login

Recent Sale

Sale Amount \$148,000

Sale Date 7/22/1987
Book/Page 0728 1220

Print | Back to List | << First < Previous Next > Last >>

Legal disclaimer / Privacy Statement

Data updated on 12/9/2009





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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: _____

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED.

OWNERS NAME: CHARLOTTE VAN STADEN

CONSTRUCTION ADDRESS: 20 VIA LUCINDA

PERMIT TYPE: RESIDENTIAL _____ COMMERCIAL

- ELECTRIC
- _____ PLUMBING
- _____ HVAC
- _____ IRRIGATION
- _____ FUEL GAS
- _____ ROOFING

TYPE OF SERVICE: _____ NEW SERVICE _____ EXISTING SERVICE _____ OTHER

SCOPE OF WORK: MOVE A/C UNIT

VALUE OF CONSTRUCTION \$ 500⁰⁰

_____ LOW VOLTAGE
TYPE OF EQUIPMENT: _____ SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ OTHER
SCOPE OF WORK: <u>MOVE A/C UNIT</u> VALUE <u>500⁰⁰</u>

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES.

[Signature]
 SIGNATURE OF LICENSED CONTRACTOR

P.O. DRAWER 2 PT. SALERNO FL.
 ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: Lloyd Johnson

TELEPHONE NO: 772-223-7397 FAX NO: 772-223-7145

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: EC 0003162

** WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT. A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT.

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: _____

PARCEL CONTROL #: _____

SUBDIVISION: _____ LOT: _____ BLK: _____ PHASE: _____

SITE ADDRESS: _____

SEND OR FAX TO: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

Project Information

For: Charlotte Van Staden
20 Via Lucinda North, Stuart, FL 34996
Phone: 286-3798

Notes:

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE 12-10-09

Design Information

Weather: West Palm Beach, FL, US

Winter Design Conditions

Outside db 47 °F
Inside db 70 °F
Design TD 23 °F

Summer Design Conditions

Outside db 91 °F
Inside db 75 °F
Design TD 16 °F
Daily range L
Relative humidity 50 %
Moisture difference 56 gr/lb

Heating Summary

Structure 25413 Btuh
Ducts 2743 cfm
Central vent (76 cfm) 1932 Btuh
Humidification 0 Btuh
Piping 0 Btuh
Equipment load 30087 Btuh

Sensible Cooling Equipment Load Sizing

Structure 25113 Btuh
Ducts 3712 Btuh
Central vent (76 cfm) 1361 Btuh
Blower 0 Btuh

Use manufacturer's data n
Rate/swing multiplier 0.96
Equipment sensible load 29039 Btuh

Infiltration

Method Simplified
Construction quality Average
Fireplaces 0

	Heating	Cooling
Area (ft ²)	1635	1635
Volume (ft ³)	13076	13076
Air changes/hour	0.38	0.20
Equiv. AVF (cfm)	83	44

Latent Cooling Equipment Load Sizing

Structure 2865 Btuh
Ducts 1394 Btuh
Central vent (76 cfm) 2919 Btuh
Equipment latent load 7177 Btuh

Equipment total load 36216 Btuh
Req. total capacity at 0.70 SHR 3.5 ton

Heating Equipment Summary

Make
Trade
Model

Efficiency 100.0 EFF
Heating input 0 Btuh
Heating output 30087 Btuh
Temperature rise 23 °F
Actual air flow 1200 cfm
Air flow factor 0.043 cfm/Btuh
Static pressure 0.50 in H2O
Space thermostat

Cooling Equipment Summary

Make
Trade
Cond
Coil

Efficiency 0.0 EER
Sensible cooling 0 Btuh
Latent cooling 0 Btuh
Total cooling 0 Btuh
Actual air flow 1200 cfm
Air flow factor 0.042 cfm/Btuh
Static pressure 0.50 in H2O
Load sensible heat ratio 0.81

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Right-J Worksheet
Entire House
Krauss & Crane, Inc.

Job:
Date: Dec 07, 2009
By: M. Foster

904 South Dixie Hwy, Stuart, FL 34994 Phone: 772-287-1227 Fax: 772-283-4055 Email: kandc@kraussandcrane.com

1 Room name				Entire House		BR2								
2 Exposed wall				196.0 ft		29.0 ft								
3 Ceiling height				8.0 ft		8.0 ft								
4 Room dimensions						1.0 x 225.0 ft								
5 Room area				1652.5 ft ²		225.0 ft ²								
Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)		
				Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	13AB-0ocs	0.258	n	5.93	5.69	424	356	2110	2022	120	108	641	614
	G	1A-c10m	1.270	n	29.21	36.30	53	0	1534	1906	0	0	0	0
	G	1A-c10m	1.270	n	29.21	36.30	4	0	117	145	0	0	0	0
	G	1A-c10m	1.270	n	29.21	36.30	12	0	351	436	12	0	351	436
11	W	13AB-0ocs	0.258	e	5.93	5.69	256	223	1323	1269	0	0	0	0
	G	1A-c10m	1.270	e	29.21	92.64	12	5	351	850	0	0	0	0
	D	11D0	0.390	e	8.97	12.15	21	21	188	255	0	0	0	0
	W	13AB-0ocs	0.258	s	5.93	5.69	536	434	2575	2469	0	0	0	0
	G	1A-c10m	1.270	s	29.21	39.40	36	36	1052	1307	0	0	0	0
	G	1A-c10m	1.270	s	29.21	39.40	45	45	1314	1633	0	0	0	0
	D	11D0	0.390	s	8.97	12.15	21	21	188	255	0	0	0	0
	W	13AB-0ocs	0.258	w	5.93	5.69	352	307	1819	1744	112	100	593	569
	G	1A-c10m	1.270	w	29.21	92.64	18	2	511	1528	0	0	0	0
	G	1A-c10m	1.270	w	29.21	92.64	4	2	117	240	0	0	0	0
	G	1A-c10m	1.270	w	29.21	92.64	24	9	701	1701	12	5	351	850
	P	12C-0sw	0.091	-	2.09	1.48	528	528	1105	781	0	0	0	0
	C	16D-19td	0.049	-	1.13	1.70	1653	1653	1842	2775	225	225	254	382
	F	22A-tph	1.358	-	31.23	0.00	1653	198	6122	0	225	29	906	0
6	c) AED excursion									442				360
	Envelope loss/gain								23319	21757			3095	3211
12	a) Infiltration								2094	776			310	115
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230	6					1380	0			0
			Appliances @	1200	1					1200	0			0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								25413	25113			3404	3326
15	Duct loads								2743	3712	11%	15%	367	492
	Total room load								28155	28825			3772	3817
	Air required (cfm)								1200	1200			161	159

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904 South Dixie Hwy, Stuart, FL 34994 Phone: 772-287-1227 Fax: 772-283-4055 Email: kandc@kraussandcrane.com

1 Room name				BR1				Bath						
2 Exposed wall				8.0 ft		38.5 ft		8.0 ft		8.0 ft				
3 Ceiling height				1.0		x 227.5 ft		1.0		x 65.0 ft				
4 Room dimensions				227.5 ft ²				65.0 ft ²						
5 Room area														
6	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13AB-0ocs	0.258	n	5.93	5.69	0	0	0	0	64	60	356	341
	G	1A-c10m	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
	G	1A-c10m	1.270	n	29.21	36.30	0	0	0	0	4	0	117	145
	G	1A-c10m	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
11	W	13AB-0ocs	0.258	e	5.93	5.69	56	56	332	319	0	0	0	0
	G	1A-c10m	1.270	e	29.21	92.64	0	0	0	0	0	0	0	0
	D	11D0	0.390	e	8.97	12.15	0	0	0	0	0	0	0	0
	W	13AB-0ocs	0.258	s	5.93	5.69	140	122	724	694	0	0	0	0
	G	1A-c10m	1.270	s	29.21	39.40	18	18	526	653	0	0	0	0
	G	1A-c10m	1.270	s	29.21	39.40	0	0	0	0	0	0	0	0
	D	11D0	0.390	s	8.97	12.15	0	0	0	0	0	0	0	0
	W	13AB-0ocs	0.258	w	5.93	5.69	112	100	593	569	0	0	0	0
	G	1A-c10m	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	G	1A-c10m	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	G	1A-c10m	1.270	w	29.21	92.64	12	5	351	850	0	0	0	0
	P	12C-0sw	0.091	-	2.09	1.48	0	0	0	0	24	24	50	35
	C	16D-19td	0.049	-	1.13	1.70	228	228	256	386	65	65	73	110
	F	22A-tph	1.358	-	31.23	0.00	228	39	1203	0	65	8	250	0
6	c) AED excursion									282				-25
	Envelope loss/gain								3985	3754			846	608
12	a) Infiltration								411	152			85	32
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230			0			0	0			0
			Appliances @	1200			0			0	0			0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								4396	3906			932	639
15	Duct loads						11%	15%	474	577	11%	15%	101	94
	Total room load								4871	4484			1032	734
	Air required (cfm)								208	187			44	31

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J Worksheet
Entire House
Krauss & Crane, Inc.

Job:
 Date: Dec 07, 2009
 By: M. Foster

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1 Room name						LR/DR								
2 Exposed wall						8.0 ft 0.0 ft		8.0 ft 30.5 ft						
3 Ceiling height						uncondit.		heat/cool						
4 Room dimensions						18.0 ft ² 3.0 x 6.0 ft		444.0 ft ² 1.0 x 444.0 ft						
5 Room area														
	Ty	Construction number	U-value (Btuh/ft ² -F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13AB-0ocs	0.258	n	5.93	5.69	0	0	0	0	24	24	142	137
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
11	W	13AB-0ocs	0.258	e	5.93	5.69	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	e	29.21	92.64	0	0	0	0	0	0	0	0
	D	11D0	0.390	e	8.97	12.15	0	0	0	0	0	0	0	0
	W	13AB-0ocs	0.258	s	5.93	5.69	0	0	0	0	220	154	914	876
	G	1A-c1om	1.270	s	29.21	39.40	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	s	29.21	39.40	0	0	0	0	45	45	1314	1633
	D	11D0	0.390	s	8.97	12.15	0	0	0	0	21	21	188	255
	W	13AB-0ocs	0.258	w	5.93	5.69	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	P	12C-0sw	0.091	-	2.09	1.48	0	0	0	0	152	152	318	225
	T/C	18D-191d	0.049	-	1.13	1.70	18	18	0	0	444	444	500	754
	T/C	22A-tph	1.358	-	31.23	0.00	18	0	0	0	444	31	953	0
6	c) AED excursion									0				-201
	Envelope loss/gain									0	0		4330	3679
12	a) Infiltration								0	0			326	121
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230	0				0	0	6			1380
			Appliances @	1200	0				0	0	0			0
	Less external load				0				0	0			0	0
	Less transfer				0				0	0			0	0
	Redistribution				0				0	0			0	0
14	Subtotal				0				0	0			4656	5180
15	Duct loads				0%	0%			0	0	11%	15%	502	766
	Total room load								0	0			5159	5945
	Air required (cfm)								0	0			220	248

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J Worksheet
Entire House
Krauss & Crane, Inc.

Job:
 Date: Dec 07, 2009
 By: M. Foster

904 South Dixie Hwy, Stuart, FL 34994 Phone: 772-287-1227 Fax: 772-283-4055 Email: kanc@kraussandcrane.com

1 Room name		Kit		Mstr										
2 Exposed wall		8.0 ft 0.0 ft		8.0 ft 33.0 ft										
3 Ceiling height		heat/cool		heat/cool										
4 Room dimensions		102.0 ft x 102.0 ft		288.0 ft x 288.0 ft										
5 Room area		102.0 ft²		288.0 ft²										
Ty	Construction number	U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
				Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
6	W	13AB-0ocs	0.258	n	5.93	5.69	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0
11	W	13AB-0ocs	0.258	e	5.93	5.69	0	0	0	0	128	116	688	660
	G	1A-c1om	1.270	e	29.21	92.64	0	0	0	0	12	5	351	850
	D	11D0	0.390	e	8.97	12.15	0	0	0	0	0	0	0	0
	W	13AB-0ocs	0.258	s	5.93	5.69	0	0	0	0	136	118	700	671
	G	1A-c1om	1.270	s	29.21	39.40	0	0	0	0	18	18	526	653
	G	1A-c1om	1.270	s	29.21	39.40	0	0	0	0	0	0	0	0
	D	11D0	0.390	s	8.97	12.15	0	0	0	0	0	0	0	0
	W	13AB-0ocs	0.258	w	5.93	5.69	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0
	P	12C-0sw	0.091	-	2.09	1.48	104	104	218	154	200	200	419	296
	C	16D-10td	0.049	-	1.13	1.70	102	102	115	173	288	288	325	489
	F	22A-tpri	1.358	-	31.23	0.00	102	0	0	0	288	33	1031	0
6	c) AED excursion													-140
	Envelope loss/gain								333	270			4039	3480
12	a) Infiltration								0	0			353	131
	b) Room ventilation								0	0			0	0
13	Internal gains:		Occupants @	230			0			0	0			0
			Appliances @	1200			1			1200	0			0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								333	1470			4391	3610
15	Duct loads								36	217			474	534
	Total room load								369	1687			4865	4144
	Air required (cfm)								16	70			207	173

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

904 South Dixie Hwy, Stuart, FL 34994 Phone: 772-287-1227 Fax: 772-283-4055 Email: kandc@kraussandcrane.com

						MBth				Porch									
						8.0 ft		12.0 ft		8.0 ft		45.0 ft							
						heat/cool		heat/cool		heat/cool		heat/cool							
						40.0 ft ²		5.0 x 8.0 ft		27.0 x 9.0 ft		243.0 ft ²							
1	2	3	4	5	Room name	Exposed wall	Ceiling height	Room dimensions	Room area	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
										Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13AB-0ocs	0.258	n	5.93	5.69	0	0	0	0	216	164	970	930					
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	53	0	1534	1906					
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0					
	G	1A-c1om	1.270	n	29.21	36.30	0	0	0	0	0	0	0	0					
11	W	13AB-0ocs	0.258	e	5.93	5.69	0	0	0	0	72	51	303	290					
	G	1A-c1om	1.270	e	29.21	92.64	0	0	0	0	0	0	0	0					
	D	11D0	0.390	e	8.97	12.15	0	0	0	0	21	21	188	255					
	W	13AB-0ocs	0.258	s	5.93	5.69	40	40	237	228	0	0	0	0					
	G	1A-c1om	1.270	s	29.21	39.40	0	0	0	0	0	0	0	0					
	G	1A-c1om	1.270	s	29.21	39.40	0	0	0	0	0	0	0	0					
	D	11D0	0.390	s	8.97	12.15	0	0	0	0	0	0	0	0					
	W	13AB-0ocs	0.258	w	5.93	5.69	56	52	309	296	72	55	323	310					
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	18	2	511	1528					
	G	1A-c1om	1.270	w	29.21	92.64	4	2	117	240	0	0	0	0					
	G	1A-c1om	1.270	w	29.21	92.64	0	0	0	0	0	0	0	0					
	P	12C-0sw	0.091	-	2.09	1.48	0	0	0	0	48	48	100	71					
	C	16D-19td	0.049	-	1.13	1.70	40	40	45	68	243	243	274	413					
	F	22A-tph	1.358	-	31.23	0.00	40	12	375	0	243	45	1406	0					
6	c) AED excursion									177				45					
	Envelope loss/gain								1083	1009			5609	5748					
12	a) Infiltration								128	48			481	178					
	b) Room ventilation								0	0			0	0					
13	Internal gains:		Occupants @	230	0				0	0	0		0	0					
			Appliances @	1200	0				0	0	0		0	0					
	Less external load				0				0	0			0	0					
	Less transfer				0				0	0			0	0					
	Redistribution				0				0	0			0	0					
14	Subtotal								1211	1056			6090	5926					
15	Duct loads						11%	15%	131	156	11%	15%	657	876					
	Total room load								1342	1212			6747	6802					
	Air required (cfm)								57	50			288	283					

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Project Information

For: Charlotte Van Staden
20 Via Lucinda North, Stuart, FL 34996
Phone: 286-3798

Design Conditions

Location:		Indoor:		Heating	Cooling
West Palm Beach, FL, US		Indoor temperature (°F)		70	75
Elevation: 20 ft		Design TD (°F)		23	16
Latitude: 27°N		Relative humidity (%)		50	50
Outdoor:	Heating	Cooling	Moisture difference (gr/lb)		
Dry bulb (°F)	47	91	16.5		56.2
Daily range (°F)	-	13 (L)			
Wet bulb (°F)	-	78			
Wind speed (mph)	15.0	7.5			
			Infiltration:		
			Method	Simplified	
			Construction quality	Average	
			Fireplaces	0	

Construction descriptions

	Or	Area (ft²)	U-value (Btuh/ft²·°F)	Insul R (ft²·°F/Btuh)	Htg HTM (Btuh/ft²)	Loss (Btuh)	Clg HTM (Btuh/ft²)	Gain (Btuh)
Walls								
13AB-0ocs: Above grade open core concrete block, siding/stucco, no board insulation, no framing								
	n	356	0.258	0.0	5.93	2110	5.69	2022
	e	223	0.258	0.0	5.93	1323	5.69	1269
	s	434	0.258	0.0	5.93	2575	5.69	2469
	w	307	0.258	0.0	5.93	1819	5.69	1744
	all	1319	0.258	0.0	5.93	7827	5.69	7504
Partitions								
12C-0sw: Wood stud frame, siding or stucco, no board insulation, R-13 cavity insulation								
		528	0.091	13.0	2.09	1105	1.48	781
Windows								
1A-c10m: Operable, metal frame, no break, clear glass, 1 pane; 1.00 ft overhang (3.50 ft window ht, 0.50 ft sep.)								
	n	53	1.270	0.0	29.2	1534	36.3	1906
	w	18	1.270	0.0	29.2	511	87.3	1528
	all	70	1.270	0.0	29.2	2045	49.1	3434
1A-c10m: Operable, metal frame, no break, clear glass, 1 pane; 2.00 ft overhang (2.00 ft window ht, 0.50 ft sep.)								
	n	4	1.270	0.0	29.2	117	36.3	145
	w	4	1.270	0.0	29.2	117	60.0	240
	all	8	1.270	0.0	29.2	234	48.1	385
1A-c10m: Operable, metal frame, no break, clear glass, 1 pane; 2.00 ft overhang (3.00 ft window ht, 0.50 ft sep.)								
	n	12	1.270	0.0	29.2	351	36.3	436
	e	12	1.270	0.0	29.2	351	70.9	850
	s	36	1.270	0.0	29.2	1052	36.3	1307
	w	24	1.270	0.0	29.2	701	70.9	1701
	all	84	1.270	0.0	29.2	2454	51.1	4293
1A-c10m: Operable, metal frame, no break, clear glass, 1 pane; 3.00 ft overhang (5.00 ft window ht, 0.50 ft sep.)								
	s	45	1.270	0.0	29.2	1314	36.3	1633
Doors								
11D0: Wood door, solid core, no storm								
	e	21	0.390	0.0	8.97	188	12.1	255
	s	21	0.390	0.0	8.97	188	12.1	255
	all	42	0.390	0.0	8.97	377	12.1	510
Ceilings								
16D-19td: Ceiling under vented attic, no radiant barrier, dark tile, R-19 insulation								
		1653	0.049	19.0	1.11	1842	1.68	2775

Floors

22A-tph: Tile covered slab on grade, heavy moist soil, No edge insul, No horiz insul

196 1.358 0.0 31.2 6122 0.00 0

Project Information

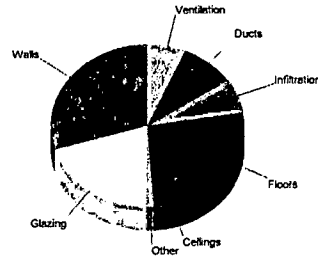
For: Charlotte Van Staden
20 Via Lucinda North, Stuart, FL 34996
Phone: 286-3798

Design Conditions

Location: West Palm Beach, FL, US Elevation: 20 ft Latitude: 27°N	Indoor: Indoor temperature (°F) 70 Design TD (°F) 23 Relative humidity (%) 50 Moisture difference (gr/lb) 16.5	Heating	Cooling
Outdoor: Dry bulb (°F) 47 Daily range (°F) - Wet bulb (°F) - Wind speed (mph) 15.0	Heating 47 - - 13 (L) 78 7.5	Cooling 91 13 (L) 78 7.5	Heating 70 23 50 16.5
	Infiltration: Method Construction quality Fireplaces		Cooling 75 16 50 56.2
			Simplified Average 0

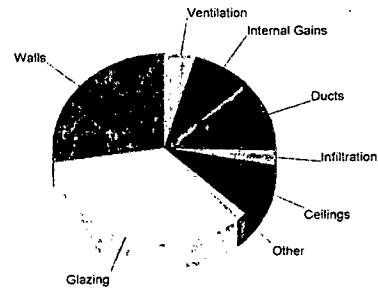
Heating

Component	Btuh/ft²	Btuh	% of load
Walls	4.8	8932	29.7
Glazing	29.2	6046	20.1
Doors	9.0	377	1.3
Ceilings	1.1	1842	6.1
Floors	3.7	6122	20.3
Infiltration	1.3	2094	7.0
Ducts		2743	9.1
Piping		0	0.0
Humidification		0	0.0
Ventilation		1932	6.4
Adjustments		0	0
Total		30087	100.0



Cooling

Component	Btuh/ft²	Btuh	% of load
Walls	4.5	8284	27.4
Glazing	49.2	10187	33.7
Doors	12.1	510	1.7
Ceilings	1.7	2775	9.2
Floors	0.0	0	0.0
Infiltration	0.5	776	2.6
Ducts		3712	12.3
Ventilation		1361	4.5
Internal gains		2580	8.5
Blower		0	0.0
Adjustments		0	0
Total		30186	100.0



Overall U-value = 0.188 Btuh/ft²-°F

Data entries checked.

Project Information

For: Charlotte Van Staden
20 Via Lucinda North, Stuart, FL 34996
Phone: 286-3798

Design Information

	Htg	Clg	Infiltration	
Outside db (°F)	47	91	Method	Simplified
Inside db (°F)	70	75	Construction quality	Average
Design TD (°F)	23	16	Fireplaces	0
Daily range	-	L		
Inside humidity (%)	-	50		
Moisture difference (gr/lb)	-	56		

HEATING EQUIPMENT

Make
Trade
Model

Efficiency 100.0 EFF
Heating input 0 Btuh
Heating output 30087 Btuh
Temperature rise 23 °F
Actual air flow 1200 cfm
Air flow factor 0.043 cfm/Btuh
Static pressure 0.50 in H2O
Space thermostat

COOLING EQUIPMENT

Make
Trade
Cond
Coil
Efficiency 0.0 EER
Sensible cooling 0 Btuh
Latent cooling 0 Btuh
Total cooling 0 Btuh
Actual air flow **1200** cfm
Air flow factor 0.042 cfm/Btuh
Static pressure 0.50 in H2O
Load sensible heat ratio 0.81

ROOM NAME	Area (ft²)	Htg load (Btuh)	Clg load (Btuh)	Htg AVF (cfm)	Clg AVF (cfm)
BR2	225	3772	3817	161	159
BR1	228	4871	4484	208	187
Bath	65	1032	734	44	31
	18	0	0	0	0
LR/DR	444	5159	5945	220	248
Kit	102	369	1687	16	70
Mstr	288	4865	4144	207	173
MBth	40	1342	1212	57	50
Porch	243	6747	6802	288	283

Bold/italic values have been manually overridden

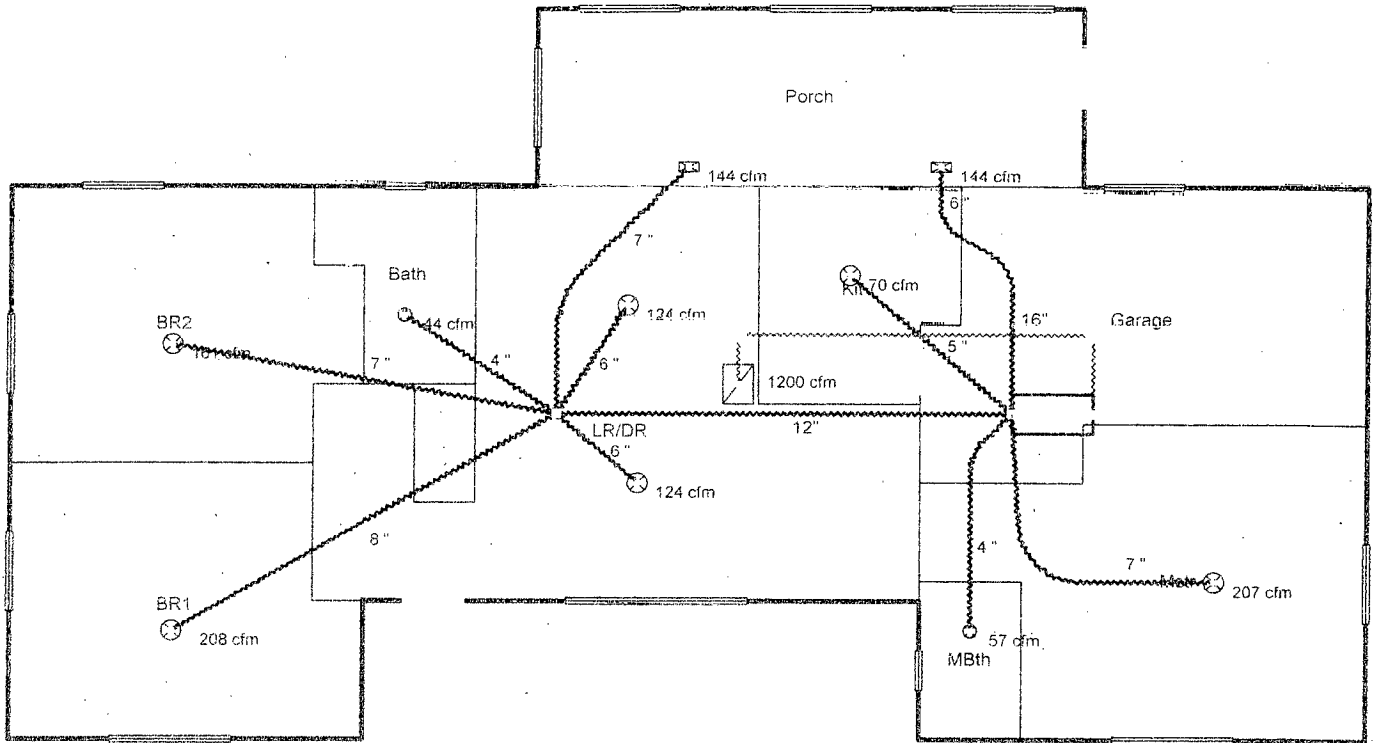
Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Entire House	1653	28155	28825	1200	1200
Other equip loads		1932	1361		
Equip. @ 0.96 RSM			29039		
Latent cooling			7177		
TOTALS	1653	30087	36216	1200	1200

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Sheet 1



Job #:
Performed by M. Foster for:
Charlotte Van Staden
20 Via Lucinda North
Stuart, FL 34996
Phone: 286-3798

Krauss & Crane, Inc.
904 South Dixie Hwy
Stuart, FL 34994
Phone: 772-287-1227 Fax: 772-283-4055
kandc@kraussandcrane.com

Scale: 1 : 116
Page 1
Right-Suite Residential
6.0.41 RSR30060
2009-Dec-08 11:08:53
Z:\Load Calcs\Van Staden 12-8-09.rrp



Krauss & Crane, Inc.
AIR CONDITIONING SALES AND SERVICE

904 South Dixie Highway • P.O. Box 1259 • Stuart, Florida 34994-1259
772-287-1227 • Fax 772-283-4055 • Email: kandc@kraussandcrane.com

License
CAC049286

PN9316 RECEIVED
12-21-09

To Whom It May Concern:

This is to certify that the air handler Krauss & Crane, Inc. installed at 20 Via Lucinda North is accessible for service and maintenance.

John Crane

John Crane 12-18-09

President

Krauss & Crane, Inc.

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri Dec 6, 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9273	ATT	ACROSS STREET OF HSW		CLOSE
11:30	103 H. Sewalls Way SBA NETWORK SERV	FINAL	PASS	contact FPL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9220	CRISPIN 30 E. HIGH PT. WISAITZ	A/C FINAL		TRAVEL INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9285	108 H. Sewalls Way OLNEY EVERLAST	SCREEN FINAL	PASS	CLOSE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9317	VON STATEN 20 N. VIA LUCINDIA SEASIDE	IN PROGRESS	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9316	VON STATEN 20 VIA LUCINDIA KRAUSS & CRANE	A/C FINAL	FAIL	LIGHT IN ATTIC LTR ABOUT SERVICE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9000	CD2 4 River Oak Rd Riverview Court	Meter Final	PASS	contact FPL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection: Mon Tue Wed Thur Fri 12-21-09 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8812	Conway	Final	NO one home	Cancel
1st	16 S Via Puertorica	(Kitchen, door & windows)		
	OB			
9310	Von See Ramm	Final AC	Pass	close
911M	10 E High Pt			
	Games AC			
9308	Morris	tank in line	Pass	
	64 S Sewalls			
	MC propane			
9248	Wilson	tie beam	Pass	
	5 St Luce Ct			
	MR Hustle			
9287	Sharfi	beam	Pass	
	73 N Sewalls			
	Stratton			
9316	Van Staten	Final AC	Pass	close
	20 N Via Puertorica			
	Krauss & Crane			
9307	Robson	Final Porch	FAIL	NOT READY
	2 Castle Hill Way			
	Metro Reman			



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

BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK
 A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	9317	DATE ISSUED:	12/14/2009
SCOPE OF WORK:	PARTIAL RE-ROOF (FLAT DECK)		
CONDITIONS :			
CONTRACTOR:	SEASIDE ROOFING		
PARCEL CONTROL NUMBER:	01384100700000808	SUBDIVISION	LUCINDIA
CONSTRUCTION ADDRESS:	20 N.VIA LUCINDIA		
OWNER NAME:	VON STADEN		
QUALIFIER:	JOE SNYDER	CONTACT PHONE NUMBER:	BART 214-0915

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A CERTIFIED COPY OF THE RECORDED NOTICE OF COMMENCEMENT MUST BE SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO THE FIRST REQUESTED INSPECTION.

NOTICE: IN ADDITION TO THE REQUIREMENTS OF THIS PERMIT, THERE MAY BE ADDITIONAL RESTRICTIONS APPLICABLE TO THIS PROPERTY THAT MAY BE FOUND IN PUBLIC RECORDS OF THIS COUNTY, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS 8:30AM TO 12:00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

UNDERGROUND PLUMBING	_____	UNDERGROUND GAS	_____
UNDERGROUND MECHANICAL	_____	UNDERGROUND ELECTRICAL	_____
STEM-WALL FOOTING	_____	FOOTING	_____
SLAB	_____	TIE BEAM/COLUMNS	_____
ROOF SHEATHING	_____	WALL SHEATHING	_____
TIE DOWN /TRUSS ENG	_____	INSULATION	_____
WINDOW/DOOR BUCKS	_____	LATH	_____
ROOF DRY-IN/METAL	_____	ROOF TILE IN-PROGRESS	_____
PLUMBING ROUGH-IN	_____	ELECTRICAL ROUGH-IN	_____
MECHANICAL ROUGH-IN	_____	GAS ROUGH-IN	_____
FRAMING	_____	METER FINAL	_____
FINAL PLUMBING	_____	FINAL ELECTRICAL	_____
FINAL MECHANICAL	_____	FINAL GAS	_____
FINAL ROOF	_____	BUILDING FINAL	_____

ALL RE-INSPECTION FEES AND ADDITIONAL INSPECTION REQUESTS WILL BE CHARGED TO THE PERMIT HOLDER. THE CONTRACTOR OR OWNER /BUILDER MUST SCHEDULE A FINAL INSPECTION. FAILURE TO RECEIVE A SUCCESSFUL FINAL INSPECTION WILL RESULT IN PERMIT RENEWAL FEES, FINES, AND OR DENIAL OF FUTURE BUILDING PERMITS TO THE CONTRACTOR OR OWNER /BUILDER.



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9317		
ADDRESS	20 N. VIA LUCINDIA		
DATE:	12/14/2004	SCOPE:	RE-ROOF FLAT DECK

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K) (No plan submittal fee when value is less than \$100,000)		\$	
Total square feet air-conditioned space: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)		\$	
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	
		\$	2480-
Total number of inspections @ \$75.00 each	3	\$	225.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	230.00

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Date: Dec 10, 09 Permit Number: 9317

OWNER/TITLEHOLDER NAME: Charlotte Von Staden Phone (Day) _____ (Fax) _____

Job Site Address: 20N. Via Lucinda City: Stuart State: FL Zip: 34996

Legal Description Lucinda Lot 8 Parcel Control Number: 01-38-41-007-000-00080-8

Owner Address (if different): Same City: _____ State: _____ Zip: _____

Scope of work (please be specific): Re-roof of Flat roof only, Remove A/C doghouse & install 3-4 new supply

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO
Has a Zoning Variance ever been granted on this property?
 YES _____ (YEAR) _____ NO _____
 (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 2,480.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 _____ AE9 _____ AE8
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ 59,650.00
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Seaside Roofing, Inc. Phone (772) 283-9597 Fax: (772) 283-9421

Street: 11646 SW Meadowlark Cir City: Stuart State: FL Zip: 34997

State License Number: CCC-1329224 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Bart Thompson Phone Number: (772) 214-0915

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____

Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____
 * Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007 Edition
 National Electrical Code: 2005 Florida Energy Code: 2007 Florida Accessibility Code: 2007 Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS:

- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
- THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

*****A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****

APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AND INSTALLATIONS AS SPECIFICALLY INDICATED ABOVE. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE. I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS, AND ORDINANCES OF THE TOWN OF SEWALL'S POINT DURING THE BUILDING PROCESS.

OWNER SIGNATURE: (required)
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
X Charlotte Von Staden

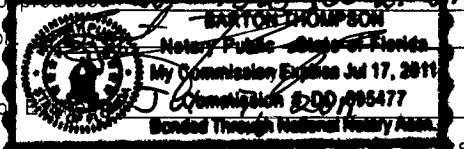
State of Florida, County of: Martin

This the 9th day of December, 2009

by Charlotte Von Staden who is personally

known to me or produced to me by _____

as identification: _____
 My Commission Expires Jul 17, 2011
 My Commission # DD 695477
 Bonded Through National Notary Assn.



CONTRACTOR SIGNATURE: (required)
X [Signature]

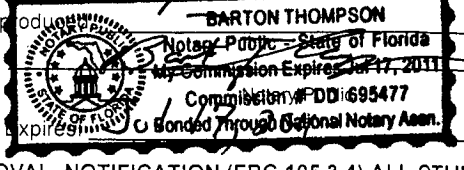
On State of Florida, County of: Martin

This the _____ day of December, 2009

by Joseph W. Snyder who is personally

known to me or produced to me by _____

as identification: _____
 My Commission Expires _____
 My Commission # DD 695477
 Bonded Through National Notary Assn.



SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

Martin County, Florida

generated on 12/7/2009 8:48:41 PM EST

Summary

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
01-38-41-007-000-00080-8	20 N VIA LUCINDIA	17693	Address	0	1

Summary

Property Location 20 N VIA LUCINDIA
Tax District 2200 Sewall's Point
Account # 17693
Land Use 101 0100 Single Family
Neighborhood 120350
Acres 0.349

Legal Description

Property Information
 LUCINDIA LOT 8

Owner Information

Owner Information
 VON STADEN, CHARLOTTE

Mail Information

20 VIA LUCINDIA N
 STUART FL 34996-6408

Assessment Info

Front Ft. 0.00

Market Land Value \$164,500
Market Impr Value \$59,650
Market Total Value \$224,150

Recent Sale

Sale Amount \$148,000

Sale Date 7/22/1987
Book/Page 0728 1220

Data updated on 12/01/2009



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

**RESIDENTIAL REROOF WINDSTORM LOSS
MITIGATION CERTIFICATION
(FLORIDA STATUTE 553.844)**

The following information is to be provided by roofing contractor or owner/builder on all re-roof applications for the purpose of obtaining compliance with recent changes to State Statute and referenced "Hurricane Mitigation Manual". Effective date: October 1, 2007.

Note: These requirements apply to residential structures built prior to implementation of the FBC on March 1, 2002.

- Value: show proof of insured value of residential structure or a copy of the ad-valorem tax value.
- Provide copy of contract

All re-roofs regardless of value shall comply with the following:

Re-nailing: All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

_____ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

✓
_____ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required. (Flat roof)

_____ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-moped shall be deemed to meet the requirements for secondary water barrier.

Residential Structures valued at \$300,000 or more shall comply with the following:

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
 1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
 2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
 - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
 - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
 - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE 12-14-09
BUILDING OFFICIAL

RE-ROOF PERMIT CERTIFICATION

PERMIT #

CONTRACTOR'S NAME: Joseph W. Snyder PHONE #: 283-9599 FAX: 283-9421

OWNER'S NAME: Charlotte Von Staden

CONSTRUCTION ADDRESS: 20 W. Via Lucinda CITY Stuart STATE FL

RE-ROOF: [X] RESIDENTIAL(SINGLE FAMILY) (partial)
[] COMMERCIAL **--REMOVE/REINSTALL ROOF TOP HVAC EQUIP [] YES [] NO

**...DISCONNECT/RECONNECT HVAC ELECTRIC [] YES [] NO

** REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S. [] YES [X] NO - INSURED VALUE OF RESIDENCE \$59,630.00

RE-ROOF INSPECTION AFFIDAVIT TO BE PROVIDED IN LIEU OF BUILDING DEPARTMENT INSPECTION [] YES [] NO

ROOF TYPE: [] HIP [] BOSTON-HIP [] GABLE [X] FLAT [] OTHER

ROOF PITCH: 1/8" / 12 SLOPE

ROOF DECK:* [] SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED
[] RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF
NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER
FLORIDA BUILDING CODE "2004".
[] SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-
SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME
SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK
NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".

[X] EXISTING DECK TO REMAIN/REPAIRED & RENAILED

EXISTING ROOF COVERING: Gran Modified EXISTING COVERING TO BE REMOVED? YES [] NO [X]

PROPOSED NEW ROOF COVERING: Granulated Modified Bitumen

MANUFACTURER Polyglass PRODUCT NAME PRODUCT APPR # FL 1654-R4

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)
MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE
INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT
INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING: [X] GALV./STEEL [] ALUMINUM [] COPPER [] OTHER

RIDGEVENT TO BE INSTALLED: [] YES [X] NO

DESCRIPTION OF WORK: Remove old A/C doghouse and fill-in with plywood +
30# felt. Install 3-4 new 5/8 panels. Replace old flat roof with New Modified

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN
COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

SIGNATURE OF CONTRACTOR: [Signature] DATE: 12/10/09

CONTRACT

Seaside Roofing, Inc.

11646 S.W. Meadowlark Cir.
Stuart, FL 34997

Phone (772) 283-9599 Fax (772) 283-9421 License# CCC-1329224

December 8, 2009

MS. CHARLOTTE VON STADEN
20 N. VIA LUCINDA
STUART, FL 34996

WHITE GRANULATED MODIFIED BITUMEN

(on back flat roof, similar to existing material)

- Existing modified roof to be removed and disposed of.
- Existing sheathing to be re-nailed with 8d ring-shank galvanized nails to bring up to current code.
- Install elastobase with 1.25" galv. nails and tin tags to existing plywood.
- Remove old A/C doghouse, fill in void with plywood, and install 30# felt to new plywood.
- Install 16" acrylume valley flashings in transition.
- Install cant strip as needed in lower section.
- Install new 3"x3" acrylume drip edge flashing on edge termination.
- Install new White Granulated Modified Bitumen with heat torch to fastened elastobase.
- Install 3 new 5v panels where old A/C used to be.

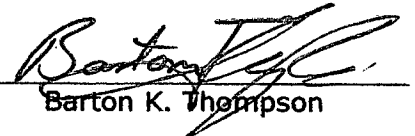
Rotten wood replacement beyond the 2 sheets of plywood or any work beyond the scope of this contract will be billed at material cost plus \$65.00 per man hour for labor in addition to contract price below. No painting or gutter work included. Seaside **FIVE (5)** year workmanship warranty applies to this contract. State license # CCC-1329224. In connection with any litigation arising out of this agreement, the prevailing party shall be entitled to recover their reasonable attorney's fees and costs, inclusive of appellate proceedings.

We propose hereby to furnish material and labor to complete in accordance with above specifications, for the sum of:

TWO THOUSAND FOUR HUNDRED EIGHTY DOLLARS AND NO/100

\$ 2,480.00

Payment to be made as follows: No services will begin until this copy of this proposal is signed and returned with a deposit check for **30%** of contract price. **50%** is due upon delivery of material, and remainder due upon completion. 1.5 percent per month finance charge will be collected on all unpaid balances after completion of work. If owner wishes to pay with a credit card; we will accept Master Card, American Express, and Visa, for a surcharge of 3%.


Barton K. Thompson

SALES MANAGER
(772)214-0915
bart@seasideroofing.net

Acceptance of proposal: The above prices, specifications and conditions are satisfactory and are hereby accepted. You are authorized to do the work as specified. Payment will be made as outlined above. *This proposal may be withdrawn by us if not accepted within 20 days*

Date of Acceptance December 9, 2009

Authorized Signature Charlotte E. Von Von Staden



EXTERIOR RESEARCH & DESIGN, LLC.
 Certificate of Authorization #9503
 353 Christian Street
 Oxford, CT 06478
 PHONE: (203) 262-9245
 FAX: (203) 262-9243

EVALUATION REPORT

Polyglass USA, Inc.
150 Lyon Drive
Fernley, NV 89408

Evaluation Report P9290.02.08-R2
FL1654-R4
Date of Issuance: 02/11/2008
Revision 2: 11/07/2008

SCOPE:

This Evaluation Report is issued under Rule 9B-72 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code. The product described herein has been designed to comply with the 2004 & 2007 FBC.

DESCRIPTION: Polyglass SBS and APP Modified Bitumen Roof Systems

LABELING: Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

CONTINUED COMPLIANCE: This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

ADVERTISEMENT: The Evaluation Report number preceded by the words "Trinity | ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

INSPECTION: Upon request, a copy of this entire Evaluation Report 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 Evaluation Report consists of pages 1 through 5, plus a 33-page Appendix.

Prepared by:

Robert J.M. Nieminen, P.E.
 Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 11/07/2008. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

CERTIFICATION OF INDEPENDENCE:

1. Exterior Research & Design, LLC. d/b/a Trinity | ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Exterior Research & Design, LLC. d/b/a Trinity | ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.



ROOFING SYSTEMS EVALUATION:

1. SCOPE:

Product Category: Roofing

Sub-Category: Modified Bitumen Roof Systems

Compliance Statement: Polyglass SBS and APP Modified Bitumen Roof Systems, as produced by Polyglass USA, Inc., have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

2. STANDARDS:

<u>Section</u>	<u>Property</u>	<u>Standard</u>	<u>Year</u>
1504.3.1	Wind	FM 4470 / 4450	1992
1504.7	Impact	FM 4470	1992
1507.11.2	Physical Properties	ASTM D6163	2000
1507.11.2	Physical Properties	ASTM D6164	2000
1507.11.2	Physical Properties	ASTM D6222	2002

3. REFERENCES:

<u>Entity</u>	<u>Examination</u>	<u>Reference</u>	<u>Date</u>
FM Approvals	FM 4470	2W7A7.AM	08/04/1994
FM Approvals	FM 4470	0D3A3.AM	04/04/1997
FM Approvals	FM 4470	2D0A0.AM	12/23/1998
FM Approvals	FM 4470	2D5A9.AM	06/22/1999
FM Approvals	FM 4470	3006646	01/04/2000
FM Approvals	FM 4470	3001334	01/25/2000
FM Approvals	FM 4470	3001334	02/15/2000
FM Approvals	FM 4470	3000857	01/12/2000
FM Approvals	FM 4470	3004091	01/12/2000
FM Approvals	FM 4470	3006115	05/02/2001
FM Approvals	FM 4470	3012321	07/29/2002
FM Approvals	FM 4470	3014692	08/05/2003
FM Approvals	FM 4470	3014751	08/27/2003
FM Approvals	FM 4470	3007170	01/13/2004
FM Approvals	FM 4470	3019317	06/30/2004
FM Approvals	FM 4470	3020703	07/30/2004
FM Approvals	FM 4470	3018332	01/31/2006
FM Approvals	FM 4470	3023368	03/20/2006
FM Approvals	FM 4470	3024594	05/23/2006
FM Approvals	FM 4470	3023458	07/18/2006
FM Approvals	FM 4470	3030668	09/12/2007
Underwriters Labs	Quality Control	R14571, Vol 1	03/21/2008
Miami-Dade BCCO	Physical Properties	Various NOAs	Various

4. PRODUCT DESCRIPTION:

This Evaluation Report covers Polyglass Modified Bitumen Roof Systems installed in accordance with Polyglass USA, Inc. published installation instructions and the Limitations / Conditions of Use herein. The following Polyglass membranes make up the subject systems.

Table 1: Roll-Goods for Polyglass Modified Bitumen Roof Systems				
Type	Product	Specification		
		Reference	Grade	Type
Base Sheets	Polyglass G2 Base	ASTM D4601	N/A	II
	Modibase	ASTM D4601	N/A	II
SBS Membranes	Elastobase	ASTM D6163	S	I
	Elastoflex V		S	I
	Elastoflex VG		G	I
	Elastoflex VG FR		G	I
	Elastoflex SA V		S	I
	Elastoflex SA V Vent		S	I
	Elastoflex SA V Vent FR		S	I
	Elastoflex SA V FR		S	I
	Elastobase Poly	ASTM D6164	S	I
	Elastoflex S6		S	I
	Elastoflex S6 G		G	I
	Elastoflex S6 G FR		G	I
	Polyfresko MOP		S	I
	Polyfresko MOP FR		S	I
	Elastoshield TS G		S	I
	Elastoshield TS G FR		G	I
	Elastoflex SA P		G	I
	Elastoflex SA P FR		G	I
	Polyfresko SBS SAP		S	I
	Polyfresko SBS SAP FR		S	I
APP Membranes	Polyflex	ASTM D6222	S	I
	Polyflex G		G	I
	Polyflex G FR		G	I
	Polyfresko Torch		S	I
	Polyfresko Torch FR		S	I
	Polybond		S	I
	Polybond G		G	I
	Polyflex SA P		G	I
	Polyflex SA P FR		G	I
	Polyfresko APP SAP		S	I
	Polyfresko APP SAP FR		S	I
	Polykool		S	I
	Polybianco		S	I
TPO Membranes	Xtraflex	ASTM D6164	S	I
	Xtraflex G		G	I
	Xtraflex G FR		G	I

5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in HVHZ.
- 5.2 Refer to a current Roofing Materials Directory for fire ratings of this product.
- 5.3 For steel deck installations, foam plastic insulation shall be separated from the building interior in accordance with FBC 2603.4 unless the exceptions stated in FBC 2603.4.1 and 2603.6 apply.
- 5.4 Unless otherwise noted in Appendix 1, roof decking and its attachment shall be specified and installed to meet project design criteria to the satisfaction of the AHJ.
- 5.5 For recover installations, the existing roof shall be examined in accordance with FBC 1510.
- 5.6 For mechanically attached insulation or membrane or strip-bonded insulation, the maximum design pressure for the selected assembly shall meet or exceed the Zone 1 design pressure determined in accordance with FBC Chapter 16. Zones 2 and 3 shall employ an attachment density designed by a qualified design professional to resist the elevated pressure criteria. Commonly used methods are RAS 117 and FM LPDS 1-29.
- 5.7 For fully-adhered insulation, the maximum design pressure for the selected assembly shall meet or exceed critical design pressure determined in accordance with FBC Chapter 16. No rational analysis is permitted for these systems
- 5.8 For mechanically attached insulation or membrane over existing roof decks, fasteners shall be tested in the existing deck for withdrawal resistance. A qualified design professional shall review the data for comparison to the minimum requirements for the system. Testing and analysis shall be in accordance with TAS 105.
- 5.9 For bonded insulation or membrane over existing substrates in a re-roof (tear off) or recover installation, the existing deck or existing roof surface shall be examined for compatibility with the adhesive to be installed. If any surface conditions exist that bring system performance into question, field uplift testing in accordance with ASTM E907 or FM LPDS 1-52 shall be conducted on mock-ups of the proposed new roof assembly.
- 5.10 For bonded insulation or membrane over existing substrates in a recover installation, the existing roof system shall be capable of resisting project design pressures on its own merit to the satisfaction of the AHJ, as documented through field uplift testing in accordance with ASTM E907 or FM LPDS 1-52.
- 5.11 Metal edge attachment (except gutters), shall be designed and installed for wind loads in accordance with FBC Chapter 16 and tested for resistance in accordance with ANSI/SPRI ES-1 or RAS 111, except the basic wind speed shall be determined from FBC Figure 1609.
- 5.12 All products in the roof assembly shall have quality assurance audit in accordance with the FBC and F.A.C. Rule 9B-72.

6. INSTALLATION:

- 6.1 Polyglass Modified Bitumen roof systems shall be installed in accordance with Polyglass USA, Inc. published installation instructions, subject to the Limitations / Conditions of Use noted below.
- 6.2 System attachment requirements for wind load resistance are set forth in Appendix 1.



- 6.3 Any of the following FBC Approved coatings may be applied to the top roof membrane without adverse effect on the system wind load performance. Refer to current Roofing Materials Directory for fire ratings associated with coating usage.
- > PG200 Non Fibered Roof Coating or Mule-Hide 111 Non-Fibrated Roof Coating;
 - > PG300 Fibered Roof Coating or Mule-Hide 102 Fibrated Roof Coating;
 - > PG600 Non-Fibered Aluminum Roof Coating or Mule-Hide 416 Standard Non-Fibrated Aluminum Roof Coating;
 - > PG650 Fibered Aluminum Roof Coating or Mule-Hide 406 Standard Fibrated Aluminum Roof Coating;
 - > PG700 White Reflective Roof Coating;
 - > PG800 Non-Fibered Asphalt Emulsion Roof Coating or Mule-Hide 311 Emulsion Non-Fibrated;
 - > PG850 Fibered Asphalt Emulsion Roof Coating or Mule-Hide 301 Emulsion Fibrated;
 - > Polyplus 60 Premium Non-Fibered Aluminum Roof Coating or Mule-Hide 410 Premium Non-Fibrated Aluminum Roof Coating;
 - > Polyplus 65 Premium Fibered Aluminum Roof Coating or Mule-Hide 401 Premium Fibrated Aluminum Roof Coating;
 - > Polybrite 70 White Elastomeric Roof Coating.

7. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

8. MANUFACTURING PLANTS:

Winter Haven, FL; Fernley, NV; Hazelton, PA

9. QUALITY ASSURANCE ENTITY:

Underwriters Laboratories - QUA1743

- THE 33-PAGES THAT FOLLOW FORM PART OF THIS EVALUATION REPORT -



APPENDIX 1: ATTACHMENT REQUIREMENTS FOR WIND UPLIFT RESISTANCE

Table	Deck	Application	Type	Description	Page
1A-1	Wood	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	4-5
1A-2	Wood	New, Reroof (Tear-Off) or Recover	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	6
1B	Wood	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	7
1C	Wood	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	8
1D	Wood	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover	9
1E	Wood	New or Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	10-11
1F	Wood	New or Reroof (Tear-Off)	F	Non-Insulated, Bonded Roof Cover	11
2B	Steel or Conc.	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	12
2C	Steel or Conc.	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	13
2D-1	Steel or Conc.	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Base Sheet, Bonded Roof Cover	14
2D-2	Steel or Conc.	New, Reroof (Tear-Off) or Recover	D	Prelim. Attached Insulation, Mech. Attached Roof Cover	15
3A-1	Concrete	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	16-18
3A-2	Concrete	New or Reroof (Tear-Off)	A-1	Bonded Temporary Roof, Bonded Insulation, Bonded Roof Cover	19
3F	Concrete	New or Reroof (Tear-Off)	F	Non-Insulated, Bonded Roof Cover	20
4A	LWIC	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	21-22
4B	LWIC	New or Reroof (Tear-Off)	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	23
4C	LWIC	New or Reroof (Tear-Off)	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	24-26
5A	CWF	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	27
5B	CWF	New, Reroof (Tear-Off) or Recover	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	28
5C	CWF	New, Reroof (Tear-Off) or Recover	B	Mech. Attached Base Insulation, Bonded Top Insulation, Bonded Roof Cover	29
5D	CWF	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	29
5E	CWF	New, Reroof (Tear-Off) or Recover	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	29
6A	Gypsum	New or Reroof (Tear-Off)	A-1	Bonded Insulation, Bonded Roof Cover	30
6B	Gypsum	New, Reroof (Tear-Off) or Recover	A-2	Mech. Attached Anchor Sheet, Bonded Insulation, Bonded Roof Cover	30
6C	Gypsum	New, Reroof (Tear-Off) or Recover	C	Mech. Attached Insulation, Bonded Roof Cover	31
6E	Gypsum	New, Reroof (Tear-Off) or Recover	E	Non-Insulated, Mech. Attached Base Sheet, Bonded Roof Cover	31
7A	Various	Recover	A-1	Bonded Insulation, Bonded Roof Cover	32
7B	Various	Recover	F	Non-Insulated, Bonded Base Sheet, Bonded Roof Cover	33

The following notes apply to the systems outlined herein:

1. Roof decks shall be in accordance with FBC requirements to the satisfaction of the AHJ.
2. Insulation / base sheet fasteners shall be of sufficient length for the following deck engagement:
 - Wood: Minimum ¾-inch penetration.
 - Steel: Minimum ¾-inch penetration and engage the top flute of the steel deck.
 - Concrete: Minimum 1-inch embedment into pilot hole in accordance with fastener manufacturer's published installation instructions.
3. Unless otherwise noted, insulation adhesive application rates are as follows. Ribbon or bead width is at the time of application; the ribbons/beads shall expand as noted in the manufacturer's published instructions.
 - Hot asphalt at 20-40 lbs/square.
 - Dow Insta-Stik Roofing Adhesive is continuous ¾ to 1-inch wide beads, 12-inch o.c.
 - Millennium One Step Foamable Adhesive in continuous ½ to ¾-inch wide beads, 12-inch o.c.
 - OlyBond 500 Adhesive Fastener in continuous ¾ to 1-inch wide ribbons, 12-inch o.c. using OMG PaceCart or SpotShot dispensing system. Note: OlyBond 500 Green may be used in any system listing OlyBond 500.
 - TITSEET Insulation Adhesive in continuous 2½-3½-inch wide ribbons, 12-inch o.c.
4. Unless otherwise noted, the insulation may be any polyisocyanurate, polystyrene, fiberboard, perlite and/or gypsum-based insulation board that meets the QA requirements of F.A.C. Rule 9B-72 and is documented as meeting FBC 1505.1 and, for foam plastic, FBC 2603.4.1 or 2603.6, when installed with the roof cover.
5. Bonded polyisocyanurate insulation boards shall be maximum 4 x 4 ft.
6. For mechanically attached or strip-bonded components, the maximum design pressure for the selected assembly shall meet or exceed the Zone 1 design pressure determined in accordance with FBC Chapter 16, and Zones 2 and 3 shall employ an attachment density designed by a qualified design professional to resist the elevated pressure criteria.
7. For fully bonded assemblies, the maximum design pressure for the selected assembly shall meet or exceed critical design pressure determined in accordance with FBC Chapter 16, and no rational analysis is permitted.
8. For mechanically attached components over existing decks, fasteners shall be tested in the existing deck for withdrawal resistance. A qualified design professional shall review the data for comparison to the minimum requirements for the system. Testing and analysis shall be in accordance with TAS 105.
9. For existing substrates in a bonded recover installation, the existing roof system shall be capable of resisting project design pressures on its own merit to the satisfaction of the AHJ, as documented through field uplift testing in accordance with ASTM E907 or FM LPDS 1-52.
10. Unless otherwise noted, all insulation references are flat stock. Tapered polyisocyanurate may be substituted for flat stock board with the following Maximum Design Pressure (MDP) limitations:
 - Insta-Stik Roofing Adhesive: MDP -120.0 psf
 - OlyBond 500 Adhesive Fastener: MDP -120.0 psf
 - TITSEET Insulation Adhesive: MDP -117.5 psf

11. Unless otherwise noted, refer to the following references for bonded base, ply or cap sheet applications.

Table 1: Polyglass Roof Covers			
Reference	Layer	Material	Application
BP-AA (Base and Ply sheets, Asphalt-Applied)	Base	Polyglass G2 Base, Modibase	Hot asphalt at 20-40 lbs/square
	Ply	ASTM D2178, Type IV or VI	
SBS-AA (SBS, Asphalt-Applied)	Base or Ply	Elastobase, Elastobase Poly, Elastoflex V, Elastoflex S6	Hot asphalt at 20-40 lbs/square
	Cap	Elastoflex S6, Elastoflex S6 G, Elastoflex S6 G FR, Elastoshield TS-G, Elastoshield TS-G FR, Polyfresko MOP, Polyfresko MOP FR	
SBS-TA (SBS, Torch-Applied)	Base or Ply	Elastoflex V, Elastoflex S6	Torch-Applied
	Cap	Elastoflex V, Elastoflex VG, Elastoflex VG FR, Elastoflex S6, Elastoflex S6 G, Elastoflex S6 G FR, Elastoshield TS-G, Elastoshield TS-G FR, Polyfresko MOP, Polyfresko MOP FR	
SBS-SA (SBS, Self-Adhering)	Base	Elastoflex SA V, Elastoflex SA V FR	Self-Adhering
	Cap	Elastoflex SA P, Elastoflex SA P FR, Polyfresko SBS SAP, Polyfresko SBS SAP FR	
APP-TA (APP, Torch-Applied)	Base or Ply	Polyflex, Polybond	Torch-Applied
	Cap	Polyflex, Polyflex G, Polyflex G FR, Polybond, Polybond G, Polyfresko Torch, Polyfresko Torch FR	
APP-SA (APP, Self-Adhering)	Cap	Polyflex SA P, Polyflex SA P FR, Polyfresko APP SAP, Polyfresko APP SAP FR, Polykool, Polybiaiko	Self-Adhering
TPO-TA (TPO, Torch-Applied)	Base	Xtraflex	Torch-Applied
	Cap	Xtraflex, Xtraflex G, Xtraflex G FR	

12. Any of the following FBC Approved coatings may be applied to the top roof membrane without adverse effect on the system wind load performance. Refer to current Roofing Materials Directory for fire ratings associated with coating usage.

- PG200 Non Fibered Roof Coating or Mule-Hide 111 Non-Fibrated Roof Coating;
- PG300 Fibered Roof Coating or Mule-Hide 102 Fibrated Roof Coating;
- PG600 Non-Fibered Aluminum Roof Coating or Mule-Hide 416 Standard Non-Fibrated Aluminum Roof Coating;
- PG650 Fibered Aluminum Roof Coating or Mule-Hide 406 Standard Fibrated Aluminum Roof Coating;
- PG700 White Reflective Roof Coating;
- PG800 Non-Fibered Asphalt Emulsion Roof Coating or Mule-Hide 311 Emulsion Non-Fibrated;
- PG850 Fibered Asphalt Emulsion Roof Coating or Mule-Hide 301 Emulsion Fibrated;
- Polyplus 60 Premium Non-Fibered Aluminum Roof Coating or Mule-Hide 410 Premium Non-Fibrated Aluminum Roof Coating;
- Polyplus 65 Premium Fibered Aluminum Roof Coating or Mule-Hide 401 Premium Fibrated Aluminum Roof Coating;
- Polybrite 70 White Elastomeric Roof Coating.

**TABLE 1E: WOOD DECKS – NEW CONSTRUCTION or REROOF (Tear-Off)
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER**

System No.	Roof Deck	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasteners	Attach	Ply	Cap	
W-21	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails	8" o.c. in 4" lap and 8" o.c. in three, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA or TPO-TA	-52.5
W-22	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with 8d common nails	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails	8" o.c. in 4" lap and 8" o.c. in three, equally spaced, staggered center rows	(Optional) One or more SBS-SA	SBS-SA or APP-SA	-52.5
W-23	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with 8d common nails	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12" o.c. in 4" lap and 12" o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA or TPO-TA	-52.5
W-24	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with 8d common nails	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #14, Dekfast Hex with Dekfast #14 or TruFast MP-3 with TruFast HD	12" o.c. in 4" lap and 12" o.c. in two, equally spaced, staggered center rows	One or more SBS-SA	SBS-SA or APP-SA	-52.5
W-25	Min. 19/32" plywood at max. 24" spans attached 4" o.c. with 8d common nails or 6" o.c. with #8 screws	Elastobase, Elastobase Poly, Polyglass G2 Base, CertainTeed Glasbase, Firestone MB Base, JM Perma-Ply 28, Tamko Glass Base or GAFGLAS #75	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails	8" o.c. in 4" lap and 8" o.c. in three, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA or TPO-TA	-60.0
W-26	Min. 19/32" plywood at max. 24" spans attached 4" o.c. with 8d common nails or 6" o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails	8" o.c. in 4" lap and 8" o.c. in three, equally spaced, staggered center rows	(Optional) One or more SBS-SA	SBS-SA or APP-SA	-60.0
W-27	Min. 19/32" plywood at max. 24" spans attached 4" o.c. with 8d common nails or 6" o.c. with #8 screws	Elastobase or Elastobase Poly	OMG Flat Bottom Plates (square) with Roofgrip #12	12" o.c. in 4" lap and 12" o.c. in two, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA or TPO-TA	-60.0
W-28	Min. 19/32" plywood at max. 24" spans attached 4" o.c. with 8d common nails or 6" o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	OMG Flat Bottom Plates (square) with Roofgrip #12	12" o.c. in 4" lap and 12" o.c. in two, equally spaced, staggered center rows	One or more SBS-SA	SBS-SA or APP-SA	-60.0
W-29	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails.	4" o.c. in 4" lap and 4" o.c. in four, equally spaced, staggered center rows	(Optional) One or more SBS-SA	SBS-SA or APP-SA	-97.5
W-30	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with #8 screws	Elastobase or Elastobase Poly	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails	6" o.c. in 4" lap and 6" o.c. in four, equally spaced, staggered center rows	(Optional) One or more BP-AA, SBS-AA, SBS-TA or APP-TA	SBS-AA, SBS-TA, APP-TA or TPO-TA	-112.5



TABLE 1E: WOOD DECKS – NEW CONSTRUCTION or REROOF (Tear-Off)							
SYSTEM TYPE E: NON-INSULATED, MECHANICALLY ATTACHED BASE SHEET, BONDED ROOF COVER							
System No.	Roof Deck	Base Sheet			Roof Cover		MDP (psf)
		Base	Fasteners	Attach	Ply	Cap	
W-31	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with #8 screws	Elastobase or Elastobase Poly with poly top surface	32 ga., 1-5/8" diameter tin caps with 11 ga. annular ring shank nails. Note: Tin caps are to be primed with PG100 or ASTM D41 primer.	6" o.c. in 4" lap and 6" o.c. in four, equally spaced, staggered center rows	(Optional) One or more SBS-SA	SBS-SA or APP-SA	-112.5

TABLE 1F: WOOD DECKS – NEW CONSTRUCTION or REROOF (Tear-Off)						
SYSTEM TYPE F: NON-INSULATED, BONDED ROOF COVER						
System No.	Deck	Primer	Roof Cover			MDP (psf)
			Base	Ply	Cap	
W-32	Min. 19/32" plywood at max. 24" spans attached 6" o.c. with 8d ring shank nails	(Optional) PG100	SBS-SA	(Optional) SBS-SA	SBS-SA or APP-SA	-90.0



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-2204765

RE-ROOF CHECKLIST

A document review will be performed on the following items prior to the submittal of a permit application. Failure to submit these items will result in the application package returned to the applicant until the deficient documents are included.

THIS REVIEW SHEET MUST ACCOMPANY THE APPLICATION SUBMITTAL.

Please make sure you have ALL required copies before submitting permit application

The following minimum requirements must be provided for permitting and inspections:

- 1 Copy Completed application
- 2 Copies Complete list of proposed materials
- 2 Copies Re-roof certification
- 1 Copy Re-roof Inspection affidavit if used, prior to final inspection.

RESIDENTIAL REROOFS:

- 2 Copies approved roofing manufacturer specifications for all products used.
 - Manufacturer specs/fastening schedule for roof shingles (must meet the minimum area wind load).
 - Manufacturer must have Florida Product Approval
 - Location of proposed re-roof (if only a partial re-roof) and area % calculation
 - Section/detail through hip and ridge tile caps per F.R.S.A. for tile roofs**
- 2 Copies Re-roof windstorm loss mitigation certification (and affidavit if applicable)

COMMERCIAL REROOFS:

- 2 Copies Roof Plan:
 - Show all features (pitch, drains, equipment, etc.)
 - Details: 3/4" = 1'.0" min. scale
 - Parapet or edge
 - Rooftop mounting or equipment expansion joints
 - Type of roofing (& insulation if any) being removed
 - Type of roof deck
- 2 Copies Approved roofing manufacturer specifications for all products used.
 - Manufacturers complete roofing system specifications & installation guidelines (Include fastening schedule meeting minimum area wind load).
- 1 Copy Verification of Contractor form
 - Contractor verification form (HVAC and/or electric) required if roof top HVAC equipment is removed/reinstalled and/or if HVAC electric is disconnected/reconnected.

****Concrete or ClayTile Roof: Specify how the roof field tile will be attached to the deck (reference F.S.R.A Installation Manual). Provide section details showing the installation/attachment of ridge and hip cap tile. Demonstrate compliance with the 2007 FBC 1507.3. & 2007 FBC/Residential R905.3. Also provide Product Approval for all roof adhesives.**

**All Product Approval & Installation Spec's must be on the job site for inspection.
All tile re-roofs require an "in progress" tile installation inspection or certified pull test at final.**



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT
 One S. Sewall's Point Road
 Sewall's Point, Florida 34996
 Tel 772-287-2455 Fax 772-2204765

RE: Permit # 9317

Date Dec 15, 09

Inspection Affidavit

I Joseph W. Snyder, licensed as a(n) Contractor* /Engineer/Architect,
 (please print name and circle Lic. Type) FS 468 Building Inspector*

License #: CCC-1329224

On or about Dec 16, 09 / 9:30, I did personally inspect the roof
 (Date & time)

deck nailing and/or secondary water barrier work at 20 N. Via Lucindia
 (circle one) (Job Site Address)

Stuart, FL 34996

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

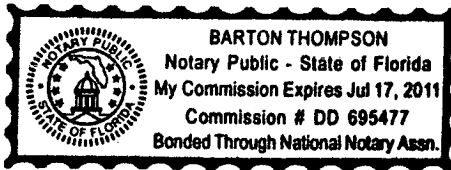
X [Signature]
 Signature

STATE OF FLORIDA
 COUNTY OF

Sworn to and subscribed before me this 15th day of December, 2009

By Joseph W. Snyder

Notary Public, State of Florida



Bart Thompson
 (Print, type or stamp name)

Commission No.: DD 695477

Personally known or

Produced Identification

Type of identification produced. _____

* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri Dec 16, 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9273	ATT	across street of HSW		CLOSE
11:30	103 H. Sewalls Way SBA NETWORK SERV	FINAL	PASS	contact FPL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9220	CRISPIN 30 E. ALICE PT. MISAITC	A/C FINAL		TRAVIS INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9285	108 H. Sewalls Way OLNEY EVERLAST	SCREEN FINAL	PASS	CLOSE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9377	VON STATEN 20 N. VIA LUCINDIA SEASIDE	IN PROGRESS	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9316	VON STATEN 20 VIA LUCINDIA KRAUSS & CRANE	A/C FINAL	FAIL	LIAISON IN ATTIC LTR ABOUT SERVICE INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9000	CD2 4 River Oak Rd Riverview Court	Meter Final	PASS	contact FPL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

YIZY WEINGARTEN
Elite General Contractors, Inc
Post Office Box 9400
Coral Springs, FL 33075

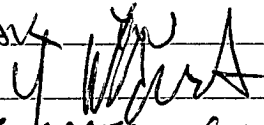
JUNE 09-08

TOWNA OF SEWALLY PT. BLDG. DEPT.
ONE S. SEWALLY PT. ROAD
SEWALLY PT., FL 34996
ATTN.

TO WHOM IT MAY CONCERN;
PLEASE FIND ATTACHED PERMIT
RENEWAL CK. I WILL CALL FOR
FINAL INSPECTION AFTER YOU
LET ME KNOW YOU RECEIVED
ABOVE CK.

MY (2) TEL. #'S;

- (A) OFFICE: 954-580-0753
- (B) MOBILE 954-707-0505

THANK YOU


CGC A14111 YIZY WEINGARTEN, G.C.
P.S. FOR QUICK REPROJSE MAIL YOUR
LETTERS TO; 3550 N.W. 8TH AVE.
UNIT # 816, POMPANETO BEACH, FL. 33064

THANK
YIZY
2.



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

Valerie X13

PERMIT RENEWAL REQUEST

TO BE COMPLETED BY OWNER /BUILDER OR CONTRACTOR

DATE: 6-6-08 PERMIT NUMBER: 8574

COMPANY: Elite General Cont. PHONE NUMBER: 954-580-0753

OWNER'S NAME: Von Studen QUALIFIER'S NAME: Ugy Weingarten

PERMIT ADDRESS: 20 N. Via Lucindia, Sewall's Pt

TYPE OF PERMIT: soffits & vents

[Signature]
Owner/Builder or Contractor's Signature

CBC A1411
Contractor License number

***** OFFICE USE ONLY *****

STATUS OF PERMIT: The above permit has been inactive for since 10-13-07 days.

Date and type of last inspection: NONE Last inspection Passed Failed

Number and date(s) of previous renewals: NONE

Was the original permit submitted prior to October 1, 2005? Yes or No

According to the review of this file it has been determined that this permit is eligible for renewal.

According to the review of this file it has been determined that the permit is not eligible for renewal and the applicant must reapply under the current applicable codes.

Permit Technician: _____

Comments: _____

Renewal fees due: \$ 3500

Applicant notification date: _____

Please mail \$35 renewal fee & set up final inspection with owner & Town-

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4-13-07

BUILDING PERMIT NO. 8574

Building to be erected for Von Staden

Type of Permit Soffit + vents

Applied for by Elite General Cont.

(Contractor) Building Fee 35

Subdivision Lucindia Lot 8 Block _____

Radon Fee _____

Address 20 N Via Lucindia

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

Electrical Fee _____

13841-007-000-00080-0

Plumbing Fee _____

Amount Paid \$35 - Check # 1257 Cash _____ Other Fees (_____) _____

Roofing Fee _____

Total Construction Cost \$ 1850

TOTAL Fees 35

Signed Larry Sheel
Applicant

Signed John Adams
Town Building Official

6-6-08 called

PERMIT

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

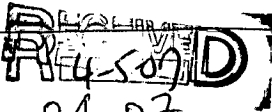
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL

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

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: APRIL 04, 07

OWNER/TITLEHOLDER NAME: CHARLOTTE E. VON STADEN Phone (Day) 772-286-3798 (Fax) _____

Job Site Address: 20 VIA LUCINDIA DR. N. City: SEWALLS POINT State: FL. Zip: 34996-6408

Legal Desc. Property (Subd/Lot/Block) _____ Parcel Number: _____

Owner Address (if different): _____ City: _____ State: _____ Zip: _____

Description of Work To Be Done: REPLACE ROTTED SORBIT (PARTIAL PERIMETER), W/ NEW VENTS

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 1,850-

(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: ELITE GENERAL CONTRACTORS Phone: 954-580-0753 Fax: 954-580-0753

Street: 3550 N.W. 87TH AVE. WALT #409 INC. City: POMPANO BEACH State: FL. Zip: 33064

State Registration Number: CGC A14111 State Certification Number: CGC A14111 Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____
Mechanical: _____ State: _____ License Number: _____
Plumbing: N.A. State: _____ License Number: _____
Roofing: _____ State: _____ License Number: _____

ARCHITECT N.A. Lic.# _____ Phone Number _____
Street: _____ City: _____ State: _____ Zip: _____

ENGINEER N.A. 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 _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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) Charlotte E. Von Staden

State of Florida, County of: Martin

This the 5th day of April, 2007

by Charlotte Von Staden who is personally known to me or produced FLD#V523-100-21-879-0

as identification Valerie Meyer

My Commission Expires Notary Public VALERIE MEYER MY COMMISSION # DD552119 EXPIRES: 09/14, 2010

CONTRACTOR SIGNATURE (required) [Signature]

On State of Florida, County of: Martin

This the 5th day of April, 2007

by Utschke Weingarten who is personally known to me or produced FLD#W526-960-45-143-0

As identification Valerie Meyer

My Commission Expires Notary Public VALERIE MEYER MY COMMISSION # DD552119 EXPIRES: 09/14, 2010



ELITE

GENERAL CONTRACTORS INC.

DESIGNERS • DEVELOPERS • BUILDERS

POST OFFICE BOX 9400
CORAL SPRINGS, FL 33075
FAX 954 580-0753

YIZY WEINGARTEN
CGC A14111
Office 954 580-0753
Mobile 954 707-0505



Martin County, Florida
 Laurel Kelly, C.F.A

Site Provided by...
 governmax.com T1.1

Summary

Legal Description
 43 of 45

Parcel Info

Summary

- Land
- Residential Improvement
- Commercial
- Image
- Sales & Transfers
- Assessments →
- Taxes →
- Parcel Map →
- Full Legal →

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
01-38-41-007-000-00080-8	16 N VIA LUCINDA DR	17693	Legal Description	0	1

Summary

Property Location 16 N VIA LUCINDA DR
Tax District 2200 Sewall's Point
Account # 17693
Land Use 101 0100 Single Family
Neighborhood 120350
Acres

Legal Description
Property Information
 LUCINDIA LOT 8

Owner Information
Owner Information
 VON STADEN, CHARLOTTE

Mail Information
 20 VIA LUCINDIA
 STUART FL 34996-6408

Assessment Info
 Front Ft. 0.00

Market Land Value \$224,000
Market Impr Value \$89,450
Market Total Value \$313,450

Search By

- Parcel ID
- Owner
- Address
- Account #
- Use Code

Legal Description

- Neighborhood
- Sales
- Map →

Site Functions

- Property Search
- Contact Us
- On-Line Help
- County Home
- Site Home
- County Login

Recent Sale
Sale Amount \$148,000

Sale Date 7/22/1987
Book/Page 0728 1220





ELITE

GENERAL CONTRACTORS INC.

DESIGNERS • DEVELOPERS • BUILDERS

APRIL 12, 2007

TOWN OF SEAWALL'S POINT
1 S. SEAWALL'S POINT ROAD
SEAWALL'S POINT, FL. 34996

RE: BUILDING PERMIT

TO WHOM IT MAY CONCERN;

PLEASE LET LARRY SHROCK (ASSOCIATE) TO PICK UP

MY BUILDING PERMIT FOR:

CHARLOTTE E. VON STADEN

20 VIA LUCINDIA DR. N.

SEWALL POINT, FL. 34996

ANY QUESTIONS, PLEASE CALL ME:

1. OFFICE 954.580.0753

2. MOBILE 954.707.0505

PLEASE SEND ME DIRECT, COPY OF BLD'G. PERMIT & CK RECEIPT.

THANK YOU

YITZY WEINGARTEN
PRES. ELITE G.C. INC.

P.S.

FOUND ATTACHED CK # 1257
BLD'G. PERMIT FOR ABOVE
PROJECT, @ \$35.00
Y.W.


ACORD. CERTIFICATE OF LIABILITY INSURANCE		OP ID TM NHR5001	DATE (MM/DD/YYYY) 04/11/07
PRODUCER *Huckleberry Sibley & Harvey* 1020 N Orlando Ave. Suite 200 Maitland FL 32751 Phone: 800-300-6641 Fax: 407-628-1635	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 NHRC Services Corp. DBA NHRC ELITE General Contractors Inc. DBA Elite Elite General Contractors 1722 Avenida Del Sol Boca Raton FL 33432	INSURERS AFFORDING COVERAGE INSURER A: Mid-Continent Casualty Company INSURER B: INSURER C: INSURER D: INSURER E:	NAIC # 15380	

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.

INSTR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	04-GI-000632847	05/30/06	05/30/07	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRQ. JECT <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (EA occurrence) \$ 100,000 MGD EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMPROP AGG \$ 2,000,000
	<input type="checkbox"/> AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: CA ACC \$ AGG \$
	<input type="checkbox"/> EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	<input type="checkbox"/> WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<input type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH- CR E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

CERTIFICATE HOLDER TOWNSEW Town of Seawall's Point 1 South Seawall's Point Road Seawall's Point FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
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CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
4/11/2007

PRODUCER ANDON MEEK 1111 COURT STREET SEASIDE, FL 33756 FRANK CRUM 1-800-277-1620 10 S MISSOURI AVENUE SEASIDE, FL 33756	Serial # 116384 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.
INSURERS AFFORDING COVERAGE	NAIC#
INSURER A: FRANK WINSTON CRUM INSURANCE, INC.	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

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 OF 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.

SR	TR	ADDL INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
			GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
			AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON OWNED AUTOS				COMBINED SINGLE LIMIT (Per accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
			GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
			EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER / MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC 7 0000 0000	1/1/2007	1/1/2008	<input checked="" type="checkbox"/> WE STATE TOY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
			OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 THIS CERTIFICATE REMAINS IN EFFECT PROVIDED THE CLIENT'S ACCOUNT IS IN GOOD STANDING WITH FrankCrum. COVERAGE NOT PROVIDED FOR ANY EMPLOYEE FOR WHICH THE CLIENT IS NOT REPORTING HOURS TO FrankCrum. COVERAGE IS NOT PROVIDED FOR STATUTORY EMPLOYEES OF THE CLIENT. EFFECTIVE 11/24/2003, APPLIES TO 100% OF THE EMPLOYEES OF FrankCrum LEASED TO ELITE GENERAL CONTRACTORS, INC.
 1-393-3950

CERTIFICATE HOLDER TOWN OF SEWALL'S POINT 1 S. SEWALL'S POINT RD SEWALL'S POINT, FL 33756	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
---	--



STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

AC# 2747610

CGCA14111

08/24/06 068020478

CERTIFIED GENERAL CONTRACTOR
WEINGARTEN, YIZY
ELITE GENERAL CONTRACTORS INC

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date: AUG 31, 2008

L06082401795

2003-24844

STATE OF FLORIDA
PALM BEACH COUNTY
OCCUPATIONAL LICENSE

OC-032
CLASSIFICATION

EXPIRES: SEPTEMBER - 30 - 2007

ELITE GENERAL CONTRACTORS INC	** LOCATED AT	CNTY	\$27.50
SHRIBERG KENNETH			
WEINGARTEN YIZY, QUALIFIER	1722 AVENIDA DEL SOL		
	BOCA RATON FL 33432-1741		
		TOTAL	\$27.50

Is hereby licensed at above address for the period beginning on the first day of October and ending on the thirtieth day of September to engage in the business, profession or occupation of:

GENERAL CONTRACTOR

CGCA14111

PETER H. CARNEY
TAX COLLECTOR, PALM BEACH COUNTY

THIS IS NOT A BILL - DO NOT PAY

PAID. PBC TAX COLLECTOR
\$27.50 OCC 003 007026 09-15-2006

**THIS LICENSE VALID ONLY WHEN RECEIPTED BY
TAX COLLECTOR**

TRANS FROM 180-4873 Board of County Commissioners, Broward County Florida
BROWARD COUNTY OCCUPATIONAL LICENSE TAX

00070

FORM NO. 401-280/AC 25-061
RV200625413 (Rev. 3/06)

FOR PERIOD OCTOBER 1, 2006 THRU SEPTEMBER 30, 2007

RENEWAL TRANSFER SEC # 18 / 180

NEW DATE BUSINESS OPENED 08/21/02

STATE OR COUNTY CERT. REG # 250611111
Business Location Address:

1722 AVENIDA DEL SOL
PALM BEACH COUNTY 33432
BUSINESS PHONE: (954) 346-1956

TAX	27.00
BACK TAX	
PENALTY	
T.C. FEE	
TRANSFER	
TOTAL	27.00

PENALTIES IF PAID	
OCT. - 10%	NOV. - 15%
* DEC. - 20%	* After DEC. 31 - 25%
* Plus Tax Collection Fee of up to \$25.00 Based on Cost of License if Paid On or After November 30.	

ACCOUNT NUMBER
180-0005861

THIS LICENSE MUST BE CONSPICUOUSLY DISPLAYED
TO PUBLIC VIEW AT THE LOCATION ADDRESS ABOVE.

ELITE GENERAL CONTRACTORS INC
WEINGARTEN YIZY
1722 AVENIDA DEL SOL
BOCA RATON FL 33432



TYPE OF LICENSE TAX PAID

GENERAL CONTRACTOR
1 UNIT

BROWARD COUNTY REVENUE COLLECTION
115 S. Andrews Avenue, Governmental Center Annex
FORT LAUDERDALE, FL 33301
www.broward.org/revenue

2006 - 2007

PAYMENT RECEIVED AS VALIDATED ABOVE *SEE INSTRUCTIONS ON BACK OF LAST COPY

PAID 09/26/06 7020793.0001

27.00

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~Thu~~ ^{Thurs} 7-3, 2008

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8745	Nelson	Asptic Connection	PASS	
1	3 Marguerita Nelson Homes	772-634-7453 New		INSPECTOR: <i>[Signature]</i>
8920	Skinner	concrete	PASS	
4	15 Palmetto Dr Tuscany Bay			INSPECTOR: <i>[Signature]</i>
CE	4 Riverside	work w/o permit	PERMIT NOT	REQ'D FOR PAPER
CE	110 S Sewalls	curbstone removed	per spec	INSPECTOR: [Signature]
CE	4 S Via Luinda	weed		INSPECTOR: [Signature]
8919	Mayewski	rough plumb	FAIL	
2	24 E High Pt ATG	light check pressure test	FAIL	INSPECTOR: <i>[Signature]</i>
8574	VonStaden	Final	PASS	Close
3	20 N. Via Luinda Elite Grill Cont	subbit + vents		INSPECTOR: <i>[Signature]</i>
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/7, 2005

Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1	DUNN	POWER REL.	PASS	
	31. N. RIVER RD	B.I.S		
	F.F.O.			INSPECTOR:
7753 4	BIRD	ROOF IN PROG	MET	NO ACCESS W/ ROOFER
	27 LOFTING WAY		GATE	CLOSED NO
	L&W ROOFING			INSPECTOR: RESPONSE
7869 8	VON STODEN	FINAL ROOF	PASS	CLOSE
	20 N. VIALUCINDIA			
	SEASIDE ROOFING			INSPECTOR:
7873 5	NOJEHL	CEILING PLUMB	PASS	
	26 W. HIGH	FOOTING		
	O/B			INSPECTOR:
7528 9	SWEET	FINAL ROOF	PASS	CLOSE.
	19 S. RIDGEVIEW			
	CARDINAL	335-9550		INSPECTOR:
7431 2	MAC DOUGALL	FINAL RETAINING WALL	PASS	CLOSE
	23 N. RIVER RD			
	CUSTOM BUILT MAR.			INSPECTOR:
6891 10	ZAMBO	FINAL EXT. DOORS	FAIL	
	46 S. Sewall St	MINOR A+C Drywall		
	O/B			INSPECTOR:

OTHER: _____

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11-4-05

BUILDING PERMIT NO. 7869

Building to be erected for VON STADEN

Type of Permit REROOF

Applied for by SEASIDE ROOFING (Contractor)

Building Fee _____

Subdivision LUCINDIA Lot 8 Block _____

Radon Fee _____

Address 20 N. VIA LUCINDIA

Impact Fee _____

Type of structure SFR

A/C Fee NK

Parcel Control Number:

0138410070000008080000

Electrical Fee HURRICANE

Plumbing Fee DAMAGE

Amount Paid NK Check # _____ Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 10,500.

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 _____

hurricane

RECEIVED
11/10/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: _____

OWNER/TITLEHOLDER NAME: Charlotte Von Staden Phone (Day) 286-3798 (Fax) _____

Job Site Address: 20 N Via Lucindia City: _____ State: _____ Zip: _____

Legal Desc. Property (Subd/Lot/Block) Lucindia Lot 8 Parcel Number: 01-38-41-007-000-00080-8

Owner Address (if different): _____ City: _____ State: _____ Zip: _____

Description of Work To Be Done: Replace existing foot with 5v-crimp metal

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 10,500⁰⁰
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

(If no, fill out the Contractor & Subcontractor sections below)

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

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: Seaside Roofing Inc. Phone: 283-9599 Fax: 283-9421

Street: 11646 SW Meadowlark Ct. City: Stuart State: FL Zip: 34997

State Registration Number: RL-0067328 State Certification Number: _____ Martin County License Number: SP-02719

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): 2004
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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)

x Charlotte Von Staden

State of Florida, County of: MARTIN

This the 3rd day of NOVEMBER 2005

by CHARLOTTE VON STADEN who is personally

known to me or produced FDL 5536-499-7D-028-1

as identification. 10/19/06

Notary Public

My Commission Expires _____

CONTRACTOR SIGNATURE (required)

Joseph Wesley Snyder

On State of Florida, County of: MARTIN

This the 1st day of NOVEMBER 2005

by JOSEPH WESLEY SNYDER who is personally

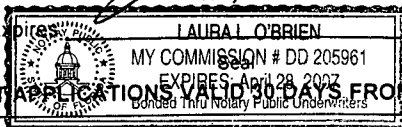
known to me or produced FDL 5536-499-7D-028-1

As identification. 11/28/10

Notary Public

My Commission Expires _____

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





**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)

**Union Corrugating Company
701 South King Street
Fayetteville, NC 23802-0229**

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: 5V Crimp Metal Roof Panel

LABELING: Each panel shall bear a permanent label with the manufacturer's name or logo, city, state and the 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 consists of pages 1 through 5.

The submitted documentation was reviewed by Frank Zuloaga, P.E.C.



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 1/2/05

BUILDING OFFICIAL
Gene Simmons

**REPAIR WORK FOR
HURRICANE DAMAGE**

NOA No.: 02-0322.08
Expiration Date: 04/25/07
Approval Date: 04/25/02
Page 1 of 5

ROOFING ASSEMBLY APPROVAL:

Category: Roofing
Sub-Category: Non-Structural Metal Roofing
Material: Steel
Deck Type: Wood
Maximum Design Pressure -132.5 psf.
Fire Classification Pressure See General Limitation #1

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
5V Crimp Metal Roof Panel	Length: varies Width: 26" (Coverage width : 24") Height: 1/2" Min. Thickness 0.019"	PA 125	Metal Roof panel coated with various approved coatings of Ceram-A-Star® 900.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Product Description</u>	<u>Manufacturer</u>
Fasteners (Panel)	#9	Corrosion resistant, sharp point hex-head screws with neoprene sealing washer.	Generic (with current NOA)

EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Akzo Nobel Coatings, Inc.	Lab Test Certification	ASTM B-117 ASTM G-23	
PRI Asphalt Technologies, Inc.	HTL-001-01-01	PA 100	02/18/02
Hurricane Test Laboratory, Inc.	0293-0102-02	PA 125	01/24/02



NOA No.: 02-0322.08
Expiration Date: 04/25/07
Approval Date: 04/25/02
Page 2 of 5

SYSTEM DESCRIPTION

- SYSTEM A-1S:** "5V-Crimp" 26 Ga. Metal Panel
- Deck Type:** Wood, Non-insulated
- Deck Description:** $1\frac{9}{32}$ " or greater plywood or wood plank.
- Slope Range:** 2": 12" or greater
- Maximum Uplift Pressure:** The maximum allowable design pressure for the 24" wide panel shall be – 132.5 psf.
- Deck Attachment:** In accordance with applicable Building Code, but in no case it shall be less than #8 x 2" screws spaced at 6" o. c. **Wood sheathing shall be sealed at adjacent joints with continuous bead of urethane sealant.**
- Underlayment:** Minimum underlayment shall be a ASTM D 226 Type II installed with a minimum 4" side-laps and 6" end-laps. Underlayment shall be fastened with corrosion resistant tin-caps and $1\frac{1}{4}$ " annular ring-shank nails, spaced 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll.
- Valleys:** Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with Union Corrugating Company's current published installation instructions.
- Fire Barrier Board:** For class A or B fire rating, install minimum $\frac{1}{4}$ " thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4mm thick of Tritex, RockRoof (with current NOA) or $\frac{5}{8}$ " water resistant type X gypsum sheathing with treated core and facer.
- Metal Panels and Accessories:** Install the "5V Steel Roofing Panel" and accessories in compliance with Union Corrugating Company's current published installation instructions and details. Flashing, penetrations, valley construction and other details shall be constructed in compliance with the minimum requirements provided in Roofing Application Standards RAS 133.
- 5V Roofing Panels shall be fastened with a minimum of #9 Hex Head Wood corrosion resistant fasteners with sealing washer. Fasteners shall of sufficient length to penetrate through the sheathing a minimum of $\frac{3}{16}$ ". Fasteners shall be place in accordance with fastener detail herein as follows:
1. Panel side ribs shall be fastened along side of the panel inside ribs, one fastener at the overlap and one fastener at the underlap. Center panel rib shall be fastened with one fastener at the overlap side of the panel.
 2. All fasteners at center rib, underlap rib, and overlap rib shall be spaced at a maximum of 24 inches o.c. parallel to the roof slope. See detail herein.

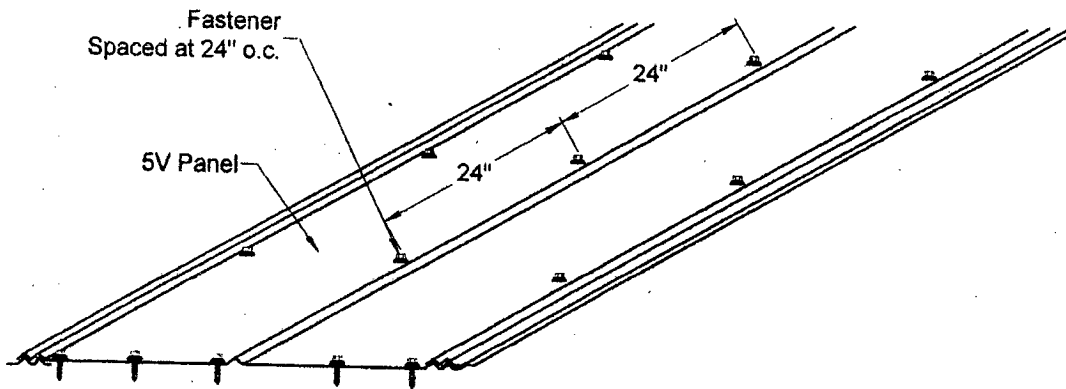
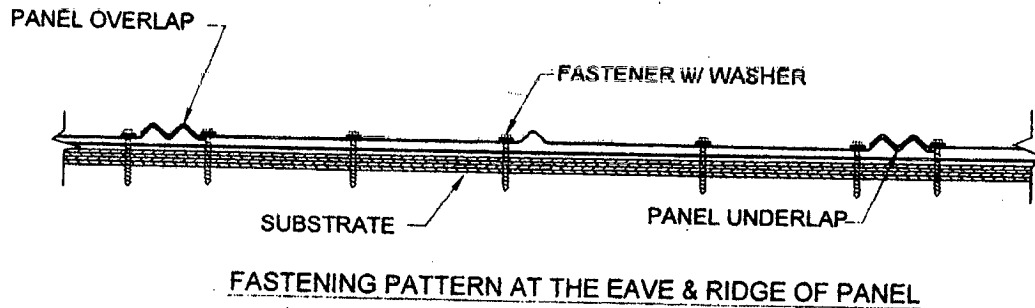
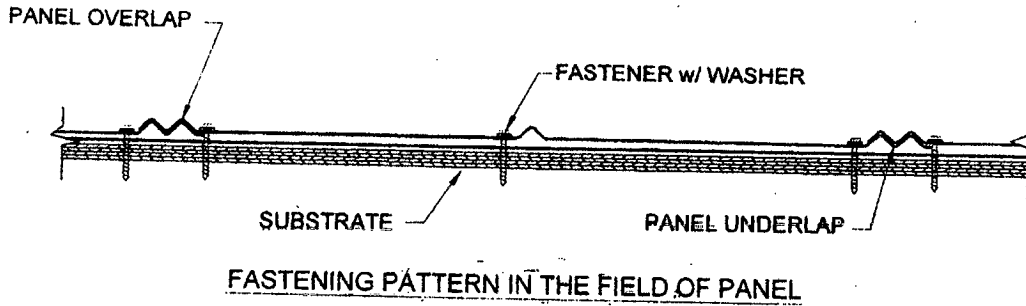
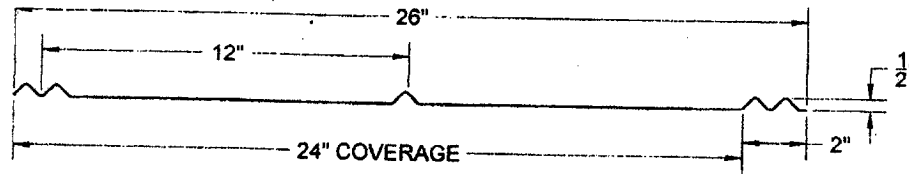


GENERAL LIMITATIONS:

1. Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. The maximum uplift pressures listed herein should meet or exceed the design pressures for the field, areas of the roof as determined by applicable building code. Increased design pressures at perimeter and corner areas may be met through rational analysis by increasing the number of attachment points in these areas. All rational analysis computations shall be conducted signed and sealed by a Registered Architect, Professional Engineer, or Registered Roof Consultant.
3. All panels shall be permanently labeled with the manufacturer's name or logo, city, state and the following statement: "Miami Dade County Product Control Approved".



NOA No.: 02-0322.08
Expiration Date: 04/25/07
Approval Date: 04/25/02
Page 4 of 5



5V-Crimp Panel

END OF THIS ACCEPTANCE



NOA No.: 02-0322.08
Expiration Date: 04/25/07
Approval Date: 04/25/02
Page 5 of 5

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

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):
01-38-41-007-000-00080-8, Lucinda Lot 8, 20 N Via Lucinda, Sewell's Pt.

GENERAL DESCRIPTION OF IMPROVEMENT: _____

OWNER: Charlotte Von Staden

ADDRESS: 20 N Via Lucinda, Sewell's Pt FL 34996

PHONE #: _____ FAX #: _____

CONTRACTOR: Seaside Roofing Int.

ADDRESS: 11646 SW Meadowlark Cir, Stuart FL 34997

PHONE #: 283-9599 FAX #: 283-9421

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

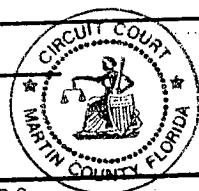
PHONE #: _____

STATE OF FLORIDA
MARTIN COUNTY

FAX #: THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL

MARSHA EWING, CLERK

BY [Signature] D.C.
DATE _____



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(1XA)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(1XB), FLORIDA STATUTES.
PHONE #: _____ FAX #: _____

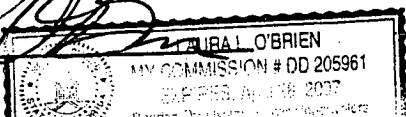
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Charlotte Von Staden
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 3rd DAY OF November
2005 BY CHARLOTTE VON STADEN

OR PERSONALLY KNOWN
PRODUCED ID FLDL V523-108-21-87
TYPE OF ID _____ *10/19/06

[Signature]
NOTARY SIGNATURE



INSTR # 1886568 DR BK 02079 PG 1301 RECD 11/04/2005 03:21:33 PM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix



MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

ROOFING CONTRACTOR

License Number SP02719 Expires: 30-SEP-07

SNYDER, JOSEPH W

SEASIDE ROOFING CO

11646 SW MEADOWLARK CIR

STUART, FL 34997

AC# 2089283

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L0507200082

DATE	BATCH NUMBER	LICENSE NBR
07/20/2005	050058298	RC0067328

The ROOFING CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2007
(INDIVIDUAL MUST MEET ALL LOCAL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

SNYDER, JOSEPH W
SEASIDE ROOFING CO
7993 SE ORCHARD TERRACE
HOBE SOUND FL 33455

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

Seaside Roofing, Inc.



11646 S.W. Meadowlark Cir., Stuart, Fl 34997
Phone (772) 283-9599 ◆ Fax (772) 283-9421 ◆ License RC-0067328

November 9, 2005

TO: SEWALLS POINT BLDG. DEPT.

ATT: PHIL

FROM: JOE SNYDER

JOB SITE: ~~VON STADEN RESIDENCE~~

20 N. VIA LUCINDIA — FILE # 7869

SEWALLS POINT

This letter is to confirm our conversation that the section in the specification's referring to the sealing of the plywood joints is being deleted.

THANK YOU,

JOSEPH W. SNYDER

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/9, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7447	DIMITRIU 6 BANYAN ROAD DAV SYSTEMS	FINAL WINDOW REPLACEMENT 9:00 A.M.	—	RESCHEDULE INSPECTOR: <i>[Signature]</i>
7849	DIMITRIU 6 BANYAN RD O/B	FINAL WINDOW REPLACEMENT 9:00 A.M.	—	RESCHEDULE INSPECTOR: <i>[Signature]</i>
7850	DESANTIS 82.5 SPR SPECIAL APPL.	U.G TANK	FAIL	INSPECTOR: <i>[Signature]</i>
TREE 3	DWYER 3 PALMETTO	TREE	—	NO ONE HOME RESCHEDULE INSPECTOR: <i>[Signature]</i>
7828	SWEET 19 S. RIDGEVIEW CARDINAL ROOFING	FINAL ROOF	FAIL	INSPECTOR: <i>[Signature]</i>
7869	VON STADEN 20 N. VIA LUCINDA SEASIDE ROOFING	DRY-IN (EARLY PLEASE)	PASS	INSPECTOR: <i>[Signature]</i>
7860	Feazel Roofing 9 mandalay Rd. Holland (O/B)	In progress "roof" AFTER 10:30	— FAIL	will RESCHEDULE (11/15) INSPECTOR: <i>[Signature]</i>

OTHER: _____

~~FINAL ROOF~~
~~SEASIDE~~



7869

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 20 N. 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.

FINAL ROOF

MISSING (2) SCREWS IN
FIELD ON WEST SIDE

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: 11/21


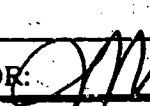




INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/21, 2005 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7776	ELDER	INTERIOR	PASS	
2	4 MARGUERITA	GAS ROUGH		INSPECTOR: 
	PROPANE DISC.			
6812	MADER	TRUSS ENDR.	PASS	
1	106 ABBIE CT	(REINSPECT)		INSPECTOR: 
	BUFORD			
7576	SILAS	ROOF SHEATH.	PASS	
5	10 CASTLE HILL			INSPECTOR: 
7776	ELDER	GASTANK+LINE	PASS	
3	4 MARGUERITA WAY			INSPECTOR: 
	PROPANE DISCOUNTERS			
7869	VON STADEN	FINAL ROOF	FAIL	
4	20 N. VIA LUCINDIA			INSPECTOR: 
	SEASIDE ROOFING			
7777	CATHEY	FOOTING	FAIL	
	47 S. SEWALL'S Pt	11:30		INSPECTOR: 
	DRIFWOOD HOMES			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

HP Color LaserJet CM1312nfi MFP

Fax Confirmation Report

HP LASERJET FAX

Aug-13-2012 10:00AM

Job	Date	Time	Type	Identification	Duration	Pages	Result
571	8/13/2012	9:59:50AM	Send	15617465707	0:33	1	OK

Aug. 13, 2012 9:00AM Daversa & Martyn

No. 9180 P. 1

DAVERSA AND MARTYN, P.A.
ATTORNEYS AT LAW
TEQUESTA FINANCIAL CENTER, SUITE 802
810 SOUTH U.S. HIGHWAY ONE
POST OFFICE BOX 3786
TEQUESTA, FLORIDA 32459-0786

561-746-570

JEFFREY N. DAVERSA
JOHN M. MARTYN

TEL (561) 746-8369
FAX (561) 746-8707

August 13, 2012

VIA FACSIMILE
Ann-Marie Basler
Town Clerk
Town of Sewall's Point
Fax 772-220-4765

Re: **Owner:** Charlotte Von Staden
Address: 20 N. Via Lucindia, Stuart, Florida 34996
Legal: Lot 8, Lucindia, as in Plat Book 3, Page 130, Martin County, Florida

Dear Ms. Basler:

This office is the closing agent for the sale of the above-referenced property. Please advise, by FAX, if there are any outstanding assessments or liens by the Town of Sewall's Point against the property.

Thank you for your prompt response to this request.

Sincerely

Fina Johnson
Real Estate Paralegal

*NO OPEN PERMITS - ValueiComet
Reg Dept 8-13-12

As of August 13, 2012 there are no outstanding code violations, etc. on the above property.

Ann-Marie S. Basler, Town Clerk

Please Note: Town records indicate that the Town of Sewall's Point has no liens or assessments on the referenced property. However, it should be noted that the complete record of liens and assessments on this property is on file with the Martin County Clerk of Circuit Court, PO Box 9016, Stuart, FL 34995-9016.

Vonstraden Residence 20 N. VIA LUCINDIA

7-12-12 GONE 4U



151

TOWN OF SEWALL'S POINT - FLORIDA

Application For Building Permit

Owner KURT SEHURN Present Address N.Y. Phone _____

Architect _____ Address _____

General Contractor T.E. SYLVESTER Address P.O. Box 963 ^{STUART} Phone 287-5487

Where Licensed STUART License No. _____

Plumbing Contractor _____ Where Licensed _____ No. _____

Electrical Contractor _____ Where Licensed _____ No. _____

Property Location LOT Subdivision LUCINDA Lot No. 8

Lot Dimensions 117 x 120 Lot Area _____ Sq. Ft. _____

Purpose of Building RESIDENCE Type of Construction C.B.S.

Building Area: Sq. Ft. (Exclusive of Garage, Carport, Open Porches)
Outside of Walls _____ Inside of Walls MIN. 1200[#]

Street or Road building will front on _____

Clearances - Front 35 Back _____ Side 20 Side 30 River _____

Well Location None Septic Tank Location _____

Building elevation (By Ordinance Definition) _____

Contract Price (Include Plumbing, Electrical, Air Conditioning) 17,500⁰⁰

PERMIT FEE	New Home	Additions	Others
General (\$3.00 per \$1000 or Fraction)	_____	_____	_____
Plumbing (Flat Fee)	\$10.00	\$3.00	_____
Electrical (Flat Fee)	\$10.00	\$3.00	_____
Total (To be paid by General Contractor or Owner)	_____	_____	_____

SIGNED: - General Contractor or Owner Thomas E. Sylvester

Building Inspector Comments: _____

FOR TOWN RECORDS: Date Drawings submitted _____

Date Permit approved _____

Date Permit Fee paid _____

Date First Inspection _____

Date Final Inspection _____

Date Occupancy approved _____

151

TOWN OF SEWALL'S POINT - FLORIDA

Application For Building Permit

Owner Kurt Schurm Present Address Lucinda Phone 287-5383

Architect Same Address _____

General Contractor Same Address _____ Phone _____

Where Licensed _____ License No. _____

Plumbing Contractor ✓ Where Licensed _____ No. _____

Electrical Contractor ✓ Where Licensed _____ No. _____

Property Location _____ Subdivision _____ Lot No. _____

Lot Dimensions _____ Lot Area _____ Sq. Ft. _____

Purpose of Building enclosed porch Type of Construction Frame & Stucco

Building Area: Sq. Ft. (Exclusive of Garage, Carport, Open Porches)

Outside of Walls _____ Inside of Walls _____

Street or Road building will front on _____

Clearances - Front _____ Back _____ Side _____ Side _____ River _____

Well Location _____ Septic Tank Location _____

Building elevation (By Ordinance Definition) _____

Contract Price ~~(Include Plumbing, Electrical, Air Conditioning)~~ 5000.00

<u>PERMIT FEE</u>	<u>New Home</u>	<u>Additions</u>	<u>Others</u>
General (\$3.00 per \$1000 or Fraction) _____		<u>3.00</u>	
Plumbing (Flat Fee) -----	<u>\$10.00</u>	<u>\$3.00</u>	
Electrical (Flat Fee) -----	<u>\$10.00</u>	<u>\$3.00</u>	
Total (To be paid by General Contractor or Owner) -----		<u>3.00</u>	

SIGNED: - General Contractor or Owner Kurt Schurm

Building Inspector Comments: OK Chad A. Dwyer

FOR TOWN RECORDS: Date Drawings submitted 1/20/71
 Date Permit approved 2/5/71
 Date Permit Fee paid _____
 Date First Inspection _____
 Date Final Inspection _____
 Date Occupancy approved _____

~~#~~
253

Permit No. **332**

Date 1/19/93

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 Herman Vonstaden Present Address 20 N Via Lucindia
Phone 286-3798 Sewells Point

Contractor Weatherseal, Inc Address 3082 Enterprise Rd
Phone 466-9777 FT Pierce, FL 34982

Where licensed Stucie Co License number 10304 State license CCC035624

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: Re-roofing - install shingles on

pitched areas & modified bitumen on flat area

State the street address at which the proposed structure will be built:
20 N Via Lucindia, Sewells Point

Subdivision Lucindia Lot number 8 Block number _____

Contract price \$ 4500 Cost of permit \$ 40.00

Plans approved as submitted 40XX 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 D. Bruce Duane

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 Herman E. Von Staden

TOWN RECORD

Date submitted 1-22-93 Approved: R. Mary 1-22-93
Building Inspector Date

Approved: _____ Date Final Approval given: _____ Date
Commissioner 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.

3321

NO CONSTRUCTION MAY BEGIN UNTIL NOTICE OF COMMENCEMENT POSTED ON JOB SITE.

Permit No. _____

Tax ID No. 1-38-41-007-000-00080

80000

NOTICE OF COMMENCEMENT

State Of Florida
County Of St. Lucie Mania

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 and street address, if available

20 N Via Luandria
Luandria Subdivision - Lot 8

General description of improvements Re-roof

Owner Herman Von Staden
Address 20 N Via Luandria, Sewells Point, FL 34997
Owner's interest in site of improvement Residence

Fee Simple Title holder (if other than owner) _____

Address _____

Return Contractor Weatherseal, Inc.
to: Address 3082 Enterprise Road, Ft. Pierce, FL 34982

Surety _____
Address _____
Amount of bond \$ _____

Lender _____
Address _____

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 _____

In addition to himself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.12 (1) (b), Florida Statutes.

Expiration date of notice of commencement (the expiration date is one year from the date of recording unless a different date is specified). _____

THIS SPACE FOR RECORDING USE ONLY

[Signature]
Owner's Agent
Sworn to and subscribed before me this 19 day of Jan 1995.

[Signature]
Notary Public
My commission expires: 6/23/96