

17 Via Lucindia Dr North

TOWN OF SEWALL'S POINT, FLORIDA

Date 12-12-02 19____ TREE REMOVAL PERMIT No 1247

APPLIED FOR BY Jim Risedorph (Contractor or Owner)

Owner 17 S-Via Incindia

Sub-division _____, Lot _____, Block _____

Kind of Trees 1 BANYAN - DANGER TO property + diseased

No. Of Trees: REMOVE _____

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed, Gene Semmons (lyn) Town Clerk

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Empty grid area for drawing or photos]

PROJECT DESCRIPTION _____

REMARKS _____

PRINTS

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued: _____

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

Owner ^{James & Sara} Risedorph Address 17 S. Via Lucinda Phone 225 3588

Contractor TBD Address _____ Phone _____

Number of trees to be removed (list kinds of trees) One tree which is a hazard to the house - banyan or strangling ficus

Number of trees to be relocated within 30 days (no fee) (list kinds of trees):
None

Number of trees to be replaced: _____ (list kinds of trees): _____

Permit Fee \$ _____

\$15.00

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant _____ Plans approved as marked _____

Approved by Building Inspector _____ Date submitted: _____

Completed _____
Date _____ Checked by _____

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

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

See attached Tree Species List

TOWN OF SEWALL'S POINT, FLORIDA 225-3588

Date 12/19/02 19____ **TREE REMOVAL PERMIT** No 1249

APPLIED FOR BY Jim Risedorph (Contractor or Owner)

Owner 17 S. Via Lucinda

Sub-division _____, Lot _____, Block _____

Kind of Trees Palm, 2 Citrus, Scrub

No. Of Trees: REMOVE 4

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

FEE \$ 15.00

Signed, _____ Applicant Signed, Gene Sumner (TOS) Town Clerk Official

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Empty lined box for drawing or site plan.

PROJECT DESCRIPTION _____

REMARKS _____

All trees to be removed are marked with tape according to the numbering system below. When reviewing my Tree Permit, kindly go to the property and look for the tree according to the number which will be taped to it.

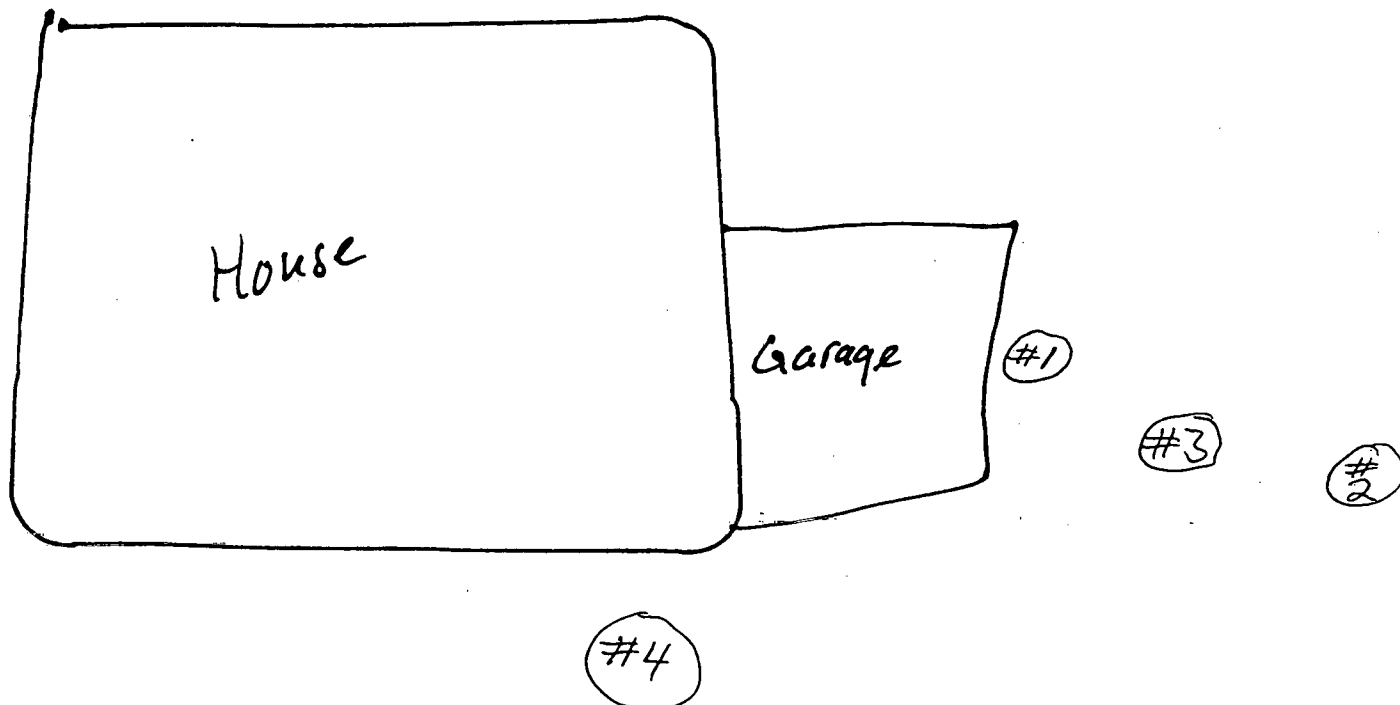
All trees, for this permit, are in the front of the property.

#1) PALM TREE -- This tree is inches from the western edge of the garage. Because it is inches from the garage, instead of a foot or two, I'd like to remove it. It is potentially dangerous, because of its proximity, to the house.

#2) CITRUS TREE -- This tree is dead. I want to remove it for this reason.

#3) CITRUS TREE -- This tree is either very old or very diseased. We are at the height of citrus bearing season and this has hardly borne any fruit. Also, its bark appears very old or very diseased.

#4) SCRUB TREES -- These are a bunch of small trees which have grown from the seeds of the larger tree. I've taped them off and would like to remove every tree within the taped-in area.



CERTIFICATE OF INSURANCE

DATE: 04/07/92

PRODUCER

The Enns Agency
 Post Office Box 306
 Ft. Pierce, FL 34954
 (407) 461-8100

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

COMPANIES AFFORDING COVERAGE

- COMPANY A Hartford Insurance Company of the Southeast
LETTER
- COMPANY B
LETTER
- COMPANY C
LETTER
- COMPANY D
LETTER
- COMPANY E
LETTER

INSURED

J. A. Taylor & Associates, Inc.
 302 Melton Dr.
 Ft. Pierce, FL 34982

COVERAGES

THIS IS TO CERTIFY THAT 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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE	POLICY EXPIRATION DATE	LIABILITY LIMITS IN 1000'S
					EACH OCCURR. AGGREGATE
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMPREHENSIVE FORM <input checked="" type="checkbox"/> PREMISES/OPERATIONS <input checked="" type="checkbox"/> UNDERGROUND EXPLOSION & COLLAPSE HAZARD <input type="checkbox"/> PRODUCTS/COMP. OPERATIONS <input checked="" type="checkbox"/> CONTRACTUAL <input type="checkbox"/> INDEPENDENT CONTRACTORS <input checked="" type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input checked="" type="checkbox"/> PERSONAL INJURY <input type="checkbox"/>	21UENK15531	04/12/92	04/12/93	BODILY INJURY \$ \$ PROPERTY DAMAGE \$ \$ BI & PD COMBINED \$ 300 \$ 1000 PERSONAL INJURY \$ 300
A	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> ALL OWNED AUTOS (PRIV. PASS) <input checked="" type="checkbox"/> ALL OWNED AUTOS (OTHER THAN) (PRIV. PASS) <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS <input type="checkbox"/> GARAGE LIABILITY <input type="checkbox"/>	21UENK15531	04/12/92	04/12/93	BOD INJ. (PERSON) \$ 100 BOD INJ. ACCIDENT \$ 300 PROPERTY DAMAGE \$ 50 BI & PD COMBINED \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA				BI & PD COMBINED \$ \$
	WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY \$ (EACH ACCIDENT) \$ (DISEASE-POLICY) \$ (DISEASE-EA EMP)
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

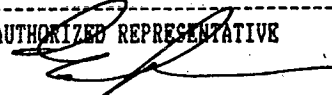
CERTIFICATE HOLDER

Town of Sewells Point
 1 Sewells Point Rd.
 Sewells Point, FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE





Employers Self Insurers Fund

Board of Trustees
 Robert Siegel, Chairman, Miami
 Thomas S. Petcoff, Vice Chairman, Lakeland
 Greg C. Branch, Ocala
 John A. Gray, Leesburg
 Paul S. Mears, Jr., Orlando
 Robert L. Noojin, Tampa

CERTIFICATE OF INSURANCE

ISSUED TO: Town of Sewells Point
 1 Sewells Point Rd.
 Sewells Point, FL 34996

This is to certify that J. A. Taylor & Associates, Inc.

302 Melton Drive, Ft. Pierce, FL 34982
 being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of the compensation by insuring their risk with the

EMPLOYERS SELF INSURERS FUND

COVERAGE NUMBER:	<u>830-8724</u>	Statutory-State of Florida
EFFECTIVE DATE:	<u>April 1, 1992</u>	Employers' Liability
EXPIRATION DATE:	<u>Coverage is</u>	\$100,000 (Each Accident)
	<u>continuous until</u>	\$100,000 (Disease-Each Employee)
	<u>cancelled by the</u>	\$500,000 (Disease-Policy Limit)
	<u>insured or the</u>	
	<u>fund.</u>	

REMARKS:

This certificate is not a policy and of itself does not afford any insurance. Nothing contained in this certificate shall be construed as extending coverage not afforded by the policy shown above or as affording insurance to any insured not named above.

DATE: 04/07/92 **BY:** William B. Bull
 Summit Consulting, Inc., Administrator
 Employers Self Insurers Fund

lmn:07/25/89

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

NEIL SUBIN
Commissioner

DON OSTEEN
Commissioner



ROBERT KELLOGG
Town Manager

JOAN H. BARROW
Town Clerk

ERIC CERNIGLIA
Chief of Police

JOHN R. ADAMS
Building Official

ADMINISTRATIVE VARIANCE NOTICE OF STATUS

John T. Marzano
17 N. Via Lucinda
Sewall's Point, FL 34996

REFERENCE: Application for an Administrative Variance dated December 14, 2006

Dear Mr. Marzano,

Your application for an administrative variance, more specifically:

1. A setback of 34.67 ft. on the northeast corner of the garage in lieu of the required 35 ft.
2. A setback of 34.61 ft. on the northwest corner of the garage in lieu of the required 35 ft.

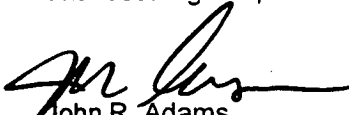
Has been approved by the Building official.

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

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

ADDITIONAL RECORDING COSTS: NONE

With best regards,


John R. Adams
Building Official



One S. Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: clerk@sewallspoint.martin.fl.us
Building Department (772) 287-2455 • Fax (772) 220-4765 • E-Mail: buildoff@sewallspoint.martin.fl.us

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

NEIL SUBIN
Commissioner

DON OSTEEEN
Commissioner



ROBERT KELLOGG
Town Manager

JOAN H. BARROW
Town Clerk

JOHN R. ADAMS
Building Official

ADMINISTRATIVE VARIANCE APPLICATION AND CHECKLIST

OWNER/APPLICANT(S) John T. Marzano

DATE December 14, 2006

OWNER ADDRESS 17 N. Via Lucindia, Stuart, FL 34996

PROPERTY ADDRESS (IF DIFFERENT THAN OWNERS ADDRESS)

PHONE NUMBER (973) 690-5663

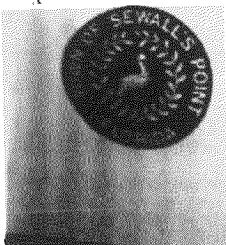
FAX/E-MAIL (973) 344-5336

APPLICANT'S AGENT: Thomas R. Sawyer, Esq., 2400 SE Federal Highway, 4th Floor, Stuart, FL 34994
(772) 286-1700

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

APPLICANT TO INITIAL THE FOLLOWING CHECKLIST ITEMS:

- \$400.00 MINIMUM FILING FEE (ADDITIONAL MONIES MAY BE REQUIRED TO BE PLACED IN ESCROW TO COVER ANY PROFESSIONAL FEES INCURRED BY THE TOWN IN PROCESSING THIS APPLICATION)
- APPLICANT'S CERTIFICATION OF OWNERSHIP OF PROPERTY IN QUESTION AND VERIFIED LIST OF ALL ADJACENT PROPERTY OWNERS
- COPY OF BUILDING PERMIT APPLICATION AND ALL ASSOCIATED PERMIT DRAWINGS AND SUBMITTED DOCUMENTS
- CURRENT (90 DAYS OR LESS) AS-BUILT SURVEY OF THE COMPLETE GROUNDS WITH ALL IMPROVEMENTS, INDICATING THE AREA(S) OF ENCROACHMENT. SURVEY MUST INCLUDE A CERTIFICATION TO THE TOWN OF SEWALL'S POINT
- LETTERS OF NO OBJECTION FROM ALL ADJACENT PROPERTY OWNERS OR PROOF THAT A COPY OF THIS APPLICATION WAS SENT TO ALL ADJACENT PROPERTY OWNERS BY CERTIFIED MAIL INCLUDING A NOTICE INFORMING THEM OF THEIR RIGHT TO FILE AN OBJECTION WITH THE TOWN CLERK WITHIN 15 DAYS OF THE DATE THE NOTICE WAS MAILED, AND THAT 15 DAYS HAS PASSED.



Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: clerk@sewallspoint.martin.fl.us
Building Department (772) 287-2455 • Fax (772) 220-4765 • E-Mail: buildoff@sewallspoint.martin.fl.us

ADMINISTRATIVE VARIANCE APPLICATION AND CHECKLIST

DESCRIBE IN DETAIL THE ENCROACHMENT(S) LENGTH AND LOCATION. IF MORE THAN ONE, PLEASE LIST EACH SEPARATELY.

APPLICANT IS REQUESTING AN ADMINISTRATIVE VARIANCE TO THE FRONT SETBACK OF 35.00 FEET FOR A SETBACK OF 34.67 FEET ON THE NORTHEAST CORNER OF THE GARAGE AND 34.61 FEET ON THE NORTHWEST CORNER OF THE GARAGE.

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

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

OWNER/APPLICANT(S) SIGNATURE 
THOMAS R. SAWYER, AGENT

SWORN TO AND SUBSCRIBED BEFORE ME THIS 14th DAY OF December

STATE OF FLORIDA COUNTY OF MARTIN

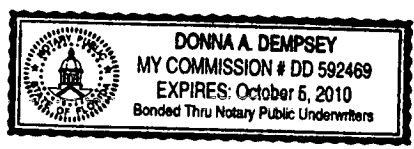
2006 BY Thomas R. Sawyer

PERSONALLY KNOWN

OR PRODUCED ID _____

TYPE OF ID _____

Donna A. Dempsey
NOTARY



FINAL ORDER

John T. Marzano is the owner of real property ("Owner") located at 17 N. Via Lucindia, Sewall's Point, Florida ("subject property").

FINDINGS OF FACT


1. The required front building setback for the subject property is thirty-five (35') feet, however the northeast corner and the northwest corner, measured at the garage, encroach .33 feet and .39 feet respectively into the required 35-foot setback.
2. Thomas R. Sawyer as the agent of the Owner, has applied for administrative variances (the "Application"), pursuant to the Town of Sewall's Point ("Town") Code of Ordinances Section 82-143.
3. The records of the Town's Building Department indicate that the original building plans were approved by the Town on September 7, 1970, and at that time, the submitted plot plan indicated compliance with the required 35 foot setback. It is the opinion of the Town Building Official that the original proposed plot plan was not followed exactly by the builder and the builder sited the residence in error 3.96 inches on the northeast corner and 4.68 inches on the northwest corner into the required 35 foot setback.
4. As a result, on or about September 9, 1970 the Town issued a building permit for the construction of the residence on the subject property, which resulted in the front setback encroachments described herein due to a measuring error by the original builder.
5. The Town Building Official received and reviewed the Application, and considered to allow:
 - a. **Northeast Corner of Garage:** An encroachment of 3.96 inches into the required 35-foot setback on the subject property.
 - b. **Northwest Corner of Garage:** An encroachment of 4.68 inches into the required 35-foot setback on the subject property.
6. The Applicant sent by certified mail, return receipt requested, to all record owners of property located adjacent to the property involved in the Variances a copy of the Application and a notice of

their right to object to the variance. The residence for which the Variances are requested was constructed under a valid Town permit dated September 7, 1970. The setback violations for the encroachments shown on the survey were good faith errors and were not intentional.

7. The Applicant provided proof of the identity and address of the persons entitled to receive Application notice by mail, and of the mailing of the Application notice to those persons. The Applicant also provided "Letters of no Objection" (and one letter returned unclaimed) from the adjacent property owners to the property involved in the Variances.
8. The Building Official determined:
 - a. That the Applicant met all the requirements for the two variance requests as set forth in Town Code Section 82-143(3).
 - b. The encroachments are less than one foot into the required setbacks in effect at the time the encroachment was created.
 - c. "Letters of no Objection" to the Administrative Variance request have been filed by the Owners for four (4) adjacent property owners, and one letter returned unclaimed.
9. The Town Building Official has jurisdiction over Administrative Variance Applications
10. Based upon the Application of the variance criteria to the subject property, the Town Building Official finds that the Applicant has satisfied all of the variance criteria for each variance requested.
11. The Variances as set forth herein are hereby conditionally **GRANTED** by the Town Building Official of the Town of Sewall's Point, Florida.
12. This Variance is expressly conditioned upon the Applicant reimbursing the Town for all expenses of the Town incurred in connection with the Variance Application, pursuant to Section 82-143(1), Town of Sewall's Point Code of Ordinances. **DONE AND ORDERED** in Sewall's Point this ____ day of _____, 2007.

ATTEST

Joan Barrow, Town Clerk



John R. Adams, Town Building Official

Copies to:
John T. Marzano 17 N. Via Lucindia, Sewall's Point, FL

Fax

**Town of Sewall's Point
Building Department**

772-287-2455 ext 13

772-220-4765 FAX

email: vmeyer@sewallspoint.martin.fl.us

Date: 1-23-07
To: Tom Sawyer
Fax #: 283-1803
Attn:
Re: Marzano
Pages: Cover + 2

Copy of Final Order - to be
recorded - should take up
to 2 weeks.

HP Fax K1220

Log for
Town of Sewall's Point
(772)220-4765
Jan 23 2007 2:24pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jan 23	2:23pm	Fax Sent	2831803	0:59	3	OK



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

**APPLICATION FOR TREE REMOVAL, RELOCATION OR
REPLACEMENT PERMIT ON DEVELOPED RESIDENTIAL PROPERTY**

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Removal of trees with a diameter of less than two inches.
3. Removal of citrus or non-native fruit trees.

Sec. 70-22. Permit required for tree removal.

A permit as provided for in this chapter shall be required for the removal (or transplant) of any tree with a two-inch caliber or more upon any parcel upon which there is a residence under a validly issued permit. Permit requirements are outlined under article V Town Ordinances. **If the town has to procure the services of a suitable professional licensed in the State of Florida to ascertain the condition or type of a tree(s) prior to or after removal of the tree(s) then the cost of such will be borne by the property owner. (Ord. No. 303, 7-20-04)**

Application procedures:

1. Complete application information including sketch below.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and posted on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Permit Fee:

1. Tree permits are \$15.00.
2. Permit - No fees are assessed for tree which is dead, diseased, injured, hazardous to life or property, or listed as a prohibited species by the Florida Department of Environmental Protection.

NOTICE:

A PERMIT WILL NOT BE ISSUED FOR THE REMOVAL ANY NATIVE SPECIES TREES UNLESS ONE OR MORE OF THE FOLLOWING CONDITIONS EXIST: (SEC. 70-87. PERMIT ISSUANCE OR DENIAL TOWN ORDINANCES).

- A. THE VEGETATION IS LOCATED IN AN AREA WHERE STRUCTURES, UTILITIES OR IMPROVEMENTS MAY BE PLACED ACCORDING TO THE TOWN CODE; AND TO PRESERVE THE VEGETATION WOULD UNREASONABLY RESTRICT THE ECONOMIC ENJOYMENT OF THE PROPERTY; AND THE VEGETATION CANNOT BE RELOCATED ON THE SITE BECAUSE OF AGE, TYPE OR SIZE.
- B. THE VEGETATION IS DISEASED, INJURED, LOCATED TOO CLOSE TO THE EXISTING OR PROPOSED STRUCTURES, INTERFERES WITH EXISTING UTILITY SERVICE, OR CREATES UNSAFE VISUAL OBSTRUCTION. (A PROFESSIONAL ARBORIST'S OPINION WILL BE REQUIRED)
- C. THE VEGETATION IS TO BE MOVED TO ANOTHER LOCATION ON THE OWNER'S PROPERTY OR IS TO BE REPLACED BY ANOTHER TREE OR SHRUB ON THE OWNER'S PROPERTY, REGARDLESS OF LOCATION.

IF THE PERMIT IS DENIED, THE DEPARTMENT SHALL NOTIFY THE APPLICANT IN WRITING OF THE BASIS FOR DENIAL USING THE CRITERIA LISTED IN THIS SECTION.

*****THE FOLLOWING SPECIES ARE CONSIDERED NATIVE, PROTECTED SPECIES***:**

BLACK IRONWOOD, BLACK MANGROVE, BLOLLY, BUTTONWOOD, CABBAGE (SABLE) PALM, COCOPLUM (RED TIP AND GREEN TIP), CORAL BEAN, DEER MOSS, GRAY TWIG, GOPHER APPLE, GUMBO LIMBO, INKWOOD, LAUREL OAK, LEATHER FERN, LIVE OAK, MAHOGANY, MARLBERRY, MASTIC, MULBERRY, MYRTLE OAK, PARADISE TREE, PIGEON PLUM, POND APPLE, PRICKLY PEAR, RED MANGROVE, RED MAPLE, RED BAY, SAFFRON PLUM, SAND PINE, SCRUB PINE, SATINLEAF, SAW PALMETTO, SCRUB HICKORY, SEA GRAPE, SEA OXEYE, SLASH PINE, STOPPERS, WILD LIME, SUMAC (SOUTHERN), SUGAR BERRY (HACKBERRY), TORCHWOOD, WILD COFFEE, VARNISH LEAF, WATER OAK, WAX MYRTLE, WEST INDIAN CHERRY, WHITE MANGROVE.

OK



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

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner Don Savoy Address 17 N. Via Lucinda Phone 772-600-5962

Contractor Tropical Palms Address PO Box 2104 Phone 772-260-2818

No. of Trees: REMOVE 3 Species: 2 Carrot wood 1 Lognat tree

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal /relocation (See notice above) _____



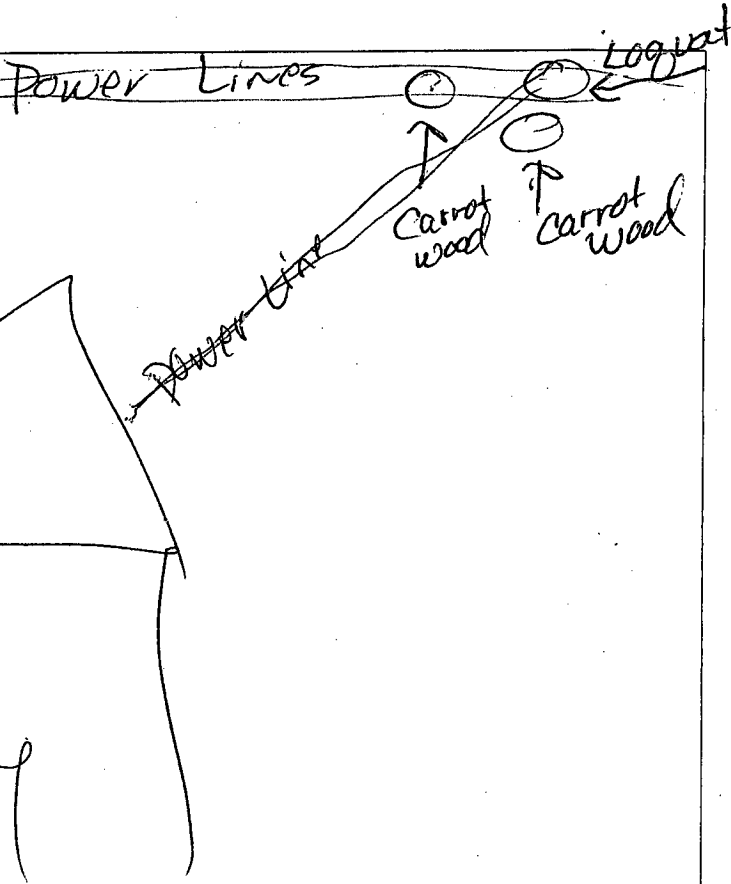
Signature of Property Owner Don Savoy Date 4-17-13

Approved by Building Inspector: AM Date 7/19 Fee: 0

NOTES: _____

SKETCH:

Remove 3 tree's
Back Right Corner
in power Lines



Please Call
Contractor
when work
can be done
Thank
you.

286-3989

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9-24, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7338	McComick	Final plumb	PASS	
3	59 N River Rd	Heating &	PASS	INSPECTOR: <i>AM</i>
	Fire Orchard	electrical	PASS	
8099	Geisinger	framing	FAIL	
8145	8 th Castle Hill			INSPECTOR: <i>AM</i>
1	O/B			
7801	Cumming	framing &	PASS	
4 10:30	835 River Rd	structural		INSPECTOR: <i>AM</i>
	W. St. - Beaumont			
7714	Maryano	Ext doors	PASS	CLOSE
2	17 N Via Lucindia	Final		
		S2S Trim		INSPECTOR: <i>AM</i>
6617	Geisinger	Flat roof dry-in	PASS	
1	8 th Castle Hill			INSPECTOR: <i>AM</i>
	Cardinal Roof			
8655	Moscattello	U.C. GAS	PASS	
	#1 WORTH CT			INSPECTOR: <i>AM</i>
	O/B			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

HP Color LaserJet CM1312nfi MFP

Fax Confirmation Report

HP LASERJET FAX

Aug-14-2012 11:29AM

Job	Date	Time	Type	Identification	Duration	Pages	Result
577	8/14/2012	11:27:30AM	Send	2863989	1:34	1	OK

286-3989

TOWN OF SEWALL'S POINT				
Building Department - Inspection Log				
Date of Inspection: <input checked="" type="checkbox"/> Mon <input type="checkbox"/> Wed <input type="checkbox"/> Fri <u>9-24</u> 2007 Page 1 of 1				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7338	McCormick	Final plumb	PASS	
3	59 N River Rd	Heating +	PASS	
	Fire Overhaul	electrical	PASS	INSPECTOR: <i>CM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8229	Quisinger	framing	FAIL	
8145	Bevotte Hill			
1	O/B			INSPECTOR: <i>CM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
780	Cummins	framing +	PASS	
4	835 River Rd	structural		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
714	Marynow	Ext doors	PASS	CLOSE
2	17 N. Vincennes	Final		
	325 N. M			INSPECTOR: <i>CM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8617	Quisinger	Roof dry in	PASS	
1	Castle Hill			
	Cardinal Hill			INSPECTOR: <i>CM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8655	Moscatoello	U.G. GAS	PASS	
	#1 NORTH ST			
	O/B			INSPECTOR: <i>CM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
OTHER:				

514 South Colorado Avenue
Stuart, Florida 34994
Phone: (772) 221-9024
Fax: (772) 221-9086
E:Mail -steve@bonnieabrownpa.com



FAX

To: Valerie From: Steve Piche'

Fax: 220-4765 Date: August 6, 2012

Ph: 287-2455 x 13 RE: Permit/Code/Utility Search

Urgent For Review Please Comment Please Reply Please Recycle

Please be advised that we are the closing agent for the real estate transaction on the above-referenced property. Please advise if you have any outstanding, pending and/or certified liens, open/outstanding balances and/or open/pending/expired permits for the above referenced property.

Address: 17 North via Lucindia, Sewall's Point, 34996

Owner: John T. Marzano

Parcel Identification Number: 1-38-41-007-000-00170.90000

Should be
 480- ~~Permit # 8714~~ - is expired - asked several times to close not resolved ~~at all~~

Thank you in advance for your prompt attention to this matter as we are scheduled to close shortly. Kindly complete and fax back to (772) 221-9086.

Respectfully,

Steve Piche'

No other violations.

Marziano
 Tom Clark
 Ambaster

Debbie / Illustrated Prop

349-8090 - Final

HP Color LaserJet CM1312nfi MFP

Fax Confirmation Report

HP LASERJET FAX

Aug-6-2012 11:14AM

Job	Date	Time	Type	Identification	Duration	Pages	Result
539	8/ 6/2012	11:13:19AM	Send	2219086	0:58	1	OK

Aug. 6, 2012 9:40AM Law Offices Of Bonnie A. Brown No. 9602 P. 1

514 South Colorado Avenue
Stuart, Florida 34994
Phone: (772) 221-8024
Fax: (772) 221-9086
E-Mail: steve@bonnieabrownpa.com

Law Offices of
BONNIE A. BROWN

FAX

To: Valerie From: Steve Piche
Fax: 220-4765 Date: August 6, 2012
Ph: 287-2455 x 13 RE: Permit/Code/Utility Search

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Owner: John T. Marzano

Parcel Identification Number: 1-38-41-007-000-00170.90000

YTD - Permit # 8714 is expired - asked several times to close not resolved - ~~OK~~

Thank you in advance for your prompt attention to this matter as we are scheduled to close shortly. Kindly complete and fax back to (772) 221-9086.

Respectfully,

Steve Piche

*No other violations.
Tom Clarke
Ambassador*



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:	8714	DATE ISSUED:	SEPTEMBER 14, 2007
SCOPE OF WORK:	WINDOWS & DOORS		
CONDITIONS:			
CONTRACTOR:	SES TRIM SUPPLIES		
PARCEL CONTROL NUMBER:	13841007-000001709	SUBDIVISION	LUCINDIA - LOT 17
CONSTRUCTION ADDRESS:	17 N VIA LUCINDIA		
OWNER NAME:	MARZANO		
QUALIFIER:	STEPHEN STRZALKOWSKI	CONTACT PHONE NUMBER:	772-781-9760 <i>Disc</i>

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

6-23-08 called left mess to renew 6-9-09 spoke to Steve - will send letter
6-19 left mess - only doors no windows

09-13-07 14:51 ;
09-13-07 13:44 ;

19736906186 ;
7819767 ;

1 / 1
2 / 4

Date: 9/13/07
Town of Sewall's Point
BUILDING PERMIT APPLICATION Permit Number: _____

OWNER/TITLEHOLDER NAME: JANE MARYANO Phone (Day) _____ (Fax) _____

Job Site Address: 17 N. Lucinda City: Sewall's Point State: FL Zip: _____

Legal Desc. Property (Subd/Lot/Block) Lucinda / Lot 17 Parcel Number: 13841-007-000-0010-9

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

Scope of work: Repair existing entry doors, replace (2) of windows with entry doors & side lites

WILL OWNER BE THE CONTRACTOR?
(If yes, Owner must file questionnaire with 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 VALUE: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 7215
(Notice of Commencement required when over \$2500 prior to first inspection)
Is subject property located in flood hazard area? V AD AD X
FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS 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

Call 313-505-3370 Steve
CONTRACTOR/Company: SES Trim Supplies, Inc Phone: 772-781-9760 Fax: 772-781-9767

Street: 3475 SW Palm City School Rd. City: Palm City State: FL Zip: 32990

State Registration Number: _____ State Certification Number: CB6 1254525 Municipality License Number: _____

ARCHITECT _____ Lic#: _____ Phone Number: _____

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

ENGINEER _____ Lic#: _____ Phone Number: _____

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

AREA SQ. FOOTAGE (W/ SEWER & ELECTRIC): Living: _____ Garage: _____ Covered Porch: _____ Screened Porch: _____

Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004 (W/2006 Rev.)
National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code: 2004

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 TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCLUMBERED 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, AND 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 50-65.

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR 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 ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 103.4.1, 105.A.1.1 - .5.
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.

*****A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS*****
OWNER OR AUTHORIZED AGENT SIGNATURE (required) _____ CONTRACTOR SIGNATURE (required) _____
State of Florida, County of: Polk On State of Florida, County of: Martin
This the 14 day of September 2007 This the 13th day of Sept 2007
by Jane T. Maryano who is personally known to me or produced by Stephen Strzalkowski who is personally known to me or produced
as Identification. LOUANN CATENA as Identification. PLD # S3162-780-607-096-0
My Commission Expires June 17, 2011 My Commission Expires _____
VALERIE MEXER
MY COMMISSION # _____

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

RECEIVED
 DATE: 9-13-07
 TOWN OF SEWALL'S POINT

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

Date: 9/13/07 Permit Number: _____

OWNER/TITLEHOLDER NAME: John MARYANO Phone (Day) _____ (Fax) _____

Job Site Address: 17 N. Lucindia City: Sewall's Point State: FL Zip: _____

Legal Desc. Property (Subd/Lot/Block) Lucindia / Lot 17 Parcel Number: 13841-007-000-0010-9

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

Scope of work: Replace existing entry doors, replace (2) w/o windows with entry doors + circ lights

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

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 7215
 (Notice of Commencement required when over \$2500 prior to first inspection)

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

Is subject property located in flood hazard area? V _____ A9 _____ A8 _____ X _____
FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS ONLY:
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 (Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: SES Trim Supplies, Inc. Phone: 772-781-9760 Fax: 772-781-9767

Street: 3475 SW Palm City School Rd. City: Palm City State: FL Zip: 33490

State Registration Number: _____ State Certification Number: CBC 1254525 Municipality License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic# _____ Phone Number: _____

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

AREA SQ. FOOTAGE (W /SEWER & ELECTRIC): Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____

Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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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 AUTHORIZED AGENT SIGNATURE (required)

CONTRACTOR SIGNATURE (required)

State of Florida, County of: _____
 This the _____ day of _____, 2007
 by _____ who is personally
 known to me or produced _____
 as identification.

On State of Florida, County of: Martin
 This the 13th day of Sept, 2007
 by Stephen Strzalkowski who is personally
 known to me or produced PLD#S3162-780-67-096-0
 As identification.

Notary Public
 My Commission Expires: _____

Notary Public
VALERIE MEYER
 MY COMMISSION # DD55210
 EXPIRES 09/30/08
 My Commission Expires: _____

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

Fair
973-690-6186

AW



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

Site Provided by...
governmentmax.com T1.13

Summary

[print](#) Address
1 of 2

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-007-000-00170-9	17 N VIA LUCINDIA	17702	Address	0	1

Summary

Property Location 17 N VIA LUCINDIA
Tax District 2200 Sewall's Point
Account # 17702
Land Use 101 0100 Single Family
Neighborhood 120350
Acres 0.352

Legal Description
Property Information
 LUCINDIA LOT 17

Search By

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

Owner Information
Owner Information
 MARZANO, JOHN T

Mail Information
 PO BOX 5429
 NEWARK NJ 07105

Assessment Info
Front Ft. 0.00

Market Land Value \$275,000
Market Impr Value \$90,440
Market Total Value \$365,440

Site Functions

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

Recent Sale
Sale Amount \$390,000

Sale Date 11/27/2006
Book/Page 2200 673

[Print](#) | [Back to List](#) | [<< First](#) | [< Previous](#) | [Next >](#) | [Last >>](#)

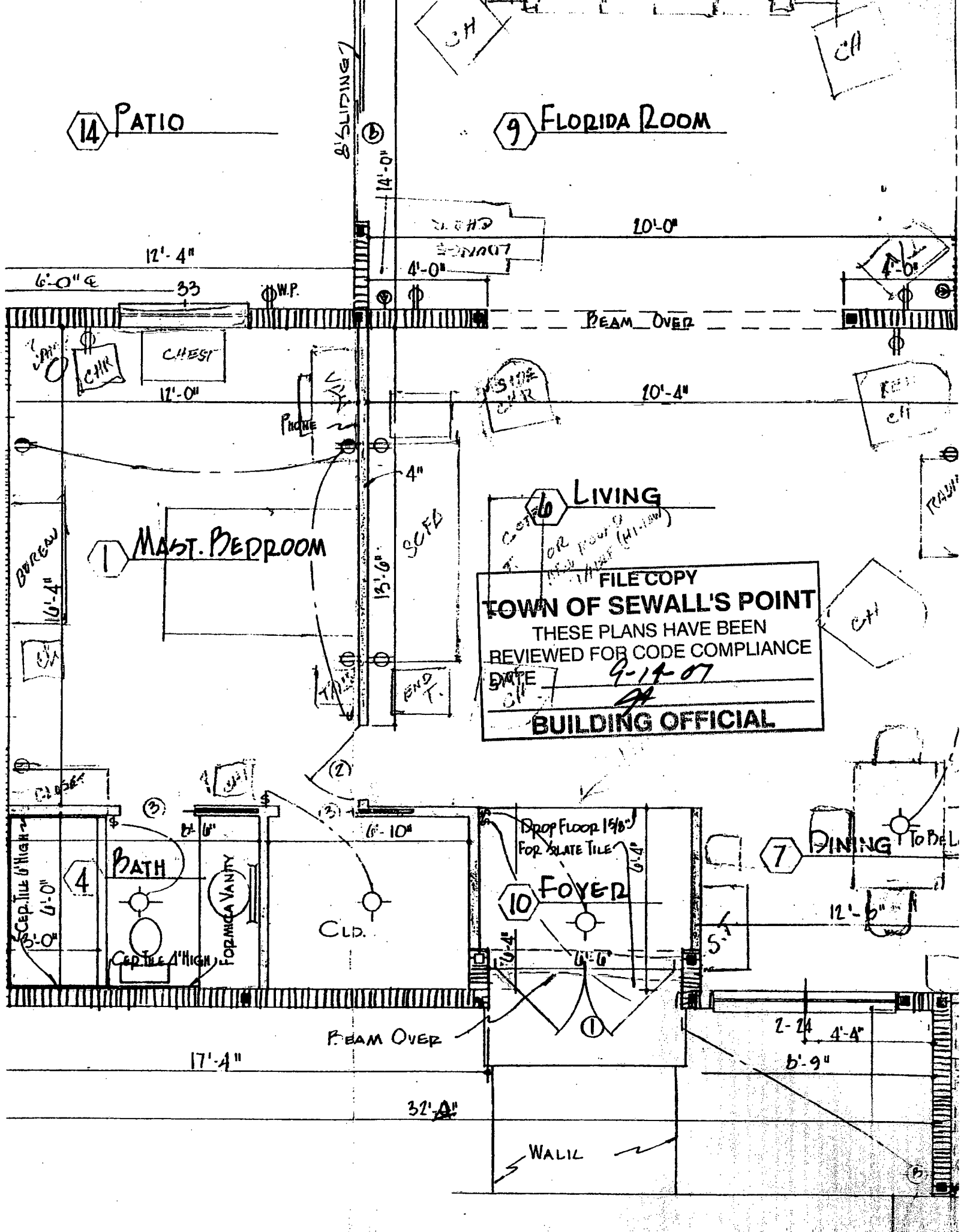
[Legal disclaimer / Privacy Statement](#)

Data updated on 09/10/2007

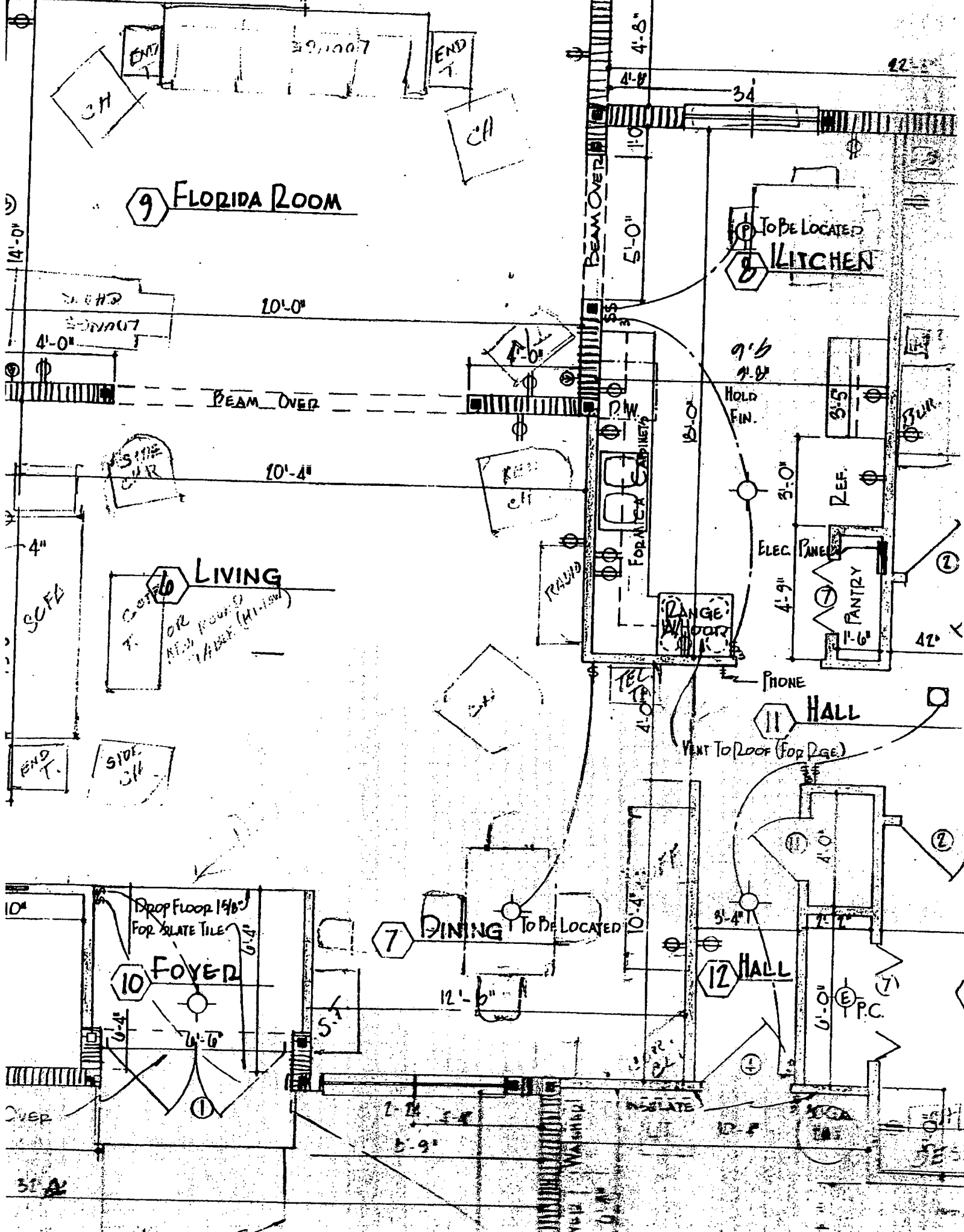


14 PATIO

9 FLORIDA ROOM



FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 9-14-07
 BUILDING OFFICIAL





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

WINDOW/DOOR SCHEDULE

ID NO	APPOX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	62" 40-6/8	ENTRY DOOR		✓		Replace Existing
2	30-6/8	ENTRY DOOR		✓		Replace 4/0 WINDOW
3	40-6/8	Side lite		✓		Replace 4/0 WINDOW
4	30-6/8	ENTRY DOOR		✓		Replace 4/0 WINDOW
5	40-6/8	Side lite		✓		Replace 4/0 WINDOW
6						
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8						
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29						
30						

TOTAL GLAZED OPENING AREA FOR STRUCTURE: 348 S.F.

*PERCENTAGE OF NEW GLAZED AREA: 11.5 %
 (TOTAL INSTALLED GLAZED AREA DIVIDED BY TOTAL GLAZED OPENINGS FOR STRUCTURE)

NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwellings within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing) as per 2004 FBC/ EXISTING BUILDING 507.3.

* TYPE WINDOWS

SH - SINGLE HUNG
 DH - DOUBLE HUNG

AWN - AWNING
 CAS - CASEMENT

SL - SLIDING
 FIX - FIXED



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

www.buildingcodeonline.com

NOTICE OF ACCEPTANCE (NOA)

Therma-Tru Technologies
118 Industrial Drive
Edgerton, OH 43517

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 Florida Building Code, including the High Velocity Hurricane Zone.

DESCRIPTION: Series "Fiberclassic" Outswing Opaque Fiberglass Door - LM Impact with non-Impact Resistant Sidelites

APPROVAL DOCUMENT: Drawing No. S-2030, titled "Therma-TRU FiberGlass Outswing up to 12-0 x 8-0 w/3-0 Sidelites", sheets 1 through 7 of 7, prepared by RW Building Consultants, Inc., dated 09/20/00 with revision "4" dated 11/15/06, prepared by R.W. Building Consultant, Inc., signed and sealed by Wendell Haney, P.E., bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

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

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

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

This NOA renews NOA # 01-1004.03 and, consists of this page 1 and evidence pages E-1 and E2, as well as approval document mentioned above.

The submitted documentation was reviewed by **Jaime D. Gascon, P.E.**



J. Gascon
12/7/06

NOA No 06-0418.11
Expiration Date: November 09, 2011
Approval Date: December 28, 2006
Page 1

Therma-Tru Technologies

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Manufacturer's die drawings and sections.
2. Drawing No. **S-2030**, titled "Therma-TRU FiberGlass Outswing up to 12-0 x 8-0 w/3-0 Sidelites", sheets 1 through 7 of 7, dated 09/20/00 with revision "4" dated 11/15/06, prepared by RW Building Consultants, Inc., signed and sealed by Wendell Haney, P.E.

B. TESTS

1. Test reports on 1) Tensile Property Test of Non-Foam Plastic prepared by ETC Laboratories, Test Report No. **ETC-01-741-10921.0**, dated May 22, 2001, signed by Joseph L. Doldan, P.E.
"Submitted under NOA# 01-1004.03"
2. Test reports on 1) Air Infiltration Test, per PA 202-94
2) Uniform Static Air Pressure Test, Loading per PA 202-94
3) Water Resistance Test, per PA 202-94
4) Large Missile Impact Test per PA 201-94
5) Cyclic Wind Pressure Loading per PA 203-94
6) Forced Entry Test, per PA 202-94
along with marked-up drawings and installation diagram of an 6'8" x 8"0" Fiberclassic Outswing Double Door with 3'0" sidelites, prepared by National Certified Testing Laboratory, Inc., Test Report No. **NCTL-210-2194, 1, 2, 3 (S) (C), (I), (F)**, dated 05/24/99, and revised 10/6/00, signed and sealed by Barry D. Portnoy, P.E.
"Submitted under NOA# 01-1004.03"
3. Test reports on Tensile test of plastic per ASTM D638-96, by **Celotex Corporation**, Test Report No. **MTS-520586** dated 3/22/2000, for BTS, TCM and PVC lite frame material after a 53 months exposure.
"Submitted under NOA# 01-1004.03"
4. Test report on Tensile Test of Plastic per ASTM D638-96, by **Certified Testing Laboratories**, Test Report No. **CTLA-590W (CTL-921F)** dated Sept. 26, 2000.
"Submitted under NOA# 01-1004.03"
5. Test report on Weathered Plastic samples per ASTM G26-96, by **Sub-Tropical Testing Service**, Report No. **TRU-4** dated Sept. 21, 2000.
"Submitted under NOA# 01-1004.03"
6. Test reports on Surface Burning Characteristics of polyurethane foam core per ASTM E84-00, by **OmegaPoint Laboratories**, Test Report No. **15427-107362** dated 8/28/00.
"Submitted under NOA# 01-1004.03"



Jaime D. Gascon, P.E.

Chief, Product Control Division
NOA No 06-0418.11

Expiration Date: November 09, 2011
Approval Date: December 28, 2006

Therma-Tru Technologies

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

7. Test reports on Rate of Burning and/or Extent and Time of Burning of Polystyrene Lite Frame, SMC Fiberglass Skin, TCM Lite Frame, Classic Craft Skin, BTS Lite Frame, PVC Lite Frame, and Urethane Frame plastic materials per ASTM D635-91, by **OmegaPoint Laboratories**, Test Report No. **15427-101188, 15427-101189, 15427-101190, 15427-101191, 15427-101192, 15427-101193, and 15427-101187**, respectively, each dated 3/7/97.
"Submitted under NOA# 01-1004.03"
8. Test report on Density of Smoke from the Burning or Decomposition of Plastics of BTS, SMC, TCM Skins and Polystyrene and PVC frames per ASTM D2843, by **OmegaPoint Laboratories**, Test Report No. **15427-101180 through 101186** dated 3/17/97.
"Submitted under NOA# 01-1004.03"
9. Test report on Ignition Properties of BTS, SMC, TCM Skins and Polystyrene and PVC frames per ASTM D1929, by **OmegaPoint Laboratories**, Test Report No. **15427-101173 through 101179** dated 3/17/97.
"Submitted under NOA# 01-1004.03"

C. CALCULATIONS

1. Revised Anchor Calculations and structural analysis, prepared by R. W. Building Consultants, Inc., dated 11/15/06, signed and sealed by Wendell W. Haney, P.E.
Complies with ASTM-E1300-98

D. QUALITY ASSURANCE

1. Miami Dade Building Code Compliance Office (BCCO).

E. MATERIAL CERTIFICATIONS

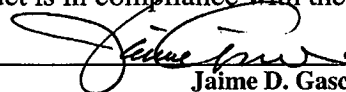
1. None

F. STATEMENTS

1. Statement letter of conformance, dated 04/19/06, signed and sealed by Wendell W. Haney, P.E.
2. Statement letter of no financial interest, dated 04/19/06, signed and sealed by Steve Jasperson.

G. OTHER

1. Notice of Acceptance No. **01-1004.03**, issued to Therma-Tru Corporation for their Series **"Fiberclassic" Outswing Opaque Fiberglass Door**, approved on 11/29/01, and expiring on 11/09/06.
2. Letter from the consultant stating that the product is in compliance with the Florida Building Code (FBC).


Jaime D. Gascon, P.E.

Chief, Product Control Division
NOA No 06-0418.11

Expiration Date: November 09, 2011
Approval Date: December 28, 2006

THERMA-TRU CORPORATION
 THE "FIBER GLASS", "SMOOTH STAR" & "CLASSIC CRAFT"
 OUTSWING INSULATED FIBERGLASS DOOR
 118 INDUSTRIAL DRIVE
 EDGERTON, OHIO 43517
 PH. (419) 298-1740

1. THIS PRODUCT HAS BEEN EVALUATED AND IS IN COMPLIANCE WITH THE 2004 FLORIDA BUILDING CODE (FBC) INCLUDING THE "HIGH VELOCITY HURRICANE ZONE" (HVHZ).
2. WOOD BUCKS BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.
3. PRODUCT ANCHORS SHALL BE BEYOND WALL DRESSING OR STUCCO.
4. MIAMI-DADE APPROVED IMPACT RESISTANT SHUTTERS ARE REQUIRED FOR SIDELITES.
5. DESIGNED PRESSURE RATING SEE TABLE SHEET 1.
6. SIDELITES ARE AN OPTION AND CAN BE IN A SINGLE OR DOUBLE DOOR CONFIGURATION.

RESIDENTIAL INSULATED FIBERGLASS DOOR
 (Common to all frame conditions)

Door Leaf Construction:

Face sheets: Fiberglass 0.090" minimum thickness, with yield strength $F_y(\text{min.}) = 5,000$ psi

Core design: Polyurethane foam core, with 2.1 lbs. density by BASF.

Frame Construction: The head and side jambs are finger jointed ponderosa pine measuring 4.5625" x 1.25". The head and side jambs are mortised, butted and joined using (3) #10 X 2.5" PFH wood screws at the top corners and (2) 16ga. 0.5" crown x 2.0" long staples at the threshold ends.

Panel Construction: Flush or embossed type. The vertical edges of the face sheet are flush and glued to the finger jointed pine stiles and rails. Wood end rails are butt jointed to stiles at corners. Panels are sandwich glazed using a two piece lite frame.

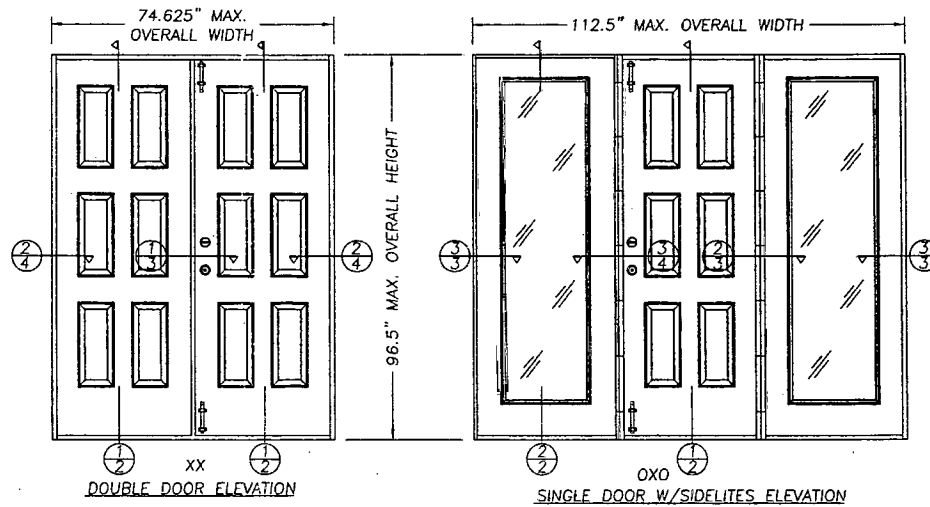
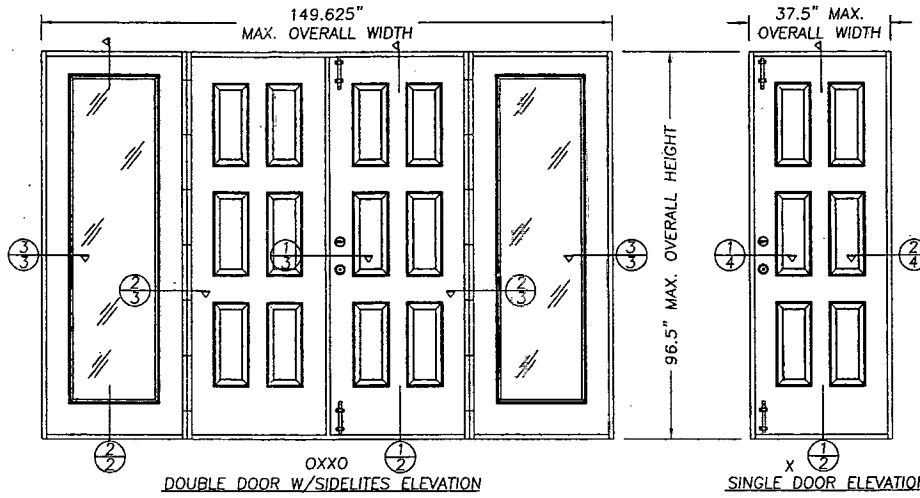
The glass is dry glazed on the exterior with a cellular tape.

TABLE OF CONTENTS

SHEET #	DESCRIPTION
1	COMMON (GENERAL NOTES, TYPICAL ELEVATIONS)
2	VERTICAL CROSS SECTIONS & BILL OF MATERIALS
3	HORIZONTAL CROSS SECTIONS
4	HORIZONTAL CROSS SECTIONS & DOOR MODELS
5	ANCHORING LOCATIONS
6	ANCHORING LOCATIONS & GLAZING DETAILS
7	FRAME COMPONENTS

DESIGN PRESSURE RATING

UNIT TYPE	WHERE WATER INFILTRATION REQUIREMENT IS NEEDED
SINGLE	+ 49.0 PSF - 60.0 PSF
DOUBLE	+ 49.0 PSF - 66.0 PSF
SINGLE OR DOUBLE WITH SIDELITES	+ 49.0 PSF - 66.0 PSF



ALL DOOR MODELS ARE VIEWED FROM THE INTERIOR SIDE (OUTSWING DOORS)

NOTE: SURFACE BOLTS ARE ON THE ACTIVE DOOR PANELS ONLY

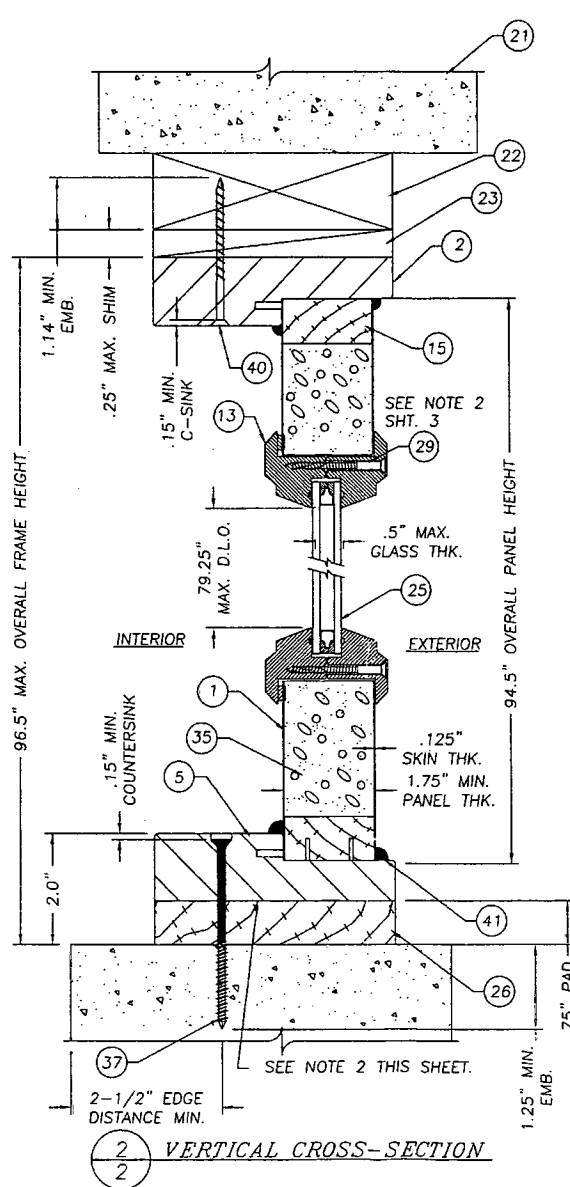
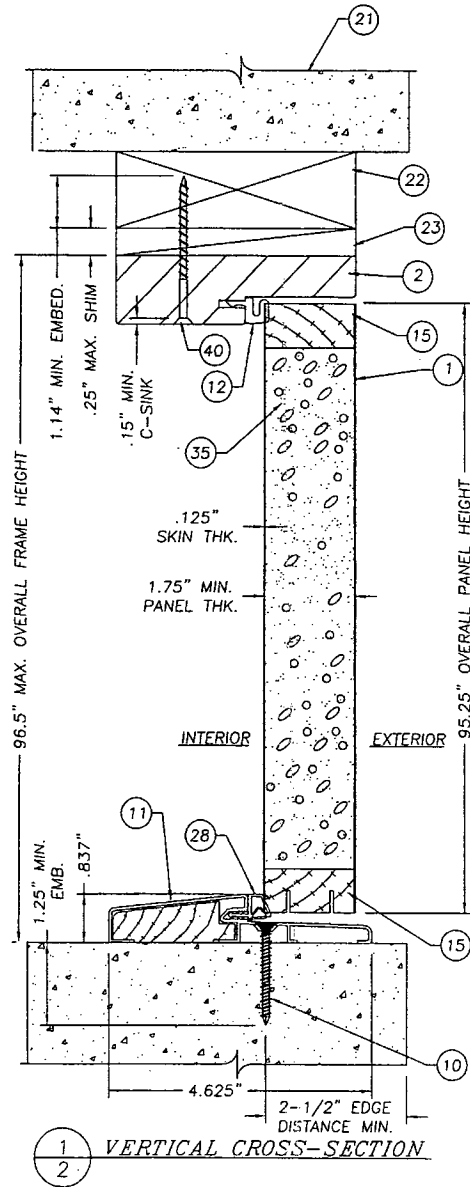
PRODUCT RENEWED
 as complying with the Florida Building Code
 Acceptance No. 06-0414.11
 Expiration Date 11/29/11
 By: [Signature]
 Building Code Product Control Division

Documents Prepared By:
 BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
 Phone No.: 813.659.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9513
 11-15-06
 Randall W. Jones P.E. No. 54158

PRODUCT: THERMA TRU FIBERGLASS OUTSWING UP TO 12'-0" x 8'-0" W/3'-0" SIDELITES
 PART OR ASSEMBLY: ELEVATIONS AND GENERAL NOTES

NO.	DATE	BY	REVISIONS
4	11/15/06	PER DADE LETTER	WH
3	03/27/06	DADE RENEWAL	AEM
2	10/17/00	GENERAL REVISION	TJH
1	09/25/00	GENERAL REVISION	TJH

DATE: 9/20/00
 SCALE: N.T.S.
 DWG. BY: TJH
 CHK. BY: RW
 DRAWING NO.: S-2030
 SHEET 1 OF 7



Item	DESCRIPTION	Material
1	8'0 DOOR SKIN .125" MIN. THK. FIBERGLASS BY THERMA-TRU with yield strength Fy(min.)=5,000 psi	FIBERGLASS
2	4 1/2" HEADER (THERMA-TRU, PONDEROSA PINE)	WOOD
3	4 1/2" LATCH JAMB (THERMA-TRU, PONDEROSA PINE)	WOOD
4	4 1/2" HINGE JAMB (THERMA-TRU, PONDEROSA PINE)	WOOD
5	4 1/2" BLANK JAMB (THERMA-TRU, PONDEROSA PINE)	WOOD
6	4" x 4" HINGE .097" THK. (THERMA-TRU)	STEEL
7	#10 x 3/4" lg. (Hinge to Frame)	STEEL
8	#10 WOOD SCREW X 2 1/2" LG.	STEEL
9	#10 x 2 1/2" LG. WOOD SCREW	STEEL
10	1/4" x 1-3/4" ITW TAPCON	STEEL
11	ONE PIECE BUMP FACE THRESHOLD (THERMA-TRU)	ALUM./WOOD
12	COMPRESSION WEATHERSTRIP (THERMA-TRU)	
13	PLASTIC LIP LITE FRAME (MFG. BY THERMA-TRU)	PVC
13A	PLASTIC LIP LITE FRAME (MFG. BY THERMA-TRU)	POLYPROP.
14	#10 x 1 1/4" LG. TYPE "A" FLATHEAD	STEEL
15	TOP & BOTTOM RAIL (1.75" x 1.625") (THERMA-TRU, PONDEROSA PINE)	WOOD
16	BLANK SIDE STILE (THERMA-TRU, PONDEROSA PINE)	WOOD
17	#8 x 1/2" LG. TYPE "AB" PANHEAD	STEEL
18	#10 WOOD SCREW X 2" LG.	STEEL
19	KWIKSET 200 DL PASSAGE	
20	KWIKSET 660 DEADBOLT	
21	MASONRY WALL	
22	2x WOOD BUCK	WOOD
23	MAX. 1/4" SHIM MATERIAL	WOOD
24	ASTRAGAL (.082" WALL THK. ALUM. & PONDEROSA PINE W/3/16" x 19" BOLT) MFG. BY THERMA-TRU	WOOD/ALUM.
25	GLAZING, 1/2" INSULATED TEMPERED GLASS	GLASS
26	3/4" THK. PRESSURE TREATED SIDELITE PAD	WOOD
27	#12 x 1/2" LG. PANHEAD SHEET METAL SCREW	STEEL
28	BULB WEATHERSTRIP (THERMA-TRU)	VINYL
29	#6-18 x 1 3/4" PHILLIPS FLATHEAD SCREW	STEEL
30	#10 x 1" LG. PHILLIPS FLATHEAD SCREW	STEEL
31	LATCH SIDE STILE (THERMA-TRU, PONDEROSA PINE)	WOOD
32	HINGE SIDE STILE (THERMA-TRU, PONDEROSA PINE)	WOOD
33	#8 x 2 1/2" PHILLIPS FLATHEAD WOOD SCREW	STEEL
34	4" x 1.625" CONTINUOUS LVL STILE	LVL
35	POLYURETHANE FOAM (BASF, 2.1lbs. DENSITY)	FOAM
36	IVES SURFACE BOLT	STEEL
37	1/4" x 3-1/4" ITW TAPCON	STEEL
38	1/8 THK. CELLULAR GLAZING TAPE (STIK-II TAPE)	-
39	#10 x 2 1/2" LG. PHILLIPS FLATHEAD SCREW	STEEL
40	#10 x 3" LG. WOOD SCREW	STEEL
41	SEALANT	SILICONE

NOTE:
 1. SIDELITE IS DIRECT SET INTO JAMB WITH #10 x 2" P.H.F.H. WOOD SCREWS AT 6" FROM EACH END AND A MAX. OF 12" O.C. ON VERTICAL LEG JAMBS ONLY.
 2. SIDELITE PAD IS SECURED TO THE SIDELITE SILL W/CONSTRUCTION ADHESIVE.

PRODUCT RENEWED
 in compliance with the Florida
 Building Code
 Acceptance No. 06-044411
 Expiration Date 11/09/11
 By [Signature]
 National Made Product Control
 Division

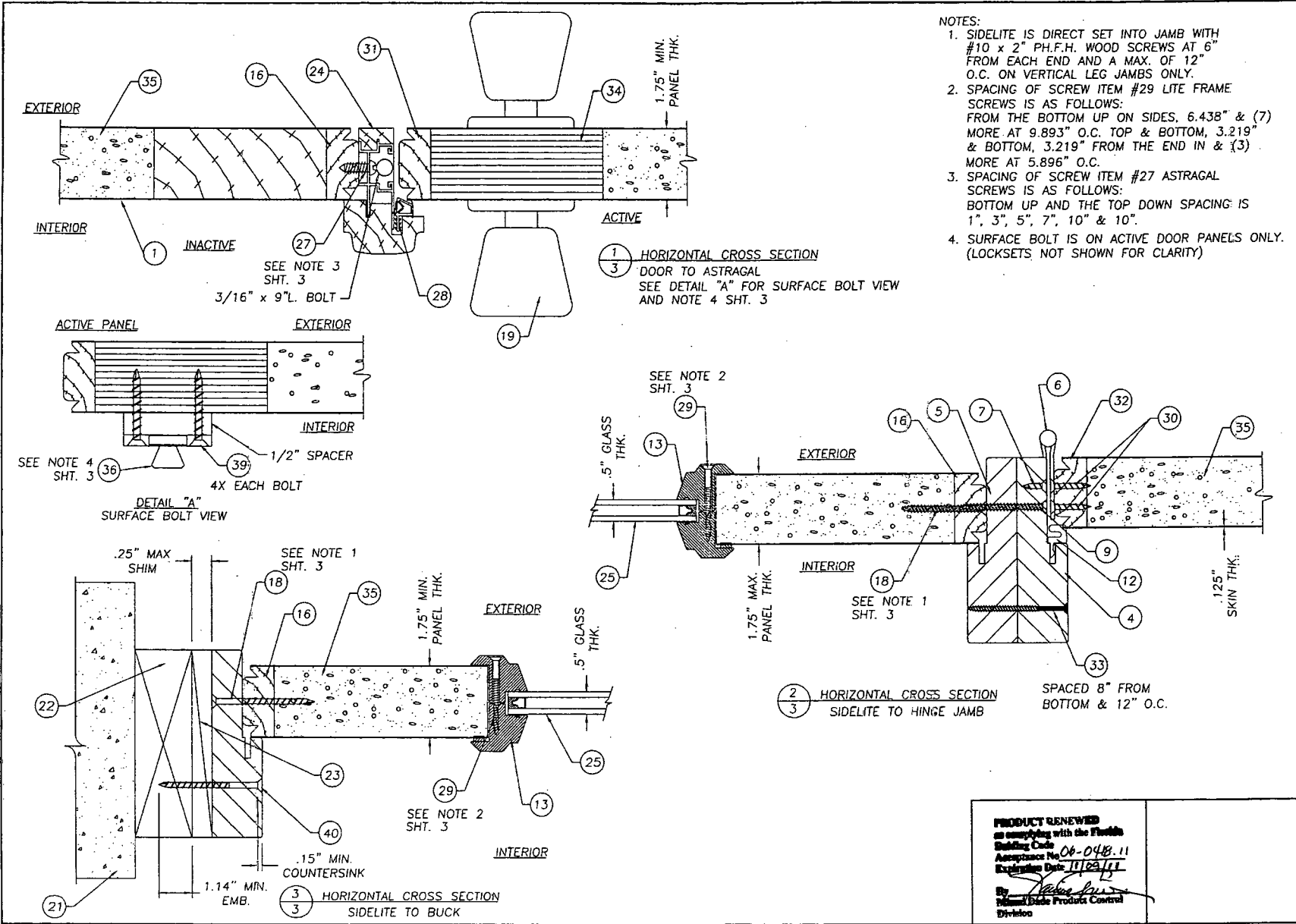
Documents Prepared By: **RW** BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
 Phone No.: 913.699.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 11-15-06
 Wendell W. Roney, P.E. No. 94158

PRODUCT: THERMA TRU FIBERGLASS
 OUTSWING UP TO 12'-0" x
 8'-0" W/3'-0" SIDELITES

PART OR ASSEMBLY: VERTICAL CROSSSECTIONS
 & BILL OF MATERIALS

NO.	DATE	BY	REVISIONS
4	11/15/08	PER DADE LETTER	
3	03/27/08	DADE RENEWAL	
2	10/17/00	GENERAL REVISION	
1	09/25/00	GENERAL REVISION	

DATE: 9/20/00
 SCALE: N.T.S.
 DWG. BY: TJH
 CHK. BY: RW
 DRAWING NO.: S-2030
 SHEET 2 OF 7



- NOTES:
1. SIDELITE IS DIRECT SET INTO JAMB WITH #10 x 2" PH.F.H. WOOD SCREWS AT 6" FROM EACH END AND A MAX. OF 12" O.C. ON VERTICAL LEG JAMBS ONLY.
 2. SPACING OF SCREW ITEM #29 LITE FRAME SCREWS IS AS FOLLOWS: FROM THE BOTTOM UP ON SIDES, 6.438" & (7) MORE AT 9.893" O.C. TOP & BOTTOM, 3.219" & BOTTOM, 3.219" FROM THE END IN & (3) MORE AT 5.896" O.C.
 3. SPACING OF SCREW ITEM #27 ASTRAGAL SCREWS IS AS FOLLOWS: BOTTOM UP AND THE TOP DOWN SPACING IS 1", 3", 5", 7", 10" & 10".
 4. SURFACE BOLT IS ON ACTIVE DOOR PANELS ONLY. (LOCKSETS NOT SHOWN FOR CLARITY)

1
3
HORIZONTAL CROSS SECTION
DOOR TO ASTRAGAL
SEE DETAIL "A" FOR SURFACE BOLT VIEW
AND NOTE 4 SHT. 3

2
3
HORIZONTAL CROSS SECTION
SIDELITE TO HINGE JAMB
SPACED 8" FROM
BOTTOM & 12" O.C.

3
3
HORIZONTAL CROSS SECTION
SIDELITE TO BUCK

PRODUCT RENEWED
in compliance with the Florida
Building Code
Acceptance No. 06-048.11
Expiration Date: 11/23/11
By: *[Signature]*
Miami Dade Product Control
Division

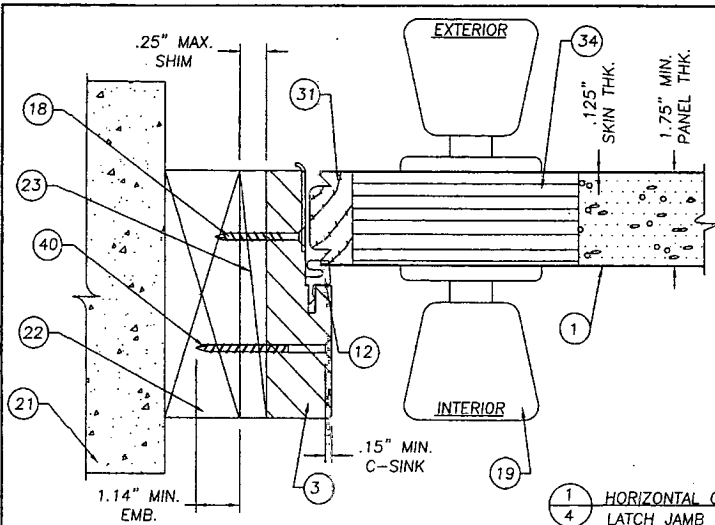
Documents Prepared By: **RW** BUILDING CONSULTANTS, INC. P.O. Box 230 Venice 33595 Phone No.: 813.955.9137 Florida Board of Professional Engineers Certificate of Authorization No. 9813 *[Signature]* 11-15-06 Wendell W. Hines P.E. No. B415B

PRODUCT: THREMA TRU FIBERGLASS OUTSWING UP TO 12'-0" x 8'-0" W/3'-0" SIDELITES

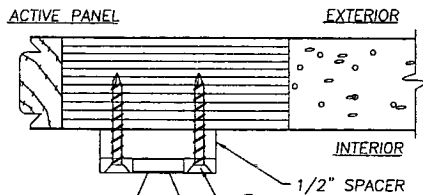
PART OR ASSEMBLY: HORIZONTAL CROSS SECTIONS

NO.	DATE	REVISIONS
4	11/15/05	PER DADE LETTER
3	03/27/08	DADE RENEWAL
2	10/17/00	GENERAL REVISION
1	09/25/00	GENERAL REVISION

DATE: 9/20/00
SCALE: N.T.S.
DWG. BY: TJH
CHK. BY: RW
DRAWING NO.: S-2030
SHEET 3 OF 7

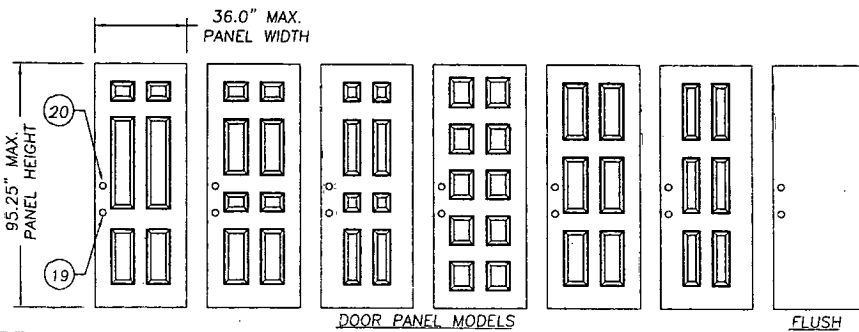


1
4 HORIZONTAL CROSS SECTION
LATCH JAMB TO BUCK
SEE DETAIL "H" FOR SURFACE BOLT VIEW
AND NOTE 4 SHT. 3



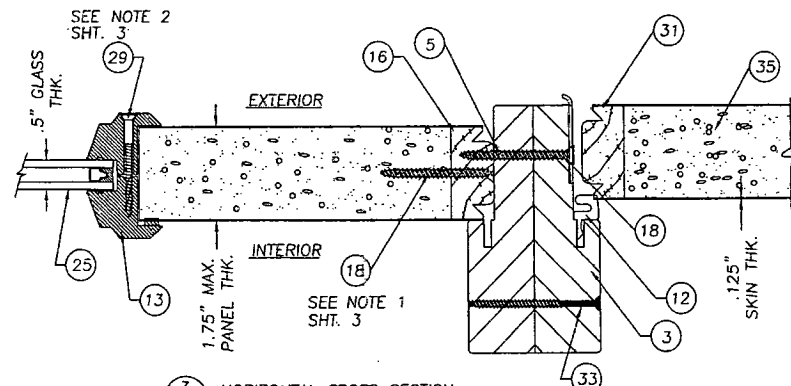
SEE NOTE 4 (36)
SHT. 3 4X EACH BOLT

DETAIL "H"
SURFACE BOLT VIEW



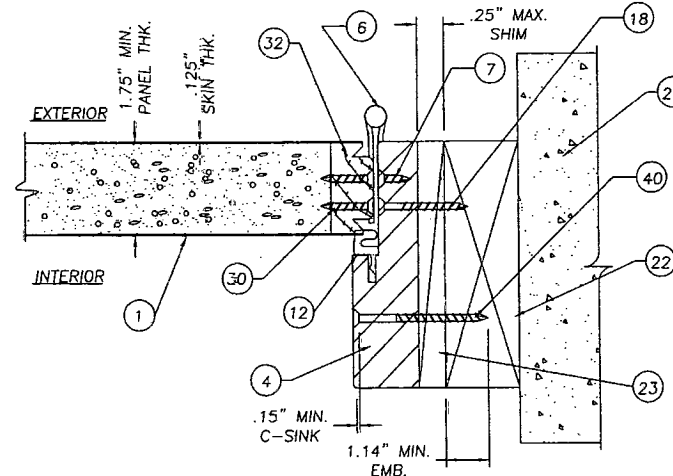
DOOR PANEL MODELS

FLUSH



3
4 HORIZONTAL CROSS SECTION
SIDELITE TO LATCH JAMB

SPACED 8" FROM
BOTTOM & 12" O.C.



2
4 HORIZONTAL CROSS SECTION
HINGE JAMB TO BUCK

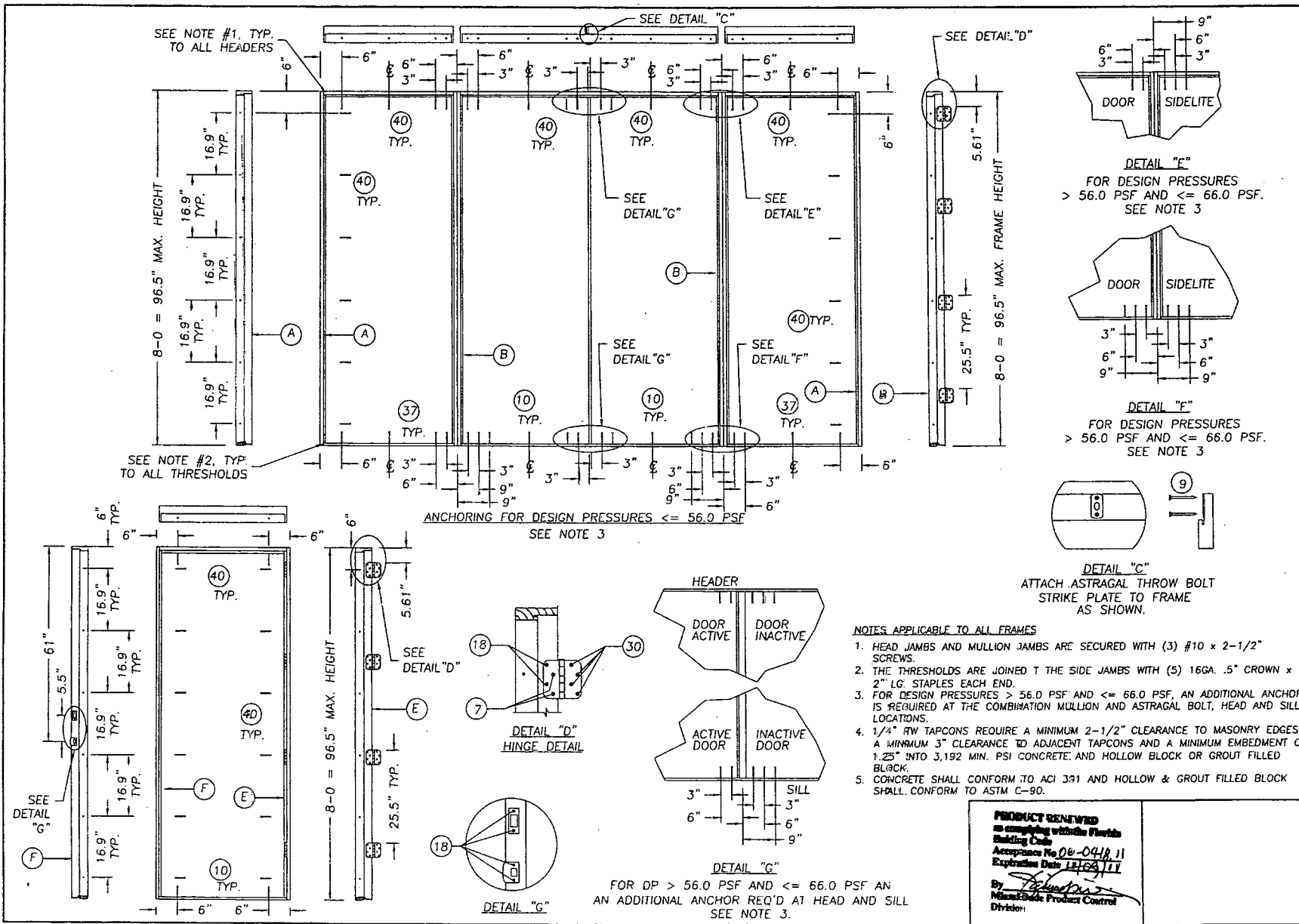
PRODUCT RENEWED
as complying with the Florida
Building Code
Acceptance No. 00-048.1
Expiration Date 11/02/12
By [Signature]
Miami Trade Product Control
Division

Documents Prepared By: BUILDING CONSULTANTS, INC.
P.O. Box 230, Venice, FL 33595
Phone No.: 813.669.8100
Florida Board of Professional Engineers
Certificate of Authorization No. 8813
[Signature] 11-15-06
Wendell V. Bone Jr. No. 54158

PRODUCT: THREMA TRU FIBERGLASS
OUTSWING UP TO 12'-0" x
8'-0" W/3'-0" SIDELITES
PART OR ASSEMBLY:
HORIZONTAL CROSS
SECTIONS & DOOR MODELS

NO.	DATE	REVISIONS
4	11/15/08	PER DADE LETTER
3	03/27/08	DADE RENEWAL
2	10/17/00	GENERAL REVISION
1	09/29/00	GENERAL REVISION

DATE: 9/20/00
SCALE: N.T.S.
DWG. BY: TJH
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DRAWING NO.: S-2030
SHEET 4 OF 7

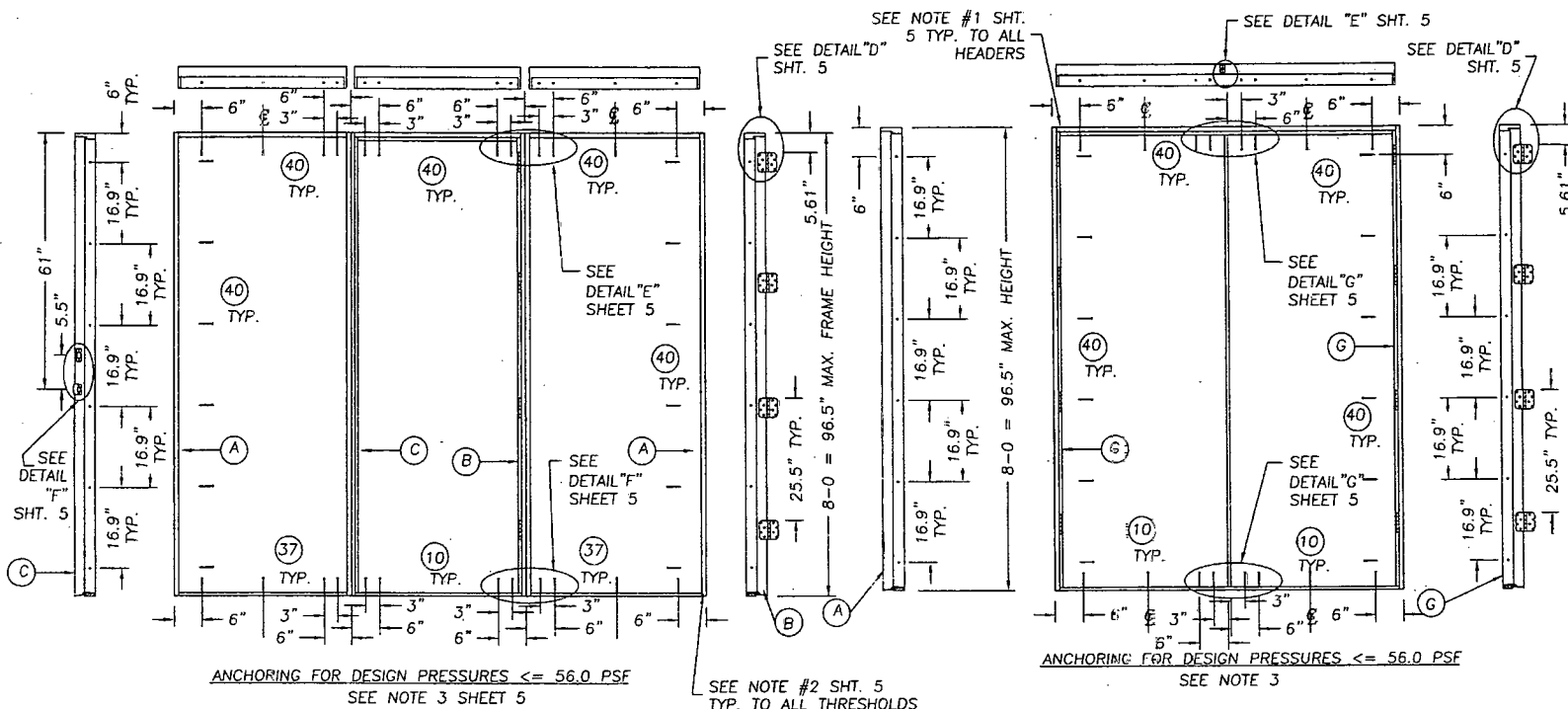


NOTES APPLICABLE TO ALL FRAMES

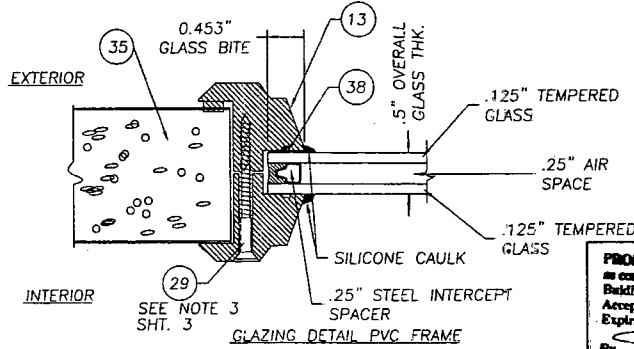
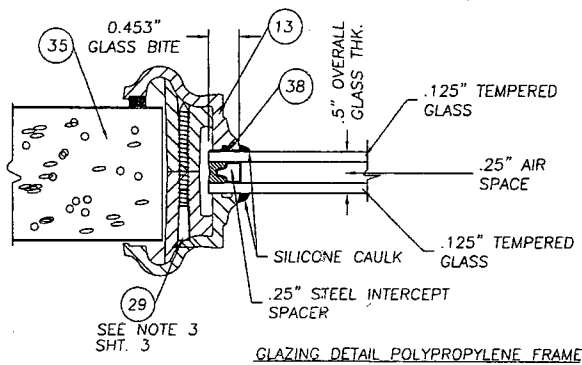
1. HEAD JAMBS AND MULLION JAMBS ARE SECURED WITH (3) #10 x 2-1/2" SCREWS.
2. THE THRESHOLDS ARE JOINED TO THE SIDE JAMBS WITH (5) 16GA. .5" CROWN x 2" LG. STAPLES EACH END.
3. FOR DESIGN PRESSURES > 56.0 PSF AND ≤ 66.0 PSF, AN ADDITIONAL ANCHOR IS REQUIRED AT THE COMBINATION MULLION AND ASTRAGAL BOLT, HEAD AND SILL LOCATIONS.
4. 1/4" RW TAPCONS REQUIRE A MINIMUM 2-1/2" CLEARANCE TO MASONRY EDGES, A MINIMUM 3" CLEARANCE TO ADJACENT TAPCONS AND A MINIMUM EMBEDMENT OF 1.25" INTO 3,192 MIN. PSI CONCRETE. AND HOLLOW BLOCK OR GROUT FILLED BLOCK.
5. CONCRETE SHALL CONFORM TO ACI 309 AND HOLLOW & GROUT FILLED BLOCK SHALL CONFORM TO ASTM C-90.

PRODUCT REVIEWED
 as complying with the Florida
 Building Code
 Acceptance No. 06-0418.11
 Expiration Date 12/31/11
 By: [Signature]
 Materials Product Control
 Division

Documents Prepared By: RW BUILDING CONSULTANTS, INC. P.O. Box 230 Venice FL 33595 Phone No: 813.859.9197 Florida Board of Professional Engineers Certificate of Authorization No. 0813 11-15-06 Wendell W. Hootner P.E. No. 54158																
PRODUCT: THREMA TRU FIBERGLASS OUTSWING UP TO 12'-0" x 8'-0" W/3'-0" SIDELITES PART OR ASSEMBLY: ANCHORING LAYOUTS AND DETAILS	REVISIONS <table border="1"> <thead> <tr> <th>NO.</th> <th>DATE</th> <th>REVISION</th> </tr> </thead> <tbody> <tr> <td>4</td> <td>11/15/08</td> <td>PER DADE LETTER</td> </tr> <tr> <td>3</td> <td>03/27/08</td> <td>DADE RENEWAL</td> </tr> <tr> <td>2</td> <td>10/17/00</td> <td>GENERAL REVISION</td> </tr> <tr> <td>1</td> <td>09/25/00</td> <td>GENERAL REVISION</td> </tr> </tbody> </table>	NO.	DATE	REVISION	4	11/15/08	PER DADE LETTER	3	03/27/08	DADE RENEWAL	2	10/17/00	GENERAL REVISION	1	09/25/00	GENERAL REVISION
NO.	DATE	REVISION														
4	11/15/08	PER DADE LETTER														
3	03/27/08	DADE RENEWAL														
2	10/17/00	GENERAL REVISION														
1	09/25/00	GENERAL REVISION														
DATE: 9/20/00 SCALE: N.T.S. DWS. BY: TJH CHK. BY: RW DRAWING NO.: S-2030	SHEET 5 OF 7															



ALL FRAMES ARE VIEWED FROM EXTERIOR SIDE
 DOOR PANELS NOT SHOWN FOR CLARITY OF ANCHORING LOCATIONS



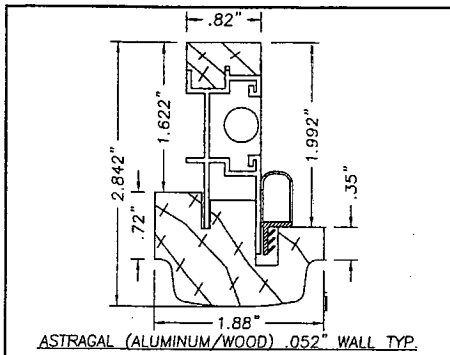
PRODUCT RENEWED
 as complying with the Florida Building Code
 Acceptance No. 06-0918.11
 Expiration Date 11/09/11
 By *[Signature]*
 Miami State Product Control Division

Documents Prepared By: *RW* BUILDING CONSULTANTS, INC.
 P.O. Box 239 Jacksonville FL 32202
 Phone No.: 913.658.9187
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 11-15-06
 Wanda L. W. King, P.E. No. 54158

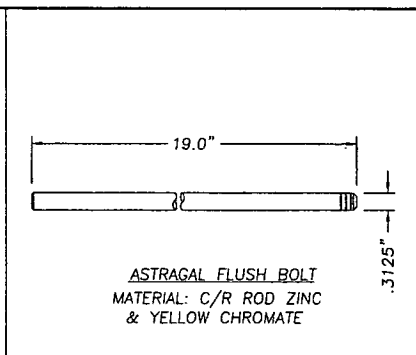
PRODUCT: THREMA TRU FIBERGLASS OUTSWING UP TO 12'-0" x 8'-0" W/3'-0" SIDELITES
 PART OR ASSEMBLY: ANCHORING LAYOUTS & GLAZING DETAIL

WH	DATE	BY
4	11/15/06	PER DADE LETTER
3	03/27/06	DADE RENEWAL
2	10/17/00	GENERAL REVISION
1	09/25/00	GENERAL REVISION
INCL. DATE:		REVISIONS

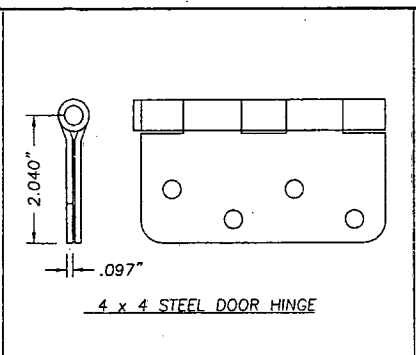
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 SCALE: N.T.S.
 DWG. BY: TJH
 CHK. BY: RW
 DRAWING NO.: S-2030
 SHEET 6 OF 7



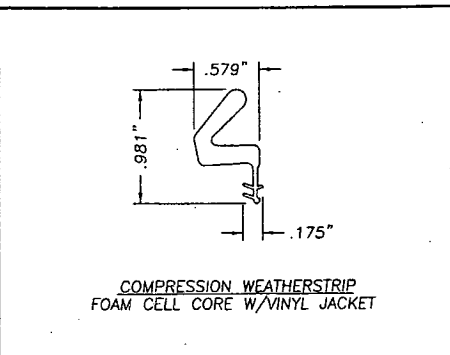
ASTRAGAL (ALUMINUM/WOOD) .052" WALL TYP.



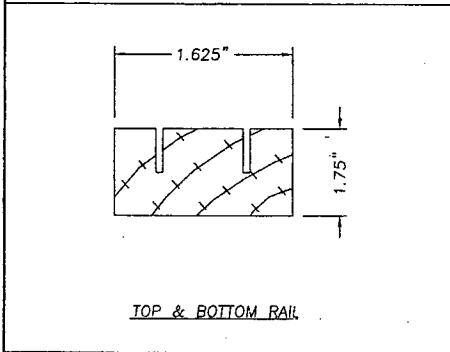
ASTRAGAL FLUSH BOLT
MATERIAL: C/R ROD ZINC
& YELLOW CHROMATE



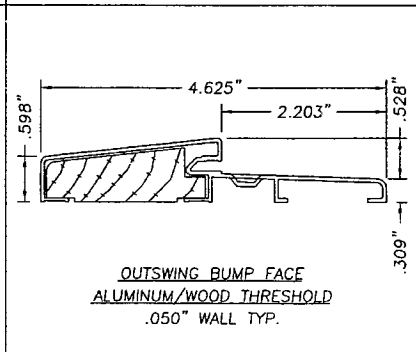
4 x 4 STEEL DOOR HINGE



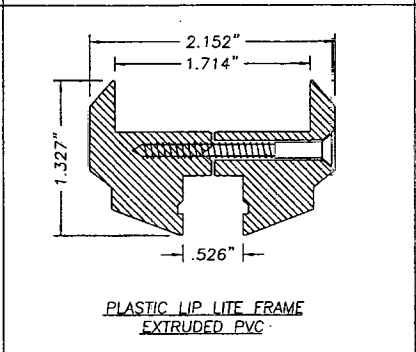
COMPRESSION WEATHERSTRIP
FOAM CELL CORE W/VINYL JACKET



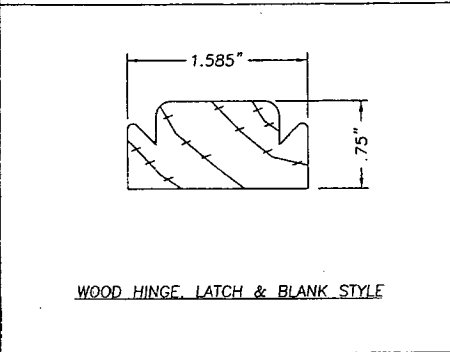
TOP & BOTTOM RAIL



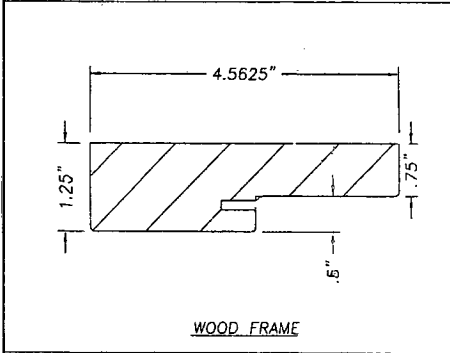
OUTSWING BUMP FACE
ALUMINUM/WOOD THRESHOLD
.050" WALL TYP.



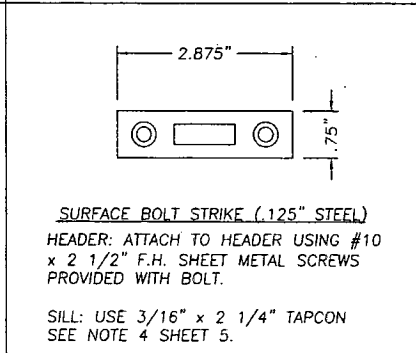
PLASTIC LIP LITE FRAME
EXTRUDED PVC



WOOD HINGE, LATCH & BLANK STYLE

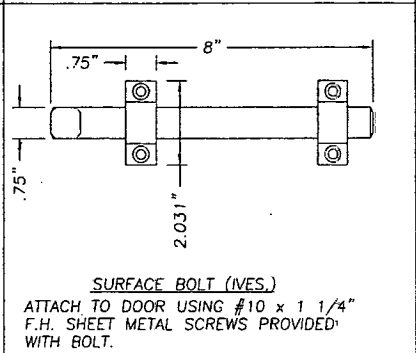


WOOD FRAME

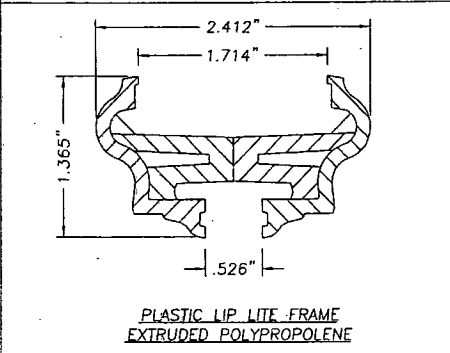


SURFACE BOLT STRIKE (.125" STEEL)
HEADER: ATTACH TO HEADER USING #10
x 2 1/2" F.H. SHEET METAL SCREWS
PROVIDED WITH BOLT.

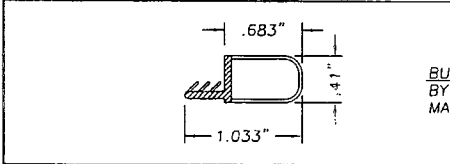
SILL: USE 3/16" x 2 1/4" TAPCON
SEE NOTE 4 SHEET 5.



SURFACE BOLT (IVES.)
ATTACH TO DOOR USING #10 x 1 1/4"
F.H. SHEET METAL SCREWS PROVIDED
WITH BOLT.



PLASTIC LIP LITE FRAME
EXTRUDED POLYPROPYLENE



BULB WEATHERSTRIP
BY THERMA-TRU
MATERIAL: RIGID TEKNOR APEX 88N-809C
FLEX TEKNOR APEX 902-A

PRODUCT RENEWED
as complying with the Florida
Building Code
Acceptance No. 06-0410-11
Expiration Date 11/09/11
By *[Signature]*
Miami Dade Product Control
Division

DATE:	9/20/00
SCALE:	N.T.S.
DWG. BY:	TJH
CHK. BY:	RW
DRAWING NO.:	5-2030
SHEET	7 OF 7

Documents Prepared By: **RW BUILDING CONSULTANTS, INC.**
P.O. Box 240, Ft. Lauderdale, FL 33395
Phone No. 954.559.9197
Florida Board of Professional Engineers
Certificate of Registration No. 98113
[Signature] 11-15-06
Wendell W. Hinesy, P.E. No. 94158

PRODUCT: **THERMA-TRU FIBERGLASS**
OUTSWING UP TO 12-0 x
8-0 W/3-0 SIDELITES

NO.	DATE	REVISIONS
4	11/15/08	PER DADE LETTER
3	03/27/08	DADE RENEWAL
2	10/17/00	GENERAL REVISION
1	09/25/00	GENERAL REVISION

FRAME COMPONENTS

WH	BY
DEM	TJH
	LJH
	BY

AC# 2661864

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L06071700118

DATE	BATCH NUMBER	LICENSE NBR
07/17/2006	067001268	CBC1254525

The BUILDING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

STRZALKOWSKI, STEPHEN EDWARD
S E S TRIM SUPPLIES INC
3475 SW PALM CITY SCHOOL ROAD
PALM CITY FL 34990

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

AC# 2661943

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L06071700197

DATE	BATCH NUMBER	LICENSE NBR
07/17/2006	067C01269	QB49090

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2007
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)

S E S TRIM SUPPLIES INC
3475 SW PALM CITY SCHOOL ROAD
PALM CITY FL 34990

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

2007-2008

MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

LICENSE 2006-320-1156 CERT 421310
PHONE (772) 475-4906 SIC NO
LOCATION:
3475 SW PALM CITY SCHOOL AVE PC

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	\$	<u> .00</u>	LIC. FEE	\$	<u> 26.25</u>
	\$	<u> .00</u>	PENALTY	\$	<u> </u>
	\$	<u> .00</u>	COL. FEE	\$	<u> </u>
	\$	<u> .00</u>	TRANSFER	\$	<u> </u>
	\$	<u> .00</u>			<u> </u>
TOTAL		<u> </u>			<u> </u>



STEPHEN
FILM SUPPLIES, INC.
PALM CITY SCHOOL AVENUE
PALM CITY, FL 34990

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF
WHOLESALE/MOLDINGS
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

09 DAY OF AUGUST 07
AND ENDING SEPTEMBER 30 2008 20 11 2006 50722.0001 26.25

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE.

ANYONE DOING BUSINESS WITHOUT A VALID OCCUPATIONAL LICENSE IS SUBJECT OF A \$250 FINE. PENALTY 10% FOR MONTH OF OCTOBER, 5% ADDITIONAL EACH MONTH THEREAFTER UP TO 25% PLUS COLLECTION COSTS.

NOTE — A PENALTY IS IMPOSED FOR FAILURE TO KEEP THIS LICENSE EXHIBITED CONSPICUOUSLY AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS.

P.1
TO: 17727819767
SEP-13-2007 08:35 FROM: STARKY'S CONSTRUCTION (248) 543-0764

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9-24, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7338 3	McCormick 59 N River Rd Pine Orchard	Final plumb heating & electrical	PASS PASS PASS	INSPECTOR: <i>[Signature]</i>
8009 8145 1	Geisinger 8 th Castle Hill O/B	framing	FAIL	INSPECTOR: <i>[Signature]</i>
7801 10:30 4	Cummings 835 River Rd John Elias Mgmt	framing & structural	PASS	INSPECTOR: <i>[Signature]</i>
8714 2	Maryann 17 N Via Lucinda SES Trim	Ext doors Final	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
8617 1	Geisinger 8 th Castle Hill Cardinal Roof	Flat roof dry-in	PASS	INSPECTOR: <i>[Signature]</i>
8655	Moscatoles #1 NORTH CT O/B	U.C. GAS	PASS	INSPECTOR: <i>[Signature]</i>
				INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **6-13-14** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	AKERT 38 W. HIGH Pt	TREE	OK	
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10694	WESTCOTT 53 N. RIVER RD SAN GEORGE COND	COLUMNS SOON WITH	PASS	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10859	BROWNIE 138 S SAT. RD	GAS ROUGH	PASS	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10804	ENGLE 17 VIA LUCINDIA A/C MANN	A/C FINAL	PASS	CLOSE
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10890	FRONLICH 9 PALM	FINAL DECK	PASS	CLOSE
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	WEDEN 21 Palm Rd	TREE	OK	
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR



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

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	10804	DATE ISSUED:	3/13/2014
SCOPE OF WORK:	A/C CHANGEOUT		
CONTRACTOR:	AC MANN		
PARCEL CONTROL NUMBER:	013841007000003805	SUBDIVISION	LUCINDA LOT 38
CONSTRUCTION ADDRESS:	17 S VIA LUCINDA		
OWNER NAME:	MAUREEN ENGLE		
QUALIFIER:	THEODORE MANN	CONTACT PHONE NUMBER:	772 340-4604

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: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

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:	10804		
ADDRESS:	17 S VIA LUCINDA		
DATE ISSUED:	3/13/2014	SCOPE OF WORK:	AC CHANGEOUT

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 spa @ \$ 121.75 per sq. ft. s.f.		\$	-
Total square feet non-conditioned space, or interior remodel: @ \$ 59.81 per sq. ft. s.f.		\$	-
Total square feet remodel with new trusses: \$ 90.78 per sq. ft. s.f.		\$	-
Total Construction Value:		\$	\$ -
Building fee: (2% of construction value SFR or >\$200K)		\$	n/a
Building fee: (1% of construction value < \$200K + \$100 per insp.)		\$	-
Total number of inspections (Value < \$200K) \$ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	n/a
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	n/a
Road impact assessment: (.04% of construction value - \$5 min.)			n/a
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	\$ -

ACCESSORY PERMIT	Declared Value:	\$	\$ 4,950.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 1.00	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	\$ 5.00

TOTAL ACCESSORY PERMIT FEE:	\$ 109.00
------------------------------------	------------------

*Pal 3/17/14
CK 2744*

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

Date: 3-12-2014

Permit Number: 10804

OWNER/LESSEE NAME: MAUREEN ENGLE Phone (Day) 310-4604 (ax)
 Job Site Address 17 S. VIA LUCINDIA City STUART State FL Zip 34994
 Legal Description LUCINDIA LOT 38 Parcel Control Number: 01-38-41-007-000-00
 Fee Simple Holder Name: Maureen Engle Address: 230 DIXIE CT
 City: Roswell State GA Zip 30075 Telephone: _____

380-5

***SCOPE OF WORK (PLEASE BE SPECIFIC):** EXACT REPLACEMENT OF 3 1/2 TON W/10KW

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

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: \$ 4950.00
 (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 _____ 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

Construction Company: AC MANN Phone: 310-4604 Fax: _____
 Qualifiers name: Theodore Mann Street: 1050 Bithune City: PSL State: FL Zip: 34983
 State License Number: CALIB14425 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: THEODORE MANN Phone Number: 772-340-4604

DESIGN PROFESSIONAL: _____ Fla. License# _____
 Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

AREAS SQUARE FOOTAGE: Living: 1720 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): 2010
 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

WARNINGS 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. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED 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 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

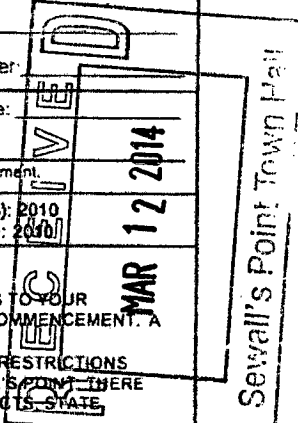
AFFIDAVIT: APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO THE WORK AS SPECIFICALLY INDICATED ABOVE. I CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO THE ISSUANCE OF A PERMIT AND THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE.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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:
 X _____
 State of Florida, County of: _____
 On This the _____ day of _____, 20____
 by _____ who is personally
 known to me or produced _____
 As identification _____
 Notary Public
 My Commission Expires: _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
 X Theodore Mann
 State of Florida, County of: Port St. Lucie
 On This the 12th day of MARCH, 2014
 by Theodore Mann who is personally
 known to me or produced _____
 As identification _____
 Notary Public
 My Commission Expires: MARCH 11, 2016

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!

PSOACMANN@AOL.COM



CITY OF PORT ST. LUCIE LOCAL BUSINESS TAX RECEIPT

TERM: October 1, 2013 to September 30, 2014

...that the receipt holder is authorized to use this receipt for all state and local regulated trade purposes. THIS RECEIPT MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS BUSINESS ADDRESS ONLY

Business Tax 123021 14 103215

Fee: 127.63
Discount: 0.00

Address: 1050 SW BILTMORE ST
CONT CONTRACTOR
A/C MANN INC
1050 SW BILTMORE ST
PORT ST LUCIE FL 34983

Mary E. Mann
City of Port St. Lucie

THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY. 3886 7001 Zipcode

Fee: 127.63 Late Fees: 26.54 Total this payment 154.16

THIS DOCUMENT HAS A COLORED BACKGROUND, MICROPRINTING, LHMARCS® PATENTED PAPER.

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# 112381

6310073

LICENSE NBR
CAC1814425

OR TAX PAID ONLY
IT DOES NOT GIVE HOLDER
RIGHT TO OPEN THIS BUSINESS
IN ALL STATES AND LOCAL
REGULATIONS

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

generated on 3/13/2014 11:19:01 AM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-007-000-00380-5	17722	17 S VIA LUCINDIA, SEWALL'S POINT	\$215,650	3/8/2014

Owner Information

Owner(Current)	ENGLE MAUREEN
Owner/Mail Address	230 AXWORTH CT ROSWELL GA 30075
Sale Date	12/8/2003
Document Book/Page	1848 0084
Document No.	1715114
Sale Price	336500

Location/Description

Account #	17722	Map Page No.	
Tax District	2200	Legal Description	LUCINDIA LOT 38
Parcel Address	17 S VIA LUCINDIA, SEWALL'S POINT		
Acres	.3490		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120350 Lucinda

Assessment Information

Market Land Value	\$142,000
Market Improvement Value	\$73,650
Market Total Value	\$215,650



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-297-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Air Conditioning Change out Affidavit

Residential Commercial _____
Package Unit _____ Yes No (Use Condenser size of form below for equipment listing)
Duct Replacement _____ Yes No - Refrigerant line replacement _____ Yes No
Flushing Existing Refrigerant Lines Yes _____ No - Adding Refrigerant Drier _____ Yes No
Rooftop A/C Stand Installation _____ Yes No - Curb Installation _____ Yes No
Smoke Detector in Supply (over 2000 CFM) _____ Yes No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg Goodman Model # ASPTA2
Volts 240 CFM's 1400 Heat Strip 10 Kw
Min. Circuit Amps 53 Wire gauge #6
Max. Breaker size 60 Min. Breaker size 60
Ref. line size: Liquid 3/8 Suction 1/8
Refrigerant type R410A
Location Existing New _____
Attic/Garage/Closet (specify) VERTICAL
Access _____
(Contractor must provide ladder if required)

Condenser: Mfg Goodman Model # GSX16D42
Volts 240 SEER/EEER 16 BTU's 41,000
Min. Circuit Amps 23 Wire gauge #8
Max. Breaker size 40 Min. Breaker size 25
Ref. line size: Liquid 3/8 Suction 1/8
Refrigerant type R410A
Location Existing New _____
Left/Right/Rear/Front/Roof LEFT SIDE
Condensate Location SAME

EXISTING SYSTEM COMPONENTS

Air handler: Mfg TRANE Model # TLO042
Volts 240 CFM's 1400 Heat Strip 10 Kw
Min. Circuit Amps 53 Wire gauge #6
Max. Breaker size 60 Min. Breaker size 60
Ref. line size: Liquid 3/8 Suction 1/8
Refrigerant type R-22
Location Ext. New _____
Attic/Garage/Closet (specify) VERTICAL
Access _____

Condenser: Mfg TRANE Model # TIND42
Volts 240 SEER/EEER 10 BTU's 41000
Min. Circuit Amps 24 Wire gauge #8
Max. Breaker size 40 Min. Breaker size 25
Ref. line size: Liquid 3/8 Suction 1/8
Refrigerant type R-22
Location Ext. _____ New _____
Left/Right/Rear/Front/Roof LEFT SIDE
Condensate Location SAME

Certification:

I hereby certify that the information entered on this form accurately represents the equipment installed and further affirm that this equipment is considered matched as required by FBC - R (N) 107 & 1108

[Signature]
Signature

3-12-2014
Date



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

FLORIDA ENERGY CONSERVATION CODE
Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: MAUREEN ENGLE Contractor name: AC MAN
Street address: 17 S. VIA LUCINDA Jurisdiction: Sewalls Point
City: STUART Permit No.: _____
Zip: 34994 Final inspection date: _____

I certify that I have inspected the duct work associated with the HVAC unit referenced by the permit listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below:

- Where needed, the existing ducts have been sealed using reinforced mastic or code-approved equivalent.
 Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)
 The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception 2)
 System was tested (see below) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)

X Signature: [Signature] Date: 3-12-2014

X Printed Name: Therese M. Mann

X Contractor License #: CAC1414425

I certified I have tested the replaced air distribution system(s) referenced by the permit listed above at a pressure differential of 25 Pascals (0.10 in. w.c.).

Signature: _____ Date: _____

Printed Name: _____

Email: 2shawnrussell@bellsouth.net

Project Information

For: Maureen Engle, AC MANN
17 S Via Lucinda, Sewall's Point, FL

Notes: Email: 2shawnrussell@bellsouth.net

Design Information

Weather: W Palm Beach, FL, US

Winter Design Conditions

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

Summer Design Conditions

Outside db 90 °F
Inside db 75 °F
Design TD 15 °F
Daily range L
Relative humidity 50 %
Moisture difference 59 gr/lb

Heating Summary

Structure 18351 Btuh
Ducts 5431 Btuh
Central vent (0 cfm) 0 Btuh
Humidification 0 Btuh
Piping 0 Btuh
Equipment load 23782 Btuh

Sensible Cooling Equipment Load Sizing

Structure 20203 Btuh
Ducts 12816 Btuh
Central vent (0 cfm) 0 Btuh
Blower 0 Btuh
Use manufacturer's data n
Rate/swing multiplier 0.95
Equipment sensible load 31433 Btuh

Infiltration

Method Simplified
Construction quality Average
Fireplaces 0

	Heating	Cooling
Area (ft ²)	1752	1752
Volume (ft ³)	15768	15768
Air changes/hour	0.38	0.20
Equiv. AVF (cfm)	100	53

Latent Cooling Equipment Load Sizing

Structure 2090 Btuh
Ducts 2624 Btuh
Central vent (0 cfm) 0 Btuh
Equipment latent load 4713 Btuh
Equipment total load 36147 Btuh
Req. total capacity at 0.70 SHR 3.7 ton

Heating Equipment Summary

Make n/a
Trade n/a
Model n/a
AHRI ref n/a
Efficiency n/a
Heating input 0 Btuh
Heating output 0 Btuh
Temperature rise 0 °F
Actual air flow 1483 cfm
Air flow factor 0.062 cfm/Btuh
Static pressure 0 in H2O
Space thermostat

Cooling Equipment Summary

Make Goodman Mfg.
Trade GOODMAN, JANITROL, AMANA DISTI...
Cond GSX160421F*
Coil ASPT42D14A*
AHRI ref 5756176
Efficiency 13.0 EER, 16 SEER
Sensible cooling 28700 Btuh
Latent cooling 12300 Btuh
Total cooling 41000 Btuh
Actual air flow 1483 cfm
Air flow factor 0.045 cfm/Btuh
Static pressure 0 in H2O
Load sensible heat ratio 0.88

Calculations approved by ACCA to meet all requirements of Manual J 8th Ed.



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2013.

Certificate of Product Ratings

AHRI Certified Reference Number: 5756176 Date: 1/3/2014

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower
Outdoor Unit Model Number: GSX160421F*
Indoor Unit Model Number: ASPT42D14A*
Manufacturer: GOODMAN MANUFACTURING CO., LP.
Trade/Brand name: GOODMAN, JANITROL, AMANA DISTINCTIONS, EVERREST, ONE HOUR AIR CONDITIONING AND
Series name:

Manufacturer responsible for the rating of this system combination is GOODMAN MANUFACTURING CO., LP.

Rated as follows in accordance with AHRI Standard 210/240-2008 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:

Cooling Capacity (Btuh):	41000
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00
IEER Rating (Cooling):	

* Ratings followed by an asterisk (*) indicate a voluntary rerate of previously published data, unless accompanied with a WAS, which indicates an involuntary rerate.

DISCLAIMER

AHRI does not endorse the product(s) listed on this Certificate and makes no representations, warranties or guarantees as to, and assumes no responsibility for, the product(s) listed on this Certificate. AHRI expressly disclaims all liability for damages of any kind arising out of the use or performance of the product(s), or the unauthorized alteration of data listed on this Certificate. Certified ratings are valid only for models and configurations listed in the directory at www.ahridirectory.org.

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This Certificate and its contents are proprietary products of AHRI. This Certificate shall only be used for individual, personal and confidential reference purposes. The contents of this Certificate may not, in whole or in part, be reproduced; copied; disseminated; entered into a computer database; or otherwise utilized, in any form or manner or by any means, except for the user's individual, personal and confidential reference.

CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at www.ahridirectory.org, click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed below.



THE METAL SHOP

Custom Metal Manufacturer

Consulting Engineer:

Douglas W. Lowe, P.E.

FLA# 13355

1206 Millenium Pkwy

Brandon, FL 33511

ANCHOR CLIPS Installer's Guide

WARNING: HAZARDOUS VOLTAGE - DISCONNECT POWER BEFORE SERVICING

PART NUMBER

#770 / 774 (4 pk of 4" / 6" tall clips with hardware)

#771 / 773 (4 pk of 4" / 6" tall clips only)

CONSTRUCTION

16 gauge galvanized steel, G-90 rated for corrosion coastal applications.

PACKAGING DETAILS

All anchor clips are supplied as per package quantities described above.

INSTALLATION

Minimum of 4 clips required per condenser unit.

Minimum of 2 #14 x 3/4" screws with neoprene washer required to fasten clip to condenser unit.

1/4" x 1 3/4" Tapcon screw required to fasten clip to the condenser pad.

Locate the anchor clips to fit comfortably between condenser unit and pad.

Adjust clip accordingly to fit on condenser unit and screw together, at the same time ensuring that the base of the clip is still in contact with the pad.

All hardware must be fastened prior to connecting Refrigerant lines and electrical power to the unit. Suitable for ground mounted units.

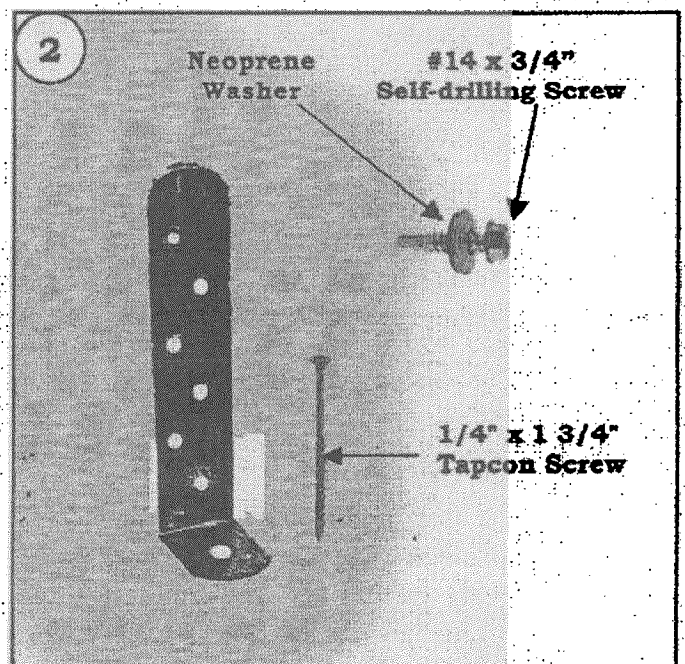
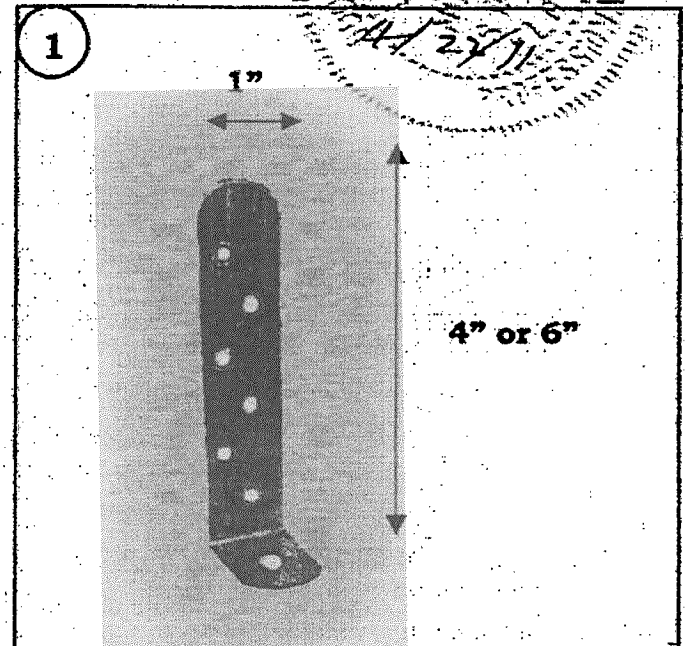
Anchor clip design meets requirements of The Florida Building Code 2007 (Building) chapter 301.12 for wind resistance up to 140 MPH.

FEATURES

The use of "sized to fit" screw holes compared to slots means that security is never compromised. A tight, secure fit between pad and condenser ensures security for the condenser and offers great assurance during extreme weather conditions.

NOTE

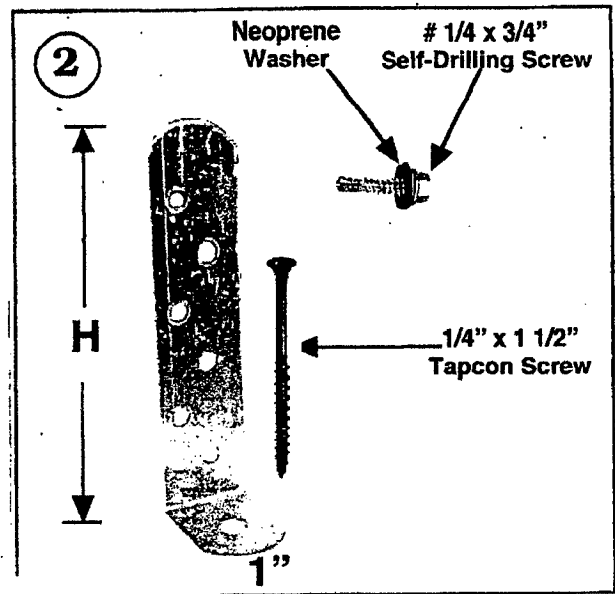
Above installation instruction suitable for up to 5 ton units.



PART NO.	H DIM.	W DIM.	DESCRIPTION
# 771	4"	1"	4 pk. Clips only
# 773	6"	1"	4 pk. Clips only

ANCHOR CLIP NOTES:

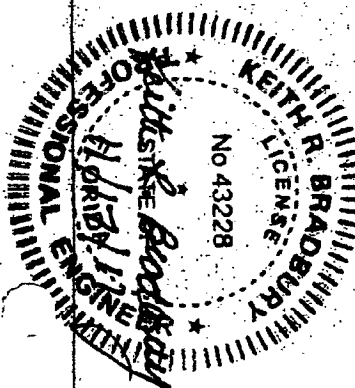
- The anchor clip are 16 Gauge, G-90 hot-dip galvanized steel rated for corrosion of coastal applications.
- 160 mph rating based on a condenser unit surface area of 10.4 sq. ft. facing wind; calculations based upon equations in ASCE 7-05 Chapter 6; and Chapter 16, Section 1609 - 2009 Supplement to 2007 FBC. Exposure C; importance category IV; Max. 500 Lb. condenser unit that withstands 160 mph wind speed.
- On condenser units near bodies of water AHJ may require condenser units to be raised above ground level. (Suggest The Metal Shop's equipment wall stand for these areas)
- The anchor clips with self-drilling screws and Tapcon screw are for ground mounted condensing units only on 2000 psi or higher psi concrete pads ONLY. Other pads or configurations must be custom engineered.
- Engineer seal affixed hereto validates design as shown only. Use of this plan by Contractor, et. al, indemnifies and saves harmless this engineer and The Metal Shop for all costs & damages, including legal fees & appellate fees resulting from deviations of this plan.



ANCHOR CLIP

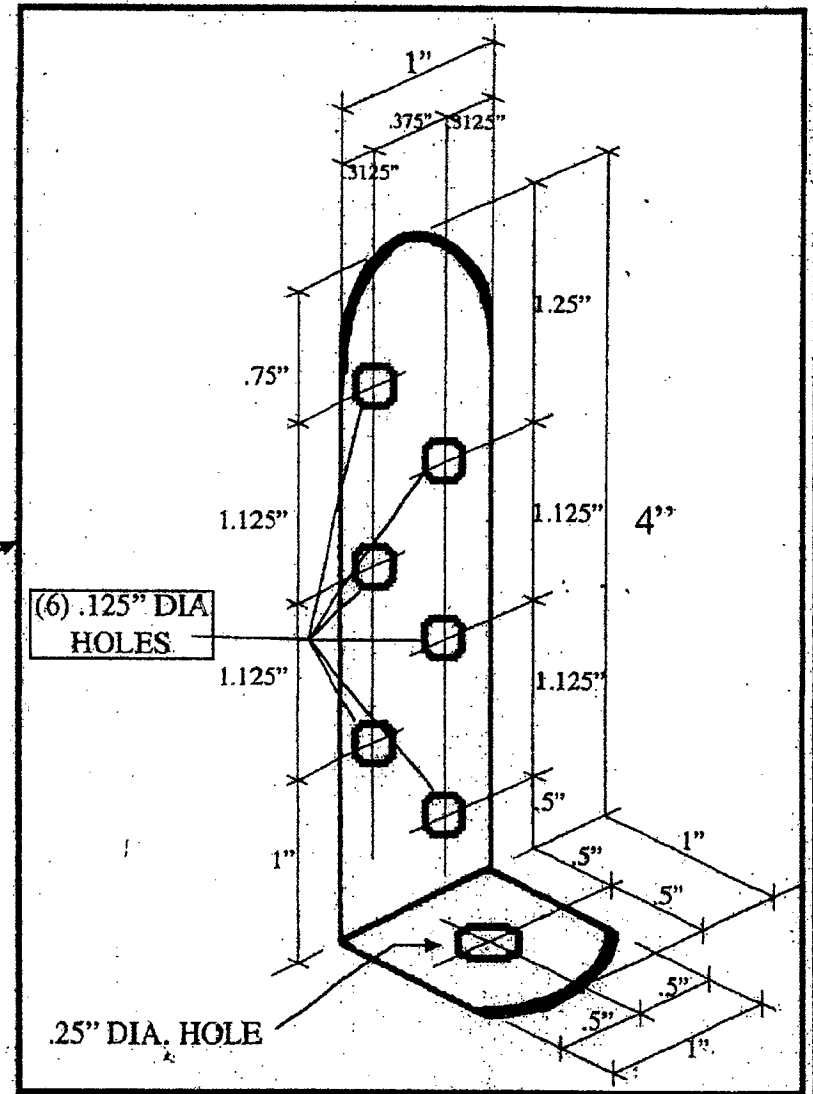
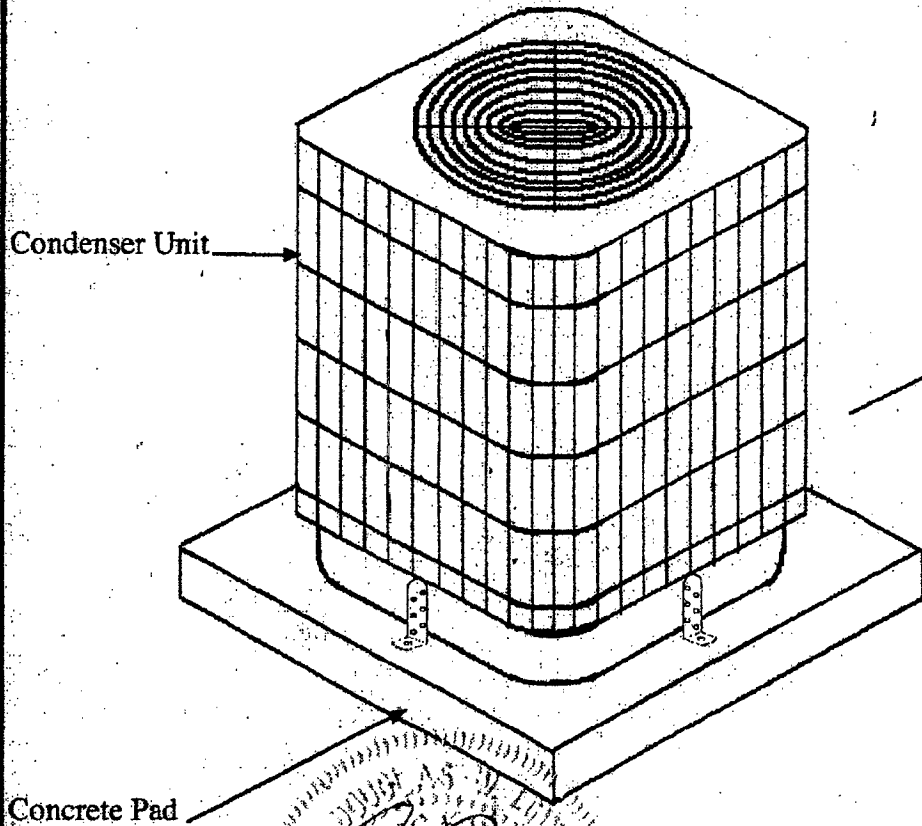
ANCHOR CLIP INSTALLATION INSTRUCTIONS:

- SUITABLE FOR GROUND MOUNTED UNITS ONLY. DISCONNECT POWER BEFORE INSTALLATION.
- Minimum of 4 clips required equally spaced around condensate unit; Minimum of 2- #14 x 3/4" self-drilling screws (per clip) with neoprene washer required to fasten 4 clips to condenser unit base. 1/4" x 1-3/4" Tapcon concrete screw required to fasten each anchor clip into concrete condenser pad (2000 psi or higher psi concrete).
- Adjust anchor clip accordingly to fit on the condenser unit and attach 2 self-drilling screws through the anchor clip and into the condensate unit, at the same time ensuring that the base of the anchor clip is still in contact with the concrete pad.
- Attach each Tapcon screw to the base of the anchor clip and into the concrete pad in accordance with Tapcon instructions.
- All hardware must be fastened prior to connecting refrigerant lines and electrical power to the condensate unit.



ENGINEER: KEITH R. BRADBURY, P. E. P. E. No. 43228 8731 BAYWOOD PK. DR. SEMINOLE, FL 33777 727-319-3947 KBRADBURY4@TAMPABAY.RR.COM		The Metal Shop 2541 W. Dunnellon Rd. Dunnellon, FL 34434 Ph: (352) 522-0006 Fax: (352) 522-0007 Web: www.themetalshop.org	
TITLE ANCHOR CLIP INSTALLATION INSTRUCTIONS- 150 MPH WIND SPEED			
SIZE B		REVISED FOR 2009 SUPPLEMENT TO 2007 FBC	
COPYRIGHT 2011 Keith R. Bradbury, P. E.		SCALE: N.T.S.	DATE: November 11, 2011
			SHEET 1 OF 1

#771 (4 pk.) / #772 (100 box) Anchor Clip



Metal thickness = 16 gauge

<p>The Metal Shop 1139 Eldridge Street Clearwater Fl. 33755</p> <p>Ph: (727) 441-2492 Fax: (727) 442-8493 Web: www.metalshop.org</p>	<p>Consulting Engineer: Douglas W. Lowe, P.E. FLA # 13355 1206 Millentum Parkway Brandon, FL. 33511</p>	<p>Revision Date: 2/14/08</p>	<p>Drawn by: K.P.R.</p> <p>Scale - Not to scale</p>	<p>Page: 1 of 1</p>
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TOWN OF SEWALL'S POINT - FLORIDA

Application For Building Permit

Owner T.A. BARNARD Present Address JENSEN Phone _____

Architect _____ Address _____

General Contractor SIMMONS Address 999 SA60 Phone 287-2058

Where Licensed MARTIN CO License No. I

Plumbing Contractor SCHMIDT Where Licensed MARTIN No. _____

Electrical Contractor EVANS Where Licensed MARTIN No. _____

Property Location LOT 17 LUCINDIA Subdivision LUCINDIA Lot No. 17

Lot Dimensions 108 X 142 Lot Area _____ Sq. Ft. _____

Purpose of Building RESIDENTIAL Type of Construction CBS

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

Outside of Walls 1916 Inside of Walls _____

Street or Road building will front on LUCINDIA NORTH

Clearances - Front 35 Back _____ Side 26 Side 20 River _____

Well Location N.W. COR GARAGE Septic Tank Location E. SIDE HOUSE

Building elevation (By Ordinance Definition) 12" +

Contract Price (Include Plumbing, Electrical, Air Conditioning) 28,000⁰⁰

<u>PERMIT FEE</u>	<u>New Home</u>	<u>Additions</u>	<u>Others</u>
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) -----	<u>20.00</u>	_____	<u>\$104.00</u>

SIGNED: - General Contractor or Owner Robert W. Simmons

Building Inspector Comments: _____

FOR TOWN RECORDS: Date Drawings submitted 9/76

Date Permit approved 9/7/70

Date Permit Fee paid 9/9/70

Date First Inspection _____

Date Final Inspection _____

Date Occupancy approved _____

234

CONSTRUCTION PERMIT ONLY

Owner Warten County Health Dept. No. 444-70
T.A. Barnard - Simmons
Address lot 17
Installed By Contractor
At Jacobs
Septic Tank Capacity Minimum Rec'd 900 Gallons
Drain Field Data 250 yd.

NOTE: Installation must be in accord with requirements of Chapter 170C-4 FAC. Sanitary Code of Florida, and satisfactory final inspection must be made before work is covered. Permit void if not used within one year from date of issue.

Date of Application _____ Issue 9/4/70
Issued By Jolene Carston
Florida State Board of Health SEPTIC TANK PERMIT
San-428 Rev. 10/1/62

Permit No. _____

Date 10/7/92

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

3270

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 Ernie Miller Present Address #17 Via Lucindia, Sewall's Pt

Phone 286-8599

Contractor H Taylor & Associates Address 302 Melton Dr, #

Phone 466-4040 Ft Pierce, FL 34982

Where licensed St Lucie Co License number 8699 State Cert License CCCC0524

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-roof (tile & fiberglass)

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

#17 Via Lucindia, Sewall's Pt

Subdivision Lucindia Lot number 17 Block number _____

Contract price \$ 10,000 Cost of permit \$ 100.00

Plans approved as submitted Plans approved as marked _____

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

Contractor G. Bruce DeWane

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 Ernie Miller

TOWN RECORD

Date submitted 10/14/92 Approved: Dale Brun 10/14/92
Building Inspector Date

Approved: R. Chardagne 10/14/92 Final Approval given: _____
Commissioner Date Date

Certificate of Occupancy issued (if applicable) _____
Date

SP1282

Permit No. _____

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



**NO CONSTRUCTION MAY BEGIN UNTIL
NOTICE OF COMMENCEMENT
965151 POSTED ON JOB SITE.**

Permit No. _____

Tax ID No. 1-38-41-007-000-00170.9

NOTICE OF COMMENCEMENT

State Of Florida

County Of St. Lucie 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 and street address, if available

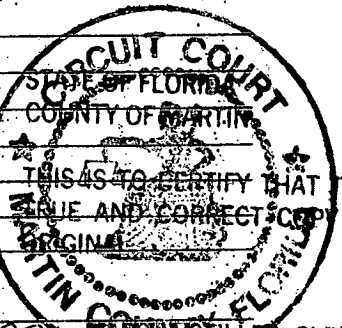
#17 Via Lucindia
wardia, Lot 17

General description of improvements Roof

Owner Emie Miller

Address #17 Via Lucindia, Swells Pt, FL 34982

Owner's interest in site of improvement Residence BY [Signature] D.C.



MARION MILLER, CLERK
DATE 10/13/92

Fee Simple Title holder (if other than owner) _____

Address _____

Contractor J.A. Taylor & Associates, Inc.

Address 302 Melton Drive, Ft. Pierce, FL 34982

Surety _____

Address _____

Amount of bond \$ _____

Lender _____

Address _____

BY _____
CLERK OF CIRCUIT COURT
12 OCT 13 PM 2:29
D.C.

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

Prepared by: J.A. Taylor & Associates, Inc.
and return to: 302 Melton Drive
Ft. Pierce, FL 34982

JOANNA G. TAYLOR
Notary Public, State of Florida
My Comm. Expires June 23, 1996
No. CC 200499

Bonded thru Troy Fain Insurance
Personally Known or Produced I.D.
Type of I.D. Produced _____

[Signature]
Owner's Agent
Sworn to and subscribed before me this 12th day of Oct 1992.

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