

14 Via Lucindia Dr North

TOWN OF SEWALL'S POINT, FLORIDA

Date 8/8/00 ~~19~~ **TREE REMOVAL PERMIT** No **0349**

APPLIED FOR BY J & E GIGANTE (Contractor or Owner)

Owner 14 VIA LUCINDIA N. (TRISTAN ENTER. - CONTR.)

Sub-division _____, Lot _____, Block _____

Kind of Trees BRAZILIAN PEPPER

No. Of Trees: REMOVE 1

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS SEE APPL. FOR LOCATION SKETCH

8/7/00 CUSP. 3
PROHIBITED SPECIES
(NO FEE) TREE DISCARD
NOTE: GUMBO LIMBO (2)
TO REMAIN.

Signed, SIGNATURE ON FILE
Applicant

Signed, [Signature]
Town Clerk BLDG OFF.

FILE TOWN COPY

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

PROJECT DESCRIPTION _____

REMARKS _____

PRINTS

TOWN OF SEWALL'S POINT

RECEIVED

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

AUG - 7 2000

8/7 field insp
8/7 appra.
8/7 street PW 0349
to be
logged

Permit # 9

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 J. B. GILBERT Address 14 Via Luccinodia No. Phone 283-7367

Contractor TRISTAN ENTER. Address _____ Phone 335-9274

Number of trees to be removed (list kinds of trees) (1) BRAZILIAN PEPPER

DISEASED & HAZARDOUS ALSO HIT BY LIGHTNING
Number of trees to be relocated within 30 days (no fee) (list kinds of trees): _____

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

Permit Fee \$ (\$25.00 - first tree plus \$10.00 - each additional tree - not to exceed \$100.00) \$15.00

(No permit fee for trees which are relocated on property or lie within a utility easement & 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 9 Plans approved, as marked _____

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

Signature of applicant [Signature] Date submitted 8/7/00

Approved by Building Inspector _____ Date _____

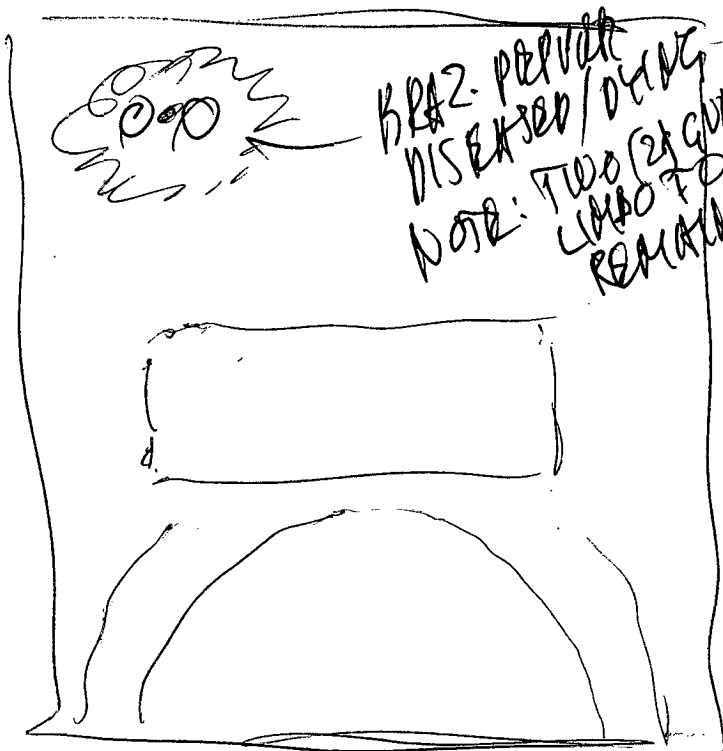
Approved by Building Commissioner [Signature] Date 8/7/00

Completed _____ Date _____ Checked by _____

FEE.

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT ~~OBTAINING A PERMIT~~. 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?



BRAZ. PERUVA
DISEASED / DEATH
NOTE: TWO (2) GUMMS
LEFT TO
REMAIN.

FILED WSP
8/2/00

17 D. VIA CUCULONIA

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8-7, 2000; Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4755	Clements (EXP. PN 462)	a. c. REINSPECTION		as early as possible
4	6 Middle Rd Jim Campbell	CANCEL 8/7 9:30		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4951	Stukel	framing	PASSED	FORM ALL TOP PLATE
1	7 Lantana Masterpiece	BUG (ELECT/ETC)	EA	PERMEATIONS (ELECT)
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
5001	BERCAW	TEMP. ELECT.	PASSED	FPL RELEASE 8/10 EA
6	11 RIVER CREST CT. RINAR DEVEL.	- REINSPECT (VERIFY WATER ON SITE)	EA	AGAIN 8/7 9:50 LO ANDRE
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4882	Woods	sheathing (ROOF)	FAILED	DRIED IN W/O INSP.
2	116 S. River Rd. Emmick	(PACIFIC) (EXISTG PTL.)	EA	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4650	EXPIRED 7/19/00 SWISS AM	meter final?	X	call 8/7 7:20 Helmut 288-64 334-770
X	4 Banyan Pk. same	CANCEL to replace meter - then renewed - final meter	X	for access CONTR. ADVISED; ADPT: 8/8 9:00
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4875	Seely	framing	PASSED	REINSPECT - GABLE END, FPL
5	37 Lofting Way Gribben	EDG'G - MAJOR BUG ONLY	(PTL)	BLK & FEND WALL (EDG. LTR) ADPT: 8/8 9:00 W. BLK'G C 8'
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4965	Danielson	rough	PASSED	
3	161 S. River Miller	plumbing (SUB PN 4968 - MASTER)	EA	

OTHER: FPL - ANDREA 223-4208 (her name Mc Greg)
287-5410

INSP - T/R PERKINS KYLE - 14 VIA LUCINDA; GIGANTE, TRISTAN BAKER.

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT, FLORIDA

Date JUNE 4 ~~2004~~ 2004 TREE REMOVAL PERMIT No 2276

APPLIED FOR BY BEELITZ/MALONE (Contractor or Owner)

Owner 10 & 14 S. VIA LUCINDIA

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE All melaleuca trees on west S

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

FEE \$ 0

Signed, _____ Applicant

Signed [Signature] 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

[Large empty rectangular box for drawing or notes]

PROJECT DESCRIPTION _____

[Lined area for project description details]

REMARKS _____

[Lined area for remarks]

J

**TOWN OF SEWALL'S POINT
APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT**

Tree Defined: Any self-supporting, woody plant which normally grows to an overall height of at least fifteen (15) feet in the vicinity of the town. Replant and landscape trees shall be considered a tree.

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. Trees with a diameter of less than one inch.

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage 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, Marberry, 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

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
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 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.

Owner DANIEL MALONE Address 14 S VIA LINDORA Phone 288 6266

Contractor _____ Address _____ Phone _____

No. of Trees: ALL TREES ON PROPERTY LINE REMOVE _____ Type: MALALEUCA

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: REMOVAL of ALL MALALEUCA TREES ON PROPERTY LINE, EAST

Signature of Applicant [Signature] Date 6/3/04

Approved by Building Inspector: [Signature] Date 6/4 Fee: -0-

Plans approved as submitted _____ Plans approved as revised/marked: _____

LOT 10

LOT 15

N 62° 37' 30" E

143.00'

4' C.L.F.?

108.00'

35.00'

FND 5/8" 1B & C
LB 6018

N 0.09'
W 0.37'

NEW DECK

25.03'

POOL

POOL DECK

EXISTING
WOOD
FENCE
TO BE
RELOCATED
TO EAST
R

60.51'

41.8'

Lot
Parcel w/
SCREEN

15.0'

NEW
WALK

1 STORY RESIDENCE

24.9'

NEW
FENCE

REMAINDER

8.5'

25.6'

60.27'

CON. ENTRY

1 STORY
GARAGE

NEW
GATE

CONC.
DRIVE

18.8'

12' L.I.F.

LOT 25

WESTERLY 35'
LOT 20

FND 5/8" 1B & C
LB 6018

N 0.12'
W 0.24'

57.8'

28.0'

23.5'

34.46'

34.48'

N 62° 37' 30" E

143.00'

15.00'

(P)(F) 331.80'

SOUTH VIA LUCINDIA
(30' R/W)

ASPHALT PAVT.

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

TOWN OF SEWALL'S POINT FLORIDA

RECEIVED
SEP 27 1982

1514
Date 9-27-82

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

This application must be accompanied by three sets of complete plans, to scale, (1/4" scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections; plumbing, electrical and air-conditioning layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house or commercial building construction.

Owner Jos. + Eliz. Gigante Present address 2919 CATES CIRCLE
Phone 331-5433 PT. ST. LUCIE, FL.
General contractor SUNDIAL CONST. Co Address 114 S. DIXIE HWY
Phone 283-1000 STUART, FL.
Where licensed FLORIDA License No. CGCA16672
Plumbing contractor MASTER PLUMBING License No. 124053
Electrical contractor MARTIN COUNTY ELEC. License No. 86
Air-conditioning contractor PERSONALIZED A/C License No. 160

Describe the building, or alteration to existing building _____

ONE STORY RESIDENTIAL

Name the street on which the building, its front building line and its front yard will face 16 VIA LUCINDIA

Subdivision LUCINDIA Lot No. 7 Area SEWALL'S POINT

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 2100

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 65,000.⁰⁰

Cost of permit \$ 397.50 Plans approved as submitted or, as marked 73,500

I understand that this permit is good for 12 months from the date of its issue and that the building for which this permit is issued must be completed within that time and in accordance with the approved plans. 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. I agree that the building site will be clean and rough-graded before a Certificate of Occupancy is sought, and, moreover, that I shall be 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 with the above requirements may result in a Building Inspector or a Town Commissioner "Red-tagging" the building project.

Contractor Jose P. Gigante

I understand that this building must be in accordance with the approved plans and that it must comply with all code requirements before a Certificate of Occupancy will be issued and the property approved for all utility services. I agree that within 90 days after the building has been approved for occupancy, the property will be landscaped so as to be compatible with its neighborhood, as required by the Town's zoning ordinance.

Owner Jose P. Gigante

Note: Speculation builders will be required to sign both of the above statements.

TOWN RECORD

Date submitted _____

Approved by Building Inspector (date) 9/28/82

Inspector's initials AS

Approved by Town Commissioner (date) 9/29/82

Commissioner's initials AM

Certificate of Occupancy issued (date) _____

approved tentatively
subject to Building
Inspectors review

SEE ATTACHMENTS

TOWN OF SEWALL'S POINT

SUBJECT: CBS Constructed Houses - Tie Beam Inspections

DATE: August 3, 1981

Starting immediately, Tie Beam inspections prior to pouring of concrete shall require that the cells of bottom blocks (at the slab level) containing vertical reinforcing rods shall be broken open to reveal the rod in place. An inspection subsequent to the pour shall provide evidence that the concrete has penetrated the cell from the top of the pour to the bottom, filling the cell and embedding the rod all the way to the bottom.

This requirement shall apply to all corner rods and rods along the perimeter of the wall placed to comply with the 16'-0" maximum wall spacing of the rods.

Contractors requesting Tie Beam inspections must comply with the above requirements.

Gilbert S. Strubell
Building Commissioner

G. S. Strubell

A permit for construction of a house will not be issued until the availability of water is demonstrated in one of the following ways:

1. A Martin County water meter hook-up is on the property with water available.
2. A well is on the property with water available.
3. Permission from a neighbor, in writing, to use water from his system while the house is being built, is obtained.

**24 Hour notice required prior
to all inspections.
Do not order concrete until
inspection has been approved.**

The Building Department will not issue
a C.O. unless the lowest living area
conforms to elevations shown on the
Flood Insurance map. Certification from
a licensed surveyor is required.

Sec. 4-22. Lintels.

Openings for windows and doors shall be given structural consideration with minimum requirements as follows:

- (1) Six (6) to nine (9) feet: Eight-inch by twelve-inch concrete beam with an additional Number 5 reinforcing bar at the bottom extended to eighteen (18) inches on each side of the opening.
- (2) Nine (9) to twelve (12) feet: Eight-inch by twelve-inch minimum concrete beam with two (2) additional Number 5 reinforcing bars on the bottom extended to eighteen (18) inches on each side of the opening.
- (3) Twelve (12) to fifteen (15) feet: Eight-inch by twelve-inch minimum concrete beam with two (2) extended to eighteen (18) inches on each side of the opening with the addition of one Number 6 truss reinforcing bar and one inch additional depth for concrete per lineal foot.
- (4) Fifteen (15) to eighteen (18) feet: Eight-by-sixteen-inch minimum concrete beam with four (4) Number 6 reinforcing bars and one Number 7 truss reinforcing bar. (Ord. No. 73, § 1, 8-11-71; Ord. No. 122, § 2, 12-10-80)

Sec. 4-23. Outlets and lights.

All outlets and lights must be grounded if installed in nonmetallic sheathed cable. (Ord. No. 73, § 1, 8-11-71)

Sec. 4-24. Foundations.

(a) Prior to calling for inspection of foundation before concrete is poured, all Number 5 reinforcing bars shall be tied under main footing reinforcing bars and all other reinforcing bars must be tied at intersections and overlaps. Minimum overlap for Number 5 reinforcing bar is eighteen (18) inches.

(b) All footings must be formed ten (10) inches below natural grade in virgin earth. If footings are not formed in virgin earth, a compaction test performed by a qualified professional engineer demonstrating a minimum compressive strength of two thousand five hundred (2,500) pounds per square foot must be supplied to the building department.

(c) Single-story building footings shall be ten (10) inches deep by eighteen (18) inches wide with two (2) Number 5 bars continuous throughout the footing.

(d) Two-story building footings shall be ten (10) inches deep by twenty (20) inches wide with three (3) Number 5 bars continuous throughout the footing.

(e) A monolithic slab footing must be formed with sixteen-inch form wood. A forty-five (45) degree cut shall be made between footer and slab.

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date April 6, 1983

This is to request that a Certificate of Approval for Occupancy be issued to Mr. Gigante
For property built under Permit No. 1514 Dated 9/29/82 when completed in
conformance with the Approved Plans.

Signed _____

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings	10/1/82	
Rough plumbing	10/1/82 & 11/3/82	
Slab	10/4/82	
Perimeter beam	—	
Close-in, roof and rough electric	11/3/82	
Final Plumbing	4/6/82	
Final Electric	4/6/82	
Insulation	11/10/82	
Final Inspection for Issuance of Certificate for Occupancy.		

Approved by Building Inspector J. Longo date 4/6/83

Approved by Building Commissioner J.C. Strubbe date 4/6/83

Utilities notified 4/6/83 date _____

Original Copy sent to _____

(Keep carbon copy for Town files)

Certificate of Insurance



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

NAME AND ADDRESS OF AGENCY Deakins-Carroll Insurance Agency, Inc. P.O. Drawer A-G Port Salerno, FL 33492	COMPANIES AFFORING COVERAGES	
	COMPANY LETTER	A South Carolina
	COMPANY LETTER	B
	COMPANY LETTER	C
	COMPANY LETTER	D
NAME AND ADDRESS OF INSURED Sundial Construction Co., A Corporation and Robert F. Ewing, Jr. 2482 Britt Rd Stuart, FL 33494	COMPANY LETTER	E

This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time. 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.

COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EXPIRATION DATE	Limits of Liability in Thousands (000)		
					EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMPREHENSIVE FORM <input checked="" type="checkbox"/> PREMISES—OPERATIONS <input type="checkbox"/> EXPLOSION AND COLLAPSE HAZARD <input type="checkbox"/> UNDERGROUND HAZARD <input checked="" type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS HAZARD <input type="checkbox"/> CONTRACTUAL INSURANCE <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input checked="" type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> PERSONAL INJURY	ELA8972967	8/15/83	BODILY INJURY	\$ 300	\$ 300
				PROPERTY DAMAGE	\$ 50	\$ 50
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
				PERSONAL INJURY	\$	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED			BODILY INJURY (EACH PERSON)	\$	\$
				BODILY INJURY (EACH ACCIDENT)	\$	\$
				PROPERTY DAMAGE	\$	\$
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM			BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
	WORKERS' COMPENSATION and EMPLOYERS' LIABILITY			STATUTORY	\$	(EACH ACCIDENT)
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

State of Florida
General Contractor

Cancellation: Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 30 days written notice to the below named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

NAME AND ADDRESS OF CERTIFICATE HOLDER

Port Sewall Place

DATE ISSUED: **9/24/82**

C. J. Deakins, Jr.
AUTHORIZED REPRESENTATIVE

STATE OF FLORIDA Department of Professional Regulation

**CONSTRUCTION INDUSTRY
LICENSING BOARD**

EWING, ROBERT
SUNOIAL CNSTR CO
CERTIFIED GENERAL CONTRACTOR
HAS PAID THE FEE REQUIRED BY CHAPTER 489
FOR THE YEAR EXPIRING **JUNE 30, 1983**

Robert Ewing
SIGNATURE

Bob Graham
GOVERNOR

PLEASE READ IMPORTANT
INFORMATION ON REVERSE

James Kelly Littlepage
SECRETARY OF PROFESSIONAL
REGULATION

WALLET CARD - FOLD HERE

CONSTRUCTION INDUSTRY LICENSING BOARD
POST OFFICE BOX 2
JACKSONVILLE, FL 32201

AUDIT CONTROL NO.	FILE NO.	BATCH NO.	FEE AMOUNT
267408	CECA16672	0970	\$150.00



**FLORIDA MODEL ENERGY EFFICIENCY CODE
FOR BUILDING CONSTRUCTION**

FORM 902

BOB GRAHAM
GOVERNOR

SECTION 9/9H POINTS METHOD
DEPARTMENT OF COMMUNITY AFFAIRS

CLIMATE ZONES
SOUTH 789

PROJECT NAME AND ADDRESS	RESIDENCE	JURISDICTION	SEWALL'S POINT
	14 Via Lucerna ZIP 33427	ZONE	8
BUILDER	SUNSHINE CONSTRUCTION Co	PERMIT NO.	1514
OWNER	JOS + BLIZ GIGANTE	JURISDICTION NO.	93-300

STATISTICS

<input type="checkbox"/> RENOVATION <input type="checkbox"/> ADDITION <input type="checkbox"/> MULTI-FAMILY	IF MULTI-FAMILY, NO. OF UNITS COVERED BY THIS CALCULATION:	<input type="text"/> <input type="text"/> <input type="text"/>	GLASS AREA AND TYPE	
	(SEPARATE CALCULATIONS REQUIRED FOR EACH WORST CASE UNIT TYPE.) SEC. H901.1		CLEAR	TINT OR FILM
			0417 SGL <input checked="" type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> SGL <input type="checkbox"/>
		<input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/>	

GROSS WALL AREA AND INSULATION				CONDITIONED FLOOR AREA	CEILING INSULATION	
CBS	R=	FRAME	R=		UNDER ATTIC	SGL. ASSEMBLY
<input type="text"/>	<input type="text"/>	02234	11	02100	R= 19.0	R= <input type="text"/>

COOLING SYSTEM	PRIMARY HEATING SYSTEM	PRIMARY HOT WATER SYSTEM
<input checked="" type="checkbox"/> CENTRAL <input type="checkbox"/> NONE <input type="checkbox"/> UNITARY EER-SEER = 10.0	<input checked="" type="checkbox"/> STRIP <input type="checkbox"/> GAS <input type="checkbox"/> NONE <input type="checkbox"/> OIL <input type="checkbox"/> SOLAR <input type="checkbox"/> HEAT PUMP: COP = <input type="text"/> . <input type="text"/> <input type="checkbox"/> OTHER: _____	<input checked="" type="checkbox"/> RESISTANCE <input type="checkbox"/> SOLAR <input type="checkbox"/> HEAT RECOVERY <input type="checkbox"/> GAS <input type="checkbox"/> DED. HEAT PUMP: COP = <input type="text"/> . <input type="text"/> <input type="checkbox"/> OTHER: _____

MAX. E.P.I. ALLOWED (from 9A):	085.0	CALCULATED E.P.I.:	073.3
CHECK IF COMPLYING BY "ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH" (SEC. 903.11)* <input type="checkbox"/>			
CERTIFIED BY:	<i>Jos + Bliz Gigante</i>	DATE	10/4/82
	(owner/agent)	FORM COMPLETION	DATE
		CHECKED BY:	(building official)
THIS DATA IS TO BE SENT TO DCA BY THE LOCAL BUILDING DEPARTMENT.			



FLORIDA MODEL ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

FORM 902
BOB GRAHAM
GOVERNOR

SECTION 9/9H POINTS METHOD
DEPARTMENT OF COMMUNITY AFFAIRS

CLIMATE ZONES
SOUTH 789

PROJECT NAME AND ADDRESS RESIDENCE 14 Via Lucinda ZIP 93457	JURISDICTION SEWALL'S POINT ZONE 8
BUILDER SURDIAL CONSTRUCTION Co.	PERMIT NO.
OWNER Jos. + Eliz. GIGANTE	JURISDICTION NO. 53-300

STATISTICS

<input type="checkbox"/> RENOVATION <input type="checkbox"/> ADDITION <input type="checkbox"/> MULTI-FAMILY	IF MULTI-FAMILY, NO. OF UNITS COVERED BY THIS CALCULATION: <input type="text"/> <input type="text"/> <input type="text"/> (SEPARATE CALCULATIONS REQUIRED FOR EACH WORST CASE UNIT TYPE.) SEC. H901.1	GLASS AREA AND TYPE <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 50%;">CLEAR</th> <th style="width: 50%;">TINT OR FILM</th> </tr> <tr> <td><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL <input checked="" type="checkbox"/></td> <td><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL <input type="checkbox"/></td> </tr> <tr> <td><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/></td> <td><input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/></td> </tr> </table>	CLEAR	TINT OR FILM	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL <input checked="" type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/>
CLEAR	TINT OR FILM							
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL <input checked="" type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> SGL <input type="checkbox"/>							
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/>	<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> DBL <input type="checkbox"/>							

GROSS WALL AREA AND INSULATION				CONDITIONED FLOOR AREA	CEILING INSULATION	
CBS	R=	FRAME	R=		UNDER ATTIC	SGL. ASSEMBLY
<input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>	<input type="text"/>	02234	11	02200	R= 19.0	R= <input type="text"/> <input type="text"/>

COOLING SYSTEM	PRIMARY HEATING SYSTEM	PRIMARY HOT WATER SYSTEM
<input checked="" type="checkbox"/> CENTRAL <input type="checkbox"/> NONE <input type="checkbox"/> UNITARY EER-SEER = <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> 10.0	<input checked="" type="checkbox"/> STRIP <input type="checkbox"/> GAS <input type="checkbox"/> NONE <input type="checkbox"/> OIL <input type="checkbox"/> SOLAR <input type="checkbox"/> HEAT PUMP: COP = <input type="text"/> <input type="text"/> <input type="checkbox"/> OTHER: _____	<input checked="" type="checkbox"/> RESISTANCE <input type="checkbox"/> SOLAR <input type="checkbox"/> HEAT RECOVERY <input type="checkbox"/> GAS <input type="checkbox"/> DED. HEAT PUMP: COP = <input type="text"/> <input type="text"/> <input type="checkbox"/> OTHER: _____

MAX. E.P.I. ALLOWED (from 9A): 085.0	CALCULATED E.P.I.: 073.3
CHECK IF COMPLYING BY "ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH" (SEC. 903.11)* <input type="checkbox"/>	
CERTIFIED BY: <i>Jos. Gigante</i> (owner/agent) DATE: 10/4/82	FORM COMPLETION CHECKED BY: _____ (building official) DATE: _____
THIS DATA IS TO BE SENT TO DCA BY THE LOCAL BUILDING DEPARTMENT.	

9A	MAX. E.P.I. ALLOWED (CALCULATED E.P.I. MUST NOT EXCEED VALUE SHOWN BELOW)											
CONDITIONED FLOOR AREA	0-900	901-1100	1101-1300	1301-1500	1501-1700	1701-1900	1901-2100	2101-2300	2301-ABOVE			
BASE E P I	120	115	110	105	100	95	90	85	80			
DEDUCTIONS	A/C EFFICIENCY LESS THAN 8.0 EER/SEER (7.5 HEAT PUMP) (as of October 1, 1982)										-10.0	—
	IF MULTI-FAMILY: COMMON WALLS (maximum of 5 points)										- 2.5	—
	IF MULTI-FAMILY: COMMON CEILING and/or FLOOR (maximum of 12 points)										- 6.0	—
	TOTAL DEDUCTIONS											0
COMPUTE MAX. E.P.I. ALLOWED	BASE E.P.I.			DEDUCTIONS			MAX. E.P.I. ALLOWED					
	112.850			- 0.0			= 112.850					

*RESIDENCES WHICH COMPLY WITH THIS CODE BY THE "ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH" (SEC. 903.11) ARE REQUIRED TO MEET OR EXCEED ALL MINIMUM PRESCRIPTIVE LEVELS INDICATED BY SHADED BLOCKS ON THIS FORM, AND ALL OTHER APPLICABLE PRESCRIPTIVE REQUIREMENTS LISTED IN TABLE 9B. THE E.P.I. FOR A HOUSE COMPLYING UNDER THIS METHOD IS NOT CALCULATED BUT WILL BE THE MAXIMUM E.P.I. ALLOWED FOR THAT HOUSE SIZE AS SHOWN ON TABLE 9A. THE STATISTICS SECTION ABOVE SHALL BE COMPLETED AND SUBMITTED TO THE LOCAL BUILDING DEPARTMENT.

9B PRESCRIPTIVE MEASURES		(CHECKLIST)			
INFILTRATION: windows/doors	903.1	<input checked="" type="checkbox"/>	HVAC DUCT CONSTRUCTION	903.5	<input checked="" type="checkbox"/>
WATER HEATER - ASHRAE LABEL	903.2	<input checked="" type="checkbox"/>	PIPING INSULATION	903.6	<input checked="" type="checkbox"/>
SWIMMING POOLS	903.3	<input type="checkbox"/>	HVAC CONTROLS	903.7	<input checked="" type="checkbox"/>
SHOWER FLOW RESTRICTORS	903.4	<input checked="" type="checkbox"/>	HVAC SYSTEM EFFICIENCY SECTION	903.8	<input checked="" type="checkbox"/>
			CEILING INSULATION	903.10	<input checked="" type="checkbox"/>

RESIDENTIAL CALCULATION

FORM 902

CLIMATE ZONES 7/8/9

COMPONENT			WINTER			GROSS WINTER POINTS	SUMMER			GROSS SUMMER POINTS	
			AREA	x	WPM		=	AREA	x		SPM
WALLS	CONCRETE	R 2.7 - 3.9									
		R 4-5.9									
		R 6 & UP									
	FRAME OR BRICK VENEER	R 11 - 18.9	1726		2.5		4315	1726		13.9	23991.4
		R 19-25.9			1.5					8.6	
		R 26 & UP			1.1					6.5	
	COMMON			2.7					3.8		
DOORS	WOOD OR METAL		91		86.5		7871.5	91		55.4	5041.4
	INSULATED				84.0					22.2	
	STORM DOOR				44.6					44.3	
	COMMON				21.6					6.9	
CEILING	UNDER ATTIC	R 19 - 21.9	2220		1.9		4218	2220		8.4	18648
		R 22-29.9			1.7					7.6	
		R 30 & UP			1.5					5.5	
	SINGLE ASSEMBLY NO ATTIC	R 6-7.9			5.4					22.6	
		R 8-9.9			4.0					17.3	
		R 10-11.9			3.5					14.6	
		R 12-18.9			2.5					10.6	
COMMON			1.9					8.4			
COMMON			1.7					2.0			
FLOOR OVER UNCONDITIONED SPACE	WOOD	R 0-6.9			5.8					6.6	
		R 7-10.9			2.4					2.9	
		R 11 - 18.9			2.1					2.3	
		R 19 & UP			1.4					1.5	
	CONCRETE	R 0-2.9			6.8					8.2	
		R 3-5.9			4.3					5.7	
		R 6-10.9			3.4					3.6	
		R 11 - 18.9			2.3					2.9	
		R 19 & UP			1.5					1.9	
	COMMON			1.7					2.0		
SLAB ON GRADE	EDGE INSULATION PERIMETER		233		28.3		6593.9				
	PERIMETER	R 0 - 2.9			20.4						
		R 3-5.9			12.4						
		R 6 & UP									

↓ 2 ↓

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OR	AREA	SGL	DBL	WOF 9F	GWP	OR	AREA	SINGLE		DOUBLE		SOF 9F	GSP
								CLR	TIN	CLR	TIN		
N	85 ✓	55.4	38.5	1.0	4709	N	85	204	176	163	139	1.0	17,340
NE		55.4	38.5			NE		309	264	258	218		
E	46 ✓	55.4	38.5	186	2191.6	E	46	425	360	362	304	.95	18,572.5
SE		55.4	38.5			SE		418	354	355	298		
S	117 ✓	55.4	38.5	186	5574.3	S	117	346	294	287	242	.92	37,243.4
SW		55.4	38.5			SW		418	354	355	298		
W	29 ✓	55.4	38.5	1.0	1606.6	W	29	425	360	362	304	.95	11,708.7
NW		55.4	38.5			NW		309	264	258	218		
H		22.6	6.8			H		720	605	627	524		
N	90	55.4		1.0	4986	N	90	204				.97	17,809.2
E	40 ✓	55.4		1.0	2216	E	40	425				.62	10,540
W	10 ✓	55.4		1.0	554	W	10	425				.62	2635

GLASS AREA MUST NOT EXCEED: SGL/CLR 15% OF FLOOR AREA, SGL/TINT 17% OF FLOOR AREA, DBL/CLR 18% OF FLOOR AREA, DBL/TINT 20% OF FLOOR AREA.

H = HORIZONTAL GLASS (SKYLIGHTS). FOR SC LESS THAN 0.83 SEE SEC. 902.2d

TOTAL GROSS WINTER POINTS	44,835.9	TOTAL GROSS SUMMER POINTS	163,529.6
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DUCT MULT	R = 3.5	44,835.9	1.15	51,561.3	DUCT IN COND SPACE		1.00		
	R = 5.0								
	R = 6.7								
	DUCT IN COND SPACE								

HSM FROM 9G	51,561.3 × 1.0	51,561.3	CSM FROM 9H	163,529.6 × .65	122,238.4
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DIVIDE BY FLOOR AREA	51,561.3 ÷ 2200	23.2 WINTER POINTS	DIVIDE BY FLOOR AREA	122,238.4 ÷ 2200	55.1 SUMMER POINTS
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CALCULATE E.P.I.					
WINTER POINTS	SUMMER POINTS	HOT WTR PTS	CREDIT POINTS	PENALTY POINTS	E.P.I.
23.2	+ 55.1	- 0 (9I)	- 8 (9C) + (9D)	+ 3 (9E)	= 73.3
FEWER TOTAL POINTS ARE ENCOURAGED FOR MAXIMUM ENERGY SAVINGS					

9C	DESIGN CREDIT POINTS (CP)
CEILING FAN IN COND SPACE (max 5 CP)	1 5
MULTIZONE A/C SEPARATED BY DOOR	5 -
CROSS VENTILATION (1 CP per room)	1 3
WHOLE HOUSE FAN (min.1.5 cfm/s.f.)	5 -
WOOD STOVE	2 -
FIREPLACE with outside combustion air	2 -
9C TOTAL (not to exceed 12 points)	8

9D	HEATING SYSTEM CREDIT POINTS
NATURAL GAS/PROPANE HEATING	8.0
OIL HEATING	6.4

9E	DESIGN PENALTY POINTS
WASHER AND DRYER IN COND SPACE	3
TOTAL GLASS OPENS LESS THAN 40%	5
FIREPLACE W/ INSIDE COMBUSTION AIR	5

9F WINTER OVERHANG FACTOR (WOF)

FEET	N	NE	E	SE	S	SW	W	NW
0-0.9	1.00	0.99	0.85	0.75	0.83	0.98	1.00	1.00
1-1.9	1.00	0.99	0.85	0.76	0.84	0.98	1.00	1.00
2-2.9	1.00	0.99	0.86	0.77	0.86	0.99	1.00	1.00
3-3.9	1.00	0.99	0.87	0.80	0.87	0.99	1.00	1.00
4-4.9	1.00	0.99	0.89	0.83	0.90	0.99	1.00	1.00
5-5.9	1.00	0.99	0.91	0.86	0.92	1.00	1.00	1.00
6-6.9	1.00	0.99	0.92	0.90	0.94	1.00	1.00	1.00
7-7.9	1.00	1.00	0.94	0.92	0.96	1.00	1.00	1.00
8-8.9	1.00	1.00	0.96	0.95	0.97	1.00	1.00	1.00
9-9.9	1.00	1.00	0.97	0.97	0.98	1.00	1.00	1.00
10-10.9	1.00	1.00	0.98	0.98	0.99	1.00	1.00	1.00
11-11.9	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
12 UP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00

9F SUMMER OVERHANG FACTOR (SOF)

FEET	N	NE	E	SE	S	SW	W	NW
0-0.9	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1-1.9	1.00	1.00	0.99	0.99	0.98	0.99	0.99	1.00
2-2.9	1.00	0.98	0.95	0.93	0.92	0.93	0.95	0.98
3-3.9	1.00	0.95	0.89	0.87	0.86	0.87	0.89	0.95
4-4.9	1.00	0.91	0.84	0.81	0.80	0.81	0.84	0.91
5-5.9	0.99	0.88	0.80	0.76	0.76	0.76	0.80	0.88
6-6.9	0.99	0.85	0.76	0.72	0.72	0.72	0.76	0.85
7-7.9	0.99	0.83	0.72	0.68	0.70	0.68	0.72	0.83
8-8.9	0.98	0.81	0.69	0.66	0.68	0.66	0.69	0.81
9-9.9	0.98	0.79	0.67	0.64	0.66	0.64	0.67	0.79
10-10.9	0.98	0.78	0.65	0.62	0.65	0.62	0.65	0.78
11-11.9	0.97	0.76	0.63	0.61	0.65	0.61	0.63	0.76
12 UP	0.97	0.76	0.62	0.59	0.64	0.59	0.62	0.76

9G HEATING SYSTEM MULTIPLIER (HSM)

HEAT PUMP	COP	2.2-2.3	2.4-2.5	2.6-2.7	2.8-2.9	3.0-3.1	3.2-3.3	3.4 & UP
	HSM	0.45	0.42	0.38	0.36	0.33	0.31	0.29
SOLAR HEATING SYSTEM	(BACKUP SYSTEM FRACTION) x (BACKUP SYSTEM HSM)							
ELECTRIC STRIP HEAT	1.00							
NATURAL GAS / PROPANE	1.0 (SEE TABLE 9D FOR CREDITS)							
OIL	1.0 (SEE TABLE 9D FOR CREDITS)							

9H COOLING SYSTEM MULTIPLIER (CSM)

ELEC.	EER/SEER	6.8-6.9	7.0-7.4	7.5-7.9	8.0-8.4*	8.5-8.9	9.0-9.4	9.5-9.9	10.0-10.4	10.5-10.9	11.0-11.9	12.0-UP			
	CSM	1.00	0.93	0.87	0.81	0.76	0.72	0.68	0.65	0.62	0.59	0.54			
GAS	COP	0.40-0.44		0.45-0.49		0.50-0.54		0.55-0.59		0.60-0.64		0.65-0.69		0.70 & UP	
	CSM	1.50		1.25		1.20		1.09		1.00		0.92		0.89	

*ALTERNATE PRESCRIPTIVE COMPLIANCE APPROACH MINIMUM AIR CONDITIONER EFFICIENCY LEVEL 8.0 SEER/EER FOR STRAIGHT COOL OR 7.5 FOR HEAT PUMPS.

NOTE: EER = COOLING MODE COP x 3.413 = ARI RATED COOLING OUTPUT IN BTUH ÷ TOTAL WATTS CONSUMED

9I HOT WATER CREDIT POINTS (HWCP)

ELECTRIC RESISTANCE WATER HEATER													0	
GAS WATER HEATER													10	
INSTANTANEOUS WATER HEATER	ELECTRIC BACKUP													4.5
	GAS BACKUP													12.6
HRU (A/C) WATER HEATER	ELECTRIC BACKUP													8.9
	GAS BACKUP													15.2
HRU (HP) WATER HEATER	ELECTRIC BACKUP													9.7
	GAS BACKUP													15.4
HEAT PUMP WATER HEATER (DEDICATED HEAT PUMP)	COP		1.60 - 1.89		1.90 - 2.19		2.20 - 2.49		2.50 - 2.79		2.80 - 3.00			
	CREDIT POINTS		9.0		11.4		13.1		14.4		15.4			
SOLAR HOT WATER	OVERALL SOLAR FRACTION*		0.1	0.2	0.3	0.4	0.5	0.6	0.7	0.8	0.9	1.0		
	CREDIT POINTS	ELECTRIC BACKUP		2.4	4.8	7.2	9.6	12.0	14.4	16.8	19.2	21.6	24.0	
		GAS BACKUP		11.4	12.8	14.2	15.6	17.0	18.8	19.8	21.2	22.6	24.0	

*PERCENT OF ANNUAL HOT WATER PROVIDED BY SOLAR SYSTEM ÷ 100 = OVERALL SOLAR FRACTION

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 02/18/00

BUILDING PERMIT NO. 4838

Building to be erected for JOSEPH GIGANTE

Type of Permit RE ROOF

Applied for by JIM'S ROOFING

(Contractor) Building Fee _____

Subdivision _____ Lot _____ Block _____

Radon Fee _____

Address 14 VIA LUCINDIA NORTH

Impact Fee _____

Type of structure S.F.R.

A/C Fee _____

Electrical Fee _____

Parcel Control Number:
1-38-41-007-000-00070-0000

Plumbing Fee _____

Amount Paid \$120.00 Check # 8307 Cash _____

Roofing Fee \$120.00

Total Construction Cost \$ 7,200.00

TOTAL Fees \$120.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector OFFICIAL

RE-ROOFING PERMIT

INSPECTIONS

DRY IN
PROGRESS

DATE _____
DATE _____

PROGRESS
FINAL

DATE _____
DATE 3/3/00

24 HOURS NOTICE REQUIRED FOR INSPECTIONS.

CALL 287-2455

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

MONDAY THROUGH SATURDAY

- New Construction
- Remodel
- Addition
- Demolition

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

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-03-00, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4803	101 HENRY SEWALL WAY "FOGUA"	SLABS	Passed BG.	Todd 954-444-4444 954-444-6126 Mobil.
		ED - Check		FOR SURVEY.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4813	FOLLWEILER 11 N.E. Lofting way	Ground Ruff Plumbing	Passed BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4838	Sigante 14 N. Via Lucindie	final-roof	Passed BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/25/00, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4673	FOGUA 110 HENRY SEWALL WAY	FRAMING TRADES	Passed Bg.	LATE MORNING IF POSSIBLE
4602	FOGUA 106 HENRY SEWALL WAY	DRYWALL SCREEN	Passed Bg.	" "
4723	KOCH 71 NRV RD QUAIL RUN.	TIE BEAM	Passed Bg.	Upper Beam
4838	Gigante 14 N. Via Lucindia	tintag	Passed Bg.	
4771	ENGINEERED HOMES 3 PALAMA WAY	TIE BEAM	Reject Bg-	Need 1 1/2" concrete over steel.
4808	Hammock 25 RIO VISTA	sheathing	---	11:AM Duplicate SEE PAGE 1
4820	Frareccio 26 E.H.H.	metal. tintag	Passed Bg.	
4662	Foglia 106 # Sewall Way	tintag	Passed Bg.	NAIL wide metal 4" straps.

OTHER: _____

INSPECTOR (Name/Signature): REDACTED

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/23/00, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4839	Schwartz	after the fact	Partial	Visual Inspection
①	109 S. Sewall's Pt Bill 285-1094 Rd	Rough end Elec + PIB	B.G.	Elect + PIB Rough. Almost Complete
4821	Ciconia	wall	Passed	10:00 AM if possible
⑥	126 N.S. Pt. Rd	Column Steel	B.G.	2-Columns by Rd. Steel up
4741	4741 Sinton	30 day Temp	Consultation	afternoon if possible
⑧	33 N River Rd (enter 1001AUCIE)	elect.*	B.G.	Visual Inspect. House Almost complete. Left Form with owner
4794	Birdsall	final Siding	Passed	
④	2 NE Palm Ct.		B.G.	
4805*	FOGUA	UNDER-ELECT.	Passed	*MASTER P.N. 4803
②	101 HENRY SEAWAY	ROUGH PLUMBING	B.G.	
4838	Gigante	sheathing	Passed	
③	14 N. Lucinda		B.G.	
4759	Dayton	trimming	Passed	
⑤	14 Palm Court		B.G.	

OTHER: 16 S. SEWALL'S POINT RD. (FADEN): A/C PLATFORM RELOCATION COMPLIANCE? (4)
 CONTR. TO CALL 110

INSPECTOR (Name/Signature): _____

~~2000-1998-1999~~

Town of Sewall's Point
Building Department - Inspection Log
Mon, 2-21-00

PAGE 1 of 1

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4702	Perry	sheathing	Passed	Complete
2	18 N. Ridgeway O/B		BG	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4802	Carrell	tin tag & metal sheathing	Passed	10:00 AM
3	17 S. Ridgeway PACIFIC 263-0116		BG	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4838	J. Giacorte	sheathing	Partial	Wants at 1 PM
1	14 N Via Lucinda JIM'S RFG			Will call in for Wed
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4527	SEBASTY	PATIO SLABS	Passed	1st Fl. slab
7	37 NE LOFTING WAY GREEN-260-2375		BG	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4759	Dayton	sheathing	Passed	
5	14 Palm Court PACIFIC		BG	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4820	Fracciolo	sheathing	Partial	
4	26 E. Hi. Pt. PACIFIC		BG	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4659	Conway	tin tag & metal	Passed	
6	17 Lofting PACIFIC		BG	

OTHER: 1. 76 S. SEWALL'S POINT RD (KAMBIT) - DELIVER EXTRA COPIES OF SURVEY
(NOT REQUIRED IN PERMANENT TOWN FILE)

INSPECTOR: _____

DATE: _____



BUILDING CODE COMPLIANCE OFFICE
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1603
MIAMI, FLORIDA 33130-1563

(305) 375-2901
FAX (305) 375-2908

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Owens-Corning
One Owens Corning Parkway
Toledo, OH 43659

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

Your application for Product Approval of:

Owens Corning Oakridge Shadow AR Asphalt Shingles

under Chapter 8 of the Metropolitan Dade County Code governing the use of Alternate Materials and types of Construction, and completely described in the plans, specifications and calculations as submitted by:

Underwriters Laboratories, Inc. and Center for Applied Engineering, Inc.

Has been recommended for acceptance by the Building Code Compliance Department to be used in Dade County, Florida under the specific conditions set forth on page 2 through 19 and the standard conditions set forth on page 20.

The approval shall not be valid after the expiration date stated below. The Building Code Compliance Office reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, the Building Code Compliance Office may revoke, modify or suspend the use of such product or material immediately. The applicant shall re-evaluate this product or material should any amendments to the South Florida Building Code be enacted affecting this product or material. The Building Code Compliance Office reserves the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the South Florida Building Code. The expense of such testing will be incurred by the manufacturer.

Acceptance No.: 97-0226.01

Renews No.: 94-0105.01

Expires: 05/02/2000

Raul Rodriguez
Product Control Supervisor

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

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

2/15/00 TOWN OF SEWALLS POINT
REVIEW:
BLCG OFFICIAL

Charles Danger, P.E.
Director
Building Code Compliance Dept.
Metropolitan Dade County

Approved: 05/02/97

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PN



**PRODUCT CONTROL NOTICE OF ACCEPTANCE
ROOFING SYSTEM APPROVAL**

Applicant:

Owens-Corning
One Owens Corning Parkway
Toledo, Ohio 43659

Product Control No.: 97-0226.01

Approval Date: May 02, 1997

Expiration Date: May 02, 2000

Category:

Prepared Roofing

Sub-Category:

Shingles

Type:

Asphalt

Sub-Type:

Laminated

System Description


The sloped roof system described above has been accepted by the Metro-Dade Office of Code Compliance as an approved shingle system in compliance with the requirements of Chapter 34 of the South Florida Building Code. This Product Control Approval is issued to the following shingle 'Profile':

Oakridge Shadow AR - Laminate

This system is approved for use under the South Florida Building Code when the listed components are assembled in accordance with the application instructions described below. No components may be substituted.


Contact:

Darrel P. Higgs
One Owens Corning Parkway
Toledo, OH 43659
Phone: (419) 248-7060
Fax: (419) 248-5303


Frank Zuloaga, Roofing Plans Examiner
Product Control Division

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT


<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Oakridge Shadow AR	12 ¹ / ₃ " x 39 ¹ / ₂ "	PA 110	Fiberglas reinforced medium weight asphalt roof shingle, with a Laminate profile.



Frank Zuloaga, Roofing Plans Examiner
Product Control Division

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Edge metal	.021" min., 26 ga., 3" x 3"	ASTM A 525	Corrosion resistant edge metal for system termination	generic
Tin Caps	Min. .010" x 1 5/8", 32 ga.		Corrosion resistant tin caps	generic
Flashing Cement	Various	ASTM D 4586	Cut back, asphalt modified adhesive for flashing attachment.	generic
Shingle Nails	Min. 12 ga. x 1 1/4"	PA 110	Corrosion resistant, deformed, roofing nails for Shingle application	generic
Roofing Nails	Min 12ga. x 1 1/4"	PA 110	Corrosion resistant, deformed, annular ring shank roofing nails for metal and accessory attachment	generic
Valley Metal	Min. 26 ga., 16" wide	ASTM A 525	Galvanized metal valley flashing.	generic
Mineral Surface Roll Roofing	Various	ASTM D 249	Asphalt impregnated, mineral surfaced organic roll roofing.	generic
Smooth Surfaced Asphalt Rolled Roofing		ASTM D 224	Smooth surfaced organic rolled roofing	generic



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Roofing Fabric	Various	ASTM D1668	Organic or inorganic woven fabric to reinforce flashing cement.	generic
# 30 Felt	Various	ASTM D 226 type II	Asphalt impregnated organic felt for use as a shingle underlayment.	generic
#15 Felt	Various	ASTM D 226, type I	Asphalt impregnated organic felt for use as a shingle underlayment.	generic



TEST REPORTS

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	PA 100	Uplift and wind driven rain resistance.	03/07/94
Underwriters Laboratories, Inc.	PA 107	Wind uplift resistance Modified ASTM D 3161	04/04/94
Underwriters Laboratories, Inc.	ASTM 3462	Material properties ASTM 3462	04/18/94

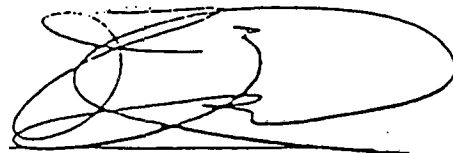
The testing listed above, submitted with this application confirms the shingle assembly complies with all test requirements set forth under Chapter 34 of the South Florida Building Code. The shingle system has been tested in compliance with Dade County Protocols PA 100 and 107. The shingle component physical properties have been tested in compliance with ASTM D 3462. All accessory components listed within this application are in compliance with South Florida Building Code Requirements.

System Trade Names:

Oakridge Shadow AR - Laminate

Maximum Fire Classification

<u>Deck Type</u>	<u>Classification</u>
Min. ¹⁹ / ₃₂ " Plywood, or Wood Plank	Class A



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SYSTEM APPLICATION
Slope Range: 2":12" to <4":12"


Underlayment: Underlayment shall be applied in accordance with the South Florida Building Code, Section 3403.5(b)(6): All underlayments applied at a roof pitch less than 4":12" shall be applied in a double layer of ASTM D 226, type I with a 19" overlap or by the application of a single layer of ASTM D 226, type II organic felt or an ASTM D 2626 coated base sheet as a base ply with a 4" overlap. Head laps shall be 6". Underlayment shall be installed with minimum 12 ga. x 1 1/4" corrosion resistant roofing nails and minimum 32 ga. x 1 5/8" diameter tin caps, spaced 12" o.c. in a grid pattern in the field and 6" o.c. at the laps. Nails shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1".

Note: All flashing cement used shall be ASTM D 4586 asbestos-free flashing cement. All products shall have Metro-Dade Component Approval.

Edge Metal: Edge metal and installation shall be in compliance with the South Florida Building Code Section 3408.2 and 3408.3: Minimum .021" (26 ga.), 2" x 2" galvanized or other approved corrosion resistant material nailed over top of the underlayment at 4" o.c., with minimum 12 ga. x 1 1/4" corrosion resistant annular ring shank roofing nails at all perimeters. The nails shall be manufactured from similar and compatible material to the termination profile. All composite materials shall be fashioned with non-ferrous nails. At corners, the ends of adjoining approved drip edge shall be overlapped 7", notched and bent around the corner. Straight lengths of approved drip edge shall be overlapped not less than 3". See Dade County Protocol PA 111(4.3.4), figure 2.

Note: All intersections, eaves, rakes, valleys, gable ends, and starter course shall be set in a 8" wide strip of ASTM D 4586 flashing cement.

Valleys: Valleys may be applied in open, closed or weaved fashion. Valley metal shall be in compliance with the South Florida Building Code section 3408.4. A 36" wide sheet of ASTM D 249 mineral surfaced rolled roofing; or ASTM D 224 smooth roll roofing shall be installed over the underlayment at all close cut or woven valleys, centered in the valley. The roll roofing shall be nailed 6" o.c. with minimum 12 ga. x 1 1/4" roofing nails at each edge. Nails shall penetrate the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Endlaps shall be 12" and adhered with ASTM D 4586 flashing cement. In open valley applications a minimum 16" wide, 26 ga. galvanized metal; or other approved corrosion resistant material shall be installed, and may be rolled or preformed. Set valley in a bed of ASTM D 4586 flashing cement, applied in two 4" wide strips at each exterior edge, with a maximum thickness of 1/8". Fasten valley metal with minimum 12 ga. x 1 1/4" galvanized


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annular ring shank roofing nails 12" o.c. 1" in from each exterior edge. Nails shall penetrate the sheathing or wood plank a minimum of $\frac{3}{16}$ " or penetrate a 1" or greater thickness of lumber a minimum of 1". Strip in the the two exterior edges with flashing cement and approved reinforcement. Overlaps shall be 12" minimum and adhered with ASTM D 4586 flashing cement.

Starter strip:

The starter strip may be either a row of non-laminated shingles trimmed to the shingle manufacturer's recommendations or a strip of mineral-surfaced roll roofing not less than 7 inches wide. Starter strip and shingles shall overhang the eaves by $\frac{1}{4}$ " to $\frac{3}{4}$ ".

If self-sealing shingles are used for the starter strip, remove the tab portion of each shingle and position the remaining strip with the factory-applied adhesive face up along the eaves. Trim material from the end of the first shingle in the starter strip according to manufacturer's specifications to ensure that the cutouts of the first course of shingles are not placed over the starter strip joints. Fasten starter strips parallel to the eaves along a line above the eave line according to manufacturer's specifications. Position fasteners to insure they will not be exposed under the cutouts in the first course.

If shingles without a self-sealing strip are applied, the tabs shall be removed and ASTM D 4586 flashing cement shall be applied in spots approximately the size of a quarter at the corner of each tab of the first course. Starter shingles shall be nailed along a line not greater than 4" above the eave line nailing not greater than 6" o.c.. Trim at least three inches from the end of the first shingle to ensure that the cutouts of the first course are not placed over the starter strip joints.

If roll roofing is used for the starter strip, nail along a line not greater than 4" above the eave line nailing not greater than 12" o.c. ASTM D 4586 flashing cement shall be applied as noted above for non sealing shingle starter. If more than one piece of roll roofing must be used, the end joint shall be butted. Joints shall be staggered with succeeding shingle joints. Number of starter joints shall be kept to a minimum.

First and Succeeding Courses:

Be sure the first course is laid straight, checking it regularly during application against a horizontal chalk line. A few vertical chalk lines aligned with the ends of shingles in the first course will ensure proper alignment of cutouts. A shingle hatchet is an acceptable alternative to the use of succeeding chalk lines. If starter used does not provide a seal strip, bond the tabs of each shingle in the first course to the starter strip by placing a spot of ASTM D 4586 flashing cement about the size of a quarter on the starter strip beneath each tab if a non self sealing starter is used. Avoid excessive use of the cement, as it may cause blistering.



The first course starts with a full shingle, while succeeding courses start with 4, 5, or 6 inches removed relative to the preceding course, or as approved by the manufacturer. Rake and valley courses shall be terminated with tabs not less than 12" wide.

To obtain the correct exposure for square-tab strip shingles, align the butts with the top of the cutouts in the course below. Install no-cutout shingles and those with variable butt lines according to the manufacturer's directions to obtain correct exposure.

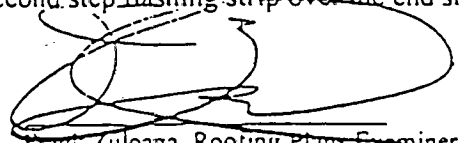
Note: **Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning shingle alignment. See 'Expose and Course Layout' - Detail 'A' attached.**

Fastening: Use six nails or approved fasteners per shingle. Fasteners shall be minimum 12 ga. x 1 1/4" galvanized roofing nails, or other fasteners with Dade County Component Approval. Place the fasteners according to fastener Detail 'B', attached. Align the shingles properly to avoid exposing fasteners in the course below. Fasteners shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Drive the fasteners straight and do not break the shingle surface with the fastener head. Do not drive fasteners into knot holes or cracks in the roof deck. Repair faulty fastening immediately. If fastener does not penetrate the deck properly, remove the fastener and repair the hole in the shingle with ASTM D 4586 flashing cement or replace the entire shingle.

Do not nail into or above factory-applied adhesives. Ensure no cutout or end joint is less than 2 inches from a nail in an underlying course. Start nailing from the end nearest the shingle just laid and proceed across. Do not attempt to re-align a shingle by shifting the free end after two nails are in place. Drive nails straight so that the edge of the nail head does not cut into the shingle. Nail heads should be driven flush with the shingle surface. Fasteners shall not be overdriven.

Note: **Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning fastener alignment. See Fastening Pattern and Physical Dimensions - Detail "B" attached.**

Flashing: Roof planes that butt against vertical walls shall be step flashed with 10" long metal shingles which are 2" wider than the exposed face of the roofing shingles. Place the first flashing unit over the end of the starter strip and position it so that the tab of the end shingle in the first course covers it completely. Secure the horizontal arm to the roof with two approved roofing nails. Do not nail flashing to the wall; settling of the roof could damage the seal. Apply the first course of shingles up to the wall. Position the second step flashing strip over the end shingle



Frank Zuloaga, Roofing Plans Examiner
Product Control Division


in the first course 5 inches up from the butt so that the tab of the end shingle in the second course covers it completely. Fasten the horizontal arm to the roof. The second course of shingles follows, the end is flashed as in the preceding courses and so on to the top of the intersection. Bring siding or other wall treatment down over the vertical sections of the step flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line.

Vertical sidewalls shall be flashed. Apply shingles up the roof until a course must be trimmed to fit at the base of the vertical wall. Adjust the exposure slightly in the previous two courses so that the last course is at least 8 inches wide. Apply a continuous piece of metal flashing over the last course of shingles by embedding it in approved flashing cement and nailing it to the roof. The metal flashing strip shall be bent to extend at least 5 inches up the vertical wall and at least 4 inches onto the last shingle course. Do not nail the strip to the wall. Apply an additional row of shingles over the metal flashing strip, trimmed to the width of the strip. Bring siding down over the vertical flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line. Do not nail siding into the vertical flashing. If the vertical front wall meets a sidewall, as in dormer construction, cut flashing so that it extends at least 7 inches around the corner. Continue up the sidewall with step flashing as detailed above.

Soil Stacks and Vent Pipes:

Apply shingles up to the vent pipe. Cut a hole in a shingle to go over the pipe and set the shingle in ASTM D 4586 flashing cement. A preformed flashing flange that fits snugly over the pipe is then placed over the shingle and vent pipe and set in approved flashing cement. Place the flange over the pipe to lay flat on the roof. After the flashing is in place, resume shingle application. Cut shingles in successive courses to fit around the pipe and embed them in approved flashing cement where they overlap the flange. Avoid excessive use of cement as it may cause blistering. Do not drive fasteners close to the pipe. The lower part of the flange shall overlap the lower shingles and the side and upper shingles shall overlap the flange.

For ventilator and exhaust stacks, follow the same procedure, but bring the shingles up to the pipe from both sides and bend the flange over the ridge to lie in both roof planes, overlapping the roof shingles at all points. Ridge shingles are then positioned to cover the flange. Embed the ridge shingles in approved flashing cement where they overlap the flange.



Frank Zuloaga, Roofing Plans Examiner
Product Control Division

Chimneys:

Chimneys shall be flashed with a two-piece base and cap flashing to allow for differential movement. Apply shingles up to the front edge of the chimney before any flashings are installed. Apply a coat of ASTM D 41 asphalt primer if the chimney is constructed of masonry or metal to seal the surface and to provide good adhesion to all points where flashing cement will later be applied.

Install 26 ga. corrosion resistant metal, or other approved corrosion resistant materials, as base flashing between the chimney and the roof deck, on all sides. Apply the base flashing to the low side of the chimney first. Bend the base flashing so that the lower section extends at least 4" over the shingles and the upper section extends at least 12" up the vertical face of the chimney. Work the flashing firmly and smoothly into the joint between the shingles and chimney. Set both the roof and chimney overlaps in approved flashing cement placed over the shingles and on the chimney face. The flashing may be secured against the chimney with one or two nails to hold it in place until the cement sets. Use metal step flashing for the sides of the chimney, positioning the units in the same manner as flashing on a vertical sidewall. Cut, bend and apply the step flashing around the side of the chimney. Secure each flashing unit to the masonry with approved flashing cement and to the deck with approved nails. Embed the end shingles in each course that overlap the flashing in an 8" bed of approved flashing cement. Place the rear base flashing over the cricket and the high side of the chimney.

Apply the high side base flashing by bringing the end shingles in each course up to the cricket and secure in a bed of approved flashing cement. Cap flashings shall be installed over all base flashings. Set the metal cap flashing into the brickwork or exterior siding material. If brick, rake out the mortar joint to a depth of 1½ inches and insert the bent edge of the flashing into the cleared joint. Refill the joint with mortar. Bend the cap flashing down to overlap the base flashing. Use one continuous piece of cap flashing on the low side of the chimney. On the sides and high side of the chimney, use several pieces of similar-sized flashing, trimming each to fit the particular location of brick joint or substrate material. Start the side units at the lowest point and overlap at least 3 inches. Chimney crickets shall be waterproofed in compliance with options published by the shingle manufacturer. If crickets are formed from wood, or other nailable materials a double layer underlayment shall be applied prior to waterproofing.

Hips and Ridges:

Apply premanufactured hip and ridge shingle components or cut hip and ridge shingles from manufacturer's shingles, where approved. Lay hip and ridge away from prevailing wind. Insure all fasteners are covered. Exposure shall not exceed 5" unless premanufactured hip and ridge specifically allows for greater exposure. Taper the lap portion of each cap shingle slightly so that it is narrower than the exposed portion.

Minimum Slope:

2":12" to 4":12"

Maximum Fire Classification:


Class 'A'



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Product Control Division

SYSTEM APPLICATION
Slope Range: 4":12" and Greater

- Underlayment:** Underlayment shall be applied in accordance with the South Florida Building Code, Section 3403.5(f)(2): Two plies of minimum ASTM D 226, Type I felt overlapped 19", or a single layer of ASTM D 226 Type II felt overlapped 4". Head lap shall be 6". Underlayment shall be installed with minimum 12 ga. x 1 1/4" corrosion resistant roofing nails and minimum 32 ga. x 1 5/8" diameter tin caps, spaced 12" o.c. in a grid pattern in the field and 6" o.c. at the laps. Nails shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1".
- Edge Metal:** Edge metal and installation shall be in compliance with the South Florida Building Code Section 3408.2 and 3408.3: Minimum .021" (26 ga.), 2" x 2" galvanized or other approved corrosion resistant material nailed over top of the underlayment at 4" o.c., with minimum 12 ga. x 1 1/4" corrosion resistant annular ring shank roofing nails at all perimeters. The nails shall be manufactured from similar and compatible material to the termination profile. All composite materials shall be fashioned with non-ferrous nails. At corners, the ends of adjoining approved drip edge shall be overlapped 7", notched and bent around the corner. Straight lengths of approved drip edge shall be overlapped not less than 3". See Dade County Protocol PA 111(4.3.4), figure 2.
- Note:** All intersections, eaves, rakes, valleys, gable ends, and starter course shall be set in a 8" wide strip of ASTM D 4586 flashing cement.
- Valleys:** Valleys may be applied in open, closed or weaved fashion. Valley metal shall be in compliance with the South Florida Building Code section 3408.4. A 36" wide sheet of ASTM D 249 mineral surfaced rolled roofing; or ASTM D 224 smooth roll roofing shall be installed over the underlayment at all close cut or woven valleys, centered in the valley. The roll roofing shall be nailed 6" o.c. with minimum 12 ga. x 1 1/4" roofing nails at each edge. Nails shall penetrate the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Endlaps shall be 12" and adhered with ASTM D 4586 flashing cement. In open valley applications a minimum 16" wide, 26 ga. galvanized metal; or other approved corrosion resistant material shall be installed, and may be rolled or preformed. Set valley in a bed of ASTM D 4586 flashing cement, applied in two 4" wide strips at each exterior edge, with a maximum thickness of 1/8". Fasten valley metal with minimum 12 ga. x 1 1/4" galvanized annular ring shank roofing nails 12" o.c. 1" in from each exterior edge. Nails shall penetrate the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Strip in the the two exterior edges with flashing cement and approved reinforcement. Overlaps shall be 12" minimum and adhered with ASTM D 4586 flashing cement.



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Product Control Division

Starter strip:

The starter strip may be either a row of non-laminated shingles trimmed to the shingle manufacturer's recommendations or a strip of mineral-surfaced roll roofing not less than 7 inches wide. Starter strip and shingles shall overhang the eaves by $\frac{1}{4}$ " to $\frac{3}{4}$ ".

If self-sealing shingles are used for the starter strip, remove the tab portion of each shingle and position the remaining strip with the factory-applied adhesive face up along the eaves. Trim material from the end of the first shingle in the starter strip according to manufacturer's specifications to ensure that the cutouts of the first course of shingles are not placed over the starter strip joints. Fasten starter strips parallel to the eaves along a line above the eave line according to manufacturer's specifications. Position fasteners to insure they will not be exposed under the cutouts in the first course.

If shingles without a self-sealing strip are applied, the tabs shall be removed and ASTM D 4586 flashing cement shall be applied in spots approximately the size of a quarter at the corner of each tab of the first course. Starter shingles shall be nailed along a line not greater than 4" above the eave line nailing not greater than 6" o.c.. Trim at least three inches from the end of the first shingle to ensure that the cutouts of the first course are not placed over the starter strip joints.

If roll roofing is used for the starter strip, nail along a line not greater than 4" above the eave line nailing not greater than 12" o.c. ASTM D 4586 flashing cement shall be applied as noted above for non sealing shingle starter. If more than one piece of roll roofing must be used, the end joint shall be butted. Joints shall be staggered with succeeding shingle joints. Number of starter joints shall be kept to a minimum.

First and Succeeding Courses:

Be sure the first course is laid straight, checking it regularly during application against a horizontal chalk line. A few vertical chalk lines aligned with the ends of shingles in the first course will ensure proper alignment of cutouts. A shingle hatchet is an acceptable alternative to the use of succeeding chalk lines. If starter used does not provide a seal strip, bond the tabs of each shingle in the first course to the starter strip by placing a spot of ASTM D 4586 flashing cement about the size of a quarter on the starter strip beneath each tab if a non self sealing starter is used. Avoid excessive use of the cement, as it may cause blistering.

The first course starts with a full shingle, while succeeding courses start with 4, 5, or 6 inches removed relative to the preceding course, or as approved by the manufacturer. Rake and valley courses shall be terminated with tabs not less than 12" wide.



To obtain the correct exposure for square-tab strip shingles, align the butts with the top of the cutouts in the course below. Install no-cutout shingles and those with variable butt lines according to the manufacturer's directions to obtain correct exposure.


Note: Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning shingle alignment. See 'Expose and Course Layout' - Detail 'A' attached.

Fastening: Use six nails or approved fasteners per shingle. Fasteners shall be minimum 12 ga. x 1 1/4" galvanized roofing nails, or other fasteners with Dade County Component Approval. Place the fasteners according to fastener Detail 'B', attached. Align the shingles properly to avoid exposing fasteners in the course below. Fasteners shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Drive the fasteners straight and do not break the shingle surface with the fastener head. Do not drive fasteners into knot holes or cracks in the roof deck. Repair faulty fastening immediately. If fastener does not penetrate the deck properly, remove the fastener and repair the hole in the shingle with ASTM D 4586 flashing cement or replace the entire shingle.

Do not nail into or above factory-applied adhesives. Ensure no cutout or end joint is less than 2 inches from a nail in an underlying course. Start nailing from the end nearest the shingle just laid and proceed across. Do not attempt to re-align a shingle by shifting the free end after two nails are in place. Drive nails straight so that the edge of the nail head does not cut into the shingle. Nail heads should be driven flush with the shingle surface. Fasteners shall not be overdriven.

Note: Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning fastener alignment. See Fastening Pattern and Physical Dimensions - Detail "B" attached.

Flashing: Roof planes that butt against vertical walls shall be step flashed with 10" long metal shingles which are 2" wider than the exposed face of the roofing shingles. Place the first flashing unit over the end of the starter strip and position it so that the tab of the end shingle in the first course covers it completely. Secure the horizontal arm to the roof with two approved roofing nails. Do not nail flashing to the wall; settling of the roof could damage the seal. Apply the first course of shingles up to the wall. Position the second step flashing strip over the end shingle in the first course 5 inches up from the butt so that the tab of the end shingle in the second course covers it completely. Fasten the horizontal arm to the roof. The second course of shingles follows, the end is flashed as in the preceding courses and so on to the top of the intersection. Bring siding or other wall treatment down



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Product Control Division

over the vertical sections of the step flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line.

Vertical sidewalls shall be flashed. Apply shingles up the roof until a course must be trimmed to fit at the base of the vertical wall. Adjust the exposure slightly in the previous two courses so that the last course is at least 8 inches wide. Apply a continuous piece of metal flashing over the last course of shingles by embedding it in approved flashing cement and nailing it to the roof. The metal flashing strip shall be bent to extend at least 5 inches up the vertical wall and at least 4 inches onto the last shingle course. Do not nail the strip to the wall. Apply an additional row of shingles over the metal flashing strip, trimmed to the width of the strip. Bring siding down over the vertical flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line. Do not nail siding into the vertical flashing. If the vertical front wall meets a sidewall, as in dormer construction, cut flashing so that it extends at least 7 inches around the corner. Continue up the sidewall with step flashing as detailed above.


Soil Stacks and Vent Pipes:

Apply shingles up to the vent pipe. Cut a hole in a shingle to go over the pipe and set the shingle in ASTM D 4586 flashing cement. A preformed flashing flange that fits snugly over the pipe is then placed over the shingle and vent pipe and set in approved flashing cement. Place the flange over the pipe to lay flat on the roof. After the flashing is in place, resume shingle application. Cut shingles in successive courses to fit around the pipe and embed them in approved flashing cement where they overlap the flange. Avoid excessive use of cement as it may cause blistering. Do not drive fasteners close to the pipe. The lower part of the flange shall overlap the lower shingles and the side and upper shingles shall overlap the flange.

For ventilator and exhaust stacks, follow the same procedure, but bring the shingles up to the pipe from both sides and bend the flange over the ridge to lie in both roof planes, overlapping the roof shingles at all points. Ridge shingles are then positioned to cover the flange. Embed the ridge shingles in approved flashing cement where they overlap the flange.

Chimneys:

Chimneys shall be flashed with a two-piece base and cap flashing to allow for differential movement. Apply shingles up to the front edge of the chimney before any flashings are installed. Apply a coat of ASTM D 41 asphalt primer if the chimney is constructed of masonry or metal to seal the surface and to provide good adhesion to all points where flashing cement will later be applied.



Frank Zuloaga, Roofing Plans Examiner
Product Control Division


Install 26 ga. corrosion resistant metal, or other approved corrosion resistant materials, as base flashing between the chimney and the roof deck, on all sides. Apply the base flashing to the low side of the chimney first. Bend the base flashing so that the lower section extends at least 4" over the shingles and the upper section extends at least 12" up the vertical face of the chimney. Work the flashing firmly and smoothly into the joint between the shingles and chimney. Set both the roof and chimney overlaps in approved flashing cement placed over the shingles and on the chimney face. The flashing may be secured against the chimney with one or two nails to hold it in place until the cement sets. Use metal step flashing for the sides of the chimney, positioning the units in the same manner as flashing on a vertical sidewall. Cut, bend and apply the step flashing around the side of the chimney. Secure each flashing unit to the masonry with approved flashing cement and to the deck with approved nails. Embed the end shingles in each course that overlap the flashing in an 8" bed of approved flashing cement. Place the rear base flashing over the cricket and the high side of the chimney.

Apply the high side base flashing by bringing the end shingles in each course up to the cricket and secure in a bed of approved flashing cement. Cap flashings shall be installed over all base flashings. Set the metal cap flashing into the brickwork or exterior siding material. If brick, rake out the mortar joint to a depth of 1½ inches and insert the bent edge of the flashing into the cleared joint. Refill the joint with mortar. Bend the cap flashing down to overlap the base flashing. Use one continuous piece of cap flashing on the low side of the chimney. On the sides and high side of the chimney, use several pieces of similar-sized flashing, trimming each to fit the particular location of brick joint or substrate material. Start the side units at the lowest point and overlap at least 3 inches. Chimney crickets shall be waterproofed in compliance with options published by the shingle manufacturer. If crickets are formed from wood, or other nailable materials a double layer underlayment shall be applied prior to waterproofing.

Hips and Ridges: Apply premanufactured hip and ridge shingle components or cut hip and ridge shingles from manufacturer's shingles, where approved. Lay hip and ridge away from prevailing wind. Insure all fasteners are covered. Exposure shall not exceed 5" unless premanufactured hip and ridge specifically allows for greater exposure. Taper the lap portion of each cap shingle slightly so that it is narrower than the exposed portion.

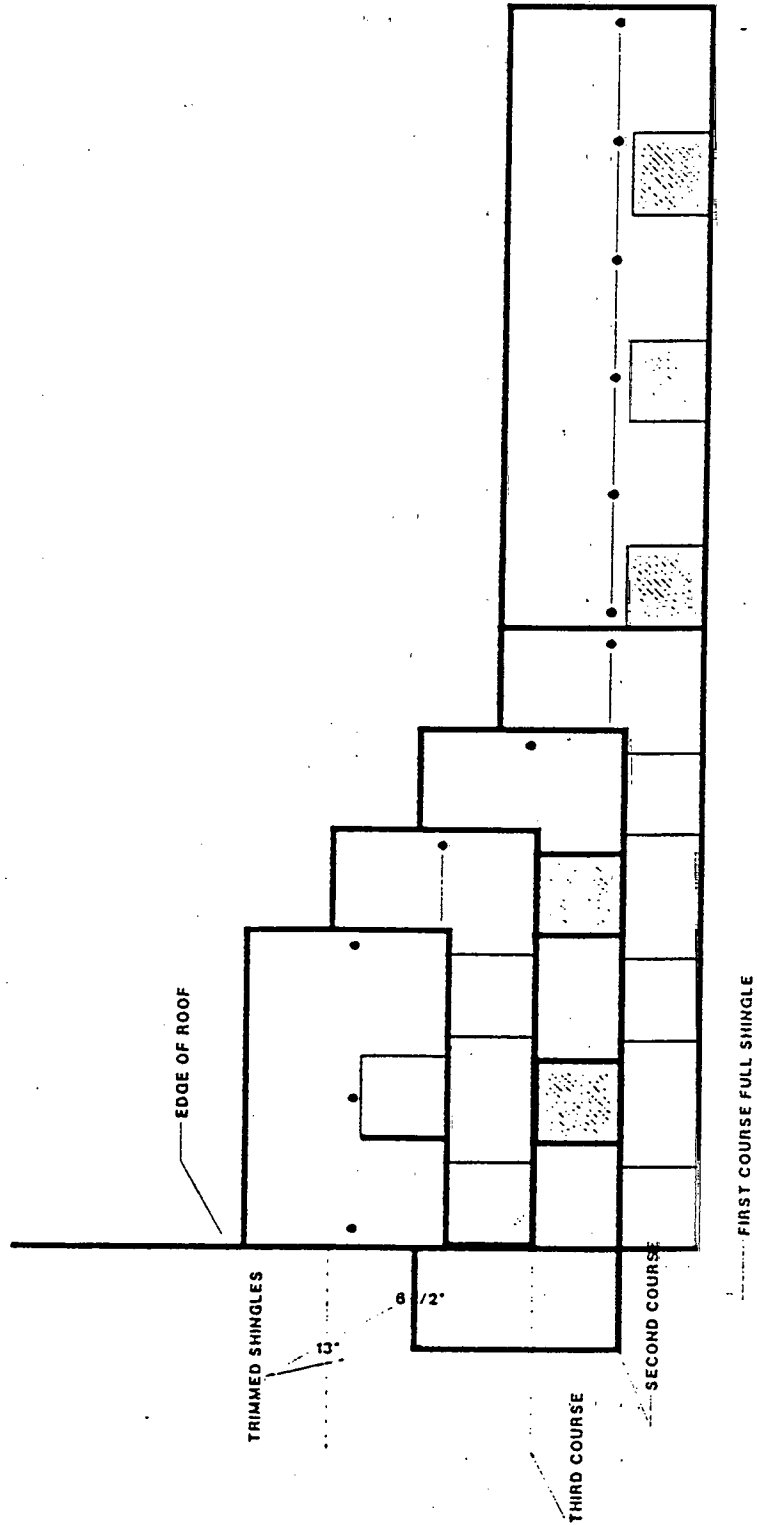
Slope Range: 4":12" and Greater


Maximum Fire Classification: Class 'A'



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Product Control Division

OAKRIDGE SHADOW AR DETAIL A

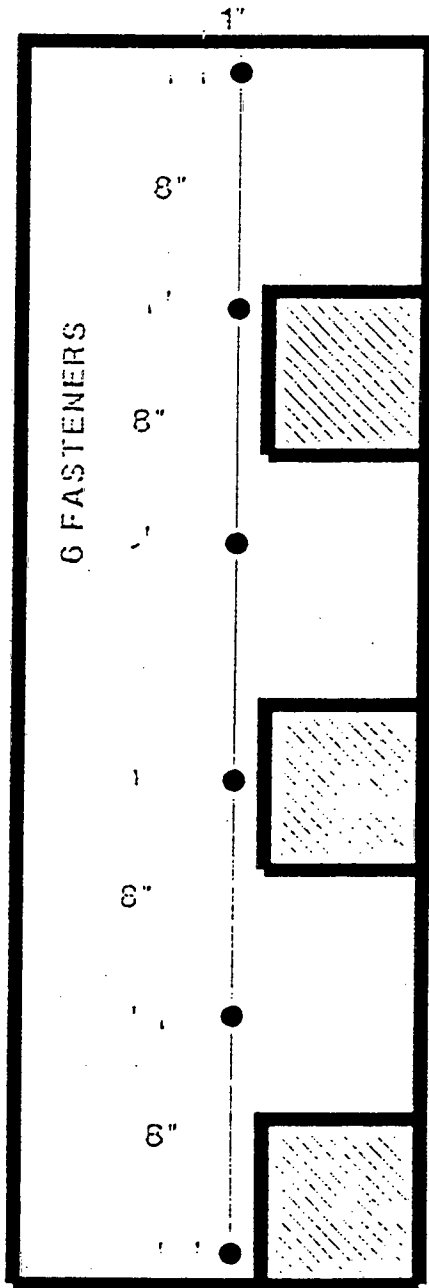



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Product Control Division

OAKRIDGE SHADOW AR DETAIL B

- 5 5/8" -

39-1/2"




EXPOSURE

HALF LINE


1" - 6 1/8" -

12-1/8"


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Product Control Division

Limitations:

1. Shingles shall be labeled with the Product Acceptance Number noted-above.
2. The manufacturer shall provide clearly written application instructions.
3. Underlayment materials and application shall be in compliance with Chapter 34 of the South Florida Building Code.
4. This is a general application procedure for asphalt and modified asphalt shingles. Manufacturers may place additional requirements upon roof system installations in the South Florida Building Code jurisdiction for warranty purposes. Consult manufacturer's application instructions before system installation.
5. Exposure and course layout shall be in compliance with Detail 'A', attached.
6. Nailing shall be in compliance with Detail 'B', attached.
7. System shall not be installed at slopes less than 2":12".
8. Applications for roofing permits must be accompanied by Section II of the Uniform Building Permit, clearly indicating the extent of the work to be performed, along with current manufacturer's specifications and details. In addition, a copy of this approval shall be attached to the permit application. Reference shall be made to all appropriate data for the required fire rating.



Frank Zulfaga, Roofing Plans Examiner
Product Control Division

Owens Corning/ Mansville Sales Co.
One Owens Corning Parkway
Toledo, OH 43659


ACCEPTANCE NO.: 97-0226.01
APPROVED : May 02, 1997
EXPIRES : May 02, 2000

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, including test supporting data, engineering documents, are no older than eight (8) years.
- 2 Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Metro-Dade County Product Control Approved", or as specifically stated in the specific conditions of this Acceptance.
- 3 Renewals of Acceptance will not be considered if:
 - a) There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes;
 - b) The product is no longer the same product (identical) as the one originally approved;
 - c) If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product;
 - d) The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
- 4 Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
- 5 Any of the following shall also be grounds for removal of this Acceptance:
 - a) Unsatisfactory performance of this product or process;
 - b) Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
- 6 The Notice of Acceptance number preceded by the words Metro-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
- 7 A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 20.

END OF THIS ACCEPTANCE

Page 20 of 20


Frank Zuloaga, Roofing Plans Examiner
Product Control Division

Bldg. Pmt# _____

Town of Sewall's Point

Date 2-10-00

BUILDING PERMIT APPLICATION

RECEIVED
FEB 14 2000
BY: _____

Owner's Name: JOSEPH GIGANTE Phone No. _____
Owner's Present Address: 14 VIA LUCINDIA NORTH
Fee Simple Titleholder's Name & Address if other than owner _____

Location of Job Site: 14 VIA LUCINDIA
TYPE OF WORK TO BE DONE: RE ROOF
CONTRACTOR INFORMATION
Contractor/Company Name: JIM'S ROOFING Phone No. 692-1870
COMPLETE MAILING ADDRESS: 1004 NW 16th Place STUART FL 34994
State Registration _____ State License CC041295
Legal Description of Property L-38-41-007-000-00070-0000
Parcel Number L-38-41-007-000-00070-0000 Pt 7

Call # 21-2056
Wk # 287-1874

ARCHITECT/ENGINEER INFORMATION

Architect _____ Phone No. _____

Address _____

Engineer _____ Phone No. _____

Address _____

Area Square Footage: Living Area _____ Garage Area _____ Carport _____

Accessory Bldg. _____ Covered Patio _____ Scr. Porch _____ Wood Deck _____

Type Sewage: _____ Septic Tank Permit # from Health Dept. _____

NEW electrical SERVICE SIZE _____ AMPS

FLOOD HAZARD INFORMATION

flood zone _____ minimum Base Flood Elevation (BFE) _____ NGVD
proposed finish floor elevation _____ NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement \$7,200.00
Fair Market Value (FMV) prior to improvement _____
Substantial Improvement 50% of FMV yes _____ No _____
Method of determining FMV _____

SUBCONTRACTOR INFORMATION: (Notify this office if subcontractor's change.)

Electrical _____ State License _____

Mechanical _____ State License# _____

Plumbing _____ State License# _____

Roofing _____ State License# _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard of all laws regulating construction in this jurisdiction. I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIRCONDITIONERS, DOCKS, SEAWALLS, ACCESSORY BLDGS, SAND REMOVAL, TREE REMOVAL.

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

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER or AGENT SIGNATURE James Conklin

Sworn to and subscribed before me this 14 day of Feb, 1998 by

James Conklin who is personally known to me or has produced or has produced Id. and who did (did not) take an oath.

CONTRACTOR SIGNATURE _____

Sworn to and subscribed before me this _____ day of _____, 1998 by _____

_____ who is personally known to me or has produced _____ who did (did not) take an oath.



TREE REMOVAL (Attach sealed survey)

No. of trees to be removed _____ No. to be retained _____ No. to be planted _____
Specimen tree removed _____ Fee _____ Authorized/Date _____
DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE :

- A. Property Appraiser's Parcel Number.
 - B. A Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
 - C. Contractor's name, address, phone number & license numbers.
 - D. Name all sub-contractors (properly licensed).
 - E. Current Survey
 - F. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.
3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.
4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architect's seal and the following items:
1. Floor Plan
 2. Foundation Details
 3. Elevation Views - Elevation Certificate due after slab inspection.
 4. A Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
 5. Truss layout
 6. Vertical Wall Sections (one detail for each wall that is different)
 7. Fireplace drawing: If prefabricated submit manufacturers data.

ADDITIONAL Required Documents are:

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

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

Approved by Building Official _____

Approved by Town Engineer _____

PERMIT # _____

TAX FOLIO # 1-38-41-007-000-00070.0000

NOTICE OF COMMENCEMENT

STATE OF FL

COUNTY OF Martin

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

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

GENERAL DESCRIPTION OF IMPROVEMENT: Resurf

OWNER: Joseph Gigante

ADDRESS: 14 Via Lucindia North Somers Pt. Street 34996

PHONE #: (561) 283-7367 FAX #: _____

CONTRACTOR: Jim's Repairing

ADDRESS: 1004 NW 16th Place Street 34994

PHONE #: (561) 692-1870 FAX #: _____

SURETY COMPANY(IF ANY) _____

ADDRESS: _____

PHONE # _____ FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

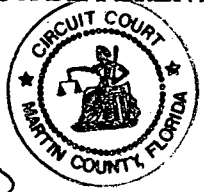
IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ OF _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #: _____ FAX #: _____

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

Joseph Gigante
SIGNATURE OF OWNER

THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
MARSHA STILLER, CLERK



SWORN TO AND SUBSCRIBED BEFORE ME THIS 17th DAY OF February 2000 BY J. Gigante

PERSONALLY KNOWN

OR PRODUCED BY John H. Barrow



MY COMMISSION # CC763645 EXPIRES November 30, 2002
BONDED THRU TROY FAIN INSURANCE, INC.

John H. Barrow
NOTARY SIGNATURE

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
08/23/1999

PRODUCER (561)334-3181 FAX (561)334-7742

Rick Carroll Insurance Agency
2160 N.E. Dixie Highway
P.O. Box 877
Jensen Beach, FL 34958-0877

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

COMPANIES AFFORDING COVERAGE

- COMPANY A Colony Insurance Co
- COMPANY B Progressive Consumers Inc Co
- COMPANY C FCCI Insurance Group
- COMPANY D

RECEIVED
VIA FAX
FEB 10 2000
BY: *[Signature]*

Attn: Ext:
INSURED James P. Conkling, Inc. Dba Jim's Roofing
1004 Nw 16th Place
Stuart, FL 34994-9620

FILE
LIC/INS.

COVERAGES

THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED, NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input checked="" type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNERS & CONTRACTOR'S PROT	GL372804	08/01/1999	08/01/2000	GENERAL AGGREGATE \$ 60000 PRODUCTS - COMP/OP AGG \$ 30000 PERSONAL & ADV INJURY \$ 30000 EACH OCCURRENCE \$ 30000 FIRE DAMAGE (Any one fire) \$ 50000 MED EXP (Any one person) \$
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	CA04610178	12/19/1999	12/19/2000	COMBINED SINGLE LIMIT \$ 500,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL	146900	12/01/1999	12/01/2000	WC STATUTORY LIMITS OTHER EL EACH ACCIDENT \$ 100000 EL DISEASE - POLICY LIMIT \$ 50000 EL DISEASE - EA EMPLOYEE \$ 100000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

This certificate for proof of insurance only.

CERTIFICATE HOLDER

Town of Sewalls Point
1 Sewalls Pt Road
Stuart, 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

Keith Carroll/SAV

Keith Carroll

STATE OF FLORIDA AC# 5189867
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CC -0041295-06/27/1998 97904221
CERTIFIED ROOFING CONTRACTOR
CONKLING, JAMES PATRICK
JIM'S ROOFING
IS CERTIFIED Under the provisions of Ch. 489 FS.
Expiration Date: AUG 31, 2000

MARTIN COUNTY HEALTH DEPARTMENT
131 E. 7th Street
Stuart, Florida 33494

Applicant: Sundial Construction

Legal Description: Lot 7, Lucindia, Plat Book 3, Page 130, Public Records of Martin County, Florida.

Present water depth > 6.0' feet below natural grade, not including fill.

Wet season water depth > 6.0' feet below natural grade, not including fill.

Elevation of crown of road, midway between front lot boundary assume 10.0'

Elevation of natural grade at area of septic system assume 10.0'

Average depth of fill under proposed building 1.5 feet above natural grade.

Average depth of fill in area of septic system 0 feet above natural grade.

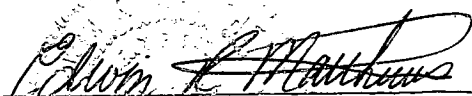
Surface area of required fill in area of septic system N/A feet².

NOTE: 1. 150 feet² area of fill required for each bedroom in area of septic system.

2. Fill has been compacted to a density comparable to the surrounding natural soil.

3. Elevation of crown of road can be assumed to be 10.00

CERTIFIED BY:



Edwin R. Matthews

Florida Professional Number 3954

Date: 9/22/82 Job Number 541



1514

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

Permit VOID if well or septic system is installed in a location other than area permitted. PRIOR HEALTH DEPARTMENT APPROVAL REQUIRED

**APPLICATION FOR SEPTIC TANK PERMIT
AND FINAL INSPECTION FORM**

Authority:
Chapter 381, 386, 387, FS
Chapter 10D-6, FAC

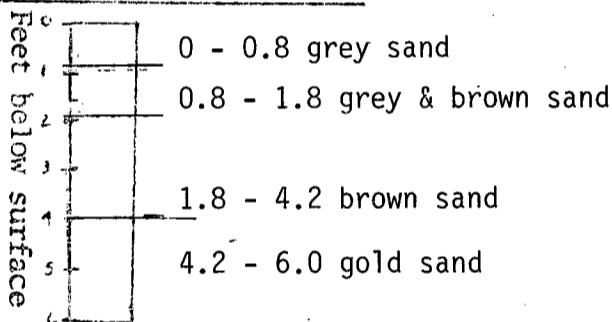
Permit Number HD82-455

Name of Applicant Sundial Construction Telephone 283-1000
Mailing Address of Applicant 114 S. Dixie Highway, Stuart, FL 33494
To be Installed at: (Give Street Address)*
Lot 7 Block _____ Subdivision Lucindia
Plat Book & Page Plat Book 3, Page 130 Date Recorded April 19, 1960
Residential: No. Living Units 1 Number Bedrooms 3
Commercial: Type of Business _____ Number People _____ Number Toilets _____
*Note: Attach site location map and other supportive documents.
Signature of Applicant [Signature]

SITE INFORMATION

Is there a private well within 75 ft. of the proposed septic system? NO
Is there a public well within 100 ft. of the proposed septic system? NO
Is there a public sewer within 100 ft. of the proposed lot? NO
Is there a lake, stream, canal or other body of water within 50 ft. of the proposed septic system? NO
Is there a septic system or other interference within 75 ft. of the proposed private well? NO WELLS
Is the proposed or existing public water line within 10 ft. of the proposed septic system? NO
There is 5520 square feet of unobstructed land for future expansion of the drainfield.

SOIL PROFILE AND PERCOLATION DATA



Water table..... below 6.0'
Wet season water table... below 6.0'
Compacted fill of..... 0 required.
Compacted fill check by... _____
Date..... _____

[Signature]
Certified by: Edwin R. Matthews
Florida Professional Number: 3954
Date: 9/22/82 Job Number 541
Percolation Rate 0.12 Minutes/inch
Soil Identification: SP
Class I Group Grey & Gold Sand

INSTALLATION SPECIFICATIONS

Septic Tank Capacity 900 Gallons Absorption Bed Size 270 Square Ft.
Dosing Tank Capacity _____ Gallons Lateral Drainfield Size _____ Square Ft.
Grease Trap Capacity _____ Gallons Sand Filter Size _____ Square Ft.

Specifications:

9-22-82
Date Processed
THIS PERMIT EXPIRES ONE (1)
YEAR FROM DATE OF ISSUANCE

[Signature] Signature of Sanitarian MARTIN County Health Department

FINAL INSPECTION DATA

Date and Time of Inspection _____ Type of Tank (Concrete, Fiberglass, Etc.) _____
Size Tank Installed _____ Drainfield Size _____
Dosing Tank Size _____ Grease Trap Size _____ Sand Filter Size _____
Who Made Installation _____

RECOMMENDATION: Approval _____ Disapproval _____

Signature of Sanitarian

022081