

**17 East High Point Rd**

**103**

**SFR**

103

Application For Building Permit

Owner Mr. & Mrs. M. L. Greene Present Address Broadway - Stuart Phone 287-2986

Architect Karl O. Herlin Address Cocanut Park - Stuart

General Contractor Karl O. Herlin Address " Phone 287-2093

Where Licensed Stuart License No. 860

Plumbing Contractor Palm City Plumbing Where Licensed Martin Co. No.

Electrical Contractor  Where Licensed  No.

Property Location Sewall's Point Subdivision High Point Lot No. 58-59

Lot Dimensions 200 X 169 Lot Area 33800 Sq. Ft.

Purpose of Building Residence Type of Construction

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

Outside of Walls \* 3548 APP Inside of Walls OK 1200 +

Street or Road building will front on High Point Road (Faces east)

Clearances - Front 70' E Back 49'-6" W Side 49'-4" N Side 78'-S River

Well Location Check later Septic Tank Location Check later

Building elevation (By Ordinance Definition) OK

Contract Price (Include Plumbing, Electrical, Air Conditioning) 35,800.00

<u>PERMIT FEE</u>	<u>New Home</u>	<u>Additions</u>	<u>Others</u>
General (\$3.00 per \$1000 or Fraction)	<u>108.00</u>	<u></u>	<u></u>
Plumbing (Flat Fee)	<u>\$10.00</u>	<u>\$3.00</u>	<u></u>
Electrical (Flat Fee)	<u>\$10.00</u>	<u>\$3.00</u>	<u></u>
Total (To be paid by General Contractor or Owner)	<u>128.00</u>	<u></u>	<u></u>

SIGNED: - General Contractor or Owner Karl O Herlin

Building Inspector Comments: all OK

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FOR TOWN RECORDS: Date Drawings submitted 3-2-66  
Date Permit approved 3-3-66  
Date Permit Fee paid 3-9-66  
Date First Inspection   
Date Final Inspection   
Date Occupancy approved

\* Includes closed garage. \$35,800.00

103

975

FLAT ROOF OVER REAR CANAL

RECEIVED APR 19 1979

TOWN OF SEWALL'S POINT FLORIDA

975

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

AN ADDITION (Room)

Date 4-18-79

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

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

Owner MR. ADRIEN GORDINER Present address 17 E. HIGH PT. RD.

Phone 283-4837

Contractor HERRIN, DEINARD, INC. Address P.O. BOX 897, STUART

Phone 287-2093

Where licensed STATE License number CGC013733

Electrical contractor KRAUSS & CRAWF License number 29 W

Plumbing contractor UNDEP PLUMB'G License number 9

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: FLAT ROOF OVER REAR LAND

17 E. HIGH PT. ROAD

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

Subdivision HIGH POINT

Lot No. 58559

Contract prices \$1,500

Cost of Permit \$ 930.00

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

Plans approved as marked

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

Contractor [Signature]

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

Owner [Signature]

TOWN RECORD

Date submitted

Approved: [Signature]  
Building Inspector

4/23/79  
Date

Approved: [Signature]  
Commissioner

25 Apr. 1979  
Date

Final Approval given: May 14/1979  
Date

Certificate of Occupancy issued \_\_\_\_\_  
Date

SP/1-79

[Signature]

975  
[Signature]

**990**

**POOL**

TOWN OF SEWALL'S POINT FLORIDA

990  
Date 5/17/79

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

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

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

Owner Mr & Mrs A.P. Gardiner Present address 17 E High Pt Rd.  
Phone 283-4837 Jensen Bch

Contractor Martin County Custom Pools Address P.O. Box 1799 Stuart,  
Phone 283-6363

Where licensed Martin County License number #136

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

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

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

State the street address at which the proposed structure will be built:  
17 E. High Pt Rd.

Subdivision High Point Lot No. 58459

Contract price \$ 8000 Cost of Permit \$ 40.00

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

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

Contractor Martin County Custom Pools, Inc  
John Brown (Pres)

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

Owner A.P. Gardiner

TOWN RECORD Date submitted \_\_\_\_\_

Approved: James [Signature] 5/15/79  
Building Inspector Date

Approved: [Signature] 15 May 1979  
Commissioner Date

Final Approval given: \_\_\_\_\_ Date

Certificate of Occupancy issued \_\_\_\_\_ Date

SP/1-79

Steel & Grounding - 5/31/79  
Completed 7/9/79  
John

990

**2250**

**RE-ROOF**



APPLICATION FOR A PERMIT TO BUILD SCREENED ENCLOSURE, GARAGE OR ANY OTHER STRUCTURE NOT A HOUSE OR A COMMERCIAL BUILDING

2250

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

Owner Mr Massad Present Address 17 Easthighpoint Rd

Phone 286-3733

Contractor Stuart Roofing inc. Address P.O BOX 2556 Stuart

Phone 286-2317

Where licensed Martin County License number 518 782

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

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

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: tear off existing tile roof haul away all debris, replace: 30# felt + untagged 90# felt hot asphalt topped, Gory white tile laged in mortar. 4 ply built up roof on flat roof. aluminum came drip & copper valley metal, new lead stacks

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

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

Contract price \$ 13,300 Cost of permit \$ \_\_\_\_\_

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

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

Contractor Paul Lantier

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

Owner [Signature]

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

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

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

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

SP1282 Permit No. \_\_\_\_\_

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

3092

PAVER DRIVEWAY

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

Date 3092

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

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

Owner John Massad Present Address 17 E. Hi. Pt. Rd.

Phone 286-3733

Contractor T. Coast Pavers Address 7190 S.E. Fed. Hwy.

Phone 220-4554

Where licensed Martin Co. License number #SPO 1511

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

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

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

brick paver driveway

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

above

Subdivision Hi. Pt. Lot number \_\_\_\_\_ Block number \_\_\_\_\_

Contract price \$ 1,900<sup>xx</sup> Cost of permit \$ 25<sup>xx</sup> ~~\_\_\_\_\_~~

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

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

Contractor [Signature]

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

Owner [Signature]

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: [Signature] Building Inspector \_\_\_\_\_ Date \_\_\_\_\_

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

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

SP1282

Permit No. 3092

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

**3569**

**FENCE**

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

Date \_\_\_\_\_

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

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

Owner John Massad Present Address 17 E. Highpoint Rd  
Sewalls Point  
Phone 286-3733

Contractor All American Fence Address 20 Box 1369  
Phone 878-1650 Ft Pierce, FL

Where licensed St Lucie, Martin License number SP00872

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

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

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: 170 + 6' of 7' stockade wood fencing  
17 E Highpoint Rd

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

Subdivision High Point Lot number 58459 Block number 2

Contract price \$ 1,000.00 Cost of permit \$ 25.00

Plans approved as submitted Y/B Plans approved as marked \_\_\_\_\_

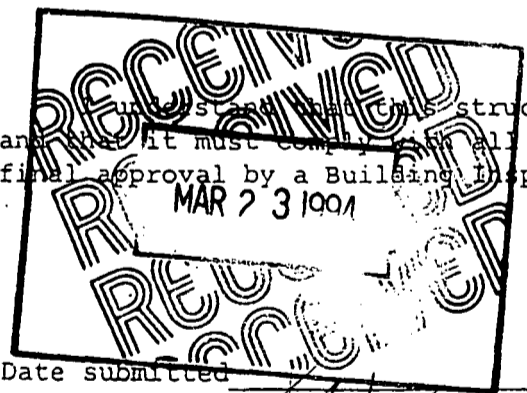
I understand that this permit is good for 12 months from the date of its issue and that the structure must be completed in accordance with the approved plan. I further understand that approval of these plans in no way relieves me of complying with the Town of Sewall's Point Ordinances and the South Florida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

Contractor Michael Dempsey

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

Owner John Massad

TOWN RECORD  
Approved: Dale Brown 3/24/94  
Building Inspector Date



Date submitted \_\_\_\_\_  
Approved: [Signature]  
Commissioner Date

Final Approval given: \_\_\_\_\_ Date

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

SP1282

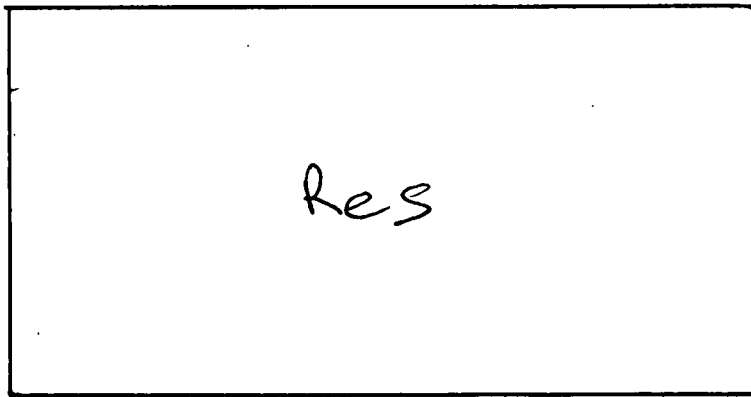
Permit No. \_\_\_\_\_

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

48'



1701



E. Highpoint Rd

**3723**

**WALL**

TAX FOLIO NO.

DATE 1-17-94

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

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

Owner John H. Hensel Present address 17 E Highpoint Road  
Phone 2863733

Contractor Self Address Same  
Phone Same

Where licensed \_\_\_\_\_ License number \_\_\_\_\_  
Electrical Contractor \_\_\_\_\_ License number \_\_\_\_\_  
Plumbing Contractor \_\_\_\_\_ License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Block Wall 6 1/2 High 70 Long

State the street address at which the proposed structure will be built:  
17 E Highpoint Road

Subdivision Highpoint Road Lot Number 58-59 Block Number \_\_\_\_\_  
Contract price \$ 800 Cost of permit \$ 24.00

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

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

Contractor Self

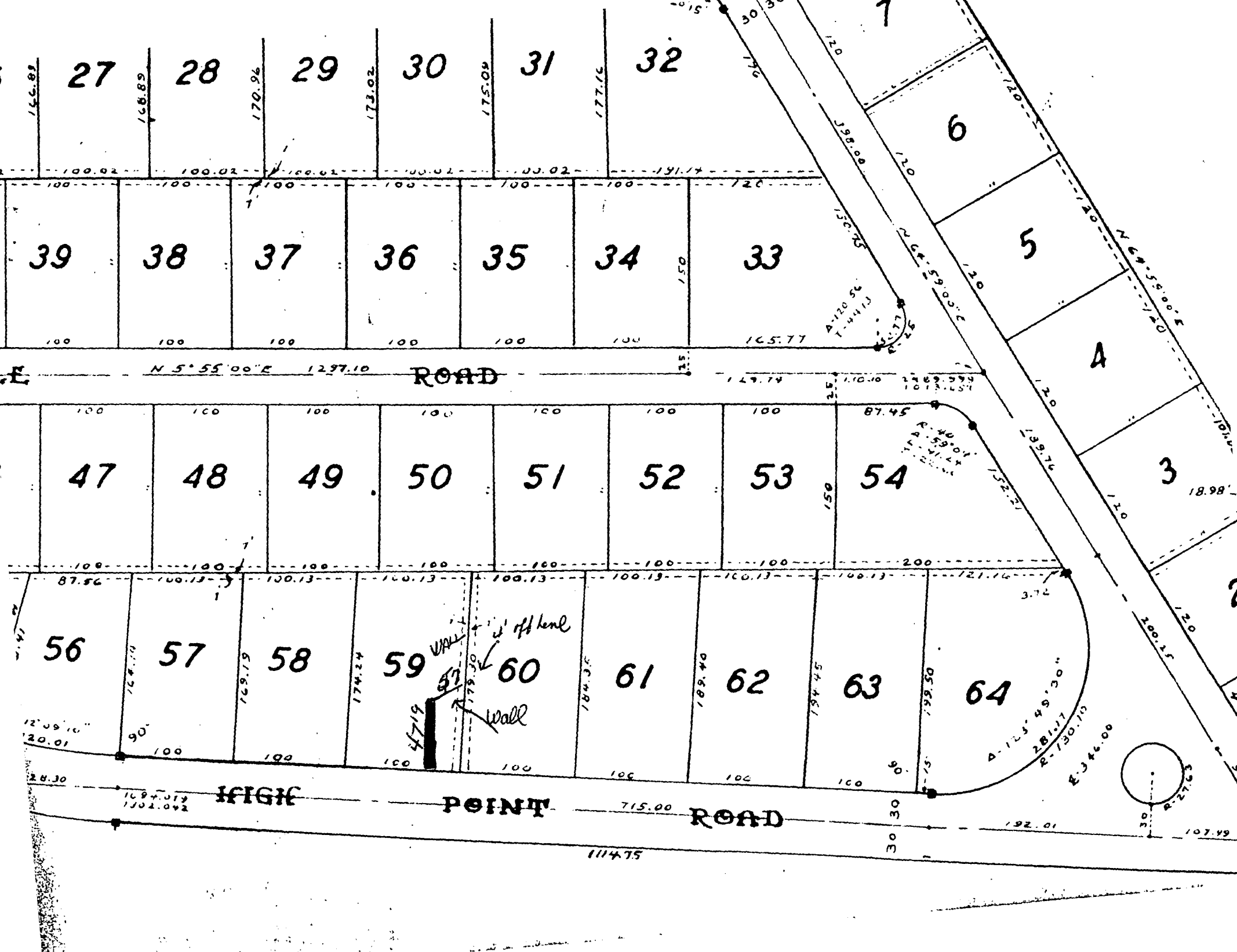
I understand that this structure must be in accordance with the approved plans and that it must comply with all code requirements of the Town of Sewall's Point before final approval by a Building Inspector will be given.

Owner John H. Hensel  
TOWN RECORD

Date submitted \_\_\_\_\_ Approved: \_\_\_\_\_  
Building Inspector \_\_\_\_\_ Date \_\_\_\_\_  
Approved: V. Van Final approval given: \_\_\_\_\_  
Commissioner \_\_\_\_\_ Date \_\_\_\_\_

CERTIFICATE OF OCCUPANCY issued (if applicable) \_\_\_\_\_  
Date \_\_\_\_\_ PERMIT NO. \_\_\_\_\_





27 28 29 30 31 32

39 38 37 36 35 34 33

N 5° 55' 00" E 1297.10 ROAD

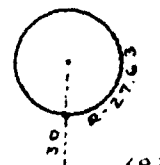
47 48 49 50 51 52 53 54

56 57 58 59 60 61 62 63 64

HIGHWAY POINT ROAD

wall  
off hand  
wall

R-27.25  
P-130.10  
E-346.00



3725

SCREEN ENCLOSURE

TAX FOLIO NO. 3725

DATE 1

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

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

Owner John Massard Present address 17 E High Point

Phone 286-3733

Contractor Anchor Awnings + Screens Inc address 17 E. High Point

Phone 335-1471

Where licensed State of Florida License number SC056666

Electrical Contractor \_\_\_\_\_ License number \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ License number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Removing existing pool enclosure + Replacing with new frame

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

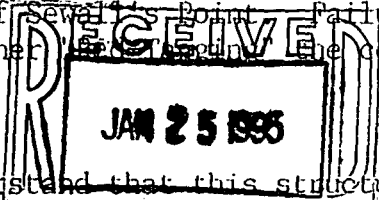
17 E High Point

Subdivision High Point Lot Number 55459 Block Number \_\_\_\_\_

Contract price \$ 3500 Cost of permit \$ 100.00

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

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



Contractor Genevieve Jackson

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

Owner John Massard

TOWN RECORD

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

Approved: Dale Brown 1/25/95  
Building Inspector Date

Approved: [Signature]  
Commissioner Date

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

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

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

TABLE 1: MAXIMUM SPANS FOR POOL ROOF MEMBERS ALUMINUM 6063 T-6 ALLOY

USING SCREEN PANEL WIDTH "W" FROM DRAWING SELECT SPAN "L" ON DRAWING

WIDTH "W" =	MAXIMUM SPAN "L"							
	3'	4'	5'	6'	7'	8'	9'	
EXTRUSIONS								
1"x2"x0.044"	9'-4"	8'-1"	7'-3"	6'-7"	6'-1"	5'-9"	5'-5"	
2"x2"x0.044"	12'-6"	10'-10"	9'-8"	8'-11"	8'-2"	7'-8"	7'-1"	
2"x2"x0.05"	13'-6"	11'-9"	10'-7"	9'-8"	9'-0"	8'-5"	7'-11"	
2"x2"x0.05" OR 2"x3"x0.093"								
	16'-11"	14'-9"	13'-3"	12'-2"	11'-3"	10'-7"	10'-0"	
SELF MATING BEAMS								
2"x4"x0.044"x0.12"	27'-4"	23'-10"	21'-4"	19'-7"	18'-2"	17'-0"	16'-0"	
2"x5"x0.05x0.12"	33'-6"	29'-9"	27'-11"	25'-1"	23'-7"	22'-5"	21'-5"	
2"x6"x0.05x0.12"	37'-6"	32'-6"	29'-9"	27'-0"	25'-1"	23'-6"	22'-2"	
2"x7"x0.05x0.12"	40'-9"	35'-11"	32'-3"	29'-7"	27'-5"	26'-1"	24'-3"	
2"x8"x0.07x0.22"	55'-3"	48'-0"	43'-3"	39'-9"	36'-1"	35'-4"	34'-8"	
2"x9"x0.07x0.22"	59'-10"	51'-10"	46'-9"	42'-11"	39'-11"	37'-6"	35'-5"	
2"x9"x0.07x0.31"	66'-5"	58'-2"	52'-4"	48'-0"	44'-7"	41'-10"	40'-1"	
SNAP EXTRUSIONS								
2"x2"x0.044"	14'-0"	12'-3"	10'-11"	10'-0"	9'-2"	8'-8"	8'-2"	
2"x3"x0.045"	18'-5"	16'-1"	14'-5"	13'-2"	12'-3"	11'-5"	10'-10"	
2"x4"x0.045"	23'-2"	20'-0"	18'-1"	16'-6"	15'-3"	14'-4"	13'-6"	
2"x6"x0.064"	37'-2"	32'-10"	29'-6"	27'-0"	25'-1"	23'-6"	22'-2"	
2"x7"x0.078"	43'-2"	37'-9"	34'-0"	31'-2"	29'-0"	27'-2"	25'-8"	

DOES NOT INCLUDE LENGTH OF KNEE BRACE. ADD HORIZONTAL LENGTH OF KNEE BRACE TO ABOVE SPANS FOR TOTAL SPAN.

TABLE 1a: MAXIMUM HEIGHTS FOR POOL WALL MEMBERS ALUMINUM 6063 T-6 ALLOY FOR AREAS SUBJECT TO ICE AND WIND LOADS. SUGGESTED FOR AREAS NORTH OF THE LATITUDE OF JACKSONVILLE, FL.

USING SCREEN PANEL WIDTH "W" FROM DRAWING SELECT SPAN "L" ON DRAWING

WIDTH "W" =	MAXIMUM SPAN "L"							
	3'	4'	5'	6'	7'	8'	9'	
EXTRUSIONS								
1"x2"x0.044"	6'-2"	5'-3"	4'-10"	4'-5"	4'-1"	3'-7"	3'-4"	
2"x2"x0.044"	8'-3"	7'-3"	6'-5"	5'-11"	5'-6"	6'-1"	4'-10"	
2"x3"x0.05" OR 2"x2"x0.093"								
	11'-7"	10'-1"	9'-0"	8'-3"	7'-8"	7'-2"	6'-9"	
SELF MATING BEAMS								
2"x4"x0.044"x0.12"	18'-6"	16'-1"	14'-6"	13'-3"	12'-3"	11'-6"	10'-11"	
2"x5"x0.05x0.12"	22'-11"	19'-1"	17'-1"	15'-8"	14'-6"	13'-7"	12'-9"	
2"x6"x0.05x0.12"	25'-9"	22'-5"	20'-0"	18'-4"	17'-0"	15'-11"	15'-1"	
2"x7"x0.05x0.12"	28'-3"	24'-7"	22'-0"	20'-7"	18'-8"	17'-6"	16'-6"	
2"x8"x0.07x0.22"	38'-2"	33'-3"	29'-11"	27'-4"	25'-4"	23'-9"	22'-5"	
2"x9"x0.07x0.22"	41'-5"	36'-1"	32'-5"	29'-7"	27'-6"	25'-9"	24'-3"	
2"x9"x0.07x0.31"	45'-11"	40'-0"	35'-5"	32'-11"	30'-6"	28'-6"	28'-6"	
SNAP EXTRUSIONS								
2"x2"x0.044"	9'-6"	8'-3"	7'-5"	6'-9"	6'-3"	5'-11"	5'-6"	
2"x3"x0.045"	12'-6"	10'-10"	9'-9"	8'-11"	8'-3"	7'-9"	7'-3"	
2"x4"x0.045"	17'-8"	15'-4"	13'-9"	12'-7"	11'-8"	10'-11"	10'-4"	
2"x6"x0.064"	25'-8"	22'-5"	20'-1"	18'-4"	17'-0"	15'-11"	15'-5"	
2"x7"x0.078"	29'-11"	26'-0"	23'-4"	21'-4"	19'-9"	18'-6"	17'-9"	

DOES NOT INCLUDE LENGTH OF KNEE BRACE. ADD HORIZONTAL LENGTH OF KNEE BRACE TO ABOVE HEIGHTS FOR TOTAL SPAN.

TABLE 2: MAXIMUM HEIGHTS FOR POOL WALL MEMBERS ALUMINUM 6063 T-6 ALLOY

USING SCREEN PANEL WIDTH "W" FROM DRAWING SELECT SPAN "L" ON DRAWING

WIDTH "W" =	MAXIMUM SPAN "L"							
	3'	4'	5'	6'	7'	8'	9'	
EXTRUSIONS								
1"x2"x0.044"	6'-10"	5'-11"	5'-4"	4'-10"	4'-6"	4'-2"	3'-11"	
2"x2"x0.044"	9'-2"	7'-11"	7'-1"	6'-6"	6'-0"	5'-7"	5'-3"	
2"x3"x0.05" OR 2"x2"x0.093"								
	12'-10"	11'-1"	9'-11"	9'-1"	8'-5"	7'-10"	7'-5"	
SELF MATING BEAMS								
2"x4"x0.044"x0.12"	20'-6"	17'-9"	15'-11"	14'-6"	13'-5"	12'-6"	11'-10"	
2"x5"x0.05x0.12"	25'-2"	20'-10"	18'-10"	17'-5"	16'-4"	14'-5"	13'-9"	
2"x6"x0.05x0.12"	28'-6"	24'-8"	22'-1"	20'-2"	18'-8"	17'-5"	16'-5"	
2"x7"x0.05x0.12"	31'-2"	27'-1"	24'-3"	22'-1"	20'-6"	19'-2"	18'-1"	
2"x8"x0.07x0.22"	42'-5"	36'-8"	32'-1"	30'-0"	27'-9"	25'-11"	24'-5"	
2"x9"x0.07x0.22"	45'-11"	39'-10"	35'-7"	32'-6"	30'-11"	28'-2"	26'-6"	
2"x9"x0.07x0.31"	51'-0"	44'-2"	39'-6"	36'-0"	33'-4"	31'-3"	29'-5"	
SNAP EXTRUSIONS								
2"x2"x0.044"	10'-6"	9'-1"	8'-2"	7'-5"	6'-10"	6'-5"	6'-1"	
2"x3"x0.045"	13'-10"	12'-0"	10'-8"	9'-7"	9'-0"	8'-5"	8'-0"	
2"x4"x0.045"	17'-5"	15'-1"	13'-6"	12'-3"	11'-4"	10'-8"	10'-0"	
2"x6"x0.064"	28'-6"	24'-8"	22'-1"	20'-2"	18'-8"	17'-5"	16'-5"	
2"x7"x0.078"	33'-1"	28'-8"	25'-8"	23'-5"	21'-8"	20'-3"	19'-1"	

DOES NOT INCLUDE LENGTH OF KNEE BRACE. ADD VERTICAL LENGTH OF KNEE BRACE TO ABOVE HEIGHTS FOR TOTAL HEIGHT.

TABLE 3: MINIMUM # SCREWS FOR CONNECTING BEAMS TO UPRIGHTS ALUMINUM 6063 ALLOY T-6

BEAM SIZE	MIN. UPRIGHT SIZE	# SIZE OF SCREWS REQ'D*
2"x 3"	2"x 3"	4 # 10 x 1/2" DOUBLE SHEAR
2"x 4"	2"x 3"	5 # 10 x 1/2" DOUBLE SHEAR
2"x 5"	2"x 3"	6 # 10 x 1/2" DOUBLE SHEAR
2"x 6"	2"x 4"	8 # 10 x 1/2" DOUBLE SHEAR
2"x 7"	2"x 4"	12 # 10 x 1/2" DOUBLE SHEAR
2"x 8"	2"x 4"	14 # 10 x 1/2" DOUBLE SHEAR
2"x 9"	2"x 5"	16 # 10 x 1/2" DOUBLE SHEAR

\* REFERS TO BOTH SIDES OF THE CONNECTION OF THE BEAM & UPRIGHT

TABLE 4: MINIMUM SIZES FOR POOL ENCLOSURE KNEE BRACES AND ANCHORING REQ'D ALUMINUM 6063 T-6 ALLOY

BRACE L.	EXTRUSION	ANCHOR SYSTEM
0'-2"-6"	2"x 2"x 0.044"	2" H-CHANNEL W/ 3# 10/ 1/2" EA. SIDE
TO-3'-6"	2"x 3"x 0.050"	2" H-CHANNEL W/ 3# 10/ 1/2" EA. SIDE
TO-4'-6"	2"x 4"x 0.044" x 0.12"	NOTCH SHB OVER BEAM & UPRIGHT. SEE TABLE 3 FOR #/6 SIZE OF SCREWS
TO-5'-6"	2"x 6"x 0.044" x 0.12"	NOTCH SHB OVER BEAM & UPRIGHT. SEE TABLE 3 FOR #/6 SIZE OF SCREWS

NOTE: All spans and capacities are based on worst case of uplift loads due to wind velocities.

92-0270

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**LAWRENCE E. BENNETT**

CIVIL ENGINEER & DEVELOPMENT CONSULTANT  
P.O. Box 4368 South Daytona, FL 32121-4368  
Phone no.: (904) 253-9960

MEETS THE REQUIREMENTS OF CHAPTER 1205 SBC 1891 ED

*Lawrence E. Bennett*

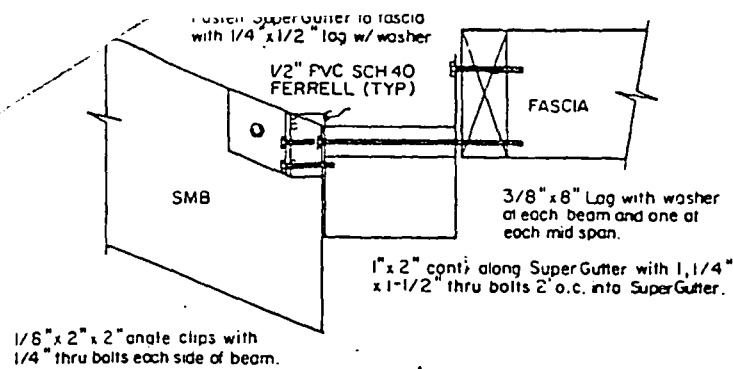
DEC 02 1992

SEAL

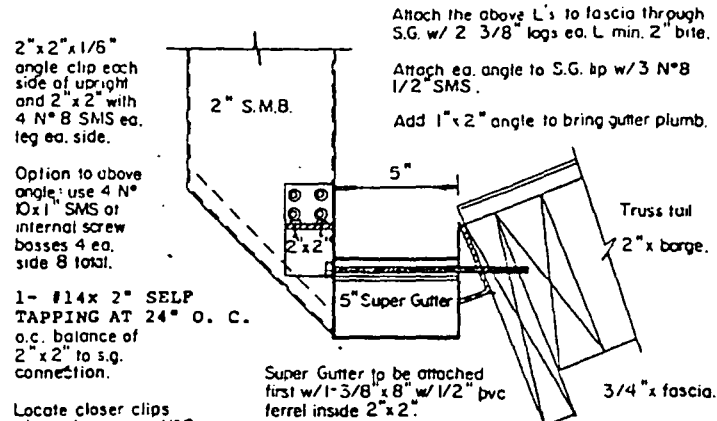
SP

DRAWN  
LWB

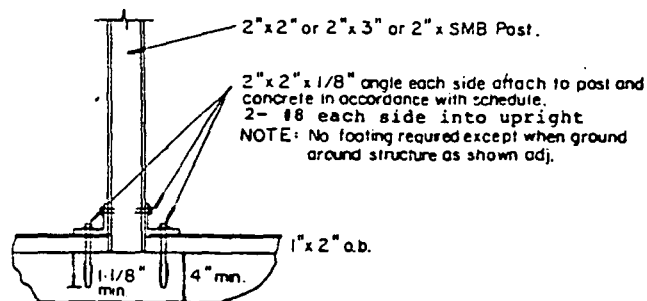
SHEET 3 OF 3



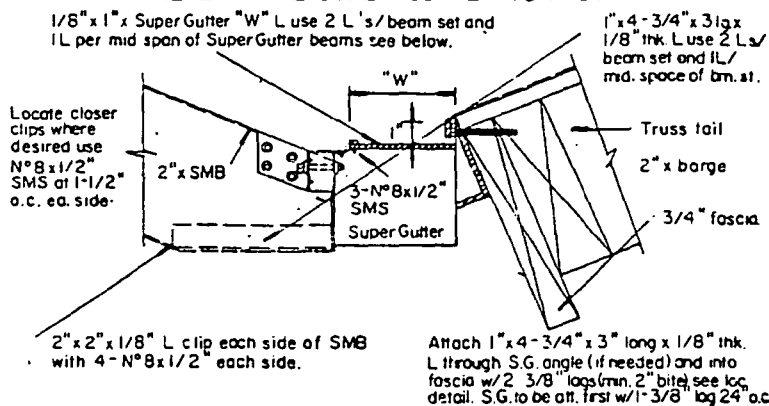
SMB CONNECTION TO SUPERGUTTER



ALTERNATIVE SUPER GUTTER TO FASCIA

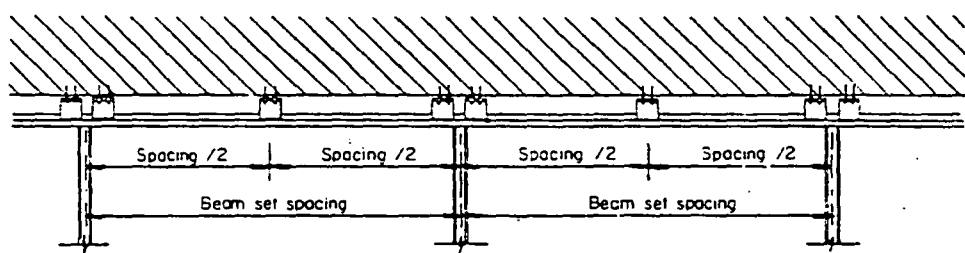


POST TO CONCRETE DETAIL

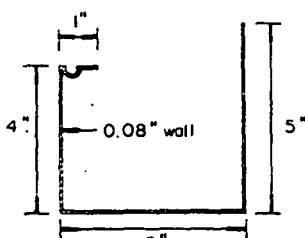


SELF MATING BEAM CONNECTION TO SUPERGUTTER

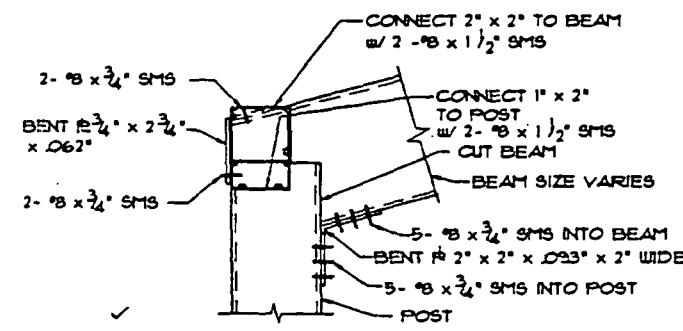
4" or 5" SUPER GUTTER



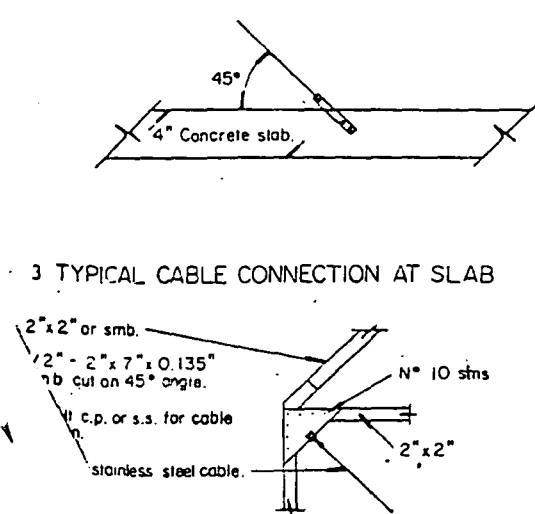
ANGLE LOCATION FOR 5" SUPER GUTTER REINFORCEMENT



5" SUPER GUTTER

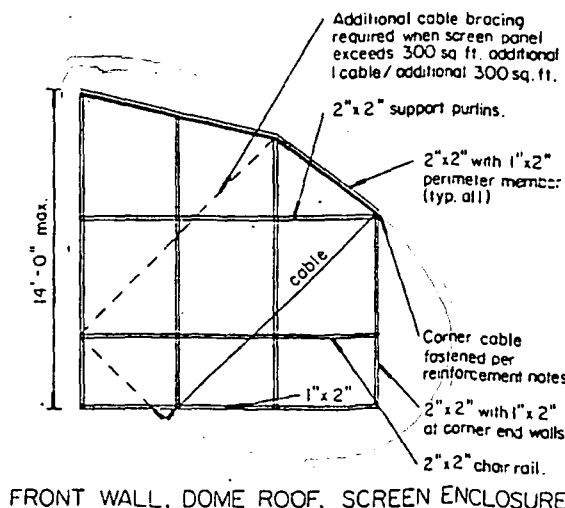
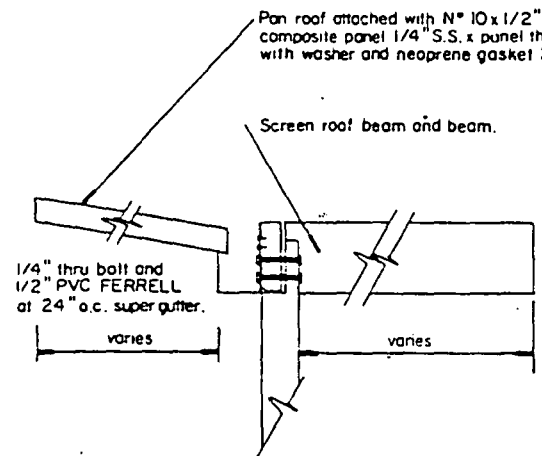


TYPICAL BEAM & POST CONNECTIONS

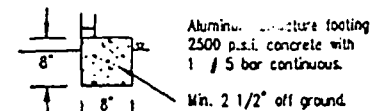


3 TYPICAL CABLE CONNECTION AT SLAB

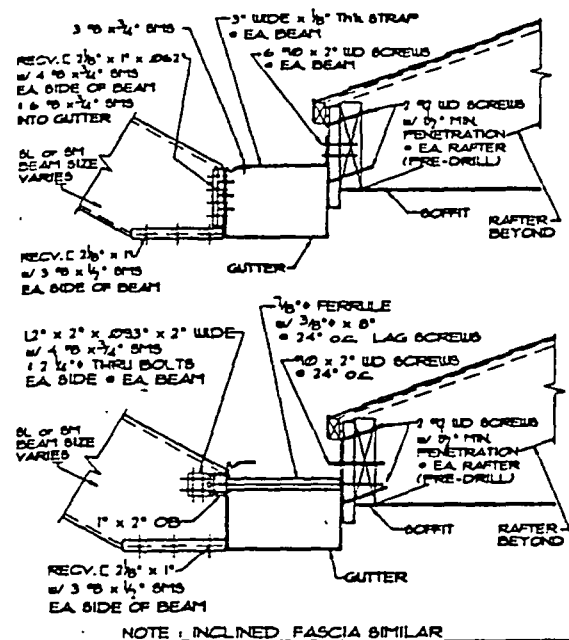
CABLE CONNECTION AT CORNER



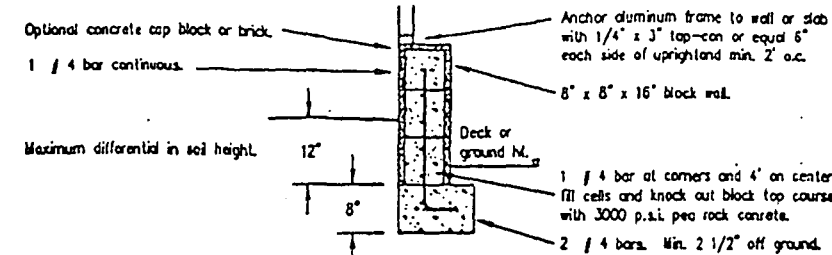
FRONT WALL, DOME ROOF, SCREEN ENCLOSURE



RIBBON FOOTING FOR SCREENED ENCLOSURES

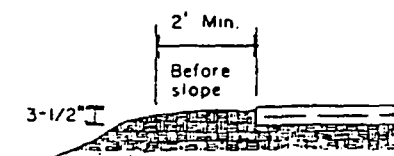


TYPICAL SL OR SM BEAM & GUTTER CONNECTION



KNEE WALL FOOTING FOR SCREENED ENCLOSURES

SLAB DETAILS ADDRESSING EROSION

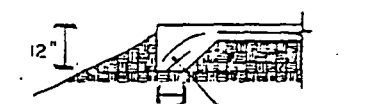


FLAT SLOPE/NO FOOTING  
0 - 2" / 12"



MODERATE SLOPE FOOTING  
2" / 12" - 1' - 10"

NOTE: Fiber mesh conc. does not require wire mesh.



STEEP SLOPE FOOTING  
> 1' - 10"

NOTE: All spans and capacities are based on worst case of uplift loads due to wind velocities.

92-0270

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Phone no.: (904) 253-9960

MEETS THE REQUIREMENTS OF CHAPTER 1205 SBC 1991 ED

Signature of Lawrence E. Bennett  
DEC 02 1992  
SEAL

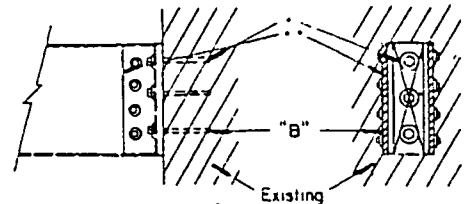
SP

DRAWN  
LWB

SHEET 2 OF 3

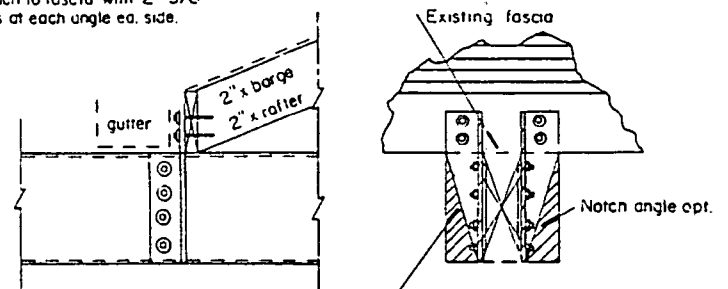
2"x2"x1/8"x6" Long U channel "B" Attaches to existing building with 4-3/8" lags at wood with 3-1/4" anchors at concrete.

2"x2"x1/8"x6" Long U channel "B" attaches to 2"x\_smb

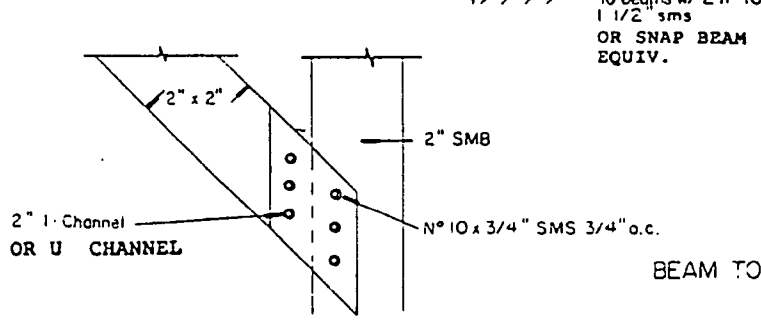
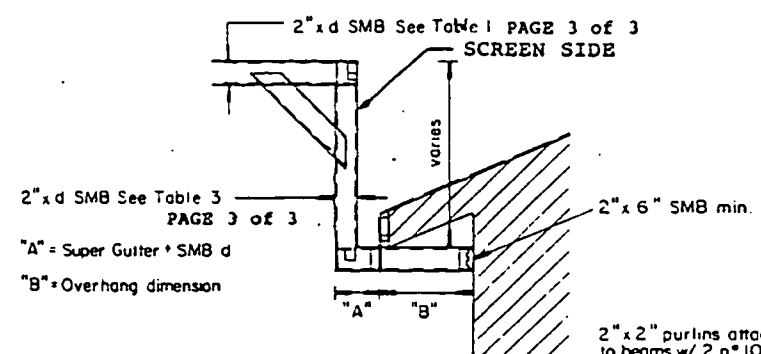


DOWN BEAM CONNECTION TO WALL

2"x2"x1/8"x8" long angles "A" Attach to fascia with 2-3/8" lags at each angle ea. side.



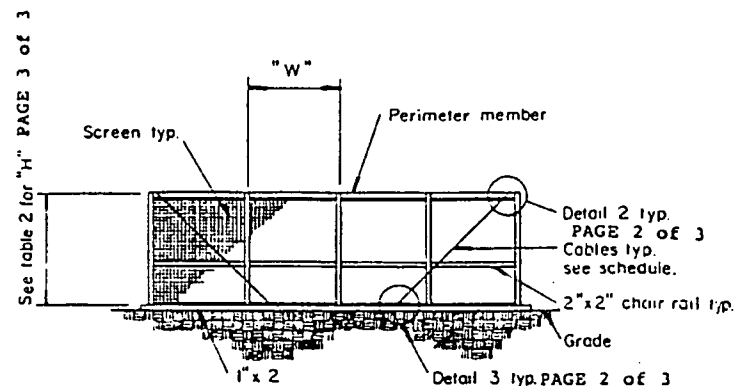
DOWN BEAM CONNECTION ENLARGED



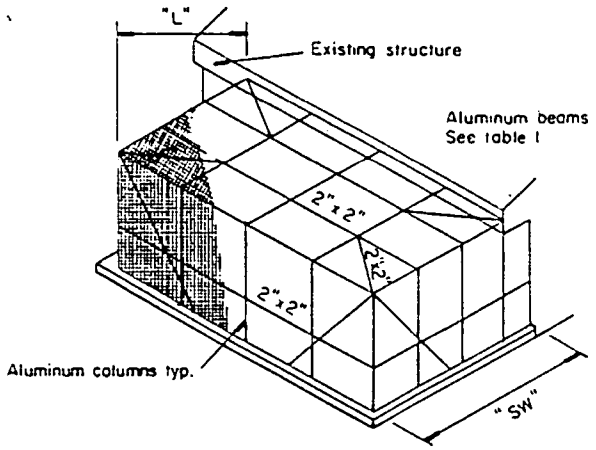
2"x2" AND 2"x3" KNEE BRACE CONNECTION DETAIL

TABLE 1: MINIMUM SIZES FOR POOL ENCLOSURE KNEE BRACES AND ANCHORING REQ'D ALUMINUM 6063 T-6 ALLOY

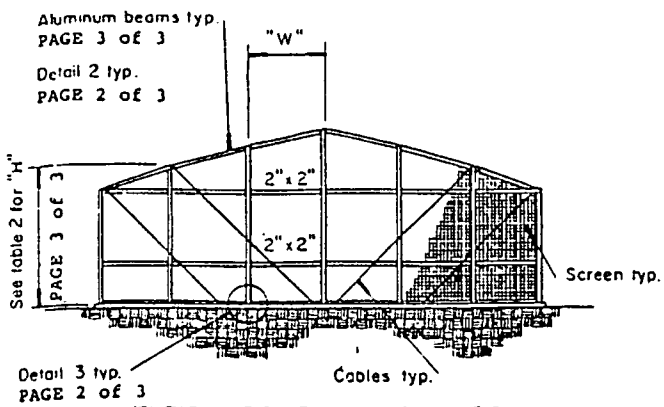
BRACE L.	EXTRUSION	ANCHOR SYSTEM
2'-6"	2"x 2"x 0.050"	2" H-CHANNEL w/ 3-# 10/ 1/2" EACH SIDE
TO 3'-6"	2"x 3"x 0.050"	2" H-CHANNEL w/ 3-# 10/ 1/2" EACH SIDE
TO 4'-6"	2"x 4"x 0.050"	NOTCH SMB OVER BEAM & UPRIGHT SEE TABLE 3 FOR # & SIZE OF SCREWS
TO 5'-6"	2"x 6"x 0.050"	SAME AS ABOVE NOTE



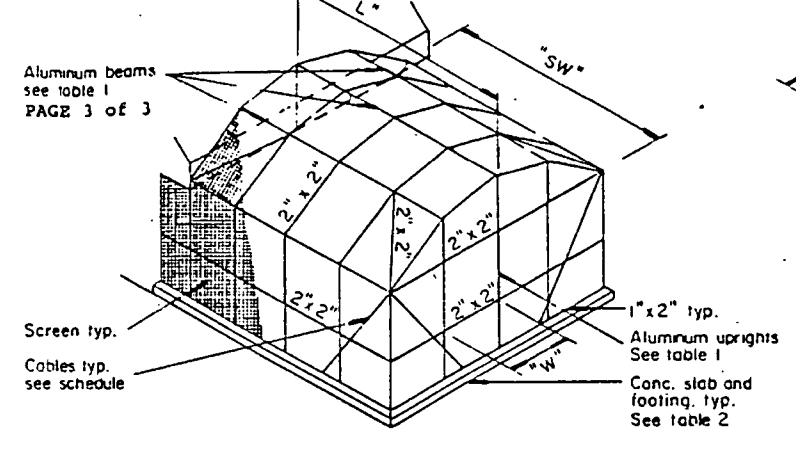
TYPICAL FLAT ROOF ELEVATION N.T.S.



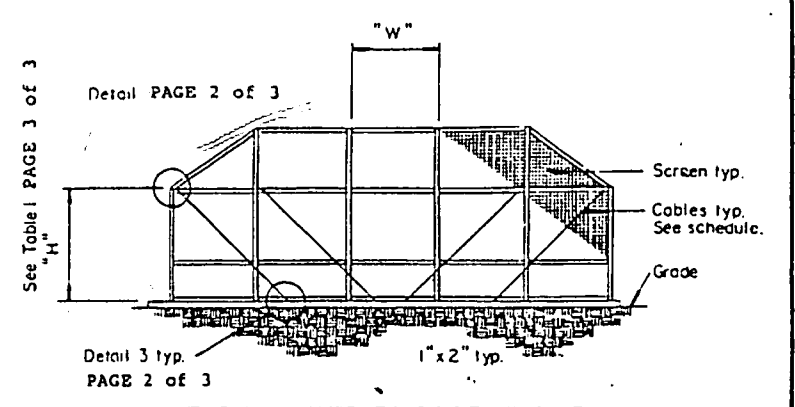
TYPICAL FLAT ROOF ISOMETRIC N.T.S.



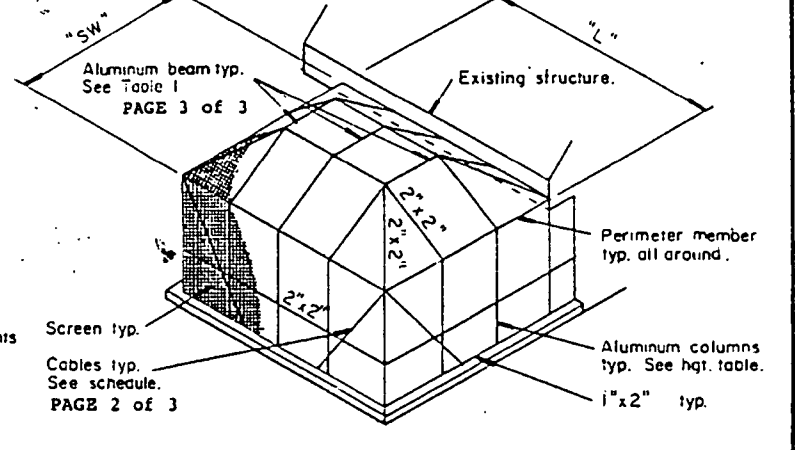
TYPICAL DOME ROOF ELEVATION N.T.S.



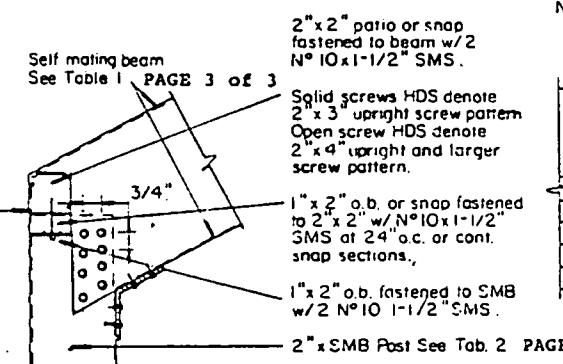
TYPICAL DOME ROOF ISOMETRIC N.T.S.



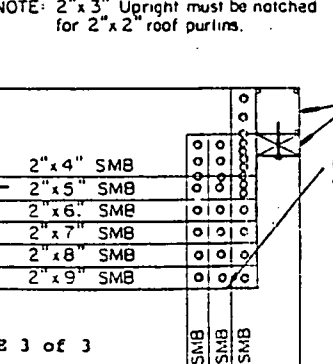
TYPICAL MANSARD ROOF ELEVATION N.T.S.



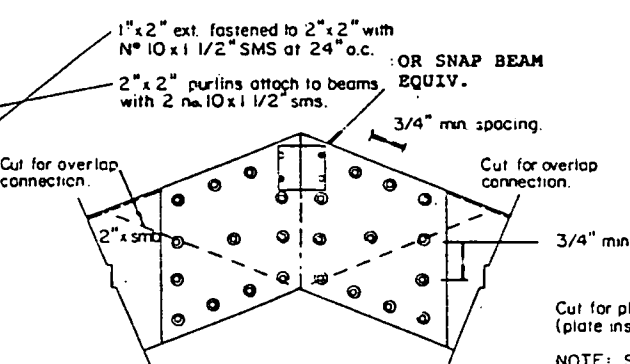
TYPICAL MANSARD ROOF ISOMETRIC N.T.S.



BEAM TO UPRIGHT CONNECTION DETAIL NO 1



BEAM TO UPRIGHT CONNECTION DETAIL NO 2



TYPICAL SIDE PLATE CONNECTION DETAIL NO 3

NOTES FOR RIGID CONNECTION OF DETAIL NO 1, 2, 3

- 2"x3" Upright must be notched to reach top of beam to achieve rigid connection.
- N# of screws must be as shown spacing 3/4" x 3/4" min. spacing and pattern may vary.
- See Table 3 for N# of screws and minimum size of upright / beam connection
- Hex head self tapping screws are an acceptable substitute for SMS
- IF BEAM IS NOTCHED TO RECEIVE UPRIGHT ADDITIONAL SCREWS ARE NOT REQUIRED FOR 2"x 3" UPRIGHT.

**ANCHOR SCREENS, INC.**  
2501 S.E. Jason Avenue  
Port St. Lucie, FL 34952

407-335-1471

- NOTES:
- "W" = Screen panel spacing.
  - "L" = Maximum beam span without knee brace add length of knee brace to span from span tables.
  - "H" = Maximum upright heights.
  - "SW" = Side walls can be framed without top beam and can be smallest extrusions allowed in span tables. (min. 2"x2"x0.04")

TABLE 1 PG 3 of 3

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MEETS THE REQUIREMENTS OF CHAPTER 1205 SBC 1991 ED

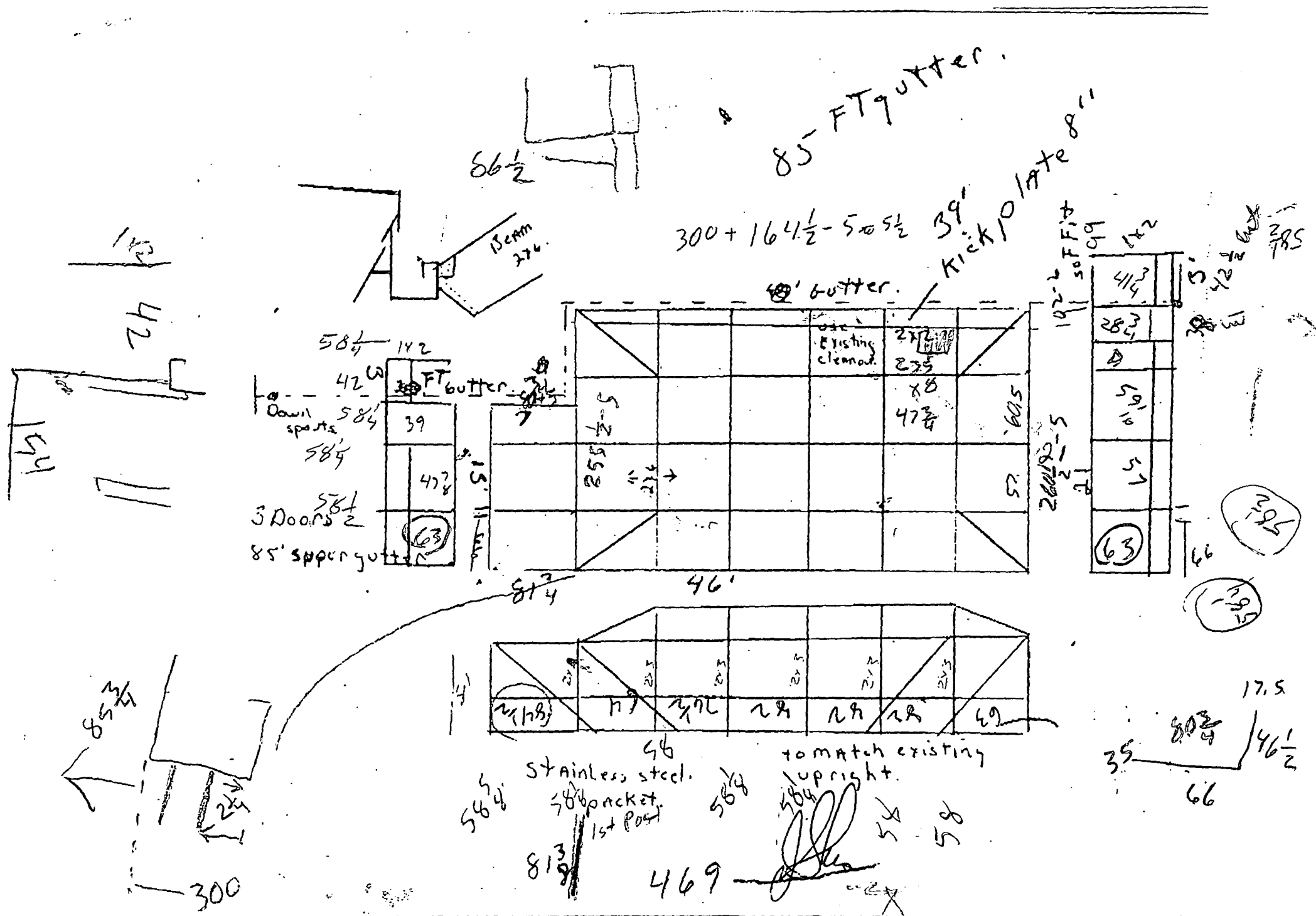
**LAWRENCE E BENNETT**  
CIVIL ENGINEER & DEVELOPMENT CONSULTANT  
P.O. Box 4368 South Daytona, FL 32121-4368  
Phone no.: (904) 253-9960

SP SCREENED ENCLOSURES

DRAWN LWE SHEET 1 OF 3

DEC 02 1992 SEAL

92-0270

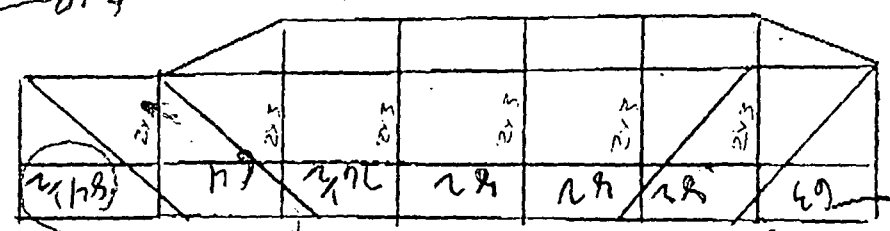
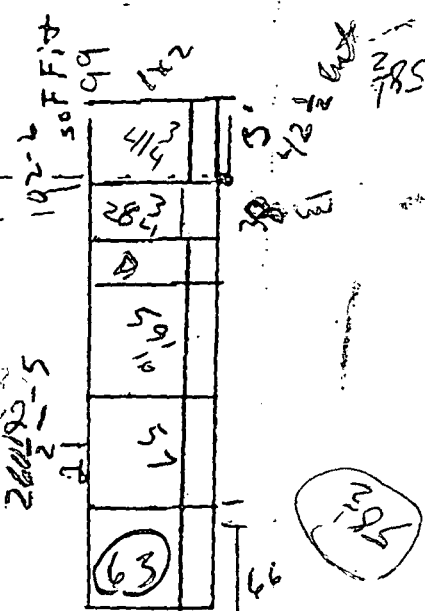
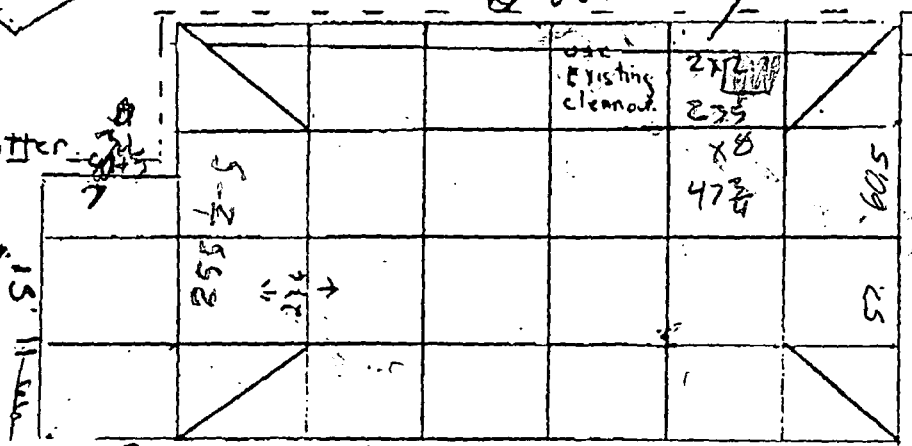


85 FT gutter.

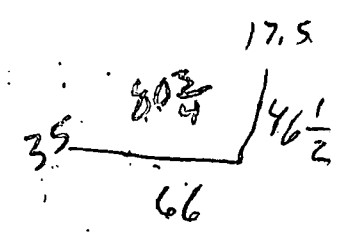
300 + 16 1/2 - 5 1/2 39' Kick plate 8"

6' gutter.

58 1/4 142  
42  
Down sports 58 1/4  
58 1/4  
3 Doors 58 1/4  
85' spper gutter  
30 FT gutter  
39  
47 1/2  
(63)



46  
Stainless steel.  
58 1/4 pocket.  
1st Post  
58 1/4  
81 1/4  
469  
to match existing upright.  
58 1/4  
58  
58



Payment 1/3 Down, Balance Due Upon Completion.

Signature

**3902**

**FENCE**



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

**3902**

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

Owner John Massad Present address 17 E. Highpoint Rd  
Phone 286-3733

Contractor All American Fence Address PO Box 13269  
Phone 878-1650 FL. Pierce, FL 34979

Where licensed Martin License number SP00872

Electrical Contractor \_\_\_\_\_ License number \_\_\_\_\_

Plumbing Contractor \_\_\_\_\_ License number \_\_\_\_\_

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

43' - 7' high stockade fence

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

17 E. Highpoint Rd

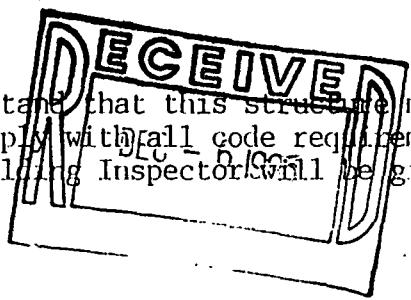
Subdivision High Point Lot Number 58 & 59 Block Number \_\_\_\_\_

Contract price \$ 985.<sup>00</sup> Cost of permit \$ 25.<sup>00</sup>

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

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

Contractor Michael J. Dempsey



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

Owner \_\_\_\_\_

TOWN RECORD

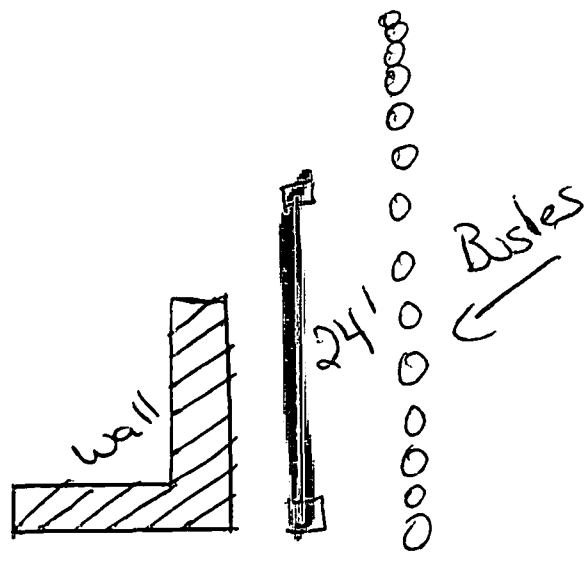
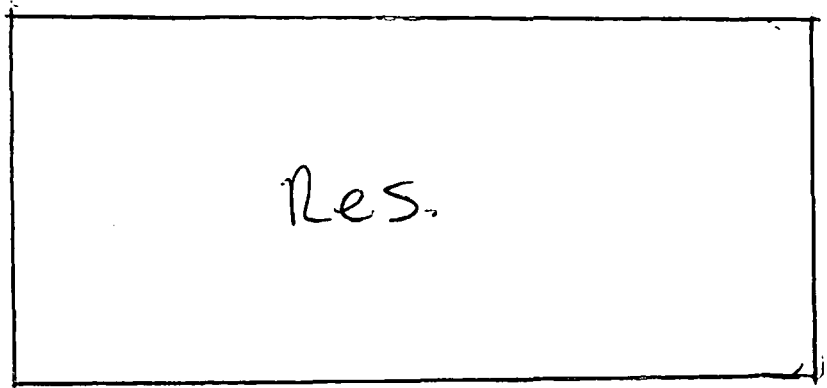
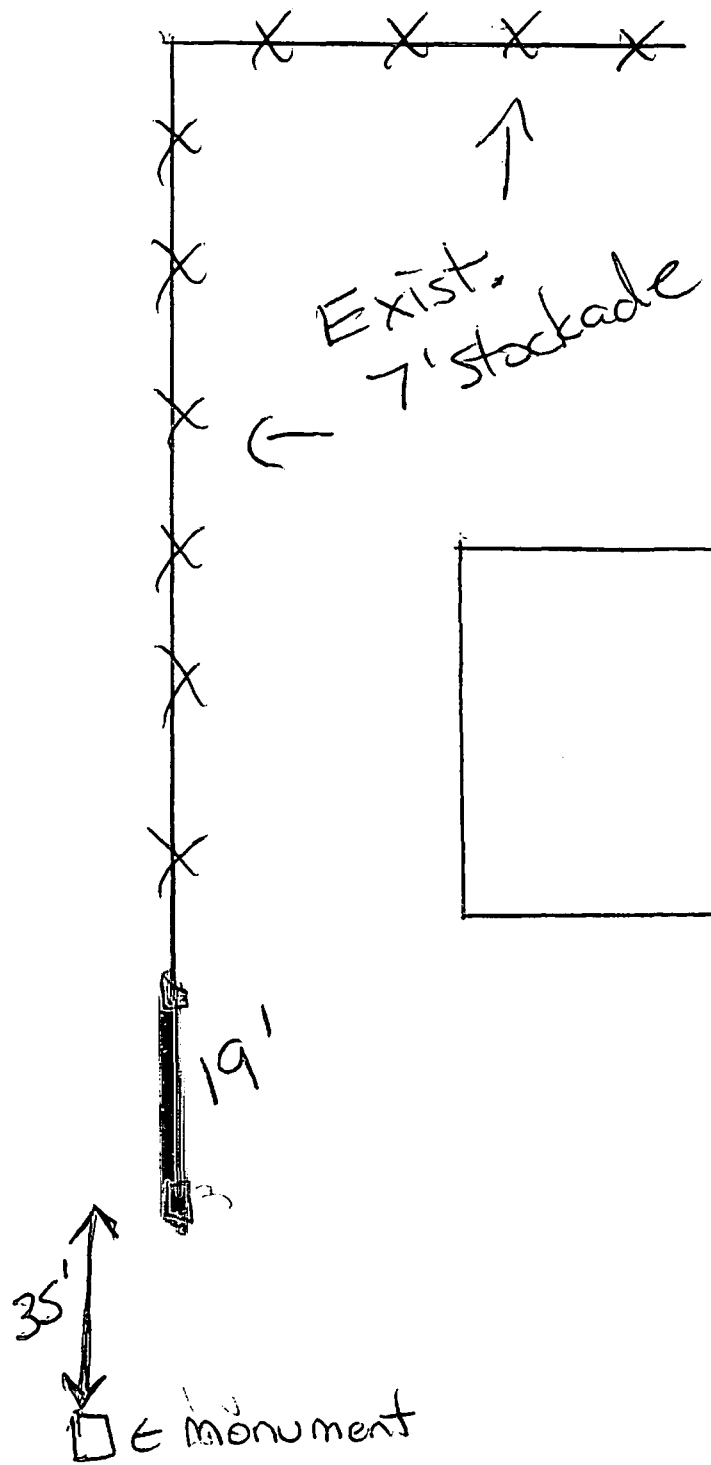
Date submitted \_\_\_\_\_

Approved: Dale Brown 12/8/95  
Building Inspector Date

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

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

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



**5258**

**RE-ROOF**

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 2/9/01

BUILDING PERMIT NO. 5258

Building to be erected for JOHN MASSAD

Type of Permit RE ROOF (TILE)

Applied for by PACIFIC ROOFING (Contractor)

Building Fee \_\_\_\_\_

Subdivision HIGH POINT Lot 58 & 59 Block \_\_\_\_\_

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

Address 17 E. HIGH POINT

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

Type of structure S.F.R.

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

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

Parcel Control Number: 13-38-41-002-000-00580-30000

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

Amount Paid \$120.00 Check # 5908 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

Roofing Fee \$120.00

Total Construction Cost \$ 20,000.00

TOTAL Fees \$120.00

Signed Rob Austin  
Applicant

Signed [Signature]  
Town Building Inspector

# RE-ROOFING PERMIT

INSPECTIONS			
DRY IN	DATE _____	PROGRESS	DATE _____
PROGRESS	DATE _____	FINAL	DATE <u>2/26/01</u>

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

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

**MONDAY TROUGH 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!**

# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
01/09/2001

PRODUCER (561)746-4546 FAX (561)746-9599

Requesta Agency, Inc.  
393 Tequesta Drive  
Tequesta, FL 33469

**FILE**

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

INSURERS AFFORDING COVERAGE

INSURED Pacific Roofing Corp., Inc.

PO Box 2697  
Stuart, FL 34994

**FILE**

*PERMIT*

**CO**

INSURER A: Transcontinental Insurance co.

INSURER B:

INSURER C:

INSURER D:

INSURER E:

**RECEIVED**

JAN 10 2001

COVERAGES

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

SR TR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	C2020206931	10/28/2000	10/28/2001	EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 50,000
					MED EXP (Any one person) \$ 5,000
					PERSONAL & ADV INJURY \$ 1,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COM/OP AGG \$ 2,000,000
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	C2020206945	10/28/2000	10/28/2001	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$
					AGGREGATE \$
					\$
					\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER
					E.L. EACH ACCIDENT \$
					E.L. DISEASE - EA EMPLOYEE \$
					E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWN OF SEWALLS POINT  
ATTN: ED ARNOLD  
1 SOUTH SEWALLS POINT ROAD  
STUART, FL 34996

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

AUTHORIZED REPRESENTATIVE

Charles Martyn III/DEBBIE

*C.P. Martyn III*

**Certificate of Insurance**

issued as a matter of information only and confers no rights upon you the certificate holder. This certificate is not an insurance policy and does not amend, alter or change the coverage afforded by the policies listed below.

**Named Insured(s):**

Staff Leasing, LP, By Staff Acquisition, Inc., The General Partner, And The Affiliated Limited Partnerships Of Which Staff Acquisition, Inc. Is The General Partner And Staff Leasing, Inc. Is The Limited Partner Including Staff Leasing of Texas, LP, Staff Leasing of Texas II, LP, Staff Leasing IV, LP  
600 301 Boulevard West, Suite 202  
Bradenton, Florida 34205

**RECEIVED**  
JAN 11 2001  
BY: *[Signature]*



**FILE** *lie/rai*

**Insurer Affording Coverage**  
Continental Casualty Company

**Coverages:**

The policy(ies) of insurance listed below have been issued to the insured named above for the policy period indicated. The insurance afforded by the policy(ies) described herein is subject to all the terms, exclusions and conditions of such policy(ies).

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
			Employer's Liability	
Workers' Compensation	1-1-2002	WC 189165165 WC 189165182 WC 247848874 WC 247848888	Bodily Injury By Accident	Each Accident
			\$1,000,000	
			Bodily Injury By Disease	Policy Limit
			\$1,000,000	Each Person

Other:

Employees Leased To: 16455 Pacific Roofing Corp Inc      Effective Date: 1/1/01

The above referenced workers' compensation policy(ies) provide(s) statutory benefits only to the employees of the Named Insured(s) on such policy(ies), not to the employees of any other employer.

\*If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date. However, you will not be notified annually of the continuation of coverage.

**Notice of Cancellation:** (Not applicable unless a number of days are entered below)

Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policy(ies) until at least 30 days notice of such cancellation has been mailed to:

**Certificate Holder:**

Town of Sewall Point  
Attn Nancy  
1 S Sewalls Point Rd  
Stuart, FL 34996-6736

*Martin Oosterbaan*

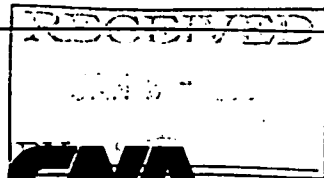
Martin Oosterbaan  
Authorized Representative

Office: St. Louis, MO      12/15/00  
Phone: (877) 427-5567      Date Issued

**Certificate of Insurance**

issued as a matter of information only and confers no rights upon you the certificate holder. This certificate is not an insurance policy and does not amend, alter or change the coverage afforded by the policies listed below.

**FILE**



**CNA  
RISK MANAGEMENT**

**Named Insured(s):**

Staff Leasing, LP, By Staff Acquisition, Inc., The General Partner, And The Affiliated Limited Partnerships Of Which Staff Acquisition, Inc. Is The General Partner And Staff Leasing, Inc. Is The Limited Partner including Staff Leasing of Texas, LP, Staff Leasing of Texas II, LP, Staff Leasing IV, LP  
600 301 Boulevard West, Suite 202  
Bradenton, Florida 34205

**Insurer Affording Coverage**  
Continental Casualty Company

**Coverages:**

The policy(ies) of insurance listed below have been issued to the insured named above for the policy period indicated. The insurance afforded by the policy(ies) described herein is subject to all the terms, exclusions and conditions of such policy(ies).

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
Workers' Compensation	1-1-2002	WC 189165165 WC 189165182 WC 247848874 WC 247848888	<b>Employer's Liability</b>	
			Bodily Injury By Accident \$1,000,000	Each Accident
			Bodily Injury By Disease \$1,000,000	Policy Limit
			Bodily Injury By Disease \$1,000,000	Each Person

**Other:**

**Employees Leased To:** 16459 Pacific Roofing Corp Inc Office      **Effective Date:** 1/1/01

The above referenced workers' compensation policy(ies) provide(s) statutory benefits only to the employees of the Named Insured(s) on such policy(ies), not to the employees of any other employer.

\*If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date. However, you will not be notified annually of the continuation of coverage.

**Notice of Cancellation:** (Not applicable unless a number of days are entered below)  
Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policy(ies) until at least 30 days notice of such cancellation has been mailed to:

**Certificate Holder:**

Town of Sewall Point  
1 S Sewalls Point Rd  
Stuart, FL 34996-6736



*Martin Oosterbaan*  
\_\_\_\_\_  
Martin Oosterbaan  
Authorized Representative

Office: St. Louis, MO      12/15/00  
Phone: (877) 427-5567      Date Issued

BATCH NUMBER



JEB BUSH  
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON  
SECRETARY

**FILE**  
*hep/ris*

RECEIVED  
SEP 22 2000  
BY: *[Signature]*





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

Bldg. Permit Number: \_\_\_\_\_

**RECEIVED**

FEB - 8 2001

Owner or Titleholder's Name JOHN MASSAD Phone No. ( ) \_\_\_\_\_

Street: 17 EAST HIGH POINT ROAD City BY: C. J. AND State: FL Zip 34996

Legal Description of Property: HIGH POINT LOTS 58 & 59 000 40 EX EXPIRES IN 1990

Parcel Number: B-38-41-002-000-0058.0-30000

Location of Job Site: 17 EAST HIGH POINT

TYPE OF WORK TO BE DONE: REMOVE EXISTING CEMENT TILE - INSTALL ALUMINA TILE ROOF SYSTEM.

CONTRACTOR/Company Name: PACIFIC ROOFING Phone No. ( ) 293-1663

Street: P.O. BOX 2697 STUART, FL City STUART State: FL Zip 34995

State Registration: \_\_\_\_\_ State License: CCC056793

ARCHITECT: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

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

ENGINEER: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

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

AREA SQUARE FOOTAGE (SEWER - ELECTRICAL)

Living Area: 524 Garage Area: \_\_\_\_\_ Carport: \_\_\_\_\_ Accessory Bldg: \_\_\_\_\_

Covered Patio: \_\_\_\_\_ Scr. Porch: \_\_\_\_\_ Wood Deck: \_\_\_\_\_

Type Sewage: \_\_\_\_\_ Septic Tank Permit # from Health Dept. \_\_\_\_\_

New Electrical Service Size: \_\_\_\_\_ AMPS

FLOOD HAZARD INFORMATION

Flood zone: \_\_\_\_\_ Minimum Base Flood Elevation (BFE): \_\_\_\_\_ NGVD

Proposed first habitable floor finished elevation: \_\_\_\_\_ NGVD (minimum 1 foot above BFE)

**COSTS AND VALUES**

Estimated cost of construction or improvement: \$ 20,000

Estimated Fair Market Value (FMV) prior to improvement: \$ \_\_\_\_\_

If improvement, is cost greater than 50% of Fair Market Value? YES \_\_\_\_\_ NO \_\_\_\_\_

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

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

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Roofing: PACIFIC ROOFING State: FL License # CCC056793

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

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

OWNER or AGENT SIGNATURE (Required)

John Massad

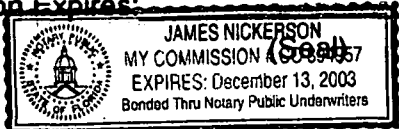
State of Florida, County of: MARTIN On this the 8 day of FEB, 2000,

by JOHN MASSAD who is personally known to me or produced \_\_\_\_\_

as identification.

James Nickerson  
Notary Public

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



CONTRACTOR SIGNATURE (Required)

Richard J. Gomer

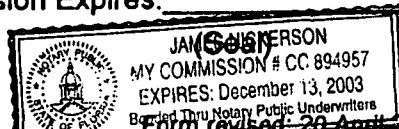
State of Florida, County of: MARTIN On this the 8 day of FEB, 2000,

by RICHARD J. GOMER who is personally known to me or produced \_\_\_\_\_

as identification.

James Nickerson  
Notary Public

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



**TREE REMOVAL (Attach sealed survey)**

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

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

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

**ADDITIONAL Required Documents are:**

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

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



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

CONTRACTOR LICENSING SECTION  
(305) 375-2527 FAX (305) 375-2558

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

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

**PRODUCT CONTROL NOTICE OF ACCEPTANCE**

Almar (USA), Inc.  
6801 NW 77th Ave.  
Miami, FL 33166

Your application for Notice of Acceptance (NOA) of:

→ **Altusa "S" Clay Roof Tile**

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

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

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

Raul Rodriguez  
Chief Product Control Division

→ ACCEPTANCE NO.: 00-0822.07  
EXPIRES: 12/16/2002

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

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

2/9/01 TOWN OF SEVILLA'S POINT

REVIEWED:   
BLDG OFFICIAL

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

APPROVED: 11/22/2000

**FILE** TOWN COPY  
17 E. HIGHT POINT

**PN 5258**

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

Tax Folio # 1338410020000058030000

### NOTICE OF COMMENCEMENT

State of FLORIDA  
County of MARTIN

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of commencement.

1. Description of property: HIGH POINT LOTS 58+59 CODE 40 EX EXPRES IN 1990
2. General description of improvement: POOL
3. Owner information:
  - a. Name & Address: JOHN MASSAD  
17 FIRST HIGH POINT STREET, FL. 34996
  - b. Interest In Property: \_\_\_\_\_
  - c. Name & Address of fee simple titleholder (other than owner): \_\_\_\_\_
4. Contractor's Name & Address: PACIFIC ROOFING  
P.O. BOX 2697 STUART, FL. 34995
  - a. Phone number: 283-7663
  - b. Fax number: 283-9505
5. Surety Information:
  - a. Name & Address: \_\_\_\_\_
  - b. Phone number: \_\_\_\_\_
  - c. Fax number: \_\_\_\_\_
  - d. Amount of Bond: \$ \_\_\_\_\_
6. Lender's Name & Address: \_\_\_\_\_
  - a. Phone number: \_\_\_\_\_
  - b. Fax number: \_\_\_\_\_
7. Person within the State of Florida designated by owner upon whom notices or other documents may be served as provided by 713.13 (1) (a), 7 Florida Statutes:  
Name & Address: \_\_\_\_\_
  - a. Phone number: \_\_\_\_\_
  - b. Fax number: \_\_\_\_\_
8. 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.
9. Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): \_\_\_\_\_

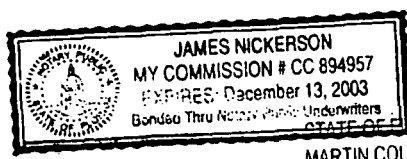
(signature of owner)

Sworn to and subscribed before me this 13th day of Feb, 2001

Notary James [Signature]

Known Personally/ I.D. Shown \_\_\_\_\_

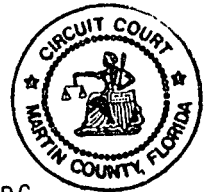
My commission expires: \_\_\_\_\_



MARTIN COUNTY

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

BY [Signature] D.C.  
DATE 2-7-01



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection: ~~Mon~~  Wed  Fri ~~\_\_\_\_\_~~, 2000; Page      of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
S ✓ 5230	DENNISON	PL. + EL.	Passed	2/12
①	49 W. HIGH POINT RD.	Framing (Int.)		
N ✓ 5192	RAO	U/G PLUMBING	Passed	2/12
⑤	30 CASTLE HILL WAY AR MARTIN (718-9191 J.D.)			
S ✓ 5228	FOGLIA	STEM WALL	Passed	2/12
③	102 ABBIE CT. FOGLIA CONST.			
S ✓ <del>5253</del>	MASSAD	<del>STARTING</del>		LATE H.H. IF POSSIBLE
②	<del>712 HIGH POINT</del> PACIFIC REG.	<del>NO READY</del>		
S ✓ 5251	INNES	T/T & MTL.	Passed	2/12
④	113 HILLCREST CT. PACIFIC REG.			
N ✓ T/R	INGRAM	FIELD VERIFICATION	Passed	- DEMOLITION PN 5254
⑥	101 N. SEWALL'S POINT RD BUFORD CONST.			2/12
5226	Griffis	Shutters	Cancelled	Reschedule
	140 S. Sewalls Pt Rd. Bob. DeLotto Corp			781 8010

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

INSPECTOR (Name/Signature): \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Tue  Wed  Thu  Fri 2/2/14, 2000; Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ S (7) T/R	BARWILL 4 N. RIDGEVIEW RD. O/B	FIELD VERIFICATION	Passed	2/2/14
		Permit validity		?? how long
✓ S (6) T/R	ROBINSON 1735, RIVER RD SHADE TREE, INC	FIELD VERIFICATION		2/2/14
✓ S (5) [REDACTED]	MASSAD	[REDACTED] SHEATHING	Passed	2/2/14
	[REDACTED] PACIFIC	[REDACTED] FTIN TAG		
✓ N (10) 4717	ZARRO 124 N. SPR BUFORD	SHUTTERS - FINAL	Passed	2/2/14
✓ N (12) 5086	KARR 1 PALAMA WAY CONWAY	GARAGE - FINAL		
✓ N (9) 5242	KOCH 71 N. RIVER RD. W.B. BROWN	TIE BEAM STEEL mas. wall	Passed	Later in Am 2/2/14

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

INSPECTOR (Name/Signature): \_\_\_\_\_

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri ~~Thu~~ 2/26, 2001; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
✓ 5013	DENNIS	ROOF SHEATHING	Passed	- FORMBOARD (WSP. WAIVED)
5 (3)	16 RIDGELAND FL. FINEST			INSPECTOR: <i>[Signature]</i> 2/26
✓ 5272	VASQUEZ	POOL STL.	Passed	- Spa bench + slide
5 (6)	825 SEWALL'S POINT RD ROBERT DEWDSCHILLER	Spa STL		late stage INSPECTOR: <i>[Signature]</i> 2/26
✓ 5251	INNES	RE ROOF - FINAL	Passed	
5 (7)	113 HILLCREST DR. PACIFIC REG.			INSPECTOR: <i>[Signature]</i> 2/26
✓ <del>5258</del>	<del>MASSARD</del>	<del>RE ROOF - FINAL</del>	<del>Passed</del>	
5 (1)	17 E. HIGH POINT PACIFIC REG.			INSPECTOR: <i>[Signature]</i> 2/26
✓ 5219	AMSLER	RE ROOF - FINAL	Passed	(7 loose tiles to be removed from roof)
5 (5)	3 SIMARA PACIFIC REG.			INSPECTOR: <i>[Signature]</i> 2/26
5234	MCCARTNEY	TIE BM	<del>Passed</del>	<del>See notes</del>
(2)	45 W. HIGH POINT WILSON BLVD'S.	wrong address name	See inspection # (9)	INSPECTOR: <i>[Signature]</i> 2/26
5013	DENNIS	TRUSS	Passed	- FIELD COPY FRAMING/ENCL
(4)	16 RIDGELAND FL. FINEST	need new drag floor trusses	Partial	TO SITE. INSPECTOR: <i>[Signature]</i> 2/26

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

**5732**

**FENCE**



TOWN OF SEWALL'S POINT

Date 3/25/02

BUILDING PERMIT NO. 5732

Building to be erected for JOHN MASSAD.

Type of Permit FENCE

Applied for by UNITED FENCE.

(Contractor)

Building Fee 30<sup>00</sup>/<sub>XX</sub>

Subdivision HIGH POINT. Lot 60 Block \_\_\_\_\_

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

Address 17 E. HIGH POINT RD.

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

Type of structure SFR

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

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

Parcel Control Number:

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

1338410020000060890000

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

Amount Paid \$ 30<sup>00</sup>/<sub>XX</sub> Check # 1967 Cash \_\_\_\_\_

Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Total Construction Cost \$ 1300<sup>00</sup>/<sub>XX</sub>

TOTAL Fees 30<sup>00</sup>/<sub>XX</sub>

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

PERMIT

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

INSPECTIONS

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



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

Bldg. Permit Number: \_\_\_\_\_

Owner or Titleholder's Name John MASSAD Phone No. (772) 286 3733

Street: 17 E High Point Rd. City Sewall's Point State: FL Zip 34996

Legal Description of Property: South 50 Acres HANSON GRANT Plat Books B (Lot 60)  
Page 59 Public Records of Dade County Parcel Number: 540788485

Location of Job Site: Lot 60 High Point 13.38.41.002.000.00600.9000

TYPE OF WORK TO BE DONE: 6' 6" Wood Stockade Fence 100' Across Backline

CONTRACTOR/Company Name: United Fence & Steel Phone No. (772) 335 2627

Street: 367 Notlem Drive City: Ft Pierce State: FL Zip 34982

State Registration: MARTIN Co Comp # SP 00541 State License: \_\_\_\_\_

ARCHITECT: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

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

ENGINEER: \_\_\_\_\_ Phone No. ( ) \_\_\_\_\_

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

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

Living Area: \_\_\_\_\_ Garage Area: \_\_\_\_\_ Carport: \_\_\_\_\_ Accessory Bldg: \_\_\_\_\_

Covered Patio: \_\_\_\_\_ Scr. Porch: \_\_\_\_\_ Wood Deck: \_\_\_\_\_

Type Sewage: \_\_\_\_\_ Septic Tank Permit # from Health Dept. \_\_\_\_\_

New Electrical Service Size: \_\_\_\_\_ AMPS

**FLOOD HAZARD INFORMATION**

Flood zone: \_\_\_\_\_ Minimum Base Flood Elevation (BFE): \_\_\_\_\_ NGVD

Proposed first habitable floor finished elevation: \_\_\_\_\_ NGVD (minimum 1 foot above BFE)

**COSTS AND VALUES**

Estimated cost of construction or improvement: \$ 1300<sup>00</sup>

Estimated Fair Market Value (FMV) prior to improvement: \$ \_\_\_\_\_

If improvement, is cost greater than 50% of Fair Market Value? YES \_\_\_ NO \_\_\_

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

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

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License # \_\_\_\_\_

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

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

**OWNER or AGENT SIGNATURE (Required)**

\_\_\_\_\_

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

this the \_\_\_\_\_ day of \_\_\_\_\_, 2000,

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

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

as identification.

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

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

(Seal)

**CONTRACTOR SIGNATURE (Required)**

George Quinn

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

this the 20<sup>th</sup> day of MARCH, 2000,<sup>2002</sup>

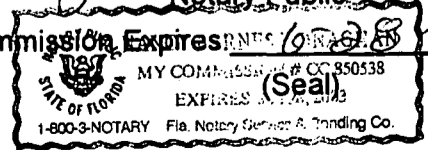
by GEORGE QUINN who is personally

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

as identification.

Nancy Barnes Moore  
Notary Public

My Commission Expires: 06/28/03



# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

2/15/2002


<b>PRODUCER</b> R.V. Howard & Associates 8487 South US 1 Port St. Lucie FL 34952 561 343-9878		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
<b>INSURED</b> United Fence & Steel George Quinn dba 367 Nothlem Avenue Fort Pierce, FL 34982 835-2627		<b>INSURERS AFFORDING COVERAGE</b> INSURER A: Commercial Casualty of Georgia INSURER B: INSURER C: INSURER D: INSURER E:	

**COVERAGES**

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR _____ GENL AGGREGATE LIMIT APPLIES PER <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	UFS080201	08-02-01	08-02-02	EACH OCCURRENCE \$100,000
	<input type="checkbox"/> FIRE DAMAGE (Any one fire) \$50,000 <input type="checkbox"/> MED EXP (Any one person) \$1,000 <input type="checkbox"/> PERSONAL & ADV INJURY \$100,000 <input type="checkbox"/> GENERAL AGGREGATE \$200,000 <input type="checkbox"/> PRODUCTS - COMP/OP AGG \$100,000				
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY AGG \$
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE _____ <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b>				<input type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	<b>OTHER</b>				

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

<b>CERTIFICATE HOLDER</b> Town of Sewalls Point Building Department 1 South Sewalls Point Rd Sewalls Point	<b>ADDITIONAL INSURED; INSURER LETTER:</b>	<b>CANCELLATION</b> SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: 
--	--	---

**CERTIFICATE OF LIABILITY INSURANCE**

02/15/2002

**JUCER**  
**RISK TRANSFER SOLUTIONS, INC.**  
**LANDMARK CENTER ONE**  
**315 EAST ROBINSON STREET, STE. 580**  
**ORLANDO, FL 32801**

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**

**INSURED SUNSHINE COMPANIES, INC.**  
**5825 US 27 NORTH**  
**SEBRING, FL 33870**  
**PH: 800-477-5606**

COMPANY <b>A</b>	<b>FIRST COMMERCIAL MUTUAL</b>
COMPANY <b>B</b>	<b>RECEIVED</b>
COMPANY <b>C</b>	
COMPANY <b>D</b>	

**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, EXCLUSION AND CONTITION 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	
	<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT				GENERAL AGGREGATE	\$
					PRODUCTS-COMP/OP AGG	\$
					PERSONAL & ADV INJURY	\$
					EACH OCCURRENCE	\$
					FIRE DAMAG (Any one fire)	\$
					MED EXP (Any one person)	\$
	<b>AUTOMOBILE LIABILITY</b> <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE	\$
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY-EA ACCIDENT OTHER THAN AUTO ONLY.	\$
					EACH ACCIDENT AGGREGATE	\$
	<b>EXCESS LIABILITY</b> <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE	\$
					AGGREGATE	\$
<b>A</b>	<b>WORKER'S COMPENSATION AND EMPLOYER'S LIABILITY</b> THE PROPRIETOR/ PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL	15227-00	08/06/2001	08/06/2002	<input checked="" type="checkbox"/> WC STATU- TORY LIMITS <input type="checkbox"/> OTH- ER	
					EL EACH ACCIDENT	\$ 1,000,000
					EL DISEASE-POLICY LIMIT	\$ 1,000,000
					EL DISEASE-EA EMPLOYEE	\$ 1,000,000
	<b>OTHER LOCATION COVERAGE</b>		08/06/2001	08/06/2002		

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS  
 ONLY THOSE EMPLOYEES LEASED TO, IN FLORIDA, BUT NOT SUBCONTRACTORS OF:  
**6955 UNITED FENCE & STEEL**  
**367 NOTLEM DRIVE, FT PIERCE, FL 34982**

PT. ST. LUCIE FAX # 561-335-0071

**CERTIFICATE HOLDER**      **CANCELLATION**

FAX: 561 220-4765

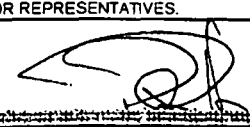
SEWALL'S POINT BUILDING DEPT.

1 S. SEWALL'S POINT ROAD.  
 SEWALL'S POINT, FL 34996-  
 ATTN: NANCY

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 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**

Paul R. Hughes



PROFESSIONAL MAINTENANCE

File Actions Permit Land RFS Insp W/O People Haz Mat System

Name: QUINN, GEORGE R

Id: 2649

Prof. Status: ACTIVE On Hold: Bond Exempt:

Address: 367 NOTLEM DR

City: FT PIERCE

State: FL

Zip: 34982

Phone: 772-335-2627

Contact: UNITED FENCE CO

Phone: -

SSN: - -

DOB:

Type:

E-Mail:

Other Phone:

Local Bus Lic#: MARTIN

Date:

Class:

State Tax #:

Date:

Work Comp Ins: WAIVER ON WC

Date: 10-JAN-2002

Policy #:

Type	Description	State License #	Expires	Status	Hold
GENERAL	FENCE ERECTION	SP00531	30-SEP-2003	ACTIVE	<input checked="" type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

Qualifying Party

Exam Details

Charge / Comments

License / Specialty

Contractors

Print Current

Financial Responsibility

Additional Parties

Return

MARTIN COUNTY CONTRACTORS LICENSING  
2401 S.E. Monterey Road  
Stuart, FL 34996

MARTIN COUNTY CONTRACTORS LICENSING  
2401 S.E. Monterey Road  
Stuart, FL 34996

MARTIN COUNTY CONTRACTORS LICENSING  
2401 S.E. Monterey Road  
Stuart, FL 34996

367 NOTLEM DRIVE  
FORT PIERCE, FL 34982

**WE BUILD  
ANY FENCE**

LICENSED & INSURED

**UNITED  
UNITED  
UNITED  
UNITED  
UNITED**  
**Fence & Steel**

**GEORGE QUINN  
335-2627**

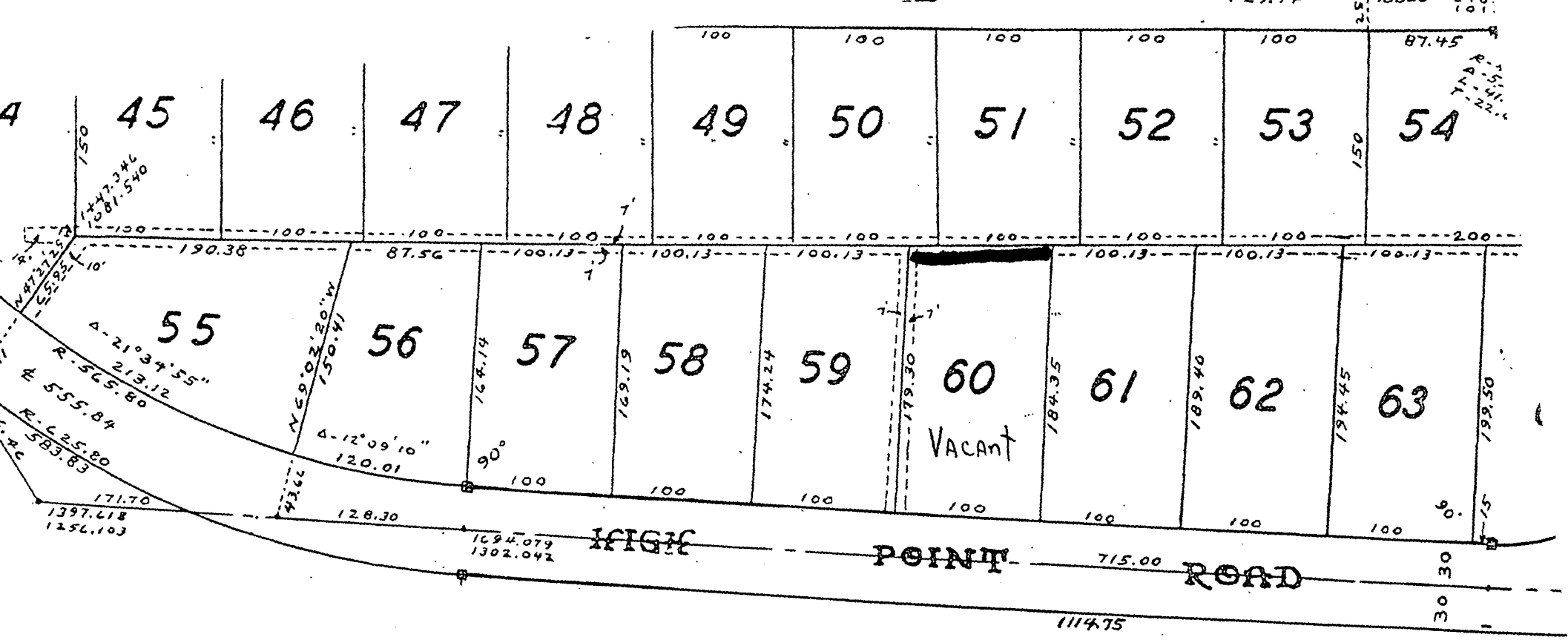
**CHAIN LINK &  
BEAUTIFUL CUSTOM  
WOOD FENCES AND  
DECKS SINCE 1964**

NAME John MASSAD  
ADDRESS 17 E. High Point Rd  
CITY Sewall's Point Fl  
PHONE 286 3733

DATE 3/21/02  
P.O. NUMBER  
TERMS

QUANTITY	DESCRIPTION	PRICE
Stockade wood Fence 6'6" High	<u>Material List</u> All 4"x4"x10' Poles 3' Deep w/ 8' space on center 3 ea. 2"x4" Horizontal Runners All 1"x6"x6' Upright Slats Butted Side by Side  Across Back Property of Vacant Lot #60	
Salesman	Joe Duncan #2014241	

PLEASE PAY BY THIS INVOICE, NO STATEMENT WILL BE SENT



e State of Florida,  
 ived as shown hereon,  
 of the land subdivided  
 y dedicate to the

these presents to be  
 and attested by its

NOT

FILE COPY  
 TOWN OF SEWALL'S POINT  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE: 3/22/01  
 BUILDING OFFICIAL  
 Gene Simmons

D 50

367 NOTLEM DRIVE  
FORT PIERCE, FL 34982

**WE BUILD  
ANY FENCE**

LICENSED & INSURED

**UNITED  
UNITED  
UNITED  
UNITED  
UNITED**  
Fence & Steel

Tax I.D. #  
Lot #60  
13-32-41002000  
00600 90000

**GEORGE QUINN**  
335-2627

**CHAIN LINK &  
BEAUTIFUL CUSTOM  
WOOD FENCES AND  
DECKS SINCE 1984**

NAME John M...  
ADDRESS ...  
CITY ...  
PHONE 5407-88185

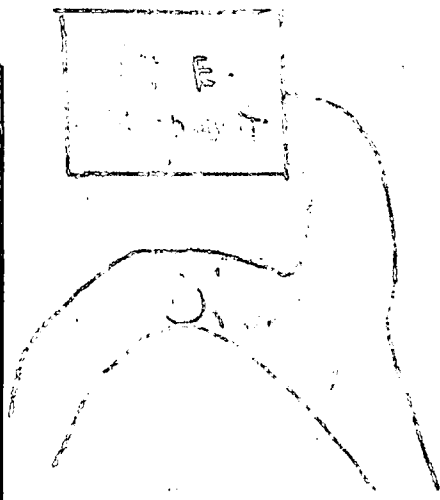
DATE 3/17/02  
TOTAL FOOTAGE 100

- FENCE
- TOP RAIL
- LINE POST
- CORNER POST
- END POST
- GATE POST
- WALK GATES
- DOUBLE DRIVE GATES
- WOOD FENCE
- WOOD POSTS
- SURVEY
- HOT DIPPED GALVO.
- FENCE LINE CLEARED

*6" Custom Saddle (60" Ground)*

*100'*

	Height	# Rollo	1 1/2"	1 3/4"	2"	2 1/2"
FABRIC						
FABRIC						
TERMINAL POSTS						
LINE POSTS						
RAIL ENDS						
BRACE BANDS						
TENSION BARS						
TENSION BANDS						
TERMINAL CAPS						
LOOP CAPS						
TOP RAIL						
BARB ARMS						
BARB WIRE						
TIES						
GATES						
MALES						
FEMALES						
FORKS						
BACKS						
DROP RODS						



All Slats 1x6x6  
No Dogeeks  
Finish by 3/27/02  
5<sup>th</sup> year warranty

Note: Recrete Existing 24'  
Next To Driveway And Straighten  
Poles

TOTAL PRICE \$1500.00  
LESS DEPOSIT \$200  
C.O.D. ON COMPLETION \$1000  
SALESMAN ...  
CUSTOMER ...  
OFFICE ACCEPTANCE ...

Prices quoted do not include any clearing of fence lines. United will clear fence lines for a fee of \$35.00 per man, per hour. The above is an estimate based on our inspection and does not cover any additional labor which may be required after the work has been opened up. Occasionally, after the work has started, large buried objects are discovered which were not evident on the first inspection. Because of this the above prices may have to be renegotiated. This circumstance is rare.



**CHANGES:**

No changes or alterations in measurements will be allowed except at prices to be agreed upon at time changes are made, and same to be treated as an entirely new contract. This contract, if including erection, is taken on condition that the entire job be erected at one time, and if for any reason fence erector has to make more than one trip to erect fence on account of changes made by purchaser, then the percent of work completed will be invoiced and an extra charge will be made for completion of balance. There will be an extra trip charge if for any reason a job is not ready or there are any changes on a job. Residential forty dollars, Commercial sixty dollars.

**ERECTION:**

Before erection is begun, purchaser is to establish property line stakes and grade stakes and to remove all obstructions that may interfere with the erection. Customer is responsible that there are no underlying unusual conditions, and that the customer is responsible for underground cables, sprinkler systems and all public and private utilities and that the fence is to follow the ground line unless otherwise specified; if tilling, trenching, post footings of greater depth or diameter, or any other unusual conditions are encountered including underground installations such as electrical conduits, cables, tanks, etc., or if labor other than our erectors is required, purchaser agrees to pay for extra expense of same. All erection is to be performed in a thorough workmanlike manner in accordance with the specifications outlined in this proposal. Any used material or bushes hauled away at customer's expense. Nails and staples will be used in this fence.

**GENERAL:**

Material returned to us owing to change or deductions in the fence line, will be credited at sales price less 25 percent, and less freight charges for returning same provided material is received by us in good condition. This contract is binding on both parties. A flat 20 percent of the total contract price will be kept by Seller in the event the purchaser decides to cancel the contract. Until paid for, or incorporated in structure, the title to and ownership and right of possession of the material covered by this contract shall remain the Sellers, and in case the Purchaser shall become insolvent, or refuse or neglect to pay for material herein provided, the Seller may at its option, without process of law, retake possession of any or all material wherever the same may be found, as provided above, and credit account of the Purchaser with the value thereof to the Seller, less the necessary cost and freight charges in retaking the same. If legal action becomes necessary, then all legal fees and court costs will be assumed by the purchaser. Deposits not refunded after 72 hour period. Vinyl COATED & aluminized wire guaranteed for one year, Galvanized wire guaranteed for ninety days. No agreements or conditions, verbal or otherwise, except as herein specified shall be recognized. All agreements are contingent upon strikes, lockouts, riots, fires, accidents, acts of God, floods, war, insurrection, embargo restrictions, carrier delays, delay or failure to receive raw material deliveries, or by other causes, whether of like or different nature beyond our control.

All references to measurements are nominal and may vary, to conform to the best practices of the industry.

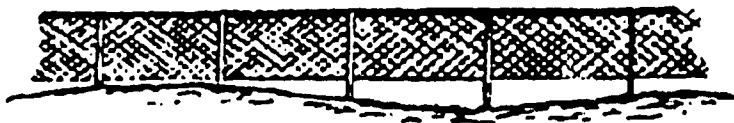
**TERMS:** Price quoted is for cash or check, Credit cards sales 3.60% processing charge will be added. United Fence and Steel retains ownership of all materials until job is paid in full and may remove said materials after 60 days if payment is not received. A Finance Charge of 2% per month (annual percentage rate of 24%) will be charged on all amounts over 30 days past due. If it becomes necessary to collect the herein sums, or any part thereof, the Purchaser agrees to pay all costs thereof, including attorney's fees.

**GROUND PLAN OF JOB**



Follows contour of ground. Fence top will be curved.

Customer: \_\_\_\_\_



TOP RAILS STRAIGHT - Leaves spaces beneath fence if ground is not straight.



Barb Up



Knuckle Up

**UNITED FENCE & STEEL is NOT RESPONSIBLE for buried lines of any type!**  
CALL: FLORIDA POWER & LIGHT 287-5400  
SOUTHERN BELL 800-432-4770  
BEFORE WE DIG!

475<sup>25</sup> 46.  
60.

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri MAY 22, 2007;<sup>2</sup> Page      of     .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5761	I A NERO. 7 W HIGH POINT. WILLIAM.	ROOFING. ADDIT.	PASSED	INSPECTOR: <u>h</u>
5787	COWELL. 1 BANYAN RD. SEASIDE	FINAL ROOF	PASSED	INSPECTOR: <u>h</u>
5778	VITALE 13 KNOWLES RD PECOR	FINAL FENCE	PASSED	INSPECTOR: <u>h</u>
5682	Wander 26 Simara United fence	fence →	FAILED	FEE \$30 ← INSPECTOR: <u>h</u>
<del>5732</del>	<del>Massad</del> 17 E. High Point Rd United fence	<del>fence</del>	FAILED	FEE \$30 NO PERMIT POSTED. INSPECTOR: <u>h</u>
5733	Kupczyk 9 E. High Point Rd United fence	fence	PASSED	INSPECTOR: <u>h</u>
5143	GIFFORD 85 N Sewall's Pt Rd Scott Holmes	Electrical Early power PULSARS	PASSED	INSPECTOR: <u>h</u>

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

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri June 17, 2002; Page      of     .

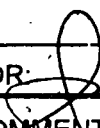
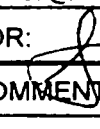
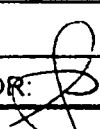



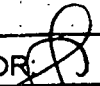
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5822	Davis	<del>Open/Rivwood</del>	Failed	
5782	5 Palm Rd	Ymir Soft		
	Alumtile		✓	INSPECTOR: <i>[Signature]</i>
5824	Granfield	<del>STEEL</del>	<del>Passed</del>	
2	15 W. High Pt. Rd		Failed	
	Schiller			INSPECTOR: <i>[Signature]</i>
TR3E	FABINSKY	3 Cabbage Palms	Passed	
	10 Mandalay Rd			INSPECTOR: <i>[Signature]</i>
5761	Lowell	Tie Beam	Passed	
1	7 W. High Pt. Rd			INSPECTOR: <i>[Signature]</i>
	FANIERO			
5682	WANDER	FINAL FENCE.	Failed	no permit
	24 SIMARA ST.		also: <del>5722</del> still open	
	UNITED FENCE.	335 2627.	✓	INSPECTOR: <i>[Signature]</i>
5828	WALKER	FOOTING	Passed	
	21 W. HIGH POINT.			
	SCOTT			INSPECTOR: <i>[Signature]</i>
5567	WEBER	CO.	Passed	Health Doc to be found
	4 MANDALAY.	subj. height of	Bldg.	
	BYFORD.		Depos.	INSPECTOR: <i>[Signature]</i>

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

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 6-26-02, 2004, Page      of     .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5824	Butler 8 S River Rd A+G Pools	Pool Steel + Bond + Plumbing	Passed	INSPECTOR: 
??	Hart 61 S. River Rd Neighbor Complained - drainage hose going into river	See Note!	O.k.	no drainage but dock waterline INSPECTOR: 
5835	HOGLE 22 N. Sewall Pt. Rd J+B	Final Boat Lift	Passed	INSPECTOR: 
<del>5732</del>	<del>MASSAD</del> 17 E. High Pt. Rd United FENCE	<del>FENCE FINAL</del>	<del>Passed</del>	INSPECTOR: 
5806	Rulide Island Way 2874543 x 222 2825172	Fence Dial	Passed	6/21 INSPECTOR: 
5847	Bower Lo Capaire Seatche	Small Pools	Passed	Co-pool ok. INSPECTOR: 
5567	Weber 4 Mandalay Boford	Depos elevat. FINAL BLDG.	Passed	INSPECTOR: 

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

**7232**

**FENCE**

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

### TOWN OF SEWALL'S POINT

Date 1/26/05

BUILDING PERMIT NO. 7232

Building to be erected for MASSAD

Type of Permit REPAIR FENCE

Applied for by O/B (Contractor)

Building Fee 30.00

Subdivision HIGH POINT Lot \_\_\_\_\_ Block \_\_\_\_\_

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

Address 17 E. HIGH POINT

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

Type of structure SFR

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

Parcel Control Number:

1338410020000058030000

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

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

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

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

Total Construction Cost \$ 500.00

TOTAL Fees 30.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

## PERMIT

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

## INSPECTIONS

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

JAN 26 2005

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

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

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

OWNER/TITLEHOLDER NAME: John Massad Phone (Day) 286-3733 (Fax) \_\_\_\_\_

Job Site Address: 17. E. Highway Rd City: Stuart State: FL Zip: 34996

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

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

Description of Work To Be Done: Repair Fence

WILL OWNER BE THE CONTRACTOR?:

YES  NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 500<sup>06</sup>  
(Notice of Commencement needed over \$2500)

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

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

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

(If yes, Owner Builder Affidavit must accompany application)

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

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

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

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

SUBCONTRACTOR INFORMATION:

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

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

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

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

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

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

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

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required)  
John Massad

State of Florida, County of: MARTIN

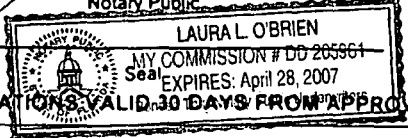
This the 26th day of JANUARY, 2005

by JOHN MASSAD who is personally known to me or produced FDL# A2067-0943x/HB/09

as identification. [Signature]

Notary Public

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



CONTRACTOR SIGNATURE (required)

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

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

by \_\_\_\_\_ who is personally known to me or produced \_\_\_\_\_

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

Notary Public

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

Seal

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

Permit No.

Date

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

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

Owner John Massad Present Address 17 E Highpoint Rd

Phone 286-3733 Sewalls Point

Contractor All American Fence Address 20 Box 1369

Phone 878-1650 Fort Pierce, FL

Where licensed St Lucie, Martin License number SP00872

Electrical contractor — License number —

Plumbing contractor — License number —

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: 170' x 7' stockade wood fencing

State the street address at which the proposed structure will be built: 17 E Highpoint Rd

Subdivision High Point Lot number 58459 Block number 2

Contract price \$ 1000 Cost of permit \$ 25

Plans approved as submitted VB Plans approved as marked —

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

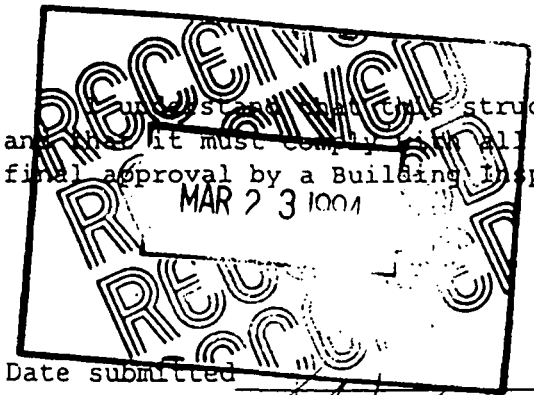
Contractor Mitchell J. Douglas

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

Owner John Massad

TOWN RECORD

Approved: Dale Brown 3/24/94 Building Inspector Date



Date submitted — Approved: — Commissioner Date

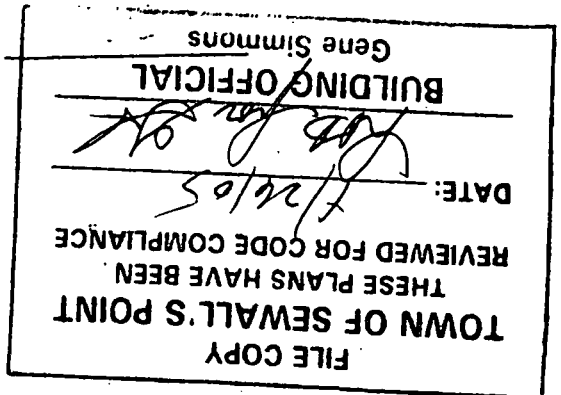
Final Approval given: — Date

Certificate of Occupancy issued (if applicable) — Date

SP1282

Permit No.

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





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

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

**DISCLOSURE STATEMENT**

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

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

Name: John Massad Date: 1-26-2005

Signature: JOHN MASSAD

Address: 17 E. Hugger Rd.

City & State: Stuart FL

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

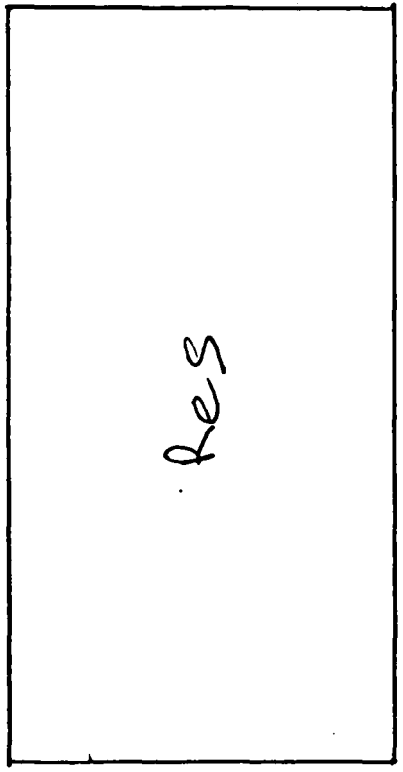
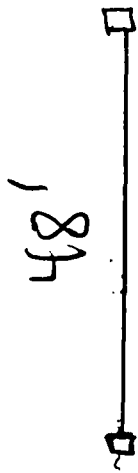
# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

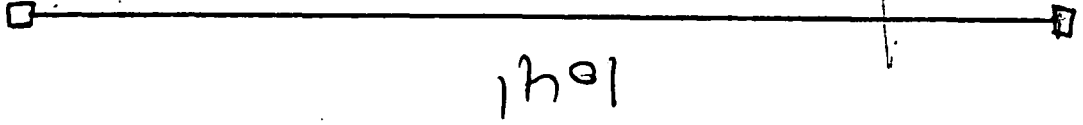
Date of Inspection:  Mon  Wed  Fri 1, 20015 Page      of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<i>Tree</i>	<i>Archipelago Assoc</i>	<i>TREE</i>	<i>PASS</i>	
<i>2</i>	<i>Simada St</i> <i>(1st tree on rt as enter Archipelago)</i>			INSPECTOR: <i>[Signature]</i>
<i>7232</i>	<i>MASSAD</i>	<i>FINAL FENCE</i>	<i>PASS</i>	<i>CLOSE</i>
<i>1</i>	<i>17E. HIGHPOINT</i> <i>O/B</i>	<i>PERMIT</i> <i>ON LIGHT IN FRONT</i>		INSPECTOR: <i>[Signature]</i>
<i>7019</i>	<i>HANAN</i>	<i>TIN TAG &amp; MEAL</i>	<i>PASS</i>	
<i>8</i>	<i>84 N. SEWALL'S</i> <i>PACIFIC ROOFING</i>			INSPECTOR: <i>[Signature]</i>
<i>6772</i>	<i>ELDER</i>	<i>TIE BEAM</i>	<i>FAIL</i>	
	<i>4 MARGUERITA</i> <i>O/B</i>	<i>223 9305</i> <i>475-5065</i>		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
OTHER:	<i>ELDER</i> <i>4 MARGUERITA</i>	<i>Please check</i> <i>silt screen</i> <i>(fill delivery)</i>	<i>OIL</i>	<i>- WILL ADDRESS ON</i> <i>FINAL GRADING</i>

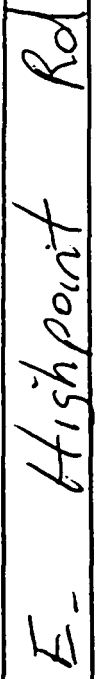
48'



170'



E. Highpoint Rd



8831

HURRICANE SHUTTERS



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

## BUILDING PERMIT CARD

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

PERMIT NUMBER:	8831	DATE ISSUED:	FEBRUARY 26, 2008
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONDITIONS :			
CONTRACTOR:	JUPITER ALUMINUM		
PARCEL CONTROL NUMBER:	133841002000005803	SUBDIVISION	HIGH POINT-LOT 58/59
CONSTRUCTION ADDRESS:	17 E HIGH POINT RD		
OWNER NAME:	MASSAD		
QUALIFIER:	MARK SCHER	CONTACT PHONE NUMBER:	561-747-4166

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

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

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

### REQUIRED INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

PERMIT NUMBER:	8831		
ADDRESS	17 E HIGH POINT RD		
DATE:	2/26/08	SCOPE:	HURRICANE SHUTTERS
SINGLE FAMILY OR ADDITION/REMODEL Declared Value \$			

#### JUPITER ALUMINUM PRODUCTS INC.

PHONE (561) 747-4166  
 219 JUNO STREET  
 JUPITER, FL 33458

3143  
 83-215/631

DATE 2/25/08

PAY TO THE ORDER OF

Sewell's Point  
Eighty dollars and 00/100

\$ 80.00  
 DOLLARS



ACH RT 061000104

*Mark Sch...*

FOR

DBPR Licensing Fee: (\$.005 per sq. ft. under roof)	\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)		
Martin County Impact Fee:	\$	
<b>TOTAL BUILDING PERMIT FEE:</b>	\$	

ACCESSORY PERMIT	Declared Value:	\$	2624.00
Total number of inspections @ \$75.00 each	1	\$	75.00 + 75.00(work w/o permit)
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
<b>TOTAL ACCESSORY PERMIT FEE:</b>		\$	155.00

\$ 80 check  
 \$ 75 cash

RECEIVED  
DATE: 2-20-08  
TOWN OF SEWALL'S POINT

Date: 2/20/08 Town of Sewall's Point BUILDING PERMIT APPLICATION Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: John Massad Phone (Day) 772-286-3738 (Fax) \_\_\_\_\_

Job Site Address: 17 E. High Point Rd City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block): High Point Lts 58 & 59 Code 40 Parcel Number: 13-38-41-002-000-00580-3

Owner Address (if different): 17 E. High Point Rd City: \_\_\_\_\_ State: FL Zip: 34996

Scope of work: Install @ openings of Accordion Shutters

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

COST AND VALUES: (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 2,624.00  
(Notice of Commencement required when over \$2500 prior to first inspection)  
Is subject property located in flood hazard area? V  A9  A8  X  
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:  
Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
Fair Market Value of the Primary Structure only (Minus the land value)  
\*\*\* PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION \*\*\*

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

CONTRACTOR/Company: Jupiter Aluminum Products Phone: 561-747-4166 Fax: 561-747-5036

Street: 219 Luna St. City: Jupiter State: FL Zip: 33458

State Registration Number: \_\_\_\_\_ State Certification Number: \_\_\_\_\_ Municipality License Number: SP02259

PROJECT SUPERINTENDANT: \_\_\_\_\_ CONTACT NUMBER: \_\_\_\_\_

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

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

ENGINEER: Walter Tillitz Lic# 44167 Phone Number: 305-871-1530

Street: 3365 NW 30th St. City: Miami State: FL Zip: 33166

AREA SQ. FOOTAGE (W/SEWER & ELECTRIC): Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios: \_\_\_\_\_ Screened Porch: \_\_\_\_\_  
Carport: \_\_\_\_\_ Total Under Roof: \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

CODE EDITIONS IN EFFECT FOR THIS APPLICATION: Florida Building Code - Res., Build, Mech., Plmb., Fuel Gas: 2004 (W/2006 Rev.)  
National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Prevention Code 2004

NOTICES TO OWNERS AND CONTRACTORS:  
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.  
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.  
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.

THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.  
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

\*\*\*\*\* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS \*\*\*\*\*  
OWNER SIGNATURE (required) \_\_\_\_\_ CONTRACTOR SIGNATURE (required) \_\_\_\_\_  
State of Florida, County of: Martin State of Florida, County of: Martin  
This the 20 day of February 2008 This the 20 day of February 2008  
by John Massad who is personally known to me or produced by Mark Scher who is personally known to me or produced  
as identification. as identification. Personally Known

My Commission Expires: NEANNIE MARIE VITA Comm # DD0277737 Expires 3/23/08  
My Commission Expires: JEANNIE MARIE VITA Comm # DD0277737 Expires 3/23/08

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



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

Site Provided by...  
governmentmax.com T1.11

**Summary**

print Owner 1 of 1

**Parcel Info**

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-002-000-00580-3	17 E HIGH POINT RD	27745	Owner	0	1

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

**Summary**  
**Property Location** 17 E HIGH POINT RD  
**Tax District** 2200 Sewall's Point  
**Account #** 27745  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120000  
**Acres** 0.801

**Legal Description**  
**Property Information**  
 HIGH POINT LOTS 58 & 59  
 CODE 40 EX EXPIRES IN 1990

**Search By**

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

**Owner Information**  
**Owner Information**  
 MASSAD, JOHN

**Mail Information**  
 11 NORTH 4TH ST  
 RICHMOND VA 23219-2215

**Assessment Info**  
**Front Ft.** 0.00

**Market Land Value** \$480,000  
**Market Impr Value** \$214,030  
**Market Total Value** \$694,030

**Site Functions**

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

**Recent Sale**  
**Sale Amount** \$245,000

**Sale Date** 1/8/1988  
**Book/Page** 0749 0667

Print | << First < Previous Next > Last >>

Legal disclaimer / Privacy Statement

Data updated on 02/04/2008





AFTER RECORDING - RETURN TO:

INSTR # 2067575  
OR BK 02310 PG 0014  
Pg 0014 (1pg)  
RECORDED 02/20/2008 11:11:53 AM  
MARSHA EWING  
CLERK OF MARTIN COUNTY FLORIDA  
RECORDED BY S Phoenix

PERMIT NUMBER:

**NOTICE OF COMMENCEMENT**

The undersigned hereby given notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes the following information is provided in the Notice of Commencement.

1. DESCRIPTION OF PROPERTY (Legal description and street address, if available) TAX FOLIO NUMBER: 13-38-41-002-000-00580-3  
SUBDIVISION HighPoint BLOCK 000 TRACT \_\_\_\_\_ LOT 058 BLDG \_\_\_\_\_ UNIT \_\_\_\_\_

17 E. HighPoint Rd. Stuart, Florida 34996; HighPoint Lots 58 & 59 Code 40  
EX EXPIRES IN 1990

2. GENERAL DESCRIPTION OF IMPROVEMENT:

Hurricane Shutters

3. OWNER INFORMATION:

a. Name John Massad

b. Address 17 E. HighPoint Rd. Stuart, FL 34996 Interest in property fee simple

d. Name and address of fee simple titleholder (if other than Owner)

4. CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER:

Jupiter Aluminum Products, Inc.  
219 Juno Street  
Jupiter, Florida 33458

5. SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT:

STATE OF FLORIDA  
MARTIN COUNTY

6. LENDER'S NAME, ADDRESS AND PHONE NUMBER:

THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL DOCUMENTS TO BE RECORDED BY

7. 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 AND PHONE NUMBER:

MARSHA EWING, CLERK

BY: [Signature] D.C.

DATE: 2-20-08

8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes: NAME, ADDRESS AND PHONE NUMBER:

9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified): \_\_\_\_\_, 20\_\_

**WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART I, SECTION 713.13, FLORIDA STATUTES, AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.**

[Signature]  
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager

JOHN S. MASSAD  
Print Name and Provide Signatory's Title/Office

State of Florida  
County of Palm Beach

The foregoing instrument was acknowledged before me this day of 20 February, 2008.

By JOHN S. MASSAD  
(name of person)

as \_\_\_\_\_  
(type of authority, ... e.g. officer, trustee, attorney in fact)

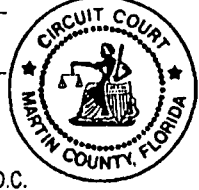
for \_\_\_\_\_  
(name of party on behalf of whom instrument was executed)



Jeanne-Marie Vita  
Comm # 00027737  
Expires 3/21/08  
Bonded Thru (800) 432-4254  
Florida Notary Assn. Inc.  
[Signature] Notary signature serial # \_\_\_\_\_

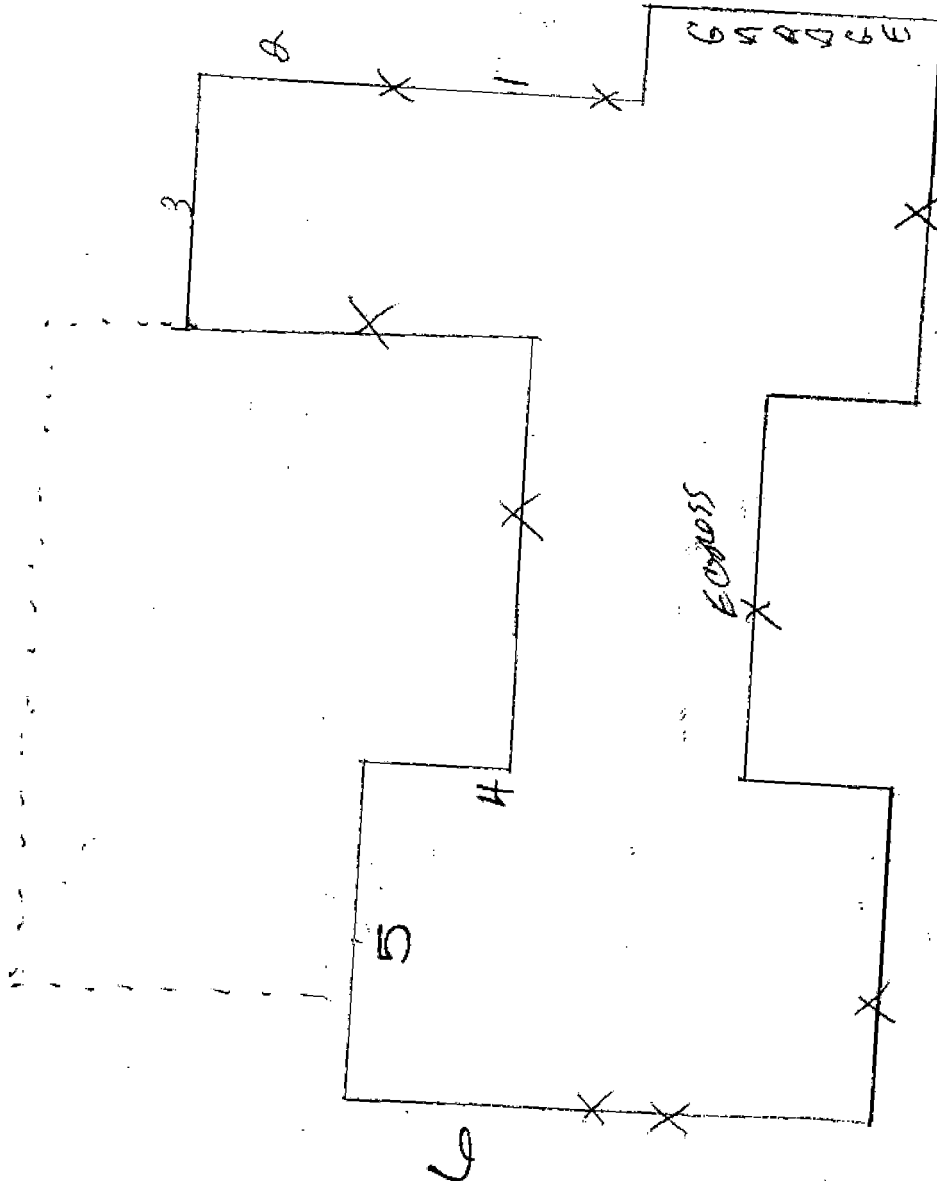
Under Penalties of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief (Section 92.525, Florida Statutes).

[Signature]  
(Signature of Natural Person Signing Above)



WHITE ANCORONS

- 1) 54 x 39 +
- 2) 38 x 52 +
- 3) 75 x 52 +
- 4) 38 x 38 +
- 5) 54 x 52 +
- 6) 54 x 52



FILE COPY  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 2-21-08  
 BUILDING OFFICIAL

JOHN MASSAD  
 17 E HIGH POINT RD  
 STUART 34996  
 772-286-3733

CBS  
 S F H  
 ↓



# JUPITER ALUMINUM PRODUCTS

219 Juno Street  
Jupiter, FL 33458

Office-561-747-4166  
Fax-561-747-5038

License #-U17382

## SCHEDULE FOR INSTALLATION OF OPENING PROTECTIVE DEVICES OR ASSEMBLIES

Date: 2/20/08 Permit Application Number or Primary Permit Number:

Property Address: 17 E. High Point Rd. Sewell's Point, FL 34996

Type of Construction or Attachment Surface:

- Wood Frame
- Masonry/Concrete
- Steel Frame
- Other (Insulated Wall, Curtain Wall, Precast, etc.)  
Describe: \_\_\_\_\_

Type of Glazing Protection Device or Assembly

- Impact Resistant Glazing
- Removable Storm Panels
- Permanently Affixed Assembly

Building Height ← 30'

Glazing Protective Device/Assembly Manufacturer

Accordion Shutters/ASSA

Design Pressure

- Standard Building Code (Section 1606)
- ASCE 7-02  
Exposure Category C

Product Compliance Report and Report Number

- SBCCI # \_\_\_\_\_
- Metro Dade County # \_\_\_\_\_
- Other # FBC

Type of Anchor Specified TRIPCONS

Other Information \_\_\_\_\_

## INSTALLATION SCHEDULE

Unit #	Wall Pressure Int./End Zone	Opening Size		Shutter Width	Shutter Height	Number Shutter Span	Size of Shutter Span	Storm Bars Numbers Required	Anchor Spacing	Header Reinf Required		Storm Panels Bolted	
		Width	X Height							Y	N	Y	N
1	64	54	x 39	70	46				9/9	Y	N	Y	N
2	64	38	x 52	52	59				9/9	Y	N	Y	N
3	60	75	x 52	93	59				9/9	Y	N	Y	N
4	66	38	x 38	52	45				9/9	Y	N	Y	N
5	62	54	x 52	70	59				9/9	Y	N	Y	N
6	62	54	x 52	70	59				9/9	Y	N	Y	N
7			x							Y	N	Y	N
8			x							Y	N	Y	N
9			x							Y	N	Y	N
10			x							Y	N	Y	N
11			x							Y	N	Y	N
12			x							Y	N	Y	N
13			x							Y	N	Y	N
14			x							Y	N	Y	N
15			x							Y	N	Y	N
16			x							Y	N	Y	N



# DESIGN PRESSURE CALCULATION

for Exposure C, Wind speed 140 mph and Mean roof height 30 ft

**Contractor:**  
Jupiter Aluminum Products

**Preparer:**  
Jeanne-Marie

**Project Address:**  
17 E. High Point Rd.  
Sewell's Point  
Florida  
34996

#	Width	Height	Location	+	-
1	54	39	End	48.38	-64.01
2	38	52	End	48.59	-64.41
3	75	52	End	46.49	-60.21
4	38	38	End	49.41	-66.07
5	54	52	End	47.29	-61.82
6	54	52	End	47.29	-61.82



# The Florida Department of Community Affairs Building Code Information System



**SITE NAVIGATION**

- Home
- Course Accreditation
- Florida Building Code
- Manufact. Buildings
- Prototype Building
- Surveys
- Training
- Product Approval
- License Search
- Mailing List
- Florida Building Commission

## PRODUCT APPROVAL Product Type Detail

Overview    Product Search    Organization Search    Product Application

User: Public User - Not Associated with Organization --

[Need Help?](#)

Application #: FL5133  
 Date Submitted: 08/15/2005  
 Code Version: 2004

Product Manufacturer: American Shutter Systems Association, Inc.  
 Address/Phone/email: 4268 Westroads Drive  
 West Palm Beach, FL 33407  
 (561) 841-5480

Category: Shutters  
 Subcategory: Accordion

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

Referenced Standards from the Florida Building Code:

Section	Standard	Year
1609.1.4	TAS 201, 202, 203	1994

Florida Engineer or Architect Name: Walter A. Tillit, Jr.

Florida License: PE-44167

Quality Assurance Entity: National Accreditation and Management Institute

Validation Entity: John Henry Kampmann Jr.

Authorized Signature: Bill Feeley  
 bfeeley@easternmetal.com

Evaluation/Test Reports Uploaded:

Product Approval Method: Method 1 Option D  
Application Status: Approved  
Date Validated: 09/23/2005  
Date Approved: 10/11/2005  
Date Certified to the 2004 Code:

Installation Documents Uploaded:

Product Approval Method:

Method 1 Option D

Application Status:

Approved

Date Validated:

09/23/2005

Date Approved:

10/11/2005

Date Certified to the 2004 Code:

Page:

Page 1 / 1

App/Seq #	Product Model # or Name	Model Description	Limits of Use
5133.1	Mid-Rise Accordion Shutter - Drwg# 05-208	Extruded aluminum blades folded together thru knuckles and retained by tracks to provide storm protection	Product shall not be installed within High Velocity Hurricane Zones as defined on section 1620.2 of the Florida Building Code.
5133.2	Residential Bertha Accordion Shutter - Drwg# 05-208	Extruded aluminum blades folded together thru knuckles and retained by tracks to provide storm protection	Product Shall not be installed within High Velocity Hurricane Zones as defined on section 1620.2 of the Florida Building Code



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# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 2-27, 2008

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8804	Kurlander	roughin/shower	PASS	
1A	176 S Emerald O/B	plates INSULATION	PASS	INSPECTOR: <i>OK</i>
8717	Parks	Final -	PASS	CLOSE
3	3 Mindow St Parks	floating deck		INSPECTOR: <i>OK</i>
8801	Barnfather	<del>shooting</del> roof		TOO WET TO WORK ON (rescheduled Thurs)
15E	49 S Sewalls Everglades	FRAMING	FAIL	INSPECTOR: <i>OK</i>
8145	Geisinger	stair question	OK	
8	8 Castle Hill O/B			INSPECTOR: <i>OK</i>
1801	Cummings	main stairs garage framing	CANCEL	
5	835 River Elias Mgmt			INSPECTOR: <i>OK</i>
8825	Kelso	sub sheathing	FAIL	
4	26 Rio Vista Sanco			INSPECTOR: <i>OK</i>
<del>8831</del>	<del>Mansad</del>	<del>final</del>	<del>PASS</del>	<del>CLOSE</del>
2	17 E High Pt Rd Jupiter Alum			INSPECTOR: <i>OK</i>
OTHER:				
8794	25 ISLAND WAY Koragon	FINAL A/C CHANGE	PASS	CLOSE <i>OK</i>
		11:30		

TREE

REMOVE/RELOCATE/REPLACE



TOWN OF SEWALL'S POINT, FLORIDA

Date JAN/26 2005 TREE REMOVAL PERMIT No 2402

APPLIED FOR BY MASSAD (Contractor or Owner)

Owner 17 E. HIGH POINT RD

Sub-division \_\_\_\_\_, Lot \_\_\_\_\_, Block \_\_\_\_\_

Kind of Trees \_\_\_\_\_

No. Of Trees: REMOVE 4 PINE, BRAZ. PEPPER, FIGS

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

No. Of Trees: REPLACE \_\_\_\_\_ WITHIN 30 DAYS

REMARKS \_\_\_\_\_

\_\_\_\_\_ FEE \$ 0

Signed, \_\_\_\_\_ Applicant

Signed, Gene Simmons (Dist) Town Clerk

BUILDING OFFICIAL

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Empty lined box for drawing or site plan.

PROJECT DESCRIPTION \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
REMARKS \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**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 two inches.

**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, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

**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 17 E Highpoint Address J. Massad Phone 2863733

Contractor Wright & Wright Address 5810 Collee Ave Phone (222) 260-5952

No. of Trees: REMOVE 4 Type: Short needle pine

No. of Trees: RELOCATE \_\_\_\_\_ WITHIN 30 DAYS Type: 2 BRAZILIAN PEPPER

No. of Trees: REPLACE \_\_\_\_\_ WITHIN 30 DAYS Type: 1 FICUS

Written statement giving reasons: The owner want the tree remove because he think it is danger. It might fall in the road and car might be passing by.

Signature of Property Owner J. Massad Date \_\_\_\_\_

Approved by Building Inspector: \_\_\_\_\_ Date 1/26 Fee: 0

Plans approved as submitted \_\_\_\_\_ Plans approved as revised/marked: ✓



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Handwritten text, possibly a signature or name, located in the lower-center of the page.

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# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri JAN 26, 2005 Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	KIPLINGER	TREE	PASS	
5	143 S. RIVER RD 018			INSPECTOR: <i>[Signature]</i>
6544	LANCASTER	INSULATION	FAIL	
1	5 PINEAPPLE MASTERPIECE	(First Pleaser?)		INSPECTOR: <i>[Signature]</i>
TREE	MASSAD	TREE	PASS	
2	17 E. HIGH POINT			INSPECTOR: <i>[Signature]</i>
6205	ANDERSON	LATH	PASS	
8A	9 PALMETTO PALM BEACH CREATIVE	WINDOW INST.	CANCEL	INSPECTOR: <i>[Signature]</i>
TREE	HIGH POINT RD INV.	TREE	PASS	
4	141 S. RIVER RD			INSPECTOR: <i>[Signature]</i>
6252	MOORE	FINAL ROOF	←	RESCHEDULE FOR FRI, 1/28
10	5 OAK HILL WAY AR MARTIN	SCOTT 60-3208		INSPECTOR: <i>[Signature]</i>
	<del>5455 S. R.</del> OSTEEN RIDGEVIEW ANGUS	ELEC. ROUGH	FAIL	INSPECTOR: <i>[Signature]</i>

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