# 6 Indialucie Parkway

# 5573 SFR

# MASTER PERMIT NO. N/A

# **TOWN OF SEWALL'S POINT**

ate 10/74/01 BUIL	DING PERMIT NO. 5573
uilding to be erected for MKHAEL   JENNIFER FLAUGH Type	of Permit S.F.R.
oplied for by GAVY HUF NAGEL INC. (Contra	actor) Building Fee <b>2400</b> . 00
ubdivision INDIALUCIE Lot 9 Block 1	Radon Fee 36.75
ddress 7 SIMARA SK 6 INDIALUCIE PKI	WY. Impact Fee 4024.92
rpe of structure S.F.L.	A/C Fee 120.00
FINAL CONSTRUCTION COST. 26,000  PRIMIT CONSTRUCTION COST 250,000  13362 CK # 0235 15,000×9.40/1100=	Electrical Fee 120.08
arcel Control Number:	Plumbing Fee 120.00
35-37-41-002-004-0009.030000	Roofing Fee
mount Paid 1229 (2) Check # 2320 Cash O	Roofing Fee 120,00 PLAN ZHILW ther Fees (288.00) 288.00
otal Construction Gost \$ 250,000 . ∞	TOTAL Fees 7279-67
Igned Signed Signed	for
	Town Building Inspector

Town of Sewall's Point	RE	CEIVED	ldg. Permit Numb	er: 55 7.3
BUILDING PERMIT APPLICA	ATION SE	P - 4 2001		
Owner or Titleholder's Name MICHAIR AND	In IPA	5	Dhana Na (= 1)	1 222 -1120
Street: 7 SIMARA ST	City (	STANT (CHIA	ii Or) State: F	7 7 2 1 9 1 1 1
Legal Description of Property: LOT 9, i	BLOCK 4	PLAT RO	NV 4 DAKE	20134194 27
lo MONNEURIE PARRINA	8,	Parcel Number	35-37-41-00	2-004-0000 0-
Location of Job Site: LOT 9 INDIACU	CIE SEL	ALLS POINT	FL	3000
TYPE OF WORK TO BE DONE: NEW 9				
CONTRACTOR/Company Name: GARY				
Street: 825. SEST LUCIE BLUD	City <u></u>	TUADT	State: FC	- Zip34996
State Registration: CBC 028627		State License	·	
ARCHITECT: BC ARCHITECTS (	BRIAN CA	IRNS	Phone No. (タイ)	223 - 0010
Street: 900 E OSCEOLA ST.	City_	TURET	State: Fu	Zip 34994
ENGINEER:			Phone No. ( )	
Street:	City			
AREA SQUARE FOOTAGE - SEWER - ELEC				
Living Area: 21632658 Garage Area: 6		Carport:	Accesso	orv Blda.
Covered Patio: 342 Scr. Porch:		Wood Deck:	_	,, J.12 <b>8</b>
Type Sewage: SEPTIC				
New Electrical Service Size: 200 A				
FLOOD HAZARD INFORMATION				
Flood zone:	_ Minimum E	Base Flood Eleva	ition (BFE):	NGVD
Proposed first habitable floor finished elevation	n:	N	GVD (minimum 1	foot above BFE)
COSTS AND VALUES				
Estimated cost of construction or Improvement	\$ 250,0	000	<u> </u>	
Estimated Fair Market Value (FMV) prior to imp	•			
If Improvement, is cost greater than 50% of Fai	ir Market Val	ue? YES	NO	<del></del>
Method of determining Fair Market Value:				
SUBCONTRACTOR INFORMATION: (Notificati	ion to this of	fice of subcontra	ctor change is ma	indatory.)
Electrical: ZANE CARTER ELECTRIC, IN	<u>ال .</u> s	State: FC		1500554
				41 g 7 an
Form revised: 20 April 2000	Page - 2.	4 4 1 1 88 3 1 1350 30 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	and the second	`.
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			· <del>-</del>	. —
Date:			ilding Official:	Approved by Bu
				;;
	•	gencies.	s Isnebel bns elst	<b>S</b>

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,

NOTICE

### TREE REMOVAL (Attach sealed survey)

Num	nber of t	rees to be removed:	Number of	trees to be reta	ained:	Number of trees t	o be
plan	ted:	Number of Specimer	n trees remove	∍d:			
Fee:	\$ <u>:</u> :	Authorized/Date:					
	, j					<b>≟</b>	
DEV	<b>ELOPN</b>	NENT 'ORDER #			•	•	
	٠,٠	•					
1.	ALL	~ LICATIONS REQUIRE					
	<b>a.</b>	Property Appraisers Parcel	Number.			•	
	b.	Legal Description of your pr	operty. (Can I	oe found on you	ur deed surv	ey or Tax Bill.)	
	Č.	Contractors name, address,	phone numb	er & license nu	mbers.		
	ď.	Name all sub-contractors (p	roperty license	ed)			
•	Θ.	<b>∩urrent Survey</b>			_		

- 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,
  - Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
  - e.: Truss layout
  - 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 plantilit (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. Intigation Sprinkler System layout showing location of heads, valves, etc.
- 7. A cortified 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 OF COMMENCEMENT

FLA. 1967 LAWS	This Notice of Commencement is filed in connection with Mortgage filed in O.R. Book, page,
	Public Records of Martin County, Florida.
State of Florida	Parcel ID#: 35-37-41-002-004-00090
County of Martin	Loan Number: <u>5024119041</u>
The undersigned hereby informs all concerned that in Section 713.13 of the Florida Statutes, the following	nprovements will be made to certain real property, and in accordance with information is stated in this NOTICE OF COMMENCEMENT.
Description of Property  LENGTHY LEGAL SEE ATTACHED SCHEDU	LE A
General description of improvements	SINGLE FAMILY RESIDENCE AND ALL IMPROVEMENTS
Owner: MICHAEL D. FLAUGH, JENNIFER T.	FLAUGH
Address: 7 SIMARA STREET, STUART,FL 349	96-
Owner's interest in site of the improvement	FEE SIMPLE  This instrument prepared by
Fee Simple Title Holder (if other than owner)	HARBOR FEDERAL SAVINGS BANK
•	
NameNONE	
AddressNONE	
Address: 825 SE ST. LUCIE BLVD. STUART, F	
Surety (if any) NONE Address NONE	Amount of Bond \$ NONE
Name of any person making a loan for the constru	iction of the above improvements:
HARBOR FEDERAL SAVINGS BANK POST OFFICE BOX 249 FORT DIEBOE ELOBIDA 34954	Telephone # 561-460-7239
FORT PIERCE, FLORIDA 34954	
Name of person within the State of Florida design	ated by owner upon whom notices or other documents may be served:
HARBOR FEDERAL SAVINGS BANK POST OFFICE BOX 249 FORT PIERCE, FLORIDA 34954	Telephone # 561-460-7239
In addition to himself, owner designates the follow Section 713.13(1)(F), Florida Statutes, (Fill in at C	ving person to receive a copy of the Licnor's Notice as provided in Owner's option).
What Die	Owner ) T. Plant
The foregoing instrument was acknowledged before Michael D. Flaugh and Jennifer T. F.	
Thomas H. Thurlow, III	home Some
MY COMMISSION # CC775526 EXPIRES September 15, 2002	Notary Public My Commission Expires:
BONDED THRU TROY FAIN INSURANCE, INC.	My Commission No.:

EXPIRATION DATE OF THE NOTICE OF COMMENCEMENT IS 1 YEAR FROM THE DATE OF RECORDING, UNLESS OTHERWISE

### **OWNER'S AFFIDAVIT OF BUILDING COSTS**

(To be submitted at time of final inspection for Certificate of Occupancy)

# STATE OF FLORIDA MARTIN COUNTY

**BEFORE ME**, the undersigned authority, personally appeared the undersigned Affidavit, who, being first duly sworn, under penalty of perjury, deposes and says:

- 1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
- 2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
- That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 265,000.05
- 4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

ffidavit's Signature:

SWORN TO and subscribed before me this // day
of July , 2002, by M.Flaugh
\_\_\_\_\_\_, who is personally known to me or
produced \_\_\_\_\_\_\_ as identification.

Notary Public
My commission expires:

Joan H. Barrow

COMMISSION # CC763645 EXPIRES

November 30, 2002 BONDED THRU TROY FAIN INSURANCE INC.

(Notary S

DATE

7.11.02

TO

Sewalls Point Building Department

**FROM** 

Mike Flaugh

6 Indialucie Pkwy.

RE

Construction costs of new home

To whom it may concern,

The cost of the construction for our new home at 6 Indialucie Parkway is approximately 256,000.00. I say approximately because many of the finish items were purchased directly by my wife and I. Considering those items, the amount of 256.000.00 is reasonably accurate.

If you have any questions, do not hesitate to call.

Mike Flaugh

Office 287-5149

Cell 201-9733

MASTER PERMIT	NO	N	/ <u>A</u>
	140	<del>'\</del>	

# TOWN OF SEWALL'S POINT Date 10/24/01 BUILDING PERMIT NO. 5573 Applied for by LAY HUF NAGEL INC. (Contractor) Building Fee 2400.00 Subdivision \_\_\_\_\_ Lot 9 Block 4 Radon Fee 36.75 Address 7 SIMARA ST. Impact Fee 4024.92 Type of structure S.F.L. A/C Fee 120.00 Electrical Fee 120.00 Parcel Control Number: Plumbing Fee 120.00 35-37-41-002-004-0009.030000 Amount Paid 1229 (Check # 2320 Cash Other Fees (288.00) 288.00 Total Construction Oost \$ 250,000.00 TOTAL Fees 7229 67 \_\_\_\_ Signed \_\_ Com Signed . Town Building Inspector Applicant

# LDING PERMIT

FORM BOARD SURVEY COMPACTION TESTS GROUND ROUGH SOIL POISONING FOOTINGS / PIERS SLAB ON GRADE TIE-BEAMS & COLUMNS STRAPS AND ANCHORS DRIVEWAY AS-BUILT SURVEY	DATE	SHEATHING FRAMING INSULATION ROOF DRY-IN ROOF FINAL METER FINAL AS BUILT SURVEY STORM PANELS LANDCAPE & GRADE FINAL INSPECTION	DATE				
FLOOD ZONE LOWEST HABITABLE FLOOR ELEV							
24 HOURS NOTIC	24 HOURS NOTICE REQUIRED FOR INSPECTIONS. CALL 287-2455						
WORK HOURS - 8:00 AM UNTIL 5:00 PM							
D. Name Cons		TROUGH SATURDAY	on   Demolition				

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

	CORD	CEF	RTIF	FICATE OF LIAB	ILITY INS	SURANC	E OPID LP	DATE (MM/DD/YY) 10/01/01
ROOUCE	a A				THIS CERTI	FICATE IS ISSUED	AS A MATTER OF INFOR	
041	Johnson Ag SE Ocean i	3lvd	Inc.		HOLDER. TI	HIS CERTIFICATE (	ITS UPON THE CERTIFICATION OF THE POLICIES ROLL BY THE POLICIES	ND OR
_	:t FL 34990 e:561-287-		Fax	: 561-287-4255		INSURERS A	FFORDING COVERAGE	
SURED					INSUPER A	Auto-Owners	Insurance Co	
					INSUPER 8:	FCCI Insuran	nce Company	
	Gary H	ufnage	l Inc	c	INSURER C:			
	825 SE Stuart	St Lu	cie I	ålvd	INSURER O:			
	Stuart	FL 34	330	•	INSURER E			
OVER	AGES							
ANY F	REQUIREMENT, T	ERM OR C	ONDITION	ELOW HAVE BEEN ISSUED TO THE INS ON OF ANY CONTRACT OR OTHER DOC DED BY THE POLICIES DESCRIBED HER MAY HAVE BEEN REDUCED BY PAID CL	CUMENT WITH RESPE	CT TO WHICH THIS	CERTIFICATE MAY BE ISSU	ED OR
IR	TYPE OF INSL	RANCE	T	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	s
R	ENERAL LIABILITY		$\neg \neg$		unit (massauri)	and a female with	EACH OCCUPPENCE	s 1000000
	COMMERCIAL GEN	ERAL I MARII IT	,	972312 20547067	06/01/01	06/01/02	FIRE DAMAGE (Any one fire)	s 50000
·   👚	CLAMS MADE		OCCUR	J.2322 2031/00/	-57,517,51		MED EXP (Any one person)	s 5000
$\vdash$	1	· 🟝 '					PEPSONAL & ADVINUEY	\$ 1000000
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G	ENTL AGGREGATE LIMIT	APPLIES PE	ו ר				PPODUCTS - COMP/OP AGG	s 2000000
A	JTOMOBILE LIABILITY	ect !	roc	NOT COVERED			COMBINED SINGLE UNIT (Ea accident)	s
-	ALL OVARIED AUTO	s		NOT COVERED			BOOILY INJURY	
	SCHEDULED AUTO	s					(Per person)	\$
	HEPED AUTOS	os					BCDILY BUURY (Per accident)	s
		<del></del>					PROPERTY DAMAGE (Per accident)	5
a	ARAGE LIABILITY						AUTO ONLY - EA ACCIDENT	\$
-	CTUA Y/A			NOT COVERED			OTHER THAN EA ACC	\$
Œ	XCESS LIABILITY						EACH OCCUPPENCE	s
	OCCUP	CLAIMS	M-DE	NOT COVERED			AGGREGATE	\$
L	_					İ		\$
_	DEDUCTIBLE							\$
	RETENTION	<u> </u>				-	WC STATUL OTH	S
1	ORKERS COMPENSA					1	TOR'T LIMITS ER	
в	MPLOYERS' LIABILIT'			001WC01A33641	03/01/01	03/01/02	EIL EACH ACCIDENT	\$ 100000
							E L DISEASE - EA EMPLOYEE	s 100000
							EL DISEASE - POUCY UNIT	s 500000
	THER						-	
(			SVEHICI	ES/EXCLUSIONS ADDED BY ENDORSEMENT/SPEC	CAL PROVISIONS	_1	<del> </del>	
	PTION OF OPERATION	いっしゅうしゅうしゅうしゅうしゅう		llation for workers com		verage.		-
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DESCRI 30		e of c		DITIONAL INSURED; INSURER LETTER:	CANCELLA			
DESCRI 30 d	days notic	e of c			CANCELLAT	F THE ABOVE DESCRIBE	D POLICIES BE CANCELLED BEFO	
DESCRI 30 d	days notic	e of c		DITIONAL INSURED; INSURER LETTER:	CANCELLAT SHOULD ANY C DATE THEREO	OF THE ABOVE DESCRIBE F, THE ISSUING INSURER	WILL ENDEAVOR TO MAIL	10* DAYS WRIT
DESCRI 30 d	days notic	e of c		DITIONAL INSURED; INSURER LETTER:	CANCELLAT  SHOULD ANY C  DATE THEREOR  NOTICE TO THE	OF THE ABOVE DESCRIBE F, THE ISSUING INSURER E CERTIFICATE MOLDER	WILL ENDEAVOR TO MAIL NAMED TO THE LEFT, BUT FAILUR	10* DAYS WRIT
DESCRI 30 d	days notic	e of c	N ADD	DITIONAL INSURED; INSURER LETTER: TOWNO	CANCELLAT  SHOULD ANY C  DATE THEREOR  NOTICE TO THE	OF THE ABOVE DESCRIBE F, THE ISSUING INSURER E CERTIFICATE MOLDER	WILL ENDEAVOR TO MAIL	10* DAYS WRIT
DESCRI 30 d	IFICATE HOLDE	e of c	N ADI	DITIONAL INSURED; INSURER LETTER:	CANCELLAT  SHOULD ANY C  DATE THEREO  NOTICE TO TH  IMPOSE NO OE  REPRESENTAT	OF THE ABOVE DESCRIBE F, THE ISSUING INSURER E CERTIFICATE HOLDER I BLIGATION OR LIABILITY C	WILL ENDEAVOR TO MAIL NAMED TO THE LEFT, BUT FAILUR OF ANY KIND UPON THE INSURER.	10* DAYS WRITE

© ACORD CORPORATION 1988

# MASTER PERMIT NO. 5573

# **TOWN OF SEWALL'S POINT**

Date 1 22 02	BUILDING PERMIT NO. 5575
Building to be erected for MICHAEL FLAUGH	Type of Permit SUB-ELEC
Applied for by GARY GIFFORD ELECT.	(Contractor) Building Fee
Subdivision INDIALUCIE Lot 9 Bloc	ck 4 Radon Fee
Address 6 INDIALUCIE PKWY.	Impact Fee
Type of structure $SFR$	A/C Fee
QUALIFIER: GARY G LIC: ME00030	Electrical Fee SEC 5573
Parcel Control Number:	Plumbing Fee
	Roofing Fee
Amount Paid Check# Cash	Other Fees ()
Total Construction Cost \$	TOTAL Fees
Signed Signed Signed	Mere Simmon Inte
Applicant	Town Building Inspector

ACORD CERTIF	FICATE JF LIABIL	ITY INS	URAN	DATE (MM/DD/YY) 1-17-02		
PRODUCER		THIS CER	TIFICATE IS ISS	SUED AS A MATTER OF INFORMATION		
Kearns Agency fo Florida, Inc. P.O. Box 1849			ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.			
Jensen Beach, FL 3495	58			AFFORDING COVERAGE		
INSURED						
Gary J. Gifford, Inc.		INSURER A.	Auto-Owners			
Gary J. & Maya L. Gif		INSURER B:	Everest Nat	RECEIVED		
350 SW Linden Street		INSUREA C:		128197879797		
Stuart, FL 34997		INSURER D:				
<del></del>		INSURER E:		<del></del>		
THE BOLICIES OF INSURANCE LISTER	DELOW HAVE BEEN ISSUED TO THE INC	1000 111100 1	50V5 500 TUE 50	BY:		
MAY PERTAIN, THE INSURANCE AFFO	DITION OF ANY CONTRACT OR OTHER (	DOCUMENT WIT REIN IS SUBJEC	H RESPECT TO W	OLICY PERIOD INDICATED. NOTWITHSTANDING HICH THIS CERTIFICATE MAY BE ISSUED OF MS, EXCLUSIONS AND CONDITIONS OF SUCH		
NSR LTR TYPE OF INSURANCE	POLICY NUMBER	OLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION	LIMITS		
GENERAL LIABILITY			1	EACH OCCURRENCE \$ 500,000		
X COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one live)   \$ 50,000		
A CLAIMS MADE X OCCUR				MED EXP (Any one person) \$ 5,000		
	20521484-01	10-04-01	10-04-02	PERSONAL & ADV INJURY \$ 500,000		
:				GENERAL AGGREGATE   \$ 500,000		
GEN'L AGGREGATE LIMIT APPLIES PER:				PRODUCTS COMP/OP AGG \$ 500,000		
X POLICY PRO-						
: AUTOMOBILE LIABILITY ANY AUTO				COMBINED SINGLE LIMIT (Sa accident)		
ALL OWNED AUTOS	05/2/720 00	10-04-01	04 04 03	BODILY INJURY		
A X SCHEDULED AUTOS	95434730-00	10-04-01	04-04-02	(Per person) 100,000		
X HIRED AUTOS				DODE VINITO		
X NON-OWNED AUTOS			1	(Per accident) \$ 300,000		
	·		! ! !	PROPERTY DAMAGE \$ 50,000		
GARAGE LIABILITY	-		1	AUTO ONLY - EA ACCIDENT \$		
ANY AUTO			1	OTHER THAN EA ACC   \$		
EXCESS LIABILITY	!			EACH OCCURRENCE \$		
OCCUR CLAIMS MADE			1	AGGREGATE \$		
·			<b>i</b> !	<u> </u>		
DEDUCTIBLE	<u>:</u>		i	i L		
RETENTION \$	!		·	\$		
WORKERS COMPENSATION AND	ļ .		•	X WC STATU OTH-		
EMPLOYERS' LIABILITY	2700000061001		1	E L. EACH ACCIDENT \$ 100,000		
В	2700008361021	01-01-02	01-01-03	EL DISEASE - EA EMPLOYEE \$ 100,000		
, , , , , , , , , , , , , , , , , , ,				EL DISEASE - POLICY LIMIT \$ 500,000		
OTHER !	1			1		
· ·	i 1		:	;		
DESCRIPTION OF OPERATIONS/LOCATIONS/VEL	HICLES/EXCLUSIONS ADDED BY ENDORSEMENT/	SPECIAL PROVISIO	NS.			
besome from or or enamenates arrived		5, 20,A2, 1,10 1,510				
Electrical Contractor	r			•		
			<del> </del>			
CERTIFICATE HOLDER ADD	ITIONAL INSURED; INSURER LETTER:	CANCELLA	TION			
	•			BED POLICIES BE CANCELLED BEFORE THE EXPIRATIO		
Town of Sewalls Point		DATE THEREO	F. THE ISSUING INSUR	ER WILL ENDEAVOR TO MAIL 30 DAYS WRITTE		
One Sewalls Point Roa	ad	NOTICE TO THE	CERTIFICATE HOLDE	R NAMED TO THE LEFT, BUT FAILURE TO DO SO SHAL		
Stuart, FL 34996		IMPOSE NO DE	LIGATION OR LABILI	TY OF ANY KIND UPON THE INSURER, ITS AGENTS O		
		REPRESENTAT	IVES.			
Fax to: 561 220-4765	5	AUTHORIZED RE	PRESENTATIVE	<u></u>		

Jan. 17 2001 10:10AM P1

FROM :GIFFORD ELECTRIC FAX NO. :5612190146

...

	MASTER PERMIT NO. 5573	
TOWN OF SEWALL'S F	POINT	_
	r r n /	

Date 10 24 01	BUILDING	<b>PERMIT NO.</b> 5576
Building to be erected for MICSAET 1 JEX	WHEN FLAUGAType of Peri	mit SUB-PLUMBURE
Applied for by Gang Newsonger In	MASTER PLUMBING (Contractor)	Building Fee
Subdivision / NOILUCIA Lot	,	<b>,</b>
Address 6 INDIA CUCIE	PKWY	Impact Fee
Type of structure		A/C Fee
		Electrical Fee
Parcel Control Number:		Plumbing Fee SEE 5573
35 37 - 41 - 002 -	004-0009-030000	Roofing Fee
	Cash Other Fee	es (
Total Construction Cost \$		TOTAL Fees 120 00 (PAID on 557)
1/1/01		Paid on 557
Signed littly // Mitch	Signed	
Applicant	•	uilding Inspector
Applicant		Office
BUILD	ING PERMI	T
FORM BOARD SURVEY DATE COMPACTION TESTS DATE GROUND ROUGH DATE SOIL POISONING DATE FOOTINGS / PIERS DATE SLAB ON GRADE DATE TIE-BEAMS & COLUMNS DATE STRAPS AND ANCHORS DATE DRIVEWAY DATE AS-BUILT SURVEY DATE	SHEATHING FRAMING INSULATION ROOF DRY-IN ROOF FINAL METER FINAL AS BUILT SURVEY STORM PANELS LANDCAPE & GRADE FINAL INSPECTION	
FLOOD ZONE	LOWEST HABITAI	BLE FLOOR ELEV
	· ····································	CALL 287-2455
24 HOURS NOTICE REQUIRED FOR	(INSPECTIONS.	
WORK HOURS		IL SIVU PM
□ New Construction □	AY TROUGH SATURDAY	on Demolition
U New Construction	reinouel 🗆 ruditi	OII Dellionasi

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!

#### CERTIFICATE OF LIABILITY INSURANCE OF ID DATE (MM/DD/YY) 10/04/01 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION PRODUCER ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE Stuart Insurance, Inc. HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. 3070 S W Mapp Palm City FL 34990 **INSURERS AFFORDING COVERAGE** Phone: 561-286-4334 Fax: 561-286-9389 Southern Owners INSURER A: Masters Plumbing, Inc. of Martin County dba Master Plumbing 2551 SE Clayton Street Stuart FL 34997-5017 Auto Owners Insurance INSURER B: INSURER C: INSURER D INSURER E: COVERAGES ML 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. POLICY EFFECTIVE POLICY EXPIRATION DATE (MM/DD/YY) TYPE OF INSURANCE **POLICY NUMBER** LIMITS EACH OCCURRENCE s 1,000,000 **GENERAL LIABILITY** COMMERCIAL GENERAL LIABILITY 20592185 10/09/01 10/09/02 FIRE DAMAGE (Any one fire) \$ 100,000 CLAIMS MADE | X OCCUR \$ 10,000 MED EXP (Any one person) \$1,000,000 X | blnkt contrctl PERSONAL & ADV INJURY GENERAL AGGREGATE s 1,000,000 GEN'L AGGREGATE LIMIT APPLIES PER PRODUCTS - COMP/OP AGG \$1,000,000 POLICY AUTOMOBILE LIABILITY COMBINED SINGLE LIMIT 10/09/01 10/09/02 (Ea accident) 4248759300 В ANY AUTO ALL OWNED AUTOS **BODILY INJURY** \$ 500000 (Per person) SCHEDULED AUTOS X HIRED AUTOS BODILY INJURY s 500000 (Per accident) Х NON-OWNED AUTOS PROPERTY DAMAGE s 500000 AUTO ONLY - EA ACCIDENT GARAGE LIABILITY \$ ANY AUTO **EA ACC** \$ OTHER THAN AUTO ONLY: AGG s EACH OCCURRENCE s 2000000 **EXCESS LIABILITY** 10/09/01 10/09/02 s 2000000 X OCCUR **AGGREGATE** В CLAIMS MADE 20593643 DEDUCTIBLE \$ 10000 RETENTION WORKERS COMPENSATION AND TORY LIMITS **EMPLOYERS' LIABILITY** 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

Plumbing Contractor - State of Florida

CERTIFICATE HOLDER	N	ADDITIONAL INSURED; INSURER LETT	ER:	CANCELLATION
1 South S	Sewa:	lls Point lls Point Road t FL 34996	rowsp-1	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 SHAL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
ACORD 25-S (7/97)				© ACORD CORPORATION 1988

٠	. URD. CERTIFI	ICATE OF LIABIL				3/23/01			
_			THIS CER	TIFICATE IS IS	SUED AS A MATTER ( NO RIGHTS UPON T	F INFORMATION			
	on Risk Services, Inc.	•	I HOLDER.	THIS CERTIF	CATE DOES NOT AME	NO EYTEND OF			
	001 Brickell Bay Dr.		ALTER TH	ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.					
	uite 1100 iami, FL 33131-4937		COMPANIES AFFORDING COVERAGE						
			COMPANY	•					
	05-372-9950 RED		A NA	TIONAL FIR	RE INS CO OF HTFE	)			
_			COMPANY						
	ASIS OUTSOURCING, INC.	•	B CO		CASUALTY COMPANY				
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	arasota Center		С		******				
	819 Main Street, 8th F	lui in	COMPANY		MAR 2 8 2001				
	arasota, FL 34236 VERAGES		D						
		CIEC OF INCHEANOR LICYED OF CO.		I	3Y: <u>Nc</u>	_			
	THIS IS TO CERTIFY THAT THE POLICINDICATED, NOTWITHSTANDING AN CERTIFICATE MAY BE ISSUED OR MEXCLUSIONS AND CONDITIONS OF S	MAY PERTAIN THE INSURANCE AFFO	IN OF ANY CONT	RACT OR OTHER	DOCUMENT WITH RESPEC	T TO			
CO .TR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION	N	rs			
	GENERAL LIABILITY				GENERAL AGGREGATE	5			
	COMMERCIAL GENERAL LIABILITY				PRODUCTS - COMP/OP AGG	5			
	CLAIMS MADEOCCUR				PERSONAL & ADV INJURY	\$			
	OWNER'S & CONTRACTOR'S PROT	•			EACH OCCURRENCE	\$			
					FIRE DAMAGE (Any one fire)	s			
			_		MED EXP (Any one person)	\$			
	ANY AUTO				COMBINED SINGLE LIMIT	\$			
	ALL OWNED AUTOS SCHEDULED AUTOS		:		BODILY INJURY (Per person)	s			
	HIRED AUTOS		:		BODILY INJURY (Per accident)	5			
					PROPERTY DAMAGE	\$			
ļ	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$			
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					EACH ACCIDENT	\$			
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	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				X WC STATU- OTH-				
•		194268115 194268129	4/01/01	4/01/02	EL EACH ACCIDENT	s 1000000			
3	THE PROPRIETOR/ PARTNERS/EXECUTIVE  X INCL	194268146			EL DISEASE - POLICY LIMIT	s 1000000			
-	OFFICERS ARE: EXCL				EL DISEASE - EA EMPLOYEE	s 1000000			
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	RIPTION OF OPERATIONS/LOCATIONS/VEHICL			-					
	ILY THOSE EMPLOYEES LEA STER PLUMBING	ASED TO BUT NOT SUBCON	TRACTORS OF	F:					
ER	TIFICATE HOLDER		CANCELLATI	ON					

TOWN OF SEWALLS POINT 1 S SEWALLS POINT ROAD SEWALLS POINT, FL 34996

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

015687432

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ACORD 25-S (1/95)

DATE BATCH NUMBER DEGISTA	SETATE DE FLORIDA  TRUSENESS DE PROFESSIONAL  TRUSES DE LICENSINE BOARD	REGULATION
The Publisher State of the Publisher of		
VAN ETTEN. PETER J MASTERS PLUMBING INC OF MARY 2551 SE CLAYTON STREET	IN COUNTY	CØ57528
JEB BUSH GOVERNOR	DISPLAY AS DECLURA	C YNTUTA A
· · · · · · · · · · · · · · · · · · ·	DISPLAY AS REQUIRED BY LAW	CYNTHIA A. HENDERSON SECRETARY

MARTIN COUNTY ORIGINAL 2000 COUNTY OCCUPATIONAL LICENSE 2001 LATTY C. O'Steen, Tax Collector, P.O. Box 8013, Shart, FL 34005 (801) 285-6004	LICENSE 1977 524 053 CERT PHONE 561 287 236 Sic NO.	0000
CHARACTER COUNTS IN MARTIN COUNTY	2551 SE CLAYTON ST	- C
PREV VR. : 0.00 UC. FEE	OSK ELUMBING CLAYTON FL 34997	RECEIPT OF PAYAR

# BC Architects, Inc.

September 8, 2001

Martin County Building Department

RE: Flaugh Residence

a. a..

Dear Building Official:

In response to the review comments for a building permit, the drawings were revised and the changes were marked with a revision no. 1. The following addresses the issues:

- 3a. There is a 5 1/2" step down to the porch. See 20-A4
- 3b. There is no downdraft range.
- 3c/d. The columns and sizes are indicated on the foundation plan.
- 4a. The ceiling junction boxes to support a ceiling fan or pendant light fixture is indicated per the legend on A9 and A10.
- 4b. All A/C equipment is located within closest. A pull chain light fixture is indicated for the attic access.
- 6a. The piping layout is indicated on the foundation plan.
- 6b. The fixtures are indicated on the foundation plan.
- 6c. The slope is indicated on the foundation plan.
- 7a. The trusses were figured on a worst case bases (1100 lbs. truss and 4500 lbs. girder) of uplift. The connectors accommodate all trusses as laid out. The truss manufacture must submit their uplift values to verify.
- 7b. See A9 and A10.
- 8a. The owner is locating a custom railing that complies to the min specification. See specification 10-3.

Sincerely,

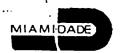
Brian Carnes, NCARB

SUPPORT WIND CO	REPORT DDE: ASCE	7-93	JOB D WIND	ESCRIPTION MPH: 120	BLDG	TYPE: CL	OSED	========
TRUSS DESC	TRUSS SPAN-ft	SUPPORT SIZE-in.	SUPPORT TYPE	BEARING	BEARING YLOC-ft.	REACT.	REACT. MAX#	MAX WIND UPLFT#
A1	25.000	3.000	HANGER	0.000	9.208	3142		-1800
A1	25.000	4.000	WALL	24.667	9.208	3335		1930
A2	25.000	3.000	HANGER	0.000	9.208	1375		-910
A2	25.000	4.000	WALL	24.667	9.208	1375		-950
A3	34.667	3.000	HANGER	0.833	9.208	1794		-1200
A3	34.667	8.000	WALL	33.167	9.875	1927		-1290
A4	34.667	3.500	HANGER	0.833	10.542	411		-220
A4	34.667	8.000	WALL	8.500	9.875	1807		-1280
A4	34.667	8.000	WALL	33.167	9.875	1503		-980
A5	34.667	8.000	WALL	0.833	10.542	499		-310
A5	34.667	8.000	WALL	8.500	9.875	1841		-1290
A5	34.667	8.000	WALL	33.167	9.875	1472		-980
A6	27.167	8.000	WALL	0.833	10.542	540		-310
A6	27.167	8.000	WALL	8.500	9.875	1445		-1050
A6	27.167	8.000	WALL	26.500	9.875	1003		-670
A7	28.000	8.000	WALL	0.833	10.542	543		-310
A7	28.000	8.000	WALL	8.500	9.875	1418		-1050
A7	28.000	8.000	WALL	26.500	9.875	1119		-760
A8	34.667	8.000	WALL	0.833	10.542	475		-310
A8	34.667	8.000	WALL	8.500	9.875	1853		-1270
A8	34.667	8.000	WALL	32.833	9.875	1485		-1000
A9	27.000	8.000	WALL	1.500	9.875	244		-180
A9	27.000	8.000	WALL	8.500	9.208	1622		-1030
A9	27.000	6.000	WALL	26.500	9.208	939		-660
A10	27.167	8.000	WALL	0.833	9.875	496		-270
A10	27.167	8.000	WALL	8.500	9.208	1502		-940
A10	27.167	3.000	HANGER	26.917	9.208	990		-610
A11	9.167	8.000	WALL	0.833	10.542	578		-410
A11	9.167	8.000	WALL	8.500	10.542	431		-450
B1	27.000	304.000	WALL	0.833	9.208	2970		-2370
B2 B2	27.000 27.000	8.000	WALL WALL	0.833 25.500	9.208 9.208	1485 1485		-910 -910
B3	27.000	8.000	WALL	0.833	9.208	1536		-930
B3	27.000	18.000	WALL	25.500	9.208	1434		-850
B4	25.833	8.000	WALL	0.833	9.208	1488	,	-1010
B4	25.833	4.000	WALL	25.500	9.208	1354		-910
B5 B5	25.833 25.833	200.000	WALL WALL	0.833 25.500	9.208 9.208	2479 363		-900 -810
C1	18.333	8.000	WALL	0.833	9.208	1907		-1130
C1	18.333	8.000	WALL	16.833	9.208	1907		-1130
C2 C2	18.333 18.333	8.000 8.000	WALL WALL	0.833 16.833	9.208 9.208	1008		-630 -630
C3	18.333	8.000	WALL	0.833	9.208	1008		-630
C3	18.333	8.000	WALL	16.833	9.208	1008		-630
C4 C4	18.333 18.333	3.500	WALL WALL	-2.833 16.833	7.931 9.208	1107 1222		-650 -760
C5 C5	17.500 17.500	8.000	WALL WALL	0.833 16.833	9.208 9.208	4759 6227		-3070 -3940
D1	18.667	3.000	HANGER	0.833	9.208	.1894		-1100
D1	18.667	8.000	WALL	17.167	9.208	2105		-1230
D2	18.667	8.000	WALL	0.833	9.208	912		-550

D2	18.667	8.000	WALL	17.167	9.208	1050	-640
D3	18.667	8.000	WALL	0.833	9.208	912	-550
D3	18.667	8.000	WALL	17.167	9.208	1049	-640
D4	17.833	8.000	WALL	0.833	9.208	935	-540
D4	17.833	8.000	WALL	17.167	9.208	935	-720
D5	17.000	8.000	WALL	0.000	9.208	993	-730
D5	17.000	8.000	WALL	16.333	9.208	1868	-1010
D6	25.167	8.000	WALL	0.000	9.208	1377	-1000
D6	25.167	3.000	HANGER	24.917	9.875	1391	-750
E1	15.167	8.000	WALL	0.833	19.875	1476	-990
E1	15.167	3.000	HANGER	14.917	19.875	1307	-950
E2	15.167	8.000	WALL	0.833	19.875	904	-640
E2	15.167	3.000	HANGER	14.917	19.875	765	-530
E3	16.000	8.000	WALL	0.833	19.875	889	-620
E3	16.000	8.000	WALL	14.500	19.875	871	-620
E4	16.000	8.000	WALL	0.833	19.875	1586	-1060
E4	16.000	8.000	WALL	14.500	19.875	1586	-1060
E5	16.667	8.000	WALL	0.833	19.875	2138	-1390
E5	16.667	8.000	WALL	15.167	19.875	2063	-1380
E6	15.000	8.000	WALL	0.000	19.875	3664	-2370
E6	15.000	8.000	WALL	14.333	19.875	2352	-1530
J7А	7.000	8.000	WALL	0.833	9.208	339	-200
J7А	7.000	3.000	HANGER	6.750	9.208	339	-340
HR5 HR5 HR5	7.071 7.071 7.071	11.314 1.500 1.500	WALL NAILED NAILED	1.241 7.071 7.071	9.208 9.208 11.515	· 567 74 251	-330 -260
HR3 HR3 HR3	6.471 6.471 6.471	2.726 1.500 1.500	WALL NAILED NAILED	1.295 6.471 6.471	9.208 9.208 11.595	453 60 197	-270 -220
HR2 HR2 HR2	6.156 6.156 6.156	8.380 1.500 1.500	WALL NAILED NAILED	0.892 6.156 6.156	9.208 9.208 11.393	400 10 132	-220 -190
HR1	4.503	9.186	WALL	0.957	9.208	353	-210
HR1	4.503	3.500	NAILED	4.503	9.208	143	-180
HR5 HR5 HR5	7.071 7.071 7.071	11.314 1.500 1.500	WALL NAILED NAILED	1.241 7.071 7.071	19.875 19.875 22.465	566 90 234	-350 -300
HR7E HR7E HR7E	9.899 9.899 9.899	11.314 1.500 1.500	WALL NAILED NAILED	1.241 9.899 9.899	19.875 19.875 23.382	862 428 294	-540 -560
J1	1.000	3.500	NAILED	0.000	9.208	78	-180
J1	1.000	2.002	WALL	0.833	9.208	32	-180
J3 J3 J3	3.000 3.000 3.000	8.000 1.500 1.500	WALL NAILED NAILED	0.833 3.000 3.000	19.875 19.875 21.554	270 26 59	-180 -180
JG3 JG3 JG3	3.000 3.000 3.000	8.000 1.500 1.500	WALL NAILED NAILED	0.833 3.000 3.000	9.208 9.208 10.604	270 18 56	-180 -180
J6 J6 J6	6.333 6.333 6.333	8.000 1.500 1.500	WALL NAILED NAILED	0.833 6.333 6.333	9.208 9.208 11.604	427 68 202	-230 -220
J6 J6 J6	5.971 5.971 5.971	8.000 1.500 1.500	WALL NAILED NAILED	0.833 5.971 5.971	9.208 9.208 11.432	408 62 186	-220 -210
J7	7.000	8.000	WALL	0.833	9.208	462	-290
J7	7.000	3.000	HANGER	6.750	9.208	308	-340

J5 J5 J5	5.000 5.000 5.000	8.000 1.500 1.500	WALL NAILED NAILED	0.833 5.000 5.000	19.875 19.875 22.471	359 40 151		-190 -250
J8 J8	9.750 9.750	8.000 3.000	WALL HANGER	3.583 9.500	19.875 19.875	834 197		-820 -240
JE5 JE5	7.328 7.328	8.000 3.000	WALL HANGER	3.583 7.078	19.875 19.875	789 107	-24	-830 -180
JD5 JD5 JD5	4.582 4.582 4.582	8.000 1.500 1.500	WALL NAILED NAILED	0.833 4.582 4.582	9.208 9.208 10.846	338 40 126		-190 -180
V1	5.492	65.908	WALL	0.000	10.884	604		-1740
V2	7.460	89.526	WALL	0.000	10.134	821		-1870
V3	3.682	44.182	WALL	0.000	11.071	405		-1850
V4	5.318	63.818	WALL	0.000	10.321	585		-1950
V5	4.909	58.909	WALL	0.000	11.501	540		-2060
V6	3.273	39.273	WALL	0.000	12.251	360		-1960
V7	1.636	19.636	WALL	0.000	13.001	180		-1040
V8	6.667	80.000	WALL	0.000	21.264	733		-3550
V9	4.667	56.000	WALL	0.000	22.181	513		-3440
V10	2.667	32.000	WALL	0.000	23.097	293		-1820
	<b></b>	<del></del>		· - <i>-</i>				

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

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

Robert L. Clark **PGT** Industries 1070 Technology Drive Nokomis, FL 34275

# NOTICE OF PROPOSED ACTION

To:

Members of the Building Code and Product Review Committee and

PGT Industries, Applicant

In accordance with Dade County Administrative Order 10-3, which governs the product review process, the Product Control Section of the Office of Code Compliance, intends to issue a Product Control Notice of Acceptance to PGT Industries for 1"x Std. Wall - Aluminum Tube Clipped Mullions, No. 00-0912.05, to allow its use in Dade County and its municipalities.

Members of the Building Code and Product Review Committee: To:

The documentation being provided to you represents the recommendation of the Product Control Section of the Office of Code Compliance in regards to the submittal of PGT Industries for I"x Std. Wall - Aluminum Tube Clipped Mullions, No. 00-0912.05. Under the provisions of Dade County Administrative Order 10-3, which governs the product review process. You must review this documentation. If within 20 days from the date of mailing, we do not receive any written objection stating the reason(s) for your disapproval, this product will be automatically approved.

To: PGT Industries, Applicant

The Product Control Section of the Office of Code Compliance, in accordance with Dade County Administrative Order 10-3, which governs the product review process, has issued this notice of proposed action and intends to issue a Product Control Notice of Acceptance for your 1"x Std. Wall - Aluminum Tube Clipped Mullions, No. 00-0912.05, to be used in Dade County and its municipalities, unless a member of the Building Code and Product Review Committee or yourself has any objections. Should you not be in accord with this notice of proposed action and wish to appeal our recommendation, you must make a written request, stating the reasons for your objection(s), to our office within 20 days of the date of mailing. Upon receipt of your written request a hearing date will be set so that you can present your objection(s) to the Building Code and Product Review Committee.

Sincerely,

Raul Rodriguez Product Control Supervisor

**DATE OF MAILING: 06/08/2001** 

Francisco J. Quintana, R.A.

Manies / Quintesa

Director

Mailed by: K-Youjade



MIAMI-DADE COUNTY, FLORIDA METRO-DADE FLAGILER BUILDING

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

### PRODUCT CONTROL NOTICE OF ACCEPTANCE

**PGT** Industries 1070 Technology Drive

Nokomis

FL 34274

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

CONTRACTOR ENFORCEMENT SECTION

(305) 375-2466 FAX (305) 375-2908 PRODUCT CONTROL DIVISION (305) 375-2902 FAX (305) 372-6339

Your application for Product Approval of: Series FD-101 Outswing Aluminum French Door

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 Mianti-Dade County Building Code Compliance Office (BCCO) under the conditions specified herein.

This approval shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at anytime 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 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.

Acceptance No.: 99-0615.01

Expires: 07/22/2002

Chief Product Control Division

### 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 Dade County. Florida under the conditions set forth above.

Director

Miami-Dade County

**Building Code Compliance Office** 

Lof3

Approved: 07/22/1999

RUNDING CODE COMPLIANCE OFFICE METRO-DADE FLACILER BUILDING 140 WEST FLACILER STREET, SUITE 1603 MIAMI, FLORIDA 33130-1563 (205) 375 2901 FAX (305) 375-2908

> CONTRACTOR LICENSING SECTION (J05) 375-2527 FAX (305) 375-2531

CONTRACTOR ENFORCEMENT DIVISION (305) 375-2966 FAX (305) 375-290s

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

PGT Industries 1070 Technology Drive Nokomis JEL 34275

Your application for Notice of Acceptance (NOA) of: Series "SH-4000" Aluminum Single Hung Window

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-Dude 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.

ACCEPTANCE NO.: 01-0516.10 EXPIRES: <u>09/30/2006</u>

Raul Rodriguoz

Chief Product Control Division

### 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 Mismi-Dade County, Plurida under the conditions set forth above.

Francisco J. Quintana, R.A.

Francisco / accintera

Director

Mianti-Dade County

Building Code Compliance Office

APPROVED: 09/30/2001





MIAMI-DADE COUNTY, FLORIDA METRO-DADE FLAGLER BUILDING

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 SECTION (305) 375-2966 FAX (305) 375-2908

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

### PRODUCT CONTROL NOTICE OF ACCEPTANCE

PGT Industries 1070 Technology Drive

Nokomis

FL 34274

Your application for Product Approval of: Series 6000 Aluminum Fixed Window

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 approval shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at anytime 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 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.

Acceptance No.: 99-1110.04

Expires:12/02/2002

Raul Rodriguez.

Chief Product Control Division

# 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 Dade County, Florida under the conditions set forth above.

rancisco J. Quintana, R.A

Director

Miami-Dade County

**Building Code Compliance Office** 

1 of 3

Approved: 01/07/2000



BUILDING CODE COMPLIANCE OFFICE METRO-DADE FLAGLER BUILDING

140 WEST FLAGLER STREET, SUITE 1603 MIAMI, FLORIDA 33130-1563

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

### PRODUCT CONTROL NOTICE OF ACCEPTANCE

Pioneer Concrete Tile 1340 S.W. 34 Avenue

Deerfield Beach FL 33442

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

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

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

Your application for Product Approval of:

Pioneer Spanish "S"

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 approval shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at anytime 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 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.

Acceptance No.: 99-0803.06 (Revises No.: 98-0901.07)

Expires: 12/16/2002

Raul Rodriguez

Chief Product Control Division

# 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 Dade County, Florida under the conditions set forth above.

Francisco J. Quintana, R.A.

Director

Miami-Dade County

Building Code Compliance Office

1 of 8

Approved: 12/16/1999

# MR. & MRS. FLAUGH HVAC LOAD ANALYSIS

for

**B.C.** Architects

# Elite Software

RHVAC Residential and Light Commercial HVAC Loads

Prepared By:

Paulo Goncaives

Wojcieszak & Associates

833 E. 5th St.

Stuart, Florida 34994

561-286-8696

06-12-01

RHVAÇ - Residential & Light Commercial HVAC Loads Program Wojcieszak & Associates, Inc.

06-12-01

Elite Software Development, Inc. Mr. & Mrs. Flaugh Page 2

**Project Summary** 

Stuart, FL 34994

**B.C.** Architects

City: ·Phone: Fax:

Client:

Address:

Company:

Wojcieszak & Associates

Representative: Address:

Paulo Goncalves

City:

Stuart, Florida 34994

Phone:

561-286-8696

833 E. 5th St.

Fax: Comment:

**Design Data** 

Project Name:

Mr. & Mrs. Flaugh

Reference City:

West Palm Beach, Florida

Daily Temperature Range:

Medium

Latitude: Elevation: 26 Degrees

Winter:

Summer:

15 Feet

Outdoor Outdoor Indoor Indoor Grains Wet Bulb Rel. Hum. Dry Bulb Dry Bulb Difference 45 N/A N/A 72 91 79 50% 75

**Check Figures** 

Total Building Supply CFM:

4270

CFM per square foot:

1.549

Square feet of room area:

2,756

Square feet per ton:

N/A

66

403.263

**Building Loads** 

Total heating required with outside air: 46,685 Btuh Total sensible gain:

46.685 MBH

Total latent gain:

40,684 Btuh 12,089 Btuh

77 % 23 %

Total cooling required with outside air: 52,773 Btuh

4.398 Tons (based on sensible + latent)

6.834 Tons (based on 85% sensible capacity)

**Notes** 

Calculations are based on 7th edition of ACCA Manual J.

All computed results are estimates as building use and weather may vary.

RHVAÇ - Residential & Light Commercial HVAC Loads Program Wojcieszak & Associates, Inc.



Elite Software Development, Inc. Mr. & Mrs. Flaugh Page 3

Stuart, FL 34994

Component	Area	Sen.	Lat.	Sen.	Total
Description	Quan	Loss	Gain	Gain	Gain
1A Window Tint Glass Wood Frame	555	14,839	0	18,055	18,055
1C Window Tint Glass Metal Frame	13	405	0	803	803
8C Glass Door Single Tnt Glass Metal Frame	21	655	0	806	806
10G Door Wood Panel	63	1,140	. 0	828	828
12C Wall R-11 + 1/2" Gypsum(R-0.5)	130	316	0	229	229
12H Wall R-19 + 1/2" Gypsum Board(R-0.5)	207	335	0	244	244
14C Wall 8" or 12" Block + R-11	3,068	6,379	0	2,911	2,911
16G Ceiling R-30 Insulation	2,515	2,240	0	3,320	3,320
20I Floor Over Open Crawl Carpet + R-19	453	587	0	239	239
22A Slab on Grade No Edge Insulation	405	8,856	0	0	0
Subtotals for structure:	7,430	35,752	0	27,435	27,435
Active People:	12	0	2,760	3,600	6,360
Inactive People:	12	0	1,800	3,000	4,800
Appliances:	0	0	0	0	0
Lighting:	0	0		0	
Ductwork:	0	2,224	0	3,699	3,699
Infiltration: Winter CFM: 293.3, Summer CFM: 167.6	652	8,709	7,529	2,950	10,479
Ventilation: Winter CFM: 0.0, Summer CFM: 0.0	0	0	0	0	0
Sensible Gain Total:				40,684	
Temperature Swing Multiplier:				X1.00	
Building Load Totals:	· · · · · · · · · · · · · · · · · · ·	46,685	12,089	40,684	52,773

### **Check Figures**

Total Building Supply CFM: 4270 Square feet of room area: 2,756 CFM per square foot:

1.549

Square feet per ton:

403.263

### Building Loads ...

Total heating required with outside air: 46,685 Btuh Total sensible gain:

40,684 Btuh

46.685 MBH

Total latent gain:

12,089 Btuh

77 %

Total cooling required with outside air:

52,773 Btuh

23 %

4.398 Tons (based on sensible + latent)

6.834 Tons (based on 85% sensible capacity)

#### Notes

Calculations are based on 7th edition of ACCA Manual J.

All computed results are estimates as building use and weather may vary.

System	#1	Summary	Loads
--------	----	---------	-------

Stuart, FL 34994

Component	Area	Sen.	Lat.	Sen.	Total
Description	Quan	Loss	Gain	Gain	Gain
1A Window Tint Glass Wood Frame	107	2,861	0	4,522	4,522
1C Window Tint Glass Metal Frame	13	405	0	803	803
12C Wall R-11 + 1/2" Gypsum(R-0.5)	63	153	0	111	111
14C Wall 8" or 12" Block + R-11	794	1,651	0	753	753
16G Ceiling R-30 Insulation	917	816	0	1,211	1,211
22A Slab on Grade No Edge Insulation	147	3,214	0	0	0
Subtotals for structure:	2,041	9,100	0	7,400	7,400
Active People:	0	0	0	0	0
Inactive People:	0	0	0	0	0
Appliances:	0	0	0	0	0
Lighting:	0	0		0	
Ductwork:	0	589	0	830	830
Infiltration: Winter CFM: 89.5, Summer CFM: 51.2	120	2,658	2,298	901	3,199
Ventilation: Winter CFM: 0.0, Summer CFM: 0.0	0	0	0	0	0
Sensible Gain Total:				9,131	
Temperature Swing Multiplier:				X1.00	
System Load Totals:		12,347	2,298	9,131	11,429

### **Check Figures**

Supply CFM:

415

CFM per square foot:

0.487

Square feet of room area: 853

Square feet per ton:

668.146

### System Loads

Total heating required with outside air: 12,347 Btuh

12.347 MBH

Total sensible gain:

9,131 Btuh

80 %

Total latent gain:

2,298 Btuh

Total cooling required with outside air: 11,429 Btuh

20 %

0.952 Tons (based on sensible + latent)

1.277 Tons (based on 85% sensible capacity)

### Notes

Calculations are based on 7th edition of ACCA Manual J.

All computed results are estimates as building use and weather may vary.

· RHVAC - Residential & Light	Commercial HVAC Loads Program
Wojcieszak & Associates, Inc.	
Stuart, FL 34994	

Elite Software Development, Inc. Mr. & Mrs. Flaugh Page 5

System	#2	<b>Summary</b>	Loads
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Component	Area	Sen.	Lat.	Sen.	Total
Description	Quan	Loss	Gain	Gain	Gain
1A Window Tint Glass Wood Frame	318	8,502	0	7,343	7,343
-10G Door Wood Panel	21	380	0	276	276
14C Wall 8" or 12" Block + R-11	1,284	2,671	0	1,218	1,218
16G Ceiling R-30 Insulation	876	781	0	1,157	1,157
22A Slab on Grade No Edge Insulation	175	3,826	0	0	0
Subtotals for structure:	2,674	16,160	0	9,994	9,994
Active People:	12	0	2,760	3,600	6,360
Inactive People:	12	0	1,800	3,000	4,800
Appliances:	0	0	0	0	0
Lighting:	0	0		0	
Ductwork:	0	1,000	0	1,790	1,790
Infiltration: Winter CFM: 129.8, Summer CFM: 74.2	339	3,853	3,331	1,304	4,635
Ventilation: Winter CFM: 0.0, Summer CFM: 0.0	0	0	0	. 0	. 0
Sensible Gain Total:				19,688	
Temperature Swing Multiplier:				X1.00	
System Load Totals:		21,013	7,891	19,688	27,579

### **Check Figures**

Supply CFM:

895

CFM per square foot:

0.758

Square feet of room area: 1,181

Square feet per ton:

269.396

### System Loads

Total heating required with outside air: 21,013 Btuh

21.013 MBH

Total sensible gain:

19,688 Btuh

71 %

Total latent gain:

7.891 Btuh

29 %

Total cooling required with outside air:

27,579 Btuh

2.298 Tons (based on sensible + latent)

4.384 Tons (based on 85% sensible capacity)

### Notes

Calculations are based on 7th edition of ACCA Manual J.

All computed results are estimates as building use and weather may vary.

RHVAC - Residential & Light Commercial HVAC Loads Program Wojcieszak & Associates, Inc. Stuart, FL 34994



Elite Software Development, Inc. Mr. & Mrs. Flaugh Page 6

System	#3	Summary	Loads
--------	----	---------	-------

Component	Area	Sen.	Lat.	Sen.	Total
Description	Quan	Loss	Gain	Gain	Gain
1A Window Tint Glass Wood Frame	70	1,872	0	3,465	3,465
8C Glass Door Single Tnt Glass Metal Frame	21	655	0	806	806
12C Wall R-11 + 1/2" Gypsum(R-0.5)	67	163	Ō	118	118
12H Wall R-19 + 1/2" Gypsum Board(R-0.5)	207	335	0	244	244
14C Wall 8" or 12" Block + R-11	428	890	0	406	406
16G Ceiling R-30 Insulation	453	403	0	598	598
20I Floor Over Open Crawl Carpet + R-19	453	587	0	239	239
Subtotals for structure:	1,699	4,905	0	5,876	5,876
Active People:	. 0	0	Ö	0	0,0.0
Inactive People:	0	0	Ö	Ö	Ô
Appliances:	0	0	0	0	0
Lighting:	0	0	_	0	
Ductwork:	0	318	0	637	637
Infiltration: Winter CFM: 48.9, Summer CFM: 27.9	91	1,452	1,255	492	1,747
Ventilation: Winter CFM: 0.0, Summer CFM: 0.0	0	0	0	0	1,747
Sensible Gain Total:			<del></del>	7,005	<u> </u>
Temperature Swing Multiplier:				7,003 X1.00	
System Load Totals:		6,675	1,255	7,005	8,260

### Check Figures

Supply CFM:

2,400

Square feet of room area: 453

CFM per square foot:

5.298

Square feet per ton:

649.721

### System Loads

Total heating required with outside air: 6,675 Btuh Total sensible gain:

6.675 MBH

7,005 Btuh

85 %

Total latent gain:

1,255 Btuh

15 % ·

Total cooling required with outside air:

8,260 Btuh

0.688 Tons (based on sensible + latent)

0.697 Tons (based on 85% sensible capacity)

### Notes

Calculations are based on 7th edition of ACCA Manual J.

All computed results are estimates as building use and weather may vary.

RHVAC - Residential & Light Commercial HVAC Loads Program
Wojcieszak & Associates, Inc.
Stuart, FL 34994



Elite Software Development, Inc. Mr. & Mrs. Flaugh Page 7

System	#4	Summary	Loads
--------	----	---------	-------

Component	Area	Sen.	Lat.	Sen.	Total
Description	Quan	Loss	Gain	Gain	Gain
1A Window Tint Glass Wood Frame	60	1,604	0	2,725	2,725
10G Door Wood Panel	42	760	0	552	552
14C Wall 8" or 12" Block + R-11	562	1,167	0	534	534
.16G Ceiling R-30 Insulation	269	240	0	354	354
22A Slab on Grade No Edge Insulation	83	1,816	0	0	0
Subtotals for structure:	1,016	5,587	0	4,165	4,165
Active People:	0	0	0	. 0	0
Inactive People:	0	0	0	0	0
Appliances:	0	0	0	Ö	0
Lighting:	0	Ô	_	0	•
Ductwork:	0	317	0	442	442
Infiltration: Winter CFM: 25.1, Summer CFM: 14.3	102	746	645	253	898
Ventilation: Winter CFM: 0.0, Summer CFM: 0.0	0	0	0	0	0
Sensible Gain Total:				4,860	
Temperature Swing Multiplier:				X1.00	
System Load Totals:		6,650	645	4,860	5,505

### **Check Figures**

Supply CFM:

560

Square feet of room area: 269

CFM per square foot:

2.082

Square feet per ton:

564.568

### System Loads

Total heating required with outside air:

Total sensible gain:

6,650 Btuh 4,860 Btuh

6.650 MBH

Total latent gain:

88 %

645 Btuh

12 %

Total cooling required with outside air: 5,505 Btuh

0.459 Tons (based on sensible + latent)

0.476 Tons (based on 85% sensible capacity)

### Notes

Calculations are based on 7th edition of ACCA Manual J.

All computed results are estimates as building use and weather may vary.

**Room Load Summary Reports** 

Stuart, FL 34994

	*		Htg	Htg	Run	Clg	Clg	Clg	Zone	Clg	Air
	Room	Area	Sens	Nom	Duct	Sens	Lat	Nom	Adj	Adj	Sys
·No	Description	SF	Btuh	CFM	Size	Btuh	Btuh	CFM	Fact	CFM	CFM
	Zone 1										
1	Bedroom 1	154	1,969	26	1-5	1,529	249	70	1.25	87	70
2	Bedroom 2	154	1,527	20	1-6	1,558	306	71	1.25	89	71
3	Bedroom 3	165	4,680	61	2-6	4,016	1,149	183	1.05	192	183
4	Bath 1	98	833	. 11	1-4	561	77	26	1.00	26	26
5	Hall	152	1,014	13	1-4	221	0	10	1.00	10	10
6	Cabana Bath	30	978	13	1-4	542	287	25	1.00	25	25
7	Utility	100	1,346	17	1-4	704	230	32	1.17	37	32
Sys	tem 1 Totals	853	12,347	895	The same of the sa	9,131	2,298	895		465	415
								M	ain Trun	k Size: 1	2x8 in.

System #1 Cooling System Summary

Cooling Tons		Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	0.952	80%/20%	9,131	2,298	11,429
Recommended:	1.277	85%/15%	13,022	2,298	15,320

### **Room Load Summary Reports**

Stuart, FL 34994

<b>System</b>	#2	Room	Load	Summary
---------------	----	------	------	---------

•			Htg	Htg	Run	Clg	Clg	Clg	Zone	Clg	Air
	Room	Area	Sens	Nom	Duct	Sens	Lat	Nom	Adj	Adj	Sys
Νo	Description	SF	- Btuh	CFM	Size	Btuh	Btuh	CFM	Fact	CFM	CFM
-	Zone 1										
8	Living Room	494	9,788	127	4-6	9,061	3,767	412	1.00	412	412
9	Dining Room	186	3,421	44	3-6	4,895	2,391	223	1.35	300	223
10	Stairs	91	596	8	1-4	189	0	9	1.00	9	9
11	Pantry	30	582	8	1-4	166	0	8	1.00	8	8
12	Kitchen	260	1,684	22	2-4	2,603	976	118	1.00	118	118
13	Breakfast Room	120	4,942	64	.2-5	2,774	757	126	1.00	126	126
Sys	stem 2 Totals	1181	21,013	650		19,688	7,891	650		973	895
•								Ma	in Trunk	Size: 14	lx12 in.

System #2 Cooling System Summary

	Cooling	Sensible/Latent	Sensible	Latent	Total
; }	Tons	Split	Btuh	Btuh	Btuh
Net Required:	2.298	71%/29%	19,688	7,891	27,579
Recommended:	4.384	85%/15%	44,716	7,891	52,607

RHVAC - Residential & Light C Wojcieszak & Associates, Inc.	ommercial HVAC Loads Program
Stuart, FL 34994	•



Elite Software Development, Inc. Mr. & Mrs. Flaugh Page 10

### **Room Load Summary Reports**

System #3 Room Load Summary										
Room No Description	Area SF	Htg Sens Btuh	Htg Nom CFM	Run Duct Size	Clg Sens Btuh	Clg Lat Btuh	Clg Nom CFM	Zone Adj Fact	Clg Adj CFM	Air Sys CFM
Z	one 1								<del></del>	
14 Mas. Bedroo	om 225	3,545	1,275	2-6	3,890	717	1,333	1.00	177	1,333
15 W.I.C.	72	425	153	1-4	344	0	118	1.00	16	118
16 Mas. Bath	156	2,705	973	2-5	2,771	538	949	1.00	126	949
System 3 Totals	453	6,675	2,400		7,005	1,255	2,400		318	2,400

\*Main Trunk Size: 20x16 in.

\*Main Trunk velocity constraints were not met due to duct schedule limitations.

Main Trunk Air Velocity = 1154 Feet/Minute

### System #3 Cooling System Summary

	Cooling Tons	Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	0.688	85%/15%	7,005	1,255	8,260
Recommended:	0.697	85%/15%	7,112	1,255	8,367

Room	Load	Summary	Reports

<b>System</b>	#4	Room	Load	Summary
---------------	----	------	------	---------

No	Room Description	Area SF	Htg Sens Btuh	Htg Nom CFM	Run Duct Size	Clg Sens Btuh	Clg Lat Btuh	Clg Nom CFM	Zone Adj Fact	Clg Adj CFM	Air Sys CFM
	Zone 1		· · · · · · · · · · · · · · · · · · ·								
17	Guest House	114	4,212	355	3-5	3,929	512	453	1.25	223	453
18	Bath	45	446	38	1-4	149	0	17	1.00	7	17
19	Studio	110	1,992	168	1-4	782	133	90	1.00	36	90
Sys	tem 4 Totals	269	6,650	560		4,860	645	560		266	560
								Mai	in Trunk	Size: 12	x10 in.

### System #4 Cooling System Summary

	Cooling Tons	Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	0.459	88%/12%	4,860	645	5,505
Recommended:	0.476	85%/15%	4,860	858	5,718

Project Name:

## FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs Residential Whole Building Performance Method A

Builder:

Address: City, State: Owner: Climate Zone:  Mr. & Mrs. Flau Central	gh <u>.</u>	Permitting Office: Permit Number: Jurisdiction Number:	
<ol> <li>New construction or existing</li> <li>Single family or multi-family</li> <li>Number of units, if multi-family</li> <li>Number of Bedrooms</li> <li>Is this a worst case?</li> <li>Conditioned floor area (ft²)</li> <li>Glass area &amp; type</li> </ol>	New	12. Cooling systems a. Central Unit b. N/A c. N/A	Cap: 84.0 kBtu/hr SEER: 13.00
a. Clear - single pane b. Clear - double pane c. Tint/other SC/SHGC - single pane d. Tint/other SC/SHGC - double pane 8. Floor types	0.0 ft <sup>2</sup> 0.0 ft <sup>2</sup> 589.0 ft <sup>2</sup> 0.0 ft <sup>2</sup>	13. Heating systems a. Electric Strip b. N/A	Cap: 84.0 kBtu/hr COP: 1.00
<ul> <li>a. Slab-On-Grade Edge Insulation</li> <li>b. Raised Wood, Adjacent</li> <li>c. N/A</li> <li>9. Wall types</li> <li>a. Frame, Wood, Exterior</li> <li>b. Concrete, Int Insul, Exterior</li> </ul>	R=0.0, 200.0(p) ft R=19.0, 453.0ft <sup>2</sup> R=11.0, 337.0 ft <sup>2</sup> R=4.2, 3068.0 ft <sup>2</sup>	c. N/A  14. Hot water systems a. Electric Resistance b. N/A	Cap: 80.0 gallons
c. N/A d. N/A e. N/A 10. Ceiling types a. Under Attic	R=30.0, 2515.0 ft <sup>2</sup>	c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump) 15. HVAC credits	MZ-C, CF,
b. N/A c. N/A ll. Ducts a. Sup: Unc. Ret: Unc. AH: Interior b. N/A	Sup. R=6.0, 1.0 ft	(CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)	
Glass/Floor Area: 0.2	<u> </u>	points: 42276.00 PASS	

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code. PREPARED BY: PAULO GONCALVES DATE: I hereby certify that this building, as designed, is in compliance with the Florida Bnergy (Code) OWNER/AGENT: DATE:

Flaugh Residence

Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.



<b>BUILDING OFFICIAL</b>	
DATE:	

Total base points: 42393.00

## **SUMMER CALCULATIONS**

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	DEDMIT 4.
ADDITEGO. , , ,	PERMIT #:

	BASE						A	S-BUII	LT			
GLASS TYPES												
.18 X Conditi Floor		BSPM =	Points	Type/SC	Ornt		hang Hgt		X SPM	X SO	= =	Points
.18 2756	.0	42.08	20873.8	Single, Tint	w	1.0	4.5	13.0	44.87	0.94		545.9
				Single, Tint	w	1.0	6.0	16.0	44.87	0.97		695.3
				Single, Tint	· N	1.0	6.0	24.0	22.93	0.97		536.1
				Single, Tint	Ε	1.0	8.0	36.0	49.89	0.99		1774.7
				Single, Tint	w	1.0	4.0	4.0	44.87	0.92		164.3
				Single, Tint	N	8.0	7.0	15.0	22.93	0.70		241.7
				Single, Tint	S	1.0	5.0	12.0	37.29	0.92		410.0
				Single, Tint	S	1.0	8.0	45.0	37.29	0.98		1643.4
				Single, Tint	N	8.0	8.5	124.0	22.93	0.73		2083.1
				Single, Tint	S	1.0	7.0	50.0	37.29	0.97		1809.5
				Single, Tint	E	1.0	5.0	14.0	49.89	0.95		663.7
				Single, Tint	N	8.0	4.0	8.0	22.93	0.64		117.4
				Single, Tint	N	1.0	7.0	50.0	22.93	0.99		1129.4
				Single, Tint	W	8.0	7.0	15.0	44.87	0.51		344.6
				Single, Tint	E	8.0	8.0	12.0	49.89	0.53		317.3
		•		Single, Tint	N	1.0	8.0	12.0	22.93	0.99		272.0
		•		Single, Tint	E	1.0	6.0	30.0	49.89	0.97		1449.9
l			•	Single, Tint	S	1.0	5.0	5.0	37.29	0.92		170.8
•				Single, Tint	E	1.0	5.0	5.0	49.89	0.95		237.1
				Single, Tint	W	1.0	6.0	8.0	44.87	0.97		347.6
				Single, Tint	N	1.0	6.0	16.0	22.93	0.97		357.4
		٠		Single, Tint	E	1.0	6.0	6.0	49.89	0.97		290.0
	٠,			Single, Tint	Ε.	1.0	8.0	9.0	49.89	0.99		443.7
	•			Single, Tint	N	1.0	6.0	12.0	22.93	0.97		268.0
				Single, Tint	W	1.0	8.0	36.0	44.87	0.99		1596.7
			,	Single, Tint	S	1.0	6.0	12.0	37.29	0.94		422.4
		-		As-Built Total:				589.0				18332.0
WALL TYPES	Area X	BSPM	= Points	Туре				R-Value	Area	X . SPM	=	Points
Adajcent	0.0	0.0	0.0	Frame, Wood, Ex	terior			11.0	337.0	1.90		640.3
Exterior	3405.0	1.90	6469.5	Concrete, Int Insi	ıl, Exteri	or		4.2	3068.0	1.16		3558.9
Base Total:	3405.0		6469.5	As-Built Total:					3405.0			4199.2
DOOR TYPES	Area X	BSPM	= Points	Туре	***			· ·	Area	X SPM	=	Points
Adjacent Exterior	0.0 63.0	0.00 4.80	. 0.0 302.4	Exterior Wood					63.0	7.20	<del></del>	453.6
Base Total:	63.0		302.4	As-Built Total:					63.0			453.6

## **SUMMER CALCULATIONS**

## Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

	BASE			AS-BUILT						
CEILING TYPES	Area X	BSPM	= Points	Туре		R-Value	Area X	SPM	=	Points
Under Attic Base Total:	2450.5 2450.5	0.60	1470.3 1470.3	Under Attic As-Built Total:	, <u>.</u>	30.0	2515.0 <b>2515.0</b>	0.60		1509.0 1509.0
FLOOR TYPES	Area X	вѕРМ	= Points	Туре	· · · · · · · · · · · · · · · · · · ·	R-Value	Area X	SPM	=	Points
Slab Raised Base Total:	200.0(p) 453.0	-31.8 -3.43	-6360.0 -1553.8 - <b>7913.8</b>	Slab-On-Grade Edge Inst Raised Wood, Adjacent As-Built Total:	ulation	0.0 19.0	200.0(p) 453.0	-31.90 1.00		-6380.0 453.0 -5927.0
INFILTRATION	Area X	вѕрм	= Points				Area X	SPM	=	Points
	2756.0	14.31	39438.4				2756.0	14.31	-	39438.4
Summer Base	Points	: 6	60640.6	Summer As-Built Points: 58005.1					005.1	
Total Summer X Points	System Multiplie		Cooling Points	Total X Cap Component Ratio				Credit Jultiplier		Cooling Points
60640.6	0.3577	2	1691.1	58005.1 1.000 58005.1 1.00			262 <b>262</b>	0.902 <b>0.902</b>		3383.5 3 <b>83.5</b>

## WINTER CALCULATIONS

## Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:

	BASE	=			<u></u> -		A	S-BUIL	.T	<u>.</u>		
GLASS TYPES								<del></del>	<u> </u>	<del></del>		
	tioned X	BWPM =	Points	Type/SC	Ornt		rhang Hgt	Area X	WPM	X WOF	: =	Points
.18 275	6.0	4.79	2376.0	Single, Tint	w	1.0	4.5	13.0	11.21	1.01		146.9
				Single, Tint	w	1.0	6.0	16.0	11.21	1.00		179.9
1				Single, Tint	· N	1.0	6.0	24.0	12.59	1.00		301.4
				Single, Tint	E	1.0	8.0	36.0	10.54	1.01		381.3
				Single, Tint	W	1.0	4.0	4.0	11.21	1.01		45.3
				Single, Tint	N	8.0	7.0	15.0	12.59	0.99		186.6
				Single, Tint	s	1.0	5.0	12.0	8.59	1.02		105.4
				Single, Tint	s	1.0	8.0	45.0	8.59	1.00		385.4
				Single, Tint	N	8.0	8.5	124.0	12.59	0.99		1544.7
				Single, Tint	S	1.0	7.0	50.0	8.59	1.00		429.4
				Single, Tint	E	1.0	5.0	14.0	10.54	1.01		149.3
				Single, Tint	N	8.0	4.0	8.0	12.59	0.99		99.2
				Single, Tint	N	1.0	7.0	50.0	12.59	1.00		628.1
				Single, Tint	W	8.0	7.0	15.0	11.21	1.09		183.7
				Single, Tint	Ε	8.0	8.0	12.0	10.54	1.16		147.0
		•		Single, Tint	N	1.0	8.0	12.0	12.59	1.00		150.8
		•		Single, Tint	E	1.0	6.0	30.0	10.54	1.01		318.8
			•	Single, Tint	s	1.0	5.0	5.0	8.59	1.02		43.9
				Single, Tint	E	1.0	5.0	5.0	10.54	1.01		53.3
				Single, Tint	W	1.0	6.0	8.0	11.21	1.00		89.9
				Single, Tint	N	1.0	6.0	16.0	12.59	1.00		200.9
				Single, Tint	E	1.0	6.0	6.0	10.54	1.01		63.8
	٠.			Single, Tint	E.	1.0	8.0	9.0	10.54	1.01		95.3
				Single, Tint	N	1.0	6.0	12.0	12.59	1.00		150.7
				Single, Tint	W	1.0	8.0	36.0	11.21	1.00		403.6
			*	Single, Tint	S	1.0	6.0	12.0	8.59	1.01		103.9
			٠	As-Built Total:				589.0	•			6588.6
WALL TYPES	Area X	BWPM =	Points	Туре				R-Value	Area X	WPM	=	Points
Adajcent	0.0	0.0	0.0	Frame, Wood, Ex				11.0	337.0	2.00		674.0
Exterior	3405.0	2.00	6810.0	Concrete, Int Insu	I, Exterio	)r		4.2	3068.0	3.26		10001.7
Base Total:	3405.0		6810.0	As-Built Total:					3405.0			10675.7
DOOR TYPES	Area X	BWPM =	Points	Туре					Area X	WPM	=	Points
Adjacent Exterior	0.0 63.0	0.00 5.10	0.0 321.3	Exterior Wood			,, <u> </u>		63.0	7.60		478.8
Base Total:	63.0		321.3	As-Built Total:					63.0			478.8

## **WINTER CALCULATIONS**

## Residential Whole Building Performance Method A - Details

ADDRESS: , , , PERMIT #:

	BASE		AS-BUILT					
CEILING TYPES	Area X BWF	M = Points	Туре	R-Value	Area X \	WPM =	Points	
Under Attic Base Total:	2450.5 0. 2450.5	60 1470.3 1470.3	Under Attic As-Built Total:	30.0	2515.0 <b>2515.0</b>	0.60	1509.0 1509.0	
FLOOR TYPES	Area X BWP	M = Points	Туре	R-Value	Area X \	WPM =	Points	
Slab Raised Base Total:	200.0(p) -1 453.0 -0.3	.9 -380.0 20 -90.6 -470.6	Slab-On-Grade Edge Insulation Raised Wood, Adjacent As-Built Total:	n 0.0 19.0	200.0(p) 453.0	2.50 1.00	500.0 453.0 <b>953.0</b>	
INFILTRATION	Area X BWP	M = Points		· · · · · · · · · · · · · · · · · · ·	Area X \	WPM =	Points	
	2756.0 -0.3	28 -771.7			2756.0	-0.28	-771.7	
Winter Base	Points:	9735.3	Winter As-Built Points: 19433.4					
Total Winter X Points	System = Multiplier	Heating Points	Total X Cap X Component Ratio	. , .		edit = tiplier	Heating Points	
9735.3	1.0730	10446.0	19433.4 1.000 <b>19433.4 1.00</b>			.000 <b>000</b> 1	19392.4 <b>9392.4</b>	

## **Code Compliance Checklist**

## Residential Whole Building Performance Method A - Details

ADDRESS: ,,,	PERMIT #:

## 6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606.1.ABC.1.1	Maximum:.3 cfm/sq.ft. window area; .5 cfm/sq.ft. door area.	
Exterior & Adjacent Walls	606.1.ABC.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at corners; utility penetrations; between wall panels & top/bottom plates; between walls and floor. EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	606.1.ABC.1.2.2	Penetrations/openings >1/8" sealed unless backed by truss or joint members.  EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Ceilings	606.1.ABC.1.2.3	Between walls & ceilings; penetrations of ceiling plane of top floor; around shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame ceilings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fixtures	606.1.ABC.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC rated with < 2.0 cfm from conditioned space, tested.	
Multi-story Houses	606.1.ABC.1.2.5	Air barrier on perimeter of floor cavity between floors.	<del> </del>
Additional Infiltration reqts	606.1.ABC.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion air.	

6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit	
- · · · · · · · · · · · · · · · · · · ·		breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools	
		must have a pump timer. Gas spa & pool heaters must have a minimum thermal	
		efficiency of 78%.	İ
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically	
•		attached, sealed, insulated, and installed in accordance with the criteria of Section 610.	
		Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	<del></del>
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides.	<del> </del>
		Common ceiling & floors R-11.	

# ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

### ESTIMATED ENERGY PERFORMANCE SCORE\* = 81.1

The higher the score, the more efficient the home.

Mr. & Mrs. Flaugh, , , ,

1. 2. 3. 4. 5. 6.	New construction or existing Single family or multi-family Number of units, if multi-family Number of Bedrooms Is this a worst case? Conditioned floor area (ft²) Glass area & type	New	<ul><li>12. Cooling systems</li><li>a. Central Unit</li><li>b. N/A</li><li>c. N/A</li></ul>	Cap: 84.0 kBtu/hr SEER: 13.00 
a. b. c. d.	Clear - single pane Clear - double pane Tint/other SC/SHGC - single pane Tint/other SC/SHGC - double pane Floor types Slab-On-Grade Edge Insulation	0.0 ft <sup>2</sup> 0.0 ft <sup>2</sup> 589.0 ft <sup>2</sup> 0.0 ft <sup>2</sup> R=0.0, 200.0(p) ft	<ul><li>13. Heating systems</li><li>a. Electric Strip</li><li>b. N/A</li><li>c. N/A</li></ul>	Cap: 84.0 kBtu/hr COP: 1.00
c. 9. a. b. c. d. e. 10. a. b. c.	Raised Wood, Adjacent N/A Wall types Frame, Wood, Exterior Concrete, Int Insul, Exterior N/A N/A N/A Ceiling types Under Attic N/A N/A Ducts	R=19.0, 453.0ft <sup>2</sup> R=11.0, 337.0 ft <sup>2</sup> R=4.2, 3068.0 ft <sup>2</sup> R=30.0, 2515.0 ft <sup>2</sup>	<ul> <li>14. Hot water systems <ul> <li>a. Electric Resistance</li> </ul> </li> <li>b. N/A</li> <li>c. Conservation credits <ul> <li>(HR-Heat recovery, Solar</li> <li>DHP-Dedicated heat pump)</li> </ul> </li> <li>15. HVAC credits <ul> <li>(CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat,</li> </ul> </li> </ul>	Cap: 80.0 gallons EF: 0.95
I cer Cons in th	Sup: Unc. Ret: Unc. AH: Interior N/A  tify that this home has complied with struction through the above energy say is home before final inspection. Other d on installed Code compliant feature:  der Signature:	ving features which will wise, a new EPL Displa	RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)  ciency Code For Building be installed (or exceeded) y Card will be completed	CARA CARA CARA CARA CARA CARA CARA CARA
Addi	ress of New Home:	City/l	FL Zip:	I COO WE TRUST

\*NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program. This is <u>not</u> a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 407/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.

EnergyGauge® (Version: FLRCNA-200)

### Schedule A

Lot 9 in Block 4 of INDIALUCIE according to the original plat thereof on file and of record in the office of the Clerk of the Circuit Court in and for Martin County, Florida, in Plat Book 4 at page 77; as Supplemented by the Plat of Tracts A and B thereof on file and of record in said office in Plat Book 4 at page 85; and as corrected by the affidavit and map of Block 4 as recorded in Official Records Book 333, at page 2407, Martin County, Florida public records; LESS and EXCEPTING therefrom that part of said Lot 9 described as follows:

BEGIN at the Southwest corner of Lot 8, Block 4 of Indialucie; thence North 75° 45' 43 East along the South line of said Lot 8 a distance of 135.00 feet to the Southeast corner of said Lot 8; thence South 35° 28'12" West a distance of 85.07 feet; thence South 78° 41'26" West radial to next described curve a distance of 71.52 feet to a point in a non-tangent curve concave westerly, the chord of which bears North 15° 54'35" West and having a radius of 1005.02 feet; thence Northwesterly along the arc of said curve through a central angle of 02° 55'45" a distance of 51.38 feet to the POINT OF BEGINNING.



### BC Architects, Inc.

January 11, 2002

Martin County Building Department

PN 5573

RE: Flaugh Residence

Dear Building Official:

In response to the inspection comments for revisions to the drawings the following address the issues:

- 1. The change of construction for the 2<sup>nd</sup> floor porch from wood joist to cast in place concrete is approved. The concrete slab shall be 6" thick with #5 bars 6" OC each way and 90° bend turned down into perimeter tie beam. I inspected the reinforcement of the 2<sup>nd</sup> floor porch 1-8-02 and was satisfactory.
- 2. The window head height shall be raised from 6'-8" to 8'-0". The lesser depth of the beam above the windows are satisfactory. Provide the same reinforcement as previously indicated.
  - a. The poured in place concrete beam at the arched wall in the dining room is 8" x 22" deep with 4 #5 bars cont.
  - b. The poured in place concrete beam at the arched wall in the breakfast room is 8" x 14 1/2" deep with 4 #5 bars cont.
  - c. The poured in place concrete beam at the garage is 8" x 21 1/2" deep with 4 #5 bars cont.

Sincerely,

Brian Carnes, NCARB

41

### BC Architects, Inc.

January 8, 2002

Martin County Building Department

RE: Flaugh Residence

Dear Building Official:

In response to the inspection comments for revisions to the drawings the following address the issues:

- 1. The change of construction for the 2<sup>nd</sup> floor porch from wood joist to cast in place concrete is approved. The concrete slab shall be 6" thick with #5 bars 6" OC each way and 90° bend turned down into perimeter tie beam. I inspected the reinforcement of the 2<sup>nd</sup> floor porch 1-8-02 and was satisfactory.
- 2. The window head height shall be raised from 6'-8" to 8'-0". The lesser depth of the beam above the windows are satisfactory. Provide the same reinforcement as previously indicated.

Sincerely,

Brian Carnes, NCARB

### **CRITIQUE SHEET**

**FLAUGH RESIDENCE** 

Lot 9 Indialucia Parkway

**Builder: Gary Hufnagel Inc.** 

DATE: 10/04/01

Phone: 260-9618

## PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITALS FOR SINGLE FAMILY RESIDENTS AND ADDITIONS

### Submittals (2 copies)

<ol> <li>Product approvals from Miami/Dade for the following iter</li> </ol>		Product approvals f	from Miami/Dade f	or the following ite
--	--	---------------------	-------------------	----------------------

A. Windows

Exterior Doors

e. Roof System

- d. Garage Door
- e. Hurricane Shutters
- 2. A certified copy of the Notice of Commencement for any work over \$2500.00
- 3. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants

## The following documents must be signed and sealed by a registered Architect or Engineer. (2 copies)

1.	Plot/	Site plan containing the following information:
	2	Dimensions of driveway and turnabouts
	سبطر	Location of proposed or existing well
	سبحك	Stormwater retention areas
		Survey indicate Flood Zone A8 but it is actually A10 elevation 8 (revise)
2.	Floor	Plan containing the following information:
	a.	Door to first floor bath must be minimum width of 2'-8"
<b>3</b> .	Four	idation Plan containing the following information:
	a.	Step down for back porch if any
	b.	Show underslab mechanical duct work for down draft stove is applicable
	C.	Column Layout
	d.	Columns Schedule

- d. Columns Schedule4. Electrical Plan containing the following information:
  - a. / Ceiling fan locations

Attic receptacles and fixtures for attic access and a/c equipment

5. Heating/Air Conditioning Plan containing the following information:

Air Handler locations showing kw rating

Condensing unit locations

Duct layout showing sizes of duct and size of diffusers

d. CFM per outlet

Distribution box locations

SARY 260-9618

f. Equipment callouts with name of equipment, model numbers and sizes

g. Sensible and latent heat quantities

/ h

Plumbing Plan containing the following information:

A. Piping layout showing all pipe sizes

All fixtures, sanitary drainage, vents, water supply, water heaters

Indicate all slopes

7. Truss Layout containing the following information:

a. Uplift quantities for all trusses

b. Connectors schedule for all trusses and girders

Section/Detail Drawings and Schedules showing the following information:

 Stair details handrail with baluster and newel post design showing distance between balusters and height of handrail from leading edge of tread

STEVE FORSTER

### BC Architects, Inc.

April 9, 2002

Sewalls Point Building Department Sewalls Point, FL

5573 PERMIT HOL #6 TNDIA LUCIE

RE: Flaugh Residence



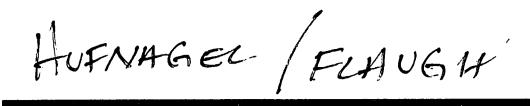
Dear Building Official:

In response to the inspection comments for revisions to the drawings the following address the issues:

- 1. Masonry screws maybe used to fasten trusses to the cast in place concrete tie beam. A 250 lb value maybe applied to each 3/16" dia screw with a 1 1/2" min embedment and a minimum 16 gage steel strap. The number of screws multiplied by 250; not to exceed the manufactures maximum load per strap shall be used as the required amount.
- 2. A poured in place 2<sup>nd</sup> floor concrete tie beam (elev. 19'-10 1/2") 8" x 14" deep with 4 #5 bars cont. shall be used to span 8'-6" from the master bathroom to the master W.I.C. without the masonry column in between.

Sincerely,

Brian Carnes, NCARB



BC Architects, Inc.

November 18, 2001

Sewalls Point Building Department

RE: Flaugh Residence

Dear Building Official:

In response to the foundation reinforcement method as requested. Only the outside corner steel reinforcement in the footing shall require a 90 degree bend bar lapped 40 x the diameter. The other reinforcement may cross and be tied in the corners.

Brian Carnes, NCARB

Sincerely,



# Martin County Health Department (561) 221-4090 Fax. (561) 221-4967

TO:	BUIL	DING DEPAI	RTMENT:	MARTIN	JUPITE	RISL SE	WALLS PT.	STUART
FROM:	<del></del>	11	Roge	-		<del>.</del>		
DATE:		66/27/0	<i>t</i>					
SUBJE	CT: F	NAL APPRO	VAL FOR S	SEPTIC SYS	STEMS			
<u>HEALTI</u>	H DEF	T. PERMIT		BUILDING	DEPT. I	PERMIT	<u>LO</u>	CATION
• 43-S	ss- <u></u>	03656	TSPA	\$ 5573	3 #C	/NDA	LUCIA PRU L. HOF	•
• 43-S	s		FLAC	164 RES	1DENCE	<u>.</u>	- 1104	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
• 43-5	S		6 11	ODALUCI1	= PKY	,		
• 43-S	is			FI	LE	• •		
• 43-S	S				Laure Room			
• 43-S	s							
• 43-S	s			•				
• 43-S	s				•			
J:\\EH\DC	CSVFOR	MS\OSTOS APPRO	VALS.DOC 03/0	31				
			620 South	Dixie Highway	• Stuart, FL	. 34994		

5612214967



# Martin County Health Department (561) 221-4090 Fax. (561) 221-4967

TO:	BUILC	ING DEPARTMENT:	MARTIN	JUPITER ISL.	SEWAL	LS PT. STUART
FROM: DATE:		J10/02				
SUBJE	ECT: FII	NAL APPROVAL FOR	SEPTIC SY	STEMS		
HEAL]	TH DEP	r. PERMIT	BUILDIN	G DEPT, PERMI	I	LOCATION
• 43-	SS=					
• 43-	ss- <u>03</u>	656	55	73-	,	_
• 43-	·ss				(	o India Lucia PKum
• 43-	.ss- <sub>_</sub>					
• 43	-SS	_				
• 43	-ss			·		
• 43	-ss					
• 43	-ss <sub>-</sub>					
JEH	\DOCS\FOR	MS OSTOS APPROVALS.DOC	03/01		:	
		620 So	outh Dixie Highw	vay • Stuart, FL 34994	4	

### FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

Expires July 31, 2002

**ELEVATION CERTIFICATE** Important: Read the instructions on pages 1 - 7.

		SECTION A-	PROPERTY OWNER INFORMATION	ON .	For Insurance Company Use:	
BUILDING OWNER'S NAME	I					
MICHAEL & JENNIFER F BUILDING STREET ADDRESS		Suite, and/or Bldg. No.) OR F	O. ROUTE AND BOX NO.		Company NAIC Number	
6 INDIALUCIE PARKWAY	for summand a deal as set of					
CITY STUART			STATE FL	ZIP C 34994		
PROPERTY DESCRIPTION (LC LOT 9 BLOCK 4 INDI		, Tax Parcel Number, Legal ( AT BOOK 4 PAGE 7				
BUILDING USE (e.g., Residentia RESIDENTIAL	l, Non-residential, Add	fition, Accessory, etc. Use C	omments section if necessary.)	·		
LATITUDE/LONGITUDE (OPTIO		HORIZONTAL DATUM:		::		
(##P-##f-##.##f" or ##i.#####		NAD 1927 NAD 19		USGS Quad Map	☐ Other:	
		SECTION B - FLOOD	INSURANCE RATE MAP (FIRM) I	NFORMATION		
B1. NFIP COMMUNITY NAME 8	COMMUNITY NI IM	· · · · · · · · · · · · · · · · · · ·	32. COUNTY NAME		B3. STATE	
TOWN OF SEWALL'S POINT	120164	1 -	MARTIN		FLORIDA	
B4. MAP AND PANEL NUMBER	B5. SUFFIX	B6. FIRM INDEX DATE 6-16-92	B7. FIRM PANEL EFFECTIVE/REVISED DATE	B8. FLOOD ZONE(S) A 10	(Zone AO, use depth of flooding)	
120164 0001	E		10-16-96		8.0	
B10. Indicate the source of the				" · · ·		
FIS Profile  B11. Indicate the elevation date	☑ FIRM	Community Dete		SCRIDE):		
			area or Otherwise Protected Area (C	88 Other (Describe):		
DIE IS BIC DURANTY ROCALED IN A			ELEVATION INFORMATION (SUR		Designation Date	
C1. Building elevations are bas			<del> </del>	Finished Construction		
		_		ministruction		
	*A new Elevation Certificate will be required when construction of the building is complete.  C2. Building Diagram Number 1 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram					
accurately represents the building, provide a sketch or photograph.)						
C3. Elevations – Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO						
					n the datum used for the REE in	
	Complete Items C3a-i below according to the building diagram specified in Item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of					
Section D or Section G, as				ompour. Our trie apace pr		
Datum NGVD 1929 Con						
			used appear on the FIRM? Tyes	s □ No		
a) Top of bottom floor (			8. <u>67 ft.(m)</u>			
☐ b) Top of next higher fi	-		<u>v. s</u> ft.(m)	oossed Seal,	All Brand	
c) Bottom of lowest ho		ember (V zones onlv)	<u>N/A</u> ft.(m)	sed ate	1	
d) Attached garage (to			8. <u>27</u> ft.(m)	) gg	1/01/15	
e) Lowest elevation of		quipment		<u> </u>	1104 1124 1	
servicing the buildin		• •	N/Aft.(m)	nber	102 4 W	
f) Lowest adjacent grad	-		7.8ft(m)	License Number, Emb Signature, and	アレカーニーハユー	
g) Highest adjacent gra	• •		<u>8</u> . <u>5</u> fL(m)	nse S	1 328 CE 1	
h) No. of permanent op			nt grade <u>NA</u>	ice Ice		
i) Total area of all perm	anent openings (flo	od vents) in C3h <u>NA</u> sq. i	n. (sq. cm)	<b>-</b> ,	,	
		SECTION D - SURVEY	OR, ENGINEER, OR ARCHITECT (	CERTIFICATION	<del></del>	
This certification is to be si	gned and sealed	<del></del>	ineer, or architect authorized by I		formation.	
			te represents my best efforts to in			
I understand that any false	statement may b		imprisonment under 18 U.S. Cod	e, Section 1001.		
CERTIFIER'S NAME Rober	t Bloomster Jr.			LICENSE NUMBER	4134	
TITLE Professional Land Sur	veyor		COMPANY NAME	Bloomster Professional Lan	nd Surveyors, Inc.	
ADDRESS 791 N D Okje Henhway			CITY .	STATE		
SIGNATURE SIGNATURE	XA	· · · · · · · · · · · · · · · · · · ·	Jensen Beach DATE		34957 PHONE	
- jour round	<i>T</i>		2/8/02	561.33	4-0868	

IMPORTANT: In these spaces, copy the o	corresponding information from Section A.				Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., U. 6 INDIALUCIE PARKWAY	nit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND B	OX NO.		Pol	icy Number
CITY STUART	STATE FL	<u> </u>	ZIP CODE 34994	Co	mpany NAIC Number
	CTION D - SURVEYOR, ENGINEER, OR AR	CHITECT C		(D)	
<del></del>	or (1) community official, (2) insurance agent/o			-,	
COMMENTS	or (1) continuinty official, (2) insurance against	- any and	(c) scholing owner.		<u> </u>
		· · · · · · · · · · · · · · · · · · ·			
	-				Check here if attachments
SECTION E - BUILDING	GELEVATION INFORMATION (SURVEY NO	OT REQUIRE	ED) FOR ZONE AO AND ZO		
For Zone AO and Zone A (without BFE), comp	olete Items E1 through E4. If the Elevation Cer	rtificate is inte	nded for use as supporting in	formation for a	LOMA or LOMR-F,
Section C must be completed.					
E1. Building Diagram Number _(Select the bu		which this cer	tificate is being completed – s	ee pages 6 ar	nd 7. If no diagram accurately
represents the building, provide a sketch of		\ in/a\	] about or [] balant label	onal the hist	ant adjacent ands
E2. The top of the bottom floor (including base E3. For Building Diagrams 6-8 with openings (					
grade.	see page 1, the nextragner hoor or elevated in	icoi (cicvadoi	no) or the ballotting isic(n	.,a.,a	sore the highest sujacent
E4. For Zone AO only: If no flood depth numb	er is available, is the top of the bottom floor ele	vated in acco	ordance with the community's	floodplain ma	nagement ordinance?
· · · · · · · · · · · · · · · · · · ·	cal official must certify this information in Section		<u></u>	•	
SE	CTION F - PROPERTY OWNER (OR OWNE	R'S REPRE	SENTATIVE) CERTIFICATIO	N	
The property owner or owner's authorized re	presentative who completes Sections A, B, and	d E for Zone	A (without a FEMA-issued or	community-iss	sued BFE) or Zone AO must
sign here.					
PROPERTY OWNER'S OR OWNER'S AUTHOR	IZED REPRESENTATIVE'S NAME				
		-			
ADDRESS		CITY		STATE	ZIP CODE
SIGNATURE	<u>.                                    </u>	DATE		TELEPHONE	
COMMENTS					
		<del></del>			
	OFOTION C. COMMUNITY IN	FORMATION	·		Check here if attachments
The least official the in a the short built are	SECTION G - COMMUNITY IN			Castana A D	C(auE) and C of this Elevent
Certificate. Complete the applicable item(s) ar	rdinance to administer the community's floodpl and sign below	an managen	nent ordinance can complete	Sections A, B,	C (or E), and G or this Elevau
	en from other documentation that has been sign	ned and emb	ossed by a licensed surveyor	: enaineer, or	architect who is authorized by
	nformation. (Indicate the source and date of the				·
G2. A community official completed Section				or Zone AO.	
G3. The following information (Items G4-G	69) is provided for community floodplain manag	gement purpo	oses.		
G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED		G6. DATE CERTIFICATE OF	COMPLIANCE	JOCCUPANCY ISSUED
G7. This permit has been issued for.   New	•				D-4
G8. Elevation of as-built lowest floor (including	•		ft.(m) ft.(m) ·		Datum:
G9. BFE or (in Zone AO) depth of flooding at t	ne ranging site b.				Datum:
LOCAL OFFICIAL'S NAME			Œ		
COMMUNITY NAME		TE	LEPHONE		
SIGNATURE		DA	TE		
COMMENTS		<u> </u>	<del></del>	<del></del>	
	<del>, , , , , , , , , , , , , , , , , , , </del>				
·		·			·
					Check here if attachments
					· · · · · · · · · · · · · · · · · · ·

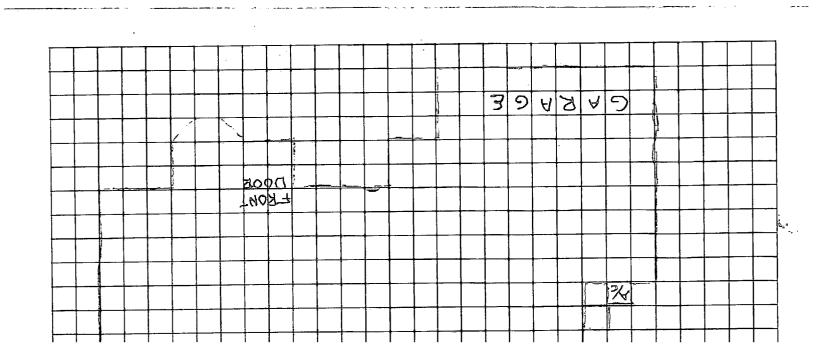
## PATRICK EXTERMINATING, INC.

3226 S.E. Gran Park Way, Stuart, FL 34997 Stuart/Palm City - (561) 286-6812 Hobe Sound - (561) 546-3722 Jupiter - (561) 744-2681 Vero Beach - (561) 562-3700 Fax (561) 223-2114

### ANNUAL PEST RENEWAL INSPECTION REPORT

Inspector Robert Young	Date: <u>())-11-2002</u>
	Account #:
	Phone: ?
☑Subterranean Termites ☐ Carpenter Ants	□Fungus
Visual evidence of pests covered by this contract: 🛮 No 🗀 Y	'es
□ Active □ Inactive Locations: None	
Visible damage from pests covered by this contract observed:   Locations: None.	I No □ Yes
This company has retreated the structure(s) at time of inspection:  Sub Termite pres  (Organisms treated)  (Perimeter Spray For pretreat.	□No □Yes eman TC 75% esticide used) □ Date File Orig.: □ Charge □ Amount Pd./Date: □ Check #:
Customers' / Mattowale	
PATIO	

·•



# PATRICK EXTERMINATING, INC. SUBTERRANEAN TERMITE CONTROL LIMITED GUARANTEE

Original Treatment Date 11-15-01 Annual Renewal Commence:  Annual Renewal Fee ONE HUNDRED FIFTEEN DOLLARS  Area Treated Under This Agreement 2774 SQ. FT.	s on <u>11-15-02</u> Contract Number <u>70108</u>
Annual Renewal Fee ONE HUNDRED FIFTEEN DOLLARS	Contract Number 70108
Area Treated Under This Agreement 2774 SQ. FT.	
YOUR LIMITED GUARANTEE	
In consideration of sums received and\or to be received by us for treating the above premises for Subter annually the above premises and to apply any liquid barrier treatments necessary to said premises if Subtherein during the period that this Limited Guarantee remains in force. Such treatments will be AT NO Examples provided in writing, will damage be covered under this Limited Guarantee.	oterranean Termite infestation is found
TERMS AND CONDITIONS	
The initial period of the Limited Guarantee shall be one year, commencing on the date of the initial treatr at your option, renew this Limited Guarantee annually for a period of four additional years by making the said renewal date of each subsequent year. If such annual renewal payments are made without lapse du of said additional period, Patrick Exterminating shall recommend if additional treatment is necessary. If sagrees to pay additional charges. If annual renewal payment is not made on or before said renewal date become null and void as of the renewal date on which said payment is due. Patrick Exterminating reservit necessary, to offset ever increasing operating costs.	above annual renewal payments on or before uring said additional period then, at the end such treatment is recommended customer this Limited Guarantee shall terminate and
Patrick Exterminating shall not be liable for retreatment to covered premises that have been added to or Exterminating has been notified prior to the beginning of any alteration or addition, and any additional tre finds necessary is performed. Such alterations and additions must be serviced by Patrick Exterminating, owner. Additions or alterations include the addition or removal of soil around the foundation. Patrick Exterenewal amount if such additions or alterations are made. Patrick Exterminating will not be held respons outside treated areas, wood in direct contact with the soil and\or masonry failure. This agreement exclude	atment or retreatment Patrick Exterminating as soon as practical, at the expense of the eminating reserves the right to adjust the annumble for termites which enter the structure from
Patrick Exterminating shall have no responsibility for termites that are attributed to an alternate moisture accessing soil. Purchaser is responsible for making timely repairs where such alternate water sources at customer, Patrick Exterminating will provide, if necessary, additional treatment to control infestation at Pi shall have no liability under this agreement should customer refuse to allow Patrick Exterminating access for the purpose of carrying out the terms and conditions of this agreement.	re found. Upon completion of repairs by urchaser's expense. Patrick Exterminating
By Owner or Agent  By Patrick Exterminati  3226 SE Gran Park W	C. Catul

Stuart 561-286-6812

Jupiter 561-744-2681

Vero Beach 561-562-3700

Hobe Sound 561-546-3722

## ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

### ESTIMATED ENERGY PERFORMANCE SCORE\* = 83.8

The higher the score, the more efficient the home.

### FLAUGH, 6 INDIA LUCIA PKWAY., SEWELLS PT., FL,

1.	New construction or existing	New _	12.	Cooling systems	
2.	Single family or multi-family	Single family		Central Unit	Cap: 59.0 kBtu/hr
3.	Number of units, if multi-family	i _			SEER: 12,50
4.	Number of Bedrooms	4	b.	N/A	_
<b>5</b> .	Is this a worst case?	No —			_
6.	Conditioned floor area (fl <sup>2</sup> )	2640 ft²	c.	N/A	-
7.	Glass area & type				_
a.	Clear - single pane	430.1 ft²	13.	Heating systems	
ь	Clear - double pane	0.0 ਜੋ⁻		Electric Strip	Cap: 59.0 kBtu/hr _
	Tim/other SHGC - single pane	0.0 ft <sup>2</sup>		•	COP: 1,00
	Tim/other SHGC - double pane	0.0 N²	ъ.	N/A	
8.	Floor types	_			
	Slab-On-Grade Edge Insulation	R=0.0, 284.8(p) ft	C.	N/A	_
	N/A				_
	NA	_	14.	Hot water systems	_
9.				Electric Resistance	Cap: 40.0 gallons
	Concrete, Int Insul, Exterior	R=5.0, 2149.5 ft <sup>2</sup>	_		EF; 0.88
	Frame, Wood, Adjacent	R=11.0, 188.0 ft <sup>2</sup>	ъ.	N/A	_
	N/A				_
	N/A	<del></del>	c	Conservation credits	_
	N/A		<b>.</b>	(HR-Hear recovery, Solar	-
	Ceiling types			DHP-Dedicated heat pump)	
	Under Artic	R=30.0, 2639.5 ft <sup>2</sup>	15	HVAC credits	CF, _
	N/A			(CF-Celling fan. CV-Cross ventilation,	, -
-	NA	-		HF-Whole house fan.	
	Ducts			PT-Programmable Thermostat,	
		Sup. R-6.0, 80.0 ft		RB-Attic radiest barrior,	
	Sup: Unc. Ret: Unc. AH: Attic	Sup. K-0.0, 80.0 It		MZ-C-Multizone cooling	
D	N/A			MZ-H-Multizone heating)	
				MIT-U-MINITEDIR INSTITUTE)	

I certify that this home has complied with the Florida Energy Efficiency Code For Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature:

Address of New Home

Date: \_// 4

in/FL Zin Strail

\*NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program.

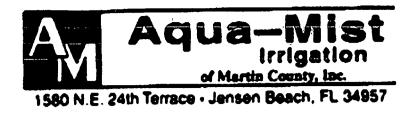
This is not a Building Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating.

Contact the Energy Gauge Hotline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction,

contact the Department of Community Affairs at 850/487-1824.

EnergyGauge® (Version: FLRCSB v3.21)

FROM : CUSTOM AIR SYSTEMS INC PHONE NO. : 5613351968 Jul. 10 2002 02:44PM PL



7/11/02

6 Indialucie Pkw.

Sirs,

This letter is to confirm the type and style of installation for the irrigation system at #6 India Lucie Parkway. The system was installed to Martin County standards using RainBird heads, valves, and controller. Wilkens PVB Vacuum Breakers were installed on both the city and well water feeds in accordance to Martin County code. The system design includes a RainBird Rainswitch and also makes the best use of the heads and low volume nozzles to prevent overwatering and make the system as efficient as possible.

Rain shutoff integrated \$17/2

Sincerley,

Robert L. Witherow

President



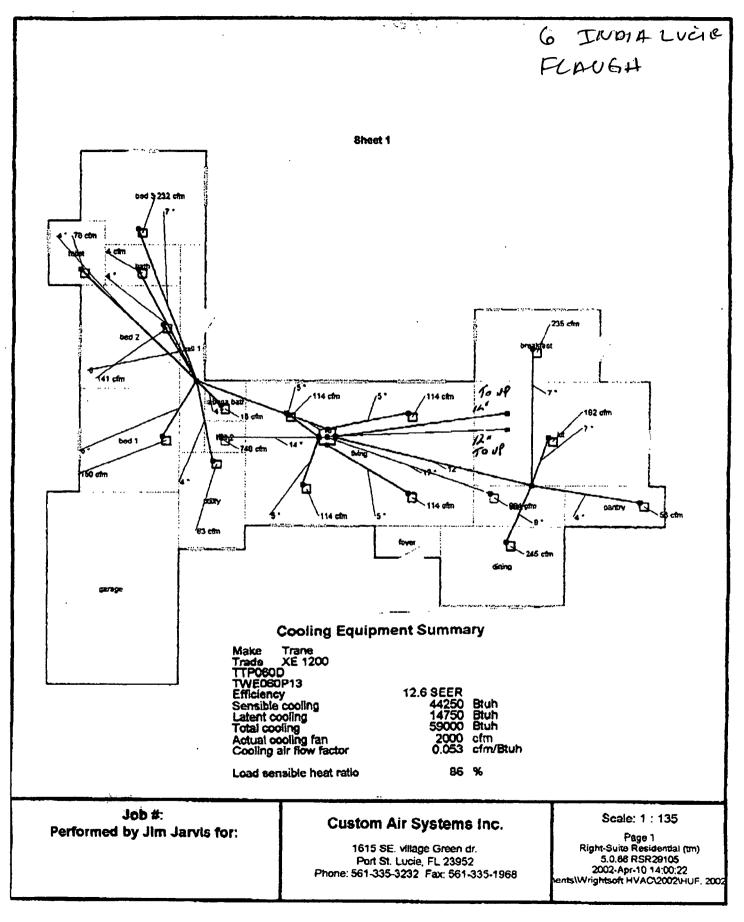
### TOWN OF SEWALL'S POINT

One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

## **CORRECTION NOTICE**

CORRECTION NOTICE
ADDRESS: G ludiqlu cie
have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same. Public Strop Coppe pre
De don't stronglad down stain
Icolf stoppers
You are hereby notified that no work shall be concealed upon these premises until the above violations are corrected. When corrections have been made, call for an inspection.
DATE: dri/2

DO NOT REMOVE THIS TAG



up stairs Scale: 1:135 Job#: **Custom Air Systems Inc.** Performed by Jim Jarvis for: 1615 SE. village Green dr.

Port St. Lucie, FL 235/52 Phone: 561-335-3232 Fax: 561-335-1968 Page 2
Right-Suite Residential (tm)
5.0.66 RSR29105
2002-Apr-10 14:00:22
pents\Wrightsoft HVAC\2002\HUF. 2002

Apr. 18 2002 07:08AM P2

PHONE NO. : 5613321968

FROM : CUSTOM AIR SYSTEMS INC



# RIGHT-J CALCULATION PROCEDURES A, B, C, D *Entire House*

**Custom Air Systems Inc.** 

1815 SE, village Green dr., Port St. Lucia, FL 23952 Phone: 561-335-3232 Fax: 561-335-1968

oceo	Jure A - Winter Infiltn	ation HTM Calcu	slation*		
1.	Winter infiltration AVF 0.70 ach x	20849 ft³	x 0.0167	= 244	cfm
2.	Winter infiltration load	x 28 °F	Winter TD =	7607	Dt. L
3.	Winter infiltration HTM			7507	
	7507 Btuh /	564 ft <sup>2</sup>	Total window = and door area	13.3	Btuh/ft²

1.	Summer infiltration AVF				
	0.40 ach x 20	0849 ff <sup>e</sup>	x 0.0167	= 139	cfm
2.	Summer infiltration load				
3.	1.1 x 139 cfm Summer infiltration HTM	× 15 °F	Summer TD =	2298	Btuh
J.	2298 Btuh / 56	· · · · · · · · · · · · · · · · · · ·	Total window = and door area	4.1	Btuh/ft <sup>2</sup>

Procedure C -	Laten	t infiltra	tion Gain					
0.68	x 61	gr/lb	moist.diff.	x	139	cfm	=	5816 Btuh

No. of Fireplaces is:

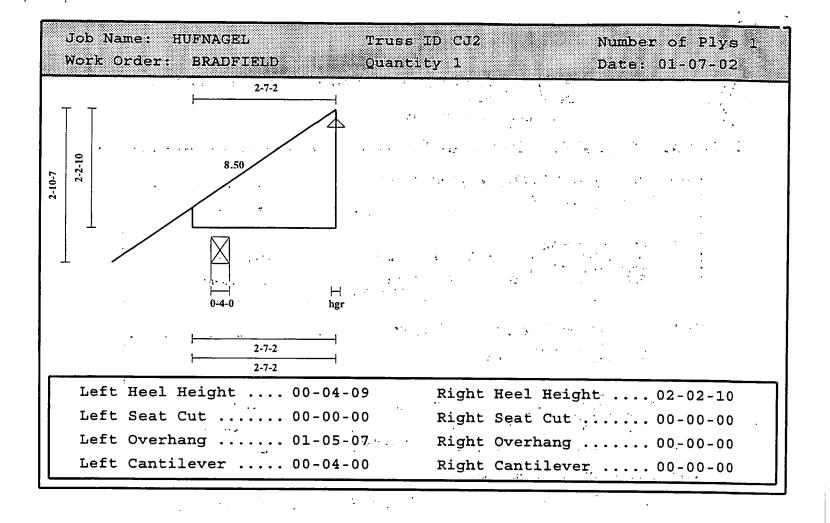
0

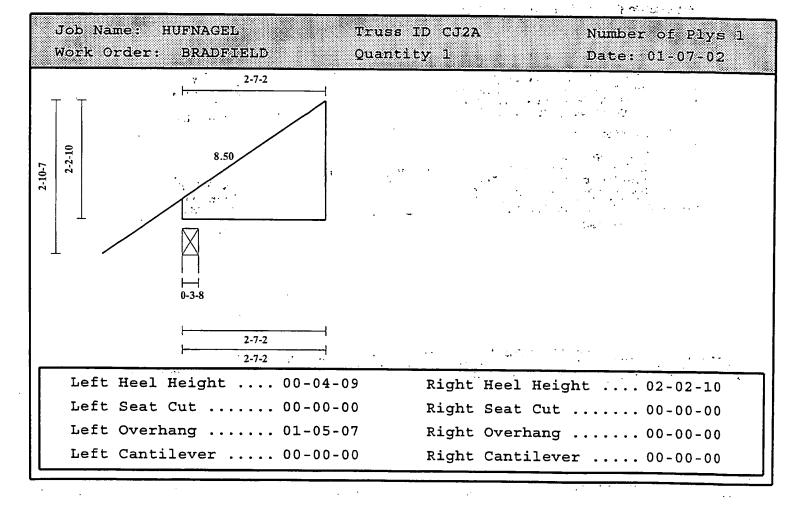
Printout certified by ACCA to meet all requirements of Manual J 7th Ed.

ACCA C:Wy Documents Wingsteen HVACU2007 HUF. 2007 FLAUGH 151

2002-Apr-10 14:07:39

Apr. 11 2002 01:33PM PS PHONE NO. : \$613331968 FROM : CUSTOM AIR SYSTEMS INC







### RIGHT LOAD AND EQUIPMENT SUMMARY Entire House

Custom Air Systems Inc.

1615 SE, village Green dr., Port St. Lucie, FL 23952 Phone: 561-335-3232 Pex: 561-335-1968

### Project Information

PRAUGH

Notes:

### Design Information

Weather: Fort Pierce, FL, US

### Winter Design Conditions

### Outside db Inside db Design TD

### Building heat loss Ventilation air Ventilation air lose 44550 Bluh 0 cfm Btuh Design heat load 44550 Btuh

**Heating Summary** 

### Infiltration

Method	Simplified
Construction quality	Average
Fireplaces	0

Area (ft²)	Heating 2218	Cooling
Volume (ft²) Air changes/hour	20849 0.70	2218 20849
Equiv. AVF (cfm)	244	0.40 139

### **Heating Equipment Summary**

Make Trade n/a	n/a
----------------------	-----

Efficiency Heating input Heating output Heating temp rise Actual heating fan	100.0 EFF 0 Stuh 0 Buh 0 °F
Actual heating fan	2000 cfm
Heating air flow factor	0.045 cfm/Bluh

### Space thermostat

### **Summer Design Conditions**

Outside db	90	°F
Inside db	75	°F
Design TD	15	۰F
Daily range	Ĺ	
Relative humidity	50	%
Moisture difference	81	gr/li

### Sensible Cooling Equipment Load Sizing

Structure	37691	Btuh
Ventilation	0	Btuh
Design temperature swing	3.0	°F
Use mfg. data	n	
Rate/swing multiplier	0.95	
Total sens, equip, load	35807	Rhih

### Latent Cooling Equipment Load Sizing

<b>.</b>	,	
Internal gains	460	Btuh
Ventilation	0 5816	Btuh
Infiltration	5816	Btuh
Total latent equip. load	6276	Btuh
Total equipment load	42083	Btuh

### **Cooling Equipment Summary**

Make Trans Trade XE 1200	•
TTP060D TWE060P13	
Efficiency Sensible cooling	12.6 SEER 44250 Blub
Latent cooling Total cooling	14750 Bluh 59000 Bluh
Actual cooling fan Cooling air flow factor	2000 cfm 0.053 cfm/Btuh

u	oad	sensible	heat	ratio

86 %

Printout certified by ACCA to meet all requirements of Manual J 7th Ed.

Wrightsoft Right-Suite Residential<sup>TM</sup> 5.0.66 RSR29105 ACCA C: Way Documents I Wrightson HVAC 2002 HUF. 2002 PLAUGH. BY

2002-Apr-10 14:07:39

Page 1

Apr. 11 2002 01:31PM P2

PHONE NO. : 5613351968

FROM: CUSTOM AIR SYSTEMS INC

## 6A-1 SUMMER OVERHANG FACTORS (SOF) FOR SINGLE AND DOUBLE PANE GLASS.

OUDatio	00.11	12, 17	18-26	27-35	36-46	.4757	.5870	.7183	.84-1.18	1.19-1.72	1.73-2.73	_2.7 <u>% &amp; µn</u> _
		0.993				0.847	0,810	0.774	0.745	0.692	0,646	0.606
						0.782	0.726	0.673	0.633	0.561	0.504	0.459
							_	0.625	0.574	0.484	0.415	0.462
								0.585	0.542	0.471	0.422	0.386
				1, 7			0.630	0.581	0.546	0.492	0.455	0:428
					0.805	0.723	0.657	0.599	0.555	_0.482	0.427	0.386
	-				0.840	0.767	0.704	0.645	0.599	0.518	0.455	0.404
					0.861	0.805	0.760	0.718	0.686	0.629	0.583	0.545
					3.0'	3.5'	4.5'	5.5'	6.5'	9.5'	14.0	20.0
	OH Ratio North Northeast East Southeast South Southwest West Northwest OH Length	North         1.00           Northeast         1.00           East         1.00           Southeast         1.00           South         1.00           Southwest         1.00           West         1.00           Northwest         1.00	North         1.00         0.993           Northeast         1.00         0.995           East         1.00         0.993           Southeast         1.00         0.999           South         1.00         0.995           Southwest         1.00         0.997           West         1.00         0.994           Northwest         1.00         0.995	North         1.00         0.993         0.971           Northeast         1.00         0.995         0.966           East         1.00         0.993         0.964           Southeast         1.00         0.999         0.960°           South         1.00         0.995         0.945           Southwest         1.00         0.997         0.958           West         1.00         0.994         0.965           Northwest         1.00         0.995         0.967	North         1,00         0,993         0,971         0,932           Northeast         1,00         0,995         0,966         0,909           East         1,00         0,993         0,964         0,904           Southeast         1,00         0,999         0,960         0,881           South         1,00         0,995         0,945         0,854           Southwest         1,00         0,997         0,958         0,882           West         1,00         0,994         0,965         0,905           Northwest         1,00         0,995         0,967         0,914	North         1,00         0,993         0,971         0,932         0,891           Northeast         1,00         0,995         0,966         0,909         0,849           East         1,00         0,993         0,964         0,904         0,837           Southeast         1,00         0,999         0,960         0,881         0,799           South         1,00         0,995         0,945         0,854         0,770           Southwest         1,00         0,997         0,958         0,882         0,805           West         1,00         0,994         0,965         0,905         0,840           Northwest         1,00         0,995         0,967         0,914         0,861	North         1.00         0.993         0.971         0.932         0.891         0.847           Northeast         1.00         0.995         0.966         0.909         0.849         0.782           East         1.00         0.993         0.964         0.904         0.837         0.759           Southeast         1.00         0.999         0.960         0.881         0.799         0.713           South         1.00         0.995         0.945         0.854         0.770         0.689           Southwest         1.00         0.997         0.958         0.882         0.805         0.723           West         1.00         0.994         0.965         0.905         0.840         0.767           Northwest         1.00         0.995         0.967         0.914         0.861         0.805	North         1.00         0.993         0.971         0.932         0.891         0.847         0.810           Northeast         1.00         0.995         0.966         0.909         0.849         0.782         0.726           East         1.00         0.993         0.964         0.904         0.837         0.759         0.691           Southeast         1.00         0.999         0.960         0.881         0.799         0.713         0.645           South         1.00         0.995         0.945         0.854         0.770         0.689         0.630           Southwest         1.00         0.997         0.958         0.882         0.805         0.723         0.657           West         1.00         0.994         0.965         0.905         0.840         0.767         0.704           Northwest         1.00         0.995         0.967         0.914         0.861         0.805         0.760	North         1.00         0.993         0.971         0.932         0.891         0.847         0.810         0.774           Northeast         1.00         0.995         0.966         0.909         0.849         0.782         0.726         0.673           East         1.00         0.993         0.964         0.904         0.837         0.759         0.691         0.625           Southeast         1.00         0.999         0.960         0.881         0.799         0.713         0.645         0.585           South         1.00         0.995         0.945         0.854         0.770         0.689         0.630         0.581           Southwest         1.00         0.997         0.958         0.882         0.805         0.723         0.657         0.599           West         1.00         0.994         0.965         0.905         0.840         0.767         0.704         0.645           Northwest         1.00         0.995         0.967         0.914         0.861         0.805         0.760         0.718	North         1.00         0.993         0.971         0.932         0.891         0.847         0.810         0.774         0.745           Northeast         1.00         0.995         0.966         0.909         0.849         0.782         0.726         0.673         0.633           East         1.00         0.993         0.966         0.904         0.837         0.759         0.691         0.625         0.574           Southeast         1.00         0.999         0.960         0.881         0.799         0.713         0.645         0.585         0.542           South         1.00         0.995         0.945         0.854         0.770         0.689         0.630         0.581         0.546           Southwest         1.00         0.997         0.958         0.882         0.805         0.723         0.657         0.599         0.555           West         1.00         0.994         0.965         0.905         0.840         0.767         0.704         0.645         0.599           Northwest         1.00         0.995         0.967         0.914         0.861         0.805         0.760         0.718         0.686	OH Ratio         .00 .11         .12-17         .18-26         .27-35         .38-36         .97-37         .15-36         .97-37         .15-36         .97-37         .98-10         .0.810         0.774         0.745         0.692           Northeast         1.00         0.995         0.966         0.909         0.849         0.782         0.726         0.673         0.633         0.561           East         1.00         0.993         0.964         0.904         0.837         0.759         0.691         0.625         0.574         0.484           Southeast         1.00         0.999         0.960         0.881         0.799         0.713         0.645         0.585         0.542         0.471           South         1.00         0.995         0.945         0.854         0.770         0.689         0.630         0.581         0.546         0.492           Southwest         1.00         0.997         0.958         0.882         0.805         0.723         0.657         0.599         0.555         0.482           West         1.00         0.994         0.965         0.905         0.840         0.767         0.704         0.645         0.599         0.518      <	North         1.00         0.993         0.971         0.932         0.891         0.847         0.810         0.774         0.745         0.692         0.646           Northeast         1.00         0.995         0.966         0.909         0.849         0.782         0.726         0.673         0.633         0.561         0.504           East         1.00         0.993         0.964         0.904         0.837         0.759         0.691         0.625         0.574         0.484         0.415           Southeast         1.00         0.999         0.960         0.881         0.799         0.713         0.645         0.585         0.542         0.471         0.422           South         1.00         0.995         0.945         0.854         0.770         0.689         0.630         0.581         0.546         0.492         0.455           Southwest         1.00         0.997         0.958         0.882         0.805         0.723         0.657         0.599         0.555         0.482         0.427           West         1.00         0.994         0.965         0.905         0.840         0.767         0.704         0.645         0.599         0.518         <

6A-2 WALL SUMMER POINT MULTIPLIERS (SPM

NA-E WALL	COMMEN	POINT MOL		· · · · ·	CONCRETE	BLOCK (	NORMA	LWT)		- FACE B	RICK	er Andre		LOG	
ĺ	FRAME							R-VALUE	R-VALUE WOOD FR R-VALUE BLOCK				LOG		
l 1	wc	OD	STE	EL	1	INSULA	TION	INSUL	0-6.9	4.6	0-2.9	2.3		6 INCH	8 INCH
R-VALUE	EXT	ADJ	EXT	ADJ	R-VALUE	EXT	ADJ	EXT	7-10.9	1.3	3-6.9	1.6	R-VALUE	EXT	EXT
0-6.9	8.5	3.4	11.6	4.4	0-2.9	4.2	1.9	4.2	11-18.9	1.1	7-9.9	.9	0-2.9	2.8	1.9
7-10.9	3.2	1.3	5.5	2.1	3-4.9	2.7	1.3	1.7	19-25.9	.6	10 & UP	.7	3-6.9	1.9	1.4
11-12.9	2.7	1.0	4.2	1.6	5-6.9	2.0	1.1	1.2	26 & Up	.3			7 & Up	1.5	12
13-18.9	2.4	.9	3.9	1.5	7-10.9	1.6	.8	.7		_		→.		:	
19-25.9	1.6	.6	3.4	1.3	11-18.9	1.0	.6	.3	]						
70 20.0	1.0		10	7	10.25.0	.6.7	3	5 5 4 3	]	4 32 MOTE:	SEE SECTION	O OC ADDI	NDIY C EOD	MIN TIDILE	De l

NOTE: SEE SECTION 2.0 OF APPENDIX C FORMULTIPLIER

3 2 OF ENVELOPE COMPONENTS NOT ON THIS FORM

6A-3 DOOR SUMMER POINT MULTIPLIERS (SPM)

DOORTYPE	EXTERIOR 3	ADJACENT
WOOD	9.4	3.8
INSULATED	6.4	2.6

6A-4	CEILING SUMMER PUIN	MULTIPLIENS (SPM)
	LINIDEDATTIC	CINCLE ASSEMBLY

UNDER	ATTIC	SINGLE A	SSEMBLY	CON	CRETE DECK P	E DECKROOF		
R-VALUE	SPM	R-VALUE.	SPM .	]	CEILIN	GTYPE		
19-21.9	1.5	10-10.9	4.0	R-VALUE	EXPOSED	DROPPED		
22-25.9	1.3	11-12.9	3.6 \	10-13.9	4.14	3.60		
26-29.9	1.0	13-18.9	3.3	14-20.9	2.91	2.58		
30.37.9	.8	19-25.9	2.5	21 & Up	1.75	1.59		
38 & Up	.6	26-29.9	1.6					
RBS Credi	t 0.70	30 & Up	12	7				

6A-5 FLOOR SUMMER POINT MULTIPLIERS (SPM)

	OMMENTON	20			43	*** * <b>*</b>	RAISED	WOOD	
	HGRADE ULATION		RAIS CONC			•	POST OR PIER CONSTRUCTION	STEM WALLW/UNDER FLOOR INSULATION	ADJACENT
R-VALUE	SPM		R-VALUE	SPM		: R-VALUE	SPM.	SPM	SPM
0-2.9	- AA A		0-2.9	.8		0-6.9	∂5.02	-4.2.	3.4
3-4.9	<del></del>		3-4.9	3		7-10.9	2.58	9	1.3
5-6.9	1 . 100	K EM	5-6.9	4	<b>- 182</b>	11-18.9	2.08	6	1.0
7 & Up			7 & Up	5	- 1	19 & Up	1.58.	4	.6

6A-6 INFILTRATION & INTERNAL GAINS (SPM)

Air infiltrations	7/43 HEW
Internal Gainst 4	F 11:36 A
Infiltration/Internal Gains	18.79
(Combined)	

6A-7A AIR HANDLER MULTIPLIERS	S (SPM)
Located in attic	1.05
Located in garage	1.00
Located in conditioned area	0.93
Located on exterior of building	1.04

6A-7 DUCT MULT	IPLIERS (DM)	See Table 6	-10 for Code minimums.
		DUCT	

	DUCT		EIUHNDUCISI			
SUPPLY DUCTS IN:	R-Value	UNCONDITIONED SPACE	ATTIC WITH RBS	CONDITIONED SPACE		
	. 42	1.058	1.054	1.053		
Unconditioned Space	6.0	1.043	1.040	1.039		
Vijopina gampa apasa	8.0	1.033	1.032	1.031		
	42	1.040	1.038	1.035		
Attic with Radiant Barrier (RBS)	6.0	1.030	1.028	1.026		
,	8.0	1.023	1.022	1.021		
	4.2	1.002	1.001	1.0		
Conditioned Space	6.0	1.002	1.001	1.0		
	8.0	1.001	1.001	1.0		

RAJR COOLING SYSTEM MULTIPLIERS (CSM)

0	A-6 COOLINGSTSTEMMU	CITE EIE 110 (OO	in)						DI 1500 /0/	<u> </u>	• • •	1	
SYSTEM TYPE See Table 6-3 for Code minimums				مهاجرة أندرين		COC	<u>OLING SYS</u>	TEM MULTI	PLIERS (CS			· · · · · · · · · · · · · · · · · · ·	
ŀ	3.	Rating		7.5-7.9	8.0-8.4	8.5-8.8	8.9-9.4	9.5-9.9	10.0-10.4	10.5-10.9	11.0-11.4	11.5-11.9	12.0-12.4
- 1	Central Units (SEER)	CSM	-	45	.43	.40	.38	.36	.34	.32	.31	.30	.28
1		Rating	12.5-12.9	13.0-13.4	13.5-13.9		14.5-14.9	15.0-15.4	15.5-15.9	16.0-16.4	16.5-16.9	17.0-17.4	17.5 & Up
1	PTAC & Room Units (EER)	CSM	.27	.26	.25	.24	.24	.23	.22	.21	.21	.20	.19

64-9 HOT WATER MULTIPLIERS (HWM)

SYSTEM TYPE See Table						HOT WATE	R MULTIPLI	ERS (HWM				
	EF			***	.8081	.8283	.8485	.8687	.8890	.9193	.9496	.97 & Up
Electric Resistance	HWM				2606	2543	2482	2424	2369	2290	2218	2149
	EF	.4347	.4849	.5051	.5253	.5455	·.5657	.5859	.6061	.6263	.6465	.66 & Up
Natural Gas	HWM	1848	1655	1589	1528	-1471 ·	1419	1370	1324	1281	1241	1203
LP Gas	HWM	2353	2107	2023	1945	1874	1806	1744	1686	1631	1581	1533
Ded. HP or Solar	FF	1.0-1.49	1.5-1.99	2.0-2.49	2.5-2.99	3.0-3.49	3.5-3.99	4.0-4.49	4.5-4.99	5.0-Up		
System with Tank	HWM	2085	1390	1042	834	695	596	521	463	417		

-3-



<< noissimenenT batqurnatn1 >>

### Design Information

Weather: Fort Pierce, FL, US

### Winter Design Conditions

### **Summer Design Conditions**

		_	
Outside db Inside db Design TD	42 °F 70 °F 28 °F	Outside db Inside db Design TD Daily range Relative humidity Moisture difference	90 °F 75 °F 15 °F L 50 % 61 gr/ib

### **Heating Summary**

Sensible	Cooling	<b>Equipment</b>	Load	Sizing
----------	---------	------------------	------	--------

Building heat loss Ventilation air Ventilation air loss	Ō	Btuh cfm Btuh	Structure Ventitation Design temperature swing	37691 0 3.0	Btuh Btuh F
Design heat load	44550	Btuh	Use mfg. data Rate/swing multiplier	n 0.95	
			Total sens equin load	35807	Blub

### Infiltration

Latent Cooling	Equipment	Load Sizing

Method	Simplifie		Latent Cooling Equip	oment Load Sizing
Construction quality Fireplaces	Averag	)e O	Internal gains	460 Bluh
4 499	Heating	Cooling	Ventilation Infiltration	0 Btuh 5816 Btuh 6276 Btuh
Area (ft²) Volume (ft³) Air changes/hour	2218 20849 0.70	2218 20849 0.40	Total latent equip. load  Total equipment load	42083 Btuh
Farity AVC (efm)	244	130	, ata, ada, p a a. a.	

### **Heating Equipment Summary**

### **Cooling Equipment Summary**

117 THE STATE OF T	•			
Make n/a Trade ri/a		Make Tranc Trade XE 1200 TTP060D TWE060P13		
Efficiency	100.0 EFF	Efficiency	12.6 SEER	
Heating input	O Btu			Btuh
Heating output	O Btul	uh Latent cooling	14750 59000	Stuh Btuh
Heating temp rise	0 °F	10111 00011119		cfm
Actual heating fan	2000 cfm	n Actual cooling fan		ofm/Btuh
Heating air flow factor	0.045 cfm	n/Bluh Cooling air flow factor	0.003	Cillabrai
Space thermostat		Load sensible heat ratio	86	%

Printout certified by ACCA to meet all requirements of Manual J 7th Ed.

Wrightsoft Rightsute Residendel<sup>TM</sup> 6.0.66 RSR29105 CCA C:Wy Documents Wrightsoft HVACV2002HUF. 2002FLAUGH.rs/

2002-April 14:07:39

APF. 11 2002 01:29PM P2 PHONE NO. : 5613321968 FROM : CUSTOM AIR SYSTEMS INC

Department of Community Affairs - FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION SOUTH 7 8 9 **FORM 600A-97** Residential Whole Building Performance Method A BUILDER: PROJECT NAME: PERMITTING CLIMATE AND ADDRESS: ZONE: **OFFICE:** JURISDICTION NO.: OWNER: PERMIT NO. CK Please Type 1. New construction or addition Single family detached or Multifamily attached 3. If Multifamily—No. of units covered by this submission 3. 4. 4. Is this a worst case? (yes / no) 5. sq. ft. Conditioned floor area (sq. ft.) Predominant eave overhang (ft.) Single Pane Double Pane Glass type and area: \_\_\_\_\_ sq. ft. \_\_\_\_sq. ft. a. Clear glass b. Tint, film or solar-screen
Floor type and insulation: **b.** sq. ft. ..... 8a. R= a. Slab-on-grade (R-value + perimeter) 8b. R=\_\_\_\_\_\_\_\_ sq. ft. b. Wood, raised (R-value + sq. ft.) 8c. R=<u>sades see graph see</u> sq.ft.. 9. Net Wall type, area and insulation: a. Exterior: 1. Concrete block (Insulation R-value)
2. Wood frame (Insulation R-value) \_ sq. ft. 9a-1 R= \_ 9a-2 R= \_\_\_\_ \_\_\_\_\_ sq. ft. \_\_\_ sq. ft. 3. Steel frame (Insulation R-value) 9a-3 \_\_ sq. ft. 9a-4 4. Log (Insulation R-value) 5. Other: \_\_\_\_\_

b. Adjacent: 1. Concrete block (Insulation R-value) Rational Section of the second section of the section of the section of the section of the section of the section of the section of the section of the section of the section of 9b-1 \_\_\_\_ sq. ft.: "R=.: 9b÷2 2. Wood frame (Insulation R-value). 🚣 sq. ft. 🕆 3. Steel frame (Insulation R-value) 9b-3 R= \_ sq. ft. 4. Log (Insulation R-value) 9b-4 10. Ceiling type, area and insulation: a. Under attic (Insulation R-value) 10a. R= \_\_ sq. ft. 10b. R==-\_ sq. ft. b. Single assembly (Insulation R-value) 10c. c. Radiant barrier installed (yes / no) 11. Air distribution system: a. Ducts (Insulation + Location) 11a. R= <u>- .\$.,,,</u>, \_ (cond./uncond.) 1 to 1 11b. b. Air Handler (Location) (cond./uncond.) 12a. Type: \_\_\_\_ 12. Cooling system: 12b. SEER/EER/COP: \_\_\_ (Types: central-split, central-single pkg., room unit, PTAC., gas, none) 12c. Capacity: \_\_\_\_\_ 13a. Type: \_\_\_\_ Ala Trabanian menang terlahan 13. Heating system: (Types: heat pump, elec. strip, nat. gas, L.P. gas, gas h.p., room or PTAC, none) 13b. HSPF/COP/AFUE: \_\_\_ 13c. Capacity: \_\_\_\_ 14. Hot water system: 14a. Type: \_\_ (Types: elec., natural gas, solar, L.P. gas, none) 14b. EF: \_\_\_\_ 15. Hot Water Credits: ... 15a. 6 \_\_\_\_\_ a. Heat Recovery (HR) 15b. b. Dedicated Heat Pump(DHP) c. Solar 16. HVAC Credits (Use: CF-Ceiling Fan, CV-Cross vent, PT-Programmable thermostat, 16. HF-Whole house fan, MZ-Multizone) 17. 17. COMPLIANCE STATUS: (PASS if As-Built Pts. are less than Base Pts.) 17b. a. Total As-Built points ..., b. Total Base points Review of plans and specifications covered by this calculation I hereby certify that the plans and specifications covered by the calculation are in indicates compliance with the Florida Energy Code. Before compliance with the Florida Energy Code. construction is completed, this building will be inspected for compliance in accordance with Section 553.908, F.S. DATE: PREPARED BY: DATE: I hereby certify that this building, as designed, is in compliance with the Florida Energy Code. BUILDING OFFICIAL: OWNER AGENT: DATE:

5573 # 6 INDIALUCIC

## ENERGY PERFORMANCE LEVEL (EPL) **DISPLAY CARD**

## ESTIMATED ENERGY PERFORMANCE SCORE\* = 83.8

The higher the score, the more efficient the home.

		1111 -	
1. New construction or existing 2. Single family of multi-family 3. Number of units, if multi-family 4. Number of Bedrooms 5. Is this a worst case? 6. Conditioned floor area (R*) 7. Glass area & type a. Clear - single pame b. Clear - double pame c. Tins/other SHGC - single pame d. Tins/other SHGC - double pame 8. Floor types a. Slab-On-Grade Edge Insulation b. N/A c. N/A 9. Wall types a. Concrete, Int Insul, Exterior b. Frame, Wood, Adjacent c. N/A d. N/A e. N/A 10. Ceiling types	New Single family 1 4	12. Cooling systems:  a. Central Unit  b. N/A  c. N/A  13. Heating systems a. Electric Strip  b. N/A  c. N/A  14. Hot water systems a. Electric Resistance  b. N/A  c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump)	Cap: 59.0 kBtu/hr SEER: 12.50  Cap: 59.0 kBtu/hr COP: 1.00  Cap: 40.0 gallons EF: 0.88  CF,
a. Under Aftic b. N/A c. N/A 11. Docts a. Sup: Unc. Ret: Unc. AH: Aftic b. N/A  I certify that this home has complied wi Construction through the above energy in this home before final inspection. Oth based on installed Code compliant featur Builder Signature:	saving features which nerwise, a new EPL D nres.	MZ-C-Multizone cooling.  MZ-H-Multizone heating)  Efficiency Code For Building  a will be installed (or exceeded)	
Address of New Home:		City/FL Zip:	THE THE
_	¢	mb. mortlable through the FLA/RES computer	· program.

\*NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program. This is not a Bullding Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar designation). your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Hotline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.

EnergyGauge® (Version: FLRCSB v3.21)

FROM: CUSTOM AIR SYSTEMS INC Apr. 11 2002 01:38PM P6 PHONE NO. : 5613351968

5573 # 6 INDIALUCIC

## **ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD**

## ESTIMATED ENERGY PERFORMANCE SCORE\* = 83.8

The higher the score, the more efficient the home.

		1111		
<ol> <li>New construction or existing</li> <li>Single family or multi-family</li> <li>Number of units, if multi-family</li> <li>Number of Bedrooms</li> <li>Is this a worst case?</li> <li>Conditioned floor area (ft²)</li> <li>Glass area &amp; type</li> <li>Clear - single pame</li> <li>Clear - double pame</li> <li>Tim/other SHGC - single pame</li> </ol>	New _ Single family _  1	a b c 13.	Cooling systems Central Unit  N/A  N/A  Heating systems Electric Strip	Cap: 59.0 kBtu/hr SPER: 12.50  Cap: 59.0 kBtu/hr COP: 1.00
8. Floor types a. Slab-On-Grade Edge Insulation b. N/A c. N/A 9. Wall types a. Concrete, Int Insul, Exterior b. Frame, Wood, Adjacent c. N/A d. N/A e. N/A 10. Ceiling types a. Under Attic b. N/A c. N/A 11. Ducts a. Sup: Unc. Ret: Unc. AH: Attic b. N/A	R=5.0, 2149.5 ft <sup>2</sup> R=11.0, 188.0 ft <sup>2</sup> R=30.0, 2639.5 ft <sup>2</sup> Sup. R=6.0, 80.0 ft	14. - 14. - 15.	Hot water systems Electric Resistance  N/A  Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump) HVAC credits (CP-Celling fan, CV-Cross ventilation. HF-Whole house fan, PT-Programmable Thermostut, RB-Autic rediant barrier, MZ-C-Multizone cooling. MZ-H-Multizone heating)	Cap: 40.0 gallons
I certify that this home has complied we Construction through the above energy in this home before final inspection. O based on installed Code compliant feat Builder Signature:  Address of New Home:  *NOTE: The home's estimated energy This is not a Building Energy Rating.	y saving teatures which therwise, a new EPL I tures.  y performance score is	Date: City/FL conty ava	Zip:	

your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating. Contact the Energy Gauge Holline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Efficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.

EnergyGauge® (Version: FLRCSB v3.21)

PHONE NO. : 5613351968

EROM : CUSTOM AIR SYSTEMS INC

### BC Architects, Inc.

April 9, 2002

Sewalls Point Building Department Sewalls Point, FL

RE: Flaugh Residence

Dear Building Official:

In response to the inspection comments for revisions to the drawings the following address the issues:

- 1. Masonry screws maybe used to fasten trusses to the cast in place concrete tie beam. A 250 lb value maybe applied to each 3/16" dia screw with a 1 1/2" min embedment and a minimum 16 gage steel strap. The number of screws multiplied by 250; not to exceed the manufactures maximum load per strap shall be used as the required amount.
- 2. A poured in place 2<sup>nd</sup> floor concrete tie beam (elev. 19'-10 1/2") 8" x 14" deep with 4 #5 bars cont. shall be used to span 8'-6" from the master bathroom to the master W.I.C. without the masonry column in between.

Sincerely,

Brian Carnes, NCARB

5573 # 6 INDIALUCIC FLAUGH

# ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

#### ESTIMATED ENERGY PERFORMANCE SCORE\* = 83.8

The higher the score, the more efficient the home.

			,,,,	•	•
8. a a b c c d d c c c d d c c c c d d c c c c	New construction or existing Single family or multi-family Number of units, if multi-family Number of Bedrooms Is this a worst case? Conditioned floor area (ft*) Glass area & type Clear - single pame Clear - double pame Tim/other SHGC - single pame Tim/other SHGC - double pame Floor types Slab-On-Grade Edge Insulation N/A Wall types Concrete, Int Insul, Exterior Frame, Wood, Adjacent N/A N/A N/A N/A N/A N/A N/A N/A N/A N/A	New Single family  1  4  No 2640 ft <sup>2</sup> 430.1 ft <sup>2</sup> 0.0 ft <sup>2</sup> 0.0 ft <sup>2</sup> R=0.0, 284.8(p) ft  R=5.0, 2149.5 ft <sup>2</sup> R=11.0, 188.0 ft <sup>2</sup> R=30.0, 2639.5 ft <sup>2</sup> Sup. R=6.0, 80.0 ft		2. Cooling systems: a. Central Unit b. N/A c. N/A  3. Heating systems: a. Electric Strip b. N/A c. N/A  4. Hot water systems: a. Electric Resistance b. N/A c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump) 15. HVAC credits (CF-Celling fan, CV-Cross ventilation. HF-Whole house fan, PT-Programmable Thermostat, RB-Attic radiant barrier, MZ-C-Multizone cooling, MZ-H-Multizone heating)	Cap: 59.0 kBtu/hr  SPER: 12.50  Cap: 59.0 kBtu/hr  COP: 1.00  Cap: 40.0 galions  EF: 0.88  CF,
in ba Bu	certify that this home has complied with construction through the above energy so this home before final inspection. Other sed on installed Code compliant feature uilder Signature:	wing features which wise, a new EPL I	n will be Display ( Date: City/Fl	Card will be completed  L Zip:	THE STATE OF THE S
	ddress of New Home:		City/Fl		der program.

\*NOTE: The home's estimated energy performance score is only available through the FLA/RES computer program.

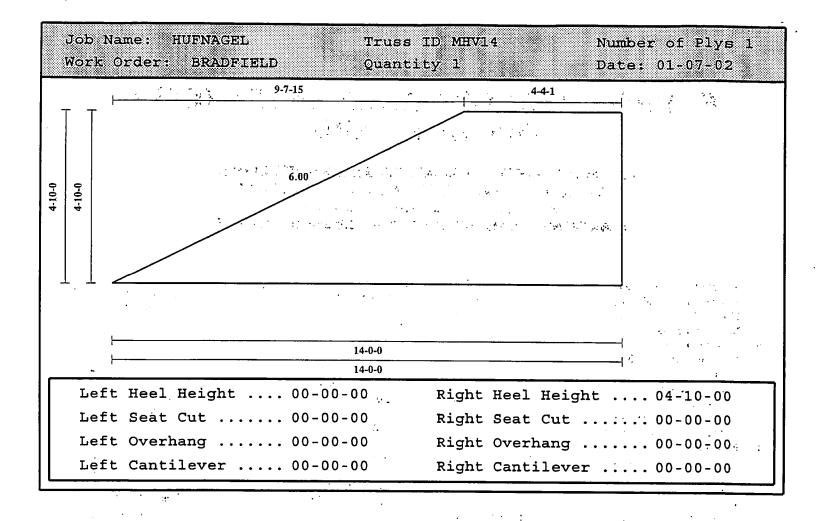
This is not a Butlding Energy Rating. If your score is 80 or greater (or 86 for a US EPA/DOE EnergyStar<sup>IM</sup> designation), your home may qualify for energy efficiency mortgage (EEM) incentives if you obtain a Florida Energy Gauge Rating.

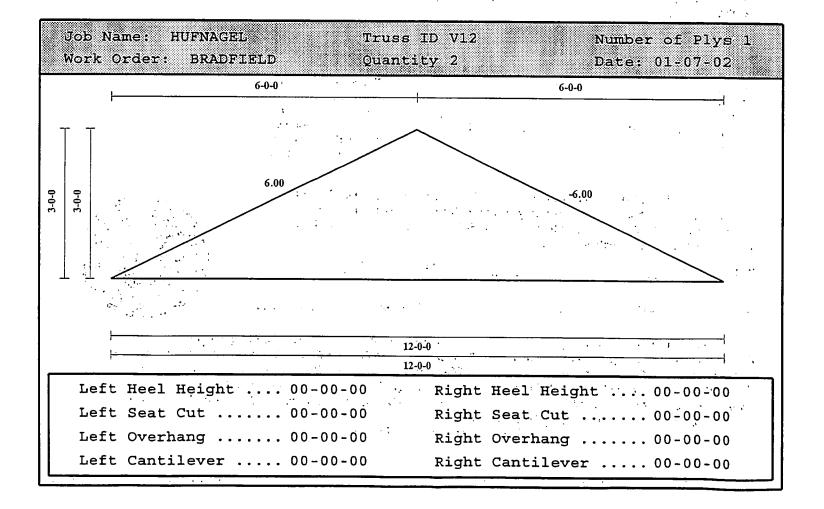
Contact the Energy Gauge Hotline at 321/638-1492 or see the Energy Gauge web site at www.fsec.ucf.edu for information and a list of certified Raters. For information about Florida's Energy Ifficiency Code For Building Construction, contact the Department of Community Affairs at 850/487-1824.

EnergyGauge® (Version: FLRCSB v3.21)

99 M98:10 2002 11 .74A

PHONE NO. : 5613351968





### **Code Compliance Checklist**

### Residential Whole Building Performance Method A - Details

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	nemate 4.
ADDRESS: , ,	PERMIT#:
I ADURESS. , , ,	
	والمنظم والمناف والمنا

#### 6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

COMPONENTS	SECTION	REQUIREMENTS FOR EACH PRACTICE	CHECK
Exterior Windows & Doors	606.1.ABC.1.1	Maximum: 3 cfm/sq.ft. window area; .6 cfm/sq.ft. door area,	
Exterior & Adjacent Walls	606.1.ABC.1.2.1	Caulk, gasket, weatherstrip or seal between: windows/doors & frames, surrounding wall; foundation & wall sole or sill plate; joints between exterior wall panels at comers; utility penetrations; between wall panels & top/bottom plates; between walls and floor.  EXCEPTION: Frame walls where a continuous infiltration barrier is installed that extends from, and is sealed to, the foundation to the top plate.	
Floors	606.1.ABC.1.2.2	Penetrations/openings >1/8" sealed unless backed by truss or joint members.  EXCEPTION: Frame floors where a continuous infiltration barrier is installed that is sealed to the perimeter, penetrations and seams.	
Cettings	608.1.ABC.1.2.3	Between walls & cellings; penetrations of celling plane of top floor; eround shafts, chases, soffits, chimneys, cabinets sealed to continuous air barrier; gaps in gyp board & top plate; attic access. EXCEPTION: Frame cellings where a continuous infiltration barrier is installed that is sealed at the perimeter, at penetrations and seams.	
Recessed Lighting Fedures	606.1.ABC.1.2.4	Type IC rated with no penetrations, sealed; or Type IC or non-IC rated, installed inside a sealed box with 1/2" clearance & 3" from insulation; or Type IC rated with < 2.0 ofm from conditioned space, tested.	
Multi-story Houses	606.1.ABC.1.2.5	Air barrier on perimeter of floor cavity between floors.	
Additional Infiltration regts	608.1.ABC.1.3	Exhaust fans vented to outdoors, dampers; combustion space heaters comply with NFPA, have combustion sir.	

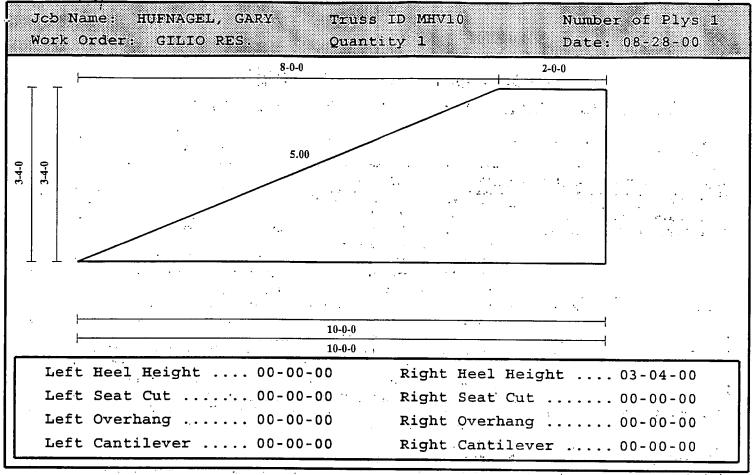
6A-22 OTHER PRESCRIPTIVE MEASURES (must be met or exceeded by all residences.)

COMPONENTS	SECTION	REQUIREMENTS	CHECH
Water Heaters	612.1	Comply with efficiency requirements in Table 6-12. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sested, insulated, and installed in accordance with the criteria of Section 610.  Ducts in unconditioned attics: R-6 min. Insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1,602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides.  Common ceiling & floors R-11.	

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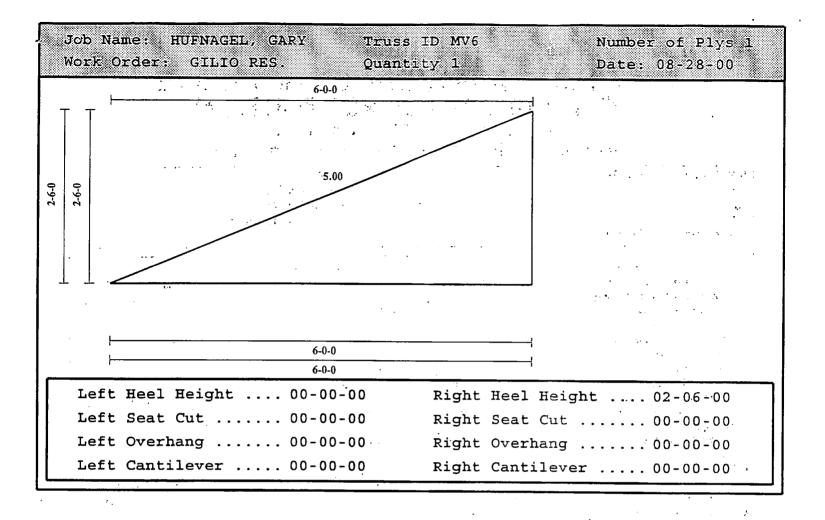
	me: HUFNAGEL, GARY rder: GILIO RES.	Truss ID MV8	Number of Plys 1 Date: 08-28-00
3.4-0	5.		
-  -	8-0- 8-0-	<u> </u>	
Left Left	Heel Height 00-00         Seat Cut 00-00         Overhang 00-00         Cantilever 00-00	0-00 Right 0-00 Right	Heel Height 03-04-00 Seat Cut 00-00-00 Overhang 00-00-00 Cantilever 00-00-00

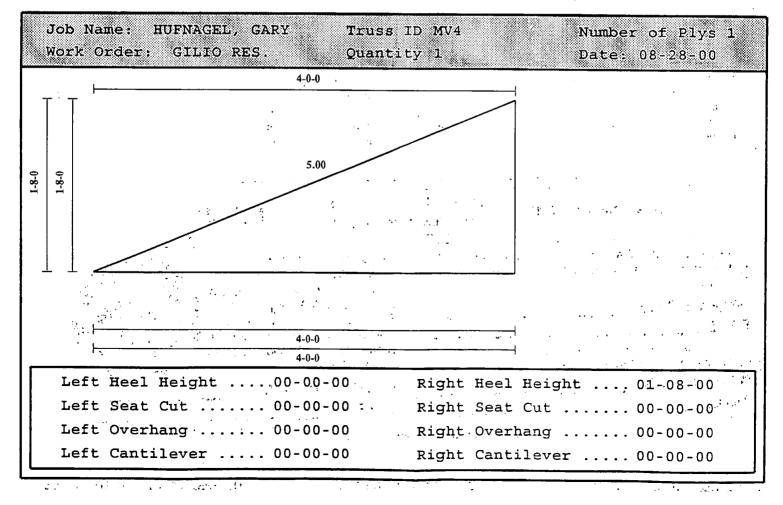
# FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name; Address: City, State: Owner: Climate Zone:	FLAUGH , South		Builder: Permitting Office: Permit Number: Jurisdiction Number:	
1. New construction 2. Single family or 3. Number of units, 4. Number of Bedro 5. Is this a worst car 6. Conditioned floor 7. Glass area & type a. Clear - single par b. Clear - doubte pa c. Tint/other SHGC d. Tint/other SHGC 8. Floor types a. Slab-On-Grade E. b. N/A c. N/A 9. Wall types a. Concrete, Int Insub. Frume, Wood, Ad c. N/A d. N/A e. N/A 10. Ceiling types a. Under Attic b. N/A c. N/A 11. Ducts a. Sup: Unc. Ret: Un b. N/A	multi-family  if multi-family  coms  sc?  r area (lt²)  c  ne  - single pane  - double pane  dge insulation  al, Exterior  jacent	New	12. Cooling systems a. Central Unit b. N/A c. N/A  13. Heating systems a. Electric Strip b. N/A c. N/A  14. Hot water systems a. Electric Resistance b. N/A  c. Conservation redits (HR-Heat recovery, Solar DHP-Dedicated heat pump)  15. HVAC credits (CF-Ceiling fan, CV-Cross ventilation. HP-Whole house fan. PT-Programmable Thermostal, MZ-C-Multizone cooling, MZ-H-Multizone heating)	Cap: 59.0 kBtu/hr
Glas	s/Floor Area: 0.16	Total as-built p	points: 41370 points: 42254  PASS	
by this calculation Energy Code.  PREPARED BY DATE: I hereby certify the compliance with the OWNER/AGEN	t the plans and speare in compliance was the compli	esigned, is in ode.	Review of the plans and specifications covered by this calculation indicates compliance with the Florida Energy Code. Before construction is completed this building will be inspected for compliance with Section 553.908 Florida Statutes.  BUILDING OFFICIAL: DATE:	ST WELLS

EnergyGauge® (Version: FLRCSB v3.21)





### WINTER CALCULATIONS

### Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
I amount of the second of the	

	BASE		AS-BUILT								
INFILTRATION	I Area X BWPI	M = Points	Area X	WPM = Points							
	2640.0 -0.0	8 -158.4	2640.0	-0.06 -158.4							
Winter Base	Points:	2239.4	Winter As-Built Points: 3751.4								
Total Winter Points	X System = Multiplier	Heating Points		Credit = Heating Jultiplier Points							
2239.4	0.6274	1405.0	The state of the s	1.000 5343.9 .000 5343.9							

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FROM : CUSTOM AIR SYSTEMS INC PHONE NO. : 5613351968 Apr. 11 2002 01:42PM P12

#### WINTER CALCULATIONS

### Residential Whole Building Performance Method A - Details

ADDRESS: ,,, PERMIT #:

BASE				AS-BUILT								
GLASS TYPES .18 X Conditi Floor A	oned X B	WPM =	Points	Type/SC	Ove Omt	rhang Len		Area X	WP	мх	woi	= Points
.18 264	0.0	2.38	1121.5	Single, Clear	W	2.0	5.0	12.0	4.4	7	1.00	53.7
				Single, Clear	W	2.0	5.0	8.0	4.4	7	1.00	35.8
				Single, Clear	E	2.0	6.0	38.3	3.7	6	1.03	140,3
				Single, Clear	W	2.0	5.0	35 <i>.</i> 3	4.4	7	1.00	158.1
				Single, Clear	N	2.0	6,2	23.0	4.9	1	0.99	111.7
				Single, Clear	s	2.0	6.1	76.5	3.5	5	1.05	284.3
				Single, Clear	N	2.0	4.5	7.6	4.9	1	88.0	36.7
				Single, Clear	W	2.0	6.0	15.0	4,4	7	1.00	67.0
				Single, Clear	N	2.0	6.0	43.3	4.9	1	0.99	210.1
				Single, Clear	S	2.0	8.0	54.3	3.5	5	1.02	196.2
				Single, Clear	N	2.0	8.0	106.8	4.9	1	0.99	520.4
				Single, Clear	8	2.0	4.0	12.0	3,5	5	1.13	48.1
				As-Built Total:				430.1				1862.6
WALL TYPES	Area X	BWPM	= Points	Туре		R-\	Value	Area	X	WPN	] =	Points
Adjacent	188.0	0.50	94.0	Concrete, Int Insul, Exterior			5.0	2149.5		0.90		1934.5
Exterior	2149.5	0.60	1289.7	Frame, Wood, Adjacent			11.0	188.0		0.50		94.0
Sase Total:	2337.5		1383.7	As-Built Total:				2337.5				2028.5
DOOR TYPES	Area X	BWPM	= Points	Туре				Area	Х	WPM	=	Points
Adjacent	0.0	0.00	0.0	Exterior Wood				126.0		2.80		352.8
Exterior	126.0	1.80	226.8									552.5
Sase Total:	128.0		226,8	As-Built Total:				126.0				352.8
CEILING TYPE	S Area X	BWPM	= Points	Туре	R-	Value	Ar	ea X W	PM >	( WC	M =	Points
Under Attic	2639.5	0.10	264.0	Under Attic		<del></del>	30.0	2639.5	0.10 X	1.00		264.0
Base Total:	2639.5		264.0	As-Built Total:				2639.5				264.6
FLOOR TYPES	Area X	BWPM	= Points	Туре		R-\	/alue	Area	X V	NPM	2	Points
Slat	284.8(p)	-2.1	-598.1	Stab-On-Grade Edge Insulatio	n		0.0	284.8(p		-2.10		-598.1
Raised	0.0	0.00	0.0		••					±.1V		- <del></del>
		2.23	<b></b>				*·.					
Base Total:			-598.1	As-Built Total:			. ;	284.8	•			-588.1
									_			~000.1

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Apr. 11 2002 01:42PM P13

PHONE NO. : 5613321968

### **SUMMER CALCULATIONS**

### Residential Whole Building Performance Method A - Details

ADDRESS: , . , PERMIT #:

BASE	AS-BUILT								
INFILTRATION Area X 8	SPM = Points				Area	X SPM	= Points		
2640.0	18.79 49605.6				2640.0	18.79	49605.6		
Summer Base Points:	73542.2	Summer A	s-Buill	Points:			75884.9		
Total Summer X System Points Multiplie	= Coaling Points	Total ) Component	Cap Ratio		System X Multiplier J)	Credit Multiplier	= Cooling Points		
73542.2 0.4266	31373.1	75884.9 <b>75884.9</b>	1.000 <b>1.00</b>	(1.073 x f.165 x 1 1.350	.08) 0.273 <b>0.273</b>	0.950 <b>0.950</b>	26550.5 <b>26550.5</b>		

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FROM : CUSTOM AIR SYSTEMS INC PHONE NO. : 5613351968 Apr. 11 2002 01:43PM P14

#### **SUMMER CALCULATIONS**

### Residential Whole Building Performance Method A - Details

ADDRESS: ,,,	PERMIT #:
	· · · · · · · · · · · · · · · · · · ·

Single, Clear	BASE	AS-BUILT								
Single, Clear	.18 X Conditioned X BSPM = Points	Type/SC	_	-		Area X	SPI	мх	SOF	= Points
Single, Clear	.18 2840.0 32.50 16444.0	Single, Clear	W	2.0	5.0	12.0	65.	53	0.81	839.5
Single, Clear   W   2.0   5.0   35.3   65.63   0.81   1881.2		·	W							
Single, Clear   N   2.0   6.2   23.0   33.94   0.91   709.8		1 -								
Single, Clear   S   2.0   6.1   76.5   62.19   0.80   37962   31964, Clear   N   2.0   4.5   7.6   33.94   0.86   221.8   31866, Clear   N   2.0   6.0   15.0   65.53   0.86   846.8   31866, Clear   N   2.0   8.0   43.3   33.94   0.90   1329.7   31866, Clear   S   2.0   8.0   43.3   33.94   0.90   1329.7   31866, Clear   S   2.0   8.0   43.3   33.94   0.90   1329.7   31866, Clear   S   2.0   8.0   43.3   33.94   0.90   1329.7   31866, Clear   S   2.0   8.0   106.8   33.94   0.90   3292.7   31866, Clear   S   2.0   8.0   106.8   33.94   0.90   3292.7   3292.1   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   62.19   0.67   5023   31866, Clear   S   2.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   12.0   4.0   1.0   188.0   1.0   1.0   188.0   1.0   1.0   188.0   1.0   1.0   188.0   1.0   1.0   188.0   1.0   1.0   188.0   1.0								-	*	
Single, Clear   N   2.0   4.5   7.6   33.94   0.86   221.8		4 · ·						-		
Single, Clear W 2,0 6,0 15,0 65,53 0,86 846.8 Single, Clear N 2,0 8,0 43,3 30,94 0,30 1322,7 Single, Clear S 2,0 8,0 106,6 33,94 0,30 1322,7 Single, Clear S 2,0 8,0 106,6 33,94 0,94 3408.8 Single, Clear S 2,0 4,0 12,0 62,19 0,67 502,3 As-Bullt Total: 450,1 189,0,67 502,3  As-Bullt Total: 450,1 18992,5  WALL TYPES Area X BSPM = Points Type R-Value Area X SPM = Points  Adjacent 189,0 1,00 180,0 Concrete, Int Insul, Exterior 5,0 2149,5 2,00 4299,0 Exterior 2149,5 2,70 5803,6 Frame, Wood, Adjacent 11,0 188,0 1,00 188,0  Base Total: 2337,5 5991,6 As-Built Total: 2337,5 4467,0  DOOR TYPES Area X BSPM = Points Type Area X SPM = Points  Adjacent 0,0 0,00 0,0 Exterior Wood 126,0 9,40 1184,4  Base Total: 126,0 806,4 As-Built Total: 126,0 9,40 1184,4  CEILING TYPES Area X BSPM = Points Type R-Value Area X SPM X SCM = Points  Under Attic 2639,5 2,80 7390,6 Under Attic 30,0 2639,5 2,77 X 1,00 7311,4  Base Total: 2639,5 7390,6 As-Built Total: 2639,5 7731,4  FLOOR TYPES Area X BSPM = Points Type R-Value Area X SPM = Points  FLOOR TYPES Area X BSPM = Points Type R-Value Area X SPM = Points  Stab 284,8(p) -20,0 -5696,0 Stab-On-Grade Edge Insulation 0,0 284,8(p -20,00 -5696,0 Raised 0,0 0,0 0,0 0,0 0,0 0,0 0,0 0,0 0,0 0,								-		
Single, Clear S 2.0 8.0 43.3 33.94 0.90 1329.7 556, Clear S 2.0 8.0 54.3 62.19 0.87 2952.1 56, Clear S 2.0 8.0 54.3 62.19 0.87 2952.1 56, Clear S 2.0 8.0 106.6 33.94 0.94 3408.8 Single, Clear S 2.0 4.0 12.0 62.19 0.67 502.3 As-Built Total: 430.1 18992.5 As-Built Total: 430.1 18992.5 Exterior 2149.5 2.70 5803.6 Frame, Wood, Adjacent 11.0 188.0 1.00 188.0 Exterior 2149.5 2.70 5803.6 Frame, Wood, Adjacent 11.0 188.0 1.00 188.0 1										
Single, Clear   S   2.0   8.0   54.3   62.19   0.87   2952.1   Single, Clear   N   2.0   8.0   106.8   33.94   0.94   3408.8   3609   3609   3409.8   3409		1 * '						-		
Single, Clear   N   2.0   8.0   106.8   33.94   0.94   3408.8		4 -	-							
Single, Clear   S 2.0 4.0   12.0   62.19   0.87   502.3     As-Built Total:   430.1   18992.5     WALL TYPES   Area   X   BSPM   = Points   Type   R-Vallue   Area   X   SPM   = Points     Adjacent   189.0   1.00   189.0   Concrete, Int Insul, Exterior   5.0   2149.5   2.00   4299.0     Exterior   2149.6   2.70   5803.6   Frame, Wood, Adjacent   11.0   188.0   1.00   188.0     Base Total:   2337.5   5991.6   As-Built Total:   2337.5   4487.0     DOOR TYPES   Area   X   BSPM   = Points   Type   Area   X   SPM   = Points     Adjacent   0.0   0.00   0.0   Exterior Wood   126.0   9.40   1184.4     Base Total:   126.0   806.4   As-Built Total:   126.0   9.40   1184.4     CEILING TYPES   Area   X   BSPM   = Points   Type   R-Value   Area   X   SPM   SCM   = Points     Under Atic   2839.5   2.80   7390.6   As-Built Total:   2639.5   2.77   X   1.00   7311.4     Base Total:   2639.5   2.80   7390.6   As-Built Total:   2639.5   2.77   X   1.00   7311.4     FLOOR TYPES   Area   X   BSPM   = Points   Type   R-Value   Area   X   SPM   = Points     Slab   284.8(p)   -20.0   -5696.0   Stab-On-Grade Edge Insulation   0.0   284.8(p)   -20.00   -5696.0     Raised   0.0   0.00		P * '	_							
MALL TYPES   Area   X   BSPM   = Points   Type   R-Value   Area   X   SPM   = Points		1 * '	-					-		
WALL TYPES         Area X BSPM = Points         Type         R-Value         Area X SPM = Points         Points           Adjacent 188.0 2149.5 2.70 5803.6 Exterior 2149.5 2.70 5803.6 Exterior 2149.5 2.70 5803.6 Exterior 2149.5 2.70 5803.6 Frame, Wood, Adjacent 11.0 188.0 1.00 188.0 1.00 188.0         1.00 188.0 1.00 188.0 1.00 188.0 1.00 188.0 1.00 188.0 1.00 188.0         1.00 188.0 188.0 1.00 188.0 188.0 1.00 188.0 188.0 188.0 1.00 188.0 188.0 188.0 1.00 188.0		Single, Clear	S	2.0	4.0	12.0	62.	19	0.67	502.3
Adjacent 188.0 1.00 188.0 Concrete, int Insul. Exterior 5.0 2149.5 2.00 4299.0 Exterior 2149.6 2.70 5803.6 Frame, Wood, Adjacent 11.0 188.0 1.00 188.0		As-Built Total:			· · · ·	430.1				18992,5
Exterior 2149.5 2.70 5803.6 Frame, Wood, Adjacent 11.0 188.0 1.00 188.0  Base Total: 2337.5 5991.6 As-Built Total: 2337.5 4487.0  DOOR TYPES Area X BSPM = Points Type Area X SPM = Points  Adjacent 0.0 0.00 0.0 Exterior Wood 126.0 9.40 1184.4  Exterior 126.0 6.40 806.4 As-Built Total: 126.0 1184.4  CEILING TYPES Area X BSPM = Points Type R-Value Area X SPM X SCM = Points  Under Attic 2639.5 2.60 7390.6 Under Attic 30.0 2639.5 2.77 X 1.00 7311.4  Base Total: 2639.6 7390.6 As-Built Total: 2639.6 7311.4  FLOOR TYPES Area X BSPM = Points Type R-Value Area X SPM = Points  Stab 284.8(p) -20.0 -5696.0 Stab-On-Grade Edge Insulation 0.0 284.8(p -20.00 -5696.0 Reised 0.0 0.00 0.00	WALL TYPES Area X BSPM = Points	Туре		R-	Value	Area	×	SPI	A =	Points
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DOOR TYPES         Area X BSPM = Points         Type         Area X SPM = Points           Adjacent 0.0 0.00 0.0 0.00 Exterior Wood         126.0 9.40 1184.4           Exterior 126.0 6.40 806.4         4         4           Base Total: 126.0 806.4         126.0 1184.4           CEILING TYPES Area X BSPM = Points Type         R. Value Area X SPM X SCM = Points           Under Attic 2639.5 2.80 7390.6         4s-Built Total: 2639.5 2.77 X 1.00 7311.4           Base Total: 2639.5 7390.6 As-Built Total: 2639.5 7390.6         As-Built Total: 2639.5 7311.4           FLOOR TYPES Area X BSPM = Points Type         R-Value Area X SPM = Points           Slab 284.8(p) -20.0 -5696.0 Reised 0.0 0.00 0.00         Stab-On-Grade Edge Insulation 0.0 284.8(p -20.00 -5696.0	Exterior 2149.5 2.70 5803.6	Frame, Wood, Adjacent			11.0	188.0		1.00		188.0
Adjacent 0.0 0.00 0.0 Exterior Wood 126.0 9.40 1184.4  Base Total: 126.0 806.4 As-Built Total: 126.0 1184.4  CEILING TYPES Area X BSPM = Points Type R-Value Area X SPM X SCM = Points  Under Anic 2639.5 2.80 7390.6 Under Attic 30.0 2639.5 2.77 X 1.00 7311.4  Base Total: 2639.6 7390.6 As-Built Total: 2639.6 7311.4  FLOOR TYPES Area X BSPM = Points Type R-Value Area X SPM = Points  Stab 284.8(p) -20.0 -5696.0 Raised 0.0 0.00 0.00 Stab-On-Grade Edge Insulation 0.0 284.8(p -20.00 -5696.0	Base Yotal: 2337.5 5991.6	As-Built Total:				2337.5				4487.0
Exterior 126.0 6.40 806.4  Base Total: 126.0 806.4 As-Built Total: 126.0 1184.4  CEILING TYPES Area X BSPM = Points Type R-Value Area X SPM X SCM = Points  Under Attic 2639.5 2.60 7390.6 Under Attic 30.0 2639.5 2.77 X 1.00 7311.4  Base Total: 2639.6 7390.6 As-Built Total: 2639.6 7311.4  FLOOR TYPES Area X BSPM = Points Type R-Value Area X SPM = Points  Slab 284.8(p) -20.0 -5696.0 Raised 0.0 0.00 0.00 0.0	DOOR TYPES Area X BSPM = Points	Туре				Area	×	SP	A =	Points
Base Total:         126.0         806.4         As-Built Total:         126.0         1184.4           CEILING TYPES Area X BSPM = Points         Type         RValue Area X SPM X SCM = Points         Points           Under Attic         2639.5         2.60         7390.6         Under Attic         30.0         2639.5         2.77 X 1.00         7311.4           Base Total:         2639.6         7390.6         As-Built Total:         2639.5         2.77 X 1.00         7311.4           FLOOR TYPES Area X BSPM = Points         Type         R-Value Area X SPM = Points           Slab         284.8(p)         -20.0         -5696.0         Stab-On-Grade Edge Insulation         0.0         284.8(p)         -20.00         -5696.0           Reised         0.0         0.00         0.00         0.00         -5696.0		Exterior Wood				126.0		9.40		1184.4
CEILING TYPES         Area         X         BSPM         Points           Under Attic         2639.5         2.80         7390.6         Under Attic         30.0         2639.5         2.77 x 1.00         7311.4           Base Total:         2639.5         7390.6         As-Built Total:         2639.5         2639.5         7311.4           FLOOR TYPES         Area         X         BSPM         Points         Type         R-Value         Area         X         SPM         Points           Slab         284.8(p)         -20.0         -5696.0         Stab-On-Grade Edge Insulation         0.0         284.8(p)         -20.00         -5696.0           Reised         0.0         0.00         0.0         0.0         -5696.0         -5696.0		As-Built Total:				126.0				1184.4
Base Total:         2639.5         7390.6         As-Built Total:         2639.5         7311.4           FLOOR TYPES         Area X BSPM = Points         Type         R-Value         Area X SPM = Points           Slab         284.8(p)         -20.0         -5696.0         Stab-On-Grade Edge Insulation         0.0         284.8(p)         -20.00         -5696.0           Reised         0.0         0.00         0.0         0.0         -5696.0         -5696.0			F	≀-Valu	ie .		SPM	X S	CM =	
FLOOR TYPES         Area X BSPM = Points         Type         R-Value         Area X SPM = Points           Stab         284.8(p)         -20.0         -5696.0         Stab-On-Grade Edge Insulation         0.0         284.8(p)         -20.00         -5696.0           Reised         0.0         0.00         0.0         0.0         0.0         -5696.0	Under Attic 2639.5 2.80 7390.6	Under Attic			30.0	2639.5	2.77 )	K 1.00		7311.4
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ESSE FORM: -569KD   As-Ruit Total - 28A A	Base Total: -5696,0	As-Built Total:				284.8	. ·			·6696.0

EnerovGaude® DCA Form 600A-2001

EnerovGauce@/FlaRES'2001 FLRCSB v3.21

FROM : CUSTOM AIR SYSTEMS INC PHONE NO. : 5613351968 Apr. 11 2002 01:43PM P15

### **WATER HEATING & CODE COMPLIANCE STATUS**

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:	
-		

BASE					AS-BUILT								
WATER HEA Number of Bedrooms	TING	Multiplier	=	Total	Tank Volume	EF	Number of Bedrooms	x	Tank X Ratio	Multiplier	X Credit Multiplie		
4		2369.00		9476.0	40.0	0.88	4		1.00	2369.00	1.00	9476.0	
					As-Built To	otai:						9476.0	

			-	CODE	CC	MPLI	ANCE	SI	ATUS	}			
	BASE								-	<b>4S</b> -	BUILT		
Cooling Points	+	Heating Points	. +	Hot Water Points	Ξ	Total Points	Cooling Points	+	Heating Points	+	Hot Water Points	2	Total Points
31373		1405		9476		42254	26551		5344		9476		41370



EnergyGauge™ DCA Form 600A-2001

Hpr. 11 2002 01:41PM P11

EnerovGauce®/FlaRES'2001 FLRCSB v3.21

PHONE NO. : 5613321968



### RIGHT J WORKSHEET Entire House Custom Air Systems Inc.

5573 #6 INDIALUCIE FLAVG H

1815 SE. WBege Green Gr., Port St. Lucie, FL 23852 Phone: 561-3:5-3232 Fex: 561-335-1968

1 2 3	MANUAL J: 7 Name of room Length of expose Room dimension Ceilings	ed w	/19 <b>6</b> 1				32.0 ft x 13.0 heer/cool	ft	m bath 12.0 9.4 ft	30,0 f x 9.0 heat/ccol		wic 6.0 9.4 ft	14.0 f x 8.0 heat/cool		m tolle: 8.0 9.4 ft	10.0 ft x 5.0 heet/cool	h
_1	TYPE OF EXPOSURE		CST NO.	Httg (		Area (ft²)	Load (B	cig	Area (17)	Load (B	CAS	Area (11°)	Load (B Htg	Old Fru)	Area (ft²)	Load (Bt	uh) Cog
5	Gross Exposed walls and partitions	40000 T	14B 13C	4.0 1.3 0.0 0.0 0.0 0.0	2.2 1.3 0.0 0.0 0.0 0.0	301 0 0 0	and a	0000 0000 0000 0000	282 0 0 0 0	AFER AFER AFER AFER AFER AFER AFER	9000 9000 9000 9000 9000	132 0 0 0	1771 144- 147- 147- 147-	WAPE	94 0 0 0 0	2000 2000 2000 2000 2000	
6	Windows and glass doors Heating	10000	1C 9C	32.3 33.9 0.0 0.0 0.0 0.0	11:11	24 0 0 0 0 0	776 0 0 0 0	torus tare este este este este torus	29 0 0 0 0	0		0 0 0 0	0000	1107 1106 1106 1106 1106 1106	000000000000000000000000000000000000000	0000	
7	Windows and glass doors Cooling		North NEAN EAN SEAS South Horz	W W	27.0 0.0 85.0 0.0 0.0	4 0 20 0 0	94 * 4 94 * 9 94 * 9 94 * 4 94 * 4	107 0 1703 0 0	8	***** *****	494 0 866 0 0	0000	377V	0000	000		0
8	Other doors	800	10A	15.7 0.0 0.0	12.7 0.0 0.0	21 0 0	329 0 0	268 0 0	0	1 0	1 1	0	0	Ó	) o	d o	0
9.	Net exposed walls and partitions	* 0 C d 8 I			0.0	256 0 0 0		8	0000	000			0000			0000	207 0 0 0 0
10	Ceižngs	abcdef		0.9 0.0 0.0 0.0 0.0	0.0 0.0 0.0	195 0 0 0 0	0						0000			0000	0
11	Floors (Note: Foom perimeter 19 displ. for stab Roors)	abodet		22.7 0.0 0.0 0.0 0.0	0.0	( 0	٥										0
12	Infiltration	ا	8	13.3	4.1	45	589	183	50	659	202	2 0				0	0
13 14 15	Suprotei toss=6 Less external h Less transfer Duct loss Total loss = 13-	eet	ing .	12		5%	3013 0 151 3164		59	2947 0 0 147 3095	****	59	578 0 23 604	=	59	415 0 0 21 437	
16 17 18 19 20	int. gains: Subtot RSH ga Less external o Less transfer Outet gain Total RSH gain	ine ine	People Appl. 7+84 ing	<b>图</b> 42+16	300 1200	103		3700 3700 370 4070	109		2494 243 274	9 10° 3 1.00		358 36 39	109	20	264 264 0 26 290 15



### RIGHT-J WINDOW DATA

### Custom Air Systems Inc.

1615 SE, village Green dr., Port St. Lucie, FL 23952 Phone: 561-3::5-3232 Fex. 561-335-1968

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One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

#### **CORRECTION NOTICE**

ADDRESS: 6	INDIACUCIE	PKW	<u> </u>

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\_\_\_\_\_, 2001; Page <u>|</u> of \_\_\_.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5162	My SSCO.	CO. FINAL	Parloce	used poperwork
	18 S. RIVEL RD.			
3	HARRY BLUE			INSPECTOR: 1/13
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5123	PICBU.	ALL TRADES	PASSED	ELEC.
	65 S. RUBL RD.	FRAMING,	11	HUAC
4	SEAGATE BUDDES'	FALLOD MAN	VAJ. PLUM	NSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RÉSULTS	NOTES/COMMENTS:
5068.	WINER	ROUGH RUMBING	PRINTED	
2	9 PLOGELAND OR			
	LEAR NEVELOPMENT.			INSPECTOR:4
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5565	RUPP	TIE BEAM	Possal	
	19 W. HIGHPOINT			0.,
6	EMMICK			INSPECTOR: X V I
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5573		ROUGH	radod	
,	6 INDIALUCIEPKWY	PLUMBING		0
	HUFNAGEZ			INSPECTOR 10/17
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5567	WEBER	FOOTUNCO	Pailed	
_	4 MANDALAY			(deity fort (09.)
. 5	Burold			INSPECTOR ( 12
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
\$460	0/8.	ALL TLAMES +	Hossod	
7	LE SABLE CT.	FRAMMO.		1 1
	STANTON.	TRUSS BNGR.	·	INSPECTOR:

OTHER: \_

## AJF ENGINEERING & TESTING INC.

P.O. BOX 12059 LAKE PARK, FL 33403

#### IN PLACE SOIL DENSITY (NUCLEAR METHOD) ASTM D 2922

Date:

**NOVEMBER 15, 2001** 

Job #:

P01-2534

Permit #:

5573

Client:

GARY HUFNAGER

Contractor:

**GARY HUFNAGER** 

Job Location: /

6 INDIA EUCA WAY

SEWALL'S POINT, FLORIDA

Test No.	Test Sample Location	Depth	In Place Dry Density	Maximum Dry Density	%Com- pacted
	Density - Founda	tion Fill			
	:	Below Si	ah		
	:	Grade			
1	NW Corner	0-1'	103.2	105.6	97. <b>7</b> %
2		1-2'	104.0	47	98.5%
3	;	2-3'	102.8		97.3%
4	Center	0-1'	102.6		97.2%
5	,	1-2'	103.7	•	98.2%
6		2-3'	103.1	,	97.6%
7	SE Corner	0-1'	102.8	 	97.3%
8		1-2'	103.8	•	98.3%
5Ω	$\Lambda$	2-3'	102.6		97.2%

₹\$61) 845-7445 WEST PALM BEACH (561) 337-7755 MARTIN-ST. LUCIE (561) 564-0940 INDIAN RIVER (561) 845-8876 FAX

**Building Department - Inspection Log** 

Date of Inspection: 

Mon Wed Fri November 7, 2001; Page 2 of 2.

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PERMIT.	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5313.	Flage -	Mostanly.	49.930g/s	7
	6 INDIAMCIE PKWY	Allowbis g	PEEZ	INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5352	CLEMENTS	STEEL /STAIRS.	Passal	
(7)	11 W. HICHPOINT	•		
	WW. MOLTEL			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5541	MILORD.	PLUMB UNDERGO	res ag	
(8)	144 N. SEWALLS PIRD.			Α
	WHITES PLUMAMIC	BRYAN 287-6925		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5460	STANTON	INSULATION).	PASSED	·
(G)	6 SABLE.			
(4)	G/B-			INSPECTOR:
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:
			ļ	WODGOTOD.
				INSPECTOR:

**Building Department - Inspection Log** 

Date of Inspection: Mon • Wed • Fried Company (Company) Page \_\_\_\_\_ of \_\_\_

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PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5	013	Donnis	CO	Paul	
	4)	16 Ridgeland			
		FL Finest			INSPECTOR
PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/SOMMENTS:
2	427	Fóglia	Sheathing	PRESE	
3 7	(G)	los Abbie Ct.			
	رو	Poslia			INSPECTOR:
PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
2	390	Winer	1044	Failpo	
	2	19 Ridgelod			Λ
	3)	Lea Deu.	·		INSPECTOR
PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7	302	Nohail	Druemay Proposi	Pallod	late
	<b>Q</b> )	6 Ridgevien Rd.			$\cap$
	90 [	Ro- Nay-v-1			INSPECTOR:
PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
52	294.	LEHMAN	C.O. FINAL.	failure	
	(2)	6. RICKELAND DR.			
	<u>ڪ</u>	CORIFFM.			INSPECTOR:
PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5	501.	ALMAN.	Tie Boan	n. raidy	
: [	$\hat{o}$	3 SUMMOR CT.		failou	0
		ALLMAN. 0/B			INSPECTOR:
PE	ERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
55	\$13	ELANGA	LESSIMOS SUND.	Passa	
	$\overline{}$	U INDIALUCIE LN	,		`
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### **Building Department - Inspection Log**

Date of Inspection: Mon - Wed - Fri , 2001; Page \_\_\_ of \_

•	<u></u>		S. C. C.	<u> </u>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5538	MATTAMAM		DESCRIPTION OF THE PROPERTY OF	Late
	141 S. PAUELRS.			
	SIB MAGNE			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	Flowal		Phone !	
	Glydialucie Pay			^
	Hufuaga1			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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				INSPECTOR:
OTHER: .				
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One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

#### **CORRECTION NOTICE**

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DO NOT REMOVE THIS TAG

**INSPECTOR** 



One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

#### **CORRECTION NOTICE**

ADDRESS: Q INDIALUCIE PARKWAY
I have this day inspected this structure and these premises and have fou the following violations of the City, County, and/or State laws governi same.  TIE BEAM - NOT READY
Fæ 35.00
NHED TO BURY BOTTOM OF SITT SCREEN
·

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

DATE: 1/7/01

GENE

**INSPECTOR** 

DO NOT REMOVE THIS TAG

### **Building Department - Inspection Log**

Date of Inspection: 

Mon Wed 
Fri , 2001, Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

#### **CORRECTION NOTICE**

this day inspected this structure and these premises and have found llowing violations of the City, County, and/or State laws governing
BEAM - FORMED BEAMS NOT PER PLAN
 - STEEL TOUCHME FORMS IN FORMED
 CALLEMAN BEAMS.
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NEED REVISED PRAWING FROM DESIGN
ENGL.
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DO NOT REMOVE THIS TAG

DATE: 1 9 01

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**INSPECTOR** 

Building Department - Inspection Log

Date of Inspection: 

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Fri , 2007. Page 2 of

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Building Department - Inspection Log

Date of Inspection: 

Mon Wed 
Fri Description , 2001; Page

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**Building Department - Inspection Log** 

Date of Inspection: 

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Building Department - Inspection Log

Date of Inspection: Mon • Wed • Fri \_\_\_\_\_\_\_, 2001; Page 2 of 2

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### **Building Department - Inspection Log**

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One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

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### **Building Department - Inspection Log**

Date of Inspection: 

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**Building Department - Inspection Log** 

Date of Inspection: 

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	HE ROOFMAN	7198737.		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5713	HOOVER	FIG.	failou	
(A)	175 S. SEWALLS PT AD	1		
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563G	HOFFNACEL OWNER/ADDRESS/CONTR.  Francis I S. River Rd.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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562G 12 PERMIT 5585	HOFFWAGEL  OWNER/ADDRESS/CONTR.  Fruci:  IS. River Rd.  Wilbadome  OWNER/ADDRESS/CONTR.  PERPON:  4 PALAMA WAY  OMNUEWOOD	INSPECTION TYPE  INSPECTION TYPE  POOL FINAL	RESULTS	NOTES/COMMENTS:  INSPECTOR:  INSPECTOR:  INSPECTOR:
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562G (12) PERMIT 5585	HOFFWAGEL  OWNER/ADDRESS/CONTR.  Fruci:  IS. River Rd.  Wilbadome  OWNER/ADDRESS/CONTR.  PERPON:  4 PALAMA WAY  OMNUEWOOD	INSPECTION TYPE  INSPECTION TYPE  ROOL FINAL  INSPECTION TYPE	RESULTS	NOTES/COMMENTS:  INSPECTOR:  INSPECTOR:  INSPECTOR:

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**Building Department - Inspection Log** 

Date of Inspection: 

Mon Wed | Fri MARCH 27, 2001; Page / of 2.

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(3)	lacific			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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(3)	66 N Sewalls Pt. 12d.			
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PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5358	INGRAM	PARTIAL -	Assed	
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One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

CORRECTION NOTICE
address: 6 Indialucie Many.
have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing
Galine to be scounded
Droft stopping alliuk wells
the chiefe chemolog
Water lives to be pumped
Fill blocks (waterines) with mud
Nir handler to be wired
Water lives to be pumped Fill blocks (waterines) with mud  Sir handler to be wired  " need secondary drain
Plung upstairs not done
DC + El layout needed es built +load calculation
tload calculation
u are hereby notified that no work shall be concealed upon these premises I the above violations are corrected. When corrections have been made, or an inspection.

DO NOT REMOVE THIS TAG

### **Building Department - Inspection Log**

Date of Inspection: 

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	175 S. SPR			
	018		·	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5731	FERRARO	RE-INSPECT	Pass al	
(	3601 SE OCEAN BUD	ROUGH IN		
ري	GULICK	& ALLTRADES		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5612	DEGARMO	PAMICALLATH.	Pochal	
	24 W. HEAN POINT			
	DEGARMO.			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5663	HOWIT	MCGLATION	विऽऽ०त	
	11 PERRIWINKLE		Munby.	barray U
	DECOR			INSPECTOR:
OTHER: .				
, , , , L   X	·			

Building Department - Inspection Log

Date of Inspection: 

Mon Wed 
Fri 
Page | Obs. | 200% Page | of |

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5022	SMITH	ROOFING	Pessol	863-6550
(8)	133 S. RIVER RD.	DRYIN		$\bigcap$
6	MACACL			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5352	CLEMENTS	ROUGH PLUMBING	resid	× Pr Da
(6)	11 W. HIGH POINT			? air chaber
(4)	MOLTER			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5753	HORVIT	SHEATHING	Persal	·
	11 PERRIWINKLE LN	TT+Nelae	Pases	
$\bigcirc$	PACFIC			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5748	KELSO .	AWNING -	Resed	·
(7)	26 RIO VISTA	FINAL		
رك	MAJOR CANVAS			INSPECTOR: 7
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5754.	YOKUM	FORM FOR DRUGEW	in beial	Suckerd edg + 1/5
	22 RIDGELAND. DR			J ,
4)				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
S\$13	PLANOT!		PASSE)	Modos ?
(3)	6 MDIALUCIEPKY	-		
(3)	NUFWARL	,		INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
T/R	3 knowles	2)		À .
7/12	6 Columnals walk	<b>©</b>		A No!
TIA	21 N Via Lucindia	9		PECTOR:
OTHER:				
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### **Building Department - Inspection Log**

Date of Inspection: Mon • Wed • Fri

		[		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5573	MEGAVORIMAN			
(3)	6 INDIALUCIE	OLECT. N.		
(3)	HUFNAGEZ	Morabe P	Perrod	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5352	CLEMENTS	INSULATION	Ceilg.	OF.
(0)	11 W. HIGH POINT		Walls to	bo verified 1
(8)	MOLTER			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
<b>T68T</b>	Warder	Deus + Ropa Pial	Possol	
(5)	26 Simara			2
(3)	Pl Rinesh			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5770	FOWLER	SHEMHMIO		
(7)	22 MIDDLE ROAD.			·
	CARDINAL			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5026	SMITH	u PROGRESS	TI/tala	e. Persed
(G)	133 S. RWER ROAD.	RDOF.		
9	CAMPY.			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5772	WAKEFIEZO.	SMOATHING - TINTAB	Shooths	. possa
	19 SUN ARA ST	Pailed		
4		OBERT)		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5541	MYLORD	TRUSS ENGR	Assed	
	144 N. SEWALLS PT RD.			0
	MYLORD			INSPECTOR:
OTHER: .				X.)
, <del></del>	<del></del>	<del></del>	<del></del>	

### **Building Department - Inspection Log**

Date of Inspection: Mon - Wed - Fri

		<b>*</b>	<del></del>	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5541	mylora	ROUGH ELK	iciled -	-> affic lightouly
(2)	144 N. SEWALL		·	
	ALIPHISE			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
T/R	0021	T/12 Person		
$\bigcirc$	19.2 28 wish 28			
9	ofic	·		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5572.	Floogy	Orce water	Rossoal L	
	6 Indialocie			0
(0)	Hufuagei			INSPECTOR:
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:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
OTHER: .			,	

Building Department - Inspection Log

Date of Inspection: 

Mon A Wed 
Fri Mon 24 , 2001, , 2001, Page  $\perp$  of 2

PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5501	ALLMAN	FAMILY ELEC	frank	r Pailed
	3 Summon Lu	GAS, PLUMB MEC		7
(4)	DUMEN	UG ONLY V		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5541	MILORD	MECHANICAL+		mtt: Joner goor j
	144 N. SPR	FRAMING/Gas	Frug.	INSPECTOR: Prices
$\bigcirc$		ROUGH V	ن	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5754	3 JOCHEM	DRIVEWAY-	lassed	~
(3)	22 RIDGELAND	FINAL		
3	OAK HAMMOCK			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5776	PANTON	STEEL		
(0)	17 ISLAND RD.			
	J+BBOATLIFT	·		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5772	WAKEFIELD	TIN TAB	(arsed	Partial
(2)	19 SIMARA			
	PACIFIC			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5714.	ROMANO	FT6.	Pessal	
(1)	21 SIMARA ST.			
	Comano	220-4282 WA	EN?	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
SLT3	FLACEH	INCOLATION	(CES Del	
(12)	6 INMALUCIE PRIWY.			
(6)	HUFNAGEL 1	·		INSPECTOR:
OTHER:				

Building Department - Inspection Log

Date of Inspection: 

Mon 
Wed Fri 
PRIL 26 , 2001; Page \_\_\_ of \_\_

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5143	GIFFORD	TEMP.	Parleci	
(E).	85 N. SPR	ELECTRIC		
(2)	HolmES			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5734	ABESADA -TERK	TEMP. POLE	Person	FPL!
$\overline{C}$	8 MORGAN CIR (Ri	dgerien/Riov.)		lacksquare
3)	CONWAY			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5358	INGRAM	CO-FINAL	Pailed	
(C)	101 N. SPR			
رف	BUFORD			INSPECTOR.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
\$572	flough	Page, Proposi	60302	
	6 ludialucie Puy	/		
(4)	tufuagel			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
2326	Clomonts	Roof Tile in progr.	Possal	
	11 W High Pt.	7		
	NTS 2270005 (1265 PG	لعند)		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
J388	walker,	Pool Jeck	Persal	
	6 Cranes Nost			
2	Olympic Pools			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1477	Milard	Hawing	Possod	Frid. as. Hound
- · ·	h 1/2 a		-	0
	144 N Sewals Pt.	·	<u> </u>	

Building Department - Inspection Log

Date of Inspection: 

Mon Wed 
Fri 6-12, 2004; Page 1 of 2

			<del></del>			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
Thee	Bruce	TRZE	Itrisad			
	2 Cranex Nest	Roncoval		<u> </u>		
4	TCT			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
5700	D'ALESSANORU	Tie Beam	hassod			
(7)	107 ABBIL CT					
	Jusic, Budly			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
5811	Millord	Gas tauk	Possal			
	144 N. Sewall's Pt	Lenderground		Λ		
(1)	Ho Gas Corp			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
5785	Breim	Screen Encloseur	tecsal	Luncii		
(2)	105 ABBIZ CY			0		
	Propiler	,		INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
5803	5ASTON .	In Propess	Hisal	Permit pouch lost		
	27 W High POINT RO	Shoathy TI+M		Abem rapynourite		
(10)	J. A TAYLOR			INSPECTOR:		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
5573	- Flaugh	Meter Final	Pailed	1		
(3)	6 India Lucie			) ·		
9	M.C. Propone			INSPECTOR		
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:		
\$43	Foglia	Final (sol	Pessad.	Runch ?? had found		
7	105 ABBIE CT					
(6)	A+G Porls			INSPECTOR:		
OTHER:						

Building Department - Inspection Log

Date of Inspection: 

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PERMIT		OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5833	JOHN MONISM	Final A/C	tailoid	
,	1856	2 Palmetto	Replace	Passny	EI.
	(2)	owner trongo	Ridad?		INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	3525	Lowell	Tie bean	tailou	<del>4</del> 30.
	5761	7 W. High Pt Rd	6/14/02 PD f	ing Ck 7	+2164 B30 00
	7	Wm. B. Faniero			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULŢS	NOTES/COMMENTS:
	515113	Flough	Meterminal	-Accorde	FRUIP
λ,	(a)	6 India Lucie AKWy			^
Ν	<del>(</del> )				INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
l i	5483	Vitale	<del>*************************************</del>	Road	late
11		13 Knowles Rd	Final Plumb		
Ŋ	(12)	DCCOR Buth Hitchen			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5483	Vitale	Final Bldg	(trsed	Lafe
:N	(1)	13 Knowles Rd	0		
. 10		Dear Bath + Witchen			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5388	Walker	Final Pool	tossal	
!		Le Crunes Nest	•	·	
	(M)	Olympic Pouls			INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	7/2	walos	Trop rom.	Person	
		Morga Circle			6
	(14)	0/13			INSPECTOR:
	OTHER:			• · · · · · · · · · · · · · · · · · · ·	V

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Date of Inspection; 

Mon Wed | Fri 7-10-02 , 2001; Page of

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PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5853	BRADICE	First Stutters	Acced	
(2)	96 S. River Rd		·	
	Bustom Stutters		·	INSPECTOR;
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
3454	Piceu	POOL FARAL +	Pacsod	¥ 200 ¥
(V)	65 S. River Rd	Atarm	\	
	Advostage Pools			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	MADDEN	TREE	Passod	(sol. ?
(2)	160 S. River Rd	·		f82? n
		·		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5855	Weber	FINAL-FENCE	Person	
5692	4 Mandalay	Goof Dears 1 = 200		lar fouce 1 Possed
(3)	TREASURE COast			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
9573	Flank	57.21 - what	incood	18 m ??
(8)	6 India Lucie PKWY			1
	GARY HUMAgel			INSPECTOR:
PERMIT				
ļ	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5501	ALLMON	INSPECTION TYPE Meter Jusp.		
ļ			RESULTS Failed	
5501	ALLMON			
5501	ALMON 3 Summer Lone			NOTES/COMMENTS:
5501 7	ALMON 3 Summer Lone 0/B	Meter INSP.	Failed	NOTES/COMMENTS:
5501 7 PERMIT 5631	ALMON 3 Summer Fore 0/B OWNER/ADDRESS/CONTR.	Meter Jusp.  INSPECTION TYPE	Pailed RESULTS	NOTES/COMMENTS:
5501 7 PERMIT	ALMON 3 Summer Fore 0/B OWNER/ADDRESS/CONTR. HOW	Meter Tusp. INSPECTION TYPE Training	Pailed RESULTS	NOTES/COMMENTS:
5501 7 PERMIT 5631	ALMEN 3 Summer Fore 0/B OWNER/ADDRESS/CONTR. HOST 615. River Rd Windehip	Meter Tusp. INSPECTION TYPE Training	Pailed RESULTS	NOTES/COMMENTS:  INSPECTOR:  NOTES/COMMENTS:
5501 7 PERMIT 5631	ALMON 3 Summer Fore 0/B OWNER/ADDRESS/CONTR. HONT 61 S. River Rd Windship GT S. River	Meter Tusp.  INSPECTION TYPE  Transing Completin & Roof Meta	RESULTS Parled	NOTES/COMMENTS:  INSPECTOR:  INSPECTOR:  INSPECTOR:
5501 7 PERMIT 5631 6 OTHER:	ALMON 3 Summer Fore 0/B OWNER/ADDRESS/CONTR. HONT 61 S. River Rd Windship GT S. River	Meter Tusp. INSPECTION TYPE Training	Failed RESULTS Pailed Prosod	INSPECTOR:  INSPECTOR:  INSPECTOR:  INSPECTOR:  24 is a Header
5501 7 PERMIT 5631 G	ALMON 3 Summer Fore 0/B OWNER/ADDRESS/CONTR. HONT 61 S. River Rd Windship GT S. River	Meter Tusp.  INSPECTION TYPE  Transing Completin & Roof Meta	Failed RESULTS Pailed Prosod	INSPECTOR:  INSPEC

Building Department - Inspection Log Date of Inspection: 

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Wed , 2007; Page  $\frac{2}{2}$  of  $\frac{2}{2}$ 

PERMIT OWNER/ADDRESS/CONTR.		INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
5.5.13	-FLaugh	- imal	Palloar	Completion 1	
-	6 Indialucie Pkwy			$\sim$	
	HUFNagel			INSPECTOR:	
PERMIT	OWNER/ADDRESS/CONTR.	ÍNSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
5824	Butler	Pool Deck	Va sal		
(P)	85. Rinn Rd		\		
9	A+G Concrete			INSPECTOR:	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
5489	Stracuzzi	Imal	Resod.		
A	12 Rio Vista Di			<u> </u>	
$\odot$	Ruce			INSPECTOR:	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
5798	Parton	Column 4	Accral		
0	17 Island Rd	Beam Steel	Pacial		
8	Kipfe + Danm			INSPECTOR	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
5500	BushA	Final Pool		-> Frankay	
(13)	10 Palm Ct			Uq	
	Schiller			INSPECTOR:	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
			<u> </u>		
· · · · · · · · · · · · · · · · · · ·					
				INSPECTOR:	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:	
				INSPECTOR:	
OTHER:	(H) Hugo Ba	uyan Tipe !!	of 20001	po fumoa	

### STATEMENT OF INSPECTION

(To be submitted at final inspection for Certification of Occupancy)

COMPLIANCE WITH SECTION 0307.2 OF THE SOUTH FLORIDA BUILDING CODE

To:

Building Official, Town of Sewall's Point

From:

Architect or Engineer of Record

Re:

Subject Structure Described As Follows:

In accordance with the requirements of Town of Sewall's Point and the Florida Building Code, a "Statement of Inspection", executed by the Architect or Engineer who sealed and signed the plans, shall be issued and dated following completion of the work, and delivered as a condition precedent to the issuance by the Building Official of any temporary or final Certificates of Occupancy or Certificates of Completion.

Owner: MKE FLAXAT Address: # NDIA LUCITE POUD.
Project Address: SAXXE Legal Description: Lot Blk Subdivision NDIALUCIE
General Contractor: CPATY AUTNACED Lic/Cert No.CGC 028627
Address: 825 39. Lucie town Tel: 260 9618 Fax: 220, 2946
Architect or Engineer: KO ADOHITECA NO ALOZAT
Address: 900 t. Osctocas Tel: 223,0010 Fax:
Permit No: 5573 Date of Issue: 10/24/01 Date of This Statement: 7, 9,02
<ol> <li>I am the Architect or Engineer who sealed and signed the plans for the subject structure.</li> <li>To the best of my knowledge, belief and professional judgment, the structural and envelope components of the structure are in compliance with the approved plans and other approved permit documents.</li> <li>To the best of my knowledge, belief and professional judgment, the approved permit plans represent the as-build condition of the structural and envelope components of the structure.</li> </ol>
Name: Plan Point this garding day of ULY 2007.  STATE OF FLORIDA COUNTY OF Martin
Sworn to and subscribed before me this 19 day of July, 2002 by B. Cernes , who is
Personally known to me or who has produced $\frac{f/d}{f}$ as identification and who did not take an oath.
(NOTARY SEAL)  Joan H. Barrow  MY COMMISSION # CC763645 EXPIRES  November 30, 2002  BONDED THRU TROY FAIN INSURANCE, INC.  Name: Joan H. Barrow  I am an Notary Public of the State of Florida and my commission expires:

ROBERT M. WIENKE Mayor

MARC S. TEPLITZ Vice Mayor

DAWSON C. GLOVER, III Commissioner

THOMAS P. BAUSCH Commissioner

E. DANIEL MORRIS Commissioner TOWN OF SEWALL'S POINT



JOSEPH C. DORSKY Town Manager

JOAN H, BARROW Town Clerk

Chief of Police

Chap Symmon (
EDWIN B. ARNOLD

Building Official

JOSE TORRES, JR. Maintenance

### **CERTIFICATE OF OCCUPANCY**

Single Family Residence □ Other	<del></del>
OWNER: MICHAEL & JENNIFER FLAUCH ; PROPERTY ADDRESS: (0	INDIALUCIE PARKWAY
LEGAL DESCRIPTION: LOT 9 BLOCK SUBDIVISION 1	DIAL YCIE.
GENERAL CONTRACTOR: GARY HUFNAGEL INC.	; LIC/CERT NO. CGC 078627
ADDRESS: BZS S.E ST. LUCIE BLUA STUART.	; TEL 260968 FAX 220-29 4
ARCHITECT OR ENGINEER BC MEHTECTS.	
ADDRESS: 900 E OSCROLA SI.	; TEL 223 0010; FAX
PERMIT NO: 573; DATE OF ISSUE 10/24/01; RENEWAL PERMIT NO:	
In accordance with the requirements of the South Florida E and Ordinances of the Town of Sewall's Point, Florida, this hereby issued for the foregoing described property.	Building Code and the Codes S Certificate of Occupancy is
Entered at Sewall's Point, Florida, this 23 day of July	y, 200\z
am	
Edwin B. Arnold, AIA, CBO	
Building Official Town of Sewall's Point	



PREDICTABILITY + ACCOUNTABILITY = COMPLIANCE

One South Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (561) 287-2455 • Fax (561) 220-4765 • E-Mail: clerk@sewallspoint.org
Police Department (561) 781-3378 • Fax (561) 286-7669 • E-Mail: police@sewallspoint.org

# 5796 POOL

	MASTER PERMIT NO
TOWN OF SEV	WALL'S POINT
Date	BUILDING PERMIT NO. 5796
Building to be erected for FLAUGH	
Applied for by SOUTH FLORIDA CUSTON	Λ Pools (Contractor) Building Fee 240.00
Subdivision INDIALUCIE Lot 9	Block 4 Radon Fee
Address 6 INDIALUCIE PARK	Impact Fee
Type of structure SFR	A/C Fee
	Electrical Fee
Parcel Control Number:	Plumbing Fee
3537410020040009	
Amount Paid 264.00 Check # 1000	CashOther Fees ( <u>REV</u> ) <u>34.00</u>
Total Construction Cost \$ 18,000.00	TOTAL Fees <u>264.00</u>
1/1201-	
Signed Kolf Man	_ Signed <u>Mene Simmons Inlo</u>
Applicant	Town Building Official
P	ERMIT
BUILDING   ELECTR	ICAL   MECHANICAL
☐ PLUMBING ☐ ROOFIN☐ DOCK/BOAT LIFT ☐ DEMOLI	
	TION
_	ANE SHUTTERS   RENOVATION
☐ TREE REMOVAL ☐ STEMW	ALL ADDITION
INS	PECTIONS
UNDERGROUND PLUMBING	UNDERGROUND GAS
UNDERGROUND MECHANICAL	UNDERGROUND ELECTRICAL
STEMWALL FOOTING	FOOTING
SLAB ROOF SHEATHING	TIE BEAM/COLUMNS
TOUGH FURNISHED ON THE COMMENT	
BOOF TINI TACIMETAL	LATH ROOF-IN-PROGRESS
DI LIMBING POLICH IN	ELECTRICAL ROUGH-IN
MECHANICAL ROUGH-IN	0.40.0011011111
FRAMING	EARLY POWER RELEASE
FINAL PLUMBING	FINAL ELECTRICAL
FINAL MECHANICAL	FINAL GAS
FINAL ROOF	
	BUILDING FINAL

	1 <u>C</u>	<u>ord.</u> Certii	FICATE OF LIAB	ILITY INS	URANC	E OP D JY	05/14/02
	rit	tt & McKenzie, Inc. orthcreek, Ste 400		ONLY AND CO	ONFERS NO RIGHT IS CERTIFICATE DO	S A MATTER OF INFORMA'S UPON THE CERTIFICATI DES NOT AMEND, EXTEND DED BY THE POLICIES BEI	TION E OR
At]	ant	ta GA 30327	c: 404-266-7199		INSURERS AF	FORDING COVERAGE	
MSUR		: 404-206-7100 FAX	(: 404-200-7199	NSURER A: (	CNA Insuranc	a Croun	
				INSURER 8:	CAA THISULANC	HOLL	777
		Rod's Concrete S dba Sputh Blood	ervices, Inc.	INSURER C:			
		5015 Whippoorwil Palm City FL 349	1 Avenue	NSURER D:			
		Paim City if 343		INSURÉR E:			
	ERA				F 501 04 550,00 11	IBY:	G
AN M	Y RE	QUIREMENT, TERM OR CONDITION RTAIN, THE INSURANCE AFFORDE	OW HAVE BEEN ISSUED TO THE INSURED NOF ANY CONTRACT OR OTHER DOCUME D BY THE POLICIES DESCRIBED HEREIN IS NY HAVE BEEN REDUCED BY PAID CLAIMS.	NT WITH RESPECT TO	WHICH THIS CERTIF	CATE MAY BE ISSUED OR	
NSR LTR	-	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMIT	3
	GEN	ERAL LIABILITY				EACH OCCURRENCE	s 500,000
A	X	COMMERCIAL GENERAL LIABILITY	B1071878959	07/27/01	07/27/02	FRE DAMAGE (Any one fire)	\$ 50,000
		CLAIMS MADE I OCCUR				MEO EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 500,000
		L AGGREGATE LIMIT APPLIES PER:			:	GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ 1,000,000 \$ 500,000
	GEN	POLICY PPO-				PRODUCTS - COMPTOR ACC	300,000
A	AUTO	DMOBILE LIABILITY ANY AUTO	B1071953675	07/27/01	07/27/02	COMBINED SINGLE LIMIT (Ea accident)	1,000,000
		ALL OWNED AUTOS SCHEDULED AUTOS				BCOILY INJURY (Per person)	s
	X	HIRED AUTOS NON-OWNED AUTOS				BCOILY INURY (Per accident)	s
						PROPERTY DAMAGE (Per accident)	s
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	<u></u>	ANY AUTO				OTHER THAN AUTO ONLY	s
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	wo	RKERS COMPENSATION AND			İ	WC STATU OTH	
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						E L. DISEASE - EA EMPLOYEE	100,000
	071					E L. DISEASE - POUCY UMIT	500,000
	OTH	REK					
			EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PRO ION INSTALLATION SERVIC				
51	LM	AING POOL CONSTRUCT	ION INSTALLMITON SERVIC				
CE	RTIF	ICATE HOLDER N AD	DITIONAL INSURED; INSURER LETTER:	CANCELLATIO	N .		
			THET	001 SHOULD ANY OF T	HE ABOVE DESCRIBED PO	LICIES BE CANCELLED BEFORE THE	
		The Town of Sew	······································		HE ISSUING INSURER WILL		10 DAYS WRITTEN
		Attn: Gene Simm Fax 772.220.47				ED TO THE LEFT, BUT FAILURE TO DO	
		1 South Sewall'		Į.		ny kind upon the insurer, its ac	ENTS OR
1		Sewall's Point	FL 34996	REPRESENTATIVE	englished	TART	·
		<u> </u>		June 1	er NM		
AC	ORD	25-S (7/97)				© ACORD CO	DRPORATION 1988

:)

### NOTICE OF COMMENCEMEN

PLA. 1967 LAWS

State of Florida
County of Martin

This Notice of Commencement is filed in connection with Morgage filed in O.R. Book 1586, page 0687. Public Records of Martin County, Florida.

Parcel ID#: 35-37-41-002-004-00090

Loan Number: 5024119041

The undersigned hereby informs all concerned that improvements will be made to certain real property, and in accordance with Section 713.13 of the Florida Statutes, the following information is stated in this NOTICE OF COMMENCEMENT.

	L SEE ATTACHED SCH	
General description	of improvements	SINGLE FAMILY RESIDENCE AND ALL IMPROVEMENTS
Owner: MICHAE	L D. FLAUGH, JENNIFI	ER T. FLAUGH
Address: 7 SIMAR	A STREET, STUART,FI	L 34996-
Owner's interest in	site of the improvement.	PEE SIMPLE
		This instrument prepared by
		HARBOR FEDERAL SAVINGS BANK
Fee Simple Title He	older (if other than owner	?
Name	NONE	;
Address	NONE	
Contractor: GARY	HUFNAGEL INC.	Phone #: (561) 283-6722.
,		
Address: <u>825 SE S</u>	T. LUCTE BLVD. STUA	KI. KL 34976.
Surety (if any)	NONE	Amount of Band S NONE
Address	NONE	Amount of Bond S NONE
Name of any perso	n making a loan for the cr	onstruction of the above improvements:
	FEDERAL SAVINGS BA	,
	ICE BOX 249	1112
FORT PIE	RCE, FLORIDA 34954	
Name of person wi	thin the State of Florida d	esignated by owner upon whom notices or other documents may be served
HARBOR	FEDERAL SAVINGS BA	NK Telephone # 561-460-7239
	ICE BOX 249	
FORT PIE	RCE, FLORIDA 34954	•
In addition to hims	elf, owner designates the	following person to receive a copy of the Lienor's Notice as provided in
Section 713.13(1)(I	), Florida Statutes, (Fill f	n at Owner's option).
111. 1 1		O STELL B
MAN		1. Plant
Owner	`\)	Corport /
	rument was acknowledged	
Michael D. Flo	ugh and Jennifer 1	Flaugh who is nersonally known to me r who has produced sidentification.
O TO	Thomas H. Thurlow, III A MY COMMISSION & CC775526 EXP	Notary Public
	September 15, 2002 SONOED THEU TROY FAMINGUEANCE IN	
4.00	Consider the total term artifaction of	My Commission No.:

Expiration date of the notice of commencement is 1 year from the date of recording, unless otherwise specified.

### AJF ENGINEERING & TESTING INC.

P.O. BOX 530059 LAKE PARK, FL 33403

RECTION SEP 0 9 2002

IN PLACE SOIL DENSITY BY HAND CONE PENOTROMETER **AND NUCLEAR METHOD (ASTM D 2922)** 

Date:

**SEPTEMBER 9, 2002** 

Job#:

P02-2025

Permit #: Client:

SOUTH FLORIDA CUSTOM POOLS

Contractor:

SOUTH FLORIDA CUSTOM POOLS

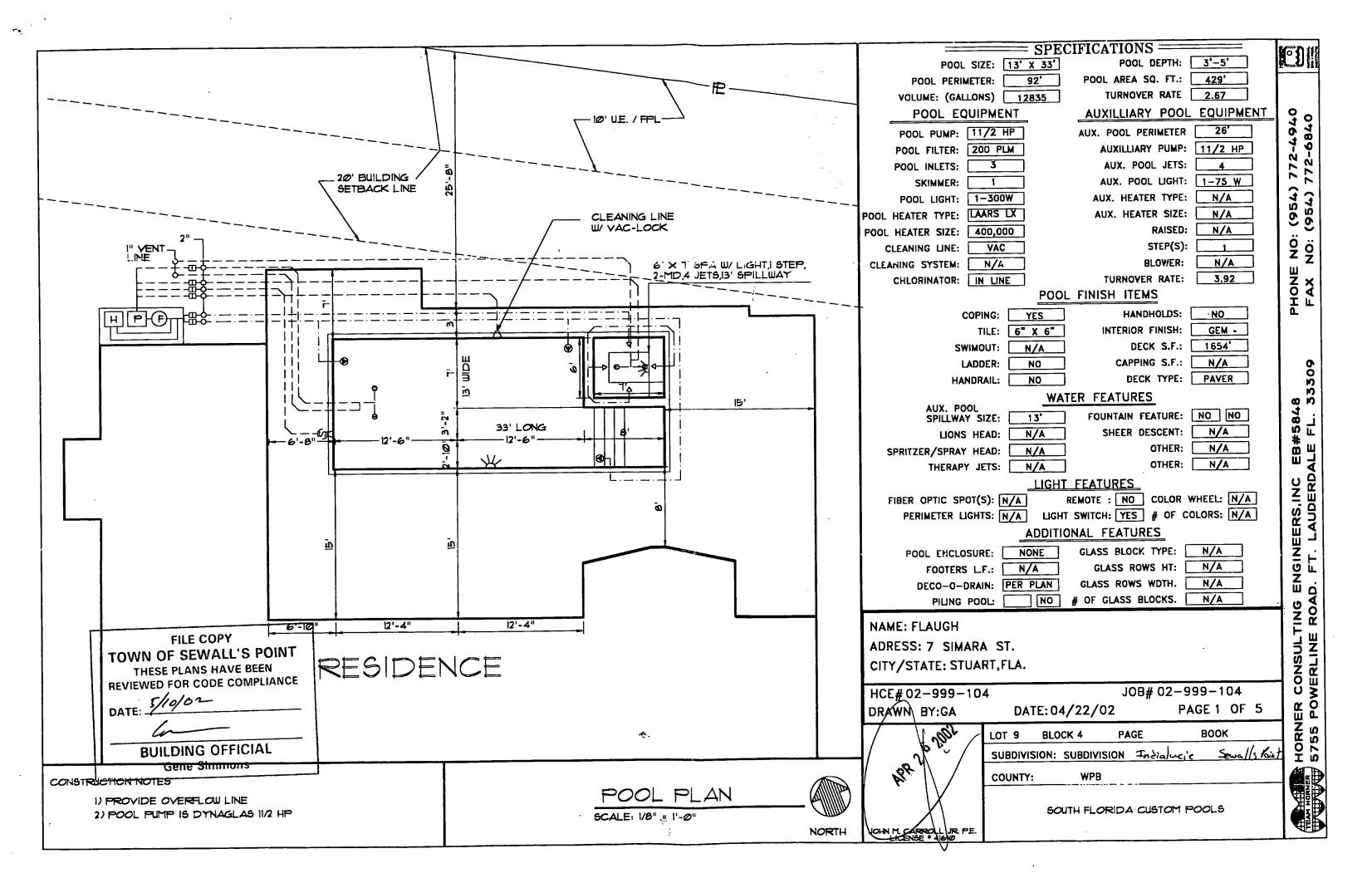
Job Location!

6 INDIALUCIE PARKWAY SEWALL'S POINT, FLORIDA ....

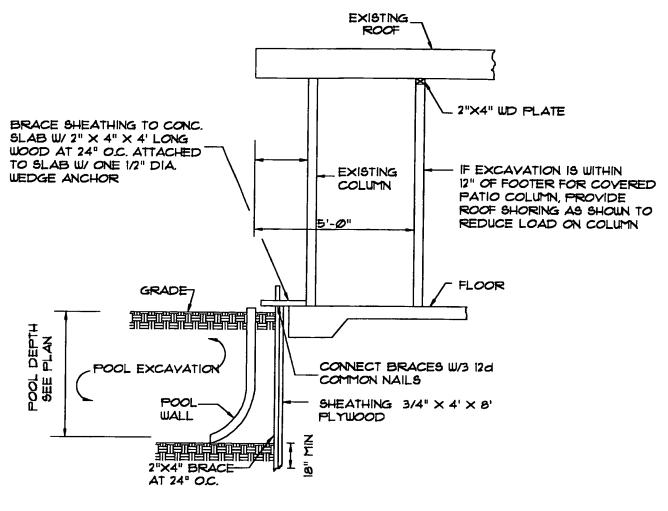
#### POOL DECK DENSITY

TEST SAMPLE LOCATION	DEPTH BELOW SLAB	IN PLACE DRY DENSITY AS'I'M D-2922	PENETROMETER READING	MAXIMUM DRY DENSITY ASTM D-1557	%
1 SOUTH SECTION	0'-1'	100.2	150	105.3	95.2
2	1'-2'		150		95.+
3	2'-3'		155		95.+
4 WEST SECTION	0'-1'	100.6	155	105.3	95.5
5	1'-2'		160		95.+
6	2'-3'		155		95.+
7 EAST SECTION	0'-1'	100.7	155	105.3	95.6
8	1'-2'		160		95.+
9	2'-3'		155		95,+

PHONE: (661) 845-7445 WEST PALM BEACH (661) 337-7755 MARTIN-ST. LUCIE (561) 564-0940 INDIAN RIVER (581) 845-8876 FAX



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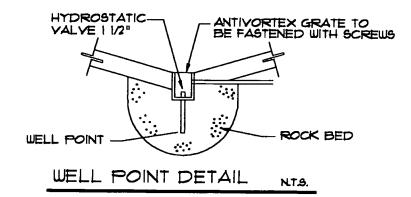
### SHEATHING AND SHORING DETAIL

NTS

IF NEEDED

#### NOTE :

- · SHEATHING WILL BE REQUIRED BETWEEN THE EXISTING SCREENED PORCH AND PROPOSED POOL. SHEATHING SHALL REMAIN UNTIL THE CONCRETE ATTAINS INITIAL STRENGTH AND THE AREA IS BACKFILLED.
- · ABOVE REQUIREMENTS ARE MINIMUM AND ACTUAL SHEETING DESIGN SHOULD BE DETERMINED IN THE FIELD IN ACCORDANCE WITH SITE CONDITIONS.
- · A TEMPORARY GUTTER IS RECOMMENDED UNTIL AREA IS BACKFILLED.
- · IF ANY UNDERMINING OF EXISTING 9LAB OCCURS PRIOR TO PLACEMENT OF SHEATHING, FLASH EMBANKMENT WITH SHOTCRETE.



#### RESIDENTIAL SWIMMING POOL SAFETY ACT COMPLIANCE

THE (OBOX OR ) II CONTRACTOR ☐ HOME OWNER AGREES TO COTTLY WITH THE FLORIDA STATUTE OF THE RESIDENTIAL SUPTING POOL SAFETY ACT SB, BY PROVIDING THE FOLLOWING (CHECK ALL THAT APPLY)

- A BARRIER WHICH ENCLOSES THE POOL AND PROVIDES ISOLATION FROM THE HOME THAT MEETS ALL OF THE ROLLOWING CONDITIONS.

  1. IS AT LEAST 48" HIGH, AND

  2. IS NOT PASSABLE OR CLIMB-ABLE BY SMALL CHILDREN, AND

  3. IS LOCATED AROUND THE PERMITTER OF THE POOL, BUT PLACED

  A SHPICIENT DISTANCE PROOF THE WATER'S EDUE TO PREVENT

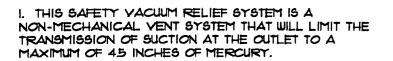
  A CHILD OR FRAIL, ELDERLY PERSON FROM FALLING INTO THE POOL IF THEY DO! GET PAST THE BARRIER, AND

  4. IS NOT SITUATED CLOSE TO PERMANENT STRUCTURES OR EQUIPMENT THAT COULD BE USED TO CLIMB OVER THE BARRIER.
- AN AFFROVED (ASTIFTS46-SI) POOL SAFETY COVER
- ☐ ALDIBLE EXIT ALARTS (MINIMUM SO DECIBELS AT MET) INSTALLED ON ALL DOORS AND UNDOUG PROVIDING DIRECT ACCESS FROM THE HOME TO THE POOL
- O SELF-CLOSING AND SELF-LATCHING DEVICES, WITH A RELEASE MECHANISM PLACED NO LOWER THAN \$4 INCHES ABOVE THE FLOOR, INSTALLED ON ALL DOORS PROVIDING DIRECT ACCESS FROM THE HOME.

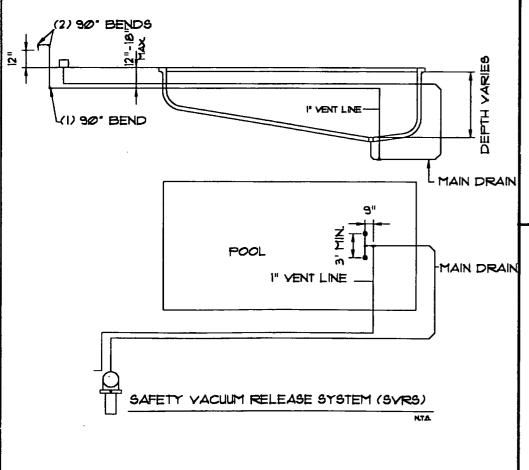
NAME: FLAUGH

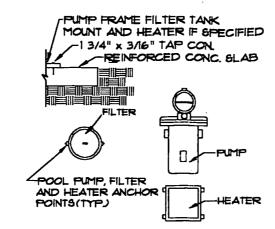
ADRESS: 7 SIMARA ST. CITY/STATE: STUART, FLA. HCE#02-999-104 JOB# 02-999-104 DRAWN BY:GA DATE: 04/22/02 PAGE 2 OF 5 LOT 9 BLOCK 4 **PAGE** BOOK SUBDIVISION: SUBDIVISION COUNTY: **WPB** 

SOUTH FLORIDA CUSTOM POOLS



- 2. THIS SYSTEM IS A BACKUP TO PROVIDE SUCTION RELIEF SHOULD ENTRAPMENT OCCUR.
- 3. POOL AND SPA SUCTION INLETS SHALL BE PROVIDED WITH A COVER THAT COMPLIES WITH ANSI/ASME Alia 198M
- 4. THE VELOCITY ON THE SUCTION SIDE OF THE CIRCULATION SYSTEM SHALL NOT EXCEED SIX (6) FPS.
- 5. CHECK YALVES CANNOT BE INSTALLED ON THE SUCTION SYSTEM.
- 6. THIS SYSTEM SHALL BE INSTALLED AND TESTED BY A QUALIFIED, LICENSED SWIMMING POOL PROFESSIONAL.
- 1. THE VENT LINE LENGTH MUST NOT EXCEED THE TOTAL LENGTH OF THE MAIN DRAIN LINE.
- 8. VENT OPENING MUST BE COVERED WITH WIRE MESH SCREEN TO PREVENT INSECTS, DEBRIS COLLECTION AND BACTERIA.
- 9. LABEL VENT: POOL SAFETY DEVICE- DO NOT HANDLE



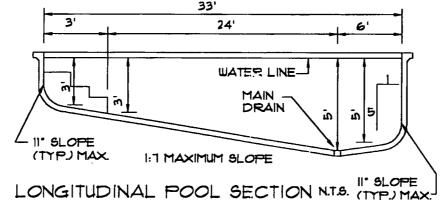


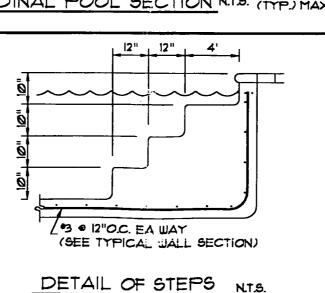
NOTES: ANCHOR BOLTS THROUGH BASE (1 3/4" x 3/16") (TAP CON) FOR POOL PUTTER 4 FILTER HEATER SHOWN AS OPTIONAL (4) 1 1/2" ANGLE BRACKETS (GAS HEATER) (4) 2 1/2" ANGLE BRACKETS (HEAT PUMP) WITH (4) 1 3/4" x 3/16" TAP CON AND (4) 1/2" SELF TAPPING SHEET METAL SCREWS.

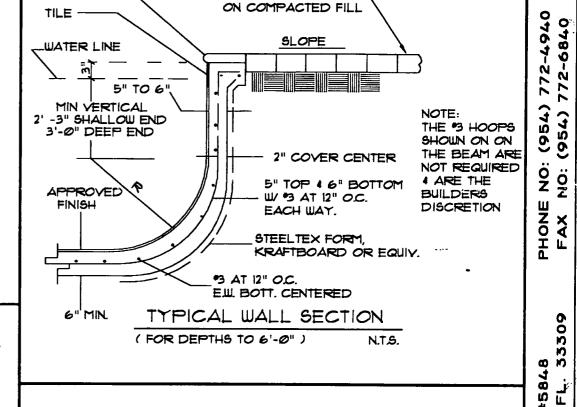
POOL EQUIPMENT ANCHORING

#### IMPORTANT NOTE:

NO DIVING BOARD AND NO DIVING IS ALLOWED ON ANY POOL LESS THAN 8'-0" DEEP AND SPECIFICALLY DESIGNED FOR DIVING. THIS POOL IS NOT DESIGNED FOR DIVING.







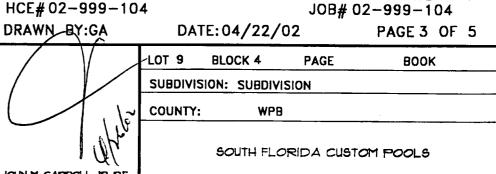
INTERLOCKING BRICK

PATIO SET IN SAND -

NAME: FLAUGH

COPING

ADRESS: 7 SIMARA ST. CITY/STATE: STUART, FLA.

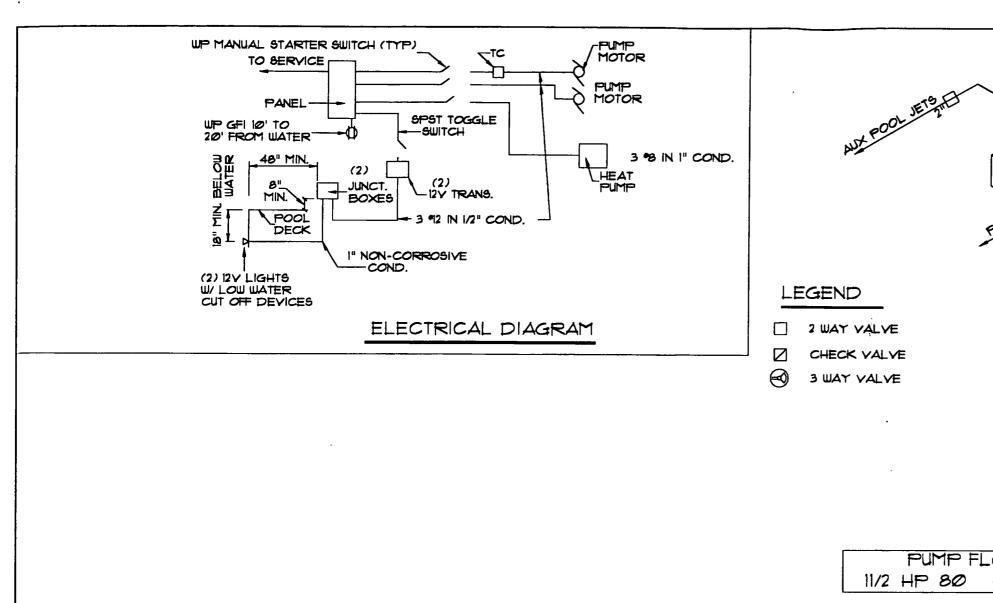


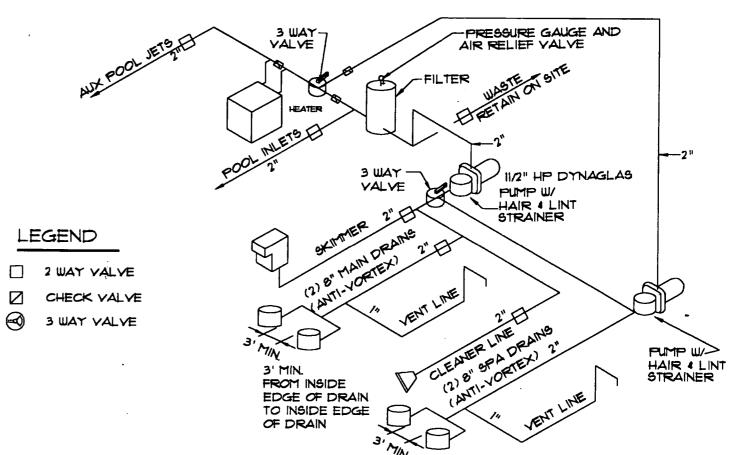
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PUMP FLOW RATE GPM @ 60' TDH.

PIPING SCHEMATIC

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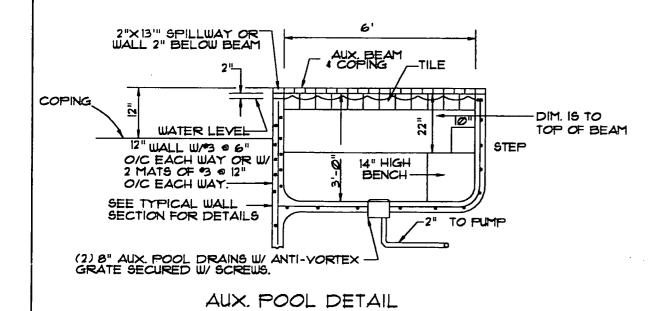
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'ING ENGINEERS,INC EI ROAD. FT. LAUDERDAL

ER CONSULTING POWERLINE ROA

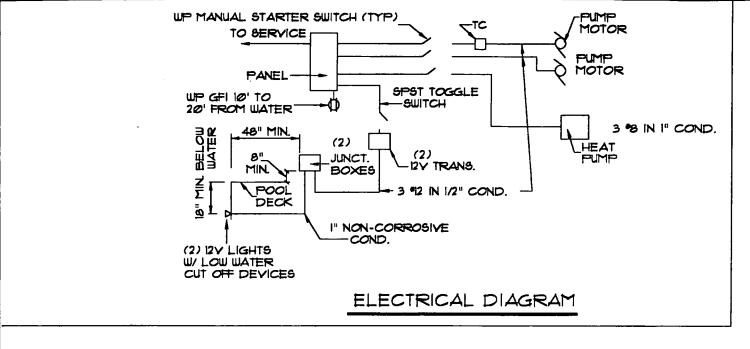
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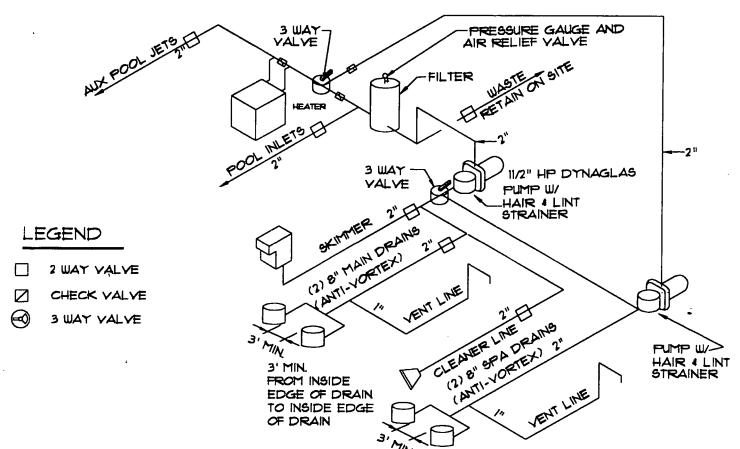
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N.T.S.

NAME: FLAUGH ADRESS: 7 SIMARA ST. CITY/STATE: STUART,FLA. HCE#02-999-104 JOB# 02-999-104 DRAWN BY:GA DATE: 04/22/02 PAGE 4 OF 5 LOT 9 BLOCK 4 PAGE BOOK SUBDIVISION: SUBDIVISION 6 COUNTY: WPB SOUTH FLORIDA CUSTOM POOLS







PIPING SCHEMATIC

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(654) (954)

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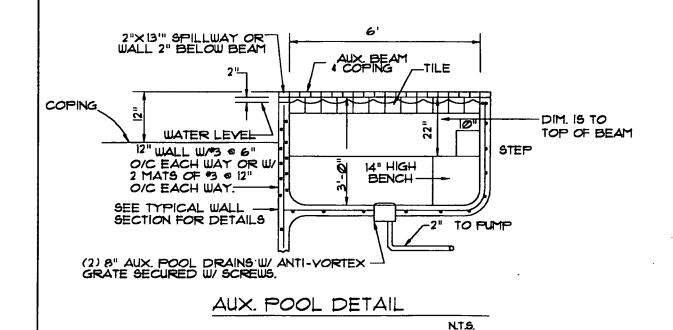
PHONE

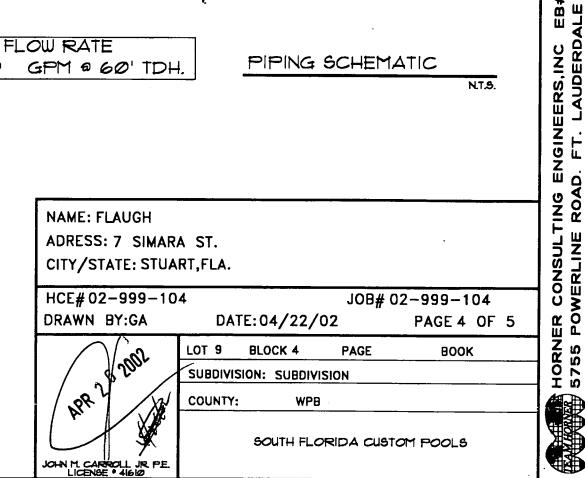
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#### GENERAL NOTES

CODE REGUIREMENTS - Private swimming pool and spas shall comply with chapter 424. Florida Building Code,

Mechanical Requirements - All piping, equipment and materials used in the plumbing system of swimming pools (Spas) that are built in place shall conform to the Florida Building Code, Plumbing. (42423). All piping materials shall be installed in strict accordance with the manufacturer's installation standards. Compliance - All materials, piping, values, equipment or appliances entering into the construction of swimming pools (Spas) or portions thereof shall be of a type complying with the code or of a type recommended and approved by a nationally recognized testing agency or conforming to other recognized standards acceptable to the administrative authority.

Engineering Design - Design, Construction and workmanship shall be in conformity with ANSI / NSPI 4, 1992 "Standard for above ground / on ground residential pools: and NSPI-5," Standard for residential swimming pools: published by the National Spa and Pool Institute, or other accepted engineering practices.

#### ENTRAPMENT

Testing and Certification: All pool and spa suction inlets shall be provided with a cover that has been tested and accepted by a recognized testing facility and comply with ANS/ASME Ali2.19.8M, "Suction Fittings for Use in Swimming Pools, Spas, Hot Tube, and Whirlpool Bathtub Appliances." Exception: Surface Skimmers.

Safety Note: Do not use or operate pool or spa if the suction inlet fitting is missing, broken, or loose.

Entrapment Avoidance: If the suction inlet system, such as an automatic cleaning system, is a vacuum cleaner system which has a single suction inlet, or multiple suction inlets which can be isolated by vaives, then each suction inlet shall protect against user entrapment by either an approved antivortex cover, 12" X 12" grate or larger, or other approved means.

In addition, all pools and spas shall be required to have a backup system which shall provide vacuum relief should grate covers be missing. Alternate vacuum relief devices shall include either:

- 1. Approved Vacuum Release System
- 2. Approved Vent Piping
- 3. Other Approved Devices or Means

Suction inlet Per Pump: A minimum of two suction inlets shall be provided for each pump in the suction inlet system, separated by a minimum of 3 feet or located on two different planes: i.e., on the bottom and one on the vertical wall, or one each on two separate vertical walls. These suction inlets shall be plumbed such that water is drawn through them simultaneously through a common line to the pump.

Cleaner Fittings: Where provided, the vacuum or pressure cleaner fitting(s) shall be located in an accessible position at least 6 inches and not greater than 12 inches below the minimum operating water level or as an attachment to the skimmer(s).

Valve - Valves shall be made of materials that are approved in the Florida Building code, Plumbing. Valves located under concrete slabs shall be set in a pit having a least dimension of five pipe diameters, minimum 10 inches, fitted with a suitable cover.

Waste Water Disposal - Direct or indirect connections cannot be made to existing facilities without the prior approval of the administrative authority.

Tests - All pool piping shall be inspected and approved before cover or concealment, it shall be tested and proved tight under a static water or air pressure test of not less than 35 psi for 15 minutes.

Water Heating Equipment - Swimming pool water heating equipment shall conform to the design, construction and installation requirements in accordance with accepted engineering practices and shall bear the label of a recognized testing agency, and shall include a consideration of combustion air, venting and gas supply requirements for water heaters. It must contain a thermostatic or high-pressure control switch so the pool water does not exceed 104 degrees F.

Gas Piping - Gas piping shall comply with the Florida Building Code, Fuel Gas.

Electrical - Electrical wiring and equipment shall comply with the National Electrical Code.

Pool Enclosure - Residential Pools shall comply with section 4242.17.1 through 4242.17.3

Ladders and Steps - All pools shall be provided with a ladder or steps in the shallow end where the water exceeds 24 inches. Where water depth exceeds 5 feet, there shall be ladders, stairs or underwater benches / swim outs in the deep end.

Filters - The entire design of matched components shall have sufficient capacity to provide a complete turnover of pool water in 12 hours or less.

Pool Fittings - Pool fittings shall be of an approved type and design as to be appropriate for the specific application.

Skimmers - Skimmers shall be installed on the basis of one per 1000 SF of surface area or fraction thereof.

Hydrostatic Relief Device - In areas of anticipated water table an approved hydrostatic relief device shall be installed. Exception is plastic liner pools.

Concrete / Steel - All floors 4 walls of pool to be pneumatically applied concrete with a min 28 day compressive strength of 2500 psi. All reinforcing steel to conform to AS.T.M. 615 grade 40.

Soil Statement - Based upon rational analysis, the soil in this area has a 1500 psf sage bearing capacity after excavation and compaction. Should any muck, mari, or other organic soils be discovered on excavation. They should be removed in their entirety. This pool requires 1500 psf bearing capacity.

Pool Staking - This design engineer assumes no responsibility for pool construction in easements or required setback areas. Plot plans not prepared from legal surveys of the existing lot and residence are so indicated. The pool contractor shall verify all dimensions in the field and establish lot lines. The pool contractor shall establish locations of all utilities at the site. Min. clearance dimensions shall be held as required by the local regulatory agency. In general, hold a distance of 10 feet from overhead electric lines to open pool water.

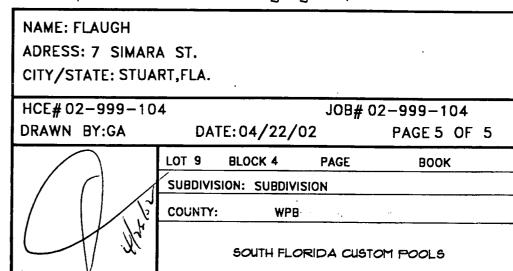
Existing Structures - The pool contractor shall always take all precautions to protect existing structures from failure by sheeting and/or shoring or other methods the design engineer accepts no responsibility for the safety of existing structures.

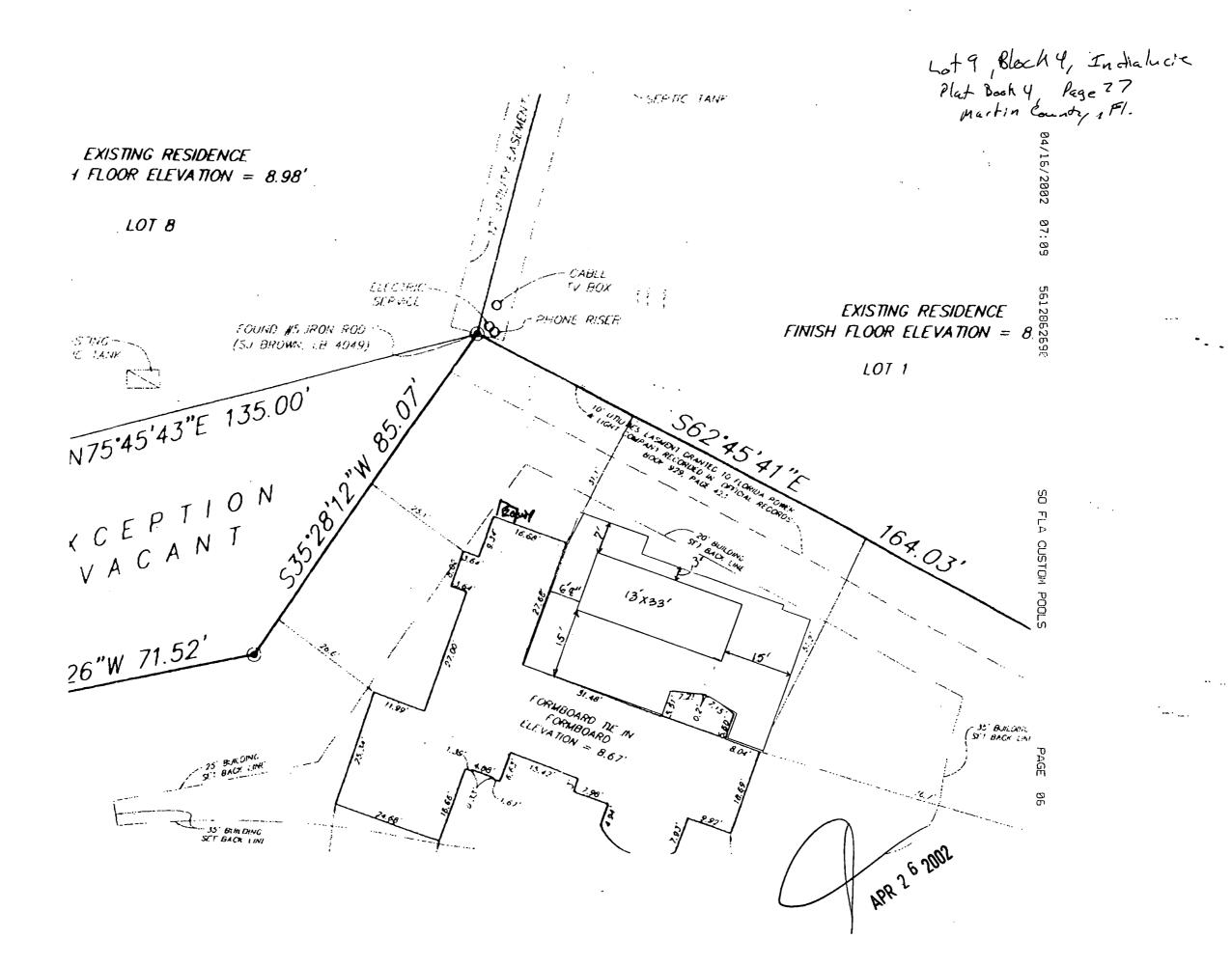
Backfill - The contractor shall backfill the pool shall with caution. The plumbing shall not be disturbed. Backfill shall be accomplished with clean sands, fee or organic material and shall be placed in 12" thick layers each layer shall be compacted to 90% of the soils maximum density. A professional engineer will develop soil placement.

Warning - To empty pool after construction, for repairs or any other reason, the hydrostatic uplift pressures beneath the pool must be eliminated to prevent the pool from floating upward. The owner must consult a pool contractor or pool repair contractor experienced in eliminating uplift pressures.

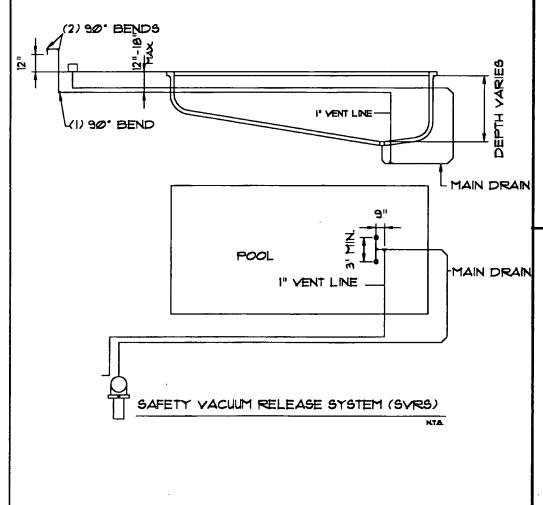
Diving - No diving board and no diving is allowed on any pool less than B'0" deep and specifically designed for diving. This pool is not designed for diving unless specifically stated on the site plan.

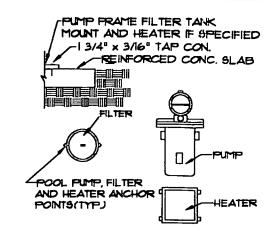
Horner Plans - This plan remains the property of Horner Consulting Engineers, Inc. It is not transferable from one contractor to another with out written permission of Horner Consulting Engineers, Inc.





- 2. THIS SYSTEM IS A BACKUP TO PROVIDE SUCTION RELIEF SHOULD ENTRAPMENT OCCUR.
- 3. POOL AND SPA SUCTION INLETS SHALL BE PROVIDED WITH A COVER THAT COMPLIES WITH ANSI/ASME A112.19.2M
- 4. THE VELOCITY ON THE SUCTION SIDE OF THE CIRCULATION SYSTEM SHALL NOT EXCEED SIX (6) FPS.
- 5. CHECK VALVES CANNOT BE INSTALLED ON THE SUCTION SYSTEM.
- 6. THIS SYSTEM SHALL BE INSTALLED AND TESTED BY A QUALIFIED, LICENSED SWIMMING POOL PROFESSIONAL.
- 1. THE VENT LINE LENGTH MUST NOT EXCEED THE TOTAL LENGTH OF THE MAIN DRAIN LINE.
- 8. VENT OPENING MUST BE COVERED WITH WIRE MESH SCREEN TO PREVENT INSECTS, DEBRIS COLLECTION AND BACTERIA.
- 9. LABEL VENT: POOL SAFETY DEVICE- DO NOT HANDLE



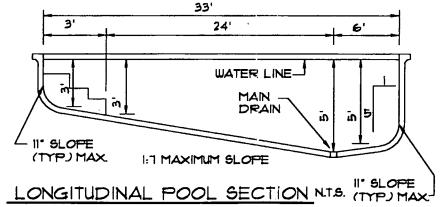


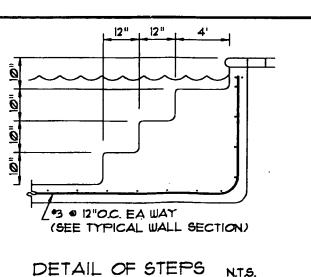
NOTES: ANCHOR BOLTS THROUGH
BASE (13/4" x 3/16")
(TAP CON) FOR POOL PUMP 4 FILTER
HEATER SHOWN AS OPTIONAL
(4) 1 1/2" ANGLE BRACKETS (GAS HEATER)
(4) 2 1/2" ANGLE BRACKETS (HEAT PUMP)
WITH (4) 1 3/4" x 3/16" TAP CON AND
(4) 1/2" SELF TAPPING SHEET METAL SCREWS.

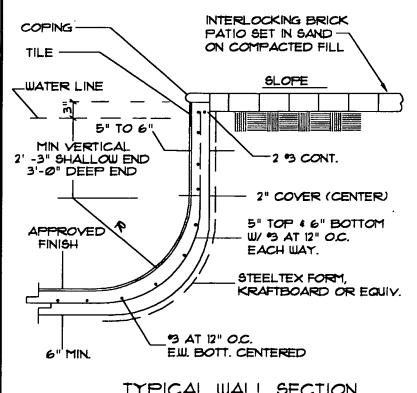
POOL EQUIPMENT ANCHORING

#### IMPORTANT NOTE:

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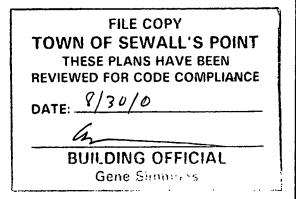






TYPICAL WALL SECTION
( FOR DEPTHS TO 6'-0")

NT.



NAME: FLAUGH

ADRESS: 7 SIMARA ST. CITY/STATE: STUART, FLA.

HCE#02-999-104

JOB# 02-999-104

DRAWN BY:GA

JOHN M. CARROLL JR LICENSE • 41610 DATE: 04/22/02

9 BLOCK 4

PAGE 3 OF 5

BOOK

AUG 3 0 2002 cou

SUBDIVISION: SUBDIVISION

WPB

COUNTY:

LOT 9

SOUTH FLORIDA CUSTOM POOLS #5794-FLAUGH.

PAGE

HORNER CONSULTING

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NC EB#

ENGINEERS,INC D. FT. LAUDERD



## TOWN OF SEWALL'S POINT PART 5796 One South Sewall's Point Pood

One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

#### **CORRECTION NOTICE**

me	ving violations of the City, County, and/or State laws g  Steel - Steel ND1 Turned e To,  OF WALL + # 3 MISSING - Pere  SECTION ON AWING	
	OF WALL + 43 MISSING - PER	<u>'</u>
	SECTION DRAWING	
	/	
	······································	
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til the a	ereby notified that no work shall be concealed upon these above violations are corrected. When corrections have be n inspection.	-
	•	

DO NOT REMOVE THIS TAG

**INSPECTOR** 

### **Building Department - Inspection Log**

Date of Inspection: 

Mon 
Wed 
Fri 
ANG 6. , 2001; Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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(S)	S.F. CUSTOM POOLS.			INSPECTOR: 4
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
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Building Department - Inspection Log

Date of Inspection: 

Mon Wed | Fri September 3, 2003;

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5714	Romano	Elect	Pacing	REQ. EARly
	21 Simone St.	Phiemb		PLS call-DON Wood WARA
	0/8	Framing	* 1	INSPECTOR: 2000 - 0439
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5714	Romano	ROOF	tried	REQ Early
	2   Semara St			Place Dow Good WARD
	0/B			INSPECTOR: 260-0239-0
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5746	PAMPA	200 L Howbs	CG-OCI_	n and an analysis of the same
•	le Indiahucie Akung			
	SF Custom Pools			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5948	Grahane	FENCE-FINAL	Parsoy	
	100 N. Sewallbithd			
	0/8			INSPECTOR;
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: .



One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

### **CORRECTION NOTICE**

ADDRESS: _	6 Indialucie Pkw.
	y inspected this structure and these premises and have found violations of the City, County, and/or State laws governing
	Pool dode
Pa	lad: hold formboard Survey
-	
until the abov	by notified that no work shall be concealed upon these premises be violations are corrected. When corrections have been made,
call for an ins	spection.
DATE:	7/6/1

DO NOT REMOVE THIS TAG

Building Department - Inspection Log

Date of Inspection: 

Mon Wed X Fri September 6, 2001; Page / of d

PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  TREE STRAIT THEE RESULTS NOTES/COMMENTS:  PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  STILL CAMANO MALLAGUE RESULTS NOTES/COMMENTS:  SIMALA:  WODDWAND INSPECTION TYPE RESULTS NOTES/COMMENTS:  STUCKLE WALL S/KMT/N/N/ SCOLI INSPECTION TYPE RESULTS NOTES/COMMENTS:  TANT ANA L.N.  YMAI DOWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  5734 Abesadatenk Moof Balling Bossed Could Select Moof Balling RESULTS NOTES/COMMENTS:  5737 Abesadatenk Moof Balling Bossed Could Select Moof Balling Results NOTES/COMMENTS:  5738 Rica Patio Food Select Moof Balling Results NOTES/COMMENTS:  5716 Rica Patio Food Select Moof Belling Results Notes/Comments:  5716 Flootom Pool S INSPECTION TYPE RESULTS NOTES/COMMENTS:  5776 Haugh Pool Seck Foled Liver Floor Surv.  6 INSPECTOR:  NOTES/COMMENTS:  NOT	<u> </u>	the second secon		<u> </u>	
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## Abesada-Terk Roof-Vailing forsed  8 Morgan Circle Tie Down + Fing. Reserved  Conway (GARAGE ONLY) INSPECTION  PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  5916 Rice Patio Fairel Good F-Boid Surv.  5 BANYAN Drive INSPECTION TYPE RESULTS NOTES/COMMENTS:  5 BANYAN Drive INSPECTION TYPE RESULTS NOTES/COMMENTS:  5796 Flaugh Pool Deck Follow Good F-Boord Survey  6 Indiabucia PKWY		MAS 1	JOHNHER 283 2096		INSPECTOR:
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5916 Rice Patio Fairel 400d F-Bord Sun.  5 BANYAN Drive A+G  PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  5796 Flaugh 6 India lucia PKWY  1001 Deck  Follow  Light 1000 F-Bord Survey;		CONWAY	(GARAGE ONLY)		INSPECTOR
5 BANYAN DRIVE  AYG  PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS:  5796 Flaugh  6 India lucia PKWY  1001 Deck  1002 F-BORD SIRVON				1	NOTES/COMMENTS:
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5796 Flaugh Pool Deck Folled head F-Board Survey		A+6			INSPECTOR:
le India bucia Pkwy	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	1	NOTES/COMMENTS:
le India bucia Pkwy	5796	Flaugh	Pool Deck	FOIL OCK	head F-Board Sirvey
SF Custom POOLS INSPECTOR:		le Indiatucia Pkwy			$\bigcap$
		SF Custom Pools			INSPECTOR
OTHER:	OTHER: _				

**Building Department - Inspection Log** 

Date of Inspection: 

Mon Wed | Fri 9-11-02 , 2002 Page | of 2 OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS PERMIT NOTES/COMMENTS: REE Lucus TREE possod Dogs on Kropert Sewallo It Koad mandalay INSPECTOR: OWNER/ADDRESS/CONTR. NOTES/COMMENTS: INSPECTION TYPE RESULTS PERMIT failar No Penul Notazaul HURRICANE CA (B) SKINNEL 15 S.E. PALMETTO DN SHUMERS 5 INSPECTOR: OWNER/ADDRESS/CONTR. INSPECTION TYPE **RESULTS** NOTES/COMMENTS: PERMIT TINAL ROOF To soul 5944 JONES 8 Emorita WAY ALL AMERICAN INSPECTOR; OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS: PERMIT -ITREE Pessal TREE LURIEA 3 S. Sewell's Pt Rd INSPECTOR: NOTES/COMMENTS: PERMIT OWNER/ADDRESS/CONTR. INSPECTION TYPE **RESULTS** Pool Deall Alm man Massell. 5146 6 India Lucia PRWY. Ne-INSPEC-2 SF Custom Pools John Board SURVEY INSPECTOR: OWNER/ADDRESS/CONTR. INSPECTION TYPE RESULTS NOTES/COMMENTS: PERMIT Tienless it rains) Thompson 59/oS Sheating + - Knday 955 Sewell's H.Rd Dry-IN + (c)METAL Rhades Roofing INSPECTÓR: NOTES/COMMENTS: PERMIT OWNER/ADDRESS/CONTR. **INSPECTION TYPE** RESULTS Swaler/P-Road Surv 5501 RUGG FIMAL UTG AUMAN 030 / Summar (N. 1) Poolsofely fance (cy to Gare) 2) Pay 1113.60 7) Health Oepl Allman, INSPECTOR: ER: 18 S. River Pavor Driveway - Permit as affice? 1 V Completed OTHER: \_ 17 Island Rd Pour Dot visible it is

~ M Riveriew / S. River Dumpster? no pomil





One South Sewall's Point Road Sewall's Point, Florida 34996 (561) 287-2455

CORRECTION NOTICE
ADDRESS: 6 Miglurie Roway
have this day inspected this structure and these premises and have found he following violations of the City, County, and/or State laws governing
same. Pool Pal
-> Paded: the 2 fence gater
mond by be self
Closing/self locking
Done OK. \$6/16/2
You are hereby notified that no work shall be concealed upon these premise until the above violations are corrected. When corrections have been made
all for an inspection.  ATE: \( \sigma \beta_s \sigma_s \)
(INSPECTOR
DO NOT REMOVE THIS TAG

### **Building Department - Inspection Log**

Date of Inspection: 

Mon Wed 
Fri 10-30-02, 2001; Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5755	Re Groff	RE-INSPECT A/C	Persed	
	9 Castle Hill	Asor Joist	Parsal	
(10)	0/6			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
57165	T. Phangh	PARCE CO PAR	Pilen I	Boil locks gales?
(3)	6 India lucie PKWY		Casas	6/15 (30)
(8)	S. FLorida Custom Posts			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	Morsh	T/R	Possal	<u> </u>
(1)	16 5 Sewalls Pr. Rd			
(4)				INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5068	Winer	FINAL-GAS	Passed	
	19 Ridgeland Ba.			
	Lear			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5993	IS. River	Drawings		Turs Drg + Eng Drg
(G)	Pranain	(nobody there)		For oich of all bldg
	Wilherdi			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5915	Kupezyk	Final-ROOF	Par ed	
(2)	9 E. High Pt. Rd			
	Pocifix			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5705	Clements	Final Gas	Para	7
(3)	11 W. H. Pt. Rd.			()
	Treasure Coast			INSPECTOR
OTHER:				

## 5813 GAS LINES

	MASTER PERMIT NO
TOV	/N OF SEWALL'S POINT
Date 5/29/02	BUILDING PERMIT NO. 5813
Building to be erected for FLAU.	Type of Permit <u>GASLINES</u> OH, Michael D Type of Permit <u>GASLINES</u> OTY Propane (Contractor) Building Fee 35.00
Applied for by MARTIN Cour	TY Propane (Contractor) Building Fee 35.00
Subdivision INOIA LUCIE	Lot 9 Block 4 Radon Fee
Address 6 INDIALUCIE	Λ \
Type of structureSRR	A/C Fee
	Electrical Fee
Parcel Control Number:	Plumbing Fee
	60 4000 903 000 Roofing Fee
	#
Total Construction Cost \$\( \frac{1000}{} \)	
iolai constitución post y	101AL Fees
	Signed Sen Summons ( Spr)
Signed /	
C Applicant	Town Building Official
	PERMIT
☐ BUILDING ☐ PLUMBING	☐ ELECTRICAL ☐ MECHANICAL
☐ PLUMBING ☐ DOCK/BOAT LIFT	
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE	☐ ELECTRICAL ☐ MECHANICAL ☐ ROOFING ☐ POOL/SPA/DECK ☐ DEMOLITION ☐ FENCE ☐ TEMPORARY STRUCTURE ☐ GAS
☐ PLUMBING ☐ DOCK/BOAT LIFT	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE □ GAS □ HURRICANE SHUTTERS □ RENOVATION
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE □ GAS □ HURRICANE SHUTTERS □ RENOVATION □ STEMWALL □ ADDITION
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE □ GAS □ HURRICANE SHUTTERS □ RENOVATION
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE □ GAS □ HURRICANE SHUTTERS □ RENOVATION □ STEMWALL □ ADDITION □ ADDITION □ INSPECTIONS □ UNDERGROUND GAS □ MECHANICAL □ POOL/SPA/DECK □ POOL/SPA/DECK □ FENCE □ RENOVATION □ ADDITION □ ADDITION □ ADDITION □ ADDITION □ INSPECTIONS □ UNDERGROUND GAS □ MECHANICAL □ POOL/SPA/DECK □ POOL/SPA/DECK □ FENCE □ RENOVATION □ ADDITION □ ADDITION □ ADDITION □ ADDITION □ INSPECTIONS □ UNDERGROUND GAS □ MECHANICAL □ POOL/SPA/DECK □ POOL/SPA/DECK □ POOL/SPA/DECK □ FENCE □ RENOVATION □ ADDITION □ ADDITION □ ADDITION □ ADDITION □ INSPECTIONS □ MECHANICAL □ POOL/SPA/DECK
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE ☒ GAS □ HURRICANE SHUTTERS □ RENOVATION □ STEMWALL □ ADDITION  INSPECTIONS □ UNDERGROUND GAS □ UNDERGROUND ELECTRICAL
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE ☒ GAS □ HURRICANE SHUTTERS □ RENOVATION □ STEMWALL □ ADDITION  INSPECTIONS □ UNDERGROUND GAS □ UNDERGROUND ELECTRICAL □ FOOTING
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB	□ ELECTRICAL □ MECHANICAL □ ROOFING □ POOL/SPA/DECK □ DEMOLITION □ FENCE □ TEMPORARY STRUCTURE ☒ GAS □ HURRICANE SHUTTERS □ RENOVATION □ STEMWALL □ ADDITION  INSPECTIONS □ UNDERGROUND GAS □ UNDERGROUND ELECTRICAL □ FOOTING □ TIE BEAM/COLUMNS
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING	ELECTRICAL   MECHANICAL   POOL/SPA/DECK   DEMOLITION   FENCE   GAS   HURRICANE SHUTTERS   RENOVATION   ADDITION   DEMOLITION   ADDITION   DEMOLITION   ADDITION   DEMOLITION   DEMOLITICA   DEMOLITION   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA   DEMOLITICA
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS	ELECTRICAL   MECHANICAL   ROOFING   POOL/SPA/DECK   DEMOLITION   FENCE   GAS   HURRICANE SHUTTERS   RENOVATION   ADDITION     STEMWALL   ADDITION   ADDITION    INSPECTIONS   UNDERGROUND GAS   UNDERGROUND ELECTRICAL   FOOTING   TIE BEAM/COLUMNS   WALL SHEATHING   LATH
PLUMBING DOCK/BOAT LIFT SCREEN ENCLOSURE FILL TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS ROOF TIN TAG/METAL	ELECTRICAL   MECHANICAL   POOL/SPA/DECK   DEMOLITION   FENCE   GAS   HURRICANE SHUTTERS   RENOVATION   ADDITION     STEMWALL   ADDITION   INSPECTIONS   UNDERGROUND GAS   UNDERGROUND ELECTRICAL   FOOTING   TIE BEAM/COLUMNS   WALL SHEATHING   LATH   ROOF-IN-PROGRESS
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS	ELECTRICAL   MECHANICAL   POOL/SPA/DECK   POOL/SPA/DECK   PENCE   FENCE   GAS   RENOVATION   ADDITION   STEMWALL   ADDITION   ADDITION   INSPECTIONS   UNDERGROUND GAS   UNDERGROUND ELECTRICAL   FOOTING   TIE BEAM/COLUMNS   WALL SHEATHING   LATH   ROOF-IN-PROGRESS   ELECTRICAL ROUGH-IN   ELECTRICAL   ROOF-IN-PROGRESS   ELECTRICAL ROUGH-IN   ELECTRICAL   ROOF-IN-PROGRESS   ELECTRICAL ROUGH-IN
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS ROOF TIN TAG/METAL PLUMBING ROUGH-IN	ELECTRICAL   MECHANICAL   ROOFING   POOL/SPA/DECK   DEMOLITION   FENCE   GAS   RENOVATION   STEMWALL   ADDITION   ADDITION      INSPECTIONS   UNDERGROUND GAS   UNDERGROUND ELECTRICAL   FOOTING   TIE BEAM/COLUMNS   WALL SHEATHING   LATH   ROOF-IN-PROGRESS   ELECTRICAL ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   CATAL   C
☐ PLUMBING ☐ DOCK/BOAT LIFT ☐ SCREEN ENCLOSURE ☐ FILL ☐ TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS ROOF TIN TAG/METAL PLUMBING ROUGH-IN MECHANICAL ROUGH-IN	ELECTRICAL   MECHANICAL   ROOFING   POOL/SPA/DECK   DEMOLITION   FENCE   GAS   HURRICANE SHUTTERS   RENOVATION   STEMWALL   ADDITION   DISPECTIONS   UNDERGROUND GAS   UNDERGROUND ELECTRICAL   FOOTING   TIE BEAM/COLUMNS   WALL SHEATHING   LATH   ROOF-IN-PROGRESS   ELECTRICAL ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   EARLY POWER RELEASE
PLUMBING DOCK/BOAT LIFT SCREEN ENCLOSURE FILL TREE REMOVAL  UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING SLAB ROOF SHEATHING TRUSS ENG/WINDOW/DOOR BUCKS ROOF TIN TAG/METAL PLUMBING ROUGH-IN MECHANICAL ROUGH-IN FRAMING	ELECTRICAL   MECHANICAL   ROOFING   POOL/SPA/DECK   DEMOLITION   FENCE   GAS   RENOVATION   STEMWALL   ADDITION   ADDITION      INSPECTIONS   UNDERGROUND GAS   UNDERGROUND ELECTRICAL   FOOTING   TIE BEAM/COLUMNS   WALL SHEATHING   LATH   ROOF-IN-PROGRESS   ELECTRICAL ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   GAS ROUGH-IN   CATAL   C

#### **Town of Sewall's Point**

BUILDING PERMIT APPLICATION	_	Building Permit Number:	
Owner or Titleholder Name: FLAUGH	City: SEWAL	L's PT State: FU	Zip:
egal Description of Property:	1Black 4 Parcel Nur	nber: 3.5374	(002004x
ocation of Job Site: 6 India lucia Pkin	_Type of Work To Be Done	PROPANE. EXCAU	nto & Burn
DOGM. Stonage tank. Interior gas live to with, 5	tout ExtER'	ongrastice to poilte	oten
CONTRACTOR/Company Name: MARTIN COUNTY PROC	)ANE	. Phone Number: 73	2-287-1900
CONTRACTOR/Company Name: Martin County Prop Street: 3586 5.W. Martin Ituy	City Pala	City State: FIA	zip34950
State Registration Number:State Certification Number:			
State Certification Number:		Martin County Election (Mariana)	
ARCHITECT	Ph	one Number	
Street:			
sireet	City	State	ZIP
ENCINEED	Dh	ana Number	
ENGINEER			
Street:	City:	State:	ZIP:
	· · · · · · · · · · · · · · · · · · ·		
AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living:			
Carport: Total Under RoofWood D			
Type Sewage:Septic Tank Permit Number	r From Health Depart	Well Permit Num	iber:
FLOOD HAZARD INFORMATION Flood Zone:	Minimum Base Flood B	Elevation (BFE):	NGVD
Proposed First Floor Habitable Floor Finished Elevation:		NGVD (Minimun	n 1 Foot Above BFE
	<i></i>		
COST AND VALUES Estimated Cost of Construction or Improvements:	<i>*1000.</i> —	Éstimated Fair Market	Value (FMV) Prior
To Improvements:If Improvement, Is Cost Greater T	han 50% Of Fair Market Va	ilue YESN	10
SUBCONTRACTOR INFORMATION			
Electrical:	State:	License Number:	
		License Number:	
Mechanical:			
Plumbing:		License Number:	
Roofing:	State:	License Number:	•
		· · · · · · · · · · · · · · · · · · ·	
I understand that a separate permit from the Town may be required	for ELECTRICAL, PLUM	BING, MECHANICAL, SIGN	S, POOLS, WELLS
FURNANCE, BOILERS, HEATERS, TANKS DOCKS, SEA WALLS, ACC REMOVAL AND RELOCATIONS.	ESSORY BUILDING, SANI	O OR FILL ADDITION OR RE	MOVAL, AND TRE
TEMOTIC TIES TEED OF THE TEMPERATURE TO THE TEMPERA	·		
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION	•	•	
	South Florida Building Code	(Structural, Mechanical, Plum	bing, Gas)
National Electrical CodeFlorida Energy CodeFlorida	orida Accessibility Code		J. ,
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED OF	N THIS APPLICATION IS T	BUE AND CORRECT TO TH	E BEST OF MY
KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CO			ING PROCESS.
OWNER OR AGENT SIGNATURE (required)	CONTRACTORS	NATURS (1)	
		<u> </u>	
State of Florida, County of:		County of: Martin	
This theday of,200	This the 33	day of may	200 <u>0</u>
bywho is personally	by Frank	Knyacs 1	_who is personally
known to me or produced	known to me or proc	duced	
as identification.	As identification.	Woris Par	adis
Notary Public		Notary P	ublic
·	My Commission Exp	Λ	
My Commission Expires:	•	Sool	
Seal	The same of the sa	ORIS PARADIS	
	M SSALAR COLL	AISSION # CC864760	<del></del>
	EXP	IRES AUG 19, 2003	
	Cl (masoa)	BONDED THROUGH DVANTAGE NOTARY	
		THE PARTY OF THE P	

ACORD.			C	<b>CERTIFICATE OF LIABIL</b>					SURANC	E ,,	OPID SB			
PRODUCER Stuart Insurance, Inc.									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					
		WM			_				ALTER THE COVERAGE AFFORDED BY THE POLICES BELOW.					
Palm City FL 34990 Phone: 561-286-4334 Fax: 561-286-9389									INSURERS AFFORDING COVERAGE					
INBURED									WSURERA Westport Insurance PROFIT					
Como Oil Company of Florida dba Martin County Petroleum &									INSURER B: Genesis Insurance Co					
Propane P.O. Box 386									INSURER C: FPLIPA					
Palm City FL 34991									WSUPER O.			<u> </u>		
COVERAGES									INSURER E:			BY:		
M	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 TYPE OF INSURANCE							POLICY NUMBER	PC	LICY EFFECTIVE	POLICY EXPERATION DATE (MM/DD/YY)		LIM		
	CEMERAL LIABILITY										EACH OCCUR	RENCE	5 1,000,000	
A	X	X COMMERCIAL GENERAL LIABILITY					WHIL000157002		01/02/02	01/02/03	FRE DAMAGE (Any one tre) \$ 50,000			
	<u> </u>	CLAIMS MADE X OCCUR				CUR					MED EXP (Any	ane person)	\$ 5,000	
	X	X incl pollution			on			1			PERSONAL 8	ADV INJURY	s 1,000,000	
	$\sqcup$							ĺ		)	GENERAL AG	CREGATE	\$ 2,000,000	
	$\vdash$		ATE LO	rit applies   PRO-	PER:						PRODUCTS -	COMP/OP AGG	s 2,000,000	
	<del>  '</del>	POLICY	<u> </u>	JECT		ယင								
A		ALL OWNED AUTOS SCHEDULED AUTOS				WHL000157002		01/02/02	01/02/03	COMBINED SIN (Ea accident)	GLE UMIT	s 1,000,000		
											(bei beizeu)	Y	s	
	$\vdash$	<del>-</del>								BODILY INJUR (Per accident)	Y	5		
	I	incl pollution								PROPERTY O. (Per accident)	AMACE	s		
	GARAGE LIABILITY										AUTO ONLY -	EA ACCIDENT	5	
	Щ	ANY AUTO	)					į			OTHER THAN	EA ACC	5	
											AU10 ONLY:	AGO	5 s	
_	EXCE	58 LIABILI	TY	<del></del>							EACH OCCUR	RENCE	\$ 3,000,000	
В	$\vdash$	OCCUR		au	UMS MAI	DE	YUB001248A		01/02/02	01/02/03	AGGREGATE		\$ 3,000,000	
	$\vdash$	DEOUC FIE						ļ .			ļ		5	
		RETENTIO		5				ŀ					S	
	<del></del>						<del>_</del>				WC STA	itu. jon	<b>S</b>	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY							İ			E L EACH AC			
												EA EMPLOYEE	s	
								1			EL DISEASE		,	
	OTHE	R								<del>                                     </del>	1			
C A	1			LIAB UIPME			FPL8084806 WHL000157001		01/01/02 01/02/02	01/01/03 01/02/03			1,000,000 20,000	
							CLUBIONS ADDED BY ENDORSEMENTS	PECAL PROVISIONS			·			
Gasoline Distributor / State of Florida														
CER	TIFIC	ATE HO	LDE	R	N	ADD	TIONAL INSURED; INSURER LETTER:		CANCELLATIO	DN .				
TOWNS-1  Town of Sewalls Point  FAX: 220-4765  1 S Sewalls Point Road								TOWNS-1	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION  DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL  NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL  IMPOSE NO OBLIGATION OR LIABILITY OF ANY HIND UPON THE INSURER, ITS AGENTS OR  REPRESENTATIVES.					
				sewal rt FL			т коаа		AUTHORIZED REPRESENTATIVE					
										rile X/a	lear	nlo	<del></del> i	
ACC	VBD 2	5-8 (7/9	31							1 7/0				



### State of Florida Department of Agriculture and Consumer Services

Division of Standards Bureau of Liquefied Petroleum Gas (850) 921-8001 Tallahassee, Florida

License Number: 05594 Expiration Date: AUGUST 31, 2002 Date of Issue: SEPTEMBER 01, 2001 License Fee: \$425.00 Type and Class: 0601

### Liquefied Petroleum Gas License

Category I LP Gas Dealer GOOD FOR ONE LOCATION

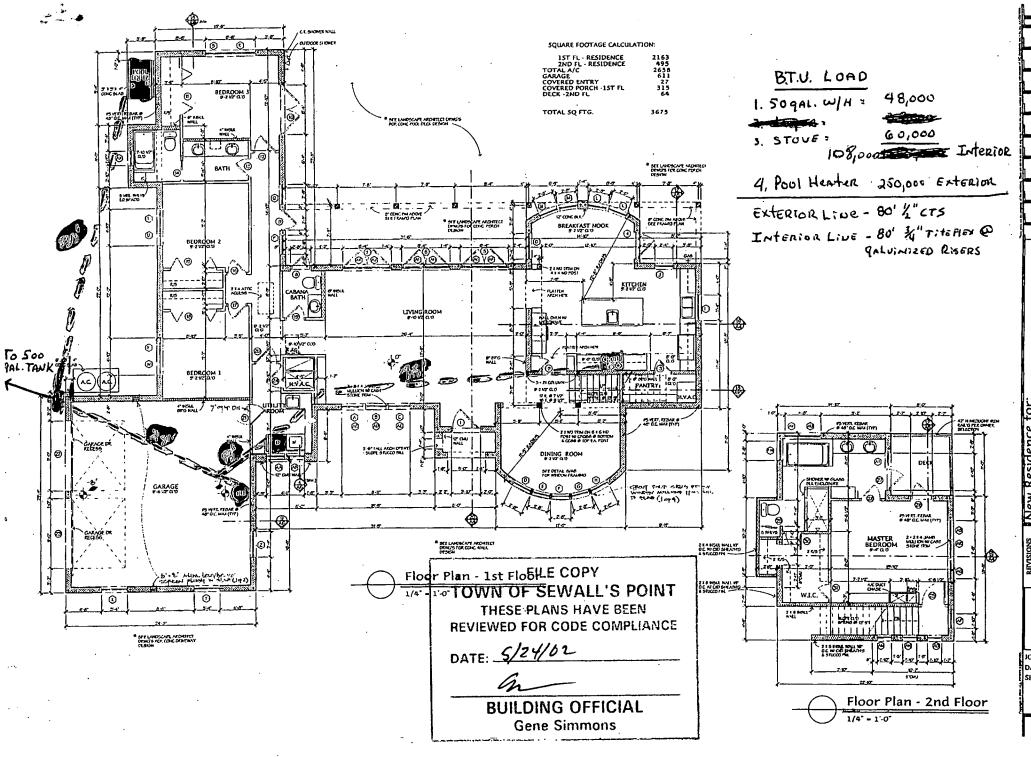
This license is issued under authority of Section 527.02, Florida Statutes, to:

MARTIN COUNTY PROPANE 3586 SW MARTIN HWY PALM CITY, FL 34990

Marke H. Bronson

CHARLES H. BRONSON COMMISSIONER OF AGRICULTURE

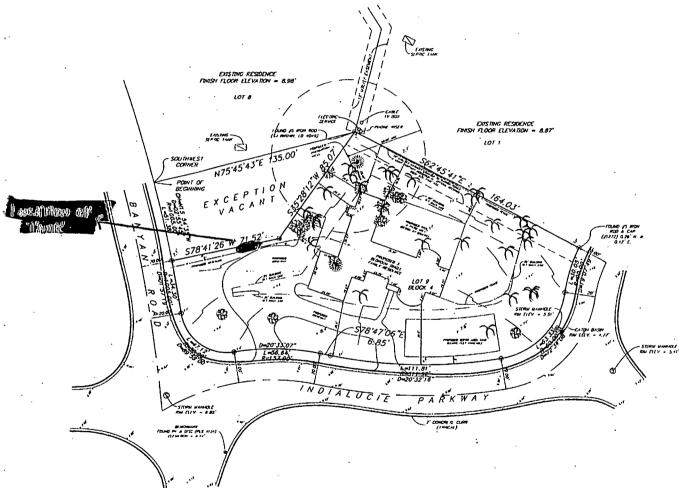
04CS - 03501



108 / 21 DATE\_Q2

SHEET A'

## BOUNDARY SURVEY



#### TOPOGRAPHIC SURVEY LOT 9, BLOCK 4, INDIALUCIE PLAT BOOK 4, PAGE 77 MARTIN COUNTY, FLORIDA.

#### LEGAL DESCRIPTION:

ALL OF LOT 8, BLOOK 4, ACCORDING TO THE FLAT OF BIDMLUCE AS RECORDED BY PLAT BOOK 4, PAGE 77, OF THE PUBLIC PLOTONS OF LARTHIN COUNTY, FLORIDA, EVILLEY A PORTION OF LOT 9, ROCK 4, OF SAD HAT OF PROLITICAL HOW BEING HOPE LARTHOLARY LOS ECONOCIO AS FOLLOWS:

#### SURVEYOR'S MOTES:

I, LAKOS SHOWN HEREON WERE NOT ABSPRACTED FOR EASEMENTS AND/OR PROFITS OF WAY OF RECORD EXCEPT AS SHOWN ON THE RECORD PLAT IF ANY.

2. NO ATTEMPT WAS MADE BY THIS THAT TO LOCATE UNDERGROUND FOOTINGS OF BUILDINGS OR FTINGES ON/OR ADJACENT TO THIS SITE.

4. DES STE LES IN FLOOD ZONE "ALO" (HASE ELEVATION = 80") AS SCALED AND INTERPOLATED ON FEWA MAP NO. 120154-0001-0, DATED: LINE 18, 1996.

S. SIE MEA: 24,507,67 SOUME LEEL IN 0,5425 ACRES OF 100X OF LOT AREA. TOTAL PROPOSED APPROXIMENTS—6,481,17 SOUME LEEL IN 34 AR OF LOT MEA. PRODUCED BURGING-7,940,00 SOUME TEEL OR THE XY OF LOT LOT AREA. PROPOSED LOWER TEEL OF THE XY OF LOT AREA. PROPOSED LIMITANCE—AREA SOUME LET! OF OUX OF LOT AREA, PROPOSED LIMITANCE—AREA SOUME LIT! OF OUX OF LOT AREA, PROPOSED AREA. LEED AREA. LET AREA SOUME LIT! OF OUX OF LOT AREA, PROPOSED AREA. LEED AREA. LET AREA. SOURCE LIT! OF OUX OF LOT AREA.

8. LEGAL DESCRIPTION FURNISHED BY CLIENT.

#### CERTIFICATION:

1, MICHAEL D. AND JENNIFER T. LLAUCH 2, HARBOR FEDERAL SAVINGS BANK

J. ATTORNEY'S TITLE INSURANCE TUND, INC.

5 TOWN OF SEWALL'S POINT



#### SURVEYOR'S CERTIFICATION:

I HERBET CERET DUT THE PLAT OF SERVEY WAS PREPARTO UNDER MY RESPONSIBLE CHARGE AND
METTS THE MEMBER RECONCUL STANDARDS AS SET FORTH BY THE FLORID BOARD OF PROTESSORIA
STRETMENS AND AMPRESS NOT HAPPES SECT ACTIONAL STANDARD THE STREE AND CORT
TO THE REST OF MY HAMILTON AND DILLEY MOT VALO WITHOUT THE STORING AND THE MY
MENTO SEAL OF A TROND LOCATED SERVET ON MY MAPPER.

BLOOMSTER PROFESSIONAL LAND SURVEYORS, INC.

791 N.E. DIXTE HIGHWAY JENSEN BEACH, FLORIDA 34957 PHONE 561-334-0868

SCALE:	1" - 20	
DATE:	03-30-2001	
F.D.	9KT01	1-
JOB NO.	3850	Г
1/24/01	SIE PLAN	▔
0/15/01	ME + CALCULATIONS	
9/14/01	400 CF#15.	4
10/01/01	UPSATE	

PREPARED FOR: MICHAEL D. & JENNIFER T. FLAUGH LOT 9. BLOCK 4, PLAT OF INDIALUCIE MARTIN COUNTY, FLORIDA

IRON ROD & CAP 18) UNLESS OTHERWISE NOTED IB" PALM TREES

18" MISC TREES

18" PINE TREES

Building Department - Inspection Log

Date of Inspection: □ Mon □ Wed Fri May 31, \_\_\_\_\_, 20012 Page 1 of 2

•				
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5813	+ Phone k	CAS Kingh	o stack	CELL# GARY.
	6 INIA Lucie Aluy	excapt		260-9618-
	MARTIN County Gropen	+ 10120	u gravia	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5 789	WALT MIKKETYN	FINAL	is al	
	4MIRAMAR			
	0/15			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5769	BOAS, MARK	Pool	Va csail	
	12 RIO VISTA DI.	Phumbing		
. 1	STRACUZZI	/	·	INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5739	Scott G-ASIUREK	Insullation	Hissap	
$\overline{\mathcal{L}}$	67 N. Kiver Rd			
$\bigcirc$	CONWA			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	ED ReillY	TREE	Possou	
	78 S. Savalls Pt. RU	REMOVIL		$\cap$
	SAMPSOL'S True SUC			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5761	BILL INERD	JLAB	Passod	
	7 W. H.P.	+ garage column		
			·	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5B20.	PICUE.	GROUND ROUGH	Resal	
	45 RWELRO.	EUEC. (Landscapg.)		$\cap$
	LUMNAM	, ,		INSPECTOR:
OTHER: .				J
		•		

Building Department - Inspection Log

Date of Inspection: 

Mon Wed 
Fri 

Gugust 14 , 2003; Page

				A STATE OF THE STA
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5841	TENNY	Final Ketain	rosed	
(2)	10 S Sewalls At Rd	WALL		
<u> </u>	Thopic Marine			INSPECTOR: X
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5813	Flough	Final	e de la companya de l	No acces ??
<i>T</i>	6 Indiahucia AKWY	Prophille 5		Cas 50
$\bigcirc$	Mortin County Mopone	8/24/02-3		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	Scheoeder	TREE	Passad	
(4)	4 Ridgeland Dr.			0
4)	:			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	Hillman, Lynda	TREZ PLSO	ell Bygon	9-781-0919
2	1 Heritage WAY West End of DIA	Contractor said Te	ı u	W
	West End of Bld;		Passad	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5887	Madden	FRAMING Deck	Hissory	
(2)	160 S. River Rd	·		Λ
<u> </u>	RPD Const			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
		·		
			:	en en en en en en en en en en en en en e
			·	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
• • • • • •			1	1
		1		

## Building Department - Inspection Log

Date of Inspection: 

Mon Wed Fri Qug 2/ , 2004; Page / of 3

		10.10 mm (10.10 mm) (10.10 mm)	U		
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1	58/13	Placan	Panal	Secroly.	
		6 tudiahuria Pkway	Gas Ugra.		
1	(2)	Mortin County Propose			INSPECTOR
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5741	Lowell	ELECTRICAL	tech	
	(8)	7 W. High Pt. PD		` <u> </u>	Λ.
		IANTERD		·	INSPECTOR
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5899	BIRKFIELD	Demo'd	Ressod.	Rear of Residence
	$(C_{0})$	9 Mendelay	Guest House		Just weed It Ch- Chean
		IANIERO	FINAL		INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5 900	LIPSCHULTZ	METAL 4	Hard	
		53 S. R. War Rs.	Steeting		
	رط	PALMET (743-3227)	7		INSPECTOR
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/GOMMENTS:
	5917	& DOR	ER.	> W60 C	alled for Friday
	(7)	4 EMIRITA WAY			()
		Aungon.	287 1354 X1220	·	INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
4	TREE	2 BANYAN RD	T/R	Pailock	held to raplace \$
,	$\bigcirc$		- ready	12 ropla	e !!
	(4)		/	<u>'</u>	INSPECTOR:
	PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	5916	MA	POOL STEAT	Paceso	
И.	$\bigcirc$	5 BANTAN RD			7.5
• 1	(1)	At6 Pada			INSPECTOR:
	`				

OTHER:

## 5929 Wood Gate

MASTER	PERMIT	NO	
INT			

TOW	N OF SEWALL'S F	POINT				
Date 8-22-02		BUILDING PERMIT NO	o. 5929			
Building to be erected for Mike	Flaugh	$\_$ Type of Permit $\_{\mathcal{Wo}lpha}$	1 Gate			
Applied for by $O/B$	·	(Contractor) Building Fe	e <u>30.00</u>			
Subdivision <u>Indialucie</u>	Lot 9 Block	Radon Fe	ee			
Address le India Lucie	PKWY	Impact Fe	96			
Type of structure	SFR	A/C Fe	ee			
		Electrical Fe	ee			
Parcel Control Number:		Plumbing Fe	ee			
	020040009030		e			
Amount Paid 60.00 Check	# <u>285</u> 2 Cash	Starting Wo.	BIX 30.00			
Total Construction Cost \$			es <u>60.00</u>			
Signed Applicant Applicant		Leve Semmons  Town Building Office  T	cial cial			
BUILDING PLUMBING	☐ ELECTRICAL ☐ ROOFING	☐ MECHA	NICAL SPA/DECK			
DOCK/BOAT LIFT	DEMOLITION	☐ FENCE				
SCREEN ENCLOSURE	☐ TEMPORARY STRU		ATION			
☐ TREE REMOVAL	STEMWALL		ONGATE			
	INSPECTIO					
UNDERGROUND PLUMBING.	UI	NDERGROUND GAS				
UNDERGROUND MECHANICAL	UI	NDERGROUND ELECTRICAL				
STEMWALL FOOTING	F(	DOTING				
SLAB	TI	E BEAM/COLUMNS				
ROOF SHEATHING	· W	ALL SHEATHING				
TRUSS ENG/WINDOW/DOOR BUCKS		ATH				
ROOF TIN TAG/METAL		OOF-IN-PROGRESS				
PLUMBING ROUGH-IN		LECTRICAL ROUGH-IN				
MECHANICAL ROUGH-IN		AS ROUGH-IN				
		FRAMING EARLY POWER RELEASE				
FINAL PLUMBING FINAL ELECTRICAL						
FINAL MECHANICAL						
FINAL MECHANICAL FINAL ROOF	F	INAL ELECTRICAL INAL GAS BUILDING FINAL				

#### Town of Sewall's Point

BUILDING PERMIT APPLICATION		Building Permi	t Number:
Owner or Titleholder Name: <u>LAIKE FCAVGH</u>	City:	STUART SI	ate: FU Zip: 34991
Owner or Titleholder Name: 11/KE FCAVGH  Legal Description of Property: 1 oT 9 BLOCK 4	INDIALUCIÉ PI	rcel Number: 3537416	02.0040009030000
Location of Job Site: 6 INDIACULE PRUY	Type of Work To	Be Done: /N/STALL	CATE
	<b>v</b>	<del></del>	
CONTRACTOR/Company Name: X//A		Phone Nu	mber:
- /· ·			te:Zip:
State Registration Number:State Certificat	tion Number	Martin County Licen	se Number:
		matur ooding Electric	JO TRUMBUT.
ARCHITECT: X)		Phone Nur	mber:
			te:Zip:
/			
ENGINEER: NA		Phone Nur	mber:
Street:			ite:Zip:
	Uily	Ota	z.p
AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living	: Garage:	Covered Patios:	ScreenedPorch:
Carport: Total Under Roof			
Type Sewage:Septic Tank Permit	Number From Health Den	Accessory building.	Permit Number:
- Joseph Park Child	Trainser From Fleakin Bept	446/1 F	emili radinoer.
FLOOD HAZARD INFORMATION Flood Zone:	Minimum Bas	Flood Elevation (REE):	NCVD
Proposed First Floor Habitable Floor Finished Elevation:			
		1404	/ (Minimum 1 1 COC ADOVE BEE)
COST AND VALUES Estimated Cost of Construction or Improve	mante: UN	Estimated E	air Market Value (FMA) Brier
To improvements:If Improvement, Is Cost G			
in improvements.	Teater Than 50% OF Fair W	idiket value 165	NO
SUBCONTRACTOR INFORMATION			
	Ctata	Linnan Musa	<b>.</b>
Electrical:  Mechanical:	State:		ber:
Plumbing			ber:
•			ber
Roofing:	State:	License Num	ber
Lundorstand that a consist or said from the Tour was the said			
I understand that a separate permit from the Town may be required			
HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS,	ACCESSORY BUILDING	S, SAND OR FILL ADDITIO	N OR REMOVAL, AND TREE
REMOVAL AND RELOCATIONS.			
CODE EDITIONS IN EFFECT AT TIME OF APPLICATION	<u></u>		
Florida Building Code (Structural, Mechanical, Plumbing, Gas)		ng Code (Structural, Mechai	nical, Plumbing, Gas)
National Electrical CodeFlorida Energy Code	<del></del>		
Florida Accessibility Code			
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNIS			
KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICA	BLE CODES. LAWS AND	ORDINANCES DURING T	HE BUILDING PROCESS.
OWNER OR AGENT SIGNATURE (Required)	CONTRAC	TOR SIGNATURE (Require	d)
State of Florida, County of: Martin	On State of	Florida, County of:	
This the 2007 day of August 200 2	This the _	day of	200
by M.Flaugh who is personally	y		who is personally
known to me or produced			
as identification. DOWN. POMOCUS		ation.	
Notary Public	-		Notary Public
My Commission Britis Joan H. Barrow	Mv Commi	ssion Expires:	-
MY COMMISSION # CC763645 EXPIRES		<del> </del>	
November 30, 2002 BONDED THRU TROY SHENNSURANCE INC.			Seal
-Miller CONTRACTOR CON			·

ONE SOUTH SEWALL'S POINT ROAD SEWALL'S POINT, FLORIDA 34996

#### TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT

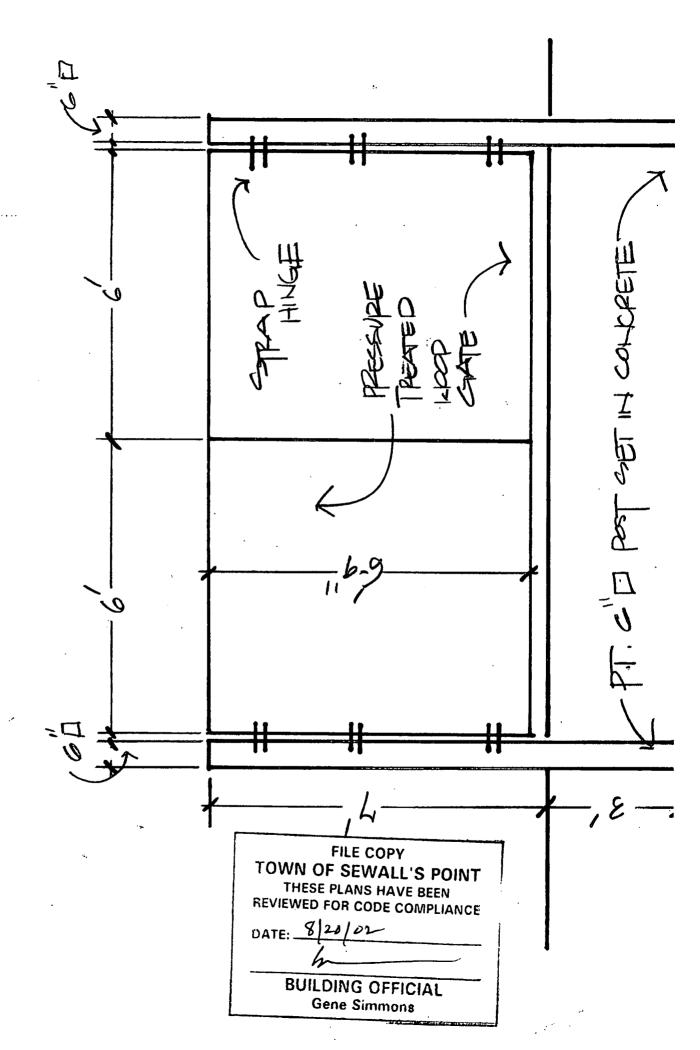
(To be submitted if permit is to be pulled by Owner/Builder)

#### **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 through 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 Statues 489.103(7).

l have read the above and agree to comply with the	provision	s as stat	teď.	
Name: Mike Flauch	_ Date:	8/20	0/02	
Signature:		í	'	
Address: 6 INDIALUCIA PKWY	_			
City & State: STVRRT FU				
Permit No				
This form is for all permits except electrical.				

MADALLE PANY



## TOWN OF SDWALLS POINT Building Department - Inspection Log-

Date of In	spection: Mon Wed	<u> </u>	_, 200≵	Page / of
	OWNER/ADDRESS/CONTR.			NOTES/COMMENTS: 35
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	6 HIDDLE ROAD			
	OB			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
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# 5984 FENCE

		MASTER PERMIT NO
TOW	N OF SEWALL'S	POINT
Date 9-25-02		BUILDING PERMIT NO. 5984
Building to be erected for Mike	Fraugh	Type of Permit FENCE
Applied for by HORON FENCE	!E	(Contractor) Building Fee 30-00
Subdivision <u>IndiaLucie</u>		
Address 6 Indialucie	PKWY	Impact Fee
Type of structureSFR		A/C Fee
		Electrical Fee
Parcel Control Number:		Plumbing Fee
35374100.	20040009030	Roofing Fee
Amount Paid 30.00 Check	# 6736 Cash	Other Fees ()
Total Construction Cost \$ 1,727		TOTAL Fees 30.00
Signed	Signed	Len Semmons (Mn)
Applicant		Town Building Official
	PERMIT	Ī
<ul> <li>□ BUILDING</li> <li>□ PLUMBING</li> <li>□ DOCK/BOAT LIFT</li> <li>□ SCREEN ENCLOSURE</li> <li>□ FILL</li> <li>□ TREE REMOVAL</li> </ul>	☐ ELECTRICAL ☐ ROOFING ☐ DEMOLITION ☐ TEMPORARY STRUC ☐ HURRICANE SHUTT	
	INSPECTIO	NS
UNDERGROUND PLUMBING UNDERGROUND MECHANICAL STEMWALL FOOTING	UNI	DERGROUND GAS  DERGROUND ELECTRICAL  OTING
SLAB	BEAM/COLUMNS	
ROOF SHEATHING		LL SHEATHING
TRUSS ENG/WINDOW/DOOR BUCKS ROOF TIN TAG/METAL	LA1	
PLUMBING ROUGH-IN		OF-IN-PROGRESS  ECTRICAL ROUGH-IN
MECHANICAL ROUGH-IN	<del></del>	S ROUGH-IN
FRAMING	EAI	RLY POWER RELEASE
FINAL PLUMBING	FIN	AL ELECTRICAL

FINAL GAS

**BUILDING FINAL** 

FINAL MECHANICAL

**FINAL ROOF** 

#### Town of Sewall's Point

BUILDING PERMIT APPLICATION

BUILDING PERMIT APPLICATION	_	Building Permit Number:	
Owner or Titleholder Name: MIKO - LOUGH	city: <u>So u</u>	MILA DI OU PI	- 31. Oct
Legal Description of Property: 10+9 BIK 4 Pla+ BK	+ U(T I) Darrack No.	36.27 ni-	A-C
Social of 300 site. W THISINITIAL IN PORT LUCIO	Type of Work To Be Done	Install 19	5'0E 1170-3
DIACE VILLIAM TO THE PENCE			201 4 63
CONTRACTOR/Company Name () (VO) Co.OCO Co.	) .	Phone Number	183-4540
Street: 2762 NW UHN Stroot	City: (VO)	/ IA A D 40 some D	31070
Street: 2762 NW UHN Street State Registration Number: NA State Certification Number	per: N.) /4	Agric Court Live State: +	2ip 2 19 10
	Non-Tope	viarun County License Number	2003121
ARCHITECT:		Phone Number	
Street:	City:	Ctate:	7
		5(a)	Z/p:
ENGINEER:		Ohana Numbari	
Street:	City	Friorie Number	
		state:	Zip:
AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living:	Garage: Cour	ered Patios:Screene	10
Carport:Total Under RoofWood Dec	Cove	sred Patios:Screene	dPorch:
Type Sewage:Septic Tank Permit Number F	com Month Danie	Accessory Building:	
	Tom Realth Depart.	Well Permit Num	ber:
FLOOD HAZARD INFORMATION Flood Zone:	Minimum Day 51	•	·····
FLOOD HAZARD INFORMATION Flood Zone:  Proposed First Floor Habitable Floor Finished Flooring:	Minimum Base Flood E	Elevation (BFE):	NGVD
Proposed First Floor Habitable Floor Finished Elevation:		NGVD (Minimum	1 Foot Above BFE)
COST AND VALUES Estimated Cost of Construction or Improvements:	222.00		
To Improvements:If Improvement, is Cost Greater That	18(1,00	Estimated Fair Market \	Value (FMV) Prior
in improvement, is cost Greater That	an 50% Of Fair Market Va	lue YES N	o ベ
			<del></del>
SUBCONTRACTOR INFORMATION			
SUBCONTRACTOR INFORMATION Electrical:	State:	License Number:	
SUBCONTRACTOR INFORMATION  Electrical:  Mechanical:	State:	License Number: License Number:	
SUBCONTRACTOR INFORMATION  Electrical:  Mechanical:  Plumbing:	State: _State: _State:	License Number: License Number: License Number:	
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SUBCONTRACTOR INFORMATION  Electrical:  Mechanical:  Plumbing:  Roofing:  I understand that a separate permit from the Town may be required for ELECTHEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESS	State:	License Number: License Number: License Number: License Number: SONS. WELLS. POOLS. FURN	ANCE BOILERS
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## PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR A FENCE

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

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

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

#### Submittals (2 copies)

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

ALL INFORMATION AND DOCUMENTS MENTIONED ABOVE
ARE INCLUDED IN THE MY PERMIT APPLICATION PACKAGE
(SIGNATURE OF APPLICANT)

DATE SUBMITTED:	9-13-02	
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	ACORD CERTIF	FICATE OF LIAB	ILITY II	<b>NSURAI</b>	VCE	DATE (MM/DD/YY) 12/26/2001		
DE	DUCER (863)467-0600 AKINS-LAWRENCE INSURANCE O. Box 549		ONLY AND	CONFERS NO R	ED AS A MATTER OF IN IGHTS UPON THE CERT E DOES NOT AMEND, E FORDED BY THE POLIC	FORMATION TIFICATE EXTEND OR		
	20 S Parrott Ave	RECEIVEL	INSURERS AFFORDING COVERAGE					
	Reechobee, FL 34973-0549 RED Adron Fence Company,	Tnc   SEP 0 9 2002	NSURER A: Assurance Company of America					
	2762 Nw 4th Street		NSURER B:	ASSUI AIICE CC	mpany of America			
	Okeechobee, FL 34972	BY:	NSURER C:		<del></del>			
			INSURER D:					
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T A M	HE POLICIES OF INSURANCE LISTED E NY REQUIREMENT, TERM OR CONDITI AY PERTAIN, THE INSURANCE AFFOR OLICIES. AGGREGATE LIMITS SHOWN	BELOW HAVE BEEN ISSUED TO THE INSU ION OF ANY CONTRACT OR OTHER DOCU DED BY THE POLICIES DESCRIBED HERE MAY HAVE BEEN REDUCED BY PAID CLA	JMENT WITH RES	PECT TO WHICH TH	HIS CERTIFICATE MAY BE I	SSUED OR		
INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	DATE (MM/DD/YY)	DATE (MM/DD/YY)	LIMI	rs		
<u> </u>	<b>├</b>	PS037313591	12/31/2001	12/31/2002	EACH OCCURRENCE	s 1,000,00		
	X COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire)	\$ 300,00		
	CLAIMS MADE X OCCUR		î.		MED EXP (Any one person)	\$ 10,00		
Α					PERSONAL & ADV INJURY	\$ 1,000,00		
	GEN'L AGGREGATE LIMIT APPLIES PER:				GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	\$ 2,000,00		
	POLICY PRO- LOC				TRODUCTS*COMPTOT AGG	\$ 2,000,00		
	<del>  </del>	PPS037313591	12/31/2001	12/31/2002	COMBINED SINGLE LIMIT (Ea accident)	s 1,000,00		
Α	ALL OWNED AUTOS SCHEDULED AUTOS				BODILY INJURY (Per person)	s		
^	X HIRED AUTOS X NON-OWNED AUTOS				BODILY INJURY (Per accident)	s		
					PROPERTY DAMAGE (Per accident)	s		
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$		
	ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	<del></del>		
	EXCESS LIABILITY				EACH OCCURRENCE	\$		
	OCCUR CLAIMS MADE				AGGREGATE	\$		
	DEDUCTIBLE		1			\$		
	RETENTION \$					\$		
	WORKERS COMPENSATION AND				WC STATU- OTH-	1		
	EMPLOYERS' LIABILITY				E.L. EACH ACCIDENT	s		
					E.L. DISEASE - EA EMPLOYE	\$		
			•		E.L. DISEASE - POLICY LIMIT	s		
	OTHER							
DES	CRIPTION OF OPERATIONS/LOCATIONS/VE	HICLES/EXCLUSIONS ADDED BY ENDORSEMEN	IT/SPECIAL PROVISI	ions	. <del></del>	•		
Fer	nce Erection							
لــ	RTIFICATE HOLDER ADD	TONAL MICHOCO WAYNESS /	CANCELLAT	TION				
٦	ADD	ITIONAL INSURED; INSURER LETTER:	<del></del>		CRIBED POLICIES BE CANCEL	ED REFORE THE		
			1		ISSUING COMPANY WILL END			
			2		O THE CERTIFICATE HOLDER			
	Town of Sewell's Poi	int			CE SHALL IMPOSE NO OBLIGA			
	1 South Sewell Point		OF ANY KINI	D UPON THE COMPAN	Y, ITS AGENTS OR REPRESENT	ATIVES.		
	Stuart, FL 34996		AUTHORIZED RE	PRESENTATIVE		·		
L	CORD 25-S (7/97)		Ronnie La	wrence //	©ACERD	CORPORATION 19		

#### Certificate of Insurance

This certificate is 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, extend, or after the coverage afforded by the policies listed below.

#### Named Insured(s):

Staff Leasing Inc. d/b/a Gevity HR and its wholly owned subsidiaries including Gevity HR, LP; Gevity HR IV, LP; Gevity HR IX, LP; and Gevity HR X, LP

600 301 Boulevard West, Suite 202 Bradenton, Florida 34205



**Insurer Affording Coverage** 

Continental Casualty Company

Coverages:

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

Type of Insurance	Certificate Exp. Date Continuous Extended * Policy Term	Policy Number	Limi	ts
Workers	1-1-2003	WC 189165165	Employers l	Liability
Compensation WC 189165182 WC 247848874 WC 247848888	1-1-2003	WC 189165182 WC 247848874	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:** 

11309 Adron Fence Co. Inc.

Effective Date: 1/1/02

FL 0 H 047630

The above referenced workers compensation policylles) provide(s) statutory benefits only to the employees of the Named Insured(s) on such policy(les), 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

**Trudy Williams Authorized Representative** 

St. Louis, MO Office

(877) 427-5567

12/15/01 Date Issued Phone



MARTIN COUNTY, FLORIDA Construction Industry Lic Bd Certificate of Competency License: SP0300

Expires September 30, 2003

ADRON CHAMBERS Name:

Company: ADRON FENCE COMPANY

Address: 2762 NW 4th St City, ST: Okeechobee 34972

License Type: FENCE ERECTION CONTRACT

MARTIN COUNTY, FLORIDA Construction Industry Lic. Bd Certificate of Competency

License: SP03127

Expires September 30, 2003

Name: ROSS A CHAMBERS

Company: ADRON FENCE COMPANY INC

Address: 2762 NW 4th St

city, st:Okeechobee FL 34972 License Type: FENCE ERECTION CONT

SEP 0 9 2002

#### 2002-2003 MARTIN COUNTY ORIGINAL COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995 (561) 288-5604

LICENSE 97 3-518-106 CERT\_ PHONE 180 01 282-51 72 SIC NO 023599 LOCATION:

2762 NW 4TH ST

#### CHARACTER COUNTS IN MARTIN COUNTY

PREV YR.	\$_	-00	LIC. FEE S	25.00
	\$_	•00	PENALTY .\$	4.73.60.0
	<b>s</b> _	-00	COL. FEE \$	600
	\$_	•00	TRANSFER \$	- NH - 0.039
		TOTAL	25.00	-14 CA C

IN THE BUSINESS, PROFESSION OR OCCUPATION oF FENCE CONTR

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

CHAMBERS, RUSS A ADRON FENCE COMPANY 2762 NW 4TH ST OKEECHOBEE FL 34972

29 DAY OF\_ **AUGUST** AND ENDING SEPTEMBER 30. 2003

12 02082601 000701

ADRON FENCE COMPANY INC. 2762 N.W. 4<sup>TH</sup> STREET OKEECHOBEE, FL. 34972 1-800-282-5172 EAV. 863-763-8404

FAX 863-703-8404
**************************************
NOTES: Lef: Flaugh Permit
release from FPL. Please
Senset O
Thank Jan Delan
IF YOU HAVE ANY QUESTIONS, OR DID NOT RECEIVE ALL THE PAGES OF THIS TRANSMITTAL, PLEASE CALL  OKEECHOBEE VERO BEACH SEBRING JUPITER STUART BELLE GLADE FT. PIERCE 561-465-3890
863-763-6255 772-562-0022 863-385-4493 561-744-1303 772-283-4540 301-924-3417

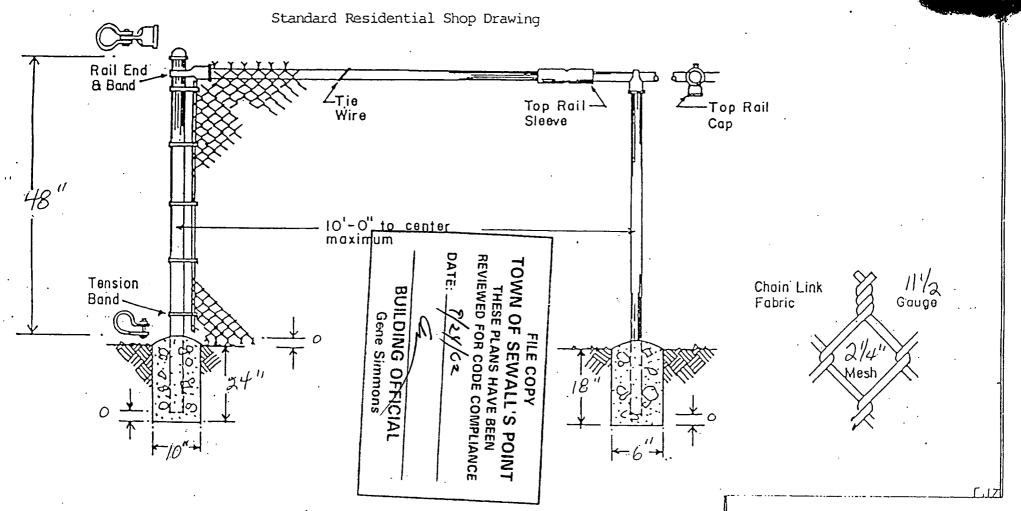
ADRON FENCE COMPANY, "FENCING YOU IN SINCE 1962"

561 223 4289 T-408 P.002/003 F-056

Sep-23-2002 02:22pm From-SRO CLERK

EASEMENT AGREEMENT

GENTLEMENT:
GENTLEMENT:  I PROPOSE TO APPLY FOR A SEWALLS POINT PERMIT TO ERECT A FENCE IN  THE UTILITY EASEMENT ON MY PROPERTY AT:
6 Indalucie PARKWAY
LEGAL DISCRIPTION: LOT 9 BLOCK 4 S/D
CATION FROM PROPERTY LINES:
BRIEF DESCRIPTION OF DIMENSIONS AND LOCATION THE PROP. FLOR. AND LOCATION THE PROP. FLOR. AND WAY FOR
ONT BE RESPONSIBLE IN ALL THAT ANY
REPAIR REPLICEMENT OF SICH NECESSARI
REMOVAL OR REPLACEMENT OF SEPENSE.  EASEMENT WILL BE DONE AT MY EXPENSE.  EASEMENT WILL BE DONE AT MY EXPENSE.  IF THERE IS NO OBJRECTION TO THIS PROJECT, PLEASE COMPLETE THIS FORM  IF THERE IS NO OBJRECTION TO THIS PROJECT, PLEASE COMPLETE THIS FORM  IF THERE IS NO OBJRECTION TO THIS PROJECT, PLEASE COMPLETE THIS FORM
AND RETRUIT TO MEDITION TO COMPLETED BY UTILITY COMPANY
THIS PORTION TO COMPLETED BY UTILITY COMPANY
THIS PORTION TO COME DESCRIPTION UNDER THE CIRCUMSTANCES WE AGREE TO THE PROPOSED CONSTRUCTON UNDER THE CIRCUMSTANCES
DESCRIBED ABOVE  TPL  DESCRIBED ABOVE
COMPANY TPL  EN MIKE LA MARTINA TITLE DESIGNER  BY MIKE LA MARTINA TITLE DESIGNER  ENTIAL CONFLICT
COMPANY RECORDS INDICATE CONFLICT  (DOES) (DOES NOT) EXIST.
THE CONFLICT IS:

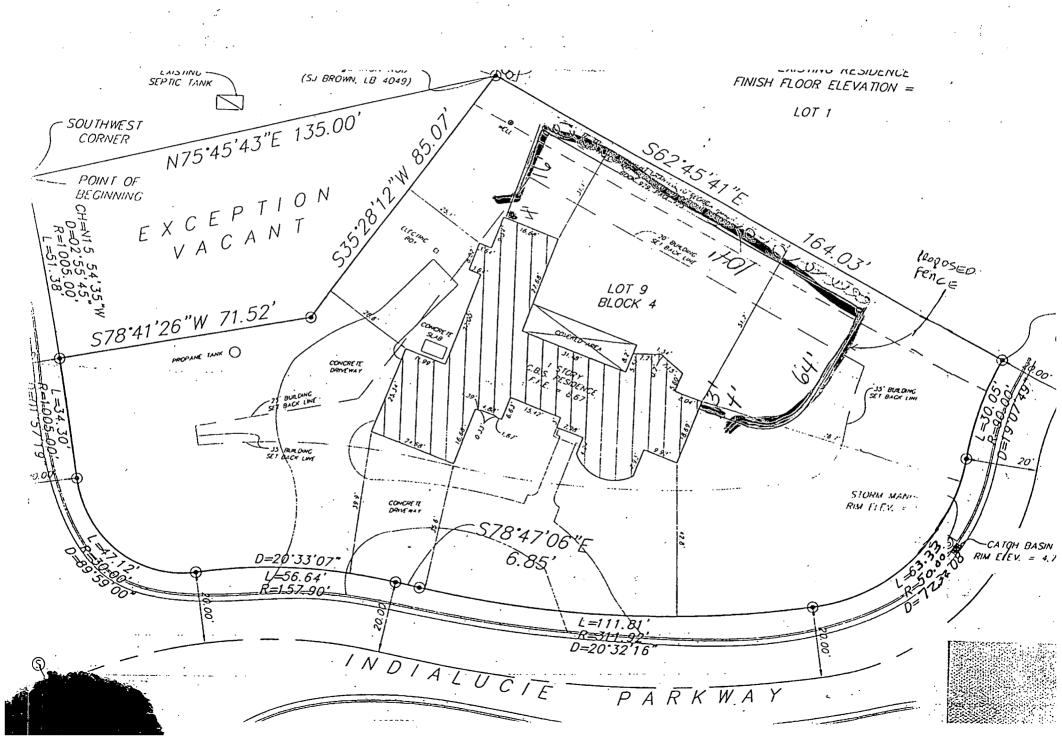


Post hole	diameter	is	4	times	the	diameter	of	the	post.
-----------	----------	----	---	-------	-----	----------	----	-----	-------

TERMINAL	POST	LINE	POST	TOP RAIL		
Size	Wt. per ft.	Size .	Wt. per ft.	Size	Wt. per ft.	
2/2"	,055 well	15/8"	.047wasi	13/8"	.047well	
# Size-Is outside dimension # Weight-Is pounds per linear foot						

#### ADRON FENCE CO.

2762 N.W. 4th ST. OKEECHOBEE, FL 34972 1-800-282-5172



OKEECHOBEE (863) 763-8255 VERO BEACH (772) 562-0022

SEBAING (863) 385-4493 JUPITER (581) 744-1363 CUUC Z Z 211V STUART HELLE GLADE (772) 282-3540 % (\$51)224-3419

FORT PIERCE (772) 465-3890

FAX: (863) 763-8404 FENCE CC#.FF 1535 FENCE Checking to FENCE Chec	Sugar 1972 Skir
JOBNAME: FLAUGH Mike DATE: 8-27-03	
IOR ADDRESS: (A Talling Of Tallin	
11000000	
MAILING ADDRESS:	733
PROP. I.D. #	
DEED YES HOMEOWNER'S FAX: 56 - 287 - 52 RESTRICTIONS NO ASSOC 108 # 1807 F/ A1/ M	16
DIRECTIONS: JOB # BATFLAILM	<u> </u>
CLOSEST INTERSECTING STREET: N. RIVEC dr. PERMIT #:	
STYLE FENCE Black Vinyl System	
HEIGHT 4 POOTAGE 195-8-187 * Customer to clear fence lin	
HEIGHTFOOTAGE	<del>-</del> -
GAUGE 9X2 EXTRO KIK	• • • •
LINE POST 15/8 X 10 06 6 9	•
TERMINAL POST Z'AX 6' .0 6 B	
TOP/BRACE/BOTTOM RAIL 38 . 605 0 O.C.	£3;)
TENSION WIRE 99a emost	
BARBED WIRE	
WALK GATE 2 SIZE 4 FRAME 13/8	8
WALK GATE SIZE FRAME CONCRETE CIGGINS	
WALK GATE POST C/2 / Q S 70 2	
GATE SIZE FRAME	
CRIVE CATE POST COHORETE	17
DRIVE SIZE FRAME	At an
DRIVE GATE POST CONCRETE	
CORE DRILLVASPHALT	7973.
PRIVACY SLATS	• "
PROPLINES CLEARED BY QUIVER NO X CUSTOMER APPROVAL	•
PROP. LINES CLEARED OF CALIFET NO X CUSTOMER APPROVAL:	<u></u>
PROP LINES CLEARED OF CUSTOMER APPROVAL.  PROP MARKS VISIBLE 10 NO X  SPECIAL INSTRUCTIONS add ex (a for 1727 DEPOSIT 570 BALANCE 1157	· · · · · · · · · · · · · · · · · · ·
PROP LINES CLEARED ON CALIFET NO X PROP MARKS VISIBLE 10 YES  SPECIAL INSTRUCTIONS add extra for  TERMS 1/3 down for ance On Comple	etion
PROP LINES CLEARED OF CUSTOMER APPROVAL.  PROP MARKS VISIBLE 10 NO X  SPECIAL INSTRUCTIONS add ex (a for 1727 DEPOSIT 570 BALANCE 1157	etion

MF

ADRON FENCE COMPANY, INC. 2762 NW 4TH STREET \* OKEECHOBEE, FL 34972 863-763-6255 \* 863-763-8404 FAX

TURUN FENCE, CU.

CUSTOMER IS RESPONSIBLE FOR THE FOLLOWING ITEMS, PRIOR TO ARRIVAL OF INSTALLATION CREW. (Initials required)

(Int.) 1. PROPERTY PINS MUST BE MARKED OR BE VISIBLE.

(Int.) 2. ALL LINES WHERE FENCE IS TO BE ERECTED MUST BE CLEARED.

> CUSTOMER ACKNOWLEDGES THAT ADRON FENCE WILL CHARGE \$120.00 FOR EACH TRIP MADE TO CUSTOMER'S JOB SITE IF THE ABOVE ARE INCOMPLETE.

ADRON FENCE COMPANY, UNDER ANY CIRCUMSTANCE, ASSUMES NO RESPONSIBILITY CONCERNING PROPERTY LINES OR IN ANY WAY GUARANTEES THEIR ACCURACY. IF PROPERTY PINS CAN NOT BE LOCATED, IT IS RECCOMMENDED THAT THE CUSTOMER HAVE THE PROPERTY SURVEYED.

ADRON FENCE COMPANY agrees to guarantee the fence to be free from defects in materials and workmanship for one year. Other manufacturer guarantees may apply.

ADRON FENCE COMPANY shall advise the customer as to local zoning regulations and ADRON FENCE COMPANY will obtain a permit when necessary, but responsibility for complying with said regulations, shall rest with the customer.

ADRON FENCE COMPANY will notify Sunshine State One Call Center in accordance with the "underground Facilities Damage Prevention and Safety Act", Florida statute 556.101111 that requires all public utilities to be notified at least 48 hours in advance when any kind of underground excavation takes place.

ADRON FENCE COMPANY assumes no responsibility for unmarked sprinkler lines, or any other unmarked burjed lines or objects. The customer will assume all liability for any damage caused by directing ADRON FENCE COMPANY to dig in the immediate vicinity of known utilities, or underground objects. or any

work performed will be in accordance with the job sheet (reverse side), but the final billing will be based on the actual footage of fencing built and the work performed. Partial billing for materials delivered to the job site and work completed may be sent at weekly intervals. Adjustments for materials used on this job and adjustments for labor will be charged or credited at the currently established rates. Any changes must be cleared through the main office and additional charges for any extra work not covered in this contract that was requested by the customer will also be added. The full amount of this contract along with any additional charges will become payable upon completion of all work whether or not it has invoiced.

Once the contract has been signed and returned, paperwork is processed, in order to begin the installation/repair. If at any time, the contract/job is cancelled, there will be a minimum, \$25.00 processing fee assessed in order to compensate ADRON FENCE COMPANY for the time and preparation of such documents. Other fees, charged may include restocking fee for special order items, permit costs etc.

PAYMENT TERMS: ALL PAYMENTS ARE DUE IN FULL, UPON COMPLETION OF YOUR PROJECT. A finance charge of 1 %% per month (or a minimum of \$2.00), which is an annual percentage rate of 18%, will be applied to accounts that are not paid within 10 days. All materials remain the property of ADRON FENCE COMPANY until all invoices pertaining to this job are paid in full. Right of access and removal is granted to ADRON FENCE COMPANY in the event of non-payment under the terms of this contract. The customer agrees to pay all interest and any costs incurred in the collection of this debt.

Please sign the preceding agreement and job sheet (reverse side) then mail or fax back to our office as soon as possible. Processing will not begin until this agreement and required deposit is received in our office. Your cooperation is greatly appreciated.

Cu scome r

SIGN HERE Approved/Accepted by Customer

--- koroo taa lavotoopana

(Int.)

Date

Accepted by ADRON FENCE

Louis Mactifies Sales Representative

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	_NOTES/COMMENTS:
	·		dani	TEO/COIVIIVIENTO:
	Place	HEENVE FIVE	ressed	
$\left  \begin{pmatrix} \lambda \end{pmatrix} \right $	le India Lucie PKWY			
	ADRON			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5979	LANdi	FENCE-Final	Mosel	
6	2 W. HPT Rd		× . \	$\mathcal{O}$
	Adron			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5734	Absada-Terk	Plumbing UGid	Pagal	
(4)·	8 Morgon lir	Shob		
	COUWAY			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	tiplinge-warh.	TREE	Road	
	1435. RIVER Rd			
(3)	0/3			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5900	Lip	FMAL-RE.ROOF:	Pailers	3" hood 1ap/screws 2)
6)	53 S. River Rp.	SHARON.	, 0	
(3)		561)743 3227	•	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5880	Horte	Plumbing Rough	tesacl	
	3 E High Pt Rd			
(7)	NAVARRO			INSPECTOR
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5991	GEARY	SHEATING	Passad	
	10 RIVERVIEW			$\bigcap_{i \in \mathcal{I}} A_i = \bigcap_{i \in \mathcal{I}} A_i$
(2)	Pacifie			INSPECTOR:
OTHER:			•	
JINER.	J 2. Rive (insulatio	<u>( )</u>		
	8 May cude pool	ponde		
• •	Jones: Carte	v-l. yad	• .	

# 9130 FENCE



#### 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 NUMBE	R:	9130		DATE ISSUED:	MARCH 30, 2009	
SCOPE OF WORK	ζ:	FENCE				
CONDITIONS:	,			- 1		
CONTRACTOR:		ОВ	· · · · · · · · · · · · · · · · · · ·			
PARCEL CONTROL NUMBER: 353741002-004-000903 SUBDIVISION INDIALUCIE – LOT 9						
CONSTRUCTION ADDRESS: 6 INDIALUCIE PKWY						
OWNER NAME:	FL	AUGH				
QUALIFIER:	OB	······································		CONTACT PHO	NE NUMBER:	223-4138
WARNING TO OWN	IER:	YOUR FAIL	URE TO RECORE	A NOTICE OF CO	MMENCEMENT M	AY RESULT IN YOUR
PAYING TWICE FO	RIN	IPROVEMEN	ITS TO YOUR PR	OPERTY. IF YOU I	NTEND TO OBTAI	N FINANCING, CONSULT
WITH YOUR LENDI						
DEPARTMENT PRI	AP 1	TO THE FIRS	T DECLIESTED	COMMENCEMENT	MUST BE SUBMIT	TED TO THE BUILDING
NOTICE: IN ADDITION	י אט דיואר	O THE PEOU	IDEMENTE OFTI	NSPECTION.		
APPLICABLE TO THE	SPR	OPERTYTHA	T MAY BE FOUND	IN PURI IC RECORT	MAY BE ADDITION	AL RESTRICTIONS Y, AND THERE MAY BE
ADDITIONAL PERMI	TS R	REQUIRED FR	OM OTHER GOVE	ERNMENTAL ENTIT	JES SUCH AS WATER	I, AND I HERE MAY BE
DISTRICTS, STATE A	GEN	ICIES, OR FED	ERAL AGENCIES.			
24 HOUR NOTICE RI	EQU	IRED FOR INS	SPECTIONS - ALL	CONSTRUCTION D	OCUMENTS MUST	BE AVAILABLE ON SITE
CALL 287-2455 - 8	3:00	AM TO 4:00	PM INSPECTI	ONS 8:30AM TO 12:0	OPM - MONDAY, W	EDNESDAY & FRIDAY
			REQUIR	RED INSPECTIONS		
UNDERGROUND PLUMB	ING	-	<u> </u>	UNDERGRO	UND GAS	
UNDERGROUND MECHA	NICA	L		UNDERGRO	UND ELECTRICAL	
STEM-WALL FOOTING				FOOTING		
SLAB				TIE BEAM/C	OLUMNS	
ROOF SHEATHING				WALL SHEAT		
TIE DOWN /TRUSS ENG		***************************************	<del></del>	INSULATION	· ·	
WINDOW/DOOR BUCKS		<del></del>		LATH		
PLUMBING ROUGH-IN		-	<del></del>	ROOF TILE IN		<del></del>
MECHANICAL ROUGH-IN		<del>-</del>		ELECTRICAL		
FRAMING			······································	GAS ROUGH		
FINAL PLUMBING			-	METER FINA		
FINAL MECHANICAL		-		FINAL ELECT FINAL GAS	NICAL	
FINAL ROOF			<del></del>	BUILDING FI	ΝΔΙ	
· · ·		<del></del>		BOILDING FI	ITAL	
ALL RE-INSPECTION	FEE	S AND ADDIT	CIONAL INSPECTI	ON REQUESTS WILL	BE CHARGED TO	THE PERMIT HOLDER. O RECEIVE A SUCCESSFUL
THE CONTRACTOR (	, N U	AN INEW   DOIL	DEV MOST 2CHE	DOLE A FINAL INSPI	SCITON, FAILUKE T	O 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:	9130								
ADDRESS	6 INDIALUCIE PKWY								
DATE:	3/30/09 SCOPE: FENCE								
SINGLE FAMILY OR	ADDITION / REMODEL Declared Value	\$							
r									
	350.00 SFR, \$175.00 Remodel < \$200K)	\$							
(No plan submittal fee	when value is less than \$100,000)								
	onditioned space: (@ \$110.25 per sq. ft.)	s.f.							
Total square feet non-	conditioned space: (@ \$51.60 per sq. ft.)	s.f.							
<b>A</b>	1								
Total Construction Va	llue:	\$							
Building fee: (2% of c	construction value SFR or >\$200K)	\$							
Building fee: (1% of c	construction value < \$200K + \$75 per insp.)								
	ctions (Value < \$200K) @\$75 ea.	\$							
Radon Fee (\$.005 per	sq. ft. under roof):	\$							
DBPR Licensing Fee:	(\$.005 per sq. ft. under roof)	\$							
	ent: (.04% of construction value - \$5.00 min.)								
Martin County Impact		\$							
TOTAL BUILDING	PERMIT FEE:	\$							
		T =							
ACCESSORY PERMI	T Declared Value:	\$	400						
		<u> </u>							
Total number of inspe	ctions @ \$75.00 each 1	\$	75						
Road impact assessme	ent: (.04% of construction value - \$5.00 min.)	\$	5						
		<del>-,</del> -							
TOTAL ACCESSOI	RY PERMIT FEE:	\$	80 pd cash						
	·								

RECEIVED			
DATE: 3-20 WO (	of Sewall's Point	N Permit Number:	
OWNER/TITLEHOLDER NAME: MICHAEL + JEUNIA		•	_
Job Site Address: 6 INDIQUUE PARKLAS	-		_
Legal Description LOT 9, SLOCK +, INDIAU	-		
•		State:Zip:	
Score of Work (Blassa baspecific):	<u> </u>		-
WILL OWNER BE THE CONTRACTOR?  (If yes, Owner Builder questionnaire must accompany application)  YES NO	Estimated Value of Improvement	: (Required on ALL permit applications) ents: S 40000 ever \$2500 prior to first inspection, \$7,500 on HVAC change cut)	
Has a Zoning Variance ever been granted on this property?	Is subject property located in floo	od hazard area? VE10AE9AE8X	
YES (YEAR) NO (Must include a copy of all variance approvals with application)	(Fair Market Value of the Pri	RE-ROOF APPLICATIONS ONLY:  or to improvement: S imary Structure only, Minus the land value)  BE SUBMITTED WITH PERMIT APPLICATION	_
CONTRACTOR/Company:			
Street:			
State License Number: OR: Municipality: License Number:			
LOCAL CONTACT:			
DESIGN PROFESSIONAL:			
Street:			
AREAS SQUARE FOOTAGE: Living: Garage:			
Carport:Total under RoofElevate * Enclosed non-habitable areas below the Base Flood Elevate			_
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2004 W/ 2006 REV.  National Electrical Code: 2005 Florida Energy Code: 2004/6 Florida Accessibility Code: 2004/6 Florida Fire Prevention Code 2004/6			
NOTICES TO OWNERS AND CONTRACTORS:  1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.  2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.  3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.  4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.15.			
*****A FINAL INSPECTION IS R	EQUIRED ON ALL BUILDI	NG PERMITS*****	
APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO DO CERTIFY THAT NO WORK OR INSTALLATION HAS COMMENC HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORF APPLICABLE CODES, LAWS, AND ORDINANCES OF THE TOW	ED PRIOR TO THE ISSUANCE OF RECT TO THE BEST OF MY KNOV	F A PERMIT AND THAT THE INFORMATION I NLEDGE. I AGREE TO COMPLY WITH ALL	
OWNER SIGNATURE: (required) OP OWNERS EGAL AUTHORIZED AGENT (PROOF REQUIRED)	CONTRA	CTOR SIGNATURE: (required)	
State of Florida, County of:	State of Florida, C	County of:	
This the 26th day of March, 200	g pis he	day of20	
known to me or produced FLDLH-FU20-544-65-	1200	who is personally	
as identification.	Asidentification.	icea	-
Notary Public	Jak Sal Eli	Notary Public	
My Commission Expires:	M Commission Expi	res:	
SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED APPLICATIONS WILL BE CONSIDERED ABANDONED AFTE			



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

Site Provided by... governmax.com T1.13

#### **Summary**

**print** \_ | | | | | -/ -/ Owner 3 of 7

## Parcel Info Summary

Land Residential Improvement Commercial Image

Sales & Transfers
Assessments →

Taxes →
Exemptions →
Parcel Map →
Full Legal →

#### Search By

Parcel ID

Owner

Address

Account #

Use Code

Legal Description

Neighborhood

Sales Map →

## Site Functions Property Search

Contact Us On-Line Help County Home Site Home County Login Parcel ID Unit Address

35-37-41-002-004-00090-3 6 NE INDIALUCIE PKY SerialIndex ID Order Commercial Residential 9445 Owner 0 1

#### **Summary**

Property Location 6 NE INDIALUCIE PKY
Tax District 2200 Sewall's Point
Account # 9445

**Land Use** 101 0100 Single Family **Neighborhood** 120500

Acres 0.563

## Legal Description Property Information

INDIALUCIE, LOT 9 BLK 4 (LESS: BEG SW COR LOT 8, NELY ALG S/LN LT 8 135' TO SE C

OR, S35DEG28'12"W 85.07', S78DEG41'26"W 71.52' TO CURVE, NWLY ALG CURVE 51.38' T O POB)

#### Owner Information

Owner Information
FLAUGH, MICHAEL D & JENNIFER T
6 INDIALUCIE WAY
STUART FL 34996

Assessment Info
Front Ft. 0.00 Market Land Value \$190,000
Market Impr Value \$363,030

Market Impr Value \$363,030 Market Total Value \$553,030

Recent Sale Sale Amount \$80,000

**Sale Date** 9/20/2001 **Book/Page** 1586 0685

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

Legal disclaimer / Privacy Statement

Data updated on 03/11/2009





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

OWNER/BUILDER QUESTIONNAIRE AND DISCLOSURE STATEMENT MUST BE COMPLETED AND REVIEWED PRIOR TO PERMIT ISSUANCE

### APPLICABLE ONLY TO OWNER-OCCUPIED SINGLE FAMILY RESIDENCES AND COMMERCIAL IMPROVEMENTS LESS THAN \$75,000 IN VALUE

NOTICE: FLORIDA STATUTE 489 REQUIRING CONSTRUCTION TO BE DONE ONLY BY LICENSED CONTRACTORS PROVIDES AN EXEMPTION FROM LICENSING FOR A PROPERTY OWNER WHO ACTS AS HIS/HER OWN CONTRACTOR UNDER SPECIFIC CONDITIONS. ANSWERS TO THE FOLLOWING QUESTIONS ARE ESSENTIAL TO DETERMINE IF THOSE STATE QUALIFICATIONS ARE SATISFIED BY AN OWNER/BUILDER APPLICANT.

ALL QUESTIONS MUST BE ANSWERED. IF A QUESTION DOES NOT APPLY, INDICATE BY WRITING "N/A" Owner/Builder Applicant Name: Michzel Flac Site address of the proposed building work: Q INPIALVIE PKLAY Name of legal title owner of the address above: Michzel and Lennifer Flack Describe the scope of work for the proposed new construction: Prec + 7 Name of Architect of Record: \_\_\_\_\_\_ Structural Engineer of Record: \_\_\_\_\_\_ Who will supervise the trade work to meet the applicable code? What provisions have you made for Liability and Property Damage Insurance? FULL COURTAGE What provisions exist for withholding Social Security and Federal Income Taxes, as required by Federal Law, from wages paid to people you hire who are not licensed? NO ONE TO BE HIREO What previous Owner/Builder improvements have you done in the State of Florida? Location: Now E Scope of Work Done: Year: Location: \_\_\_\_ \_\_\_\_\_\_ Scope of Work Done: \_\_\_\_\_\_ Year: \_\_\_\_\_\_ What code books do you have available for reference? Building: ON UNE Electric: \_\_\_\_\_\_ Plumbing: \_\_\_\_\_\_HVAC: \_\_\_\_\_ I have internet access and will view The Florida Building code at www.floridabuilding.org YES\_\_\_\_ Do you understand that as the permit holder you are liable for following all Local, County, State and Federal codes, laws and requirements, and you are also liable for anyone injured on the construction site? (yes/no) Have you consulted with your Homeowner's Insurance Agent? Mey Lender? No Attorney?

In order to assure your success in this project, please signify your awareness that the function of the building department is to issue you a building permit and verify code compliance through plan review and the inspection process. I am aware that town staff is not obligated to offer supervision, design or instructional advice prior or during my project. (initials).



#### 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

#### OWNER/BUILDER DISCLOSURE STATEMENT

NOTICE: STATE LAW REQUIRES THAT ALL PERMITTING AGENCIES PROVIDE INDIVIDUALS SUBMITTING APPLICATIONS FOR OWNER/BUILDER PERMITS THE FOLLOWING INFORMATION:

- 1. THE TOWN OF SEWALL'S POINT CODE OF LAWS AND ORDINANCES REQUIRES THAT ANY PERSON DESIRING TO ENGAGE IN BUSINESS AS A CONTRACTOR IN THE TOWN OF SEWALL'S POINT BE A HOLDER OF A CERTIFICATE OF COMPETENCY.
- 2. FLORIDA STATUTES 489.103 (7) ALLOWS YOU, AS A PROPERTY OWNER, AN EXEMPTION TO CONSTRUCT OR IMPROVE A SINGLE FAMILY DWELLING AND ACCESSORY-USE STRUCTURES ON SAID PROPERTY FOR YOUR OWN USE OR OCCUPANCY WITHOUT HAVING A CERTIFICATE OF COMPETENCY.
- 3. AS AN OWNER/BUILDER, YOU MUST PHYSICALLY PERFORM OR MATERIALLY SUPERVISE ALL CONSTRUCTION/IMPROVEMENTS SPECIFIED ON YOUR OWNER/BUILDER PERMIT AND YOU ARE TOTALLY RESPONSIBLE FOR ALL ACTIVITIES ASSOCIATED THEREWITH. OWNER/BUILDERS WHO WISH TO DO ELECTRICAL OR PLUMBING WORK MUST PASS A SHORT OPEN BOOK QUIZ ADMINISTERED BY THE BUILDING DEPARTMENT.
- 4. IF YOU DO NOT PHYSICALLY PERFORM A SPECIFIC PHASE OF SAID CONSTRUCTION/IMPROVEMENT, BUT CHOOSE TO SUB-CONTRACT IT, THEN SUCH CONSTRUCTION/IMPROVEMENT MUST BE SUB-CONTRACTED TO A LOCALLY LICENSED OR STATE CERTIFIED CONTRACTOR.
- 5. YOU MAY NOT HIRE AN UNLICENSED INDIVIDUAL WHO IN ANY MANNER ACTS IN THE CAPACITY OF A GENERAL CONTRACTOR, THAT IS, ONE WHO FULFILLS YOUR DUTIES UNDER PARAGRAPH (3) ABOVE.
- 6. UNDER AN OWNER/BUILDER PERMIT YOU MAY NOT CONSTRUCT A BUILDING WHICH YOU INTEND TO SELL OR LEASE. THE SALE OR LEASE, OR OFFERING FOR SALE OR LEASE, OF ANY SUCH STRUCTURE BY THE OWNER-BUILDER WITHIN 1 YEAR AFTER COMPLETION OF SAME CREATES A PRESUMPTION THAT THE CONSTRUCTION WAS UNDERTAKEN FOR PURPOSES OF SALE OR LEASE WHICH IS A VIOLATION OF THIS EXEMPTION.
- 7. THIS EXEMPTION SHALL NOT APPLY TO ANY PERSON WHO HAS LEASED, SOLD, OR OFFERED FOR SALE MORE THAN 1 STRUCTURE BUILT UNDER AN OWNER-BUILDER PERMIT IN ANY JURISDICTION WITHIN THE 5 YEARS IMMEDIATELY PRECEDING THE APPLICATION FOR A PERMIT.
- 8. THERE MUST BE A THIRTY-SIX (36) MONTH PERIOD BETWEEN THE ISSUANCE OF A CERTIFICATE OF OCCUPANCY FOR THE INITIAL DWELLING AND THE SUBMITTAL OF AN OWNER/BUILDER APPLICATION FOR A SUBSEQUENT DWELLING. NO OTHER BUILDING PERMIT FOR A HOME SHALL BE ISSUED TO THAT OWNER/BUILDER, THE OWNER/BUILDER'S SPOUSE OR ANY MEMBER OF THE OWNER/BUILDER'S IMMEDIATE FAMILY UNDER EIGHTEEN YEARS OF AGE UNTIL THREE YEARS AFTER THE HOME BUILT UNDER THE FIRST BUILDING PERMIT HAS RECEIVED A CERTIFICATE OF OCCUPANCY.
- 9. ALL CONSTRUCTION IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT MUST BE IN STRICT COMPLIANCE WITH FLORIDA STATE STATUTE SECTION 489, SEWALL'S POINTS CODE OF LAWS AND ORDINANCES, ALL BUILDING & ZONING CODES AND REGULATIONS PERTAINING TO SINGLE FAMILY DWELLINGS, ACCESSORY USE STRUCTURES AS APPLICABLE.
- 10. YOUR OWNER/BUILDER EXEMPTION DOES NOT WAIVE ANY PERMIT CONDITIONS OR REQUIREMENTS OR WAIVE ANY PORTION OR PORTIONS OF ANY APPLICABLE BUILDING OR SWIMMING POOL CODES OR TOWN ORDINANCES.
- 11. ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDING PERMIT MUST ALSO BE IN STRICT COMPLIANCE WITH ALL APPLICABLE ZONING REGULATIONS (QUESTIONS REGARDING ZONING REGULATIONS SHOULD BE DIRECTED TO THE TOWN OF SEWALL'S POINT AT 772-287-2455.)



One S. Sewall's Point Road Sewall's Point, Florida 34996 Tel 772-287-2455 Fax 772-220-4765

- 12. YOU MUST BE FAMILIAR WITH AND CALL FOR THE REQUIRED INSPECTIONS OF ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT.
- 13. AS AN OWNER/BUILDER YOU MUST VERIFY THAT ALL INDIVIDUALS OR FIRMS ENGAGED IN CONSTRUCTION/IMPROVEMENTS ACTIVITIES UNDER YOUR OWNER/BUILDER PERMIT ARE PROPERLY LICENSED AS REQUIRED BY STATE LAW OR LOCAL ORDINANCE.
- 14. AS AN OWNER/BUILDER, YOU ARE LIABLE TO AND RESPONSIBLE FOR THOSE PEOPLE HIRED TO ASSIST YOU. SUCH LIABILITY AND RESPONSIBILITY MAY INCLUDE, BUT IS NOT LIMITED TO, COMPLIANCE WITH APPLICABLE LAWS RELATING TO LIENS, WORKERS' COMPENSATION, SOCIAL SECURITY, UNEMPLOYMENT, FEDERAL WITHHOLDING TAX, AND PUBLIC LIABILITY.
- 15. I, AS AN OWNER/BUILDER, IN CONSIDERATION OF A BUILDING PERMIT ISSUED BY SEWALL'S POINT, FLORIDA, AGREE TO INDEMNIFY AND HOLD HARMLESS SAID SEWALL'S POINT, FLORIDA, ITS OFFICERS AND AGENTS FROM ANY AND ALL CLAIMS, DAMAGES, OR EXPENSES THAT SEWALL'S POINT MAY BE LIABLE FOR WHICH ARISE FROM THE CONSTRUCTION/IMPROVEMENTS ACCOMPLISHED IN CONNECTION WITH SAID BUILDING PERMIT.

I HEREBY ACKNOWLEDGE THAT I HAVE THOROUGHLY READ AND COMPLETELY UNDERSTAND THE PRECEDING PAGE OF THE OWNER/BUILDER DISCLOSURE STATEMENT.

ON THIS 20 DAY OF MARCH 120 09.
PROPERTY ADDRESS @ INDIALWIE PKWAY
CITY Sevells Point STATE FC ZIP 34996
SIGNATURE OF OWNER/BUILDER
SWORN TO AND SUBSCRIBED BEFORE ME THIS 36 DAY OF MOUNT 20 09
BY Michael Flaugh
PERSONALLY KNOWN
OR PRODUCED ID 32000 (1)
TYPE OF ID POLITIFICATION OF THE PROPERTY OF ID
The state of the s
NOTARY SIGNATURE

TSP 04/27/2007



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

#### FENCE and or POOL BARRIER CHECKLIST

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

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

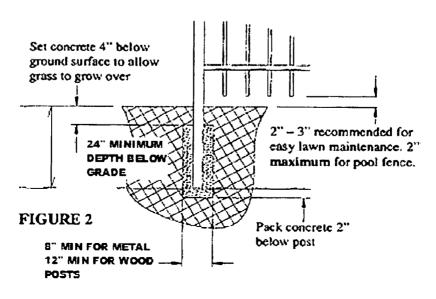
- 1 Copy Completed permit application
  - 2 Copies Survey or site plan showing the following:
  - All existing structures on property
  - Location of proposed fence
  - Setbacks from the fence to property lines
  - Height & type of fence
  - Location of all easements
  - Street & house number on site plans

#### \*DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS\*

**2 Copies** support post footer sketch indicating size of footers. Fences to Be used as a Pool Barrier (other than chain link fence) must include an Accurate sketch or drawing indicating barrier requirement compliance.

2 Copies, if fence crosses any easement, Easement agreement from all utility Companies are required. Agreement form included in permit package.

#### Typical Fence Footer





One S. Sewall's Point Road Sewall's Point, Florida 34996 TeN772-287-2455 Fax 772-2204765

#### FENCE or WALL EASEMENT AGREEMENT

Gentlemen: I propose to apply for a Town of Sewall's Point permit to erect a (type of fence/wall) In the (utility/drainage) easement on my property located at LEGAL DESCRIPTION: LOT\_\_\_\_\_, BLOCK\_\_\_\_\_, SUBDIVISION\_\_\_ Give a brief description of dimensions and location from property lines: In the event you have no objection to this project, please complete this form and return to me at: Address: City: State: Zip: I understand your company will not be responsible in any way for repair or replacement of any portion of This and that any removal or replacement of such, necessary for your use of this easement will be done at my expense. I acknowledge that I will be responsible for any damage caused to your facilities in this (utility/drainage) easement by the construction or maintenance of this structure. Signed: Phone: \*\*\*THE FOLLOWING IS TO BE COMPLETED BY UTILITY COMPANY\*\*\* We agree to the proposed construction under the circumstances described above. By: Title: Company records indicate that a potential conflict DOES DOES NOT exist. The conflict consists of:

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

#### **UTILITY CONTACT LIST**

MARTIN COUNTY UTILITIES: PHIL KEATHLY

772-223-7977

JIM CHRIST

772-288-3034

FLORIDA POWER AND LIGHT: BOB PIRSON

772-223-4253

TANEISHA WHILBY

772-223-4253

COMCAST: WAYNE INGRAM

772-692**-**9010 EXT. 29

BELLSOUTH: SHEILA

772-460-4407

Page 2

	TOWN	OF SEWALLS P	OINT	•
		DEPARTMENT - INSPEC	TION LOG	2009 Page of
Date of Ins				2009 Page01
PERIMIT:#	OWNER/ADDRESS/CONTRACTOR	THE RESERVE THE PROPERTY OF THE PARTY OF THE	and the same property of the same of the same of the same	GOMMENIS
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/	GRIBBEN			INSPECTOR
PERMIT.#	OWNER/ADDRESS/GONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
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9185	braid	Linal	PH55	Close
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				INSPECTOR
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			,	
				INSPECTOR

# 10053 GATE



### 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

	• •	ATINALII	IOP ECTION R	3 NEGOINED F	ON ALL PENIVII	
PERMIT NUMBE	R:	10053		DATE ISSUED:	APRIL 2, 2012	
SCOPE OF WORK: DECORATI		DECORATIV	E GATE			
CONTRACTOR:		ОВ				
PARCEL CONTR	OL I	NUMBER:	353741002-004	-000903	SUBDIVISION	INDIALUCIE, L9, BL 4
CONSTRUCTION ADDRESS:			6 INDIALUCIE P	PKWY		
OWNER NAME:	FLA	AUGH				
QUALIFIER:	ОВ		···	CONTACT PHO	NE NUMBER:	201-9733
						AY RESULT IN YOUR
PAYING TWICE FO						IN FÌNANCING, CONSULT MENCEMENT. A
						TTED TO THE BUILDING
DEPARTMENT PRI	OR 3	TO THE FIRS	T REQUESTED	INSPECTION.		
NOTICE: IN ADDITI					MAY BE ADDITION	JAL RESTRICTIONS
						Y, AND THERE MAY BE
ADDITIONAL PERM					TIES SUCH AS WATE	R MANAGEMENT
DISTRICTS, STATE A	GEN	ICIES, OR FEI	DERAL AGENCIES	•		
24 HOUR NOTICE P	E () II	IDED EOD IN	SPECTIONS ALL	CONSTRUCTION D	OCHARENTS MILET	BE AVAILABLE ON SITE
CALL 287-2455 -				IONS: 9:00AM TO 3:0		
			<u>II</u>	NSPECTIONS		
UNDERGROUND PLUME	_		<del></del>	UNDERGRO		
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SLAB ROOF SHEATHING			<del></del>	TIE BEAM/C		
TIE DOWN /TRUSS ENG				WALL SHEA INSULATIO		
WINDOW/DOOR BUCKS			-	LATH	IV	224
ROOF DRY-IN/METAL	-				N-PROGRESS	
PLUMBING ROUGH-IN				ELECTRICAL		
MECHANICAL ROUGH-IN	N			GAS ROUGH		
FRAMING				METER FINA		
FINAL PLUMBING				FINAL ELEC	TRICAL	
FINAL MECHANICAL				FINAL GAS		
FINAL ROOF				BUILDING F	INAL	
ALL DELINCORCTION	A CCI	EC AND ADD	TIONAL INCORCT	ion deoliests wit	: LRECHADGED 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
	S PERMIT APPLICATION Permit Number: 1005
OWNER/TITLEHOLDER NAME: Mi'chzel Flag	h Phone (Day) 772-201-9733Fax)
Job Site Address: 6 INDIALUCIE PKWY	City: Strat State: FL Zip:3499
Legal Description LOT 9 BLOCK + RAT + P67	Parcel Control Number: 3537410020040009030000
Owner Address (if different):	City:State:Zip:
Scope of work (please be specific):	Decorative)
WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application)	COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 3.00 4
YES NO	(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out is subject property located in flood hazard area? VE10_AE9_AE8_X
YES(YEAR)NOL	FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$
(Must include a copy of all variance approvals with application)	(Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION
CONTRACTOR/Company:	Phone:Fax:
Street:	City:State:Zip:
State License Number: OR: Munici	icense Number:
LOCAL CONTACT:	Phone Number: U
DESIGN PROFESSIONAL:	Lic# Phone Number:
Street:	City: State: Zip:
AREAS SQUARE FOOTAGE: Living: Garage:	Covered Paties/ Porches: Enclosed Storage:  Enclosed Storage:  Enclosed Storage:
Carport: Total under Roof Eleva * Enclosed non-habitable areas below the Base Flood Eleva	ewall S Point Enclosed area below BFE*:
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Buil	ding Code (Structural, Mechanical, Plumbing, Existing, Gas): 20070
	y Code:2007, Florida Accessibility Code:2007/Florida Fire Prevention Code 20
NOTICES TO OWNERS AND CONTRACT  1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMEN	T MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RE	OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. STRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR
ENCUMBERED BY ANY RESTRICTIONS, SOME RESTRICTIONS A	THE YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF
ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE A	MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL AGENCIES, OR FEDERAL AGENCIES.
A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED	SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FO AFTER 24 MONTHS PER TOWN ORDINANCE 50-95. AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF
WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180	DAYS ANY TIME AFTER THE WORK IS COMMENCED WITHIN 180 DAYS, OR IF DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL D. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.15.
	3. X.1. 7. 30 2007 W/ 2000 NEVISIONS SECT. 103.4.1, 103.4.113.
*****A FINAL INSPECTION IS I	REQUIRED ON ALL BUILDING PERMITS*****
APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT TO	DITHERMORK AND INSTALLATIONS AS SPECIFICALLY INDICATED ABOVE. I
HAVE FURNISHED ON THIS APPLICATION IS TRUE AND COM	REGINDARE BEST OF MY KNOWLEDGE. I AGREE TO COMPLY WITH ALL
APPLICABLE CODES, LAWS, AND ORDINANCES OF THE TO	
OR OWNERS LEGAL ANTHORIZED AGENT (PROOF REQUIRED A #DD	CONTRACTOR SIGNATURE: (required)
State of Florida, County of:	od mru into a county of:
This the 30 day of March Miles	TATE OF
by Michael Flaugh who is personally known to me or produced FLDL#F420-544-65	
as identification.	As identification.
Notary Public	Notary Public
My Commission Expires:  SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUE	My Commission Expires:  D WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER
APPLICATIONS WILL BE CONSIDERED ABANDONED AFT	TER 180 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER TER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

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

### generated on 4/2/2012 11:50:25 AM EDT

Parcel ID Account # **Unit Address** 

**Market Total Website** Value Updated

35-37-41-002-004-00090-3

9445

6 INDIALUCIE PKY, STUART

\$428,710

3/31/2012

**Owner Information** 

Owner(Current)

FLAUGH MICHAEL D & JENNIFER T

**Owner/Mail Address** 

6 INDIALUCIE PKY STUART FL 34996

9/20/2001

Sale Date **Document Book/Page** 

1586 0685

Document No.

JKB

Sale Price

80000

Location/Description

Account #

9445

Map Page No.

**SP-03** 

**Tax District** 

2200

Legal Description INDIALUCIE, LOT 9 BLK 4 (LESS: BEG SW COR LOT 8,

Parcel Address

6 INDIALUCIE PKY, STUART

**Acres** 

.5630

NELY ALG S/LN LT 8 135' TO SE COR, S35DEG28'12"W 85.07', S78DEG41'26"W 71.52' TO CURVE, NWLY ALG CURVE

51.38' TO POB)

**Parcel Type** 

**Use Code** 

0100 Single Family

Neighborhood

120500 Melody Hill, India Lucie

**Assessment Information** 

**Market Land Value** 

\$138,000

Market Improvement Value

\$290,710

**Market Total Value** 

\$428,710



### TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

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

### FENCE and or POOL BARRIER CHECKLIST

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

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

1 Copy Completed permit application

2 Copies Survey or site plan showing the following:

All existing structures on property

Location of proposed fence

Setbacks from the fence to property lines

Height & type of fence

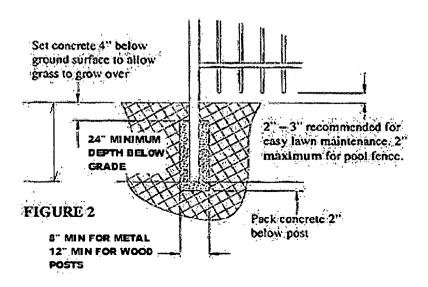
Location of all easements

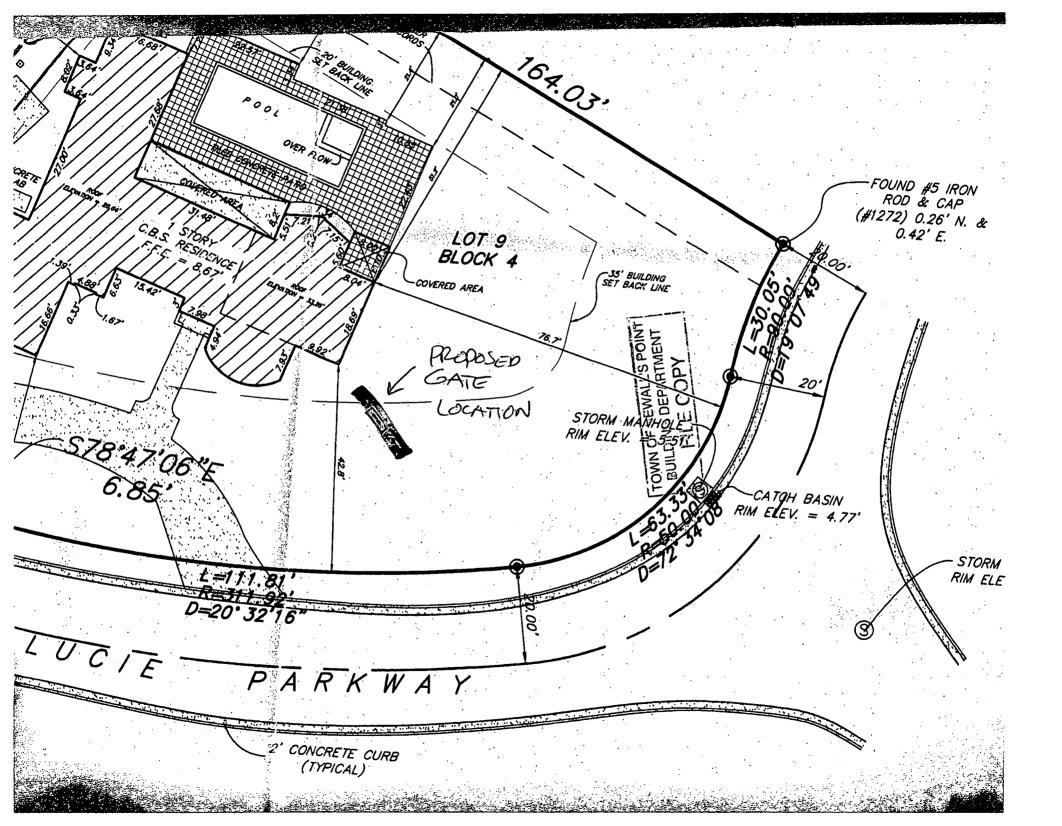
### \*DO NOT SUBMIT PREVIOUSLY STAMPED SITE PLANS\*

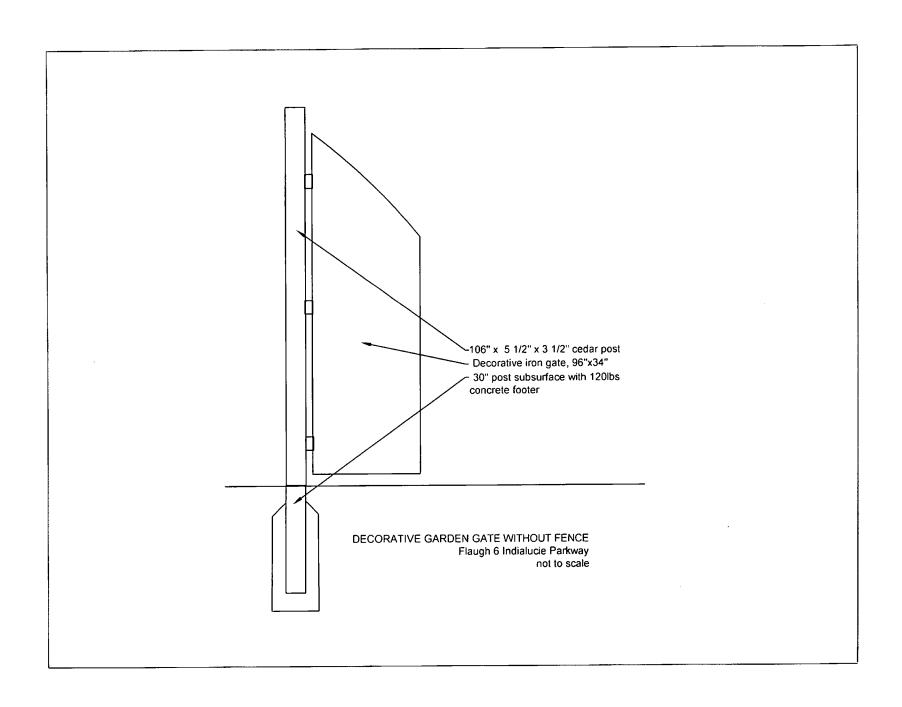
• Street & house number on site plans

2 Copies support post footer sketch indicating size of footers. Fences to Be used as a Pool Barrier (other than chain link fence) must include an Accurate sketch or drawing indicating barrier requirement compliance.
 2 Copies, if fence crosses any easement, Easement agreement from all utility Companies are required. Agreement form included in permit package.

### **Typical Fence Footer**







### TOWN OF SEWALLS POINT BUILDING DEPARTMENT - INSPECTION LOG Fri 4-13-12 Page 2 of = Wed Date of Inspection Thur Mon PERMIT # OWNER/ADDRESS/CONTRACTOR INSPECTION TYPE RESULTS COMMENTS 0055 shutters COMMENTS INSPECTION TYPE RESULTS PERMIT # OWNER/ADDRESS/CONTRACTOR INSPECTION TYPE COMMENTS INSPECTOR PERMIT # OWNER/ADDRESS/CONTRACTOR INSPECTION TYPE RESULTS COMMENTS **INSPECTOR** PERMIT # OWNER/ADDRESS/CONTRACTOR INSPECTION TYPE RESULTS COMMENTS INSPECTOR PERMIT # OWNER/ADDRESS/CONTRACTOR INSPECTION TYPE RESULTS COMMENTS INSPECTOR CERMIT W OWNER/ADDRESS/CONTRACTOR HIS DECTION TWEET RESULTS COMMENTS INSPECTOR

## 10860 A/C Change Out



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:	10860		DATE ISSUED:	5/13/2014	
SCOPE OF WORK:	A/C CHA	NGE OUT			
CONTRACTOR:	NISAIR A/C				
PARCEL CONTROL N	UMBER:	353741	002004000903	SUBDIVISION	INDIALUCIE LOT 9, BLK 4
CONSTRUCTION ADD	RESS:	6 INDIAL	UCIE PKY		
OWNER NAME:	FLAUGH				
QUALIFIER:	PHILIP NISA	A JR	CONTACT PHO	ONE NUMBER:	772 466-8115

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 - <u>ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE</u>
CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

### INSPECTIONS

DIADEKOKOOND PLUMBING	 UNDEKOKOOND 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	
	 <del>_</del>	

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:	108	360								
ADDRESS:	6 INDIALUC	TE PARKW	AY							
DATE ISSUED:	5/13/2014	SCOPE OF	WORK:	A/C CHANGE OUT						
SINGLE FAMILY OR ADDITION /REMODEL Declared Value \$										
Plan Submittal Fee (\$3	50.00 SFR, \$	175.00 Remo	odel < \$200	OK)	\$					
(No plan submittal fee	No plan submittal fee when value is less than \$100,000)									
Total square feet air-co	nditioned spa	<u>@</u>	\$ 121.75	per sq. ft. s.f.		\$				
Total square feet non-c	onditioned sp	-								
			\$ 59.81			\$				
Total square feet remod	del with new t	trusses:	\$ 90.78	per sq. ft. s.f.		\$				
Total Construction Val	ue:				\$	\$				
Building fee: (2% of co	onstruction va	lue SFR or >	\$200K)		\$		n/a			
Building fee: (1% of co	nstruction va	lue < \$200K	+ \$100 per	insp.)		\$				
Total number of inspec	tions (Value	< \$200K)	\$ 100.00	per insp. # insp		ļ	n/a			
Dept. of Comm. Affairs	s Fee: (1.5% o	of permit fee	- \$2.00 mi	n)	\$		n/a			
DBPR Licensing Fee: (					\$		n/a			
Road impact assessmer	nt: (.04% of co	onstruction v	ralue - \$5 m	nin.)			n/a			
Martin County Impact	Fee:				\$					
TOTAL BUILDING	PERMIT FE	<b>E</b> :			\$	\$	_			
ACCESSORY PERMIT			Declared V		\$	\$	6,980.00			
Total number of inspec	tions:	<u>@</u>	\$ 100.00	per insp. # insp	\$ 1.00	\$	100.00			
Dept. of Comm. Affair	s Fee: (1.5% o	of permit fee	- \$2.00 mi	n)	\$	\$	2.00_			
DBPR Licensing Fee: (	1.5% of perm	it fee - \$2.00	) min.)		\$	\$	2.00			
Road impact assessmer	nt: (.04% of co	onstruction v	alue - \$5 m	in.)	-	\$	5.00			
TOTAL ACCESSOR	Y PERMIT	FEE:				\$	109.00			

Pd 5/13/14 CK 30780

	ewall's Point
Date: 5-8-14 BUILDING PE	RMIT APPLICATION Permit Number: 10860
	Phone (Day) 201-9733 (Fox) 201-9299
Job Site Address: 10 Indiature Phus	1
	rcel Control Number: 35-37-41-002-004-00090-3
	Address:
City: State: Zip: Telep	hone:
*SCOPE OF WORK (PLEASE BE SPECIFIC): ( )	o to like Alc Chance ou A 5 tout
WILL OWNER BE THE CONTRACTOR?	COST AND VALUES: (Required on AL permit applications)
(If yes, Owner Builder questionnaire must accompany application)	Imated Value of Improvements: \$ 6680000000000000000000000000000000000
Has a Zoning Variance ever been granted on this property?	ubject property located in flood hazard area? VE10AE9AE8X
FOR	*ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: imated Fair Market Value prior to improvement. \$
(Must include a copy of all variance approvals with application)	FairMarket Value of the Primary Structure only, Minus the land value)
Construction Company DISCIP AC	Phone: 466-8115 Fax: 468-9745
Qualifiers name: DHN MISCOK Street: 3700	S.U.S. Huy 1 City: At Deus State: Pt zip34982
State License Number CCCOGIGG OR: Municipality:	
	Phone Number: 466-815
	Fla. License#
DESIGN PROFESSIONAL:	
Street: City	
AREAS SQUARE FOOTAGE: Living: Garage:	
。如此是一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个一个	eater than 300 sq. ft. require a Non-Conversion Covenant Agreement.
CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Co National Electrical Code: 2008, Florida Energy Code: 2010, Florida Ac	ode (Structural, Mechanical, Plumbing, Existing, Gas). 2010 cessibility Code: 2010, Florida Fire Prevention Code: 2010
WARNINGS TO OWNERS AND CONTRACTOR	
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY	RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR 🔙 I
NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON	THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY AS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC REC	SENCUMBERED BY ANY DEED RESTRICTIONS, SOME BESTRICTIONS  ORDS OF MARTIN COUNTY OR THE TOWN OF SEWARDS POINT, THERE
MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMEN	TAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE
AGENCIES, OR FEDERAL AGENCIES.  3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBST	ANTIAL IMPROVEMENTS TO SINGLE FAMELY RESIDENCES ARE VALID FOR
A PERIOD OF 24 MONTHS, RENEWAL FEES WILL BE ASSESSED AFTER 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHOR	24 MONTHS PER TOWN ORDINANCE 50-85-1
WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS A	TANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL
BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF.	The state of the s
*****A FINAL INSPECTION IS REQUI	RED ON ALL BUILDING PERMITS******
AFFIDAVIT: APPLICATION IS HEREBY MADE TO OBTAIN A PERMIT THAT NO WORK OR INSTALLATION HAS COMMENCED PRIOR TO T	TO DO THE WORK AS SPECIFICALLY INDICATED ABOVE. I CERTIFY
FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE	BEST OF MY KNOWLEDGE. I AGREE TO COMPLY WITH ALL
APPLICABLE CODES, LAWS, AND ORDINANCES OF THE TOWN OF	SEWALL'S POINT DURING THE BUILDING PROCESS.
OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE	CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
X	State of Florida County of St Lead 16
State of Florida, County of:	A AND AND AND AND AND AND AND AND AND AN
On This the	On This the day of 100 who is correctly
who is personally known to me or produced	known to me or produced 1 who is personally
As identification.	As identification. Millie Chiron Janason
Notary Public '	NOTAR WIND PUBLIC
My Commission Expires:	My Commission Exples STATE OF FLORIDA
SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITH APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180	IN 30 DAYS OF APPROVAL TO THE TOATION ESC 3069.4) ALL OTHER DAYS (FBC 105.3.2) - PLEASE PICK WINGS UB DEFMUT PROMPTLY!

.

### STATE OF FLORIDA



DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD 1940 NORTH MONROE STREET TALLAHASSEE FL 32399-0783

(850) 487-1395

NISA, PHILIP ANTHONY JR NISAIR AIRCONDITIONING 3700 SOUTH US HIGHWAY 1 FORT PIERCE FL 34982

Congratulations! With this license you become one of the nearly one million Floridians licensed by the Department of Business and Professional Regulation. Our professionals and businesses range from architects to yacht brokers, from boxers to barbeque restaurants, and they keep Florida's economy strong.

Every day we work to improve the way we do business in order to serve you better For information about our services, please log onto www.myfloridalicense.com. There you can find more information about our divisions and the regulations that impact you, subscribe to department newsletters and learn more about the Department's initiatives.

Our mission at the Department is: License Efficiently, Regulate Fairly. We constantly strive to serve you better so that you can serve your customers. Thank you for doing business in Florida, and congratulations on your new license!

STATE OFFLORIDA AC# E 1 7 2 1 8 5
DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION
CACO41199 A 606/23/(12 117061426

CERTIFIED ATR COND CONTR NISA PHILTE MANTHONY JR NISAIR ATRCONDITIONING

IS CERTIFIED under the provisions of ch. 489 rs. Repiration date: AUG 31, 2014 L12062300256

### **DETACH HERE**

### THIS DOCUMENT HAS A COLORED BACKGROUND • MICROPRINTING • LINEMARK PATENTED PAPER

AC# 6172185

#### STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION CONSTRUCTION INDUSTRY LICENSING BOARD SI

**SEQ#** L12062300256

DATE BATCH NUMBER LICENSE NBR THE \$7.06.04.1199 CAC.04.1199 CAC.04

The CLASS B AIR CONDITIONING CONTRACTOR

Named below IS CERTIFIED Under the provisions of Chapter 489 FS

Expiration date: AUG 31, 2014

NISA, PHILIP ANTHONY JR
NISAIR AIRCONDITIONING
3700 SOUTH US HIGHWAY 1
FORT PIERCE FL 34982

RICK SCOTT

KEN LAWSON SECRETARY

DISPLAY AS REQUIRED BY LAW

### CERTIFICATE OF LIABILITY INSURANCE

NISAI-1

OP ID: KR

DATE (MM/DD/YYYY) 01/03/14

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

certifica	ite holder in lieu of such endorsei	ment(s).			
PRODUCER Stuart insurance, inc. 3070 S W Mapp Palm City, FL 34990 Joseph E. Coons, CPCU. CIC.		Pnone: //2-200-4334	10111121		
		Fax: 772-286-9389	PHONE (A/C, No, Ext):	FAX (A/C, No)	
			E-MAIL ADDRESS:		,
			INSURER(8) AFFORDING COVERAGE		NAIC#
			INSURER A : Southern Owners		10190
INSURED	Nisair Air Conditioning		INSURER B : Auto Owners Insurance Co		18988
	3700 S. US Highway 1 Fort Pierce, FL 34982		INSURER C:		
			INSURER D :		
			INSURER E :		
			INSURER F:		
COVERA	GES CERTI	FICATE NUMBER:	R	EVISION NUMBER:	

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

NOR TYPE OF INSURANCE

ADDL SUBR INSR WYD
POLICY NUMBER

MINIS POLICY EFF (MM/DD/YYYY)

LIMITS

TAGLICOCUPERTORS

1 000 00

LTR	TYPE OF INSURANCE	INSR	WYD	POLICY NUMBER	(WW/DD/YYYY)	(MM/DD/YYYY)	LIMIT	8	
	GENERAL LIABILITY		ł				EACH OCCURRENCE	s	1,000,000
Α	X COMMERCIAL GENERAL LIABILITY		i	72728868	12/20/13	12/20/14	DAMAGE TO RENTED PREMISES (Ea occurrence)	s	300,000
	CLAIMS-MADE X OCCUR						MED EXP (Any one person)	s	10,000
							PERSONAL & ADV INJURY	s	1,000,000
	X EMPL BENE 1000000						GENERAL AGGREGATE	s	2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	5	2,000,000
	POLICY PRO-						Emp Ben.	\$	1,000,000
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	\$	500,000
В	X ANY AUTO			9682637600	12/20/13	12/20/14	BODILY INJURY (Per person)	\$	
	ALL OWNED SCHEDULED AUTOS						BODILY INJURY (Per accident)	\$	
	HIRED AUTOS NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	s	_
		Ĺ						\$	
	X UMBRELLA LIAB X OCCUR						EACH OCCURRENCE	\$	1,000,000
Α	EXCESS LIAB CLAIMS-MADE			4849136100	12/20/13	12/20/14	AGGREGATE	s	1,000,000
	DED X RETENTIONS 10,000							\$	
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY						WC STATU- OTH-		
	ANY PROPRIETOR/PARTNER/EXECUTIVE	N/A					E.L. EACH ACCIDENT	\$	
	(Mandatory in NH)					ļ ·	E.L. DISEASE - EA EMPLOYEE	\$	
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - POLICY LIMIT	\$	
В	CRIME			72716485	02/04/13	02/04/14			
DES	CRIPTION OF OPERATIONS / LOCATIONS / VEHICL	FS 14	ttach	ACORD 101 Additional Remarks Schadu	In if more space is	(berlupen a			

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES (Attach ACORD 101, Additional Remarks Schedule, If more space is required)

Air Conditioner Contractor – Florida Employees Only

CERTIFICATE HOLDER	CANCELLATION	

**TOWNS-1** 

Town of Sewalls Point fax 220-4765 1 S Sewalls Point Road Stuart, FL 34996 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.

AUTHORIZED REPRESENTATIVE

Joseph E. Coons



ERTIFICATE OF LIABILITY INSURANCE DATE (MM/DD/YYYY) 12/30/2013 THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER. IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(les) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s). Phone: 772-287-5532 CONTACT PRODUCER The Plastridge Agency-STO 10337 N. Military Trail Palm Beach Gardens, FL 33410 Fax: 772-287-5572 Jean Reed Parks INSURER(S) AFFORDING COVERAGE NAIC # INSURER A . Zenith Insurance Co. Nisair Air Conditioning INSURFO INSURER B 3700 S US HWY 1 Fort Pierce, FL 34982 INSURER D COVERAGES. CERTIFICATE NUMBER: **REVISION NUMBER:** THIS IS TO CERTIFY THAT THE POLICIES OF INSURANCE LISTED BELOW HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. NOTWITHSTANDING ANY REQUIREMENT, TERM OR CONDITION OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN. THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS. EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS. ADDL SUBR POLICY EFF POLICY EXP.
(MM/DD/YYYY) (MM/DD/YYYY) TYPE OF INSURANCE POLICY NUMBER GENERAL LIABILITY EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) COMMERCIAL GENERAL LIABILITY CLAIMS-MADE OCCUR MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE GENL AGGREGATE LIMIT APPLIES PER PRODUCTS - COMPIOP AGG POLICY PRO-AUTOMOBILE LIABILITY OMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) ANY AUTO ALL OWNED SCHEDULED BODILY INJURY (Per accident AUTOS NON-OWNED AUTOS PROPERTY DAMAGE (Per accident) HIRED AUTOS 2 UMBRELLA LIAB OCCUR **EACH OCCURRENCE** EXCESS LIAB CLAIMS-MADE AGGREGATE DED RETENTIONS WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR PARTNER EXECUTIVE OFFICER MEMBER EXCLUDED? (Mandatory in NH) Z069531607 01/01/2014 01/01/2015 500.000 E.L. EACH ACCIDENT 500,000 E.L. DISEASE - EA EMPLOYEE \$ If yes, describe under DESCRIPTION OF OPERATIONS below 500.000 E.L. DISEASE - POLICY LIMIT | S DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES, (Attach ACORD 101, Additional Remarks Schedule, If more space is required)

CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS Sewalls Point 1 S. Sewalls Point Road **AUTHORIZED REPRESENTATIVE** Stuart, FL 34996

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CERTIFICATE HOLDER

ST. LUCIE COUNTY LOCAL BUSINESS TAX RECEIPT RECEIPT # 1711-20060002 2013 / 2014

CHRIS CRAFT, ST. LUCIE COUNTY TAX COLLECTOR

**FACILITIES OR** 

EXPIRES SEPTEMBER 30, 2014

**MACHINES** 

**SEATS** 

**EMPLOYEES** 29

TYPE OF

AIR COND/PLUMBING CONTRACTOR 1711

ROOMS

(AIR CONDITIONING)

**BUSINESS** 

BUSINESS/ Philip Anthony Nisa Jr

MAILING

DBA NAME Nisair Air Conditioning NIsalr Air Conditioning

**ADDRESS** 

3700 S US Hwy 1

Fort Pierce, FL 34982

BUSINESS 3700 S US Hwy 1 LOCATION Fort Pierce, FL 34982

City of Fort Pierce

575220

Paid 07/15/2013 27.55

0019-20130715-008140

RENEWAL ORIGINAL TAX \$27.55 PENALTY **COLLECTION COST** TOTAL \$27.55

Law regulres this Local Business Tax Receipt to be displayed conspicuously at the place of business in such a manner that it can be open to the view of the public and subject to inspection by all duly authorized officers of the county. Upon failure to do so, the Local Business Taxpayer shall be subject to the payment of another Local Business Tax for the same business, profession, or occupation.

Pursuant to State Law, all Local Business Tax Receipts shall be sold by the Tax Collector beginning July 1st of each year and shall expire on September 30th of the succeeding year. Those Local Business Tax Receipts renewed beginning October 1st shall be delinquent and subject to a delinquency penalty of 10% for the month of October, plus an additional 5% penalty for each month of delinquency thereafter until paid; provided that the total delinquency penalty shall not exceed 25% of the Local Business Tax for the delinquent establishment.

In addition to the penalty, the Tax Collector shall be entitled to a collection cost fee of from \$1.00 to \$5.00, based on the amount of the Local Business Tax, which shall be collected from delinquent taxpayers after September 30th, of the business year.

This receipt is a Local Business Tax only. It does not permit the Local Business Taxpayer to violate any existing regulatory or zoning laws of the state, county or cities. It also does not exempt the Local Business Taxpayer from any other taxes, licenses or permits that may be required by law.

Local Business Taxes are subject to change according to law.

Nisair Air Conditioning 3700 S US Hwy 1 Fort Pierce, FL 34982

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

generated on 5/13/2014 8:17:21 AM EDT

**Market Total Website Unit Address** Parcel ID Account # Updated Value 35-37-41-002-004- 9445 \$434,700 5/10/2014 6 INDIALUCIE PKY, STUART 00090-3

Owner Information

Owner(Current)

FLAUGH MICHAEL D & JENNIFER T

Owner/Mail Address

6 INDIALUCIE PKY STUART FL 34996

Sale Date

9/20/2001

**Document Book/Page** 

1586 0685

Document No.

·JKB

Sale Price

80000

Location/Description

Account #

9445 2200

.5630

Map Page No.

SP-03

**Tax District Parcel Address** 

Acres

6 INDIALUCIE PKY, STUART

Legal Description INDIALUCIE, LOT 9 BLK 4 (LESS: BEG SW COR LOT

8, NELY ALG S/LN LT 8

135' TO SE COR,

S35DEG28'12"W 85.07', S78DEG41'26"W 71.52' TO CURVE, NWLY ALG CURVE 51.38' TO POB)

Parcel Type

**Use Code** 

0100 Single Family

Neighborhood

120500 Melody Hill, India Lucie

**Assessment Information** 

**Market Land Value** 

\$170,000

Market Improvement Value

\$264,700

**Market Total Value** 

\$434,700



Signature \

### TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

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

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

Air Conditioning C	Change out Affidavit FILE COPY					
Residential Commercial	1100					
Package Unit Yes No (Use Condenser side	e of form below for equipment listing)					
Duct Replacement YesNo - Refrigerant li	ne replacement YesNo					
Flushing Existing Refrigerant linesYesNo	- Adding Refrigerant Drier Yes No					
Rooftop A/C Stand Installation Yes No - C	Curb Installation YesNo					
Smoke Detector in Supply (over 2000 CFM) Yes	No					
One form required for each A/C system installed						
<u>REPLACEMENT</u> SYS	TEM COMPONENTS					
Air handler: Mfg: Rund Model# Kullimilory	Condenser: Mfg Puul Model#1497m54A01					
Volts OFM's 6000 Heat Strip 10 Kw	Volts <u>330</u> SEER/EER <u>10</u> BTU's <u>54000</u>					
Min. Circuit Amps <u>42</u> Wire gauge <u>6</u>	Min. Circuit Amps 35 Wire gauge 8					
Max. Breaker size Min. Breaker size	Max. Breaker size <u>60</u> Min. Breaker size <u>35</u>					
Ref. line size: Liquid $\frac{3}{2}$ Suction $\frac{1}{2}$	Ref. line size: Liquid 3/2 Suction 7/8					
Refrigerant type 2410 A	Refrigerant type Refrigerant type					
Location: Existing New	Location: Existing New					
Attic/Garage/Closet (specify)	Left/Right/Rear/Front/Roof					
Access:	Condensate Location					
NOTE: <u>CONTRACTOR</u> MUST SUPPLY A PROPE	R LADDER IF REQUIRED FOR INSPECTION					
EXISTING SYSTE	M COMPONENTS					
Air handler: Mfg: What Model# NA	, , , , , ,					
Volts CFM's Heat Strip Kw	Volts SEER/EER 10 BTU's 6000					
Min. Circuit Amps 45 Wire gauge 6	Min. Circuit Amps 35 Wire gauge _ 8					
Max. Breaker size 60 Min. Breaker size 45	Max. Breaker size Min. Breaker size 3					
Ref. line size: Liquid 3/8 Suction 7/2	Ref. line size: Liquid 3/8 Suction 7/8					
Refrigerant type	Refrigerant type 2-2-2					
Location: Ext New	Location: Ext. New					
Attic/Garage/Closet (specify) ATTIC	Left/Right/Rear/Front/Roof					
Access:	Condensate Location Sws					
Certification:						
I herby certify that the information entered on this form a further that this equipment is considered matched as required that the information entered on this form a further that this equipment is considered matched as required to the information entered on this form a further than the information entered on this form a further than the information entered on this form a further than the information entered on this form a further than the information entered on this form a further than the information entered on this form a further than the information entered on this form a further than the information entered on the information entered on the further than the information entered on the information entered on the information entered on the information entered on the information entered on the information entered on the information entered on the information entered on the information entered on the information entered on the information entered in the	rired by FBC – R (N)1107 & 1108					

Date



### TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road Sewall's Point, Florida 34996 Tel: 772-287-2455Fax772-220-4765 10860 FWP

### FLORIDA ENERGY CONSERVATION CODE

### **Mandatory Duct Inspection Certification for HVAC change-out**

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

Owner: Michael Flaugh Contractor name: MSAIR AC	
Street address: 6 Indialucie pkwy Jurisdiction:	
City: Stude Permit No.:	_
Zip: 34996 Final inspection date:	
I certify that I have inspected the duct work associated with the HVAC unit referenced by the permi listed above and found it complies with the requirements of Section 101.4.7.1.1 as indicated below	
<ul> <li>Where needed, the existing ducts have been sealed using reinforced mastic or code-approve equivalent.</li> <li>Ducts are located within conditioned space. (Section 101.4.7.1.1 exception 1)</li> </ul>	:d
The joints or seams are already sealed with fabric and mastic (Section 101.4.7.1.1 exception	2)
System was tested (see pelow) and repairs were made as necessary – (Section 101.4.7.1.1 exception 3)  Date:	
Printed Name:	
I certified I have tested the replaced air distribution system(s) referenced by the permit listed above a pressure differential of 25 Pascals (0.10 in. w.c.).	e at
Signature: Date:	
Printed Name:	



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

## **Certificate of Product Ratings**

AHRI Certified Reference Number: 3799471

Date: 5/8/2014

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower

Outdoor Unit Model Number: 14AJM56

Indoor Unit Model Number: RHLL-HM6024+RCSL-H\*6024

Manufacturer: RHEEM SALES COMPANY, INC.

Trade/Brand name: RHEEM, RUUD, WEATHERKING

Series name:

Manufacturer responsible for the rating of this system combination is RHEEM SALES COMPANY, INC.

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

Cooling Capacity (Btuh): 54000

EER Rating (Cooling): 13.00

SEER Rating (Cooling): 16:00 Cooling Capacity (Btuh):

IEER Rating (Cooling):

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

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**CERTIFICATE NO.:** 

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AIR-CONDITIONING, HEATING, & REFRIGERATION INSTITUTE

we make life better™



## DesignStar Load Calculation Results are intended for use with Rheem heating and cooling systems

The New Degree of Comfort

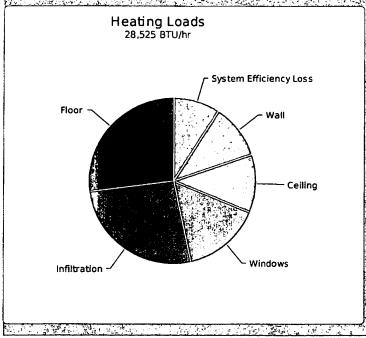
Winter ventilation

Summer ventilation

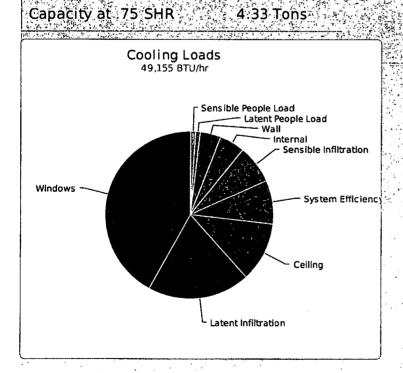
Customer Inform	ation
Street Address	6 INDIALUCIE PKWY, Stuart, FL 34996
Latitude, Longitude	26.6726°, -80.0706°
House Square Footage:	2663 sq. ft.
Name:	FLAUGH
Phone:	
Email:	
House Informatio	
SHR	75
Number of residents	2
Ceiling height	9
Wall Ų-value   R-value	0.09   11
Floor U-value   R-value	0.2   5
Ceiling U-value   R-value	0.053,  19
Window U-value	0.5
Window SHGF	0.85
Moisture grains	64
Duct{lôss∜	10
Duct gain %	10
Cooling infiltraction (ACH)	0.6
Heating infiltration (ACH)	0.8

Outdoor		Heating	Cool	ing	
Dry bulb (°F)		<b>47</b>	90		٠.
Daily range	eliteren i den garaga egenerak erreziatu an unann i ganapmende garaga	îşer din ana dînasî serbenciêy îşe radi par remana azer are, en per azeran çûr :	М	Appropriate Community of Commun	
Relative humidity			50%		
Moisture difference		en la companya de la companya de la companya de la companya de la companya de la companya de la companya de la	64	Resident Constitution of the Constitution of t	
Indoor		He	ating Co	oling	
ndoor, temperature (°F)		70	75		
Design temperature differenc	e(°F)	23	15		

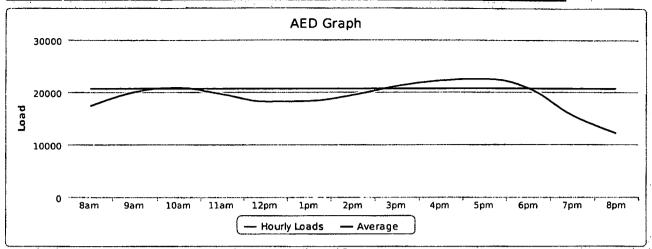
Heating Loads		
Area	Btuh	% of load
Wall	3055	10.7
Floor	7719	27.1
Ceiling	3246	11.4
Windows	4393	15.4
Infiltration	7519	26.4
System Efficiency Loss	2593	9.1
Total	28525	



Cooling Loads	Borra (Br.) Sayer .	3 S	- J. 254 (47)
Area	Btuh	% of lo	oad ·
Wall	1992	4.1	
Ceiling,	5646	11.5	
Windows	20653	42	
Sensible Infiltration	36 <b>7</b> 8	7,5	
Latent Infiltration	9700	19.7	
System Endency Cam	2007	8.5	
Internal	2400	4.9	
Sendible Reople Loca	460	0.0	
Latent Reople Load	460	0.9	
Total: 📲 - Nation 2	*¥49155		
Sensible load	389	95 5	
Latentiload	101	45	
SHR	0.79		



### Adequate Exposure Diversity



### Equipment selection

System equipment selection will be made using the following derived values.

Glass (E)	193 sq. ft.
Glass (S)	2-7-sq: ftr
Glass (N)	27 sq. ft.
Glass (W)	135 sq. ft
Summer Outdoor	90°F
Summer Wet Bulb	78°F
Summer Indoor	75°F
Summer Design Grains	50%
Winter Outdoor	47°F
Winter Indoor	7.0°F
Sensible Cooling	38,995 Btuh
Latent Cooling	10,160 Btuh
Required Cooling Airflow	1,773 CFM
Sensible Heating	28.525 Btuh
Required Heating Airflow	370 CFM

All calculations are based upon approved hvac industry standards and procedures, and comply with all local; state and federal code requirements. All computed results are Estimates. Product provided by Energy Design Systems and Idea Tree



· R-410A



### **14AJM-**

14.5 SEER Models Efficiencies up to 17 SEER/13.50 EER Nominal Sizes 11/2 to 5 Tons [5.28 kW] to [17.6 kW]

### **Nine Models**

**Cooling Capacities** 19,600 to 56,500 BTU/HR [5.74 to 16.56 kW]



### **14.5 SEER VALUE SERIES CONDENSING UNITS**

### **Features**

- Painted louvered steel cabinet
- Easily accessible control box
- Condenser coils constructed with copper tubing and enhanced aluminum fins
- Grille/Motor mount for gulet fan operation
- Filter Drier (shipped not installed)

### **Applications**

Outdoor condensing unit designed for ground level or rooftop installations. These units offer comfort and dependability for single, multi-family and light commercial applications.

### Accessories

- Low Pressure Control (RXAC-A07)
- High Pressure Control (RXAB-A07)
- Low Ambient Control (RXAD-A08)
- Compressor Time Delay Control
- Crankcase Heater
- Sound Enclosure











"Proper sizing and installation of equipment is critical to achieve optimal performance. Split system air conditioners and heat pumps must be matched with appropriate coll components to meet ENERGY STAR criteria. Ask your Contractor for details or visit www.energystar.gov."

### 115V/208V/240V/460V Airflow Performance Data—RHLL (X-13 (ECM) Motor)

	1	Melor	Manufacturer	Blower Stze/	1	П	T -	X-13 CFM (	L/s] Air Dali	very/RPM/	Vatts115/	208/240 Vnf	ts.				
Model No.	Tonnage	Speed	Recommended	Motor	Motor	l	<del></del>			Pressure—							
RHLL	Application	From Factory	Air-Flow Range (Min/Max) CFM	HP (W)	Speed		0.1 [.02]	0.2 [.05]	0.3 [.07]	0.4 [.10]	<del></del>	0.6 [.15]	0.7 (.17)				
		racius	(minimax) or in	w or open	<del> </del> -	CFM	689 (325)	644 [304]	602 [284]		509 [240]		-				
		İ			2	RPM	580	633	683	728	781		<del>  _</del> -				
-2417 No Heater 1.5 Ton		509/681 CFM	10x6	_	Watts	66	84	86	68	91	<del> </del>	<del> </del>					
	5	[249/321 L/s]	1/3 HP [249] 5 Speed	<del>                                     </del>	CFM	<del>                                     </del>	<del>                                     </del>	<del>                                     </del>	-	681 [321]	644 [304]	603 [285]					
			i	3 apecu	3	RPM					835	879	916				
			ì			Watts	<del> </del>	<del> </del>			136	143	152				
}				<del> </del>		CFM	670 (316)	625 (295)	583 (275)	544 [257]	490 [231]	_					
İ			l		2	RPM	608	661	711	756	809	<del>                                     </del>					
-2417	4.5.	_	480/666 CFM	10x6		Watts	75	93	95	47	100	<b> </b> -	<del>-</del>				
with 13 kW Heater	1.5 Ton	5	[231/314 L/s]	1/3 HP [249] 5 Speed		ÇFM	_	_		<b>—</b>	888 [314]	629 [297]	588 [277]				
					3	RPM	<u> </u>			<del>  -</del>	855	899	936				
						Watts	_	l –		<b>—</b>	144	151	160				
			1			CFM	875 [413]	839 [396]	804 (379)	762 [360]	730  345	_	_				
					4	RPM	679	724	765	810	852		_				
-2417	2 Ton	5	730/851 CFM	10x6 1/3 HP [249]		Walts	121	131	135	142	143						
No Heater	2 1011		{345/307 L/s}	5 Speed	i	CFM					862 [407]	828 [391]	801 [378]				
					5	RPM	-				904	940	970				
						Watts	_	_		-	203	215	228				
						CFM	856 [404]	820 (387)	785 [370]	743 [351]	711 [336]	-					
					4	RPM	707	752	793	838	880		_				
-2417 With 13 KW	-2417 with 13 kW 2 Ton	5	711/626CFM	10x6 1/3 HP (249)		Watts	130	140	144	151	152	[_ <del>_</del>					
Heater		J	[336/295 L/5]	5 Speed	5	CFM	_	_	_		837 (395)	803 [379]	776 [366]				
		İ				RPM					924	960	990				
						Watts					211	223	288				
				10x8 1/2 HP (373) - 5 Speed		CFM	1093 [516]	1050 [496]		977 [461]	935 [441]						
					1/2 HP (373)		1/2 HP (373)	1078	2	RPM	671	725	764	809	852		
-3617 No Heater	2.5 Ton	5	935/1084 CFM [441/512 L/s]						Watte	153	168	174	180	188			
NO REALET			[441/0121/5]				ÇFM					1084 [512]	1040 [491]	1001 [472]			
1	Į				3	RPM					896	936	971				
						Watts	1000 (504)	4005 1404)	-	-	249	257	261				
					, }	CFM	1068 (504)	1025 [484]	992 (468)	952 [449]	<del></del>						
-3617				10x8	2	RPM	711	765	804	849	892						
WITH 18 KW	2.5 Ton	5	910/1059 CFM [429/500 L/s]	1/2 HP [373]		Watts	164	179	185	191	199	1015 (470)	070 (401)				
Heater	į		1440,440	5 Speed	3	RPM					1059 [500] 936	1015 [479] 976	976 [461]				
					,	Watts				_	260	268	1011 272				
						CFM	1270 [599]		1199 [566]	1165 [550]			212				
ŀ	i				4	RPM	775	816	84B	882	926						
-3617	- 1		1130/1275 CFM	10x8		Watts	237	249	259	268	277						
No Heater	3 Ton	5	[533/602 L/s]	1/2 HP [373]		CFM				200		1244 [587]	1211 [571]				
i				5 Speed	5	RPM			<del>-</del>	-	963	999	1029				
1			į		-	Watts					338	348	363				
						CFM	1245 [588]	1212 [572]	1174 (554)	1140 [538]		340	-				
					4	RPM	815	856	886	922	966						
-3617		_ }	1105/1250 CFM	10x8	-	Watts	248	260	270	279	288						
with 18 kW Heater	3 Ton	5	[521/590 L/s]	1/2 HP [373]		CFM		-		, <u></u>	1250 [590]	1219 (574)	1186 [560]				
uealei			_	5 Speed	-	RPM		_		_	1003	1039	1069				
	ŀ	[	1	i	1.	Walls					349	359	374				
otes: X-13 /	5014)	<u> </u>									<b>743</b>	903					

Rheem Heating, Cooling and Water Heating

Notes: X-13 (ECM) motor speed changes.

All X-13 (ECM) motors have 5 speed tabs. Speed tab 1 is for continuous fan. Speed tab 2 (low static) and Speed tab 3 (high static) are for lower tonnage.

Speed tab 4 (low static) and Speed tab 5 (high static) are for higher tonnage.

X-13 (ECM) air handlers are always shipped from factory at Speed tab 5, except for -4824, which is set at Speed tab 3. For instance, RHLL-HM2417JA is always shipped at high static 2-ton airflow (Speed tab 5). To change to 1.5-ton airflow, move the blue wire to Speed tab 2 or 3 on the X-13 (ECM) motor. The low static Speed tab 2 (lower tonnage) and 4 (higher tonnage) are used for external static exceeding 0.5° WC. Move the blue wire to the appropriate Speed tab as required by the application needs.

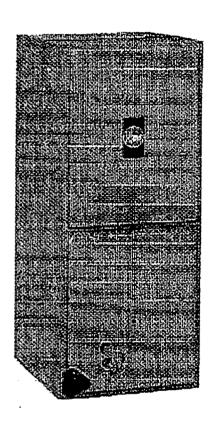
The airflow for continuous tan (Speed tab 1) is always set at 50% of the Speed tab 4.

The above airflow table lists the airflow information for air handlers without heater and air handler with maximum heater allowed for each model.

<sup>The above airflow table lists the airflow information for air handlers without hoater and air handler with maximum heater allowed for each model.
The following formula can be used to calculate the approximate airflow, if a smaller (N kW) than the maximum heater kit is installed.</sup> Approximate Airflow = Airflow without heater - (Airflow without heater - Airflow with maximum heater) x (N kW/maximum heater kW)

<sup>[ ]</sup> Designates Metric Conversions

## AIRFANDLERS





### **AIR HANDLERS**

RHLL- High Efficiency featuring Industry Standard R-410A Refrigerant

. ይፈንተር ነ ይ

RHSL- Standard Efficiency featuring Industry Standard R-410A Refrigerant

- A-490A

### **Features**

- RHLA/RHLL feature GE's new X-13 (ECM) motor which provides enhanced SEER performance with most Rheem outdoor units.
- 11/2 ton [5.3 kW] through 5 ton [17.6 kW] models are between 421/2 to 551/2 inches [1080 to 1410 mm] tall and 22 inches [559 mm] deep.
- Versatile 4-way convertible design for upflow, downflow, horizontal left and horizontal right applications.
- = Factory-installed high efficiency indoor coil.
- All models meet or exceed 330 to 400 CFM [156 to 189 L/s] per ton at .3 inches [.7 kPa] of external static pressure.
- Enhanced airflow up to .7" external static pressure.
- Sturdy construction with 1.0 inch (.24 kPa) of reinforced foil faced jacket insulation for excellent thermal and sound insulation.
- Field-installed auxiliary electric heater kits provide exact heat for indoor comfort. Kits include circuit breakers which meet UL and cUL requirements for service disconnect.









. Kleen-outside 12,000 per ton

### **Electrical and Physical Data**

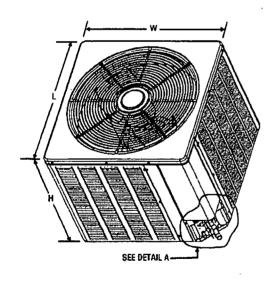
	ELECTRICAL							P	HYSICAL				
Model	Phase		pressor	Fan Motor			HACR	Ou	tdoor (	Coll	Refrigerant	We	ight
No. 14AJM	Francisco PHT1	Rated Load Amperes (RLA)	Locked Rolor Amperes (LRA)	Full Load Amperes (FLA)	Ampacity	Minimum	Breaker Maximum Amperes	Face Area Sq. Ft. [m²]	No. Rows	CFM (L/s)	Per Circuit Oz. (g)	Not Lbs. (kg)	Shipping Lbs. (kg)
Rev. 3	/11/2010												
18	1-60-208/230	9/9	48	0.8	12/12	15/15	20/20	16.39 [1.52]	1	2805 [1324]	112 [3175]	154 [69.9]	171 [77.6]
24	1-60-208/230	13.5/13.5	58,3	0.8	18/18	25/25	30/30	16.39 [1.52]	1	2805 [1324]	105.6 [2994]	154 [69.9]	171 [77.6]
30	1-60-208/230	12.8/12.8	64	1.4	18/18	25/25	30/30	16.39 [1.52]	1	2915 [1376]	112 [3175]	157 [71.2]	175 [79.4]
36	1-60-208/230	16.7/16.7	79	1.9	23/23	30/30	35/35	21.85 [2.03]	1	3435 [1621]	130.4 [3697]	181 [82.1]	201 [91.2]
42	1-60-208/230	17.9/17.9	112	2.8	26/26	30/30	40/40	21.85 [2.03]	1	3550 [1675]	145.12 [4114]	205 [93]	225 [102.1]
48	1-60-208/230	21.8/21.8	117	2.8	31/31	40/40	50/50	21.85 [2.03]	2	4310 [2034]	216 [6124]	249 [112.9]	269 [122]
49	1-60-208/230	19.9/19.9	109	1.9	27/27	35/35	45/45	21.85 [2.03]	2	3615 [1706]	213 [6039]	249 [112.9]	269 [122]
56	1-60-208/230	21.4/21.4	135	1.9	29/29	35/35	50/50	21.85 [2.03]	2	3615 [1706]	241 [6832]	254 [115.2]	274 [124.3]
60	1-60-208/230	28.4/26.4	134	2.8	36/36	45/45	60/60	21.85 [2.03]	2	4310 (2034)	240 [6804]	254 [115.2]	274 [124.3]

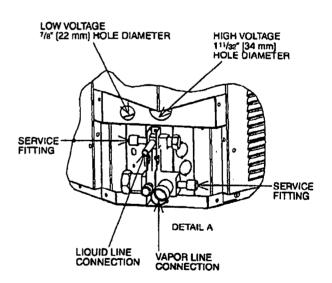
NOTE: Factory Refrigerant Charge Includes refrigerant for 15 feet of standard line set.

### **Unit Dimensions**

Model No.		Unit Dimensions	
14AIM	Width "W" (nches [mm]	Length "L" Inches (mm)	Height "H" inches (mm)
18, 24, 30	315/8 [803]	31% [803]	273/8 [695]
36, 42, 48, 49, 56, 60	315/8 [803]	315/8 [803]	353/8 [899]

### [ ] Designates Metric Conversions





## THE METAL SHOP

Custom Metal Manufacturer

## ANCHOR CLIPS Installer's Guide

Consulcing Engineer: Douglas W. Lowe, P. FLA# 13355

Brandon, Rt.

WARTING HAZARDOUS FOLINGS DISCOMEST POWER BEFORE SERVICING

FART NUMBER

174 (106 bor)

1770 (4 pk including hardingre)

CONSTRUCTION
16 Sume indications detect of the control of the cont

PACKAGING DETAILS

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

### INSTALLATION

Minimum of 2 #14 x 8/4" screws with neopene washed required o faster clip to condenser with neopene washed required to faster clip to condenser with 1/4" x 1 3/4" Topion screw required to faster clip to condenser with 1/4" x 1 3/4" Topion screw required to faster clip to condenser pad.

Locali the such or clips to fit comfortably between condenser until and pad.

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

All handware must be fasteried prior to connecting refrigerant lines and electrical power in the wait. Suitable for gambal motoried units.

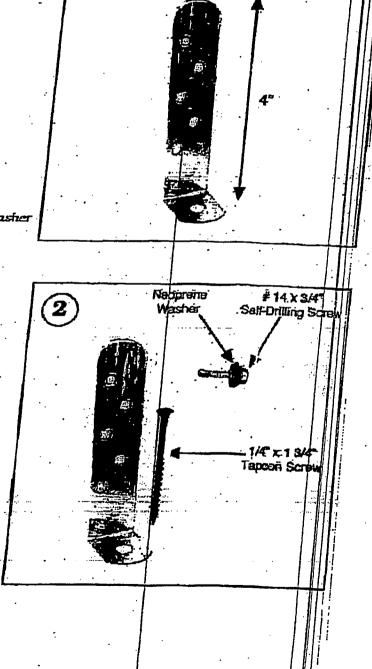
Anchor clip deskip meets requirements of the Florida Building Code; 2007 (Building) chapter 301.12 for using resistance up to 140 MPH.

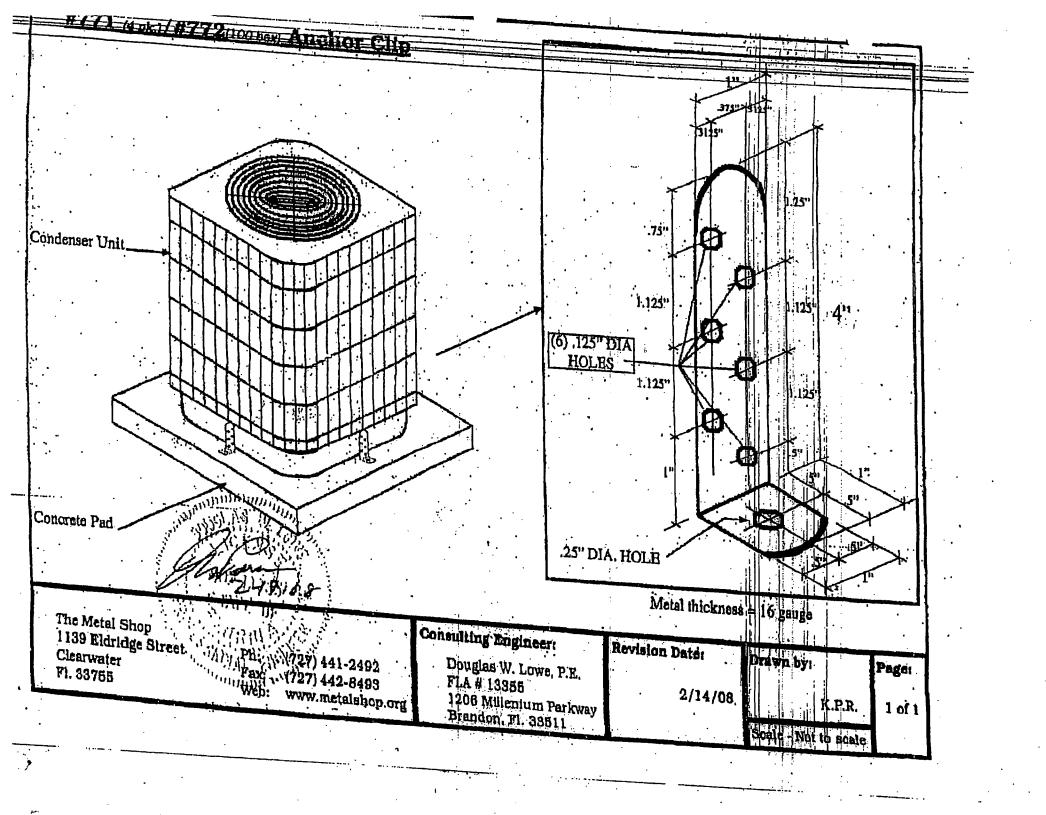
### PEATURES

The use of "steed to fit" screw holes compared to slips means that security is never computation. A tight secure fit between pad and condenser ensures security for the condenser and offers speat assumes during extreme weather conditions.

#### NOTE

Above installation instruction suitable for up to 5 ton with.





Hari Solet et 1710 di III de 1713, esch pur Barch no Feet 18 no c'holet leth fre arde a feet pur Barch de China 11 y Coude Leth Conjoen de 1818 eschedd vil Ventur Sinti 112241 IN THE CHAPTER SELL THE POSITY STEEL CHARGENESS TO MINE AND THE CHARGES SHE YIELD SO IN THE STEEL CHARGES DEFINED. 1 .ed. BO. V3 HOLED PRINCIPLE DIVILITIES OF \$\Pi\$ 12 STRINGS OF THE TWO BYART THE PLANE TO A STRINGS OF THE PROPERTY OF \$\Pi\$ 12 STRINGS OF THE PRINCIPLE OF THE PROPERTY OF THE PRINCIPLE OF THE PR इंटर्ग है (i-+u-0 .A.A. ATTACKED. YYY Siscipto vio 1. Addi Hitiniii A. Divirlis ii list irosi ito vid is list isocoss 11 Ciscipton vi cus vid 16 destito alis off. Ori soli Pyddilonyr upul vid və sedilosema usut si gove DRAMA A/C UNIT ANCHORING DETAILS
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FATBOY CLIPS AS
MANUFACTURED BY: THE
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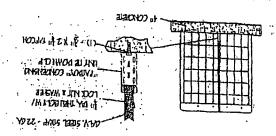
103 AS-107 30 .or ·FT-0 109 00 a C .05 E δL At o RESPONDED TO SAN REAL PRINTS BY MALE BY REAL PRINTS

VILVOING TO A LACULA CR STEEL. साम के महामानाता रूप कराति । भारत इस एसरा श्राहर त्यार होता में

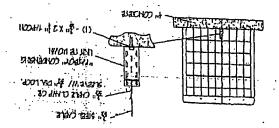
वर अठवन वस्त्र वा अवाद्या वा चारा

PATRON STRAP INSTALLATION GLICE

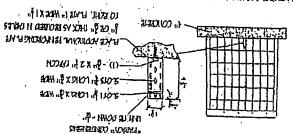
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### "TATION" CABLE INSTALLATION OF THE



### "FATROY" NSTALLATION OLET





AIR CONDITIONING Lic.# CACO-41189

3700 S US Highway One Fort Pierce, FL 34982

Martin: (772) 283-0904 St. Lucie: (772) 466-8115 Toll Free 1-877-7NISAIR

NAME MIKE F-TAUGH	DATE 5-7-1-
ADDRESS 6 /NOID LUCET PLOUS	JOB LOCATION
STUBET F1. 34996	
Hm#. <u>201~973?</u> Fax.#	FPL Acct/Meter # 0250184421
THERMOSTATS	PIPING & FITTINGS
Digital Thermostat	Repipe Suction & Liquid Lines at new Unit. Insulate
☐ Humidistat	New Suction Line & Secure Low Voltage Wiring.  New Refrigerant Copper Tubing Line Set Overhead Exterior
ELECTRIC INDOOR AND OUTDOOR	Line cover Includes Armaflex & Detailed Workmanship.
☐ New Disconnect Box & Wiring	RECLAIM / EVACUATION / REFRIGERANT
יים רוופוז עטונמטט עעוויווק ווים New Weatherproof Conduit & Connections For Outside Un	<b>A</b>
New Weatherproof Conduit & Connections For Inside Unit	☐ Liquid Line Drier ☐ Suction Line Drier
AIR DISTRIBUTION/DUCT MODIFICATION	☐ Triple Evacuation to Remove Moisture & Impurities
☐ Increase Return Duct Size to:	☑ Refrigerant Weighed in to Factory Specifications
□ New Return Air Grille Size to:	EQUIPMENT ACCESSORIES
Modify New Fiberglass Return Plenum	□ Precast Concrete Slab
☑ Modify New Fiberglass Supply Air Plenum ☐ Strap, Hang and Support New Plenums	☐ Condensate Pump. Power Cord & Fuse  ☑ Vibration Pads under the Outdoor Unit
☐ Strap, Hang and Support New Floriding ☐ Seal Wall Cracks and Crevices to not Draw Attic Air	Emergency Drain Pan & Support
☐ Liquid Mastic Sealant All New Duct Connections	Overflow Water Safety Switch
□ New Wood Top & Paint White	☐ 5 Minute Time Delay/Compressor Protector
☐ Polyboard insulate Return Air Platform & Mastic Seal ☐ Seal Off Return Air Platform for Air Leaks	<ul> <li>☐ Hurricane Strap Outdoor Unit to Ground</li> <li>☐ Potential Relay &amp; Start Capacitor for Compressor</li> </ul>
- Geal Off Hotalii Air Flationii toi Air Leake	☑ Clean, Treat & Flush Drain Line System
FILTRATION / CLEAN AIR	
□ BWT Poly Media Air Filter <u>Zoxzo - 1 1                                </u>	( ) **Please Note - Duct Sealing if Required by
□ High Efficiency Cleaner <u>20x2/1-( " w/ (</u> □ Ultra Violet Light System <u>20x2/1-1 wos4</u> (	(6) Florida Statutes Code 101.4.7.1.1 (6) \$85/Hr Plus Materials
•	to new unit requirements, not included in our cost
	Scheduled Maint. Must be Performed on System)
LINION A HOER RUPO	B HOLE C
AH Model # CBXZ7UH-060 AH Model # 24	HILHM 6024 TA AH Model # ARUF OGS 014
	. V \
Cond Model # /L/ACX -059   Cond Model # /L/	1977 M-56101 Cold Model # VSX -1360701
Cond Model # 1490x -059   Cond Model # 149  SEER/5 Aux. Heat 10 KW   SEER/6 Aux.	1 \ '
SEER/5_Aux. Heat_/O_KW SEER/6_Aux.	Heat 10 KW SEER/3 Aux. Heat 10 KW
SEER/5_Aux. Heat_/O_KW SEER/6_Aux.	Heat 10 KW SEER/3 Aux. Heat 10 KW
SEER/S Aux. Heat / O KW SEER/ C Aux.  Compressor / O year Condenser Coil / O year Evaporator Coll / O year Manufacture Parts / O year Manufacture Parts	Heat 10 KW SEER/3 Aux. Heat 10 KW  10 year Compressor 10 year Contenser Coil 10 year Evaporator Coil 10 year Manufacture Parts 10 year
SEER Aux. Heat / KW SEER Aux.  Compressor / year Condenser Coil / year Evaporator Coll / year Manufacture Parts Labor / year Labor	Heat 10 KW SEER/3 Aux. Heat 10 KW  10 year Compressor 10 year 10 year Condenser Coil 10 year 10 year Evaporator Coil 10 year 10 year Lubor 10 year
SEER Aux. Heat / KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor  Job Quote  SEER Aux.  SEER Aux.  Compressor Condenser Coil Evaporator Coil Evaporator Coil Manufacture Parts Labor Job Quote  SEER Aux.  SEER Aux.  Aux.  SEER Aux.  SEER Aux.  Aux.  For a vear Anufacture Parts Labor Job Quote  ST210,00  Job Quote	Heat 10 KW SEER/3 Aux. Heat 10 KW  10 year Compressor 10 year 10 year Condenser Coil 10 year 10 year Evaporator Coil 10 year 10 year Libor 10 year 11 year John Seer Seer Seer Seer Seer Seer Seer See
SEER/S Aux. Heat / O KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor  Job Quote FPL Rebate Discounts  SEER/G Aux.  Compressor Condenser Coil Evaporator Coil Manufacture Parts Labor  Job Quote FPL Rebate Discounts	Heat 10 KW    10   year   Compressor   10   year
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SEER/S Aux. Heat / O KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor  Job Quote FPL Rebate Discounts	Heat 10 KW    10   year   Compressor   10   year
SEER Aux. Heat / KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor  Job Quote FPL Rebate Discounts Amount Due By Customer  SEER Aux.  SEER Aux.  Compressor Condenser Coil Evaporator Coil Manufacture Parts Labor  Job Quote FPL Rebate Discounts Amount Due By Customer  We hereby propose to complete work as specified	Heat 10 KW    10   year     Year   Year     Year   Y
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SEER Aux. Heat	Heat 10 KW    Compressor   No year
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SEER Aux. Heat / KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor  Job Quote FPL Rebate Discounts Amount Due By Customer  We hereby propose to complete work as specified Payment options: Finance  PAYMENT TERMS: 25% deposit required with balance up  SEER / Aux.  Compressor Condenser Coil Evaporato	Heat 10 KW    Compressor
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SEER/S Aux. Heat / O KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor Job Quote FPL Rebate Discounts Amount Due By Customer  We hereby propose to complete work as specified Payment options: Finance  PAYMENT TERMS: 25% deposit required with balance up  SEER/Le Aux.  Compressor Condenser Coil Evaporator Coil Manufacture Parts Labor Job Quote FPL Rebate Discounts Amount Due By Cu	Heat 10 KW  10 year 20
SEER/S Aux. Heat / O KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor Job Quote FPL Rebate Discounts Amount Due By Customer  We hereby propose to complete work as specified Payment options: Finance  PAYMENT TERMS: 25% deposit required with balance up  SEER/ D Aux.  Compressor Condenser Coil Evaporator Coil Evaporator Coil Manufacture Parts Labor Job Quote FPL Rebate Discounts Amount Due By Customer  SCA 70.00  We hereby propose to complete work as specified of the complete work as specified	Heat 10 KW    Note
SEER/S Aux. Heat / O KW  Compressor Condenser Coil Evaporator Coll Manufacture Parts Labor Job Quote FPL Rebate Discounts Amount Due By Customer  We hereby propose to complete work as specified Payment options: Finance Payment options: Finance SPECIAL COMMENTS & MODIFICATIONS:    O   Payment	Heat 10 KW  10 year 20

Customer Signature:

Tech Signature: \_

2-14 Bruniponke TOWN OF SEWALES POINT Building Department - Inspection Log / Fri 8/19 -14 Page / of Date of Inspection Mon Plaugh Final A/C INSPECTOR 10664 MARTIN Final 3 Quail Ron Ln NNB Concrete CLUTE Walkway L'Expiredpermit Concrete Plus INSPECTOR 9314 Slater 31 Lofting Way rence CLOSE Expired permit owe's INSPECTOR ESMMESTA OMNIEWANDERESS/GOMENACE 10718 Nehme Shearing Y158 Ocean tront Novins Final 10683 Screen sere + stairs red IIISSPR CLOSE RJ Maddox + Sons INSPECTOR PERMITER OWNER/ADDRESS/GONER/AGTOR Frence + 10625 nos spe Block Wall CLOSE (Expired) INSPECTOR PERMIT DWNER/ADDRESS/CONTRACTOR INSPECTION DAY COMMENTS Elder 16626 WATER Feature NASS: 1105 SPR Fountain (Expired) INSPECTOR A

# TREE

### TOWN OF SEWALL'S POINT, FLORIDA

Date 10/24/01 19.	TREE RE	MOVAL PERMIT	№ 0509
Owner Michael FCA  Owner Michael FLARA  Sub-division WDIALKIE  6	ugh	(C	ontractor or Owner)
Owner INCHAIS PLANA	IDIAL WAE F	ZVW.	
Sub-division (NDIMUCIE-	, Lot	, Block _	<del></del> .
Kind of Trees SEE SUME			
No. Of Trees: REMOVE			
No. Of Trees: RELOCATE WI	THIN 30 DAYS (N	O FEE)	
No. Of Trees: REPLACE WI	THIN 30 DAYS		
REMARKS	<b>\</b>		
Signed, Applicant	Signed,	FEE \$	15XX
	l	Buldi	ny Office
WN OF SEWALL'S POI			i12:00 Noon for Insp :00 P.M.—NO SUNDAY WO
TDEE DEAM	MAI	DED	AIT
TREE REMO		PEKI	AFI [
XE:	ORDINANCE 103 PROJECT DESC	RIPTION	

PROJECT DESCRIPTION
<u> </u>
REMARKS

### TOWN OF SEWALL'S POINT

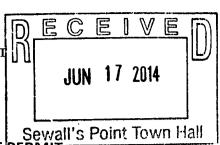
### APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit	#
Date Is	sued:
This application shall include a written statement giving reasons for rem and a site plan which shall include the dimensional location on a survey, photograph, superimposed with lot lines to scale, of all existing or proposand site uses, location of affected trees identified with an estimated size	scale drawing, or aerial seed structures, improvements and number, etc.
Owner Michael Flagh Address 7 Sinara Phone  Contractor Gary Hirmsul Address Phone  Number of trees to be removed (list kinds of trees) See 21121	201-9733, 223-4138
Contractor Ory Human Address Phone	
Number of trees to be removed (list kinds of trees)	shd_
<i>''</i>	
Number of trees to be relocated within 30 days (no fee) (list kinds of tree	es):
11	
Number of trees to be replaced: (list kinds of trees):	
Permit Fee \$ 15.00 \$15.00	
(No permit fee for trees which are relocated on property or lie within a ut to be removed in order to provide utility service, nor for a tree which is chazardous to life or property.)	itility easement and are required dead, diseased, injured or
Plans approved as submitted Plans approved as market	ed
Permit good for one year. Fee for renewal of expired permit is \$5.00.	
Signature of applicant Plans approved as marke	ed
Signature of applicant  Plans approved as market  Approved by Building Inspector  Date submitted	d: 10/2401.
Approved by Building Commissioner Date	
Completed Date Checked by	

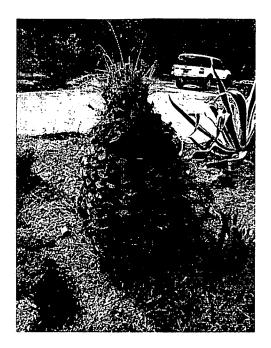
THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT A FEE. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

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





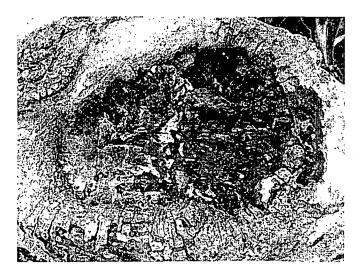
Sewall's Point Town Hall
TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT
CALL 8:00 AM – 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM – NO SUNDAYS
Owner FLAUGH Address G INDIALUCIE Phone 772-419-0024
Contractor Cu N = Y Address Phone
Contractor ON NEW Address Phone  No. of Trees: REMOVE 2 Species: CANARY (SLAPO DATE, CHERRY LAUREL
No. of Trees: RELOCATE Species:
No. of Trees: REPLACE Species:
***ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION***
ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY
Reason for tree removal /relocation (See notice above) SEE ATTACHED, CANARY DIED  FROM PALM BELETLE, CHERY LAUREL 1 + AS EXPENSIVE DISEASE DA  Signature of Property Owner Date G 17 2014  Approved by Building Inspector: Date 6 18 14 Fee: NC 6
Signature of Property Owner Date C 17 2014
Approved by Building Inspector:  Approved by Building Inspector:  Date 6:18:14 Fee: N/6 6
Spring inspector.
NOTES:
DISEASED CHARLY LAWLED  EX.  EATE  INDIANALIE DELY -
DEAD CANADA)



Canary Island Date died suddenly, I suspect from a palm beetle.



Bark splitting from disease and insect invasion on trunk of Cherry Laurel



Wood rot from old wound on Cherry Laurel

TOWN OF SEWALLS POINT				
BUILE Date of Inspection Mon Tu	DING DEPARTMENT - JNSP E Wed Inthur		18-14 Page of _	
PERMITE OWNER/ADDRESS/GONIRAGI	OR INSPECTON ME	# RESULTS	EOMMENTS (10-1)	
10518 Stilliams	Tenal Co.		215-0074	
24 Castle Hell i		BASS	215-0074 15848 C.O.	
Driftwood Hor			INSPECTOR A	
PERMIT# GWNER/ADDRESS/CONTRACT	OR NEPEGRION TYPE IS	RESULTS	COMMENTS	
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16 OAR ATU WA	LATAE Y INSULATION	18 MS		
			INSPECTOR A	
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6 INDIANCIE	y	de		
			INSPECTOR .	
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			INSPECTOR	
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EDWINE SWANDSAND COMES NEW YORK			INSPECTOR	
ERMITE# OWNER/ADDRESS/CONTRACTION	MASSECTION WASTERN SERVICES	RESULTS	COMMENTS	
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	- 631 0438			
1			INSPECTOR	