

# **2 Mandalay Road**

**1589**

**SATELLITE DISH ANTENNA**

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Permit No. 1589

Date 6.30.83

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

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

Owner ROBERT ROGERS Present Address 2 MANDAGLAY DR.

Phone \_\_\_\_\_ SEWALLS PT.

Contractor AUDIO-VIDEO BROKERS INC. Address 411 S. FEDERAL HWY

Phone 287-1145 STUART, FLA

Where licensed FLORIDA License number \_\_\_\_\_

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

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

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

2 MANDAGLAY DR. SEWALLS PT.  
State the street address at which the proposed structure will be built:

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

Contract price \$ 5,000 Cost of permit \$ 25XX

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

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

Contractor [Signature]

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

Owner \_\_\_\_\_

TOWN RECORD

Date submitted \_\_\_\_\_ Approved: [Signature] 7/7/83  
Building Inspector Date

Approved: [Signature] 7/7/83 Final Approval given: 7/7/83  
Commissioner Date Date

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

SP1282

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

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

# 1589

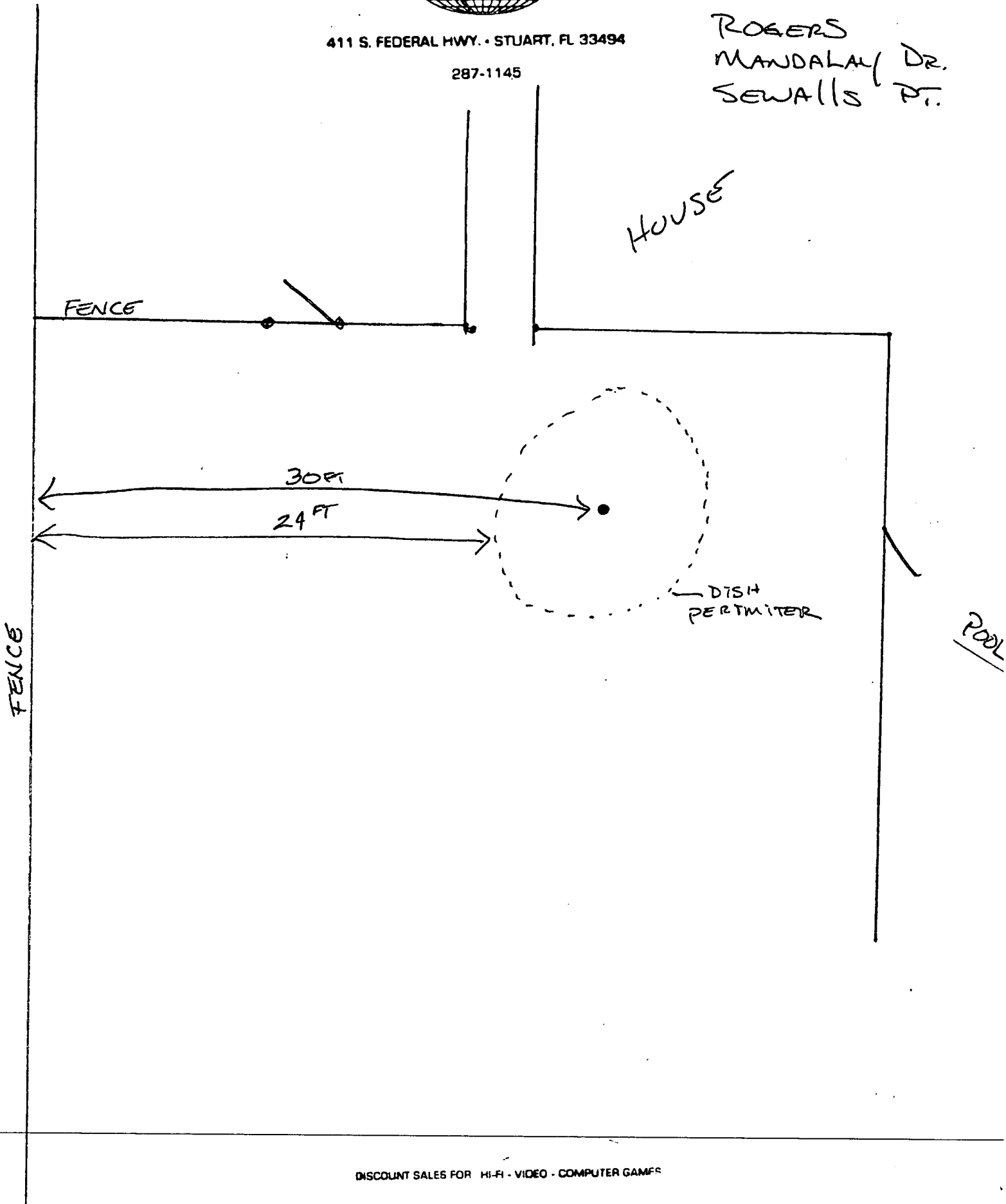


# AUDIO VIDEO BROKERS

411 S. FEDERAL HWY. • STUART, FL 33494

287-1145

ROGERS  
MANDALAY DR.  
SEWALLS Pt.



**CERTIFICATE OF INSURANCE**

This is to certify that

STATE FARM FIRE AND CASUALTY COMPANY, Bloomington, Illinois  
 STATE FARM GENERAL INSURANCE COMPANY, Bloomington, Illinois

has in force for

Audio Video Brokers Inc.

Name of Policyholder

411 US Hwy #1

Address of Policyholder

Stuart, FL 33494

location of operations

Martin, St. Lucie, and surrounding counties

the following coverages for the periods and limits indicated below.

POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD (eff./exp.)	LIMITS OF LIABILITY
98-67-4084	<input checked="" type="checkbox"/> Business Owners	6/13/83-6/13/84	<input type="checkbox"/> Dual Limits for: BODILY INJURY Each Occurrence \$ <u>300,000</u> Aggregate \$ <u>300,000</u>  PROPERTY DAMAGE Each Occurrence \$ <u>300,000</u> Aggregate \$ <u>300,000</u>  <input type="checkbox"/> Combined Single Limit for: BODILY INJURY AND PROPERTY DAMAGE Each Occurrence \$ _____ Aggregate \$ _____  CONTRACTUAL LIABILITY LIMITS (If different than above) BODILY INJURY Each Occurrence \$ _____ PROPERTY DAMAGE Each Occurrence \$ _____ Aggregate \$ _____
	<input type="checkbox"/> Comprehensive General Liability		
	<input type="checkbox"/> Manufacturers' and Contractors' Liability		
	<input type="checkbox"/> Owners', Landlords' and Tenants' Liability		
The above insurance includes (applicable if indicated by <input checked="" type="checkbox"/> ) <input checked="" type="checkbox"/> PRODUCTS - COMPLETED OPERATIONS <input type="checkbox"/> OWNERS' OR CONTRACTORS' PROTECTIVE LIABILITY <input type="checkbox"/> CONTRACTUAL LIABILITY			
POLICY NUMBER	TYPE OF INSURANCE	POLICY PERIOD (eff./exp.)	
	<input type="checkbox"/> Watercraft Liability		
	<input type="checkbox"/>		
	<input type="checkbox"/>		
	<input type="checkbox"/> Workmen's/Workers' Compensation-Coverage A Employer's Liability Coverage B		Coverage A STATUTORY Coverage B \$ _____

\*Aggregate not applicable if Owners', Landlords' and Tenants' Liability Insurance excludes structural alterations, new construction or demolition.

THE CERTIFICATE OF INSURANCE IS NOT A CONTRACT OF INSURANCE AND NEITHER AFFIRMATIVELY NOR NEGATIVELY AMENDS, EXTENDS OR ALTERS THE COVERAGE AFFORDED BY ANY POLICY DESCRIBED HEREIN.

NAME AND ADDRESS OF PARTY TO WHOM CERTIFICATE IS ISSUED

Audio Video Brokers, Inc.

Date 6/29/83  
 Signature of Authorized Representative Kim Hawley  
 Title Agent