2 Marguerita Drive

3778

SFR

#3778

Tax Folio No. _____

RECEIVED MAR - 5

TOWN OF SEWALL'S POINT, FLORIDA

BUILDING PERMIT APPLICATION

Owner's Name John + Carolyn DelPrete

Owner's Address 921 NE Sandalwood Place Jensen Beach FL 34957

Owner's Telephone 334-0237

Fee Simple Titleholder's Name (if other than owner) _____

Fee Simple Titleholder's Address (if other than owner _____

City _____ State _____ Zip _____

Contractor's Name Owner Bldg.

Contractor's Address Same

City _____ State _____ Zip _____

Contractor's Telephone _____ License Number _____

Job Name DelPrete

Job Address ~~Same~~ #2 Marguerita drive

City Town of Sewall's Point State Florida Zip 34996

Legal Description LOT 10 Marguerita Subdivision

Plat Book 10 Page 3

Bonding Company n/A

Bonding Company Address _____

City _____ State _____

Architect/Engineer's Name William Mathers, PE #19658

Architect/Engineer's Address 1111 S. Federal Hwy Suite 226 Stuart FL 34994

Mortgage Lender's Name n/A

Mortgage Lender's Address _____

Carolyn DelPrete Carolyn DelPrete DATE 4/13/95
(Owner or Authorized Agent)

Sworn and Subscribed before me this

13th day of April 1995 (SEAL)

Joan H Barrow

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

OFFICIAL NOTARY SEAL
JOAN H BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30,1998

Carolyn DelPrete Carolyn DelPrete DATE 4-13-95
(Contractor)

Sworn and Subscribed before me this

13th day of April 1995 (SEAL)

Joan H. Barrow

NOTARY PUBLIC
State of Florida at Large
My Commission Expires:

OFFICIAL NOTARY SEAL
JOAN H BARROW
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC423705
MY COMMISSION EXP. NOV. 30,1998

Certificate of Competency Holder

Contractor's State Certification or Registration No. N/A

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY Dale Brown Permit Officer

_____

For Official Use Only

Plans approved as submitted _____ Date _____

Plans approved as marked ✓ Date 4/12/95

A/C Area 3528 sq. ft. x $60. = $ 211,680 00

Non A/C Area 910 sq. ft. x $25. = $ 22750 00

Total = $ 234,430

Contract Price $ 157,800 (fee will be charged on higher amount)

#4302

commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS and AIR CONDITIONERS, etc.

OWNER'S AFFIDAVIT: I certify that all the foregoing information is accurate and that all work will be done in compliance with all applicable laws regulating construction and zoning.

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.

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

Plumbing Contractor Still Plumbing License No. CFCA19235

Electrical Contractor Ciufo Bros. License No. _____

Roofing Contractor Cardinal Roofing License No. #CCC032513

A/C Contractor Classic Cooling License No. CAC029403

Description of Building or Alterations Single family residence w/ garage

Name of Street Designated as Front Building Line and Front Yard Marguerita Drive

Subdivision Marguerita Subdivision Lot 10 Block _____

Building Area (air conditioned) 3528 sq. ft.

Garage, Porch, Carport Area 910 sq. ft.

Contract Price (excluding carpet, land, appliance, landscaping)

* $ 157,800.00

211.50
22.50
234.00

1880 Building Fee
400 Trades
1508 20 Impact
44 38 Radon
3,832 58
3,470.00 25% owner Builder
4,302 58 TOTAL

Electrical Fee	$ 100.00
Plumbing Fee	$ 100.00
Roofing Fee	$ 100.00
Radon Fee	$ 44.38
County Impact Fee	$ 1,508 20
TOTAL PERMIT FEE	$ 4,302 58/100

PAYMENT RECEIVED _____
Signature Date

Contractor's License N/A
Sub-Contractors' Licenses ✓
Workers' Comp. Insurance ✓ ☐ subs Need
General Liability Insurance ✓ ☐ subs need
Macey said it was o.k.
Three sets of Plans ✓
Plans sealed by architect or engineer ✓
Plot Plan [redacted]
Boundary survey
Topographic survey certified to the Town of S.P. [redacted] ☐ Need o/k
Recorded warranty deed ✓
Septic tank permit [redacted] Need
Ron from Ark said he gave you this.
Energy Code calculations [redacted] ✓
Elevation certificate [redacted]
Recorded notice of commencement ✓
Application for c.o. [redacted] ✓

2/93

#3778

improvements to existing buildings which alter the dimension or height of the building. The survey shall:

(a) Be prepared by a licensed surveyor registered in Florida, signed, dated and sealed, and shall bear the name, firm or residence address, city, certificate number of the surveyor and date of the field survey;

(b) Be dated not more than 30 days prior to the certificate of occupancy;

(c) Contain a complete legal description;

(d) Reference the source of information used in making the survey;

(e) Contain the address of the property, including street name and number, and show the proximity of all boundary streets;

(f) Indicate the flood zone(s) in which any portion of the building is located, even though the property may not be in a flood hazard area;

(g) Show the exact lot dimensions, including boundary lines and arcs, which must match the Plat, with any variations being noted;

(h) The scale of the map shown on the survey shall be at least 1" = 10'.

(i) Show the location, dimensions, and accurate identity of all easements as required under Rule 21 HH-6.03(15) of the Minimum Technical Standards;

(j) Show all setback requirements;

(k) Show the location and identification of all encroachments, including the type of improvement comprising the encroachment;

(l) Show the location and dimension of all structures, driveways, sidewalks, irrigation wells, septic tanks, drain fields and drainage improvements (including swales, berms and pipe invert elevation);

(m) Contain a certification to the Town of Sewall's Point;

(n) State for whom the survey is done;

(o) Show the location, dimensions and square footage of the native habitat preservation area required by Section 11-60 of this Code.

(q) Contain a tabulation of the impermeable and permeable areas;

(r) In coastal high hazard areas (V-Zones), indicate the elevation of the top of pier, pile or column.

(s) Contain any other information the building department may require to confirm the construction or improvements comply with applicable Code provisions. (BUILDING HEIGHT FROM F.F.E.)

Ordinance # 215, 3/11/72

THIS LIST IS FOR THE APPLICANT'S CONVENIENCE ONLY. THE APPLICANT MAY BE REQUIRED TO SUBMIT MATERIALS TO THE TOWN IN CONNECTION WITH THE BUILDING PERMIT APPLICATION WHICH ARE NOT LISTED HERE. COMPLETE INFORMATION REGARDING BUILDING PERMIT APPLICATION MATERIALS AND LAND DEVELOPMENT REGULATIONS ARE FOUND IN CHAPTERS 2, 2.5, 4, 6.1, 11, 13, APPENDIX A AND APPENDIX B OF THE TOWN CODE OF ORDINANCES, THE SOUTH FLORIDA BUILDING CODE, AND THE TOWN OF SEWALL'S POINT COMPREHENSIVE PLAN.

1. Florida Certification of Contractor and Sub-Contractor.

2. Certification of Liability and Workers' Compensation Insurance.

3. Three sets of Building Plans which must include:

   a. 1/4" scale building drawings.

   b. Plot plan at a minimum scale of 1" = 10' certifying proposed coverage by impermeable materials; show existing trees 4 or more inches in diameter at chest height; show all completed structures (C.O. issued), existing or proposed wells, all structures under construction (Building Permit issued), and all proposed structures (Building Permit Application filed or being filed); detailed surface water management practices shall be shown through use of swales, berms, retaining walls, etc. designed to meet the water quality requirements of South Florida Water Management District retain, on site, water from a 3-day 25-year storm event, and to prevent normal run-off onto adjoining parcels. Common swales on property lines are encouraged.

   c. A topographic survey, sealed by an appropriate professional, indicating existing natural grade and grade changes proposed on the site, except when grade changes are limited to the area beneath the floor of dwelling units.

Each sheet of plans, and the cover sheet of specifications, for buildings and structures; alterations; repairs and improvements; replacements and additions; costing $15,000.00 or more, shall bear the date, impress seal and signature of a licensed Architect or registered Professional Engineer. Plans for work which is predominately of Architectural nature shall be prepared by and bear the impress seal of a licensed Architect, and work which involves extensive computation based on structural stresses shall, in addition, bear the impress seal of a Professional Engineer.

f. Plumbing, electrical and A/C layouts.

g. At least two elevations showing height of building from finished floor.

4. Landscaping and Habitat Management Permit if the removal, relocation, or replacement of any vegetation or habitat is necessitated by the land development

5. Recorded warranty deed to the property.

6. Septic tank permit and one set of plans with Martin County Health Department seal.

7. Energy code calculations.

8. Certification of elevation from licensed surveyor and determination of flood zone.

9. Amount of fill anticipated - rough sketch showing location and height of fill.

10. Manufacturers' schedule of windows.

11. Except for an improvement which is exempt pursuant to Florida Statutes, an owner or authorized agent before actually commencing to improve any real property, or re-commencing completion of any improvement after default or abandonment, whether or not a project has a payment bond complying with Florida Statutes, shall record a Notice of Commencement in the clerk's office and immediately post either a certified copy of the notice or a notarized statement that the Notice of Commencement has been filed for recording along with a copy of the unrecorded notice.

12. In special flood hazard areas, a certificate of an appropriately licensed professional stating fully enclosed areas below lowest floor are designed to automatically equalize hydrostatic flood forces on exterior walls by allowing for the entry and exit of flood waters.

13. In coastal high hazard areas (V Zones), a certificate of an appropriately licensed professional stating breakaway wall collapse shall result from a water load less than that which would occur during the base flood; and the elevated portion of the building and supporting foundation shall not be subject to collapse, displacement or other structural damage due to the effects of wind and water loads acting simultaneously on all building components (structural and non-structural).

THE TOWN'S APPROVAL OF A BUILDING PERMIT APPLICATION DOES NOT RELIEVE OWNER OR CONTRACTOR FROM COMPLIANCE WITH THE TOWN CODE OF ORDINANCES

OWNER'S AFFIDAVIT OF BUILDING COSTS

STATE OF FLORIDA
COUNTY OF MARTIN

BEFORE ME, the undersigned notary public, personally appeared the undersigned Affiant, who, being first duly sworn, under penalties of perjury, deposes and says:

1. That Affiant 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 Affiant'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.

3. 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 $ 180,000 .

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.

Carolyn DePute
Affiant
Property street address:
2 Margarita Drive
Stuart, FL 34996

Sworn to and subscribed
before me this 27th day of
October, 1995.

Joan H. Barron
Notary Public
STATE OF FLORIDA AT LARGE
My Commission Expires:

(NOTARY SEAL)

OFFICIAL NOTARY SEAL
JOAN H BARRON
NOTARY PUBLIC STATE OF FLORIDA
COMMISSION NO. CC
MY COMMISSION EXP.

SECTION E CERTIFICATION

This certification is to be signed by a land surveyor, engineer, or architect who is authorized by state or local law to certify elevation information when the elevation information for Zones A1–A30, AE, AH, A (with BFE), V1–V30, VE, and V (with BFE) is required. Community officials who are authorized by local law or ordinance to provide floodplain management information, may also sign the certification. In the case of Zones AO and A (without a FEMA or community issued BFE), a building official, a property owner, or an owner's representative may also sign the certification.

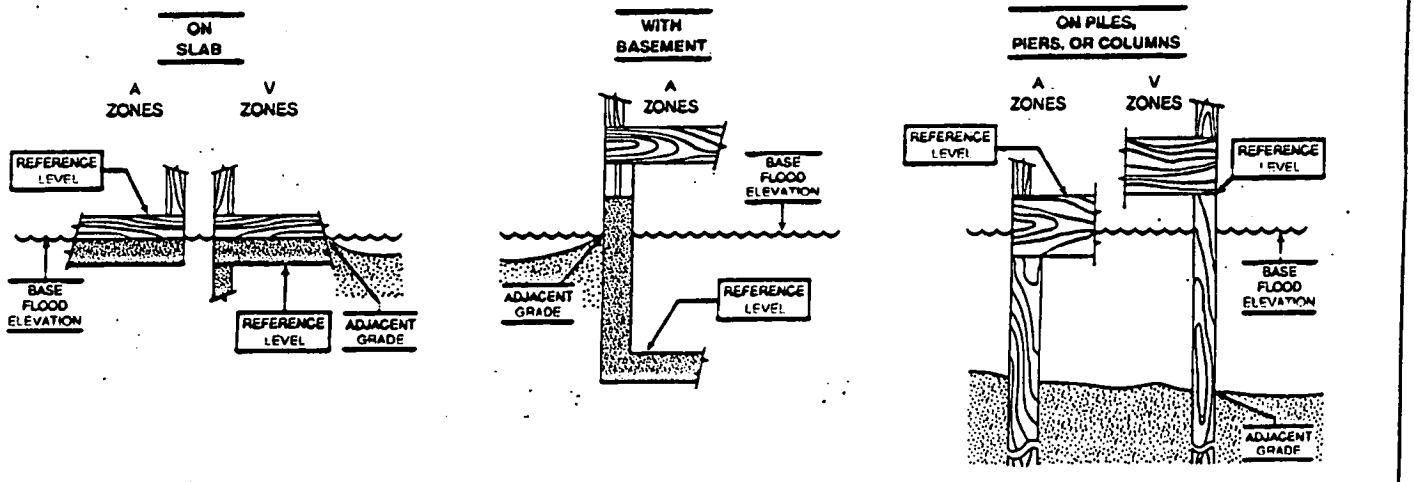
Reference level diagrams 6, 7 and 8 - Distinguishing Features–If the certifier is unable to certify to breakaway/non-breakaway wall, enclosure size, location of servicing equipment, area use, wall openings, or unfinished area Feature(s), then list the Feature(s) not included in the certification under Comments below. The diagram number, Section C, Item 1, must still be entered.

I certify that the information in Sections B and C on this certificate represents my best efforts to interpret the data available. I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.

Stephen J. Brown		4049
CERTIFIER'S NAME		LICENSE NUMBER (or Affix Seal)
Land Surveyor	Stephen J. Brown, Inc.	
TITLE	COMPANY NAME	
290 Florida Street	Stuart	Florida 34994
ADDRESS	CITY	STATE ZIP
SIGNATURE	5/23/95 DATE	(407) 288-7176 PHONE

Copies should be made of this Certificate for: 1) community official, 2) insurance agent/company, and 3) building owner.

COMMENTS:



The diagrams above illustrate the points at which the elevations should be measured in A Zones and V Zones.

Elevations for all A Zones should be measured at the top of the reference level floor.

Elevations for all V Zones should be measured at the bottom of the lowest horizontal structural member.

ELEVATION CERTIFICATE

O.M.B. No 3067-0077
Expires May 31, 1993

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

ATTENTION: Use of this certificate does not provide a waiver of the flood insurance purchase requirement. This form is used only to provide elevation information necessary to ensure compliance with applicable community floodplain management ordinances, to determine the proper insurance premium rate, and/or to support a request for a Letter of Map Amendment or Revision (LOMA or LOMR).
Instructions for completing this form can be found on the following pages.

SECTION A PROPERTY INFORMATION

	FOR INSURANCE COMPANY USE
BUILDING OWNER'S NAME: JOHN DEL PRETE	POLICY NUMBER
STREET ADDRESS (Including Apt., Unit, Suite and/or Bldg. Number) OR P.O. ROUTE AND BOX NUMBER: MARGARETTA DRIVE	COMPANY NAIC NUMBER
OTHER DESCRIPTION (Lot and Block Numbers, etc.): LOT 10, MARGARETTA S/D	
CITY: SEWALLS POINT STATE: FLA. ZIP CODE:	

SECTION B FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

Provide the following from the proper FIRM (See Instructions):

1. COMMUNITY NUMBER	2. PANEL NUMBER	3. SUFFIX	4. DATE OF FIRM INDEX	5. FIRM ZONE	6. BASE FLOOD ELEVATION (in AO Zones, use depth)
120164	0002	D	6/16/92	A-8	ELEV. 9.00

7. Indicate the elevation datum system used on the FIRM for Base Flood Elevations (BFE): ☒ NGVD '29 ☐ Other (describe on back)
8. For Zones A or V, where no BFE is provided on the FIRM, and the community has established a BFE for this building site, indicate the community's BFE: ☐☐☐☐☐.☐ feet NGVD (or other FIRM datum–see Section B, Item 7).

SECTION C BUILDING ELEVATION INFORMATION

1. Using the Elevation Certificate Instructions, indicate the diagram number from the diagrams found on Pages 5 and 6 that best describes the subject building's reference level 1 .
2(a). FIRM Zones A1-A30, AE, AH, and A (with BFE). The top of the reference level floor from the selected diagram is at an elevation of ☐☐☐9.0 feet NGVD (or other FIRM datum–see Section B, Item 7).
(b). FIRM Zones V1-V30, VE, and V (with BFE). The bottom of the lowest horizontal structural member of the reference level from the selected diagram, is at an elevation of ☐☐☐☐☐.☐ feet NGVD (or other FIRM datum–see Section B, Item 7).
(c). FIRM Zone A (without BFE). The floor used as the reference level from the selected diagram is ☐☐.☐ feet above ☐ or below ☐ (check one) the highest grade adjacent to the building.
(d). FIRM Zone AO. The floor used as the reference level from the selected diagram is ☐☐.☐ feet above ☐ or below ☐ (check one) the highest grade adjacent to the building. If no flood depth number is available, is the building's lowest floor (reference level) elevated in accordance with the community's floodplain management ordinance? ☐ Yes ☐ No ☐ Unknown
3. Indicate the elevation datum system used in determining the above reference level elevations: ☒ NGVD '29 ☐ Other (describe under Comments on Page 2). *(NOTE: If the elevation datum used in measuring the elevations is different than that used on the FIRM [see Section B, Item 7], then convert the elevations to the datum system used on the FIRM and show the conversion equation under Comments on Page 2.)*
4. Elevation reference mark used appears on FIRM: ☒ Yes ☐ No (See Instructions on Page 4)
5. The reference level elevation is based on: ☒ actual construction ☐ construction drawings
(NOTE: Use of construction drawings is only valid if the building does not yet have the reference level floor in place, in which case this certificate will only be valid for the building during the course of construction. A post-construction Elevation Certificate will be required once construction is complete.)
6. The elevation of the lowest grade immediately adjacent to the building is: ☐☐☐8.6 feet NGVD (or other FIRM datum-see Section B, Item 7).

SECTION D COMMUNITY INFORMATION

1. If the community official responsible for verifying building elevations specifies that the reference level indicated in Section C, Item 1 is not the "lowest floor" as defined in the community's floodplain management ordinance, the elevation of the building's "lowest floor" as defined by the ordinance is: ☐☐☐☐☐.☐ feet NGVD (or other FIRM datum–see Section B, Item 7).
2. Date of the start of construction or substantial improvement _____ .

FLA 1977 LAWS
FS 713.13

(2)

RAMCO FORM 409

Notice of Commencement

(PREPARE IN DUPLICATE)

To whom it may concern:

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.

Legal Description of property (include Street Address, if available) LOT 10, Marguerita Subdivision Plat Book 10, Page 3, Martin County

General description of improvements Single family residence w/ garage

Owner John + Carolyn DelPrete

Address 921 NE Sandalwood Place Jensen Beach FL 34957

Owner's interest in site of the improvement fee simple

Fee Simple Title holder (if other than owner)

Name

Address

Contractor n/A

Address

Surety (if any) n/A

Address Amount of bond $

Any person making a loan for the construction of the improvements:

Name n/A

Address

Person within the State of Florida designated by owner upon whom notices or other documents may be served:

Name n/A

Address

In addition to himself, owner designates the following person to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (h) Florida Statutes. (Fill in at Owner's option).

Name n/A

Address

THIS SPACE FOR RECORDER'S USE ONLY

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL
MARSHA ST. LER, CLERK
BY D.C.
DATE 4.5.95

CIRCUIT COURT
MARTIN COUNTY, FLORIDA

Carolyn DelPrete
Owner

Sworn to and subscribed before me this 5th day of April 1995

Mary E Shaffer
Notary Public

MARY E. SHAFFER
MY COMMISSION # CC 324551
EXPIRES: October 19, 1997
Bonded Thru Notary Public Underwriters

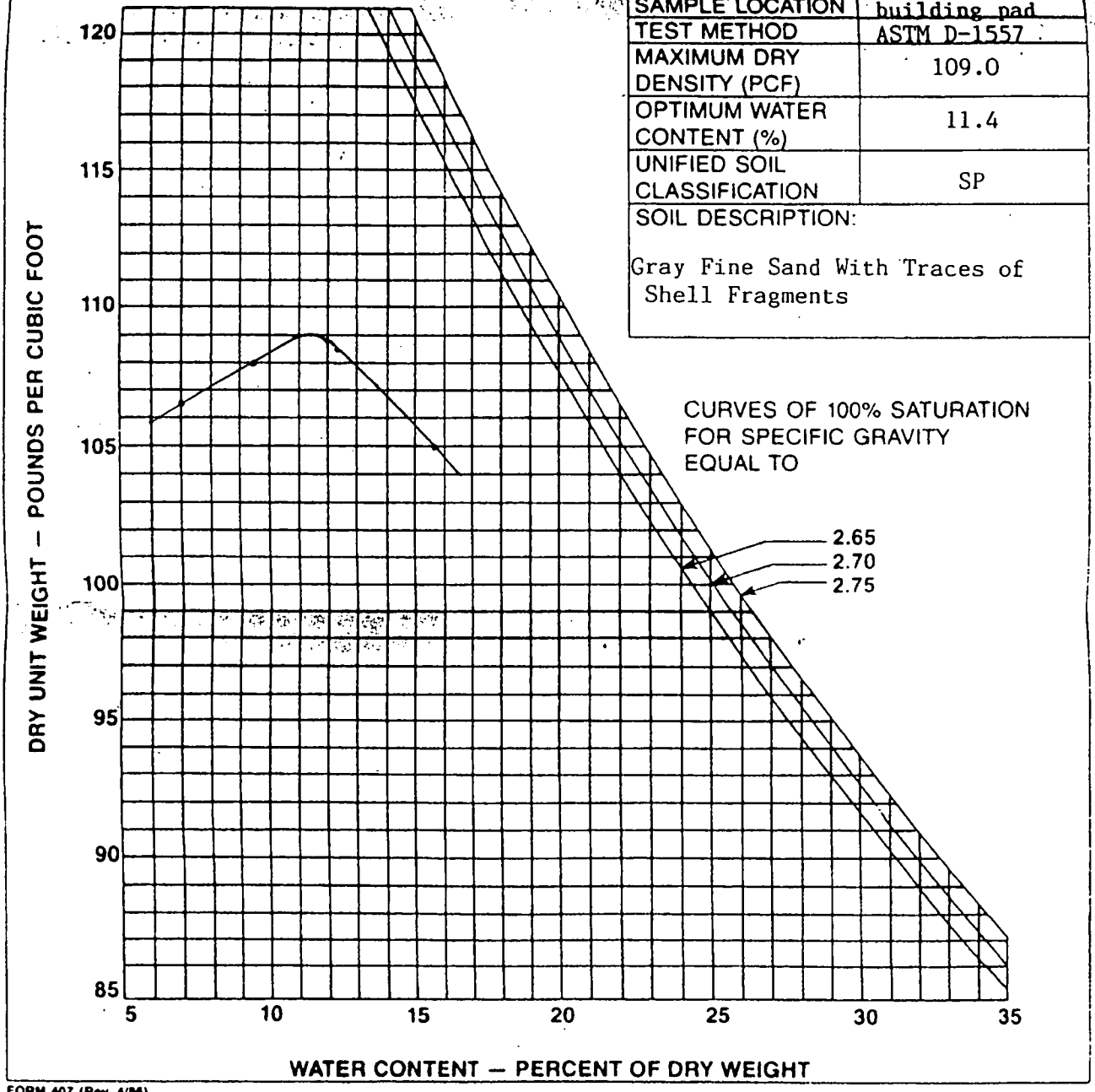
Ardaman & Associates, Inc.
1017 S.E. Holbrook Ct.
Port St. Lucie, FL 34952
(407) 337-1200

MOISTURE — DENSITY RELATIONSHIP

PROJECT: DelPrete Residence
Marguerita Drive - Sewalls Point
REPORTED TO: Mr.John DelPrete

FILE NO.: 95-5608
DATE: April 27, 1995

SUMMARY OF TEST RESULTS	
SAMPLE NO.	1
SAMPLED BY	MR
SAMPLE LOCATION	building pad
TEST METHOD	ASTM D-1557
MAXIMUM DRY DENSITY (PCF)	109.0
OPTIMUM WATER CONTENT (%)	11.4
UNIFIED SOIL CLASSIFICATION	SP
SOIL DESCRIPTION: Gray Fine Sand With Traces of Shell Fragments	



FORM 407 (Rev. 4/86)

By [signature] MAY 01 1995

Ardaman & Associates, Inc.

1017 S. E. Holbrook Court
Port St. Lucie, FL 34952
(407) 337-1200

FIELD DENSITY TEST REPORT

DATE OF TEST: April 27, 1995 DATE REPORTED: May 1, 1995 FILE NO.95-5608

PROJECT: DelPrete Residence, Marguarita Drive Sewalls Point

SUBMITTED TO: Mr. & Mrs. John DelPrete

MAXIMUM DENSITY DETERMINED IN ACCORDANCE WITH ASTM D-1557

FIELD DENSITY DETERMINED IN ACCORDANCE WITH ASTM D-2937

Test No.	Location of Test	OMC %	Max. Den. (lb./cu.ft.)	Moisture at Time of Test %	Field Density (lb./cu.ft.) Dry	% of Max. Den.	Job Spec.	Elevation
1	SW corner in 9' northeast of stake	11.4	109.0	8.5	105.4	97	95	0' to -1' FS
2	same as test #1	11.4	109.0	8.8	107.0	98	95	-1' to -2' FS
3	same as test #1	11.4	109.0	9.2	107.9	99	95	-2' to -3' FS
4	same as test #1	11.4	109.0	10.0	107.8	99	95	-3' to -4' FS
5	NW corner in 7' southeast of stake	11.4	109.0	8.6	105.6	97	95	0' to -1' FS
6	same as test #5	11.4	109.0	8.9	107.4	98	95	-1' to -2' FS
7	same as test #5	11.4	109.0	9.4	107.8	99	95	-2' to -3' FS
8	same as test #5	11.4	109.0	10.2	108.4	99	95	-3' to -4' FS

* IN PLACE DENSITY TEST DOES NOT MEET MINIMUM DENSITY REQUIREMENT
** RETEST INDICATES DENSITY MEETS OR EXCEEDS MINIMUM DENSITY REQUIREMENT
F-SOIL DIRECTLY BELOW FOOTING; FS-SOIL UNDER FLOOR SLAB; GA-SOIL IN GENERAL COMPACTED AREA; PAV-SOIL BELOW STABILIZED SECTION; PSSG-STABILIZED SUBGRADE; PB-PAVEMENT BASE; NSSG-NON STABILIZED SUBGRADE; RS-ROADWAY SUBGRADE; TOP-TOP OF PIPE; BOP-BOTTOM OF PIPE

John E. Donahue, P.E. MAY 01 1995 Date

Ardaman & Associates, Inc.

1017 S. E. Holbrook Court
Port St. Lucie, FL 34952
(407) 337-1200

FIELD DENSITY TEST REPORT

DATE OF TEST: April 27, 1995 DATE REPORTED: May 1, 1995 FILE NO.95-5608

PROJECT: DelPrete Residence, Marguarita Drive Sewalls Point

SUBMITTED TO: Mr. & Mrs. John DelPrete

MAXIMUM DENSITY DETERMINED IN ACCORDANCE WITH ASTM D-1557

FIELD DENSITY DETERMINED IN ACCORDANCE WITH ASTM D-2937

Test No.	Location of Test	OMC %	Max. Den. (lb./cu.ft.)	Moisture at Time of Test %	Field Density (lb./cu.ft.) Dry	% of Max. Den.	Job Spec.	Elevation
9	NE corner in 10' southwest of stake	11.4	109.0	9.0	106.3	98	95	0' to -1' FS
10	same as test #9	11.4	109.0	9.4	107.6	99	95	-1' to -2' FS
11	same as test #9	11.4	109.0	9.8	108.0	99	95	-2' to -3' FS
12	same as test #9	11.4	109.0	10.4	108.5	100	95	-3' to -4' FS
13	SE corner in 10' northwest of stake	11.4	109.0	8.6	106.2	98	95	0' to -1' FS
14	same as test #13	11.4	109.0	8.9	108.0	99	95	-1' to -2' FS
15	same as test #13	11.4	109.0	9.4	108.7	100	95	-2' to -3' FS
16	same as test #13	11.4	109.0	9.9	108.8	100	95	-3' to -4' FS

* IN PLACE DENSITY TEST DOES NOT MEET MINIMUM DENSITY REQUIREMENT
** RETEST INDICATES DENSITY MEETS OR EXCEEDS MINIMUM DENSITY REQUIREMENT
F-SOIL DIRECTLY BELOW FOOTING; FS-SOIL UNDER FLOOR SLAB; GA-SOIL IN GENERAL COMPACTED AREA; PAV-SOIL BELOW STABILIZED SECTION; PSSG-STABILIZED SUBGRADE; PB-PAVEMENT BASE; NSSG-NON STABILIZED SUBGRADE; RS-ROADWAY SUBGRADE; TOP-TOP OF PIPE; BOP-BOTTOM OF PIPE

John E. Donahue, P.E.

MAY 01 1995
Date

831531

RECORD VERIFIED

FLA. DOC. PAID
$ 4537.5
Marsha Stiller
Clerk of Circuit Court
Martin Co., Fla.
By _____ D.C.

Parcel ID Number: 13-38-41-011-000-00100-3
Grantee #1 TIN:
Grantee #2 TIN:

[Space Above This Line For Recording Data]

Warranty Deed

This Indenture, Made this 6th day of June, 1990 A.D., **Between** GDED, INC., a corporation existing under the laws of the state of Florida

of the County of Martin, State of Florida, grantor, and JOHN DEL PRETE and CAROLYN DEL PRETE, his wife,

whose address is: 194 NE Blairwood, Jensen Beach, Florida 34994

of the County of Martin, State of Florida, grantees.

Witnesseth that the GRANTOR, for and in consideration of the sum of - TEN & NO/100($10.00) - - - - - - - - - - DOLLARS, and other good and valuable consideration to GRANTOR in hand paid by GRANTEES, the receipt whereof is hereby acknowledged, has granted, bargained and sold to the said GRANTEES and GRANTEES' heirs and assigns forever, the following described land, situate, lying and being in the county of State of Florida to wit:

Lot 10, MARGUERITA SUBDIVISION, according to the Plat thereof, recorded in Plat Book 10, Page 3, public records of Martin County, Florida.

Subject to restrictions, reservations and easements of record, if any, and taxes subsequent to 1989.

STATE OF FLORIDA
COUNTY OF MARTIN

THIS IS TO CERTIFY THAT THIS IS A TRUE AND CORRECT COPY OF THE ORIGINAL

MARSHA STILLER, CLERK
BY: D.C.
DATE: 7-3-90

and the grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.

In Witness Whereof, the grantor has hereunto set his hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Vera W. Russell
Susan L. DeChristopher

GDED, INC., a Florida corporation
By: Douglas A. O'Brien, Vice President (Seal)

(Seal)
(Seal)
(Seal)

STATE OF FLORIDA
COUNTY OF MARTIN

(Corporate Seal)

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State and County aforesaid to take acknowledgements, personally appeared Douglas A. O'Brien

well known to me to be the Vice President

respectively of the corporation named as grantor in the foregoing instrument, and that he acknowledged executing the same, in the presence of two subscribing witnesses, freely and voluntarily under authority duly vested in him by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this 5th day of June, 1990.

This Document Prepared By:
KENNETH A. NORMAN, ESQ.
KOHL, BOBKO, McKEY & McMANUS, P.A.
4th Floor 2400 S. Federal Highway
Stuart, FL 34994

Susan L. DeChristopher
NOTARY PUBLIC, STATE OF FLORIDA
My Commission Expires: NOTARY PUBLIC, STATE OF FLORIDA. MY COMMISSION EXPIRES: JUNE 9, 1993. BONDED THRU NOTARY PUBLIC UNDERWRITERS.

ORBK0862PG2606

STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: DEL PRETE SEPTIC TANK PERMIT NO. 95-0046

LEGAL DESCRIPTION: LOT 10 MARUERITA

The items which are checked off below must be certified by a surveyor or engineer and returned to the Martin County Health Unit prior to the first plumbing inspection by the Building Department. Approval of this stubout elevation certification constitutes commencement of building construction for septic system permits.

X 1. Building Permit Number: #3778 (Certification not required for this item).

___2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches (circle one) above / below benchmark elevation as indicated on septic tank permit.

X 3. I certify that the top of the lowest building plumbing stubout is 29" inches (circle one) above / below crown of road elevation shown on septic tank permit.

___4. I certify that the top of the drainfield pipe elevation is _____.

X 5. I certify that all severely limited soil has been removed from an area of _____ feet by _____ feet a minimum depth of 36"-44" BELOW N.G. ELV. 4.5' MSD Surveyor must submit 2 plot plans to scale of excavated area. (See diagram ___A/ XB on reverse side) Date Observed: __/__/__
TO BE INSPECTED AT TIME OF INSTALLATION

X 6. I certify that all moderately and severely limited soils have been removed in an area _____ feet wide or 33% of the area of the drainfield. This area is centered in the drainfield and extends to a depth of _____ feet where slightly limited soils exist. Surveyor must submit 2 plot plans to scale of excavated area. (See diagram B on reverse side) Date Observed: __/__/__

___7. I certify that all severly limited soils have been removed from an area one foot beyond the perimeter of the drainfield rock and the excavation meets all detail requirements as shown in _____ "Diagram A", or _____ "Diagram B" on reverse side. Surveyor must submit 2 plot plans to scale of excavated area. Date Observed: __/__/__

NOTE:
a. Severely limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
b. Drainfield must be centered in the excavated area. Drainfield will not be approved if severe limited soils are not removed.
c. Condition numbers 5, 6 and 7 may be satisfied with excavation certification from the certified septic installer responsible for drainfield installation.

CERTIFIED BY: STEPHEN A. BROWN

As applicant or applicant's representative, I understand the above requirements.

Date: 5/3/95 Job Number: 939-59-01

_____ (Signature)

---------- HRS-MARTIN COUNTY PUBLIC HEALTH UNIT ---------- FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY----------

HRS-MARTIN COUNTY PUBLIC HEALTH UNIT
Environmental Health
612 So. Dixie Hwy.
Stuart, FL 34994 (407) 221-4090

Evelyn [illegible]
Martin County Health Unit Authorized Signature

5-3-95
(Date)

Revised 3/28/92

MARTIN COUNTY PUBLIC HEALTH UNIT
ENVIRONMENTAL HEALTH
612 SOUTH DIXIE HIGHWAY • STUART, FLORIDA 34994

DELPRETE RESIDENCE

Wind Load Structural Calculations per ASCE 7-93

START HERE
STEP No. 1

Establish wind load velocity pressure for exposure C or exposure D for shoreline areas

The velocity pressure value shown in the chart below is based on the fastest mile wind speed design requirement and the mean roof height for each rectangle of the structure. *See Below

Design wind speed & exposure ENTER HERE → 110 EXP. D

Hurricane Engineering Corporation
1111 South Federal Hwy., Suite 226
Stuart, Florida 34994
Phone: 407 / 221-8639 Fax: 220-8688

(Note: All wind velocity pressures are shown in pounds per square foot) VELOCITY PRESSURE VALUES ((Qz = 0.00256 x Kz x (IV)squared)) Inportance factor, I = 1.05

Wind speed & exposure		80 Exp. C	90 Exp. C	100 Exp. C	110 Exp. C	120 Exp. C	130 Exp. C	140 Exp. C	90 Exp. D	100 Exp. D	110 Exp. D
Mean Roof height	0' to 15'	14.5	18.3	22.6	27.3	32.5	38.2	44.3	27.4	33.9	41.0
Mean Roof height	15' to 20'	15.7	19.9	24.6	29.7	33.4	41.5	48.1	29.0	35.8	43.4
Mean Roof height	20' to 25'	16.8	21.3	26.2	31.8	37.8	44.4	51.4	30.2	37.3	45.1
Mean Roof height	25' to 30'	17.7	22.4	27.7	33.5	39.8	46.7	54.2	31.3	38.7	46.8
Mean Roof height	30' to 35'	18.4	23.3	28.8	34.8	41.5	48.7	56.4	32.3	39.9	48.3
Mean Roof height	35' to 40'	19.1	24.2	29.9	36.2	43.1	50.6	58.6	33.4	41.2	49.9
Mean Roof height	40' to 45'	19.8	25.0	30.9	37.4	44.5	52.2	60.6	34.1	42.1	50.9
Mean Roof height	45' to 50'	20.4	25.8	31.9	38.6	45.9	53.9	62.5	34.7	42.9	51.9
Mean Roof height	50' to 55'	21.0	26.5	32.7	39.6	47.1	55.3	64.2	35.4	43.7	52.9
Mean Roof height	55' to 60'	21.5	27.2	33.6	40.6	48.4	56.8	65.8	36.1	44.6	54.0

Rectangle Information: Select velocity pressure and list mean roof height for each roof rectangle

For Rectangle	A	B	C	D	E	F	G	H	I	J	K
Velocity pressure	41.0	45.1									
Mean roof height	12'	23'									

To determine the mean roof height; first, ADD vertical distance from grade to top of exterior wall at eave PLUS; 50% of the vertical distance from top of exterior wall at eave to highest roof ridge line of each rectangle.

DEAD LOAD (PSF) 15

General Information

Roof Pitch	1:12	2:12	3:12	4:12	5:12	6:12	7:12	8:12	9:12	10:12	11:12	12:12
Pitch Factor	1.00347	1.01379	1.03078	1.05409	1.08333	1.11803	1.15770	1.20185	1.25000	1.30172	1.35657	1.41421
Force factor	0.94444	0.88888	0.84444	0.78888	0.74444	0.70000	0.66666	0.62222	0.58888	0.55555	0.52222	0.50000
Pitch Angle	5 Degrees	10 Degrees	14 Degrees	19 Degrees	23 Degrees	27 Degrees	30 Degrees	34 Degrees	37 Degrees	40 Degrees	43 Degrees	45 Degrees

Roof Coefficients for wind load calculations on buildings with a mean roof height of less than 60 feet.

For Roof framing members at 16" on center

16" O.C.	With roof pitch angle Zero to 10 degrees Coefficients for				With roof pitch angle 10 to 30 degrees Coefficients for				With roof pitch angle 30 to 45 degrees Coefficients for			
Roof frame member span lgth. brg. to brg. (Feet)	Roof frame members with only 1 edge/ridge Zone #2	Roof frame members with more than 1 Zone #2	Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Roof frame members with only 1 edge/ridge Zone #2	Roof frame members with more than 1 Zone #2	Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Roof frame members with only 1 edge/ridge Zone #2	Roof frame members with more than 1 Zone #2	Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members
0 to 6	2.00	2.55	2.55	3.03	2.15	3.00	3.00	3.33	1.50	1.63	1.63	2.32
6 to 9	1.75	2.07	2.40	2.66	1.85	2.42	2.80	2.89	1.46	1.54	1.63	2.25
9 to 12	1.67	1.91	2.40	2.54	1.66	2.04	2.80	2.60	1.44	1.50	1.63	2.22
12 to 16	1.52	1.66	2.10	2.34	1.43	1.68	2.50	2.30	1.33	1.38	1.52	2.10
16 to 20	1.50	1.60	2.10	2.30	1.38	1.58	2.50	2.23	1.32	1.38	1.52	2.09
20 to 28	1.47	1.54	2.10	2.25	1.32	1.46	2.50	2.14	1.31	1.34	1.52	2.08
28 to 36	1.46	1.53	2.10	2.25	1.24	1.34	2.20	2.04	1.24	1.26	1.43	2.00
36 to 46	1.30	1.35	1.70	2.08	1.24	1.34	2.20	2.04	1.24	1.26	1.43	2.00
46 to 60	1.30	1.35	1.70	2.08	1.24	1.34	2.20	2.04	1.22	1.24	1.40	1.98
60 to 80	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
80 Plus	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98

For Roof framing members at 24" on center

24" O.C.	With roof pitch angle Zero to 10 degrees Coefficients for				With roof pitch angle 10 to 30 degrees Coefficients for				With roof pitch angle 30 to 45 degrees Coefficients for			
Roof frame member span lgth. brg. to brg. (Feet)	Roof frame members with only 1 edge/ridge Zone #2	Roof frame members with more than 1 Zone #2	Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Roof frame members with only 1 edge/ridge Zone #2	Roof frame members with more than 1 Zone #2	Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members	Roof frame members with only 1 edge/ridge Zone #2	Roof frame members with more than 1 Zone #2	Roof frame members totally in a gable End Zone	Overhang portion of Roof frame members
0 to 6	1.91	2.40	2.40	2.91	2.04	2.80	2.80	3.17	1.50	1.63	1.63	2.32
6 to 9	1.75	2.07	2.40	2.66	1.62	2.06	2.50	2.59	1.37	1.44	1.52	2.16
9 to 12	1.57	1.75	2.10	2.41	1.51	1.84	2.50	2.43	1.35	1.41	1.52	2.13
12 to 16	1.52	1.66	2.10	2.34	1.43	1.68	2.50	2.30	1.33	1.38	1.52	2.10
16 to 20	1.50	1.60	2.10	2.30	1.38	1.58	2.50	2.23	1.25	1.28	1.43	2.02
20 to 28	1.31	1.35	1.70	2.08	1.24	1.36	2.20	2.05	1.24	1.27	1.43	2.00
28 to 36	1.30	1.35	1.70	2.08	1.24	1.34	2.20	2.04	1.24	1.26	1.43	2.00
36 to 46	1.30	1.35	1.70	2.08	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
46 to 60	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
60 to 80	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98
80 Plus	1.23	1.26	1.50	2.00	1.19	1.28	2.00	1.99	1.22	1.24	1.40	1.98

Note 1. Edge/Ridge Zone and End Zone calculation is thus; 10% of the endwall width or 40% of the mean roof height, whichever is smaller, but not less than either 3 feet or 4% of the longest wall.

The methods of determining the wind force generated reaction loads in this document utilizes the provisions of the ANSI / ASCE Standard 7-93, Minimum Design Loads for Buildings and Other Structures, Section 6, Wind Loads, 6.4.2 Analytical Procedure in accordance with 6.4.2.2 *Limitations of Analytical Procedure*. This method applies all appropriate factors and pressure coefficients applicable for the main wind force resisting system, end zones, overhangs, edge strips, walls, roofs, components and cladding as shown in Section 6, figures 1, 2, 3, & 4 and tables 4, 5, 6, 7, 8, 9, 10, 11 & 12. The velocity pressures shown in Step No. 1 have been calculated in accordance with Section 6.5.1 and modified for velocity pressure exposure coefficients and gust response factors relative to exposures C and D in compliance with Table 6 and Table 8 respectively.

The use of this document is restricted to buildings less than 60 feet high, subject to the same limitations as shown in Section 6.4.2.2 of the ASCE Standard 7-93 and must be completed under the direction and supervision of a registered professional engineer.

Engineer's Specifications for Wood and Masonry Construction including Roof Sheathing:

NOTES: All fastenings must be in strict compliance with S.B.C.C.I. Code 1705 and, or meet local requirements.
All Wood Construction must conform to the provisions of Chapter 17 in the S.B.C.C.I. Standard Building Code and, or meet the local requirements of any other applicable code* or code amendments adopted by the community in which this specific structure is being constructed.
All Masonry Construction must conform to the provisions of Chapter 14 in the S.B.C.C.I. Standard Building Code and, or meet the local requirements of any other applicable code* or code amendments adopted by the community in which this specific structure is being constructed. *Such as the South Florida Building Code or others.

Any specification shown hereon shall supersede any conflicting specification shown on the submitted drawings.

Masonry and Wood Const. Roof sheathing to be:		Wood Construction: Single story or two story 2nd floor wall sheathing & studs		Wood Construction: Two story first floor wall sheathing & studs		Masonry Construction of Hollow Load Bearing Units: Single story or two story 2nd floor wall const.			Masonry Construction of Hollow Load Bearing Units: First floor wall construction for a two story structure		
Thick	19/32"	Thick	1/2"	Thick	1/2"	Wall reinforcing per spacing			Wall reinforcing per spacing		
Matl.	PLY	Matl.	PLY	Matl.	PLY	Bar size	#5		Bar size	#5	
nail size	10d or 8d RS	nail size	10d or 8d RS	nail size	10d or 8d RS	Bars req'd	2		Bars req'd	2	
nailing*	3 "O.C.	**Shearwall lateral load**		**Shearwall lateral load**		Dowel size	#5		Dowel size	#5	
Ply-clip	AS PER MFR "O.C.	nailing*	3 "O.C.	nailing*	3 "O.C.	Max. Ctrs	8'		Max. Ctrs	8'	
Part #		**Shearwall uplift load**		**Shearwall uplift load**		Wall thick	8 inches		Wall thick	8 inches	
1 Story Footings		nailing*	3 "O.C.	nailing*	3 "O.C.	Bond beam	cmu [ ]	cast [X]	Bond beam	cmu [ ]	cast [X]
size	16 X 14	**Studs**	2 X 4	**Studs**	2 X 6	beam size	8" X 12"		beam size	8" X 12"	
stl req'd	2#5's	Centers	16 inches	Centers	16 inches	steel req'd	4#5's		steel req'd	4#5's	
concrete	2500 PSI	Species & Grade	Fb 1200 OR GREATER	Species & Grade	Fb 1200 OR GREATER	Grout	3000 PSI		Grout	3000 PSI	
2 Story Footings						Min shear wall lgth.	N/A end wall	N/A side wall	Min shear wall lgth.	N/A end wall	NA side wall
size	16 X 18	**Sill plate anchor**		**Sill plate anchor**		**8" Masonry Gable**					
stl req'd	3#5'S	Part #	SEE PLANS	Part #	1/2" ϕ A BOLT	Wall reinforcing per spacing			Rake beam requirements		
concrete	2500 PSI	Max ctr.		Max ctr.	24"	Bar size	NA		Bar size	NA	
2 Anchors req'd. each corner & wall opening use wsh-916 washers		Remarks: *Nailing center distance specified above is for perimeter edge of sheathing, interior nailing of sheathing is 12"O.C.				Bars req'd	NA		Bars req'd	NA	
						Max. Ctrs.	NA		Min. Depth	NA	

This Structural Engineer of Record Certifies that I have directed, supervised and reviewed these Wind Load Calculations and declare that the wind load values, connector specifications and material specifications shown hereon have been properly determined by the provisions of ASCE Standard 7-93, Section 6, for this specific structure. An impact resistance code has not been specified by this engineer for the exterior window and door openings of this structure. Storm panels are recommended.

Note: This Engineer of Record has delegated other engineers to design and certify the structural credibility of any pre-engineered and manufactured structural building components or roof / floor truss systems including required connectors (factory or field installed) which are intrinsically associated parts of the components or truss systems.

ENGINEER'S SPECIAL INSTRUCTIONS & REMARKS:

1/2" ϕ ANCHOR BOLTS TO HAVE 6" MIN. EMBEDMENT WITH W.P.B. TYPE WASHERS

This Engineer of Record is for structural only and not to be considered the Engineer of Record with total responsibility for all specifications relative to this entire structure and specific site location including energy code, electrical, plumbing, HVAC, soil conditions, survey & drainage unless otherwise indicated.

Contractor ARK HOMES Address _____

City/State/Zip _____ Phone: _____

Job Address _____ City _____

Building Dept. _____

Legal Description: _____

Residence for: DELPRETE

Engineer's Name WILLIAM J. MATHERS

State Registration Number 19658 in the State of FL.

Address 1111 S. FEDERAL HWY.

City STUART State FL. Zip 34994

Phone (Area code) 407 Number 287-0525

Structural Engineer of Record's

SEAL

Date: 3/29/95

ENGINEER'S SIGNATURE: W. J. Mathers

Hurricane Engineering Corporation, 1111 South Federal Hwy., Suite 226, Stuart, FL 34994 Phone: 407 / 221-8639

CONNECTOR CHART (Continued)

Structural member I.D. No. as shown on Plans	Enter load values, use 2 lines if load differs at ends of same member: Uplift Load at bearing point	Perpendicular load to bearing	Horizontal load to bearing	Connector Symbols: for location	For Mfg.	Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	Size of nails and number of nails required at each connector	Building Inspector's Check-Off Column
KJ5A	1658	SEE STEP #8	SEE STEP #8	B	H	RT22TWL	2	18-16d	
KJ5B	1361			B		↓	1	"	
KJ7	1679			A		TA22	2	10-10d	
KJ7C	1885			B		RT22TWL	2	18-16d	
H1	375			C(B)		RT18	1	6-16d	
H2	103						1	"	
H3	407						1	"	
H4	407						1	"	
H5	349						1	"	
H6	349						1	"	
H7	349						1	"	
H8	478						1	8-16d	
H9	138						1	6-16d	
H10	715						1	10-16d	
H11	138						1	6-16d	
H12	407						1	"	
H13	375						1	"	
H14	349			↓	↓	↓	1	"	
WOOD CONNECTORS:									
T1	673	SEE STEP #8	SEE STEP #8	A	H	RT22TWL	1	10-16d	
T3	854						1	12-16d	
T4	699						1	10-16d	
T5	309						1	6-16d	
T6	172						1	"	
G2	1892			↓	↓	↓	2	18-16d	

DELPREE RES.

STEP No. 9D Calculate Uplift Shear Loads for all Wood Frame Walls (plf)

This step will determine if uplift loads exceed the shear capacity of the specified wall diaphragm and nailing.

***** Omit any roof structural member having a direct vertical connector tie to the foundation, such as girders, beams & headers.***

Wall I.D. Number EW# SW#	Add total uplift loads for all roof members bearing on top of wall ** Enter value here	MATH	Length of Wall Less all opening widths		Equals Uplift Shear Load (PLF)	MATH	Enter Wall Uplift Shear Capacity		If Neg. STOP! If POS. Cont. →	Connectors for Stud to plates: Top Plate part No. (list now)	Sill Plate part No. (list now)	Min. Rated uplift load for the connector	MATH	Enter Value JJ ▼		Maximum center distance between connectors (Feet)
EW17	5414	1	13	=	416	-	295	=	131	TP4X	TP4X	1462	1	131	=	4.0
EW18	9401	1	14	=	672	-	285	=	387	TP4X	TP4X	1462	1	387	=	4.0
		1		=		-		=					1		=	
		1		=		-		=					1		=	
		1		=		-		=					1		=	
		1		=		-		=					1		=	
		1		=		-		=					1		=	
		1		=		-		=					1		=	

Note: If uplift shear loads exceed shearwall uplift capacities additional connectors will be required to tie studs to sill plate and to double top plates.

JJ ▲

Specify connector manufacturer HERE HUGHES

Engineer Approved Connector Specification Chart

*WORST CASE

Changes to this chart must be accompanied by an Engineering Change Order from a Registered Engineer.

Connector location symbol key

"A"	"B"	"C"	"D"		"E"	"F"	"G"	"H"
Roof frame member to top of wall	Wall stud(s) to sill plate or foundation	Opening Headers to studs, jacks or cripples	Foundation or stemwall to rim joist or sill		Rim Joist to stud including and/or sill plate	Column bases and Column caps	Two story, lower wall to 2nd floor to upper wall	Special Location "Describe"

Connector Manufacturer symbol key

HUGHES Manufacturing, Inc. Use the Letter "H"	Simpson Strong-Tie Company, Inc Use the Letter "ST"	Southeastern Metals Mfg. Co., Inc. Use the Letter "SM"	Other manufacturers, Specify Name Use "X"

CONNECTOR CHART

Structural member I.D. No. as shown on Plans	Enter load values, use 2 lines if load differs at ends of same member: Uplift Load at bearing point	Perpendicular load to bearing	Horizontal load to bearing	Connector Symbols: for location RETANGLE	For Mfg.	Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	Size of nails and number of nails required at each connector	Building Inspector's Check-Off Column
T21	1617	SEE STEP #8	SEE STEP #8	B	H	RT22TW	2	18-16d	
T22	755						1	12-16d	
T23	589						1	8-16d	
T24	666						1	"	
T25	897			▼		▼	1	12-16d	
G1	2757			A		TA22	3	10-10d	
G2	1832						2	"	
G3	3865			▼		▼	3	"	
G4	3282			B		RT22TW	3	18-16d	
G5	7356					WWUC SYSTEM TO BE		FABRICATED	
G6	3118					RT22TW	3	18-16d	
G7	4119					WWUC SYSTEM TO BE		FABRICATED	
G8	2257					RT22TW	2	18-16d	
G9	2035					▼	2	"	
G10	3914					WWUC SYSTEM TO BE		FABRICATED	
G11	2067					RT22TW	2	18-16d	
G12	3276						3	"	
G13	1621						2	"	
J1B	589						1	8-16d	
J3A	385						1	6-16d	
J3B	743						1	10-16d	
J5B	897						1	12-16d	
KJ5	1522	▼	▼	▼	▼	▼	2	18-16d	

• DELPRETE RES.

STEP No. 9D Calculate Uplift Shear Loads for all Wood Frame Walls (plf)

This step will determine if uplift loads exceed the shear capacity of the specified wall diaphragm and nailing.

***** Omit any roof structural member having a direct vertical connector tie to the foundation, such as girders, beams & headers.***

Wall I.D. Number EW# SW#	Add total uplift loads for all roof members bearing on top of wall ** Enter value here	MATH	Length of Wall Less all opening widths		Equals Uplift Shear Load (PLF)	MATH	Enter Wall Uplift Shear Capacity		If Neg. STOP! If POS. Cont. →	Connectors for Stud to plates: Top Plate part No. (list now)	Sill Plate part No. (list now)	Min. Rated uplift load for the connector	MATH	Enter Value JJ		Maximum center distance between connectors (Feet)
EW9	~~589~~	1	2.5	-	236	-	285	-	-49				1		-	
EW10	3620	1	9	-	402	-	285	-	117	TP4X	TP4X	1462	1	117	-	4.0
EW11	593	1	2.5	-	237	-	285	-	-50				1		-	
EW12	1178	1	1.5	-	785	-	285	-	500	TP4X	TP4X	1462	1	500	-	3.0
EW13	0	1		-		-		-					1		-	
EW14	16549	1	29	-	591	-	285	-	306	TP4X	TP4X	1462	1	306	-	4.0
EW15	0	1		-		-		-					1		-	
EW16	3489	1	7	-	498	-	285	-	213	TP4X	TP4X	1462	1	213	-	4.0

Note: If uplift shear loads exceed shearwall uplift capacities additional connectors will be required to tie studs to sill plate and to double top plates.

JJ

Specify connector manufacturer HERE HUGHES

Engineer Approved Connector Specification Chart

* WORST CASE

Changes to this chart must be accompanied by an Engineering Change Order from a Registered Engineer.

Connector location symbol key

"A"	"B"	"C"	"D"		"E"	"F"	"G"	"H"
Roof frame member to top of wall	Wall stud(s) to sill plate or foundation	Opening Headers to studs, jacks or cripples	Foundation or stemwall to rim joist or sill		Rim Joist to stud including and/or sill plate	Column bases and Column caps	Two story, lower wall to 2nd floor to upper wall	Special Location "Describe"

Connector Manufacturer symbol key

HUGHES Manufacturing, Inc. Use the Letter "H"	Simpson Strong-Tie Company, Inc Use the Letter "ST"	Southeastern Metals Mfg. Co., Inc. Use the Letter "SM"	Other manufacturers, Specify Name Use "X"

CONNECTOR CHART

Structural member I.D. No. as shown on Plans	Enter load values, use 2 lines if load differs at ends of same member: Uplift Load at bearing point	Perpendicular load to bearing	Horizontal load to bearing	Connector Symbols: for location RECTANGLE	For Mfg.	Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	Size of nails and number of nails required at each connector	Building Inspector's Check-Off Column
J1	529	SEE STEP #8	SEE STEP #8	A	H	TA22	1	5-10d	
J3	666						1	"	
J5	803						1	6-10d	
T1	673						1	5-10d	
T2	1152						1	10-10d	
T3	854						1	6-10d	
T4	699						1	5-10d	
T5	309						1	"	
T6	172						1	"	
T7	666						1	"	
T8	1174						1	10-10d	
T9	1064						1	"	
T10	1221			B		RT22TW	1	18-16d	
T11	1296						1	"	
T12	1327						1	"	
T13	1073						1	"	
T14	756						1	12-16d	
T15	589						1	8-16d	
T16	900						1	12-16d	
T17	879						1	"	
T18	859						1	"	
T19	1169						1	16-16d	
T20	1738	↓	↓	↓	↓	↓	2	18-16d	

DELPRETE RES.

STEP No. 9D Calculate Uplift Shear Loads for all Wood Frame Walls (plf)

This step will determine if uplift loads exceed the shear capacity of the specified wall diaphragm and nailing.

***** Omit any roof structural member having a direct vertical connector tie to the foundation, such as girders, beams & headers.***

Wall I.D. Number EW# SW#	Add total uplift loads for all roof members bearing on top of wall ** Enter value here	MATH	Length of Wall Less all opening widths		Equals Uplift Shear Load (PLF)	MATH	Enter Wall Uplift Shear Capacity		If Neg. STOP! If POS. Cont. →	Connectors for Stud to plates: Top Plate part No. (list now)	Sill Plate part No. (list now)	Min. Rated uplift load for the connector	MATH	Enter Value JJ ▼		Maximum center distance between connectors (Feet)
EW1	13087	1	20.5	=	638	-	285	=	353	TP4X	TP4X	1462	1	353	=	4.0
EW2	2741	1	7	=	392	-	285	=	107	TP4X	TP4X	1462	1	107	=	4.0
EW3	1178	1	3	=	393	-	285	=	108	TP4X	TP4X	1462	1	108	=	4.0
EW4	2741	1	7	=	392	-	285	=	107	"	"	"	1	101	=	4.0
EW5	51679	1	14	=	406	-	285	=	121	"	"	"	1	121	=	4.0
EW6	589	1	3	=	196	-	285	=	-89				1		=	
EW7	7959	1	13	=	612	-	285	=	327	TP4X	TP4X	1462	1	327	=	4.0
EW8	11400	1	14	=	814	-	285	=	529	"	"	"	1	529	=	3.0

Note: If uplift shear loads exceed shearwall uplift capacities additional connectors will be required to tie studs to sill plate and to double top plates.

JJ ▲

Specify connector manufacturer HERE HUGHES

Engineer Approved Connector Specification Chart

*WORST CASE

Changes to this chart must be accompanied by an Engineering Change Order from a Registered Engineer.

Connector location symbol key

"A"	"B"	"C"	"D"		"E"	"F"	"G"	"H"
Roof frame member to top of wall	Wall stud(s) to sill plate or foundation	Opening Headers to studs, jacks or cripples	Foundation or stemwall to rim joist or sill		Rim Joist to stud including and/or sill plate	Column bases and Column caps	Two story, lower wall to 2nd floor to upper wall	Special Location "Describe"

Connector Manufacturer symbol key

HUGHES Manufacturing, Inc. Use the Letter "H"	Simpson Strong-Tie Company, Inc Use the Letter "ST"	Southeastern Metals Mfg. Co., Inc. Use the Letter "SM"	Other manufacturers, Specify Name Use "X"

CONNECTOR CHART

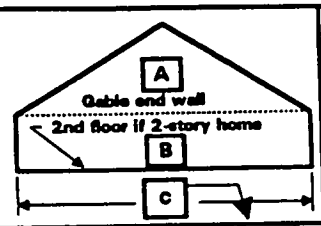
Structural member I.D. No. as shown on Plans	Enter load values, use 2 lines if load differs at ends of same member: Uplift Load at bearing point	Perpendicular load to bearing	Horizontal load to bearing	Connector Symbols: for location	For Mfg.	Manufacturer's connector Part Number	Quantity req'd. at each LOCATION	Size of nails and number of nails required at each connector	Building Inspector's Check-Off Column

DELPRETE RES.

STEP No. 9A · Lateral Loads perpendicular to Wood Gables

Calculate connector requirements for Gables at top of wall line.

This step will determine the maximum center distance between the specified connectors as shown in the last phase of this calculation step.



Verify roof diaphragm and nailing for this shear load. ▼

** OMIT STEP 8B IF MASONRY GABLE.

Gable I.D. No. on plans	Enter square foot Area ABOVE Wall line [A] *Enter for Wood Gable ONLY*	MATH	Enter square foot Area BELOW Wall line [B] *Omit if wall is masonry construction*		Math Function Value (results)	MATH	Enter Rect. velocity press. Step 1		Math Function Value (results)	MATH	Fixed Value for wall Wd. = 0.6 CMU = 0.9		Math Function Value (results)	MATH	Gable Width [C] ▼		Shear Load per lineal Foot
GF-1	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	
GF-2	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	
GF-3	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	
GF-4	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	

Gable Wall requirements with VAULTED ceilings:
Framed walls must be continuous floor to roof, masonry walls to be continuous or have wood gables secured to a level bond beam.

A gable end wall scissor truss is NOT permitted except for use as a framing guide and ceiling diaphragm nailer.

Gable I.D. No. on plans	List manufacturer's perpendicular to plate load value for the connector specified: Connector Part No. (List Now)	Rated Lateral Load	MATH	Shear Load per lineal Foot from above		Maximum centers between connectors
GF-1			/		=	
GF-2			/		=	
GF-3			/		=	
GF-4			/		=	

Gable end wall requirements with FLAT Ceilings:
All gable end walls must be continuous framed or continuous masonry from the floor to the flat ceiling line.

All ceiling support members within 8 feet of the exterior gable wall must have 2x4 blocking between them at 48" on center.

If the ridge height of a gable truss exceeds 8 ft. above the flat ceiling line, a wood gable shall be hand framed with 2 x [GG] at 16 " O.C..

fb = 1000 < 101 mph
fb = 1200 < 121 mph
fb = 1400 < 141 mph

Approved Alternate Anchorage for Gable truss and mandatory anchorage for framed gable on masonry end wall:
A minimum 2x8 pressure treated wood plate shall be bolted to the bond beam with 1/2 inch dia. anchor bolts at the following centers per wind speed (mph)

Velocity	up to 100	101 to 120	121 to 140
Bolt Ctr's	4 Feet	3 Feet	2 Feet

Remarks:

Specify connector manufacturer HERE

[GG] Gable Stud Size	Wind (mph) Velocity	Maximum Gable Ridge Height Above Ceiling: 8 Feet	10 feet	12 feet	14 feet	16 feet	18 feet
	up to 100	2x4	2x4	2x6	2x6	2x6	2x8
	101 to 120	2x4	2x6	2x8	2x8	2x8	2x10
	121 to 140	2x6	2x8	2x8	2x8	2x10	2x10

NOTE: All ceiling diaphragms abutting any exterior or interior load bearing walls including end walls shall be backed adjacent to these walls with 2x blocking and approved fasteners for the ceiling diaphragm along the perimeter of these walls shall be on the following centers:
Wind Velocity to 110 mph; fasteners to be 7" O.C. & Wind Velocity from 110 mph to 140 mph; fasteners to be 5" O.C.

STEP No. 9B Lateral Shear Loads for Wood Frame End Walls, Side Walls & Interior Shearwalls (plf)

Subject Wall I.D. No. on plans	Half the Lgth. of loading wall acting on subj.	MATH	Mean roof ht. Minus half the wall height		Area acting on subject shear wall	MATH	Rect. velocity press. Step 1 X 1.4 Hip X 1.5 Gab		Math Function Value (results) [HH]	Length of Subject Wall	MATH	Sum of subj. wall window & door open'g. widths		Math Function Value (results) [II]	Enter Value [HH]	MATH	Enter Value [II]		Lateral Shear force on Wall PLF
EW10	1.25	x	8	=	10	x	63.1	=	631	19	-	10	=	9	631	/	9	=	70
EW11	9.5	x	8	=	76	x	63.1	=	4796	5.5	-	3	=	2.5	4796	/	2.5	=	1918
EW12	2.75	x	8	=	22	x	63.1	=	1388	5.5	-	4	=	1.5	1388	/	1.5	=	925
EW13	17	x	8	=	136	x	63.1	=	8582	5.5	-	3	=	2.5	8582	/	2.5	=	3433
EW14	2.75	x	8	=	22	x	63.1	=	1388	34	-	6	=	28	1388	/	28	=	50
EW15	17	x	8	=	136	x	63.1	=	8582	2	-	0	=	2	8582	/	2	=	4291
EW16	8	x	8	=	64	x	63.1	=	4038	10	-	3	=	7	4038	/	7	=	577
EW17	7	x	8	=	56	x	63.1	=	3534	16	-	3	=	13	3534	/	13	=	272
EW18	10.25	x	8	=	82	x	63.1	=	5174	14	-	0	=	14	5174	/	14	=	370

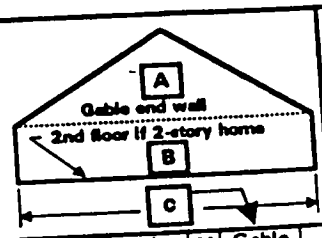
Note 1. The factored velocity pressure is applied over the full wall area to compensate for bi-lateral shear forces generating torsion on the diaphragm.
Note 2. See Engineer's Select-A-Spec for wall stud size, stud center distance and stud material with species.
Note 3. See Engineer's Select-A-Spec for wall sheathing diaphragm thickness, sheathing material, nail size and nailing center distance.

STEP No. 9C 8" Masonry Walls & Shearwalls General Reinforcement Specification

No. 1. See Engineer's Select-A-Spec for required size and number of vertical bars to be grouted in the CMU cells and the maximum center distance between vertical bar reinforcement.
No. 2. One number 7 bar or one number 9 bar shall be permitted as an alternate for two number 5 bars or two number 7 bars respectively.
No. 3. Reinforcing steel bar requirements shall not be additive when the reinforcing location happens to fulfil more than one requirement. In all cases the most stringent requirements shall be applicable.
No. 4. All shearwall segment lengths which are less than one-half the floor to ceiling height and greater than 1'-4" shall be constructed with column block, solid grouted with double the specified vertical reinforcement bars at each end of the wall segment and at center of the wall segment's length if the wall segment is 3 feet or greater in length.

DELPRETE RES.

STEP No. 9A Lateral Loads perpendicular to Wood Gables



Verify roof diaphragm and nailing for this shear load. ▼

Calculate connector requirements for Gables at top of wall line.

This step will determine the maximum center distance between the specified connectors as shown in the last phase of this calculation step.

•• OMIT STEP 9B IF MASONRY GABLE.

Gable I.D. No. on plans	Enter square foot Area ABOVE Wall line [A] *Enter for Wood Gable ONLY*	MATH	Enter square foot Area BELOW Wall line [B] *Omit if wall is masonry construction*		Math Function Value (results)	MATH	Enter Rect. velocity press. Step 1		Math Function Value (results)	MATH	Fixed Value for wall Wd. = 0.6 CMU = 0.9		Math Function Value (results)	MATH	Gable Width [C] ▼		Shear Load per lineal Foot
GF-1	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	
GF-2	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	
GF-3	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	
GF-4	Sq.Ft.	+	Sq.Ft.	=		x		=		x	0.6 or 0.9	=		/		=	

Gable Wall requirements with VAULTED ceilings:
Framed walls must be continuous floor to roof, masonry walls to be continuous or have wood gables secured to a level bond beam.

A gable end wall scissor truss is NOT permitted except for use as a framing guide and ceiling diaphragm nailer.

Gable I.D. No. on plans	List manufacturer's perpendicular to plate load value for the connector specified: Connector Part No. (List Now)	Rated Lateral Load	MATH	Shear Load per lineal Foot from above		Maximum centers between connectors
GF-1			/		=	
GF-2			/		=	
GF-3			/		=	
GF-4			/		=	

Gable end wall requirements with FLAT Ceilings:
All gable end walls must be continuous framed or continuous masonry from the floor to the flat ceiling line.

All ceiling support members within 8 feet of the exterior gable wall must have 2x4 blocking between them at 48" on center.

If the ridge height of a gable truss exceeds 8 ft. above the flat ceiling line, a wood gable shall be hand framed with 2 x [GG] at 16 " O.C..

fb = 1000 < 101 mph
fb = 1200 < 121 mph
fb = 1400 < 141 mph

Remarks:

Specify connector manufacturer HERE

Approved Alternate Anchorage for Gable truss and mandatory anchorage for framed gable on masonry end wall:
A minimum 2x8 pressure treated wood plate shall be bolted to the bond beam with 1/2 inch dia. anchor bolts at the following centers per wind speed (mph)

Velocity	up to 100	101 to 120	121 to 140
Bolt Ctr's	4 Feet	3 Feet	2 Feet

[GG] Gable Stud Size

Wind (mph) Velocity	Maximum Gable Ridge Height Above Ceiling: 8 Feet	10 feet	12 feet	14 feet	16 feet	18 feet
up to 100	2x4	2x4	2x6	2x6	2x6	2x8
101 to 120	2x4	2x6	2x8	2x8	2x8	2x10
121 to 140	2x6	2x8	2x8	2x8	2x10	2x10

NOTE: All ceiling diaphragms abutting any exterior or interior load bearing walls including end walls shall be backed adjacent to these walls with 2x blocking and approved fasteners for the ceiling diaphragm along the perimeter of these walls shall be on the following centers: Wind Velocity to 110 mph; fasteners to be 7" O.C. & Wind Velocity from 110 mph to 140 mph; fasteners to be 5" O.C.

STEP No. 9B Lateral Shear Loads for Wood Frame End Walls, Side Walls & Interior Shearwalls (plf)

Subject Wall I.D. No. on plans	Half the Lgth. of loading wall acting on subj.	MATH	Mean roof ht. Minus half the wall height		Area acting on subject shear wall	MATH	Rect. velocity press. Step 1 X 1.4 Hip X 1.5 Gab		Math Function Value (results) [HH] ▼	Length of Subject Wall	MATH	Sum of subj. wall window & door open'g. widths		Math Function Value (results) [II] ▼	Enter Value [HH] ▼	MATH	Enter Value [II] ▼		Lateral Shear force on Wall PLF
EW1	7	x	8	=	56	x	63.1	=	3534	20.5	-	0	=	20.5	3534	/	20.5	=	172
EW2	10	x	8	=	80	x	63.1	=	5048	7	-	0	=	7	5048	/	7	=	721
EW3	3.5	x	8	=	28	x	63.1	=	1767	7	-	4	=	3	1767	/	3	=	589
EW4	8	x	8	=	64	x	63.1	=	4038	7	-	0	=	7	4038	/	7	=	577
EW5	3.5	x	8	=	28	x	63.1	=	1767	16	-	2	=	14	1767	/	14	=	126
EW6	8	x	8	=	64	x	63.1	=	4038	3	-	0	=	3	4038	/	3	=	1346
EW7	10	x	8	=	80	x	63.1	=	5048	16	-	3	=	13	5048	/	13	=	388
EW8	8	x	8	=	64	x	63.1	=	4038	20	-	6	=	14	4038	/	14	=	288
EW9	10	x	8	=	80	x	63.1	=	5048	2.5	-	0	=	2.5	5048	/	2.5	=	2019

Note 1. The factored velocity pressure is applied over the full wall area to compensate for bi-lateral shear forces generating torsion on the diaphragm.
Note 2. See Engineer's Select-A-Spec for wall stud size, stud center distance and stud material with species.
Note 3. See Engineer's Select-A-Spec for wall sheathing diaphragm thickness, sheathing material, nail size and nailing center distance.

STEP No. 9C 8" Masonry Walls & Shearwalls General Reinforcement Specification

No. 1. See Engineer's Select-A-Spec for required size and number of vertical bars to be grouted in the CMU cells and the maximum center distance between vertical bar reinforcement.

No. 2. One number 7 bar or one number 9 bar shall be permitted as an alternate for two number 5 bars or two number 7 bars respectively.

No. 3. Reinforcing steel bar requirements shall not be additive when the reinforcing location happens to fulfil more than one requirement. In all cases the most stringent requirements shall be applicable.

No. 4. All shearwall segment lengths which are less than one-half the floor to ceiling height and greater than 1'-4" shall be constructed with column block, solid grouted with double the specified vertical reinforcement bars at each end of the wall segment and at center of the wall segment's length if the wall segment is 3 feet or greater in length.

STEP No. 8

Calculate lateral loads perpendicular and horizontal to bearing surface for all roof frame members.

General Information

Roof Pitch Ratio	1:12	2:12	3:12	4:12	5:12	6:12	7:12	8:12	9:12	10:12	11:12	12:12
Pitch Angle Degrees	5 Degrees	10 Degrees	14 Degrees	19 Degrees	23 Degrees	27 Degrees	30 Degrees	34 Degrees	37 Degrees	40 Degrees	43 Degrees	45 Degrees
Perpendicular Force factor	0.05883	0.12501	0.18422	0.26762	0.34329	0.42857	0.50002	0.60715	0.69814	0.80002	0.91490	1.00000
Horizontal Force factor	0.03530	0.07501	0.11053	0.16057	0.20597	0.25714	0.30001	0.36429	0.41888	0.48001	0.54894	0.60000

Roof frame member I.D. No. on plans	Col. A Uplift load from Steps 3, 5 or 6	Col. B Enter Roof Pitch Ratio	Col. C Enter Perpendicular Force factor from above	Col. D Enter Horizontal Force factor from above	Col. E Lateral Load Perpendicular to bearing surface Lbs.	Col. F Lateral Load Horizontal to bearing surface Lbs.	Roof frame member I.D. No. on plans	Col. A Uplift load from Steps 3, 5 or 6	Col. B Enter Roof Pitch Ratio	Col. C Enter Perpendicular Force factor from above	Col. D Enter Horizontal Force factor from above	Col. E Lateral Load Perpendicular to bearing surface Lbs.	Col. F Lateral Load Horizontal to bearing surface Lbs.
J1	529	5:12	0.34329	0.20597	182	109	KJ7C	1895	5:12	0.34329	0.20597	647	388
J3	666				229	137							
J5	903				276	165							
T1	673				231	139							
T2	1152				395	237							
T3	854				293	176							
T4	699				240	144							
T5	309				106	64							
T6	172				59	35							
T7	666				229	137							
T8	1174				403	242							
T9	1064				365	219							
T10	1221				419	251							
T11	1296				445	267							
T12	1327				456	273							
T13	1073				368	221							
T14	756				260	156							
T15	589				202	121							
T16	900				309	185							
T17	879				302	181							
T18	859				295	177							
T19	1169				401	241							
T20	1738				597	358							
T21	1617				556	333							
T22	755				259	156							
T23	589				202	121							
T24	666				229	137							
T25	897				308	185							
G1	2757				946	568							
G2	1832				629	377							
G3	3265				1121	672							
G4	3322				1106	664							
G5	7356				2525	1515							
G6	3118				1070	642							
G7	4119				1414	848							
G8	2257				775	465							
G9	2035				699	419							
G10	3914				1344	806							
G11	2067				710	426							
G12	3276				1125	675							
G13	1821				625	375							
J1B	599				202	121							
J3A	385				132	79							
J3B	743				255	153							
J5B	897				308	185							
KJ5	1522				522	313							
KJ5A	1658				569	341							
KJ5B	1361				467	280							
KJ7	1679	↓	↓	↓	576	346							
Columns & Calculation Instructions	A	B	C	D	E	F	Columns & Calculation Instructions	A	B	C	D	E	F
					A x C = E	A x D = G						A x C = E	A x D = F

DELPRETE RES.

STEP No. 7

Calculate Wind Load Values for all opening headers at their bearing points.
(List headers over exterior & interior bearing wall openings in this calculation step.)

NOTE: Non-symetrical header loading with extreme loads require special calculations in a different format. Use Step 6A thru 6D.

List all roof frame members that bear their loads on the specific opening header I.D. No. listed below;

Opening Header I.D. No. H-1

Line #	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
1	J5	343	x	1	=	343
2	T10	407	x	1	=	407
3			x		=	
4			x		=	
5	Sub-Total →					750
6	Divide Line 5 by 2 =					375

Opening Header I.D. No. H-2

Line #	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
1	J3	206	x	1	=	206
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					206
6	Divide Line 5 by 2 =					103

Opening Header I.D. No. H-3

Line #	Structural member I.D. number on plans	Uplift Loads acting on this HEADER	MATH	Quantity of members with same I.D. No. bearing on this open'g header		(Totals) Add lines 1 thru 4 and enter sum on line 5
1	T10	407	x	2	=	814
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					814
6	Divide Line 5 by 2 =					407

Opening Header I.D. No. H-4

1	T10	407	x	2	=	814
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					814
6	Divide Line 5 by 2 =					407

Opening Header I.D. No. H-5

1	T14	349	x	2	=	698
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					698
6	Divide Line 5 by 2 =					349

Opening Header I.D. No. H-6

1	T14	349	x	2	=	698
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					698
6	Divide Line 5 by 2 =					349

Opening Header I.D. No. H-7

1	T14	349	x	2	=	698
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					698
6	Divide Line 5 by 2 =					349

Opening Header I.D. No. H-8

1	J3	206	x	1	=	206
2	J5	343	x	1	=	343
3	T10	407	x	1	=	407
4			x		=	
5	Sub-Total →					956
6	Divide Line 5 by 2 =					478

Opening Header I.D. No. H-9

1	J1	69	x	1	=	69
2	J3	206	x	1	=	206
3			x		=	
4			x		=	
5	Sub-Total →					275
6	Divide Line 5 by 2 =					138

Opening Header I.D. No. H-10

1	T20	1430	x	1	=	1430
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					1430
6	Divide Line 5 by 2 =					715

Opening Header I.D. No. H-11

1	J1	69	x	1	=	69
2	J3	206	x	1	=	206
3			x		=	
4			x		=	
5	Sub-Total →					275
6	Divide Line 5 by 2 =					138

Opening Header I.D. No. H-12

1	T10	407	x	2	=	814
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					814
6	Divide Line 5 by 2 =					407

Opening Header I.D. No. H-13

1	J5	343	x	1	=	343
2	T10	407	x	1	=	407
3			x		=	
4			x		=	
5	Sub-Total →					750
6	Divide Line 5 by 2 =					375

Opening Header I.D. No. H-14

1	T14	349	x	2	=	698
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					698
6	Divide Line 5 by 2 =					349

Opening Header I.D. No. H-15

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-16

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-17

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-18

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-19

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-20

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-21

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-22

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-23

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-24

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-25

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-26

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

Opening Header I.D. No. H-27

1			x		=	
2			x		=	
3			x		=	
4			x		=	
5	Sub-Total →					
6	Divide Line 5 by 2 =					

List I.D. numbers of all Opening Headers along with their respective Line #6 load values on the Connector Specification Chart.

DELPRETE RES.

NOTE Any girder truss or beam bearing point that has a continuous vertical load path to the foundation is a primary bearing point load. Any girder truss or beam bearing point that bears its load upon another girder truss or beam is a contributory bearing point load.
All girder trusses and beams which do NOT have other girder trusses or beams bearing their load upon them can now be listed with their Step 6A, Line 14a. or b. load values in the Connector Specification Chart.

STEP No. 6B — Establish contributory load values imposed upon girder trusses or beams based on the bearing point location along the span.

List Girder truss or Beam bearing on another Girder Truss or Beam		List Girder truss or Beam which is receiving the load		Divide the LOAD by the SPAN. Equals lbs per Lin.Ft.	List Girder truss or Beam bearing on another Girder Truss or Beam		List Girder truss or Beam which is receiving the load		Divide the LOAD by the SPAN. Equals lbs per Lin.Ft.
I.D. No.	Uplift Load at Bearing point	I.D. No.	SPAN brg. to brg.		I.D. No.	Uplift Load at Bearing point	I.D. No.	SPAN brg. to brg.	
G6	3118	G5	17.5	178					
G6	3118	G7	14.5	215					
G10	3419	G12	32	107					
G13	1821	G12	16	114					
G13	1821	G11	6.5	280					
G11	947	G10	32	30					
	From Step 6A Line 14a. or b.			EE ▲		From Step 6A Line 14a. or b.			EE ▲

STEP No. 6C — Calculate all contributory loads imposed upon other Girder Trusses or Beams at all PRIMARY bearing points.

List Girder truss or Beam which is receiving the load		List Girder truss or Beam which is bearing its Load on this Girder Truss or Beam		Multiply "B" Feet times Load "EE" equals load at End "A"	List Girder truss or Beam which is receiving the load		List Girder truss or Beam which is bearing its Load on this Girder Truss or Beam		Multiply "A" Feet times Load "EE" equals load at End "B"
A I.D. No. for End "A"	Load point from End "B" Feet	I.D. No.	Load PLF "EE"		B I.D. No. for End "B"	Load point from End "A" Feet	I.D. No.	Load PLF "EE"	
G5A	10.5	G6	178	1869	G5B	7	G6	178	1246
G7A	7.5	G6	215	1613	G7B	7	G6	215	1505
G12A	9.5	G10	107	1017	G12B	6.5	G10	107	696
G12A	6.5	G13	114	741	G12B	9.5	G13	114	1083
G11A	4.0	G13	280	1120	G11B	2.5	G13	280	700
G10A	15.5	G11	30	465	G10B	16.5	G11	30	495
If "FF" is a primary bearing point load go to step 6D otherwise enter "FF" in step 6B and continue				FF ▲	If "FF" is a primary bearing point load go to step 6D otherwise enter "FF" in step 6B and continue				FF ▲

STEP No. 6D — List ALL Girder Trusses and Beams to establish the primary uplift loads at both ENDS A & B for proper connector sizing

List Girder Truss or Beam		Contributory LOADS from STEP 6C						ADD across all values 14a. or b. + all FF values	TOTAL UPLIFT at primary bearing point
I. D. Number Dash End "A" or "B"	Load from Step 6A Line 14a. or b.	FF ▼	FF ▼	FF ▼	FF ▼	FF ▼	FF ▼		
G5A	3055	1869						Equals =	4924
G5B	3055	1246						Equals =	7356
G7A	2506	1613						Equals =	4119
G7B	2506	1505						Equals =	4011
G12A	2059	1017						Equals =	3276
G12B	2059	696						Equals =	2955
G11A	947	1120						Equals =	2067
G11B	947	700						Equals =	1647
G10A	3419	465						Equals =	3884
G10B	3419	495						Equals =	3914
								Equals =	
								Equals =	
								Equals =	
								Equals =	
								Equals =	
								Equals =	
								Equals =	
								Equals =	
								Equals =	
								Equals =	

DELPRETE RES.

STEP No. 6A

Calculate Wind Load Values for all roof framing girder trusses and beams at their bearing points.

(Do NOT list headers over ext. & int. bearing wall openings in this calculation step. See Step No. 7)

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. No. Box: G12

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T14	349	x	2	=	698
2	T23	77	x	6	=	462
3	T24	154	x	2	=	308
4	T25	385	x	4	=	1540
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					3008
12	Divide Line 11 by 2 =					1504
13a	This member's uplift load from Steps 3 or 5 (End a.)					755
13b	This member's uplift load from Steps 3 or 5 (End b.)					755
14a	Add Line 12 and Line 13a = (End a.)					2259
14b	Add Line 12 and Line 13b = (End b.)					2259

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. No. Box

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1			x		=	
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					
12	Divide Line 11 by 2 =					
13a	This member's uplift load from Steps 3 or 5 (End a.)					
13b	This member's uplift load from Steps 3 or 5 (End b.)					
14a	Add Line 12 and Line 13a = (End a.)					
14b	Add Line 12 and Line 13b = (End b.)					

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. No. Box

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1			x		=	
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					
12	Divide Line 11 by 2 =					
13a	This member's uplift load from Steps 3 or 5 (End a.)					
13b	This member's uplift load from Steps 3 or 5 (End b.)					
14a	Add Line 12 and Line 13a = (End a.)					
14b	Add Line 12 and Line 13b = (End b.)					

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. No. Box: G13

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ7C	622	x	2	=	1244
2	T10	407	x	2	=	814
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					2058
12	Divide Line 11 by 2 =					1029
13a	This member's uplift load from Steps 3 or 5 (End a.)					792
13b	This member's uplift load from Steps 3 or 5 (End b.)					792
14a	Add Line 12 and Line 13a = (End a.)					1821
14b	Add Line 12 and Line 13b = (End b.)					1821

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. No. Box

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1			x		=	
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					
12	Divide Line 11 by 2 =					
13a	This member's uplift load from Steps 3 or 5 (End a.)					
13b	This member's uplift load from Steps 3 or 5 (End b.)					
14a	Add Line 12 and Line 13a = (End a.)					
14b	Add Line 12 and Line 13b = (End b.)					

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below;

Girder Truss or Beam I.D. No. Box

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1			x		=	
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					
12	Divide Line 11 by 2 =					
13a	This member's uplift load from Steps 3 or 5 (End a.)					
13b	This member's uplift load from Steps 3 or 5 (End b.)					
14a	Add Line 12 and Line 13a = (End a.)					
14b	Add Line 12 and Line 13b = (End b.)					

DELPRETE RES.

STEP No. 6A

Calculate Wind Load Values for all roof framing girder trusses and beams at their bearing points.

(Do NOT list headers over ext. & int. bearing wall openings in this calculation step. See Step No. 7)

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; ▼ Girder Truss or Beam I.D. No. Box: **G6**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss	(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T10	407	x	11	4477
2			x		
3			x		
4			x		
5			x		
6			x		
7			x		
8			x		
9			x		
10			x		
11	Sub-Total →				4477
12	Divide Line 11 by 2 =				2239
13a	This member's uplift load from Steps 3 or 5 (End a.)				879
13b	This member's uplift load from Steps 3 or 5 (End b.)				879
14a	Add Line 12 and Line 13a = (End a.)				3118
14b	Add Line 12 and Line 13b = (End b.)				3118

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; ▼ Girder Truss or Beam I.D. No. Box: **G7**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss	(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T16	900	x	3	2700
2	T17	879	x	1	879
3			x		
4			x		
5			x		
6			x		
7			x		
8			x		
9			x		
10			x		
11	Sub-Total →				3579
12	Divide Line 11 by 2 =				1790
13a	This member's uplift load from Steps 3 or 5 (End a.)				716
13b	This member's uplift load from Steps 3 or 5 (End b.)				716
14a	Add Line 12 and Line 13a = (End a.)				2506
14b	Add Line 12 and Line 13b = (End b.)				2506

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; ▼ Girder Truss or Beam I.D. No. Box: **G8**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss	(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ5	593	x	1	593
2	KJ5A	593	x	2	1186
3	KJ5B	593	x	1	593
4			x		
5			x		
6			x		
7			x		
8			x		
9			x		
10			x		
11	Sub-Total →				2372
12	Divide Line 11 by 2 =				1186
13a	This member's uplift load from Steps 3 or 5 (End a.)				1071
13b	This member's uplift load from Steps 3 or 5 (End b.)				1071
14a	Add Line 12 and Line 13a = (End a.)				2257
14b	Add Line 12 and Line 13b = (End b.)				2257

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; ▼ Girder Truss or Beam I.D. No. Box: **G9**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss	(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJK	622	x	2	1244
2	T10	407	x	3	1221
3			x		
4			x		
5			x		
6			x		
7			x		
8			x		
9			x		
10			x		
11	Sub-Total →				2465
12	Divide Line 11 by 2 =				1233
13a	This member's uplift load from Steps 3 or 5 (End a.)				802
13b	This member's uplift load from Steps 3 or 5 (End b.)				802
14a	Add Line 12 and Line 13a = (End a.)				2035
14b	Add Line 12 and Line 13b = (End b.)				2035

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; ▼ Girder Truss or Beam I.D. No. Box: **G10**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss	(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ7C	622	x	1	622
2	T10	407	x	5	2035
3	G11	947	x	1	947
4			x		
5			x		
6			x		
7			x		
8			x		
9			x		
10			x		
11	Sub-Total →				3604
12	Divide Line 11 by 2 =				1802
13a	This member's uplift load from Steps 3 or 5 (End a.)				1617
13b	This member's uplift load from Steps 3 or 5 (End b.)				1617
14a	Add Line 12 and Line 13a = (End a.)				3419
14b	Add Line 12 and Line 13b = (End b.)				3419

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; ▼ Girder Truss or Beam I.D. No. Box: **G11**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss	(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T22	755	x	1	755
2	J5A	385	x	1	385
3			x		
4			x		
5			x		
6			x		
7			x		
8			x		
9			x		
10			x		
11	Sub-Total →				1140
12	Divide Line 11 by 2 =				570
13a	This member's uplift load from Steps 3 or 5 (End a.)				377
13b	This member's uplift load from Steps 3 or 5 (End b.)				377
14a	Add Line 12 and Line 13a = (End a.)				947
14b	Add Line 12 and Line 13b = (End b.)				947

DELPRETE RES.

STEP No. 6A

Calculate Wind Load Values for all roof framing girder trusses and beams at their bearing points.

(Do NOT list headers over ext. & int. bearing wall openings in this calculation step. See Step No. 7)

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **KJ7C**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	J1	77	x	2	=	154
2	J3	231	x	2	=	462
3	J5	385	x	2	=	770
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					1386
12	Divide Line 11 by 2 =					693
13a	This member's uplift load from Steps 3 or 5 (End a.)					692
13b	This member's uplift load from Steps 3 or 5 (End b.)					1192
14a	Add Line 12 and Line 13a = (End a.)					1385
14b	Add Line 12 and Line 13b = (End b.)					1885

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **G2**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ7	1168	x	1	=	1168
2	T4	334	x	1	=	334
3	T5	309	x	1	=	309
4	T6	172	x	1	=	172
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					1982
12	Divide Line 11 by 2 =					992
13a	This member's uplift load from Steps 3 or 5 (End a.)					840
13b	This member's uplift load from Steps 3 or 5 (End b.)					840
14a	Add Line 12 and Line 13a = (End a.)					1832
14b	Add Line 12 and Line 13b = (End b.)					1832

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **G4**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ7C	1315	x	2	=	2630
2	T10	407	x	3	=	1221
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					3851
12	Divide Line 11 by 2 =					1926
13a	This member's uplift load from Steps 3 or 5 (End a.)					1296
13b	This member's uplift load from Steps 3 or 5 (End b.)					1296
14a	Add Line 12 and Line 13a = (End a.)					3222
14b	Add Line 12 and Line 13b = (End b.)					3222

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **G1**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ7	1168	x	2	=	2336
2	T1	308	x	3	=	924
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					3260
12	Divide Line 11 by 2 =					1630
13a	This member's uplift load from Steps 3 or 5 (End a.)					1127
13b	This member's uplift load from Steps 3 or 5 (End b.)					1127
14a	Add Line 12 and Line 13a = (End a.)					2757
14b	Add Line 12 and Line 13b = (End b.)					2757

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **G3**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	KJ7	1168	x	2	=	2336
2	T1	308	x	6	=	1848
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					4184
12	Divide Line 11 by 2 =					2092
13a	This member's uplift load from Steps 3 or 5 (End a.)					1173
13b	This member's uplift load from Steps 3 or 5 (End b.)					1173
14a	Add Line 12 and Line 13a = (End a.)					3265
14b	Add Line 12 and Line 13b = (End b.)					3265

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **G5**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T16	900	x	3	=	2700
2	T17	879	x	2	=	1758
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					4458
12	Divide Line 11 by 2 =					2229
13a	This member's uplift load from Steps 3 or 5 (End a.)					826
13b	This member's uplift load from Steps 3 or 5 (End b.)					826
14a	Add Line 12 and Line 13a = (End a.)					3055
14b	Add Line 12 and Line 13b = (End b.)					3055

DELPRETE RES.

STEP No. 6A

Calculate Wind Load Values for all roof framing girder trusses and beams at their bearing points.

(Do NOT list headers over ext. & int. bearing wall openings in this calculation step. See Step No. 7)

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **KJ5**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T14	349	x	1	=	349
2	T15	77	x	1	=	77
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					426
12	Divide Line 11 by 2 =					213
13a	This member's uplift load from Steps 3 or 5 (End a.)					593
13b	This member's uplift load from Steps 3 or 5 (End b.)					1309
14a	Add Line 12 and Line 13a = (End a.)					806
14b	Add Line 12 and Line 13b = (End b.)					1522

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **KJ5A**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T14	349	x	2	=	698
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					698
12	Divide Line 11 by 2 =					349
13a	This member's uplift load from Steps 3 or 5 (End a.)					593
13b	This member's uplift load from Steps 3 or 5 (End b.)					1309
14a	Add Line 12 and Line 13a = (End a.)					942
14b	Add Line 12 and Line 13b = (End b.)					1658

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **KJ5B**

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	T14	349	x	1	=	349
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					349
12	Divide Line 11 by 2 =					175
13a	This member's uplift load from Steps 3 or 5 (End a.)					593
13b	This member's uplift load from Steps 3 or 5 (End b.)					593
14a	Add Line 12 and Line 13a = (End a.)					1361
14b	Add Line 12 and Line 13b = (End b.)					1361

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box: **KJ7**

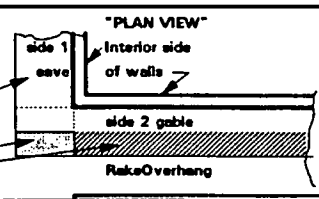
Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1	J1	69	x	2	=	138
2	J3	206	x	2	=	412
3	J5	343	x	2	=	686
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					1236
12	Divide Line 11 by 2 =					618
13a	This member's uplift load from Steps 3 or 5 (End a.)					550
13b	This member's uplift load from Steps 3 or 5 (End b.)					1061
14a	Add Line 12 and Line 13a = (End a.)					1168
14b	Add Line 12 and Line 13b = (End b.)					1679

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box:

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1			x		=	
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					
12	Divide Line 11 by 2 =					
13a	This member's uplift load from Steps 3 or 5 (End a.)					
13b	This member's uplift load from Steps 3 or 5 (End b.)					
14a	Add Line 12 and Line 13a = (End a.)					
14b	Add Line 12 and Line 13b = (End b.)					

List all roof frame members that bear their loads on the specific girder truss or beam I.D. No. listed below; Girder Truss or Beam I.D. No. Box:

Line #	Structural member I.D. No. on plans	Loads from Steps 3 & 5 Values which apply	MATH	Quantity of members with same I.D. No. bearing on this beam or truss		(Totals) Add lines 1 thru 10 & enter sum on line 11
1			x		=	
2			x		=	
3			x		=	
4			x		=	
5			x		=	
6			x		=	
7			x		=	
8			x		=	
9			x		=	
10			x		=	
11	Sub-Total →					
12	Divide Line 11 by 2 =					
13a	This member's uplift load from Steps 3 or 5 (End a.)					
13b	This member's uplift load from Steps 3 or 5 (End b.)					
14a	Add Line 12 and Line 13a = (End a.)					
14b	Add Line 12 and Line 13b = (End b.)					



STEP No. 4A (Only if Rake overhang exceeds 1 foot)

Contributory Uplift Load Values for outside wall corner overhang areas:

Use for ALL GABLE Corners ONLY

Identical corners should have the same I.D. number

AA represents uplift load for this corner overhang area

BB represents excess rake overhang uplift load

STEP No. 4C

Hypotenuse lengths for roof frame Hip King-Jacks

Select the LENGTH values CC and DD from this chart based upon the hip girder truss set-back distance from the exterior bearing wall and the eave overhang length.

Corner I.D. as shown on plans	Enter Sq. Ft. of Shaded corner Area	MATH	Fixed Value		Math Function Value (results)	MATH	specific rectangle Velocity pressure (sheet 1)		Value AA ▼
CR-1		x	4	=		x		=	
CR-2		x	4	=		x		=	
CR-3		x	4	=		x		=	
CR-4		x	4	=		x		=	
CR-5		x	4	=		x		=	
CR-6		x	4	=		x		=	
CR-7		x	4	=		x		=	
CR-8		x	4	=		x		=	

Set-Back Distance in feet	CC Bearing Length	Set-Back Distance in feet	CC Bearing Length	Set-Back Distance in feet	CC Bearing Length	Eave Over-Hang Distance in feet	DD overhang Length
1	1.4	9	12.7	17	24.0	1.00	1.4
2	2.8	10	14.1	18	25.5	1.33	1.9
3	4.2	11	15.6	19	26.9	1.50	2.1
4	5.7	12	17.0	20	28.3	2.00	2.8
5	7.1	13	18.4	21	29.7	2.50	3.5
6	8.5	14	19.8	22	31.1	3.00	4.2
7	9.9	15	21.2	23	32.5	3.50	4.9
8	11.3	16	22.6	24	33.9	4.00	5.7

STEP No. 4B **Calculate Wind Uplift Load Values at bearing points of gable truss or rafter and uplift per lineal foot for gable diaphragm design and connector sizing on hand framed gables**

GF# or Member I.D. No. as shown on plans	Col. A Enter half Sq. Ft. of hatched rake area brg. to brg.	MATH	Col. B Fixed Value		Col. C Math Function Value (results)	MATH	Col. D specific rectangle Velocity pressure (sheet 1)		Col. E Value (results) BB ▼	MATH	Col. F Plus Value AA ▼	Col. G List Ka. & Lb. values from Step 3	Col. H Uplift at each bearing point a. & b.	Col. I Total uplift for both bearing points	Col. J List horizont'l bearing distance (Feet)	Col. K Uplift shear on gable sheathing (PLF)	Col. L Sheathing Mat'l. & thickness / Nail size & V. Ctrs.	LINE Letter Ridge end = a. Eave end = b.
		X	2.4	=		X		=		+								a.
										+								b.
		X	2.4	=		X		=		+								a.
										+								b.
		X	2.4	=		X		=		+								a.
										+								b.
		X	2.4	=		X		=		+								a.
										+								b.
		X	2.4	=		X		=		+								a.
										+								b.
		X	2.4	=		X		=		+								a.
										+								b.
		X	2.4	=		X		=		+								a.
										+								b.

A x B = C C x D = E E+F+G = H Ha+Hb = I I / J = K

STEP No. 4D List the values requested and perform the calculations on Lines 3, 4, and 6 for each dissimilar king-jack shown on plans. Then, insert the calculated values from Line 4 and Line 5 into Step 3, Column J, lines a. & b. respectively.

Line Number											
	King-Jack I.D. No. as shown on plans ▶	KJ7	KJ5	KJ5A	KJ5B	KJ7C					
	Set-back distance (Ref.)	7	5	5	5	7					
	Roof Pitch Ratio (rise to 12) (Ref.)	5	5	5	5	5					
1	Pitch Factor = Page 1, General info.	1.08333	1.08333	1.08333	1.08333	1.08333					
2	List the CC length value	9.9	7.1	7.1	7.1	9.9					
3	Multiply Line 1 times Line 2 =	10.7	7.7	7.7	7.7	10.7					
4	Divide Line 3 value by 2 =	5.35	3.85	3.85	3.85	5.35					
5	List the DD overhang length value	2.8	2.8	2.8	0	2.8					
6	Multiply Line 1 times Line 5 =	3.03	3.03	3.03		3.03					

STEP No. 5 Determine the ADDITIONAL wind uplift load for those roof frame members that extend or exist over partially enclosed and/or open areas.

Member I.D. No. as shown on plans	Col. A Load Ka. & Lb. from Step No. 3 (Lbs.)	Col. B Velocity pressure from Step No. 3 Col. "D"	Col. C Additional uplift load per sq. ft. (Lbs.)	Col. D Member length over the open area only (Feet)	Col. E Member distance on center (Feet)	Col. F Effective sq. ft. area per member	Col. G Sum of additional uplift load / member (Lbs.)	Col. H Member span dist brg to br (Feet)	Col. I additional uplift load per lineal foot (PLF)	Col. J Load Ctr. dist. to: brg pt b. / brg pt a. (Feet)	Col. K additional uplift load t brg. pts a. and b. (Lbs.)	Col. L Revised uplift load t brg. pts a. and b. (Lbs.)	LINE Letter Ridge end = a. Eave end = b.
													a.
													b.
													a.
													b.
													a.
													b.
													a.
													b.
													a.
													b.
													a.
													b.

Calculation Instructions B x 0.75 = C D x E = F C x F = G G / H = I I x J = K A + K = L

STEP No. 3 (Cont.) Calculate wind uplift loads for structural roof framing members at both bearing points.

List hip roof king-jacks after Step 4D is completed. Do include hand framed Gables, GF-#.

Note 2: The selection of the coefficient "C" must be from the chart shown on page 1 and is based first on the roof framing center distance, 16" or 24" on center; next the chart for the appropriate roof pitch angle must be used in conjuction with the roof frame member span length from bearing point to bearing point. Follow calculation instructions at the bottom of the columns.

Important: Select the correct coeficient for each roof framing member based on the number of Edge or Ridge strip areas acting on that specific roof frame member. Typically, most hip jacks and some rafters have only one edge or ridge strip.

The load result of this calculation is the net uplift reaction vertical to the bearing point less the dead load reaction.

Col. A Rectangle Letter-	Col. B Roof frame member I.D. No. on plans	Col. C Coefficient "C" Note 2 Roof and overhang	Col. D Velocity pressure	Col. E Calculated Value	Col. F Dead Load (PSF)	Col. G Calculated Value	Col. H Roof frame center distance (feet)	Col. I Calculated Value	Col. J* Line a. = 1/2 Span Line b. = overhang	Col. K Uplift load opposite eave end for a.(Lbs.)	Col. L* Uplift load at eave w/ overhang for b.(Lbs.)	Letter Ridge end = a. Eave end = b.
B	T15	2.04	45.1	92.0	15	77.0	2	154.0	0.5	77.0		a.
		3.17		142.9		127.9		255.8	2.0	511.6	589	b.
	T16	1.24		55.9		40.9		81.8	11.0	899.8		a.
		2.05		—		—		—	0	—	900	b.
	T17	1.24		55.9		40.9		81.8	10.75	879.3		a.
		2.05		—		—		—	0	—	879	b.
	T18	1.24		55.9		40.9		81.8	10.5	858.9		a.
		2.05		—		—		—	0	—	859	b.
	T19	1.24		55.9		40.9		81.8	10.5	858.9		a.
		2.05		92.4		77.4		154.8	2.0	309.6	1169	b.
	T20	1.34		60.4		45.4		90.8	15.75	1430.1		a.
		2.04		92.0		77.0		154.0	2.0	308.0	1738	b.
	T21	1.24		55.9		40.9		81.8	16.0	1308.8		a.
		2.04		92.0		77.0		154.0	2.0	308	1617	b.
	T22	1.38		62.2		47.2		94.4	8.0	755.2		a.
		2.23		—		—		—	0	—	755	b.
	T23	2.04		92.0		77.0		154.0	0.5	77		a.
		3.17		142.9		127.9		255.8	2.0	511.6	589	b.
	T24	2.04		92.0		77.0		154.0	1.0	154		a.
		3.17		142.9		127.9		255.8	2.0	511.6	666	b.
	T25	2.04		92.0		77.0		154.0	2.5	385		a.
		3.17		142.9		127.9		255.8	2.0	511.6	897	b.
	G4	1.68		75.7		60.7		121.4	7.75	940.8		a.
		2.30		103.7		88.7		177.4	2.0	354.8	1296	b.
	G5	1.38		62.2		47.2		94.4	9.75	826		a.
		2.23		—		—		—	0	—	826	b.
	G6	1.24		55.9		40.9		81.8	10.75	879.3		a.
		2.05		—		—		—	0	—	879	b.
	G7	1.43		64.4		49.4		98.8	7.25	716.3		a.
		2.30		—		—		—	0	—	716	b.
	G8	1.43		64.4		49.4		98.8	7.25	716.3		a.
		2.30		103.7		88.7		177.4	2.0	354.8	1071	b.
	G9	1.38		62.2		47.2		94.4	8.5	802.4		a.
		2.23		—		—		—	0	—	802	b.
	G10	1.24		55.9		40.9		81.8	16.0	1308.8		a.
		2.04		92.0		77.0		154.0	2.0	308	1617	b.
	G11	1.62		73.0		58.0		116.0	3.25	377.0		a.
		2.59		—		—		—	0	—	377	b.
	G12	1.38		62.2		47.2		94.4	8.0	755		a.
		2.23		—		—		—	0	—	755	b.
	KJ5	2.04		92.0		77.0		154.0	3.85	592.9		a.
		3.17		142.9		127.9		255.8	2.8	716.2	1309	b.
	KJ5A	2.04		92.0		77.0		154.0	3.85	592.9		a.
		3.17		142.9		127.9		255.8	2.8	716.2	1309	b.
	KJ5B	2.04		92.0		77.0		154.0	3.85	592.9		a.
		3.17		—		—		—	0	—	593	b.
	KJ7C	1.62		73.1		58.1		116.2	5.35	1621.6		a.
		2.59		116.8		101.8		203.6	2.8	570.0	1192	b.
	J3A	2.04		92.0		77.0		154.0	0.5	77		a.
		3.17		142.9		127.9		255.8	0	—	77	b.
	J5A	2.04		92.0		77.0		154.0	2.5	385		a.
		3.17		142.9		127.9		255.8	0	—	385	b.
	G13	1.43		64.5		49.5		99.0	8.0	792		a.
		2.30		—		—		—	0	—	792	b.
												a.
												b.
												a.
												b.
Columns & Calculation Instructions		C	D	E	F	G	H	I	J*	K	L	M
		C x D = E			E - F = G		G x H = I		I x J = K		Ka + Kb = L*	

*NOTE 3: If the eave does NOT have an overhang of 1'-6" or more; then enter 1.5 in column "J"

STEP No. 2 — **Identify and Number:**

Note: Nomenclature assigned by truss companies may also be used except for girders & beams.

SAMPLE: A-T1 (A = the roof Rectangle in which the truss T1 is located)

On your roof framing plan, identify, by prefixes and number, all structural framing members.

Use the same prefix and number for all members which are identical in span and general design.

Prefixes are shown in the chart below.

Note: Mark all girder trusses and beams at their bearing points with "A" at one bearing point and "B" at the other bearing point. (Example: G1-A and G1-B for each end of a girder truss)

Item Description →	Roof Truss	Roof Rafter	Hip Jack	Beam or Girder	Hip King Jack	O.S.Roof Corner	Opening Header	Gable Frame	Shear Wall (Int.)	End Wall	Side Wall
Rectangle Prefix +	T-#	R-#	J-#	B or G-#	K-#	CR-#	H-#	GF-#	X-#	EW-#	SW-#

STEP No. 3 — **Calculate wind uplift loads for structural roof framing members at both bearing points.**

List hip roof king-jacks after Step 4D is completed. Do include hand framed Gables, GF-#.

Note 2: The selection of the coefficient "C" must be from the chart shown on page 1 and is based first on the roof framing center distance, 16" or 24" on center; next the chart for the appropriate roof pitch angle must be used in conjuction with the roof frame member span length from bearing point to bearing point.

Follow calculation instructions at the bottom of the columns.

Important: Select the correct coeficient for each roof framing member based on the number of Edge or Ridge strip areas acting on that specific roof frame member. Typically, most hip jacks and some rafters have only one edge or ridge strip.

The load result of this calculation is the net uplift reaction vertical to the bearing point less the dead load reaction.

Col. A Rectangle Letter-	Col. B Roof frame member I.D. No. on plans	Col. C Coefficient "C" Note 2 Roof and overhang	Col. D Velocity pressure	Col. E Calculated Value	Col. F Dead Load (PSF)	Col. G Calculated Value	Col. H Roof frame center distance (feet)	Col. I Calculated Value	Col. J* Line a. = 1/2 Span Line b. = overhang	Col. K Uplift load opposite eave end for a.(Lbs.)	Col. L* Uplift load at eave w/ overhang for b.(Lbs.)	Letter Ridge end = a. Eave end = b.
A	J1	2.04	41.0	83.6	15	68.6	2	137.2	0.5	68.6		a.
		3.17		130.0		115.0		230.0	2.0	460.0	529	b.
	J3	2.04		83.6		68.6		137.2	1.5	205.8		a.
		3.17		130.0		115.0		230.0	2.0	460.0	666	b.
	J5	2.04		83.6		68.6		137.2	2.5	343.0		a.
		3.17		130.0		115.0		230.0	2.0	460.0	803	b.
	T1	1.62		66.4		51.4		102.8	3.0	308.4		a.
		2.59		106.2		91.2		182.4	2.0	364.8	673	b.
	T2	1.58		64.8		49.8		99.6	8.5	846.6		a.
		2.23		91.4		76.4		152.8	2.0	305.6	1152	b.
	T3	1.51		61.9		46.9		93.8	5.5	515.9		a.
		2.43		99.6		84.6		169.2	2.0	338.4	854	b.
	T4	1.62		66.4		51.4		102.8	3.25	334.1		a.
		2.59		106.2		91.2		182.4	2.0	364.8	699	b.
	T5	2.04		83.6		68.6		137.2	2.25	308.7		a.
		3.17		—		—		—	0	—	309	b.
	T6	2.04		83.6		68.6		137.2	1.25	171.5		a.
		3.17		—		—		—	0	—	172	b.
	T7	2.04		83.6		68.6		137.2	1.5	205.8		a.
		3.17		130.0		115.0		230.0	2.0	460.0	666	b.
	T8	1.36		55.8		40.8		81.6	11.0	897.6		a.
		2.05		84.0		69.0		138.0	2.0	276.0	1174	b.
	T9	1.24		50.8		35.8		71.6	11.0	787.6		a.
		2.05		84.0		69.0		138.0	2.0	276.0	1064	b.
	G1	1.58		64.8		49.8		99.6	8.25	821.7		a.
		2.23		91.4		76.4		152.8	2.0	305.6	1127	b.
	G2	1.43		58.6		43.6		87.2	6.0	523.2		a.
		2.30		94.3		79.3		158.6	2.0	317.2	840	b.
	G3	1.36		55.8		40.8		81.6	11.0	897.6		a.
		2.05		84.0		69.0		138.0	2.0	276.0	1173	b.
	KJ7	1.62		66.4		51.4		102.8	5.35	550.0		a.
		2.59		106.2		91.2		182.4	2.8	510.7	1061	b.
B	J1B	2.04	45.1	92.0		77.0		154.0	0.5	77.0		a.
		3.17		142.9		127.9		255.8	2.0	511.6	589	b.
	J3B	2.04		92.0		77.0		154.0	1.5	231.0		a.
		3.17		142.9		127.9		255.8	2.0	511.6	743	b.
	J5B	2.04		92.0		77.0		154.0	2.5	385.0		a.
		3.17		142.9		127.9		255.8	2.0	511.6	897	b.
	T10	1.62		73.1		58.1		116.2	3.5	406.7		a.
		2.59		116.8		101.8		203.6	2.0	407.2	1221	b.
	T11	1.68		75.7		60.7		121.4	7.75	940.8		a.
		2.30		103.7		88.7		177.4	2.0	354.8	1296	b.
	T12	1.58		71.3		56.3		112.6	8.75	985.2		a.
		2.23		100.5		85.5		171.0	2.0	342.0	1327	b.
	T13	1.43		64.5		49.5		99.0	7.25	717.7		a.
		2.30		103.7		88.7		177.4	2.0	354.8	1073	b.
	T14	1.62		73.1		58.1		116.2	3.0	348.6		a.
		2.59		116.8		101.8		203.6	2.0	407.2	756	b.
Columns & Calculation Instructions		C	D	E	F	G	H	I	J*	K	L	M
		C x D = E			E - F = G		G x H = I		I x J = K		Ka+Kb=L*	

*NOTE 3: If the eave does NOT have an overhang of 1'-6" or more; then enter 1.5 in column "J"

RECORD OF INSPECTIONS
TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 10/23/95

This is to request that a Certificate of Approval for Occupancy be issued to Mr John+Carolyn DelPrete.

For property at #2 Marguerita Drive (street address) built under Permit No. 3778 Dated 4/17/95 when completed in conformance with the Approved Plans.

Signed Carolyn DelPrete

ITEM	DATE	APPROVED BY (initials)
1. Form board tie in	5/2/95	DB
2. Termite protection	5/8/95	DB
3. Footing - slab	5/4/95	DB
4. Rough plumbing - slab	5/4/95	DB
5. Rough electric - slab	5/4/95	DB
6. Lintel	6/1/95	DB
7. Dry in (final)	7/12/95	DB
8. Roof	9/11/95	DB
9. Framing	7/31/95	DB
10. Rough electric	7/31/95	DB
11. Rough plumbing	7/31/95	DB
12. A/C Ducts	7/31/95	DB
13. Insulation	8/3/95	DB
14. Final electric	10/23/95	DB
15. Final plumbing	10/23/95	DB
16. Final construction	10/23/95	DB
17. As-built survey	10/23/95	DB
18. Affidavit of cost	10/27/95	DB

Final Inspection for Issuance of Certificate for Occupancy

Approved by Building Inspector Dale Brown 10/24/95 date

Approved by Building Commissioner _____ date

Utilities notified F.P.L. 10/23/95 date

Original Copy sent to OWNER (owner) date

(Keep carbon copy for Town files)

3837

POOL

TAX FOLIO NO._____ DATE_____

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

3837

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

Owner MR. JOHN DELPRETE Present address N/A

Phone (407) 283-7567

Contractor A+G Pools Address 782 SW BAYSHORE BLVD.

Phone (407) 878-7752 Port St. Lucie

Where licensed MARTIN CO. License number SP 01599

Electrical Contractor Bob Cifo Elect. License number ME 00186

Plumbing Contractor_____ License number_____

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

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

4 MARGUERITA ROAD

Subdivision MARGUERITA Lot Number 10 Block Number PLAT Book 10

Contract price $ #13,600- Cost of permit $ #200.-

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 Arthur Allen

RECEIVED
AUG 2 1995

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

Owner John Neil Potts

TOWN RECORD

Date submitted_____ Approved: Dale Brown 8/21/95
Building Inspector Date

Approved: _____ Final approval given:_____
Commissioner Date Date

CERTIFICATE OF OCCUPANCY issued (if applicable)_____
Date

PERMIT NO._____

SP1282
3/94

Return to: (enclose self-addressed stamped envelope)
Name:

A&G CONCRETE POOLS, INC.

Address:

782 S.W. BAYSHORE BLVD.
PORT ST. LUCIE, FL. 34983

This Instrument Prepared by:

Address:

SAME

Property Appraisers Parcel Identification (Folio) Number(s):

NOTICE OF COMMENCEMENT
FS 713.13

RAMCO FORM 409

SPACE ABOVE THIS LINE FOR PROCESSING DATA — SPACE ABOVE THIS LINE FOR RECORDING DATA

Permit No. _____

NOTICE OF COMMENCEMENT

State of Florida
County of

The undersigned hereby gives notice that improvements will be made to certain real property, and in accordance with section 713.13 of the Florida Statutes, the following information is provided in this NOTICE OF COMMENCEMENT.

Legal description of property (include Street Address, if available) KNOWN AS LOT 10, "MARGUERITA SUBDIVISION", AS RECORDED IN PLAT ID, PAGE 3, PUBLIC RECORDS OF MARTIN CO, FLORIDA

General description of improvements SWIMMING POOL & ENCLOSURE

Owner JOHN DELPRETE

Address

Owner's interest in site of the improvement

Fee Simple Title holder (if other than owner)

Name N/A

Address

Contractor A&G CONCRETE POOLS, INC.

Address 782 S.W. BAYSHORE BLVD., PORT ST. LUCIE, FL. 34983

RECEIVED
AUG 21 1995

Surety NA

Address NA Amount of bond $ NA

Any person making a loan for the construction of the improvements:

Name N/A

Address

Person within the State of Florida designated by owner upon whom notices or other documents may be served as provided by Section 713.13(1)(a)7., Florida Statutes.

Name

Address

In addition to himself, owner designates

Of

to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Expiration date of Notice of Commencement (the expiration date is 1 year from the date of recording unless a different date is specified).

X _____
Signature of Owner

X JOHN DELPRETE
Printed Signature of Owner

NOTARY RUBBER STAMP SEAL

I have relied upon the following identification of the Affiant

XFL DL

Sworn to and subscribed before me this _____ day of _____

19____.

Notary Signature

Printed Notary Signature

881 01

3866

SCREEN ENCLOSURE

DATE 10-2-95

TAX FOLIO NO. _____

3866

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

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

Owner John DelPrete Present address 4 Marguerita Rd Sewalls Pt

Phone 334-0237-283-7567

Contractor Sailfish Aluminum Address 801 SW Jaslo Ave PSL

Phone 407-336-3409 Martin

Where licensed Pt. St. Lucie / License number SP01985

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: _____

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

4 Marguerita Road Sewall's Pt

Subdivision Marguerita Lot Number 10 Block Number _____

Contract price $ 3000.00 Cost of permit $ 100.00

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Bruce Jackson

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

Owner John DelPrete

TOWN RECORD

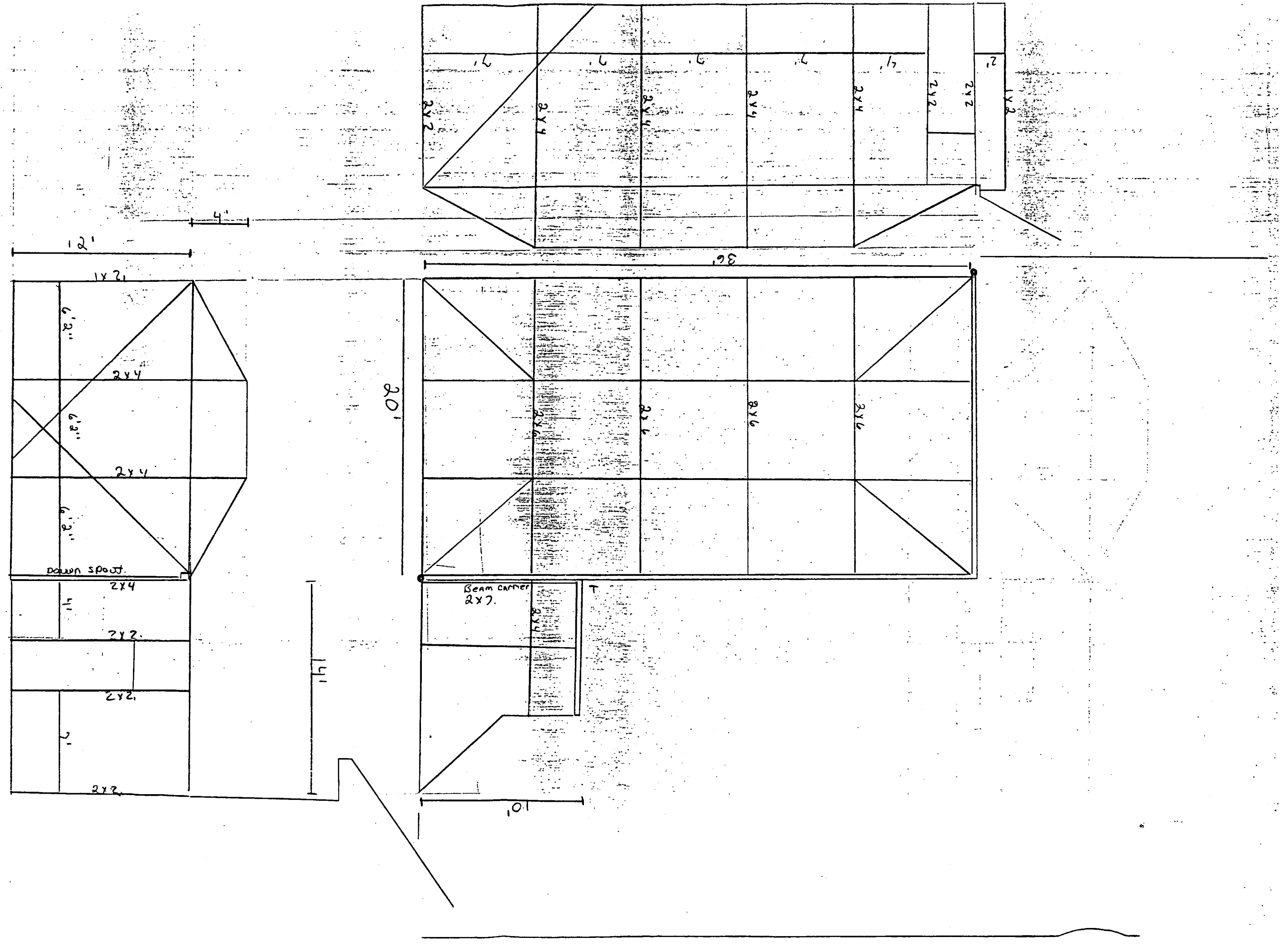
Date submitted _____ Approved: Dale Brown Building Inspector Date

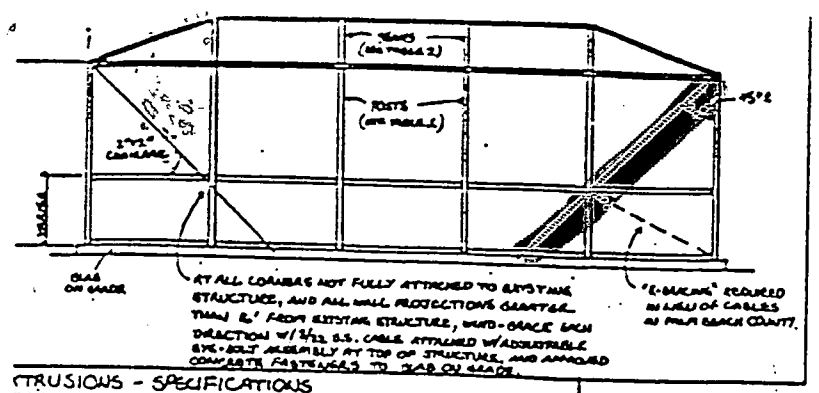
Approved: _____ Commissioner Date Final approval given: 10/6/95 Date

CERTIFICATE OF OCCUPANCY issued (if applicable) _____ Date

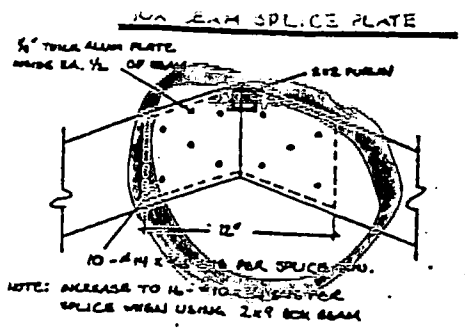
PERMIT NO. _____

SP1282
3/94


4'
12'
1x2
6'2"
2x4
6'2"
2x4
2'
Down spout
2x4
1'
2x2.
2x2.
2'
2x2.
17'
20'
32'
2x2
2x4
2x4
2x4
2x2
2x2
2x2
1x2
2x6
2x6
2x6
Beam carrier
2x7.
8x8
10'

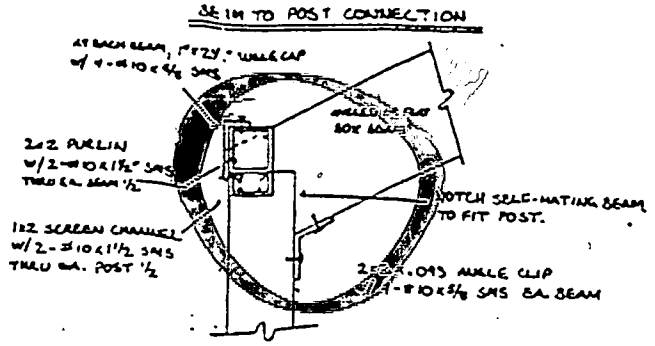


BOX BEAM SPLICE PLATE

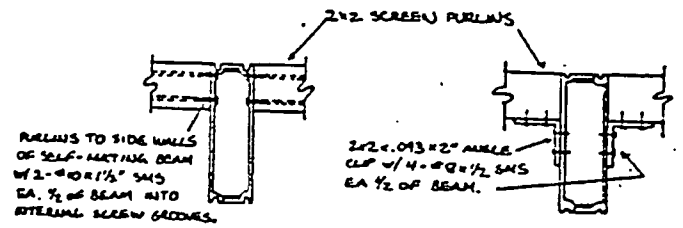


NOTE: INCREASE TO 16-#10 SMS FOR SPLICE WHEN USING 2x9 BOX BEAM

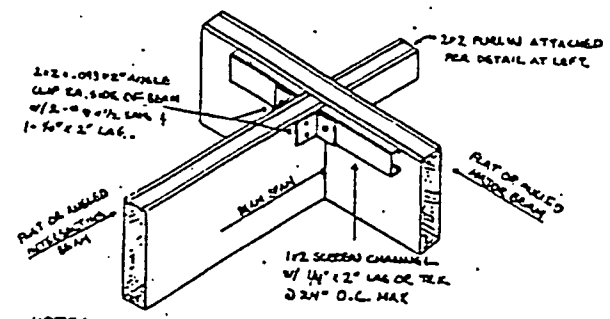
2x2 TO POST CONNECTION



PURLIN TO BEAM CONNECTIONS

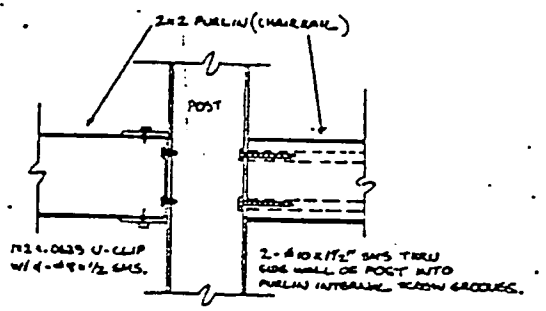


BEAM TO BEAM CONNECTION

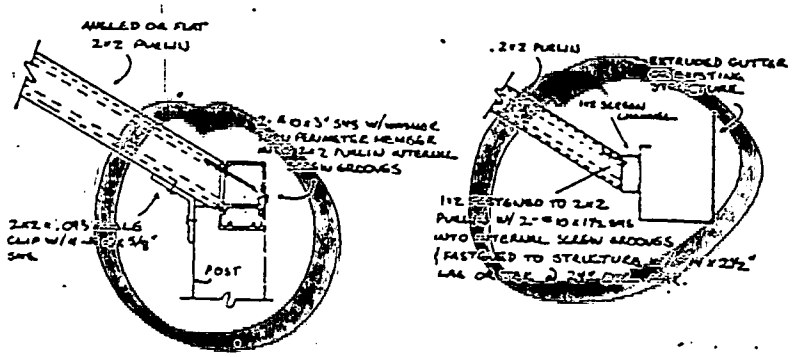


NOTE: MAJOR SEAM MUST BE OF EQUAL OR GREATER SIZE THAN INTERSECTING BEAM.

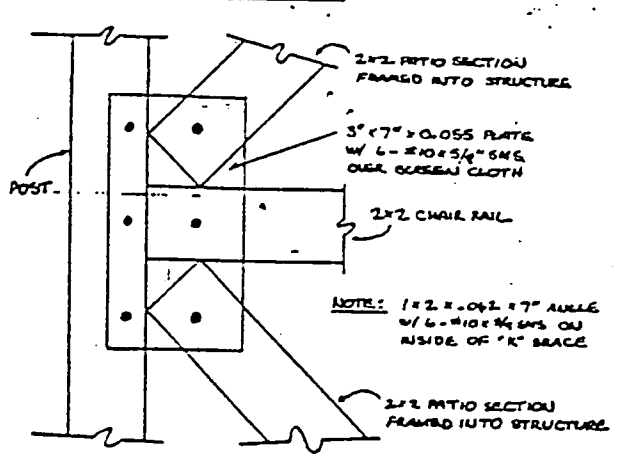
PURLIN TO POST CONNECTIONS



PERIMETER CONNECTIONS

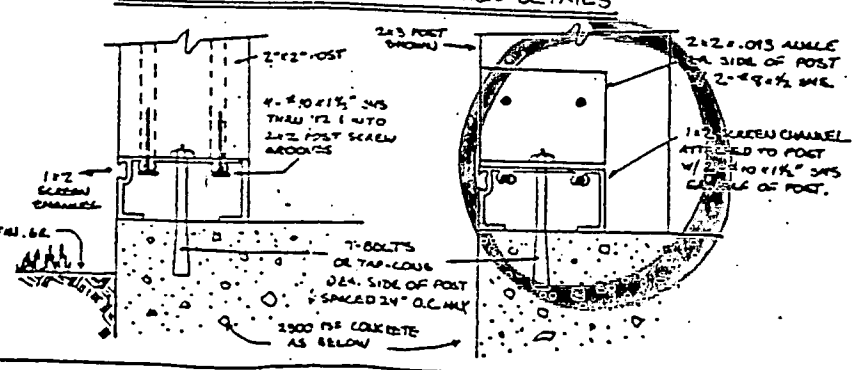


K-BRACING DETAIL

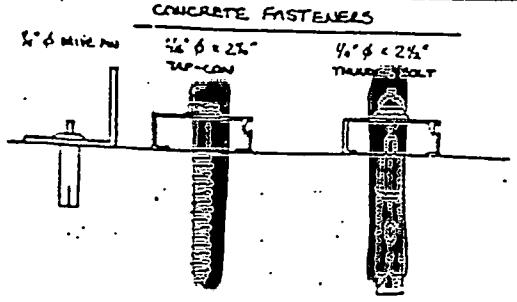


NOTE: 1x2 x .062 x 7" ANGLE w/ 6-#10 x ¾" SMS ON INSIDE OF "K" BRACE

BASE PLATE AND POST CONNECTION DETAILS

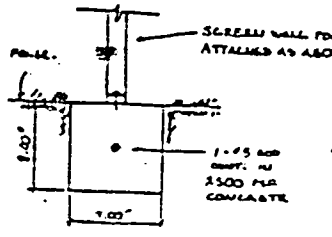


CONCRETE FASTENERS

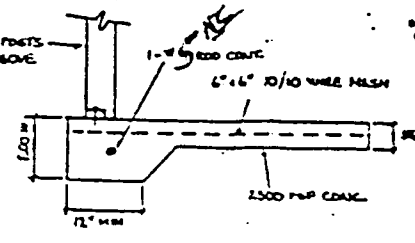


CONCRETE - SLABS, FOOTINGS & FASTENER DETAILS

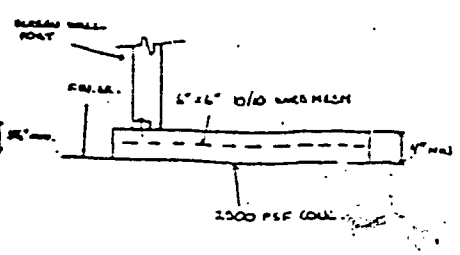
CONTINUOUS STRIP TYPE FOOTING



MONOLITHIC SLAB WITH FOOTING (WHERE REQUIRED)



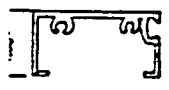
SLAB ON GRADE WITHOUT FOOTING



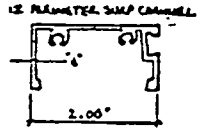
NOTE: SLABS & FOOTINGS TO BE CONSTRUCTED ON UNDISTURBED SOIL, OR SOIL COMPACTED TO 90% OF OPTIMUM DENSITY FILL.

EXTRUSIONS - SPECIFICATIONS

1½ HANDRAIL BEAM OR POST CHANNEL



1½ PERIMETER SNAP CHANNEL

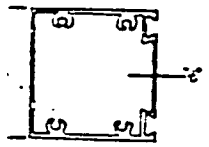


SECTION PROPERTIES

"C" (in)	0.090	0.060
Sx (in³)	0.124	0.179
A (in²)	0.275	0.332
Ky	1.175	1.175

ALLOY 6063-T5

1½ BEAM OR POST

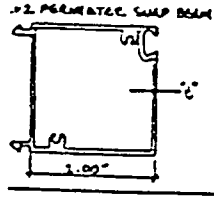


SECTION PROPERTIES

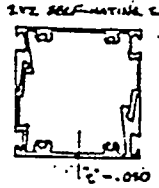
"C" (in)	0.040	0.050	0.060	0.093"
Sx (in³)	0.220	0.270	0.322	0.450
Iy (in⁴)	0.220	0.270	0.324	0.450
A (in²)	0.419	0.520	0.618	0.730
Ky	1.175	1.175	1.175	1.000 *

ALLOY 6063-T5 * 0 SHOWS WALL POST

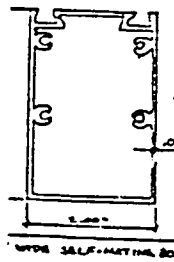
2x2 PERIMETER SNAP BEAM



2x2 SELF-MATING SNAP BEAM (2 PIECES)



1.05 x 0.050 RATIO BEAM



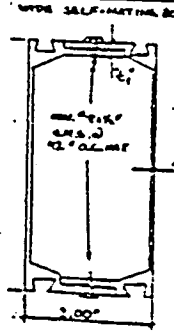
SECTION PROPERTIES

Sx = 0.432 in³
Iy = 0.392 in⁴
A = 0.622 in²
Ky = 1.175
ALLOY = 6063-T5

NOTE: COMPOSITE 2x2 x 0.050 MATED WITH 1½ CHANNEL IS EQUAL TO ABOVE SECTION.

2x3 x .050 SELF-MATING SNAP BEAM IS ALSO EQUAL

WIDE SELF-MATING BOX BEAMS



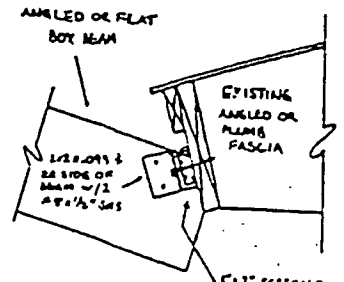
SECTION PROPERTIES

"C" (in)	Sx (in³)	Iy (in⁴)	A (in²)	Ky
4.00	0.115	0.093	1.09	0.68
6.00	0.109	0.095	1.86	0.75
7.00	0.325	0.045	3.69	0.98
9.00	0.3201	0.072	4.92	1.246

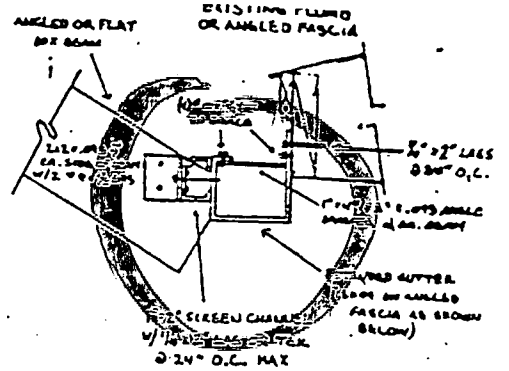
Ky = 1.10

NOTE: FASTENERS MAY BE ELIMINATED WHEN SELF-MATING CONTINUOUS SNAP TYPE BEAMS ARE SUBSTITUTED.

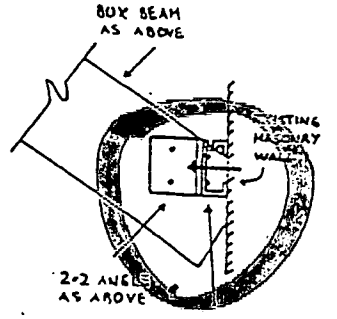
ANGLED OR FLAT BOX BEAM



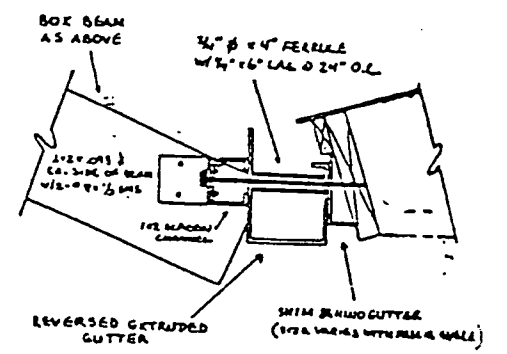
EXISTING FLUME OR ANGLED FASCIA



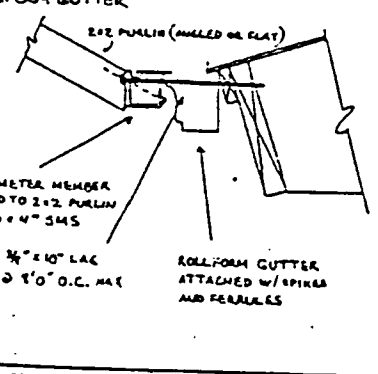
BOX BEAM AS ABOVE



BOX BEAM AS ABOVE



NON-LOAD BEARING CONNECTION TO ROLL FORM GUTTER



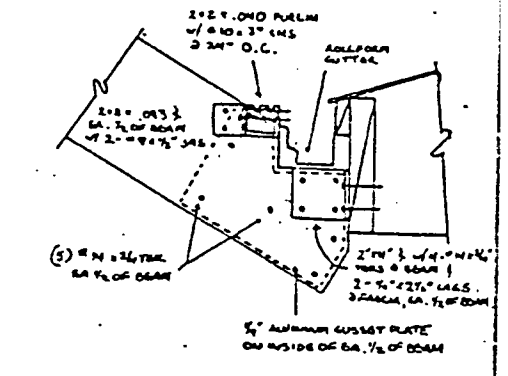


TABLE 1 — POST LENGTHS AND SPACING - SCREENED WALLS

POST SIZE	MAX. WALL HEIGHT	MAX. POST SPACING O.C.
2x2 x .050 OR EQUIV.	7'7"	7'1"
	9'2"	5'5"
	7'4"	9'0"
2x3 x .050 OR EQUIV.	9'5"	7'4"
	9'0"	7'0"
	10'0"	6'0"
2x4 S.H.B. USED AS POST	8'6"	11'0"
	9'6"	15'6"
	10'6"	11'0"
	13'0"	7'6"
	15'0"	15'0"
2x6 S.H.B. USED AS POST	14'0"	12'0"
	17'0"	11'0"
	18'0"	10'0"
	18'0"	9'0"
	20'0"	9'4"
2x7 S.H.B. USED AS POST	21'0"	12'0"
	22'0"	11'0"
	23'0"	10'0"
	24'0"	9'0"
	25'0"	9'4"

TABLE 2 — SPAN TABLE FOR SCREENED ROOF BOX BEAMS (SELF-MATING BEAMS)

BEAM SIZE	MAXIMUM CLEAR SPANS FOR SCREENED ROOF BEAMS AT VARIOUS SPACINGS							
	4'0" O.C.	5'0" O.C.	5'6" O.C.	6'0" O.C.	6'6" O.C.	7'0" O.C.	7'6" O.C.	8'0" O.C.
2x4 S.H.B.	22'6"	20'0"	19'6"	19'0"	18'6"	18'0"	17'9"	17'6"
2x5 S.H.B.	31'0"	28'0"	26'0"	27'0"	26'3"	25'6"	25'3"	25'0"
2x7 S.H.B.	38'0"	35'0"	34'0"	33'0"	32'9"	32'4"	32'2"	32'0"
2x9 S.H.B.	46'0"	44'0"	42'0"	41'0"	40'3"	39'6"	38'9"	38'0"

STRUCTURES DETAILED ON THESE PLANS WERE DESIGNED IN ACCORDANCE WITH STANDARD BUILDING CODE FOR LOAD CONDITIONS AS FOLLOWS:

DEAD LOADS + 30 PSF LIVE LOAD (Δ = L/60 MAX.)
120 MPH WIND VELOCITY PRESSURES

- ADHERE TO LOCAL ORDINANCES WHICH IMPOSE FURTHER LIMITATIONS ON PROJECTIONS, SPANS, AND LOAD CONDITIONS.
- ALSO DESIGNED TO CONFORM TO PALM BEACH COUNTY WIND LOADS (30 PSF [illegible] AND 39 PSF V/L WITH APPROPRIATE FACTORS APPLIED)
- ALSO CONFORMS TO THE S. FLA. BUILDING CODE (LATEST EDITION)
- S.H.B. FASTENER HOLDING CAPACITIES ARE CALCULATED PER ALUMINUM ASSOCIATION HANDBOOK

GENERAL SPECIFICATIONS

1) STEEL FASTENERS SHALL BE PLATED OR STAINLESS.
2) ALUMINUM FASTENERS SHALL BE ALLOY 2024-T4
3) S.H. BEAMS SHALL BE ALLOY 6063-T6
4) POSTS, PURLINS, ANGLES, AND CHANNELS, - ALLOY 6063-T5
5) CONCRETE: F_c' - 2500 PSI

NOTE: ALL EXTRUSIONS MAY RECEIVE FLAT OR ROUND SPLINE, INSTALLED TO HOLD SCREEN CLOTH INTO EXTRUDED SPLINE GROOVES.

MASTER PLANS

ALUMINUM SCREEN ENCLOSURES
(120 MPH WIND REGIONS)

THESE PLANS ARE FOR EXCLUSIVE USE OF:

9910

AC/CHANGEOUT

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:	9910	DATE ISSUED:	10/19/2011
SCOPE OF WORK:	NEW AIR CONDITION ER		
CONTRACTOR:	JENSEN BEACH AIR CONDITIONER		
PARCEL CONTROL NUMBER:	13-41-011-000-00100-3	SUBDIVISION	MAGUERITA LOT #10
CONSTRUCTION ADDRESS:	2 MARGUERITE DRIVE		
OWNER NAME:	DOROTHY PEARSON		
QUALIFIER:	GREG HALL	CONTACT PHONE NUMBER:	334-3200

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

INSPECTIONS

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

ALL RE-INSPECTION FEES AND ADDITIONAL INSPECTION REQUESTS WILL BE CHARGED TO THE PERMIT HOLDER. THE CONTRACTOR OR OWNER/BUILDER MUST SCHEDULE A FINAL INSPECTION. FAILURE TO RECEIVE A SUCCESSFUL

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: October 19, 2011 Permit Number: 9910

OWNER/TITLEHOLDER NAME: Dorothy Pearson Phone (Day) 781-7841 (Fax) _____

Job Site Address: 2 Margerita Drive City: Stuart State: FL Zip: 34996

Legal Description: Margerita S/D Lot 79 Parcel Control Number: 13-38-41-011-000-00100-3

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

SCOPE OF WORK (PLEASE BE SPECIFIC):

WILL OWNER BE THE CONTRACTOR?
(If yes, Owner Builder questionnaire must accompany application)
YES_____ NO_____

Has a Zoning Variance ever been granted on this property?
YES_____ (YEAR)_____ NO_____
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: $_____
(Notice of Commencement required when over $2500 prior to first inspection, $7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10___AE9___AE8___X___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: $_____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

RECEIVED
OCT 19, 2011
Sewall's Point Town Hall

Construction Company: Jensen Beach AC Phone: 334-3200 Fax: 334-3201

Qualifiers name: Greg Hall Street: 940 NE Dixie Hwy U.B State: FL Zip: 3495

State License Number: CAC1814457 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Greg Hall Phone Number: 772-334-3200

DESIGN PROFESSIONAL: _____ Fla. License# _____

Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____

Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____

* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007 National Electrical Code: 2005(2008 after 6/1/09)Florida Energy Code:2007, Florida Accessibility Code:2007, Florida Fire Prevention Code 2007.

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 2007 SECT. 105.4.1. 105.4.1.1 - .5.

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

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

OWNER NOTORIZED SIGNATURE: (required per 713.135 F.S.)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)

X Dorothy B. Pearson

State of Florida, County of: Martin

On This the 19th day of October, 2011

by Dorothy Pearson who is personally known to me or produced _____

As identification. _____

ANN MARIE SCHAEFER
Notary Public, State of Florida
My Comm. Expires Oct 14, 2015
Commission # EE 117431
Bonded Through National Notary Assn.

Notary Public

My Commission Expires: _____

CONTRACTOR NOTORIZED SIGNATURE: (required per 713.135 F.S.)

X _____

State of Florida, County of: Martin

On This the 19th day of October, 2011

by Greg Hall who is personally known to me or produced _____

As identification. CDL

CRYSTAL MCGOWAN
MY COMMISSION # DD800866
EXPIRES: June 25, 2012
FloridaNotaryService.com
(407) 398-0153

Notary Public

My Commission Expires: 6/25/2012

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) – PLEASE PICK UP YOUR PERMIT PROMPTLY!

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

generated on 10/19/2011 3:19:59 PM EDT

Parcel ID	Account #	Unit Address	Market Total Value	Data as of
13-38-41-011-000-00100-3	27871	2 MARGUERITA DR, SEWALL'S POINT	$574,790	10/15/2011

Owner Information

Owner(Current)	PEARSON DOROTHY (TR)
Owner/Mail Address	2 MARGUERITE DR STUART FL 34996
Sale Date	12/13/1999
Document Book/Page	1445 0033
Document No.	
Sale Price	427000

Location/Description

Account #	27871	**Map Page No.**	SP-05
Tax District	2200	**Legal Description**	MARGUERITA S/D LOT 10
Parcel Address	2 MARGUERITA DR, SEWALL'S POINT		
Acres	.3500		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120200 Heritage P, Palmtto Pk,Rdglnd,

Assessment Information

Market Land Value	$150,000
Market Improvement Value	$424,790
Market Total Value	$574,790

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
FILE COPY

Air Conditioning Change out Affidavit

Residential ✓ Commercial ____

Package Unit ____ Yes ✓ No (Use Condenser side of form below for equipment listing)

Duct Replacement ____ Yes ✓ No - Refrigerant line replacement ____ Yes ✓ No

Flushing Existing Refrigerant lines ✓ Yes ____ No - Adding Refrigerant Drier ✓ Yes ____ No

Rooftop A/C Stand Installation ____ Yes ✓ No - Curb Installation ____ Yes ✓ No

Smoke Detector in Supply (over 2000 CFM) ____ Yes ✓ No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Trane Model# TAM4A024

Volts 230 CFM's ____ Heat Strip 5 Kw

Min. Circuit Amps 27 Wire gauge ____

Max. Breaker size 30 Min. Breaker size 27

Ref. line size: Liquid 3/8 Suction 3/4

Refrigerant type R410A

Location: Existing ✓ New ____

Attic/Garage/Closet (specify) ____

Access: ____

Condenser: Mfg Trane Model# 4TTM3024A

Volts 230 SEER/EER 13 BTU's 24,400

Min. Circuit Amps 12 Wire gauge ____

Max. Breaker size 15 Min. Breaker size 12

Ref. line size: Liquid 3/8 Suction 3/4

Refrigerant type ✓ R410A

Location: Existing ✓ New ____

Left/Right/Rear/Front/Roof ____

Condensate Location ____

(Contractor must provide ladder if required)

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Trane Model# n/a

Volts 230 CFM's n/a Heat Strip 5 Kw

Min. Circuit Amps 27 Wire gauge ____

Max. Breaker size 30 Min. Breaker size 27

Ref. line size: Liquid 3/8 Suction 3/4

Refrigerant type ✓ R22

Location: Ext. ✓ New ____

Attic/Garage/Closet (specify) ____

Access: ____

Condenser: Mfg Trane Model# n/a

Volts 230 SEER/EER n/a BTU's n/a

Min. Circuit Amps 12 Wire gauge ____

Max. Breaker size 15 Min. Breaker size 12

Ref. line size: Liquid 3/8 Suction 3/4

Refrigerant type ✓ R22

Location: Ext. ____ New ____

Left/Right/Rear/Front/Roof ____

Condensate Location ____

Certification:

I herby certify that the information entered on this form accurately represents the equipment installed and further affirm that this equipment is considered matched as required by FBC – R (N)1107 & 1108

Signature ____ Date 10-19-2011.

Business Tax Receipt Details

New Search Back to Search Results Help

Business Tax Account	1986-000520-00024.000	**Status**	ACTIVE FULL
Business Name	JENSEN BEACH AIR CONDITIONING INC	**Current Amount Due**	0.00
Business Category	MISC CONTR - A/C		
Additional Description	ACCOUNT PAID IN FULL	**New Business Date**	07/11/1986
Business Address	OCCY	**Date Closed**	
Doing Business As			
Owner Name	HALL, GREGORY C.		
Mailing Address	JENSEN BEACH AIR CONDITIONING INC HALL, GREGORY C. 940 NE DIXIE HWY JENSEN BEACH, FL 34957		

Update Business Details

License Renewal History

Year	License Amount	Penalty	Fees	Transfer	Duplicate	Exempt	Amount Due	Paid
2012	26.25						26.25	PAID
2011	26.25						26.25	PAID
2010	26.25						26.25	PAID
2009	26.25						26.25	PAID
2008	26.25						26.25	PAID
2007	25.00						25.00	PAID

AHRI CERTIFIED™
www.ahridirectory.org

Certificate of Product Ratings

AHRI Certified Reference Number: 4643389 Date: 10/19/2011

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower
Outdoor Unit Model Number: 4TTM3024A1
Indoor Unit Model Number: *AM4A0A24S21+TDR
Manufacturer: TRANE
Trade/Brand name: XB300

Manufacturer responsible for the rating of this system combination is TRANE

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

Cooling Capacity (Btuh):	24400
EER Rating (Cooling):	11.00
SEER Rating (Cooling):	13.00

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

AHRI Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.: 129635011101588597

PRODUCT SPECIFICATIONS

PRODUCT SPECIFICATIONS	
MODEL	**TAM4A0A24S21SA**
RATED VOLTS/PH/HZ.	208-230/1/60
RATINGS ①	See O.D. Specifications
INDOOR COIL — Type	Plate Fin
Rows — F.P.I.	3 - 14
Face Area (sq. ft.)	3.21
Tube Size (in.)	3/8
Refrigerant Control	EEV
Drain Conn. Size (in.) ②	3/4 NPT
DUCT CONNECTIONS	See Outline Drawing
INDOOR FAN — Type	Centrifugal
Diameter-Width (In.)	10 X 8
No. Used	1
Drive - No. Speeds	Direct - 3
CFM vs. in. w.g.	See Fan Performance Table
No. Motors — H.P.	1 - 1/4
Motor Speed R.P.M.	1075
Volts/Ph/Hz	208-230/1/60
F.L. Amps - L.R. Amps	1.3 - 2.6
FILTER	
Filter Furnished?	No
Type Recommended	Throwaway
No.-Size-Thickness	1 - 16 X 20 - 1 in.
REFRIGERANT	**R-410A**
Ref. Line Connections	Brazed
Coupling or Conn. Size — in. Gas	3/4
Coupling or Conn. Size — in. Liq.	3/8
DIMENSIONS	H x W x D
Crated (In.)	51 x 20 x 24-1/2
Uncrated	49-15/16 x 17-1/2 x 21-13/16
WEIGHT	
Shipping (Lbs.)/Net (Lbs.)	126/116

① These Air Handlers are A.H.R.I. certified with various Split System Air Conditioners and Heat Pumps (AHRI STANDARD 210/240). Refer to the Split System Outdoor Unit Product Data Guides for performance data.

② 3/4" Male Plastic Pipe (Ref.: ASTM 1785-76)

*AM4A0A24S21SA MINIMUM HEATER AIRFLOW CFM		
Heater	Minimum Air Speed Tap	
	With Heat Pump	Without Heat Pump
BAYEAAC05BK1AA BAYEAAC05LG1AA	Tap 1	Tap 1
BAYEAAC08BK1AA BAYEAAC08LG1AA	Tap 1	Tap 1
BAYEAAC10BK1AA BAYEAAC10LG1AA	Tap 2	Tap 1 ①
BAYEABC15BK1AA	-	-
BAYEABC20BK1AA	-	-
SEE AIR HANDLER NAMEPLATE OR PRODUCT DATA FOR EXCEPTIONS * May be "A" or "T" ① Minimum Speed Tap is 3 for Horizontal Left only.		

Note: *Heating and cooling speeds are the same, factory set at Speed Tap #2.*

AIRFLOW PERFORMANCE						
*AM4A0A24S21SA						
EXTERNAL STATIC (in w.g)	AIRFLOW (CFM)					
	Speed Taps - 230 VOLTS			Speed Taps - 208 VOLTS		
	3	2 †	1	3	2 †	1
0	1036	871	774	929	746	663
0.1	1008	838	747	890	720	636
0.2	965	806	712	856	686	605
0.3	922	767	676	815	654	564
0.4	875	726	638	777	618	518
0.5	823	681	591	733	568	464
0.6	769	608	505	675	479	398
0.7	673	498	422	572	393	N/A
0.8	515	402	322	436	303	N/A
0.9	339	242	N/A	279	N/A	N/A

NOTES:
1. Values are with wet coil and without filters.
2. Contact your particular filter manufacturer for pressure drop data.
3. Electric heater pressure drop is negligible and is included within the airflow data.
4. † Factory Setting
* May be "A" or "T"

WIRING DATA											
*AM4A0A24S21SA											
Heater Model No.	No. of Circuits	240 VOLT					208 VOLT				
		Capacity		Heater Amps per Circuit	Minimum Circuit Ampacity	Maximum Overload Protection	Capacity		Heater Amps per Circuit	Minimum Circuit Ampacity	Maximum Overload Protection
		kW	BTUH				kW	BTUH			
No Heater	-	-	-	1.3**	2	15	-	-	1.3**	2	15
BAYEAAC05++	1	4.80	16400	20	27	30	3.60	12300	17.30	23	25
BAYEAAC08++	1	7.68	26200	32	42	45	5.76	19700	27.70	36	40
BAYEAAC10++	1	9.60	32800	40	52	60	7.20	24600	34.60	45	45

Note: ** Motor Amps
* May be "A" or "T"

Notes:
1. See Product Data or Air Handler nameplate for approved combinations of Air Handlers and Heaters
2. Heater model numbers may have additional suffix digits.

TRANE

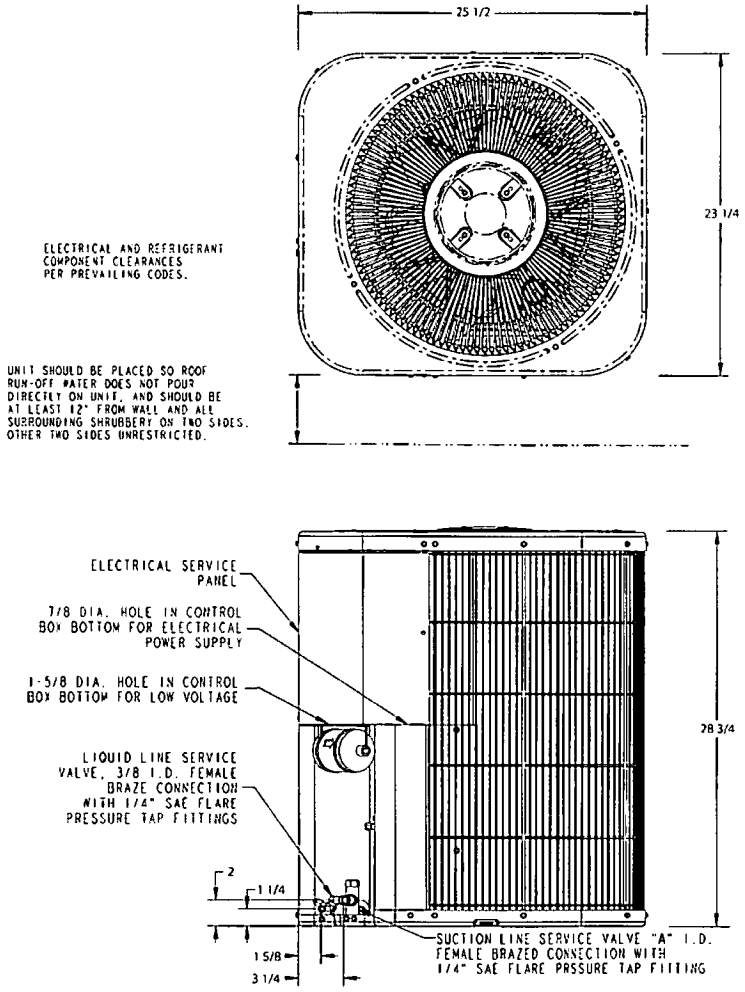
4TTM3024-SUB-101.02

TAG: _____

SUBMITTAL

2 Ton Split System Cooling — 1 Phase

4TTM3024A



BASE 2

A	
4TTM3024A1000A	5/8

Product Specifications

OUTDOOR UNIT ①②	4TTM3024A1000A
POWER CONNS. — V/PH/HZ ③	208/230/1/60
MIN. BRCH. CIR. AMPACITY	12
BR. CIR. PROT. RTG. - MAX. (AMPS)	15
COMPRESSOR	
NO. USED - NO. SPEEDS	1 - 1
VOLTS/PH/HZ	208/230/1/60
R.L. AMPS ⑦ - L.R. AMPS	8.4 - 58
FACTORY INSTALLED	
START COMPONENTS ⑧	YES
INSULATION/SOUND BLANKET	NO
COMPRESSOR HEAT	NO
OUTDOOR FAN	PROPELLER
DIA. (IN.) - NO. USED	19.12 - 1
TYPE DRIVE - NO. SPEEDS	DIRECT - 1
CFM @ 0.0 IN. W.G. ④	2750
NO. MOTORS - HP	1 - 1/4
MOTOR SPEED R.P.M.	1100
VOLTS/PH/HZ	200/230
F.L. AMPS	1.3
OUTDOOR COIL	
FACE AREA (SQ. FT.)	11.24
REFRIGERANT	
LBS. — R-410A (O.D. UNIT) ⑤	4 LBS., 11 OZ.
FACTORY SUPPLIED	YES
LINE SIZE - IN. O.D. GAS ⑥	5/8
LINE SIZE - IN. O.D. LIQ. ⑥	3/8
CHARGING SPECIFICATION - See Charging Section in Service Facts	
DIMENSIONS	H X W X D
CRATED (IN.)	32-3/8 x 24-3/4 x 26-3/4
WEIGHT	
SHIPPING (LBS.)	180
NET (LBS.)	159

① Certified in accordance with the Air-Source Unitary Air-conditioner Equipment certification program, which is based on AHRI standard 210/240.
② Rated in accordance with AHRI standard 270.
③ Calculated in accordance with Natl. Elec. Codes. Use only HACR circuit breakers or fuses.
④ Standard Air — Dry Coil — Outdoor
⑤ This value approximate. For more precise value see unit nameplate.
⑥ Max. linear length 60 ft.; Max. lift - Suction 60 ft.; Max lift - Liquid 60 ft. For greater length consult refrigerant piping software Pub. No. 32-3312-0* (* denotes latest revision).
⑦ This value shown for compressor RLA on the unit nameplate and on this specification sheet is used to compute minimum branch circuit ampacity and max. fuse size. The value shown is the branch circuit selection current.
⑧ No means no start components. Yes means quick start kit components. PTC means positive temperature coefficient starter.

THE METAL SHOP

Custom Metal Manufacturer

ANCHOR CLIPS
Installer's Guide

Consulting Engineer: Douglas W. Lowe, P.E.
FLA# 13355
1206 Millenium Parkway
Brandon, FL. 33511

WARNING: HAZARDOUS VOLTAGE - DISCONNECT POWER BEFORE SERVICING

PART NUMBER
#771 (4 pk)
#772 (100 box)
#770 (4 pk including hardware)

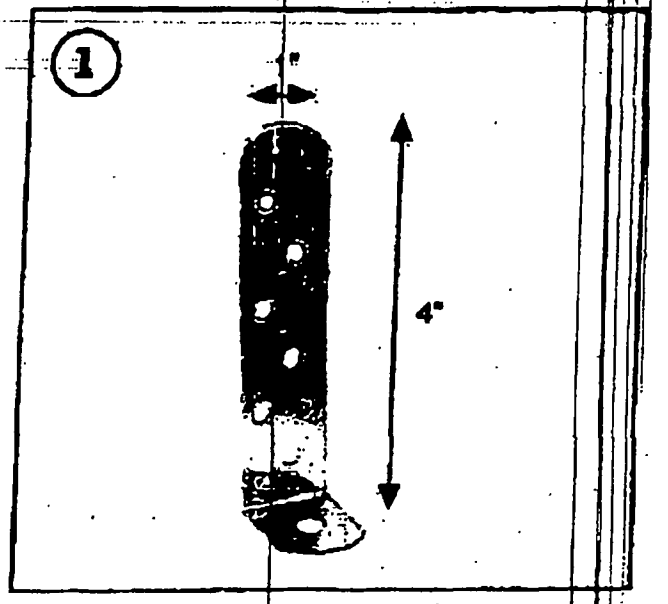
CONSTRUCTION
18 gauge galvanized steel, G-90 rated for corrosion coastal applications.

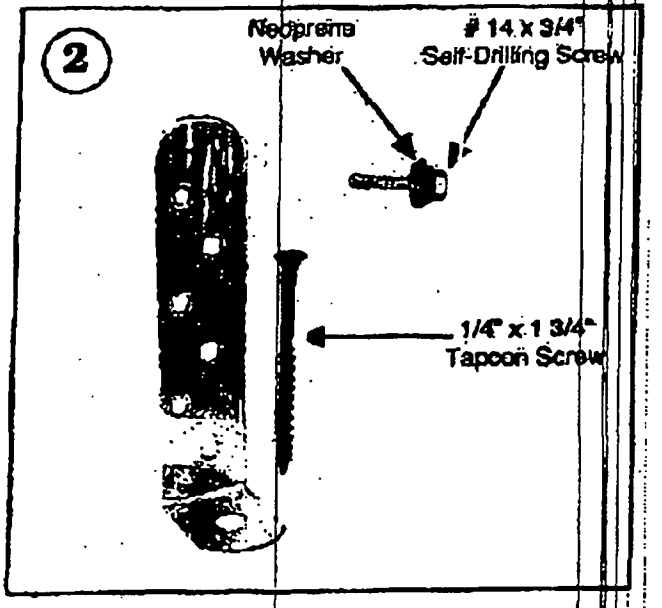
PACKAGING DETAILS
All anchor clips are supplied as per package quantities described above.

INSTALLATION
Minimum of 4 clips required per condenser unit.
Minimum of 2 #14 x 3/4" screws with neoprene washer required o fasten clip to condenser unit.
1/4" x 1 3/4" Tapcon screw required to fasten clip to condenser pad.
Locate the anchor clips to fit comfortably between condenser unit and pad.
Adjust clip accordingly to fit on condenser unit and screw together, at the same time ensuring that the base of the clip is still in contact with the pad.
All hardware must be fastened prior to connecting refrigerant lines and electrical power in the unit.
Suitable for ground mounted units.
Anchor clip design meets requirements of The Florida Building Code 2007 (Building) chapter 301.12 for wind resistance up to 140 MPH.

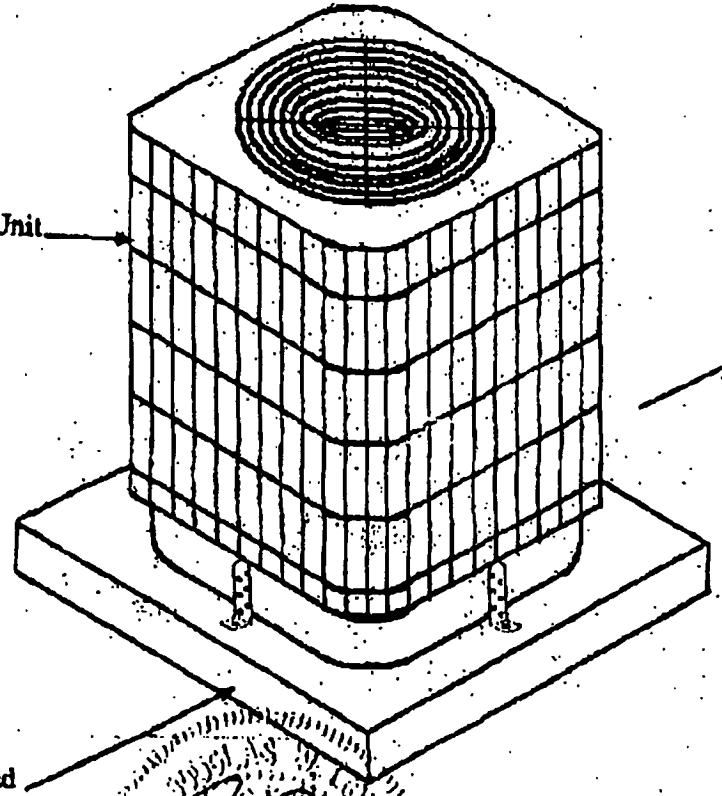
FEATURES
The use of "sized to fit" screw holes compared to slots means that security is never comprimised.
A tight, secure fit between pad and condenser ensures security for the condenser and offers great assurance during extreme weather conditions.

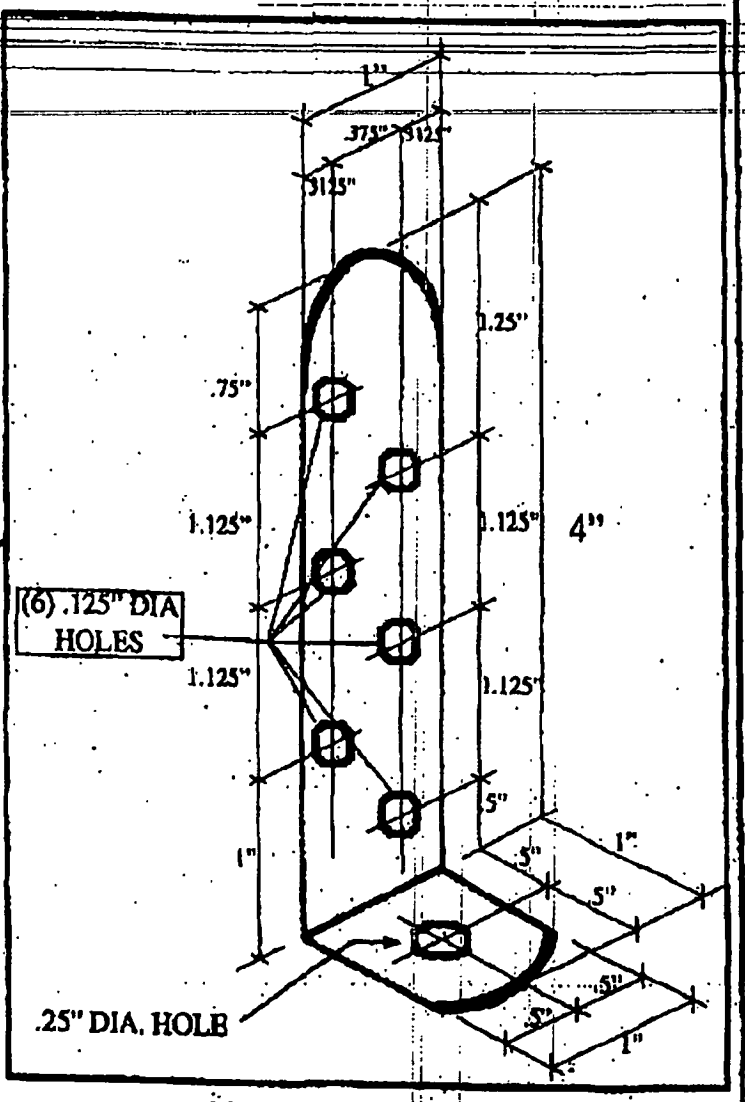
NOTE
Above installation instruction suitable for up to 5 ton units.





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





Metal thickness = 16 gauge

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

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection ☒ Mon ☐ Tue ☐ Wed ☐ Thur ☐ Fri 10-24-11 Page ___ of ___

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9916	[illegible]	A/C		
10a	3 Marguerita	Framing	PASS	Close
	JB A/C			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9753	Billington	Hot Water Solar		
9 ac	2 Via de Christa	panel Final	PASS	
	Master Builders			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
0	Rodney Bracken	Tree		
	4 Delcera Lane	removal	ok	
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9747	Schwartz	Roof SHEATHING		
9 18th	70 NSPR	Inspection	PASS	
	Driftwood Home	(nails)		INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9876	Gibbons	Siding		
	22 Lantana	Final	PASS	Close
	Bill Janiero			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	John Delmalino	Tree		
	24 Fielding	Removal	ok	
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9859	Foster	Roofing	PASS	Close
	7 Timor St	Final		
	Heaton Roofing	DECK NAILING	PASS -	AFFADAVIT
				INSPECTOR

10861

AC CHANGEOUT

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:	10861	DATE ISSUED:	5/13/2014
SCOPE OF WORK:	A/C CHANGE OUT		
CONTRACTOR:	LEE'S A/C & REF. CORP.		
PARCEL CONTROL NUMBER:	133841001000001003	SUBDIVISION	MARGUERITA LOT 10
CONSTRUCTION ADDRESS:	2 MARGUERITA DRIVE		
OWNER NAME:	DOROTHY PEARSON TRUST		
QUALIFIER:	SING HON LEE	CONTACT PHONE NUMBER:	772 349-0203

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

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

24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

INSPECTIONS

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

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

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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	**10861**		
ADDRESS:	**2 MARGUERITA DRIVE**		
DATE ISSUED:	**5/13/2014**	**SCOPE OF WORK:**	**A/C CHANGE OUT**

SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	$	

Plan Submittal Fee ($350.00 SFR, $175.00 Remodel < $200K)		$	
(No plan submittal fee when value is less than $100,000)			
Total square feet air-conditioned spa @ $ 121.75 per sq. ft. s.f.			$ -
Total square feet non-conditioned space, or interior remodel: @ $ 59.81 per sq. ft. s.f.			$ -
Total square feet remodel with new trusses: $ 90.78 per sq. ft. s.f.			$ -
Total Construction Value:		$	$ -
Building fee: (2% of construction value SFR or >$200K)		$	n/a
Building fee: (1% of construction value < $200K + $100 per insp.)			$ -
Total number of inspections (Value < $200K) $ 100.00 per insp. # insp			n/a
Dept. of Comm. Affairs Fee: (1.5% of permit fee - $2.00 min)		$	n/a
DBPR Licensing Fee: (1.5% of permit fee - $2.00 min.)		$	n/a
Road impact assessment: (.04% of construction value - $5 min.)			n/a
Martin County Impact Fee:		$	
TOTAL BUILDING PERMIT FEE:		$	**$ -**

ACCESSORY PERMIT Declared Value:		$	$ 4,680.00
Total number of inspections: @ $ 100.00 per insp. # insp	$ 1.00		$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - $2.00 min)		$	$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - $2.00 min.)		$	$ 2.00
Road impact assessment: (.04% of construction value - $5 min.)			$ 5.00

TOTAL ACCESSORY PERMIT FEE:	**$ 109.00**

Pd 5/14/14
CK 4725

Town of Sewall's Point

Date: _____ **BUILDING PERMIT APPLICATION** **Permit Number:** 10861

OWNER/LESSEE NAME: Dorothy Pearson Phone (Day) 781 7841 (Fax) _____

Job Site Address: 2 Margueritta Dr. City: Sewall's Point State: FL Zip: 34996

Legal Description MARGUERITA S/D LOT 10 Parcel Control Number: 13-38-41-011-000-00100-3

Fee Simple Holder Name: _____ Address: _____

City: _____ State: _____ Zip: _____ Telephone: _____

*SCOPE OF WORK (PLEASE BE SPECIFIC): 2nd FL. A/C change out

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

Has a Zoning Variance ever been granted on this property?
YES_____ (YEAR)_____ NO_____
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: $ 4680
(Notice of Commencement required when over $2500 prior to first inspection, $7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10___ AE9___ AE8___ X___
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: $_____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Lee's A/C & Ref. Corp Phone: 772 349 0203 Fax: 772 221 3980

Qualifiers name: Sing Hon Lee Street: 2023 SW Danforth Cir City: Palm City State: FL Zip: 34990

State License Number: CAC057778 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Fla. License# _____

Street: _____ City: _____ State: _____ Zip: _____ Phone Number: _____

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Covered Patios/ Porches: _____ Enclosed Storage: _____

Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____
* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2010 National Electrical Code: 2008, Florida Energy Code: 2010, Florida Accessibility Code: 2010, Florida Fire Prevention Code: 2010

RECEIVED MAY 8 2014 Town Hall

WARNINGS 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. A 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 IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
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 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:
X Dorothy D. Pearson
State of Florida, County of: MARTIN
On This the 7 day of May 2014
by Dorothy Pearson who is personally
known to me or produced drivers license
As identification.
Notary Public Kathleen May Euler
My Commission Expires: August 20, 2015

KATHLEEN MAY EULER
Notary Public, State of Florida
Commission # EE 102321
My comm. expires Aug. 20, 2015

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:
X _____
State of Florida, County of: Martin
On This the 7 day of May 2014
by Sing Hon Lee who is personally
known to me or produced _____
As identification. _____
My Commission Expires: _____

TONY CASCIO
MY COMMISSION # EE 100804
EXPIRES: October 1, 2015
Bonded Thru Budget Notary Services

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) — PLEASE PICK UP YOUR PERMIT PROMPTLY!

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD (850) 487-1395
1940 NORTH MONROE STREET
TALLAHASSEE FL 32399-0783

LEE, SING-HON
LEE'S A/C & REFRIGERATION CORP
2023 SW DANFORTH CIRCLE
PALM CITY FL 34990

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 OF FLORIDA AC# 6144720
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CAC057778 05/30/12 110404909

CERTIFIED AIR COND CONTR
LEE, SING-HON
LEE'S A/C & REFRIGERATION CORP

IS CERTIFIED under the provisions of Ch.489 FS
Expiration date: AUG 31, 2014 L12053000868

DETACH HERE

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

AC# 6144720

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12053000868

DATE	BATCH NUMBER	LICENSE NBR
05/30/2012	110404909	CAC057778

The CLASS B AIR CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS
Expiration date: AUG 31, 2014

LEE, SING-HON
LEE'S A/C & REFRIGERATION CORP
2023 SW DANFORTH CIRCLE
PALM CITY FL 34990

RICK SCOTT
GOVERNOR

KEN LAWSON
SECRETARY

DISPLAY AS REQUIRED BY LAW

Sarah Montgomery <sarah@headleyinsurance.net>
To: leesacref@hotmail.com
Certificate of insurance

May 7, 2014 10:02 AM

Sincerely,
Sarah Montgomery, ACSR
Notary Public

Headley Insurance Agency LLC
3544 S Florida Ave
Lakeland, FL 33803

P: 863-701-7411 x108
F: 863-701-7418
Hours: Monday - Friday, 9am to 5pm, closed 12-1 for lunch

As of July 1, 2008 we no longer accept cash payments. Payment must be made in the form of check or money order. Some companies may allow credit card payment. Please contact us for more payment options.

Please be advised that coverage cannot be added, amended or bound via email, fax or voicemail.
This e-mail message is for the sole use of the intended recipient(s) and may contain confidential information. Any unauthorized review, use, disclosure or distribution of this e-mail is prohibited. If you are not the intended recipient, please destroy all paper and electronic copies of the original message. This came from Sarah Montgomery's e-mail. She works at Nationwide Insurance.

LEESAI1 OP ID: SM

ACORD

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/07/2014

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(ies) 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).

PRODUCER Headley Insurance Agency, SF. 3544 S. Florida Ave Lakeland, FL 33803 Scott Headley	CONTACT NAME: Commercial Dept PHONE (A/C, No, Ext): 863-701-7411 FAX (A/C, No): 863-701-7418 E-MAIL ADDRESS: sarah@headleyinsurance.com
	INSURER(S) AFFORDING COVERAGE — NAIC #
	INSURER A : Cypress P&C Ins Co
INSURED Lee's A/C & Refrigeration Corp Sing-Hon Lee 2023 SW Danforth Circle Palm City, FL 34990	INSURER B : INSURER C : INSURER D : INSURER E : INSURER F :

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
A	GENERAL LIABILITY [X] COMMERCIAL GENERAL LIABILITY [ ] CLAIMS-MADE [X] OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: [X] POLICY [ ] PRO-JECT [ ] LOC			20P0023034	04/01/2014	04/01/2015	EACH OCCURRENCE DAMAGE TO RENTED PREMISES (Ea occurrence) MED EXP (Any one person) PERSONAL & ADV INJURY GENERAL AGGREGATE PRODUCTS - COMP/OP AGG	$ 300,000 $ 100,000 $ 5,000 $ 300,000 $ 600,000 $ 600,000
	AUTOMOBILE LIABILITY [ ] ANY AUTO [ ] ALL OWNED AUTOS [ ] SCHEDULED AUTOS [ ] HIRED AUTOS [ ] NON-OWNED AUTOS						COMBINED SINGLE LIMIT (Ea accident) BODILY INJURY (Per person) BODILY INJURY (Per accident) PROPERTY DAMAGE (PER ACCIDENT)	$ $ $ $
	[ ] UMBRELLA LIAB [ ] OCCUR [ ] EXCESS LIAB [ ] CLAIMS-MADE [ ] DED [ ] RETENTION $						EACH OCCURRENCE AGGREGATE	$ $
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH) Y/N [ ] N/A If yes, describe under DESCRIPTION OF OPERATIONS below						[ ] WC STATU-TORY LIMITS [ ] OTH-ER E.L. EACH ACCIDENT E.L. DISEASE - EA EMPLOYEE E.L. DISEASE - POLICY LIMIT	$ $ $

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

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY): 05/07/2014

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(ies) 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).

PRODUCER	CONTACT NAME: Michael D. Holleman	
Work Comp Associates, Inc. P.O. Box 33297 Palm Beach Gardens, FL 33420-3297	PHONE (A/C, No, Ext): (561) 863-9581	FAX (A/C, No): (561) 881-9745
	E-MAIL ADDRESS: mail@WorkCompAssoc.com	
	INSURER(S) AFFORDING COVERAGE	NAIC #
	INSURER A: Florida Citrus, Business & Ind.	
INSURED Lee's A/C & Refrigeration Corp. 2023 S.W. Danforth Circle Palm City, FL 34990-7704	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	
	INSURER F:	

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.

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS	
	GENERAL LIABILITY						EACH OCCURRENCE	$
	COMMERCIAL GENERAL LIABILITY						DAMAGE TO RENTED PREMISES (Ea occurrence)	$
	CLAIMS-MADE ☐ OCCUR						MED EXP (Any one person)	$
							PERSONAL & ADV INJURY	$
							GENERAL AGGREGATE	$
	GEN'L AGGREGATE LIMIT APPLIES PER:						PRODUCTS - COMP/OP AGG	$
	POLICY ☐ PRO-JECT ☐ LOC							$
	AUTOMOBILE LIABILITY						COMBINED SINGLE LIMIT (Ea accident)	$
	ANY AUTO						BODILY INJURY (Per person)	$
	ALL OWNED AUTOS / SCHEDULED AUTOS						BODILY INJURY (Per accident)	$
	HIRED AUTOS / NON-OWNED AUTOS						PROPERTY DAMAGE (Per accident)	$
								$
	UMBRELLA LIAB ☐ OCCUR						EACH OCCURRENCE	$
	EXCESS LIAB ☐ CLAIMS-MADE						AGGREGATE	$
	DED ☐ RETENTION $							$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY Y / N ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? [Y] (Mandatory in NH) If yes, describe under DESCRIPTION OF OPERATIONS below	N / A	[N]	10640809	4/1/2014	4/1/2015	[X] WC STATU-TORY LIMITS ☐ OTH-ER	
							E.L. EACH ACCIDENT	$ 100,000
							E.L. DISEASE - EA EMPLOYEE	$ 100,000
							E.L. DISEASE - POLICY LIMIT	$ 500,000

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

CERTIFICATE HOLDER	CANCELLATION
Town of Sewall's Point Bldg. Dept. 1 South Sewall's Point Road Sewall's Point, FL 34996-6738	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: Michael D. Holleman (EAL)

2013-2014

MARTIN COUNTY ORIGINAL
BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILLOUGHBY BLVD., STUART, FL 34994
(772) 288-5604

CHARACTER COUNTS IN MARTIN COUNTY

ACCOUNT 1999-508-0004 CERT
PHONE (772) 349-0203 SIC NO 001731
LOCATION:
2023 SW DANFORTH CIR MAR

PREV YR.	$ .00	LIC. FEE	$ 26.25
	$ .00	PENALTY	$ .00
	$ .00	COL FEE	$ .00
	$ .00	TRANSFER	$ .00
	TOTAL 26.25		

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
A/C & REFRIG CONTRACTOR
OF

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
29 DAY OF JULY 20 13
AND ENDING SEPTEMBER 30. 2014

LEE, SING-HON
LEE'S A/C & REFRIGERATION CORP
LEE SING HON
2023 SW DANFORTH CIRCLE
PALM CITY, FL 34990

Ruth Pietruszewski
GREAT SEAL OF THE STATE OF FLORIDA
IN GOD WE TRUST
Martin County Tax Collector

11 2012 30099.0001 26.25 PAID

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

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A $250 FINE. IF NOT PAID BY OCT. 1, A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25%, PLUS COLLECTION COSTS WILL APPLY.

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

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

generated on 5/13/2014 8:37:21 AM EDT

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-011-000-00100-3	27871	2 MARGUERITA DR, SEWALL'S POINT	$555,130	5/10/2014

Owner Information

Owner(Current)	PEARSON DOROTHY (TR)
Owner/Mail Address	2 MARGUERITE DR STUART FL 34996
Sale Date	12/13/1999
Document Book/Page	1445 0033
Document No.	
Sale Price	427000

Location/Description

Account #	27871	**Map Page No.**	SP-05
Tax District	2200	**Legal Description**	MARGUERITA S/D LOT 10
Parcel Address	2 MARGUERITA DR, SEWALL'S POINT		
Acres	.3500		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120200 Heritage P, Palmtto Pk,Rdglnd,

Assessment Information

Market Land Value	$150,000
Market Improvement Value	$405,130
Market Total Value	$555,130

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:	Dorothy Pearson	Contractor name:	Sing Hon Lee
Street address:	2 Marguerita Dr	Jurisdiction:	
City:	Sewall's Point	Permit No.:	
Zip:	FL. 34996	Final inspection date:	

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

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

Signature: _____ Date: 7/7/16

Printed Name: Sing Hon Lee

Contractor License #: CAC057778

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

Signature: _____ Date: _____

Printed Name: _____

Form revision date: March 18, 2011

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

Air Conditioning Change out Affidavit

Residential ✓ Commercial _____

Package Unit ____ Yes ✓ No (Use Condenser side of form below for equipment listing)

Duct Replacement ____ Yes ✓ No - Refrigerant line replacement ____ Yes ✓ No

Flushing Existing Refrigerant lines ✓ Yes ____ No - Adding Refrigerant Drier ✓ Yes ____ No

Rooftop A/C Stand Installation ____ Yes ✓ No - Curb Installation ____ Yes ✓ No

Smoke Detector in Supply (over 2000 CFM) ____ Yes ✓ No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Rheem Model# 14AJm49
Volts 230 CFM's 1600 Heat Strip 10 Kw
Min. Circuit Amps 50 Wire gauge 6
Max. Breaker size 60 Min. Breaker size 50
Ref. line size: Liquid 3/8 Suction 7/8
Refrigerant type 410 A
Location: Existing ✓ New _____
Attic/Garage/Closet (specify) closet
Access: _____

Condenser: Mfg Rheem Model# RHLLHm48z1
Volts 230 SEER/EER 16 BTU's 46000
Min. Circuit Amps 40 Wire gauge 8
Max. Breaker size 60 Min. Breaker size 40
Ref. line size: Liquid 3/8 Suction 7/8
Refrigerant type 410A
Location: Existing ✓ New _____
(Left)/Right/Rear/Front/Roof _____
Condensate Location Around

NOTE: CONTRACTOR MUST SUPPLY A PROPER LADDER IF REQUIRED FOR INSPECTION

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Trane Model# _____
Volts 230 CFM's 1600 Heat Strip 10 Kw
Min. Circuit Amps 50 Wire gauge 6
Max. Breaker size 60 Min. Breaker size 50
Ref. line size: Liquid 3/8 Suction 7/8
Refrigerant type R22
Location: Ext. ✓ New _____
Attic/Garage/Closet (specify) closet
Access: _____

Condenser: Mfg Rheem Model# _____
Volts 230 SEER/EER 10 BTU's 48000
Min. Circuit Amps 40 Wire gauge 8
Max. Breaker size 45 Min. Breaker size 40
Ref. line size: Liquid 3/8 Suction 7/8
Refrigerant type R22
Location: Ext. ✓ New _____
(Left)/Right/Rear/Front/Roof _____
Condensate Location Around

Certification:

I herby certify that the information entered on this form accurately represents the equipment installed and further that this equipment is considered matched as required by FBC – R (N)1107 & 1108

[signature] 5/7/14

Signature Date

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: 3799429 Date: 8/1/2013

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower
Outdoor Unit Model Number: 14AJM49
Indoor Unit Model Number: RHLL-HM4821*RCSL-H*4821
Manufacturer: RHEEM MANUFACTURING COMPANY
Trade/Brand name: RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM MANUFACTURING COMPANY

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

Cooling Capacity (Btuh):	46000
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00

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

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

Air-Conditioning, Heating, and Refrigeration Institute

CERTIFICATE NO.: 13019853399610280O

DesignStar Load Calculation

Results are intended for use with Rheem heating and cooling systems

The New Degree of Comfort™

Customer Information

Street Address	2 Marguerita dr., Stuart, FL 34996
Latitude, Longitude	26.6726°, -80.0706°
House Square Footage:	2540 sq. ft.
Name:	Phil Jeffers
Phone:	123-123-1234
Email:	example@mail.com

House Information

SHR	.75
Number of residents	2
Ceiling height	9
Wall U-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 loss %	10
Duct gain %	10
Cooling infiltraction (ACH)	0.6
Heating infiltration (ACH)	0.8
Winter ventilation	0
Summer ventilation	0

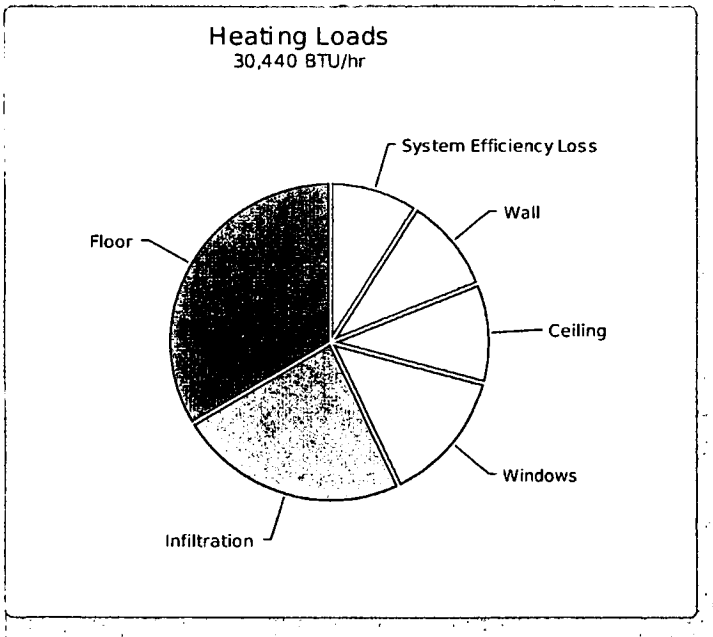
Design Conditions

Outdoor	Heating	Cooling
Dry bulb (°F)	47	90
Daily range		M
Relative humidity		50%
Moisture difference		64

Indoor	Heating	Cooling
Indoor temperature (°F)	70	75
Design temperature difference(°F)	23	15

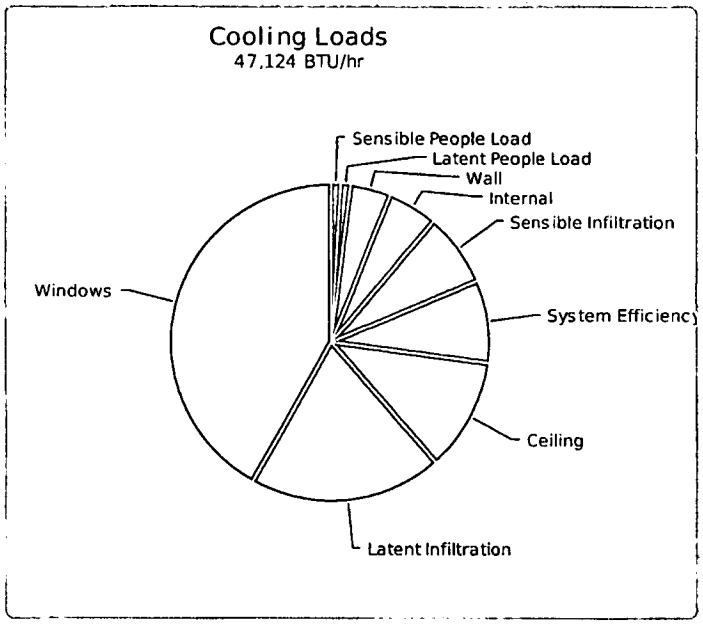
Heating Loads

Area	Btuh	% of load
Wall	3000	9.9
Floor	10207	33.5
Ceiling	3096	10.2
Windows	4198	13.8
Infiltration	7172	23.6
System Efficiency Loss	2767	9.1
Total:	30440	

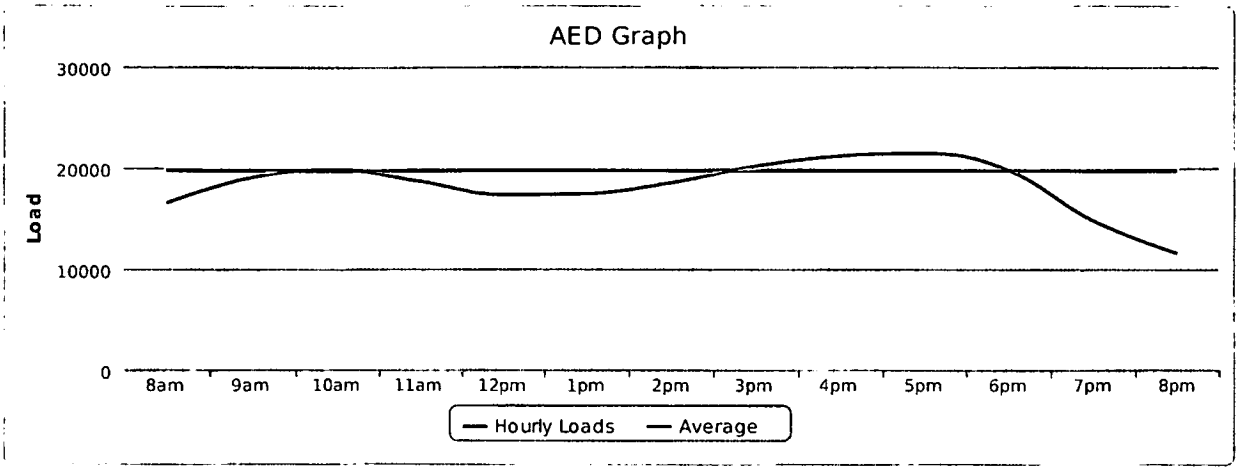


Cooling Loads

Area	Btuh	% of load
Wall	1957	4.2
Ceiling	5385	11.4
Windows	19721	41.8
Sensible Infiltration	3508	7.4
Latent Infiltration	9252	19.6
System Efficiency Gain	3982	8.5
Internal	2400	5.1
Sensible People Load	460	1
Latent People Load	460	1
Total:	47124	
Sensible load	37412	
Latent load	9712	
SHR	0.79	
Capacity at .75 SHR	4.16 Tons	



Adequate Exposure Diversity



Equipment selection

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

Glass (E)	184 sq. ft.
Glass (S)	26 sq. ft.
Glass (N)	26 sq. ft.
Glass (W)	129 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	70°F
Sensible Cooling	37,412 Btuh
Latent Cooling	9,712 Btuh
Required Cooling Airflow	1,701 CFM
Sensible Heating	30,440 Btuh
Required Heating Airflow	395 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

FL #	FL14239-R0
Application Type	New
Code Version	2007
Application Status	Approved
Comments	
Archived	☐
Product Manufacturer	BMP International Inc.
Address/Phone/Email	4710 28th Street N St. Petersburg, FL 33714 (727) 458-0544 benmeng8@yahoo.com
Authorized Signature	Xianbin Meng benmeng8@yahoo.com
Technical Representative Address/Phone/Email	
Quality Assurance Representative Address/Phone/Email	
Category	Structural Components
Subcategory	Anchors
Compliance Method	Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer ☑ Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Kristina S. Daugherty, P.E.
Florida License	PE-68455
Quality Assurance Entity	National Accreditation & Management Institute,
Quality Assurance Contract Expiration Date	12/31/2013
Validated By	Steven M. Urich, PE ☑ Validation Checklist - Hardcopy Received
Certificate of Independence	FL14239_R0_COI_COI BMP.pdf
Referenced Standard and Year (of Standard)	
Equivalence of Product Standards Certified By	
Sections from the Code	Chapter 22

Product Approval Method	Method 2 Option B
Date Submitted	11/05/2010
Date Validated	11/05/2010
Date Pending FBC Approval	11/15/2010
Date Approved	12/07/2010
Date Revised	09/29/2011

Summary of Products

FL #	Model, Number or Name	Description
14239.1	A/C Hold Down Clip	A/C Hold Down Clip
Limits of Use **Approved for use in HVHZ:** Yes **Approved for use outside HVHZ:** Yes **Impact Resistant:** N/A **Design Pressure:** N/A **Other:**		**Installation Instructions** FL14239_R0_II_BMP003.pdf Verified By: Kristina S. Daugherty, P.E. 68455 Created by Independent Third Party: Yes **Evaluation Reports** FL14239_R0_AE_PER 1196.pdf Created by Independent Third Party: Yes

Back Next

BMP INTERNATIONAL, INC

4710 28th St N, St Petersburg, FL 33714

Phone: 727-458- 0544

State Approved Equipment Tie Down - FL14239

On March 23rd 2012 the governor signed HB 704 amending SECTION 16 of the 2010 FBC to the 2007 FBC. See the copy below.

HB 704 – Relating to the Florida Building Commission and the Florida Building Code

Chapter Law Number: Chapter No. 2012-1
Approved by the Governor 3/23/2012

Section 16

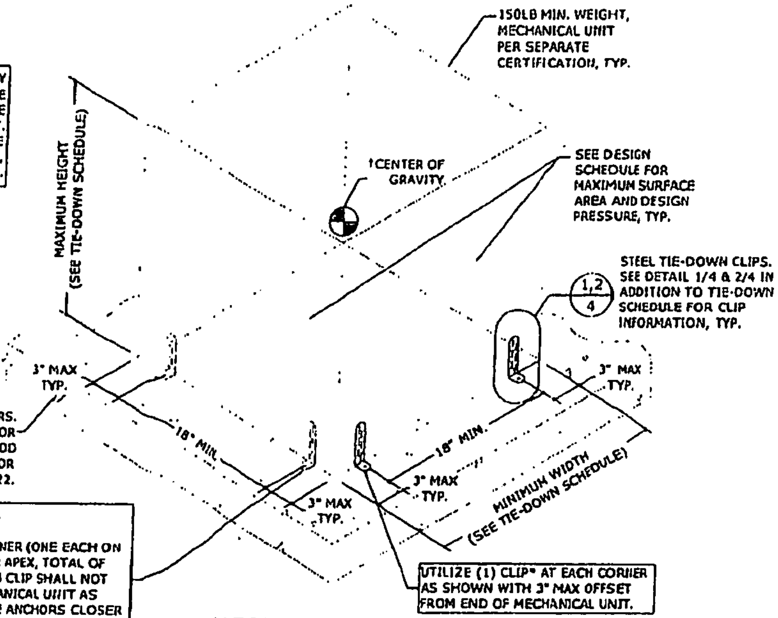
4) Notwithstanding the provisions of this section, exposed mechanical equipment or appliances fastened to a roof or installed on the ground in compliance with the code using rated stands, platforms, curbs, slabs, or other means are deemed to comply with the wind resistance requirements of the 2007 Florida Building Code, as amended. Further support or enclosure of such mechanical equipment or appliances is not required by a state or local official having authority to enforce the Florida Building Code. This subsection expires on the effective date of the 2013 ~~2010~~ Florida Building Code.

The following files from www.floridabuilding.org Code Version 2007, number FL 14239, contain the necessary compliance information for tie down clip approval. The specific information required by building departments may vary. Consult with the individual building department for what portion of the following information is needed for permit approval.

BMP INTERNATIONAL, INC.

MECHANICAL UNIT STEEL TIE-DOWN CLIP CAPACITIES: AT GRADE & ROOF-TOP MOUNTED APPLICATIONS

†CENTER OF GRAVITY ASSUMED TO ACT AT THE GEOMETRIC CENTER OF THE MECHANICAL UNIT. MECHANICAL UNIT MUST BE SQUARE OR RECTANGULAR, NO IRREGULAR SHAPES.



HOST STRUCTURE DESIGN BY OTHERS. SEE TIE-DOWN SCHEDULES FOR ALLOWABLE SUBSTRATES. NOTE: WOOD MEMBERS MAY NOT BE USED FOR ROOF-TOP APPLICATIONS PER FBC 1522.

DOUBLE CLIP OPTION:

(2) TOTAL CLIPS MAY BE USED AT EACH CORNER (ONE EACH ON OPPOSING CORNER FACES, 3" FROM CORNER APEX, TOTAL OF (8) CLIPS PER UNIT FOR THIS OPTION). EACH CLIP SHALL NOT EXCEED 3" MAX OFFSET FROM END OF MECHANICAL UNIT AS DETAILED HEREIN. DO NOT SPACE CONCRETE ANCHORS CLOSER THAN THE ALLOWED SPACING LISTED IN THE TIE-DOWN ANCHOR SCHEDULES. SEE SHEETS 2&3 FOR MORE INFORMATION.

1/1 MECHANICAL UNIT TIE-DOWN ISOMETRIC

1" = 1'-0" ISOMETRIC

*FOR CLARITY, THIS ISOMETRIC ONLY SHOWS 1" CLIPS. THE ISOMETRIC LAYOUT IS TYPICAL FOR BOTH 1" AND 2" CLIP APPLICATIONS. 2" CLIPS ARE NOT CERTIFIED FOR ANCHORAGE TO CONCRETE.

TIE-DOWN CLIP DIRECTIVE EXAMPLE

(THE FOLLOWING EXAMPLE ILLUSTRATES THE PROCEDURE USED TO DETERMINE THE MAXIMUM ALLOWABLE WIND PRESSURE FOR ANY GIVEN MECHANICAL UNIT THAT CONFORMS TO THE DIMENSION RESTRICTIONS LISTED HEREIN. SEE SHEETS 2&3 FOR TIE-DOWN SCHEDULES.)

MECHANICAL UNIT CRITERIA:

CONSIDER THE INSTALLATION OF (1) MECHANICAL UNIT WITH THE FOLLOWING CRITERIA=
36" TALL x 36" DEEP x 24" WIDE, 150 LB WEIGHT AS VERIFIED BY OTHERS, INSTALLED TO 3192 KSI MIN. CONCRETE AT GRADE AS VERIFIED BY OTHERS.

PROCEDURE:

	PROCEDURE STEP	RESULT
1	LOCATE THE AT GRADE TIE-DOWN SCHEDULE ON SHEET 2 AND SELECT CLIP TYPE	CONSIDER 1" STEEL CLIP
2	DETERMINE LARGEST FACE AREA OF MECHANICAL UNIT TO BE INSTALLED	36"x36"=9FT²
3	CHECK MAXIMUM UNIT HEIGHT RESTRICTION	UNIT HEIGHT IS 36" WHICH IS LESS THAN THE MAXIMUM ALLOWABLE HEIGHT OF 48"
4	CHECK MINIMUM UNIT WIDTH RESTRICTION	UNIT WIDTH IS 24" WHICH IS EQUIVALENT TO THE MINIMUM ALLOWABLE WIDTH OF 24"
5	DETERMINE THE NUMBER OF CLIPS TO BE USED AT EACH CORNER OF THE MECHANICAL UNIT	CONSIDER (1) CLIP AT EACH CORNER, INSTALLED TO CONCRETE SUBSTRATE

CONCLUSION: MAXIMUM ALLOWABLE LATERAL DESIGN PRESSURE= 40PSF

(COMPARE THIS VALUE TO THE SEPARATE SITE SPECIFIC REQUIRED DESIGN WIND PRESSURE PROVIDED BY A LICENSED ENGINEER OR REGISTERED ARCHITECT; NOT INCLUDED IN THIS CERTIFICATION)

GENERAL NOTES:

1. THIS PRODUCT HAS BEEN DESIGNED AND SHALL BE FABRICATED IN ACCORDANCE WITH THE REQUIREMENTS OF THE 2010 FLORIDA BUILDING CODE, FOR USE WITHIN AND OUTSIDE THE HIGH VELOCITY HURRICANE ZONE.
2. NO 33-1/3% INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THIS SYSTEM.
3. DESIGN IS BASED ON CLIENT PROVIDED PRODUCT AND DIE SHEETS FROM TEST REPORTS #TEL 01970387A, #TEL 01970387B BY TESTING EVALUATION LABORATORIES, INC.. NO SUBSTITUTIONS WITHOUT WRITTEN APPROVAL BY THIS ENGINEER SHALL BE PERMITTED.
4. ALLOWABLE DESIGN PRESSURES TO QUALIFY CAPACITY OF CLIPS AS LISTED HEREIN ARE DETERMINED THROUGH TESTING REPORT DATA AND RATIONALLY CHECKED FOR CONSISTENCY WITH EACH TEST PERFORMED.
5. REQUIRED LATERAL AND/OR UPLIFT DESIGN PRESSURES CALCULATED FOR USE WITH THIS SYSTEM SHALL BE DETERMINED BY OTHERS ON A SITE-SPECIFIC BASIS IN ACCORDANCE WITH THE GOVERNING CODE.
6. MAXIMUM & MINIMUM DIMENSIONS AND MINIMUM WEIGHT OF MECHANICAL UNIT SHALL CONFORM TO SPECIFICATIONS STATED HEREIN. ALL MECHANICAL SPECIFICATIONS (CLEAR SPACE, TONNAGE, ETC.) SHALL BE AS PER MANUFACTURER RECOMMENDATIONS AND ARE THE EXPRESS RESPONSIBILITY OF THE CONTRACTOR.
7. FASTENERS TO BE #12 X ¾" OR GREATER SAE GRADE 5 UNLESS NOTED OTHERWISE. TAPCONS REFERRED TO HEREIN SHALL BE ITW BUILDEX BRAND, CARBON STEEL ONLY, INSTALLED TO 3192 KSI MIN CONCRETE. SEE ANCHOR SCHEDULE FOR ANCHOR REQUIREMENTS. ALL FASTENERS SHALL HAVE APPROPRIATE CORROSION PROTECTION TO PREVENT ELECTROLYSIS.
8. ALL STEEL CLIPS SHALL BE ASTM A283 STEEL (GRADE D) WITH F_y = 33 KSI OR BETTER. ALL STEEL MEMBERS SHALL BE PROTECTED AGAINST CORROSION WITH AN APPROVED COAT OF PAINT, ENAMEL OR OTHER APPROVED PROTECTION IN ACCORDANCE WITH THE 2010 FBC SECTIONS 2203.2 AND 2220. G90-RATED COATING REQUIRED FOR ALL COASTAL INSTALLATIONS.
9. ALL CONCRETE SPECIFIED HEREIN IS NOT PART OF THIS CERTIFICATION. AS A MINIMUM, ALL CONCRETE SHALL BE STRUCTURAL CONCRETE 4" MIN. THICK AND SHALL HAVE MINIMUM COMPRESSIVE STRENGTH OF 3192 PSI, UNLESS NOTED OTHERWISE.
10. ALL WOOD MEMBERS SHALL BE PRESSURE TREATED SOUTHERN YELLOW PINE GRADE #2 WITH SPECIFIC GRAVITY G = 0.55 OR GREATER. DIRECT CONNECTION TO WOOD MEMBERS/SLEEPERS IS NOT PERMITTED FOR ROOF-TOP APPLICATIONS PER FBC SECTION 1522.
11. THE CONTRACTOR IS RESPONSIBLE TO INSULATE ALL MEMBERS FROM DISSIMILAR MATERIALS TO PREVENT ELECTROLYSIS, I.E. ALUMINUM PER F.B.C. 2003.8.4.
12. ELECTRICAL GROUND, WHEN REQUIRED, TO BE DESIGNED & INSTALLED BY OTHERS.
13. THE ADEQUACY OF ANY EXISTING STRUCTURE TO WITHSTAND SUPERIMPOSED LOADS SHALL BE VERIFIED BY THE ONSITE DESIGN PROFESSIONAL AND IS NOT INCLUDED IN THIS CERTIFICATION. EXCEPT AS EXPRESSLY PROVIDED HEREIN, NO ADDITIONAL CERTIFICATIONS OR AFFIRMATIONS ARE INTENDED.
14. THE SYSTEM DETAILED HEREIN IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SPECIFIC SITE. FOR SITE CONDITIONS DIFFERENT FROM THE CONDITIONS DETAILED HEREIN, A LICENSED ENGINEER OR REGISTERED ARCHITECT SHALL PREPARE SITE SPECIFIC DOCUMENTS FOR USE IN CONJUNCTION WITH THIS DOCUMENT.
15. WATER-TIGHTNESS OF EXISTING HOST SUBSTRATE SHALL BE THE FULL RESPONSIBILITY OF THE INSTALLING CONTRACTOR. CONTRACTOR SHALL ENSURE THAT ANY REMOVED OR ALTERED WATERPROOFING MEMBRANE IS RESTORED AFTER FABRICATION AND INSTALLATION OF STRUCTURE PROPOSED HEREIN. THIS ENGINEER SHALL NOT BE RESPONSIBLE FOR ANY WATERPROOFING OR LEAKAGE ISSUES WHICH MAY OCCUR AS WATER-TIGHTNESS SHALL BE THE FULL RESPONSIBILITY OF THE INSTALLING CONTRACTOR.

FRANK L. BENNARDO, P.E.
LICENSE No. 46549
STATE OF FLORIDA
PROFESSIONAL ENGINEER
12/11/2011

ENGINEERING EXPRESS
160 SW 12th AVENUE
DEERFIELD BEACH, FL 33442
PH: (954) 354-0660
WWW.ENGEXP.COM
A FRANK L. BENNARDO, P.E. INC.

BMP INTERNATIONAL, INC.
4710 28TH STREET NORTH
ST. PETERSBURG, FL 33471
PH: (727) 577-1613

MECHANICAL UNIT STEEL TIE-DOWN CLIPS

FLORIDA STATEWIDE APPROVAL

REMARKS	DRAWN	CHKD	DATE
1ST ISSUE	TSB	FLB	12-11-11

11-BMP-0001

SCALE: N.T.S. 01

PAGE DESCRIPTION:

1" STEEL CLIP TIE-DOWN SCHEDULE: **AT GRADE** INSTALLATIONS:

MAXIMUM SURFACE AREA OF UNITS LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO HOST STRUCTURE)							
			(1) CLIP AT EACH CORNER (TOTAL OF 4 CLIPS PER UNIT)				(2) CLIPS AT EACH CORNER (TOTAL OF 8 CLIPS PER UNIT)			
			TAPCON TO CONCRETE	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD	TAPCON TO CONCRETE	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD
6 FT²	48 " MAX	24 " MIN	91 PSF	91 PSF	91 PSF	91 PSF	100 PSF	100 PSF	100 PSF	100 PSF
8 FT²			61 PSF	61 PSF	61 PSF	61 PSF	100 PSF	100 PSF	100 PSF	100 PSF
9 FT²			(40 PSF)	40 PSF	40 PSF	40 PSF	77 PSF	77 PSF	77 PSF	77 PSF
12 FT²			30 PSF	30 PSF	30 PSF	30 PSF	58 PSF	58 PSF	58 PSF	58 PSF
18 FT²			22 PSF	22 PSF	22 PSF	22 PSF	43 PSF	43 PSF	43 PSF	43 PSF
20 FT²	60 " MAX	48 " MIN	26 PSF	26 PSF	26 PSF		49 PSF	49 PSF	49 PSF	47 PSF
25 FT²							39 PSF	39 PSF	39 PSF	37 PSF
30 FT²							33 PSF	33 PSF	33 PSF	31 PSF
36 FT²							27 PSF	27 PSF	27 PSF	26 PSF

1. TIE-DOWN CLIPS SHALL BE FASTENED TO MECHANICAL HOUSING UNIT WITH (3)-#12 SAE GRADE 5 SHEET METAL SCREWS. ((5)-SHEET METAL SCREWS REQUIRED FOR LONG CLIPS, SEE DETAIL 1/4.)
2. MECHANICAL HOUSING UNIT SHALL CONFORM TO THE FOLLOWING:
   2.1. ALUMINUM HOUSING UNITS SHALL BE 6063-T6 MIN. ALUMINUM SHEET WITH F_{ty}=30 KSI, 0.125" MIN. THICKNESS.
   2.2. STEEL HOUSING UNITS SHALL BE 33KSI MIN. STEEL, GRADE 33, 22GA MIN. (t=0.0299").
3. MAXIMUM ALLOWABLE WIND PRESSURES FOR EACH INDIVIDUAL SUBSTRATE MAY BE EQUIVALENT DUE TO THE LIMITING CAPACITY OF THE 1" CLIP.
4. A MAXIMUM ALLOWABLE VALUE OF 100 PSF HAS BEEN UTILIZED; FOR HIGHER DEMAND CAPACITIES CONTACT THIS ENGINEER FOR SITE-SPECIFIC ENGINEERING.

ANCHOR SCHEDULE:

SUBSTRATE	ANCHOR
CONCRETE: (4" THICK MIN, 3192KSI MIN.)	(1)-¼"Ø CARBON STEEL ITW BUILDEX TAPCON, 1¾" FULL EMBED TO CONCRETE, 2¼" MIN. EDGE DISTANCE, 3" MIN. SPACING TO ANY ADJACENT ANCHOR.
ALUMINUM: (0.125" MIN. THICK, 6061-T6 MIN. ALUMINUM)	(1)-#14 SAE GRADE 5 SHEET METAL SCREW TO ALUMINUM, PROVIDE (5) PINCHES MIN. PAST THREAD PLANE FOR SHEET METAL SCREW.
STEEL: (0.125" MIN. THICK, 33 KSI MIN. STEEL)	(1)-#14 SAE GRADE 5 SHEET METAL SCREW TO STEEL, PROVIDE (5) PINCHES MIN. PAST THREAD PLANE FOR SHEET METAL SCREW.
SEALED WOOD: (SOUTHERN YELLOW PINE, G=0.55 OR BETTER)	(1)-#14 SAE GRADE 5 WOOD SCREW TO WOOD MEMBER, PROVIDE 1½" MIN. THREAD PENETRATION, 1" MIN. EDGE DISTANCE, 1" MIN. END DISTANCE.

ANCHOR SCHEDULE NOTES:
1. EMBEDMENT AND EDGE DISTANCE EXCLUDES FINISHES, IF APPLICABLE.
2. ENSURE MINIMUM EDGE DISTANCE AS NOTED IN ANCHOR SCHEDULE.

TABLE LEGEND:
- (oval) -DENOTES EXAMPLE VALUE FOR USE WITH COVER PAGE DIRECTIVE
- (hatched) -DENOTES VALUES NOT APPROVED FOR USE

2" STEEL CLIP TIE-DOWN SCHEDULE: **AT GRADE** INSTALLATIONS:

MAXIMUM SURFACE AREA OF UNITS LARGEST FACE	UNIT HEIGHT	UNIT WIDTH	MAXIMUM ALLOWABLE LATERAL WIND PRESSURE (ANCHOR TO HOST STRUCTURE)					
			(1) CLIP AT EACH CORNER (TOTAL OF 4 CLIPS PER UNIT)			(2) CLIPS AT EACH CORNER (TOTAL OF 8 CLIPS PER UNIT)		
			SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD	SHEET METAL SCREW TO ALUMINUM	SHEET METAL SCREW TO STEEL	WOOD SCREW TO WOOD
4 FT²	48 " MAX	24 " MIN	100 PSF	100 PSF	100 PSF	100 PSF	100 PSF	100 PSF
6 FT²			100 PSF	100 PSF	100 PSF	100 PSF	100 PSF	100 PSF
9 FT²			67 PSF	67 PSF	67 PSF	100 PSF	100 PSF	100 PSF
12 FT²			50 PSF	50 PSF	50 PSF	99 PSF	99 PSF	99 PSF
18 FT²			38 PSF	38 PSF	38 PSF	74 PSF	74 PSF	74 PSF
20 FT²	60 " MAX	48 " MIN	41 PSF	41 PSF	41 PSF	80 PSF	80 PSF	80 PSF
25 FT²			33 PSF	33 PSF	33 PSF	64 PSF	64 PSF	64 PSF
30 FT²			27 PSF	27 PSF	27 PSF	53 PSF	53 PSF	53 PSF
36 FT²						44 PSF	44 PSF	44 PSF

1. TIE-DOWN CLIPS SHALL BE FASTENED TO MECHANICAL HOUSING UNIT WITH (3)-#12 SAE GRADE 5 SHEET METAL SCREWS.
2. MECHANICAL HOUSING UNIT SHALL CONFORM TO THE FOLLOWING:
   2.1. ALUMINUM HOUSING UNITS SHALL BE 6063-T6 MIN. ALUMINUM SHEET WITH F_{ty}=30 KSI, 0.125" MIN. THICKNESS.
   2.2. STEEL HOUSING UNITS SHALL BE 33KSI MIN. STEEL, GRADE 33, 22GA MIN. (t=0.0299").
3. A MAXIMUM ALLOWABLE VALUE OF 100 PSF HAS BEEN UTILIZED; FOR HIGHER DEMAND CAPACITIES CONTACT THIS ENGINEER FOR SITE-SPECIFIC ENGINEERING.

ANCHOR SCHEDULE:

SUBSTRATE	ANCHOR
ALUMINUM: (0.125" MIN. THICK, 6061-T6 MIN. ALUMINUM)	(2)-#14 SAE GRADE 5 SHEET METAL SCREW TO ALUMINUM, PROVIDE (5) PINCHES MIN. PAST THREAD PLANE FOR SHEET METAL SCREW.
STEEL: (0.125" MIN. THICK, 33 KSI MIN. STEEL)	(2)-#14 SAE GRADE 5 SHEET METAL SCREW TO STEEL, PROVIDE (5) PINCHES MIN. PAST THREAD PLANE FOR SHEET METAL SCREW.
SEALED WOOD, 1-1/2" MIN THICKNESS: (SOUTHERN YELLOW PINE, G=0.55 OR BETTER)	(2)-#14 SAE GRADE 5 WOOD SCREW TO WOOD MEMBER, PROVIDE 1½" MIN. THREAD PENETRATION, 1" MIN. EDGE DISTANCE, 1" MIN. END DISTANCE.

ANCHOR SCHEDULE NOTES:
1. EMBEDMENT AND EDGE DISTANCE EXCLUDES FINISHES, IF APPLICABLE.
2. ENSURE MINIMUM EDGE DISTANCE AS NOTED IN ANCHOR SCHEDULE.

TABLE LEGEND:
- (hatched) -DENOTES VALUES NOT APPROVED FOR USE

FRANK L BERNARDO P.E. LICENSE 10014662 STATE OF FLORIDA
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A FRANK L BERNARDO, P.E., INC. ENGINEER

BMP INTERNATIONAL, INC.
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MECHANICAL UNIT STEEL TIE-DOWN CLIPS

FLORIDA STATEWIDE APPROVAL

DRAWN	CHKD	DATE
TAB	FLB	12-15-11

REMARKS
1ST ISSUE

11-BMP-0001

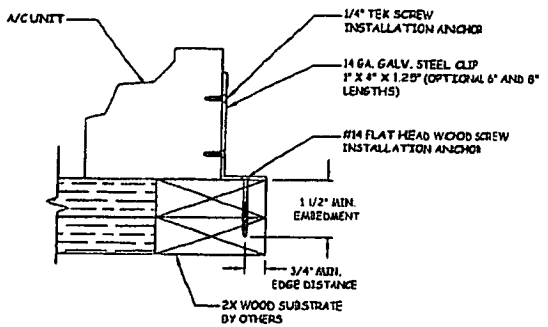
SCALE: N.T.S. 01

PAGE DESCRIPTION:

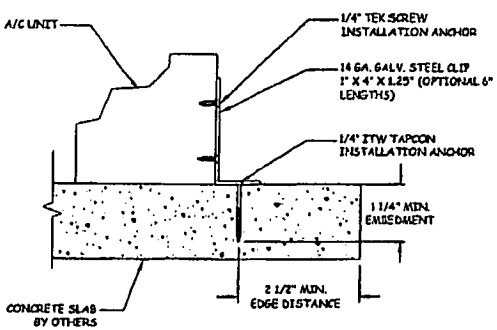
2

BMP INTERNATIONAL, INC.

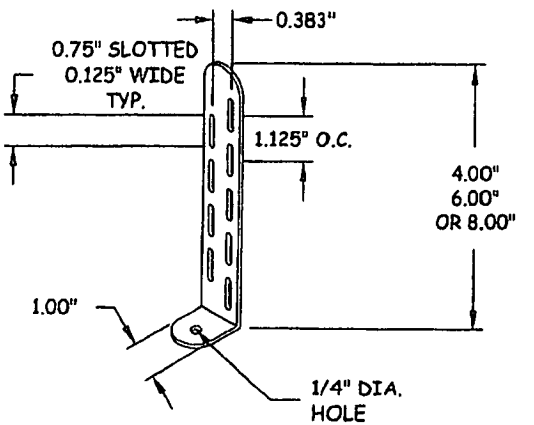
A/C HOLD DOWN CLIP



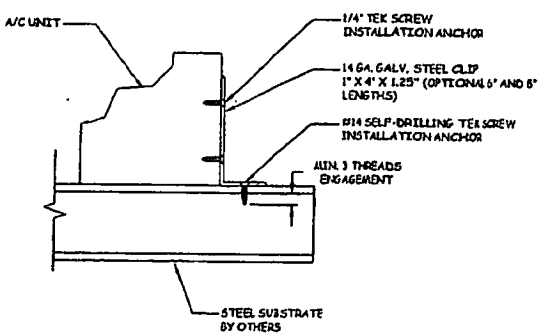
A/1 **INSTALLATION DETAIL**
2X WOOD BUCK SUBSTRATE



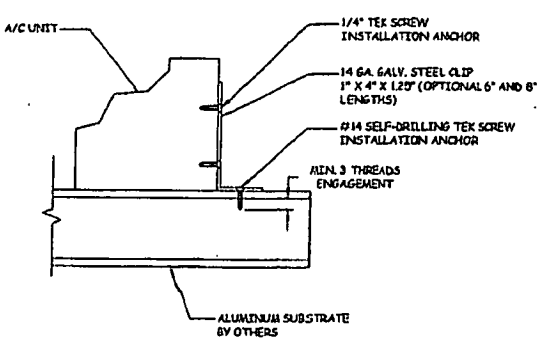
B/1 **INSTALLATION DETAIL**
CONCRETE SUBSTRATE



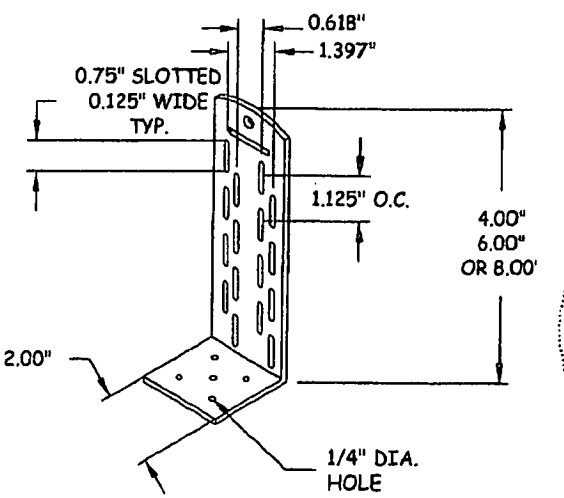
1" CLIP



C/1 **INSTALLATION DETAIL**
STEEL SUBSTRATE



D/1 **INSTALLATION DETAIL**
ALUMINUM SUBSTRATE



2" CLIP

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TITLE: A/C HOLD DOWN CLIP INSTALLATION & GENERAL NOTES

PREPARED BY:
CERTWORKS, LLC
127 W. FAIRBANKS AVE., STE. 438
WINTER PARK, FL 32789
PH: (407) 644-6937 FX: (407) 644-2366

REVISIONS

NO.	DESCRIPTION	BY	DATE

DATE: 06.30.10
DWN BY: JLA
CHK BY: KSD
SCALE: NTS
DWG #: BMP003
SHEET: 1 OF 2

1" CLIP:

TABLE OF CLIP ATTACHMENT TO SUPPORTING STRUCTURE OR A/C UNIT (146 MPH) - 4 CLIPS PER UNIT

HEIGHT ABOVE GROUND (FT.)	NUMBER OF SCREWS PER CLIP TO HOUSING OF A/C (GALV. 1/4" TEK)	NUMBER OF SCREWS PER CLIP INTO CONCRETE (1/4" X 2" TAPCON)	NUMBER OF SCREWS PER CLIP INTO ALUM. RACK SUPPORT (1/4" X 1 3/4" TEK)
0-15	3	1	2*
20	3	1	2*
25	3	1	2*
30	3	1	2*
40	3	1	2*
50	3	1	2*
60	3	1	2*
70	2	1	1
80	2	1	1
90	2	1	1

* Place additional clips at corners for a total of 8 clips, when using the 1" clip where substrate requires 2 screws per clip.
(Alternatively, use the 2" clips to maintain total 4 clips per unit.)

TABLE OF CLIP ATTACHMENT TO SUPPORTING STRUCTURE OR A/C UNIT (155 MPH) - 4 CLIPS PER UNIT

HEIGHT ABOVE GROUND (FT.)	NUMBER OF SCREWS PER CLIP TO HOUSING OF A/C (GALV. 1/4" TEK)	NUMBER OF SCREWS PER CLIP INTO CONCRETE (1/4" X 2" TAPCON)	NUMBER OF SCREWS PER CLIP INTO ALUM. RACK SUPPORT (1/4" X 1 3/4" TEK)
0-15	3	1	2*
20	3	1	2*
25	3	1	2*
30	3	1	2*
40	4	1	2*
50	4	2*	2*
60	4	2*	2*
70	2	1	1
80	2	1	1
90	2	1	2*

*Place additional clips at corners for a total of 8 clips, when using the 1" clip where substrate requires 2 screws per clip.
(Alternatively, use the 2" clips to maintain total 4 clips per unit.)

2" CLIP:

TABLE OF CLIP ATTACHMENT TO SUPPORTING STRUCTURE OR A/C UNIT (146 MPH) - 4 CLIPS PER UNIT

HEIGHT ABOVE GROUND (FT.)	NUMBER OF SCREWS PER CLIP TO HOUSING OF A/C (GALV. 1/4" TEK)	NUMBER OF SCREWS PER CLIP INTO CONCRETE (1/4" X 2" TAPCON)	NUMBER OF SCREWS PER CLIP INTO ALUM. RACK SUPPORT (1/4" X 1 1/4" TEK)
0-15	3	1	2
20	3	1	2
25	3	1	2
30	3	1	2
40	3	1	2
50	3	1	2
60	3	1	2
70	2	1	1
80	2	1	1
90	2	1	1

TABLE OF CLIP ATTACHMENT TO SUPPORTING STRUCTURE OR A/C UNIT (155 MPH) - 4 CLIPS PER UNIT

HEIGHT ABOVE GROUND (FT.)	NUMBER OF SCREWS PER CLIP TO HOUSING OF A/C (GALV. 1/4" TEK)	NUMBER OF SCREWS PER CLIP INTO CONCRETE (1/4" X 2" TAPCON)	NUMBER OF SCREWS PER CLIP INTO ALUM. RACK SUPPORT (1/4" X 1 3/4" TEK)
0-15	3	1	2
20	3	1	2
25	3	2	2
30	3	1	2
40	4	1	2
50	4	2**	2
60	4	2**	2
70	2	1	1
80	2	1	1
90	2	1	2

** Place additional clips at corners for a total of 8 clips, when using 2" clips into concrete and 2 screws per clip are required.
(Alternatively, use 8 total 1" clips per unit)

NOTES:

1. ABOVE CHART DENOTES NUMBER OF SCREWS PER CLIP, ASSUMING 4 CLIPS PER UNIT, EXCEPT WHERE INDICATED ABOVE. WHERE MORE THAN 1 ANCHOR PER CLIP IS REQUIRED INTO THE SUBSTRATE, USE ADDITIONAL CLIPS OR USE THE 2" CLIP.
2. FOR STEEL SUPPORTING STRUCTURES, USE SELF DRILLING GALV. 1/4" x 1 1/4" SCREWS AND QUANTITIES REQUIRED ABOVE NOTED FOR ALUMINUM RACK SCREWS.
3. SPACING OF SCREWS IN A/C HOUSING SHALL BE A MINIMUM OF 1 IN.
4. STAINLESS STEEL SCREWS MAY BE USED WHERE REQUIRED BY GOVERNING AGENCY

GENERAL NOTES:

1. DESIGN CALCULATIONS WERE BASED ON THE FLORIDA BUILDING CODE 2007 WITH 2009 AMENDMENTS AND ASCE 7-05 CH. 16 FOR WIND LOADS AND VELOCITIES OF 146 MPH AND 155 MPH. AN IMPORTANCE FACTOR OF I=1 AND EXPOSURE C AS CRITICAL WERE USED IN THE DESIGN.
2. A/C UNIT MAXIMUM SIZE: 4 FT x 4 FT x 4FT. MINIMUM WEIGHT OF 150 LBS.
3. ALL SCREWS USED TO ATTACH CLIP SHALL BE GALVANIZED A307, SELF DRILLING WITH A MINIMUM HEAD DIAMETER OF 0.3125 IN. SCREWS SHALL BE DRILLED TIGHT, NOT OVER TIGHTENED.
4. TAPCONS USED TO ATTACH CLIP TO CONCRETE SHALL BE APPROVED WITH A RATED TENSILE STRENGTH OF 460 LBS WITH A MINIMUM EMBEDMENT OF 1 3/4 IN, MINIMUM EDGE DISTANCE OF 2.5", AND MINIMUM CENTER TO CENTER DISTANCE OF 3".
5. WHEN UNIT IS SUPPORTED BY WOOD USE #10 WOOD SCREWS WITH A MINIMUM 1 1/2 IN EMBEDMENT
6. SCREWS AT THE BOTTOM OF CLIP ATTACHMENT TO SUPPORTING STRUCTURE REQUIRE WASHERS OF 14 GA. STEEL MINIMUM WITH A YIELD STRENGTH OF 33 KSI.
7. CLIPS SHALL BE MANUFACTURED OUT OF MINIMUM 33 KSI STEEL THAT IS G90 GALVANIZED OR STAINLESS STEEL.
8. UNIT SIZES MAY INCREASE TO 6 FT x 6 FT x 6 FT AND REQUIRE TWO (2) CLIPS AT CORNERS AND MAY NOT BE HIGHER THAN 15 FT FROM GRADE.
9. #12 GALV. SELF DRILLING SCREWS MAY BE USED ON UNITS WHICH ARE INSTALLED NO HIGHER THAN 40 FT FROM GRADE FOR WIND VELOCITY ZONES ARE 146 MPH OR LESS.
10. INSTALLATION ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH ANCHOR MANUFACTURER'S INSTALLATION INSTRUCTIONS, AND ANCHORS SHALL NOT BE USED IN SUBSTRATES WITH STRENGTHS LESS THAN THE MINIMUM STRENGTH SPECIFIED BY THE ANCHOR MANUFACTURER.
11. INSTALLATION ANCHOR CAPACITIES FOR PRODUCTS HEREIN ARE BASED ON SUBSTRATE MATERIALS WITH THE FOLLOWING PROPERTIES:
    A. WOOD - MINIMUM SPECIFIC GRAVITY OF 0.55.
    B. CONCRETE -MINIMUM COMPRESSIVE STRENGTH OF 2700 PSI.
    C. ALUMINUM- MINIMUM 6061-T6 ALLOY (MINIMUM WALL THICKNESS OF 0.125")
    D. STEEL - MINIMUM YIELD STRENGTH OF 33 KSI. MINIMUM WALL THICKNESS OF 33 MILS.
12. CLIPS CAN ALSO BE SUPPLIED IN A POWDER-COATED FINISH
13. INSTALLATION ANCHORS AND ASSOCIATED HARDWARE MUST BE MADE OF CORROSION RESISTANT MATERIAL OR HAVE A CORROSION RESISTANT COATING. DISSIMILAR MATERIALS MUST BE SEPARATED OR COATED IN ACCORDANCE WITH FBC SECTION 2003.8.4.

BMP INTERNATIONAL, INC.

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TITLE: A/C HOLD DOWN CLIP INSTALLATION & GENERAL NOTES

PREPARED BY:
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REVISIONS

NO.	DESCRIPTION	BY	DATE

DATE: 06.30.10
DWN BY: JLA
CHK BY: KSD
SCALE: NTS
DWG #: BMP003
SHEET: 2 OF 2

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection ☐ Mon ☐ Tue ☐ Wed ☒ Thur ☐ Fri 5/15-14 Page ___ of ___

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10861	[redacted]	Window		844-0203
	2 Margueretta Dr.	Clean Out	PASS	CLOSE
	Lee's			INSPECTOR
10830	Ledon	Window		772 708 2323
	2 Knowles Rd.	Inspection Rough	PASS	
		& Dry-in		INSPECTOR
10778	NEHME	GRADE BEAM		
	44 S. Sewalls Point Rd	U.G. ELECT	PASS	
	OCEANFRONT BLDG			INSPECTOR
10842	ROSEMAN	ROOF		
	5 RIO VISTA DR	DRY-IN	PASS	
				INSPECTOR
10753	MASSETT	POOL ENC	FAIL	NOT PER PLANS
	8 RIO VISTA	FINAL		NEED TIE-IN SURVEY
	KS INDUS			INSPECTOR
10819	MALONE	DOOR		
	145. VIA LUCINDA	FINAL	PASS	CLOSE
	SPS			INSPECTOR
✓	CALL REAL ESTATE	MOW GRASS	ADAM BROWN	
	35 N. SEWALLS	CALLED	287 7676	
				INSPECTOR

TREE

REMOVAL, REPLACEMENT, RELOCATE

TOWN OF ~~SEWALL'S~~ POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

314

Permit # 3778

Date Issued 4-17-95

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

Owner John + Carolyn DelPrete Address _____ Phone 334-0237

Contractor owner/builder Address _____ Phone _____

Number of trees to be removed(list kinds of trees) 3 pinetrees

Number of trees to be relocated within 30 days(no fee)(list kinds of trees):

not applicable

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

3

Permit Fee $ 45.00 ($25.00 - first tree plus $10.00 - each additional tree - not to exceed $100.00.

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant Carolyn DelPrete Date submitted 4-19-95

Approved by Building Inspector _____ Date _____

Approved by Building Commissioner _____ Date _____

Completed _____
Date Checked by

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

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