

4 Marguerita Drive

6670

FENCE & LANDFILL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/6/04 BUILDING PERMIT NO. 6670
 Building to be erected for ELDER Type of Permit FENCE + LANDSCAPE
 Applied for by O/B (Contractor) Building Fee 30.00
 Subdivision MARGUERITA Lot 11 Block _____ Radon Fee _____
 Address 4 MARGUERITA DRIVE Impact Fee _____
 Type of structure SFR A/C Fee _____
 Electrical Fee _____
 Plumbing Fee _____
 Roofing Fee _____
 Parcel Control Number: _____
1338410110000011010000
 Amount Paid 30.00 Check # 1010 Cash _____ Other Fees (_____)
 Total Construction Cost \$ 210.00 TOTAL Fees 30.00

Signed [Signature] Applicant
 Signed [Signature] Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED
APR 05 2004

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: ROBERT & ELYSSE FLOER Phone (Day) 287-2600 (Fax) 287-0115

Job Site Address: 4 MARGUERITA DR. City: SEWALLS Pt State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) LOT 11, MARGUERITA Parcel Number: _____

Owner Address (if different): PLAT BOOK 10, Pg 3 City: _____ State: _____ Zip: _____

Description of Work To Be Done: INSTALL 4' GALVAN CHAIN LINK FENCE & LANDSCAPE FILL

WILL OWNER BE THE CONTRACTOR?: Yes No (If no, fill out the Contractor & Subcontractor sections below)

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

Street: N/A City: _____ State: _____ Zip: _____

State Registration Number: _____ State Certification Number: _____ Martin County License Number: _____

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 210 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: N/A State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Phone Number: _____

Street: N/A City: _____ State: _____ Zip: _____

ENGINEER _____ Phone Number: _____

Street: N/A City: _____ State: _____ Zip: _____

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

Carpport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required)
[Signature]

CONTRACTOR SIGNATURE (required)

State of Florida, County of: MARTIN

On State of Florida, County of: _____

This the 5th day of April 2004

This the _____ day of _____ 2004

by Robert J. Elder III who is personally

by _____ who is personally

known to me or produced _____

known to me or produced _____

as identification. Donned. Wake

As identification. _____

Notary Public

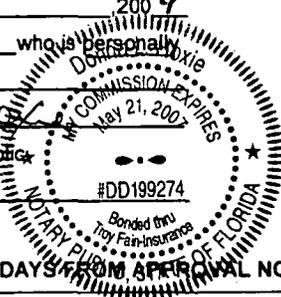
Notary Public

My Commission Expires: _____

My Commission Expires: _____

Seal

Seal



TOWN OF SEWALL'S POINT

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

TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT

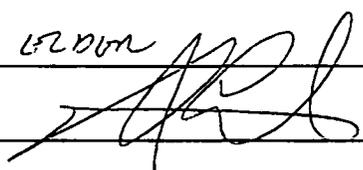
(To be submitted if permit is to be pulled by Owner/Builder)

DISCLOSURE STATEMENT

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

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

Name: ROBERT BLOOM Date: 4/5/04

Signature: 

Address: 3 WORTH COURT

City & State: SEWALL'S POINT FL 34996

Permit No. _____

6772

SFR

TOWN OF SEWALL'S POINT

Date 6/1/04

BUILDING PERMIT NO. 6772

Building to be erected for ELDER

Type of Permit SFR

Applied for by O/B

$\$546,000 \times 9.60/1000 =$
(Contractor) Building Fee 5241.60

Subdivision MARGUENITA Lot 11 Block _____

Radon Fee 73.28

Address 4 MARGUENITA DRIVE

Impact Fee 4598.20

Type of structure *1338410110000011010000

A/C Fee 120.00

Parcel Control Number:

Electrical Fee 120.00

*SFR

Plumbing Fee 120.00

Amount Paid 12538.68 Check # 1053 Cash _____

Roofing Fee 120.00
10% PLAN REVIEW 572.16
Other Fees (25% O/B) 1573.44

Total Construction Cost \$ 546,000.00

TOTAL Fees 12,538.68

Signed _____
Applicant

Signed Gene Simmons (CRS)
Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL

- ELECTRICAL+A/C
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL

- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

- UNDERGROUND PLUMBING _____
- UNDERGROUND MECHANICAL _____
- STEMWALL FOOTING _____
- SLAB _____
- ROOF SHEATHING _____
- TRUSS ENG/WINDOW/DOOR BUCKS _____
- ROOF TIN TAG/METAL _____
- PLUMBING ROUGH-IN _____
- MECHANICAL ROUGH-IN _____
- FRAMING _____
- FINAL PLUMBING _____
- FINAL MECHANICAL _____
- FINAL ROOF _____

- UNDERGROUND GAS _____
- UNDERGROUND ELECTRICAL _____
- FOOTING _____
- TIE BEAM/COLUMNS _____
- WALL SHEATHING _____
- LATH _____
- ROOF-IN-PROGRESS _____
- ELECTRICAL ROUGH-IN _____
- GAS ROUGH-IN _____
- EARLY POWER RELEASE _____
- FINAL ELECTRICAL _____
- FINAL GAS _____
- BUILDING FINAL _____

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

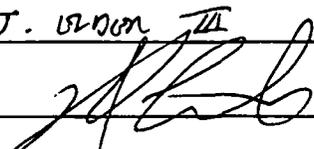
TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

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

Name: ROBERT J. BRIDON III Date: 4/29/04

Signature: 

Address: 3 WORTH COURT

City & State: SEWALLS POINT, FL 34996

Permit No. _____

RENEWAL 786.72/mo x 1mo = \$786.72 good thru 7/1/05 pd 6/10/05 #1044C

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 6/1/04

BUILDING PERMIT NO. 6772

Building to be erected for ELDER

Type of Permit SFR

Applied for by O/B

$\$546,000 \times 9.60/1000 =$
(Contractor) Building Fee 5241.60

Subdivision MARGUENTA Lot 11 Block _____

Radon Fee 73.28

Address 4 MARGUENTA DRIVE

Impact Fee 4598.20

Use of structure *1338410110000011010000

A/C Fee 120.00

Electrical Fee 120.00

Parcel Control Number:

Plumbing Fee 120.00

*SFR

Roofing Fee 120.00

Amount Paid 12538.68 Check # 1053 Cash _____

10% PLAN REVIEW 572.16
Other Fees (25% O/B) 1573.44

Estimated Construction Cost \$ 546,000.00

TOTAL Fees 12,538.68

Signed [Signature]

Applicant

Signed Gene Simmons (GOS)

Town Building Official

RENEWAL: 786.72/mo x 1mo = \$786.72 good thru 7/1/05 pd 6/10/05 #1044
 RENEWAL: 786.72/mo x 3 mo = \$2360.16 good thru 10/1/05 pd 9/13/05 #144
 RENEWAL: 786.72/mo x 2 mo = \$1573.44 good thru 12/1/05 pd 10/5/05 #106
 RENEWAL: 786.72/mo x 2 mo = \$1573.44 good thru 2/1/05 pd 12/7/05 #154
 RENEWAL: 786.72/mo x 2 mo = \$1573.44 good thru 4/1/05 pd 3/10/05 #1194

MASTER PERMIT NO.

TOWN OF SEWALL'S POINT

Date 6/1/04

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Type of Permit SFR

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$\$546,000 \times 9.60/1000 =$
 (Contractor) Building Fee 5241.60

Subdivision MARGUERITA Lot 11 Block _____

Radon Fee 73.28

Address 4 MARGUERITA DRIVE

Impact Fee 4598.20

Type of structure *1338410110000011010000

AC Fee 120.00

Parcel Control Number:

Electrical Fee 120.00

* SFR

Plumbing Fee 120.00

Amount Paid 12538.68 Check # 1053 Cash _____

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 10% PLAN REVIEW 572.16

Total Construction Cost \$ 546,000.00

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Signed _____

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Signed Gene Simmons (ARB)

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 Total Construction Cost \$ 546,000.00 TOTAL Fees 12,538.68
 Signed [Signature] Applicant Signed Gene Simmons (R/S) Town Building Official

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MASTER PERMIT NO.

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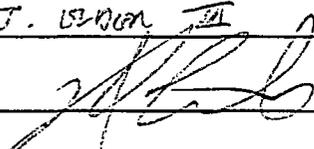
TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

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

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

Name: ROBERT J. BROWN III Date: 4/29/04
Signature: 
Address: 3 WORTH COURT
City & State: SEWALLS POINT FL 34996
Permit No. _____

TOWN OF SEWALL'S POINT

E. DANIEL MORRIS
Mayor Town Manager

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

DON OSTEEN
Commissioner

NEIL SUBIN
Commissioner



ROBERT L. KELLOGG
Town Manager

JOAN H. BARROW
Town Clerk/Treasurer

Chief of Police

JOHN ADAMS
Building Official

December 4, 2006

Mr. Robert Elder III
4 Marguerita Drive
Sewall's Point, FL. 34996

RE: Building Permit # 6772

Dear Mr. Elder;

In response to your correspondence of November 16, 2006 I wish to advise you of the following information. 1) On February 14, 2004 the Town Commission adopted Resolution # 610, which established a 25% surcharge for Owner/ Builders(copy attached). 2) Your fees were based on the total permit fees as outlined in Res. #610. 3) On November 28, 2006 the Town Commission rescinded the 25 % owner/ builder surcharge. 4) I am refunding the overage you paid on your permit in the amount of \$518.40. This refund is based on the difference between the final building permit fee paid based on an assessed value of \$577,300.00 and your owners affidavit of building cost of \$523.311.21.

5) Finally, I am unable to refund any additional permit fees paid by you as it is outside the realm of my authority to make sure refund based on the fee schedule in place at the time of your construction project. I have forwarded a copy of your correspondence on to the Town Commission. You may wish to address the Commission at one of there meeting regarding your request. Please contact me if you require any additional information.

Sincerely,

Robert Kellogg
Town Manager



One South Sewall's Point Road, Sewall's Point, Florida 34996

Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: clerk@sewallspoint.martin.fl.us

Police Department (772) 781-3378 • Fax (772) 286-7669 • E-Mail: Chief@sewallspoint.martin.fl.us

TOWN OF SEWALL'S POINT

E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

DON OSTEEN
Commissioner

NEIL SUBIN
Commissioner



ROBERT L. KELLOGG
Town Manager

JOAN H. BARROW
Town Clerk/Treasurer

Chief of Police

JOHN ADAMS
Building Official

MEMO

TO: Joan Barrow, Clerk

FROM: Robert Kellogg, Town Manager

A handwritten signature in black ink, appearing to be 'RK' with a stylized flourish.

Please issue a refund check in the amount of \$518.40 to Robert Elder III at 4 Marguerita Drive, Sewall's Point, FL. 34996. This refund is a result of an overpayment of building permit fee paid during the construction of his home. (see attached memo from John Adams)



One South Sewall's Point Road, Sewall's Point, Florida 34996

Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: clerk@sewallspoint.martin.fl.us

Police Department (772) 781-3378 • Fax (772) 286-7669 • E-Mail: Chief@sewallspoint.martin.fl.us

Robert Kellogg, Town Manager

From: "John Adams, Building Official" <jadams@sewallspoint.martin.fl.us>
To: "Bob Kellogg" <manager@sewallspoint.martin.fl.us>
Sent: Monday, December 04, 2006 2:33 PM
Subject: Elder permit fees

Job,

The Elder permit was originally estimated at \$546,000 construction value at the time of permitting on April 29, 2006. Mr. Elder submitted an Owner's affidavit of Building Costs dated March 27, 2006 indicating a \$523,311.21 value.

For some reason the final building fees were based on a value of \$577,300.00 (different than the original estimate). I can find no evidence in the file to justify the increase of the figure to this amount, only an entry on the permit records in our file.

It would seem logical that if the town, at that time, was asking for a sworn affidavit of building costs, and the owner submitted an affidavit indicating a lesser value upon completion of construction, the owner would be entitled to a refund of a portion of the permit fee.

In this case, the difference between the value assessed by the town and the owner's affidavit is approximately \$54,000.00. The permit fee is based on \$9.60 per \$1,000.00 of value, so I feel that under the circumstances, Mr. Elder is entitled to a \$518.40 refund.

John

OWNER'S AFFIDAVIT OF BUILDING COSTS

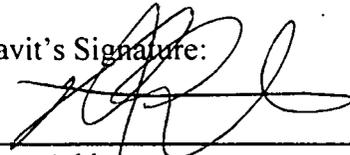
(To be submitted at time of final inspection for Certificate of Occupancy)

**STATE OF FLORIDA
MARTIN COUNTY**

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

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
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 \$ 523,311.21.
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.

Affidavit's Signature:

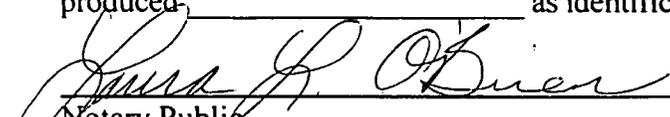


Property Address:

4 MARGUERITA DRIVE

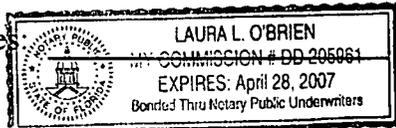
STUNN FL 34996

SWORN TO and subscribed before me this 27th day of March, 2006, by Robert Elder, who is personally known to me or produced _____ as identification.


Notary Public

My commission expires _____

(Notary Seal)



November 16, 2006

Robert J. Elder III
4 Marguerita Drive
Sewall's Point, Florida 34996
(772) 287-2600

Robert L. Kellogg, Town Manager
John Adams, Building Official
Town of Sewall's Point
One South Sewall's Point Road
Sewall's Point, FL 34996

Re: Building Permit No. 6772

Dear Sir:

In March of this year, my wife and I completed the construction of our home on 4 Marguerita Drive. ~~On June 1, 2004, the Sewall's Point Building Department issued permit number 6772 for the construction of our home.~~ A copy of the permit is attached hereto. I applied for and received an ~~owner builder's permit and completed the construction in~~ March of this year. I am writing in regards to the additional "owner builder" fee that I was charged on the initial permit and on subsequent renewals and the excess fee prior to the C.O.

The Building Department permit assessed a building fee, radon fee, impact fee, and other small fees as part of the permit, in addition to a 10% plan review fee and a 25% ~~owner builder~~ fee. The owner-builder fee appears to have been calculated at 25% of the combined building, a/c, electrical, plumbing, roofing and plan review fee, and resulted in an ~~Excess charge of \$1,573.44 at the time of initial permitting.~~ Due to three hurricanes, we did not complete construction within one year and subsequently applied for and received numerous extensions. The additional owner-builder fee was collected for these permit extensions totaled an additional \$1,573.44.

I believe the owner-builder fee is unconstitutional and was imposed in violation of law. According to Fla. Stat. § 553.80(7), local governing bodies may provide a schedule of reasonable fees for enforcement of the Florida Building Code. "These fees . . . shall be used solely for carrying out the local government's responsibilities in enforcing the Florida Building Code. . . The basis for a fee structure for allowable activities shall relate to the level of service provided by the local government. Fees charged shall be consistently applied." Pursuant to Section 50-102 of the Town of Sewall's Point Municipal Code, all fees authorized under Fla. Stat. § 553.80 for building permitting are required to be outlined by resolution, and can include the types of fees enumerated in Section 50-103. ~~An owner-builder fee is not specifically authorized by municipal code and does not appear to have been adopted by ordinance or resolution of the governing body for Sewall's Point.~~ Instead, it was an unauthorized fee charged by the previous building official, Gene Simmons,

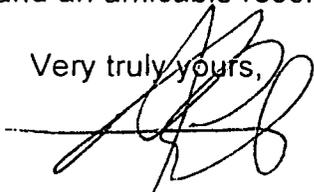
without the Town Commission's approval. At the time, I was told to pay it or hire a contractor.

Not only is the owner-builder fee unconstitutional where it was enacted without lawful authority, but it was imposed upon us without any explanation or justification as to why owner-builders should be subject to such a surcharge except for the statement that Gene Simmons did not like owner-builders. As such, this fee violates § 553.80 of the Florida Statutes, which requires that the fees collected by local governing bodies in order to enforce the Florida Building Code must relate to the service for which they are collected. Courts have found that the only purposes for which a city may impose fees is to offset the necessary expense of regulation, and none can be shown with respect to the imposition of a 25% surcharge on owner-builders. Owner-builders are already penalized for delays in their construction projects by fees imposed for repeated inspections, and for renewal of expired permits. There is no rational relationship between the unlawful fees imposed on owner-builders and any increased cost to the Town of Sewall's Point. The discriminatory treatment of owner-builders has occurred without any stated purpose other than general revenue, and therefore is not constitutional.

At the end of construction, the Building Department charged an additional fee of \$300.48 that was required to be paid before the issuance of the C.O. Despite my affidavit of the actual cost of construction, Gene Simmons calculated his own cost of construction and charged an additional fee - when in fact a refund was due. The original permit was based on the estimated construction cost of \$546,000.00. The actual construction cost was approximately \$524,000.00. I met with Laura and Gene to discuss a refund, and was told Gene Simmons "always charges a little more" at the end despite what the actual cost was and no one ever gets a refund. I was told that "that was the way it was," and I needed to pay it before I would receive my C.O. Since I was paying over \$800 a month in extension fees, I had no choice but to pay under protest. This fee was arbitrarily and improper.

I hereby request payment in th amount of \$3,447.36, representing the owner-builder surcharges and the extortionary additional fee. Once you have had an opportunity to review this correspondence, please contact me to discuss this matter in greater detail. I look forward to your prompt response and an amicable resolution to this matter.

Very truly yours,



Robert J. Elder III

Enc.

RENEWAL: 786.72/mo x 1 mo = \$786.72 good thru 7/1/05 pd 6/10/05 #1044
 RENEWAL: 786.72/mo x 3 mo = \$2360.16 good thru 10/1/05 pd 9/13/05 #144
 RENEWAL: 786.72/mo x 2 mo = \$1573.44 good thru 12/1/05 pd 10/5/05 #106
 RENEWAL: 786.72/mo x 2 mo = \$1573.44 good thru 2/1/05 pd 12/7/05 #154
 RENEWAL: 786.72/mo x 2 mo = \$1573.44 good thru 4/1/05 pd 3/17/06 #1194

TOWN OF SEWALL'S POINT
MASTER PERMIT NO.

Date 6/1/04

BUILDING PERMIT NO. 6772.

Building to be erected for ELDER Type of Permit SFR

Applied for by O/B (Contractor) Building Fee \$546,000 x 9.60/1000 = 5241.60

Subdivision MARGUERITA Lot 11 Block _____ Radon Fee 73.28

Address 4 MARGUERITA DRIVE Impact Fee 4598.20

Type of structure *1338410110000011010000 AC Fee 120.00

FINAL BLDG FEES: 577,300

546,000
 $31,300 \times 9.60/1000 = \300.48

Electrical Fee 120.00

Parcel Control Number:

* SFR

PAID 3/31/06 CL#1068

Plumbing Fee 120.00

Roofing Fee 120.00

Amount Paid 12538.68 Check # 1053 Cash _____

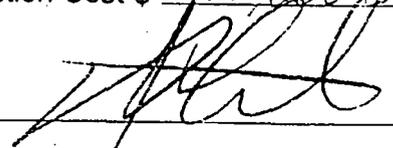
10% PLAN REVIEW 572.16

Other Fees (25% 20/13) 1573.44

Total Construction Cost \$ 546,000.00

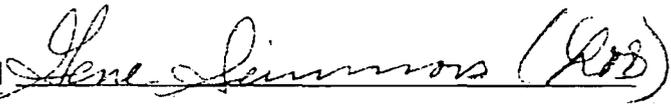
TOTAL Fees 12,538.68

Signed _____



Applicant

Signed _____



Town Building Official

RECEIVED

APR 10 2004

Permit Number:

6772

Town of Sewall's Point
BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: ROBERT & BEYSSIE BROWN Phone (Day) 287-2600 (Fax) 287-0115

Job Site Address: 4 MARGUERITA DR. City: Sewall's Point State: FL Zip: 34996

Legal Description of Property: LOT 11 MARGUERITA Parcel Number: 13-38-41-011-000-00110-1

Owner Address (if different): PLAT BOOK 10, Pg 3 3 WORTH COURT City: Sewall's Point State: FL Zip: 34996

Description of Work To Be Done: NEW HOME CONSTRUCTION

WILL OWNER BE THE CONTRACTOR?: Yes No (If no, fill out the Contractor & Subcontractor sections below)

CONTRACTOR/Company: N/A Phone: Fax:

Street: City: State: Zip:

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

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 546,000.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: OWNER / UNLICENSED State: License Number:

Mechanical: OWNER / UNLICENSED State: License Number:

Plumbing: OWNER / UNLICENSED State: License Number:

Roofing: PACIFIC ROOFING State: FL License Number: CCC056792

ARCHITECT DAN BRADON BRADON & BRADON AIA, PA Phone Number: 287-8258

Street: 417 COCONUT AVE City: STUART State: FL Zip: 34996

ENGINEER Phone Number:

Street: City: State: Zip:

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 4218 Garage: 2088 Covered Patios: 1022 Screened Porch:

Carpport: Total Under Roof 7328 Wood Deck: Accessory Building:

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

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

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

OWNER OR AGENT SIGNATURE (required)

CONTRACTOR SIGNATURE (required)

State of Florida, County of: Martin

On State of Florida, County of:

This the 29th day of April, 2004

This the day of 200

by Robert J. Elder who is personally

by who is personally

known to me or produced

known to me or produced

as identification. Donna L. Hoxie

As identification.

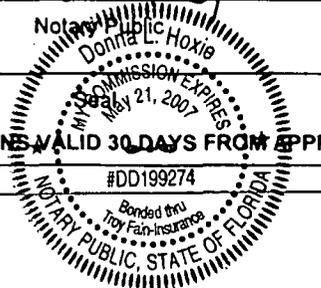
Notary Public

My Commission Expires:

My Commission Expires:

Seal

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



RENEWAL: 786.72/mo x 1mo = \$786.72 good thru 7/1/05 pd 6/10/05 #1044
 RENEWAL: 786.72/mo x 3 mo = \$2360.16 good thru 10/1/05 pd 9/13/05 #144
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MASTER PERMIT NO.

TOWN OF SEWALL'S POINT

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dress 4 MARGUERITA DRIVE

Impact Fee 4598.20

ie of structure *1338410110000011010000

A/C Fee 120.00

~~FINAL BLDG FEES \$77,300.00~~
~~546,000.00~~

Electrical Fee 120.00

cel Control Number:

~~\$300 x 9.60/1000 = \$300.48~~
~~PAID 2/31/06 CC #1068~~

Plumbing Fee 120.00

* SFR

Roofing Fee 120.00

ount Paid 12538.68 Check # 1053 Cash _____

10% PLAN REVIEW 572.16
 Other Fees (25% 20/13) 1573.14

al Construction Cost \$ 546,000.00

TOTAL Fees 12,538.68

ned [Signature]
 Applicant

Signed [Signature] (GWS)
 Town Building Official

Bob
 \$ DONT SEE WHERE
 THEY CAME UP WITH
 THIS #

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

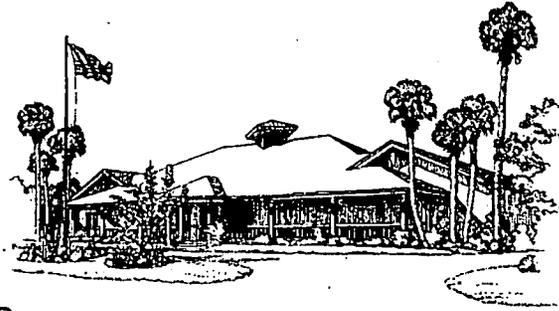
E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

NEIL SUBIN
Commissioner

DON OSTEEN
Commissioner



ROBERT KELLOGG
Town Manager

JOAN H. BARROW
Town Clerk

Chief of Police

JOHN R. ADAMS
Building Official

Bob -

VALUE BASED ON CURRENT =

4218 # AF @ 104.65 = 441,413.70

3100 # Non AF @ 48.90 = 151,590.00

TOTAL VALUE = 593,000

IMPORTANT NOTICE

CONSTRUCTION VALUE DETERMINATION METHOD

NOVEMBER 2, 2006

THE BUILDING DEPARTMENT COLLECTS PERMIT FEES BASED ON DECLARED CONSTRUCTION VALUE. IN ORDER TO STANDARDIZE THESE VALUES, THE METHOD USED WILL BE AN AVERAGE CALCULATION OF THE INTERNATIONAL CODE COUNCIL GUIDELINES EFFECTIVE SEPTEMBER 5, 2006. ANY UPDATES TO THIS METHOD WILL BE BASED ON FUTURE VERSIONS OF THE CODE AND THESE GUIDELINES.

SINCE THESE CALCULATIONS ARE BASED ON THE NINE CONSTRUCTION TYPES FOR RESIDENTIAL AND COMMERCIAL BUILDINGS AND THEIR OCCUPANCIES, IT IS NECESSARY FOR THE BUILDING DEPARTMENT TO STREAMLINE THIS PROCESS FOR RESIDENTIAL APPLICATIONS. COMMERCIAL APPLICATIONS HOWEVER, WILL NOT BE AVERAGED AND BASED ON ACTUAL CONSTRUCTION TYPES AND OCCUPANCY.

USING THE AVERAGE OF THE NINE CONSTRUCTION TYPE VALUES, ALL RESIDENTIAL PERMIT FEES ARE TO BE BASED ON THE FOLLOWING:

1. SINGLE FAMILY NEW CONSTRUCTION VALUE (AIR CONDITIONED SPACE) \$104.65/SQ. FT.
2. SINGLE FAMILY GARAGE, PORCHS, ETC. (UNCONDITIONED SPACE) \$48.90/SQ. FT.

ANY APPLICATIONS NOT COMPLYING WITH THE ABOVE FORMULA MUST BE ACCOMPANIED BY VERIFIABLE DATA TO JUSTIFY LOWER CONSTRUCTION VALUES. ALL OTHER APPLICATIONS WILL BE ADJUSTED BY THE BUILDING DEPARTMENT PRIOR TO PERMIT ISSUANCE.

THE INFORMATION USED FOR THE BASIS OF VALUE DETERMINATION IS AVAILABLE AT <http://www.iccsafe.org/cs/techservices>. A COPY OF THIS DOCUMENT IS ALSO AVAILABLE AT TOWN HALL.

JOHN R. ADAMS
BUILDING OFFICIAL



Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: clerk@sewallspoint.martin.fl.us
Building Department (772) 287-2455 • Fax (772) 220-4765 • E-Mail: buildoff@sewallspoint.martin.fl.us

This Instrument Prepared By /
Return To:

WILLIAM F. CRARY, II Esquire
CRARY, BUCHANAN, BOWDISH, BOVIE,
BERES, ELDER & THOMAS, CHARTERED
555 S.W. Colorado Avenue, Suite 1
Post Office Drawer 24
Stuart, Florida 34995-0024

INSTR # 1717337
OR BK 01851 PG 0364
RECORDED 12/23/2003 09:40:31 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
DEED DOC TAX 1,575.00
RECORDED BY T Copus (asst mgr)

WARRANTY DEED
(STATUTORY FORM - SECTION 689.02 F.S.)

THIS INDENTURE, Made this 18th day of Dec, 2003 Between Harold E Sundin and Karen Sundin, his wife grantor*, and Robert J. Elder III and Elysse A. Elder, his wife, 4 Emarita Way, Sewall's Point, Florida 34996 County of Martin, grantee*,

WITNESSETH, That said grantor, for and in consideration of the sum of TEN AND NO/100 (\$10.00) DOLLARS, and other valuable considerations, receipt whereof is hereby acknowledged, by these presents does grant, bargain, sell, alien, remise, release, convey and confirm unto the grantee, and grantee's heirs and assigns forever, all that certain land situate in Martin County, Florida, to-wit:

Lot 11, of MARGUERITA SUBDIVISION, according to the Plat thereof, recorded in Plat Book 10, page 3, of the Pubic Records of Martin County, Florida.

Subject to: restrictions, reservations, covenants, conditions, and easements of record; taxes for 2004 and the years subsequent thereto, special assessments and impact fees if any, all applicable laws, ordinances and governmental regulations, including without limitation, zoning and building codes and ordinances.

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

*"Grantor" and "grantee" are used for singular and plural, as context requires.

IN WITNESS WHEREOF, Grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Paul G. Christensen
Paul G. CHRISTENSEN, Witness
[PRINT NAME OF WITNESS]
Salvatore Marice Jr.
Salvatore Marice Jr., Witness
[PRINT NAME OF WITNESS]

Harold E. Sundin
Harold E. Sundin
Karen Sundin
Karen Sundin

STATE OF

COUNTY OF

The foregoing instrument was acknowledged before me this 18th day of December, 2003 by Harold E. Sundin and Karen Sundin, (PLEASE CHECK ONE OF THE FOLLOWING) who is personally known to me or who has produced _____ (TYPE OF IDENTIFICATION) as identification.

Constance S Haab
CONSTANCE S HAAB (Print Name)
NOTARY PUBLIC, State of New York
Commission Number: 4830996
My Commission Expires: APRIL 30, 2007

(SEAL)

CONSTANCE S. HAAB
NOTARY PUBLIC, State of New York
No. 4830996 Suffolk County
Term Expires April 30, 2007

This Instrument Prepared By /
Return To:

WILLIAM F. CRARY, II Esquire
CRARY, BUCHANAN, BOWDISH, BOVIE,
BERES, ELDER & THOMAS, CHARTERED
555 S.W. Colorado Avenue, Suite 1
Post Office Drawer 24
Stuart, Florida 34995-0024

INSTR # 1717337
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Paul G. Christensen
Paul G. CHRISTENSEN, Witness
[PRINT NAME OF WITNESS]

Salvatore Marini Jr.
Salvatore Marini Jr., Witness
[PRINT NAME OF WITNESS]

Harold E. Sundin
Harold E. Sundin

Karen Sundin
Karen Sundin

STATE OF

COUNTY OF

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Constance S Haab
CONSTANCE S HAAB (Print Name)
NOTARY PUBLIC, State of New York
Commission Number: 4830996
My Commission Expires: April 30, 2007

(SEAL)

CONSTANCE S. HAAB
NOTARY PUBLIC, State of New York
No. 4830996 Suffolk County
Term Expires April 30, 2007

Project Summary
UNIT ONE
ELDER RESIDENCE

Job:
 Date: 4/6/2004
 By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

Project Information

For: ELDER RESIDENCE
 SEWALLS POINT, FL

Notes:

Design Information

Weather: West Palm Beach, FL , US

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range **M**
 Relative humidity 50 %
 Moisture difference 56 gr/lb

Heating Summary

Building heat loss 29060 Btuh
 Ventilation air 74 cfm
 Ventilation air loss 2021 Btuh
 Design heat load 31080 Btuh

Infiltration

Method	Simplified	
Construction quality	Average	
Fireplaces	0	
	Heating	Cooling
Area (ft ²)	1720	1720
Volume (ft ³)	21995	21995
Air changes/hour	0.34	0.15
Equiv. AVF (cfm)	123	55

Heating Equipment Summary

Make n/a
 Trade
 n/a

Efficiency	100.0 EFF
Heating input	0 Btuh
Heating output	0 Btuh
Heating temp rise	0 °F
Actual heating fan	0 cfm
Heating air flow factor	0.000 cfm/Btuh

Space thermostat

Sensible Cooling Equipment Load Sizing

Structure 39655 Btuh
 Ventilation 1310 Btuh
 Design temperature swing 3.0 °F
 Use mfg. data y
 Rate/swing multiplier 1.00
 Total sens. equip. load 40965 Btuh

Latent Cooling Equipment Load Sizing

Internal gains 0 Btuh
 Ventilation 2809 Btuh
 Infiltration 2092 Btuh
 Total latent equip. load 5473 Btuh

Total equipment load 46438 Btuh
 Req. total capacity at 0.73 SHR 4.7 ton

Cooling Equipment Summary

Make Trane
 Trade E. XL 1400
 2TTX4060A
 TWE065E13

Efficiency	14.0 SEER
Sensible cooling	44200 Btuh
Latent cooling	16300 Btuh
Total cooling	60500 Btuh
Actual cooling fan	1800 cfm
Cooling air flow factor	0.045 cfm/Btuh

Load sensible heat ratio 88 %

Some field values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.

Project Summary
UNIT TWO
ELDER RESIDENCE

Job:
 Date: 4/6/2004
 By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

Project Information

For: ELDER RESIDENCE
 SEWALLS POINT, FL

Notes:

Design Information

Weather: West Palm Beach, FL , US

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range M
 Relative humidity 50 %
 Moisture difference 56 gr/lb

Heating Summary

Building heat loss 21430 Btuh
 Ventilation air 24 cfm
 Ventilation air loss 654 Btuh
 Design heat load 22084 Btuh

Infiltration

Method	Simplified	
Construction quality	Average	
Fireplaces	0	
	Heating	Cooling
Area (ft ²)	1647	1647
Volume (ft ³)	15477	15477
Air changes/hour	0.58	0.26
Equiv. AVF (cfm)	150	66

Heating Equipment Summary

Make n/a
 Trade n/a
 Efficiency 100.0 EFF
 Heating input 0 Btuh
 Heating output 0 Btuh
 Heating temp rise 0 °F
 Actual heating fan 0 cfm
 Heating air flow factor 0.000 cfm/Btuh
 Space thermostat

Sensible Cooling Equipment Load Sizing

Structure 28668 Btuh
 Ventilation 424 Btuh
 Design temperature swing 3.0 °F
 Use mfg. data Y
 Rate/swing multiplier 1.00
 Total sens. equip. load 29092 Btuh

Latent Cooling Equipment Load Sizing

Internal gains 600 Btuh
 Ventilation 910 Btuh
 Infiltration 2539 Btuh
 Total latent equip. load 4596 Btuh
 Total equipment load 33688 Btuh
 Req. total capacity at 0.75 SHR 3.2 ton

Cooling Equipment Summary

Make Trane
 Trade A0. XL 14i
 4TTX4042A1
 TWE040E13FB
 Efficiency 14.5 SEER
 Sensible cooling 33750 Btuh
 Latent cooling 11250 Btuh
 Total cooling 45000 Btuh
 Actual cooling fan 1425 cfm
 Cooling air flow factor 0.050 cfm/Btuh
 Load sensible heat ratio 86 %

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Project Summary
UNIT THREE
ELDER RESIDENCE

Job:
 Date: 4/6/2004
 By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

Project Information

For: ELDER RESIDENCE
 SEWALLS POINT, FL

Notes:

Design Information

Weather: West Palm Beach, FL , US

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range **M**
 Relative humidity 50 %
 Moisture difference 56 gr/lb

Heating Summary

Building heat loss 14975 Btuh
 Ventilation air 19 cfm
 Ventilation air loss 531 Btuh
 Design heat load 15506 Btuh

Infiltration

Method	Simplified	
Construction quality	Average	
Fireplaces	0	
	Heating	Cooling
Area (ft ²)	862	862
Volume (ft ³)	8103	8103
Air changes/hour	0.51	0.23
Equiv. AVF (cfm)	69	31

Heating Equipment Summary

Make n/a
 Trade n/a
 Efficiency 100.0 EFF
 Heating input 0 Btuh
 Heating output 0 Btuh
 Heating temp rise 0 °F
 Actual heating fan 0 cfm
 Heating air flow factor 0.000 cfm/Btuh
 Space thermostat

Sensible Cooling Equipment Load Sizing

Structure 16146 Btuh
 Ventilation 344 Btuh
 Design temperature swing 3.0 °F
 Use mfg. data **y**
 Rate/swing multiplier 1.00
 Total sens. equip. load 16490 Btuh

Latent Cooling Equipment Load Sizing

Internal gains 400 Btuh
 Ventilation 738 Btuh
 Infiltration 1172 Btuh
 Total latent equip. load 2631 Btuh
 Total equipment load 19122 Btuh
 Req. total capacity at 0.74 SHR 1.9 ton

Cooling Equipment Summary

Make Trane
 Trade A0. XL 14i
 4TTX4024A1
 4TEE3F31A
 Efficiency 13.7 SEER
 Sensible cooling 18100 Btuh
 Latent cooling 6500 Btuh
 Total cooling 24600 Btuh
 Actual cooling fan 800 cfm
 Cooling air flow factor 0.050 cfm/Btuh
 Load sensible heat ratio 86 %

Boldface values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



**BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION**

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

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
1070 Technology Drive
Nokomis, FL 34275

**PROJECTION WINDOWS 20
REPLACED W/VENTS.**

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein; and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series #740 Aluminum Projected Window

APPROVAL DOCUMENT: Drawing No. 7052-7, titled "Alum. Projected Window, impact", sheets 1 through 11 of 11, prepared by manufacturer, dated 2/24/03, with revision date 8/26/03, signed and sealed by Lucas Turner, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA consists of this page 1 as well as approval document mentioned above.

The submitted documentation was reviewed by **Theodore Berman, P.E.**

10/16/2003

NOA No 03-0514.10
Expiration Date: November 06, 2008
Approval Date: November 06, 2003
Page 1



MIAMI-DADE COUNTY
 BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

F.E.C.P. Corporation - ~~Cast-Crete Division~~
 P.O. Box 24567
 Tampa, Florida 33623

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: ~~"Cast-Crete" 8 inch High Strength Precast and Prestressed Concrete Lintels~~

APPROVAL DOCUMENT: Drawing No. FDS, titled "Cast-Crete 8" Lintel Fabrication Details", sheet 1 of 1, prepared by Craig Parrino, P.E., dated June 7, 1996, revision #2 dated January 28, 2003, and Drawing No. LT8, titled "Cast-Crete 8" Lintel Safe Load Tables", sheets 1 & 2 of 2, prepared by Craig Parrino, P.E., dated June 7, 1996, revision #5 dated March 24, 2003, all bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: ~~Large and Small Missile Impact~~

LABELING: Each lintel shall bear a permanent label with the manufacturer's name or logo and the Miami-Dade County logo..

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 01-0209.03 & consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Helmy A. Makar, P.E.



Helmy A. Makar
 08/07/03

NOA No 03-0605.05
 Expiration Date: 05/21/2006
 Approval Date: 08/07/2003
 Page 1



BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

F.E.C.P. Corporation - ~~Cast-Crete Division~~
 P.O. Box 24567
 Tampa, Florida 33623

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: "Cast-Crete" 8 inch High Strength Precast and Prestressed Concrete Lintels

APPROVAL DOCUMENT: Drawing No. FD8, titled "Cast-Crete 8" Lintel Fabrication Details", sheet 1 of 1, prepared by Craig Parrino, P.E., dated June 7, 1996, revision #2 dated January 28, 2003, and Drawing No. LT8, titled "Cast-Crete 8" Lintel Safe Load Tables", sheets 1 & 2 of 2, prepared by Craig Parrino, P.E., dated June 7, 1996, revision #5 dated March 24, 2003, all bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each lintel shall bear a permanent label with the manufacturer's name or logo and the Miami-Dade County logo..

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

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INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 01-0209.03 & consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Helmy A. Makar, P.E.



Helmy A. Makar
 08/07/03

NOA No 03-0605.05
 Expiration Date: 05/21/2006
 Approval Date: 08/07/2003
 Page 1



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Therma-Tru Corporation
1687 Woodlands Drive
Maumee, OH 43537

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

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

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

Your application for Notice of Acceptance (NOA) of:

"Fiber-Glass" Out-Swing Opaque Fiberglass Door

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

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

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

ACCEPTANCE NO: 01-100463

EXPIRES: 11/09/2006

Raul Rodriguez
Chief Product Control Division

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

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

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

APPROVED: 11/29/2001



BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
P.O. Box 1529
Nokomis, FL 34274

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series SWD-101 Outswing Aluminum French Door-Impact

APPROVAL DOCUMENT: Drawing No. 971, titled "French Door-X, XX", sheets 1 through 4 of 4, prepared, signed and sealed by Robert L.Clark, P.E., dated 4/13/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

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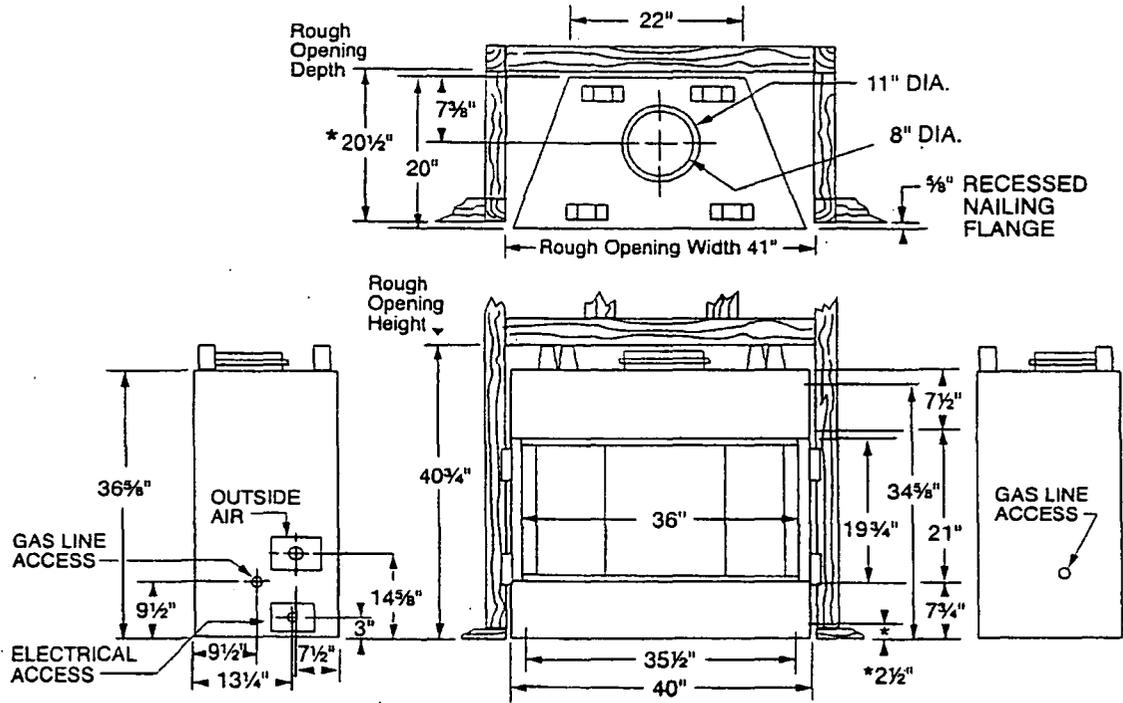
This NOA revises NOA # 01-0417.04 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Theodore Berman, P.E.



NOA No 02-0701.12
 Expiration Date: November 22, 2006
 Approval Date: July 12, 2002
 Page 1

FIREPLACE and CHIMNEY SPECIFICATIONS

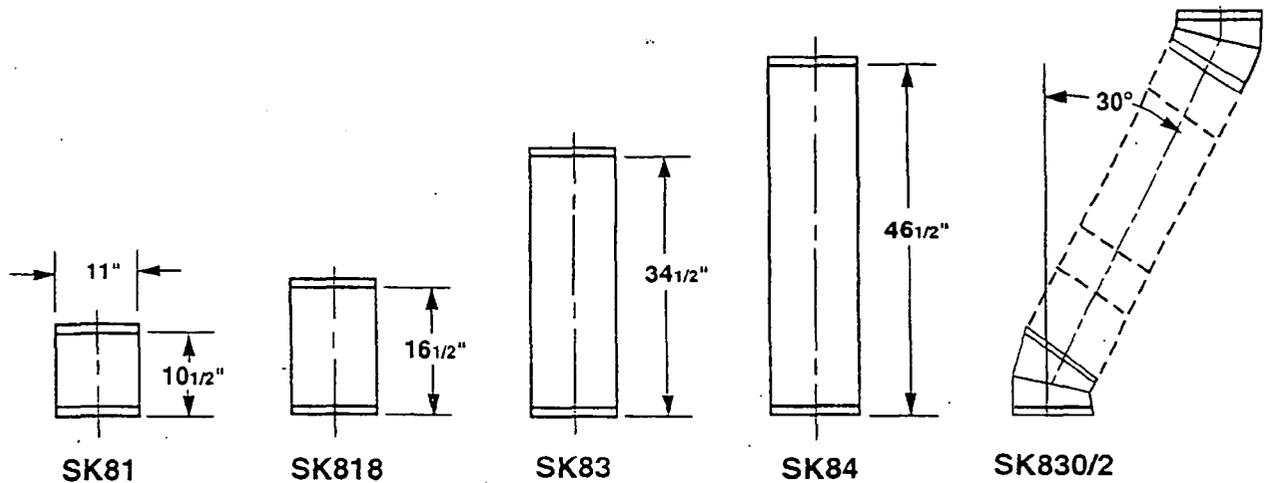
BR/BC36 SERIES WOODBURNING FIREPLACE



*If elbows are offset to the back of unit, chase depth will be 22 5/8"

NOTE: BR models have same framing dimensions as the BC models, but without louvres.

CHIMNEY SECTIONS and OFFSETTING ELBOWS



NOTE: THE INSTALLED LENGTH OF ANY CHIMNEY SECTION IS 1" LESS THAN ITS TOTAL LENGTH, EXCEPT FOR THE LAST SECTION INSTALLED.

FP800

AUTUMN MOON FIREPLACES
PHONE; 772-335-1457

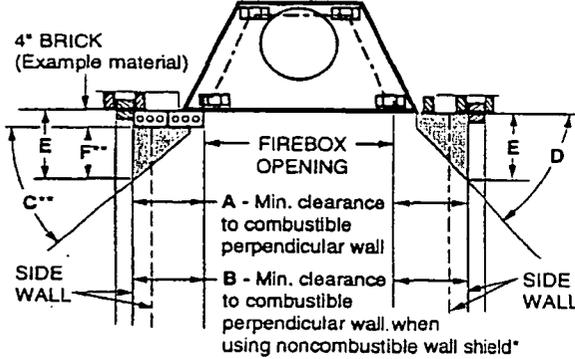
BR36-1

BR/BC-36

MINIMUM WALL CLEARANCES

WITH Noncombustible Surround Facing

WITHOUT Noncombustible Surround Facing



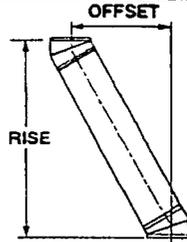
NOTE: Combustible material permitted within shaded area.

- Noncombustible wall shield requires 1" Majestic EH2416 insulation (minimum R Value = 1.85) between decorative noncombustible rigid covering and combustible wall. Minimum height and width is 40" x 40".
- Dimension/degree of angle will vary depending on thickness of noncombustible surround facing.

	A	B	C	D	E	F
BR/BC36	16"	12"	48"	41"	18"	14"

FP781

OFFSET ELBOW CHART



1'	1 1/2'	3'	4'	Chimney Support	Offset	Rise	1'	1 1/2'	3'	4'	Chimney Support	Offset	Rise
0	0	0	0	0	3"	11"	0	1	3	0	1	64 1/2"	117 1/2"
1	0	0	0	0	8 1/4"	20"	0	0	1	2	1	68 1/4"	124"
0	1	0	0	0	11 1/4"	25 1/4"	0	1	2	1	1	70 1/2"	128"
2	0	0	0	0	13 1/2"	29 1/4"	0	0	0	3	1	74 1/4"	134 1/2"
1	1	0	0	0	16 1/2"	34 1/4"	0	1	1	2	2	78"	140 3/4"
0	0	1	0	0	20 1/4"	40 3/4"	0	0	3	1	2	81"	146"
2	1	0	0	0	21 3/4"	43 1/2"	0	1	0	3	2	84"	151 1/4"
0	0	0	1	0	26 1/4"	51 1/4"	0	0	2	2	2	87"	156 1/2"
0	1	1	0	0	28 1/2"	55 1/4"	0	1	3	1	2	89 1/4"	160 1/4"
1	0	0	1	0	31 1/2"	60 1/4"	0	0	1	3	2	93"	166 3/4"
0	1	0	1	0	34 1/2"	65 1/2"	0	1	2	2	2	95 1/4"	170 3/4"
0	0	2	0	0	37 1/2"	70 3/4"	0	0	0	4	2	99 1/4"	177 3/4"
1	1	0	1	1	41 1/2"	77 3/4"	0	1	1	3	2	101 1/4"	181 3/4"
0	0	1	1	1	45"	83 3/4"	0	0	3	2	2	104 1/4"	186 1/4"
0	1	2	0	1	47 1/4"	87 1/2"	0	1	0	4	2	107 1/4"	191 1/2"
0	0	0	2	1	51"	94"	0	0	2	3	2	110 1/4"	196 3/4"
0	1	1	1	1	53 1/4"	98"	0	1	3	2	3	114"	205 1/4"
0	0	3	0	1	56 1/4"	103 1/4"	0	0	1	4	3	117 3/4"	209 3/4"
0	1	0	2	1	59 1/4"	108 1/2"	0	1	2	3	3	120"	213 1/2"
0	0	2	1	1	62 1/4"	113 1/2"	0	0	0	5	3	123 3/4"	220"

PRODUCT LISTING

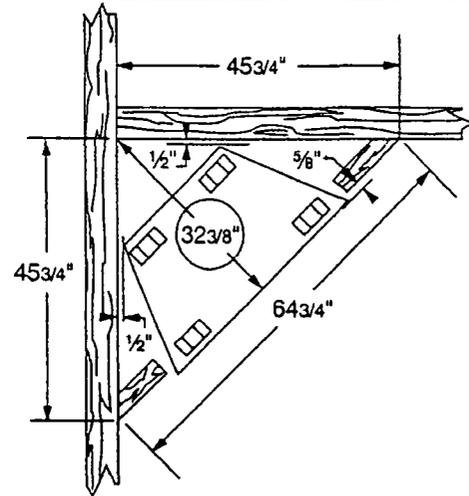
FIREPLACE/CHIMNEY:

- Underwriters' Laboratories Report No. MH6018
- International Council of Building Officials (ICBO) Report No. ER-5677
- Various city and state listings are available upon request.

INSULATION BOARD (MAJESTIC EH2416):

- Underwriters' Laboratories Report No. MH6018 Volume 2
- Thermal Conductivity ("K") is 0.458/IN.
- Total R-value is 1.09/IN.

MINIMUM CROSS-CORNER DIM.



FS101

CHIMNEY SECTION CHART

Height	Intermediate Sections				Height	Intermediate Sections			
	1'	1 1/2'	3'	4'		1'	1 1/2'	3'	4'
35 1/2"	0	0	1	0	209 1/2"	0	0	2	3
38 1/2"	2	1	0	0	214"	0	1	3	2
47 1/2"	0	0	0	1	221 1/2"	0	0	1	4
52"	0	1	1	0	226"	0	1	2	3
58"	1	0	0	1	233 1/2"	0	0	0	5
64"	0	1	0	1	338"	0	1	1	4
70"	0	0	2	0	244"	0	0	3	3
70 1/2"	1	1	0	1	250"	0	1	0	5
82"	0	0	1	1	256"	0	0	2	4
86 1/2"	0	1	0	0	259 1/2"	1	1	0	3
94"	0	0	0	2	268"	0	0	1	5
98 1/2"	0	1	1	1	272 1/2"	0	1	2	4
104 1/2"	0	0	3	0	280"	0	0	0	6
110 1/2"	0	1	0	2	284 1/2"	0	1	1	5
116 1/2"	0	0	2	1	290 1/2"	0	0	3	4
121"	0	1	3	0	296 1/2"	0	0	0	6
128 1/2"	0	0	1	2	302 1/2"	0	0	2	5
133"	0	1	2	1	307"	0	1	3	4
140 1/2"	0	0	0	3	314 1/2"	0	0	1	6
145"	0	1	1	2	319"	0	1	2	5
151"	0	0	3	1	326 1/2"	0	0	0	7
157"	0	1	0	3	331"	0	1	1	6
163"	0	0	2	2	337"	0	0	3	5
167 1/2"	0	1	3	1	343"	0	1	0	7
175"	0	0	1	3	349"	0	0	2	6
179 1/2"	0	1	2	2	353"	0	1	3	5
187"	0	0	0	4	361"	0	0	1	7
191 1/2"	0	1	1	3	365 1/2"	0	1	2	6
197 1/2"	0	0	3	2	373"	0	0	0	8
203 1/2"	0	1	0	4					

BR36-3



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

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

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

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Wayne Dalton Corporation (FL)
3395 Addison Drive
Pensacola, FL 32514

Your application for Notice of Acceptance (NOA) of:

Wayne Mark 8000 Garage Door

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

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

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

ACCEPTANCE NO.: 01-0813.05
EXPIRES: 02/07/2006

Raul Rodriguez
Chief Product Control Division

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

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

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

APPROVED: 02/07/2002





WINDLOAD SPECIFICATION 0400

APPROVED SIZES:

10'-0" MIN - 16'-0" MAX WIDTH x
8'-0" MAX HEIGHT 21" MAX. SECTION WIDTH

MODEL: 8000/8100
STYLE: RAISED PANEL WITH LITES
DESIGN PRESSURE: +34.40/-38.30 PSF
TEST PRESSURE: +51.60/-57.50 PSF

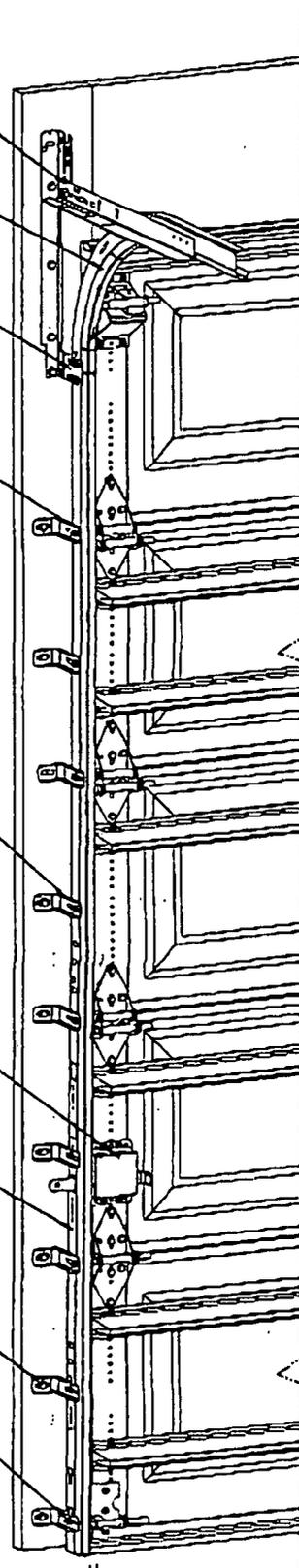
NOTES:

1. GLASS DISCLAIMER "NO CONCLUSIONS OF ANY KIND REGARDING THE ADEQUACY OR INADEQUACY OF THE GLASS IN THE TEST SPECIMEN MAY BE DRAWN FROM THE TEST." (1993 ASTM E330).
2. GLAZING OPTIONS - TOP OR INTERMEDIATE SECTION, .090 SSB GLASS WITH OPTIONAL INSERTS.
3. VINYL OR WOOD DOOR STOP MUST OVERLAP TOP AND BOTH ENDS OF PANELS MINIMUM 7/16" TO MEET NEGATIVE PRESSURES.
4. U-BAR TO HAVE A MINIMUM YIELD OF 80 KSI A653 G-40
5. TRACK TO HAVE A MINIMUM YIELD OF 33 KSI A653 G-40
6. OPTIONAL - .080" (MIN) ALUMINUM LOUVERS WITH HIGH IMPACT STYRENE FRAME MAY BE LOCATED IN THE END PANELS OF THE BOTTOM SECTION.
7. KEY LOCK OR SLIDE LOCK IS REQUIRED.
8. THE DESIGN OF THE SUPPORTING STRUCTURAL ELEMENTS SHALL BE THE RESPONSIBILITY OF THE PROFESSIONAL OF RECORD FOR THE BUILDING OR STRUCTURE AND IN ACCORDANCE WITH CURRENT BUILDING CODES FOR THE LOADS LISTED ON THIS DRAWING.

9. DOOR JAMB TO BE 2 X 6 STRUCTURAL GRADE LUMBER (MIN).

10. CONCRETE FLOOR TO BE 3-1/2" THICK AND 2500 PSI MINIMUM.

- 13 GA HORIZ ANGLE
- .067" HORIZ TRACK MINIMUM
- (4) 1/4-20x9/16" TRACK BOLT & (4) 1/4-20 HEX NUT
- (1) JB-US BRACKET LOCATED AT ROLLER LOCATIONS EXCEPT TOP BRACKET ROLLER (P/N 125139) (5) FOR 8' HIGH DOORS (4) FOR 7' HIGH DOORS
- (1) JB-US BRACKET LOCATED AT THE MIDDLE OF EACH SECTION EXCEPT TOP SECTION (4) FOR 8' HIGH DOORS (3) FOR 7' HIGH DOORS
- KEY LOCK OR SLIDE LOCK (EACH END) SLIDE LOCK SHOWN FOR CLARITY
- .067" VERT TRACK (P/N 141605 OR P/N 141333)
- 5/16x1-5/8" LAG SCREW AT EACH JB-US BRACKET
- 1/4-20x9/16" TRACK BOLT & 1/4-20 HEX NUT AT EACH JB-US BRACKET



1/2"

PART NO. 312735

Approved:

Mark F. Barrow
Mark F. Barrow, P.E.
3395 ADDISON DRIVE PENSACOLA, FL 32514
FLORIDA CERTIFICATION NO. 57389

Date: 2/10/04

OPTION CODE: 0400

REV: P

8000/8100 16'-0" x 8'-0"
DESIGN PRESSURE +34.40/-38.30 PSF

1 OF 4

MIAMI-DADE
BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

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

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Altusa "S" Clay Roof Tile

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA consists of pages 1 through 7.

The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 02-1115.03
Expiration Date: 12/16/07
Approval Date: 12/12/02
Page 1 of 7



**BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION**

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
P.O. Box 1529
Nokomis, FL 34274**

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series FD-101 Outswing Aluminum French Door w/ Sidelites - Impact

APPROVAL DOCUMENT: Drawing No. 972, titled "Aluminum French Door w/ Sidelites", sheets 1 through 8 of 8, prepared by manufacturer, dated 7-12-99 and last revised on 01-17-03, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises & renews NOA # 02-0702.01 and, consists of this page 1 as well as approval document mentioned above.

The submitted documentation was reviewed by Ishaq I. Chanda, P.E.



NOA No 02-3227.19

Expiration Date: February 15, 2003

Approval Date: February 13, 2003

Page 1



BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

MIAMI-DADE COUNTY, FLORIDA
 METRO-DADE FLAGLER BUILDING
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 MIAMI, FLORIDA 33130-1563
 (305) 375-2901 FAX (305) 375-2908

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
 P.O. Box 1529
 Nokomis, FL 34274

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series SWD-101 Outswing Aluminum French Door-Impact

APPROVAL DOCUMENT: Drawing No. 971, titled "French Door-X, XX", sheets 1 through 4 of 4, prepared, signed and sealed by Robert L. Clark, P.E., dated 4/13/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

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INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 01-0417.04 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Theodore Berman, P.E.



NOA No 02-0701-12
 Expiration Date: November 22, 2004
 Approval Date: July 12, 2002
 Page 1



BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
P.O. Box 1529
Nokomis, FL 34274

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series SWD-101 Outswing Aluminum French Door-Impact

APPROVAL DOCUMENT: Drawing No. 971, titled "French Door-X, XX", sheets 1 through 4 of 4, prepared, signed and sealed by Robert L.Clark, P.E., dated 4/13/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

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NOA No 02-5701.12

Expiration Date: November 23, 2006

Approval Date: July 12, 2002

Page 1



MIAMI-DADE
BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
P.O. Box 1529
Nokomis, FL 34274

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: 2" Heavy Wall Aluminum Tube Clipped Mullion

APPROVAL DOCUMENT: Drawing No. 6623, titled "2" Heavy Wall Mullion Arrangement Detail", sheets 1 through 5 of 5, prepared, signed and sealed by Robert L. Clark, P.E., dated 5/24/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

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INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 01-0323.03 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by **Theodore Berman, P.E.**



NOA No 02-0701.10
Expiration Date: June 28, 2006
Approval Date: July 12, 2002
Page 1



**BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION**

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
1070 Technology Drive
Nokomis, FL 34275**

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series "740" Aluminum Protected Window

APPROVAL DOCUMENT: Drawing No. 7052-7, titled "Alum. Projected Window, impact", sheets 1 through 11 of 11, prepared by manufacturer, dated 2/24/03, with revision date 8/26/03, signed and sealed by Lucas Turner, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

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INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA consists of this page 1 as well as approval document mentioned above.

The submitted documentation was reviewed by **Theodore Berman, P.E.**

10/16/2003 

NOA No 03-0514.10
Expiration Date: November 06, 2003
Approval Date: November 06, 2003
Page 1

ENGINEER'S NOTICE OF EVALUATION # TTF-262IF

Therma-Tru Corp.
108 Mutzfeld Road
Butler, IN 46721
Phone 260.868.5811 Facsimile 260.868.5190

DESCRIPTION OF UNIT

Model Designation: Fiber Classic/Smooth Star, Series Fiberglass Door (Opaque) Impact

Maximum Overall Nominal Size: up to 6'0 x 6'8 Usable Out-swing Configurations: X, XX

General Description: The head and jambs are wood measuring 4.5" x 1.25" with an extruded aluminum threshold. The door panels are 1.68" thick and consist of two SMC skins with a thickness of 0.065" for the Fiber Classic Series or the Smooth Star Series with a skin thickness of 0.070". Skins are glued to wood stiles and rails with a urethane core.

FBC Section 1707 Materials and Assembly Tests:

(1707.4.3 Exterior Door Assemblies; 1707.4.5 Mullions Door Assemblies)

Test	Description	Test Location	Date	Report No.	Certifying Engineer
ASTM E330	Uniform Static Air Pressure	ETC - Rochester, NY	July 14, 2001	ETC-01-741-10702.0	Wendell Haney, P. E. #54158
			June 22, 2001	ETC-01-741-11008.0	Joseph Dolden, P.E. #42929
TAS 202	Forced Entry	ETC - Rochester, NY	July 14, 2001	ETC-01-741-10702.0	Wendell Haney, P. E. #54158
			June 22, 2001	ETC-01-741-11008.0	Joseph Dolden, P.E. #42929
ASTM E331	Water Penetration	ETC - Rochester, NY	July 14, 2001	ETC-01-741-10702.0	Wendell Haney, P. E. #54158
			June 22, 2001	ETC-01-741-11008.0	Joseph Dolden, P.E. #42929
ASTM E283	Air Infiltration	ETC - Rochester, NY	July 14, 2001	ETC-01-741-10702.0	Wendell Haney, P. E. #54158
			June 22, 2001	ETC-01-741-11008.0	Joseph Dolden, P.E. #42929
SSTD 12-99	Large Missile Impact/Cycling	CTL - Orlando, FL	October 3, 2002	CTLA - 980W	Ramesh Patel, P.E. #20224

Design Pressure Ratings:

Configuration	Maximum Size	Design Pressure Ratings	
Opaque Single X	Up To 3'0 x 6'8	+ 67.00 - 67.00	
		Alum Astragal	Coastal Alum Astragal
Opaque Double XX	Up To 6'0 x 6'8	+ 40.00 - 40.00	+ 55.00 - 55.00

Installation and Anchoring: See reverse side this page

Use

1. Evaluated for use in locations adhering to the Florida Building Code and where pressure requirements as determined by ASCE 7 Minimum Design Loads for Buildings and Other Structures do not exceed the design pressure ratings listed above.
2. For Masonry installations where the sub-buck is less than 1-1/2 inches (FBC section 1707.4.4 Anchorage Methods and sub-sections 1707.4.4.1 and 1707.4.4.2) same diameter Tapcon type concrete anchors must be substituted and the length must be such that a minimum 1-1/4" engagement of the Tapcon into the masonry wall is obtained.

Certification: Lyndon F. Schmidt
19506 French Lace Drive
Lutz, FL 33558

Florida Professional Engineer
License No. 43409



December 5, 2002



BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

PGT Industries
 P.O. Box 1529
 Nokomis, FL 34274

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: 1"x Heavy Wall-Aluminum Tube Clipped Mullion

APPROVAL DOCUMENT: Drawing No. 6621, titled "1" Heavy Wall Mullion Arrangement Detail", sheets 1 through 6 of 6, prepared, signed and sealed by Robert L. Clark, P.E., dated 5/24/01, bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

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INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises NOA # 01-0323.02 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Theodore Berman, P.E.



NOA No 02-0701.09
 Expiration Date: June 29, 2004
 Approval Date: July 12, 2002
 Page 1



**BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION**

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
1070 Technology Drive
Nokomis, FL 34274**

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series C-740 Aluminum Casement Window - Impact

APPROVAL DOCUMENT: Drawing No. 7045-8, titled "Aluminum Casement Window, Impact", sheets 1 through 12 of 12, dated 12/17/02 with revision C dated 7/10/03, prepared by manufacturer, signed and sealed by Lucas A. Turner, P.E., bearing the Miami-Dade County Product Control Revision stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

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This NOA revises NOA # 02-1224.02 consists of this page 1 and evidence pages E-1 and E-2, as well as approval document mentioned above.

The submitted documentation was reviewed by **Manuel Perez, P.E.**



**NOA No 03-0617.02
Expiration Date: May 22, 2003
Approval Date: October 9, 2003
Page 1**



**BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION**

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

NOTICE OF ACCEPTANCE (NOA)

**PGT Industries
P.O. Box 1529
Nokomis, FL 34274**

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by Miami-Dade County Product Control Division and accepted by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Division (In Miami Dade County) and/or the AHJ (in areas other than Miami Dade County) reserve the right to have this product or material tested for quality assurance purposes. If this product or material fails to perform in the accepted manner, the manufacturer will incur the expense of such testing and the AHJ may immediately revoke, modify, or suspend the use of such product or material within their jurisdiction. BORA reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Division that this product or material fails to meet the requirements of the applicable building code.

This product is approved as described herein, and has been designed to comply with the High Velocity Hurricane Zone of the Florida Building Code.

DESCRIPTION: Series "FW-701" Aluminum Fixed Window-Impact

APPROVAL DOCUMENT: Drawing No. 4214, titled "Aluminum Fixed Impact Window", sheets 1 through 4 of 4, prepared by manufacturer dated 02-16-98 and last revised on 09-09-02, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Revision Stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large Missile Impact Resistant

LABELING: Each unit shall bear a permanent label with the manufacturer's name or logo, city, state and following statement: "Miami-Dade County Product Control Approved", unless otherwise noted herein.

RENEWAL of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

TERMINATION of this NOA will occur after the expiration date or if there has been a revision or change in the materials, use, and/or manufacture of the product or process. Misuse of this NOA as an endorsement of any product, for sales, advertising or any other purposes shall automatically terminate this NOA. Failure to comply with any section of this NOA shall be cause for termination and removal of NOA.

ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official.

This NOA revises and renews NOA # 99-0218.01 and, consists of this page 1 as well as approval document mentioned above.

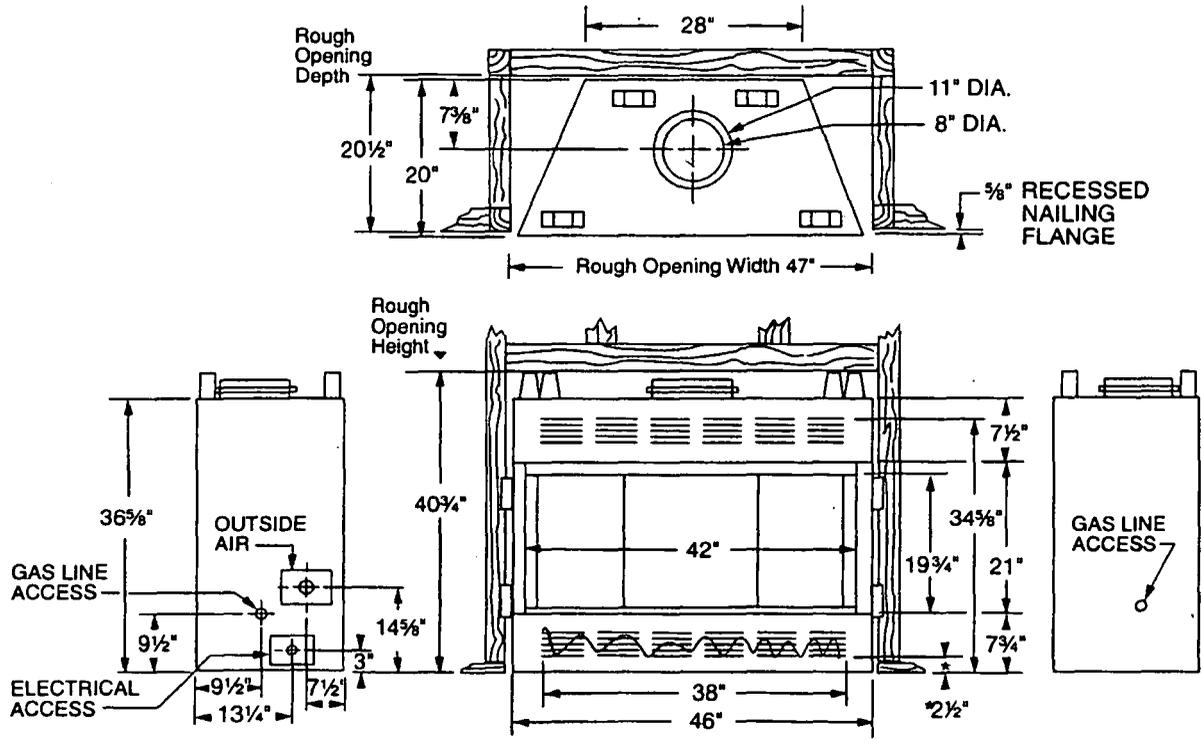
The submitted documentation was reviewed by Ishaq I. Chanda, P.E.



NOA No. 02-0716-03
Expiration Date: **October 05, 2007**
Approval Date: **October 05, 2007**
Page 1

FIREPLACE and CHIMNEY SPECIFICATIONS

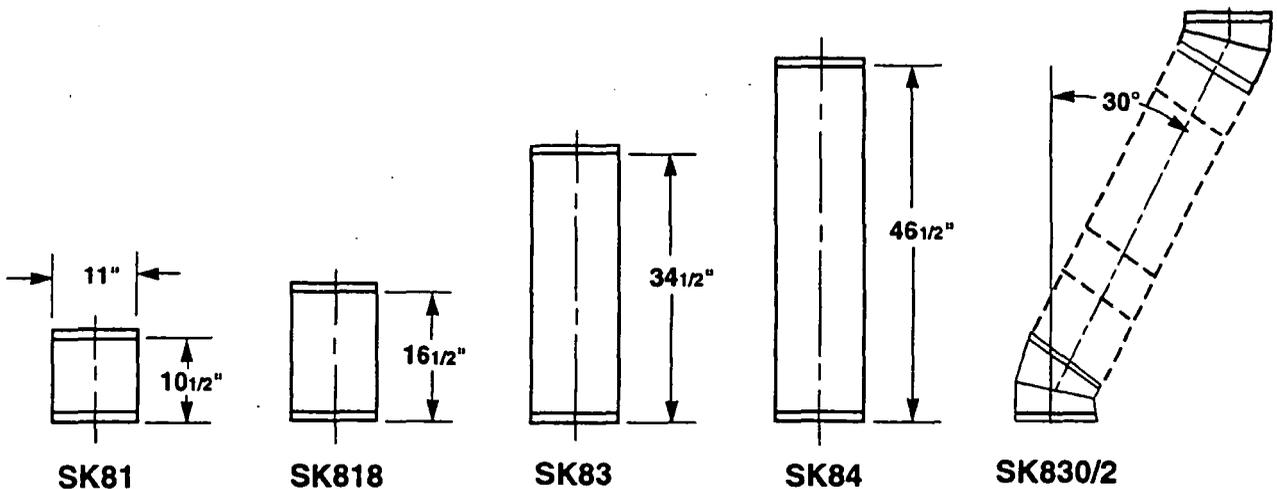
BR/BC42 SERIES WOODBURNING FIREPLACE



FS102

NOTE: BR models have same framing dimensions as the BC models, but without louvers.

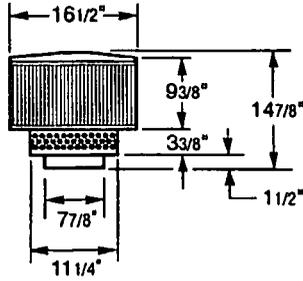
CHIMNEY SECTIONS and OFFSETTING ELBOWS



NOTE: THE INSTALLED LENGTH OF ANY CHIMNEY SECTION IS 1" LESS THAN ITS TOTAL LENGTH, EXCEPT FOR THE LAST SECTION INSTALLED.

FP800

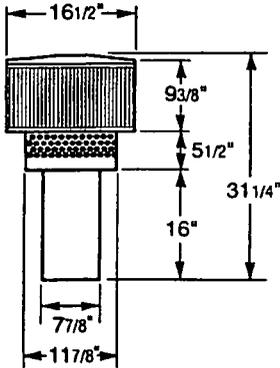
CONTEMPORARY TERMINATIONS



RLTSK8

FP804

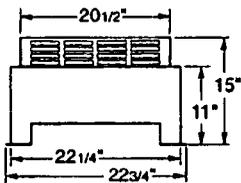
CONTEMPORARY CHASE TERMINATIONS



RLTSK8L

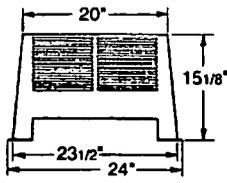
FP803

SHROUDS



SKDSBL

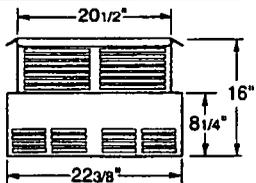
FP807



PKDSBL

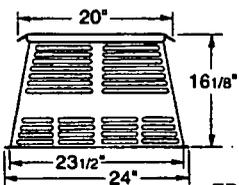
FP808

TRADITIONAL CHASE TOP/HOUSING



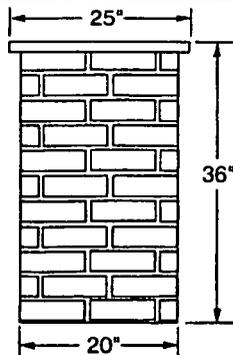
SLTSK8

FP840



PLTSK8

FP887



S20B*

FP848

*Chimney Extension (202036) is an option to extend the S20B 36 inches higher. S20B must be used with used with SLTSK8 or PLTSK8.

FIREPLACE FACTS

BR42/BR42i BC42/BC42i

Standard 42-inch Radiant Builder Model (BR) or Heat Circulating (BC) Fireplace. BR42i/BC42i models provide fully insulated construction for northern climates application.

FEATURES:

- 42-Inch Wide Firebox Opening
- 507 Square Inch Hearth Area
- Full Refractory Lined Firebox

MINIMUM FLOOR AREA:

- 47" W X 20 1/2" D

MINIMUM NON-COMBUSTIBLE HEARTH EXTENSION AREA:

- 61 1/2" W x 20" D
 - Requires 1/2" thick Majestic EH2416 Insulation Board Between Combustible Floor and Non-Combustible Covering

OPTIONAL ACCESSORIES:

- AK-MST - Outside Air Kit Termination
 - 4" Rd. Class 1 Duct (Not Supplied)
 - 40 Ft. Maximum Run
 - (4) 90° Elbows Maximum (Not Supplied)
- FK12 - Fan Kit (BC42/BC42i only)
- SCVS - Variable Speed Control (BC42/BC42i only)
- EB1 - Electrical Junction Box (BC42/BC42i only)
- Wood Mantels, Trim Kits and Mantel Shelves (See mantel Section)
 - 12" Minimum Clearance Above Fireplace Opening (BR only)
 - 12" Minimum Clearance Above Grille Opening (BC only)

OPTIONAL GLASS DOORS

- 42GDKBB - Standard Bi-fold (Brushed Brass)
- 42GDKBK - Standard Bi-fold (Black)
- 42GDKDP - Deluxe Bi-fold (Polished Brass)
- 42GDKS - Standard Bi-fold (Pewter)

FLUE SYSTEM

8" TWO-WALL 'SK' SYSTEM

SPECIFICATION:

- 8" I.D.
- 11" O.D.
- 1 1/2" Clearance to Combustible Materials
- 14 1/2" x 14 1/2" Minimum Roof/Ceiling Opening

MIN./MAX. INSTALLATION HEIGHTS:

Maximum -	90 Ft. - 0 In.
Minimum -	
Straight-up (Without Elbows)	12 Ft. 6 In.
With 2 Elbows*	15 Ft. 0 In.
With 4 Elbows*	21 Ft. 0 In.
*Maximum Total Offset - 20 Ft.	

The Fireplace Facts Information Sheets are for quick reference only and are subject to change without notice. Actual fireplace instructions must abide by specifications provided with each product.

MAJESTIC
Fireplaces

FH155 REV. 05/03

CRITIQUE

Owner: Robert & Elysse Elder

Date: May 4, 2004

Contractor: Owner/Builder

Contractor's Phone Number: 287-2600

Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR SINGLE FAMILY RESIDENCE LOCATED AT 4 MARGUERITA DRIVE

Submittals (2 copies)

1. Current survey (**within one year**) containing the following information:
 - a. Flood Zone panel number and adoption date
2. Product approvals (**current**) from Miami/Dade or other testing institutes approved by the Florida Building Code for the following items:
 - a. Windows - awning
 - b. Exterior Doors – in-swing front doors
- solid wood doors, single and double out-swing
 - c. Garage Door – these are cut sheets need product approval
 - d. Hurricane Shutters
 - e. Precast lintels
3. Application of Tree Permit – Since you are removing most of the trees need landscape layout showing diameter of trees to be planted and what types

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

1. Floor Plan containing the following information:
 - a. Hot water cannot be below base flood elevation
 - b. Venting requirements for all areas exposed below base flood elevation per FEMA regulations. It looks as though there will be three walls below the base flood elevation that will have fill up piled up against them. Only one wall will be able to house venting, there might be a problem with that based on the following: **BELOW IS A PORTION OUR GENERAL STANDARD REQUIREMENTS INCLUDED IN OUR FLOOD ORDINANCE**

In all areas of special flood hazard (A zones), the following provisions are required:

(9) For all new construction and substantial improvements, fully enclosed areas below the lowest floor that are subject to flooding shall be **designed to automatically equalize hydrostatic flood forces on exterior walls by allowing for the entry and exit of floodwater**. Designs for meeting this requirement must either be certified by a registered professional engineer or architect or must meet or exceed the following minimum criteria: A minimum of two openings having a total net area of not less than one square inch for every

square foot of enclosed area subject to flooding shall be provided. The bottom of all openings shall be no higher than one foot above grade. Openings may be equipped with screens, louvers, or other coverings or devices providing that they permit the automatic entry and exit of floodwater.

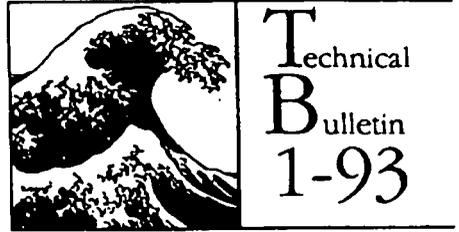
Violations of this section shall be a Class D violation, punishable as set forth in chapter 18.

(Code 1978, § 6.1-5(a); Ord. No. 290, exh. A, 1-15-2002)

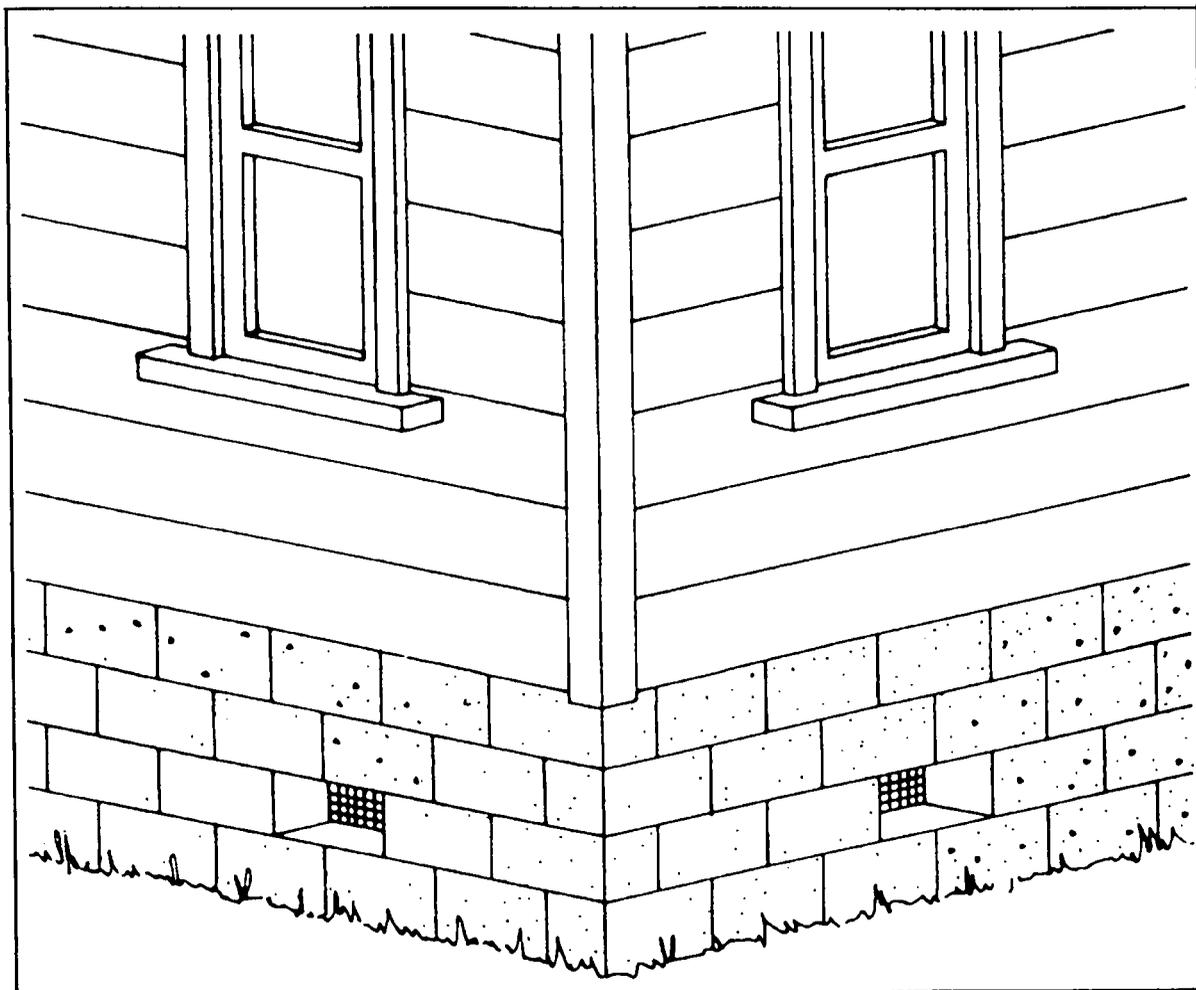
2. Elevation Plan containing the following information:
 - a. Building heights from finish floor to top of roof (maximum 27 feet)
 - b. Height of chimney from top of roof to top of chimney
 - c. Air conditioning condensation units are to be at the base flood elevation of 9.0 or above – not shown
 - d. All equipment servicing building must be at base flood elevation or above (i.e. meter can and service, water heaters, a/c equipment and ducting, etc.)

 3. Electrical Plan containing the following information:
 - a. Water heater location with 220
 - b. Dryer shows 110 instead of 220
 - c. Stove shows 110 instead of 220

 4. Heating/Air Conditioning Plan containing the following information:
 - a. Equipment callouts with name of equipment, SEER, KW, model numbers and tonnage
 - b. Return airs not shown for all bedrooms
-



Openings in Foundation Walls
for Buildings Located in Special Flood Hazard Areas
in accordance with the
National Flood Insurance Program



FEDERAL EMERGENCY MANAGEMENT AGENCY
FEDERAL INSURANCE ADMINISTRATION

FIA-TB-1
(4/93)

Key Word/Subject Index:

This index allows the user to quickly locate key words and subjects in this Technical Bulletin. The Technical Bulletin User's Guide (printed separately) provides references to key words and subjects throughout the Technical Bulletins. For definitions of selected terms, refer to the Glossary at the end of this bulletin

Key Word/Subject	Page
Basement, definition of	3
Foundations in A zones	1
Foundation openings in A zones, size, how to calculate	9
Garages, attached to residential buildings	4
Garage doors, to meet the openings requirement	4
Hydrostatic pressure, automatically equalized	2
Hydrostatic pressure, how to calculate	7
Openings for foundations in A zones	1
Safety factor for foundation openings	9
Substantial damage, foundation wall openings requirement	2
Substantial improvement, foundation wall openings requirement	2

Any comments on the Technical Bulletins should be directed to:

FEMA/FIA
Office of Loss Reduction
Technical Standards Division
500 C St., SW, Room 417
Washington, D.C. 20472

Technical Bulletin 1-93 replaces Technical Bulletin 85-2 (draft) "Foundation Wall Openings."

Graphic design based on the Japanese print *The Great Wave Off Kanagawa*, by Katsushika Hokusai (1760-1849), Asiatic collection, Museum of Fine Arts, Boston.

TECHNICAL BULLETIN 1-93

Openings in Foundation Walls Required for Buildings Located in Special Flood Hazard Areas in accordance with the National Flood Insurance Program

Introduction

An important objective of the National Flood Insurance Program (NFIP) is to protect buildings constructed in floodplains from structural damage caused by flood forces. In support of this objective, the NFIP regulations include building design criteria that apply to new construction and substantial improvements of existing buildings in Special Flood Hazard Areas (SFHAs). According to these criteria, residential buildings constructed in A zones (Zones A, AE, A1-A30, AR, AO, and AH) must have their lowest floors at or above the base flood elevation (BFE). Non-residential buildings constructed in A zones must either have their lowest floors at or above the BFE or be dry floodproofed (made watertight) to or above the BFE. Residential and non-residential buildings whose lowest floors have been constructed at or above the BFE usually are elevated on piers, columns, piles, extended foundation walls, or fill. While the main portion of such a building is protected from the 100-year and lesser-magnitude floods, the foundation and any enclosures below the BFE used for parking, building access, or limited storage will be exposed to flood forces.

For buildings constructed on extended foundation walls or that have other enclosures below the BFE, these flood forces include the hydrostatic pressure of floodwaters against the foundation or enclosure walls. If the walls are not designed to withstand hydrostatic pressure, they can be weakened or can fail and the building damaged. Therefore, the NFIP regulations require that foundation and enclosure walls that are subject to the 100-year flood contain openings that will permit the automatic entry and exit of floodwaters. These openings allow floodwaters to reach equal levels on both sides of the walls and thereby lessen the potential for damage from hydrostatic pressure. The requirement for openings applies to all new and substantially improved buildings in A zones. This Technical Bulletin explains the requirement for openings and provides guidance for designing and constructing foundation and enclosure walls that include the required openings.

Extended foundation and enclosure walls below the BFE may also be threatened by hydrodynamic forces resulting from velocity flows and debris impact. The requirement for openings is intended to reduce flood damage associated with hydrostatic not hydrodynamic forces. These forces are described within this bulletin, and additional design guidance is given for buildings in areas subject to velocity flood flows, which may include debris.

For buildings in V zones (Zones V, VE, and V1-V30), more stringent design and construction requirements have been established for the portions of the buildings below the BFE. For information on V-zone design and construction requirements, refer to the NFIP regulations, the Technical Bulletin series, and FEMA's "Coastal Construction Manual."

NFIP Regulations

The NFIP regulations require that all enclosures below the BFE in A zones be designed to allow for the automatic equalization of hydrostatic forces during a flood event. Section 60.3(c)(5) of the NFIP regulations states that a community shall:

“Require, for all new construction and substantial improvements, that fully enclosed areas below the lowest floor that are usable solely for parking of vehicles, building access, or storage in an area other than a basement and which are subject to flooding shall be designed to automatically equalize hydrostatic flood forces on exterior walls by allowing for the entry and exit of floodwaters. Designs for meeting this requirement must either be certified by a registered professional engineer or architect or meet or exceed the following minimum criteria: A minimum of two openings having a total net area of not less than one square inch for every square foot of enclosed area subject to flooding shall be provided. The bottom of all openings shall be no higher than one foot above grade. Openings may be equipped with screens, louvers, valves, or other coverings or devices provided that they permit the automatic entry and exit of floodwaters.”

As stated in the regulations, buildings in A zones that are substantially damaged and/or substantially improved must meet all the NFIP requirements for new construction, including the openings requirement. All design plans for substantial improvements to buildings in A zones must be thoroughly reviewed by the community to ensure compliance with the openings requirement. Further information on substantial damage and substantial improvement maybe found in the FEMA publication “Answers to Questions About Substantially Damaged Buildings.”

It should be noted that Technical Bulletins provide guidance on the minimum requirements of the NFIP regulations. Community or State requirements that exceed those of the NFIP take precedence. Design professionals should contact the community to determine whether more restrictive local or State regulations apply to the building or site in question. All applicable standards of the State or local building code must also be met for any building in a flood hazard area.

Guidance for Non-Engineered Foundation Openings

Each of the following four design criteria must be met for new and substantially improved A-zone buildings that have enclosed areas below the BFE with openings not designed and certified by a design professional:

1. There must be a minimum of two openings on different sides of each enclosed area. If a building has more than one enclosed area, each area must have openings on exterior walls to allow floodwater to directly enter.
2. The total area of all openings must be at least 1 square inch for each 1 square foot of enclosed area.

3. The bottom of each opening can be no more than 1 foot above the adjacent grade.
4. Any louvers, screens, or other opening covers must not block or impede the automatic flow of floodwaters into and out of the enclosed area.

Types of Buildings Affected

In all cases, any enclosed area below the BFE is subject to flood forces and must be equipped with exterior wall openings in accordance with the NFIP regulations, either at the time of initial construction or, if the building is being substantially improved, at the time of improvement. The only exception to this requirement is floodproofed non-residential buildings that are engineered and meet stringent watertight construction requirements. For further information on this topic, refer to Technical Bulletin 3, "Non-Residential Floodproofing — Requirements and Certification."

Buildings Elevated on Solid Foundation Walls

When a building is elevated on solid foundation walls, an enclosed area is often created below the lowest floor. All foundation enclosures below the BFE must have openings that meet NFIP criteria. Figure 1 shows an example of a properly placed foundation opening. As discussed previously, screens, louvers, or other covers that allow floodwaters to flow freely into the enclosed area may be placed over the openings to keep out vermin and weather.

Care must be taken when placing fill dirt around the outside of the foundation. The resulting enclosed area may be considered a basement under the NFIP. A basement is defined as any area of a building having a floor (finished or unfinished) that is subgrade (below grade) on all sides. The NFIP regulations do not permit a residential building in an SFHA to have a

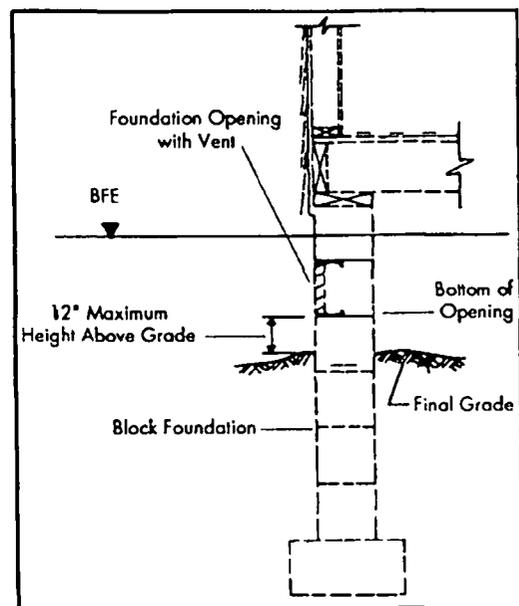


Figure 1. Opening for Solid Foundation Wall

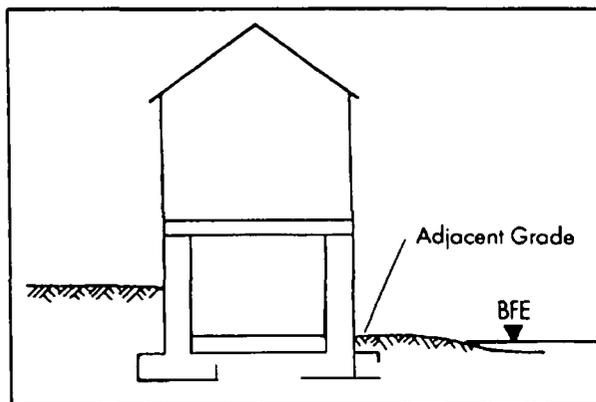


Figure 2. Compliant Grading for a Walkout Basement

basement whose lowest floor (including basement) is below the BFE.

To meet the NFIP requirements, fill placed around foundation walls must be graded so that the grade inside the enclosed area is equal to or higher than the adjacent grade outside the building on at least one side of the building (as illustrated in Figure 2). If the grade inside the foundation walls is above the BFE, openings are not required.

Buildings in Hazardous Velocity Areas

In coastal A zones, or in riverine A zones where flood velocities exceed 5 feet per second, fast-flowing floodwaters can exert considerable pressure on solid foundation walls. This hydrodynamic pressure, as described in the following section, may destroy a building's foundation. In such areas, foundations that allow floodwaters to flow freely beneath the building should be considered. Foundations such as piles, piers, or columns will provide the appropriate level of safety to a building located in a hazardous velocity area, if properly embedded and anchored. See the discussion of hydrodynamic pressure for design guidance.

Buildings in A-zone floodplains with velocity floodwaters may have breakaway walls constructed in areas below the BFE. Compliant foundation openings are required in breakaway walls in A zones.

Buildings with Attached Garages

Any new or substantially improved residential building constructed in an A zone must have its lowest floor at or above the BFE. Many of these buildings have structurally attached garages with floor slabs below the BFE. Because such a below-BFE attached garage is an enclosed area below the BFE, openings are required either in the exterior walls of the garage or in the garage doors themselves in order to meet the NFIP openings criteria (see Figure 3). Openings are required because they prevent flood damage to the garage and subsequently to the structurally attached residence. Garage doors without openings specifically designed to allow for the free flow of floodwaters do not meet the openings requirement. The human intervention necessary to open garage doors when flooding threatens is not an acceptable means of meeting the openings requirement. Gaps that may be present between the door segments and between the garage door and the garage door jamb do not guarantee the automatic entry and exit of floodwaters. Therefore, openings are required either in the exterior walls of the enclosed area or in the garage doors themselves. Openings in garage doors must either meet the non-engineered openings requirements or be certified by a design professional.

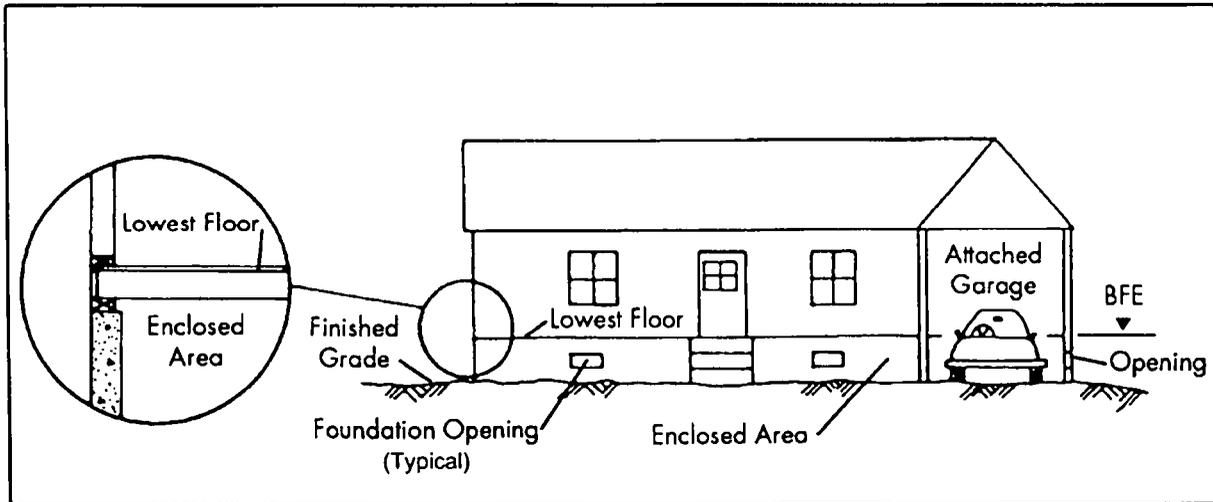


Figure 3. Compliant Residential Building Built on Solid Foundation Walls With Attached Garage

Flood Insurance Implication

If a below-BFE attached garage does not have proper openings, the Elevation Certificate prepared for the building must identify the elevation of the garage floor slab as the lowest floor (reference level) of the building. This may result in flood insurance premiums significantly higher than those that would have applied if the garage had proper openings.

Guidance for Engineered Openings

In situations where it is not feasible or desirable to meet the openings criteria stated previously, a design professional (registered engineer or architect) may design and certify openings. This section provides guidance for such engineered designs. For openings not meeting all four requirements for non-engineered openings listed on pages 2 and 3, certification by a registered professional engineer or architect is required. Such certification must be submitted to, and kept on file by, the community. These certifications must assure community officials that the openings are designed in accordance with accepted standards of practice. A certification may be affixed to the design drawings or submitted separately. It must include appropriate certification language, and the name, title, address, signature, type of license, license number, and professional seal of the certifier. Figure 4 is an example of an acceptable certification.

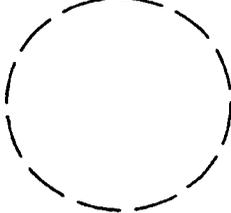
Project Name	
I, _____ do hereby certify that the opening(s) designed for installation in the aforementioned building will allow for the automatic equalizing of hydrostatic flood forces on exterior walls by allowing for the automatic entry and exit of floodwater during floods up to and including the base (100-year) flood.	
Signature	Date
Title	
Type of licence	Licence Number
Address	
 PROFESSIONAL SEAL	

Figure 4. Example of Openings Certificate

Calculation of Flood Forces

Floodwaters can impose both hydrostatic and hydrodynamic forces on floodprone buildings. Hydrostatic pressure is the force that water at rest exerts on any submerged object, including a floodprone building. Hydrostatic pressure is capable of collapsing, moving, and severely damaging most types of buildings. In many floods, hydrostatic pressure is the most prevalent cause of damage. Hydrodynamic pressure is the force exerted on a vertical obstruction (foundation wall) by flowing water and debris.

Hydrostatic pressure on an enclosed area above grade can be calculated by multiplying the specific weight of water (62.4 pounds per cubic foot) by the height of the water on the surface being analyzed. The application of the force generated by hydrostatic pressure is always perpendicular (normal) to the surface in question. In the case of a submerged object, this means that hydrostatic forces act in two ways. First, the force will act laterally (see Figure 5), which can result in collapse of walls or movement of the entire building off its foundation. Second, the force will act vertically (the vertical force is also known as buoyancy, see Figure 6), which can result in the building being lifted from its foundation or floor system.

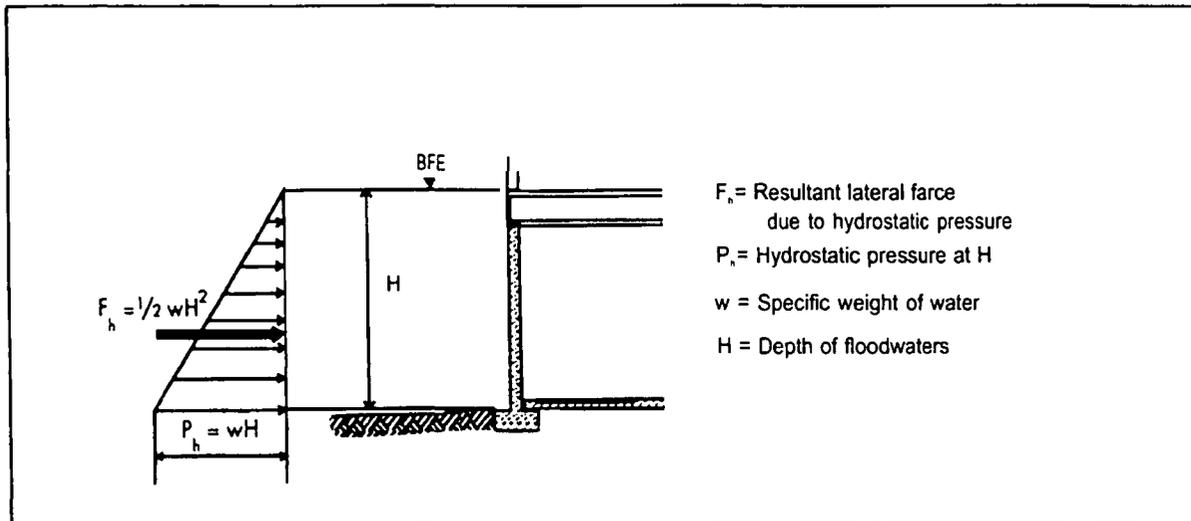


Figure 5. Lateral Hydrostatic Force and Pressure

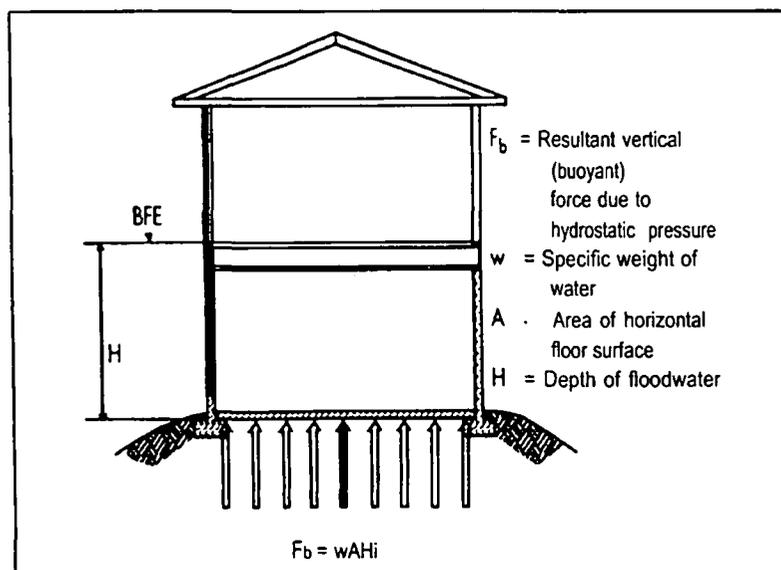


Figure 6. Buoyancy Force

To describe hydrostatic pressure in more technical terms:

The hydrostatic pressure, P_h , at a specific location on a structure is:

$$P_h = wH$$

where:

P_h	is the pressure in pounds per square foot
w	is the specific weight of water, 62.4 pounds per cubic foot
H	is the depth from the surface of the water to the location in question (generally from BFE to bottom of foundation wall)

The lateral force resulting from hydrostatic pressure is:

The resultant lateral (horizontal) force against the surface is:

$$F_h = \frac{1}{2}P_h H = \frac{1}{2}wH^2$$

where:

F_h	is the lateral force in pounds per linear foot of surface
-------	---

Describing the hydrostatic vertical force (buoyancy) in more technical terms:

The buoyant (vertical) hydrostatic force acting against a horizontal surface such as a floor slab is:

$$F_b = wAH$$

where:

F_b	is the total buoyant force in pounds
w	is the specific weight of water, 62.4 pounds per cubic foot
A	is the area of the horizontal surface in square feet
H	is the depth of the building below the flood level

As shown in the following table, hydrostatic pressure, whether it affects a building laterally or vertically, increases rapidly as floodwater depths increase:

Height, H (in feet)	1	2	3	4	5	6	7	8
Pressure, P_h (in pounds per square foot)	62	125	187	250	312	374	437	499

Hydrodynamic pressure is exerted on all vertical surfaces of obstructions, such as building foundations, by the impact of velocity water and debris. Depending upon site-specific flood characteristics and the strength of the foundation, hydrodynamic pressure can overload and destroy a building's foundation. The openings criteria are intended to equalize hydrostatic pressure and are not intended to minimize hydrodynamic pressure on the foundation. Hydrodynamic pressure must be considered in the design of any foundation system where velocity waters or the potential for debris flow exists. If flood velocities are excessive (greater than 5 feet per second), foundation systems other than solid foundation walls should be considered, so that obstructions to damaging flood flows are minimized. Safe foundations in such locations include pile, post, column, and pier foundations. These types of foundation systems are appropriate for A zones in coastal environs subject to waves and velocity floodwaters, as well as in riverine floodplains subject to velocity floodwaters (velocities greater than 5 feet per second) and areas subject to debris flows and ice floes. In areas with high-velocity floodwaters, it is advisable to construct any enclosures below the BFE using the breakaway wall specifications described in FEMA's "Coastal Construction Manual." As stated previously, breakaway walls in A zones must have openings compliant with NFIP regulatory requirements so that hydrostatic pressures are equalized during low-level flood events.

Design Criteria for Engineered Openings

Engineered openings that allow floodwaters into an enclosure for the purpose of equalizing hydrostatic pressures shall be designed using the following criteria:

- The difference between the exterior and interior floodwater levels should not exceed 1 foot at any time during the flood event. Greater differences can result in excessive hydrostatic pressures and structural damage to the enclosure walls.
- The arrangement of the openings must be capable of equalizing the hydrostatic pressures associated with the "worst-case" rate of rise of floodwaters. Historical flooding information should be used to determine rate of rise. A rate of rise of 5 feet per hour was assumed in the development of the NFIP non-engineered openings design criteria.
- Because of the large amount of debris associated with flooding and because openings will often be equipped with some form of vermin screen to meet applicable building codes, there is a high probability that openings may be obstructed during a flood. For this reason, a substantial safety factor is needed. Standard engineering practice is to use a safety factor of 5 in similar life/safety situations involving potential structural failure; therefore, a safety factor

of 5 was incorporated into the calculations that follow. Openings on the sides of the building facing the primary direction of velocity flow will add an additional safety factor however, such openings will tend to be blocked with debris sooner than other openings.

- At least two openings must be included to provide for a safety factor against debris blockage. This safety factor is enhanced when openings are located on at least two different sides of the enclosed area. This will allow for more even filling and emptying of the enclosed area and will also reduce the risk of debris being forced against an opening and blocking it.

The first step in determining the total net area required for openings is to calculate the flow rate per square foot of enclosed area, which is based on the rate of rise of the floodwaters. The assumed worst-case rate of rise is 5 feet per hour per square foot of area, or about 0.1 foot per minute. To convert this to gallons per minute per square foot of enclosed area, multiply by a conversion factor of 7.5 gallons per cubic foot. The needed flow rate into the enclosure per square foot of area is then (0.1 foot per minute) times (7.5 gallons per cubic foot), or 0.8 gallon per minute per square foot of enclosed area. The second step is outlined below.

To determine the total net area of the openings, A, needed to permit the above flow rate, the formula is:

$$Q = 38.0cA(p)^3$$

Solving for area A and multiplying by a factor of safety:

$$A = \frac{Q}{38.0 cp^3} (FS)$$

where:

A	is the net area of openings required, in square inches
Q	is the flow rate per square foot, which is 0.8 gallon per minute
c	is the coefficient of discharge, which is assumed to be 0.2
p	is the pressure, which for one square foot of differential is 62.4 pounds per square foot, or 0.4 pound per square inch
FS	is the factor of safety, which is 5

Therefore:

$$A = \frac{0.8}{38.0 \times 0.2 \times 0.6} (5)$$

= about 1.0 square inch of opening per square foot of enclosed area.

The NFIP

The NFIP was created by Congress in 1968 to provide federally backed flood insurance coverage, because it was generally unavailable from private insurance companies. The NFIP is also intended to reduce future flood losses by identifying floodprone areas and ensuring that new

development in these areas inadequately protected from flood damage. The NFIP is based on a mutual agreement between the federal government and communities that have been identified as floodprone. FEMA, through the Federal Insurance Administration (FIA), makes flood insurance available to community residents provided that the participating community adopts and enforces adequate floodplain management regulations that meet the minimum NFIP requirements. The NFIP encourages communities to adopt floodplain management ordinances that exceed the minimum NFIP criteria. Included in the NFIP requirements, found under Title 44 of the U.S. Code of Federal Regulations, are minimum building design and construction standards for buildings located in SFHAs. Through their floodplain management ordinances, communities adopt the NFIP design performance standards for new and substantially improved buildings located in floodprone areas identified on FIA's Flood Insurance Rate Maps.

Technical Bulletins

This is one of a series of Technical Bulletins FEMA has produced to provide guidance concerning the building performance standards of the NFIP. These standards are contained in Title 44 of the U.S. Code of Federal Regulations at Section 60.3. The bulletins are intended for use primarily by State and local officials responsible for interpreting and enforcing NFIP regulations and by members of the development community, such as design professionals and builders. New bulletins, as well as updates of existing bulletins, are issued periodically, as necessary. The bulletins do not create regulations; rather they provide specific guidance for complying with the minimum requirements of existing NFIP regulations. Users of the Technical Bulletins who need additional guidance concerning NFIP regulatory requirements should contact the Natural Hazards Branch of the appropriate FEMA regional office. The "User's Guide to Technical Bulletins" lists the bulletins issued to date and provides a key word/subject index for the entire series.

Ordering Information

Copies of the Technical Bulletins can be obtained from the appropriate FEMA regional office. Technical Bulletins can also be ordered from the FEMA publications warehouse. Use of FEMA Form 60-8 will result in a more timely delivery from the warehouse — the form can be obtained from FEMA regional offices and your state's Office of Emergency Management. Send publication requests to FEMA Publications, P.O. Box 70274, Washington, D.C. 20024.

Further Information

The following publications provide further information concerning openings in foundation walls:

1. "Answers to Questions About Substantially Damaged Buildings," FEMA, May 1991, FEMA-213.
2. "Coastal Construction Manual," FEMA, February 1986, FEMA-55.
3. "Colorado Floodproofing Manual," Colorado Department of Natural Resources, Water Conservation Board, October 1983.
4. "Design Manual for Retrofitting Flood-Prone Residential Structures," FEMA, September 1986, FEMA-1 14.

5. "Elevated Residential Structures," FEMA, May 1986, FEMA-54.
6. "Elevating Flood-Prone Buildings: A Contractor's Guide," Illinois Department of Transportation, Division of Water Resources, 1985.
7. "Flood Proofing Regulations," U.S. Army Corps of Engineers, March 1992, EP 1165-2-314.
8. "Flood Proofing Systems and Techniques," U.S. Army Corps of Engineers, December 1984.
9. "Foundation Analysis and Design," Second Edition, Joseph E. Bowles, McGraw-Hill Book Co., New York.

Glossary

Base flood — The flood that has a 1-percent probability of being equaled or exceeded in any given year (also referred to as the 100-year flood).

Base Flood Elevation (BFE) — The height of the base flood, usually in feet, in relation to the National Geodetic Vertical Datum of 1929 or other datum as specified.

Basement — Any area of a building having its floor subgrade (below ground level) on all sides.

Coastal High Hazard Area — An area of special flood hazard extending from offshore to the inland limit of a primary frontal dune along an open coast and any other area subject to high-velocity wave action from storms or seismic sources.

Federal Emergency Management Agency (FEMA) — The independent federal agency that, in addition to carrying out other activities, oversees the administration of the National Flood Insurance Program.

Federal Insurance Administration (FIA) — The component of FEMA directly responsible for administering the National Flood Insurance Program.

Flood Insurance Rate Map (FIRM) — The insurance and floodplain management map issued by FEMA that identifies, on the basis of detailed or approximate analyses, areas of 100-year flood hazard in a community.

Floodprone area — Any land area susceptible to being inundated by floodwater from any source.

Lowest floor — The lowest floor of the lowest enclosed area of a building, including a basement. Any NFIP-compliant unfinished or flood-resistant enclosure useable solely for parking of vehicles, building access, or storage (in an area other than a basement) is not considered a building's lowest floor.

Special Flood Hazard Area (SFHA) — Area delineated on a Flood Insurance Rate Map as being subject to inundation by the base flood and designated as Zone A, AE, A1-A30, AR, AO, AH, V, VE, or V1-V30.

Substantial damage — Damage of any origin sustained by a structure whereby the cost of restoring the structure to its before-damaged condition would equal or exceed 50 percent of the market value of the structure before the damage occurred.

Substantial improvement — Any reconstruction, rehabilitation, addition, or other improvement of a structure, the cost of which equals or exceeds 50 percent of the market value of the structure before the “start of construction” of the improvement. This term includes structures that have incurred “substantial damage,” regardless of the actual repair work performed.

CRITIQUE REVISED

Owner: Robert & Elysse Elder

Date: May 4, 2004

Contractor: Owner/Builder

Contractor's Phone Number: 287-2600

Plan Reviewer: Gene Simmons

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR SINGLE FAMILY RESIDENCE LOCATED AT 4 MARGUERITA DRIVE

Submittals (2 copies)

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

1. Floor Plan containing the following information:

In all areas of special flood hazard (A zones), the following provisions are required:

(9) For all new construction and substantial improvements, fully enclosed areas below the lowest floor that are subject to flooding shall be **designed to automatically equalize hydrostatic flood forces on exterior walls by**

allowing for the entry and exit of floodwater. Designs for meeting this requirement must be certified by a registered professional engineer or architect or must meet or exceed the following minimum criteria: A minimum of two openings having a total net area of not less than one square inch for every square foot of enclosed area subject to flooding shall be provided. **The bottom of all openings shall be no higher than one foot above grade.** Openings may be equipped with screens, louvers, or other coverings or devices providing that they permit the automatic entry and exit of floodwater.

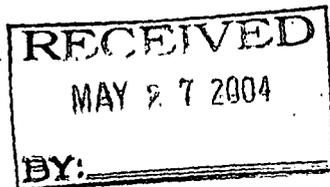
Violations of this section shall be a Class D violation, punishable as set forth in chapter 18.

(Code 1978, § 6.1-5(a); Ord. No. 290, exh. A, 1-15-2002)

I interpret the above to mean natural grade. The two windows you are using in the front of the house exceed this height requirement. Also the venting must be on at least two walls to allow the entry and exit of water. This was discussed with the owner.

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

- a. Only one copy of first and second floor a/c layout was resubmitted, missing one more copy of first and second floor and two copies of third floor



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Violations of this section shall be a Class D violation, punishable as set forth in chapter 18.

(Code 1978, § 6.1-5(a); Ord. No. 290, exh. A, 1-15-2002)

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* NOTE: FRONT VENTS ARE RETURNING TO WINDOWS. THESE ARE PGT PROJECTION WINDOWS, NOT AWNINGS. I PREVIOUSLY PROVIDED NOA FOR THESE PROJECTION WINDOWS.



OFFICIAL RECEIPT
(FOR MONEY RECEIVED)

No. 536473

DATE 6-1, 1904

Legal Svc. SCHOOL

RECEIVED FROM Robert Elden III \$ 1006.03
(NAME OR ORGANIZATION)

FOR School impact fee - Apt 11, Margarita st

FOR DEPOSIT IN _____ FUND(S)

W. Falls

PRINCIPAL OR RESPONSIBLE OFFICER



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

ELEVATION CERTIFICATE MEMO OF REVIEW FOR CORRECTNESS AND COMPLETION

In accordance with participation in the NFIP/CRS program, all elevation certificates are required to be reviewed for correctness and completion prior to acceptance by the community. This completed form shall be attached to all elevation certificates maintained on file and provided with requested copies of elevation certificates.

- The attached elevation certificate requires corrections by the surveyor of section(s) _____ prior to acceptance by the community.
- The attached elevation certificated is complete and correct.
- Minor corrections have been made in the below marked sections by the authorized Community Official.

SECTION A - PROPERTY INFORMATION		For Insurance Company Use:
A1. Building Owner's Name		Policy Number
A2. Building Street Address (including Apt., Unit, Suite, and/or Bldg. No.) or P.O. Route and Box No.		Company NAIC Number
City	State	ZIP Code
A3. Property Description (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)		
A4. Building Use (e.g., Residential, Non-Residential, Addition, Accessory, etc.)		
A5. Latitude/Longitude: Lat. _____ Long. _____ Horizontal Datum: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		
A6. Attach at least 2 photographs of the building if the Certificate is being used to obtain flood insurance.		
A7. Building Diagram Number _____		
A8. For a building with a crawl space or enclosure(s), provide:		A9. For a building with an attached garage, provide:
a) Square footage of crawl space or enclosure(s) _____ sq ft		a) Square footage of attached garage _____ sq ft
b) No. of permanent flood openings in the crawl space or enclosure(s) walls within 1.0 foot above adjacent grade _____		b) No. of permanent flood openings in the attached garage walls within 1.0 foot above adjacent grade _____
c) Total net area of flood openings in A8.b _____ sq in		c) Total net area of flood openings in A9.b _____ sq in

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP Community Name & Community Number <i>TOWN OF SEWALL'S POINT 120169</i>		B2. County Name		B3. State	
B4. Map/Panel Number	B5. Suffix	B6. FIRM Index Date	B7. FIRM Panel Effective/Revised Date	B8. Flood Zone(s) <i>AE</i>	B9. Base Flood Elevation(s) (Zone A0, use base flood depth) <i>9</i>
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in item B9. <input type="checkbox"/> FIS Profile <input type="checkbox"/> FIRM <input type="checkbox"/> Community Determined <input type="checkbox"/> Other (Describe) _____					
B11. Indicate elevation datum used for BFE in item B9: <input type="checkbox"/> NGVD 1929 <input type="checkbox"/> NAVD 1988 <input type="checkbox"/> Other (Describe) _____					
B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? <input type="checkbox"/> Yes <input type="checkbox"/> No Designation Date _____ <input type="checkbox"/> CBRS <input type="checkbox"/> OPA					

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction
 *A new Elevation Certificate will be required when construction of the building is complete.

C2. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO. Complete items C2.a-g below according to the building diagram specified in item A7.

Benchmark Utilized _____ Vertical Datum _____

Conversion/Comments _____

Check the measurement used.

a) Top of bottom floor (including basement, crawl space, or enclosure floor)	_____ feet	<input type="checkbox"/> meters (Puerto Rico only)
b) Top of the next higher floor	<i>12.6</i> <input checked="" type="checkbox"/> feet	<input type="checkbox"/> meters (Puerto Rico only)
c) Bottom of the lowest horizontal structural member (V Zones only)	_____ feet	<input type="checkbox"/> meters (Puerto Rico only)
d) Attached garage (top of slab)	_____ feet	<input type="checkbox"/> meters (Puerto Rico only)
e) Lowest elevation of machinery or equipment servicing the building (Describe type of equipment in Comments)	_____ feet	<input type="checkbox"/> meters (Puerto Rico only)
f) Lowest adjacent (finished) grade (LAG)	_____ feet	<input type="checkbox"/> meters (Puerto Rico only)
g) Highest adjacent (finished) grade (HAG)	_____ feet	<input type="checkbox"/> meters (Puerto Rico only)

COMMENTS:

MEASURED AT SITE

Date of Review: *5-18-09*

Building Official: *[Signature]*

FEDERAL EMERGENCY MANAGEMENT AGENCY
NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077
Expires December 31, 2005

ELEVATION CERTIFICATE

Important: Read the instructions on pages 1 - 7.

SECTION A - PROPERTY OWNER INFORMATION			For Insurance Company Use:	
BUILDING OWNER'S NAME Robert & Elysse Elder			Policy Number	
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. 4 Marguerita Drive			Company NAIC Number	
CITY Sewall's Point	STATE FL	ZIP CODE 34996		
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.) Lot 11, Marguerita Subdivision				
BUILDING USE (e.g., Residential, Non-residential, Addition, Accessory, etc. Use a Comments area, if necessary.) Residential				
LATITUDE/LONGITUDE (OPTIONAL) (##° -##' -##"##" or ##.#####)		HORIZONTAL DATUM: <input type="checkbox"/> NAD 1927 <input type="checkbox"/> NAD 1983		SOURCE: <input type="checkbox"/> GPS (Type): _____ <input type="checkbox"/> USGS Quad Map <input type="checkbox"/> Other: _____

SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION

B1. NFIP COMMUNITY NAME & COMMUNITY NUMBER Martin 120164		B2. COUNTY NAME Martin		B3. STATE Florida	
B4. MAP AND PANEL NUMBER 12085C0162	B5. SUFFIX F	B6. FIRM INDEX DATE 10-04-02	B7. FIRM PANEL EFFECTIVE/REVISED DATE 10-04-02	B8. FLOOD ZONE(S) AE	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 8 & 9.

B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.
 FIS Profile FIRM Community Determined Other (Describe): _____

B11. Indicate the elevation datum used for the BFE in B9: NGVD 1929 NAVD 1988 Other (Describe): _____

B12. Is the building located in a Coastal Barrier Resources System (CBRS) area or Otherwise Protected Area (OPA)? Yes No Designation Date _____

SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)

C1. Building elevations are based on: Construction Drawings* Building Under Construction* Finished Construction

*A new Elevation Certificate will be required when construction of the building is complete.

C2. Building Diagram Number 3 (Select the building diagram most similar to the building for which this certificate is being completed - see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)

C3. Elevations - Zones A1-A30, AE, AH, A (with BFE), VE, V1-V30, V (with BFE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AO

Complete items C3-a-i below according to the building diagram specified in item C2. State the datum used. If the datum is different from the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.

Datum NGVD 29 Conversion/Comments N/A

Elevation reference mark used Benchmark Does the elevation reference mark used appear on the FIRM? Yes No

- o a) Top of bottom floor (including basement or enclosure) 9. 10 ft.(m)
- o b) Top of next higher floor N/A. ___ft.(m)
- o c) Bottom of lowest horizontal structural member (V zones only) N/A. ___ft.(m)
- o d) Attached garage (top of slab) 3. 0 ft.(m)
- o e) Lowest elevation of machinery and/or equipment servicing the building (Describe in a Comments area) 9. 0 ft.(m)
- o f) Lowest adjacent (finished) grade (LAG) 2. 5 ft.(m)
- o g) Highest adjacent (finished) grade (HAG) 9. 1 ft.(m)
- o h) No. of permanent openings (flood vents) within 1 ft. above adjacent grade 4
- o i) Total area of all permanent openings (flood vents) in C3.h 4636 sq. in. (sq. cm)

License Number, Embossed Seal, Signature, and Date

[Signature]
1/29/06
FSM 5102
Revised 2/27/06

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION

This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.

I certify that the information in Sections A, 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.

CERTIFIER'S NAME Christian Fenex		LICENSE NUMBER 5102	
TITLE Professional Surveyor & Mapper		COMPANY NAME Christian Fenex & Associates	
ADDRESS 1657 S. Dixie Highway	CITY Stuart	STATE FL	ZIP CODE 34994
SIGNATURE <i>[Signature]</i>	DATE 1/29/06	TELEPHONE (772) 283-2977	

IMPORTANT: In these spaces, copy the corresponding information from Section A.			For Insurance Company Use:
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and/or Bldg. No.) OR P.O. ROUTE AND BOX NO. *4 Marguerita Drive			Policy Number
CITY Sewall's Point	STATE FL	ZIP CODE 34996	Company NAIC Number

SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION (CONTINUED)

Copy both sides of this Elevation Certificate for (1) community official, (2) insurance agent/company, and (3) building owner.

COMMENTS

This certificate is for finished construction.

Check here if attachments

SECTION E - BUILDING ELEVATION INFORMATION (SURVEY NOT REQUIRED) FOR ZONE AO AND ZONE A (WITHOUT BFE)

For Zone AO and Zone A (without BFE), complete Items E1 through E4. If the Elevation Certificate is intended for use as supporting information for a LOMA or LOMR-F, Section C must be completed.

- E1. Building Diagram Number __ (Select the building diagram most similar to the building for which this certificate is being completed – see pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)
- E2. The top of the bottom floor (including basement or enclosure) of the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E3. For Building Diagrams 6-8 with openings (see page 7), the next higher floor or elevated floor (elevation b) of the building is __ ft.(m) __ in.(cm) above the highest adjacent grade. Complete items C3.h and C3.i on front of form.
- E4. The top of the platform of machinery and/or equipment servicing the building is __ ft.(m) __ in.(cm) above or below (check one) the highest adjacent grade. (Use natural grade, if available).
- E5. For Zone AO only: If no flood depth number is available, is the top of the bottom floor elevated in accordance with the community's floodplain management ordinance?
 Yes No Unknown. The local official must certify this information in Section G.

SECTION F - PROPERTY OWNER (OR OWNER'S REPRESENTATIVE) CERTIFICATION

The property owner or owner's authorized representative who completes Sections A, B, C (Items C3.h and C3.i only), and E for Zone A (without a FEMA-issued or community-issued BFE) or Zone AO must sign here. *The statements in Sections A, B, C, and E are correct to the best of my knowledge.*

PROPERTY OWNER'S OR OWNER'S AUTHORIZED REPRESENTATIVE'S NAME

ADDRESS	CITY	STATE	ZIP CODE
SIGNATURE	DATE	TELEPHONE	
COMMENTS			

Check here if attachments

SECTION G - COMMUNITY INFORMATION (OPTIONAL)

The local official who is authorized by law or ordinance to administer the community's floodplain management ordinance can complete Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.

- G1. The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor, engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the elevation data in the Comments area below.)
- G2. A community official completed Section E for a building located in Zone A (without a FEMA-issued or community-issued BFE) or Zone AO.
- G3. The following information (Items G4-G9) is provided for community floodplain management purposes.

G4. PERMIT NUMBER	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE OF COMPLIANCE/OCCUPANCY ISSUED
-------------------	------------------------	---

G7. This permit has been issued for: New Construction Substantial Improvement

G8. Elevation of as-built lowest floor (including basement) of the building is: _____ ft.(m) Datum: _____

G9. BFE or (in Zone AO) depth of flooding at the building site is: _____ ft.(m) Datum: _____

LOCAL OFFICIAL'S NAME	TITLE
COMMUNITY NAME	TELEPHONE
SIGNATURE	DATE
COMMENTS	

Check here if attachments

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR SINGLE FAMILY RESIDENTS

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

Application form must contain the following information:

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

Submittals (2 copies)

1. Current survey containing the following information:
 - a. Legal Description of Lot
 - b. Lot dimensions and bearings
 - c. Street and Waterway names
 - d. Grade elevations (proposed and existing)
 - e. Proposed swale and/or drainage arrows
 - f. Existing and proposed structures, decks, pads, etc.
 - g. Finish Floor Elevations (proposed and existing)
 - h. Crown of road(s)
 - i. Adjacent occupied/unoccupied
 - j. Easements
 - k. Setbacks
 - l. Road Right-Of-Ways
 - m. Well locations (proposed and existing)
 - n. Septic drainfield(s) (proposed and existing)
 - o. Canals, Ponds, or Riverfront locations
 - p. Retention areas (proposed and existing)
 - q. Impervious/Pervious calculations
 - r. Certified to the Town of Sewall's Point
2. Wind Load Certification Form (signed and sealed by Architect/Engineer)
3. Energy Calculations and Compliance Certification.
4. Product approvals from Miami/Dade for the following items:
 - a. Windows
 - b. Exterior Doors
 - c. Roof System
 - d. Garage Door
 - e. Hurricane Shutters

- f. Skylights
 - g. Glass blocks
 - h. Siding
5. Health Department Approval for septic system or information on existing system.
 6. Health Department Well permit or information on existing system.
 7. Statement of Fact (owner/builder affidavit)
 8. Proof of ownership (deed or tax recpt.)
 9. Application for tree removal or relocation (attach 2 tree surveys and removal or relocation plan)
 10. Manufactures specifications or shop drawings for fireplaces, stairs, etc.
 11. A certified copy of the Notice of Commencement for any work over \$2500.00
 12. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
 13. Copy of Workmen's Compensation
 14. Copy of Liability Insurance
 15. If property is over one (1) acre then a copy of the Florida Department of Environmental Protection (DEP) Stormwater Discharge Permit (see attached formwork for DEP)

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

1. **Floor Plan containing the following information:**
 - a. Square footage calculations
 - b. Scale – minimum ¼" per foot
 - c. All proposed and existing layouts of structures
 - d. Location of all pads/porches and patios
 - e. All dimensions exterior and interior to define design and construction
 - f. Room callouts
 - g. Elevation drops with size, steps, ramps, curbs, dashed outline for second story outline
 - h. Location of all windows and doors with egress requirements
 - i. Tempered glass locations
 - j. Door and window sizes
 - k. Location of all bathroom fixtures
 - l. Location of all kitchen fixtures and appliances
 - m. Water heater location
 - n. Hose bib locations
 - o. Attic access with size of opening
 - p. Beam callouts
 - q. All through wall or ceiling ventilation such as garage vents, dryer vent etc.
2. **Elevation Plan containing the following information:**
 - a. Front, Rear, and Side Elevations
 - b. All beam heights and changes in beams heights
 - c. Building heights from finish floor to top of roof (maximum 27 feet)
 - d. Height of chimney from top of roof to top of chimney max. 3 feet

- e. Location of all windows and doors
- f. Roof slope
- g. Wall finishes
- h. Vertical features and horizontal projections with dimensions

3. Foundation Plan containing the following information:

- a. Bearing walls exterior and interior
- b. Dimensions of all bearing walls exterior and interior
- c. All footings and pad locations
- d. Dimensions of all footing and pads
- e. Step downs (minimum for residence to garage 7 inches)
- f. Footing and Pad call outs for size (width and depth), steel (size, lap and placement)
- g. Any underslab mechanical duct work or gas piping
- h. Location of any in slab receptacle locations
- i. Column Layout
- j. Columns Schedule

4. Electrical Plan containing the following information:

- a. Show all receptacle, switch, and fixture locations
- b. Show all WPGFI's and GFI's locations
- c. Ceiling fan locations
- d. Attic or roof top receptacles and fixtures
- e. Service entrance
- f. Panel layout with circuits, loads, wire, breaker and conduit sizes
- g. Riser diagram with size of service, meter, ground, disconnects feeders and panels
- h. Any specialty lighting requirements
- i. Disconnect locations for residence, pool, pumps, etc.
- j. Load calculations
- k. Panel and sub-panel locations
- l. Meter can location

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

- a. Air Handler locations showing kw rating
- b. Condensing unit locations
- c. Duct layout showing sizes of duct and size of diffusers
- d. CFM per outlet
- e. Distribution box locations
- f. Equipment callouts with name of equipment, model numbers and sizes

6. Plumbing Plan containing the following information:

- a. Plumbing riser diagram

7. Truss Layout containing the following information:

- a. Show location of all trusses
-

- b. Show location of all girders
- c. Uplift quantities for all trusses
- d. Connectors schedule for all trusses and girders
- e. Location of roof mounted equipment
- f. Location of all structural elements size and reinforcing

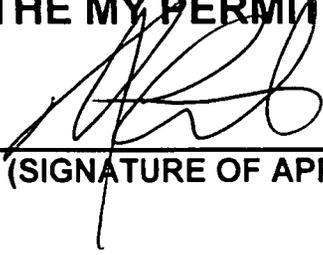
8. Second Floor Framing Plan

- a. Location of all floor trusses or joists
- b. Size of all structural members and spacing dimensions
- c. Location of all girders

9. Section/Detail Drawings and Schedules showing the following information:

- a. Wall section drawings for single and two story sections
- b. Show footings, slab, wall, ceiling and roof construction and insulation
- c. Window and door schedules showing design pressures (+ and -)
- d. Stair details showing riser height and tread width also handrail with baluster and newel post design showing distance between balusters and height of handrail from leading edge of tread
- e. Garage door buck detail showing type, size, length and spacing of connectors to be used
- f. Window buck detail showing type, size, length and spacing of connectors to be used
- g. Framing details of cupolas with connector callouts

**ALL INFORMATION AND DOCUMENTS MENTIONED ABOVE
ARE INCLUDED IN THE MY PERMIT APPLICATION PACKAGE**



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: _____

4/29/04

RETURN TO:
FIDELITY FEDERAL BANK & TRUST
c/o Debra Schiavone
205 Datura Street
West Palm Beach, FL 33401
Loan Number: 140042374

=====Space above this line for recording purposes only=====

PERMIT NO. _____ FOLIO NO: 13-38-41-011-000-00110-1

STATE OF FLORIDA
COUNTY OF Martin

The undersigned hereby give Notice that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following is provided in this Notice of Commencement. This Notice shall be void and of no force and effect if construction is not commenced within ninety (90) days after recordation.

NOTICE OF COMMENCEMENT

1. Description of the property: 4 MARGUERITA ROAD
STUART, FLORIDA 34996

LOT 11, MARGUERITA SUBDIVISION, ACCORDING TO THE MAP OR PLAT
THEREOF AS RECORDED IN PLAT BOOK 10, PAGE(S) 3, PUBLIC RECORDS OF
MARTIN COUNTY, FLORIDA.

2. General description of improvement:
TWO STORY SINGLE FAMILY RESIDENCE WITH ALL OTHER RELATED
IMPROVEMENTS

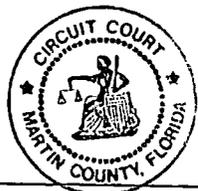
- 3(a). The owner:
Name: ROBERT J ELDER III

Address: 3 WORTH COURT
STUART , FL 34996

Phone Number: 772-223-9304

INSTR # 1746487
OR BK 01891 PG 1218
RECORDED 04/28/2004 08:54:02 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY L Wood

FLORIDA IS A DEBTOR IN CHIEF AND SHOULD BE PAID THE DEBT OF MARTIN COUNTY FLORIDA



NOTC1M

3(b). Owner's interest in the site of the improvement: FEE SIMPLE

3(c). Fee simple title holder (if other than owner):

Name:

Address:

4. Contractor: OWNER-BUILDER

Phone Number:

5. Surety:

Address:

Phone Number:

Amount of Bond:

A Copy of the payment bond (if any) is attached hereto.

6. Lender (Persons or entities making a loan for construction of improvements):

FIDELITY FEDERAL BANK & TRUST
205 DATURA STREET, WEST PALM BEACH, FL 33401
Phone Number: 561-803-9739 (Construction Department)
Fax Number: 561-803-9745 (Construction Department)

7. Name and address of person within the State of Florida designated by the owner as person upon whom notices or other documents may be served as provided by Florida Statute Section 713.13(1)(a)(7):

Name:

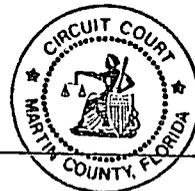
Address:

8. The owner has designated the following person, in addition to himself, to receive a copy of the lienor's notice as provided in Section 713.13(1)(b) of the Florida Statute:

FIDELITY FEDERAL BANK & TRUST
205 DATURA STREET
WEST PALM BEACH, FL 33401
Phone Number 561-803-9739 (Construction Department)
Fax Number 561-803-9745 (Construction Department)

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

The recording of this Notice of commencement does not constitute a lien, cloud or encumbrance on the described real property, but gives constructive notice that claims of lien may be filed under Chapter 713 of the Florida Statutes.



WITNESS:

Lawrence E. Cray III
Print Name: Lawrence E. Cray III

Robert J. Elder III
Owner: ROBERT J ELDER III

Candice R. Underwood
Print Name: CANDICE R. Underwood

Owner:

Print Name:

Owner:

Print Name:

Owner:

Print Name:

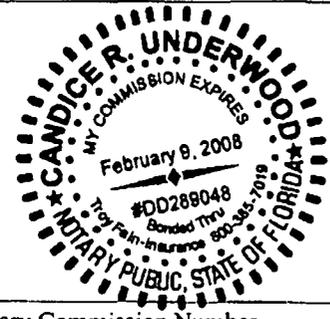
Owner:

Print Name:

Owner:

SWORN TO AND SUBSCRIBED before me this 26th day of April 2004, by Robert J. Elder III who is personally known to me or who has produced identification. as

Candice R. Underwood
Notary Public State of Florida



Candice R. Underwood
Printed Name of Notary Public

Notary Commission Number

STATE OF FLORIDA
MARTIN COUNTY

THIS IS TO CERTIFY THAT THE
FOREGOING 3 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.



MARSHA EWING, CLERK
BY Marsha Ewing D.C.
DATE 4-29-04

TERMITE PRETREAT SPECIALISTS



RECEIVED 5/3/05

File 6772

1-866-PRE-TREAT

FAX 800-837-8311

DiligentFL.com

State License JB94494

No 4844

Notice of Preventative Treatment for Termites

(as required by Florida Building Code (FBC) 104.2.6 and Broward County Chapter FBC 105.2.2)

Service Date 4-14-05 Time _____ Builder _____

Lot _____ Block _____ Section _____ Shell Subcontractor Mark IV

Development Name/Project Residence Treatment Type _____

Structure Address 4 Marguerita Dr Floating [X] Monolithic [] Patio []

City Sewall's Pointe Cnty Martin Garage [] Driveway [] Stem Wall []

Owner _____ Addition [X] Cutouts []

Notes _____

Treatment/Product Detail

Tamp & Treat [] Treat Only [X]

Type Treatment: Initial Under Slab [X] Retreat [] Final []

Product: Durshan TC [X] Dagnet [] Demon TC [] Other []

Concentration: 15 % Gallons Applied: 10

Square Footage: 1000 Linear Footage: _____

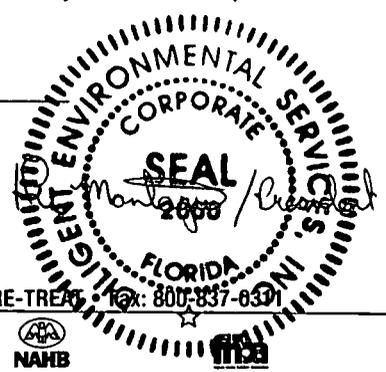
As per 104.2.6 FBC - If soil chemical barrier method for termite prevention is used. Final exterior treatment shall be completed prior to final building approval.

Certificate of Compliance: This building has been treated in accordance with the rules and laws established by the Florida Department of Agriculture and Consumer Services. Further, the treatment complies with the Florida Building Code.

If this notice is for the final exterior treatment, initial and date this line _____

Applicator Ron Barnes Date 4-14-05

Customer Signature Box



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/29, 2008 5 Page 3 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6577	LANGER	POOL DECK	PASS	
15	3 N. LOFTING WY			INSPECTOR: <i>[Signature]</i>
	OLYMPIC POOLS			
7497	PETERSON	FOOTER FENCE	PASS	
10A	49 RIO VISTA			INSPECTOR: <i>[Signature]</i>
	DRIFTWOOD			
6772	ELDER	BEAM-BATHUB	PASS	TIE BM ON NORTH
4	4 MARGHERITA			INSPECTOR: <i>[Signature]</i>
	OLB			
		DOCK	—	DOES NOT CONFORM
11	20 SIMARA			INSPECTOR: <i>[Signature]</i>
	JOHNSTON	FINAL	PASS	<u>CLOSE</u>
1A	34 W. HIGH PT.			INSPECTOR: <i>[Signature]</i>
	MASTERPIECE			
				INSPECTOR:
				INSPECTOR:

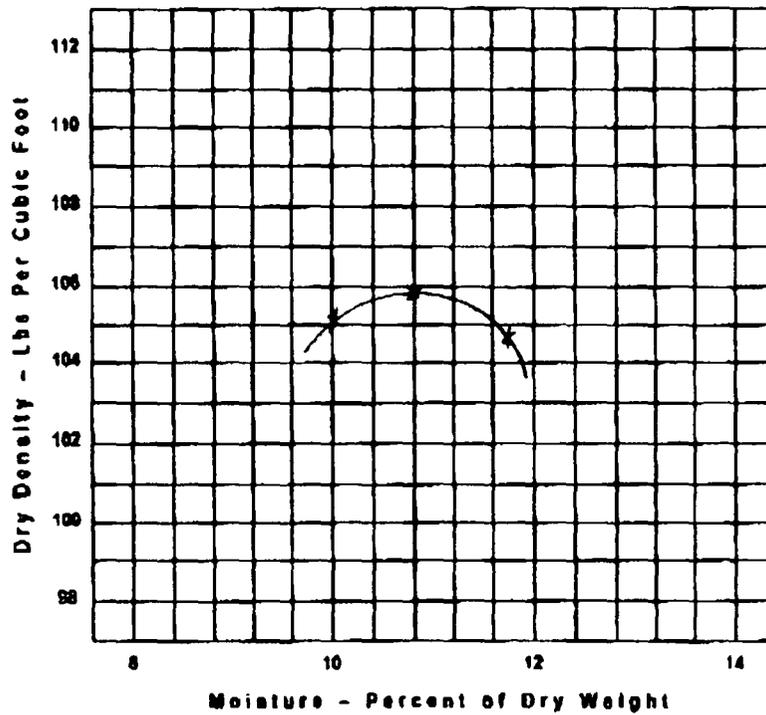
OTHER: _____

COASTAL TESTING LABORATORY, L.L.C.
PO BOX 2023
PALM CITY, FLORIDA 34991-2023
772.220.6688

MOISTURE DENSITY RELATIONSHIP

ASTM D 1557-02E1

DATE : May 10, 2005
CONTRACTOR : Rob Elder
JOB NUMBER : 05-0530
PERMIT NUMBER : 6772



COASTAL TESTING LABORATORY, L.L.C.
PO BOX 2023
PALM CITY, FLORIDA 34991-2023
772.220.6688

COMPACTION TEST REPORT

ASTM D 2922-04

DATE : May 10, 2005
JOB NUMBER : 05-0530
PERMIT NUMBER : 6772
CLIENT : Rob Elder
CONTRACTOR : Rob Elder
JOB LEGAL : N/A
JOB ADDRESS : 4 Margarita Drive
Sewalls Point, FL

SOIL CLASSIFICATION & REMARKS : A3 Friable brown sandy soil

TEST SAMPLE LOCATION : 10' IS LR Corner - Center of Pad - 10' IS RF
Corner ~ Rear Deck

	<u>IN PLACE DRY DENSITY</u>	<u>MAXIMUM DRY DENSITY</u>	<u>% COMPACTION</u>
1)	103.0	105.8	97.4
2)	102.8	105.8	97.2
3)	103.6	105.8	97.9

RESPECTFULLY SUBMITTED:

Ernesto Velasco
ERNESTO VELASCO, P.E.

DONALD OSTEEN
President
P. ALLEN OSTEEN
Executive Vice President

CHARLIE MARTINEZ
Vice President
Truss Division

FORT PIERCE
MELBOURNE



#6772
4 MARGARITA

PROJECT NAME AND ADDRESS: Elder Res.

LOT: _____ COUNTY: Martin

FILE

TRUSS COMPANY: East Coast Lumber & Supply Company

TRUSS ENGINEERING PROGRAM: Robbins Engineering Inc.

CONTRACTOR/BUILDER: Elder

MODEL: Custom

OCCUPANCY: SFR MULTI-FAMILY COMMERCIAL INDUSTRIAL

ENGINEER OF RECORD: Unknown

STATEMENT:

In accordance with the Florida Administrative Code 61G15S-31.003 (3)(c), I am the "Truss Design Engineer". The trusses listed on the attached index sheet are designed in accordance with the Florida Building Code 2001,2309.2.2 and the criteria listed below:

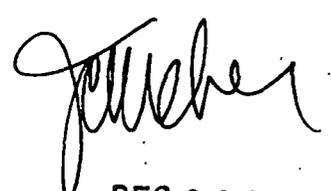
Design criteria: ASCE 7-98, <u>140</u> MPH	Roof	Floors
Exposure: <input checked="" type="checkbox"/> B <input type="checkbox"/> C	Top chord live load: <u>20</u> P.S.F.	<u>40</u>
Bldg Type: <input checked="" type="checkbox"/> Enclosed <input type="checkbox"/> Open	Top chord dead load: <u>15</u> P.S.F.	<u>10</u>
<input type="checkbox"/> Part Enclosed	Bottom chord live load: <u>10</u> P.S.F.	<u>00</u>
Truss Design Engineer: John C. Webber	Bottom chord dead load: <u>5</u> P.S.F.	<u>05</u>
Address: 5285 St Lucie Blvd.	Total: <u>48</u>	<u>55</u>
Ft. Pierce, Fl 34946	Duration Factor: <u>1.25</u>	<u>1.00</u>
	Mean Height: <u>35'-0"</u>	<u>35'-0"</u>

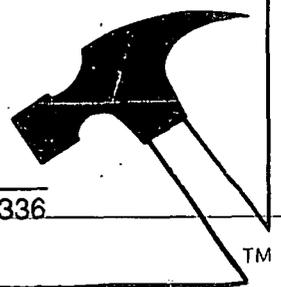
Attached is an index sheet submitted in accordance with rule 61G15-23.002 (2). Engineering sheets and Typical Detail sheets are photocopies of the original design and approved by me.

As witness by my seal, I hereby certified that the above information is true and correct to the best of my knowledge and belief.

NAME: John C. Webber P.E.
CERTIFICATION #: 17455

DATE: DEC 20 2004


DEC 20 2004



FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: ELDER RESIDENCE Address: City, State: , Owner: Climate Zone: South	Builder: Permitting Office: Permit Number: Jurisdiction Number:
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<table style="width: 100%; border-collapse: collapse;"> <tr><td>1. New construction or existing</td><td style="text-align: right;">New</td><td style="text-align: right;">___</td></tr> <tr><td>2. Single family or multi-family</td><td style="text-align: right;">Single family</td><td style="text-align: right;">___</td></tr> <tr><td>3. Number of units, if multi-family</td><td style="text-align: right;">1</td><td style="text-align: right;">___</td></tr> <tr><td>4. Number of Bedrooms</td><td style="text-align: right;">4</td><td style="text-align: right;">___</td></tr> <tr><td>5. Is this a worst case?</td><td style="text-align: right;">No</td><td style="text-align: right;">___</td></tr> <tr><td>6. Conditioned floor area (ft²)</td><td style="text-align: right;">4218 ft²</td><td style="text-align: right;">___</td></tr> <tr><td>7. Glass area & type</td><td style="text-align: right;">Single Pane</td><td style="text-align: right;">Double Pane</td></tr> <tr><td> a. Clear glass, default U-factor</td><td style="text-align: right;">6.9 ft²</td><td style="text-align: right;">0.0 ft²</td></tr> <tr><td> b. Default tint</td><td style="text-align: right;">866.7 ft²</td><td style="text-align: right;">0.0 ft²</td></tr> <tr><td> c. Labeled U or SHGC</td><td style="text-align: right;">0.0 ft²</td><td style="text-align: right;">0.0 ft²</td></tr> <tr><td>8. Floor types</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> a. Raised Wood, Post or Pier</td><td style="text-align: right;">ft²</td><td style="text-align: right;">___</td></tr> <tr><td> b. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> c. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td>9. Wall types</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> a. Frame, Wood, Exterior</td><td style="text-align: right;">R=11.0, 752.0 ft²</td><td style="text-align: right;">___</td></tr> <tr><td> b. Concrete, Int Insul, Exterior</td><td style="text-align: right;">R=4.1, 3174.0 ft²</td><td style="text-align: right;">___</td></tr> <tr><td> c. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> d. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> e. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td>10. Ceiling types</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> a. Under Attic</td><td style="text-align: right;">R=30.0, 2579.0 ft²</td><td style="text-align: right;">___</td></tr> <tr><td> b. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> c. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td>11. Ducts</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> a. Sup: Unc. Ret: Unc. AH: Interior</td><td style="text-align: right;">Sup. R=6.0, 200.0 ft²</td><td style="text-align: right;">___</td></tr> <tr><td> b. 2 Others</td><td style="text-align: right;">400.0 ft</td><td style="text-align: right;">___</td></tr> </table>	1. New construction or existing	New	___	2. Single family or multi-family	Single family	___	3. Number of units, if multi-family	1	___	4. Number of Bedrooms	4	___	5. Is this a worst case?	No	___	6. Conditioned floor area (ft ²)	4218 ft ²	___	7. Glass area & type	Single Pane	Double Pane	a. Clear glass, default U-factor	6.9 ft ²	0.0 ft ²	b. Default tint	866.7 ft ²	0.0 ft ²	c. Labeled U or SHGC	0.0 ft ²	0.0 ft ²	8. Floor types		___	a. Raised Wood, Post or Pier	ft ²	___	b. N/A		___	c. N/A		___	9. Wall types		___	a. Frame, Wood, Exterior	R=11.0, 752.0 ft ²	___	b. Concrete, Int Insul, Exterior	R=4.1, 3174.0 ft ²	___	c. N/A		___	d. N/A		___	e. N/A		___	10. Ceiling types		___	a. Under Attic	R=30.0, 2579.0 ft ²	___	b. N/A		___	c. N/A		___	11. Ducts		___	a. Sup: Unc. Ret: Unc. AH: Interior	Sup. 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Electric Strip</td><td style="text-align: right;">Cap: 34.0 kBtu/hr</td><td style="text-align: right;">___</td></tr> <tr><td></td><td style="text-align: right;">COP: 1.00</td><td style="text-align: right;">___</td></tr> <tr><td> b. Electric Strip</td><td style="text-align: right;">Cap: 34.0 kBtu/hr</td><td style="text-align: right;">___</td></tr> <tr><td></td><td style="text-align: right;">COP: 1.00</td><td style="text-align: right;">___</td></tr> <tr><td> c. Electric Strip</td><td style="text-align: right;">Cap: 16.0 kBtu/hr</td><td style="text-align: right;">___</td></tr> <tr><td></td><td style="text-align: right;">COP: 1.00</td><td style="text-align: right;">___</td></tr> <tr><td>14. Hot water systems</td><td></td><td></td></tr> <tr><td> a. Electric Resistance</td><td style="text-align: right;">Cap: 52.0 gallons</td><td style="text-align: right;">___</td></tr> <tr><td></td><td style="text-align: right;">EF: 0.88</td><td style="text-align: right;">___</td></tr> <tr><td> b. N/A</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> c. Conservation credits</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> (HR-Heat recovery, Solar</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> DHP-Dedicated heat pump)</td><td></td><td style="text-align: right;">___</td></tr> <tr><td>15. HVAC credits</td><td style="text-align: right;">MZ-C, MZ-H</td><td style="text-align: right;">___</td></tr> <tr><td> (CF-Ceiling fan, CV-Cross ventilation,</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> HF-Whole house fan,</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> PT-Programmable Thermostat,</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> MZ-C-Multizone cooling,</td><td></td><td style="text-align: right;">___</td></tr> <tr><td> MZ-H-Multizone heating)</td><td></td><td style="text-align: right;">___</td></tr> </table>	12. Cooling systems			a. 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a. Sup: Unc. Ret: Unc. AH: Interior	Sup. R=6.0, 200.0 ft ²	___																																																																																																																																																																	
b. 2 Others	400.0 ft	___																																																																																																																																																																	
12. Cooling systems																																																																																																																																																																			
a. Central Unit	Cap: 24.6 kBtu/hr	___																																																																																																																																																																	
	SEER: 13.00	___																																																																																																																																																																	
b. Central Unit	Cap: 60.5 kBtu/hr	___																																																																																																																																																																	
	SEER: 14.00	___																																																																																																																																																																	
c. Central Unit	Cap: 45.0 kBtu/hr	___																																																																																																																																																																	
	SEER: 14.00	___																																																																																																																																																																	
13. Heating systems																																																																																																																																																																			
a. Electric Strip	Cap: 34.0 kBtu/hr	___																																																																																																																																																																	
	COP: 1.00	___																																																																																																																																																																	
b. Electric Strip	Cap: 34.0 kBtu/hr	___																																																																																																																																																																	
	COP: 1.00	___																																																																																																																																																																	
c. Electric Strip	Cap: 16.0 kBtu/hr	___																																																																																																																																																																	
	COP: 1.00	___																																																																																																																																																																	
14. Hot water systems																																																																																																																																																																			
a. Electric Resistance	Cap: 52.0 gallons	___																																																																																																																																																																	
	EF: 0.88	___																																																																																																																																																																	
b. N/A		___																																																																																																																																																																	
c. Conservation credits		___																																																																																																																																																																	
(HR-Heat recovery, Solar		___																																																																																																																																																																	
DHP-Dedicated heat pump)		___																																																																																																																																																																	
15. HVAC credits	MZ-C, MZ-H	___																																																																																																																																																																	
(CF-Ceiling fan, CV-Cross ventilation,		___																																																																																																																																																																	
HF-Whole house fan,		___																																																																																																																																																																	
PT-Programmable Thermostat,		___																																																																																																																																																																	
MZ-C-Multizone cooling,		___																																																																																																																																																																	
MZ-H-Multizone heating)		___																																																																																																																																																																	

Glass/Floor Area: 0.21	Total as-built points: 58739	PASS
	Total base points: 61276	

I hereby certify that the plans and specifications covered by this calculation are in compliance with the Florida Energy Code.

PREPARED BY: *[Signature]*

DATE: 7/18/2004

I hereby certify that this building, as designed, is in compliance with the Florida Energy Code.

OWNER/AGENT: _____

DATE: _____

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



BUILDING OFFICIAL: _____

DATE: _____

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT								
GLASS TYPES .18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang			Area X SPM X SOF = Points				
					Ornt	Len	Hgt					
.18	4218.0	32.50	24875.3	Single, Tint	W	0.0	0.0	12.5	58.39	1.00	729.9	
				Single, Tint	W	0.0	0.0	48.0	58.39	1.00	2802.9	
				Single, Tint	N	14.0	9.0	48.0	29.33	0.66	930.2	
				Single, Tint	W	16.0	6.0	16.0	58.39	0.41	381.2	
				Single, Tint	NW	12.0	7.0	16.0	39.52	0.58	369.6	
				Single, Tint	N	20.0	7.0	16.0	29.33	0.61	284.4	
				Single, Tint	W	10.0	19.0	96.0	58.39	0.73	4118.5	
				Single, Tint	W	10.0	10.0	32.0	58.39	0.56	1050.6	
				Single, Tint	NW	10.0	7.0	16.0	39.52	0.61	385.0	
				Single, Tint	N	0.0	0.0	6.9	29.33	1.00	201.2	
				Single, Tint	N	0.0	0.0	32.0	29.33	1.00	938.5	
				Single, Tint	N	0.0	0.0	4.9	29.33	1.00	143.2	
				Single, Tint	E	0.0	0.0	36.1	65.40	1.00	2361.7	
				Single, Tint	E	0.0	0.0	48.0	65.40	1.00	3139.2	
				Single, Tint	S	0.0	0.0	4.0	55.34	1.00	221.3	
				Single, Tint	E	8.0	13.0	48.0	65.40	0.67	2112.3	
				Single, Tint	E	8.0	5.0	6.9	65.40	0.43	193.5	
				Single, Tint	E	8.0	10.0	48.0	65.40	0.59	1851.7	
				Single, Tint	E	10.0	10.0	12.0	65.40	0.53	418.2	
				Single, Tint	S	0.0	0.0	12.0	55.34	1.00	664.0	
				Single, Tint	E	0.0	0.0	4.0	65.40	1.00	261.6	
				Single, Tint	S	0.0	0.0	12.0	55.34	1.00	664.0	
				Single, Tint	S	0.0	0.0	8.0	55.34	1.00	442.7	
				Single, Tint	E	0.0	0.0	4.0	65.40	1.00	261.6	
				Single, Tint	S	0.0	0.0	18.8	55.34	1.00	1037.6	
				Single, Tint	W	0.0	0.0	12.5	58.39	1.00	729.9	
				Single, Tint	W	0.0	0.0	112.0	58.39	1.00	6540.2	
				Single, Tint	N	0.0	0.0	32.0	29.33	1.00	938.5	
				Single, Tint	E	0.0	0.0	22.2	65.40	1.00	1453.3	
				Single, Tint	S	13.0	9.0	21.0	55.34	0.47	551.5	
				Single, Tint	E	7.0	9.0	21.0	65.40	0.60	822.2	
				Single, Tint	E	7.0	9.0	40.0	65.40	0.60	1566.0	
				Single, Clear	E	0.0	0.0	6.9	78.71	1.00	540.0	
				As-Built Total:				873.5	39106.5			
WALL TYPES				Area X BSPM = Points		Type		R-Value		Area X SPM = Points		
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior		11.0	752.0	2.70	2030.4			
Exterior	3926.0	2.70	10600.2	Concrete, Int Insul, Exterior		4.1	3174.0	2.32	7347.8			
Base Total:	3926.0	10600.2					As-Built Total:		3926.0	9378.2		

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT						
DOOR TYPES	Area X BSPM = Points			Type	Area X SPM = Points					
Adjacent	0.0	0.00	0.0	Exterior Insulated	22.0	6.40	140.8			
Exterior	22.0	6.40	140.8							
Base Total:	22.0		140.8	As-Built Total:	22.0		140.8			
CEILING TYPES	Area X BSPM = Points			Type	R-Value	Area X SPM X SCM = Points				
Under Attic	2579.0	2.80	7221.2	Under Attic	30.0	2579.0	2.77 X 1.00	7143.8		
Base Total:	2579.0		7221.2	As-Built Total:		2579.0		7143.8		
FLOOR TYPES	Area X BSPM = Points			Type	R-Value	Area X SPM = Points				
Slab	0.0(p)	0.0	0.0	Raised Wood, Post or Pier	19.0	2579.0	1.58	4067.1		
Raised	2579.0	-2.16	-5570.6							
Base Total:			-5570.6	As-Built Total:		2579.0		4067.1		
INFILTRATION	Area X BSPM = Points			Area X SPM = Points						
	4218.0	18.79	79256.2			4218.0	18.79	79256.2		
Summer Base Points: 116323.1				Summer As-Built Points: 139092.7						
Total Summer Points	X System Multiplier	=	Cooling Points	Total Component	X Cap Ratio	X Duct Multiplier	X System Multiplier	X Credit Multiplier	=	Cooling Points
					(DM x DSM x AHU)					
				139092.7	0.189	(1.073 x 1.165 x 0.90)	0.262	0.950		7864.9
				139092.7	0.465	(1.073 x 1.165 x 1.08)	0.244	0.950		17960.9
				139092.7	0.346	(1.073 x 1.165 x 0.90)	0.244	0.950		13359.4
116323.1	0.4266		49623.4	139092.7	1.00	1.200	0.247	0.950		39152.2

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT							
GLASS TYPES .18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang			Area X WPM X WOF = Points			
					Ormt	Len	Hgt				
.18	4218.0	2.36	1791.8	Single, Tint	W	0.0	0.0	12.5	5.65	1.00	70.6
				Single, Tint	W	0.0	0.0	48.0	5.65	1.00	271.0
				Single, Tint	N	14.0	9.0	48.0	6.11	0.96	280.9
				Single, Tint	W	16.0	6.0	16.0	5.65	1.03	93.2
				Single, Tint	NW	12.0	7.0	16.0	6.09	0.96	93.4
				Single, Tint	N	20.0	7.0	16.0	6.11	0.95	92.7
				Single, Tint	W	10.0	19.0	96.0	5.65	1.01	546.5
				Single, Tint	W	10.0	10.0	32.0	5.65	1.03	185.4
				Single, Tint	NW	10.0	7.0	16.0	6.09	0.96	93.8
				Single, Tint	N	0.0	0.0	6.9	6.11	1.00	41.9
				Single, Tint	N	0.0	0.0	32.0	6.11	1.00	195.6
				Single, Tint	N	0.0	0.0	4.9	6.11	1.00	29.8
				Single, Tint	E	0.0	0.0	36.1	5.05	1.00	182.5
				Single, Tint	E	0.0	0.0	48.0	5.05	1.00	242.6
				Single, Tint	S	0.0	0.0	4.0	4.79	1.00	19.2
				Single, Tint	E	8.0	13.0	48.0	5.05	1.06	257.5
				Single, Tint	E	8.0	5.0	6.9	5.05	1.19	41.1
				Single, Tint	E	8.0	10.0	48.0	5.05	1.08	263.1
				Single, Tint	E	10.0	10.0	12.0	5.05	1.11	67.4
				Single, Tint	S	0.0	0.0	12.0	4.79	1.00	57.5
				Single, Tint	E	0.0	0.0	4.0	5.05	1.00	20.2
				Single, Tint	S	0.0	0.0	12.0	4.79	1.00	57.5
				Single, Tint	S	0.0	0.0	8.0	4.79	1.00	38.4
				Single, Tint	E	0.0	0.0	4.0	5.05	1.00	20.2
				Single, Tint	S	0.0	0.0	18.8	4.79	1.00	89.9
				Single, Tint	W	0.0	0.0	12.5	5.65	1.00	70.6
				Single, Tint	W	0.0	0.0	112.0	5.65	1.00	632.3
				Single, Tint	N	0.0	0.0	32.0	6.11	1.00	195.6
				Single, Tint	E	0.0	0.0	22.2	5.05	1.00	112.3
				Single, Tint	S	13.0	9.0	21.0	4.79	1.40	140.9
				Single, Tint	E	7.0	9.0	21.0	5.05	1.08	114.8
				Single, Tint	E	7.0	9.0	40.0	5.05	1.08	218.7
				Single, Clear	E	0.0	0.0	6.9	4.77	1.00	32.7
				As-Built Total:							4869.9
WALL TYPES	Area X BWPM = Points			Type	R-Value	Area X WPM = Points					
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior	11.0	752.0			0.60	451.2	
Exterior	3926.0	0.60	2355.6	Concrete, Int Insul, Exterior	4.1	3174.0			1.03	3285.1	
Base Total:	3926.0			As-Built Total:				3926.0	3736.3		

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT					
DOOR TYPES Area X BWPM = Points				Type	Area X WPM = Points				
Adjacent	0.0	0.00	0.0	Exterior Insulated	22.0	1.80	39.6		
Exterior	22.0	1.80	39.6						
Base Total:	22.0		39.6	As-Built Total:	22.0		39.6		
CEILING TYPES Area X BWPM = Points				Type	R-Value	Area X WPM X WCM = Points			
Under Attic	2579.0	0.10	257.9	Under Attic	30.0	2579.0	0.10 X 1.00 257.9		
Base Total:	2579.0		257.9	As-Built Total:		2579.0	257.9		
FLOOR TYPES Area X BWPM = Points				Type	R-Value	Area X WPM = Points			
Slab	0.0(p)	0.0	0.0	Raised Wood, Post or Pier	19.0	2579.0	-0.01 -18.1		
Raised	2579.0	-0.28	-722.1						
Base Total:			-722.1	As-Built Total:		2579.0	-18.1		
INFILTRATION Area X BWPM = Points				Area X WPM = Points					
	4218.0	-0.06	-253.1		4218.0	-0.06	-253.1		
Winter Base Points:			3469.7	Winter As-Built Points:			8632.6		
Total Winter X System = Heating Points	X Multiplier	= Heating Points		Total X Cap X Duct X System X Credit = Heating Component Ratio Multiplier Multiplier Multiplier			= Heating Points		
				(DM x DSM x AHU)					
				8632.6	0.405	(1.099 x 1.137 x 0.91)	1.000	0.950	4092.5
				8632.6	0.405	(1.099 x 1.137 x 1.14)	1.000	0.950	4092.5
				8632.6	0.190	(1.099 x 1.137 x 0.91)	1.000	0.950	1925.9
3469.7	0.6274	2176.9		8632.6	1.00	1.233	1.000	0.950	10111.0

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,	PERMIT #:
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BASE				AS-BUILT										
WATER HEATING				Tank	EF	Number of	X	Tank	X	Multiplier	X	Credit	=	Total
Number of	X	Multiplier	=	Volume		Bedrooms		Ratio				Multiplier		
Bedrooms														
4		2369.00	=	52.0	0.88	4		1.00		2369.00		1.00	=	9476.0
													As-Built Total:	9476.0

CODE COMPLIANCE STATUS													
BASE					AS-BUILT								
Cooling	+	Heating	+	Hot Water	=	Total	Cooling	+	Heating	+	Hot Water	=	Total
Points		Points		Points		Points	Points		Points		Points		Points
49623		2177		9476		61276	39152		10111		9476		58739

PASS



ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 84.9

The higher the score, the more efficient the home.

. . . .

<p>1. New construction or existing New <input type="checkbox"/></p> <p>2. Single family or multi-family Single family <input type="checkbox"/></p> <p>3. Number of units, if multi-family 1 <input type="checkbox"/></p> <p>4. Number of Bedrooms 4 <input type="checkbox"/></p> <p>5. Is this a worst case? No <input type="checkbox"/></p> <p>6. Conditioned floor area (ft²) 4218 ft²</p> <p>7. Glass area & type</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;"></td> <td style="width: 20%; text-align: center;">Single Pane</td> <td style="width: 20%; text-align: center;">Double Pane</td> <td style="width: 30%;"></td> </tr> <tr> <td>a. Clear - single pane</td> <td style="text-align: center;">6.9 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td><input type="checkbox"/></td> </tr> <tr> <td>b. Clear - double pane</td> <td style="text-align: center;">866.7 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td><input type="checkbox"/></td> </tr> <tr> <td>c. Tint/other SHGC - single pane</td> <td style="text-align: center;">0.0 ft²</td> <td style="text-align: center;">0.0 ft²</td> <td><input type="checkbox"/></td> </tr> <tr> <td>d. Tint/other SHGC - double pane</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </table> <p>8. Floor types</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">a. Raised Wood, Post or Pier</td> <td style="width: 20%; text-align: center;">R=19.0,</td> <td style="width: 20%; text-align: center;">2579.0ft²</td> <td style="width: 30%;"><input type="checkbox"/></td> </tr> <tr> <td>b. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>c. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </table> <p>9. Wall types</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">a. Frame, Wood, Exterior</td> <td style="width: 20%; text-align: center;">R=11.0,</td> <td style="width: 20%; text-align: center;">752.0 ft²</td> <td style="width: 30%;"><input type="checkbox"/></td> </tr> <tr> <td>b. Concrete, Int Insul, Exterior</td> <td style="text-align: center;">R=4.1,</td> <td style="text-align: center;">3174.0 ft²</td> <td><input type="checkbox"/></td> </tr> <tr> <td>c. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>d. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>e. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </table> <p>10. Ceiling types</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">a. Under Attic</td> <td style="width: 20%; text-align: center;">R=30.0,</td> <td style="width: 20%; text-align: center;">2579.0 ft²</td> <td style="width: 30%;"><input type="checkbox"/></td> </tr> <tr> <td>b. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>c. N/A</td> <td></td> <td></td> <td><input type="checkbox"/></td> </tr> </table> <p>11. Ducts</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">a. Sup: Unc. Ret: Unc. AH: Interior</td> <td style="width: 20%; text-align: center;">Sup. R=6.0,</td> <td style="width: 20%; text-align: center;">200.0 ft²</td> <td style="width: 30%;"><input type="checkbox"/></td> </tr> <tr> <td>b. 2 Others</td> <td></td> <td style="text-align: center;">400.0 ft</td> <td><input type="checkbox"/></td> </tr> </table>		Single Pane	Double Pane		a. Clear - single pane	6.9 ft ²	0.0 ft ²	<input type="checkbox"/>	b. Clear - double pane	866.7 ft ²	0.0 ft ²	<input type="checkbox"/>	c. Tint/other SHGC - single pane	0.0 ft ²	0.0 ft ²	<input type="checkbox"/>	d. Tint/other SHGC - double pane			<input type="checkbox"/>	a. Raised Wood, Post or Pier	R=19.0,	2579.0ft ²	<input type="checkbox"/>	b. N/A			<input type="checkbox"/>	c. N/A			<input type="checkbox"/>	a. Frame, Wood, Exterior	R=11.0,	752.0 ft ²	<input type="checkbox"/>	b. Concrete, Int Insul, Exterior	R=4.1,	3174.0 ft ²	<input type="checkbox"/>	c. N/A			<input type="checkbox"/>	d. N/A			<input type="checkbox"/>	e. N/A			<input type="checkbox"/>	a. Under Attic	R=30.0,	2579.0 ft ²	<input type="checkbox"/>	b. N/A			<input type="checkbox"/>	c. N/A			<input type="checkbox"/>	a. Sup: Unc. Ret: Unc. AH: Interior	Sup. R=6.0,	200.0 ft ²	<input type="checkbox"/>	b. 2 Others		400.0 ft	<input type="checkbox"/>	<p>12. Cooling systems</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 40%;">a. Central Unit</td> <td style="width: 20%;"></td> <td style="width: 40%;">Cap: 24.6 kBtu/hr <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>SEER: 13.00 <input type="checkbox"/></td> </tr> <tr> <td>b. Central Unit</td> <td></td> <td>Cap: 60.5 kBtu/hr <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>SEER: 14.00 <input type="checkbox"/></td> </tr> <tr> <td>c. Central Unit</td> <td></td> <td>Cap: 45.0 kBtu/hr <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>SEER: 14.00 <input type="checkbox"/></td> </tr> </table> <p>13. Heating systems</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 40%;">a. Electric Strip</td> <td style="width: 20%;"></td> <td style="width: 40%;">Cap: 34.0 kBtu/hr <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>COP: 1.00 <input type="checkbox"/></td> </tr> <tr> <td>b. Electric Strip</td> <td></td> <td>Cap: 34.0 kBtu/hr <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>COP: 1.00 <input type="checkbox"/></td> </tr> <tr> <td>c. Electric Strip</td> <td></td> <td>Cap: 16.0 kBtu/hr <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>COP: 1.00 <input type="checkbox"/></td> </tr> </table> <p>14. Hot water systems</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 40%;">a. Electric Resistance</td> <td style="width: 20%;"></td> <td style="width: 40%;">Cap: 52.0 gallons <input type="checkbox"/></td> </tr> <tr> <td></td> <td></td> <td>EF: 0.88 <input type="checkbox"/></td> </tr> <tr> <td>b. N/A</td> <td></td> <td><input type="checkbox"/></td> </tr> <tr> <td>c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump)</td> <td></td> <td><input type="checkbox"/></td> </tr> </table> <p>15. HVAC credits MZ-C, MZ-H <input type="checkbox"/></p> <p>(CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, MZ-C-Multizone cooling, MZ-H-Multizone heating)</p>	a. Central Unit		Cap: 24.6 kBtu/hr <input type="checkbox"/>			SEER: 13.00 <input type="checkbox"/>	b. Central Unit		Cap: 60.5 kBtu/hr <input type="checkbox"/>			SEER: 14.00 <input type="checkbox"/>	c. Central Unit		Cap: 45.0 kBtu/hr <input type="checkbox"/>			SEER: 14.00 <input type="checkbox"/>	a. Electric Strip		Cap: 34.0 kBtu/hr <input type="checkbox"/>			COP: 1.00 <input type="checkbox"/>	b. Electric Strip		Cap: 34.0 kBtu/hr <input type="checkbox"/>			COP: 1.00 <input type="checkbox"/>	c. Electric Strip		Cap: 16.0 kBtu/hr <input type="checkbox"/>			COP: 1.00 <input type="checkbox"/>	a. Electric Resistance		Cap: 52.0 gallons <input type="checkbox"/>			EF: 0.88 <input type="checkbox"/>	b. N/A		<input type="checkbox"/>	c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump)		<input type="checkbox"/>
	Single Pane	Double Pane																																																																																																																							
a. Clear - single pane	6.9 ft ²	0.0 ft ²	<input type="checkbox"/>																																																																																																																						
b. Clear - double pane	866.7 ft ²	0.0 ft ²	<input type="checkbox"/>																																																																																																																						
c. Tint/other SHGC - single pane	0.0 ft ²	0.0 ft ²	<input type="checkbox"/>																																																																																																																						
d. Tint/other SHGC - double pane			<input type="checkbox"/>																																																																																																																						
a. Raised Wood, Post or Pier	R=19.0,	2579.0ft ²	<input type="checkbox"/>																																																																																																																						
b. N/A			<input type="checkbox"/>																																																																																																																						
c. N/A			<input type="checkbox"/>																																																																																																																						
a. Frame, Wood, Exterior	R=11.0,	752.0 ft ²	<input type="checkbox"/>																																																																																																																						
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c. N/A			<input type="checkbox"/>																																																																																																																						
d. N/A			<input type="checkbox"/>																																																																																																																						
e. N/A			<input type="checkbox"/>																																																																																																																						
a. Under Attic	R=30.0,	2579.0 ft ²	<input type="checkbox"/>																																																																																																																						
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c. Central Unit		Cap: 45.0 kBtu/hr <input type="checkbox"/>																																																																																																																							
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b. N/A		<input type="checkbox"/>																																																																																																																							
c. Conservation credits (HR-Heat recovery, Solar DHP-Dedicated heat pump)		<input type="checkbox"/>																																																																																																																							

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

Builder Signature: _____ Date: _____

Address of New Home: _____ City/FL Zip: _____



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

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: , , ,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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



Project Summary
UNIT ONE
ELDER RESIDENCE

Job:
 Date: 4/6/2004
 By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

Project Information

For: ELDER RESIDENCE
 SEWALLS POINT, FL

Notes:

Design Information

Weather: West Palm Beach, FL , US

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range **M**
 Relative humidity 50 %
 Moisture difference 56 gr/lb

Heating Summary

Building heat loss 29060 Btuh
 Ventilation air 74 cfm
 Ventilation air loss 2021 Btuh
 Design heat load 31080 Btuh

Sensible Cooling Equipment Load Sizing

Structure 39655 Btuh
 Ventilation 1310 Btuh
 Design temperature swing 3.0 °F
 Use mfg. data **Y**
 Rate/swing multiplier 1.00
 Total sens. equip. load 40965 Btuh

Infiltration

Method	Simplified	
Construction quality	Average	
Fireplaces	0	
	Heating	Cooling
Area (ft ²)	1720	1720
Volume (ft ³)	21995	21995
Air changes/hour	0.34	0.15
Equiv. AVF (cfm)	123	55

Latent Cooling Equipment Load Sizing

Internal gains 0 Btuh
 Ventilation 2809 Btuh
 Infiltration 2092 Btuh
 Total latent equip. load 5473 Btuh
 Total equipment load 46438 Btuh
 Req. total capacity at 0.73 SHR 4.7 ton

Heating Equipment Summary

Make n/a
 Trade n/a
 n/a

Efficiency	100.0 EFF
Heating input	0 Btuh
Heating output	0 Btuh
Heating temp rise	0 °F
Actual heating fan	0 cfm
Heating air flow factor	0.000 cfm/Btuh

Space thermostat

Cooling Equipment Summary

Make Trane
 Trade E. XL 1400
 2TTX4060A
 TWE065E13

Efficiency	14.0 SEER
Sensible cooling	44200 Btuh
Latent cooling	16300 Btuh
Total cooling	60500 Btuh
Actual cooling fan	1800 cfm
Cooling air flow factor	0.045 cfm/Btuh

Load sensible heat ratio 88 %

Bold/italic values have been manually overridden

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Right-J8 Worksheet UNIT ONE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name				UNIT ONE				LAUNDRY						
2 Exposed wall				155.8 ft				20.0 ft						
3 Ceiling height				12.8 ft				9.4 ft						
4 Room dimensions				p				13.0 x 7.0 ft						
5 Room area				1720.0 ft ²				91.0 ft ²						
	Ty	Construction number	U-value (Btuh/R ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	208	144	514	302	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	16	0	449	594	0	0	0	0
11	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	10A-b	0.970	n	24.25	24.61	48	0	1164	1181	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	403	264	943	362	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	7	1	196	567	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	4	1	113	299	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	96	68	2712	5171	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	32	16	904	2095	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	458	422	1510	616	66	52	187	76
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	16	16	452	598	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	20	20	583	745	13	13	379	502
	W	13A-4ocs	0.143	w	3.58	3.62	634	397	1419	1436	122	109	389	394
	G	1B-h1fm	1.130	w	28.25	102.46	13	3	379	1154	13	3	379	1154
	G	1B-h1fm	1.130	w	28.25	102.46	111	14	3144	10502	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	96	96	2328	2363	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	16	16	449	594	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	54	39	138	105	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	15	0	424	1077	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	376	376	461	980	0	0	0	0
	F	22A-tp	1.358	-	33.85	0.00	1720	156	5288	0	91	20	679	0
Envelope loss/gain									23551	30744			2014	2127
12	a) Infiltration								3386	975			363	104
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @	230			0			0				0
			Appliances @	1200			2			2400	1			1200
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								26937	34119			2377	3431
15	Duct loads						8%	16%	2123	5536	8%	16%	187	557
Total room load									29060	39655			2564	3988
Air required (cfm)									0	1800			0	181

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Right-J8 Worksheet UNIT ONE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC. FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 2 3 4 5	Room name				PANTRY				STAIRS					
	Exposed wall				5.0 ft				21.0 ft					
	Ceiling height				9.4 ft				9.4 ft					
Room dimensions				9.0 x 5.0 ft				9.0 x 16.0 ft						
Room area				45.0 ft ²				144.0 ft ²						
6	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	0	0	0	0	47	43	154	59
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	4	1	113	299
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.48	47	40	145	59	150	142	509	208
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.68	0	0	0	0	8	8	228	299
	G	1B-h1fm	1.130	s	28.25	53.68	7	7	184	243	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	0	0	0	0	0	0	0	0
	F	22A-tph	1.358	-	33.95	0.00	45	5	170	0	144	21	713	0
Envelope loss/gain									498	302			1715	885
12	a) Infiltration								91	26			381	110
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @	230	0				0	0			0	0
	Less external load		Appliances @	1200	0				0	0			0	0
	Less transfer				0				0	0			0	0
	Redistribution				0				0	0			0	0
14	Subtotal				589				328				2095	975
15	Duct loads				8%	16%			46	53			165	158
Total room load									635	381			2261	1133
Air required (cfm)									0	17			0	51

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Right-J8 Worksheet UNIT ONE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1	Room name				DINING				KITCHEN					
	Exposed wall				30.0 ft				0.0 ft					
	Ceiling height				9.4 ft				9.4 ft					
2	Room dimensions				1.0 x 252.0 ft				15.0 x 14.0 ft					
3	Room area				252.0 ft ²				210.0 ft ²					
4	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	132	84	299	176	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	10A-b	0.970	n	24.25	24.61	48	0	1164	1181	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	150	103	367	372	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	48	6	1348	4501	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	0	0	0	0	0	0	0	0
	F	22A-1ph	1.358	-	33.95	0.00	252	30	1019	0	210	0	0	0
Envelope loss/gain									4196	6230	0			
12	a) Infiltration								544	157	0			
	b) Ventilation								0	0	0			
13	Internal gains:		Occupants @	230	0				0		0		0	
	Less external load		Appliances @	1200	0				0		1		1200	
	Less transfer				0				0		0		0	
	Redistribution				0				0		0		0	
14	Subtotal				4740				6386		0		1200	
15	Duct loads				374		8%		1036		16%		195	
Total room load									5113	7422	0			
Air required (cfm)									0	337	0			

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Right-J8 Worksheet UNIT ONE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name						LIVING RM 33.0 ft				POWDER 9.0 ft				
2 Exposed wall						9.4 ft heat/cool				9.4 ft heat/cool				
3 Ceiling height						19.0 x 14.0 ft				5.0 x 6.0 ft				
4 Room dimensions														
5 Room area						266.0 ft²				30.0 ft²				
	Ty	Construction number	U-value (Btuh/ft²·F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	179	99	352	135	47	40	143	55
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	7	1	196	567
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	48	34	1356	2586	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	32	16	904	2095	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	132	124	442	180	38	38	134	55
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	8	8	226	299	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	56	56	69	146	12	12	15	31
	F	22A-tph	1.358	-	33.95	0.00	266	33	1120	0	30	9	306	0
Envelope loss/gain									4469	5441			794	708
12	a) Infiltration								598	172			163	47
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @ 230				0		0		0		0	
	Less external load		Appliances @ 1200				0		0		0		0	
	Less transfer						0		0		0		0	
	Redistribution						0		0		0		0	
14	Subtotal						5067		5613				957	
15	Duct loads						8%		16%		8%		16%	
Total room load									5467	6524			1032	877
Air required (cfm)									0	296			0	40

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Right-J8 Worksheet UNIT ONE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1	Room name				FOYER				GREAT RM					
	Exposed wall				12.0 ft				25.8 ft					
	Ceiling height				13.0 ft				19.0 ft					
2	Room dimensions				10.0 x 12.0 ft				1.0 x 562.0 ft					
3	Room area				120.0 ft ²				562.0 ft ²					
4	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	76	60	215	126
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	18	0	449	594
11	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	130	82	293	113	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	48	34	1356	2586	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	26	26	93	38	0	0	0	0
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	381	185	663	671
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	84	8	1797	6001
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	96	96	2328	2363
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	18	16	449	594
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	54	39	138	105
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	15	0	424	1077
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	5	5	6	13	303	303	371	790
	F	22A-1ph	1.358	-	33.95	0.00	120	12	407	0	562	26	874	0
Envelope loss/gain									2158	2749			7709	12323
12	a) Infiltration								301	87			946	273
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @	230					0	0			0	0
			Appliances @	1200					0	0			0	0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								2456	2836			8655	12595
15	Duct loads						8%	16%	194	460	8%	16%	682	2044
Total room load									2650	3296			9337	14639
Air required (cfm)									0	150			0	664

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Project Summary
UNIT TWO
ELDER RESIDENCE

Job:
 Date: 4/6/2004
 By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

Project Information

For: ELDER RESIDENCE
 SEWALLS POINT, FL

Notes:

Design Information

Weather: West Palm Beach, FL , US

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range **M**
 Relative humidity 50 %
 Moisture difference 56 gr/lb

Heating Summary

Building heat loss 21430 Btuh
 Ventilation air 24 cfm
 Ventilation air loss 654 Btuh
 Design heat load 22084 Btuh

Sensible Cooling Equipment Load Sizing

Structure 28668 Btuh
 Ventilation 424 Btuh
 Design temperature swing 3.0 °F
 Use mfg. data **Y**
 Rate/swing multiplier 1.00
 Total sens. equip. load 29092 Btuh

Infiltration

Method Simplified
 Construction quality Average
 Fireplaces 0

	Heating	Cooling
Area (ft ²)	1647	1647
Volume (ft ³)	15477	15477
Air changes/hour	0.58	0.26
Equiv. AVF (cfm)	150	66

Latent Cooling Equipment Load Sizing

Internal gains 600 Btuh
 Ventilation 910 Btuh
 Infiltration 2539 Btuh
 Total latent equip. load 4596 Btuh
 Total equipment load 33688 Btuh
 Req. total capacity at 0.75 SHR 3.2 ton

Heating Equipment Summary

Make n/a
 Trade n/a
 Efficiency 100.0 EFF
 Heating input 0 Btuh
 Heating output 0 Btuh
 Heating temp rise 0 °F
 Actual heating fan 0 cfm
 Heating air flow factor 0.000 cfm/Btuh
 Space thermostat

Cooling Equipment Summary

Make Trane
 Trade A0. XL 14i
 4TTX4042A1
 TWE040E13FB
 Efficiency 14.5 SEER
 Sensible cooling 33750 Btuh
 Latent cooling 11250 Btuh
 Total cooling 45000 Btuh
 Actual cooling fan 1425 cfm
 Cooling air flow factor 0.050 cfm/Btuh
 Load sensible heat ratio 86 %

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet UNIT TWO ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1		Room name		UNIT TWO				U STAIRS						
2		Exposed wall		226.5 ft				26.0 ft						
3		Ceiling height		9.4 ft				9.4 ft						
4		Room dimensions		p				9.0 x 17.0 ft						
5		Room area		1646.5 ft ²				153.0 ft ²						
6	Ty	Construction number	U-value (Btuh/ft ² ·F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	432	401	1432	842	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	32	0	898	1189	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	40	40	143	47	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	545	438	1568	602	85	81	288	111
	G	1B-h1fm	1.130	e	28.25	93.26	24	4	672	2011	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	7	1	196	567	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	72	51	1746	2619	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	4	1	113	299	4	1	113	299
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	517	485	1662	678	160	158	557	227
	G	10A-b	0.970	s	24.25	36.22	24	24	582	591	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	8	8	226	299	4	4	113	150
	G	1B-h1fm	1.130	s	28.25	53.66	20	20	569	753	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	517	449	1606	1625	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	20	5	569	1732	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	48	6	1348	4501	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11NO	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	80	80	285	217	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	1647	1647	2017	4292	153	153	187	399
	F	22A-tph	1.358	-	33.95	0.00	36	5	178	0	0	0	0	0
Envelope loss/gain									15809	22862			1259	1186
12	a) Infiltration								4110	1184			471	136
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @	230	3					690	0			0
	Less external load		Appliances @	1200	0					0	0			0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								19919	24736			1730	1321
15	Duct loads						8%	16%	1511	3932	8%	16%	131	210
Total room load									21430	28668			1861	1531
Air required (cfm)									0	1425			0	76

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet UNIT TWO ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC., FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name		BEDRM 4 29.0 ft						CLT3 5.0 ft						
2 Exposed wall		9.4 ft heat/cool						9.4 ft heat/cool						
3 Ceiling height		1.0 x 212.0 ft						1.0 x 37.0 ft						
4 Room dimensions		212.0 ft ²						37.0 ft ²						
5 Room area														
	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	132	84	299	115	47	47	168	65
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	48	34	1164	1746	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.48	141	137	490	200	0	0	0	0
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	4	4	113	150	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	212	212	260	553	37	37	45	96
	F	22A-tph	1.358	-	33.95	0.00	14	2	65	0	1	0	5	0
Envelope loss/gain									2390	2763			218	161
12	a)	Infiltration							528	151			91	26
	b)	Ventilation							0	0			0	0
13	Internal gains:		Occupants @	230			1			230	0			0
			Appliances @	1200			0			0	0			0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								2916	3144			309	187
15	Duct loads						8%	16%	221	500	8%	16%	23	30
Total room load									3137	3644			332	217
Air required (cfm)									0	181			0	11

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet UNIT TWO ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name		2 Exposed wall		3 Ceiling height		4 Room dimensions		5 Room area		BEDRM 3 18.0 ft heat/cool				BATH 2 2.9 ft heat/cool			
										9.4 ft		1.0 x 168.0 ft		9.4 ft		1.0 x 73.0 ft	
										168.0 ft ²				73.0 ft ²			
6	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)				
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool			
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0			
11	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0			
	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0			
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0			
	W	13A-4ocs	0.143	e	3.58	1.37	113	82	293	112	28	28	101	39			
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	e	28.25	93.26	7	1	196	567	0	0	0	0			
	G	10A-b	0.970	e	24.25	64.47	24	17	582	873	0	0	0	0			
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0			
	W	13A-4ocs	0.143	s	3.58	1.46	56	56	202	82	0	0	0	0			
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0			
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0			
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0			
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0			
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0			
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0			
	C	16B-19ad	0.049	-	1.23	2.61	168	168	206	438	73	73	89	190			
	F	22A-tph	1.358	-	33.95	0.00	8	1	22	0	0	0	0	0			
Envelope loss/gain									1500	2072			190	229			
12	a) Infiltration								326	94			54	16			
	b) Ventilation								0	0			0	0			
13	Internal gains:		Occupants @	230			1			230	0			0			
			Appliances @	1200			0			0	0			0			
	Less external load								0	0			0	0			
	Less transfer								0	0			0	0			
	Redistribution								0	0			0	0			
14	Subtotal								1826	2396			245	245			
15	Duct loads						8%	16%	139	381	8%	16%	19	39			
Total room load									1965	2777			263	284			
Air required (cfm)									0	138			0	14			

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Right-J8 Worksheet UNIT TWO ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name				BEDRM 2 41.6 ft				CLT2 11.0 ft						
2 Exposed wall				9.4 ft 1.0 x 246.0 ft heat/cool				9.4 ft 7.0 x 4.0 ft heat/cool						
3 Ceiling height														
4 Room dimensions														
5 Room area				246.0 ft ²				28.0 ft ²						
	Ty	Construction number	U-value (Btuh/ft ² .°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	141	141	504	298	38	38	134	79
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	141	117	419	161	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.28	24	4	672	2011	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.48	56	32	118	47	0	0	0	0
	G	10A-b	0.970	s	24.25	36.22	24	24	582	591	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	66	66	235	238
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	53	53	190	144	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	246	246	301	641	28	28	34	73
	F	22A-tph	1.358	-	33.95	0.00	15	3	88	0	0	0	0	0
Envelope loss/gain									2871	3892			404	390
12	a) Infiltration								755	217			199	57
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @ 230			1			230	0	0		0	0
			Appliances @ 1200			0			0	0			0	0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								3626	4339			603	448
15	Duct loads					8%	16%		275	690	8%	16%	46	71
Total room load									3901	5029			649	519
Air required (cfm)									0	250			0	28

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Right-J8 Worksheet UNIT TWO ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC. FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name				BATH 3 0.0 ft				FAMILY RM 93.0 ft						
2 Exposed wall				9.4 ft 6.0 x 11.0 ft heat/cool				9.4 ft 1.0 x 663.5 ft heat/cool						
3 Ceiling height														
4 Room dimensions														
5 Room area				66.0 ft ²				663.5 ft ²						
	Ty	Construction number	U-value (Btuh/ft ² .°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	254	222	794	467
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	32	0	898	1189
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	40	40	143	47
	W	13A-4ocs	0.143	e	3.58	1.37	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	0	0	0	0	103	83	298	121
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	20	20	589	753
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	451	383	1370	1387
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	20	5	569	1732
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	48	6	1348	4501
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	27	27	95	72
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	66	66	81	172	664	664	813	1730
	F	22A-tph	1.358	-	33.95	0.00	0	0	0	0	0	0	0	0
Envelope loss/gain									81	172			6897	11998
12	a) Infiltration								0	0			1687	486
	b) Ventilation								0	0			0	0
13	Internal gains:	Occupants @	230		0				0	0			0	0
		Appliances @	1200		0				0	0			0	0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								81	172			8584	12484
15	Duct loads						8%	16%	6	27	8%	16%	651	1985
Total room load									87	199			9235	14469
Air required (cfm)									0	10			0	719

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Project Summary
UNIT THREE
ELDER RESIDENCE

Job:
 Date: 4/6/2004
 By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

Project Information

For: ELDER RESIDENCE
 SEWALLS POINT, FL

Notes:

Design Information

Weather: West Palm Beach, FL , US

Winter Design Conditions

Outside db 45 °F
 Inside db 70 °F
 Design TD 25 °F

Summer Design Conditions

Outside db 91 °F
 Inside db 75 °F
 Design TD 16 °F
 Daily range **M**
 Relative humidity 50 %
 Moisture difference 56 gr/lb

Heating Summary

Building heat loss 14975 Btuh
 Ventilation air 19 cfm
 Ventilation air loss 531 Btuh
 Design heat load 15506 Btuh

Sensible Cooling Equipment Load Sizing

Structure 16146 Btuh
 Ventilation 344 Btuh
 Design temperature swing 3.0 °F
 Use mfg. data **y**
 Rate/swing multiplier 1.00
 Total sens. equip. load 16490 Btuh

Infiltration

Method	Simplified	
Construction quality	Average	
Fireplaces	0	
	Heating	Cooling
Area (ft ²)	862	862
Volume (ft ³)	8103	8103
Air changes/hour	0.51	0.23
Equiv. AVF (cfm)	69	31

Latent Cooling Equipment Load Sizing

Internal gains 400 Btuh
 Ventilation 738 Btuh
 Infiltration 1172 Btuh
 Total latent equip. load 2631 Btuh
 Total equipment load 19122 Btuh
 Req. total capacity at 0.74 SHR 1.9 ton

Heating Equipment Summary

Make n/a
 Trade n/a
 Efficiency 100.0 EFF
 Heating input 0 Btuh
 Heating output 0 Btuh
 Heating temp rise 0 °F
 Actual heating fan 0 cfm
 Heating air flow factor 0.000 cfm/Btuh
 Space thermostat

Cooling Equipment Summary

Make Trane
 Trade A0. XL 14i
 4TTX4024A1
 4TEE3F31A
 Efficiency 13.7 SEER
 Sensible cooling 18100 Btuh
 Latent cooling 6500 Btuh
 Total cooling 24600 Btuh
 Actual cooling fan 800 cfm
 Cooling air flow factor 0.050 cfm/Btuh
 Load sensible heat ratio 86 %

Bold/italic values have been manually overridden

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet UNIT THREE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC. FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

		UNIT THREE 104.6 ft							MSTR BATH 23.0 ft						
		9.4 ft p							9.4 ft heat/cool 17.0 x 6.0 ft						
		862.0 ft²							102.0 ft²						
1	Room name		U-value (Btuh/ft²·°F)	Or	HTM (Btuh/ft²)		Area (ft²) or perimeter (ft)		Load (Btuh)		Area (ft²) or perimeter (ft)		Load (Btuh)		
	2	3			Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool	
4	Room dimensions														
5	Room area														
6	W	13A-4ocs	0.143	n	3.58	2.10	282	238	851	501	56	40	145	85	
	G	1B-h1fm	1.130	n	28.25	37.38	32	0	898	1189	16	0	449	594	
	G	1B-h1fm	1.130	n	28.25	37.38	7	0	196	259	0	0	0	0	
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	n	28.25	37.38	5	0	144	191	0	0	0	0	
11	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0	
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0	
	W	13A-4ocs	0.143	e	3.58	1.37	367	282	1009	387	160	123	441	169	
	G	1B-h1fm	1.130	e	28.25	93.28	36	6	1028	3075	36	6	1028	3075	
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0	
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	e	28.25	93.26	48	34	1356	2586	0	0	0	0	
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0	
	W	13A-4ocs	0.143	s	3.58	1.48	58	56	202	82	0	0	0	0	
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	s	28.25	53.88	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	s	28.25	53.88	0	0	0	0	0	0	0	0	
	W	13A-4ocs	0.143	w	3.58	3.62	226	174	622	629	0	0	0	0	
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0	
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	w	28.25	102.46	32	32	898	1189	0	0	0	0	
	D	11N0	0.350	w	8.75	20.19	20	20	174	401	0	0	0	0	
	W	13A-4ocs	0.143	nw	3.58	2.72	53	38	135	102	0	0	0	0	
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0	
	G	1B-h1fm	1.130	nw	28.25	71.74	15	0	437	1109	0	0	0	0	
	C	16B-19ad	0.049	-	1.23	2.61	596	596	729	1552	72	72	88	188	
	F	22A-tph	1.358	-	33.95	0.00	862	105	3551	0	102	23	781	0	
Envelope loss/gain									12230	13252			2932	4112	
12	a) Infiltration								1897	546			417	120	
	b) Ventilation								0	0			0	0	
13	Internal gains:		Occupants @	230			2				460	0	0		
			Appliances @	1200			0				0	0	0		
	Less external load								0	0			0	0	
	Less transfer								0	0			0	0	
	Redistribution								0	0			0	0	
14	Subtotal								14127	14259			3349	4232	
15	Duct loads						6%	13%	848	1888	6%	13%	201	560	
Total room load									14975	16146			3550	4792	
Air required (cfm)									0	800			0	237	

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Right-J8 Worksheet UNIT THREE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC, FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1	Room name				MSTR BEDRM				HER CLST					
	Exposed wall				27.6 ft				0.0 ft					
	Ceiling height				9.4 ft				9.4 ft					
3	Room dimensions				1.0 x 312.0 ft				1.0 x 59.5 ft					
5	Room area				312.0 ft ²				59.5 ft ²					
	Ty	Construction number	U-value (Btuh/R ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	56	40	145	85	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	16	0	449	594	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
11	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.48	0	0	0	0	0	0	0	0
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	150	119	424	429	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	32	32	898	1189	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	53	38	135	102	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	15	0	437	1109	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	312	312	382	812	30	30	36	77
	F	22A-tph	1.358	-	33.95	0.00	312	28	936	0	60	0	36	0
Envelope loss/gain									3806	4321			36	77
12	a) Infiltration								501	144			0	0
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @	230			2			460	0			0
			Appliances @	1200			0			0	0			0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								4307	4925			36	77
15	Duct loads						6%	13%	258	652	6%	13%	2	10
Total room load									4566	5577			38	87
Air required (cfm)									0	276			0	4

Printout certified by ACCA to meet all requirements of Manual J 8th Ed.



Right-J8 Worksheet UNIT THREE ELDER RESIDENCE

Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC. FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1	Room name				HIS CLST				DRESSING					
	Exposed wall				0.0 ft				12.0 ft					
	Ceiling height				9.4 ft				9.4 ft					
2	Room dimensions				9.0 x 6.0 ft				1.0 x 90.5 ft					
3	Room area				54.0 ft ²				90.5 ft ²					
4	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)	
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	113	108	385	226
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	5	0	144	191
11	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	e	3.58	1.37	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	s	3.58	1.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	0	0	0	0
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0
	C	16B-19ad	0.049	-	1.23	2.61	24	24	29	63	91	91	111	236
	F	22A-tp	1.358	-	33.95	0.00	54	0	0	0	91	12	407	0
Envelope loss/gain									29	63			1047	653
12	a) Infiltration								0	0			218	63
	b) Ventilation								0	0			0	0
13	Internal gains:		Occupants @	230	0		0		0	0	0		0	0
			Appliances @	1200	0		0		0	0	0		0	0
	Less external load								0	0			0	0
	Less transfer								0	0			0	0
	Redistribution								0	0			0	0
14	Subtotal								29	63			1265	716
15	Duct loads						6%	13%	2	8	6%	13%	76	95
Total room load									31	71			1341	810
Air required (cfm)									0	4			0	40

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Right-J8 Worksheet

UNIT THREE

ELDER RESIDENCE

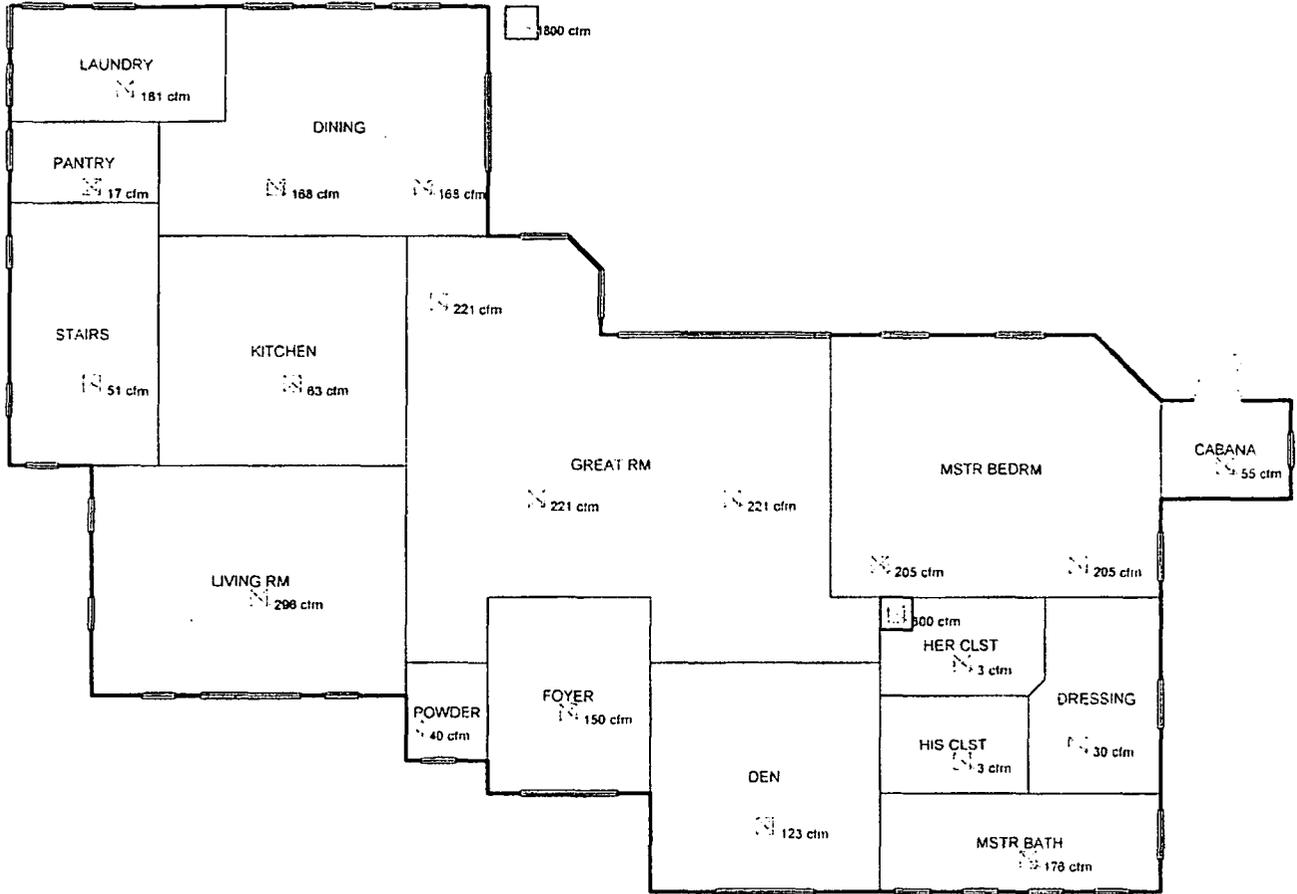
Job:
Date: 4/6/2004
By: WG

WWW ENTERPRISES & SON INC. FT. PIERCE, FL 34945 Phone: 772-465-9373 Fax: 772-465-7732

1 Room name					DEN 20.0 ft heat/cool						CABANA 22.0 ft heat/cool					
2 Exposed wall					9.4 ft 14.0 x 14.0 ft						9.4 ft 8.0 x 6.0 ft					
3 Ceiling height																
4 Room dimensions																
5 Room area					198.0 ft ²						48.0 ft ²					
	Ty	Construction number	U-value (Btuh/ft ² ·°F)	Or	HTM (Btuh/ft ²)		Area (ft ²) or perimeter (ft)		Load (Btuh)		Area (ft ²) or perimeter (ft)		Load (Btuh)			
					Heat	Cool	Gross	N/P/S	Heat	Cool	Gross	N/P/S	Heat	Cool		
6	W	13A-4ocs	0.143	n	3.58	2.10	0	0	0	0	56	49	177	104		
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	7	0	196	259		
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	n	28.25	37.38	0	0	0	0	0	0	0	0		
11	G	10A-b	0.970	n	24.25	24.61	0	0	0	0	0	0	0	0		
	W	13A-4ocs	0.143	ne	3.58	1.17	0	0	0	0	0	0	0	0		
	W	13A-4ocs	0.143	e	3.58	1.37	132	84	299	115	75	75	269	103		
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0		
	G	10A-b	0.970	e	24.25	64.47	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	e	28.25	93.26	48	34	1356	2586	0	0	0	0		
	G	1B-h1fm	1.130	e	28.25	93.26	0	0	0	0	0	0	0	0		
	W	13A-4ocs	0.143	s	3.58	1.46	56	56	202	82	0	0	0	0		
	G	10A-b	0.970	s	24.25	36.22	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	s	28.25	53.66	0	0	0	0	0	0	0	0		
	W	13A-4ocs	0.143	w	3.58	3.62	0	0	0	0	75	55	198	200		
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0		
	G	10A-b	0.970	w	24.25	71.04	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	w	28.25	102.46	0	0	0	0	0	0	0	0		
	D	11N0	0.350	w	8.75	20.19	0	0	0	0	20	20	174	401		
	W	13A-4ocs	0.143	nw	3.58	2.72	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0		
	G	1B-h1fm	1.130	nw	28.25	71.74	0	0	0	0	0	0	0	0		
	C	16B-19ad	0.049	-	1.23	2.61	20	20	25	52	48	48	59	125		
	F	22A-tph	1.358	-	33.95	0.00	198	20	679	0	48	22	747	0		
Envelope loss/gain									2560	2835			1819	1192		
12	a) Infiltration								363	104			389	115		
	b) Ventilation								0	0			0	0		
13	Internal gains:		Occupants @	230	0				0	0	0		0	0		
			Appliances @	1200	0				0	0	0		0	0		
	Less external load				0				0	0			0	0		
	Less transfer				0				0	0			0	0		
	Redistribution				0				0	0			0	0		
14	Subtotal								2923	2939			2218	1307		
15	Duct loads						6%	13%	175	389	6%	13%	133	173		
Total room load									3098	3328			2351	1480		
Air required (cfm)									0	165			0	73		

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Sheet 1

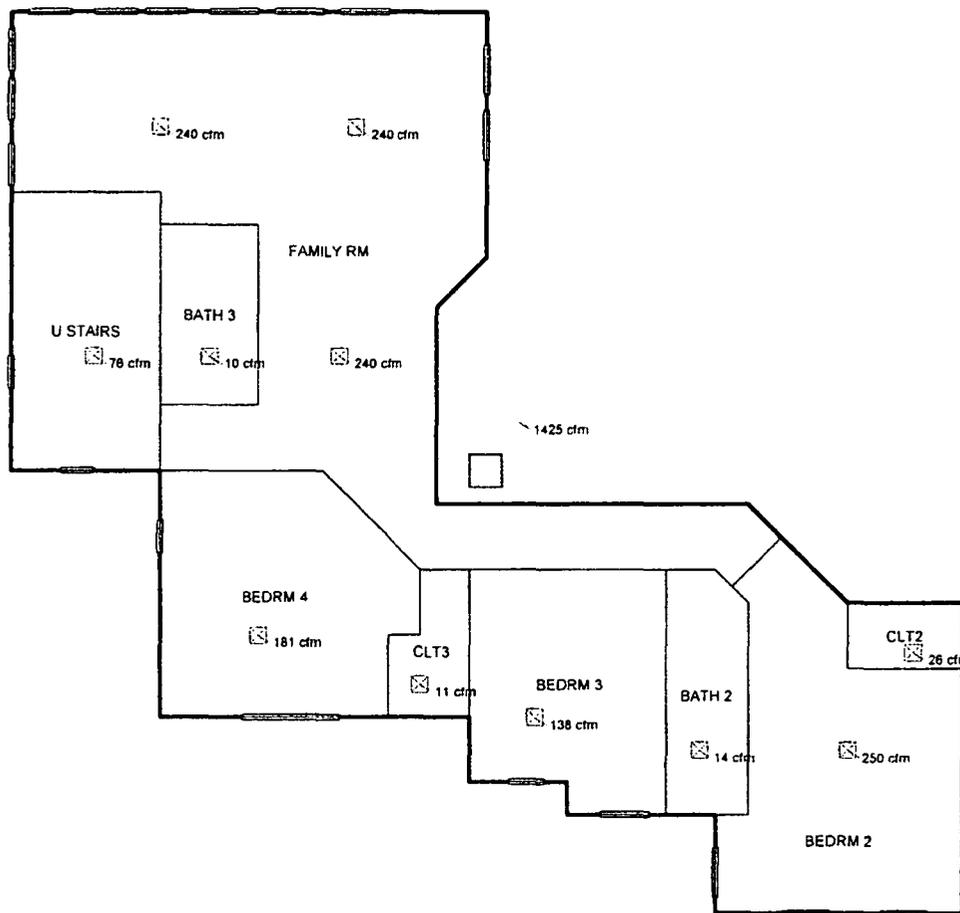


Job #:
Performed by **WG** for:
ELDER RESIDENCE
SEWALLS POINT, FL

ELDER RESIDENCE
WWW ENTERPRISES & SON INC
FT. PIERCE, FL 34945
Phone: 772-465-9373 Fax: 772-465-7732

Scale: 1 : 141
Page 1
Right-Suite Residential J8
5.8.17 RSR27995
2004-Apr-16 13:42:14
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THIRD FLOOR



Job #:
 Performed by WG for:
 ELDER RESIDENCE
 SEWALLS POINT, FL

ELDER RESIDENCE
 WWW ENTERPRISES & SON INC
 FT. PIERCE, FL 34945
 Phone: 772-465-9373 Fax: 772-465-7732

Scale: 1 : 141
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ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 84.9

The higher the score, the more efficient the home.

1. New construction or existing	New	___	12. Cooling systems	___
2. Single family or multi-family	Single family	___	a. Central Unit	Cap: 24.6 kBtu/hr
3. Number of units, if multi-family	1	___		SEER: 13.00
4. Number of Bedrooms	4	___	b. Central Unit	Cap: 60.5 kBtu/hr
5. Is this a worst case?	No	___		SEER: 14.00
6. Conditioned floor area (ft ²)	4218 ft ²	___	c. Central Unit	Cap: 45.0 kBtu/hr
7. Glass area & type	Single Pane	Double Pane	___	SEER: 14.00
a. Clear - single pane	6.9 ft ²	0.0 ft ²	13. Heating systems	___
b. Clear - double pane	866.7 ft ²	0.0 ft ²	a. Electric Strip	Cap: 34.0 kBtu/hr
c. Tint/other SHGC - single pane	0.0 ft ²	0.0 ft ²		COP: 1.00
d. Tint/other SHGC - double pane	___	___	b. Electric Strip	Cap: 34.0 kBtu/hr
8. Floor types	___	___		COP: 1.00
a. Raised Wood, Post or Pier	R=19.0, 2579.0ft ²	___	c. Electric Strip	Cap: 16.0 kBtu/hr
b. N/A	___	___		COP: 1.00
c. N/A	___	___	14. Hot water systems	___
9. Wall types	___	___	a. Electric Resistance	Cap: 52.0 gallons
a. Frame, Wood, Exterior	R=11.0, 752.0 ft ²	___		EF: 0.88
b. Concrete, Int Insul, Exterior	R=4.1, 3174.0 ft ²	___	b. N/A	___
c. N/A	___	___		___
d. N/A	___	___	c. Conservation credits	___
e. N/A	___	___	(HR-Heat recovery, Solar	___
10. Ceiling types	___	___	DHP-Dedicated heat pump)	___
a. Under Attic	R=30.0, 2579.0 ft ²	___	15. HVAC credits	MZ-C, MZ-H
b. N/A	___	___	(CF-Ceiling fan, CV-Cross ventilation,	___
c. N/A	___	___	HF-Whole house fan,	___
11. Ducts	___	___	PT-Programmable Thermostat,	___
a. Sup: Unc. Ret: Unc. AH: Interior	Sup. R=6.0, 200.0 ft ²	___	MZ-C-Multizone cooling,	___
b. 2 Others	400.0 ft ²	___	MZ-H-Multizone heating)	___

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

Builder Signature: _____

Date: _____

Address of New Home: 4 MARGUERITA DR.

City/FL Zip: SEWALLS POINT FL



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

EnergyGauge® (Version: FLR2PB v2.38)

Handwritten signature and notes:
RICHARD J. VOLKERS
CACC48125
COW REMEDY INC

SPRAY FOAM CERTIFICATION

STATE OF FLORIDA)
COUNTY OF Martin)

BEFORE ME, the undersigned authority, personally appeared Don Hall, President of Healthy Home Insulation, who, being first duly sworn, deposes and says:

1. I am the President of Healthy Home Insulation and as such have personal knowledge of the facts surrounding the above-styled action.
2. FURTHER AFFIANT SAYETH NAUGHT.
3. Job location: 4 Marguerita, Sewalls Point Fl.

We hereby attest that we have installed 5.5" r-19 Icynene spray foam insulation at the roof deck of all living areas, and knee walls. Also we have installed r-13 at all framed exterior walls. In addition we sprayed a minimum of 3" between the basement ceiling and the first floor. This work was performed according to manufacturer's specifications.

Healthy Home Insulation
Donald J. Hall
3-31-08
By: Donald J. Hall, President

STATE OF FLORIDA)
COUNTY OF Indian River)

The foregoing instrument was acknowledged before me this 18 day of January 2006, by Donald J. Hall, President Healthy Home Insulation, who () is personally known to me or (X) who has produced HPI as identification

Notary Public *Arlene Cole*
Print Name:

My Commission Expires  Arlene Cole
My Commission DD143735
Expires September 07 2008

THIS FORM IS TO BE FILLED OUT BY PEST CONTROL COMPANY

Certificate of Compliance

(This is a partial treatment only and not a guarantee or warranty)

PERMIT NUMBER: _____

LOCATION OF PROPERTY: 4 Marguerita Drive, Stuart FL

LEGAL DESCRIPTION: SECTION: _____ BLOCK: _____ LOT: _____

Soil Treatment for Termites - 1816

PEST CONTROL COMPANY

Robert E Bates
COMPANY OWNER - PLEASE PRINT

ROBERT E BATES
SIGNATURE

1-13-06 President
DATE TITLE

TREATMENT INFORMATION

8-31-04
DATE OF TREATMENT

Cyphar IC
CHEMICAL USED

0.05%
CONCENTRATION

244
GALLONS USED

Chemical
METHOD OF APPLICATION (Flooding, Soil Mound, ETC.)

LINEAR FOOTAGE OF AREA TREATED

SOIL TREATMENT COMPANY INFORMATION

Dates Exterminating
SOIL TREATMENT COMPANY NAME

401 Maplewood Drive
ADDRESS Suite #22, Jupiter FL

5558
SOIL TREATMENT/DACS LICENSE #

SECOND TREATMENT INFORMATION

1-13-06
DATE OF TREATMENT

Cyphar IC
CHEMICAL USED

0.05%
CONCENTRATION

84
GALLONS USED

Chemical
METHOD OF APPLICATION (Flooding, Soil Mound, ETC.)

210
LINEAR FOOTAGE OF AREA TREATED

The building has received a complete treatment for the Prevention of subterranean termites. Treatment is in accordance with the rules and laws established by the Florida Department of Agriculture and Consumer Services. A second treatment was done on (Date) 1-13-06 as per Manufacturer's specification. If the second treatment is not required, a copy of the product label shall be included with this Certificate.

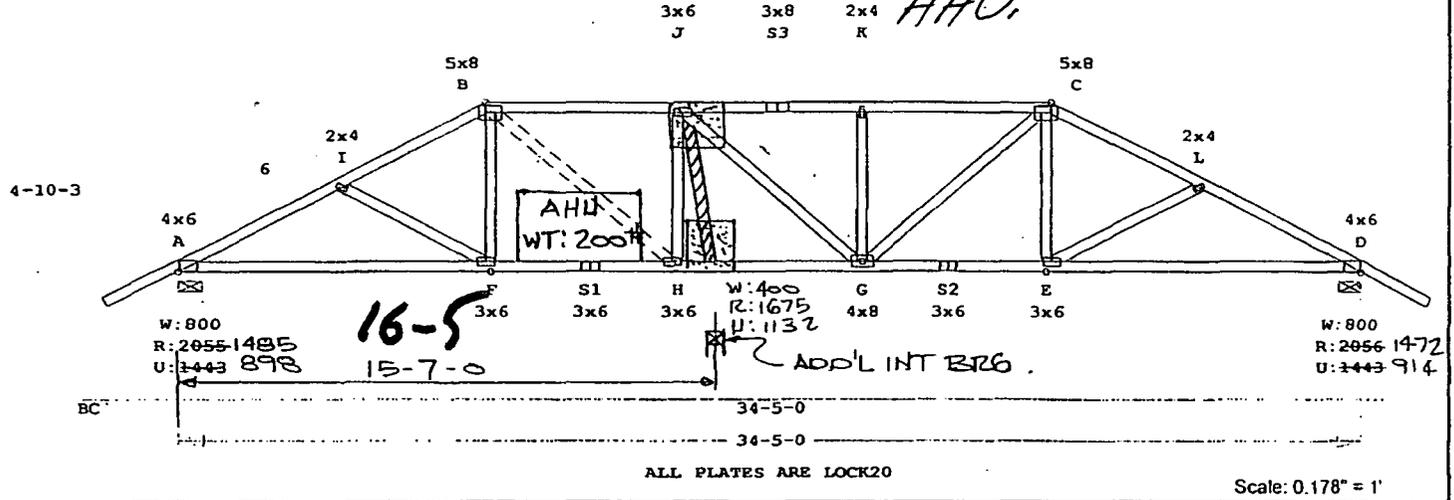
Please Note: The City of Port St. Lucie does not guarantee or warranty the preconstruction soil treatment treated to in the above. The purpose of this document is to show that to the best of this Department's knowledge, the builder has satisfied the requirements of the Florida Building Code for protection against termites

This form must be returned to the Building Department before your final inspection is scheduled.

FILE - ELPER
4 MARGAURITA

MASTER BR LOSET
TRUSS MODIFICATION FOR
AHU.

HO 4-3
TC 2-0-0 9-0-0 16-5-0 9-0-0 2-0-0



Online Plus -- Version 17.0.023
RUN DATE: 18-DEC-04

CSI	Size	Lumber
TC	0.79 2x 4	SP-#2
BC	0.83 2x 4	SP-#2
WB	0.63 2x 4	SP-#3

Brace truss as follows:
O.C. From To
TC Cont. 0- 0- 0 34- 5- 0
BC Cont. 0- 0- 0 34- 5- 0

Loading	Live	Dead	(psf)
TC	20.0	15.0	
BC	10.0	3.0	
Total	30.0	18.0	48.0
Spacing			24.0"
Lumber Duration Factor			1.25
Plate Duration Factor			1.25
TC Fb=1.00 Fc=1.00 Ft=1.00			
BC Fb=1.00 Fc=1.00 Ft=1.00			

Load Case # 1 Standard Loading

plf	Live	Dead	From	To
TC V	40	30	0.0'	34.4'
BC V	20	6	0.0'	34.4'
TC V	30	0	9.0'	25.4'

Plus 4 Wind Load Case(s)

Jt	React	Uplft	Size	Req'd
	Lbs	Lbs	In-Sx	In-Sx
A	2056	1443	8- 0	2- 4
			Hz =	149
D	2056	1443	8- 0	2- 4
			Hz =	-148

Robbins Engineering, Inc./Online Plus™

Membr	CSI	P Lbs	Ax1	CSI-Bnd
-----Top Chords-----				
A	-I	0.57	3522	C 0.34 0.23
I	-B	0.55	3232	C 0.32 0.23
B	-J	0.79	3730	C 0.38 0.40
J	-S3	0.79	3728	C 0.38 0.41
S3	-K	0.78	3728	C 0.38 0.40
K	-C	0.78	3728	C 0.38 0.40
C	-L	0.55	3232	C 0.32 0.23
L	-D	0.57	3522	C 0.34 0.23
-----Bottom Chords-----				
A	-F	0.83	3143	T 0.58 0.25
F	-S1	0.76	2897	T 0.54 0.22
S1	-H	0.62	2897	T 0.54 0.08
H	-G	0.80	3729	T 0.69 0.12
G	-S2	0.61	2897	T 0.54 0.08
S2	-E	0.76	2897	T 0.54 0.22
E	-D	0.83	3143	T 0.58 0.25
-----Webs-----				
I	-F	0.11	336	T
F	-B	0.10	312	T
B	-H	0.63	1083	T
H	-J	0.18	602	T
J	-G	0.05	76	T
G	-K	0.18	563	C
K	-C	0.62	1081	T
C	-L	0.10	313	T
L	-D	0.11	336	T

LL Defl -0.32" in H -G L/999
TL Defl -0.46" in H -G L/856
Shear // Grain in B -J 0.39
DL Defl -0.21" at G L/999

Plates for each ply each face.
PLATING CONFORMS TO TPI.
REPORTS: SBCCI 9761
ROBBINS ENGINEERING, INC.
BASED ON SP LUMBER
USING GROSS AREA TEST.
Plate - LOCK 20 Ga, Gross Area
Plate - RHS 20 Ga, Gross Area
Jt Type Plt Size X Y JSI
A LOCK 4.0x 6.0 Ctr 0.1 0.76
I LOCK 2.0x 4.0 Ctr Ctr 0.44
B LOCK 5.0x 8.0 Ctr-0.1 0.93
J LOCK 3.0x 6.0 Ctr Ctr 0.43
S3 LOCK 3.0x 8.0 Ctr Ctr 0.99
K LOCK 2.0x 4.0 Ctr Ctr 0.63
C LOCK 5.0x 8.0 Ctr-0.1 0.93
L LOCK 2.0x 4.0 Ctr Ctr 0.44
D LOCK 4.0x 6.0 Ctr 0.1 0.76
F LOCK 3.0x 6.0 Ctr Ctr 0.47
S1 LOCK 3.0x 6.0 Ctr Ctr 0.87
H LOCK 3.0x 6.0 Ctr Ctr 0.70
G LOCK 4.0x 8.0 Ctr Ctr 0.69
S2 LOCK 3.0x 6.0 Ctr Ctr 0.87
E LOCK 3.0x 6.0 Ctr Ctr 0.47

REFER TO ROBBINS ENG. GENERAL
NOTES AND SYMBOLS SHEET FOR
ADDITIONAL SPECIFICATIONS.

NOTES:
Trusses Manufactured by:
East Coast Lumber
Analysis Conforms To:
ANSI/TPI 95 & 02
OH Loading
Soffit psf 2.0
Prevent truss rotation at all
bearing locations.
Wind Loads - ANSI / ASCE 7-98
Truss is designed as a Main
Wind-Force Resistance System.
Wind Speed: 140 mph
Mean Roof Height: 35-0
Exposure Category: B
Occupancy Factor : 1.00
Building Type: Enclosed
Zone location: Exterior
TC Dead Load : 7.0 psf
BC Dead Load : 3.0 psf
Max comp. force 3730 Lbs
Quality Control Factor 1.00

- DENOTES NEW 2x4#25YP
- DENOTES NEW 5/8"x16"x16" CDX PLYWD
- DENOTES TO BE REMOVED

REPAIR ENG. NOTES
BLDGL. MAY MODIFY & REPAIR
TRUSS SO AS TO INSTALL AHU.
INSTALL ADD'L INT. BRG. AND
ADD NEW MEMBER W/PLYWD
ATTACHED TO BOTH FACE
W/6-80 NAILS AT 2" O.C.
PER MEMBER. REMOVE
WEB AS SHOWN.

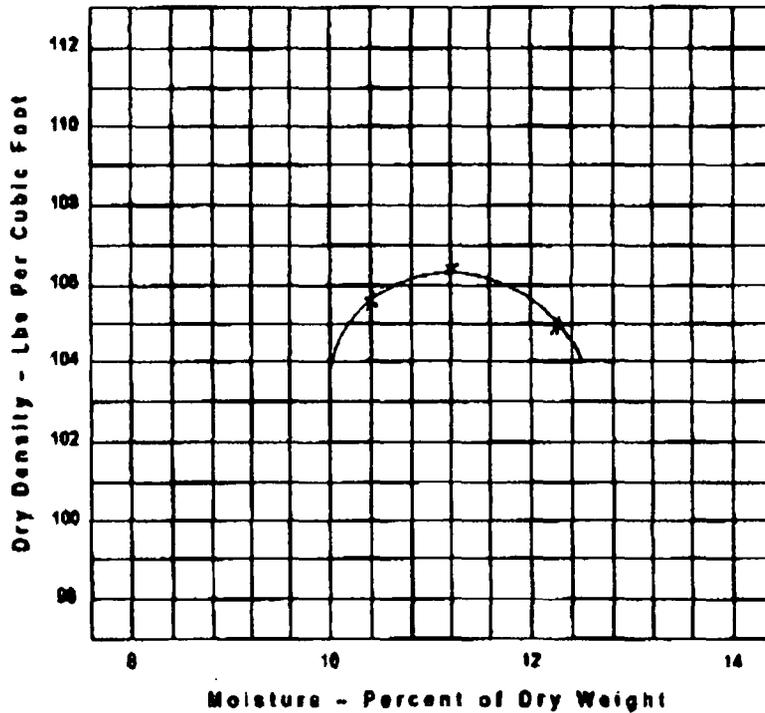
SEP 15 2005

COASTAL TESTING LABORATORY, L.L.C.
PO BOX 2023
PALM CITY, FLORIDA 34991-2023
772.220.6688

MOISTURE DENSITY RELATIONSHIP

ASTM D 1557-02E1

DATE : April 18, 2005
CONTRACTOR : Mr. Rob Elder FILE
JOB NUMBER : 05-0464
PERMIT NUMBER : # 6772



COASTAL TESTING LABORATORY, L.L.C.
PO BOX 2023
PALM CITY, FLORIDA 34991-2023
772.220.6688

COMPACTION TEST REPORT
ASTM D 2922-04

DATE : April 18, 2005
JOB NUMBER : 05-0464
PERMIT NUMBER : 6772
CLIENT : Mr. Rob Elder
CONTRACTOR : Mr. Rob Elder
JOB LEGAL : N/A
JOB ADDRESS : 4 Margarita Drive
Sewalls Point, FL

SOIL CLASSIFICATION & REMARKS : A3 Firm brown sandy soil

TEST SAMPLE LOCATION : 10' IS LR Corner - Center of Pad - 10' IS RF
Corner

	<u>IN PLACE DRY DENSITY</u>	<u>MAXIMUM DRY DENSITY</u>	<u>% COMPACTION</u>
1)	105.2	106.4	98.9
2)	105.6	106.4	99.2
3)	104.8	106.4	98.5

RESPECTFULLY SUBMITTED:

Ernesto Velasco
ERNESTO VELASCO, P.E.



BRADEN & BRADEN, A. I. A., P. A.

Architects & Planners

417 COCONUT AVENUE, STUART, FLORIDA 34996
TELEPHONE: (772) 287-8258 FAX (772) 287-8283
#AAC-000032

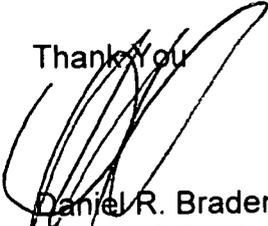
Sewall's Point Building Department

Re: Elder Residence
Permit #

To whom it may concern,

Please note, the front porch arched beam has been changed to be 8" wide concrete tie beam using 8 #3 bars cont. and #3 ties at 24" o.c. If you have any questions please feel free to call me at 287-8258.

Thank You


Daniel R. Braden AIA
Braden & Braden AIA PA

ELDER
#6772
4 MARGARITA.
FILE

3-5-05



BRADEN & BRADEN, A. I. A., P. A.

Architects & Planners

417 COCONUT AVENUE, STUART, FLORIDA 34996
TELEPHONE: (772) 287-8258 FAX (772) 287-8283
#AAC-000032

6-20-05

Sewall's Point Building Department

Re: Elder Residence
Permit #

To whom it may concern,

Please note, the cabana bathroom roof shall be framed out of 2" x 8" at 24" o.c. They are to be strapped with Simpson HETA 20 straps - one at each end. Where HETA 20 strap was missed contractor shall use MTS 20 where (7) 10d x 1 1/2" nails are required into rafter and (4) 3/16" x 1 1/2" tapcons shall be used to fasten strap to concrete beam. The ledger under the top chord bearing trusses shall be (2) 2" x 8" (one pt and one yellow pine) with (2) 5/8" bolts at 24" o.c. staggered. Where a ledger was required as a nailer for the plywood, please note the ledger shall be 2" x 8" and shall have (3) 1/4" x 3" tapcons at 24" o.c. If you have any questions please feel free to call me at 287-8258.

Revision 1/2/05

<p>FILE COPY</p> <p>TOWN OF SEWALL'S POINT</p> <p>THESE PLANS HAVE BEEN</p> <p>REVIEWED FOR CODE COMPLIANCE</p> <p>DATE: <u>4/23/05</u></p> <p><i>[Signature]</i></p> <p>BUILDING OFFICIAL</p> <p>Gene Simmons</p>
--

Thank You

Daniel R. Braden AIA
Braden & Braden AIA PA



BRADEN & BRADEN, A. I. A., P. A.

Architects & Planners

417 COCONUT AVENUE, STUART, FLORIDA 34996
TELEPHONE: (772) 287-8258 FAX (772) 287-8283
#AAC-000032

SEWALLS POINT
Building Department

SEPT 30, 2005

Re: ELDER *ELDER*
Permit #: *4 MARBAURITA — FILE PLEASE*

To whom it may concern,

Please note, the beam at the rear of the living room has been reviewed by our office as well as our engineer and is adequate as installed.

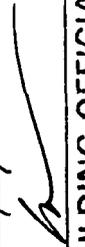
If you have any questions please feel free to call me at 287-8258.

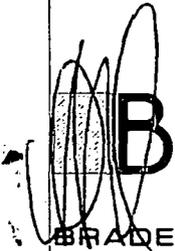
Thank You

DANIEL R BRADEN AIA PA
Braden & Braden AIA PA

Revision



TOWN OF SEWALL'S POINT	
THESE PLANS HAVE BEEN	
REVIEWED FOR CODE COMPLIANCE	
DATE: <i>10/5/05</i>	
BUILDING OFFICIAL	
Gene Simmons	



BRADEN & BRADEN, A. I. A., P. A.

Architects & Planners

417 COCONUT AVENUE, STUART, FLORIDA 34996
TELEPHONE: (772) 287-8258 FAX (772) 287-8283
#AAC-000032

SEWALLS POINT
Building Department

SEPT 30, 2005

Re: ELDER
Permit #:

To whom it may concern,

Please note, the beam at the rear of the living room has been reviewed by our office as well as our engineer and is adequate as installed.

If you have any questions please feel free to call me at 287-8258.

Thank You


DANIEL R BRADEN AIA PA
Braden & Braden AIA PA

Revision

<p><i>FILE</i></p> <p>FIELD COPY</p> <p>TOWN OF SEWALL'S POINT THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE</p> <p>DATE: <i>10/5/05</i></p> <p> BUILDING OFFICIAL Cathy Shuster</p>
--

Weyant Engineering, Inc.

Civil & Structural Engineers
201 SW Port St. Lucie Blvd., Suite #104
Port St. Lucie, FL 34984

Phone 772-335-0772 WPB 561-832-9094
Fax 772-335-0866

September 24, 2004

Job No. 01 1500

Town of Sewall's Point
One Sewall's Point Road
Sewall's Point, FL 34996

Attention: Gene Simmons, CBO
Building Official

Subject: ROB ELDER RESIDENCE
MARGUERITA DRIVE
SEWALL'S POINT

FILE

Dear Gene:

Please be advised that I have inspected the foundation form boards and reinforcement for the footings and structural slab for the above referenced single family residence.

The purpose for my inspection was to confirm that the forms and reinforcement are in compliance with the design as prepared by me.

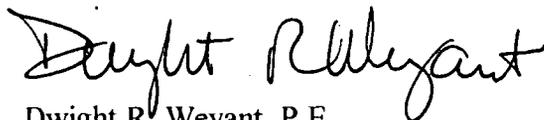
Additionally, due to the severe weather in recent weeks, the site is saturated with moisture and water. I confirmed that all sand and debris has been removed from the footing excavations and from the tops of the augercast piles.

Due to several inches of standing water in the bottom of the footing trenches, special precaution is necessary for the concrete placement. I instructed the contractor to commence placement of the concrete at one rear corner and proceed toward the front. A sump pump will be placed in one front corner and the water will be removed from the trench as the concrete flow proceeds toward the pump.

Based upon my inspection, I recommend placement of the concrete as soon as possible before any additional storms impact the construction site.

CERTIFIED THIS 24TH DAY OF SEPTEMBER 2004.

WEYANT ENGINEERING, INC.



Dwight R. Weyant, P.E.
Project Structural Engineer



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

TIE BEAM

BOTTOM STL @ N.E CORNER
NEEDS TO BE RAISED
1" ABOVE CONC. BLOCK

#7 STEEL IN DOOR BEAM
IS BUNDLED - NEEDS
TO BE SEPARATED
MIN. 1"

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

DATE: 10/22

A handwritten signature in black ink, appearing to be "JL", is written over a horizontal line.

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/22, 2008 Page 4 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6904	ARMSTRONG	A/C CHANGE	PASS	
2	41 W. SEWALL'S POINT N. SAIC			INSPECTOR: <i>[Signature]</i>
6072	BECKER	TREE BEAN	FAIL	NO INSPECTION
1	4 MARGUERITA OIB	FIRST PLEASE		INSPECTOR: <i>[Signature]</i>
3	SHEETS	TREE	FAIL	
3	101 S. RIVER			INSPECTOR: <i>[Signature]</i>
TREE	SHAFER	TREE	✓ PASS	
9	36 CASTLE HILL			INSPECTOR: <i>[Signature]</i>
TREE	CIFELLI	TREE	✓	→ GENE
4	8 HERITAGE			INSPECTOR: <i>[Signature]</i>
TREE	GALINAT	TREE	✓ PASS	
8	53 N. SEWALL'S			INSPECTOR: <i>[Signature]</i>
6753	RADER	STEM	FAIL	
5	5 HERITAGEWAY A & P CON			INSPECTOR: <i>[Signature]</i>
OTHER: WORK W/O PERMIT? 4 RIO VISTA				



6772

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGUERITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

FOOTER

NEED ENGR LTR APPROVING
SHEAR CONNECTION OF
FOOTER TO HOUSE WALLS

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

DATE: 12/1

INSPECTOR

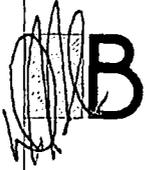
DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri DEC 1, 2004 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	SMITH	TREE	FAIL	
6	111 S. SEWALL'S			INSPECTOR: <i>[Signature]</i>
7070	WINSLOW	PRE DRYWALL	PASS	1823 CODE NORTH
10	10 S. SEWALLS PT.	ROUGH PLUMBING	PASS	END OF HOUSE ONLY.
	O/B	(TRUSS REPAIRS)	PASS	INSPECTOR: <i>[Signature]</i>
6948	WINSLOW	ROUGH ELEC	FAIL	
10	10 S. SEWALLS PT	FRAMING	FAIL	
	KRAUSS + CRANE			INSPECTOR: <i>[Signature]</i>
6839	WADE		PASS	
11	9 E. HIGH POINT	260-0955		
	PINE ORCHARD	(LAST PLEASE)		INSPECTOR: <i>[Signature]</i>
6391	WHITWELL	FINAL BLDG	FAIL	
1	MARGUERITA			
	Hemmingway			INSPECTOR: <i>[Signature]</i>
6772	ELDER	FOOTER (BACK OF HOUSE)	FAIL	
2	4 MARGUERITA			
	O/B	223-9305 475-5069		INSPECTOR: <i>[Signature]</i>
				INSPECTOR:
OTHER: _____				



BRADEN & BRADEN, A. I. A., P. A.

Architects & Planners

417 COCONUT AVENUE, STUART, FLORIDA 34996
TELEPHONE: (772) 287-8258 FAX (772) 287-8283
#AAC-000032

Sewall's Point Building Department

12-1-04

Re: Elder Residence
Permit #

To whom it may concern,

Please note, the footing under the stem wall under the rear porch slab shall be changed to a grade beam measuring 16" x 16" with 4 #5 bars cont. and #3 ties at 12" o.c. The #5 bars shall be doweled into existing beam and set in epoxy where grade beam attaches to the wall. There is one piling under far corner, which is sufficient to carry the load of the slab and the stem wall. The slab shall be tied into stem wall with #5 bars bent if you have any questions please feel free to call me at 287-8258.

Thank You

Daniel R. Braden AIA
Braden & Braden AIA PA

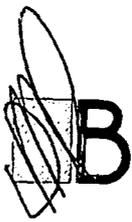
TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri JAN 31, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7168	TOPPING	FRAMING	PASS	
3	7 MIDDLE ROAD SPECIAL	(EXCEPT FRONT DOOR WALL)		INSPECTOR:
7141	JOHNSON	GASTANK + LINES	PASS	
2	634 W. HIGH PT MARTIN COUNTY PROPANE			INSPECTOR:
1577	ELDER	TIE BEAM	PASS	
1	4 MARGUERITA O/B			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				ISSUED STOP
	5 S. RIVER RD.	FAKE w/o PERMIT		WORK ORDER INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____



BRADEN & BRADEN, A. I. A., P. A.

Architects & Planners

417 COCONUT AVENUE, STUART, FLORIDA 34996
TELEPHONE: (772) 287-8258 FAX (772) 287-8283
#AAC-000032

1-28-05

Sewall's Point Building Department

Re: Elder Residence *4 MARGUERITA*
Permit # *6772*

To whom it may concern,

Please note, the second floor southwest corner of the house has been changed to 8" x 12" concrete column with 4 #5 bars vertical and #3 ties at 12" on center vertical. If you have any questions please feel free to call me at 287-8258.


Thank You

Daniel R. Braden AIA
Braden & Braden AIA PA



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGUELITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

TIE BEAM.

MISSING FILLED CELL AT WEST WINDOW -

TIE ALL CELL REBAR TO POWER NOT FINISHED AT S.W CORNER
NEED ENCR SUBMITTAL FOR POURED COLUMN AT S.W.

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

DATE: 1/28

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

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

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<i>Tree</i>	<i>Archipelago Assoc</i>	<i>TREE</i>	<i>PASS</i>	
<i>2</i>	<i>S. MARA ST</i>			
	<i>(1st tree on rt as enter Archipelago)</i>			INSPECTOR: <i>[Signature]</i>
<i>7232</i>	<i>MASSAD</i>	<i>FINAL FENCE</i>	<i>PASS</i>	<i>CLOSE</i>
<i>1</i>	<i>17E. HIGHPOINT</i>			
	<i>O/B</i>	<i>PERMIT ON LIGHT IN FRONT</i>		INSPECTOR: <i>[Signature]</i>
<i>7019</i>	<i>HANAN</i>	<i>TIN TAG & MEAL</i>	<i>PASS</i>	
<i>8</i>	<i>84 N. SEWALL'S</i>			
	<i>PACIFIC ROOFING</i>			INSPECTOR: <i>[Signature]</i>
<i>6712</i>	<i>ELDER</i>	<i>TIE BEAM</i>	<i>FAIL</i>	
	<i>4 MARGUERITA</i>			
	<i>O/B</i>	<i>223 9305</i> <i>475-5065</i>		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i> </i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i> </i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i> </i>

OTHER: *ELDER* Please check
1A 4 MARGUERITA *cut screen OK*
(fill delivery) - WILL ADDRESS ON
FINAL GRADING.



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 4 MARGUARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

FRONT STAIR REBAR
TIE BEAM @ 2ND FL. BAY WINDOW
TIE BEAM @ 3RD FL.

MISSING ABOUT 8 REBARS
IN FILLED CELLS @ WALL
CORNERS, & WALL ENDS ON
3RD FL. WALL SYSTEM

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

DATE: 3/7

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/7, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1	ERIC OTT	PRE INSPECT	DONE	DISCUSSED MAINANCE
	26 NORTH S.P.R. O.B.	FOR FILL		INSPECTOR:
6876	PETERSON	INSULATION	PASS	
5	49 RIO VISTA	ROUGH ELEC. RT	PASS	INSPECTOR:
	DRIFTWOOD	ROUGH AC RT	PASS	
6772	ELDER	FRONT STAIRS	FAIL	
2A	4 MARGUERITA DR	TIE BEAM		INSPECTOR:
	O/B			
6753	RADER	ROOF SHEATHING	PASS	
7	5 HERITAGE WAY			INSPECTOR:
	A & P CONSTRUCTION			
7167	KING	FINAL ROOF	PASS	CLOSE
6	30 RIO VISTA			INSPECTOR:
	HEATON ROOFING	287-0116		
TREE	SHAFER	TREE	—	WILL RESCHEDULE
9A	36 CASTLE WAY			TO MEET INSPECTOR
				INSPECTOR:
TREE	JACOBI	TREE	PASS	
	4 BANYAN			INSPECTOR:

OTHER:



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

TIMSS ENBR / STRAPPING

SUBMIT REVISED ENBR DRAWINGS FOR APPROVAL.

NEED ENBR, ADDRESSING ADEQUACY OF 8X16 BEAM OVER WEST DOORS OF L.R WHICH CARRIES ROOF LOAD ON POINT LOAD OF NEW 4X4 TUBULAR COL.

ENBR LTR ADDRESSING COLUMN CHANGE AT BASEMENT (CONC)

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

DATE: 5/18

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5/17/05 2002

Page 3 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
(none)		Illegal Polings	—	(Gene wants to accompany you)
18	22 Palm Road			INSPECTOR:
7313	McAlpin	final fence	PASS	Re inspection Fee paid
4	5 Pineapple Lane Stuart Fence			INSPECTOR:
6396	MURSON	METER RELEASE	PASS	
11	17 S. RIVER RD BUFORD			INSPECTOR:
7414	WHITING	ROOF FINAL	PASS	CLOSE
7A	7 S. RIDGEVIEW TURTLE ROOFING			INSPECTOR:
7510	DONOHUE	POOL STEEL	PASS	
3	163 S. Sewalls FLORIDA COAST POOLS			INSPECTOR:
6772	ELDER	STAIRING	FAIL	
5A	4 MARGUERITA O/B			INSPECTOR:
7310	VALLI	SIDING & CHIMNEY SHEATHING	PASS	CLOSE
5	101 S. Sewalls Dr O/B	FINAL		INSPECTOR:
OTHER:				
	11 N. VIA LUCINDA	ROOF FINAL	—	ROOF METERS CONE REQUIRE MENTS.

STOP WORK OWNER

7 MANUAL HY - NO PERMIT



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGAURITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

FL. / ROOF TRUSS ENBR,
FG 1/2 NOT ON ARCHITECT DRAWING
FG 1, 2, 3A, NEEDS NAILING
CHECK ALL GIRDELS FOR NAILING
" ALL TRUSSES FOR
STRONG BACKS / ENBR.
END GAPS ON FLOOR TRUSSES
EXCEED 1/2" MAX GAP.
FL. TRUSS LEDGERS ARE 2 / 2X12 &
NEED BOLTS
ROOF TRUSSES MISSING METAL
CONNECTORS -

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

DATE: 5/18

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/10, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6753	RADER	INSULATION	PASS	
10	5 HERITAGE WY A.P. CONSTR.			INSPECTOR:
6772	EIDER	TINTAG+MEAL	PASS	
3	4 MARGUERITA O/B			INSPECTOR:
7054	TAPPER	TIE BEAM BOND	FAIL	REINSPECTED LATE MORNING
2	22 ISLAND WAY WINCHIP		PASS	INSPECTOR:
	FENSTERER	INSULATION	PASS	
6	71 S. SEWALLS Pt O/B			INSPECTOR:
Tree	DATNS	TREE	PASS	
5	62 S. SEWALLS Pt			INSPECTOR:
Tree	BINNICKER	TREE	PASS	
13	11 PEERWINKLE LA			INSPECTOR:
7618	POTSDAM	PREPOUR PAD	PASS	
9	50 RIO VISTA DR O/B	AFTER 9:00		INSPECTOR:
OTHER:				

DUPLICATE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/24, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7396	HB ASSOC ^{JOYCE'S} Fines	Pump Water Pump	PASSED	BRING REVISIONS
* 112	3756 Ocean Blvd	Tree Water Pump	PASSED	TO JOB SITE
	KIRCHMAN	Framming	PASSED	INSPECTOR: <i>m</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7610	HARVEN	ALC CHAOUT	FAIL	
1	1 RIDGELAND G			
	DB Classic Ceiling	Early Please (649:30)		INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7362	BUTLER	FINAL ROOF	PASSED	RESCHEDULE
8	6 EMARITA WAY	561-902-9069		
	WESTERN ROOFING	BILL JOHNSON		INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	LUDH	TREE	PASS	
2	20 E. HIGH POINT			
				INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6809	KADER	POOL DECK	FAIL	
10	5 HERITAGE WAY			\$40
	FLAMINGO POOLS			INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7528	SWEET	IN PROGRESS	RESCHEDULE -	
6	19 S. RIDGEVIEW			INCLEMENT WEATHER
	CARDINAL ROOFING			INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7513	ROBERTS	FINAL ROOF	FAIL	
7	12 N. RIDGEVIEW			
	CARDINAL ROOFING			INSPECTOR: <i>OM</i>

OTHER:

~~EUDER~~ *LAITH (PARTIAL)* *PASS*

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/29, 2005

Page 4 of

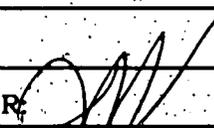
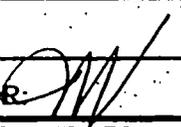
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6672	ELDER	STEEL	—	CANCEL
7	4 MARGUERITA O.B. 708-5310	SHIPPING LATH	— PASS	CANCEL INSPECTOR: <i>[Signature]</i>
755	HARRIGAN	ROOFING	—	RESCHEDULE 7/1
15	2 PALMETTO	AS LATE AS POSSIBLE		RAINY WEATHER INSPECTOR: <i>[Signature]</i>
TREE	HOLLAND	TREE	PASS	
14	16 N. RIDGEVIEW			INSPECTOR: <i>[Signature]</i>
TREE	NUGENT	TREE	PASS	
13	10 CRANES NEST			INSPECTOR: <i>[Signature]</i>
6A	BROOM	FOOTER	PASS	
	163 SSPR.			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/11, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7298	Palter	FINAL ROOF	FAIL	
5	91 S. River Rd PACIFIC ROOFING			INSPECTOR: 
7566	NEARING	FINAL STORM		CXL
	5 LANTANA LA O/B			INSPECTOR:
6772	ELDER	LA-TH PARTIAL	PASS	
2	4 MARGUERITA O/B	708-5310		INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/29, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	CLEMENTS	SEAWALL CAP	PASS	
2	11 W. HIGH POINT WILCO CONST			INSPECTOR: <i>[Signature]</i>
	BEACKEN	TREE	PASS	
2A	4 DELANO LA			INSPECTOR: <i>[Signature]</i>
	LADD	INSULATION	PASS	
6	21 SIMARA HARTLEY CAUFIELD			INSPECTOR: <i>[Signature]</i>
	ABESADA TERR	DATA	FAIL	
5	8 MORGAN CIRCLE FEARL ROOFING	FINAL TILE REPLACEMENT		INSPECTOR: <i>[Signature]</i>
	GEISINGER	ROUGH FRAMING	FAIL	
1	8 CASTLE HILL O/B	PLUMBING ELECTRIC	FAIL PASS	INSPECTOR: <i>[Signature]</i>
	MADER	SHEATHING -	FAIL	
3	106 ABBIE COURT BUFOKD CONST	ROOF		INSPECTOR: <i>[Signature]</i>
	ELDER	ROUGH PLUMBING	FAIL	WILL RESCHEDULE
4	4 MARGUERITA O/B	FRAMING 708-5310		INSPECTOR: <i>[Signature]</i>
OTHER:	GRINES	TREE	FAIL	<i>[Signature]</i>
TREE	15 CASTLE HILL			
TREE	49 N S PR	TREE	PASS	<i>[Signature]</i>



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: _____

4 MARGARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

ELEC/A/C/PLG ROUGH

ELEC. - MISSING GFI RECEPT. AT
DOUBLE LAV. - NEED RECEPT.

AT WALL EAST M.B.R. - UNFINISH.

WIRING IN M.B.R. - FINISH WIRING

@ PANEL. -

PLG. - INSTALL MASTER SH. VALVE

& PAN. - ISOLATE COPPER @ CONC.

REMOVE 'S' TRAP @ GUEST B.

STRAP ALL COPPER PIPING -

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

DATE: _____

10/7

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Oct 7, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7808	MERRILL	DRY-IN	PASS	
7	24 FIELDWAY OIB			INSPECTOR: <i>OM</i>
6772	ELDER	ELEC DOUGH	FAIL	
1	4 MARGUERITA	AIC	PASS	
	OIB	PUMB	FAIL	INSPECTOR: <i>OM</i>
7776	ELDER	DOUGH GAS	FAIL	
1	4 MARGUERITA	ING & TANKLINE		
	PROPANE DLS			INSPECTOR: <i>OM</i>
7469	NORDGREN	POOL FINAL	PASS	CLOSE
2	5 KINGSTON CT	SPA		
	OLYMPIC POOLS			INSPECTOR: <i>OM</i>
7576	SILAS	RGH AIC - LOWEST FLOOR	PASS	
11	10 CASTLE HILL WY	ELEC "	PASS	
	STATEWIDE	PUMBING & FRAMING	FAIL	INSPECTOR: <i>OM</i>
7727	SLATER	1st FL FLOOR	PASS	
10	4 LAGOON BLG	SHEATHING		
	CONWAY			INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>OM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/18, 2002 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7394	HARTE	SUDGLDoseB	PASS	NO ACCESS OWNER
4	3 E. HIGH POINT FIRST FLORIDA			NOT HOME INSPECTOR: <i>[Signature]</i>
7389	WALKER	FINAL REEVAL	FAIL	
10	6 CRANE'S NEST LANIERO			INSPECTOR: <i>[Signature]</i>
7466	BURKE	DEVI N		CHECK @ NOON
14	7 M. CANAL CODE REP ROOFERS			INSPECTOR:
7319	ROBERTS	FINAL FIL	PASS	CLOSE
11	12 N. RIDGEVIEW OLB			INSPECTOR: <i>[Signature]</i>
6772	FEDER	SWEATING	PASS	
7	4 MARGUERITA RD O/B	(ROOF)		INSPECTOR: <i>[Signature]</i>
7476	AUNE	FORM BOARD	PASS	
1	1 MICHAEL RD KRAUSS + CRANE	PRE POUR GEN. PAD (FIRST PLEASE)		INSPECTOR: <i>[Signature]</i>
6812	MADER	STEM WALL	FAIL	
2	106 ABBE COURT DREUCKER HOMES	(2ND PLEASE)		INSPECTOR: <i>[Signature]</i>

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARBUERITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

SLAB / GRADE BEAMS

CLEAN SAND & DEBRIS FROM TOP OF PILES

MAINTAIN 3" COVERAGE OF CONCRETE FOR STEEL.

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

DATE: 9/20

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri SEPT 20, 2007 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6413	POWERS	ELECTRICAL	PASS	
1	70 S. SPR.	ROUGH		INSPECTOR:
	FEC	(PARTIAL)		
6772	ELDER	FOUR BOARD	FAIL	RESCHEDULE FOR
2	4 MARGUERITA	SLAB		9/22 - WEDNESDAY INSPECTOR:
	O/B			
6881	HICKS	ROOF IN PROG		NO INSPECTION DUE
3	7 EMALITA WAY			TO INCLEMENT WEATHER INSPECTOR:
	JA TAYLOR ROOFING			
6882	ELDER	ROOF IN PROG		NO INSPECTION DUE TO
4	12 EMALITA WAY			INCLEMENT WEATHER INSPECTOR:
	JA TAYLOR ROOFING			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/8, 2004 Page 3 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7101 18	MULLIGAN 20 FIELDWAY	FINAL DEMO REPAIR		RESCHEDULE FOR MONDAY 4/11 INSPECTOR: <i>[Signature]</i>
7127 18	MULLIGAN 20 FIELDWAY GIFFORD ELECTRIC	FINAL DEMO & MINOR ELEC		RESCHEDULE FOR MONDAY 4/11 INSPECTOR: <i>[Signature]</i>
6172 #1	ELDER 4 MARGUERITE OB	REPAIR WALL (FIRST PLEASE)		 INSPECTOR: <i>[Signature]</i>
6908 5	WOLCOTT 7 ISLAND ROAD PACIFIC ROOFING	FINAL ROOF	FAIL	#40 INSPECTOR: <i>[Signature]</i>
6941 21	JONAS 12 N. SEWALL'S Pt Wm LANIERO	FINAL DEMO REPAIR + MINOR ELECTRICAL		RESCHEDULE FOR MONDAY 4/11 INSPECTOR: <i>[Signature]</i>
7054 4	TAPPER 22 ISLAND RD WINCHIP	STEM WALL STEEL	FAIL PASS	#40 INSPECTOR: <i>[Signature]</i>
7306 17	RIMER 29 S. RIVER RD LEAR DEV	BOND BEAM + STEEL	PASS	INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/24, 2004 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1652	MILORD	TINTAG+METAL	PASS	
3	10 N. SEWALL'S Pt MILORD			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1672	Edge	SCAB	PASS	
1	4 MARGUERITA O/B	(FIRST PLEASE)		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
DOCK PRE- CHECK 2	MOSLEY 52 S. SEWALL'S Pt	CHECK DOCK CONFIG. AGAINST OLD PERMIT	PASS	DOCK FOOTPRINT HAS NOT CHANGED
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
	PETERSON	CHECK		
	49 RIO VISTA DRIFTWOOD	DUMPSTER		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____



6772

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARQUERITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

SLAB / FTG

NEED COMPACTION TEST

" SURVEY

" COPY OF TERMITES TREATMENT

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

DATE: 4/15

A handwritten signature of the inspector, appearing to be "JK", written over a horizontal line.

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/15, 2005 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7349	MAUD	ELEC. SIC. CAG	PASS	CLOSE
12	21 N. RIVER RD	BATH RENOVATION	PASS	CLOSE
	KRAUSS + CRANE	DNK FINAL	FAIL	INSPECTOR: <i>[Signature]</i>
7281	DOBSON	FINAL DOCU	FAIL	
7	22 PALM ROAD			
	TROPIC MARINE			INSPECTOR: <i>[Signature]</i>
6711	EIDER	FINAL ROOF	PASS	
3	4 MARGUERITE DR	CONC. PEEHOLE	FAIL	
	O/B			INSPECTOR: <i>[Signature]</i>
7449	FERRARO	FOUNDATION	FAIL	
1A	4 KINGSTON CT			
	GULICK	(FIRST PLEASE)		INSPECTOR: <i>[Signature]</i>
7484	LASKY	FENCE FOOTERS	PASS	
1	27 W. HIGH POINT			
	SEAGATE BLDGS	(EARLY PLEASE)		INSPECTOR: <i>[Signature]</i>
7419	PATTERSON	DRY-IN	FAIL	
11	109 N. SEWALL'S PT			
	ROBERT STEIN			INSPECTOR: <i>[Signature]</i>
TREE	SCHNABEL	TREE	PASS	
8	122 S. SEWALL'S			INSPECTOR: <i>[Signature]</i>

OTHER:

113 N. S. P.R. STOP WORK ORDER

AC#1 - 60A

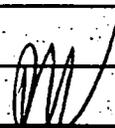
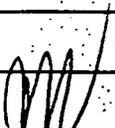
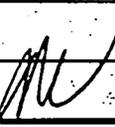
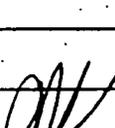
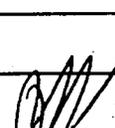
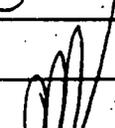
AC#2 - 60A

AC#3 - 50A

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri JULY 14, 2002 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6413	POWERS	WINDOWS-	PASS	
7	70 S. SEWALL'S PT	PARTIAL ELEC.	PASS	INSPECTOR: 
	FLORIDA'S FINEST			
6798	PARK	STAIRWAY STEEL	PASS	
3	3 MINDORO			INSPECTOR: 
	RALPH PARKS			
6772	ELDER	TEMP POLE	PASS	CALL FPL TO
3	4 MARGUERITA	WIR BACK RIGHT CORN		INSTALL METER
	O/B			INSPECTOR: 
6797	WERLE	HARD PLANK	PASS	
12	3 KNOWLES			INSPECTOR: 
	DENNIS PROCTOR			
6419	MENDOZA	INSULATION	PASS	
2	144 S. SEWALL'S PT		FAIL	INSPECTOR: 
	MASTER PLAN			
6776	WOLCOTT	BATHROOM INS.	PASS	
1	7 ISLAND ROAD			INSPECTOR: 
	FRAN WILSON BUDS			
6247	TIDIKIS *	DOCK ELEC	PASS	CLOSE
4	12 CRANE'S NEST			INSPECTOR: 
	HASS ELECTRIC			

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARLESAURITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same

E/C - PASSED

E/C ROUGH - PASSED.

PLUMBING ROUGH.

KILL SHOWER PAN w/ WATER

NEED PLUMBING WATER PIPING

CORRODING

NEED SHOWER VALVE.

FRAMING - PASSED

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

DATE: 11/14

A handwritten signature in black ink, appearing to be "M. J. ...", written over a horizontal line.

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/14, 2005

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
16672	ELOER	ROUGH	PASS	ROUGH A/C
3	4 MARIANA. DR O/B	FINAL PLUMB. & FINAL FRAMING PLUMBING ROUGH	PASS FAIL	PLD & ELEC INSPECTOR: <i>[Signature]</i>
7576	WOODS.	FRAMING + HVAC.	FAIL	
8	10 CASTLE HILL WAY STEPHEN WIDE ARCHITECT ENGR & CONTR.	772 473 0271		INSPECTOR: <i>[Signature]</i>
7809	D'ALESSANDRO.	QUOTATION ON.	-	CONFERRED W/ H.C.
5	4 MARIANA WAY.	PUMP REPAIRS. 283-5457		& CONTR. INSPECTOR: <i>[Signature]</i>
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/21, 2005 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7776	ELDER	INTERIOR	PASS	
2	4 MARGARITA	GAS TROUGH		INSPECTOR:
	PROPANE DISC.			
6812	MADER	TRUSS ENDR	PASS	
1	106 ABBIE CT	(REINSPECT)		INSPECTOR:
	BUFORD			
7576	SILAS	ROOF SHEATH.	PASS	
5	10 CASTLE HILL			INSPECTOR:
7776	ELDER	GASTANIL+LINE	PASS	
3	4 MARGUERITA WAY			INSPECTOR:
	PROPANE DISCOUNTERS			
7869	VON STADEN	FINAL ROOF	FAIL	
4	20 N. VIA LUCINDIA			INSPECTOR:
	SEASIDE ROOFING			
7777	CATHEY	FOOTING	FAIL	
	47 S. Sewall's Pt	11:30		INSPECTOR:
	DRIFWOOD HOMES			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <u> </u>

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGUARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

POWER RELEASE

NEED POWER RELEASE FORM
COVER ALL TELEPHONES, SWITCHES
& LIGHT FIXTURES

HOOK UP HANDWIRED APPLIANCES
& EQUIP.

REMOVE DISC IN INTERIOR PANELS,
GROUNDING WIRE MISSING AT
GALV. BAR PIPING,
LABOR PANELS-

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

DATE: 2/27

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/12, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	KIPLINGER	TREE	PASS	
2	143 S. RIVER RD			INSPECTOR: <i>[Signature]</i>
7921	KAKAYONNIS	FINAL ROOF	PASS	CLOSE
3	80 S. RIVER RD MARC PROVENCHER			INSPECTOR: <i>[Signature]</i>
6772	ELDER	STAIRS	PASS	
9	4 MARGUERITE RD O/B	PLUMB + ELEC 708-5310 11:30?	PASS	INSPECTOR: <i>[Signature]</i>
6891	ZAMBO	FINAL A/C	PASS	CLOSE
5A	46 S. S. P. R. o/b.	DEM WALL MOBS		INSPECTOR: <i>[Signature]</i>
7938	BONIFACE	FOUNTAIN STEEL	PASS	
5B	63 S. RIVER RD ADVANTAGE POOLS			INSPECTOR: <i>[Signature]</i>
	AIKERS			CONFERRED W/
	38. W. HIGH PT. 287-9898			H/O. ADAPT. ROOF. INSPECTOR: <i>[Signature]</i>
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/27, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8012	TRANTEE	STRAPPING	PASS	
3	9 MIDDLE RD	ROOT SHEATHING	WILL RESCHEDULE	INSPECTOR: <i>OM</i>
	PARKS			
7503	LADD	FINAL RENOVATION	PASS	CLOSE
5	21 SIMARA ST		PASS	INSPECTOR: <i>OM</i>
	HARTLEY CAULFIELD			
7874	SLATER	TIE DOWN	FAIL	
2	4 LAGOON ISLET	SUBSIDING		INSPECTOR: <i>OM</i>
	CONWAY			
7632	GEISINGER	FINAL RENOV.	PASS	CLOSE
1	8 CASTLE HILL WAY	GUEST HOUSE		INSPECTOR: <i>OM</i>
	O/B	? EARLY PLEASE		
777	CATHEY	ELECTRICAL	PASS	
6	47 S. SEAWALK	ROUGH IN.		INSPECTOR: <i>OM</i>
	HERITAGE ELEC			
6772	ELOE	POWER RELEASE	FAIL	
4	4 MARGUERITE WAY	SWALE	PASS	INSPECTOR: <i>OM</i>
	O/B			
TREE	MORALES	TREE	PASS	
8	10 N. RIDEVIEW			INSPECTOR: <i>OM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/6, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6772	EUDER	FINAL ELEC	FAIL	E-MAIL/FRC
5	4 MARGUERITA DR 01B	POWER REL	PASS	INSPECTOR: 
7809	D'ALESSANDRO	INSULATION	PASS	
8	4 EMARITA WAY 01B			INSPECTOR: 
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT
Building Department
One South Sewall's Point Road
Sewall's Point, Florida 34996

POWER RELEASE AGREEMENT: PN: _____
(To be submitted at final electrical inspection in order to turn on electric service)

Owner: ROBERT J. BROWN III Address: 3 WORTH CT. SEWALL'S POINT
Project Address: 4 MARGUERITA DR Legal: Lot: 11 Block: _____ Subdivision: MARGUERITA
General Contractor: OWAM BUILD Lic/Cert. No.: _____
Address: _____ Tel: 287-2600 Fax: 287-0115
Electrical Contractor: OWAM Lic/Cert. No.: _____
Address: _____ Tel: _____ Fax: _____

WHEREAS, pursuant to the provisions of, and governed by the National Electrical Code and Ordinances of the Town of Sewall's Point, electric hook-up for use during building operations and for testing purposes under a valid building permit is authorized under prescribed terms and conditions; and,

WHEREAS, the above named responsible persons, firms or corporations have requested an electrical hook-up of ELECTRIC POWER for the purpose of _____ at the above designated construction now in progress under a valid building permit; and equipment and completion of building operations as herein above described.

NOW THEREFORE IT IS AGREED BY AND BETWEEN THE PARTIES THAT:

1. The parties to this agreement are Gene Simmons, Building Official, Town of Sewall's point, and the above named responsible persons, firms, corporations.
2. In order to allow electrical service to be provided to certain equipment being placed at the referenced construction address the Building Official hereby agrees to grant an electrical hook-up permit.
3. This electrical hook-up will be revoked or a Certificate of Occupancy will be issued to verify completion.
4. The electric hook-up is solely for the purposes stated. No furniture or occupants will be moved into the building until a Certificate of Occupancy is issued.

IN WITNESS WHEREOF the parties have caused this agreement to be executed this 6th day of MARCH, 2006.



SIGNATURE OF GENERAL CONTRACTOR



SIGNATURE OF ELECTRICAL CONTRACTOR



SIGNATURE OF OWNER

GENE SIMMONS, BUILDING OFFICIAL



Martin County Health Department
(772) 221-4090 Fax. (772) 221-4967

TO BUILDING DEPARTMENT INSPECTIONS:

___ MARTIN COUNTY (772) 288-5916 FAX: (772) 288-5911 ___ CITY OF STUART (772) 288-5326 FAX: (772) 288-5388

___ JUPITER ISLAND (772) 545-0150 FAX: (772) 545-0188 SEWALLS POINT (772) 287-2455 FAX: (772) 220-4765

FROM: RAY CROSS DATE: 3/6/06

SUBJECT: FINAL CONSTRUCTION APPROVAL FOR SEPTIC SYSTEMS

<u>HEALTH DEPT. SEPTIC PERMIT#</u>	<u>BUILDING DEPT. PERMIT #</u>	<u>LOCATION</u>
• 43-SS-0 <u>6409</u>	<u>6772</u>	<u>4 SE MARGUERITA DR</u>
• 43-SS-0 _____		



6772

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

NEED HANDRAILS @ STAIRS

NEED SEC FENCE @ POOL

LOOSE GAS PIPING @ REAR

REMOVE PORTABLE TOILET

TRIM OUT SWITCHES & RECEPT.

CAULK OPENINGS ON OUTSIDE WALL -

" LIGHT FIXTURES

REUSE ELEV. CERT. TO ADDRESS FLOOD
VENTS.

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

DATE: 3/27/06

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/27, 2006

Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8104	MIRAGLIA	ROOF SHEATHING	FAIL	
3	66 N. SEWALL SP PACIFIC ROOFING			INSPECTOR: <i>[Signature]</i>
7927	ATHOS	FLAT ROOF	FAIL	
4	3 Gumbo Limbo Wy O/B			INSPECTOR: <i>[Signature]</i>
6772	ELDER	FINAL SET	FAIL	
1	4 MARGUERITA O/B			INSPECTOR: <i>[Signature]</i>
		708-5310		
7801	CUMMINAS	DUMBINA PAU	PASS	
2	83 S. RIVER RD MASTERS DUMBINA			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/29, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7576	SILAS	WATERFALL	FAIL	
9	10 CASTLE HILL WAY	DEBAR		
	STATEWIDE / GUPPIN	GENERATOR ETC	will	RESCHEDULE INSPECTOR: <i>OM</i>
8089	RIMER	GENERATOR PAD	PASS	
4	29 S. RIVER RD			
	O/B			INSPECTOR: <i>OM</i>
6772	ETHEL	FINAL SP	PASS	CLOSE
2	4 MARGUERITA			
	O/B			INSPECTOR: <i>OM</i>
TREE	TWOHEY	TREE	PASS	AS REVISED
8	119 HILLCREST DR			
				INSPECTOR: <i>OM</i>
7927	ATHOS	FLAT ROOF IN PROG	PASS	CLOSE
11	3 GUMBOLIMBO WAY			
	O/B			INSPECTOR: <i>OM</i>
7968	DUNN	DOCK BOAT LIFT	PASS	CLOSE
12	31 N. RIVER RD			
	CERTIFIED MARINE			INSPECTOR: <i>OM</i>
TREE	KIPLINGER	TREE	PASS	
	143 S. RIVER			INSPECTOR: <i>OM</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/29, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7576	SILAS	WATERFALL	FAIL	
9	10 CASTLEHILLWAY	REBAR		
	STATENIDE/GUMFRI	GENERATOR PAD	WILL	RESCHEDULE INSPECTOR: <i>[Signature]</i>
8089	RIMER	GENERATOR PAD	PASS	
4	29 S. RIVER RD			
	O/B			INSPECTOR: <i>[Signature]</i>
6772	ESTER	FINAL STR	W/S	CLOSE
2	4 MARGUERITA			
	O/B			INSPECTOR: <i>[Signature]</i>
TREE	TWOHEY	TREE	PASS	AS REVISED
8	119 HILLCREST DR			
				INSPECTOR: <i>[Signature]</i>
7927	ATHOS	FLAT ROOF IN Prog	PASS	CLOSE
11	3 GUMBOLIMBOWY			
	O/B			INSPECTOR: <i>[Signature]</i>
7968	DUNN	DOCK BOAT LIFT	PASS	CLOSE
12	31 N. RIVER RD			
	CERTIFIED MARINE			INSPECTOR: <i>[Signature]</i>
TREE	KIPLINGER	TREE	PASS	
	143 S. RIVER			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

NEIL SUBIN
Commissioner

DON OSTEEN
Commissioner

Town Manager

JOAN H. BARROW
Town Clerk

LARRY E. McCARTY
Chief of Police

GENE SIMMONS
Building Official

CERTIFICATE OF OCCUPANCY

Single Family Residence Other _____

OWNER: ROBERT + ELISE ELDER PROPERTY ADDRESS: 4 MARGUERITA DR.

LEGAL DESCRIPTION: LOT 11 BLOCK _____ SUBDIVISION MARGUERITA

GENERAL CONTRACTOR: OWNER/BUILDER LIC/CERT NO: _____

ARCHITECT OR ENGINEER: DPN BRADEN LIC/CERT NO: _____

PERMIT NO: _____; DATE OF ISSUE: _____; RENEWAL PERMIT NO: _____; DATE OF ISSUE: _____

CODE ADDITION: 2001 TYPE: RES USE: N/A OCCUPANCY: N/A

OCCUPANT LOAD: N/A SPRINKLERS REQUIRED: N/A SPRINKLERS USED: N/A

The described portion of the structure has been inspected for compliance with the requirements of this Code for occupancy and division of occupancy and the use for which the proposed occupancy is classified.

In accordance with the requirements of the Florida Building Code and the Codes and Ordinances of the Town of Sewall's Point, Florida, this Certificate of Occupancy is hereby issued for the foregoing described property.

Entered at Sewall's Point, Florida, this 30 day of MARCH, 2006.



GENE SIMMONS, CBO.



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

TOWN OF SEWALL'S POINT

E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
Vice Mayor

THOMAS P. BAUSCH
Commissioner

NEIL SUBIN
Commissioner

DON OSTEN
Commissioner



Town Manager

JOAN H. BARROW
Town Clerk

LARRY E. McCARTY
Chief of Police

GENE SIMMONS
Building Official

CERTIFICATE OF OCCUPANCY

Single Family Residence Other _____

OWNER: ROBERT + ELISE ELDER PROPERTY ADDRESS: 4 MARGHERITA DR

LEGAL DESCRIPTION: LOT 11 BLOCK _____ SUBDIVISION MARGHERITA

GENERAL CONTRACTOR: OWNER/BLINDL LIC/CERT NO: _____

ARCHITECT OR ENGINEER: DON BRADEN LIC/CERT NO: _____

PERMIT NO: _____; DATE OF ISSUE: _____; RENEWAL PERMIT NO: _____; DATE OF ISSUE: _____

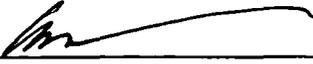
CODE ADDITION: 2001 TYPE: N/A USE: RES OCCUPANCY: N/A

OCCUPANT LOAD: N/A SPRINKLERS REQUIRED: N/A SPRINKLERS USED: N/A

The described portion of the structure has been inspected for compliance with the requirements of this Code for occupancy and division of occupancy and the use for which the proposed occupancy is classified.

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TOWN OF SEWALL'S POINT

E. DANIEL MORRIS
Mayor

PAMELA M. BUSHA
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Commissioner

NEIL SUBIN
Commissioner

DON OSTEN
Commissioner



Town Manager

JOAN H. BARROW
Town Clerk

LARRY E. McCARTY
Chief of Police

GENE SIMMONS
Building Official

CERTIFICATE OF OCCUPANCY

Single Family Residence Other _____

OWNER: ROBERT + GUYSE ELDER PROPERTY ADDRESS: 4 MARGHERITA DR

LEGAL DESCRIPTION: LOT 11 BLOCK _____ SUBDIVISION MARGHERITA

GENERAL CONTRACTOR: DUNN/BUNDEL LIC/CERT NO: _____

ARCHITECT OR ENGINEER: OPN BRADEN LIC/CERT NO: _____

PERMIT NO: _____; DATE OF ISSUE: _____; RENEWAL PERMIT NO: _____; DATE OF ISSUE: _____

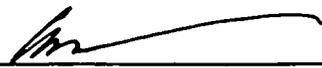
CODE ADDITION: 2001 TYPE: N/A USE: RES OCCUPANCY: N/A

OCCUPANT LOAD: N/A SPRINKLERS REQUIRED: N/A SPRINKLERS USED: N/A

The described portion of the structure has been inspected for compliance with the requirements of this Code for occupancy and division of occupancy and the use for which the proposed occupancy is classified.

In accordance with the requirements of the Florida Building Code and the Codes and Ordinances of the Town of Sewall's Point, Florida, this Certificate of Occupancy is hereby issued for the foregoing described property.

Entered at Sewall's Point, Florida, this 30 day of MARCH, 2006.



GENE SIMMONS, CBO.



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



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MAC LAURITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

SFR FINAL

NEED COVER PLATES ON
V-BOX UNDER WHIRLPOOL
RANGE HOOD MISSING -
NEED OFCI RECEIPT IN LAUNDRY.

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

DATE: 3/29

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

7670

POOL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 7/6/05

BUILDING PERMIT NO. 7670

Building to be erected for ELDER

Type of Permit Swimming Pool

Applied for by OLYMPIC POOLS (Contractor)

Building Fee 240.00

Subdivision MARGUERITA Lot 11 Block _____

Radon Fee _____

Address 4 MARGUERITA

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

1338410110000011010000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 264.00 Check # 4303 Cash _____

Other Fees (~~10%~~ PA) 24.00

Total Construction Cost \$ 16,900.00

TOTAL Fees 264.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL

- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL

- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

- UNDERGROUND PLUMBING _____
- UNDERGROUND MECHANICAL _____
- STEMWALL FOOTING _____
- SLAB _____
- ROOF SHEATHING _____
- TRUSS ENG/WINDOW/DOOR BUCKS _____
- ROOF TIN TAG/METAL _____
- PLUMBING ROUGH-IN _____
- MECHANICAL ROUGH-IN _____
- FRAMING _____
- FINAL PLUMBING _____
- FINAL MECHANICAL _____
- FINAL ROOF _____

- UNDERGROUND GAS _____
- UNDERGROUND ELECTRICAL _____
- FOOTING _____
- TIE BEAM/COLUMNS _____
- WALL SHEATHING _____
- LATH _____
- ROOF-IN-PROGRESS _____
- ELECTRICAL ROUGH-IN _____
- GAS ROUGH-IN _____
- EARLY POWER RELEASE _____
- FINAL ELECTRICAL _____
- FINAL GAS _____
- BUILDING FINAL _____

Renewal: ~~4 mo @ 26/mo = \$10560~~ fd 10/20/06 ch # 1139
Good until 11/6/06

C

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 7/6/05

BUILDING PERMIT NO. **7670**

Building to be erected for ELDER

Type of Permit Swimming Pool

Applied for by OLYMPIC POOLS O/B (Contractor)

Building Fee 240.00

Subdivision MARGUERITA Lot 11 Block _____

Radon Fee _____

Address 4 MARGUERITA

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

Electrical Fee _____

1338410110000011010000

Plumbing Fee _____

Amount Paid 264.00 Check # 4303 Cash _____

Roofing Fee _____

Other Fees 10% PA 24.00

Total Construction Cost \$ 16,900.00

TOTAL Fees 264.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

ROBERT J. ELDER III ELYSE A. ELDER 4 MARGUERITA DR. SEWALLS POINT, FL 34996		04-01	1139
Date <u>10/20/06</u>		63-515/670 01	
Pay to the Order of <u>TOWN of Sewalls Point</u>	\$ <u>105⁶⁰</u>		
<u>ONE HUNDRED & FIVE</u>	<u>60</u> <u>750</u> Dollars		
Seacoast NATIONAL BANK STUART, FLORIDA 34904	<u>[Signature]</u>		
For <u>Pool EXT. PART.</u>	_____		

October 11, 2006

Rob Elder
4 Marguerita Drive
Sewall's Point, FL 34996

OR 10/11/06
JE

John Adams, Building Official
Town of Sewall's Point
One South Sewall's Point Road
Sewall's Point, FL 34996

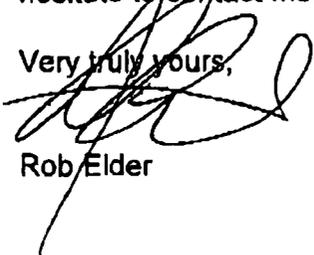
RE: Termination of Pool Permit

Dear Mr. Adams:

As discussed I am having problems with my pool contractor, Olympic Pools. I wish to hereby terminate the pool permit and proceed with a final inspection as an owner builder.

If you have any questions or require any additional information please do not hesitate to contact me. I can be reached at 475-5067.

Very truly yours,


Rob Elder

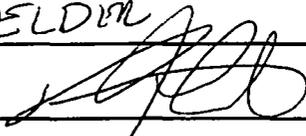
TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

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

DISCLOSURE STATEMENT

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

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

Name: Rob ELDER Date: 10/20/06
Signature: 
Address: 4 MARGUERITA
City & State: STUART FL 34996
Permit No. 7670

RECEIVED
6/27/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION 475-5067 Permit Number: _____

Date: _____

OWNER/TITLEHOLDER NAME: Robert J. Elden III Phone (Day) 223-9304 (Fax) _____

Job Site Address: 4 Margarita Rd City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Lot #11 / Margarita SD Parcel Number: 13-38-41-011-000-00110-1

Owner Address (if different): 3 Worth Ct City: Stuart State: FL Zip: 34996

Description of Work To Be Done: Swimming Pool

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 16,900.
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

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

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: Olympic Pools of Stuart Phone: 286-6070 Fax: 288-6962

Street: 3331-B SW 42nd Ave City: Palm City State: FL Zip: 34990

State Registration Number: _____ State Certification Number: CPC039888 Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: Olympic Pools State: _____ License Number: CPC039888

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

ENGINEER Curtis Simlin Lic# 35831 Phone Number: (561) 630-8534

Street: 8259 N. Military Trail Suite 3 City: Palm Beach Gardens State: FL Zip: 33418

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

Carport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required) [Signature]

CONTRACTOR SIGNATURE (required) [Signature]

State of Florida, County of: MARTIN

On State of Florida, County of: MARTIN

This the 5th day of JULY, 2005

This the 1st day of JULY, 2005

by Robert Elden who is personally

by Thomas W McNulty who is personally

known to me or produced

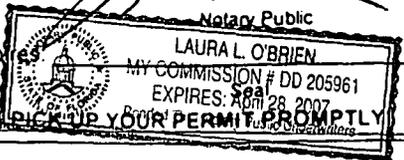
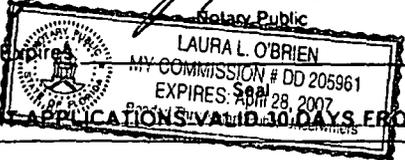
known to me or produced [Signature]

as identification. [Signature]

As identification. [Signature]

My Commission Expires _____

My Commission Expires _____



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

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITALS FOR SWIMMING POOL

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

Application form must contain the following information:

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

Submittals (2 copies)

1. Current survey showing the following information:
 - a. Legal Description of Lot
 - b. Lot dimensions and bearings
 - c. Street and Waterway names
 - d. Location of pool and or spa with dimensions from property line
 - e. Location of pool/spa equipment with disconnect
 - f. Finish deck elevations (proposed and existing)
 - g. Location of proposed or existing deck with dimensions from property line
 - h. Crown of road(s)
 - i. Easements
 - j. Road Right-Of-Ways
 - k. Canals, Ponds, or Riverfront locations
 - l. Impervious/Pervious Calculations
 - m. Certification to the Town Of Sewall's Point
 2. Statement of Fact (owner/builder affidavit)
 3. Proof of ownership (deed or tax recpt.)
 4. Application for tree removal or relocation (attach tree survey and removal or relocation plan)
 5. A certified copy of the Notice of Commencement for any work over \$2500.00
 6. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
 7. Copy of Workmen's Compensation
 8. Copy of Liability Insurance
 9. Copy of Town of Sewall's Point swimming pool affidavit stating type of barrier to be provided
-

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

1. Construction plans containing the following information:

Pool dimensions

Volume in gallons

Specific pool profile showing depth and slope

Typical pool wall section. Indicate when in the angle of repose

Provide angle of repose detail when required

Provide vapor barrier for all concrete decks

Provide pump make, model and capacity

Piping diagram to contain the following:

Suctions inlet covers

Vacuum cleaner system with isolation valves must have protected outlet by either approved antivortex cover, 12" x 12" grate or larger or other approved means

Back up system when grate covers are missing alternative vacuum relief devices shall include either:

Approved vacuum release system

Approved vent piping

Other approved devices or means

Minimum two (2) suction inlets per pumps. Minimum three (3) feet separation and located on two (2) different planes.

Vacuum or pressure cleaner fitting(s) must be accessible at least six (6) inches and not greater than twelve (12) inches below the minimum operating water level or as an attachment to the skimmer(s)

Pump must contain the following:

Strainer on inlet side must be mounted on a substantial base

Capacity following heads:

Pressure diatomaceous earth – at least sixty (60) feet

Vacuum diatomaceous earth – twenty (20) inch Vacuum on the suction side and forth (40) feet total head

Rapid sand – at least forty-five (45) feet

High rate sand – at least sixty (60) feet

Valves must have the following:

When under concrete slab must be located in a pit minimum five (5) pipe diameter minimum of then (10) inches with cover.

Full-way (gate) valves – When below overflow rim of pool a valve must be installed on discharge outlet and suction line.

Check valves must be of the swing or vertical check patterns.

Water Supply must have the following:

Backflow

No over the rim fill spout unless under diving board or guarded.

Water heating equipment must have the following:

Labeled equipment

Water retention – must provide positive means of retaining water in the heater when pump is not in operation

Relief valve – closed system must have pressure relief valve on discharge side

Florida Energy Code – Section 612.1.ABC.2.3

On-off switch required

Cover designed to minimize heat loss

Time clocks – run during off-peak electric demand periods

Provide Pool Barrier

Ladders and Steps

Water depth more than 24 inches must have ladder or steps (ma. step rise 12 inches)

More than 5 foot depth must have ladders, stairs or underwater benches/swimouts in deep end

If diving equipment is used swimouts must be recessed or located in the corner

Show ladder detail. Detail electric bonding and compliance to NEC

Skimmers must contain the following:

Surface skimmers are required

One (1) per 1000 square feet of surface area

Minimum Flow rate of 25 GPM per skimmer

Main outlet must be installed at the deepest point

Inlet Fitting must contain the following:

One per 150000 gallons

Where more than one (1) is required must be a minimum of 10 feet separation

Show side detail with electric bonding and compliance to manufacturer specifications

Show handhold locations when required

Provide Electric diagram

Provide GFI outlet located per NEC

Equipment Foundation and Enclosures

Must be on one (1) concrete base or slab

All heating and electrical equipment must be protected from the weather

**ALL INFORMATION AND DOCUMENTS MENTIONED ABOVE
ARE INCLUDED IN THE MY PERMIT APPLICATION PACKAGE**



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: _____

RETURN TO:
FIDELITY FEDERAL BANK & TRUST
c/o Debra Schiavone
205 Datura Street
West Palm Beach, FL 33401
Loan Number: 140042374

=====
=====Space above this line for recording purposes only=====

PERMIT NO. _____ FOLIO NO: 13-38-41-011-000-00110-1

STATE OF FLORIDA
COUNTY OF Martin

The undersigned hereby give Notice that improvements will be made to certain real property, and in accordance with Section 713.13, Florida Statutes, the following is provided in this Notice of Commencement. This Notice shall be void and of no force and effect if construction is not commenced within ninety (90) days after recordation.

NOTICE OF COMMENCEMENT

1. Description of the property: 4 MARGUERITA ROAD
STUART, FLORIDA 34996
LOT 11, MARGUERITA SUBDIVISION, ACCORDING TO THE MAP OR PLAT
THEREOF AS RECORDED IN PLAT BOOK 10, PAGE(S) 3, PUBLIC RECORDS OF
MARTIN COUNTY, FLORIDA.

2. General description of improvement:
TWO STORY SINGLE FAMILY RESIDENCE WITH ALL OTHER RELATED
IMPROVEMENTS

3(a). The owner:
Name: ROBERT J ELDER III

Address: 3 WORTH COURT
STUART , FL 34996

Phone Number: 772-223-9304

INSTR # 1746487
OR BK 01891 PG 1218
RECORDED 04/28/2004 08:54:02 AM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY L Wood

1

NOTC1M

WITNESS:

Lawrence E. Cary III
Print Name: Lawrence E. Cary III

Robert J. Elder III
Owner: ROBERT J ELDER III

Candice R. Underwood
Print Name: CANDICE R. Underwood

Owner:

Print Name:

Owner:

Print Name:

Owner:

Print Name:

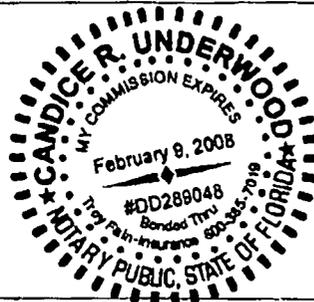
Owner:

Print Name:

Owner:

SWORN TO AND SUBSCRIBED before me this 26th day of April 2004, by Robert J. Elder III who is personally known to me or who has produced identification. 85

Candice R. Underwood
Notary Public State of Florida



Candice R. Underwood
Printed Name of Notary Public

Notary Commission Number

3(b). Owner's interest in the site of the improvement: FEE SIMPLE

3(c). Fee simple title holder (if other than owner):

Name:

Address:

4. Contractor: OWNER-BUILDER

Phone Number:

5. Surety:

Address:

Phone Number:

Amount of Bond:

A Copy of the payment bond (if any) is attached hereto.

6. Lender (Persons or entities making a loan for construction of improvements):

FIDELITY FEDERAL BANK & TRUST
205 DATURA STREET, WEST PALM BEACH, FL 33401
Phone Number: 561-803-9739 (Construction Department)
Fax Number: 561-803-9745 (Construction Department)

7. Name and address of person within the State of Florida designated by the owner as person upon whom notices or other documents may be served as provided by Florida Statute Section 713.13(1)(a)(7):

Name:

Address:

8. The owner has designated the following person, in addition to himself, to receive a copy of the lienor's notice as provided in Section 713.13(1)(b) of the Florida Statute:

FIDELITY FEDERAL BANK & TRUST
205 DATURA STREET
WEST PALM BEACH, FL 33401
Phone Number 561-803-9739 (Construction Department)
Fax Number 561-803-9745 (Construction Department)

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

The recording of this Notice of commencement does not constitute a lien, cloud or encumbrance on the described real property, but gives constructive notice that claims of lien may be filed under Chapter 713 of the Florida Statutes.

TOWN OF SEWALL'S POINT

RESIDENTIAL SWIMMING POOLS, SPA AND HOT TUB SAFETY ACT

AFFIDAVIT OF REQUIREMENT COMPLINACE

I (We) acknowledge that a new swimming pool, spa or hot tub has been constructed or installed at 4 Margarita Rd, and hereby affirm that one of the following methods has been used to meet the requirements of Chapter 515, Florida Statues.

* The pool is isolated from access to the home by an enclosure that meets the pool barrier requirements of Florida Statue 515.29

The pool is equipped with an approved safety pool cover that complies with ASTM F1346-91 (Stand Performance Specification for Safety Covers for Swimming Pool, Spas, and Hot Tubs)

All doors and windows providing direct access from the home to the pool are equipped with an exit alarm that has a minimum sound pressure rating of 85 decibels at 10 feet

All doors providing direct access from the home to the pool are equipped with self-closing, self-latching devices with release mechanisms placed no lower than 54" above the floor or deck

I understand that not having one of the above installed at the time of final inspection, or when the pool is completed for contract purposes, will constitute a violation of Chapter 515, F.S. and will be considered as committing a misdemeanor of the second degree, punishable by fines up to \$500 and/or up to 60 days in jail as established in Chapter 775, F.S.

* [Signature] *
CONTRACTOR'S SIGNATURE & DATE

* [Signature] *
OWNER'S SIGNATURE & DATE

[Signature]
NOTARY PUBLIC, STATE OF FLORIDA

Ashlee J. McCarthy
NOTARY PUBLIC, STATE OF FLORIDA
Ashlee J. McCarthy

AS TO CONTRACTOR PERSONALLY KNOWN OR PRODUCED ID EIDL 1254-839-57-208-0 TYPE LAURA L. O'BRIEN MY COMMISSION # DD 205961 EXPIRES: April 28, 2007 Bonded Thru Notary Public Underwriters x 6/28/10

AS TO OWNER PERSONALLY KNOWN OR PRODUCED ID TYPE

THIS FORM MUST BE SUBMITTED TO THE BUILDING DEPARTMENT PRIOR TO FINAL INSPECTION



OWNER'S AFFIDAVIT OF BUILDING COSTS

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

STATE OF FLORIDA
MARTIN COUNTY

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

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
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 \$ _____.
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.

* Affidavit's Signature:

Property Address:

SWORN TO and subscribed before me this 7 day
of June, 2005, by Ashlee
McCarthy, who is personally known to me or
produced _____ as identification.

Ashlee J. McCarthy
Notary Public Ashlee McCarthy
My commission expires: March 21, 2009

(Notary Seal)





TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$100,000

PERMIT # _____ TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida COUNTY OF Martin

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

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

4 Manzanita Rd Lot 11 Plat Book 10 Page 3

GENERAL DESCRIPTION OF IMPROVEMENT: Swimming Pool / Deck

OWNER: Robert S. Elder III

ADDRESS: 3 Worth Court, Stuart, FL 34996

PHONE #: 772 223-9304 **FAX #:** _____

CONTRACTOR: Olympic Pools of Stuart Corp

ADDRESS: 3331 - B 42nd Ave

PHONE #: 772-286-6070 **FAX #:** 772 288 6967

SURETY COMPANY (IF ANY): _____

ADDRESS: _____

PHONE #: _____ **FAX #:** _____

BOND AMOUNT: _____

LENDER: Fidelity Federal Bank + Trust

ADDRESS: 205 Datura Street, West Palm Beach, FL 33451

PHONE #: 561 803 9739 **FAX #:** 561-803 9745

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

NAME: _____

ADDRESS: _____

PHONE #: _____ **FAX #:** _____

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

PHONE #: _____ **FAX #:** _____

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

[Signature]
* SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 7 DAY OF June

Ashlee J. McCarthy

PERSONALLY KNOWN
OR PRODUCED ID _____
TYPE OF ID _____

Ashlee J. McCarthy
NOTARY SIGNATURE Ashlee J. McCarthy



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/25/05, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7455	Wilson	Frame	PASS	
11	11 NE Lidstone Way Bulford Constr			INSPECTOR:
TR55	Scheppe	brush/clear lot	PASS	
3	9 Palm Road			INSPECTOR:
7510	Sider	Pool steel	PASS	
1	4 Marguerite Olympic			INSPECTOR:
6813	Mader	Tie beam	CANCEL	
2	106 Abbey Ct Bulford			INSPECTOR:
7568		DRY-IN	PASS	
8A	27 N. RIVER PACIFIC			INSPECTOR:
7623		DRY-IN	PASS	
5A	82 S. RIVER PACIFIC			INSPECTOR:
	SHORPE			
	9 PALM RD			INSPECTOR:

OTHER: 37 W. H. P. FILL PERMIT ~~FAIL~~ ~~DATE~~



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGUERITA DR.

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

POOL PLUMBING -

- NO PERMIT ON SITE

- PRESSURE NO HOLDING

REINSPECTION FEE \$40.00

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

DATE: 10/14/05

GENE SIMMONS

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/14, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7710	BONIFACE	POOL PERIMETER	FAIL	\$40
2	63 S. RIVER RD ADVANTAGE POOLS	PLUMBING		INSPECTOR: <u>h</u>
7576	SILAS	PARTIAL ROOF SHEATHING	PASSED	
7	10 CASTLE HILL WY GENL SVCS OF FL	PARTIAL FIN TAG		INSPECTOR: <u>h</u>
7828	EUSTACE	FINAL PARTIAL	PASSED	
6	114 N. SEWALLS PT STRUCTURE-CON	DECK DETROUSH	FINAL	INSPECTOR: <u>h</u>
7775	BARNHILL	FINAL ROOF	PASSED	
3	4 N. RIDGEVIEW LAHAR ROOFING	REPAIR	FINAL	INSPECTOR: <u>h</u>
7744	COBIELLA	WING WALLS	PASSED	
5	8 N. SEWALLS PT JEFF PEDERSON	ON PARAPET (COSMETIC) 370-5015	FAILED	INSPECTOR: <u>h</u>
7670	EUSTACE	POOL PLUMBING	FAIL	\$40
1	4 MARGUERITA DR OLYMPIC POOLS			INSPECTOR: <u>h</u>
7151	HARRIGAN	FINAL ROOF	PASSED	
4	2 PALMETTO DR QB	INTD EXT REMODEL + ADDITION ALL TRAPS	FINAL	INSPECTOR: <u>h</u>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/18, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7752 3	Keighton 43 W. High Point	TREE	PASS	INSPECTOR: <i>OM</i>
7860 1	Stulland 9 Mandalay Feazel Roofing	FINAL DRY-IN 8:15	PASS	INSPECTOR: <i>OM</i>
	Vado VIALEXIA AccuTemp	A/C.		INSPECTOR:
7784 6	Serafini 21 N. Via Lucinda Tradewinds	reinspect Final	PASS	CLOSE INSPECTOR: <i>OM</i>
7776	Elder 4 Marguerita Pinnacle/Discretion	Interior Rough	CANCELLED	INSPECTOR:
7054 12	Tappin 22 Island Rd. Kinchip Constr	INSULATION	PASS	INSPECTOR: <i>OM</i>
7670 5	Elder 4 Marguerita Olympic Pools	Plumbing ROUGH	PASS	INSPECTOR: <i>OM</i>
OTHER:				



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

7670

CORRECTION NOTICE

ADDRESS: 4 MARGARITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

POOL FINAL

TILE WORK NOT DONE AT
FOUNTAIN WALL.

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

DATE: 4/5

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/5, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8151	WILKINSON	FINAL HURRICANE SHUTTERS	PASS	CLOSE
6	8 OAKWOOD Dr GULFSTREAM			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7670	Excess	Pool FINAL	FAIL	
5	4 MARAQUITA OLYMPIC POOL			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8136	HARDIN	TEMP SVC	PASS	CALL FOR METER INSTALLATION
10	27 S. RIVER CANAM ELECTRIC			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8152	FREDRICK	FINAL DOCK REPAIR	FAIL	
13	32 S. SEWALL'S Pt HARBOR BAY MARINE			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8153	FREDRICK	FINAL PER. WALL	PASS	CLOSE
13	32 S. SEWALL'S Pt HARBOR BAY MARINE			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7380	BONIFACE	POOL PERIMETER	PASS	
9	63 S. RIVER RD WILSON			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7390	GOLDMAN	FINAL ROOF	PASS	
11	4 SUMMER LA OIB			INSPECTOR: <i>[Signature]</i>

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGHERITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

POOL FINAL

FENCE FINAL

NEED PERMITS POSTED FOR
FINAL INSPECTION.

CAN NOT LOCATE ATMOSPHERIC
RELIEF VENTS FOR POOL
DRAINS -

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

DATE: 10/6/06

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/6, 2006 Page 1 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8131	Slater	Final	PASS	Close
6	4 Lagoon Isl.			
	Ellis	Permit above transfer		INSPECTOR: <i>[Signature]</i>
8133	Slater	Final gen	PASS	Close
6	4 Lagoon Island			
	O/B			INSPECTOR: <i>[Signature]</i>
106	Prosseri	Final Shutter	FAIL	
4	8 Palmetto			
	O/B	Permit under monkey		INSPECTOR: <i>[Signature]</i>
Tree	Wallerquest	Tree	PASS	
5	3 Copaire Rd			
	O/B			INSPECTOR: <i>[Signature]</i>
3393	Flannery	Steel	PASS	
2	23 Riv Vista			
	Schiller Pools			INSPECTOR: <i>[Signature]</i>
8217	Elder	Fence final	FAIL	
1	4 Marquerita Dr			
	O/B			INSPECTOR: <i>[Signature]</i>
1070	Elder	Pool final	FAIL	
1	4 Marquerita Dr			
	O/B			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10-23, 2006

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
C.O	Silas	railing final	PASS	ISSUE C.O.
155	10 Castle Hill Gene Eichelberg			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1670	Order	Pool final	PASS	CLOSE
4	4 Margarita Way O/B	475- ^{CELL} 5067		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8217	Elder	Fence final	PASS	CLOSE
4	4 Margarita Way O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
764	Rucks	Final	FAIL	
3	20 N. Sewalls Pt Masterpiece			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8402	Muir	Final	PASS	CLOSE
2	14 Perruville La Folding Shutter			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8099	Rucks	Final-reins	PASS	CLOSE.
3	20 N. Sewalls Propane Disc			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7819	Tidikis	tie beam	PASS	
6	12 Cranes Nest Advanced	LAST 11:30		INSPECTOR: <i>[Signature]</i>

OTHER:

7776

GAS TANK & LINES

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9-15-05

BUILDING PERMIT NO. 7776

Building to be erected for ELDER

Type of Permit GAS TANK + LINES

Applied for by PROPANE DISCOUNTERS (Contractor)

Building Fee 35.00

Subdivision MARGUERITA Lot 11 Block _____

Radon Fee _____

Address 4 MARGUERITA DR

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

1338410110000011010000

Electrical Fee _____

Plumbing Fee _____

Amount Paid 35.00 Check # 467 Cash _____ Other Fees (_____)

Roofing Fee _____

Total Construction Cost \$ 2499.

TOTAL Fees 35.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED 9/2/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 9-2-05

Permit Number: _____

OWNER/TITLEHOLDER NAME: Rob Elder Phone (Day) 208 5310 (Fax) _____

Job Site Address: 4 MARGUERITA DR City: Sewall State: FL Zip: _____

Legal Desc. Property (Subd/Lot/Block) MARGUERITA Lot 11 Parcel Number: 133841011000011010000

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

Description of Work To Be Done: INSTALL 500 UG TRUNK LINE TO DRIP 2 FIREPLACES

WILL OWNER BE THE CONTRACTOR?:

YES

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 2499.00
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

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

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: Propane Discounters Phone: 225-7980 Fax: 225-7310

Street: 1108 NE INDUSTRIAL BLVD City: Jessup State: FL Zip: 32477

State Registration Number: _____ State Certification Number: _____ Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

ENGINEER _____ Lic.# _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

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

Carpport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

CONTRACTOR SIGNATURE (required)

State of Florida, County of: MARTIN

On State of Florida, County of: MARTIN

This the 2ND day of SEPTEMBER, 2005

This the 2ND day of SEPTEMBER, 2005

by ROBERT ELDER who is personally

by JAYLE SMITH who is personally

known to me or produced

known to me or produced

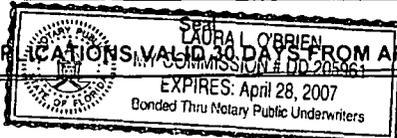
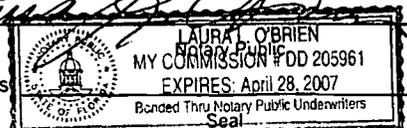
as identification. _____

as identification. _____

Notary Public

My Commission Expires _____

My Commission Expires _____



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

ACORD CERTIFICATE OF LIABILITY INSURANCE

CSR B2
PROPAND

DATE (MM/DD/YYYY)
11/16/04

PROD LTR MORRIS & REYNOLDS INSURANCE 14821 South Dixie Highway MIAMI FL 33176-7928 Phone: 305-238-1000 Fax: 305-255-9643	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED Propane Discounters, L.C. Mr. Jayce Smith 1108 NE Industrial Blvd Jensen Beach FL 34957	<table border="1"> <tr> <th>INSURERS AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A: St. Paul Fire and Marine InsCo</td> <td>24767</td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC #	INSURER A: St. Paul Fire and Marine InsCo	24767	INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC #												
INSURER A: St. Paul Fire and Marine InsCo	24767												
INSURER B:													
INSURER C:													
INSURER D:													
INSURER E:													

COVERAGES

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

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CK00217230	11/14/04	11/14/05	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000								
A		AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	CK00217230	11/14/04	11/14/05	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AGG \$ AUTO ONLY: AGG \$								
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTR-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATU-TORY LIMITS	OTR-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATU-TORY LIMITS	OTR-ER													
E.L. EACH ACCIDENT	\$													
E.L. DISEASE - EA EMPLOYEE	\$													
E.L. DISEASE - POLICY LIMIT	\$													
A		OTHER Property Section Special Form	CK00217230 REPLACEMENT COST	11/14/04	11/14/05	Contents 10,000 Backhoe 5,000								

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

CERTIFICATE HOLDER

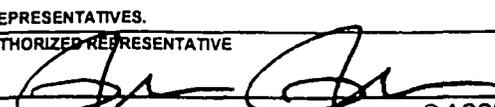
TOWNSEW

Town of Sewall's Pointe
 Laura
 1 S Sewall's Pointe Road
 S Sewall's Pointe FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE





POST LICENSE
CONSPICUOUSLY

State of Florida
Department of Agriculture and Consumer Services

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

License Number: 15540
Expiration Date: August 31, 2006
Date of Issue: September 1, 2005
License Fee: \$425.00
Type and Class: 0601

Liquefied Petroleum Gas License
CATEGORY I LP GAS DEALER

GOOD FOR ONE LOCATION

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

PROPANE DISCOUNTERS, L.C.
739 NE DIXIE HWY
JENSEN BEACH, FL 34957-6105

A handwritten signature in cursive script that reads "Charles H. Bronson".

CHARLES H. BRONSON
COMMISSIONER OF AGRICULTURE



SEARCH

GO

[TOM GALLAGHER](#) · [NEWS & MEDIA](#) · [OFFICES & DIVISIONS](#) · [FIRE MARSHAL](#) · [CAREER OPPORTUNITIES](#)
[PUBLICATIONS](#)

[Workers' Comp Home](#)

Exemption Detail Page

This Database was Last Updated: 9/13/2005 1:26:51 AM

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[What's New](#)

Exemption Details					
Name	Title	Effective Date	*Termination Date	Exemption Type	Employer Name
JAYCE SMITH	ME	Aug 18 2005	Aug 18 2007	Construction	PROPANE DISCOUNTERS L.C
JAYCE SMITH	ME	Jan 14 2004	Aug 18 2005	Construction	PROPANE DISCOUNTERS L.C
JAYCE SMITH	ME	Aug 19 2003	NR**	Construction	PROPANE DISCOUNTERS L.C
* Termination may be through the revocation of the exemption, expiration of the exemption, or invalidation by failure to re-issue the exemption.					

NR = Exemption Not Re-Issued as of 12/31/03. Due to statutory changes effective 1/1/2004, a construction industry exemption is not valid until re-issued. Therefore, even though exemptions are issued for a two year period, this exemption is invalid until the re-issuance requirements are met. When the re-issuance requirements are met, the re-issuance effective date will be displayed and the exemption expiration date will be displayed as the termination date.

[Return to Query Form](#)

2004-2005 MARTIN COUNTY ORIGINAL
 COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
 (772) 288-5604

LICENSE 2004-320-006 CERT _____
 PHONE (772) 225-7980 SIC NO 422710

LOCATION:
739 NE DIXIE HWY STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	<u>.00</u>	LIC. FEE \$	_____
\$	<u>.00</u>	PENALTY \$	_____
\$	<u>.00</u>	COL. FEE \$	_____
\$	<u>.00</u>	TRANSFER \$	<u>32.50</u>
TOTAL		_____	



AYCE A
 DISCOUNTERS L.C
 J.D
 NE DIXIE HWY
 STUART FL 34997

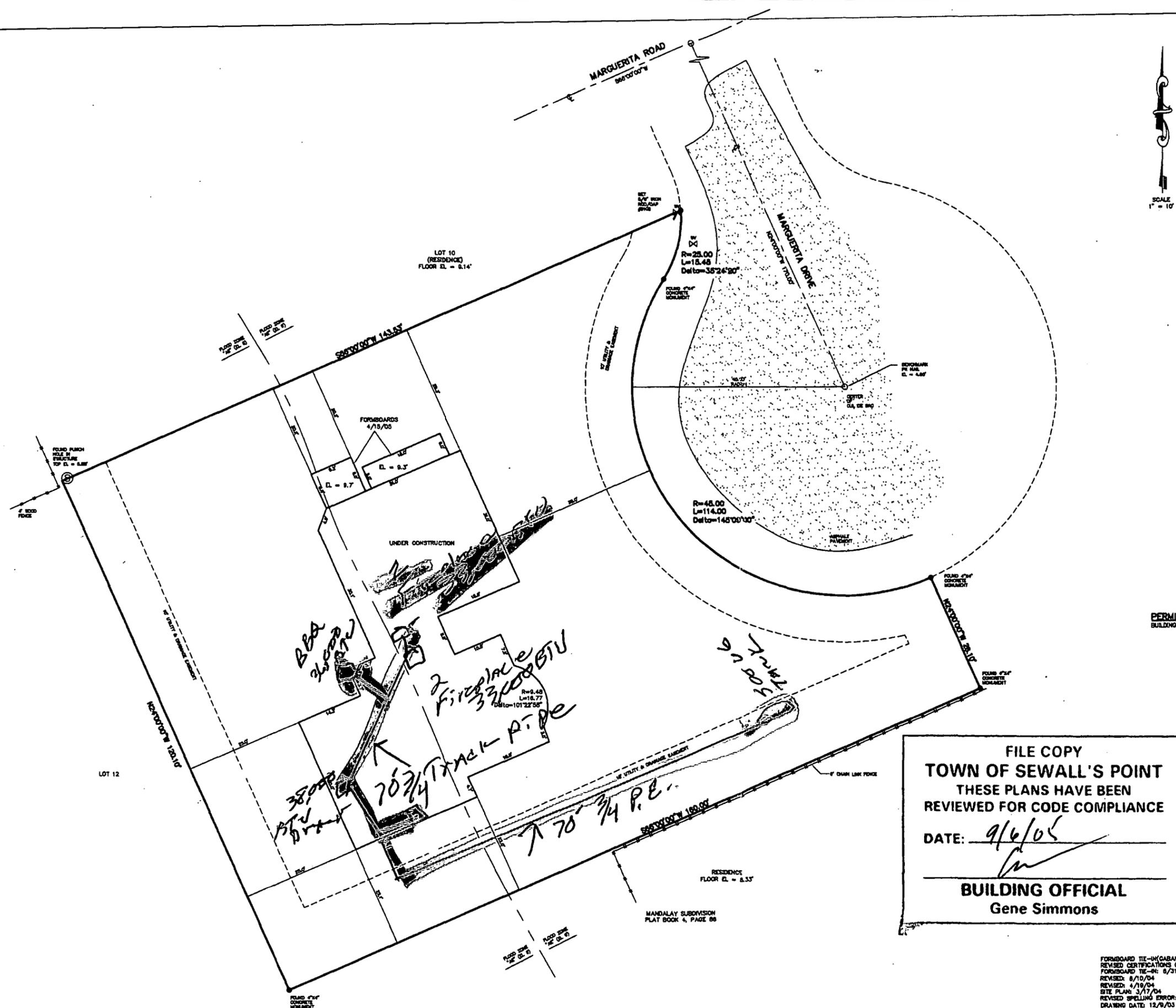
IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF
 WHOLESALE DISTRIBUTION OF FOODS

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

22 DAY OF OCTOBER 04
 AND ENDING SEPTEMBER 30, 2005

RECEIPT OF PAYMENT

LARRY C. O'STEEN 6818 1
 99 18/22/2004 UCCI NUMBER
 200432000065688
 \$32.50
 X102100220144220
 8220041822001201CX



- SURVEYOR'S NOTES**
1. BEARINGS REFER TO CENTERLINE OF MARGUERITA ROAD.
 2. (P)=PLAT MEASUREMENT; (M)=FIELD MEASUREMENT; (C)=CALCULATED MEASUREMENT
 3. PROPERTY LIES IN FLOOD ZONE "AE"(EL. 9) & "AE"(EL. 8), FEMA MAP #20650C01627, 10-4-02, COMMUNITY #20884
 4. THE LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR RIGHT-OF-WAYS, EASEMENTS, OR OTHER ENCUMBRANCES.
 5. UNDERGROUND UTILITIES NOT LOCATED PER THIS SURVEY.
 6. P.C.P. = PERMANENT CONTROL POINT.
 7. P.R.M. = PERMANENT REFERENCE MONUMENT.
 8. E. = ELEVATION
 9. M.N. = MINIMUM MAX. = MAXIMUM
 10. COVD = COVERED
 11. TYP. = TYPICAL
 12. CONC. = CONCRETE
 13. FFE = FINISHED FLOOR ELEVATION
 14. S = CENTERLINE OF ROAD; R/W = RIGHT-OF-WAY.
 15. M = WATER METER/VALVE
 16. S = SEWER MANHOLE
 17. ELEVATIONS REFER TO N.G.V.D.28 DATUM
 18. = PROPOSED ELEVATION
 19. = ELEVATION USED FOR FFE DETERMINATION

AREA CALCULATIONS:

TOTAL LOT SIZE = 15,934 SQ.FT. (0.365 ACRES)
IMPERVIOUS AREAS:
 HOUSE = 2523 (16%)
 POOL/PATIO = 921 (6%)
 PORCHES = 314 (2%)
 DRIVEWAY/EQUIP. PADS = 1380 (9%)
 TOTAL IMPERVIOUS AREA = 5308 (0.12 ACRES) (33%)
 TOTAL PERVIOUS AREA = 10626 (0.24 ACRES) (67%)
 NATIVE VEGETATION TO REMAIN = 3863 (25%)
 AREA TO BE CLEARED AND FILLED = 11801 (75%)

BUILDING HEIGHT:

ROOF HEIGHT = 27.83' FROM GRADE (CHIMNEY = 32' FROM GRADE)
 MAXIMUM ROOF HEIGHT FROM FINISHED FLOOR = 27.00' PLUS 3.00' MAX. FOR CHIMNEY

ELEVATION DATA:

LOWEST FINISHED FLOOR ELEVATION PER F.E.M.A. = 9.0' MINIMUM
 CONTRACTOR TO VERIFY BUILDING CODES PRIOR TO CONSTRUCTION

SITE NOTES:

PLAT DATE: MARCH 1985
 SIDE SLOPES TO MEET 1:4

ELEVATION NOTE:

ELEVATIONS REFER TO NATIONAL GEODETIC VERTICAL DATUM OF 1928.

PERMITS:
 BUILDING PERMIT #0772

BOUNDARY SURVEY & SITE PLAN
 LOT 11
 MARGUERITA

ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 10,
 PAGE PAGE 3, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA
 FOR
 ELDER RESIDENCE

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 9/6/05

BUILDING OFFICIAL
 Gene Simmons

- CERTIFICATIONS VALID TO:**
1. FIDELITY FEDERAL BANK & TRUST ITS SUCCESSORS AND/OR ASSIGNS ATMA
 2. ROBERT ELDER
 3. ORARY, BUCHANAN, BOWDISH, BOVE, BERRIS, ELDER & THOMAS CHARTERED
 4. ATTORNEYS' TITLE INSURANCE FUND, INC.

CERTIFICATION:
 I HEREBY CERTIFY THAT THE SKETCH SHOWN HEREON IS A CORRECT REPRESENTATION OF A SURVEY DONE UNDER MY DIRECTION AND IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF, NO SEARCH OF THE PUBLIC RECORDS MADE FOR ERRORS OR OMISSIONS OF SAID DESCRIPTION, EASEMENTS OF RECORD NOT SHOWN UNLESS FURNISHED. I FURTHER CERTIFY THAT THIS SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH UNDER RULE 61017-6 F.A.C. BY THE FLORIDA BOARD OF SURVEYORS AND MAPPERS.

FORMBOARD TE-14(C)BAMA: 4/15/05
 REVISED CERTIFICATIONS ONLY: 2/2/05
 FORMBOARD TE-04: 8/31/04
 REVISED: 8/10/04
 REVISED: 4/19/04
 SITE PLAN: 3/17/04
 REVISED SPELLING ERROR: 12/10/03
 DRAWING DATED: 12/9/03
 FIELD DATE: 12/4/03
 F.B. C2, PAGE 01
 SKETCH NO. lot11_203176.dwg

CHRISTIAN FENEX
 PROFESSIONAL SURVEYOR AND MAPPER
 1857 S. DOCK HIGHWAY, STUART, FLORIDA
 P.O. BOX 2533, PALM CITY, FL 34991
 PH:(772)283-2977 FAX:(772)283-2979

FLORIDA REGISTRATION #0102
CHRISTIAN FENEX

NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER.



TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARAUKITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

GAS ROUGH

PIPING NOT DONE -
STRAP ALL GAS PIPING

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

DATE: 10/7



INSPECTOR

DO NOT REMOVE THIS TAG

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 6720
Tallahassee, Florida 32399-6720

License Number: 15540

Business Mailing Address

Licensed Location Address

PROPANE DISCOUNTERS, L.C.
1108 NE INDUSTRIAL BLVD
JENSEN BEACH, FL 34957-5001

PROPANE DISCOUNTERS, L.C.
739 NE DIXIE HWY
JENSEN BEACH, FL 34957-6105

The liquefied petroleum gas license at the bottom of this form is valid ONLY for the company located at the address on the license. Each business location of a company must be licensed. All LP Gas licenses must be renewed annually. Any license allowed to expire shall become inoperative because of failure to renew. The fee for restoration of a license is equal to the original license fee and must be paid before the licensee may resume operations.

Pursuant to Chapter 527, Florida Statutes, LP Gas licensees must present proof of licensure to any consumer, owner, or end user upon request when engaged in the business of servicing, testing, repairing, maintaining or installing LP Gas systems and/or equipment.

For future correspondence, please make any needed corrections or changes to your business mailing address and/or your licensed location address and return the UPPER PORTION with corrections to:

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 6720
Tallahassee, Florida 32399-6720



Cut Here



POST LICENSE
CONSPICUOUSLY

State of Florida
Department of Agriculture and Consumer Services

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

License Number: 15540
Expiration Date: August 31, 2006
Date of Issue: September 1, 2005
License Fee: \$425.00
Type and Class: 0601

Liquefied Petroleum Gas License

CATEGORY I LP GAS DEALER

GOOD FOR ONE LOCATION

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

PROPANE DISCOUNTERS, L.C.
739 NE DIXIE HWY
JENSEN BEACH, FL 34957-6105

CHARLES H. BRONSON
COMMISSIONER OF AGRICULTURE

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri Oct 7, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7808	MERRILL	DRY-IN	PASS	
7	24 FIELDWAY OIB			INSPECTOR: <i>OM</i>
6772	EIDER	ELEC ROUGH	FAIL	
1	4 MARGUERITA OIB	AIC " PUMB "	PASS FAIL	INSPECTOR: <i>OM</i>
7776	EIDER	DOUGL GAS	FAIL	
1	4 MARGUERITA PROPANE DIS	ING & TANKLINE		INSPECTOR: <i>OM</i>
7469	NORDGREN	POOL FINAL #SPA	PASS	CLOSE
2	5 KINGSTON CT OLYMPIC POOLS			INSPECTOR: <i>OM</i>
7576	SILAS	RGH A/C - LOWEST FLOOR	PASS	
11	10 CASTLE HILL WY STATEWIDE	ELEC " PUMBING & FRAMING "	PASS FAIL	INSPECTOR: <i>OM</i>
7727	SLATER	1st FL FLOOR SHEATHING	PASS	
10	4 LAGOON L&G CONWAY			INSPECTOR: <i>OM</i>
				INSPECTOR: <i> </i>

OTHER: _____



7776

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGAURITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

GAS TROUGH

GAS LINES @ FIRE PLACE ARE NOT SUPPORTED-

GAS LINES SHOULD BE KEPT CLEAR OF FIREBOX & METAL FLUE.

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

DATE: 10/12

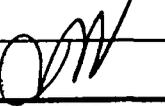
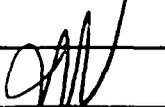
[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/12, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7500	TRUITT	FINAL ROOF		
<input checked="" type="checkbox"/>	39 S. RIVER RD. TAYLOR ROOFING			INSPECTOR:
7380	BONIFACE	WINDOWS		
4	63 S. RIVER RD WILSON BLDGS			INSPECTOR:
7776	EDER	FINAL GAS		
1	4 MARQUERITA PROPANE DISCOUNTERS			INSPECTOR: 
7500	TRUITT	FINAL ROOF		CALL
<input checked="" type="checkbox"/>	3 S. RIVER RD TAYLOR ROOF			INSPECTOR:
7789	GRIFFIN	INSULATION	PASS	
5	19 RIO VISTA DR CASCO CONST.			INSPECTOR: 
TREE	FREDERICK	TREE	PASS	
6	32 S. SEWALLS PT			INSPECTOR: 
7560	RADER	FINAL GAS	PASS	CLOSE
7	5 HERITAGE WAY MARTIN GY PROPANE			INSPECTOR: 
OTHER: _____				



7776

TOWN OF SEWALL'S POINT

One South Sewall's Point Road
Sewall's Point, Florida 34996
(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGAURITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

GAS TROUGH

GAS PIPE @ FIRE PLACES NOT
SECURED AT FEED.

YELLOW GAS TAPE SHOULD
BE BURIED 6-12 INCHES
ABOVE GAS PIPE.

NO PERMIT POSTED
NO REINSPECT FEE

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

DATE: 1/1/16

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/16, 2005 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7576 8	Silas 10 Castle Hill Way Statewide Eng.	Framing on main floor. (AT KITCHEN)	PASS	INSPECTOR: <i>OW</i>
7884 7	Serafini 21 N. Via Lucinda Tradewinds	Final Roof (LADDER ON JOB)	FAIL	\$140 FEE INSPECTOR: <i>OW</i>
6981 10	Falco 15 N. River Rd. Blue Water Marine	Final Dock	FAIL	INSPECTOR: <i>OW</i>
7560 4	Holland 7 Mandalay Fezze	drip-in	FAIL	INSPECTOR: <i>OW</i>
6812 5	Mader 106 Abbie Ct. Buford	CRACK @ FIREPLACE TRUSS & window buck 8:45	FAIL PASS	INSPECTOR: <i>OW</i>
7560 6	ELDER 4 MARGARITA. PROPANE	GAS ROUGH	FAIL	INSPECTOR: <i>OW</i> \$140 FEE
TREE 9	FERNANDEZ 10 KNOWLES RD BERNEY'S TREE	TREE	PASS	INSPECTOR: <i>OW</i>

OTHER: _____



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGAURITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

WAS ROUGH

NO ACCESS TO INSIDE HOUSE

LEAVE UNDERGROUND PIPING
EXPOSED IN SECTIONS FOR
INSPECTION

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

DATE: 10/12

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11/21, 2005 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7776	ELDER	INTERIOR	PASS	
2	4 MARGARITA PROPANE DISC.	GAS ROUGH		INSPECTOR:
6812	MADER	TRUSS ENDR.	PASS	
1	106 ABBIE CT. BUTORN	(REINSPECT)		INSPECTOR:
7576	SILAS	ROOF SHEATH.	PASS	
5	10 CASTLE HILL			INSPECTOR:
7776	ELDER	GASTANIL+LINE	PASS	
3	4 MARGUERITA WAY PROPANE DISCOUNTERS			INSPECTOR:
7869	VON STADEN	FINAL ROOF	FAIL	
4	20 N. VIA LUCINDIA SEASIDE ROOFING			INSPECTOR:
7777	CATHEY	FOOTING	FAIL	
	47 S. Sewall's Pt DRIFWOOD HOMES	11:30		INSPECTOR:
				INSPECTOR: <u> </u>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3/29, 2006 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6818	LIPSHUTZ	PreDrywall	PASS	
5	53 S. RIVER RD O/B			INSPECTOR: <i>OM</i>
8086	BOUFALE	FINAL DOOR	FAIL	
8103	63 S. RIVER	RETAINING WALL	PASS	CLOSE
6	BLUE WATER MAR.			INSPECTOR: <i>OM</i>
TREE	SCHNABEL	TREE	PASS	
3	122 S. SEWALLS PT			INSPECTOR: <i>OM</i>
119	EDER	FINAL GAS	FAIL	CLOSE
2	4 MARGUERITA PROPANE DISC.			INSPECTOR: <i>OM</i>
2072	SCHROEDER	Dry IN	FAIL	
7	4 RIDGELAND CARDINAL POOLING			INSPECTOR: <i>OM</i>
8093	DICKINSON	FINAL GAR. DOOR	PASS	CLOSE
1	19 EMARITA WAY O/B	? FIRST PLEASE		INSPECTOR: <i>OM</i>
7338	MCCORMICK	STEEL-RET WALLS		
7386	59 N. RIVER ROAD			
10	PINE ORCHARD			INSPECTOR: <i>OM</i>

OTHER: _____

8217

FENCE

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4-26-06

BUILDING PERMIT NO. 8217

Building to be erected for Elder

Type of Permit Fence

Applied for by D/B

(Contractor) Building Fee 35.00

Subdivision Marguerita Lot 11 Block _____

Radon Fee _____

Address 4 Marguerita Dr

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Other Fees (_____) _____

TOTAL Fees 35.00

Parcel Control Number: 1338410110000011010000

Amount Paid \$35 Check # 1067 Cash _____

Total Construction Cost \$ 3800 _____

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED
4-26-06

Town of Sewall's Point

Date: 4/25/06

BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: ROBERT J. ELDER III

Phone (Day) 708-5310 (Fax) _____

Job Site Address: 4 MANGLORITA DR.

City: SUMNER FL State: FL Zip: 34991

Legal Desc. Property (Subd/Lot/Block) LOT 11 MANGLORITA

Parcel Number: 1338410110000011010000

Owner Address (if different): N/A

City: _____ State: _____ Zip: _____

Description of Work To Be Done: 4' CHAIN LINK FENCE OAKS

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 3800
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: N/A O.B.

Phone: _____ Fax: _____

Street: _____ City: _____ State: _____ Zip: _____

State Registration Number: _____ State Certification Number: _____ Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT N/A Lic.#: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

ENGINEER N/A Lic# _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

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

Carpport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

CONTRACTOR SIGNATURE (required)

State of Florida, County of: Martin

On State of Florida, County of: _____

This the 25 day of April, 2006

This the _____ day of _____, 200

by R.J. Elder III who is personally

by _____ who is personally

known to me or produced F.I.D.

known to me or produced _____

as identification. Joan H. Barrow

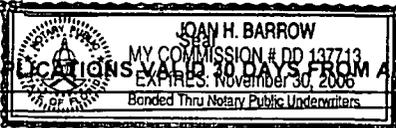
As identification. _____

Notary Public

Notary Public

My Commission Expires: _____

My Commission Expires: _____



Seal

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

STUART FENCE COMPANY

(772) 288-1151

Fax (772) 288-3035

CFE3584

LICENSED & INSURED
BONDED

PROPOSAL - CONTRACT

2832 S.E. Iris Street
Stuart, FL 34997

CUSTOMER'S NAME <u>Elyse Elder</u>		DATE <u>3/29/06</u>	
STREET <u>4 Marguerita Drive</u>		CITY <u>Stuart</u>	STATE <u>FL</u>
HOME PHONE <u>223-9305</u>	BUSINESS PHONE	Fax #	MOBIL/BEEPER# <u>475-5007</u>
FENCE LINE CLEARED: <u>0</u> / <u>N</u>	SURVEY: <u>"sewalls Point"</u>		TOTAL FOOTAGE: <u>288</u> 92

CHAIN LINK

FENCE TYPE 4 Ft Black

TOP RAIL 1 3/8" BLACK

LINE POST 1 5/8" BLACK

CORNER POST 2 1/2" BLACK

GATE POST 2 1/2" BLACK

WALK GATE 1-4' 1-5'

D.D. GATE Ø

WIRE GAUGE 9

TENSION WIRE NO

WOOD

FENCE STYLE _____

HEIGHT _____

GOOD SIDE _____

WALK GATES _____

D.D. GATES _____

LINE POSTS _____

GATE POSTS _____

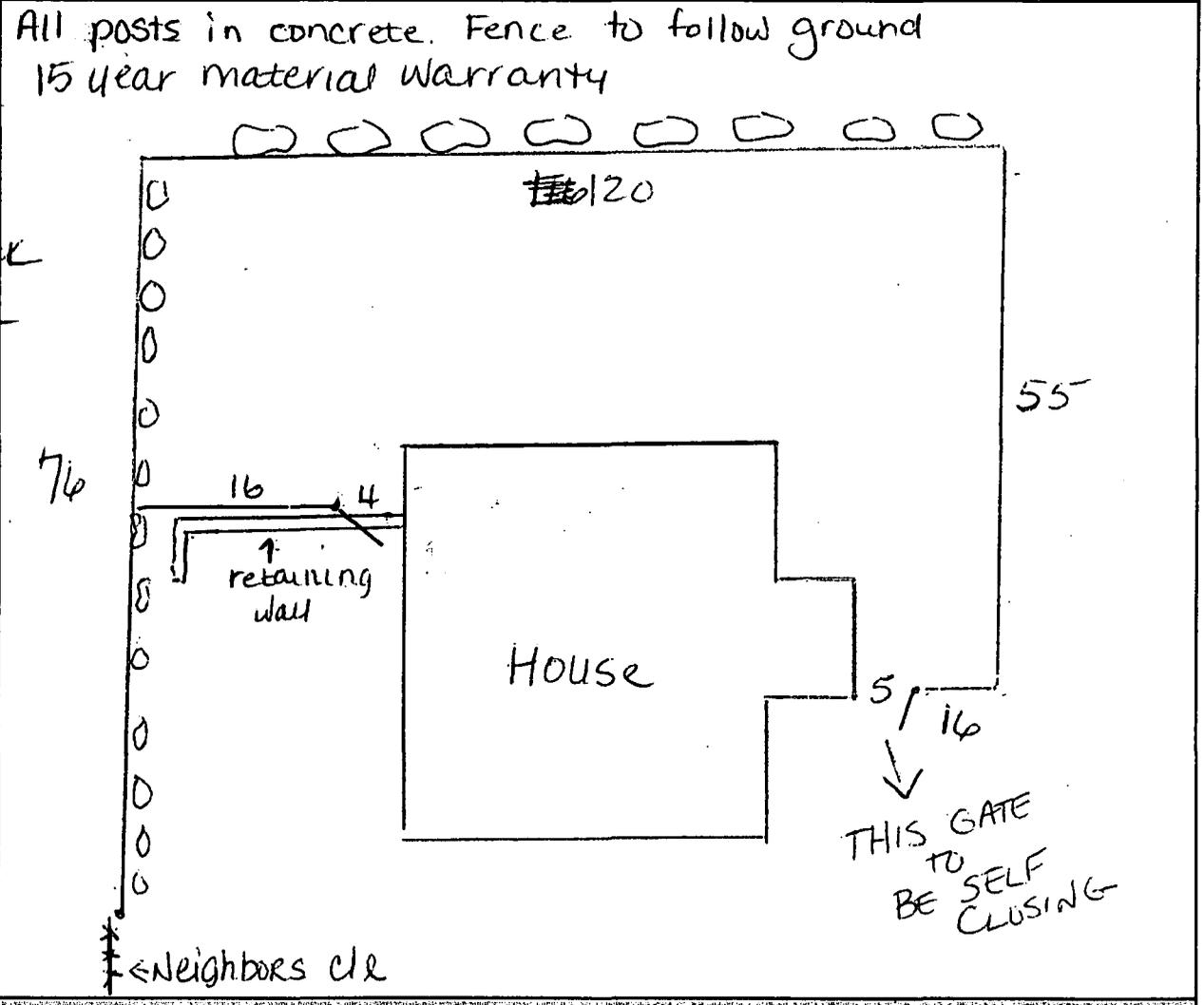
PVC/ALUMINUM

FENCE STYLE _____

WALK GATES _____

D.D. GATES _____

POOL FENCE Y (N)



SPECIAL INSTRUCTIONS

	OPTION "B"	PROPOSAL/CONTRACT SALE PRICE	OPTION "A"
WALK GATES	3753.00	CONTRACT PRICE	\$3678.00
	30.00	PERMIT	30.00
D.D. GATES	3783.00	TOTAL	3708.00
	1891.50 <u>CR# 1065</u>	LESS DEPOSIT	
POOL FENCE Y <u>(N)</u>	1891.50	BALANCE DUE UPON COMPLETION	

ACCEPTANCE OF PROPOSAL - CONTRACT: The above prices, specifications and Terms/Conditions on reverse side are satisfactory and are hereby accepted. Stuart Fence Corp. is authorized to do the work specified. Payment will be made as outlined above. Upon signing by Purchaser this becomes a binding contract.

APPROVED AND ACCEPTED DATE _____

CUSTOMER'S SIGNATURE _____
SALES REP. Kim Brancardi

SEE REVERSE SIDE FOR WARRANTY INFORMATION

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

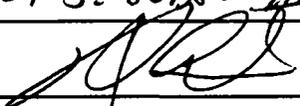
TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

DISCLOSURE STATEMENT

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

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

Name: Robert J. Olson III Date: 4/25/06

Signature: 

Address: 4 MANGUMITA DR.

City & State: SEWALLS POINT FL 34996

Permit No. _____

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF FLORIDA

COUNTY OF MARTIN

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

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

LOT 11 MANGUINITA S/D

GENERAL DESCRIPTION OF IMPROVEMENT: CHAIN LINK FENCE - BLK Vinyl 4'

OWNER: ROBERT J. BLOOM III

ADDRESS: 4 MANGUINITA DR. SEWALLS POINT FL 34996

PHONE #: 708-5310

FAX #: _____

CONTRACTOR: OB

ADDRESS: _____

PHONE #: _____

FAX #: _____

SURETY COMPANY (IF ANY) N/A

STATE OF FLORIDA
MARTIN COUNTY

ADDRESS: _____

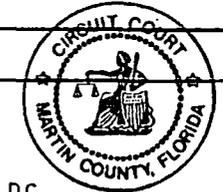
THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGE(S) IS A TRUE
AND CORRECT COPY OF THE ORIGINAL

PHONE #: _____

FAX #: _____

BOND AMOUNT: _____

MARSHA EWING CLERK
BY [Signature]
DATE 11/26/2006



LENDER: N/A

D.C.

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

NAME: Robert J. Bloom III

ADDRESS: 4 MANGUINITA DR SEWALLS POINT FL 34996

PHONE #: 287-2600

FAX #: 287-0115

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

PHONE #: _____

FAX #: _____

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

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 26 DAY OF April

BY B.J. Elder III

PERSONALLY KNOWN

[Signature]
NOTARY SIGNATURE



INSTR # 1928363 OR BK 02136 PG 1643 RECD 04/26/2006 11:36:24 AM
Pg 1643 (19)
MARSHA EWING, MARTIN COUNTY DEPUTY CLERK L Wood



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 4 MARGHERITA

I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

POOL FINAL

FENCE FINAL

NEED PERMITS POSTED FOR
FINAL INSPECTION.

CAN NOT LOCATE ATMOSPHERIC
RELIEF VENTS FOR POOL
DRAWS -

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

DATE: 10/6/06

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/6, 2006 Page 1 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8131	Slater	Final	PASS	CLOSE
6	4 Lagoon Isl. Ellis	Permit above transfer		INSPECTOR: <i>[Signature]</i>
8133	Slater	Final gen	PASS	CLOSE
6	4 Lagoon Island O/B			INSPECTOR: <i>[Signature]</i>
106	Russperi	Final Shutter	FAIL	
4	8 Palmetto O/B	Permit under monkey		INSPECTOR: <i>[Signature]</i>
Tree	Wallenquest	Tree	PASS	
5	3 Copaire Rd O/B			INSPECTOR: <i>[Signature]</i>
3393	Hannery	Steel	PASS	
2	23 Riv Vista Schiller Pools			INSPECTOR: <i>[Signature]</i>
817	Slater	Final	FAIL	
1	4 Marquerita Dr O/B			INSPECTOR: <i>[Signature]</i>
1510	Slater	Final	FAIL	
1	4 Marquerita Dr O/B			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10-23, 2006 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
C.O.	Silas	railing final	PASS	ISSUE C.O.
155	10 Castle Hill Gene Eichelberger			INSPECTOR: <i>[Signature]</i>
7670	Elder	pool final	PASS	CLOSE
4	4 Margarita Way O/B	475-5067 ^{CELL}		INSPECTOR: <i>[Signature]</i>
6217	Elder	fence final	PASS	CLOSE
4	4 Margarita Way O/B			INSPECTOR: <i>[Signature]</i>
764	Rucks	Final	FAIL	
3	20 N. Sewalls Pt Masterpiece			INSPECTOR: <i>[Signature]</i>
8402	Muir	Final	PASS	CLOSE
2	14 Pennwinkle La Folding Shutter			INSPECTOR:
8099	Rucks	Final-reins	PASS	CLOSE.
3	20 N. Sewalls Propane Disc			INSPECTOR: <i>[Signature]</i>
7819	Tidbits	tie beam	PASS	
6	12 Cranes Nest Advanced	LAST 11:30		INSPECTOR: <i>[Signature]</i>
OTHER:				

TREE

REMOVAL, REPLACEMENT,

RELOCATE

TOWN OF SEWALL'S POINT, FLORIDA

Date December 22 ~~18~~ 2003 TREE REMOVAL PERMIT No 2171

APPLIED FOR BY ELDER (Contractor or Owner)

Owner 4 MARGUERITA

Sub-division _____, Lot _____, Block _____

Kind of Trees PROHIBITED & UNDERBRUSH LESS THAN 1" DIAMETER

No. Of Trees: REMOVE _____

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

Signed, _____ Applicant

Signed Gene Simmons Town Clerk Building Official

FEE \$ 0

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box for project details or notes.

PROJECT DESCRIPTION _____

REMARKS _____

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

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

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than one inch.

Permit Fee:

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

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner ROB ELDON Address 4 MANGUEITA DR Phone 223/9305/287-2600

Contractor Owner Address _____ Phone _____

No. of Trees: REMOVE Req to Remove Prohibited + UNDERBUSH, VINES, ETC, Type: _____

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

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

Written statement giving reasons: CLEARING LOT FOR CONSTRUCTION. I WOULD LIKE TO REMOVE POPPERS + UNDERBUSH TO THEN DETERMINE WHAT IF ANY TREES WOULD TO BE REMOVED.

Signature of Applicant [Signature] Date _____

Approved by Building Inspector: [Signature] Date 12/22/03 Fee: N/C

Plans approved as submitted [Signature] Plans approved as revised/marked: _____

LOT 11, 4 MANGUEITA DR.

TOWN OF SEWALL'S POINT, FLORIDA

Date JUNE 1 16 2004 TREE REMOVAL PERMIT No 2272

APPLIED FOR BY ELDER (Contractor or Owner)

Owner 4 MARGUERITA DRIVE

Sub-division _____, Lot _____, Block _____

Kind of Trees 8 Scheffera, 16 oak, 6 palms + 10 oaks

No. Of Trees: REMOVE 40

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 1500

Signed, _____ Applicant Signed, Jane Summers (Signature) Town Clerk Building Official

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for drawing or site plan]

PROJECT DESCRIPTION _____

REMARKS _____

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

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

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than one inch.

Permit Fee:

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

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner ROBERT J. EVERT III Address 4 MARGUERITA Phone 223-9305
 Contractor N/A Address _____ Phone _____

No. of Trees: REMOVE 40 Type: 9 SCHEFFLERS, 16 OAK, 6 PALMS & 10 BAK
 No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____
 No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: REMOVAL NECESSARY FOR CONSTRUCTION OF
NEW HOME & FILL. LANDSCAPE WILL BE COMPLETELY LANDSCAPED UPON COMPLETION

Signature of Applicant [Signature] Date 4/29/04

Approved by Building Inspector: _____ Date _____ Fee: _____
 Plans approved as submitted _____ Plans approved as revised/marked: _____