

# 11 Middle Road

TOWN OF SEWALL'S POINT - FLORIDA

Application For Building Permit

Owner MELVIN G FLANAGAN Present Address CORAL GABLES FLA Phone ?

Architect NONE - BUILDER Address \_\_\_\_\_

General Contractor JIMMY A. CASTO Address Box 14224 N. PALM BEACH Phone 842-5242

Where Licensed MARTIN COUNTY License No. 85

Plumbing Contractor MIKEY M. TORRES Where Licensed Martin Co No. \_\_\_\_\_

Electrical Contractor E. NEEL Where Licensed Martin Co No. \_\_\_\_\_

Property Location SEWELL'S POINT Subdivision HIGH POINT Lot No. 38

Lot Dimensions 100' x 150' Lot Area \_\_\_\_\_ Sq. Ft. 15000

Purpose of Building RESIDENCE Type of Construction CBS

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

Outside of Walls 2500 ± Inside of Walls 2300 ±

Street or Road building will front on ?

Clearances - Front 70' Back 50' Side 15' Side 15' River \_\_\_\_\_

Well Location NONE Septic Tank Location AS SHOWN ON PLOT PLAN

Building elevation (By Ordinance Definition) \_\_\_\_\_

Contract Price (Include Plumbing, Electrical, Air Conditioning) 50,000.00

| PERMIT FEE  | New Home         | Additions     | Others |
|---|------------------|---------------|--------|
| General (\$3.00 per \$1000 or Fraction)           | <u>159.00</u>    | _____         | _____  |
| Plumbing (Flat Fee)                               | <u>\$10.00</u>   | <u>\$3.00</u> | _____  |
| Electrical (Flat Fee)                             | <u>\$10.00</u>   | <u>\$3.00</u> | _____  |
| Total (To be paid by General Contractor or Owner) | <u>\$ 179.00</u> | _____         | _____  |

SIGNED: - General Contractor or Owner Jimmy A. Casto  
 Building Inspector Comments: \_\_\_\_\_

\*\*\*\*\*

FOR TOWN RECORDS: Date Drawings submitted 4-21-71  
 Date Permit approved 4-23-71  
 Date Permit Fee paid 4-23-71  
 Date First Inspection \_\_\_\_\_  
 Date Final Inspection \_\_\_\_\_  
 Date Occupancy approved \_\_\_\_\_

*H 269*

**2570**

**POOL & PATIO**

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Permit No. 2570

Date

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

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

Owner Constance FLANAGAN Present Address 11 MIDDLE RD.

Phone 283-2822

Contractor POOLS BY ANDREWS Address 1490 N.W. FEDERAL HWY

Phone 692-0604 STUART FL.

Where licensed STATE OF FLORIDA License number CPCO 29646

Electrical contractor QUINN ELECTRIC License number 88-2296

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

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: 13' X 19' POOL + PATIO

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

11 MIDDLE RD.

Subdivision HIGH POINT Lot number 37 Block number 342-2303

Contract price \$ 11,770 Cost of permit \$ \_\_\_\_\_

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

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

Contractor [Signature]

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

Owner Constance B. Flanagan  
William H. Flanagan

TOWN RECORD  
Approved: Dale Brown 6/21/89  
Building Inspector Date

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

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

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

SPL282

Permit No. #2570

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

NOTICE OF COMMENCEMENT

THE UNDERSIGNED HEREBY INFORMS ALL CONCERNED THAT IMPROVEMENTS WILL BE MADE TO CERTAIN REAL PROPERTY, AND, IN ACCORDANCE WITH SECTION 713.13 OF THE FLORIDA STATUTES, THE FOLLOWING INFORMATION IS STATED IN THIS NOTICE OF COMMENCEMENT. THIS NOTICE SHALL BE VOID AND OF NO FORCE AND EFFECT IF CONSTRUCTION IS NOT COMMENCED WITHIN 30 DAYS OF RECORDATION.

Legal Description of Property(include street address, if available)

LOT 37 HIGH POINT

11 MIDDLE RD.

SEWELL'S POINT, FL.

General Description of Improvements: 13' x 19' POOL + PATIO

Owner: MELVIN FLANAGAN

Address: 11 MIDDLE RD

Owner's interest in site of the improvement: OWNER

Fee Simple Title holder(if other than owner):

Name:

Address:

Contractor:

Address:

Surety(if any):

Address:

Amt. of bond \$

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

Name:

Address:

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

Name:

Address:

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

Name:

Address:

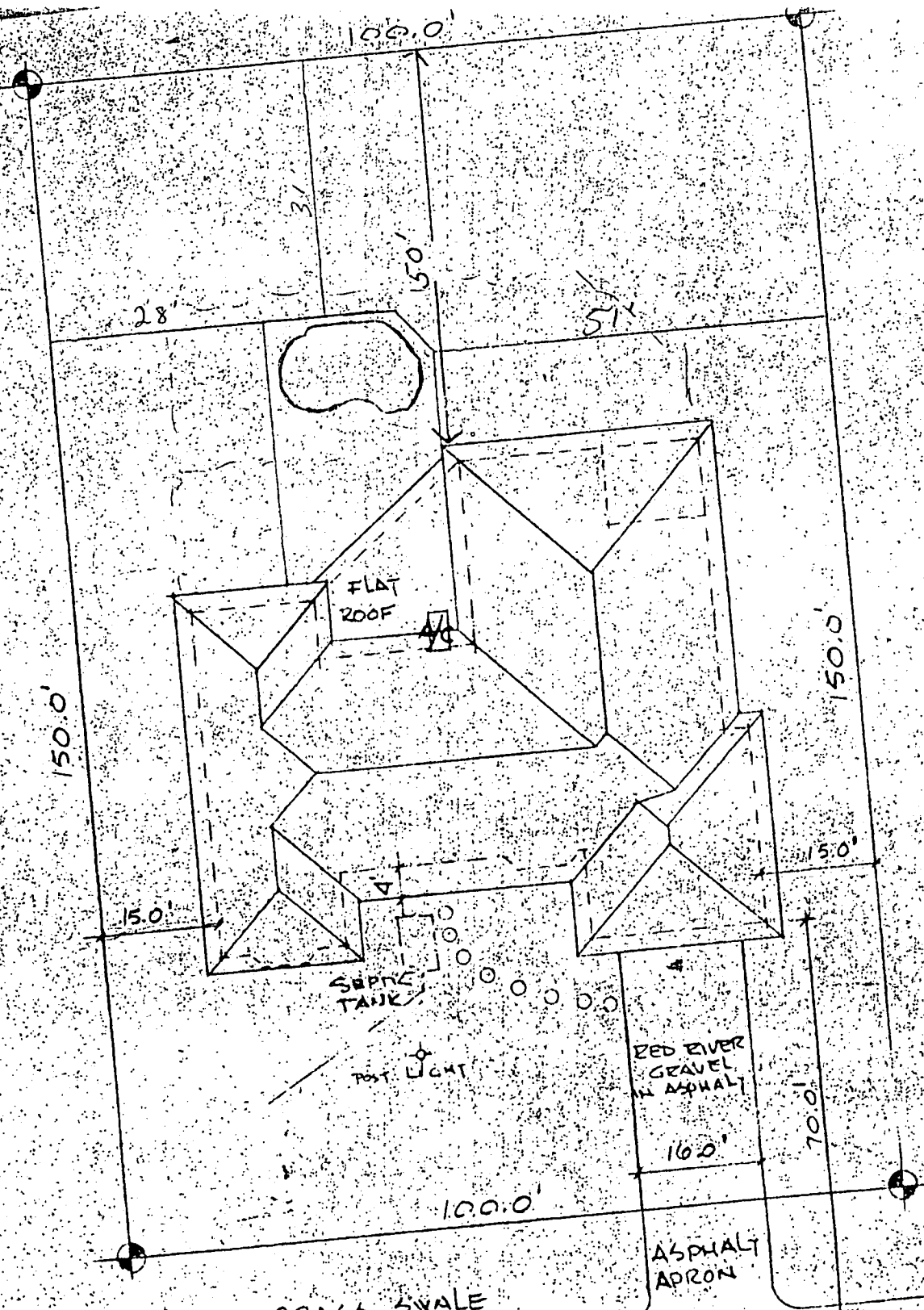
This Space For Recorder's Use Only

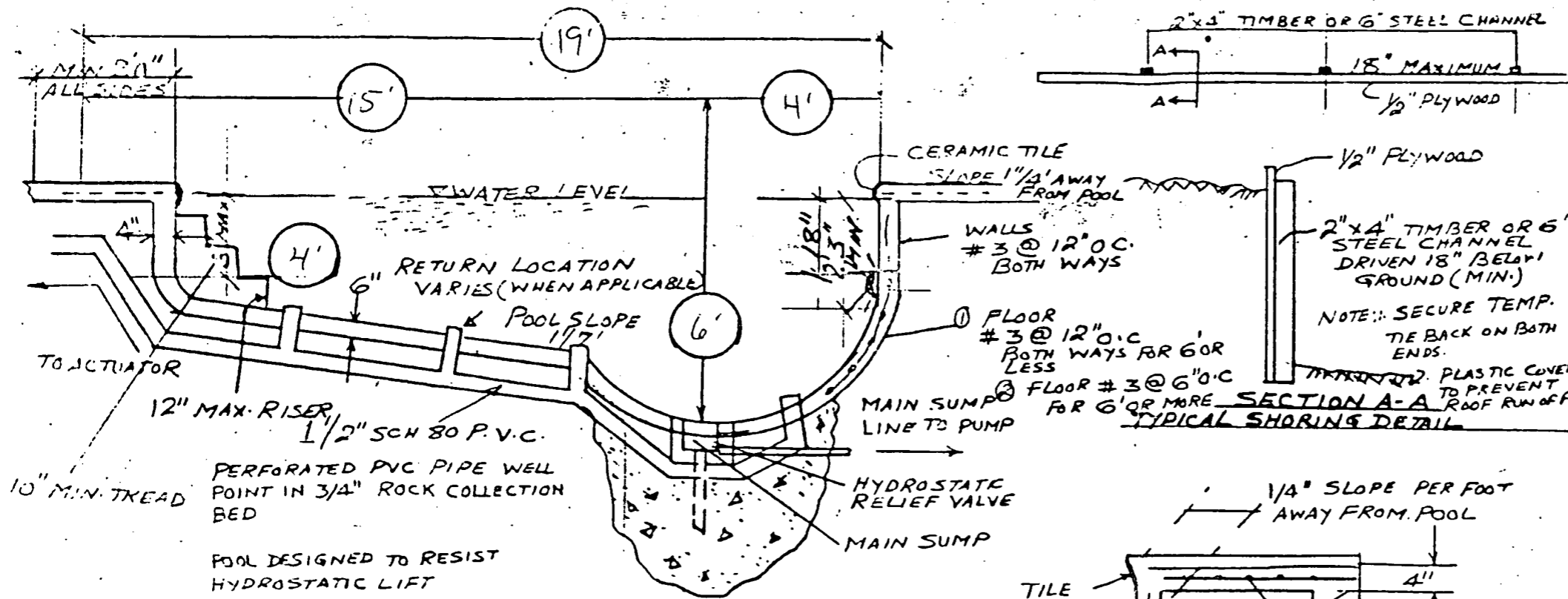
Melvin Flanagan  
Owner's Signature

Sworn to and subscribed before me  
this day of 19

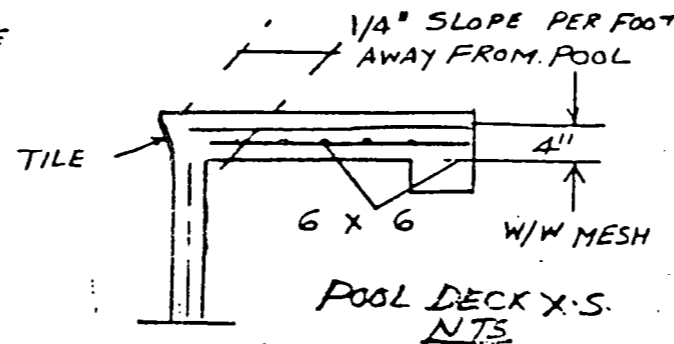
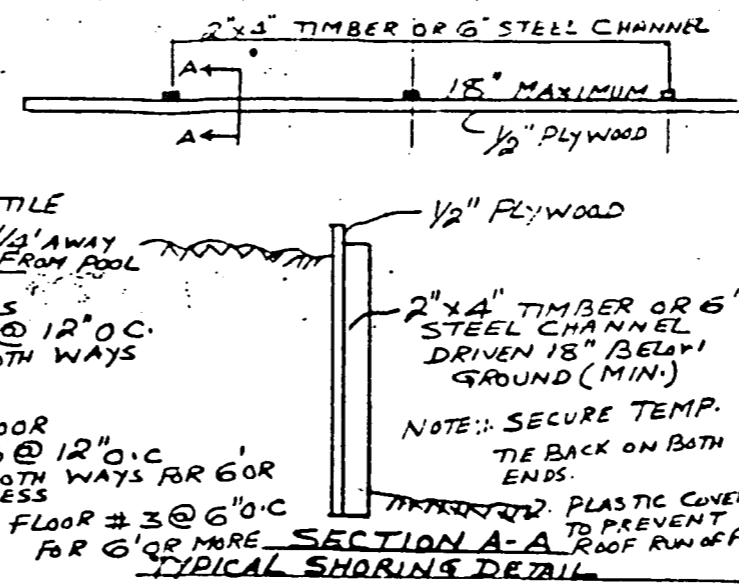
Notary Public

My Commission Expires August 21, 19  
Bonded thru Agent's Notary &  
Surety Brokers, Inc.

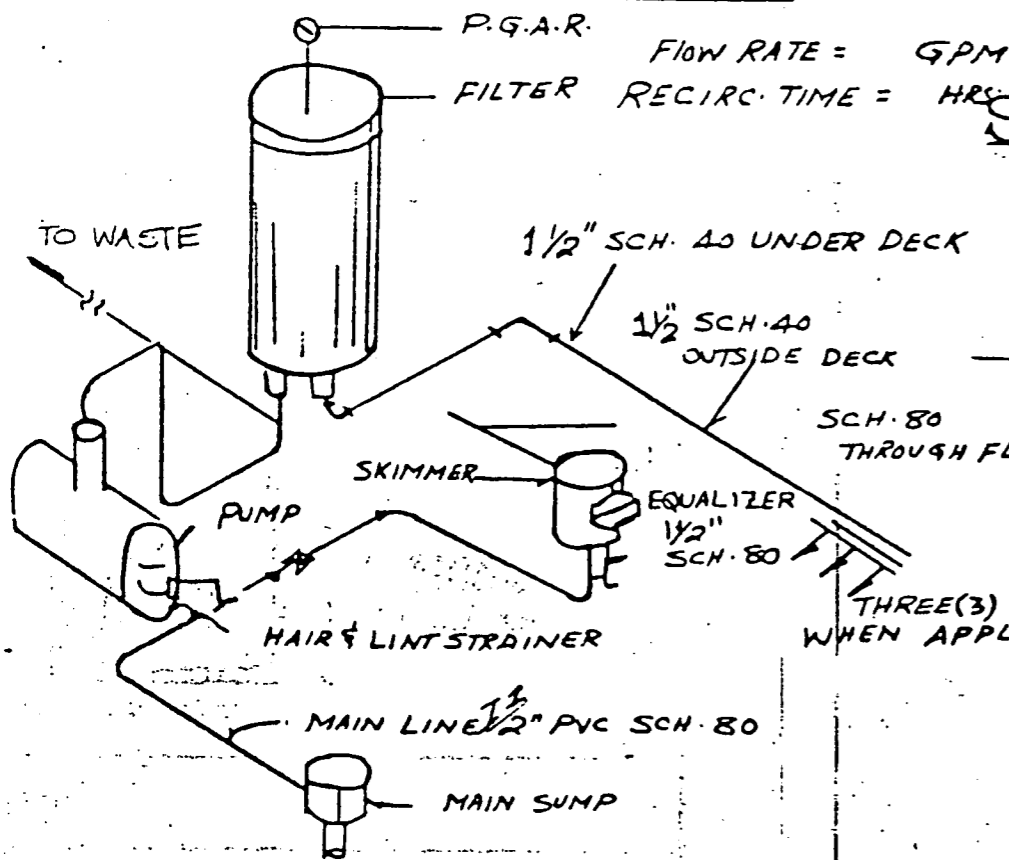




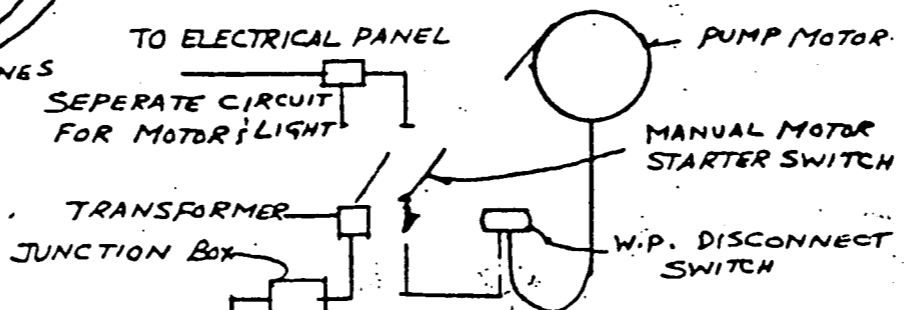
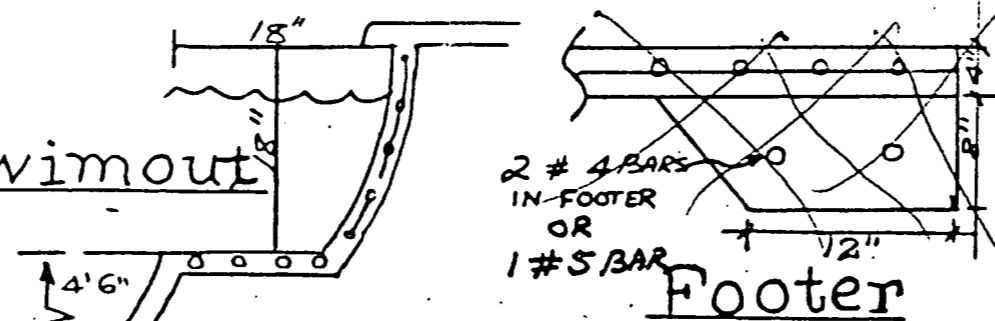
Typical Pool Section



Standard Detail Cross Section



Piping Diagram



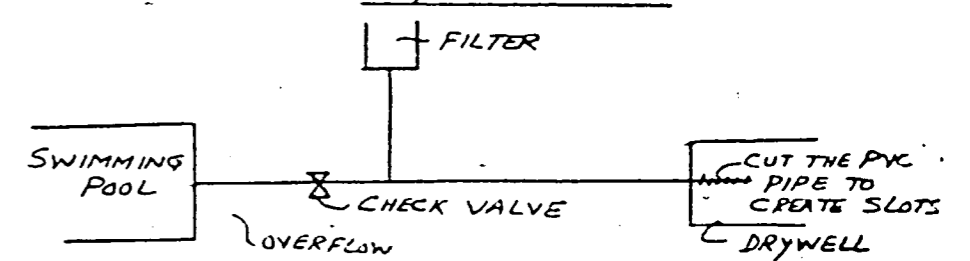
Electrical Diagram

N. KHANAL, P.E.  
7710 WEST LK. DR.  
W. P. B., FL. 33406  
(305) 967-3155

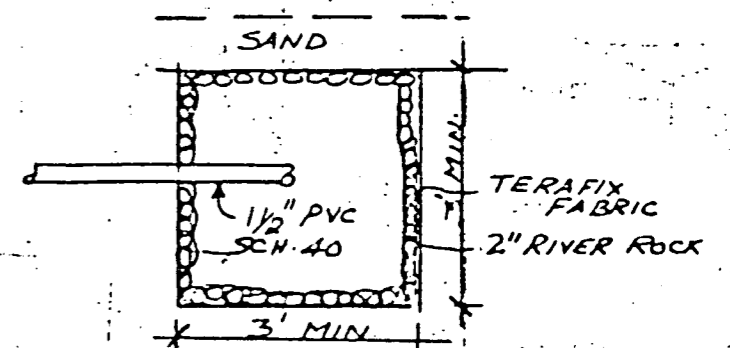
GENERAL NOTES

1. POOL FLOOR AND WALLS SHALL BE MADE OF PNEUMATICALLY PLACED CONCRETE WITH A COMPRESSIVE STRENGTH OF 3000 PSI IN 28 DAYS.
2. ALL REINFORCING STEEL SHALL BE INTERMEDIATE OF HARD GRADE DEFORMED BARS OF NEW BILLET-STEEL CONFORMING TO A.S.T.M. A-15 AND SHALL BE BENT, LAPPED & PLACED IN ACCORDANCE WITH A.C.I. STDS. & SPECIFICATIONS.
3. FOR POOL PLAN, SIZE OF SLABS AND SPECIAL DETAILS NOTE, PLEASE REFER SHEET #2.
4. ALL POOL PIPING SHALL BEAR THE N.S.F. SEAL.
5. MAIN SUMP SHALL HAVE A FREE AREA FOUR TIMES THE AREA OF SUCTION LINE.
6. BACKWASH OR CLEANING SHALL BE IN ACCORDANCE WITH EACH MUNICIPALITIES CODE REQUIREMENTS.
7. WATER SUPPLY AND DISPOSAL SHALL BE ARRANGED SO THAT THERE IS NO CROSS CONNECTION WITH A DOMESTIC WATER SUPPLY OR DISPOSAL SYSTEM.
8. DISPOSAL OF POOL WATER SHALL TERMINATE INTO A 3x3x3' (1 CU. YD) DRYWELL FILLED WITH CRUSHED STONE WHERE APPLICABLE.
9. GRADING SHALL CONFINE PONDING OF POOL WATER WITHIN LOT LINE.

DRYWELL DETAIL

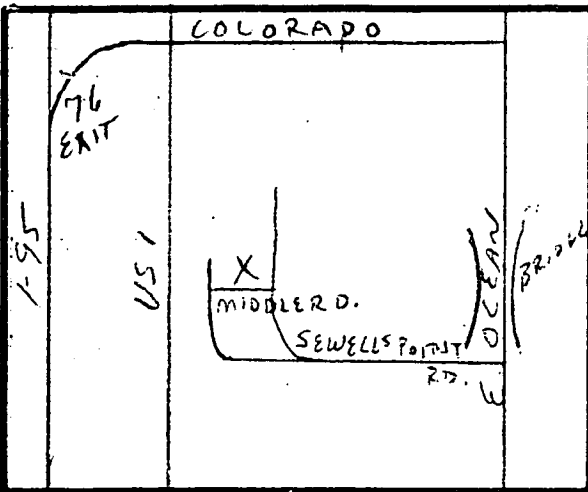


DRYWELL X.S. NTS



Owner

MELVIN FLANAGAN  
11 MIDDLE RD.  
SEWELL'S POINT, FL.

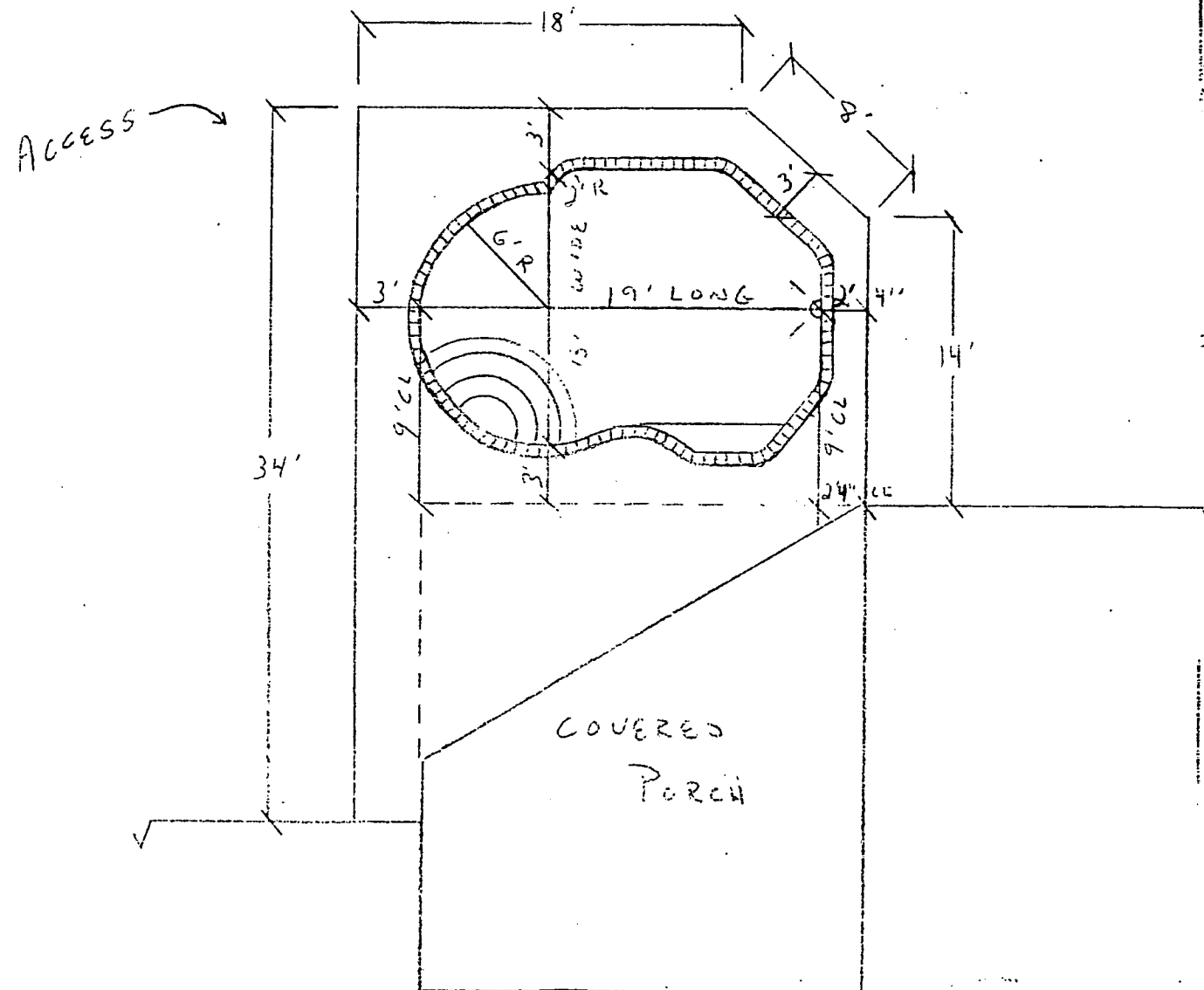


**GENERAL SPECIFICATIONS**

|                          |                          |              |
|--------------------------|--------------------------|--------------|
| JOB NO.                  | SHAPE                    | CUSTOM       |
| SIZE 13' X 19'           | DEPTH                    | 4' TO 6'     |
| SF 200                   | PER. 50                  | TEMP NO.     |
| POOL CAPACITY            | 8,000                    | GALS         |
| FILTER D.E.              | SQ. FT. 24               | PUMP H.P. 1  |
| TILE                     | 6" MOSAIC BRICK BULLNOSE |              |
| DECKING                  | KOOL DECK                | SQ. FT. 235  |
| FOOTERS                  | NO                       | D.O.D. NO    |
| LIGHT                    | 12 VOLT HALOGEN          | WATTS 75     |
| SWIMOUT                  | INCLUDED                 |              |
| LADDER                   | NO                       | HANDRAIL NO  |
| SKIMMER                  | 1                        | MAIN DRAIN 1 |
| RETURN LINES: QTY.       | TYPE: CARETAKER          |              |
| ELECTRICAL HOOKUP        | INCLUDED                 |              |
| UNDERWATER VACUUM W/HOSE | NO                       |              |
| MUNICIPALITY             | SEWELL'S POINT           |              |
| SET BACKS: SIDE          | 10'                      |              |
|                          | REAR 25'                 |              |
|                          | HOUSE 5'                 |              |
| NOTES:                   | CARETAKER INCLUDED       |              |
|                          | SMALL MACHINE DIG        |              |

P/F

MAP (N.T.S.)



RESIDENCE

SCALE 1/8" = 1'0"

|                      |                 |          |          |
|----------------------|-----------------|----------|----------|
| DESIGNER             | T.P.            | DATE     | 6-13-89  |
| <b>SWIMMING POOL</b> |                 |          |          |
| Name:                | MELVIN FLANAGAN |          |          |
| Address:             | 11 MIDDLE RD.   |          |          |
| City:                | SEWELL'S POINT  | Phone:   | 283-2822 |
| LEGAL DESCRIPTION    |                 |          |          |
| LOT                  | BLK             | SUB      |          |
| BOOK                 | PAGE            | LOCATION |          |



**2599**

**SCREEN ENCLOSURE**

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Permit No. 2599

Date 8-11-89

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

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

Owner M/M FLANAGAN Present Address 11 MIDDLE RD.

Phone \_\_\_\_\_ SEWELL POINT

Contractor S & K ALUMINUM INC Address 1725 S.W. BILTMORE ST.

Phone 335-5254 PORT ST. LUCIE

Where licensed MARTIN CTY License number SP00356

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

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

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

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

11 MIDDLE RD.

Subdivision HIGH POINT Lot number 37 Block number \_\_\_\_\_

Contract price \$ 2,600 Cost of permit \$ 15XX

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

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

Contractor Steph J. Walsh

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

Owner Custance B. Flanagan

TOWN RECORD Approved: Dale Brown 8/15/89  
Building Inspector Date

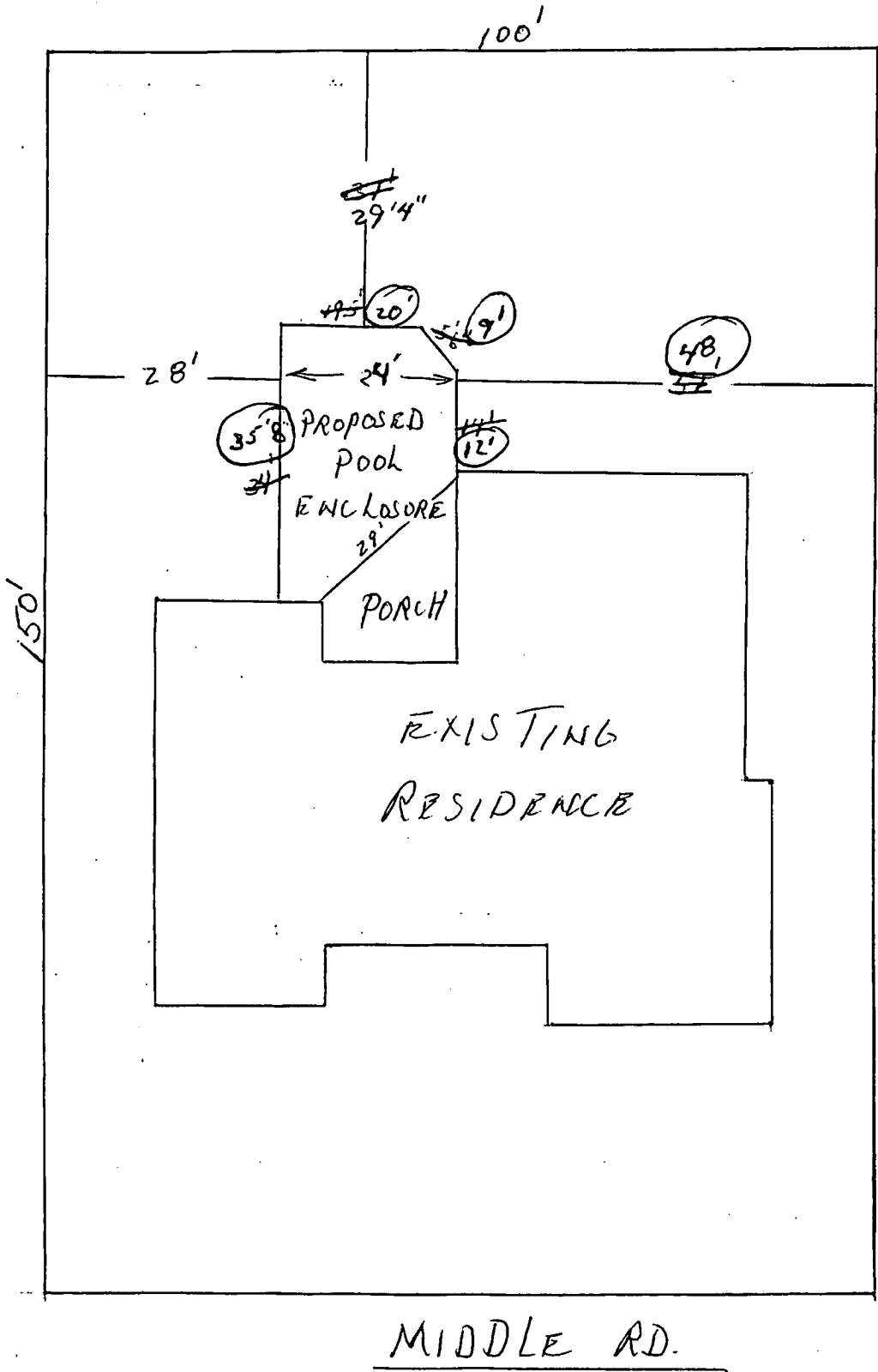
Date submitted \_\_\_\_\_

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

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

SP1282 Permit No. 2599

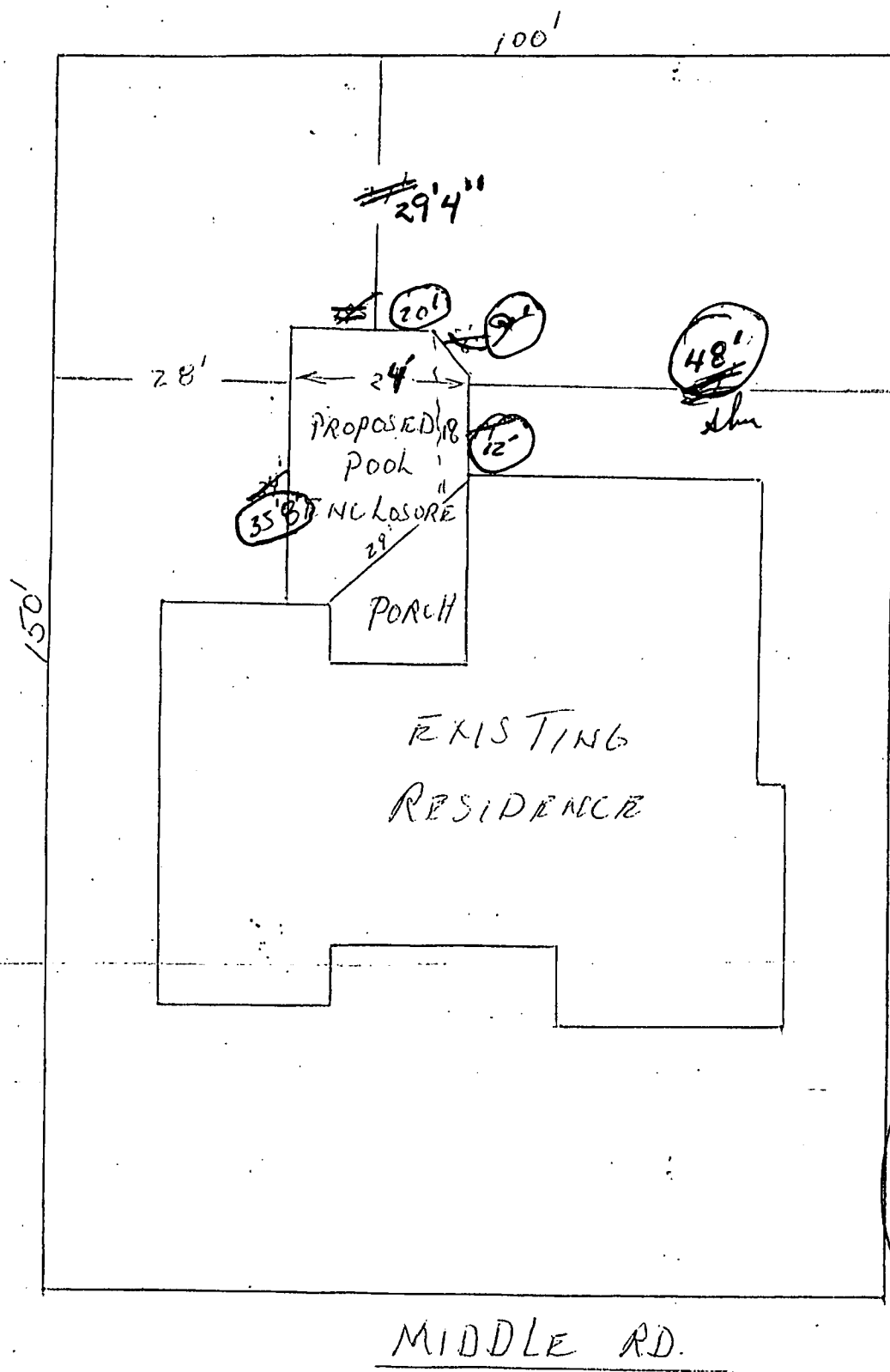
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.



REVISED  
8-11-89  
Sh  
S & K ALUMINUM

PLOT PLAN

|                    |        |                        |                          |
|--------------------|--------|------------------------|--------------------------|
| S & K ALUMINUM     |        | CUSTOMER: M/M FLANAGAN |                          |
| SCALE: 1" = 20 FT. |        | ADDRESS: 11 MIDDLE RD. |                          |
| DATE: 8-11-89      | BY: Sh | LOT 37                 | BLK. SEC. S/D HIGH POINT |



REVISED  
8-11-89  
sh  
S & K ALUMINUM

PLOT PLAN

S & K ALUMINUM

CUSTOMER: M/M

FLANAGAN

SCALE: 1" = 20 FT.

ADDRESS:

11 MIDDLE RD.

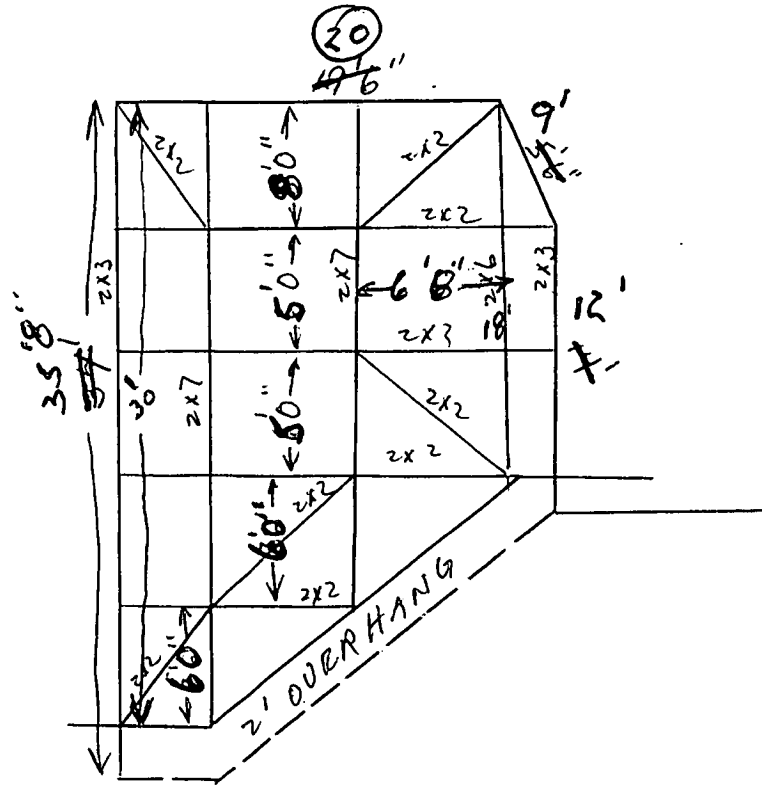
DATE: 8-11-89 BY: sh

LOT 37

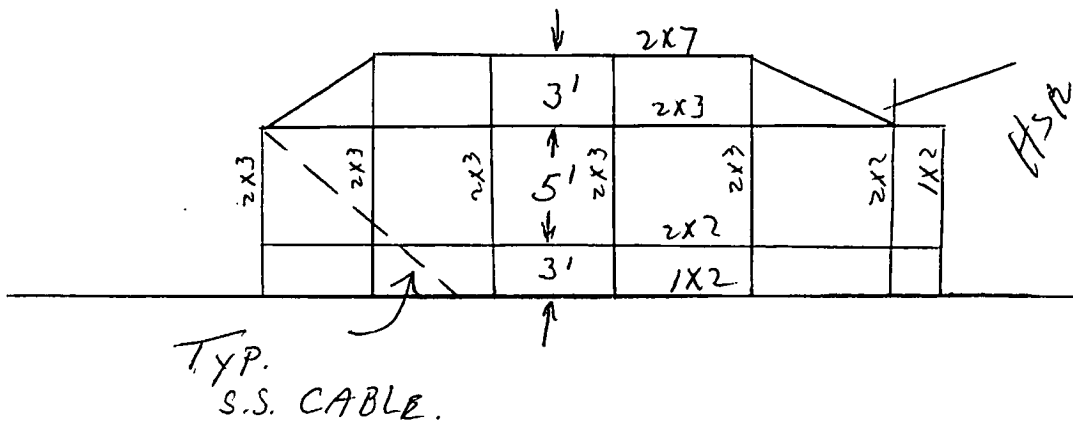
BLK.

SEC.

SID HIGHT POINT



REVISED  
8-11-89  
Sik ALUMINUM

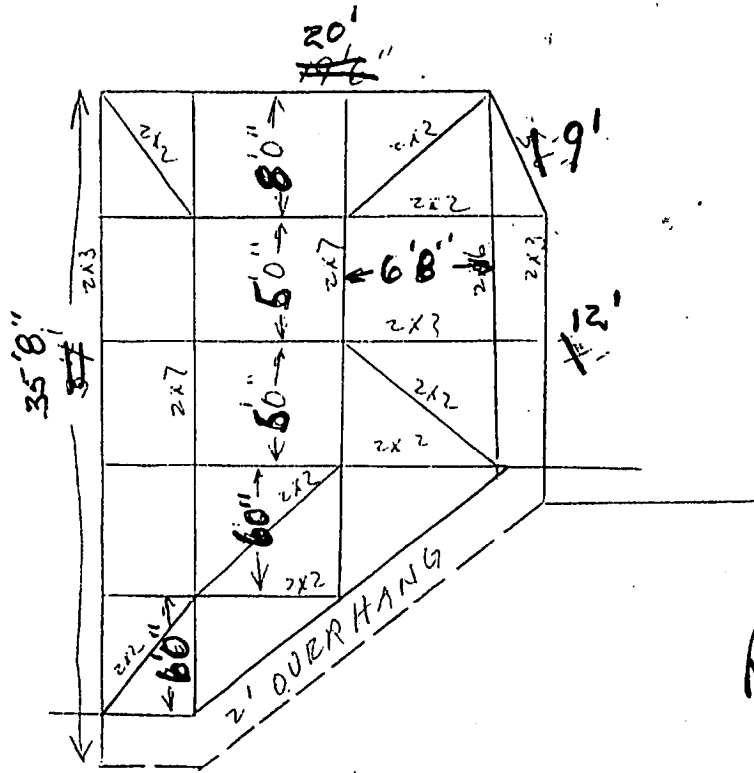


FRAME PLAN

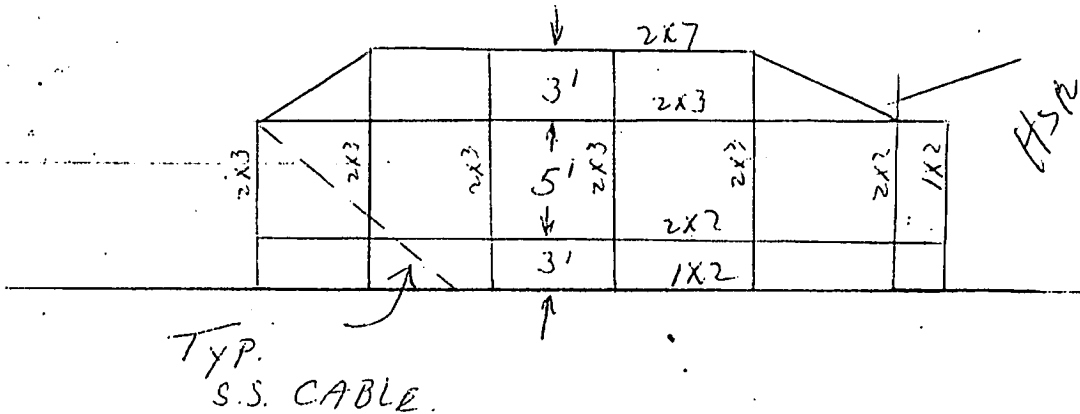
M/M FLANAGAN  
11 MIDDLE RD.

Sik ALUMINUM

SCALE 1" = 10 FT 8-11-89



REVISED  
8-11-89  
Sik ALUMINUM



FRAME PLAN

M/M FLANAGAN  
11 MIDDLE RD.

Sik ALUMINUM  
SCALE 1" = 10 FT 8-11-8

**3689**

**REROOF**

3689

TAX FOLIO NO. 1338410020000037070000

DATE 11/25/94

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

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

Owner MR. FLANAGAN Present address 11 MIDDLE ROAD

Phone 283-2822

Contractor PANACHE CONSTRUCTION Address 2970 S.E. DOMINICA TERRACE

Phone 287-5103 STUART, FL 34997

Where licensed STATE OF FL. License number CGCA07037

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

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

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

RE-ROOF

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

11 MIDDLE ROAD

Subdivision HIGH POINT Lot Number 37 Block Number \_\_\_\_\_

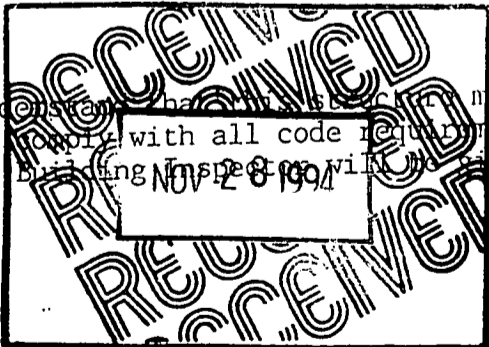
Contract price \$ 17,540.00 Cost of permit \$ 100.00

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

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

Contractor DAN CANTWRIGHT Daly

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



Owner \_\_\_\_\_

TOWN RECORD

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

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

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

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

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

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



**5729**

**FENCE**

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### TOWN OF SEWALL'S POINT

Date 3/21/02

BUILDING PERMIT NO. 5729

Building to be erected for LAWRENCE WINZURK Type of Permit FENCE

Applied for by O/B (Contractor) Building Fee 30.00

Subdivision HIGH POINT Lot 37 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 11 MIDDLE RD. Impact Fee \_\_\_\_\_

Type of structure SFR A/C Fee \_\_\_\_\_

Parcel Control Number: 1338410020000037070000 Electrical Fee \_\_\_\_\_  
Plumbing Fee \_\_\_\_\_

Amount Paid \$30.00 Check # 4763 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

Total Construction Cost \$ 1,000.00 TOTAL Fees \$30.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

## PERMIT

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

## INSPECTIONS

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

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

Owner or Titleholder Name: LAWRENCE & UTE WINZURK City: SEWALLS POINT State: FLORIDA Zip: 34996-7012

Legal Description of Property: LOT 37 HIGH POINT PLAT BOOK 3 PAGE 108 Parcel Number: \_\_\_\_\_

Location of Job Site: 11 MIDDLE ROAD Type of Work To Be Done: REPLACE/IMPROVE FENCE

CONTRACTOR/Company Name: LAWRENCE WINZURK (OWNER) Phone Number: 781-4686  
Street: 11 MIDDLE ROAD City: SEWALLS POINT State: FL Zip: 34996  
State Registration Number: N/A State Certification Number: N/A Martin County License Number: N/A

ARCHITECT: NONE Phone Number: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

ENGINEER: N/A Phone Number: \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: N/A Garage: N/A Covered Patios: N/A Screened Porch: N/A  
Carpport: N/A Total Under Roof: N/A Wood Deck: N/A Accessory Building: N/A  
Type Sewage: N/A Septic Tank Permit Number From Health Dept.: N/A Well Permit Number: N/A

FLOOD HAZARD INFORMATION Flood Zone: C Minimum Base Flood Elevation (BFE): 27' NGVD  
Proposed First Floor Habitable Floor Finished Elevation: N/A NGVD (Minimum 1 Foot Above BFE)

COST AND VALUES Estimated Cost of Construction or Improvements: LESS THAN \$1000 Estimated Fair Market Value (FMV) Prior  
To Improvements: \$250K If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES \_\_\_\_\_ NO X

SUBCONTRACTOR INFORMATION

Electrical: N/A State: \_\_\_\_\_ License Number: \_\_\_\_\_  
Mechanical: N/A State: \_\_\_\_\_ License Number: \_\_\_\_\_  
Plumbing: N/A State: \_\_\_\_\_ License Number: \_\_\_\_\_  
Roofing: N/A State: \_\_\_\_\_ License Number: \_\_\_\_\_

I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNANCE, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS. YES *[Signature]*

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) \_\_\_\_\_ South Florida Building Code (Structural, Mechanical, Plumbing, Gas) \_\_\_\_\_  
National Electrical Code \_\_\_\_\_ Florida Energy Code \_\_\_\_\_  
Florida Accessibility Code \_\_\_\_\_

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)

State of Florida, County of: MARTIN  
This the 20<sup>th</sup> day of March, 2002  
by LAWRENCE WINZURK who is personally  
known to me or produced FLORIDA DRIVER W526-521-41-  
as identification: Joan H. Barrow 057-0

CONTRACTOR SIGNATURE (Required) SELF

On State of Florida, County of: MARTIN  
This the 20<sup>th</sup> day of March, 2002  
by LAWRENCE WINZURK who is personally  
known to me or produced FLORIDA D.L. #W526-521-41-057  
as identification: Joan H. Barrow -0

My Commission Expires \_\_\_\_\_  
Notary Public  
November 30, 2002  
BONDED THRU TROY FAIR INSURANCE, INC.

My Commission Expires \_\_\_\_\_  
Notary Public  
November 30, 2002  
BONDED THRU TROY FAIR INSURANCE, INC.

Seal

Seal

# PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR A FENCE

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

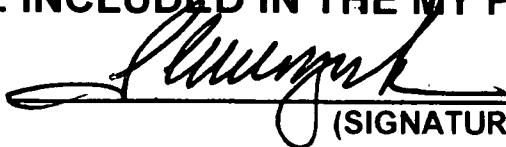
**Application form must contain the following information:**

1. Property Appraisers Parcel Number or Property Control Number
2. ✓ Legal Description of property (Can be found on your deed survey or Tax Bill)
3. N/A Contractors name, address, phone number and license numbers.
4. N/A Name all sub-contractors (properly licensed)
5. N/A Architects or Engineers name, address, & phone number.
6. Estimated cost of construction. *30 X 8' SECTION @ \$33 each, plus poles*
7. Original signature of owner and notarized
8. N/A Original signature of Contractor and notarized. *= approximately \$1000.00*

## Submittals (2 copies)

1. Current survey (boundary & topographic) containing the following information:
  - a. Legal Description of Lot
  - b. Lot dimensions and bearings
  - c. Street and Waterway names
  - d. Easements
  - e. ROW's
  - f. Canals, Ponds, or Riverfront locations
  - g. Location of existing and proposed fences
  - h. Description of type and height of fence at all locations
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants *NO STANDING COMMITTEE @ HIGH POINT*
5. Application for tree removal or relocation (attach tree survey and removal or relocation plan *NONE*)
6. A certified copy of the Notice of Commencement for any work over \$2500.00 *N/A*
7. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License) *N/A*
8. Copy of Workmen's Compensation *N/A*
9. Copy of Liability Insurance *N/A for contractor (HOME INSURED BY AMICA)*

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: 15 March 2002

**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: LAWRENCE WINZURK Date: 14 MARCH

Signature: 

Address: 11 MIDDLE ROAD

City & State: SEWALLS POINT

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

**This form is for all permits except electrical.**

# INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

| PERMIT #        | OWNER'S NAME       | ADDRESS                 | DESCRIPTION  | APPROVED BY & DATE |
|-----------------|--------------------|-------------------------|--|--------------------|
| 6303            | Combs              | 1 Mandalay Island       | Sandfill   | AD 6-26-07 ✓       |
| 7360            | Bertson            | 176 S Sewalls Pt        | Fill   | AD 6-26-07 ✓       |
| 7024            | Close              | 2 Parker                | Fence repair                                       |                    |
| 7028            | Winklow            | 105 S Sewalls Pt        | Fence repair                                       | AD 6-29-07 ✓       |
| 7070            | "                  | 10 S Sewalls Pt         | Interior renovations                               | AD 6-29-07 ✓       |
| 7436            | "                  | 10 S Sewalls Pt         | Walkway repair                                     | AD 6-29-07 ✓       |
| 7197            | Harvey             | 1 Ridgeland Ct          | Fence repair                                       |                    |
| 7198            | "                  | 1 Ridgeland Ct          | Minor roof repair/fascia                           |                    |
| 6956            | Hogan              | 100 S River Rd          | Fence repair                                       |                    |
| 7498 + 7493     | Gaul               | 107 S River Rd          | Generator pad / <sup>Gen</sup> <del>Electric</del> |                    |
| 7228            | Lyon               | 108 N. Sewalls Pt       | Pool heater changeout                              |                    |
| 7697            | "                  | 108 N. Sewalls Pt       | Repl wood deck                                     |                    |
| <del>5129</del> | <del>Winklow</del> | <del>11 Middle Rd</del> | <del>Fence</del>                                   | AD 7/6/07 ✓        |
| 7311            | Lumb               | 110 S Sewalls           | Fill   |                    |
| 7114            | Amos               | 114 S Sewalls           | Fill   |                    |
| 7235            | Amos               | 114 S Sewalls           | Dock repair (Harbor Bay main)                      |                    |
| 7277            | Bessemer           | 116 N. Sewalls          | Dock repair  |                    |
| 6461            | Elder              | 12 Emanta               | Paver drive  |                    |

### TOWN OF SEWALL'S POINT

Date 3/21/02 BUILDING PERMIT NO. 5729

Building to be erected for LAWRENCE WINZURK Type of Permit FENCE

Applied for by O/B (Contractor) Building Fee 30.00

Subdivision HIGH POINT Lot 37 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 11 MIDDLE RD Impact Fee \_\_\_\_\_

Type of structure SFR A/C Fee \_\_\_\_\_

Parcel Control Number: \_\_\_\_\_  
1338410020000037070000 Electrical Fee \_\_\_\_\_  
Plumbing Fee \_\_\_\_\_  
Roofing Fee \_\_\_\_\_

Amount Paid \$ 30.00 Check # 4763 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ )

Total Construction Cost \$ 1,000.00 TOTAL Fees \$30.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official

RENEWALS 3/21/03 - 3/20/04 \$30.00 3/17/03 # 143

RENEWALS 3/20/04 - 3/20/05 \$30.00 5/19/04 MASTER PERMIT NO. \_\_\_\_\_

**TOWN OF SEWALL'S POINT**

Date 3/21/02

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

Building to be erected for LAURENCE WINZURE Type of Permit FENCE

Applied for by O/B (Contractor) Building Fee 30.00

Subdivision HIGH POINT Lot 37 Block \_\_\_\_\_ Radon Fee \_\_\_\_\_

Address 11 MIDDLE RD. Impact Fee \_\_\_\_\_

Type of structure SFR A/C Fee \_\_\_\_\_

Parcel Control Number: \_\_\_\_\_ Electrical Fee \_\_\_\_\_

1338410020000037470000 Plumbing Fee \_\_\_\_\_

Amount Paid \$30.00 Check # 4763 Cash \_\_\_\_\_ Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

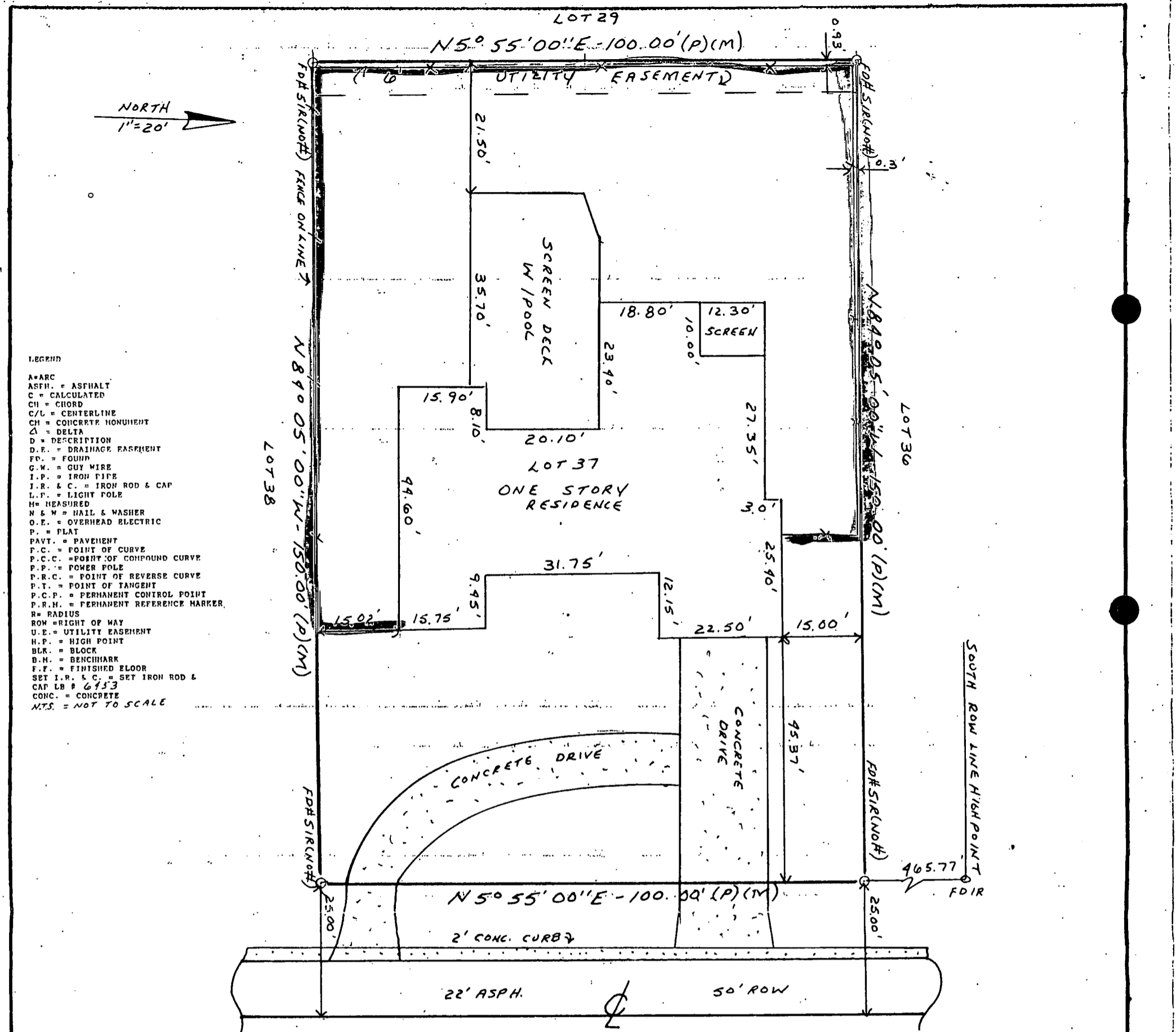
Total Construction Cost \$ 1,000.00 Roofing Fee \_\_\_\_\_

TOTAL Fees \$30.00

Signed [Signature]  
Applicant

Signed [Signature]  
Town Building Official





- LEGEND
- A=ARC
  - ASFH. = ASPHALT
  - C = CALCULATED
  - CH = CHORD
  - CL = CENTERLINE
  - CH = CONCRETE MONUMENT
  - Δ = DELTA
  - D = DESCRIPTION
  - D.E. = DRAINAGE EASEMENT
  - FD. = FOUND
  - G.W. = GUY WIRE
  - I.P. = IRON PIPE
  - I.R. & C. = IRON ROD & CAP
  - L.P. = LIGHT POLE
  - M = MEASURED
  - N & W = NAIL & WASHER
  - O.E. = OVERHEAD ELECTRIC
  - P. = PLAT
  - PAVT. = PAVEMENT
  - P.C. = POINT OF CURVE
  - P.C.C. = POINT OF COMPOUND CURVE
  - P.P. = POWER POLE
  - P.R.C. = POINT OF REVERSE CURVE
  - P.T. = POINT OF TANGENT
  - P.C.P. = PERMANENT CONTROL POINT
  - P.R.M. = PERMANENT REFERENCE MARKER
  - R = RADIUS
  - ROW = RIGHT OF WAY
  - U.E. = UTILITY EASEMENT
  - H.P. = HIGH POINT
  - BLK. = BLOCK
  - B.H. = BENCHMARK
  - F.F. = FINISHED FLOOR
  - SET I.R. & C. = SET IRON ROD & CAP LB # 6153
  - CONC. = CONCRETE
  - M.T.S. = NOT TO SCALE

DESCRIPTION

LOT 37, HIGHPOINT, ACCORDING TO THE PLAT THEREOF AS RECORDED IN PLAT BOOK 3, PAGE 108, OF THE PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SAID LANDS SITUATE IN MARTIN COUNTY, FLORIDA.

STREET ADDRESS: 11 MIDDLE ROAD

FLOOD ZONE C  
FIRM PANEL 120164 0002C  
DATED APRIL 3, 1984

CERTIFIED TO:

NORTH AMERICAN MORTGAGE COMPANY  
THE PEOPLES TITLE, INC.  
AMERICAN PIONEER TITLE INSURANCE COMPANY  
LAWRENCE A. & UTE I. WINZURK

SURVEYOR'S CERTIFICATE:

THIS CERTIFIES THAT A SURVEY OF THE PROPERTY DESCRIBED HEREON WAS MADE UNDER MY SUPERVISION AND THAT THE SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS IN CHAPTER 61G17-6, FLORIDA ADMINISTRATIVE CODE, PURSUANT TO SECTION 472.027, FLORIDA STATUTES. AND, THAT THE SKETCH HEREON IS A TRUE AND ACCURATE REPRESENTATION THEREOF TO THE BEST OF MY KNOWLEDGE AND BELIEF. SUBJECT TO NOTES AND NOTATIONS SHOWN HEREON.

NOTES:

- 1) REPRODUCTIONS OF THIS SKETCH ARE NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
- 2) LANDS SHOWN HEREON WERE NOT ABSTRACTED BY THIS OFFICE FOR RIGHTS-OF-WAY, EASEMENTS OF RECORD, OWNERSHIP, MORTGAGE ACT DEEDS, OR ADJOINING DEEDS.
- 3) LAND DESCRIBED SHOWN HEREON WAS PROVIDED BY THE CLIENT OR HIS/HER AGENT.
- 4) NO ATTEMPT WAS MADE BY THIS OFFICE TO LOCATE SUBSURFACE IMPROVEMENTS OR ENCROACHMENTS OTHER THAN THOSE SHOWN HEREON.
- 5) UNDERGROUND FOUNDATIONS NOT LOCATED.
- 6) BASE OF BEARINGS IS THE CENTERLINE OF MIDDLE ROAD AS SHOWN ON THE PLAT OF HIGHPOINT RECORDED IN PLAT BOOK 3, PAGE 108, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

**TOWN OF SEWALL'S POINT**  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE

DATE: 3/27/02

**BUILDING OFFICIAL**  
Gene Simmons

DATED 9/2/98

*[Signature]*  
GERALD W. TANSKY

PROFESSIONAL REGISTRATION NO. 4464

BOUNDARY SURVEY W/INTERIOR IMPROVEMENTS PREPARED FOR: DONNELL FINANCIAL

DRAWN: D.K.T.  
CHECKED: G.W.T.  
DATE: 3-2-98  
SCALE: 1"=20'  
JOB #: 98-172  
SHEET 1 OF 1

**TREASURE COAST LAND SURVEYORS**  
LB # 6453 PROFESSIONAL LAND SURVEYORS  
PHONE # 3250 CAUDICE AVE. BOX 113  
334-2663 JENSEN BEACH, FLORIDA 34957

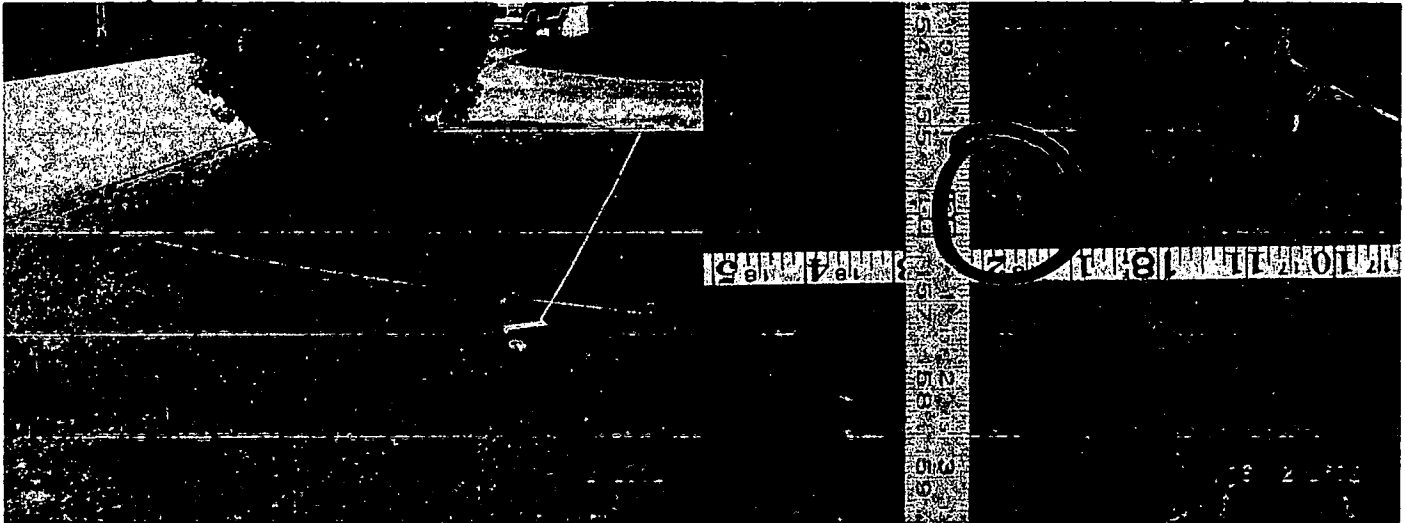
| REVISIONS | BY | DATE |
|-----------|----|------|
|           |    |      |
|           |    |      |
|           |    |      |
|           |    |      |

Application to the Town of Sewalls Point, Florida, by Lawrence & Ute Winzurk,

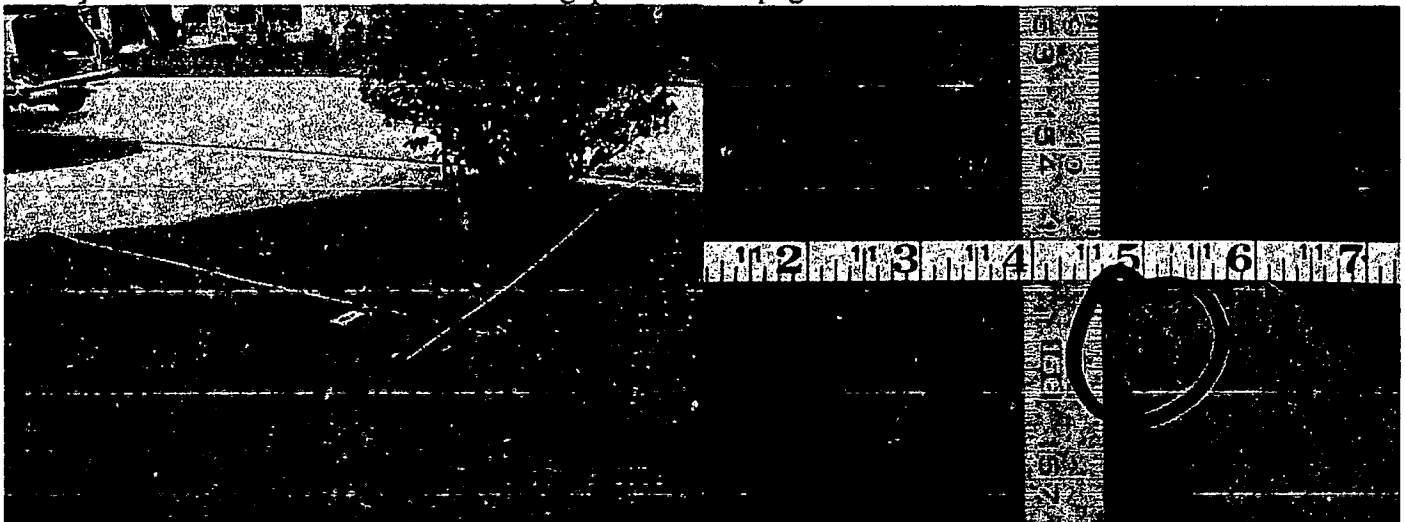
Permit Application to replace & improve existing fence around property with Standard "Six foot high Shadow Box" fencing.

A) All the work will be performed by the owners: Lawrence & Ute Winzurk, @ 11 Middle Road, Sewalls Point, Florida 34996-7012 [772]-781-4686. A Survey of the property, land & building is attached and no changes to the property have been made since this survey.

Property lines are well known/marked & verified with 8 foot inside "clear line of sight" pins.

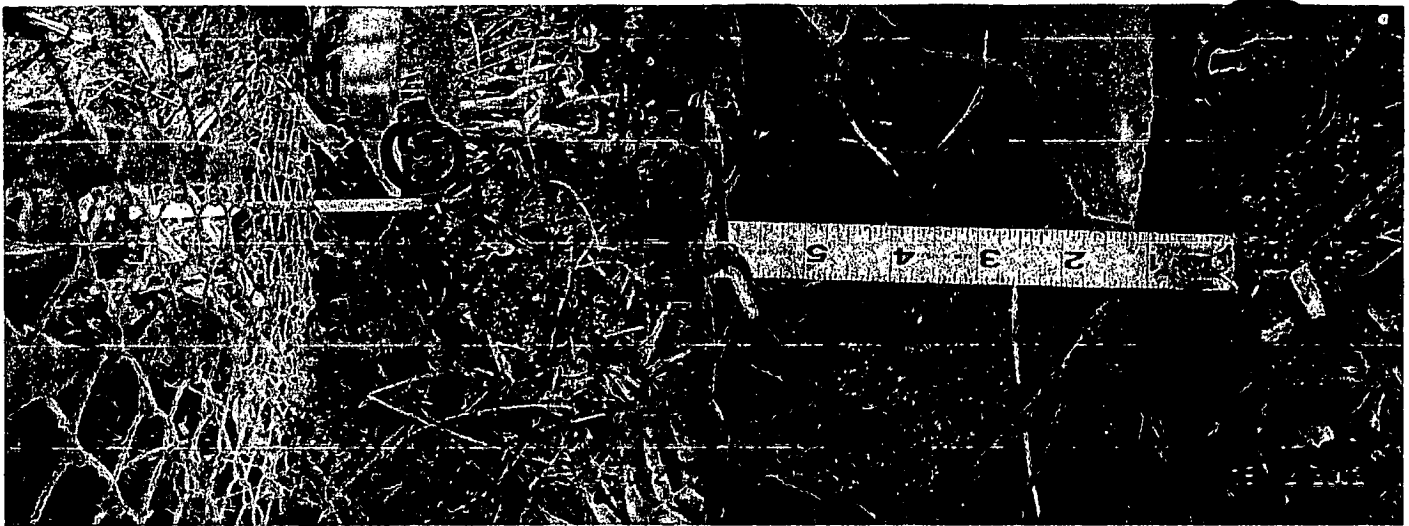


1 & 2] North East Corner Pin of Lot 37 Highpoint Book3 page 108



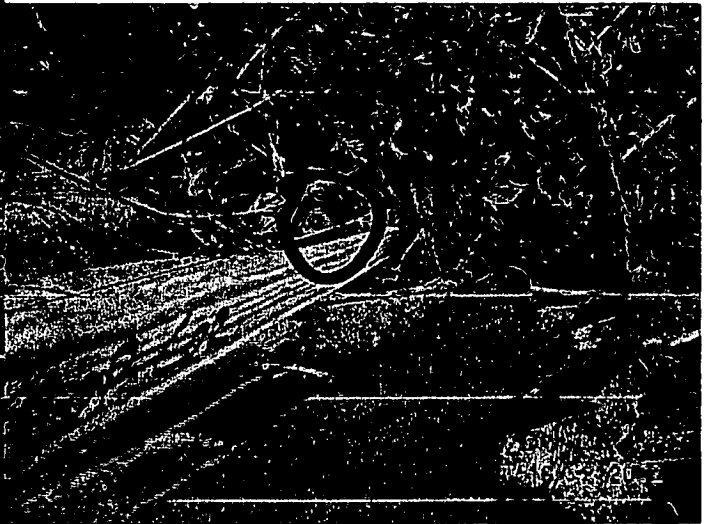
3 & 4] South East Corner Pin

Application to the Town of Sewalls Point, Florida, by Lawrence & Ute Winzurk,



5 & 6] South West Corner Pin

Lawrence & Ute Winzurk, @ 11 Middle Road, Sewalls Point, Florida 34996-7012 [772]-781-4686



7 & 8 North West Corner Pin

Application to the Town of Sewalls Point, Florida, by Lawrence & Ute Winzurk,

- B] WORK Description: Also see survey map
- a] Replace the rotted stockade fence shown in in foto 9 with shadow box fencing.
  - b] Continue shadow box fencing across back yard from [SW to NW corners] inside property line.
  - c] Continue shadow box fencing from NW corner to end of existing fence, inside property line.
  - d] Continue shadow box fencing from SW corner to end of existing fence on West side, inside line.
  - e] Replace both existing front-side gates & fences with Shadow box fencing and gates.

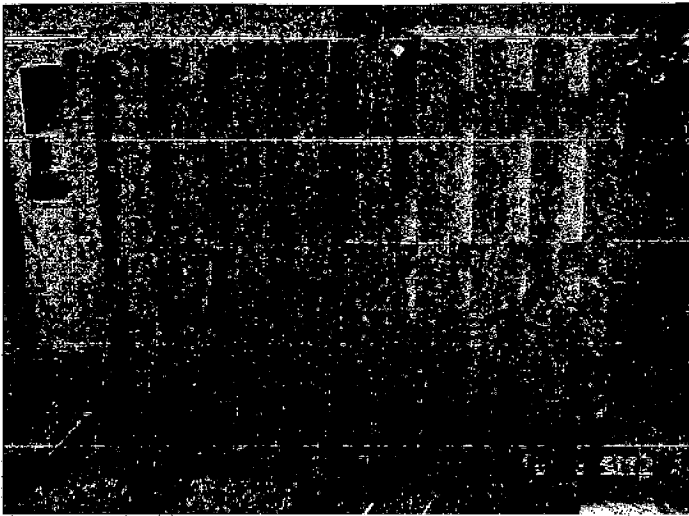
See following foto



9] SW view, of old stockade fence to be replaced & 10] West view directly open into rear neighbor's pool



11] West by North View of Chain Link Fence & 12] North West view into north side neighbors back yard & pool



13] Proposed fence Improvement with standard 8 X 6 Shadow Box mounted on 8 foot 4 X 4s buried 2 foot in concrete & stained in natural.

NOTICE OF AD VALOREM TAXES & NON-AD VALOREM ASSESSMENTS

11309

| ORIGINAL  | FOR                       | MARTIN COUNTY                             | REAL ESTATE |
|---|---------------------------|---|-------------|
| AD VALOREM TAXES  |                           |   |             |
| I.D. NUMBER: 13-38-41-002-000-00370.70000 2001 TAX DISTRICT: 2200 |                           |   |             |
| ASSESSED VALUE: 222,088   |                           | EXEMPTIONS: 25,000 TAXABLE VALUE: 197,088 |             |
| AD VALOREM ASSESSMENTS  |                           |   |             |
| COUNTY  | COUNTY-GENERAL FUND-OP    | 5.4910                                    | 1,082.21    |
|   | CNTY-F.I.T. BOND          | .0620                                     | 12.22       |
|   | CNTY-GOVT BONDS 1986      | .2920                                     | 57.55       |
|   | CNTY-BONDS LANDS FOR YOU  | .1570                                     | 30.94       |
| SCHOOL  | SCHOOL-GENERAL FUND       | 8.4150                                    | 1,658.50    |
| CHLD SVC  | CHILDRENS SERVICES ORDNCS | .3143                                     | 61.94       |
| F.I.N.D.  | FL-INLAND NAVIGATION DIST | .0385                                     | 7.59        |
| CITY  | SEWALLS POINT             | 1.8890                                    | 372.30      |
| S.F.W.M.  | SOUTH FLA WATER MANAGEMNT | .6970                                     | 137.37      |

TOTAL MILLAGE 17.35580 AD VALOREM TAXES 3,420.62

| AD VALOREM ASSESSMENTS                       |  |
|--|--|
| COMBINED TAXES & ASSESSMENTS TOTAL: 3,420.62 |  |

EXEMPTION: HX-JTRS 25,000  
 13 38 41  
 HIGH POINT LOT 37 OR 342/2303  
 PROPERTY  
 ADDR: 11 MIDDLE RD SP

13-38-41-002-000-00370.70000 2001  
 WINZURK, LAWRENCE A & UTE I  
 11 MIDDLE RD  
 STUART FL 34996-7012

| NOV 1-NOV 30 | DEC 1-DEC 31 | JAN 1-JAN31 | FEB 1-FEB28 | MAR 1-MAR 31 | DELINQUENT ON |
|--------------|--------------|-------------|-------------|--------------|---------------|
| 3,283.80     | 3,318.00     | 3,352.21    | 3,386.41    | 3,420.62     | APRIL 1, 2002 |

ORIGINAL BILL SENT TO MORTGAGE COMPANY SEE REVERSE SIDE FOR INSTRUCTIONS

NOTICE OF AD VALOREM TAXES & NON-AD VALOREM ASSESSMENTS

| ORIGINAL            | FOR          | MARTIN COUNTY         | REAL ESTATE   |
|---------------------|--------------|-----------------------|---------------|
| TOTAL TAXES IF PAID |              |                       |               |
| NOV 1-NOV 30        | DEC 1-DEC 31 | JAN 1-JAN31           | FEB 1-FEB28   |
| 3,283.80            | 3,318.00     | 3,352.21              | 3,386.41      |
|                     |              |                       | MAR 1-MAR 31  |
|                     |              |                       | 3,420.62      |
|                     |              |                       | DELINQUENT ON |
|                     |              |                       | APRIL 1, 2002 |
| ASSESSED            | 222,088      | TOTAL                 | 3,420.62      |
| HX-JTRS             | 25,000       | HON. LARRY C. O STEIN |               |
| TAXABLE             | 197,088      | P.O. BOX 9013         |               |
|                     |              | STUART, FL 34995      |               |

13 38 41  
 HIGH POINT LOT 37 OR 342/2303

13-38-41-002-000-00370.70000 2001  
 WINZURK, LAWRENCE A & UTE I  
 11 MIDDLE RD  
 STUART, FL 34996

012001 000000133841 0020000037070000 0000 00000342062 000000000000 0000 9

**9159**

**SOLAR HOT WATER HEATER**

---

RECEIVED  
DATE: 5-11-09  
TOWN OF SEWALL'S POINT

Date: May 1, 2009 of Sewall's Point BUILDING PERMIT APPLICATION Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: Winzurk Phone (Day) 781-4686 (Fax) \_\_\_\_\_

Job Site Address: 11 MIDDLE Rd City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) HighPoint Lot 37 Parcel Number 13-28-41-002-000-00370-7

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

Scope of work: solar panel

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

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

**CONSTRUCTION VALUES:** (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 2450.00  
Notice of Commencement required when over \$2500 - prior to first inspection  
Is subject property located in flood hazard area? V  A9  A8   
**FOR ADDITIONS AND REMODELS IN FLOOD HAZARD AREAS ONLY:**  
Estimated Fair Market Value prior to improvement: \_\_\_\_\_  
(Fair Market Value of the Primary Structure only, Minus the land value)  
\*\*\* PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION \*\*\*

OK

CONTRACTOR/Company: FL Solar East Phone: 321-8900 Fax: 321-9332

Street: 1743 Huntington Ln #101 City: Rockledge State: FL Zip: 32955

State Registration Number: \_\_\_\_\_ State Certification Number: 000027561 Municipal License Number: \_\_\_\_\_

PROJECT SUPERINTENDANT: JEFF SIMONS CONTACT NUMBER: 727-644-7873

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

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

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

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

AREA SQ. FOOTAGE: Living: \_\_\_\_\_ Garage \_\_\_\_\_ Covered Patios \_\_\_\_\_ Screened Porch \_\_\_\_\_  
Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Decks/walkways \_\_\_\_\_ Accessory Building \_\_\_\_\_

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004 (W/2006 Rev.)  
National Electrical Code: 2005 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

**NOTICES TO OWNERS AND CONTRACTORS:**  
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.  
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS TO YOUR ADVANTAGE AND RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY, OR THE TOWN OF SEWALL'S POINT, AND THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.  
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.  
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ALL NULL AND VOID PERMITS. REF: FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1-105.4.1.1 -5.

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

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.

W. J. Winzurk  
OWNER OR AUTHORIZED AGENT SIGNATURE

Arthur West  
CONTRACTOR SIGNATURE (required)

State of Florida, County of: Martin

On State of Florida, County of: BREVARD

This the 11th day of May

This the 1 day of May 2009

by W. J. Winzurk who is personally

by Arthur West who is personally

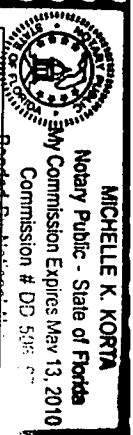
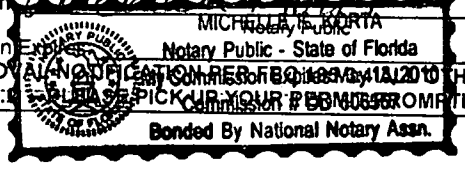
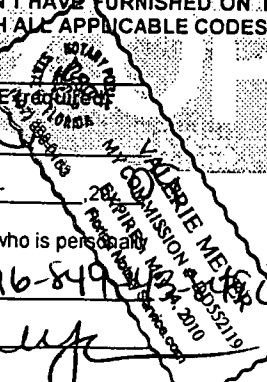
known to me or produced FDI # WS26-849

known to me or produced #DP/506707

as identification. Valerie Meyer  
Notary Public

as identification. Michelle K. Kortia  
Notary Public

My Commission Expires: \_\_\_\_\_ My Commission Expires: \_\_\_\_\_  
SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL AND APPLICATION PER FBC 105.3.1(1) 12/10  
APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS PER FBC 105.3.1(1) 12/10 OTHER  
COMMISSION # DD 596  
BONDED BY NATIONAL NOTARY ASSN.





# Martin County, Florida

generated on 5/1/2009 2:59:40 PM EDT

## Summary

| Parcel ID                | Unit Address | Serial ID | Index Order | Commercial | Residential |
|--------------------------|--------------|-----------|-------------|------------|-------------|
| 13-38-41-002-000-00370-7 | 11 MIDDLE RD | 27725     | Address     | 0          | 1           |

### Summary

**Property Location** 11 MIDDLE RD  
**Tax District** 2200 Seawalls Point  
**Account #** 27725  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120000  
**Acres** 0.344

### Legal Description

**Property Information**  
 HIGH POINT LOT 37 OR 342/2303

### Owner Information

**Owner Information**  
 WINZURK UTE INGBORG (TR)

### Mail Information

11 MIDDLE RD  
 STUART FL 34996

### Assessment Info

**Front Ft.** 0.00

**Market Land Value** \$257,000  
**Market Impr Value** \$209,640  
**Market Total Value** \$466,640

### Recent Sale

**Sale Amount** \$0

**Sale Date** 6/6/2008  
**Book/Page** 2332 2685

Data updated on 04/22/2009



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

## BUILDING PERMIT CARD

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

|                        |                           |                       |                  |
|------------------------|---------------------------|-----------------------|------------------|
| PERMIT NUMBER:         | 9159                      | DATE ISSUED:          | MAY 13, 2009     |
| SCOPE OF WORK:         | SOLAR PANELS & WATER TANK |                       |                  |
| CONDITIONS:            |                           |                       |                  |
| CONTRACTOR:            | FLORIDA SOLAR EAST        |                       |                  |
| PARCEL CONTROL NUMBER: | 133841-002-000-002707     | SUBDIVISION           | HIGH PT - LOT 37 |
| CONSTRUCTION ADDRESS:  | 11 MIDDLE RD              |                       |                  |
| OWNER NAME:            | WINZURK                   |                       |                  |
| QUALIFIER:             | ARTHUR WEST               | CONTACT PHONE NUMBER: | 321-631-8990     |

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

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

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

### REQUIRED INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

|                       |              |               |                           |
|-----------------------|--------------|---------------|---------------------------|
| <b>PERMIT NUMBER:</b> | 9159         |               |                           |
| <b>ADDRESS</b>        | 11 MIDDLE RD |               |                           |
| <b>DATE:</b>          | 5/13/09      | <b>SCOPE:</b> | SOLAR PANELS & WATER TANK |

| SINGLE FAMILY OR ADDITION /REMODEL  | Declared Value | \$   |  |
|---|----------------|------|--|
| Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)<br>(No plan submittal fee when value is less than \$100,000) |                | \$   |  |
| Total square feet air-conditioned space: (@ \$110.25 per sq. ft.)   |                | s.f. |  |
| Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)  |                | s.f. |  |
| Total Construction Value:   |                | \$   |  |
| Building fee: (2% of construction value SFR or >\$200K)   |                | \$   |  |
| Building fee: (1% of construction value < \$200K + \$75 per insp.)  |                |      |  |
| Total number of inspections (Value < \$200K) @\$75 ea.  |                | \$   |  |
| Radon Fee (\$.005 per sq. ft. under roof):  |                | \$   |  |
| DBPR Licensing Fee: (\$.005 per sq. ft. under roof)   |                | \$   |  |
| Road impact assessment: (.04% of construction value - \$5.00 min.)  |                |      |  |
| Martin County Impact Fee:   |                | \$   |  |
| <b>TOTAL BUILDING PERMIT FEE:</b>   |                | \$   |  |

| ACCESSORY PERMIT   | Declared Value: | \$ |      |
|--|-----------------|----|------|
|  |                 |    | 2450 |
| Total number of inspections @ \$75.00 each                         | 1               | \$ | 75   |
| Road impact assessment: (.04% of construction value - \$5.00 min.) |                 | \$ | 5    |

|                                    |  |    |              |
|------------------------------------|--|----|--------------|
| <b>TOTAL ACCESSORY PERMIT FEE:</b> |  | \$ | 80 - pd cash |
|------------------------------------|--|----|--------------|

**RECEIVED**  
DATE: 5-12-09  
TOWN OF SEWALL'S POINT

**FLORIDA SOLAR EAST**

1743 HUNTINGTON LANE, SUITE 101  
ROCKLEDGE, FL 32955  
OFFICE: 321-631-8990 FAX: 321-631-9332

Dated: May 12, 2009

To: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Rd  
Sewall's Point, FL 34996

RE: Winzurk  
11 Middle Rd  
Sewall's Point, FL 34996


The collectors will be installed as per Blue Prints submitted page A-01 Section 5 and A-03 Section 8 and 9.

A new 80-gallon solar water tank will be installed.

A copy of the Florida Certification of Solar Contractors Scope of Work is included for the questions regarding the tie-in of the plumbing.

If you need further assistance do not hesitate to call me at (321) 631-8990.

Respectfully,

  
Fammie Robbins  
Permitting

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY

772-220-4765

ann  
Valerie

**61G4-15.021 Certification of Solar Contractors.**

(1) Scope of Rule. The purpose of this rule is to provide for the certification of solar contractors.

(2) Definition.

(a) Solar Contractor. A solar contractor is a contractor whose contracting business consists of the execution of contracts requiring the experience, financial means, knowledge and skill to install, alter, repair, maintain, relocate, or replace solar panels for potable solar water heating systems, swimming pool solar heating systems, and photovoltaic systems and any appurtenances, apparatus, or equipment used in connection therewith. Such contractor shall subcontract with a qualified contractor in the field concerned all other work which is specified herein as being the work of a trade other than that of a solar contractor. The scope of work of the solar contractor shall apply to private and public property, and shall include all work incidental thereto as specified in subsection (3).

(b) Residential. For purposes of this section the term residential refers to systems installed in connection with one family, two family, or three family residences not exceeding two stories in height.

(3) Minor work incidental to the installation of residential solar energy equipment. The following work incidental to the installation of residential solar equipment shall be considered to be within the scope of work of a solar contractor. Unless otherwise indicated, the solar contractor shall be permitted to perform such work without subcontracting to a trade other than that of a solar contractor.

(a) Electrical work. The branch circuit supplying the electric water heater, the receptacle outlet for a cord-and-plug-connected solar controller, the swimming pool pump motor, and the premises wiring on the load side of the premises service disconnecting means shall be in accordance with the National Electric Code. If installation, alteration, removal, replacement, or upgrading of this circuit is necessary, the work shall be performed by licensed electrical contractors only.

(b) Solar Water Heating Systems. Solar contractors may disconnect and reconnect the existing branch circuit wiring at the water heater. Solar contractors may install new or replace existing control attached to a cord-and-plug-connected solar controller. For a photovoltaic pump controller, solar contractors may install new or replace existing direct current power wiring between the photovoltaic panel and the pump motor. All work shall be done in accordance with the National Electric Code.

(c) Solar Pool Heating Systems. Solar contractors may install new or replace existing power wiring on the load side of an existing pump motor disconnect. Solar contractors may also install new or replace existing control wiring connected to a solar pool controller. All work shall be done in accordance with the National Electric Code.

(d) Solar photovoltaic systems. Solar contractors may install new or replace existing power and control wiring in photovoltaic (PV) source circuits, PV output circuits, battery storage system circuits, and power conditioning unit. In an interactive system that operates parallel with a primary source of electrical energy, this work is limited to the PV supply side of the power conditioning unit. In a stand-alone, or non-grid connected system, the work above-referenced shall be limited to the PV supply side of the power conditioning unit and shall not include wiring integral to the building premises. All work shall be done in accordance with the National Electric Code.

(e) Plumbing. The solar contractor shall perform all work required for the installation of a domestic solar water heating system and solar pool heating system, including connecting the solar hot water system to the existing cold water supply and hot water lines at the existing domestic water heater location. Such work shall be performed in accordance with applicable codes and standards.

(f) Roofing. Solar contractors may perform roofing work directly related to the installation of a domestic solar water heating system, solar pool heating system, or photovoltaic system, including cutting roof openings and penetrations, installing flashings, attaching equipment mounting brackets and solar panels. Such work shall be limited to an area within 18 inches of each roof penetration or attachment and shall be performed in accordance with National Roofing Contractors Association roofing practices.

*Specific Authority 489.105(12), 489.108, 489.113(6), 489.115(4) FS. Law Implemented 120.53, 489.105(3)(a), (12), 489.113(6) FS. History—New 3-1-92. Formerly 21E-15.021.*

TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY

**ATTEN: Sewall's Pointe Permitting**

**RECEIVED**  
R 10-30-09

10/30/09

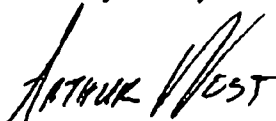
I am requesting to cancel my building permit with Sewall's Pointe.

~~Permit # 6453~~

**Address: 11 Middle Rd**

I request to cancel my permit for the following reasons: I, Arthur West the contractor listed am not licensed for electrical work. Florida Solar has submitted a new permit with the correct information.

Thank you for your time,



Arthur West  
Florida Solar East  
321-631-8990

Changed Qualifier

RECEIVED 10-28-09

Date: 10/28/09 Town of Sewall's Point BUILDING PERMIT APPLICATION Permit Number: 9159  
 OWNER/TITLEHOLDER NAME: Winzork Phone (Day) 781-416816 (Fax) \_\_\_\_\_  
 Job Site Address: 11 Middle Rd City: Sewalls State: FL Zip: 34996  
 Legal Description: High Point Lot 37 Parcel Control Number: 1338.41.002.000.00370.7  
 Owner Address (if different): \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Scope of work (please be specific): Install solar for hot water  
**WILL OWNER BE THE CONTRACTOR?**  
 (If yes, Owner Builder questionnaire must accompany application)  
 YES \_\_\_\_\_ NO X  
**Has a Zoning Variance ever been granted on this property?**  
 YES \_\_\_\_\_ (YEAR) \_\_\_\_\_ NO X  
 (Must include a copy of all variance approvals with application)

**COST AND VALUES:** (Required on ALL permit applications)  
 Estimated Value of Improvements: \$ 7950  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10 \_\_\_\_\_ AE9 \_\_\_\_\_ AE8 X  
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: FI Solar East Phone: 3216318990 Fax: 3216319332  
 Street: 1743 Huntington Lane City: Rockledge State: FL Zip: 32955

State License Number: CPC0325316 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: Kandice West Phone Number: 5013528784

DESIGN PROFESSIONAL: \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

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

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

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

**NOTICES TO OWNERS AND CONTRACTORS:**  
 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.  
 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.  
 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.  
 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER SIGNATURE: (required)  
 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)  
Linda Winzork  
 State of Florida, County of: St Lucie  
 This the 28 day of Oct, 2009  
 by Linda Winzork who is personally  
 known to me or produced  
 as identification. FLDL

CONTRACTOR SIGNATURE: (required)  
Jon Fuller  
 On State of Florida, County of: St Lucie  
 This the 28 day of Oct, 2009  
 by Jon Fuller who is personally  
 known to me or produced  
 As identification. Kandice West

My Commission Expires: Kandice West  
 Notary Public

My Commission Expires: \_\_\_\_\_  
 Notary Public

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPLICATION. ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2). PLEASE PICK UP YOUR PERMIT PROMPTLY!  
 MY COMMISSION # DD898661  
 EXPIRES June 14, 2013  
 (407) 398-0155  
 FloridaNotaryService.com

KANDICE WEST  
 MY COMMISSION # 105341  
 EXPIRES June 14, 2013  
 (407) 398-0153  
 FloridaNotaryService.com

PERMIT NUMBER:

**NOTICE OF COMMENCEMENT**

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

- 1. DESCRIPTION OF PROPERTY (Legal description and street address) TAX FOLIO NUMBER: 13-38 41-002-000  
SUBDIVISION High Point BLOCK \_\_\_\_\_ TRACT \_\_\_\_\_ LOT 37 BLDG \_\_\_\_\_ UNIT 603707  
11 Middle Rd
- 2. GENERAL DESCRIPTION OF IMPROVEMENT: Install solar for Hot water
- 3. OWNER INFORMATION: a. Name W. Wink  
b. Address 11 Middle Rd c. interest in property \_\_\_\_\_  
d. Name and address of fee simple titleholder (if other than owner) \_\_\_\_\_
- 4. CONTRACTOR'S NAME, ADDRESS AND PHONE NUMBER: Hi Solar (68) 1743  
Huntington Ave, Rockledge, FL 32955 3216318990
- 5. SURETY'S NAME, ADDRESS AND PHONE NUMBER AND BOND AMOUNT: \_\_\_\_\_
- 6. LENDER'S NAME, ADDRESS AND PHONE NUMBER: \_\_\_\_\_
- 7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(a) 7., Florida Statutes:  
NAME, ADDRESS AND PHONE NUMBER: \_\_\_\_\_
- 8. In addition to himself or herself, Owner designates the following to receive a copy of the Lienor's Notice as provided in Section 713.13 (1)(b), Florida Statutes:  
NAME, ADDRESS AND PHONE NUMBER: \_\_\_\_\_
- 9. Expiration date of notice of commencement (the expiration date is 1 year from the date of recording unless a different date is specified) \_\_\_\_\_, \_\_\_\_\_, 20\_\_\_\_\_.

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

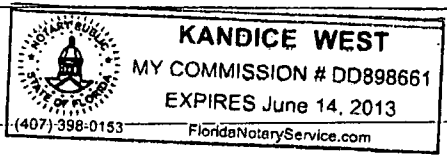
W. Wink THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGE IS A TRUE AND CORRECT COPY OF THE ORIGINAL.  
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager  
BY: Marsha Ewing D.C.  
DATE: 10-28-09  
Print Name and Provide Notary's Title/Office  
MARSHA EWING, CLERK  
CIRCUIT COURT  
MARTIN COUNTY, FLORIDA

State of Florida  
County of St Lucie  
The foregoing instrument was acknowledged before me this 28 day of Oct, 2009  
By W. Wink as owner  
(Name of person) (Type of authority...e.g. Owner, officer, trustee, attorney in fact)  
For \_\_\_\_\_  
(Name of party on behalf of whom instrument was executed) Personally Known \_\_\_\_\_ or produced the following type of ID: FLID

Kandice West  
(Printed Name of Notary Public)  
Kandice West  
(Signature of Notary Public)

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

Signature(s) of Owner(s) or Owner(s)' Authorized Officer/Director/Partner/Manager who signed above:  
By: W. Wink By \_\_\_\_\_





2 of 5

Our Email- floridasolareast@bellsouth.net  
Our Website- floridasolareast.net

Florida Solar East  
1743 Huntington Lane, Suite 101  
Rockledge, FL 32955  
(321) 631-8990  
(800) 922-5299

STATE CERTIFIED # CWC027561  
# CPC032536

|                    |                     |                  |            |                   |
|--------------------|---------------------|------------------|------------|-------------------|
| JOB LOCATION:      |                     | INVOICE ADDRESS: |            | HOME PHONE        |
| NAME               | UTE WINZUMIK        | NAME             |            | 772 781 4686      |
| ADDRESS            | 11 MIDDLE RD. 34996 | ADDRESS          |            | WORK PHONE        |
| CITY               | SEWANS POINT FL     | CITY             |            | JOB NO.           |
| LEGAL              |                     | ZIP              |            | P.O. NO.          |
| SOLAR PANEL (TYPE) | GUARDIAN            | PLUMBING         | AS NEEDED. | LEAD SOURCE       |
| NUMBER OF PANELS   | 1 4K10.             | PANEL SIZE       |            | OCCUPATION MR MRS |
| AUTO CONTROL       |                     | POOL COVER       |            | COMPANY           |
| PURIFIER           |                     | SPA COVER        |            |                   |

**OPTIONS**

- Hurricane Package
- Signature Plumbing
- Self-draining System
- Never Lube Valves
- (2) 2" Check Valves
- Label & Paint Pipes

Additional Comments \_\_\_\_\_

**PERFORMANCE GUARANTEE**

FLORIDA SOLAR has designed your pool heating system to add \_\_\_\_\_ degrees (F) to the temperature of your pool to keep your pool temperature at \_\_\_\_\_ degrees (F) or higher from approx. \_\_\_\_\_ to approx. \_\_\_\_\_. Your performance guarantee assumes the use of a pool cover.

Your performance guarantee is based on the last 20 years of weather and your pool temperature will go up or down as the average weather increases or decreases.

90 Day Guarantee. If within 90 days from the original installation date of your system you are not completely satisfied with the above stated performance, we will modify the system to meet your satisfaction at no additional cost to you.

The buyer has the right to cancel the transaction at any time prior to midnight of the third business day after the date of this transaction.

|                                  |               |
|----------------------------------|---------------|
| POOL AREA                        | SCREENED OPEN |
| BASE SYSTEM                      | 7950.         |
| OPTIONS                          |               |
| TOTAL INVESTMENT                 |               |
| DEPOSIT                          |               |
| BALANCE DUE ON COMPLETION        | 7950          |
| MONTHLY INVESTMENT UPON APPROVAL |               |

DESIRED INSTALLATION DATE

ASAP.  
STAUBBY

Buyer X L.H. S. Umitch Date \_\_\_\_\_

Buyer \_\_\_\_\_ Date \_\_\_\_\_

Florida Solar Representative [Signature] Date 4-30-09

This contract represents the entire agreement between buyer and seller and is binding when accepted by an officer of Florida Solar or 30 days.

|                   |                         |                           |                                 |
|-------------------|-------------------------|---------------------------|---------------------------------|
| <b>SALES REP</b>  | SIMONS                  | <b>DATE</b>               | 4-30-09                         |
| <b>Name</b>       | UTE WINZUNK             | <b>Type:</b>              | ( ) FAFCO (X) Eagle Sun         |
| <b>Address</b>    | 11 MIDDLE RD.           | <b>New Tank: YES</b> ( )  | <b>Size -</b> 80- <b>NO</b> ( ) |
| <b>City</b>       | SEWALLS POINT, FL 34996 | <b>Substrates</b>         | ( ) Yes ( ) No                  |
| <b>Phone (H)</b>  | 772 781 4686 (W)        | <b># of Users</b>         | (1)                             |
| <b>Directions</b> |                         | <b>Special Schedules?</b> |                                 |

5 OF 5

|   |                |                                      |                   |
|---|----------------|--------------------------------------|-------------------|
| <b>INSTALL INFORMATION</b>                      |                | <b>STRUCTURE INFORMATION</b>         |                   |
| <b>Area available For install (closet size)</b> |                | <b>Roof Type</b>                     | TILE.             |
| (L.)  | X (W)          | <b>Roof Color</b>                    | GREY.             |
|   | X (H)          | <b>Exterior Wall Type</b>            | STUCCO.           |
| ( )   | Comfort System | <b>Exterior Wall Color</b>           |                   |
| ( )   | Timer          | <b>Height</b> (X) Single ( ) Two     | <b>Pitch</b>      |
| <b>Misc. Info</b>                               | NO SPACE       | <b>Open Beam Ceiling</b>             | ( ) Yes ( ) No    |
|   | RESTRICTIONS   | <b>ADDITIONAL SYSTEM INFORMATION</b> |                   |
|   |                | <b>Apprx. Pipe Run</b>               | Ft. <b>Splits</b> |
|   |                | <b>Trenching Length</b>              | Ft. <b>Banks</b>  |

INDICATE SOUTH

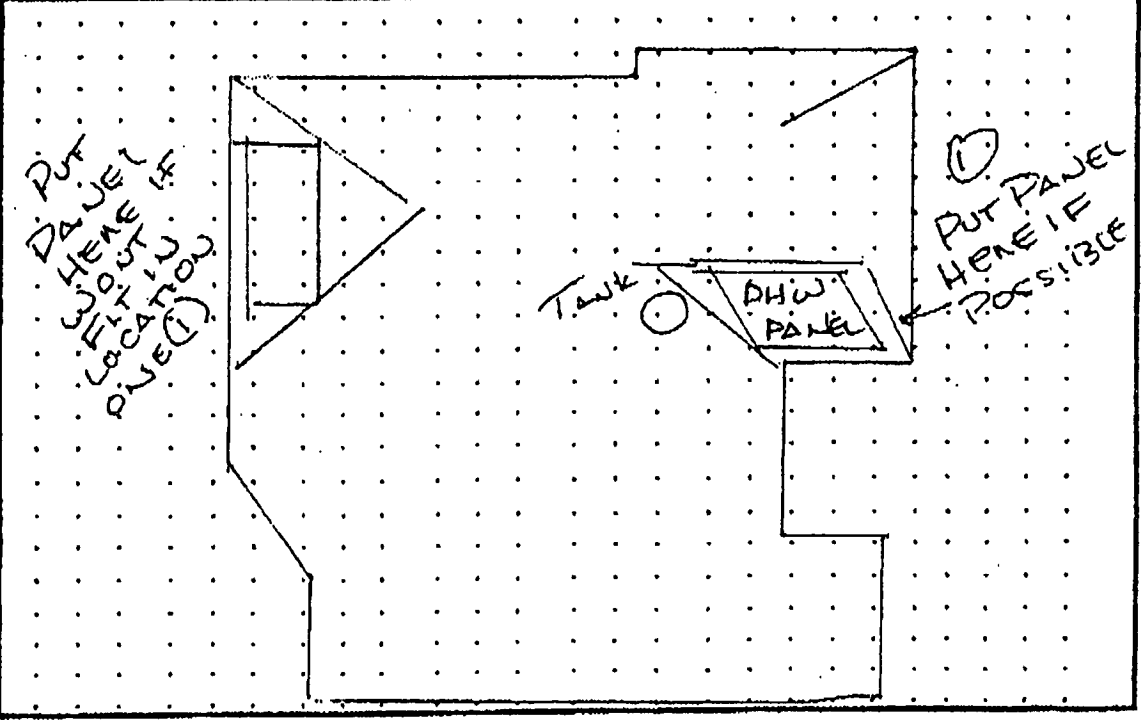
↓

**SALES REP**  
SIMONS

**LEAD SOURCE**  
M

**COLLECT PAYMENT**  
( ) Yes (X) No

**AMOUNT**  
\$ 7950



Martin County, Florida

generated on 10/28/2009 9:13:30 AM EDT

Summary

| Parcel ID                | Unit Address | Serial ID | Index Order | Commercial | Residential |
|--------------------------|--------------|-----------|-------------|------------|-------------|
| 13-38-41-002-000-00370-7 | 11 MIDDLE RD | 27725     | Owner       | 0          | 1           |

Summary

**Property Location** 11 MIDDLE RD  
**Tax District** 2200 Sewall's Point  
**Account #** 27725  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120000  
**Acres** 0.344

Legal Description

**Property Information**  
 HIGH POINT LOT 37 OR 342/2303

Owner Information

**Owner Information**  
 WINZURK UTE INGEBORG (TR)

Mail Information

11 MIDDLE RD  
 STUART FL 34996

Assessment Info

Front Ft. 0.00

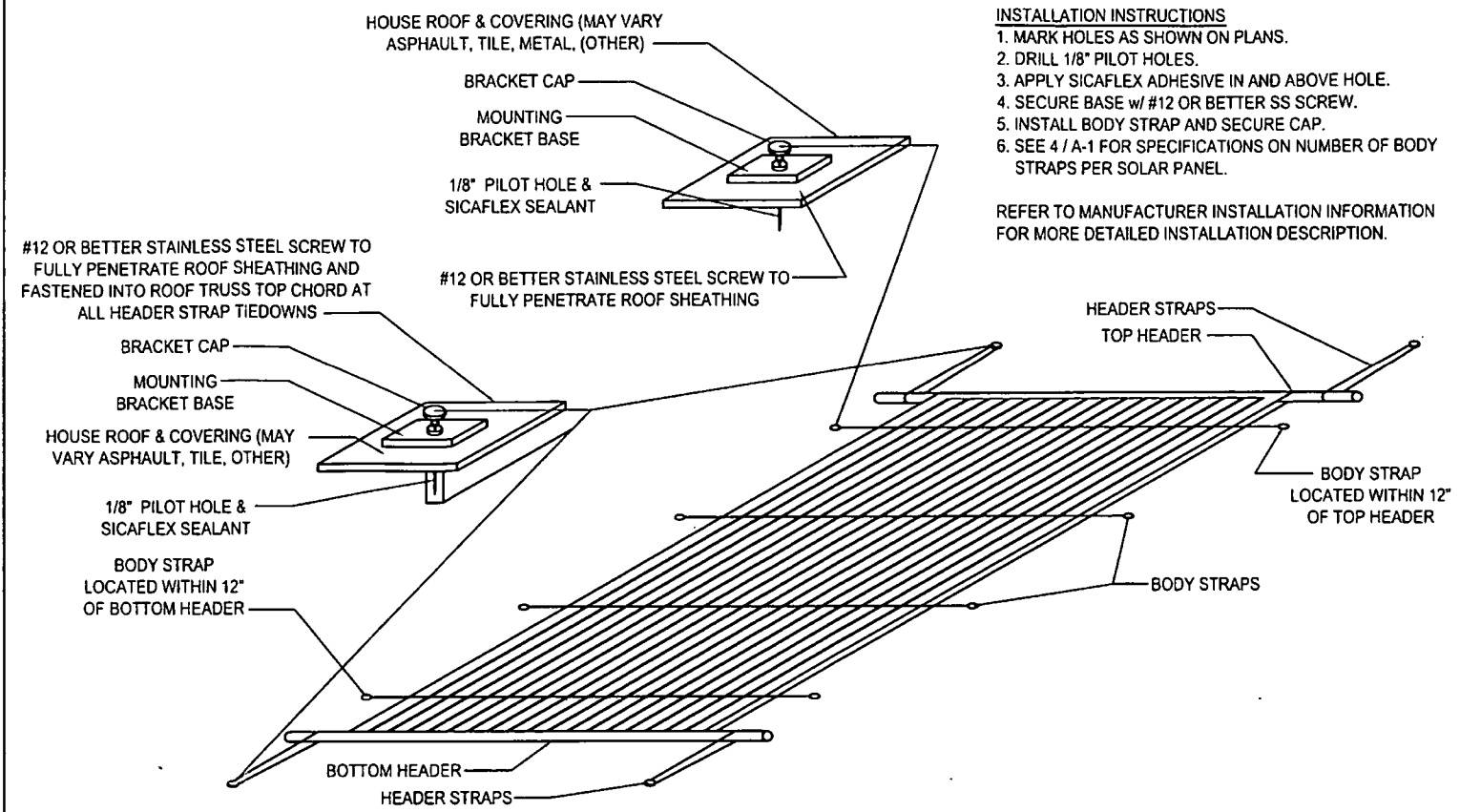
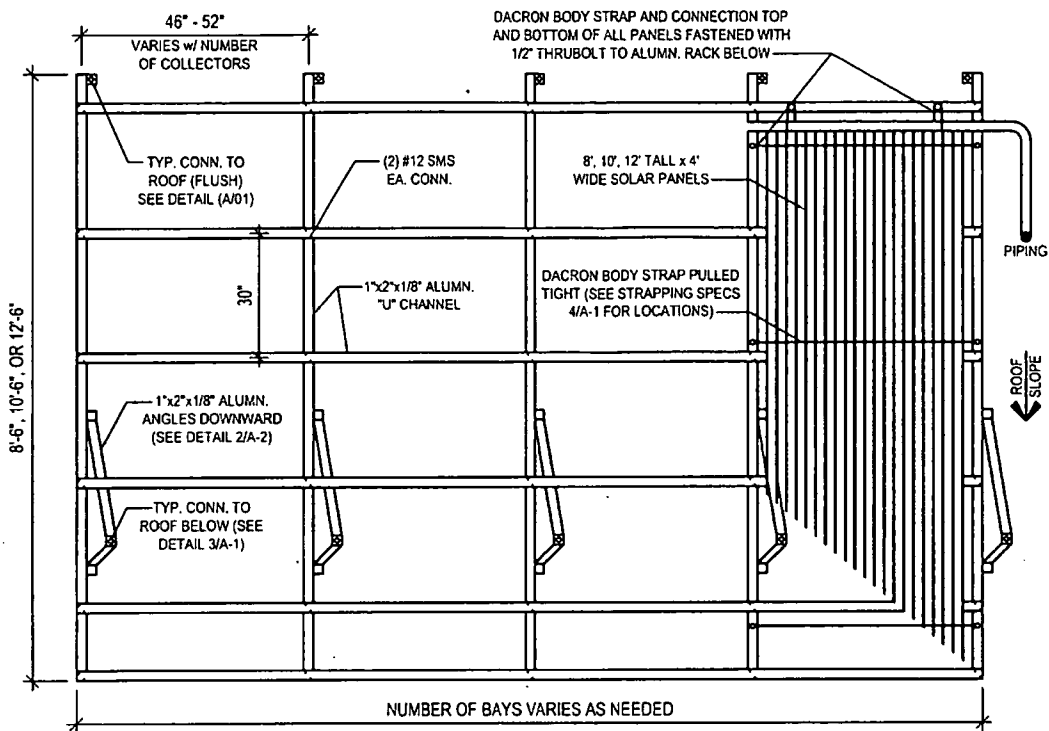
**Market Land Value** \$231,300  
**Market Impr Value** \$203,560  
**Market Total Value** \$434,860

Recent Sale

Sale Amount \$0

**Sale Date** 6/6/2008  
**Book/Page** 2332 2685

Data updated on 10/21/2009



**INSTALLATION INSTRUCTIONS**  
 1. MARK HOLES AS SHOWN ON PLANS.  
 2. DRILL 1/8" PILOT HOLES.  
 3. APPLY SICAFLEX ADHESIVE IN AND ABOVE HOLE.  
 4. SECURE BASE w/ #12 OR BETTER SS SCREW.  
 5. INSTALL BODY STRAP AND SECURE CAP.  
 6. SEE 4 / A-1 FOR SPECIFICATIONS ON NUMBER OF BODY STRAPS PER SOLAR PANEL.

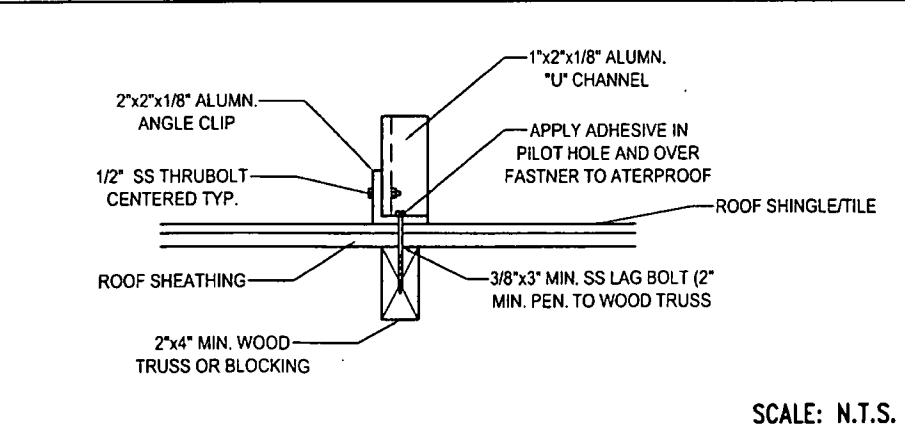
REFER TO MANUFACTURER INSTALLATION INFORMATION FOR MORE DETAILED INSTALLATION DESCRIPTION.

#12 OR BETTER STAINLESS STEEL SCREW TO FULLY PENETRATE ROOF SHEATHING AND FASTENED INTO ROOF TRUSS TOP CHORD AT ALL HEADER STRAP TIEDOWNS

BRACKET CAP  
 MOUNTING BRACKET BASE  
 HOUSE ROOF & COVERING (MAY VARY ASPHALT, TILE, OTHER)  
 1/8" PILOT HOLE & SICAFLEX SEALANT  
 BODY STRAP LOCATED WITHIN 12" OF BOTTOM HEADER

**5 MOUNTING DETAIL (FLUSH MOUNT) SCALE: N.T.S.**

**1 SOLAR PANEL ROOF MOUNTING (ELEVATED) SCALE: N.T.S.**



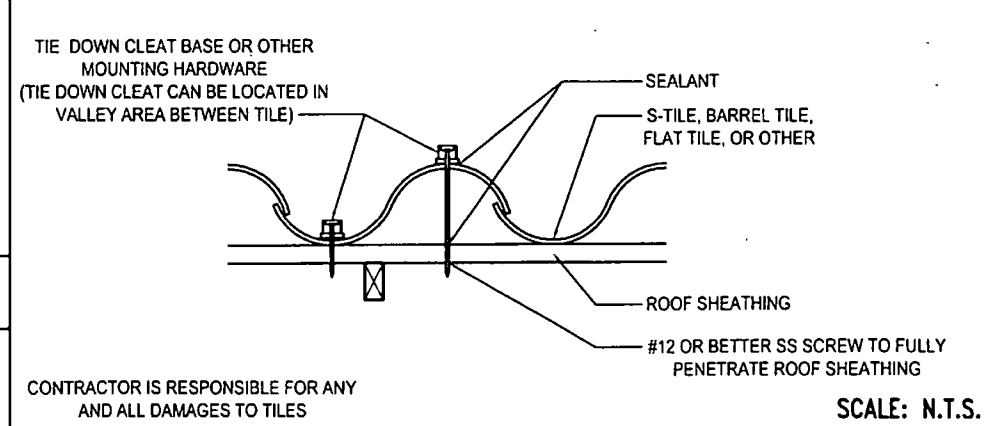
**3 ELEVATED SOLAR PANEL CONNECTION DETAIL SCALE: N.T.S.**

| STRAP QUANTITY AND SPACING |                      |                             |
|----------------------------|----------------------|-----------------------------|
| ZONE 1 & 2                 | STRAP QUANTITY       | STRAP SPACING               |
| UNIT LENGTH                |                      |                             |
| 8'-0"                      | 3 DACRON BODY STRAPS | STRAPS TO BE EVENLY SPACED, |
| 10'-0"                     | 3 DACRON BODY STRAPS | END STRAPS TO BE WITHIN 12" |
| 12'-0"                     | 4 DACRON BODY STRAPS | FROM END OF PANEL.          |

**4 STRAPPING SPEC'S SCALE: N.T.S.**

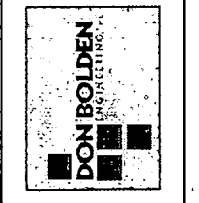
THESE PLANS ARE NOT VALID FOR PERMITTING WITHOUT THE RAISED SEAL & SIGNATURE OF ENGINEER/ARCHITECT OF RECORD.

WRITTEN DIMENSIONS SHALL HAVE PRECEDENCE OVER SCALE DIMENSIONS. Contractors shall verify and be responsible for dimensions and conditions of the job and the owner must be notified in writing of any changes in the dimensions, conditions, and specifications appearing on these plans.



**6 MOUNTING HARDWARE OVER TILE ROOF SCALE: N.T.S.**

P.O. Box 330783  
 Delray, FL 334753  
 (386) 747-7155  
 d\_bolden@bolden.net  
 License #47524  
 Cert. of Auth. #26030



Project Info:

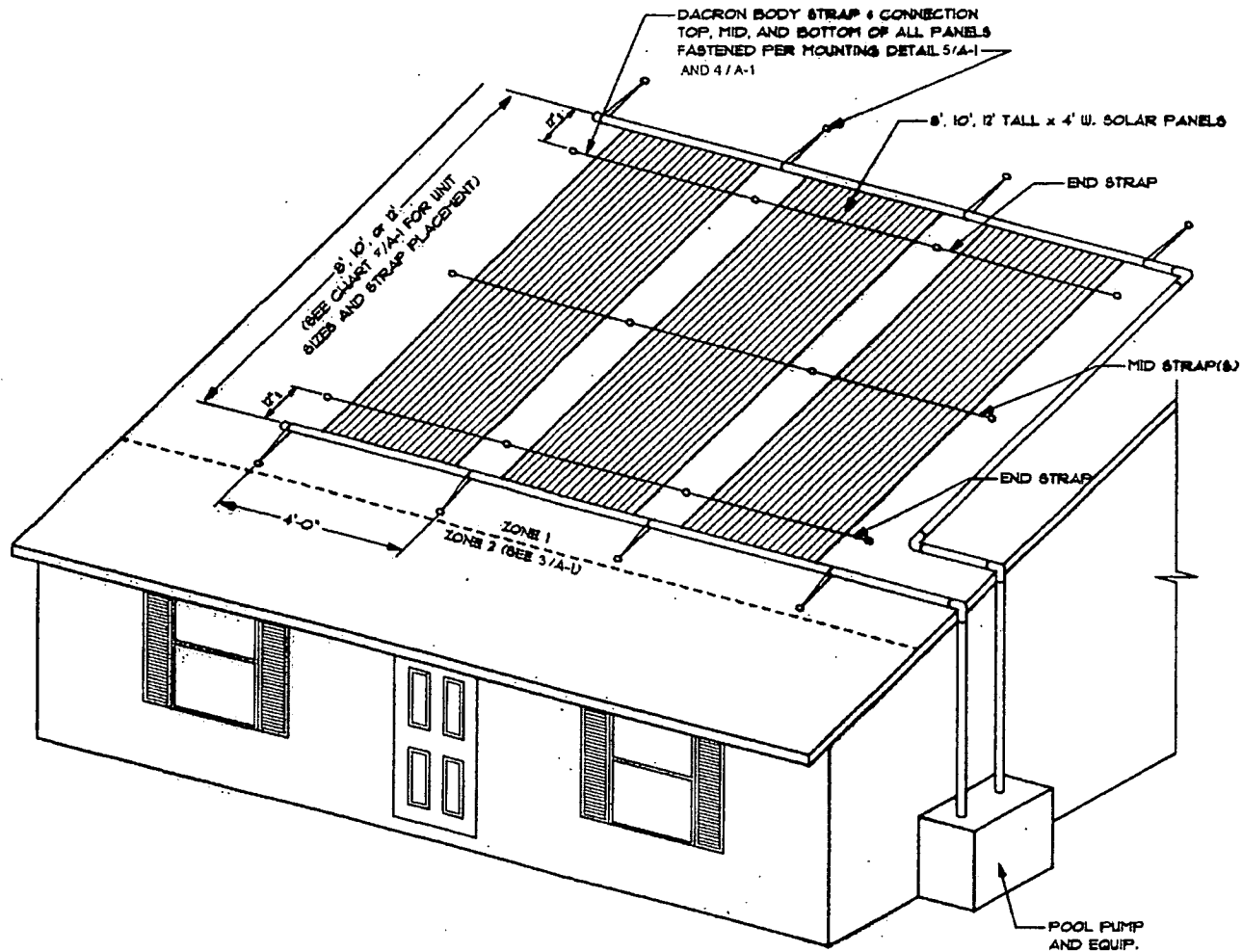
1743 Huntington Ln.  
 Rockledge, FL 32955  
 (800) 922-5299  
 www.FloridaSolarEast.net



Drawn By:  
 J.M.L.  
 Checked By:  
 D.B.  
 Date:  
 Scale:  
 As Noted  
 Job Number:  
 00-0005

drawing no.  
**A-01**  
 SOLAR DETAILS

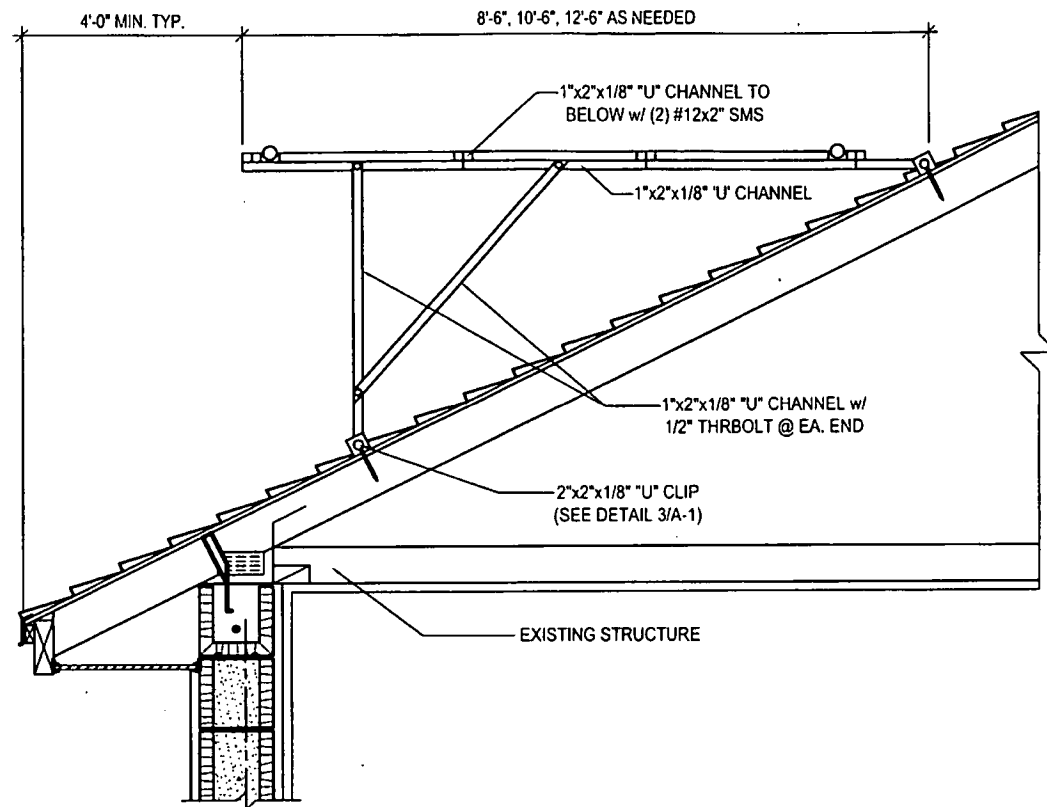
*Draft/01/09*



SYSTEM HAS BEEN DESIGNED WITH THE FOLLOWING LIMITATIONS:

- A. UP TO 140MPH WINDS (3 SECOND GUSTS).
- B. ROOF HEIGHT NOT TO EXCEED 30' ABOVE GRADE.

(IF ANY OF THE ABOVE LIMITATIONS ARE EXCEEDED SPECIAL ENGINEERING WILL BE REQUIRED).



2 SOLAR PANEL SECTION (ELEVATED)

SCALE: N.T.S.

7 SOLAR ROOF MOUNTING PLAN (FLUSH)

SCALE: N.T.S.

DESIGN REQUIREMENTS

NOTE: THIS STRUCTURE HAS BEEN DESIGNED TO MEET OR EXCEED REQUIREMENTS OF THE FLORIDA BUILDING CODE 2007 WITH THE FLORIDA BUILDING CODE 2009 SUPPLIMENTS AND THE ASCE 7-05 REQUIREMENTS.

1. WIND EXPOSURE - CATEGORY (B OR C)
2. BASIC WIND SPEED - 140MPH. @ 3 SEC. GUSTS
3. WIND IMPORTANCE FACTOR - 1.0
4. INTERNAL PRESSURE COEFFICIENT - .18
5. MAXIMUM PRESSURE FOR COMPONENTS AND CLADDING, 31.0 p.s.f./-58.4 p.s.f. UNLESS NOTED OTHERWISE.

DESIGN NOTES:

STRAPS SHALL BE DACRON BODY STRAPS AND HAVE A MINIMUM DESIGN TENSILE STRENGTH OF 1,600LBS.

SCREWS SHALL BE #12 OR BETTER STAINLESS STEEL AND SHALL FULLY PENETRATE 1/2" MIN. CDX. PLYWOOD SHEATHING AND BE HELD IN PLACE WITH SICAFLEX 1a CONSTRUCTION SEALANT APPLIED TO A 1/8" PILOT HOLE PRIOR TO AND AFTER PLACEMENT OF THE FASTNER AS SHOW HEREIN.

EACH PANEL SHALL HAVE A MINIMUM OF (5) MOUNTING POINTS WITH AN ADDITIONAL (5) ON ONE END OF THE ARRAY. A FOUR PANEL SYSTEM WILL HAVE (25) MOUNTING POINTS.

DETAIL VALID FOR HVHZ ZONES UP TO AND INCLUDING 140 MPH. THIS DETAIL NOT VALID IN DADE COUNTY.

GENERAL NOTES:

1. ENGINEERING VALID FOR SOLAR POOL HEATING AND DOMESTIC WATER HEATING APPLICATIONS.
2. ENGINEERING VALID FOR ALL PANEL ORIENTATIONS INCLUDING VERTICAL (SHOWN) AND HORIZONTAL.
3. CALCULATIONS VERIFIED FOR THE UPLIFT ONLY PER CODE. INSTALLERS SHALL USE CAUTION WHEN INSTALLING THE PANELS TO MINIMIZE AND DISTRIBUTE LOADING ACROSS THE ROOF SURFACE. NO WARRANTY, EXPRESSED OR IMPLIED IS OFFERED FOR THE INTEGRITY OF THE EXISTING STRUCTURE.
4. 1/2" MINIMUM EXTERIOR GRADE CDX PLYWOOD SHALL EXIST AS A CONNECTION SUBSTRATE.
5. NO CERTIFICATION IS OFFERED FOR PLUMBING OR ELECTRICAL WORK. THIS IS A STRUCTURAL CERTIFICATION ONLY FOR ANCHORAGE TO THE EXISTING ROOF STRUCTURE.

6. DIMENSIONS ARE SHOWN TO ISSUSTRATE DESIGN FORCES AND OTHER DESIGN CRITERIA. THEY MAY VARY SLIGHTLY. CONTRACTOR IS TO VERIFY ALL FIELD DIMENSIONS PRIOR TO INSTALLATION.

7. ENGINEER SEAL AFFIXED HERETO VALIDATES STRUCTURAL DESIGN AS SHOWN ONLY. USE OF THIS SPECIFICATION BY CONTRACTOR, et. al. INDEMNIFIES & SAVES HARMLESS THIS ENGINEER FOR ALL COST DAMMAGES INCLUDING LEGAL FEES & APPELATE FEES RESULTING FROM MATERIAL FABRICATION SYSTEM ERECTION, & CONSTRUCTION PRACTICES BEYOND THAT WHICH IS CALLED FOR BY LOCAL, STATE, & FEDERAL CODES, & FROM DEVIATIONS OF THIS PLAN.

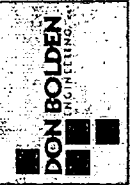
8. SYSTEM HAS BEEN DESIGNED WITH THE FOLLOWING LIMITATIONS:
- A. UP TO 140MPH WINDS (3 SECOND GUST).
  - B. ROOF HEIGHT NOT TO EXCEED 30' ABOVE GRADE.

(IF ANY OF THE ABOVE LIMITATIONS ARE EXCEEDED SPECIAL ENGINEERING WILL BE REQUIRED).

NOTES

SCALE: N.T.S.

P.O. Box 530783  
 Odessa, FL 33473  
 (386) 747-7155  
 d\_bolden@bolden.net  
 License #47524  
 Cert. of Auth. #26030



Project Info:

1743 Huntington Ln.  
 Rockledge, FL 32955  
 (800) 922-5799  
 www.FloridaSolarEast.net



Drawn By:  
 J.M.L.

Checked By:  
 D.B.

Date:

Scale:  
 As Noted

Job Number:  
 00-0005

drawing no.

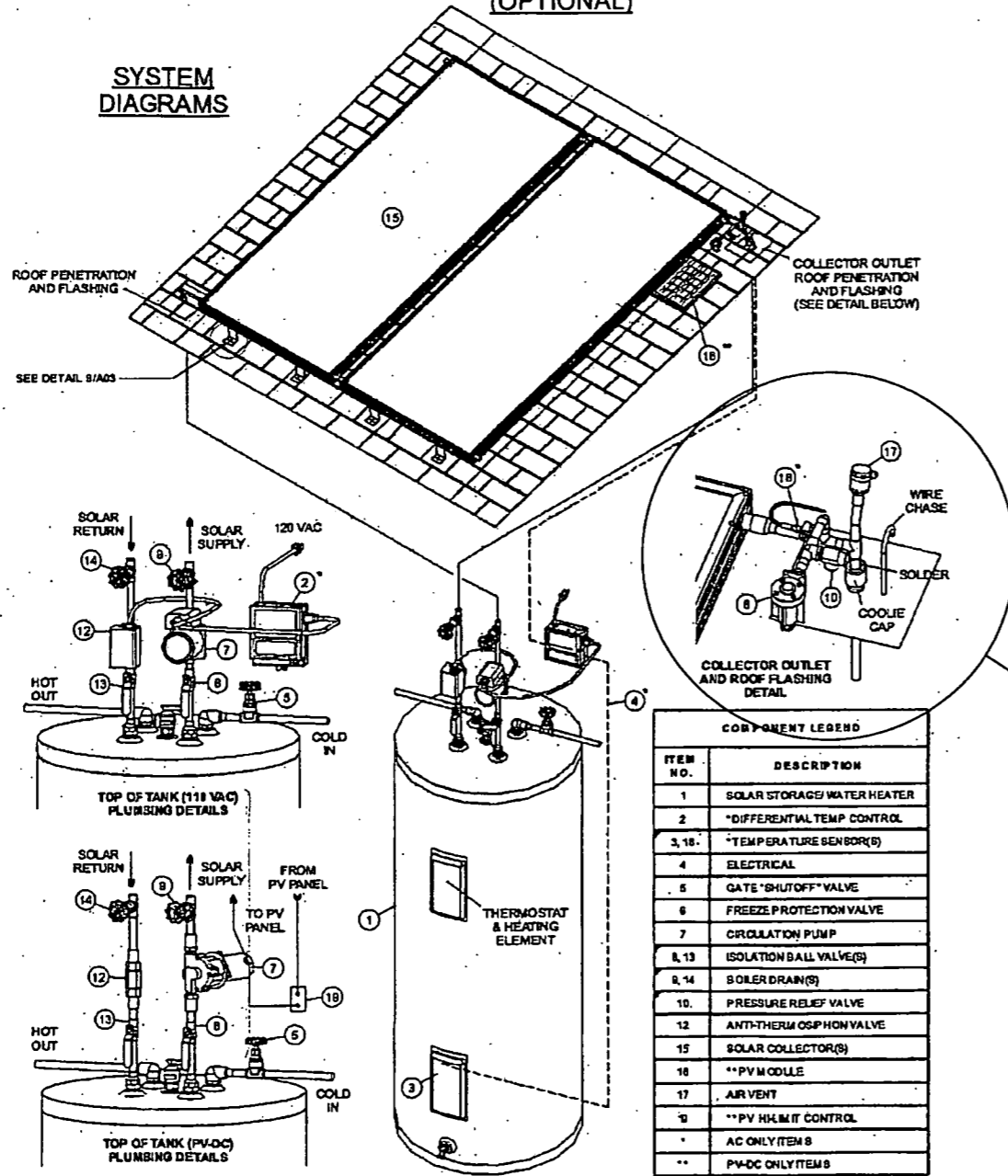
A-02

SOLAR DETAILS

*Handwritten signature and date: JML/6/09*

**THE GUARDIAN  
SOLAR WATER HEATING SYSTEM  
(OPTIONAL)**

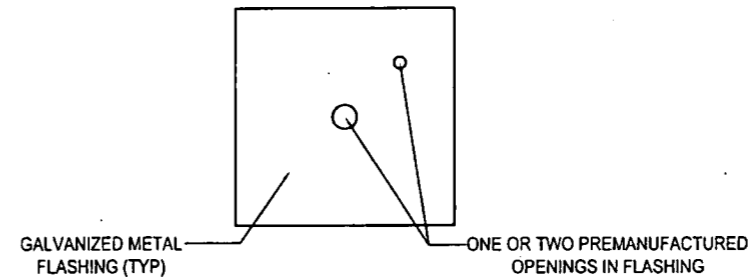
**SYSTEM  
DIAGRAMS**



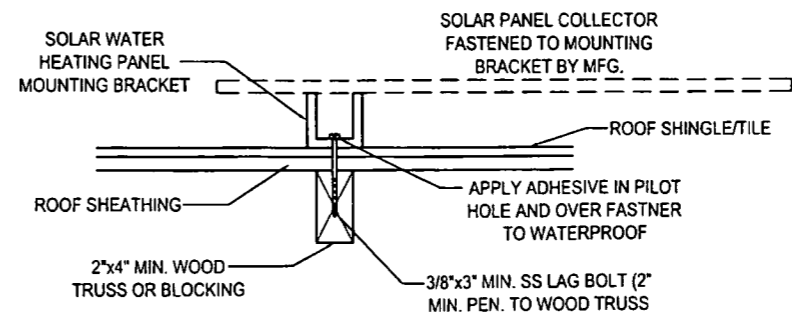
**8** SOLAR WATER HEATING SYSTEM (OPT.)

SCALE: N.T.S.

GALVANIZED METAL FLASHING SURROUNDING ROOF PENETRATION ATTACHED TO EXISTING ROOF STRUCTURE WITH SICAFLEX SEALANT PER MANUFACTURERS SPECIFICATIONS TO PREVENT LEAKING



**9** FLASHING DETAIL



**9** SOLAR W/H PANEL CONN. DETAIL

*10/16/09*

P.O. Box 530783  
DeBary, FL 32753  
(386) 747-7155  
d\_bolden@balden.net  
License #17524  
Cert. of Auth. #26030



Project Info:

1743 Huntington Ln.  
Rockledge, FL 32955  
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www.FloridaSolarEst.net

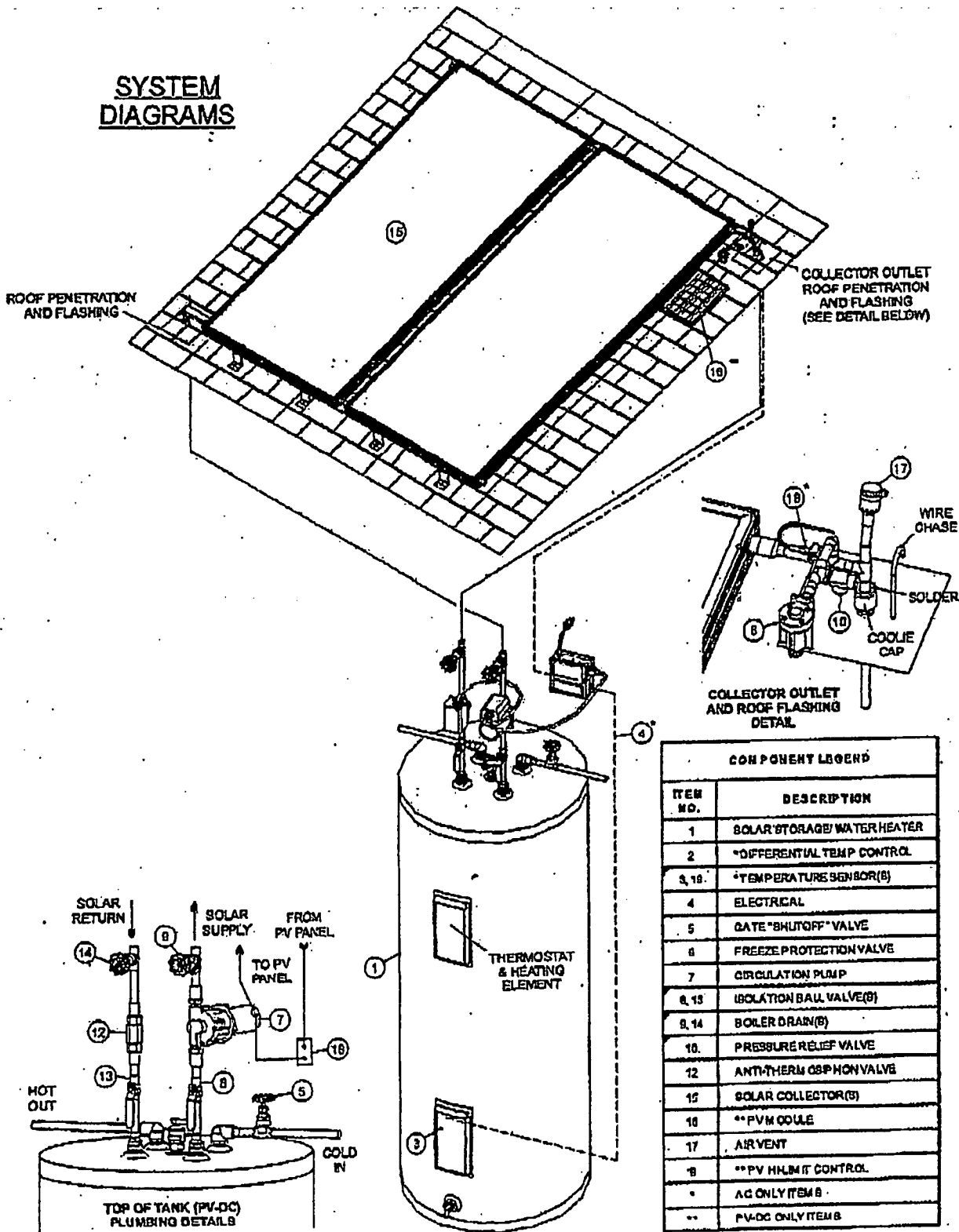


Drawn By:  
J.M.L.  
Checked By:  
D.B.  
Date:  
Scale:  
As Noted  
Job Number:  
00-0000S

drawing no.  
**A-03**  
SOLAR DETAILS

# SOLAR WATER HEATING SYSTEM

## SYSTEM DIAGRAMS





**FLORIDA SOLAR ENERGY CENTER**  
*Creating Energy Independence*

**Collector Certification (A)**

| Collector                          |               |        | Glazing |                      | Absorber                       |                      | Gross Area | Thermal Performance Intermediate Temperature Rating |                     |
|------------------------------------|---------------|--------|---------|----------------------|--------------------------------|----------------------|------------|---|---------------------|
| Manufacturer                       | Model         | FSEC # | No.     | Type                 | Material                       | Coating              | Sq. Ft     | Btu/Day   | Btu/ft <sup>2</sup> |
| ACR Solar International Corp       | Skyline 20-01 | 00030  | 1       | Clear rigid plastic  | Copper tubes and fins          | Selective            | 20.07      | 14800   | 736                 |
| ACR Solar International Corp       | Skyline 10-01 | 00212C | 1       | Clear rigid plastic  | Copper tubes and fins          | Selective            | 10.00      | 7500  | 747                 |
| AMK-Collectra AG                   | OPC 10 MK-III | 00083  | 1       | Evacuated glass tube | Copper tubes and aluminum fins | Selective            | 15.67      | 12500   | 800                 |
| Alfa Casting Corp                  | *AC-419       | 83128  | 1       | Glass                | Copper tubes and aluminum fins | Nonselective         | 18.41      | 14200   | 770                 |
| Alfa Casting Corp                  | *ACC-419      | 83129  | 1       | Glass                | Copper tubes and fins          | Nonselective         | 18.41      | 16400   | 893                 |
| Alternate Energy Technologies, LLC | AE-21         | 00081N | 1       | 1Glass               | Copper tubes and fins          | Selective            | 20.77      | 17600   | 849                 |
| Alternate Energy Technologies, LLC | AE-26         | 00088N | 1       | Glass                | Copper tubes and fins          | Selective            | 25.35      | 21700   | 856                 |
| Alternate Energy Technologies, LLC | AE-32         | 00089N | 1       | Glass                | Copper tubes and fins          | Selective            | 31.91      | 27500   | 862                 |
| Alternate Energy Technologies, LLC | AE-40         | 00090N | 1       | Glass                | Copper tubes and fins          | Selective            | 39.79      | 34400   | 866                 |
| Alternate Energy Technologies, LLC | AE-32-E       | 00036C | 1       | Glass                | Copper tubes and fins          | Moderately selective | 31.85      | 22300   | 701                 |
| Alternate Energy Technologies, LLC | AE-40-E       | 00037C | 1       | Glass                | Copper tubes and fins          | Moderately selective | 39.71      | 27900   | 704                 |
| Alternate Energy Technologies, LLC | ST-32E        | 00119C | 1       | Glass                | Copper tubes and fins          | Moderately selective | 30.91      | 22900   | 742                 |

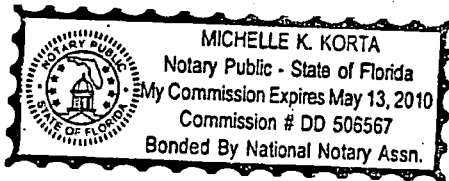


|                                    |        |        |   |                      |                                |                      |       |   |     |
|------------------------------------|--------|--------|---|----------------------|--------------------------------|----------------------|-------|---|-----|
| Alternate Energy Technologies, LLC | ST-40E | 00120C | 1 | Glass                | Copper tubes and fins          | Moderately selective | 38.62 | 28400   | 735 |
| Alternate Energy Technologies, LLC | MSC-21 | 00213N | 1 | Glass                | Copper tubes and fins          | Selective            | 21.50 | 17400   | 810 |
| Alternate Energy Technologies, LLC | MSC-32 | 00214N | 1 | Glass                | Copper tubes and fins          | Selective            | 32.67 | 27200   | 833 |
| Alternate Energy Technologies, LLC | MSC-40 | 00215N | 1 | Glass                | Copper tubes and fins          | Selective            | 40.52 | 33900   | 837 |
| American Solar Network, Ltd.       | ASN30A | 89011  | 1 | Clear rigid plastic  | UV Stabilized EPDM             | None                 | 31.17 | 21100   | 676 |
| American Solar Network, Ltd.       | ASN45A | 89018C | 1 | Clear rigid plastic  | UV Stabilized EPDM             | None                 | 46.50 | 31600   | 680 |
| American Solar Network, Ltd.       | ASN60A | 91025C | 1 | Clear rigid plastic  | UV Stabilized EPDM             | None                 | 61.83 | 41600   | 673 |
| Apricus Solar Co., Ltd.            | AP-10  | 00202N | 1 | Evacuated glass tube | Glass cylinder                 | Selective            | 14.45 | 8500  | 589 |
| Apricus Solar Co., Ltd.            | AP-20  | 00106N | 1 | Evacuated glass tube | Glass cylinder                 | Selective            | 29.16 | 17300   | 594 |
| Apricus Solar Co., Ltd.            | AP-22  | 00203N | 1 | Evacuated glass tube | Glass cylinder                 | Selective            | 32.11 | 19100   | 594 |
| Apricus Solar Co., Ltd.            | AP-30  | 00204N | 1 | Evacuated glass tube | Glass cylinder                 | Selective            | 43.63 | 27600   | 636 |
| Aqua Sol Components Ltd            | 6536   | 00068  | 1 | Glass                | Copper tubes and aluminum fins | Nonselective         | 36.46 | Thermosiphon System Net Energy Delivered: 27,300 Btu<br>Heat Loss Coefficient: 3.7 Btu/hr F |     |

\*The flow rate through a solar collector affects its performance, but may or may not affect the performance of the system in which it is installed. Some of the collectors listed here have been tested at flow rates other than those specified by testing standards. These collector models are identified with an asterisk (\*) immediately preceding the model number.

STATE OF FLORIDA  
COUNTY OF BREVARD

On this 28 day of Oct, 2009 I attest that the preceding or attached document is a true, exact, complete, and unaltered photocopy made by me of a design statement, detailing the mounting and installation of solar panels on the roof as drawn by D.B. of Don Bolden Engineering/PA for Florida Solar East and presented to me by the document's custodian, Karen J Oates and to the best of my knowledge, that the photocopied document is neither a vital record nor a public record.



*Official Notary Seal*

Michelle Korta  
*Notary Signature*

Michelle K. Korta, Commission # DD506567  
*Printed Name of Notary*

|                   |                         |                           |                                 |
|-------------------|-------------------------|---------------------------|---------------------------------|
| <b>SALES REP</b>  | SIMONS                  | <b>DATE</b>               | 4-30-09                         |
| <b>Name</b>       | UTE WINZUNK             | <b>Type:</b>              | ( ) FAFCO (X) Eagle Sun         |
| <b>Address</b>    | 11 MIDDLE RD.           | <b>New Tank: YES</b> ( )  | <b>Size -</b> 80. <b>NO</b> ( ) |
| <b>City</b>       | SEWALLS POINT, FL 34996 | <b>Substrates</b>         | ( ) Yes ( ) No                  |
| <b>Phone (H)</b>  | 7727814686(W)           | <b># of Users</b>         | (1)                             |
| <b>Directions</b> |                         | <b>Special Schedules?</b> |                                 |

5 of 5

**INSTALL INFORMATION**

**STRUCTURE INFORMATION**

Area available For install (closet size)  
 (L) \_\_\_\_\_ X (W) \_\_\_\_\_ X (H) \_\_\_\_\_  
 ( ) Comfort System ( ) Timer  
 Misc. Info NO SPACE  
 RESTRICTIONS

Roof Type TILE.  
 Roof Color GREY.  
 Exterior Wall Type STUCCO.  
 Exterior Wall Color \_\_\_\_\_  
 Height (X) Single ( ) Two Pitch \_\_\_\_\_  
 Open Beam Ceiling ( ) Yes ( ) No

**ADDITIONAL SYSTEM INFORMATION**

Apprx. Pipe Run Ft. Splits \_\_\_\_\_  
 Trenching Length Ft. Banks \_\_\_\_\_

**INDICATE SOUTH**



SALES REP

SIMONS

LEAD SOURCE

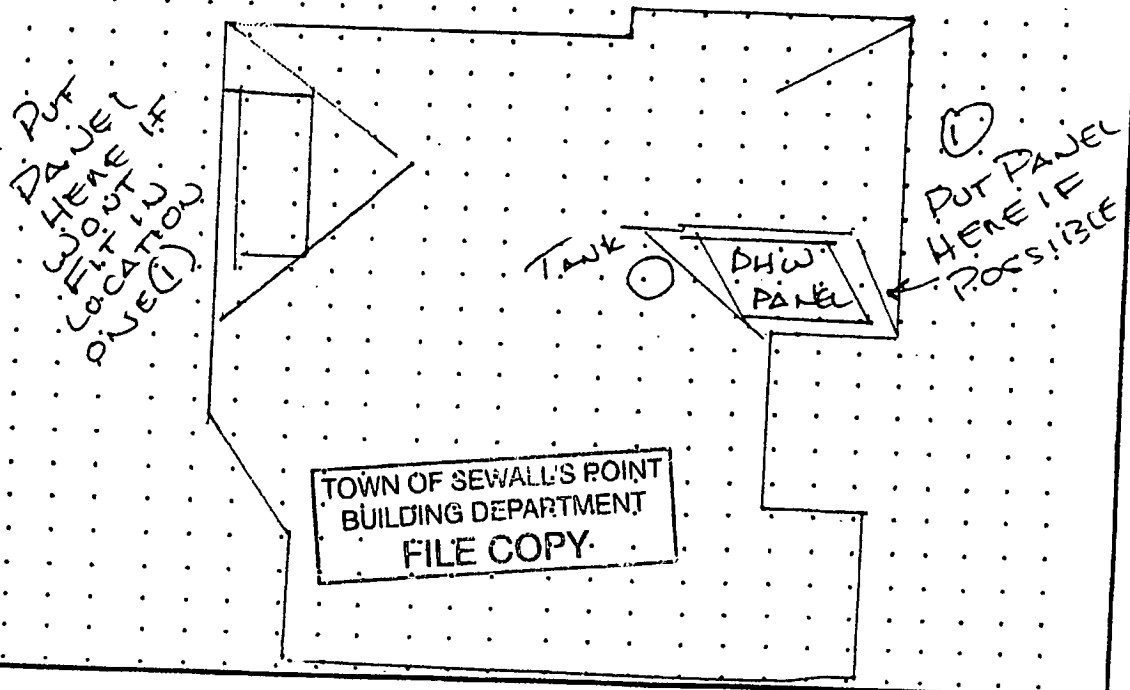
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COLLECT PAYMENT

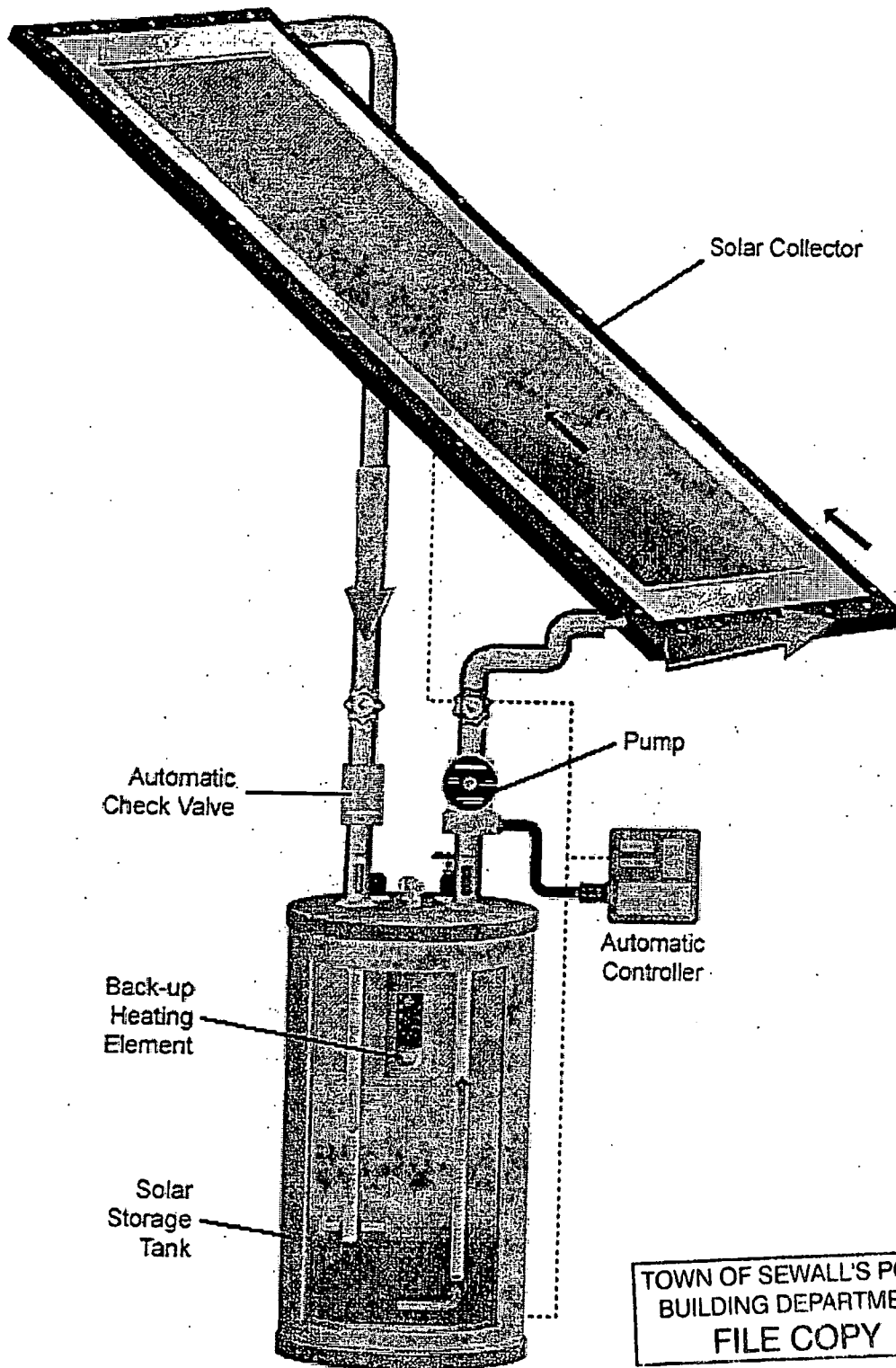
( ) Yes (X) No

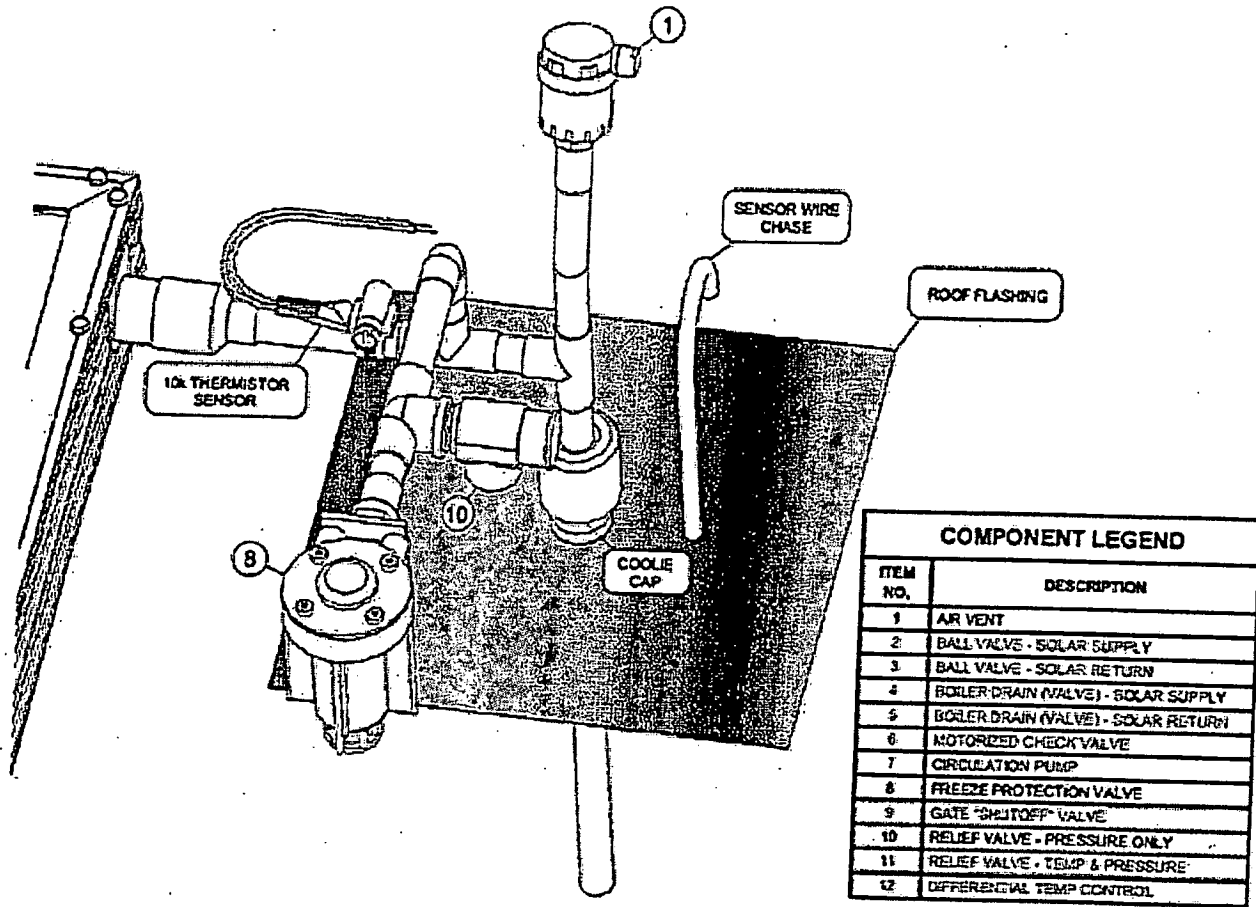
AMOUNT

\$



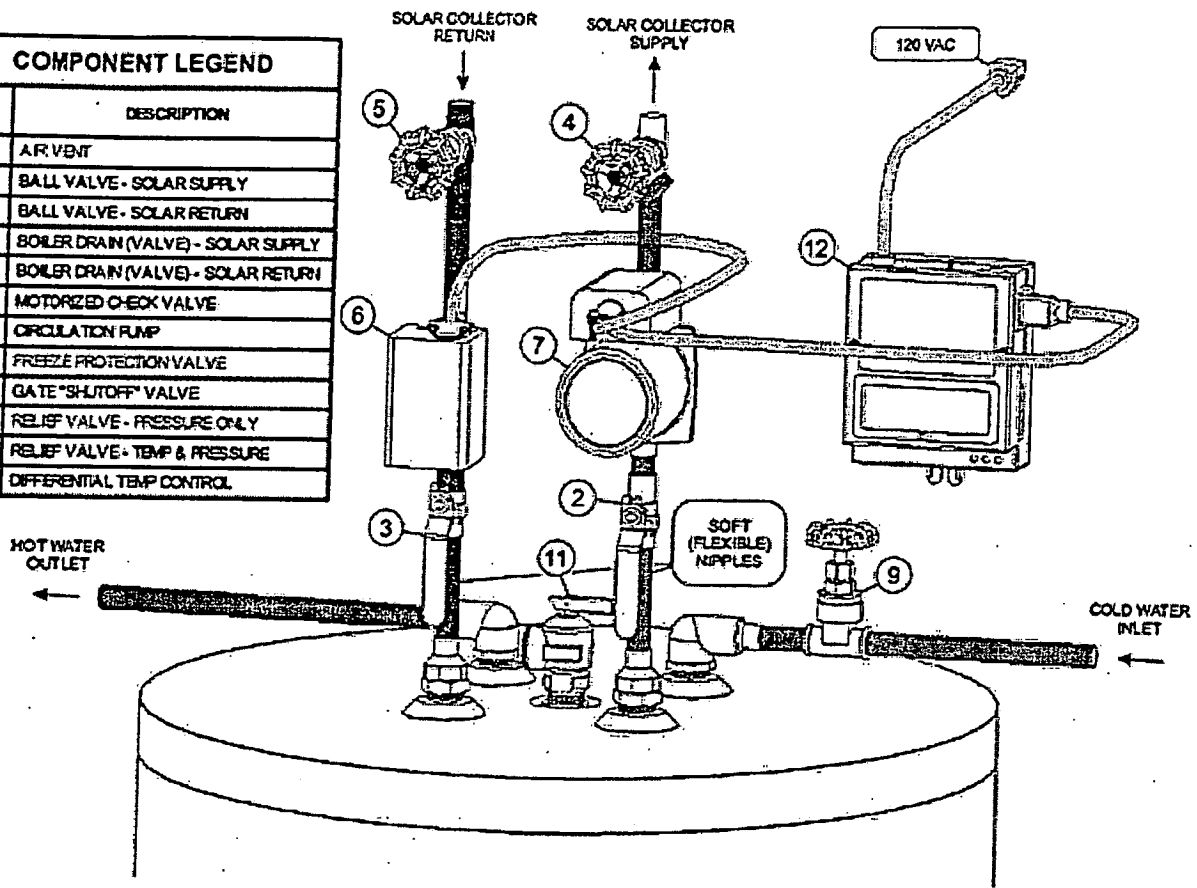
TOWN OF SEWALL'S POINT  
BUILDING DEPARTMENT  
FILE COPY.



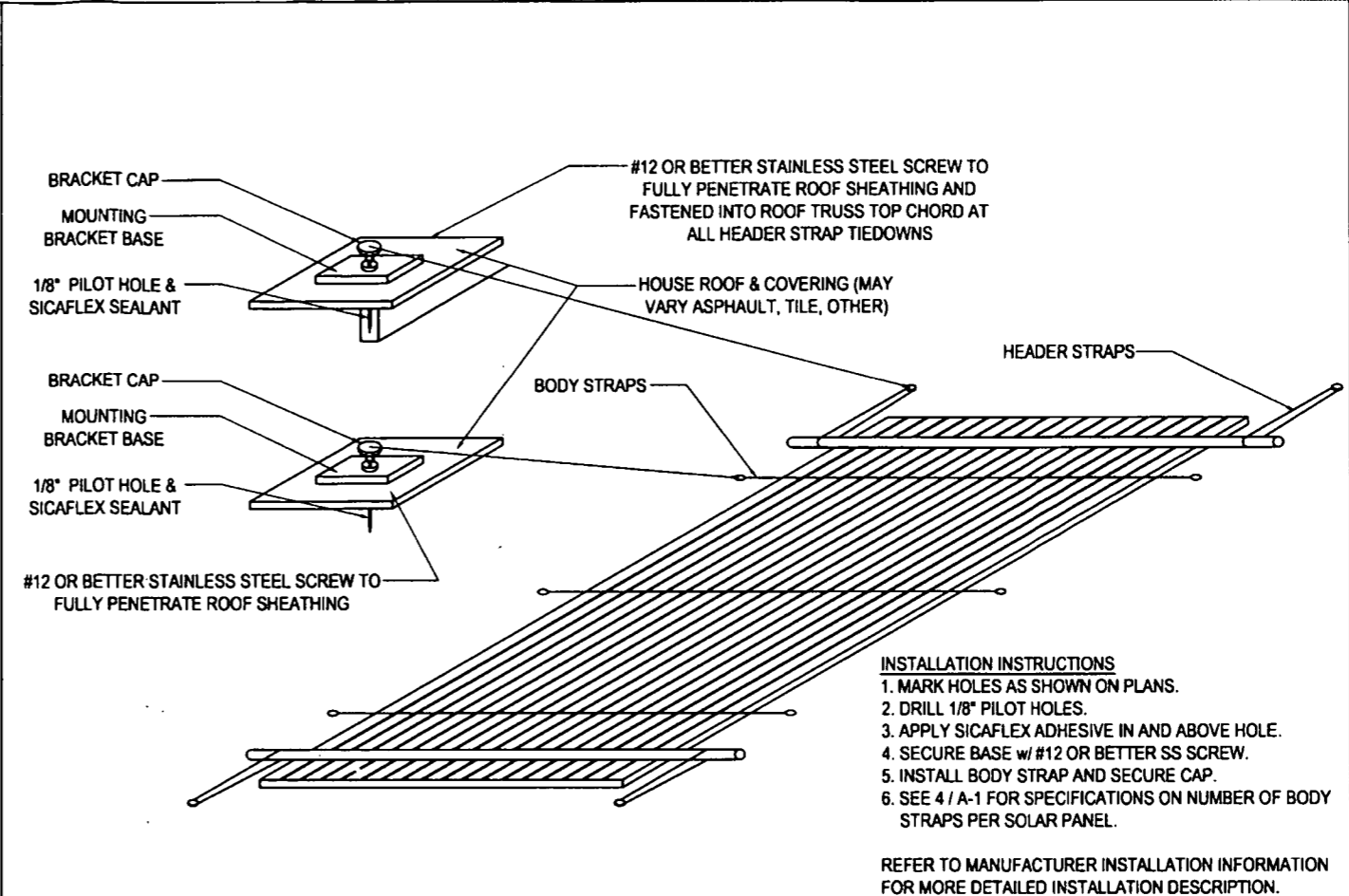
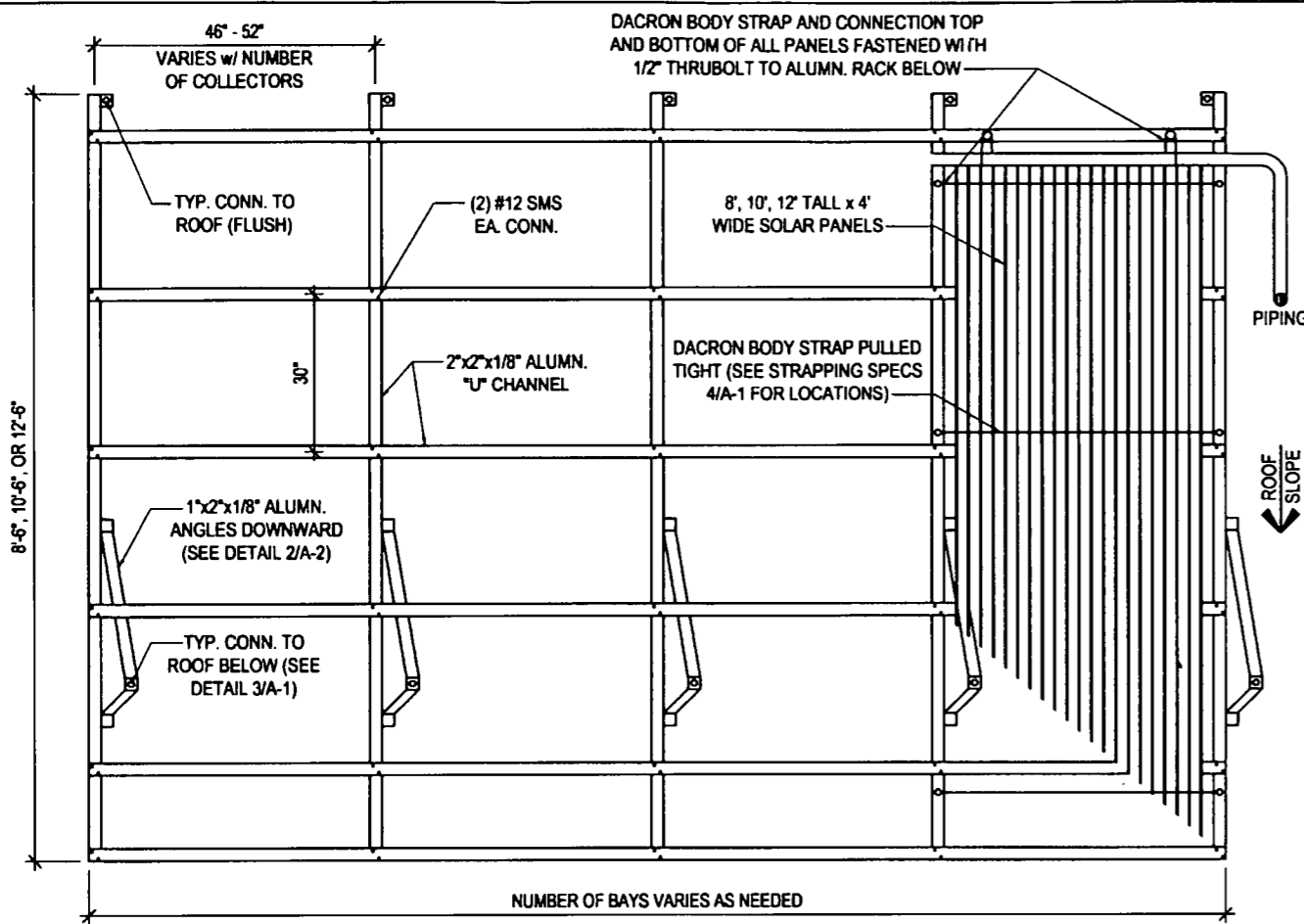


TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

| COMPONENT LEGEND |                                     |
|------------------|-------------------------------------|
| ITEM NO.         | DESCRIPTION                         |
| 1                | AIR VENT                            |
| 2                | BALL VALVE - SOLAR SUPPLY           |
| 3                | BALL VALVE - SOLAR RETURN           |
| 4                | BOILER DRAIN (VALVE) - SOLAR SUPPLY |
| 5                | BOILER DRAIN (VALVE) - SOLAR RETURN |
| 6                | MOTORIZED CHECK VALVE               |
| 7                | CIRCULATION PUMP                    |
| 8                | FREEZE PROTECTION VALVE             |
| 9                | GATE "SHUTOFF" VALVE                |
| 10               | RELIEF VALVE - PRESSURE ONLY        |
| 11               | RELIEF VALVE - TEMP & PRESSURE      |
| 12               | DIFFERENTIAL TEMP CONTROL           |



TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY



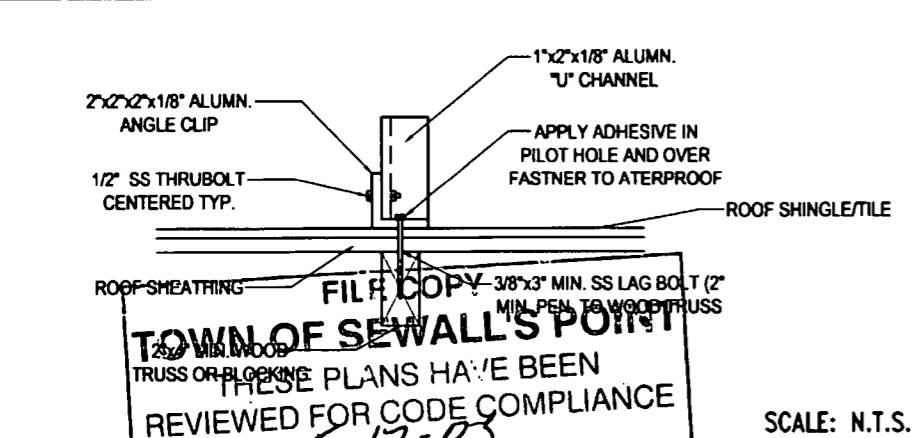
**INSTALLATION INSTRUCTIONS**

1. MARK HOLES AS SHOWN ON PLANS.
2. DRILL 1/8" PILOT HOLES.
3. APPLY SICAFLEX ADHESIVE IN AND ABOVE HOLE.
4. SECURE BASE w/ #12 OR BETTER SS SCREW.
5. INSTALL BODY STRAP AND SECURE CAP.
6. SEE 4/A-1 FOR SPECIFICATIONS ON NUMBER OF BODY STRAPS PER SOLAR PANEL.

REFER TO MANUFACTURER INSTALLATION INFORMATION FOR MORE DETAILED INSTALLATION DESCRIPTION.

**1 SOLAR PANEL ROOF MOUNTING (ELEVATED)** SCALE: N.T.S.

**5 MOUNTING DETAIL (FLUSH MOUNT)** SCALE: N.T.S.



**3 ELEVATED SOLAR PANEL CONNECTION DETAIL** SCALE: N.T.S.

**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN REVIEWED FOR CODE COMPLIANCE  
 DATE 5-12-03  
 BUILDING OFFICIAL

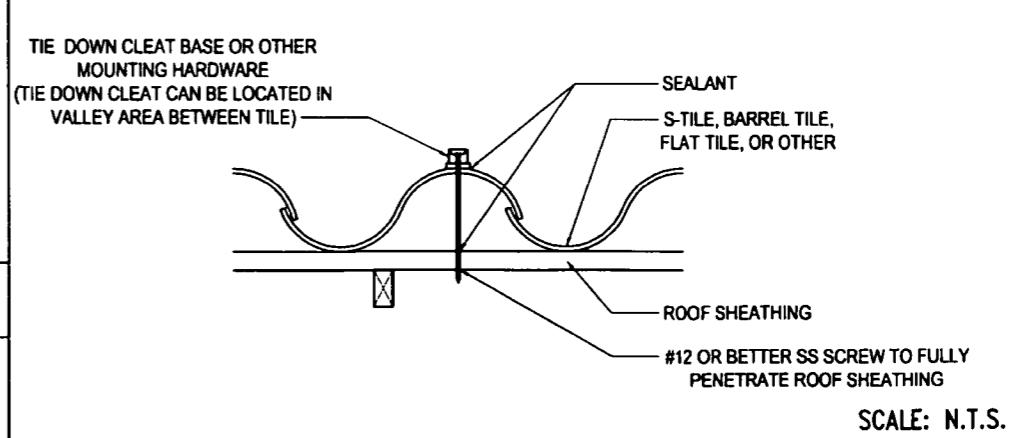
**STRAP QUANTITY AND SPACING**

| ZONE 1 & 2 | UNIT LENGTH | STRAP QUANTITY       | STRAP SPACING  |
|------------|-------------|----------------------|--|
|            | 8'-0"       | 3 DACRON BODY STRAPS | STRAPS TO BE EVENLY SPACED, END STRAPS TO BE WITHIN 12" FROM END OF PANEL. |
|            | 10'-0"      | 3 DACRON BODY STRAPS |  |
|            | 12'-0"      | 4 DACRON BODY STRAPS |  |

**4 STRAPPING SPEC'S** SCALE: N.T.S.

THESE PLANS ARE NOT VALID FOR PERMITTING WITHOUT THE RAISED SEAL & SIGNATURE OF ENGINEER/ARCHITECT OF RECORD.

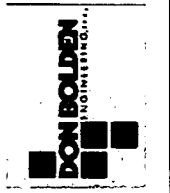
WRITTEN DIMENSIONS SHALL HAVE PRECEDENCE OVER SCALE DIMENSIONS. Contractors shall verify and be responsible for dimensions and conditions of the job and the owner must be notified in writing of any changes in the dimensions, conditions, and specifications appearing on these plans.



**6 MOUNTING HARDWARE OVER TILE ROOF** SCALE: N.T.S.

*Handwritten signature and date: [Signature] 5/13/09*

P.O. Box 530783  
 Delray, FL 33483  
 (386) 747-7155  
 d\_baldwin@baldwin.net  
 License #47524  
 Cert. of Auth. #26300



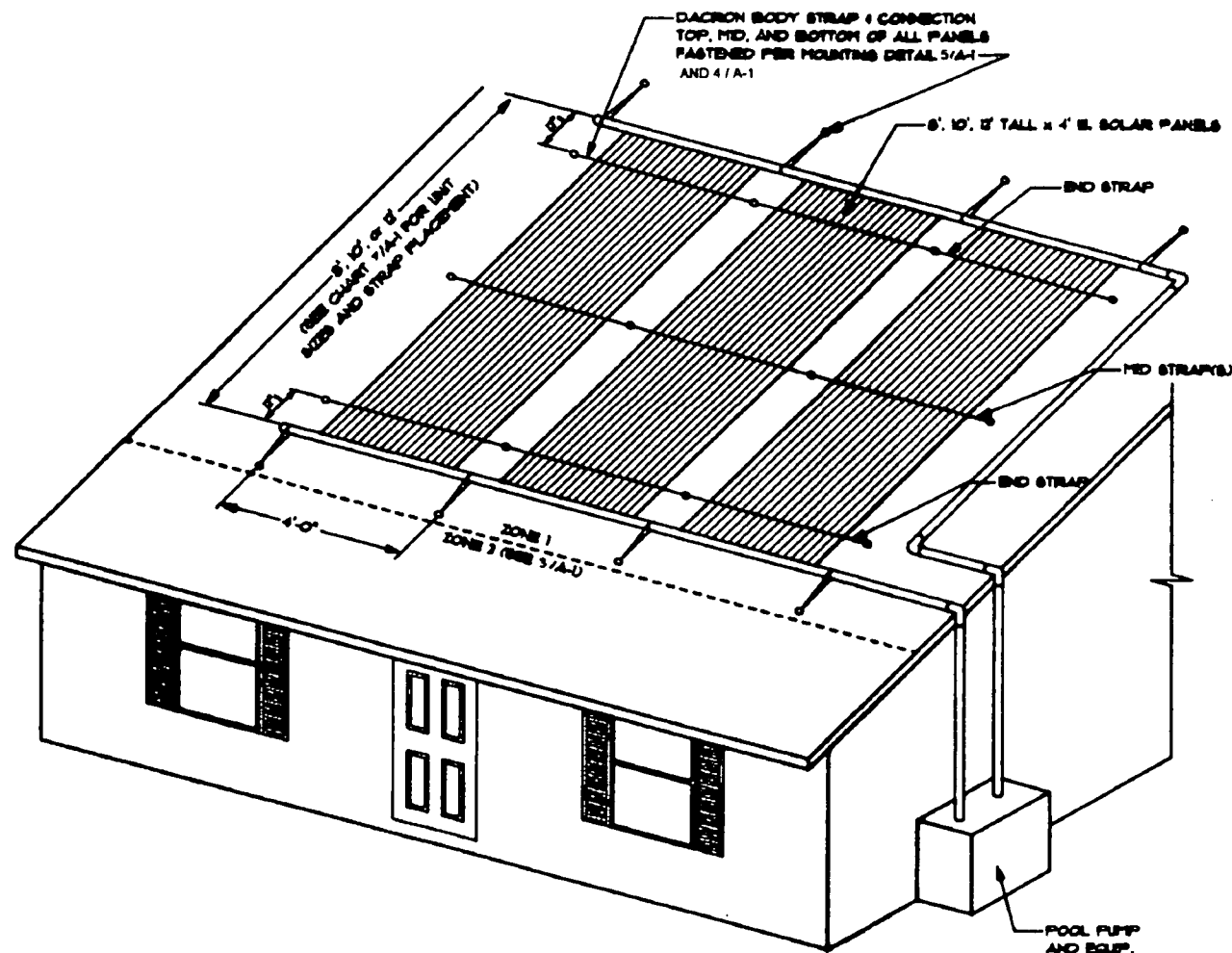
**Project Info:**

1743 Huntington Ln.  
 Rockledge, FL 32955  
 (888) 932-5299  
 www.FloridaSolarEast.net



Drawn By: J.M.L.  
 Checked By: D.B.  
 Date: 00/00/0000  
 Scale: As Noted  
 Job Number: 00-0000S

drawing no.  
**A-01**  
 SOLAR DETAILS



SYSTEM HAS BEEN DESIGNED WITH THE FOLLOWING LIMITATIONS:

A. UP TO 140MPH WINDS (3 SECOND GUSTS).  
 B. ROOF HEIGHT NOT TO EXCEED 30' ABOVE GRADE.

(IF ANY OF THE ABOVE LIMITATIONS ARE EXCEEDED SPECIAL ENGINEERING WILL BE REQUIRED).

**7 SOLAR ROOF MOUNTING PLAN (FLUSH)**

SCALE: N.T.S.

**DESIGN REQUIREMENTS**

- A. ROOF LIVE LOAD IS 20 PSF
- B. FLOORS LIVE LOAD IS 40 PSF, BALCONIES, DECKS, STAIRS, LIVE LOAD IS 60PSF

NOTE: THIS STRUCTURE HAS BEEN DESIGNED TO MEET OR EXCEED REQUIREMENTS OF THE FLORIDA BUILDING CODE 2007 RESIDENTIAL EDITION AND THE ASCE 7-02.

- 1. WIND EXPOSURE - CATEGORY (B/C)
- 2. BASIC WIND SPEED - 140MPH. @ 3 SEC. GUSTS
- 3. WIND IMPORTANCE FACTOR - 1.0
- 4. INTERNAL PRESSURE COEFFICIENT - .18
- 5. MAXIMUM PRESSURE FOR COMPONENTS AND CLADDING, 32.3 p.s.f./41.2 p.s.f. UNLESS NOTED OTHERWISE.

**DESIGN NOTES:**

STRAPS SHALL BE DACRON BODY STRAPS AND HAVE A MINIMUM DESIGN TENSILE STRENGTH OF 1,600LBS.

SCREWS SHALL BE #12 OR BETTER STAINLESS STEEL AND SHALL FULLY PENETRATE 1/2" MIN. CDX. PLYWOOD SHEATHING AND BE HELD IN PLACE WITH SICAFLEX 1a CONSTRUCTION SEALANT APPLIED TO A 1/8" PILOT HOLE PRIOR TO AND AFTER PLACEMENT OF THE FASTNER AS SHOWN HEREIN.

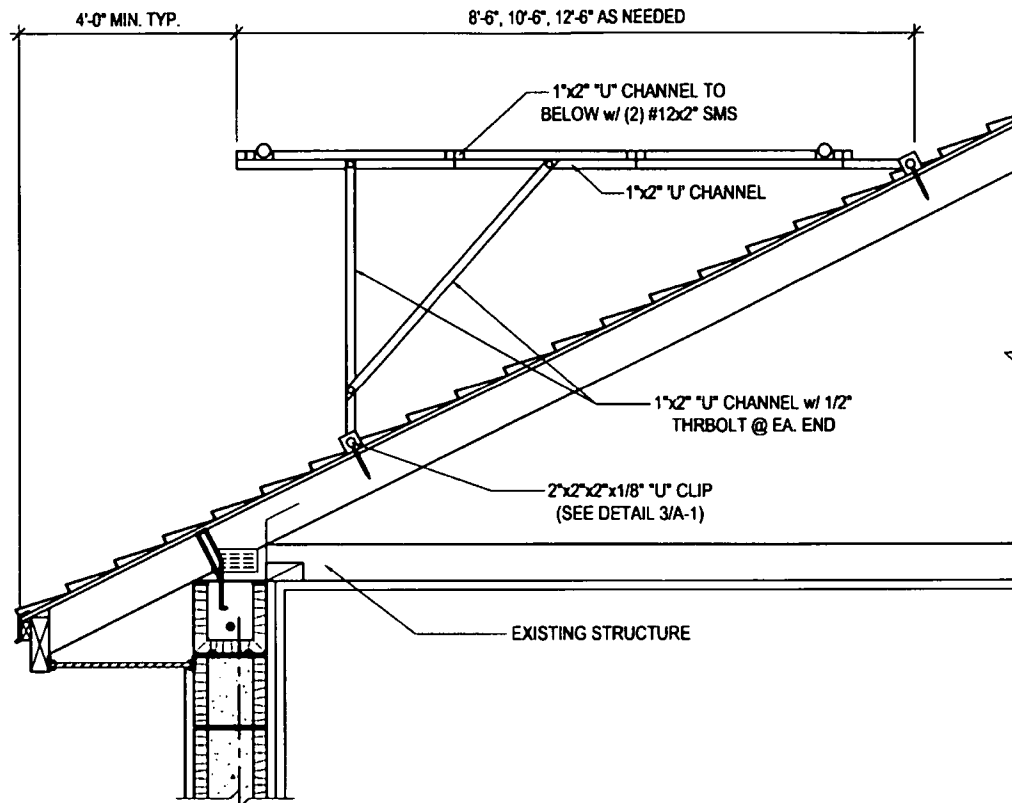
EACH PANEL SHALL HAVE A MINIMUM OF (5) MOUNTING POINTS WITH AN ADDITIONAL (5) ON ONE END OF THE ARRAY. A FOUR PANEL SYSTEM WILL HAVE (25) MOUNTING POINTS.

THIS DETAIL VALID FOR A ROOF SLOPE FROM FLAT TO 7:12 MAXIMUM PITCH. ADDITIONAL SITE SPECIFIC ENGINEERING MAY BE REQUIRED IN END ZONE 2, WHICH LIES LESS THAN 4' FROM ROOF EDGES.

DETAIL VALID FOR HVHZ ZONES UP TO AND INCLUDING 140 MPH. THIS DETAIL NOT VALID IN DADE COUNTY.

**GENERAL NOTES:**

- 1. ENGINEERING VALID FOR SOLAR POOL HEATING AND DOMESTIC WATER HEATING APPLICATIONS.
- 2. ENGINEERING VALID FOR ALL PANEL ORIENTATIONS INCLUDING VERTICAL (SHOWN) AND HORIZONTAL.
- 3. CALCULATIONS VERIFIED FOR THE UPLIFT ONLY PER CODE. INSTALLERS SHALL USE CAUTION WHEN INSTALLING THE PANELS TO MINIMIZE AND DISTRIBUTE LOADING ACROSS THE ROOF SURFACE. NO WARRANTY, EXPRESSED OR IMPLIED IS OFFERED FOR THE INTEGRITY OF THE EXISTING STRUCTURE.
- 4. 1/2" MINIMUM EXTERIOR GRADE CDX PLYWOOD SHALL EXIST AS A CONNECTION SUBSTRATE.
- 5. NO CERTIFICATION IS OFFERED FOR PLUMBING OR ELECTRICAL WORK. THIS IS A STRUCTURAL CERTIFICATION ONLY FOR ANCHORAGE TO THE EXISTING ROOF STRUCTURE.



**2 SOLAR PANEL SECTION (ELEVATED)**

SCALE: N.T.S.

6. DIMENSIONS ARE SHOWN TO ILLUSTRATE DESIGN FORCES AND OTHER DESIGN CRITERIA. THEY MAY VARY SLIGHTLY. CONTRACTOR IS TO VERIFY ALL FIELD DIMENSIONS PRIOR TO INSTALLATION.

7. ENGINEER SEAL AFFIXED HERETO VALIDATES STRUCTURAL DESIGN AS SHOWN ONLY. USE OF THIS SPECIFICATION BY CONTRACTOR, et. al. INDEMNIFIES & SAVES HARMLESS THIS ENGINEER FOR ALL COST DAMAGES INCLUDING LEGAL FEES & APPELATE FEES RESULTING FROM MATERIAL FABRICATION SYSTEM ERECTION, & CONSTRUCTION PRACTICES BEYOND THAT WHICH IS CALLED FOR BY LOCAL, STATE, & FEDERAL CODES, & FROM DEVIATIONS OF THIS PLAN.

- 8. SYSTEM HAS BEEN DESIGNED WITH THE FOLLOWING LIMITATIONS:
- A. UP TO 140MPH WINDS (3 SECOND GUST).
- B. ROOF HEIGHT NOT TO EXCEED 30' ABOVE GRADE.

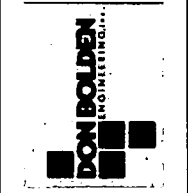
(IF ANY OF THE ABOVE LIMITATIONS ARE EXCEEDED SPECIAL ENGINEERING WILL BE REQUIRED).

**NOTES**

*[Handwritten signature]*  
 3/31/09

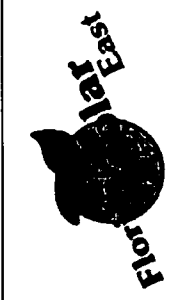
SCALE: N.T.S.

P.O. Box 530783  
 Delray, FL 33453  
 (561) 747-7155  
 d\_balden@balden.com  
 License #47524  
 Cert. of Auth. #26030



Project Info:

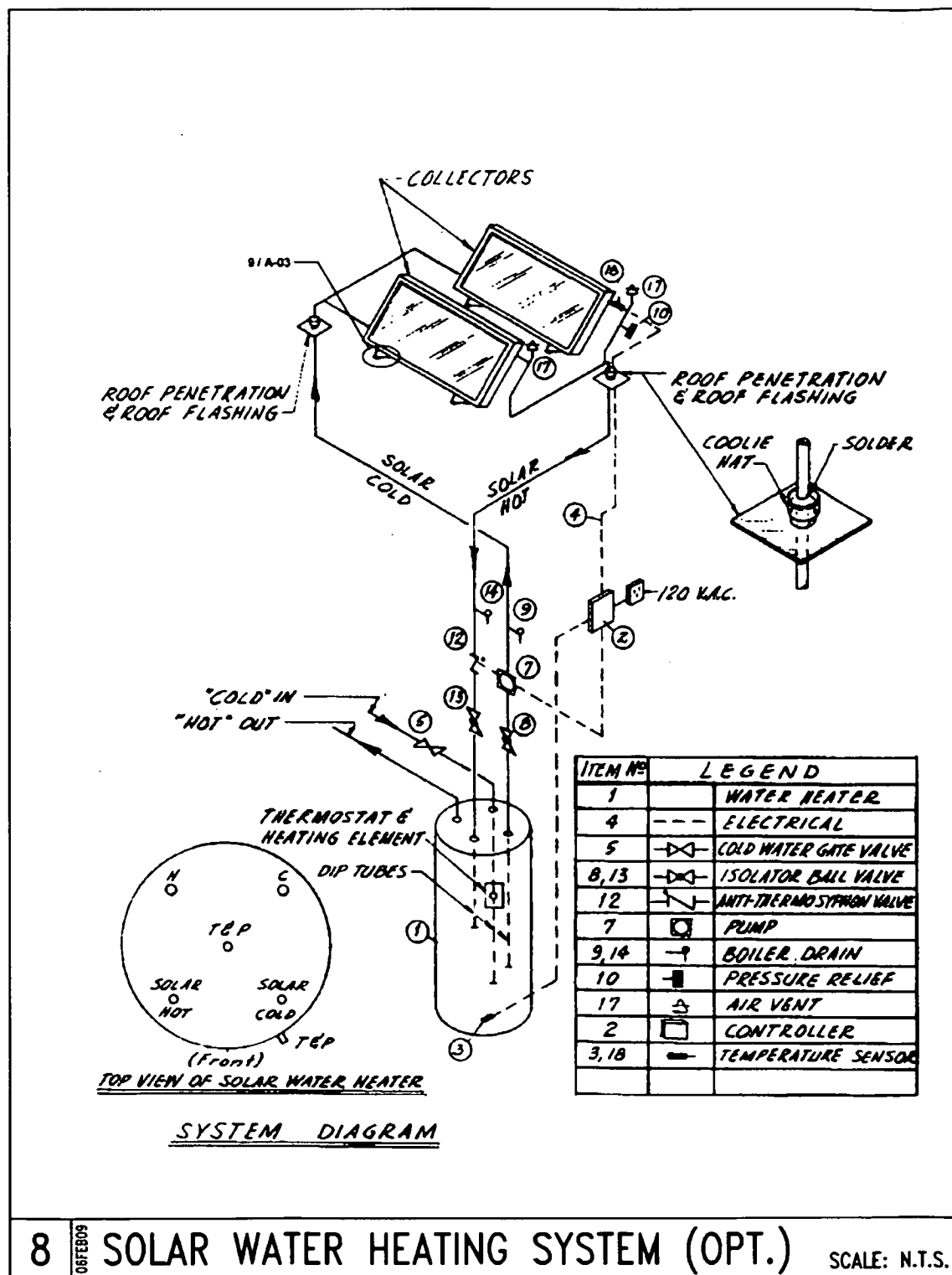
1743 Huntington Ln.  
 Rockledge, FL 32955  
 (888) 932-5299  
 www.FloridaSolarEast.net



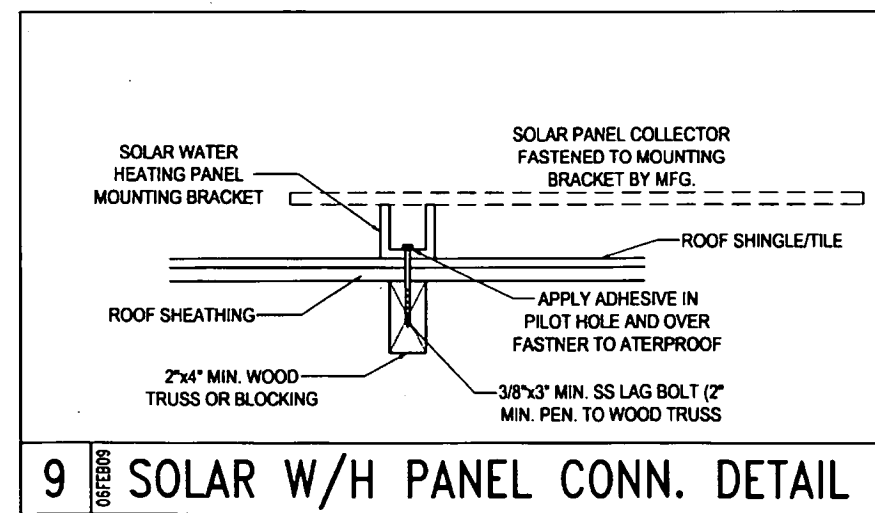
|                         |
|-------------------------|
| Drawn By:<br>J.M.L.     |
| Checked By:<br>D.B.     |
| Date:<br>00/00/0000     |
| Scale:<br>As Noted      |
| Job Number:<br>00-0000S |

drawing no.  
**A-02**  
 SOLAR DETAILS





8 08FEB09 SOLAR WATER HEATING SYSTEM (OPT.) SCALE: N.T.S.



9 08FEB09 SOLAR W/H PANEL CONN. DETAIL

*Handwritten signature and date: J.M.L. 2/21/09*

P.O. Box 530783  
 Delray, FL 33473  
 (561) 747-7155  
 d\_balden@balden.net  
 License #47524  
 Cert. of Auth. #25030

**DON BALDEN**  
 ENGINEER

Project Info:

1743 Huntington Ln.  
 Rockledge, FL 32955  
 (888) 922-5299  
 www.FloridaSolarEast.net



Drawn By:  
J.M.L.

Checked By:  
D.B.

Date:  
00/00/0000

Scale:  
As Noted

Job Number:  
00-0000S

drawing no.  
**A-03**  
 SOLAR DETAILS

DO NOT REMOVE THIS TAG

INSPECTOR

*[Signature]*

DATE: 7-7-09

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.

- 1. HOT WATER HEATER REPLACEMENT
- REQUIRED TO MEET ELECTRICAL CODE. MUST BE WIND WIND
- 2. FIBER INSULATION ON ROOF NOT SECURE. COMING OFF PIPING - NOT EXTERMINATED
- 3. ATTACHMENT TO TILE ROOF IS NOT PER PLAN'S. FORM IS NOT APPROVED
- ROOF SEALANT.

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.

ADDRESS: 11 Middle Rd

CORRECTION NOTICE

TOWN OF SEWALLS POINT  
One South Sewalls Point Road  
Sewalls Point, Florida 34986  
(772) 287-2455



9/59 W/E



P/N: 9159

## TOWN OF SEWALL'S POINT

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

### CORRECTION NOTICE

ADDRESS: 11 MIDDLE RD

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.

1. HOT WATER HEATER REPLACEMENT  
REQUIRED TO MEET ELECTRICAL CODE.  
MUST BE HARD WIRED

2. PIPE INSULATION ON ROOF NOT SECURE.  
COMING OFF PIPING - NOT EXTERIOR-GRADE

3. ATTACHMENT TO TILE ROOF IS NOT PER  
PLANS. FOAM IS NOT AN APPROVED  
ROOF SEALANT.

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: 7-7-09

INSPECTOR

**DO NOT REMOVE THIS TAG**



P/N: 9159

**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 11 MIDDLE RD

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.

NO PLANS / PERMIT POSTED

NO ACCESS - NO ONE HOME

\$45<sup>00</sup> REINSPECTION FEE  
pd 7-7-09 @

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: 7-7-09

  
INSPECTOR

**DO NOT REMOVE THIS TAG**



# Fax

**Town of Sewall's Point  
Building Department  
772-287-2455 ext 13  
772-220-4765 FAX  
email: vmeyer@sewallspoint.org**

**Date: August 31, 2009**  
**To: Florida Solar East**  
**Attn: Karen**  
**Fax #: 321-631-9332**  
**Re: Open permit**  
**Pages: Cover + 1**

---

I am faxing copy of correction notice for PN 9159 – Winzurk – 11 Middle Rd,  
Sewalls Point, FL.

Please advise status and schedule final.

If you have any questions, please contact me.

Valerie 



PIN: 9159

**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 11 MIDDLE RD

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.

- 1. HOT WATER HEATER REPLACEMENT  
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MUST BE HARD WIRED
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ROOF SEALANT.

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: 7-7-09

INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri 12-4 2009 Page 1 of 1

| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
|-----------------|--------------------------|------------------|-----------------|---------------------|
| 9247            | Gilbert                  | Final            |                 | E.M. Connor         |
| 9AM             | 29 Feldway Dr            | (Solar heat)     | FAIR            | DOUBLE CHECKED      |
|                 | IL Solar East            |                  |                 | INSPECTOR <i>AV</i> |
| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
| <del>9159</del> | <del>Winnick</del>       | <del>Final</del> | <del>Pass</del> | <del>Close</del>    |
| AM early        | IL Solar East            |                  |                 | INSPECTOR <i>AV</i> |
| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
| 9305            | Hompson                  | Final            |                 | Close               |
|                 | 3 W High Pt              | Roof             | Pass            |                     |
|                 | All Am Roof              |                  |                 | INSPECTOR <i>AV</i> |
| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
|                 |                          |                  |                 | INSPECTOR           |
| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
|                 |                          |                  |                 | INSPECTOR           |
| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
|                 |                          |                  |                 | INSPECTOR           |
| PERMIT #        | OWNER/ADDRESS/CONTRACTOR | INSPECTION TYPE  | RESULTS         | COMMENTS            |
|                 |                          |                  |                 | INSPECTOR           |



**9215**

**ROOF REPAIR**

---



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

## BUILDING PERMIT CARD

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

|                        |                     |                       |                  |
|------------------------|---------------------|-----------------------|------------------|
| PERMIT NUMBER:         | 9215                | DATE ISSUED:          | JULY 24, 2009    |
| SCOPE OF WORK:         | ROOF REPAIR         |                       |                  |
| CONDITIONS :           |                     |                       |                  |
| CONTRACTOR:            | STUART ROOF REPAIR  |                       |                  |
| PARCEL CONTROL NUMBER: | 133841002000-003707 | SUBDIVISION           | HIGH PT - LOT 37 |
| CONSTRUCTION ADDRESS:  | 11 MIDDLE RD        |                       |                  |
| OWNER NAME:            | WINZURK             |                       |                  |
| QUALIFIER:             | JAMES ARES          | CONTACT PHONE NUMBER: | 286-0444         |

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

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

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

### REQUIRED INSPECTIONS

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

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

RECEIVED  
DATE: 7/21/09  
TOWN OF SEWALL'S POINT

# Town of Sewall's Point

Date: July 20 09 PERMIT APPLICATION Permit Number: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: Ute Winzork Phone (Day) 772 781 4686 (Fax) \_\_\_\_\_

Job Site Address: 11 Middle Road City: Sewall's Pt State: FL Zip: 34996

Legal Description: High PT-60T 37 - Parcel Control Number: 13-38-41-002-000-00370-7

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

Scope of work (please be specific): Repair Rear Valley on home (Tile Roof)

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

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

COST AND VALUES: (Required on ALL permit applications)  
Estimated Value of Improvements: \$2,250.00

(Notice of Commencement required when over \$2500 prior to 1st inspection, \$7,500 on HVAC change out)

Is subject property located in flood hazard area? VE10 \_\_\_\_\_ AE9 \_\_\_\_\_ AE8 \_\_\_\_\_ X \_\_\_\_\_

FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:  
Estimated Fair Market Value prior to improvement: \$ 40,000  
(Fair Market Value of the Primary Structure only, Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Stuart Roof Repair Inc Phone: 772 286 0444 Fax: 772 879 0955

Street: P.O. Box 1269 City: Port Salerno State: FL Zip: 34992

State License Number: CC1326087 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: JAMES ARES Phone Number: CELL 772 260 7830  
office 772 286 0444

DESIGN PROFESSIONAL: NA Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

AREAS SQUARE FOOTAGE: Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios/ Porches: \_\_\_\_\_ Enclosed Storage: \_\_\_\_\_  
Carport: \_\_\_\_\_ Total under Roof \_\_\_\_\_ Elevated Deck: \_\_\_\_\_ Enclosed area below BFE\*: \_\_\_\_\_  
\* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2007 Edition  
National Electrical Code: 2005 Florida Energy Code: 2007 Florida Accessibility Code: 2007 Florida Fire Prevention Code 2007

## NOTICES TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER SIGNATURE: (required)  
OR OWNERS LEGAL AUTHORIZED AGENT (PROVE DEED RECORD)

Ute Winzork

State of Florida, County of: Martin

This the 21st day of July

by Ute Winzork who is personally known to me or produced FDL# W526-849-40 as identification.

Valerie Meyer  
Notary Public

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

CONTRACTOR SIGNATURE: (required)

James Ares

State of Florida, County of: Martin

This the 21st day of July

by James Ares who is personally known to me or produced FDL# A620-960-902 as identification.

Valerie Meyer  
Notary Public

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

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



# Martin County, Florida

Laurel Kelly, C.F.A

Site Provided by...  
governmentmax.com T1.12

## Summary

print | | | | | Owner  
1 of 1

### Parcel Info

| Parcel ID                | Unit Address | Serial Index ID | Order | Commercial | Residential |
|--------------------------|--------------|-----------------|-------|------------|-------------|
| 13-38-41-002-000-00370-7 | 11 MIDDLE RD | 27725           | Owner | 0          | 1           |

### Summary

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

### Summary

**Property Location** 11 MIDDLE RD  
**Tax District** 2200 Sewall's Point  
**Account #** 27725  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120000  
**Acres** 0.344

**Legal Description**  
**Property Information**  
 HIGH POINT LOT 37 OR 342/2303

### Search By

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

### Owner Information

**Owner Information**  
 WINZURK UTE INGEBORG (TR)

### Mail Information

11 MIDDLE RD  
 STUART FL 34996

### Assessment Info

Front Ft.

**Market Land Value** \$257,000  
**Market Impr Value** \$209,640  
**Market Total Value** \$466,640

### Site Functions

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

### Recent Sale

Sale Amount \$0

**Sale Date** 6/6/2008  
**Book/Page** 2332 2685

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

Legal disclaimer / Privacy Statement

Data updated on 6/22/2009





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-2204765

## RE-ROOF CHECKLIST

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

**THIS REVIEW SHEET MUST ACCOMPANY THE APPLICATION SUBMITTAL.**

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

The following minimum requirements must be provided for permitting and inspections:

- Repair to  
Tile Roof*
- 1 Copy Completed application
  - 2 Copies Complete list of proposed materials
  - 2 Copies Re-roof certification
  - 1 Copy Re-roof Inspection affidavit if used, prior to final inspection.

### RESIDENTIAL REROOFS:

- 2 Copies approved roofing manufacturer specifications for all products used.
  - Manufacturer specs/fastening schedule for roof shingles (must meet the minimum area wind load).
  - Manufacturer must have Florida Product Approval
  - Location of proposed re-roof (if only a partial re-roof) and area % calculation
  - Section/detail through hip and ridge tile caps per F.R.S.A. for tile roofs\*\*
- 2 Copies Re-roof windstorm loss mitigation certification (and affidavit if applicable)

### COMMERCIAL REROOFS:

- 2 Copies Roof Plan:
  - Show all features (pitch, drains, equipment, etc.)
  - Details: 3/4" = 1'.0" min. scale
  - Parapet or edge
  - Rooftop mounting or equipment expansion joints
  - Type of roofing (& insulation if any) being removed
  - Type of roof deck
- 2 Copies Approved roofing manufacturer specifications for all products used.
  - Manufacturers complete roofing system specifications & installation guidelines (Include fastening schedule meeting minimum area wind load).
- 1 Copy Verification of Contractor form
  - Contractor verification form (HVAC and/or electric) required if roof top HVAC equipment is removed/reinstalled and/or if HVAC electric is disconnected/reconnected.

\*\*Concrete or ClayTile Roof: Specify how the roof field tile will be attached to the deck (reference F.S.R.A Installation Manual). Provide section details showing the installation/attachment of ridge and hip cap tile. Demonstrate compliance with the 2007 FBC 1507.3. & 2007 FBC/Residential R905.3. Also provide Product Approval for all roof adhesives.

All Product Approval & Installation Spec's must be on the job site for inspection.  
All tile re-roofs require an "in progress" tile installation inspection or certified pull test at final.



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

RE: Permit # \_\_\_\_\_

Date July 20, 09

**Inspection Affidavit**

I JAMES ARES, licensed as a (n) Contractor\* / Engineer/Architect,  
 (please print name and circle Lic. Type) FS 468 Building Inspector\*

License #: CCC 1326087

On or about \_\_\_\_\_, I did personally inspect the roof  
 (Date & time)

N/A SEE LETTER submitted on April 27, 09.  
Deck nailing and/or secondary water barrier work at \_\_\_\_\_  
 (circle one) (Job Site Address)

Based upon that examination I have determined the installation was done according to the  
 Hurricane Mitigation/Retrofit Manual (Based on 553.844 F.S.)

*This Affidavit is being signed under protest with  
 Letter of April 27, 09. An individual can not  
 inspect deck nailing or secondary  
 water barrier if Roof membrane is  
 not open for inspection*

STATE OF FLORIDA  
 COUNTY OF \_\_\_\_\_

Sworn to and subscribed before me this \_\_\_\_\_ day of \_\_\_\_\_, 2009

By \_\_\_\_\_

Notary Public, State of Florida

\_\_\_\_\_  
 (Print, type or stamp name)

Commission No.: \_\_\_\_\_

Personally known \_\_\_\_\_ or

Produced Identification \_\_\_\_\_

Type of identification produced. \_\_\_\_\_

\* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.

# STUART ROOF REPAIR INC.

July 20, 2009

Town of Sewall's Point Building Department  
One So. Sewall's Point Road  
Sewall's Point, Fl. 34996

To Whom It May Concern:

Stuart Roof Repair Inc. has been informed that the Town of Sewall's Point requires an affidavit that the job site decking for the roofing meets hurricane mitigation retrofit manual (based on 553.844F.S.) It should be understood repair to fix leakage does not always require removal of surfaces in sufficient amounts to make such a determinant examination. It is our professional opinion that such a request is more for the work where an addition or a remodeling job is taking place. A standard valley repair, exhaust fan, roof return, soil vent plumbing and any one of the many repairs, which may not require wood, work, but are necessary to maintain a watertight roof system is not of any size, which could retrofit the whole of the roof system. This hurricane mitigation retrofit (553.844 F.S.) is with the intent to up grade and be of benefit to the roof system as a whole. It should be understood that should a major storm (i.e.) hurricane cause the failure of the roof system, it is very unlikely that a small repair will not save the roof and should the roof fail, the new repair will not be standing mid air all by it self. The intend for this 553.844 F.S. is meant for an area approximately of 1/3% to 25% of total roof area.

Stuart Roof Repair Inc. made the effort to attempt to explain the situation to Mr. Adams of the Building Department at Sewall's Point. Mr. Adams was shown the repair, which was being installed and was shown the few openings made through the underlayment of #90 mineral roll roofing. The opening was not of sufficient size to allow for a determination of nailing pattern nor type of nail anchor. Mr. Adams was told of our standard practice of following the International Construction Code, repair is meant to be equal to or better than the current roof system being repaired. Stuart Roof Repair Inc. reiterates our repair was not of sufficient size to determine whether decking was of appropriate requirement for 553.844F.S.

Respectfully submitted,

Mr. James Ares, President  
Stuart Roof Repair Inc.  
#CCC1326087



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

**RE-ROOF PERMIT CERTIFICATION**

PERMIT # \_\_\_\_\_

CONTRACTOR'S NAME: Stuart Roof Repair PHONE # 772 236 0444 FAX: 772 879 0955

OWNER'S NAME: MS. JOE WINZURK

CONSTRUCTION ADDRESS: 11 Middle Road CITY Sewall's STATE FL.

*Repair* RE-ROOF:  RESIDENTIAL (SINGLE FAMILY)

COMMERCIAL \*\*\*-REMOVE/REINSTALL ROOF TOP HVAC EQUIP  YES  NO

*N/A* DISCONNECT/RECONNECT HVAC ELECTRIC  YES  NO

\*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

*N/A* RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S.  YES  NO - INSURED VALUE OF RESIDENCE \_\_\_\_\_

RE-ROOF INSPECTION AFFIDAVIT TO BE PROVIDED IN LIEU OF BUILDING DEPARTMENT INSPECTION  YES  NO

ROOF TYPE:  HIP  BOSTON-HIP  GABLE  FLAT  OTHER

ROOF PITCH: 5/12 42 SLOPE

ROOF DECK: \* *N/A* SHEATH-OVER - (APPLYING PLYWOOD PANELS TO EXISTING SPACED

*N/A* RE-SHEATH - (REMOVAL OF SHEATHING/PLYWOOD FOR APPLICATION OF NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM 1/2" PLYWOOD AS PER FLORIDA BUILDING CODE "2004".

SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED DECK. NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".

EXISTING DECK TO REMAIN/REPAIRED & RENAILED

EXISTING ROOF COVERING: tile *other than tile* EXISTING COVERING TO BE REMOVED? YES  NO  TO BE REMAIN

PROPOSED NEW ROOF COVERING: same system tile / modified SBS-AS

MANUFACTURER \_\_\_\_\_ PRODUCT NAME \_\_\_\_\_ PRODUCT APPR # Repair surface  
 (APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL) MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION. *Valley*

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV./STEEL  ALUMINUM  COPPER  OTHER Sealage existing flash

RIDGEVENT TO BE INSTALLED:  YES  NO

DESCRIPTION OF WORK: To repair existing tile roof system of 1900  
Rollmacer not damaged - Repair to be SBS. And all materials

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

SIGNATURE OF CONTRACTOR \_\_\_\_\_ DATE: July 20 09

**FILE COPY**  
**TOWN OF SEWALL'S POINT**  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 7.23.09  
 BUILDING OFFICIAL



**STUART  
ROOF  
REPAIR INC.**

PO Box 1269

Port Salerno FL 34992-1269

772-286-0444 ..... 772-879-0955

|   |               |                   |                      |
|---|---------------|-------------------|----------------------|
| PROPOSAL SUBMITTED TO:<br>Ms. Ute Winzurk       |               | PHONE<br>215-6754 | DATE<br>July 7, 2009 |
| STREET<br>11 Middle Road                        |               | JOB NAME          |                      |
| CITY, STATE AND ZIP CODE<br>Sewall's Point, Fl. |               | JOB LOCATION      |                      |
| ARCHITECT                                       | DATE OF PLANS | JOB PHONE         |                      |

We hereby submit specifications and estimates for:

To break out cement tile from rear valley which runs up and over patio and kitchen. Indication of leakage and stains can be seen on interior ceilings. (See work drawing) Solar company is needed to remove hot water solar unit for access of repair to valley. Solar PVC pipes and copper tube will have to be cut away.

To make location of concern smooth and workable. Hauling away all trash and debris. Contractor to salvage metal flashing, chase and fixtures where possible.

To install new valley using an elastomeric polyester reinforced, ceramic granulated weather surfaced, SBS low slope modified roofing. Tile underlayment to be fully set in modified adhesive. Appropriate built-up mastic flashing and seal being installed as needed or required. To incorporate a fiber mesh membrane in sealant for additional strength.

To reset solar anchor which has been pulled, as well as, utility penetration for copper tubing. Reset of soil vent flashing and copper chase hood.

To relay cement tile in 10 to 12 weeks after completion of seal. Weather and workload will determine scheduling.

Price \$2,250.00

~~To brush down low slope fiber glass built-up roof.~~

~~To install appropriate repair with a built-up mastic flashing grade cement adhesive.~~

~~To install an asphalt base emulsion over the total low slope roof surface.~~

Price \$925.00

~~Total work proposed \$3,170.00 (No wood work has been considered)~~

**\*NOTE:**

Should woodwork be required, said woodwork will be figured as time and material. Labor @ \$85.50 per man-hour and material @ \$cost plus 20%.

**\*NOTE:**

It is understood color/style variations may occur between replacement tile and weathered existing tile roof. Contractor in all cases and situations will attempt to salvage existing roof tile.

**\*NOTE:**

It is understood low slope roof will require the application of silver reflective paint in one (1) years time after asphalt coat.

Continue on page 2.

Continue from page 1.

**\*NOTE:**

Stuart Roof Repair Inc. will help fill out permit and supply a letter of explanation for the solar anchor /foam issue.

**WARRANTY:**

Warranty is for 1 year. Said warranty is for actual repair surface being installed. Warranty is narrow in scope; NO stated or inferred liability is assumed for roof/roofs as a whole.

**Payment schedule:**

1/2 @ start of job with 1/3 of remaining balance due upon completion of seal and balance upon completion of job. Payment due at time of billing and at final payment a release of lien will be given.

~~We~~ **Propose** hereby to furnish material and labor – complete in accordance with above specifications, for the sum of:

Three thousand one hundred seventy and no/100-----Dollars (\$3,170.00).

Payment to be made as follows:

See payment schedule.

We shall not be responsible for damages to exterior or interior fixtures, household furnishings, decorations equipment due to leakage, however caused. VERBAL AGREEMENTS OR OTHER AGREEMENTS NOT APPEARING UPON THIS CONTRACT WILL NOT BE RECOGNIZED. All agreements contingent upon strikes, weather, or other conditions beyond the control of the contractor.

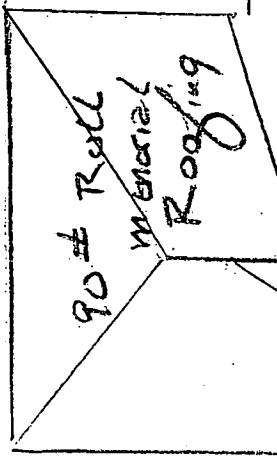
All material is guaranteed to be as specified. All work to be completed in a workmanlike manner according to standard practices. Any alteration or deviation from above specifications involving extra costs will be executed only upon written orders, and will become an extra-charge over and above the estimate. All agreements contingent upon strikes, accidents or delays beyond our control. Owner to carry fire, tornado, and other necessary insurances.

Authorized  
Signature \_\_\_\_\_

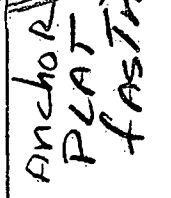
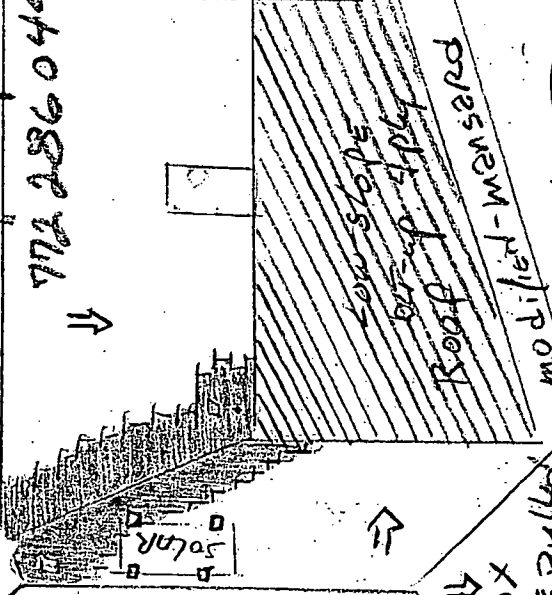
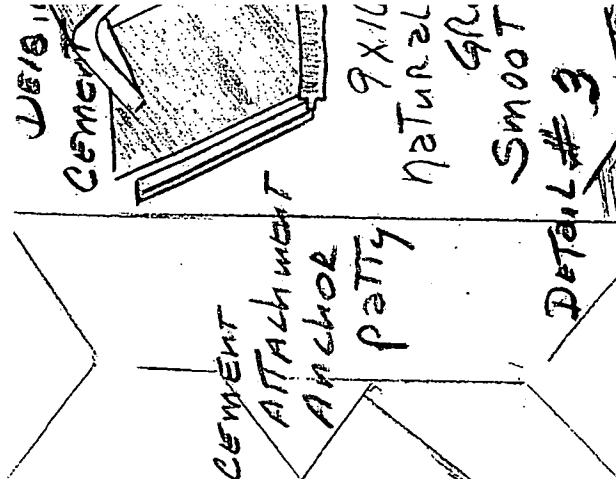
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Note: This proposal may be withdrawn by us if not accepted within 30 days.

→ MS SITE WITH 20  
11 11 11 11 11 11

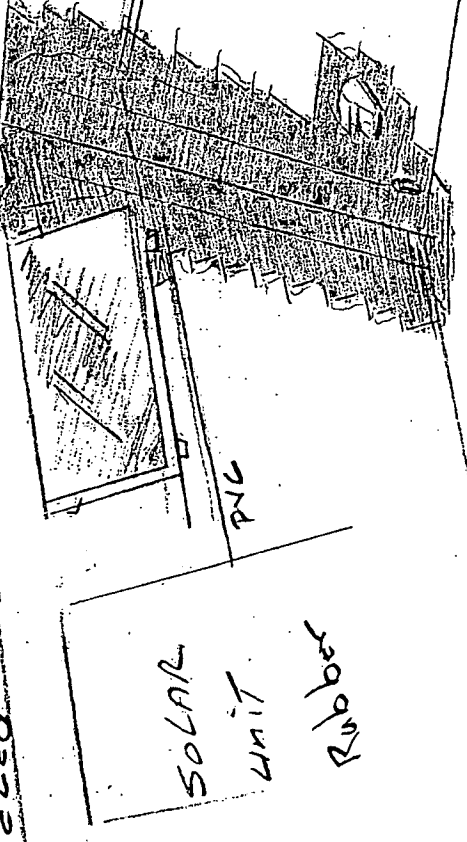


Drawn by  
772 879 0955 **STUART ROOF REPAIR INC**  
772 286 0444



- NOTE\*
- SOLAR BOX UNIT TO BE PULLED
  - PIPES TO BE CUT
  - UTILITY PENETRATION TO BE SEALED

DETAIL # 2 Perspective location of Rope  
Reel Valley back over KITE  
AND PATIO.



BIT-UP Roof

← MANSARD →

← SCREEN PATIO →



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

ROOFING MATERIAL LIST

| NO | MATERIAL                           | QUANTITY | UNIT | REMARKS                   |
|----|------------------------------------|----------|------|---------------------------|
| 0  | GAF Timberline 30 shingles         | 25       | SQ   | EXAMPLE                   |
|    | <i>Tropical Asphalt Adhesive</i>   |          |      |                           |
|    | <i>Franko Modified Roofing SBS</i> |          |      | <i>Roll polyester MAT</i> |
|    | <i>Per. Series D RT 600</i>        |          |      | <i>TILE Adhesive</i>      |
|    | <i>Asphalt fiber mesh membrane</i> |          |      |                           |
|    | <i>Tile to be salvaged</i>         |          |      |                           |
|    | <i>from existing site</i>          |          |      |                           |
|    | <i>Replacement of tile to be</i>   |          |      |                           |
|    | <i>similar in profile</i>          |          |      |                           |
|    | <i>Flashing to be salvaged</i>     |          |      |                           |
|    | <i>modified SBS adhesive</i>       |          |      |                           |
|    |                                    |          |      |                           |
|    |                                    |          |      |                           |
|    |                                    |          |      |                           |
|    |                                    |          |      |                           |

Tile White  
Tile Brown



**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)**

**Hanson Roof Tile d.b.a. Pioneer Concrete Tile  
1340 SW 34<sup>th</sup> Ave  
Deerfield Beach, FL 33442**

**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 the BCCO and accepted by the Building Code and Product Review Committee 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 BCCO (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. BCCO reserves the right to revoke this acceptance, if it is determined by BCCO 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 South Florida Building Code, 1994 Edition for Miami-Dade County or Florida Building Code.

**DESCRIPTION: Spanish "S" Roof Tile**

**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 6.

The submitted documentation was reviewed by Frank Zuloaga, RRC



**NOA No.: 02-0709.09  
Expiration Date: 12/16/07  
Approval Date: 08/22/02  
Page 1 of 6**

## ROOFING ASSEMBLY APPROVAL

Category: Roofing  
 Sub Category: Roofing Tiles  
 Material: Concrete

### 1. SCOPE

This renews a roofing system using Hanson Spanish 'S' Roof Tile, as manufactured Hanson Roof Tile d.b.a. Pioneer Concrete Tile described in Section 2 of this Notice of Acceptance. For the locations where the pressure requirements, do not exceed the values listed in section 4 herein. The attachment calculations shall be done as a moment based system.

### 2. PRODUCT DESCRIPTION

| <u>Manufactured by Applicant</u> | <u>Dimensions</u>                                    | <u>Test Specifications</u> | <u>Product Description</u>  |
|----------------------------------|--|----------------------------|---|
| Hanson Spanish 'S' Roof Tile     | Length: 18"<br>Width: 9 7/8"<br>Varying thickness    | TAS 112                    | High profile, interlocking, one-piece, 'S' shaped, extruded concrete roof tile equipped with two nail holes and a single roll. For direct deck nail-on, mortar set, or adhesive set applications. |
| Trim Pieces                      | Length: varies<br>Width: varies<br>Varying thickness | TAS 112                    | Accessory trim, concrete roof pieces for use at hips, rakes, ridges and valley terminations. Manufactured for each tile profile.  |

#### 2.1 Components or products manufactured by others

| <u>Product</u>                 | <u>Dimensions</u>   | <u>Test Specifications</u> | <u>Product Description</u>   | <u>Manufacturer</u>                              |
|--------------------------------|---|----------------------------|--|--|
| Rainproof II                   | 30" x 75' roll<br>36" x 75' roll<br>Or<br>60" x 75' roll          | TAS 104                    | Single ply, nail-on underlayment with 2" self-adhering top edge.                 | Protect-O-Wrap, Inc.<br>(With current NOA)       |
| Ice and Water Shield           | 36" x 75' roll  | TAS 103<br>TAS 114         | Self-adhering underlayment   | W.R. Grace Co.<br>(With current NOA)             |
| Tile Nails                     | Min. 10dx 3"<br>#8x 2 1/2" long                                   | Appendix E                 | Corrosion resistant screw or smooth shank nails                                  | Generic<br>(With current NOA)                    |
| Tile Screws                    | 0.335" head dia.<br>0.131" shank dia.<br>0.175" screw thread dia. | TAS 114<br>Appendix E      | Corrosion resistant, coated, square drive, galvanized, coarse thread wood screws | Generic<br>(With current NOA)                    |
| Roof Tile Mortar ("TileTite™") | N/A   | TAS 123                    | Prepared mortar mix designed for mortar set roof tile applications.              | Bermuda Roof Company, Inc.<br>(With current NOA) |



NOA No.: 02-0709.09  
 Expiration Date: 12/16/07  
 Approval Date: 08/22/02  
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| <u>Product</u>   | <u>Dimensions</u>   | <u>Test Specifications</u> | <u>Product Description</u>  | <u>Manufacturer</u>                                  |
|--|---|----------------------------|---|--|
| Roof Tile Mortar<br>("Quikrete® Roof Tile Mortar #1140") | N/A   | TAS 123                    | Prepared mortar mix designed for mortar set roof tile applications.                   | Quikrete Construction Products<br>(With current NOA) |
| Roof Tile Mortar<br>("BONSAL® Roof Tile Mortar Mix")     | N/A   | TAS 123                    | Prepared mortar mix designed for mortar set roof tile applications.                   | W. R. Bonsal Co.<br>(With current NOA)               |
| Roof Tile Adhesive<br>("Polypro® AH160")                 | N/A   | See NOA                    | Two-component polyurethane adhesive designed for adhesive set roof tile applications. | Polyfoam Products, Inc.<br>(With current NOA)        |
| Roof Tile Adhesive<br>TileBond                           | Factory premixed canisters  | See NOA                    | Single component polyurethane foam roof tile adhesive                                 | Flexible Products<br>(With current NOA)              |
| Hurricane Clip & Fasteners                               | Clips<br>Min. ½" width<br>Min. 0.060" thick<br>Clip Fasteners<br>Min. 8d x 1 ¼" | TAS 114<br>Appendix E      | Corrosion resistant clips with corrosion resistant nails.                             | Generic<br>(With current NOA)                        |

### 3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance.
- 3.2 For mortar or adhesive set tile applications, a static field uplift test in accordance with RAS 106 may be required, refer to applicable building code.
- 3.3 Applicant shall retain the services of a Miami-Dade County Certified Laboratory to perform quarterly test in accordance with TAS 112, appendix 'A'. Such testing shall be submitted to the Building Code Compliance Office for review.
- 3.4 Minimum underlayment shall be in compliance with the applicable Roofing Applications Standards listed section 4.1 herein.
- 3.5 30/90 hot mopped underlayment applications may be installed perpendicular to the roof slope unless stated otherwise by the underlayment material manufacturers published literature.
- 3.6 This acceptance is for wood deck applications. Minimum deck requirements shall be in compliance with applicable building code.

### 4. INSTALLATION

- 4.1 Hanson Spanish 'S' Roof Tile and its components shall be installed in strict compliance with Roofing Application Standard RAS 120.
- 4.2 Data For Attachment Calculations

| Table 1: Aerodynamic Multipliers - $\lambda$ (ft <sup>3</sup> ) |   |
|---|---|
| Tile Profile  | $\lambda$ (ft <sup>3</sup> )<br>Direct Deck Application |
| Hanson Spanish 'S'  | 0.263   |



NOA No.: 02-0709.09  
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Approval Date: 08/22/02  
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| <b>Table 2: Restoring Moments due to Gravity - <math>M_g</math> (ft-lbf)</b> |                    |                   |                   |                   |                   |
|--|--------------------|-------------------|-------------------|-------------------|-------------------|
| <b>Tile Profile</b>  | <b>3": 12"</b>     | <b>4": 12"</b>    | <b>5": 12"</b>    | <b>6": 12"</b>    | <b>7": 12"</b>    |
| <b>Hanson Spanish 'S'</b>  | <b>Direct Deck</b> | <b>DirectDeck</b> | <b>DirectDeck</b> | <b>DirectDeck</b> | <b>DirectDeck</b> |
|  | 8.58               | 8.44              | 8.27              | 8.07              | 7.84              |

| <b>Table 3: Attachment Resistance Expressed as a Moment - <math>M_r</math> (ft-lbf)<br/>For Nail-On Systems</b> |   |   |  |
|---|---|---|--|
| <b>Tile Profile</b>   | <b>Fastener Type</b>                                  | <b>Direct Deck<br/>(min 15/32"<br/>plywood)</b> | <b>Direct Deck<br/>(min. 19/32"<br/>plywood)</b> |
| <b>Hanson Spanish 'S'</b>   | <b>2-10d Ring Shank Nails</b>                         | 28.6  | 41.2   |
|   | <b>1-10d Smooth or Screw Shank Nail</b>               | 5.1   | 6.8  |
|   | <b>2-10d Smooth or Screw Shank Nails</b>              | 6.9   | 9.2  |
|   | <b>1 #8 Screw</b>                                     | 20.7  | 20.7   |
|   | <b>2 #8 Screws</b>                                    | 43.2  | 43.2   |
|   | <b>1-10d Smooth or Screw Shank Nail (Field Clip)</b>  | 23.1  | 23.1   |
|   | <b>1-10d Smooth or Screw Shank Nail (Eave Clip)</b>   | 29.3  | 29.3   |
|   | <b>2-10d Smooth or Screw Shank Nails (Field Clip)</b> | 27.6  | 27.6   |
|   | <b>2-10d Smooth or Screw Shank Nails (Eave Clip)</b>  | 38.1  | 38.1   |
|   | <b>2-10d Ring Shank Nails<sup>1</sup></b>             | 33.1  | 48.1   |

<sup>1</sup> Installation with a 4" tile headlap and fasteners are located a min. of 2½" from head of tile.

| <b>Table 4: Attachment Resistance Expressed as a Moment <math>M_r</math> (ft-lbf)<br/>For Two Patty Adhesive Set Systems</b> |                         |                                      |
|--|-------------------------|--------------------------------------|
| <b>Tile Profile</b>  | <b>Tile Application</b> | <b>Minimum Attachment Resistance</b> |
| <b>Hanson Spanish 'S'</b>  | <b>Adhesive</b>         | 29.3 <sup>3</sup>                    |

<sup>2</sup> See manufactures component approval for installation requirements.  
<sup>3</sup> Flexible Products Company TileBond Average weights per patty 10.7 grams. Polyfoam Product, Inc. Average weight per patty 8 grams.





| Table 4A: Attachment Resistance Expressed as a Moment - $M_r$ (ft-lbf)<br>For Single Patty Adhesive Set Systems |                   |                               |
|---|-------------------|-------------------------------|
| Tile Profile  | Tile Application  | Minimum Attachment Resistance |
| Hanson Spanish 'S'  | Polyfoam PolyPro™ | 66.5 <sup>4</sup>             |
|   | Polyfoam PolyPro™ | 38.7 <sup>5</sup>             |
| 4 Large paddy placement of 63grams of PolyPro™.   |                   |                               |
| 5 Medium paddy placement of 24grams of PolyPro™.  |                   |                               |

| Table 4B: Attachment Resistance Expressed as a Moment - $M_r$ (ft-lbf)<br>For Mortar Set Systems |                  |                       |
|--|------------------|-----------------------|
| Tile Profile   | Tile Application | Attachment Resistance |
| Hanson Spanish 'S'   | Mortar Set       | 24.5                  |

**5. LABELING**

All tiles shall bear the imprint or identifiable marking of the manufacturer's name or logo, or following statement: "Miami-Dade County Product Control Approved".

**6. BUILDING PERMIT REQUIREMENTS**

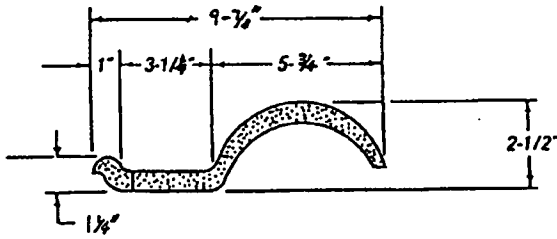
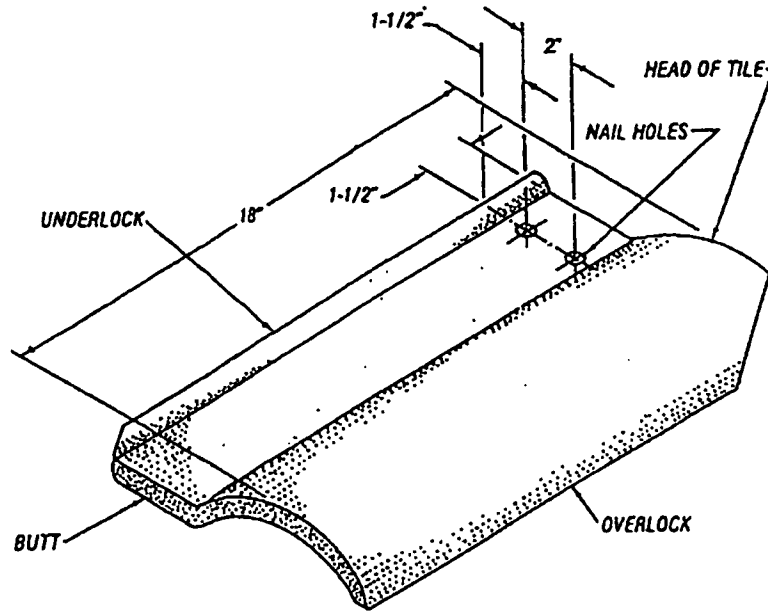
6.1 Application for building permit shall be accompanied by copies of the following:

6.1.1 This Notice of Acceptance.

6.1.2 Any other documents required by the Building Official or applicable building code in order to properly evaluate the installation of this system.



# PROFILE DRAWINGS



## HANSON SPANISH 'S' ROOF TILE

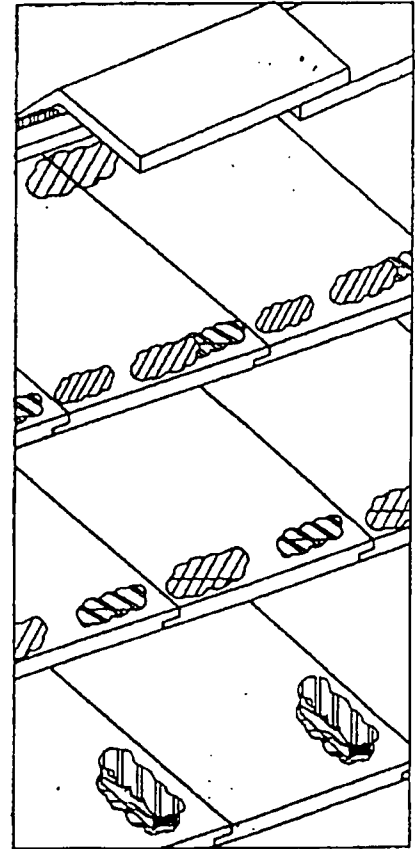
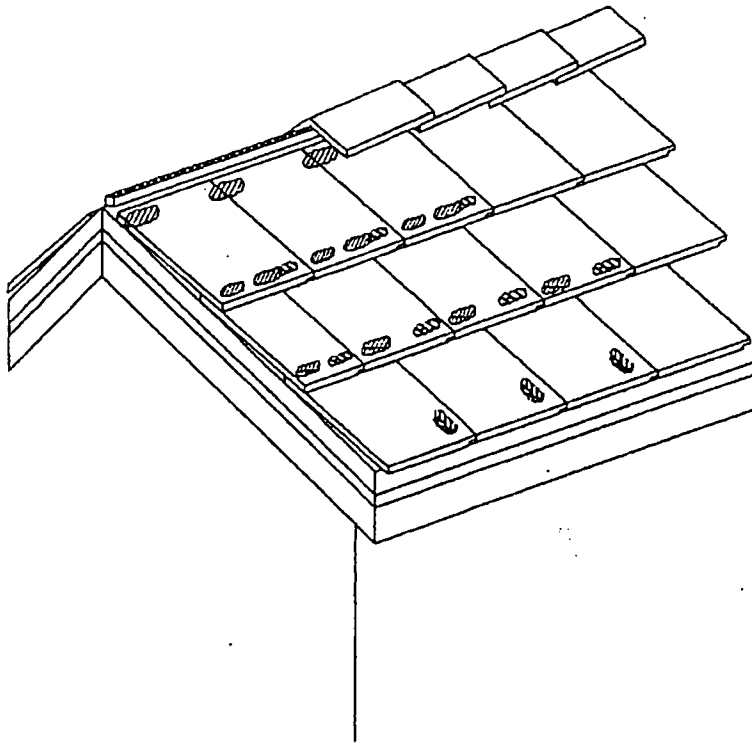
END OF THIS ACCEPTANCE



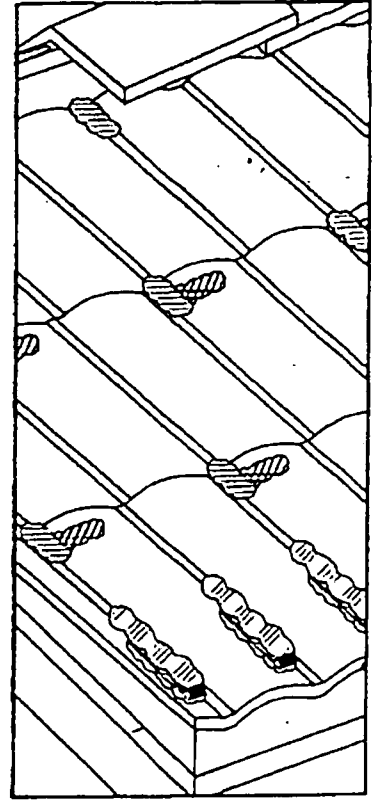
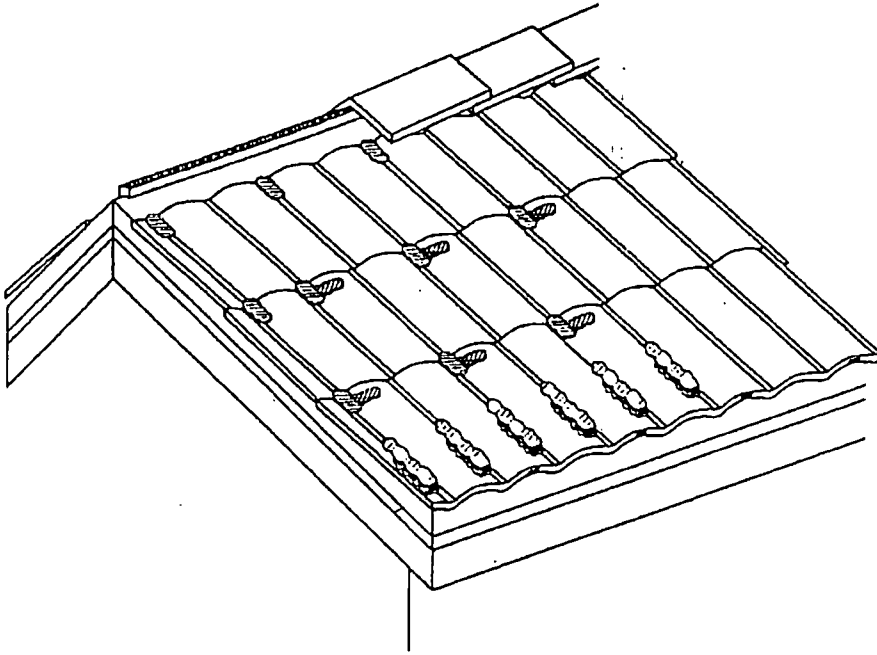
NOA No.: 02-0709.09  
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ADHESIVE PLACEMNT DETAIL

LOW (FLAT) PROFILE  
DETAIL #1

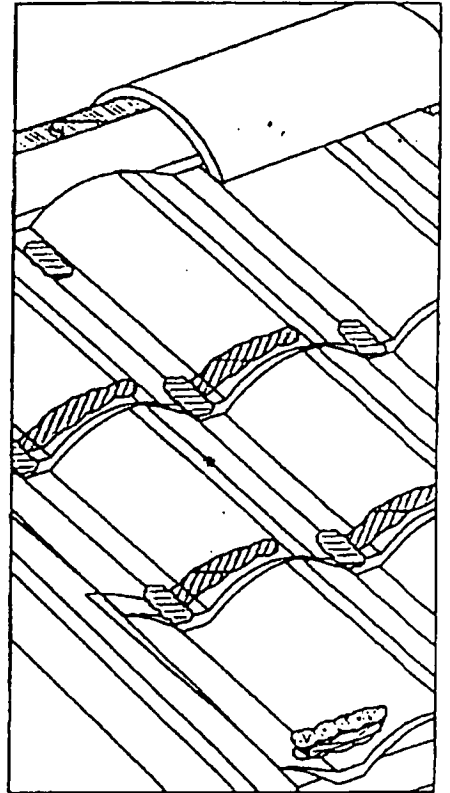
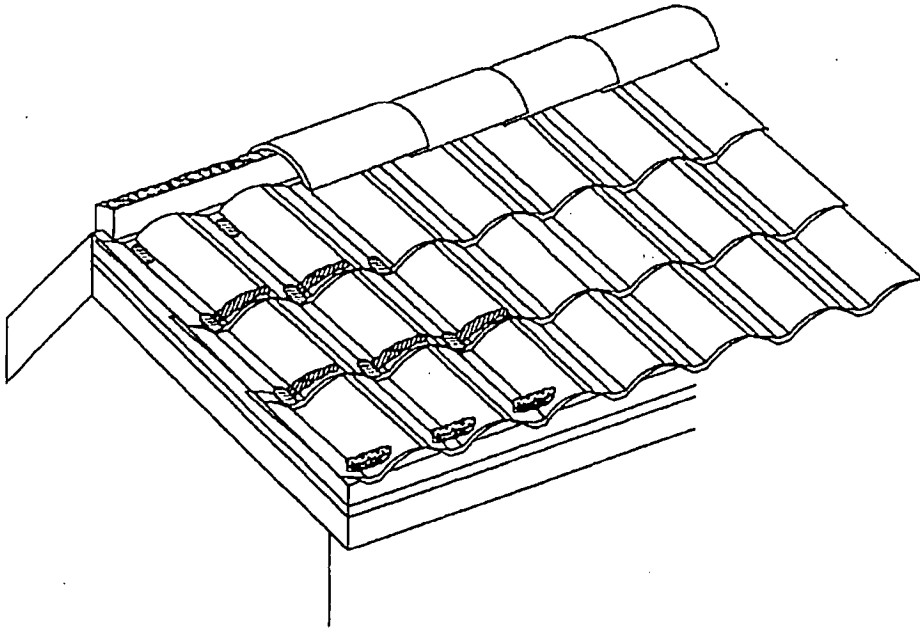


**MEDIUM PROFILE  
DETAIL #2**



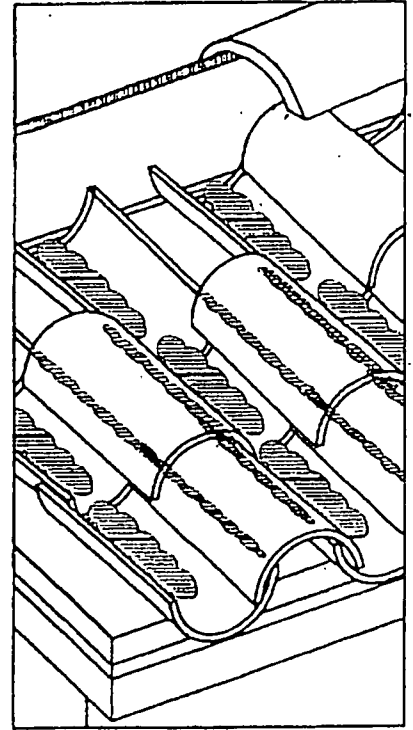
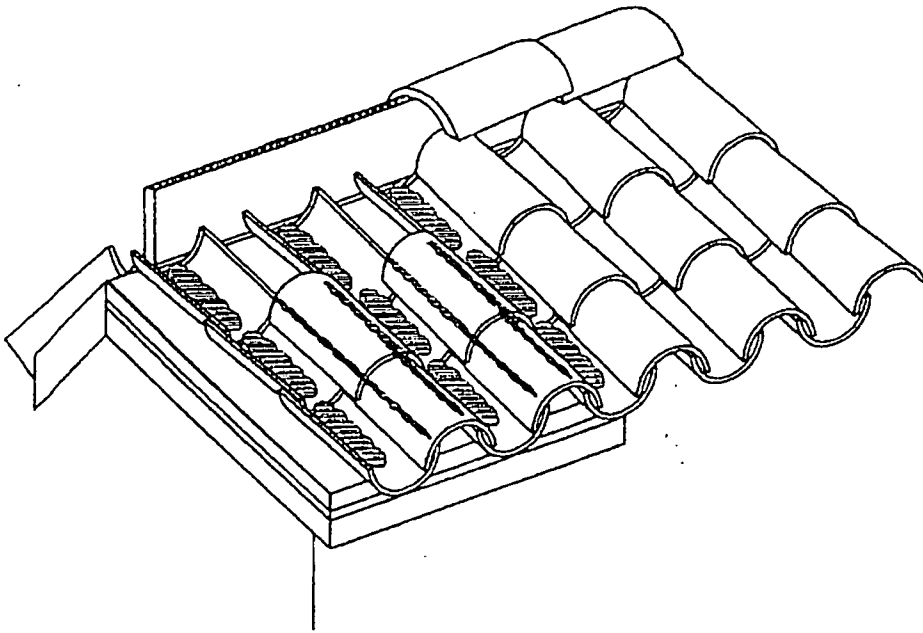
NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 5 of 7

**HIGH PROFILE  
DETAIL #3**



NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 6 of 7

BARREL PROFILE  
DETAIL #4



END OF THIS ACCEPTANCE



NOA No.: 01-1011.01  
Expiration Date: 08/23/06  
Approval Date: 12/27/01  
Page 7 of 7

A. DRAWINGS: NONE

B. TESTS:

| <u>Test Agency</u>             | <u>Test Identifier</u> | <u>Test Name/Report</u>                | <u>Date</u>   |
|--------------------------------|------------------------|--|---------------|
| Center for Applied Engineering | 25-7512-1              | Miami Dade Protocol PA<br>101□         | 01/25/96      |
| Center for Applied Engineering | 25-7512-2              | Miami Dade Protocol PA<br>101□         | 01/25/96      |
| Center for Applied Engineering | 25-7512-3              | Miami Dade Protocol PA<br>101□         | 01/25/96      |
| Center for Applied Engineering | 25-77512-4             | Miami Dade Protocol PA<br>101□         | 01/25/96      |
| Center for Applied Engineering | 25-7781                | Physical Testing                       | 11/7/96       |
| Center for Applied Engineering | 257794-2               | SSTD 11-93                             | 10/3/96       |
| South Research Institute       | 01.8366-014            | ASTM E108-95a                          | February 1997 |
| Walker Engineering, Inc.       | N/A                    | Evaluation of Test on a Two-pad System | 12/16/97      |
| Celotex Corp. Testing Services | 520111-1               | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520111-2               | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520111-3               | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520111-4               | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520111-7               | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520111-8               | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520111-12              | Miami Dade Protocol PA<br>101□         | 12/28/98      |
| Celotex Corp. Testing Services | 520135-3               | Miami Dade Protocol PA<br>101□         | 2/1/99        |
| Celotex Corp. Testing Services | 520135-4               | Miami Dade Protocol PA<br>101□         | 2/1/99        |
| Celotex Corp. Testing Services | 520135-5               | Miami Dade Protocol PA<br>101□         | 2/1/99        |

- C. **CALCULATIONS:** Walker Engineering, Inc., Evaluation of Test on a Two-pad System. Dated 12/16/97
  - D. **MATERIAL CERTIFICATIONS:** NONE
  - E. **STATEMENTS:** NONE
-



Pell and stick Toward



**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)**

**Polyglass USA Inc.  
150 Lyon Drive  
Fernley, NV 89408**

**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: Polystick P, IR/IRX, TU, TU Plus and MU Underlayments**

**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 NOA # 03-0818.03 and consists of pages 1 through 6.  
The submitted documentation was reviewed by Jorge L. Acebo.



**NOA No 04-0810.03  
Expiration Date: 09/13/06  
Approval Date: 11/24/05  
Page 1 of 6**

## ROOFING COMPONENT APPROVAL

**Category:** Roofing  
**Sub-Category:** Underlayment  
**Material:** SBS , APP Self-Adhering Modified Bitumen

### PRODUCTS DESCRIPTION:

| <u>Product</u>                 | <u>Dimensions</u>                            | <u>Test Specification</u>  | <u>Product Description</u>   |
|--------------------------------|--|----------------------------|--|
| Polystick P underlayment       | Roll:<br>75' x 3'<br>40 mils thick           | ASTM D 1970                | A polyethylene top surface, self-adhering, SBS polymer modified bituminous sheet material for use as an underlayment in sloped roof assemblies. Designed as an ice & rain shield.  |
| Polystick IR/IRX underlayment  | Roll:<br>65'8" x 3'3-3/8"<br>80 mils thick   | TAS 103 and<br>ASTM D 1970 | A fine granular/sand top surface self-adhering, APP polymer modified, fiberglass reinforced, bituminous sheet material for use as an underlayment in sloped roof assemblies. Designed as an ice & rain shield and as a flat roof tile underlayment.                      |
| Polystick TU underlayment      | Roll:<br>32'10" x 3'3-3/8"<br>100 mils thick | TAS 103 and<br>ASTM D 1970 | A heavy granuled surface self adhering, APP polymer modified, fiberglass or polyester reinforced, bituminous sheet material for use as an underlayment in sloped roof assemblies. Designed as a roof tile underlayment.  |
| Polystick TU Plus underlayment | Roll:<br>65'8" x 3'3-3/8"<br>80 mils thick   | TAS 103 and<br>ASTM D 1970 | A non-wicking fabric surfaced, self-adhering, APP polymer modified, fiberglass reinforced with a high strength polyester fabric, bituminous sheet material for use an an underlayment in sloped roof assemblies. Designed as a metal roofing and roof tile underlayment. |
| Polystick MU underlayment      | Roll:<br>65'8" x 3'3-3/8"<br>80 mils thick   | TAS 103 and<br>ASTM D 1970 | A non-wicking fabric surfaced, self-adhering, APP polymer modified, fiberglass reinforced, bituminous sheet material for use an an underlayment in sloped roof assemblies. Designed as a metal roofing and roof tile underlayment.                                       |



NOA No 04-0810.03  
 Expiration Date: 09/13/06  
 Approval Date: 11/24/05  
 Page 2 of 6

**EVIDENCE SUBMITTED:**

| <u>Test Agency</u>              | <u>Test Identifier</u> | <u>Test Name/Report</u> | <u>Date</u> |
|---------------------------------|------------------------|-------------------------|-------------|
| Exterior Research & Design, LLC | #11756.04.01-1         | TAS 103                 | 04/27/01    |
|                                 | #11756.08.01-1         | ASTM D 1970             | 08/14/01    |
|                                 | #02202.08.05           | TAS 103                 | 08/29/05    |
| PRI Asphalt Technologies        | PRI01111               | ASTM D 4977             | 04/08/02    |
|                                 | PUSA-005-02-01         | ASTM D 4977             | 01/31/02    |
|                                 | PUSA-018-02-01         | ASTM D 2523             | 07/14/03    |



## INSTALLATION:

|                     |  |
|---------------------|--|
| <b>Deck Type 1:</b> | Wood, non-insulated, new construction  |
| <b>Base Sheet:</b>  | One or more plies of ASTM D 226 Type II or ASTM D 2626 or Polyprotector UDL or Polyprotector UDL AS. |
| <b>Fastening:</b>   | Nails and tin caps 12" grid, 6" o.c. at laps. (for base sheet only)                                  |
| <b>Membrane:</b>    | Polystick membranes self-adhered.  |
| <b>Surfacing:</b>   | None   |

1. All nails in the deck shall be carefully checked for protruding heads. Re-fasten any loose decking panels, and sweep the deck thoroughly to remove any dust and debris prior to application.
2. Place the underlayment over metal drip edge in accordance with RAS 111.
3. Place the first course of membrane parallel to the eave, rolling the membrane to obtain maximum contact. Remove the release film as the membrane is applied. All side laps shall be a minimum of 3-½" and end laps shall be a minimum of 6." Roll the membrane into place after removing the release strip. Vertical strapping of the roof with Polystick is acceptable. Membrane shall be back nailed in accordance with applicable building code.
4. When applying the membrane in the valley, start at the low point and work to the high point, rolling the membrane from the center outward in both directions.
5. For ridge applications, center the membrane and roll from the center outward in both directions.
6. Roll or broom the entire membrane surface so as to have 100% contact with the surface, giving special attention to lap areas. Polystick TU and TU Plus shall not be left exposed as a temporary roof for longer than 180 days after application. Polyglass reserves the right to revise or alter product exposure times.
7. Flash vent pipes, stacks, chimneys and penetrations in compliance with Roof Assembly current Product Control Notice of Acceptance.
8. All protrusions or drains shall be initially taped with a 6" piece of underlayment. The flashing tape shall be pressed in place and formed around the protrusion to ensure a tight fit. A second layer of Polystick shall be applied over the underlayment.



**LIMITATIONS:**

1. Fire classification is not part of this acceptance.
2. Polystick P and IR/IRX may be used in asphaltic shingles, wood shakes and shingles, non-structural metal roofing, and quarry slate roof assemblies. Polystick P shall not be used as roof tile underlayment.
3. Deck requirements shall be in compliance with applicable building code.
4. Polystick membranes shall be applied to a smooth, clean and dry surface. The deck shall be free of irregularities.
5. Polystick membranes shall not be applied over an existing roof membrane.
6. Polystick P shall not be left exposed as a temporary roof for longer than 30 days after application. Polystick IR/IRX, or MU shall not be left exposed as a temporary roof for longer than 90 days after application. Polystick TU and TU Plus shall not be left exposed as a temporary roof for longer than 180 days after application. Polyglass reserves the right to revise or alter product exposure times.
7. All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.
8. In roof tile application, data for the attachment resistance of roof tiles shall be as set forth in the roof tile manufacturer's Notice. Polystick TU, TU Plus and MU may be used in both adhesive set and mechanically fastened roof tile applications. Polystick IR/IRX is limited to mechanically fastened roof tile applications. The maximum roof slope for use as roof tile underlayment for (direct-to-deck) tile assemblies shall be as described below:

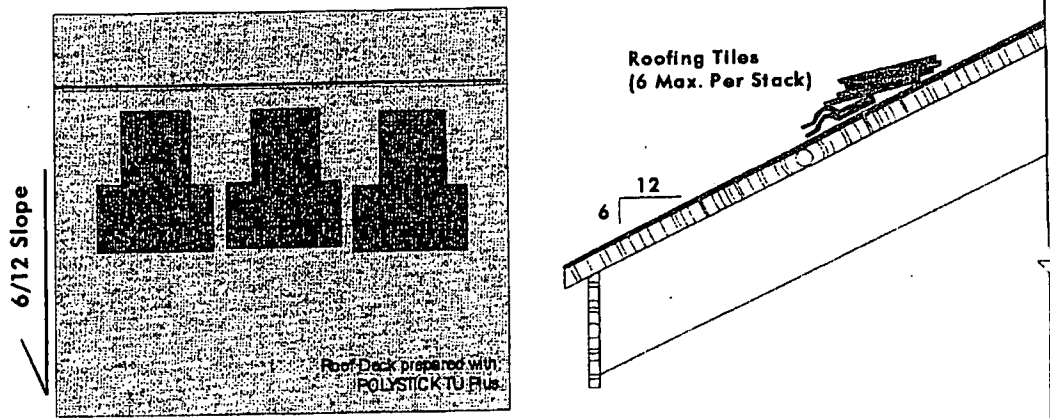
| Tile Profile  | Polystick IR/IRX | Polystick MU  | Polystick TU, TU Plus |
|---------------|------------------|---------------|-----------------------|
| Flat Tile     | 5:12             | No limitation | No limitation         |
| Profiled Tile | Prohibited       | 5:12          | No limitation         |

The above slope limitations can be exceeded only by using battens and counter battens in accordance with the Approved Tile System Notice of Acceptance and applicable Florida Building Code requirements.



### LIMITATIONS: (CONTINUED)

9. Care should be taken during the loading procedure to keep foot traffic to a minimum and to avoid dropping of tile directly on the underlayment. Refer to Polyglass Tile loading detail for loading procedure.



10. Refer to prepared roofing system Product Control Notice of Acceptance for listed approval of this product with specific prepared roofing products. Polystick P, IR/IRX, TU, TU Plus & MU may be used with any approved roof covering Notice of Acceptance listing Polystick P, IR/IRX, TU, TU Plus & MU as a component part of an assembly in the Notice of Acceptance. If Polystick P, IR/IRX, TU, TU Plus & MU is not listed, a request may be made to the Authority Having Jurisdiction (AHJ) or the Miami-Dade County Product Control Department for approval provided that appropriate documentation is provided to detail compatibility of the products, wind uplift resistance, and fire testing results.

### LABELING:

1. All membranes shall bear the imprint or identifiable marking of the manufacturer's name or logo, the Miami-Dade County logo or the following statement: "Miami-Dade County Product Control Approved".

### BUILDING PERMIT REQUIREMENTS:

1. Application for building permit shall be accompanied by copies of the following:
  - 1.1 This Notice of Acceptance.
  - 1.2 Any other documents required by the Building Official or applicable building code in order to properly evaluate the installation of this materials.

**END OF THIS ACCEPTANCE**



NOA No 04-0810.03  
Expiration Date: 09/13/06  
Approval Date: 11/24/05  
Page 6 of 6

*12/20/06 KOLL*



**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)**

**Tamko Building Products, Inc.  
P.O. Box 1404  
Joplin, MO 64801**

**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 Florida Building Code, including the High Velocity Hurricane Zone.

**DESCRIPTION: TAMKO BUR Roofing System over Wood Deck**

**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 renews and revises NOA No. 01-0830.07 and consists of pages 1 through 20.  
The submitted documentation was reviewed by Jorge L. Acebo.

**NOA No.: 06-0613.06  
Expiration Date: 08/23/11  
Approval Date: 09/07/06  
Page 1 of 20**



## ROOFING SYSTEM APPROVAL

**Category:** Roofing  
**Sub-Category:** Built-up Roofing  
**Deck Type:** Wood  
**Maximum Design Pressure** -60 psf  
**Fire Classification:** See General Limitation #1

### TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

TABLE 1

| <u>Product</u>        | <u>Dimensions</u>                                   | <u>Test Specification</u> | <u>Product Description</u>  |
|-----------------------|---|---------------------------|---|
| Awaplan 170 FR        | Roll weight: 98 lbs.; 33' 11" x 39 <sup>3/8"</sup>  | ASTM D 6164 Type I        | A 180 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules and treated for additional fire resistance. Applied in hot asphalt or cold adhesive.                                       |
| Awaplan 170™          | Roll weight: 98 lbs.; 33' 11" x 39 <sup>3/8"</sup>  | ASTM D 6164 Type I        | A 180 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules. Applied in hot asphalt or cold adhesive.  |
| Awaplan Heat Welding™ | Roll weight: 96 lbs.; 25' 5" x 39 <sup>3/8"</sup>   | ASTM D 6164 Type II       | A 250 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules. Applied by torch and also used as a walkway material.   |
| Awaplan Premium FR™   | Roll weight: 101 lbs.; 33' 11" x 39 <sup>3/8"</sup> | ASTM D 6164 Type II       | A 250 g/m <sup>2</sup> polyester reinforced modified bitumen membrane surfaced with granules. Applied by hot asphalt and also used as a walkway material.   |
| Awaplan Premium™      | Roll weight: 101 lbs.; 33' 11" x 39 <sup>3/8"</sup> | ASTM D 6164 Type II       | A 250 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules. Applied in hot asphalt or cold adhesive, and also used as a walkway material.   |
| Awaflex               | Roll weight: 76 lbs.; 33' x 39-3/8"                 | ASTM D 5147               | SBS modified cap sheet constructed with a 155gm/m <sup>2</sup> non- woven polyester mat saturated with asphalt, coated on both sides with SBS rubber modified asphalt and surfaced with ceramic granules for UV protection. |



NOA No.: 06-0613.06  
 Expiration Date: 08/23/11  
 Approval Date: 09/07/06  
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| <u>Product</u>       | <u>Dimensions</u>   | <u>Test Specification</u> | <u>Product Description</u>   |
|----------------------|---|---------------------------|--|
| Awaflex FR           | Roll weight: 76 lbs;<br>33' x 39-3/8"                               | ASTM D 5147               | SBS FR modified cap sheet constructed with a 155gm/m <sup>2</sup> non-woven polyester mat saturated with asphalt, coated on both sides with SBS rubber modified asphalt, FR treated, and surfaced with ceramic granules for UV protection. |
| Awaplan Versa-Smooth | Roll weight: 100 lbs.<br>33' 11" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 6164<br>Type I     | A 180 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane. Applied in hot asphalt, by torch, or mechanically fastened, as a base ply in 2 ply modified systems.  |
| Awaplan Versa-Flex   | Roll weight: 76 lbs;<br>33' 11" x 39-3/8"                           | ASTM D 6164<br>Type II    | A 190 g/m <sup>2</sup> nonwoven polyester reinforced SBS modified bitumen membrane. Applied in hot asphalt, as a base ply in 2 ply modified systems.   |
| Base-N-Ply®          | Roll weight: 72 lbs.;<br>97.5' x 39-3/8"                            | ASTM D 4601               | Type II asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |
| Glass-Base™          | Roll weight: 72 lbs.;<br>97.5' x 39-3/8"                            | ASTM D 4601               | Type II asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |
| Tam-Cap™             | Roll weight: 83 lbs.;<br>32' 11" x 39-3/8"                          | ASTM D 3909               | Asphalt impregnated and coated felt surfaced with mineral granules used as the top ply in conventional built-up roof membranes.  |
| Tam-Glass Premium™   | Roll weight: 53 lbs.;<br>161' 9" x 39-3/8"                          | ASTM D 2178<br>Type VI    | Type VI asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.  |
| Tam-Ply IV™          | Roll weight: 44 lbs.;<br>161' 9" x 39-3/8"                          | ASTM D 2178<br>Type IV    | Type IV asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.  |
| Type 43 Base Sheet   | Roll weight: 85 lbs.;<br>72' x 36"                                  | ASTM D 2626               | An organic felt reinforced asphalt base sheet. Applied in hot asphalt or mechanically fastened.  |
| Vapor-Chan™          | Roll weight: 86 lbs.;<br>32' 11" x 39-3/8"                          | ASTM D 4897<br>Type II    | Heavy duty fiber glass base sheet impregnated and coated on both sides with asphalt with or without a fine mineral stabilizer. Surfaced on the bottom side with coarse mineral granules embedded in hot asphaltic coating.                 |
| Versa-Base FR™       | Roll weight: 60 lbs.;<br>48' 2" x 39-3/8"                           | ASTM D 5147               | Asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |



| <u>Product</u>                  | <u>Dimensions</u>                      | <u>Test Specification</u> | <u>Product Description</u>   |
|---------------------------------|--|---------------------------|--|
| Versa-Base™                     | Roll weight: 94 lbs.; 48' 2" x 39-3/8" | ASTM D 6163 Type I        | Asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing. |
| Versa-Cap FR™                   | Roll weight: 87 lbs.; 33' x 39-3/8"    | ASTM D 5147               | A fiberglass reinforced, mineral surfaced, SBS modified bitumen top membrane.  |
| Tam-Pro Primer                  | 5 gallon                               | ASTM D 41                 | Asphalt based primer   |
| Tam-Pro Fire Rated Roof Coating | 5 gallon                               | ASTM D2824, type III      | A flame-retardant protective coating that forms a highly reflective surface.   |
| Tam-Pro Fibered Emulsion        | 5 gallon                               | ASTM D1227 Type II        | Protective Coating.  |

**APPROVED INSULATIONS:**

**TABLE 2**

| <b>Product Name</b>          | <b>Product Description</b>                 | <b>Manufacturer (With Current NOA)</b> |
|------------------------------|--|--|
| ACFoam Composite             | Isocyanurate Insulation with perlite facer | Atlas Roofing Corp.                    |
| ACFoam II                    | Isocyanurate Insulation                    | Atlas Roofing Corp.                    |
| ConPearl                     | Expanded perlite mineral fiber             | Conglas                                |
| GAFTEMP Permalite            | Expanded mineral fiber                     | GAF Mat'l. Corp.                       |
| EnergyGuard Fiberboard       | Wood fiber board                           | GAF Mat'l. Corp.                       |
| Wood Fiberboard              | Regular wood fiber insulation              | Generic                                |
| High Density Wood Fiberboard | High Density Wood Fiber insulation board.  | Generic                                |
| Perlite Insulation Board     | Perlite Insulation                         | Generic                                |
| ENRGY 2, ENERGY 3, PSI-25    | Isocyanurate Insulation.                   | Johns Manville                         |
| Fesco Board                  | Rigid perlite roof insulation board.       | Johns Manville                         |
| Structodeck, Structodek FS   | High Density Wood Fiber insulation board.  | Masonite                               |



**APPROVED FASTENERS:**

**TABLE 3**

| <b>Fastener Number</b> | <b>Product Name</b>              | <b>Product Description</b>                             | <b>Dimensions</b>     | <b>Manufacturer (With Current NOA)</b> |
|------------------------|----------------------------------|--|-----------------------|--|
| 1.                     | Dekfast Fasteners #12, #14 & #15 | Insulation fastener for wood, steel and concrete decks |                       | SFS Intec, Inc.                        |
| 2.                     | Dekfast Hex Plate                | Galvalume hex stress plate.                            | 2 7/8" x<br>3 1/4"    | SFS Intec, Inc.                        |
| 3.                     | Dekflat Plate                    | Polypropylene plastic plate.                           | 3" round              | SFS Intec, Inc.                        |
| 4.                     | #12 Roofgrip Fasteners           | Insulation fastener for wood and steel.                |                       | ITW Buildex Corp.                      |
| 5.                     | Metal Plate                      | Galvalume stress plate.                                | 3" round<br>3" square | ITW Buildex Corp.                      |
| 6.                     | Gearlok Plastic Plate            | Polypropylene round plate                              | 3.2"                  | ITW Buildex Corp.                      |
| 7.                     | Olympic Fastener #12 & #14       | Insulation fastener                                    |                       | Olympic Mfg Group, Inc..               |
| 8.                     | Olympic G-2                      | Galvalume AZ55 steel plate                             | 3.5" round            | Olympic Mfg Group, Inc.                |
| 9.                     | Olympic Standard                 | Galvalume AZ50 steel plate                             | 3" round              | Olympic Mfg Group, Inc.                |
| 10.                    | Olympic Polypropylene            | Polypropylene plastic plate                            | 3.25" round           | Olympic Mfg Group, Inc.                |
| 11.                    | Insul-Fixx Fastener              | Insulation fastener for steel and wood decks           |                       | SFS Intec, Inc.                        |
| 12.                    | HD Insul-Fixx Fastener           | Insulation fastener for steel and wood decks           |                       | SFS Intec, Inc.                        |
| 13.                    | Insul-Fixx S Plate               | Galvalume AZ50 steel plate                             | 3" round              | SFS Intec, Inc.                        |
| 14.                    | Insul-Fixx P Plate               | 3" round polyethylene stress plate                     | 3" round              | SFS Intec, Inc.                        |
| 15.                    | Tru-Fast                         | Insulation fastener for steel and wood decks           |                       | The Tru-Fast Corp.                     |
| 16.                    | Tru-Fast Plates                  | Galvalume AZ55 steel plate                             | 3" round              | The Tru-Fast Corp.                     |
| 17.                    | Gripdek Fastener                 | Insulation and Base sheet Fastener                     | Various               | ITW Buildex                            |



**EVIDENCE SUBMITTED:**

| <u>Test Agency/Identifier</u>       | <u>Name</u>                                 | <u>Report</u>      | <u>Date</u>        |
|-------------------------------------|---|--------------------|--------------------|
| Factory Mutual Research Corporation | Comparative Rupture Testing                 | J.I. 4D0A7.AM      | 10.21.98           |
|                                     | Class 1 Fire                                | J.I. 0Z4A3.AM      | 08.27.97           |
|                                     | Class 4470                                  | J.I. 1D4A7.AM      | 10.20.97           |
|                                     | Class 4470                                  | J.I. 3B5A9.AM      | 08.27.97           |
|                                     | Class 4470                                  | 3027787            | 08/14/06           |
|                                     | Class 4470                                  | 3027789            | 08/14/06           |
|                                     | Class 4470                                  | 3027790            | 08/14/06           |
|                                     | Class 4470                                  | 3027791            | 08/14/06           |
| Underwriters Laboratories, Inc.     | Fire Classification – see current directory | R3225              | Published Annually |
|                                     | Wind Uplift Resistance                      | R3225-1 through 13 | 02.17.94           |
| Dynatech Engineering Corporation    | TAS 114                                     | 4440.05.95-2       | 05.01.95           |
|                                     | TAS 114                                     | 4440.05.95-1       | 05.01.95           |
| Exterior Research & Design, LLC.    | TAS 114                                     | 4444.06.98-1       | 06.15.98           |



**APPROVED ASSEMBLIES**

**Deck Type II:** Wood, Insulated

**Deck Description:** 1 9/32" or greater plywood or wood plank. Attached to 2" x 4" wood supports spaced 24" o.c. using #8 x 2 1/2" wood screws spaced 6" o.c. at perimeters and intermediate supports.

**System Type A:** Anchor sheet mechanically fastened; one or more layers of insulation adhered with approved asphalt adhesive.

**All General and System Limitations apply.**

**Anchor Sheet:** One ply of Tamko Glass-Base, Vapor-Chan or Base-N-Ply fastened to the deck as described below:

**Fastening:** *(Option #1)* Attach anchor sheet using 11 ga. annular ring shank nails and 1-5/8" diameter tin caps spaced 9" o.c. in a 4" lap and 9" o.c. in two staggered rows in the center of the sheet.  
*(Meets -52.5 psf, See General Limitation #7.)*

*(Option #2)* Attach anchor sheet using CF Dekfast or #14 Dekfast Fasteners with CF Hex Plates, SFS #12 or HD Insulfixx S, or Buildex Accutrac Fasteners and 3" Square Plates spaced 12" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet.  
*(Meets -60 psf, See General Limitation #7.)*

| <u>Insulation Layer</u> | <u>Fastener Type</u> | <u>Fastening Detail No.</u> | <u>Fasteners Per Board</u> | <u>Fastener Density</u> |
|-------------------------|----------------------|-----------------------------|----------------------------|-------------------------|
|-------------------------|----------------------|-----------------------------|----------------------------|-------------------------|

One or more layers of any of the following insulations:

Approved Type(s): **AC-Foam II, E'NRG'Y 2, E'NRG'Y 2 Plus, IsoTherm R, E'NRG'Y 2 Composite, ISO 95+, ISO 95+ Composite, ISO-Roc, UltraGard Gold, AC-Foam Composite, Pyrox, Multi-Max FA**

|                       |     |     |     |     |
|-----------------------|-----|-----|-----|-----|
| Minimum: 1" x 3' x 4' | N/A | N/A | N/A | N/A |
|-----------------------|-----|-----|-----|-----|

Approved Type(s): **ConPerl, GAFTEMP Permalite, Fesco Board**

|                         |     |     |     |     |
|-------------------------|-----|-----|-----|-----|
| Minimum: 1/2" x 2' x 4' | N/A | N/A | N/A | N/A |
|-------------------------|-----|-----|-----|-----|

Approved Type(s): **Foamglas**

|                       |     |     |     |     |
|-----------------------|-----|-----|-----|-----|
| Minimum: 1" x 2' x 4' | N/A | N/A | N/A | N/A |
|-----------------------|-----|-----|-----|-----|

Approved Type(s): **High Density Wood Fiberboard, Structodek FS**

|                         |     |     |     |     |
|-------------------------|-----|-----|-----|-----|
| Minimum: 1/2" x 4' x 4' | N/A | N/A | N/A | N/A |
|-------------------------|-----|-----|-----|-----|

Approved Type(s): **Fiberglas**

|                            |     |     |     |     |
|----------------------------|-----|-----|-----|-----|
| Minimum: 1 5/16" x 4' x 4' | N/A | N/A | N/A | N/A |
|----------------------------|-----|-----|-----|-----|



**Note: All insulation shall be adhered to the anchor sheet in full mopping of approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft<sup>2</sup>. Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as base layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side facing down.**

**Base Sheet:** (Optional) Install one ply of Type 43 coated base sheet, Glass-Base, Tam-Ply IV, Tam-Glass Premium® or Base-N-Ply® or Versa-Smooth base sheet directly over the top layer of insulation. Adhere in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. If base sheet is applied directly to polyisocyanurate insulation only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.

**Ply Sheet:** Two or more plies of Tam-Glass Premium® or Tam-Ply IV ply sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See specification Number for appropriate number of plies)

**Cap Sheet:** (Optional) One ply of Tam-Cap® adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. (See Tamko application instructions for approved method of installation).

**Surfacing:** (Required if no cap sheet is used) Install one of the following:

1. 1-1½ gallons fibered aluminum coating per square (Tropical Asphalt Products AlumaBrite 120, Tam-Pro FR Aluminum Roof Coating), 3 gallons emulsion roof coating per square, or asphalt surface at an application rate of 20-25 lbs./sq.. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat with an application rate of 60 lbs./sq.; plus gravel or slag with an application rate of 400 or 300 lbs./sq. respectively.

**Maximum Design Pressure:** *(See Anchor Sheet Fastening Options above.)*



**Deck Type II:** Wood, Insulated  
**Deck Description:** 1<sup>9</sup>/<sub>32</sub>" or greater plywood or wood plank  
**System Type B(1):** Base layer of insulation mechanically attached, optional top layer mopped with approved asphalt.

All General and System Limitations apply.

| <u>Insulation<br/>Base Layer</u>                | <u>Fastener<br/>Type</u> | <u>Fastening<br/>Detail No.</u> | <u>Fasteners<br/>Per Board</u> | <u>Fastener<br/>Density</u> |
|---|--------------------------|---------------------------------|--------------------------------|-----------------------------|
| <b>Approved Type(s): AC Foam II, Isotherm R</b> |                          |                                 |                                |                             |
| Minimum: 1.3" x 3' x 4'                         | DekFast S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'                         | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'                         | Gripdek S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'                         | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'                         | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| <b>Approved Type(s): E'NRG'Y 2</b>              |                          |                                 |                                |                             |
| Minimum: 1.4" x 3' x 4'                         | DekFast S                | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                         | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                         | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                         | Gripdek S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                         | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                         | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| <b>Approved Type(s): ISO-Roc</b>                |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 4'                         | DekFast S                | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Tru-Fast S               | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Olympic S/P              | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Gripdek S/P              | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Roofgrip S/P             | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| <b>Approved Type(s): AC Foam Composite</b>      |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 4'                         | Roofgrip                 | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Insulfixx S/P            | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | HD Insulfixx S/P         | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Tru-Fast S               | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Olympic S/P              | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                         | Olympic/G2 Plate         | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| <b>Approved Type(s): E'NRG'Y 2 Plus</b>         |                          |                                 |                                |                             |
| Minimum: 1.5" x 3' x 4'                         | DekFast S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                         | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                         | Insulfixx S/P            | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                         | Gripdek S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                         | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                         | HD Insulfixx S/P         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): Foamglas</b>               |                          |                                 |                                |                             |
| Minimum: 1.5" x 2' x 4'                         | Dekfast P                | [1]                             | 2                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 2' x 4'                         | Tru-Fast S               | [1]                             | 2                              | 1:4 ft. <sup>2</sup>        |



| <u>Insulation<br/>Base Layer</u>             | <u>Fastener<br/>Type</u> | <u>Fastening<br/>Detail No.</u> | <u>Fasteners<br/>Per Board</u> | <u>Fastener<br/>Density</u> |
|--|--------------------------|---------------------------------|--------------------------------|-----------------------------|
| <b>Approved Type(s): Multi-Max</b>           |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 8'                      | DekFast S                | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                      | Tru-Fast S               | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                      | Insulfixx S/P            | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                      | Olympic S/P              | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                      | Roofgrip S/P             | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                      | HD Insulfixx S/P         | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                      | Olympic/G2 Plate         | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| <b>Approved Type(s): Iso 95+</b>             |                          |                                 |                                |                             |
| Minimum: 1.4" x 3' x 4'                      | Dekfast S                | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Insulfixx S/P            | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Gripdek S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Roofgrip S/P             | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | HD Insulfixx S/P         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): Fesco Foam</b>          |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 4'                      | Dekfast S/P              | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                      | Tru-Fast S               | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                      | Insulfixx S/P            | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                      | Olympic S/P              | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                      | Gripdek S/P              | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                      | Roofgrip S/P             | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                      | Olympic/G2 Plate         | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): E'NRG'Y 2 Composite</b> |                          |                                 |                                |                             |
| Minimum: 1.25" x 3' x 4'                     | Dekfast S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | Insulfixx S/P            | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | Olympic S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | Gripdek                  | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | Roofgrip                 | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | Olympic/G2 Plate         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'                     | HD Insulfixx S/P         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): Iso 95+ Composite</b>   |                          |                                 |                                |                             |
| Minimum: 1.4" x 3' x 4'                      | Dekfast S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Insulfixx S/P            | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | HD Insulfixx S/P         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Tru-Fast S               | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                      | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |





**Approved Type(s): ConPerl, GAFTEMP Permalite, Fesco Board**

|                         |                  |     |   |                      |
|-------------------------|------------------|-----|---|----------------------|
| Minimum: 3/4" x 2' x 4' | Dekfast S        | [1] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 3/4" x 2' x 4' | Tru-Fast S       | [1] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 3/4" x 2' x 4' | Gripdek S/P      | [1] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 3/4" x 2' x 4' | Roofgrip S/P     | [1] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 3/4" x 2' x 4' | Olympic/G2 Plate | [1] | 4 | 1:2 ft. <sup>2</sup> |

**Approved Type(s): High Density Wood Fiberboard**

|                         |                  |     |   |                      |
|-------------------------|------------------|-----|---|----------------------|
| Minimum: 1/2" x 4' x 4' | Dekfast S        | [3] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 1/2" x 4' x 4' | Roofgrip S       | [3] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 1/2" x 4' x 4' | Tru-Fast S       | [3] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 1/2" x 4' x 4' | Olympic S        | [3] | 4 | 1:2 ft. <sup>2</sup> |
| Minimum: 1/2" x 4' x 4' | Olympic/G2 Plate | [3] | 4 | 1:2 ft. <sup>2</sup> |

**Note:** Base layer shall be mechanically attached with fasteners and density described. Insulation panels listed are minimum sizes and dimensions; if larger panels are used the number of fasteners per board shall be increased maintaining the same fastener density (See Roofing Application Standard RAS 117 for fastening details).

**Top Layer Insulation**

Approved Type(s): Any of the insulations listed for Base Layer, above.

Approved Type(s): Fiberglas

|                            |     |     |     |     |
|----------------------------|-----|-----|-----|-----|
| Minimum: 1 5/16" x 4' x 4' | N/A | N/A | N/A | N/A |
|----------------------------|-----|-----|-----|-----|

**Note:** Apply top layer of insulation in a full mopping of any approved mopping asphalt within the EVT range and at a rate of 20-40 lbs/100 ft<sup>2</sup>. Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as Base Layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side facing down.

**Base Sheet:** (Optional) Install one ply of Type 43 coated base sheet, Glass-Base, Tam-Ply IV, Tam-Glass Premium® or Base-N-Ply® or Versa-Smooth base sheet directly over the top layer of insulation. Adhere in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. If base sheet is applied directly to polyisocyanurate insulation only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.

**Note:** Type 43 coated base sheet cannot be spot mopped.

**Ply Sheet:** Two or more plies of Tam-Glass Premium® or Tam-Ply IV ply sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See specification number for appropriate number of plies).

**Cap Sheet:** (Optional) One ply of Tam-Cap® adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See Tamko application instructions for approved method of installation).

**Surfacing:** (Required if no cap sheet is used) Install one of the following:

1. 1-1 1/2 gallons fibered aluminum coating per square (Tropical Asphalt Products AlumaBrite 120, Tam-Pro FR Aluminum Roof Coating), 3 gallons emulsion roof coating per square, or asphalt surface at an application rate of 20-25 lbs./sq.. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat with an application rate of 60 lbs./sq.; plus gravel or slag with an application rate of 400 or 300 lbs./sq. respectively.

Maximum Design Pressure:

-45 psf (See General Limitation #9.)



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- Deck Type II:** Wood, Insulated
- Deck Description:**  $1\frac{9}{32}$ " or greater plywood or wood plank. Attached to 2" x 4" wood supports spaced 24" o.c. using #8 x 2½" wood screws spaced 6" o.c. at perimeters and intermediate supports.
- System Type B(2):** Base layer of insulation mechanically fastened; top layer adhered with approved asphalt.

All General and System Limitations apply.

| <u>Insulation Base Layer</u>                    | <u>Fastener Type</u> | <u>Fastening Detail No.</u> | <u>Fasteners Per Board</u> | <u>Fastener Density</u> |
|---|----------------------|-----------------------------|----------------------------|-------------------------|
| Approved Type(s): AC Foam II, E'NRG'Y-2, PSI-25 |                      |                             |                            |                         |
| Minimum: 4' x 4' x 1.5"                         | Olympic S            | [3]                         | 12                         | 1:1.33 ft. <sup>2</sup> |
| Minimum: 4' x 4' x 1.5"                         | SFS Insulfixx S      | [3]                         | 12                         | 1:1.33 ft. <sup>2</sup> |

**Note:** Base layer shall be mechanically attached with fasteners and density described. Insulation panels listed are minimum sizes and dimensions; if larger panels are used the number of fasteners per board shall be increased maintaining the same fastener density (See Roofing Application Standard RAS 117 for fastening details).

| <u>Insulation Top Layer</u>                    | <u>Fastener Type</u> | <u>Fastening Detail No.</u> | <u>Fasteners Per Board</u> | <u>Fastener Density</u> |
|--|----------------------|-----------------------------|----------------------------|-------------------------|
| Approved Type(s): High Density Wood Fiberboard |                      |                             |                            |                         |
| Minimum: 2' x 4' x ½"                          | N/A                  | N/A                         | N/A                        | N/A                     |

**Note:** Apply top layer of insulation in a full mopping of any approved mopping asphalt within the EVT range and at a rate of 20-40 lbs/100 ft<sup>2</sup>. Please refer to Roofing Application Standard RAS 117 for insulation attachment. Insulation listed as Base Layer only shall be used only as base layers with a second layer of approved top layer insulation installed as the final membrane substrate. Composite insulation panels may be used as a top layer placed with the polyisocyanurate side facing down.

**Base Sheet:** (Optional) Install one ply of Type 43 coated base sheet, Glass-Base, Tam-Ply IV, Tam-Glass Premium® or Base-N-Ply® or Versa-Smooth base sheet directly over the top layer of insulation. Adhere in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. If base sheet is applied directly to polyisocyanurate insulation only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.

**Note:** Type 43 coated base sheet cannot be spot mopped.

**Ply Sheet:** Two or more plies of Tam-Glass Premium® or Tam-Ply IV ply sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See specification number for appropriate number of plies).



Cap Sheet: (Optional) One ply of Tam-Cap® adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See Tamko application instructions for approved method of installation).

Surfacing: (Required if no cap sheet is used) Install one of the following:

1. 1-1½ gallons fibered aluminum coating per square (Tropical Asphalt Products AlumaBrite 120, Tam-Pro FR Aluminum Roof Coating), 3 gallons emulsion roof coating per square, or asphalt surface at an application rate of 20-25 lbs./sq.. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat with an application rate of 60 lbs./sq.; plus gravel or slag with an application rate of 400 or 300 lbs./sq. respectively.

Maximum Design Pressure: -60 psf (See General Limitation #7.)



**Deck Type II:** Wood, Insulated

**Deck Description:** <sup>19</sup>/<sub>32</sub>" or greater plywood or wood plank

**System Type C:** One or more layers of insulation simultaneously attached; base layers optional.

**All General and System Limitations apply.**

| <u>Insulation<br/>Base Layer</u>   | <u>Fastener<br/>Type</u> | <u>Fastening<br/>Detail No.</u> | <u>Fasteners<br/>Per Board</u> | <u>Fastener<br/>Density</u> |
|--|--------------------------|---------------------------------|--------------------------------|-----------------------------|
| Approved Type(s): <b>AC-Foam II, Isotherm R</b><br>Minimum: 1.3" x 3' x 4'                 | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>E'NRG'Y 2, Iso 95+, Iso 95+ Composite</b><br>Minimum: 1.4" x 3' x 4'  | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>ISO-Roc, Fesco Foam, AC Foam Composite</b><br>Minimum: 1.5" x 4' x 4' | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>E'NRG'Y 2 Plus</b><br>Minimum: 1.5" x 3' x 4'                         | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>Multi-Max FA</b><br>Minimum: 1.5" x 4' x 8'                           | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>E'NRG'Y 2 Composite</b><br>Minimum: 1.25" x 3' x 4'                   | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>Foamglas</b><br>Minimum: 1.5" x 2' x 4'                               | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>ConPerl, GAFTEMP Permalite, Fesco Board</b><br>Minimum: ½" x 2' x 4'  | N/A                      | N/A                             | N/A                            | N/A                         |
| Approved Type(s): <b>High Density Wood Fiber</b><br>Minimum: ½" x 4' x 4'                  | N/A                      | N/A                             | N/A                            | N/A                         |

**Note: Both layers shall be simultaneously attached; see top layer below for fasteners and density.**

| <u>Insulation<br/>Top Layer</u>   | <u>Fastener<br/>Type</u> | <u>Fastening<br/>Detail No.</u> | <u>Fasteners<br/>Per Board</u> | <u>Fastener<br/>Density</u> |
|---|--------------------------|---------------------------------|--------------------------------|-----------------------------|
| Approved Type(s): <b>ACFoam II, Isotherm R</b><br>Minimum: 1.3" x 3' x 4' | DekFast S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'   | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'   | Gripdek S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'   | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.3" x 3' x 4'   | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Approved Type(s): <b>E'NRG'Y 2</b><br>Minimum: 1.4" x 3' x 4'             | DekFast S                | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'   | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'   | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'   | Gripdek S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'   | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'   | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |



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| <u>Insulation<br/>Top Layer</u>         | <u>Fastener<br/>Type</u> | <u>Fastening<br/>Detail No.</u> | <u>Fasteners<br/>Per Board</u> | <u>Fastener<br/>Density</u> |
|---|--------------------------|---------------------------------|--------------------------------|-----------------------------|
| <b>Approved Type(s): ISO-Roc</b>        |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 4'                 | DekFast S                | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                 | Tru-Fast S               | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                 | Olympic S/P              | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                 | Gripdek S/P              | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'                 | Roofgrip S/P             | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| <b>Approved Type(s): E'NRG'Y 2 Plus</b> |                          |                                 |                                |                             |
| Minimum: 1.5" x 3' x 4'                 | DekFast S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                 | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                 | Insulfixx S/P            | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                 | Gripdek S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                 | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.5" x 3' x 4'                 | HD Insulfixx S/P         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): Multi-Max</b>      |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 8'                 | DekFast S                | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                 | Tru-Fast S               | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                 | Insulfixx S/P            | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                 | Olympic S/P              | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                 | Roofgrip S/P             | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                 | HD Insulfixx S/P         | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| Minimum: 1.5" x 4' x 8'                 | Olympic/G2 Plate         | [4]                             | 11                             | 1:2.9 ft. <sup>2</sup>      |
| <b>Approved Type(s): Iso 95+</b>        |                          |                                 |                                |                             |
| Minimum: 1.4" x 3' x 4'                 | Dekfast S                | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | Insulfixx S/P            | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | Gripdek S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | Roofgrip S/P             | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'                 | HD Insulfixx S/P         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): Fesco Foam</b>     |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 4'                 | Dekfast S/P              | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                 | Tru-Fast S               | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                 | Insulfixx S/P            | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                 | Olympic S/P              | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                 | Gripdek S/P              | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                 | Roofgrip S/P             | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 4' x 4'                 | Olympic/G2 Plate         | [3]                             | 4                              | 1:4 ft. <sup>2</sup>        |



| <u>Insulation<br/>Top Layer</u>                                  | <u>Fastener<br/>Type</u> | <u>Fastening<br/>Detail No.</u> | <u>Fasteners<br/>Per Board</u> | <u>Fastener<br/>Density</u> |
|--|--------------------------|---------------------------------|--------------------------------|-----------------------------|
| <b>Approved Type(s): E'NRG'Y 2 Composite</b>                     |                          |                                 |                                |                             |
| Minimum: 1.25" x 3' x 4'   | Dekfast S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | Tru-Fast S               | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | Insulfixx S/P            | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | Olympic S/P              | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | Gripdek                  | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | Roofgrip                 | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | Olympic/G2 Plate         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.25" x 3' x 4'   | HD Insulfixx S/P         | [2]                             | 3                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): AC Foam Composite</b>                       |                          |                                 |                                |                             |
| Minimum: 1.5" x 4' x 4'  | Roofgrip                 | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'  | Insulfixx S/P            | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'  | HD Insulfixx S/P         | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'  | Tru-Fast S               | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'  | Olympic S/P              | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| Minimum: 1.5" x 4' x 4'  | Olympic/G2 Plate         | [3]                             | 6                              | 1:2.67 ft. <sup>2</sup>     |
| <b>Approved Type(s): Iso 95+ Composite</b>                       |                          |                                 |                                |                             |
| Minimum: 1.4" x 3' x 4'  | Dekfast S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'  | Roofgrip S/P             | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'  | Insulfixx S/P            | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'  | HD Insulfixx S/P         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'  | Tru-Fast S               | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'  | Olympic S/P              | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| Minimum: 1.4" x 3' x 4'  | Olympic/G2 Plate         | [2]                             | 4                              | 1:3 ft. <sup>2</sup>        |
| <b>Approved Type(s): Foamglas</b>                                |                          |                                 |                                |                             |
| Minimum: 1.5" x 2' x 4'  | Dekfast P                | [1]                             | 2                              | 1:4 ft. <sup>2</sup>        |
| Minimum: 1.5" x 2' x 4'  | Tru-Fast S               | [1]                             | 2                              | 1:4 ft. <sup>2</sup>        |
| <b>Approved Type(s): ConPerl, GAFTEMP Permalite, Fesco Board</b> |                          |                                 |                                |                             |
| Minimum: ¾" x 2' x 4'  | Anchorbond S             | [1]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ¾" x 2' x 4'  | Dekfast S                | [1]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ¾" x 2' x 4'  | Tru-Fast S               | [1]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ¾" x 2' x 4'  | Gripdek S/P              | [1]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ¾" x 2' x 4'  | Roofgrip S/P             | [1]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ¾" x 2' x 4'  | Olympic/G2 Plate         | [1]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| <b>Approved Type(s): High Density Wood Fiberboard</b>            |                          |                                 |                                |                             |
| Minimum: ½" x 4' x 4'  | Dekfast S                | [3]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ½" x 4' x 4'  | Roofgrip S               | [3]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ½" x 4' x 4'  | Tru-Fast S               | [3]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ½" x 4' x 4'  | Olympic S                | [3]                             | 4                              | 1:2 ft. <sup>2</sup>        |
| Minimum: ½" x 4' x 4'  | Olympic/G2 Plate         | [3]                             | 4                              | 1:2 ft. <sup>2</sup>        |

**Note: All layers of insulation shall be mechanically attached using the fastener density listed above. The insulation panels listed are minimum sizes and dimensions; if larger panels are used, the number of fasteners shall be increased maintaining the same fastener density. Insulation fasteners shall be tested for withdrawal resistance in compliance with Testing Application Standard TAS 105 to confirm compliance with the wind load requirements. Please refer to Roofing Application Standard RAS 117 for insulation attachment.**



**Base Sheet:** (Optional) Install one ply of Type 43 coated base sheet, Glass-Base, Tam-Ply IV, Tam-Glass Premium® or Base-N-Ply® or Versa-Smooth base sheet directly over the top layer of insulation. Adhere in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. If base sheet is applied directly to polyisocyanurate insulation only a spot or strip mopped application as detailed in this approval is approved; see General Limitation #4.

**Note:** **Type 43 coated base sheet cannot be spot mopped.**

**Ply Sheet:** Two or more plies of Tam-Glass Premium® or Tam Ply IV ply sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Cap Sheet:** (Optional) One ply of Tam-Cap® adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. (See Tamko application instructions for approved method of installation).

**Surfacing:** (Required if no cap sheet is used) Install one of the following:

1. 1-1½ gallons fibered aluminum coating per square (Tropical Asphalt Products AlumaBrite 120, Tam-Pro FR Aluminum Roof Coating), 3 gallons emulsion roof coating per square, or asphalt surface at an application rate of 20-25 lbs./sq.. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat with an application rate of 60 lbs./sq.; plus gravel or slag with an application rate of 400 or 300 lbs./sq. respectively.

**Maximum Design Pressure:** -45 psf (See General Limitation #9.)



**Deck Type 1I:** Wood, Insulated  
**Deck Description:** <sup>19</sup>/<sub>32</sub>" or greater plywood or wood plank. Attached to 2" x 4" wood supports spaced 24" o.c. using #8 x 2½" wood screws spaced 6" o.c. at perimeters and intermediate supports.

**System Type D:** Base sheet attached over insulation.

**All General and System Limitations apply.**

| <u>Insulation Layer</u> | <u>Fastener Type</u> | <u>Fastening Detail No.</u> | <u>Fasteners Per Board</u> | <u>Fastener Density</u> |
|-------------------------|----------------------|-----------------------------|----------------------------|-------------------------|
|-------------------------|----------------------|-----------------------------|----------------------------|-------------------------|

One or more layers of any of the following insulations:

Approved Type(s): **AC-Foam II, E'NRG'Y 2, E'NRG'Y 2 Plus, IsoTherm R, E'NRG'Y 2 Composite, ISO 95+, ISO 95+ Composite, ISO-Roc, UltraGard Gold, AC-Foam Composite, Pyrox, Multi-Max FA**  
 Minimum: 1" x 3' x 4'      N/A      N/A      N/A      N/A

Approved Type(s): **ConPerl, GAFTEMP Permalite, Fesco Board**  
 Minimum: ½" x 2' x 4'      N/A      N/A      N/A      N/A

Approved Type(s): **Foamglas**  
 Minimum: 1" x 2' x 4'      N/A      N/A      N/A      N/A

Approved Type(s): **High Density Wood Fiberboard, Structodek FS**  
 Minimum: ½" x 4' x 4'      N/A      N/A      N/A      N/A

Approved Type(s): **Fiberglas**  
 Minimum: <sup>15</sup>/<sub>16</sub>" x 4' x 4'      N/A      N/A      N/A      N/A

**Note: Top layer shall have preliminary attachment, prior to the installation of the base/anchor sheet, at an application rate of two fasteners per board for insulation boards having no dimension greater than 4 ft., and four fasteners for any insulation board having no dimension greater than 8 ft. All layers of insulation and base sheet shall be simultaneously fastened. See base/anchor sheet below for fasteners and density.**

**Base Sheet:** One ply of Tamko Glass-Base, Vapor-Chan or Base-N-Ply fastened to the deck as described below:

**Fastening:** Attach anchor sheet using CF Dekfast or #14 Dekfast Fasteners with CF Hex Plates, SFS #12 or HD Insulfixx S, or Buildex Accutrax Fasteners and 3" Square Plates spaced 12" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet.

**Ply Sheet:** Two or more four plies of Tam-Glass Premium® or Tam Ply IV ply sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Cap Sheet:** (Optional) One ply of Tam-Cap® adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. (See Tamko application instructions for approved method of installation).

**Surfacing:** (Required if no cap sheet is used) Install one of the following:

- 1-1½ gallons fibered aluminum coating per square (Tropical Asphalt Products AlumaBrite 120, Tam-Pro FR Aluminum Roof Coating), 3 gallons emulsion roof coating per square, or asphalt surface at an application rate of 20-25 lbs./sq. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
- Flood coat with an application rate of 60 lbs./sq.; plus gravel or slag with an application rate of 400 or 300 lbs./sq. respectively.

**Maximum Design Pressure:** -60 psf (See General Limitation #7.)



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**Deck Type 1:** Wood, Non-insulated

**Deck Description:**  $1\frac{9}{32}$ " or greater plywood or wood plank decks. Attached to 2" x 4" wood supports spaced 24" o.c. using #8 x 2½" wood screws spaced 6" o.c. at perimeters and intermediate supports.

**System Type E:** Base Sheet mechanically attached.

**All General and System Limitations apply.**

**Base Sheet:** One ply of Tamko Glass-Base, Vapor-Chan or Base-N-Ply fastened to the deck as described below:

**Fastening:** *(Option #1)* Attach base sheet using 11 ga. annular ring shank nails and 1-5/8" diameter tin caps spaced 9" o.c. in a 4" lap and 9" o.c. in two staggered rows in the center of the sheet.

*(Meets -52.5 psf, See General Limitation #7.)*

*(Option #2)* Attach base sheet using CF Dekfast or #14 Dekfast Fasteners with CF Hex Plates, SFS #12 or HD Insulfixx S, or Buildex Accutrac Fasteners and 3" Square Plates spaced 12" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet.

*(Meets -60 psf, See General Limitation #7.)*

**Ply Sheet:** Two or more plies of Tam-Glass Premium® or Tam Ply IV ply sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Cap Sheet:** (Optional) One ply of Tam-Cap® adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.. (See Tamko application instructions for approved method of installation).

**Surfacing:** (Required if no cap sheet is used) Install one of the following:

1. 1-1½ gallons fibered aluminum coating per square (Tropical Asphalt Products AlumaBrite 120, Tam-Pro FR Aluminum Roof Coating), 3 gallons emulsion roof coating per square, or asphalt surface at an application rate of 20-25 lbs./sq.. Coatings shall be applied according to the manufacturers' recommendations regarding specific application rates and weathering.
2. Flood coat with an application rate of 60 lbs./sq.; plus gravel or slag with an application rate of 400 or 300 lbs./sq. respectively.

**Maximum Design Pressure:** *See Base Sheet Fastening Options above*



## WOOD DECK SYSTEM LIMITATIONS:

- 1 A slip sheet is required with Ply 4 and Ply 6 when used as a mechanically fastened base or anchor sheet.

## GENERAL LIMITATIONS:

1. Fire classification is not part of this acceptance, refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Insulation may be installed in multiple layers. The first layer shall be attached in compliance with Product Control Approval guidelines. All other layers shall be adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq., or mechanically attached using the fastening pattern of the top layer
3. All standard panel sizes are acceptable for mechanical attachment. When applied in approved asphalt, panel size shall be 4' x 4' maximum.
4. An overlay and/or recovery board insulation panel is required on all applications over closed cell foam insulations when the base sheet is fully mopped. If no recovery board is used the base sheet shall be applied using spot mopping with approved asphalt, 12" diameter circles, 24" o.c.; or strip mopped 8" ribbons in three rows, one at each sidelap and one down the center of the sheet allowing a continuous area of ventilation. Encircling of the strips is not acceptable. A 6" break shall be placed every 12' in each ribbon to allow cross ventilation. Asphalt application of either system shall be at a minimum rate of 12 lbs./sq. **Note: Spot attached systems shall be limited to a maximum design pressure of -45 psf.**
5. Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F') value of 275 lbf., as tested in compliance with Testing Application Standard TAS 105. If the fastener value, as field-tested, are below 275 lbf. insulation attachment shall not be acceptable.
6. Fastener spacing for mechanical attachment of anchor/base sheet or membrane attachment is based on a minimum fastener resistance value in conjunction with the maximum design value listed within a specific system. Should the fastener resistance be less than that required, as determined by the Building Official, a revised fastener spacing, prepared, signed and sealed by a Florida Registered Engineer, Architect, or Registered Roof Consultant may be submitted. Said revised fastener spacing shall utilize the withdrawal resistance value taken from Testing Application Standards TAS 105 and calculations in compliance with Roofing Application Standard RAS 117.
7. Perimeter and corner areas shall comply with the enhanced uplift pressure requirements of these areas. Fastener densities shall be increased for both insulation and base sheet as calculated in compliance with Roofing Application Standard RAS 117. Calculations prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant **(When this limitation is specifically referred within this NOA, General Limitation #9 will not be applicable.)**
8. All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform with Roofing Application Standard RAS 111 and applicable wind load requirements.
9. The maximum designed pressure limitation listed shall be applicable to all roof pressure zones (i.e. field, perimeters, and corners). Neither rational analysis, nor extrapolation shall be permitted for enhanced fastening at enhanced pressure zones (i.e. perimeters, extended corners and corners). **(When this limitation is specifically referred within this NOA, General Limitation #7 will not be applicable.)**

**END OF THIS ACCEPTANCE**



NOA No.: 06-0613.06  
Expiration Date: 08/23/11  
Approval Date: 09/07/06  
Page 20 of 20

*Addressive*



**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)**

**Tropical Asphalt Product Corp.  
1904 SW 31 Ave.  
Hallandale FL 33009**

**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 Florida Building Code and the High Velocity Hurricane Zone of the Florida Building Code.

**DESCRIPTION: Tropical Asphalt Roofing Cements and Coatings**

**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 NOA No. 06-0119.03 and consists of pages 1 through 7.  
The submitted documentation was reviewed by Jorge L. Acebo.

**NOA No.: 07-0425.08  
Expiration Date: 08/23/11  
Approval Date: 08/30/07  
Page 1 of 7**



## ROOFING COMPONENT APPROVAL

**Category:** Roofing  
**Sub-Category:** Cements and Coatings  
**Fire Classification:** See General Limitation #1

### EVIDENCE SUBMITTED:

| <u>Test Agency</u>            | <u>Test Identifier</u> | <u>Test Name / Report</u> | <u>Date</u> |
|-------------------------------|------------------------|---------------------------|-------------|
| PRI Asphalt Technologies, Inc | TRA-089-02-01          | ASTM D 4586               | 05/16/06    |
|                               | TRA-090-02-01          | ASTM D 4586               | 05/16/06    |
|                               | TRA-091-02-01          | ASTM D 4586               | 05/16/06    |
|                               | TRA-092-02-01          | ASTM D 2824               | 05/16/06    |
|                               | TRA-093-02-01          | ASTM D 2824               | 05/16/06    |
|                               | TRA-094-02-01          | ASTM D 3019               | 05/16/06    |
|                               | TRA-095-02-01          | ASTM D 41                 | 05/16/06    |
|                               | TRA-096-02-01          | ASTM D 4479               | 05/16/06    |
|                               | TRA-097-02-01          | ASTM D 3019               | 05/16/06    |
|                               | TRA-098-02-01          | ASTM D 4586               | 05/16/06    |
|                               | TRA-079-02-01          | ASTM D 4586               | 10/19/05    |
|                               | TRA-080-02-01          | ASTM D 4586               | 10/19/05    |
|                               | TRA-082-02-01          | TAS 139                   | 10/19/05    |
|                               | TRA-083-02-01          | ASTM D 4479               | 10/21/05    |
|                               | TRA-085-02-02          | ASTM D 41                 | 12/30/05    |
| TRA-078-02-01                 | ASTN D 6083            | 11/22/05                  |             |
| DL Laboratories               | DL-9951-R              | ASTM D 962, Type II       | 04/13/94    |

### PHYSICAL PROPERTIES OF COMPONENTS:

**Trade name:** #101 – Roofcraft Premium Grade All Weather Flashing Cement, Tri-Built AF Plastic Cement

**Application Rate:** This material is applied by trowel or knife at a minimum rate of 1/8" thick, approximately 1 gal/20 sq. ft. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4586 Type I, D 3409

**Description:** An all weather flashing cement that adheres to all surfaces, wet or dry. Blended with select asphalts, cellulose fibers, surfactants, mineral stabilizers, and pure hydrocarbon solvents. Used for protecting, waterproofing, patching and sealing old and new roofs.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.



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**Trade name:** #104 – Asphalt Concrete Primer

**Application Rate:** Min. rate 1gal. /100ft<sup>2</sup> for systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D-41

**Description:** An asphalt concrete primer used as a bonding coat for prime coating, rust proofing, waterproofing and solidification of dust particles and sealing of porosity prior to application of subsequent materials. Apply cold to concrete, felt, plastics, gypsum, glass, wood or metals.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** # 701 – Armour Plate

**Application Rate:** Applied with a trowel or knife at a minimum rate of 1/8" thick, approximately 1 gal/20 sq. ft. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4586

**Description:** An asbestos free asphaltic base, multipurpose plastic roof cement for repairing leaks, cracks, and holes in concrete, steel, or metal roofs. For use on all flashing around skylights, gutters, and in all crevices. It can also be applied as a heavy-duty foundation coating.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** # 501 Taurus AF Roof Cement,  
Tri-Built AF Flashing Cement

**Application Rate:** Applied with a trowel or knife at a minimum rate of 1/8" thick, approximately 1 gal/20 sq. ft. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4586

**Description:** An asbestos free asphaltic base, multipurpose plastic roof cement for repairing leaks, cracks, and holes in concrete, steel, or metal roofs. For use on all flashing around skylights, gutters, and in all crevices. It can also be applied as a heavy-duty foundation coating.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.



**Trade name:** # 202 – Tropi-Cote Plastic Fibered Liquid Roof Coating

**Application Rate:** For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4479

**Description:** Asbestos free liquid asphalt waterproofing fortified with mineral fibers. Remove loose gravel and dirt before application and make sure surface is clean and dry. Adheres to any solid surface, concrete, all metals, wood, felt, plastics and glass. Applied cold with brush or mop.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** # 216 – AF Modified Bitumen Adhesive,  
Tri-Built AF Modified Bitumen Adhesive Brush Grade

**Application Rate:** Apply with 1/8"-1/4" notched squeegee, standard roofing brush or roller at an approximate rate of 1 gal/50 to 60 sq. ft. Overlaps should be 4" wide. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 3019 Type III

**Description:** Asbestos free rubberized adhesive made from oxidized base asphalts, blended with a high concentration of SBS rubber and reinforcing fibers. For use in applying modified adhesive sheets. Also recommended for applying glass base ply, as lap cement. Surface must be clean and dry before application.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** # 2100 Rubberized All-Weather Flashing Cement Trowel Grade,  
Tri-Built AF Modified Bitumen Flashing Cement Trowel Grade

**Application Rate:** Applied with a trowel at a minimum rate of 1/8" thick, approximately 1 gal/20 sq. ft. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 3019 Type III, and D 3409

**Description:** Asbestos free flashing compound manufactured with high-grade oxidized base asphalts. Fortified with SBS rubber. Special surfactants make this product applicable in any climate or weather. Manufactured to adhere to all solid surfaces, wet or dry. For use in repairing, sealing, or adhering to all types of roofing. A trowel grade modified adhesive as well as flashing cement. Uses include fixing leaks around vent pipes, skylights, valleys, chimneys, joints, starting shingles as well as patching small holes. May be used to repair modified asphalt sheets as well as conventional roofing. Not for use on coal tar roofs.

**Container Size:** 1, 3, 55 gallons and 10.5 ounce caulking tubes.



**Trade name:** # 120 – AF Aluma-Brite Aluminum Asphalt Fibered Roof Coating,  
Tri-Built AF Fibered Aluminum Coating

**Application Rate:** For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 2824 Type III

**Description:** Asbestos free, heavy duty, fibered aluminum asphalt coating that provides reflectivity while ensuring protection against moisture and corrosion. Do not work coating excessively during application. Attempt to brush or roll on in one direction. Can be used on all types of roofs, well suited for modified bitumen.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** # 126 – Aluma-Glow Non Fibered Aluminum Paint,  
Tri-Built AF Non Fibered Aluminum Coating

**Application Rate:** For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 2824 Type I

**Description:** A brilliant, durable paint designed to withstand extreme weather conditions. This product uses paint grade aluminum paste and a leafing finish. For use on roofs of all types, storage tanks, masonry surfaces, and structural steel. It also is a rust and corrosion resistant coating for all types of metal surfaces. Application of this product may be done with a mop, brush or spray equipment.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** # 711 – Tite-Seal Cold Process Lap Cement

**Application Rate:** For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 3019 Type III

**Description:** Asbestos free, fibered, cold process cement. For use as interplay adhesive for built up roofs. May also be used as an extra heavy bodied roof coating. Apply to clean dry surface using stiff brittle brush, roller, or spray equipment.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.



**Trade name:** Eternalastic and Eternamastic elastomeric roof coating

**Application Rate:** This material is applied by spray equipment, roller, knife or brush. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** Miami Dade Protocol TAS-143.

**Description:** A styrene acrylic based elastomeric designed specifically to recover, restore, repair or create a roofing system. Used for protecting, waterproofing, patching and sealing new and old roofs.

**Container Size:** 1, 5, 55 gallons and quart tubes. Note all cautions on container label.

**Trade name:** #410 – Quick Dry Asphalt Primer,  
Tri-Built AF Quick Dry Primer

**Application Rate:** Apply by brush or spray at a minimum rate of 1 gal. /100ft<sup>2</sup> for systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D-41

**Description:** A general purpose asphalt based primer used as a bonding coat for preparation of roof surfaces prior to the application of subsequent roofing materials.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**Trade name:** #509 – Modified Mastic

**Application Rate:** This material is applied by trowel at a minimum rate of 1/8" thick, approximately 1 gal/8 sq. ft. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4586

**Description:** A polymer modified Mastic that is used on wet/dry roof surfaces.

**Container Size:** 1, 3, 5 gallons. Note all cautions on container label.

**Trade name:** #805 – Commercial Grade Roof Cement

**Application Rate:** This material is applied by trowel at a minimum rate of 1/8" thick, approximately 1 gal/8 sq. ft. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4586

**Description:** A asphalt based plastic roof cement for repairing roof materials.

**Container Size:** 1, 3 5 gallons. Note all cautions on container label.



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Expiration Date: 08/23/11  
Approval Date: 08/30/07  
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**Trade name:** # 950 - Eternamastic

**Application Rate:** This material is applied by trowel or brush at a minimum rate of 1/8" thick. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** TAS-139

**Description:** A white acrylic based polymer patching compound used for protecting, waterproofing and repairing new or old roofs.

**Container Size:** 1, 5, 55 gallons and quart tubes. Note all cautions on container label.

**Trade name:** # 4003 – Fibered Roof Resaturant and Sealer

**Application Rate:** Apply by brush or spray at the rate of 2 to 4 gal/100ft.<sup>2</sup> Application rate may vary depending on the roof surface. For systems approvals, refer to specific Roof Assembly, Product Control Notice of Acceptance.

**Specifications:** ASTM D 4479

**Description:** An asphalt based resaturant with penetrating oils and solvents used for rejuvenating aged built up roofing.

**Container Size:** 1, 5, 55 gallons. Note all cautions on container label.

**LIMITATIONS:**

1. Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Tropical Asphalt products shall not be applied in inclement weather conditions.
3. The product listed herein are components of roof assemblies and are approved for use with roof assemblies that list any of the products listed herein as part of their roof assemblies Notice of Acceptance. If a product is not listed as part of roof assemblies Notice of Acceptance, a request may be made to the local building official or the Miami Dade Building Code Compliance Office for approval provided that appropriate documentation is provided.
4. All products listed herein shall have an unannounced follow-up quality control program from an approved listing agency, and shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code. Follow up test results shall be made available to BCCO upon request.
5. All approved products listed herein shall be labeled in compliance with TAS 121.
6. Change in materials, use, or manufacture of any of the products listed herein shall be cause for termination of this Notice of Acceptance.
7. This maintenance coating systems shall not be applied over, prepared roofing; i.e., fiber-cement shingles, quarry slate, cement or clay roof tile, metal shingles, wood shingles or shakes.
8. Tropical Asphalt products shall be applied in accordance with manufacturer's published application instructions.

**END OF THIS ACCEPTANCE**



NOA No.: 07-0425.08  
Expiration Date: 08/23/11  
Approval Date: 08/30/07  
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RT 600



**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)**

**OSI Sealants, Inc.  
7405 Production Dr.  
Mentor, OH 44060**

**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: Pro-Series RT-600 Roof Tile Adhesive**

**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 consists of pages 1 through 8.  
The submitted documentation was reviewed by Frank Zuloaga, RRC.



**NOA No.: 02-0617.07  
Expiration Date: 10/21/07  
Approval Date: 07/31/02  
Page 1 of 8**

## ROOFING SYSTEM APPROVAL

**Category:** Roofing  
**Sub-Category:** Roof Tile Adhesive

### 1. SCOPE

This renews **Pro-Series RT-600 Roof Tile Adhesive**, a manufactured by OSI Sealants, Inc., as described in Section 2 of this Notice of Acceptance, designed to comply with the Florida Building Code (FBC) for use with approved Roof Tile Systems.

### 2. PRODUCT DESCRIPTION

| <u>Product</u>    | <u>Dimensions</u>                                  | <u>Test Specifications</u> | <u>Product Description</u>  |
|-------------------|--|----------------------------|---|
| Pro-Series RT-600 | 10.5 oz. cartridges, which come 12 units per case. | TAS 123                    | A single component adhesive of synthetic rubber and resins used for repairs of existing tile roofs. |

### 3. LIMITATIONS

- 3.1. Fire classification is not part of this acceptance.
- 3.2. Existing roof to be repaired shall have been installed in strict compliance with tile manufacturer's recommendations and the applicable building code at time of installation, including approved mandatory inspections.
- 3.3. No more than twenty-five adjacent loose tiles are to be adhered in any one area with a maximum amount of 25 % of total roof tiles per given roof or roof section. In roofs where Pro series RT-600 has been used to adhere loose roof tiles, no allowance for loose roof tiles shall be made.
- 3.4. Pro Series RT-600 adhesive must make contact with both surfaces to be bonded
- 3.5. Pro Series RT-600 shall not be exposed to the weather.
- 3.6. Pro Series RT-600 shall not be contact with expanded or extruded polystyrene materials.
- 3.7. Pro Series RT-600 shall not be in contact with tar/asphalt impregnated materials
- 3.8. Pro Series RT-600 may be used with any approved roof assembly listing Pro Series RT-600 as a component part of an assembly in the approval.
- 3.9. Pro Series RT-600 shall be approved on existing concrete, clay roof tile, slate or other composition roof tiles of all profiles.
- 3.10. Pro Series RT-600 shall mark each packing container or label with manufacturer's name, address, shelf life of product, and with the Miami-Dade logo or the words "Miami-Dade Approved."

### 4. INSTALLATION:

1. Remove or lift existing loose tile sufficiently to enable the application of a minimum of 1" by 1" bead of adhesive to the existing mortar patty, both the mortar patty and the underside of tile shall be in contact with adhesive. In addition apply a 3/8 thick x 2" long bead of adhesive on the head of previous tile.
2. Location of adhesive to mortar patty and adjacent tiles shall be in compliance with the following Details:



NOA No.: 02-0617.07  
Expiration Date: 10/21/07  
Approval Date: 07/31/02  
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- a) Detail "A" for Low Profile tiles
  - b) Detail "B" for Flat profile tiles
  - c) Location of adhesive on head of previous tile shall be in compliance with Detail "C" for each tile profile.
3. Repair and attachment of Hip or Ridge tiles shall be in compliance with Detail "D".

**5. LABELING**

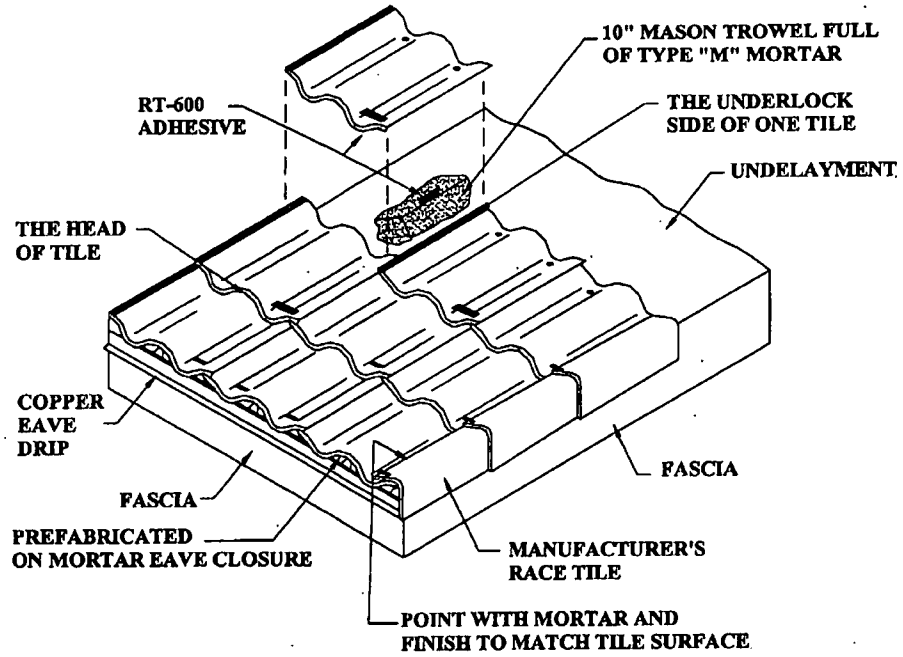
Pro Series RT-600 Roof Tile Adhesive shall be labeled with Standard Conditions herein.

**6. BUILDING PERMIT REQUIREMENTS:**

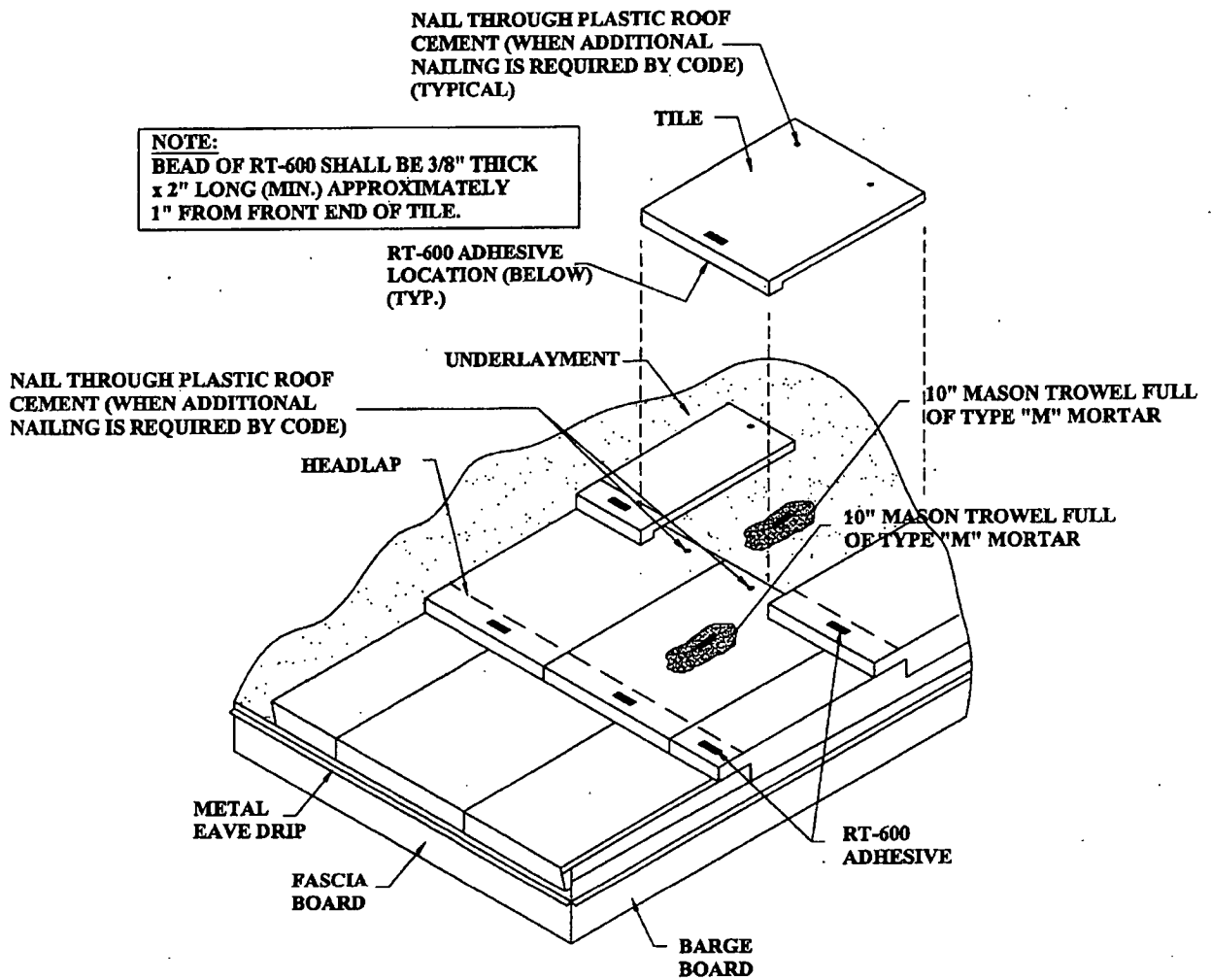
Any documents required by the Building Official or the Florida Building Code (FBC) in order to properly evaluate the installation of this system.



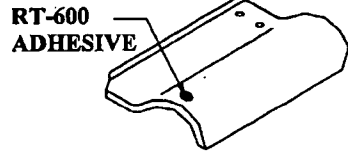
**DETAIL "A"**



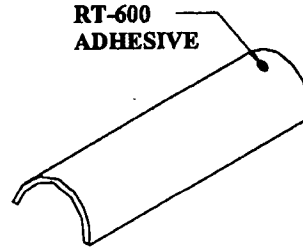
## DETAIL "B"



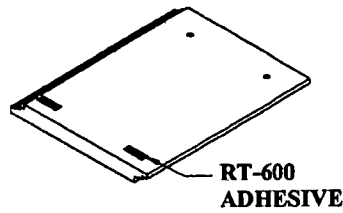
DETAIL "C"



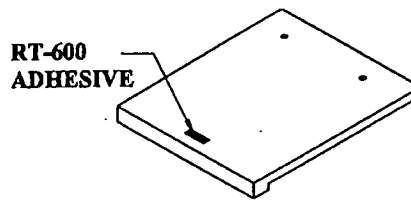
SPANISH "S" TILE



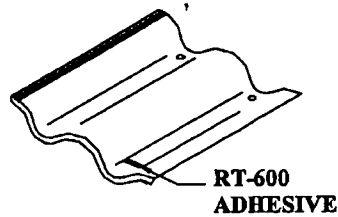
BARREL TILE



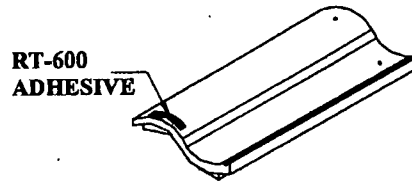
EXTRUDED FLAT TILE



BERMUDA TILE



VILLA / DOUBLE ROLL TILE

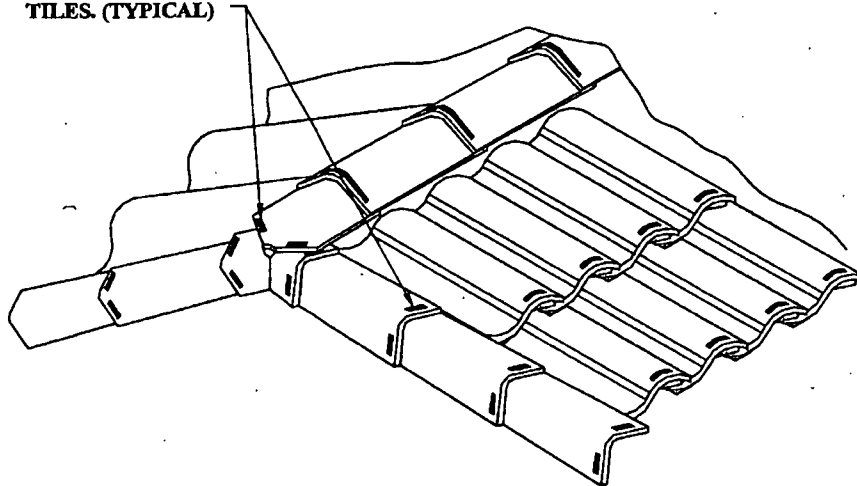


HIGH PROFILE "S" TILE



**DETAIL "D"**

PROVIDE (2) - 3/8" x 2" BEADS  
OF RT-600 PLACED 1/2" TO 3/4"  
IN FROM ENDS OF OVERLAPPING  
TILES. (TYPICAL)



**HIP & RIDGE INSTALLATION**

**END OF THIS ACCEPTANCE**



NOA No.: 02-0617.07  
Expiration Date: 10/21/07  
Approval Date: 07/31/02  
Page 7 of 8



**EVIDENCE SUBMITTED**

| <u>Test Agency/Identifier</u>      | <u>Name</u>   | <u>Date</u> |
|------------------------------------|---------------|-------------|
| Applied Research Laboratories      | ASTM D 897    | 07/07/91    |
| Construction Research Laboratories | Static Uplift | 02/04/94    |
| Applied Research Laboratories      | TAS 123 "A"   | 10/01/96    |



# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

9-2 2009

Page 1 of 2

| PERMIT #        | OWNER/ADDRESS/CONTRACTOR    | INSPECTION TYPE                      | RESULTS                | COMMENTS                         |
|-----------------|-----------------------------|--------------------------------------|------------------------|----------------------------------|
| 9246            | MACDOUGALL                  |                                      |                        |                                  |
| 9:30            | 23 N. RIVER RD              | FINAL<br>A/C                         | PASS                   | Close<br>INSPECTOR <i>JA</i>     |
| <del>9215</del> | <del>WINZUP</del>           | <del>DRYING</del>                    | <del>OK</del>          |                                  |
| 10:00           | 11 MIDDLE RD                | <del>DRYING</del><br><del>COOP</del> | <del>OK</del>          | INSPECTOR <i>JA</i>              |
| 9181            | HARDIN                      |                                      |                        |                                  |
| 10:30           | 27 S. RIVER RD<br>STRATICON | FOOTING                              | PASS                   | INSPECTOR <i>JA</i>              |
|                 | OTT                         | CODE ENF.                            |                        |                                  |
|                 | 26 N. SEWALLS PT.           | SHOWS ON<br>PROPERTY LINE            | OK                     | PIC TAKEN<br>INSPECTOR <i>JA</i> |
|                 | ARMSTRONG                   | CODE ENF                             |                        | APPEAR'S                         |
|                 | 41 W. HIGH PT               | SHOWS ON<br>PROPERTY LINE            | CHECK<br>PROPERTY LINE | UNFOUNDED<br>INSPECTOR <i>JA</i> |
| <del>9211</del> | <del>Carelli</del>          | <del>AC Final</del>                  |                        |                                  |
| <del>?</del>    | <del>4 Middle Rd</del>      |                                      |                        | <del>TUES 9/8</del>              |
|                 | <del>HISQUI</del>           |                                      |                        | INSPECTOR                        |
| 9000            | CD2                         | PREPORN DWG                          |                        |                                  |
|                 | 4 RIVER OAK                 | CURB                                 | PASS                   | INSPECTOR <i>JA</i>              |



**9358**

**PARTIAL REROOF**

---



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

## BUILDING PERMIT CARD

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

|                        |                   |                       |                                 |
|------------------------|-------------------|-----------------------|---------------------------------|
| PERMIT NUMBER:         | 9358              | DATE ISSUED:          | 01/28/2010<br><i>FOR 2/1/10</i> |
| SCOPE OF WORK:         | PARTIAL RE-ROOF   |                       |                                 |
| CONDITIONS :           | FLAT ROOF ONLY    |                       |                                 |
| CONTRACTOR:            | FRAMPTON ROOFING  |                       |                                 |
| PARCEL CONTROL NUMBER: | 13384100200000370 | SUBDIVISION           | HIGH POINT<br><i>Lot 39</i>     |
| CONSTRUCTION ADDRESS:  | 11 MIDDLE RD.     |                       |                                 |
| OWNER NAME:            | WINZURK           |                       |                                 |
| QUALIFIER:             | JAMES FRAMPTON    | CONTACT PHONE NUMBER: | 263-0842                        |

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

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

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

### REQUIRED INSPECTIONS

|                        |       |
|------------------------|-------|
| UNDERGROUND PLUMBING   | _____ |
| UNDERGROUND MECHANICAL | _____ |
| STEM-WALL FOOTING      | _____ |
| SLAB                   | _____ |
| ROOF SHEATHING         | _____ |
| TIE DOWN /TRUSS ENG    | _____ |
| WINDOW/DOOR BUCKS      | _____ |
| ROOF DRY-IN/METAL      | _____ |
| PLUMBING ROUGH-IN      | _____ |
| MECHANICAL ROUGH-IN    | _____ |
| FRAMING                | _____ |
| FINAL PLUMBING         | _____ |
| FINAL MECHANICAL       | _____ |
| FINAL ROOF             | _____ |

|                        |       |
|------------------------|-------|
| UNDERGROUND GAS        | _____ |
| UNDERGROUND ELECTRICAL | _____ |
| FOOTING                | _____ |
| TIE BEAM/COLUMNS       | _____ |
| WALL SHEATHING         | _____ |
| INSULATION             | _____ |
| LATH                   | _____ |
| ROOF TILE IN-PROGRESS  | _____ |
| ELECTRICAL ROUGH-IN    | _____ |
| GAS ROUGH-IN           | _____ |
| METER FINAL            | _____ |
| FINAL ELECTRICAL       | _____ |
| FINAL GAS              | _____ |
| BUILDING FINAL         | _____ |

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

RECEIVED  
RT-26-10

Town of Sewall's Point

Date: 1/25/10 BUILDING PERMIT APPLICATION Permit Number: 9358

OWNER/TITLEHOLDER NAME: Ute Wierzak Phone (Day) 781-4686 (Fax) \_\_\_\_\_

Job Site Address: 11 Middle Rd City: Stuart State: FLA Zip: 34996

Legal Description High Point Lot 37 or 342/2303 Parcel Control Number: 13-38-41-002-000-0030-7

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

Scope of work (please be specific): Reeroof

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

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

COST AND VALUES: (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 3650  
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
Is subject property located in flood hazard area? VE10  AE9  AE8   
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:  
Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
(Fair Market Value of the Primary Structure only, Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Frampton Roofing Inc Phone: 263-0842 Fax: 546-4586

Street: 8645 SE Alabama Pl. City: Hobe Sound State: FLA Zip: 33455

State License Number: RC-0066507 OR: Municipality: Martin County License Number: SP-01848

LOCAL CONTACT: \_\_\_\_\_ Phone Number: \_\_\_\_\_

DESIGN PROFESSIONAL: \_\_\_\_\_ Lic# \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

AREAS SQUARE FOOTAGE: Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios/Porches: 400 Enclosed Storage: \_\_\_\_\_

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

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

NOTICES TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER SIGNATURE: (required)  
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)  
Ute Wierzak

State of Florida, County of: Martin

This the 22nd day of January, 2010

by UTE I. WIERZAK who is personally

known to me or produced as identification. \_\_\_\_\_

My Commission Expires: \_\_\_\_\_  
#DD 724736

CONTRACTOR SIGNATURE: (required)  
James A. G...

On State of Florida, County of: Martin

This the 22nd day of January, 2010

by JAMES A. G... who is personally

known to me or produced as identification. \_\_\_\_\_

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

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



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

Site Provided by...  
governmentmax.com T1.13

### Summary

print | | | | | Owner  
1 of 1

#### Parcel Info

##### Summary

- Land
- Residential
- Improvement
- Commercial
- Image
- Sales & Transfers
- Assessments =>
- Taxes =>
- Exemptions =>
- Parcel Map =>
- Full Legal =>

| Parcel ID                | Unit Address | Serial ID | Index Order | Commercial | Residential |
|--------------------------|--------------|-----------|-------------|------------|-------------|
| 13-38-41-002-000-00370-7 | 11 MIDDLE RD | 27725     | Owner       | 0          | 1           |

##### Summary

**Property Location** 11 MIDDLE RD  
**Tax District** 2200 Sewall's Point  
**Account #** 27725  
**Land Use** 101 0100 Single Family  
**Neighborhood** 120000  
**Acres** 0.344

**Legal Description**  
**Property Information**  
 HIGH POINT LOT 37 OR 342/2303

#### Search By

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

**Owner Information**  
**Owner Information**  
 WINZURK UTE INGEBORG (TR)

**Mail Information**  
 11 MIDDLE RD  
 STUART FL 34996

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

**Market Land Value** \$231,300  
**Market Impr Value** \$203,560  
**Market Total Value** \$434,860

#### Site Functions

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

**Recent Sale**  
**Sale Amount** \$0

**Sale Date** 6/6/2008  
**Book/Page** 2332 2685

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

Legal disclaimer / Privacy Statement

Data updated on 1/14/2010



NOTICE OF COMMENCEMENT
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00

PERMIT #: \_\_\_\_\_ TAX FOLIO #: 13-38-41-002-000-00370-7

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 (AND STREET ADDRESS IF AVAILABLE): High Point Lot 37 of 342/2203

GENERAL DESCRIPTION OF IMPROVEMENT: RELOFF Flat Deck

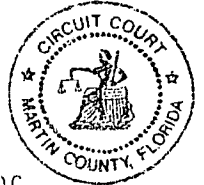
OWNER NAME: Ute W. Wizek
ADDRESS: 11 M. J. Rd Stuart, FLA 34996
PHONE NUMBER: 781-4686 FAX NUMBER: \_\_\_\_\_

INTEREST IN PROPERTY: OWNER
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): \_\_\_\_\_

CONTRACTOR: Frampton Roofing Inc
ADDRESS: 8645 E. Alabama Pl. Hobe Sound Fla 33455
PHONE NUMBER: 262-0842 FAX NUMBER: 561-4582

SURETY COMPANY (IF ANY): \_\_\_\_\_ THIS IS TO CERTIFY THAT THE FOREGOING \_\_\_\_\_ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
BOND AMOUNT: \_\_\_\_\_

LENDER/MORTGAGE COMPANY: \_\_\_\_\_ BY: \_\_\_\_\_ DATE: 1/25/10
ADDRESS: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_



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 NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES \_\_\_\_\_ OF \_\_\_\_\_ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES:
PHONE NUMBER: \_\_\_\_\_ FAX NUMBER: \_\_\_\_\_

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: \_\_\_\_\_
(EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED).

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 1, SECTION 713.13, FLORIDA STATUTES AND CAN RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE COMMENCING WORK OR RECORDING YOUR NOTICE OF COMMENCEMENT.

\* Ute W. Wizek
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE \_\_\_\_\_

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 22 DAY OF Jan, 2010

BY: \_\_\_\_\_ AS \_\_\_\_\_ FOR \_\_\_\_\_
NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN OR PRODUCED IDENTIFICATION \_\_\_\_\_

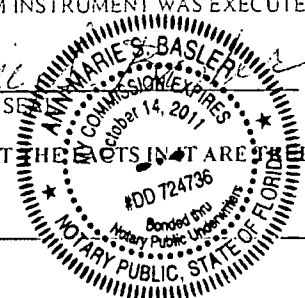
TYPE OF IDENTIFICATION PRODUCED \_\_\_\_\_

Notary Signature/ Seal: Marie S. Basler, Notary Public, State of Florida, Commission Expires October 14, 2011

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE CONTENTS ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

\* Ute W. Wizek
(Signature of Natural Person Signing Above)

INSTR 4 2189928 OR BK 02433 PG 1636 RECD 01/25/2010 10:34:49 AM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter





# Frampton Roofing, Inc.

8645 SE Alabama Place  
Hobe Sound, FL 33455  
Office 772-546-4586 / Cell 772-263-0842  
RC 0066507 / Palm Beach U16928 / Martin SP01848

DATE: 1/19/10

TO: Ute Winzurk  
781-4686

JOB SITE: 11 Middle Road  
Sewell's Pt

*Tear off and dispose of existing flat roof  
Replace with 5-ply hot mopped system with modified cap  
Disconnect and re-connect solar panels and piping  
Tie in tile roof around perimeter of flat roof  
Make repairs around old A/C tunnel*

TOTAL \_\_\_\_\_ \$5,650.00

PAYMENTS: ½ deposit to start with the remainder upon completion

RESPECTFULLY SUBMITTED BY:  \_\_\_\_\_ DATE: 1/19/10  
JAMES A. FRAMPTON, PRES.

**ACCEPTANCE OF PROPOSAL:** Your signature indicates that the above prices, specifications and conditions are satisfactory and hereby accepted. We are authorized to perform the work as specified and payments will be made as outlined above. (This proposal may be withdrawn by us if not accepted within 90 days.)

SIGNATURE:  \_\_\_\_\_ DATE: 1-22-10



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

RE-ROOF PERMIT CERTIFICATION

PERMIT # \_\_\_\_\_

CONTRACTOR'S NAME: Frampton Roofing Inc PHONE #: 263-0842 FAX: 546-4586

OWNER'S NAME: Ute Winzurb

CONSTRUCTION ADDRESS: 11 Middle Rd. CITY Stuart STATE FLA.

RE-ROOF:  RESIDENTIAL (SINGLE FAMILY)

COMMERCIAL \*\*--REMOVE/REINSTALL ROOF TOP HVAC EQUIP  YES  NO

\*\*...DISCONNECT/RECONNECT HVAC ELECTRIC  YES  NO

\*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S.  YES  NO - INSURED VALUE OF RESIDENCE \_\_\_\_\_

RE-ROOF INSPECTION AFFIDAVIT TO BE PROVIDED IN LIEU OF BUILDING DEPARTMENT INSPECTION  YES  NO

ROOF TYPE:  HIP  BOSTON-HIP  GABLE  FLAT  OTHER

ROOF PITCH: 1/4 / 12 SLOPE

ROOF DECK:\*  SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED

RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD RATED PER FLORIDA BUILDING CODE "2004".

SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK. NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".

EXISTING DECK TO REMAIN/REPAIRED & RENAILED

FILE COPY  
 TOWN OF SEWALL'S POINT  
 THESE PLANS HAVE BEEN  
 REVIEWED FOR CODE COMPLIANCE  
 DATE 1-27-10  
 BUILDING OFFICIAL

EXISTING ROOF COVERING: BUR EXISTING COVERING TO BE REMOVED? YES  NO

PROPOSED NEW ROOF COVERING: BUR with Modified Cap Hot mopped.

MANUFACTURER Tamco PRODUCT NAME Asph/Flt PRODUCT APPR # 07-0111-03

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)  
 MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV./STEEL  ALUMINUM  COPPER  OTHER

RIDGEVENT TO BE INSTALLED:  YES  NO

DESCRIPTION OF WORK: TEAR OFF EXISTING FLAT AREA REPAIR EXISTING SHEETING PER CODE  
tie tag glass base sheet per code Hot mop VERBA base 2 ply ply IV, 170 Asph/Flt cap sheet  
tie in all roof areas rest of k.

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

[Signature]  
 SIGNATURE OF CONTRACTOR

DATE: 1/25/10





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

**RESIDENTIAL REROOF WINDSTORM LOSS  
MITIGATION CERTIFICATION  
(FLORIDA STATUTE 553.844)**

The following information is to be provided by roofing contractor or owner/builder on all re-roof applications for the purpose of obtaining compliance with recent changes to State Statute and referenced "Hurricane Mitigation Manual". Effective date: October 1, 2007.

Note: These requirements apply to residential structures built prior to implementation of the FBC on March 1, 2002.

- Value: show proof of insured value of residential structure or a copy of the ad-valorem tax value.
- Provide copy of contract

All re-roofs regardless of value shall comply with the following:

Re-nailing: All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

\_\_\_\_\_ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

\_\_\_\_\_ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

✓ \_\_\_\_\_ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-moped shall be deemed to meet the requirements for secondary water barrier.

Residential Structures valued at \$300,000 or more shall comply with the following:

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
  1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
  2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
    - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
    - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
    - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



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)**

**Tamko Building Products, Inc.**  
 P.O. Box 1404  
 Joplin, MO 64802

**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 Florida Building Code, including the High Velocity Hurricane Zone of the Florida Building Code.

**DESCRIPTION: TAMKO Modified Bitumen Roof System Over Wood Decks**

**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 renews NOA #04-0506.03 and consists of pages 1 through 19.  
 The submitted documentation was reviewed by Alex Tigera.



NOA No.: 07-0111.03  
 Expiration Date: 05/23/12  
 Approval Date: 05/10/07  
 Page 1 of 19

## ROOFING SYSTEM APPROVAL

**Category:** Roofing  
**Sub-Category:** SBS/APP, Modified Bitumen  
**Deck Type:** Wood  
**Maximum Design Pressure** -60 psf  
**Fire Classification:** See General Limitation #1

### TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

TABLE 1

| <u>Product</u>        | <u>Dimensions</u>   | <u>Test Specification</u>                        | <u>Product Description</u>  |
|-----------------------|---|--|---|
| Awaplan 170 FR        | Roll weight: 98 lbs.; 33' 11" x 39 <sup>3</sup> / <sub>8</sub> "  | ASTM D 5147<br>ASTM D 6164<br>Type I,<br>Grade G | A 180 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules and treated for additional fire resistance. Applied in hot asphalt or cold adhesive.   |
| Awaplan 170™          | Roll weight: 98 lbs.; 33' 11" x 39 <sup>3</sup> / <sub>8</sub> "  | ASTM D 5147<br>ASTM D 6164<br>Type I<br>Grade G  | A 180 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules. Applied in hot asphalt or cold adhesive.  |
| Awaplan Heat Welding™ | Roll weight: 96 lbs.; 25' 5" x 39 <sup>3</sup> / <sub>8</sub> "   | ASTM D 5147<br>ASTM D 6164<br>Type II<br>Grade G | A 250 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules. Applied by torch and also used as a walkway material.   |
| Awaplan Premium FR™   | Roll weight: 101 lbs.; 33' 11" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 5147<br>ASTM D 6164<br>Type II<br>Grade G | A 250 g/m <sup>2</sup> polyester reinforced modified bitumen membrane surfaced with granules. Applied by hot asphalt and also used as a walkway material.   |
| Awaplan Premium™      | Roll weight: 101 lbs.; 33' 11" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 5147<br>ASTM D 6164<br>Type II<br>Grade G | A 250 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane surfaced with granules. Applied in hot asphalt or cold adhesive, and also used as a walkway material.   |
| Awaflex               | Roll weight: 76 lbs; 35.9' x 36"                                  | ASTM D 5147                                      | SBS modified cap sheet constructed with a 155gm/m <sup>2</sup> non- woven polyester mat saturated with asphalt, coated on both sides with SBS rubber modified asphalt and surfaced with ceramic granules for UV protection.                 |
| Awaflex FR            | Roll weight: 76 lbs; 35.9' x 36"                                  | ASTM D 5147                                      | SBS FR modified cap sheet constructed with a 155gm/m <sup>2</sup> non- woven polyester mat saturated with asphalt, coated on both sides with SBS rubber modified asphalt, FR treated, and surfaced with ceramic granules for UV protection. |



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| <u>Product</u>                       | <u>Dimensions</u>  | <u>Test Specification</u>                       | <u>Product Description</u>   |
|--------------------------------------|--|---|--|
| Awaplan Versa-Smooth                 | Roll weight: 100 lbs. 33' 11" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 5147<br>ASTM D 6164<br>Type I<br>Grade S | A 180 g/m <sup>2</sup> polyester reinforced SBS modified bitumen membrane. Applied in hot asphalt, by torch, or mechanically fastened, as a base ply in 2 ply modified systems.  |
| Awaplan Versa-Flex                   | Roll weight: 76 lbs; 33' 11" x 39-3/8"                           | ASTM D 5147<br>ASTM D 6164<br>Type I<br>Grade S | A 170 g/m <sup>2</sup> nonwoven polyester reinforced SBS modified bitumen membrane. Applied in hot asphalt, as a base ply in 2 ply modified systems.   |
| Base-N-Ply®                          | Roll weight: 72 lbs.; 97'-6" x 39 <sup>3</sup> / <sub>8</sub> "  | ASTM D 4601<br>Type II                          | Asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |
| Glass-Base™                          | Roll weight: 72 lbs.; 97' 6" x 39 <sup>3</sup> / <sub>8</sub> "  | ASTM D 4601<br>Type II                          | Asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |
| Tam-Cap™                             | Roll weight: 83 lbs.; 32' 11" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 3909                                     | Asphalt impregnated and coated felt surfaced with mineral granules used as the top ply in conventional built-up roof membranes.  |
| Tam-Glass Premium™                   | Roll weight: 53 lbs.; 161' 9" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 2178<br>Type VI                          | Asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.  |
| Tam-Ply IV™                          | Roll weight: 44 lbs.; 161' 9" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 2178<br>Type IV                          | Asphalt impregnated glass felt for use in conventional and modified bitumen built-up roofing.  |
| Type 43 Base Sheet                   | Roll weight: 85 lbs.; 72' x 36"                                  | ASTM D 2626                                     | An organic felt reinforced asphalt base sheet. Applied in hot asphalt or mechanically fastened.  |
| Vapor-Chan™                          | Roll weight: 86 lbs.; 32' 11" x 39 <sup>3</sup> / <sub>8</sub> " | ASTM D 4897                                     | Heavy duty fiber glass base sheet impregnated and coated on both sides with asphalt with or without a fine mineral stabilizer. Surfaced on the bottom side with coarse mineral granules embedded in hot asphaltic coating. |
| Versa-Base FR™                       | Roll weight: 60 lbs.; 48' 2" x 39 <sup>3</sup> / <sub>8</sub> "  | ASTM D 5147                                     | Asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |
| Versa-Base™                          | Roll weight: 94 lbs.; 48' 2" x 39 <sup>3</sup> / <sub>8</sub> "  | ASTM D 5147<br>ASTM D 6163<br>Type I, Grade G   | Asphalt impregnated and coated glass fiber base sheet for use in conventional and modified bitumen built-up roofing.   |
| Versa-Cap FR™                        | Roll weight: 87 lbs.; 33' x 39 <sup>3</sup> / <sub>8</sub> "     | ASTM D 5147                                     | A fiberglass reinforced, mineral surfaced, SBS modified bitumen top membrane.  |
| Tam-Pro 846 Fibered Emulsion Coating | 5 gallon   | ASTM D 1227,<br>type II                         | Protective coating.  |
| Tam-Pro 813 Quick-Dry Primer         | 5 gallon   | ASTM D 41                                       | Asphalt based primer   |



| <u>Product</u>                                       | <u>Dimensions</u> | <u>Test Specification</u> | <u>Product Description</u>         |
|--|-------------------|---------------------------|------------------------------------|
| Tam-Pro 842 Fire Rated Fibered Aluminum Roof coating | 5 gallons         | ASTM D2824, type III      | Flame retardant protective coating |

**APPROVED INSULATIONS:**

**TABLE 2**

| <b>Product Name</b>            | <b>Product Description</b>                 | <b>Manufacturer (With Current NOA)</b> |
|--------------------------------|--|--|
| Pyrox, White Line              | Isocyanurate Insulation                    | Apache Products Co.                    |
| ACFoam Composite               | Isocyanurate Insulation with perlite facer | Atlas Roofing Corp.                    |
| ACFoam II                      | Isocyanurate Insulation                    | Atlas Roofing Corp.                    |
| ConPearl                       | Expanded perlite mineral fiber             | Conglas                                |
| EnergyGuard Perlite            | Expanded mineral fiber                     | GAF Mat'l. Corp.                       |
| EnergyGuard Fiberboard         | Wood fiber board                           | GAF Mat'l. Corp.                       |
| Dens Deck                      | Silicon treated gypsum                     | G-P Products                           |
| Sturdi-Top                     | Wood fiber insulation board.               | G-P Products                           |
| Wood Fiberboard                | Regular wood fiber insulation              | Generic                                |
| High Density Wood Fiberboard   | High Density Wood Fiber insulation board.  | Generic                                |
| Perlite Insulation Board       | Perlite Insulation                         | Generic                                |
| Armor Board Regular Fiberboard | Wood fiber board                           | Honeywell Int'l. Inc.                  |
| Hubert Fiberboard              | Wood fiber board                           | Huebert Fiberboard, Inc.               |
| ENERGY 2, ENERGY 3, PSI-25     | Isocyanurate Insulation.                   | Johns Manville                         |
| Retro-Fit Board, DuraBoard     | A high-density perlite roof insulation.    | Johns Manville                         |
| Fesco Board                    | Rigid perlite roof insulation board.       | Johns Manville                         |
| Kop-R Wood Fiber               | Wood fiber board                           | Koppers Industries, Inc.               |
| Structodeck, Structodek FS     | High Density Wood Fiber insulation board.  | Masonite                               |





**APPROVED FASTENERS:**

**TABLE 3**

| <b>Fastener Number</b> | <b>Product Name</b>              | <b>Product Description</b>                             | <b>Dimensions</b>     | <b>Manufacturer (With Current NOA)</b> |
|------------------------|----------------------------------|--|-----------------------|--|
| 1.                     | Dekfast Fasteners #12, #14 & #15 | Insulation fastener for wood, steel and concrete decks |                       | SFS Intec, Inc.                        |
| 2.                     | Dekfast Hex Plate                | Galvalume hex stress plate.                            | 2 7/8" x<br>3 1/4"    | SFS Intec, Inc.                        |
| 3.                     | #12 Roofgrip Fasteners           | Insulation fastener for wood and steel.                |                       | ITW Buildex Corp.                      |
| 4.                     | Metal Plate                      | Galvalume stress plate.                                | 3" round<br>3" square | ITW Buildex Corp.                      |
| 5.                     | Olympic Fastener #12 & #14       | Insulation fastener                                    |                       | Olympic Mfg Group, Inc..               |
| 6.                     | Olympic G-2                      | Galvalume AZ55 steel plate                             | 3.5" round            | Olympic Mfg Group, Inc.                |
| 7.                     | Olympic Standard                 | Galvalume AZ50 steel plate                             | 3" round              | Olympic Mfg Group, Inc.                |
| 8.                     | Insul-Fixx Fastener              | Insulation fastener for steel and wood decks           |                       | SFS Intec, Inc.                        |
| 9.                     | Insul-Fixx S Plate               | Galvalume AZ50 steel plate                             | 3" round              | SFS Intec, Inc.                        |
| 10.                    | Tru-Fast                         | Insulation fastener for steel and wood decks           |                       | The Tru-Fast Corp.                     |
| 11.                    | Tru-Fast Plates                  | Galvalume AZ55 steel plate                             | 3" round              | The Tru-Fast Corp.                     |

**EVIDENCE SUBMITTED:**

| <u>Test Agency/Identifier</u>   | <u>Name</u>                  | <u>Report</u> | <u>Date</u> |
|---------------------------------|------------------------------|---------------|-------------|
| Factory Mutual Research Corp.   | Comparative Rupture Testing  | J.I. 4D0A7.AM | 10.21.98    |
|                                 | Class 1 Fire                 | J.I. 0Z4A3.AM | 08.27.97    |
|                                 | Class 1 Fire; 1-90 Windstorm | J.I. 1D4A7.AM | 10.20.97    |
|                                 | Class 1 Fire; 1-90 Windstorm | J.I. 3B5A9.AM | 08.27.98    |
| Exterior Research & Design, LLC | Wind Uplift Testing          | 4444.06.98-1  | 06.15.98    |
|                                 | Wind Uplift Testing          | 4449.08.99-1  | 08.03.99    |



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**Deck Type 1:** Wood, Non-insulated

**Deck Description:** Minimum  $1\frac{5}{32}$ " or greater plywood or wood plank. Plywood shall be attached to 2" x 4" wood supports spaced 24" o.c. using wood screws spaced 6" o.c. at perimeters and intermediate supports.

**System Type E:** Base sheet mechanically fastened.

**All General and System Limitations apply.**

**Anchor Sheet:** One ply of Tamko Glass-Base, Vapor-Chan, Versa-Flex, Versa-Base, Versa-Smooth or Base-N-Ply fastened to the deck as described below:

**Fastening:** (*Option #1*) Attach anchor sheet using 11 ga. annular ring shank nails and 1-5/8" diameter tin caps spaced 9" o.c. in a 4" lap and 9" o.c. in two staggered rows in the center of the sheet. (*-52.5 psf, See General Limitation #7.*)  
(*Option #2*) Attach anchor sheet using #12 or #14 Dekfast Fasteners with Hex Plates, SFS #12 or HD Insulfixx S, or Buildex Accutrax Fasteners and 3" Square Plates spaced 12" o.c. in a 4" lap and 12" o.c. in two staggered rows in the center of the sheet. (*-60.0 psf, See General Limitation #7.*)

**Ply Sheet:** (Optional) One or more plies of Tam-Glass Premium, Tam-Ply IV, Glass Base, Base-N-Ply, Awaplan Versa-Smooth, Awaplan VersaFlex, or Versa-Base adhered with a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** Awaplan Premium, Awaplan Premium FR, Awaplan 170, Awaflex, Awaflex FR,, Awaplan 170 FR, Awaplan Versa-Smooth, Awaplan VersaFlex, or Versa-Cap FR adhered with a full mopping of approved asphalt applied at 400° F at the point of contact and at a rate of 20-40 lbs./sq.; or Awaplan Heat Welding or Versa-Smooth adhered by torch.

**Surfacing:** Optional to mineral surfaced Membranes. Required for smooth surfaced membranes:  
1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq..  
2. Tam-Pro FR Aluminum Coating applied at 1½ gal./sq., or Tam-Pro 846 Fibered Emulsion Coating at 3 gal./sq.

**Maximum Design Pressure:** See Base Sheet Fastening Options above



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**Deck Type 1:** Wood, Non-insulated

**Deck Description:** Minimum  $1\frac{5}{32}$ " or greater plywood or wood plank. Plywood shall be attached to 2" x 4" wood supports spaced 24" o.c. using wood screws spaced 6" o.c. at perimeters and intermediate supports.

**System Type E(2):** Base sheet mechanically fastened.

**All General and System Limitations apply.**

**Anchor Sheet:** One ply of Tamko Glass-Base, Vapor-Chan, Versa-Flex, Versa-Base, Versa-Smooth or Base-N-Ply fastened to the deck as described below:

**Fastening:** (*Option #1*) One ply of Red Rosin sheet loose laid over deck. Followed by anchor sheet attached using Simplex Mega Cap Nails spaced 9" o.c. in a 4" lap and 9" o.c. in two staggered rows in the center of the sheet. (*-45 psf, See General Limitation #7.*)  
(*Option #2*) Attach anchor sheet using Simplex Mega Cap Nails spaced 9" o.c. in a 4" lap and 9" o.c. in two staggered rows in the center of the sheet. (*-60 psf, See General Limitation #7.*)

**Ply Sheet:** (Optional) One or more plies of Tam-Glass Premium, Tam-Ply IV, Glass Base, Base-N-Ply, Awaplan Versa-Smooth, Awaplan VersaFlex, or Versa-Base adhered with a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** Awaplan Premium, Awaplan Premium FR, Awaplan 170, Awaflex, Awaflex FR,, Awaplan 170 FR, Awaplan Versa-Smooth, Awaplan VersaFlex, or Versa-Cap FR adhered with a full mopping of approved asphalt applied at 400° F at the point of contact and at a rate of 20-40 lbs./sq.; or Awaplan Heat Welding or Versa-Smooth adhered by torch.

**Surfacing:** Optional to mineral surfaced Membranes. Required for smooth surfaced membranes:  
1. 400 lb./sq. gravel or 300 lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq..  
2. Tam-Pro FR Aluminum Coating applied at 1½ gal./sq. or Tam-Pro 846 Fibered Emulsion Coating at 3 gal./sq.

**Maximum Design Pressure:** See Base Sheet Fastening Options above



**Membrane Type:** SBS  
**Deck Type 1:** Wood, Non-insulated  
**Deck Description:**  $\frac{19}{32}$ " or greater plywood or wood plank  
**System Type:** Tile Underlayment, Base Sheet mechanically attached.

**All General and System Limitations shall apply.**

**Anchor sheet:** Tamko No. 30 UL, Type 43 Coated Base, Base-N-Ply®, Vapor-Chan™, or Versa-Base™ base sheet applied with a minimum 2" side lap and a minimum 6" end lap. Base sheet may be applied at a right angle (90°) to the slope of the deck with approved annular ring shank nails and tin caps at a fastener spacing of 6" o.c. at the 2" side lap, and two 12" o.c. staggered rows along the center of the sheet.

**Ply Sheet:** (Optional) One or more plies Tam-Ply IV™ or Tam-Glass Premium™ sheet adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Cap Sheet:** One ply Awaplan Premium™, Awaplan 170™, Awaflex, Tamko ASTM Slate Surface or Tamko ASTM Tile Underlayment. Cap sheet may be applied at a right angle (90°) to the slope of the deck\* adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. Cap sheet shall be back nailed to deck with approved annular ring shank nails and tin caps at a maximum 12" o.c. at the side laps and 6" o.c. at the end laps. No nails or tin caps shall be exposed.

\*Cap Sheet may also be installed parallel to the slope of the roof (i.e. strapping). If membrane or cap sheet is strapped, then anchor sheet and ply sheet must also be strapped.

**Maximum Design Pressure:** Refer to Tile Manufacturer's NOA.

**Maximum Slope:** Must Comply with Roofing Application Standard RAS 118, RAS 119, RAS 120 and Applicable Building Code.



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## WOOD DECK SYSTEM LIMITATIONS:

1. A slip-sheet is required with Ply 4 and Ply 6 when used as a mechanically fastened base or anchor sheet.

## GENERAL LIMITATIONS:

1. Fire classification is not part of this acceptance, refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Insulation may be installed in multiple layers. The first layer shall be attached in compliance with Product Control Approval guidelines. All other layers shall be adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq., or mechanically attached using the fastening pattern of the top layer
3. All standard panel sizes are acceptable for mechanical attachment. When applied in approved asphalt, panel size shall be 4' x 4' maximum.
4. An overlay and/or recovery board insulation panel is required on all applications over closed cell foam insulations when the base sheet is fully mopped. If no recovery board is used the base sheet shall be applied using spot mopping with approved asphalt, 12" diameter circles, 24" o.c.; or strip mopped 8" ribbons in three rows, one at each sidelap and one down the center of the sheet allowing a continuous area of ventilation. Encircling of the strips is not acceptable. A 6" break shall be placed every 12' in each ribbon to allow cross ventilation. Asphalt application of either system shall be at a minimum rate of 12 lbs./sq. **Note: Spot attached systems shall be limited to a maximum design pressure of -45 psf.**
5. Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F') value of 275 lbf., as tested in compliance with Testing Application Standard TAS 105. If the fastener value, as field-tested, are below 275 lbf. insulation attachment shall not be acceptable.
6. Fastener spacing for mechanical attachment of anchor/base sheet or membrane attachment is based on a minimum fastener resistance value in conjunction with the maximum design value listed within a specific system. Should the fastener resistance be less than that required, as determined by the Building Official, a revised fastener spacing, prepared, signed and sealed by a Florida Registered Engineer, Architect, or Registered Roof Consultant may be submitted. Said revised fastener spacing shall utilize the withdrawal resistance value taken from Testing Application Standards TAS 105 and calculations in compliance with Roofing Application Standard RAS 117.
7. Perimeter and corner areas shall comply with the enhanced uplift pressure requirements of these areas. Fastener densities shall be increased for both insulation and base sheet as calculated in compliance with Roofing Application Standard RAS 117. **(When this limitation is specifically referred within this NOA, General Limitation #9 will not be applicable.)**
8. All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform with Roofing Application Standard RAS 111 and applicable wind load requirements.
9. The maximum designed pressure limitation listed shall be applicable to all roof pressure zones (i.e. field, perimeters, and corners). Neither rational analysis, nor extrapolation shall be permitted for enhanced fastening at enhanced pressure zones (i.e. perimeters, extended corners and corners). **(When this limitation is specifically referred within this NOA, General Limitation #7 will not be applicable.)**
10. All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

END OF THIS ACCEPTANCE



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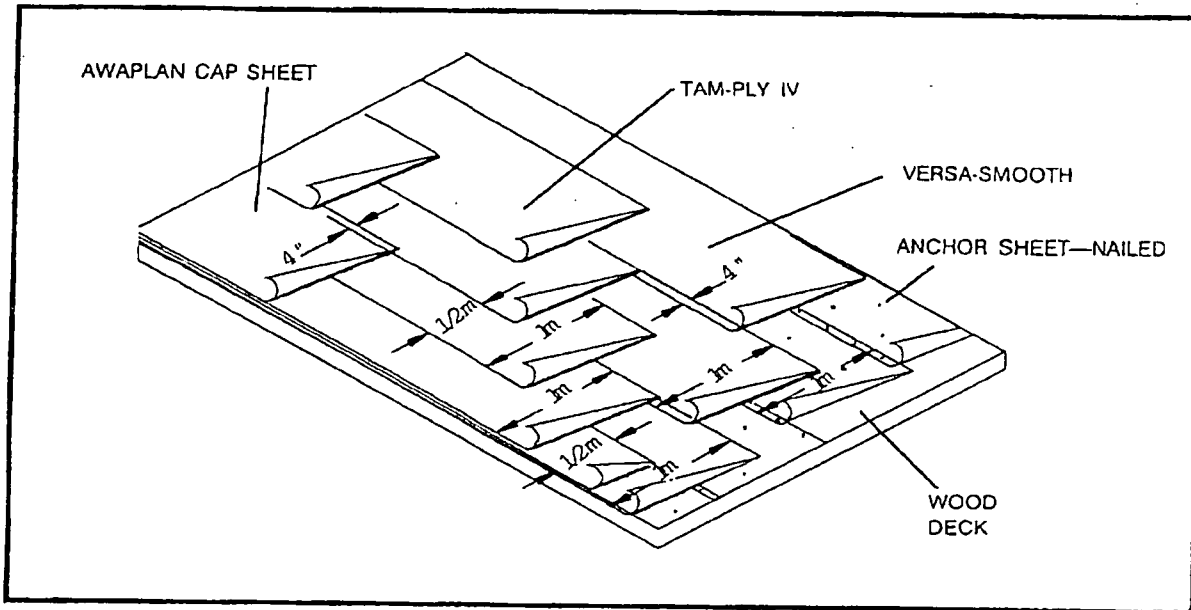


## SPECIFICATION SUBMITTAL

243M1 AWAPLAN

(So. Florida Only)

NAILABLE DECKS (WOOD DECK)

**Material Requirements**

|   |                   |
|---|-------------------|
| TAMKO NO. 43, GLASS-BASE, BASE-N-PLY Organic or Fiberglass Base Sheet | 1 ply             |
| TAMKO AWAPLAN VERSA-SMOOTH  | 1 ply             |
| TAMKO TAM-PLY IV® Fiberglass Ply Sheet                                | 2 plies           |
| TAMKO AWAPLAN PREMIUM, PREMIUM FR, 170, OR 170 FR                     | 1 ply             |
| Interply Asphalt (Per 100 sq. ft.)                                    | Approx. 69 lbs.   |
| Flood Coat Asphalt (Per 100 sq. ft.)                                  | Approx. 60 lbs.   |
| Gravel (Per 100 sq. ft.)  | Approx. 400 lbs.  |
| Clinch-type nails (Per 100 sq. ft.)                                   | Approx. 100 Nails |

**Slope:** For application on slopes from 0 in. per ft. up to 3 in. per ft. For slopes above 1 in. per linear ft., fastening of the roofing felts is required.

**Deck:** The deck should conform to TAMKO general requirements.

**Asphalt:** The asphalt should be certified by the manufacturer to meet ASTM D-312, Type II\* for slopes up to 1/2 in. and Type III for slopes up to 3 in.

**ANCHOR SHEET:** Starting at the low point of the roof, install 1 ply of the anchor sheet, side lapped 2 in. and end lapped 4 in. Apply at a right angle to the slope of the roof. Fasten the sheets along the lap at intervals of no more than 8 in. Stagger-nail down the center of the sheet on 8 in.

centers along 2 lines located 12 in. from each edge of the

**AWAPLAN VERSA-SMOOTH:** Starting at the low point of the roof, install 1 ply of TAMKO AWAPLAN VERSA-SMOOTH, side lapped 4 in. and end lapped 6 in. Apply at a right angle to the slope of the roof. The AWAPLAN VERSA-SMOOTH should be solidly adhered to the base sheet (pressed into the hot asphalt) with approximately 23 lbs. ( $\pm 15\%$ ) of specification asphalt per 100 sq. ft. The asphalt should be above 400° F at the point of application and mopped no more than 4 ft. in front of the roll.

**Fiberglass Ply Sheets:** Over the base ply, install 2 plies of TAM-PLY IV Fiberglass Ply Sheet in specification asphalt. Starting from the low point of the roof, apply an 19 in. width, and follow with full meter widths, shingle fashion, lapping each ply 19 in. in such a manner so that at least 2 plies of ply sheet cover the base ply at any point. Approximately 23 lbs. ( $\pm 15\%$ ) of specification asphalt per 100 sq. ft. should be used to embed each ply.

**AWAPLAN:** Starting at the low point of the roof, install 1 layer of TAMKO AWAPLAN granule surfaced sheet, side lapped 4 in. and end lapped 6 in. The AWAPLAN 170 should be solidly adhered to the ply sheet (pressed into the hot asphalt) with approximately 23 lbs. ( $\pm 15\%$ ) of specification asphalt per 100 sq. ft. The asphalt should be above 400° F at the point of application and mopped no more than 4 ft. in front of the roll.

**Flashing:** The flashing material must be a TAMKO polyester reinforced modified asphalt flashing material.

For complete information on TAMKO's recommendations and requirements, consult the current TAMKO Commercial Roofing Specifications & Details manual. TAMKO Roofing Products, Inc., P. O. Box 1404, Joplin, MO 64802 • 1-800-641-4691

TAMKO®, Vapor-Chan™, and Tami-Ply IV™ are registered trademarks of TAMKO Roofing Products, Inc.



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)**

**Polyfoam Products, Inc.**  
**11715 Boudreaux Road**  
**Tomball, TX 77375**

**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 the BCCO and accepted by the Building Code and Product Review Committee 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 BCCO (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. BCCO reserves the right to revoke this acceptance, if it is determined by BCCO 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: Polypro® AH160**

**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 renews NOA No.01-0521.02 and consists of pages 1 through 7  
The submitted documentation was reviewed by Jorge L. Acebo.



NOA No.: 06-0201.02  
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Approval Date: 04/13/06  
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**ROOFING ASSEMBLY APPROVAL:**

Category: Roofing  
Sub Category: Roof tile adhesive  
Materials: Polyurethane

**SCOPE:**

This approves Polypro® AH160 as manufactured by Polyfoam Products, Inc. as described in Section 2 of this Notice of Acceptance. For the locations where the design pressure requirements, as determined by applicable building code, does not exceed the design pressure values obtained by calculations in compliance with Roofing Application Standard RAS 127, for use with approved flat, low, and high profile roof tiles system using Polypro® AH 160. Where the attachment calculations are done as a moment based system for single patty placement, and as an uplift based system for double patty systems

**PRODUCTS MANUFACTURED BY APPLICANT:**

| <u>Product</u>    | <u>Dimensions</u> | <u>Test Specifications</u> | <u>Product Description</u>               |
|-------------------|-------------------|----------------------------|--|
| Polypro® AH160    | N/A               | TAS 101                    | Two component polyurethane foam adhesive |
| Foampro® RTF1000  | N/A               |                            | Dispensing Equipment                     |
| ProPack® 30 & 100 | N/A               |                            | Dispensing Equipment                     |

**PRODUCTS MANUFACTURED BY OTHERS:**

Any Miami-Dade County Product Control Accepted Roof Tile Assembly having a current NOA which list moment resistance values with the use of Polypro AH160 roof tile adhesive.

**PHYSICAL PROPERTIES:**

| <u>Property</u>             | <u>Test</u> | <u>Results</u>   |
|-----------------------------|-------------|--|
| Density                     | ASTM D 1622 | 1.6 lbs./ft. <sup>3</sup>  |
| Compressive Strength        | ASTM D 1621 | 18 PSI Parallel to rise<br>12 PSI Perpendicular to rise  |
| Tensile Strength            | ASTM D 1623 | 28 PSI Parallel to rise  |
| Water Absorption            | ASTM D 2127 | 0.08 Lbs./Ft <sup>2</sup>  |
| Moisture Vapor Transmission | ASTM E 96   | 3.1 Perm / Inch  |
| Dimensional Stability       | ASTM D 2126 | +0.07% Volume Change @ -40° F., 2 weeks<br>+6.0% Volume Change @158°F., 100% Humidity, 2 weeks |
| Closed Cell Content         | ASTM D 2856 | 86%  |

Note: The physical properties listed above are presented as typical average values as determined by accepted ASTM test methods and are subject to normal manufacturing variation.



NOA No.: 06-0201.02  
Expiration Date: 05/10/11  
Approval Date: 04/13/06  
Page 2 of 7



**EVIDENCE SUBMITTED:**

| <u>Test Agency</u>                      | <u>Test Identifier</u> | <u>Test Name/Report</u> | <u>Date</u> |
|---|------------------------|-------------------------|-------------|
| Center for Applied Engineering          | #94-060                | TAS 101                 | 04/08/94    |
|   | 257818-1PA             | TAS 101                 | 12/16/96    |
|   | 25-7438-3              | SSTD 11-93              | 10/25/95    |
|   | 25-7438-4              |                         |             |
|   | 25-7438-7              | SSTD 11-93              | 11/02/95    |
| Miles Laboratories<br>Polymers Division | 25-7492                | SSTD 11-93              | 12/12/95    |
|   | NB-589-631             | ASTM D 1623             | 02/01/94    |
|   |                        |                         |             |
| Ramtech Laboratories, Inc.              | 9637-92                | ASTM E 108              | 04/30/93    |
| Southwest Research Institute            | 01-6743-011            | ASTM E 108              | 11/16/94    |
|   | 01-6739-062b[1]        | ASTM E 84               | 01/16/95    |
| Trinity Engineering                     | 7050.02.96-1           | TAS 114                 | 03/14/96    |
|   |                        |                         |             |
| Celotex Corp. Testing Services          | 528454-2-1             | TAS 101                 | 10/23/98    |
|   | 528454-9-1             |                         |             |
|   | 528454-10-1            |                         |             |
|   | 520109-1               | TAS 101                 | 12/28/98    |
|   | 520109-2               |                         |             |
|   | 520109-3               |                         |             |
|   | 520109-6               |                         |             |
|   | 520109-7               |                         |             |
|   | 520191-1               | TAS 101                 | 03/02/99    |
| 520109-2-1                              |                        |                         |             |

**LIMITATIONS:**

1. Fire classification is not part of this acceptance. Refer to the Prepared Roof Tile Assembly for fire rating.
2. Polypro® AH160 shall solely be used with flat, low, & high tile profiles.
3. Minimum underlayment shall be in compliance with the Roofing Application Standard RAS 120.
4. Roof Tile manufactures acquiring acceptance for the use of Polypro® AH160 roof tile adhesive with their tile assemblies shall test in accordance with TAS 101.
5. Roof Tile manufactures acquiring acceptance for the use of HANDI-STICK roof tile adhesive with their tile assemblies shall test in accordance with TAS 101 with section 10.4 as modified herein.

(F)  
2 W  
F= MS



NOA No.: 06-0201.02  
 Expiration Date: 05/10/11  
 Approval Date: 04/13/06  
 Page 3 of 7

**INSTALLATION:**

1. Polypro® AH160 may be used with any roof tile assembly having a current NOA that lists uplift resistance values with the use of Polypro® AH160.
2. Polypro® AH160 shall be applied in compliance with the Component Application section and the corresponding Placement Details noted herein. The roof tile assembly's adhesive attachment with the use of Polypro® AH160 shall provide sufficient attachment resistance, expressed as an uplift based system, to meet or exceed the uplift resistance determined in compliance with Miami-Dade County Roofing Application Standards RAS 127. The adhesive attachment data is noted in the roof tile assembly NOA
3. Polypro® AH160 roof tile adhesive and its components shall be installed in accordance with Roofing Application Standard RAS 120, and Polyfoam Products, Inc. Polypro® AH160 Operating Instruction and Maintenance Booklet.
4. Installation must be by a Factory Trained 'Qualified Applicator' approved and licensed by Polyfoam Products, Inc. Polyfoam Products Inc. shall supply a list of approved applicators to the authority having jurisdiction.
5. Calibration of the Foampro® dispensing equipment is required before application of any adhesive. The mix ratio between the "A" component and the "B" component shall be maintained between 1.0-1.15 (A): 1.0 (B). The dispense timer shall be set to deliver 0.0175 to 0.15 pounds per tile as determined at calibration. No other settings shall be approved.
6. Polypro® AH160 shall be applied with Foampro RTF1000 or ProPack® 30 & 100 dispensing equipment only.
7. Polypro® AH160 shall not be exposed permanently to sunlight.
8. Tiles must be adhered in freshly applied adhesive. Tile must be set within 2 to 3 minutes after Polypro® AH160 has been dispensed.
9. Polypro® AH160 placement and minimum patty weight shall be in accordance with the 'Placement Details' herein. Each generic tile profile requires the specific placement noted herein.

| Tile Profile                  | Placement Detail | Single Paddy Weight Min. (grams) | Two Paddy Weight per paddy Min. (grams) |
|-------------------------------|------------------|----------------------------------|---|
| Flat, Low, High Profiles      | #1               | 35                               | N/A                                     |
| High Profile (2 Piece Barrel) | #1               | 17/side on cap and 34/pan        | N/A                                     |
| Flat, Low, High Profiles      | #2               | 24                               | N/A                                     |
| Flat, Low, High Profiles      | #3               |                                  | 8                                       |

**LABELING:**

All Polypro® AH160 containers shall comply with the Standard Conditions listed herein.

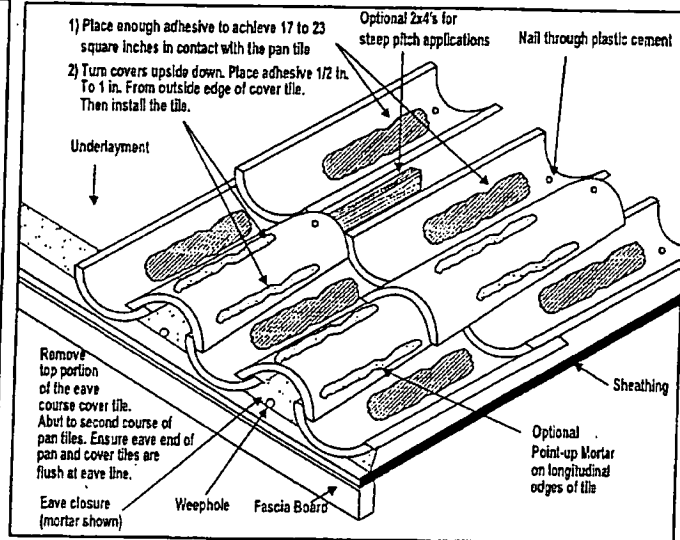
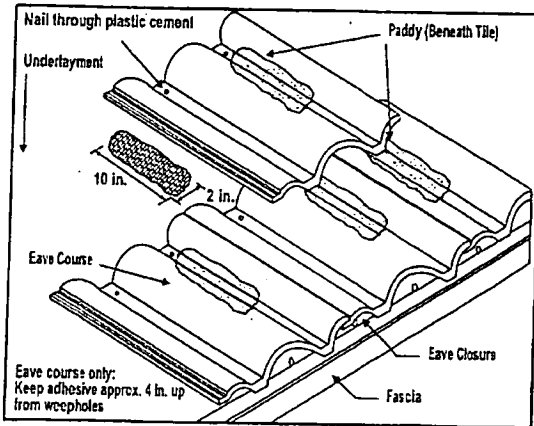
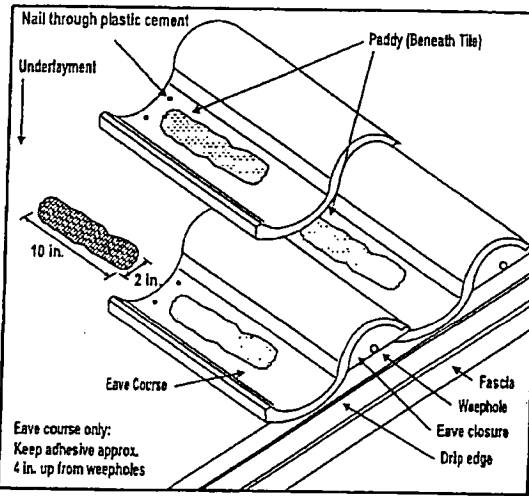
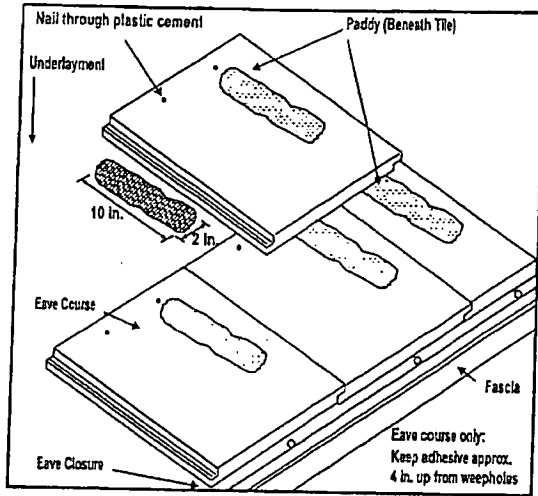
**BUILDING PERMIT REQUIREMENTS:**

As required by the Building Official or applicable building code in order to properly evaluate the installation of this system.

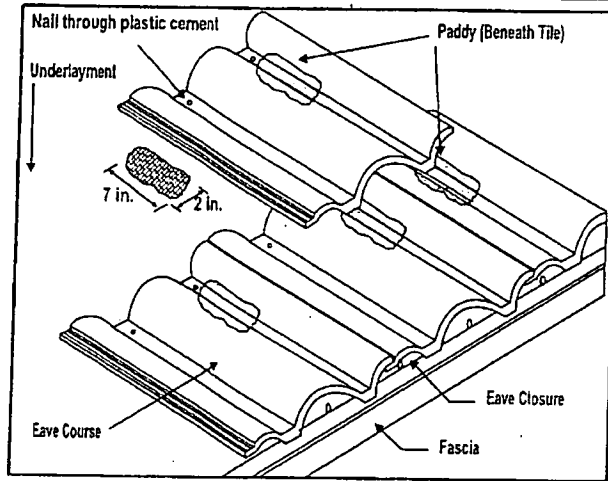
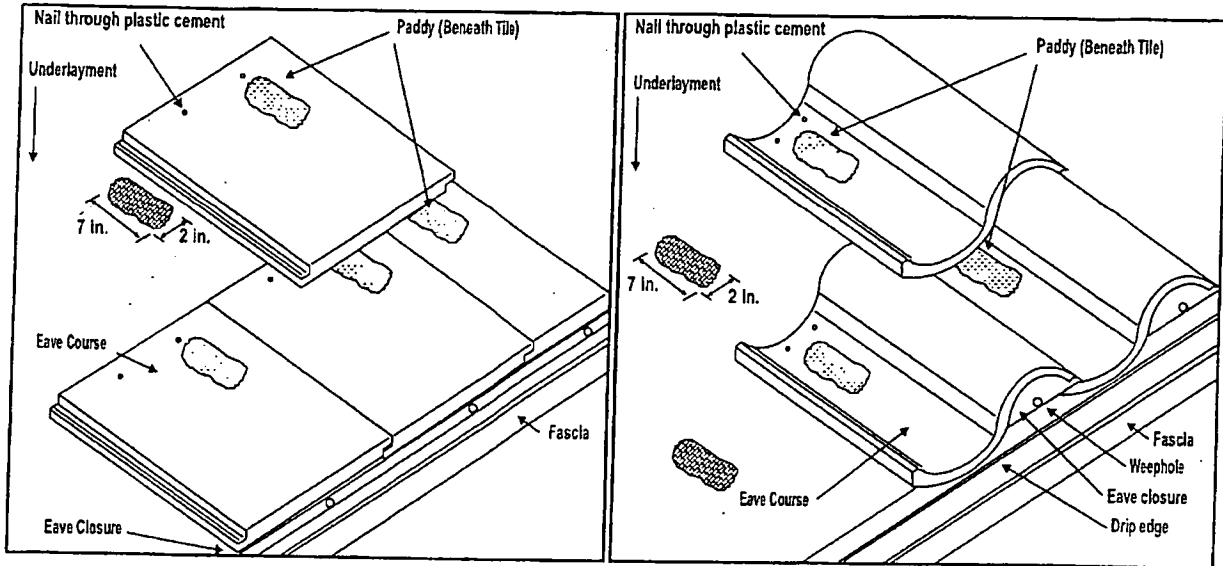


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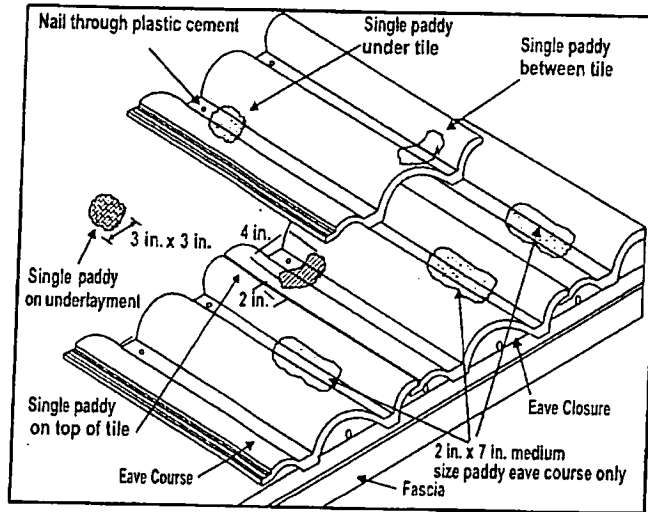
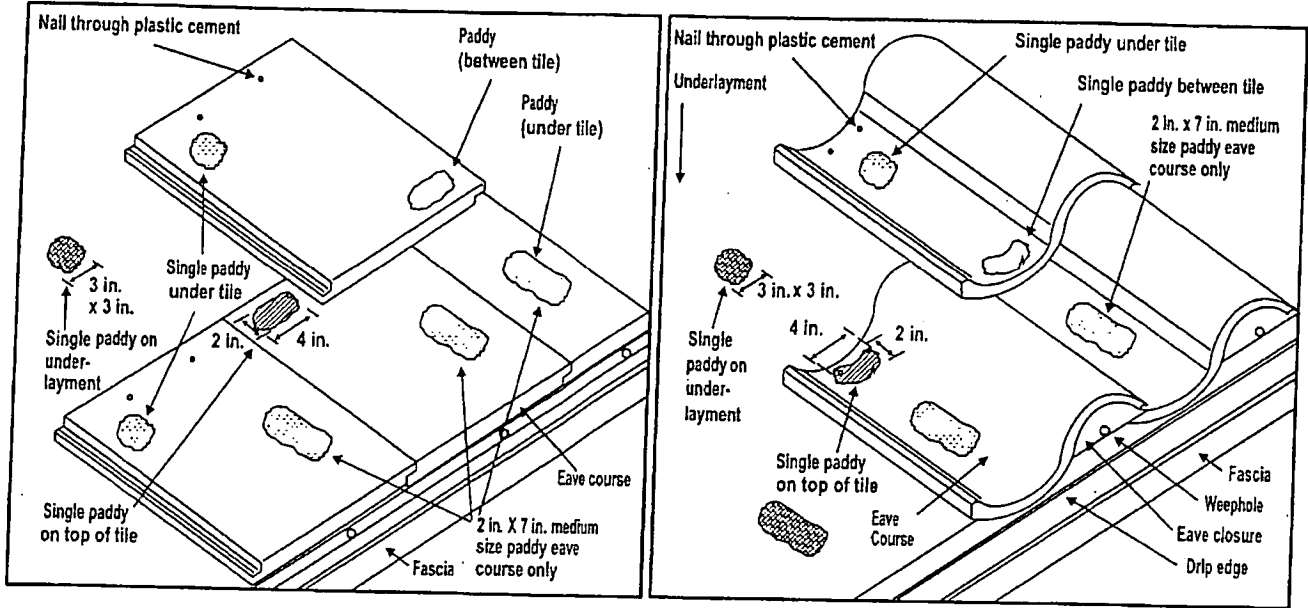
# ADHESIVE PLACEMENT DETAIL 1 SINGLE PATTY



## ADHESIVE PLACEMENT DETAIL 2 SINGLE PATTY



### ADHESIVE PLACEMENT DETAIL 3 DOUBLE PATTY



**END OF THIS ACCEPTANCE**



NOA No.: 06-0201.02  
 Expiration Date: 05/10/11  
 Approval Date: 04/13/06  
 Page 7 of 7



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

RE: Permit # 9358

Date 2/16/10

**Inspection Affidavit**

I JAMES A. FRAMPTON, licensed as a(n) Contractor\* /Engineer/Architect,  
 (please print name and circle Lic. Type) FS 468 Building Inspector\*

License #: SP-01848

On or about 2/11/10, I did personally inspect the roof  
 (Date & time)

deck nailing and/or secondary water barrier work at 11 Middle Rd  
 (circle one) (Job Site Address)  
High Point

Based upon that examination I have determined the installation was done according to the Hurricane Mitigation Retrofit Manual (Based on 553.844 F.S.)

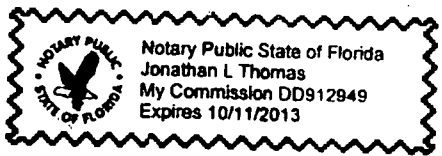
[Signature]  
 Signature

STATE OF FLORIDA  
 COUNTY OF

Sworn to and subscribed before me this 16<sup>th</sup> day of FEB, 2010

By JAMES FRAMPTON

Notary Public, State of Florida



JONATHAN L. THOMAS  
 (Print, type or stamp name)

Commission No.: DD912949  
[Signature]

Personally known  or  
 Produced Identification   
 Type of identification produced. \_\_\_\_\_

\* General, Building, Residential, or Roofing Contractor or any individual certified under 468 F.S. to make such an inspection. Include photographs of each plane of the roof with the permit # or address # clearly shown marked on the deck for each inspection.

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection  Mon  Tue  Wed  Thur  Fri **2-17** Page 1 of 1

| PERMIT #        | OWNER/ADDRESS/CONTRACTOR                           | INSPECTION TYPE       | RESULTS            | COMMENTS   |
|-----------------|--|-----------------------|--------------------|--|
| 9289            | Sharfi<br>73 N Sewalls<br>Station                  | Roof sheathing        | Pass               | INSPECTOR <i>[Signature]</i>                                 |
| <del>9336</del> | <del>Wunneke<br/>Middle Rd</del>                   | <del>Roof final</del> | <del>Pass</del>    | <del>close</del>   |
| <u>150</u>      | <del>Wunneke<br/>Middle Rd</del><br>Thompson Roof. | <del>Roof final</del> | <del>Pass</del>    | INSPECTOR <i>[Signature]</i>                                 |
| 10:00           | SUBIN<br>8 Palm G<br>DRIFTWOOD                     | FRAMING &<br>TRADES   | Pass               | INSPECTOR <i>[Signature]</i>                                 |
| 9:30            | 21 MIDDLE RD                                       | CHECK PEPPER<br>TREES | <i>[Signature]</i> | PEPPER TREE<br>TO BE REMOVED<br>INSPECTOR <i>[Signature]</i> |
| 9099            | Hooker<br>6 Morgan Cir<br>Schiller Pools           | Final                 | Pass               | close<br>INSPECTOR <i>[Signature]</i>                        |
| 9343            | Hooker<br>6 Morgan Cir<br>Schiller Pools           | Final<br>driveway     | Pass               | close<br>INSPECTOR <i>[Signature]</i>                        |
|                 |  |                       |                    | INSPECTOR  |

**10919**

**PARTIAL REROOF**





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

## BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK**

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

|                        |                     |                       |                   |
|------------------------|---------------------|-----------------------|-------------------|
| PERMIT NUMBER:         | 10919               | DATE ISSUED:          | 7/3/2014          |
| SCOPE OF WORK:         | PARTIAL RE-ROOF     |                       |                   |
| CONTRACTOR:            | CAPPS ROOFING, INC. |                       |                   |
| PARCEL CONTROL NUMBER: | 133841002000003707  | SUBDIVISION           | HIGH POINT LOT 37 |
| CONSTRUCTION ADDRESS:  | 11 MIDDLE ROAD      |                       |                   |
| OWNER NAME:            | WINZURK             |                       |                   |
| QUALIFIER:             | J. BLAKE CAPPS      | CONTACT PHONE NUMBER: | 772 545-3442      |

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE  
 CALL 287-2455 - 8:00AM TO 4:00PM**

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

### INSPECTIONS

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

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



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

### BUILDING PERMIT RECEIPT

|                       |                       |                       |                        |
|-----------------------|-----------------------|-----------------------|------------------------|
| <b>PERMIT NUMBER:</b> | <b>10919</b>          |                       |                        |
| <b>ADDRESS:</b>       | <b>11 MIDDLE ROAD</b> |                       |                        |
| <b>DATE ISSUED:</b>   | <b>7/3/2014</b>       | <b>SCOPE OF WORK:</b> | <b>PARTIAL RE-ROOF</b> |

|   |  |                       |           |  |
|---|--|-----------------------|-----------|--|
| <b>SINGLE FAMILY OR ADDITION /REMODEL</b> |  | <b>Declared Value</b> | <b>\$</b> |  |
|---|--|-----------------------|-----------|--|

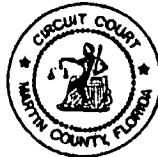
|   |                         |        |    |      |
|---|-------------------------|--------|----|------|
| Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)        |                         |        | \$ |      |
| (No plan submittal fee when value is less than \$100,000)           |    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

|   |                        |        |         |             |
|---|------------------------|--------|---------|-------------|
| <b>ACCESSORY PERMIT</b>   | <b>Declared Value:</b> |        | \$      | \$ 8,500.00 |
| Total number of inspections:                                    | @ \$ 100.00 per insp.  | # insp | \$ 3.00 | \$ 300.00   |
| Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)   |                        |        |         |             |
|   |                        |        | \$      | \$ 4.50     |
| DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)          |                        |        |         |             |
|   |                        |        | \$      | \$ 4.50     |
| Road impact assessment: (.04% of construction value - \$5 min.) |                        |        |         |             |
|   |                        |        | \$      | \$ 5.00     |
| <b>TOTAL ACCESSORY PERMIT FEE:</b>                              |                        |        |         |             |
|   |                        |        | \$      | \$ 314.00   |

Pa 7/3/14  
 CK 61478

STATE OF FLORIDA  
MARTIN COUNTY

THIS IS TO CERTIFY THAT THE  
FOREGOING 1 PAGE(S) IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL  
DOCUMENT AS FILED IN THIS OFFICE



CAROLYN TIMMANN, CLERK

BY Okanner D.C.  
DATE 7.11.14

**NOTICE OF COMMENCEMENT**

To be completed when construction value exceeds \$2,500.00

PERMIT #: \_\_\_\_\_ TAX FOLIO # 133841002 000 003 707

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 (AND STREET ADDRESS, IF AVAILABLE):  
High Point lot 37 or 342/2303

GENERAL DESCRIPTION OF IMPROVEMENT: reroof

OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:  
Name: UTE WINZUAK  
Address: 11 Middle Rd., Stuart, FL 34996  
Interest in property: Fee simple  
Name and address of fee simple title holder (if different from Owner listed above): \_\_\_\_\_

CONTRACTOR'S NAME: CAAPS Roofing, Inc. Phone No.: \_\_\_\_\_  
Address: PO Box 8053 Hobe Sound, FL 33475

SURETY COMPANY (if applicable, a copy of the payment bond is attached):  
Name and address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Bond amount: \_\_\_\_\_

LENDER'S NAME: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_

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: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_

In addition to himself or herself, owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.  
Phone number of person or entity designated by Owner: \_\_\_\_\_

Expiration date of Notice of Commencement:  
(the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

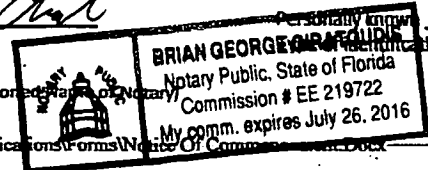
X UTE WINZUAK  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact

OWNER  
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 30<sup>th</sup> day of JUNE, 2014

By: UTE INGEBORE WINZUAK as OWNER for 11 MIDDLE RD, STUART FL 34996  
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

Brian George Baird  
Notary's Signature



Personally known  or produced identification   
Identification produced FLDL W526 849 438490

INSTR # 246622 INSTR # 246622 REC'D 06 2393 REC'D 07/01/2014 10:35:32 AM  
(1 Pgs)  
CAROLYN TIMMANN MARTIN COUNTY CLERK  
DEED DOC \$0.00, MTS DOC \$0.00, INTANGIBLE \$0.00

Roof Repair - Reroof of south hip only

Town of Sewall's Point Emergency Permit  
BUILDING PERMIT APPLICATION Permit Number: 10919

Date: 6/26/14  
OWNER/LESSEE NAME: Ite Winzark Phone (Day) 781-4686 (Fax) 781-4686  
Job Site Address: 11 Middle Rd. City: Stuart State: FL Zip: 34996  
Legal Description: High Point Lot 37 Parcel Control Number: 133841002000003707  
Fee Simple Holder Name: Same Address: \_\_\_\_\_  
City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

\*SCOPE OF WORK (PLEASE BE SPECIFIC): ROOF REPAIR/REROOF SOUTH HIP ONLY

WILL OWNER BE THE CONTRACTOR?  
(If yes, Owner Builder questionnaire must accompany application)  
YES \_\_\_\_\_ NO   
Has a Zoning Variance ever been granted on this property?  
YES \_\_\_\_\_ (YEAR) \_\_\_\_\_ NO \_\_\_\_\_  
(Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)  
Estimated Value of Improvements: \$ 8,500.00  
(Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
Is subject property located in flood hazard area? VE10 AE9 AE8 X  
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:  
Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_  
(Fair Market Value of the Primary Structure only, Minus the land value)  
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Capps Roofing, Inc. Phone: 545-3442 Fax: 546-4606  
Qualifiers name: J. Blake Capps Street: P.O. Box 8053 City: Hope State: FL Zip: 33475  
State License Number: CC056739 OR: Municipality: \_\_\_\_\_ License Number: CC056739  
LOCAL CONTACT: J. Blake Capps Phone Number: 545-3442

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_  
Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

AREAS SQUARE FOOTAGE: Living: \_\_\_\_\_ Garage: \_\_\_\_\_ Covered Patios/ Porches: \_\_\_\_\_ Enclosed Storage: \_\_\_\_\_  
Carport: \_\_\_\_\_ Total under Roof: 600 SF Elevated Deck: \_\_\_\_\_ Enclosed area below BFE: \_\_\_\_\_  
\* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement

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

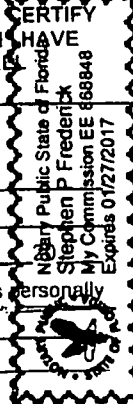
**WARNINGS TO OWNERS AND CONTRACTORS:**  
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.  
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.  
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.  
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF: FBC 2007 SECT. 105.4.1, 105.4.1.1 - 5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:  
X \_\_\_\_\_  
State of Florida, County of \_\_\_\_\_  
On This the \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_  
by \_\_\_\_\_ who is personally  
known to me or produced \_\_\_\_\_  
As identification, \_\_\_\_\_  
Notary Public  
My Commission Expires: \_\_\_\_\_

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:  
X \_\_\_\_\_  
State of Florida, County of \_\_\_\_\_  
On This the \_\_\_\_\_ day of \_\_\_\_\_  
by \_\_\_\_\_ who is personally  
known to me or produced \_\_\_\_\_  
As identification, \_\_\_\_\_  
Notary Public  
My Commission Expires: 1/27/2017



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



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

Site Provided by...  
governmentmax.com 1.12

Summary



**Tabs**

Summary

Print View

Land

Improvements

Assessments &  
Exemptions

Sales

Taxes →

NEW: Navigator

Parcel Map ⇒

Notice of Prop.

Taxes ⇒

**Searches**

Parcel ID

Owner

Address

Account #

Use Code

Legal Description

Neighborhood

Sales

Navigator

Maps ⇒

**Functions**

Property Search

Contact Us

On-Line Help

County Home

Site Home

County Login

| Parcel ID                | Account # | Unit Address                 | Market Total Value | Website Updated |
|--------------------------|-----------|------------------------------|--------------------|-----------------|
| 13-38-41-002-000-00370-7 | 27725     | 11 MIDDLE RD, SEWALL'S POINT | \$284,710          | 6/21/2014       |

| Owner Information         |                                 |
|---------------------------|---------------------------------|
| <b>Owner(Current)</b>     | WINZURK UTE INGEBORG (TR)       |
| <b>Owner/Mail Address</b> | 11 MIDDLE RD<br>STUART FL 34996 |
| <b>Sale Date</b>          | 6/6/2008                        |
| <b>Document Book/Page</b> | 2332 2685                       |
| <b>Document No.</b>       | 2088469                         |
| <b>Sale Price</b>         | 0                               |

| Location/Description  |                              |                          |                               |
|-----------------------|------------------------------|--------------------------|-------------------------------|
| <b>Account #</b>      | 27725                        | <b>Map Page No.</b>      | SP-06                         |
| <b>Tax District</b>   | 2200                         | <b>Legal Description</b> | HIGH POINT LOT 37 OR 342/2303 |
| <b>Parcel Address</b> | 11 MIDDLE RD, SEWALL'S POINT |                          |                               |
| <b>Acres</b>          | .3440                        |                          |                               |

| Parcel Type         |                                   |
|---------------------|-----------------------------------|
| <b>Use Code</b>     | 0100 Single Family                |
| <b>Neighborhood</b> | 120000 HighPoint - Sewall's Point |

| Assessment Information          |           |
|---------------------------------|-----------|
| <b>Market Land Value</b>        | \$180,000 |
| <b>Market Improvement Value</b> | \$104,710 |
| <b>Market Total Value</b>       | \$284,710 |

Print First Previous Next Last

Legal Disclaimer / Privacy Statement

Attn: Christine  
Building Dep.  
Fk 226-4765



(772) 545-3442 (561) 744-8765  
(772) 336-5495 (561)-964-7579

P.O. Box 8053, Hobe Sound, FL 33475  
Fax: (772) 546-4606

# PROPOSAL

June 23, 2014

Ute Winzork  
11 Middle Rd.  
Stuart, FL 34996  
781-4686  
Inge43@bellsouth.net

We propose to furnish all material and perform all labor necessary to complete the following:

### Re-Roof of 11' x 50" South Side of Roof

- Pull require permit. Remove tile from south side of roof. Dispose of debris.
- Repair rotten plywood as needed. Re-nail plywood to code.
- Install 30 lb. underlayment with nails and tin tags.
- Install new, galvanized drip edge.
- Install Polystick TU Plus, self-adhering underlayment.
- Install new, 9", flat natural gray tile with Polyfoam roof tile adhesive.
- There may be a color variation between new and old tile.
- No work to be done on other portions of roof.

Price: \$8,500.00

Draw Schedule: Due upon completion of job: 100%. The price stated is good for 30 days.

Workmanship Warranty: Roofing contractor's workmanship warranty of five years, covering all labor and material for any leaks caused by defective workmanship.

Capps Roofing, Inc. is hereby authorized to furnish all materials and labor required to complete the work for which we agree to pay the amounts itemized above. In the event that litigation is instituted to enforce or interpret this contract, the prevailing party shall be entitled to reasonable attorney's fees and costs at both the trial and appellate levels.

Ute S. Winzork  
OWNER

DATE

6/23/14

June 23, 2014

J. Blake Capps  
AUTHORIZED AGENT,  
CAPPS ROOFING, INC.

DATE



FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

**SELF INSURERS FUND**

1-800-767-3772 • FAX (407) 671-2520

**CERTIFICATE OF INSURANCE**

**ISSUED TO:**

Town Of Sewall's Point  
 1 So. Sewall's Point Rd.  
 Sewall's Point, FL 34996

**COPY PROVIDED TO:**

Capps Roofing, Inc.  
 P.O. Box 8053  
 Hobe Sound, FL 33475

Attention: To Whom It May Concern

Capps Roofing, Inc.


**This is to Certify that:** P.O. Box 8053  
 Hobe Sound, FL 33475

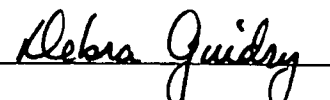
being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

|                  |                   |                        |                                     |
|------------------|-------------------|------------------------|-------------------------------------|
| COVERAGE NUMBER: | <u>870-032496</u> | <u>LIMITS</u>          |                                     |
| EFFECTIVE DATE:  | <u>1/1/2014</u>   | Workers' Compensation: | Statutory - State of Florida        |
| EXPIRATION DATE: | <u>1/1/2015</u>   | Employers' Liability:  | \$100,000.00 Each Accident          |
|                  |                   |                        | \$100,000.00 Disease, Each Employee |
|                  |                   |                        | \$500,000.00 Disease, Policy Limit  |

REMARKS: Non-cancelable, without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

This certificate is issued as a matter of information only, is not a policy and of itself does not afford any insurance. Nothing contained in this certificate shall be constructed as extending coverage not afforded by the policy(ies) shown above or as affording insurance to any insured not named above. This provides coverage for Florida policyholders and Florida domiciled employees only.

By:   
 Brett Stiegel, Administrator  
 FRSA-SIF

By:   
 Debra Guidry, CPCU, Underwriting Manager  
 FRSA-SIF

THIS DOCUMENT HAS A COLORED BACKGROUND FROM MICROPRINTING ON LINEAR OR PATENTED PAPER

AC# 6141487

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION  
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L12052600321

| DATE       | BATCH NUMBER | LICENSE NBR |
|------------|--------------|-------------|
| 05/26/2012 | L18191501    | CCC056739   |

The ROOFING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2014

CAPPS, JAMES BLAKE  
CAPPS ROOFING INC  
8686 SE ALABAMA PL  
HOBE SOUND

FL 33455

RICK SCOTT  
GOVERNOR

KEN LAWSON  
SECRETARY

DISPLAY AS REQUIRED BY LAW



2013-2014 MARTIN COUNTY ORIGINAL  
BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI OFD, TAX COLLECTOR  
2466 S.E. WILLOUGHBY BLVD., STUART, FL 34984  
(772) 288-5604

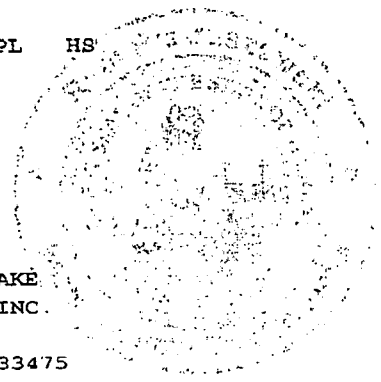
ACCOUNT 1993-520-0072 (CER)  
PHONE (772) 545-3442 SCNO 023561  
LOCATION 8686 SE ALABAMA PL HS

CHARACTER COUNTS IN MARTIN COUNTY

|          |        |          |          |
|----------|--------|----------|----------|
| PROPERTY | \$ .00 | LIC. FEE | \$ 26.25 |
|          | \$ .00 | PENALTY  | \$ .00   |
|          | \$ .00 | COL. FEE | \$ .00   |
|          | \$ .00 | TRANSFER | \$ .00   |
| TOTAL    |        | 26.25    |          |

ROOFING CONTRACTOR

CAPPS, JAMES BLAKE  
CAPPS ROOFING, INC.  
P.O. BOX 8053  
HOBE SOUND, FL 33475



07 AUGUST 13  
ENDING SEPTEMBER 30, 2014

11 2012 31020.0001 26.25 PAID

THIS RECEIPT IS VALID FOR THE MONTH OF AUGUST 2014. IF YOU ARE A BUSINESS OWNER AND YOU HAVE NOT PAID YOUR BUSINESS TAX RECEIPT FOR THE MONTH OF AUGUST, YOU WILL BE PENALIZED FOR THE MONTH OF SEPTEMBER. THE PENALTY FOR LATE PAYMENT IS 5% OF THE TAX DUE. IF YOU ARE A BUSINESS OWNER AND YOU HAVE NOT PAID YOUR BUSINESS TAX RECEIPT FOR THE MONTH OF AUGUST, YOU WILL BE PENALIZED FOR THE MONTH OF SEPTEMBER. THE PENALTY FOR LATE PAYMENT IS 5% OF THE TAX DUE.





FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

# SELF INSURERS FUND

1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

**ISSUED TO:**

Town Of Sewall's Point  
1 So. Sewall's Point Rd.  
Sewall's Point, FL 34996

**COPY PROVIDED TO:**

Capps Roofing, Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

Attention: To Whom It May Concern

Capps Roofing, Inc.

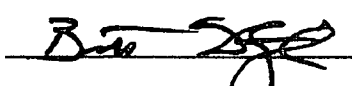
**This is to Certify that:** P.O. Box 8053  
Hobe Sound, FL 33475

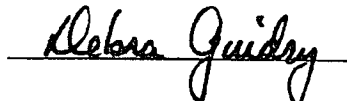
being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, P.O. Box 4907, Winter Park, FL 32793.

|                  |            |                        |                                     |
|------------------|------------|------------------------|-------------------------------------|
| COVERAGE NUMBER: | 870-032496 | <u>LIMITS</u>          |                                     |
| EFFECTIVE DATE:  | 1/1/2014   | Workers' Compensation: | Statutory - State of Florida        |
| EXPIRATION DATE: | 1/1/2015   | Employers' Liability:  | \$100,000.00 Each Accident          |
|                  |            |                        | \$100,000.00 Disease, Each Employee |
|                  |            |                        | \$500,000.00 Disease, Policy Limit  |

REMARKS: Non-cancelable, without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

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By:   
Brett Stiegel, Administrator  
FRSA-SIF

By:   
Debra Guidry, CPCU, Underwriting Manager  
FRSA-SIF

**Christine Bergeron**

---

**From:** Christine Bergeron  
**Sent:** Monday, June 30, 2014 3:08 PM  
**To:** Kathryn Barbera  
**Subject:** Emergency Permits

**Importance:** High

Kathi

Please advise your officers that the following 2 permits are Emergency Permits. They have been given authority to begin work without a permit as we have the permit application here.

1 – 11 Middle Road, Owner -- Winzurk, Contractor – Capps Roofing, Inc.

2 – 21 Hillcrest Drive, Owner Krue / Ihle, Contractor – Starpro Roofing & Sheet Metal, Inc.

Christine

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

[cbergeron@sewallspoint.org](mailto:cbergeron@sewallspoint.org)  
[www.sewallspoint.org](http://www.sewallspoint.org)



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-2204765

## RE-ROOF CHECKLIST 2010 FBC

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

**THIS REVIEW SHEET MUST ACCOMPANY THE APPLICATION SUBMITTAL.**

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

The following minimum requirements must be provided for permitting and inspections:

- 1 Copy Completed application
- 2 Copies Complete list of proposed materials
- 2 Copies Re-roof certification
- 1 Copy Re-roof Inspection affidavit if used, prior to final inspection.

### RESIDENTIAL REROOFS:

- 2 Copies approved roofing manufacturer specifications for all products used.
  - Manufacturer specs/fastening schedule for roof shingles (must meet the minimum area wind load).
  - Manufacturer must have Florida Product Approval
  - Location of proposed re-roof (if only a partial re-roof) and area % calculation
  - Section/detail through hip and ridge tile caps per F.R.S.A. for tile roofs\*\*
- \_\_\_\_\_ 2 Copies Re-roof windstorm loss mitigation certification (and affidavit if applicable)

### COMMERCIAL REROOFS:

- \_\_\_\_\_ 2 Copies Roof Plan:
  - Show all features (pitch, drains, equipment, etc.)
  - Details: 3/4" = 1'.0" min. scale
  - Parapet or edge
  - Rooftop mounting or equipment expansion joints
  - Type of roofing (& insulation if any) being removed
  - Type of roof deck
- \_\_\_\_\_ 2 Copies Approved roofing manufacturer specifications for all products used.
  - Manufacturers complete roofing system specifications & installation guidelines (Include fastening schedule meeting minimum area wind load).
- \_\_\_\_\_ 1 Copy Verification of Contractor form
  - Contractor verification form (HVAC and/or electric) required if roof top HVAC equipment is removed/reinstalled and/or if HVAC electric is disconnected/reconnected.

\*\*Concrete or ClayTile Roof: Specify how the roof field tile will be attached to the deck (reference F.S.R.A Installation Manual). Provide section details showing the installation/attachment of ridge and hip cap tile. Demonstrate compliance with the 2010 FBC 1507.3. & 2010 FBC/Residential R905.3. Also provide Product Approval for all roof adhesives.

**All Product Approval & Installation Spec's must be on the job-site for inspection.**  
**All tile re-roofs require an "in progress" tile installation inspection or certified pull test at final.**

**Christine Bergeron**

---

**From:** Blake Capps <blake@cappsroofing.com>  
**Sent:** Saturday, June 28, 2014 6:59 AM  
**To:** Christine Bergeron  
**Subject:** Lic and Insur  
**Attachments:** Scan\_Doc0169.pdf

Ms. Bergeron,

Please see attached. Please confirm receipt.

Sincerely,  
J. Blake Capps



**(772) 545-3442 (561) 744-8765**

**(772) 336-5495 (561)-964-7579**

P.O. Box 8053, Hobe Sound, FL 33475

Fax: (772) 546-4606

[Office@cappsroofing.com](mailto:Office@cappsroofing.com)

**Angie's list.**



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-2204765

**RESIDENTIAL REROOF WINDSTORM LOSS  
MITIGATION CERTIFICATION (FLORIDA STATUTE 553.844)**

**ALL RE-ROOFS REGARDLESS OF VALUE SHALL COMPLY WITH THE FOLLOWING:**

**Re-nailing:** All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

\_\_\_\_\_ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

\_\_\_\_\_ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

\_\_\_\_\_ Outside of the HVHZ, an underlayment complying with section 1507.2.3 of the Florida Building Code, Building fastened as described below or a layer of asphalt impregnated approved #30 felt shall be installed. The felt is to be fastened with 1" round plastic cap or metal cap nails, attached to a nailable deck in a grid pattern of 12 inches (305 mm) staggered between the overlaps, with 6-inch (152 mm) spacing at the overlaps. For slopes of 2:12 to 4:12 an additional layer of felt shall be installed in a single-fashion and lapped 19" and fastened as described above. (No additional underlayment shall be required over the top of this sheet.)

✓ \_\_\_\_\_ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-moped shall be deemed to meet the requirements for secondary water barrier.

**Residential Structures valued at \$300,000 or more shall comply with the following:**

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
  1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
  2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
    - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
    - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
    - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

RE-ROOF CERTIFICATION

PERMIT # \_\_\_\_\_  
 CONTRACTOR'S NAME: Capps Roofing, Inc. PHONE #: 545-3442 FAX: \_\_\_\_\_  
 OWNER'S NAME: Clte Winzork  
 CONSTRUCTION ADDRESS: 11 Middle Rd. CITY Stuart STATE FL  
 RE-ROOF:  RESIDENTIAL (SINGLE FAMILY)  
 COMMERCIAL \*\*--REMOVE/REINSTALL ROOF TOP HVAC EQUIP \_\_\_\_\_ YES \_\_\_\_\_ NO  
 \*\*...DISCONNECT/RECONNECT HVAC ELECTRIC \_\_\_\_\_ YES \_\_\_\_\_ NO  
 \*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION  
 RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S. \_\_\_\_\_ YES \_\_\_\_\_ NO - INSURED VALUE OF RESIDENCE: \$ \_\_\_\_\_

ROOF TYPE:  HIP \_\_\_\_\_ BOSTON-HIP \_\_\_\_\_ GABLE \_\_\_\_\_ FLAT \_\_\_\_\_ OTHER \_\_\_\_\_  
 ROOF PITCH: 5 /12 SLOPE

ROOF DECK: \* \_\_\_\_\_ SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED  
 \_\_\_\_\_ RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF  
 NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER  
 FLORIDA BUILDING CODE "2004".  
 \_\_\_\_\_ SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-  
 SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME  
 SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK  
 NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".  
 EXISTING DECK TO REMAIN/REPAIRED & RENAILED

EXISTING ROOF COVERING: tile EXISTING COVERING TO BE REMOVED? YES \_\_\_\_\_ NO \_\_\_\_\_

PROPOSED NEW ROOF COVERING: tile  
 MANUFACTURER Entegra PRODUCT NAME Bermuda PRODUCT APPR # FL 7804-R7

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)  
 MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV./STEEL \_\_\_\_\_ ALUMINUM \_\_\_\_\_ COPPER \_\_\_\_\_ OTHER \_\_\_\_\_

RIDGEVENT TO BE INSTALLED: \_\_\_\_\_ YES \_\_\_\_\_  NO

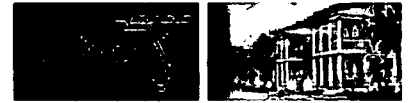
DESCRIPTION OF WORK: Tear off tile on south hip only.  
Install new tile roof on south hip only.

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

[Signature] DATE: 6/27/14  
 SIGNATURE OF CONTRACTOR







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**Product Approval**  
USER: Public User

License efficiently. Regulate fairly.

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > [Application Detail](#)



| FL #   | FL7804-R7   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
|--|---|-----------------|-------------|------------|------|----------------|------|---------|------|---------|------|---------|------|---------|------|------------|------|---------|------|
| Application Type   | Revision  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Code Version   | 2010  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Application Status   | Approved  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Comments   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Archived   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Product Manufacturer   | Entegra Roof Tile, Inc.   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Address/Phone/Email  | 1289 NE 9th Avenue<br>Okeechobee, FL 34972<br>(863) 467-0042 Ext 1228<br>tjohnson@rooftile.com  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Authorized Signature   | Terry Johnson<br>tjohnson@rooftile.com  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Technical Representative   | Jim Deyarmond   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Address/Phone/Email  | 1289 NE 9th Avenue<br>Okeechobee, FL 34972<br>(863) 467-0042<br>JDeyarmond@rooftile.com   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Quality Assurance Representative                                       | Terry Johnson   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Address/Phone/Email  | 819 South Federal Hwy Suite 300<br>Stuart, FL 34994<br>(800) 586-7663<br>tjohnson@rooftile.com  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Category   | Roofing   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Subcategory  | Roofing Tiles   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Compliance Method  | Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer<br><ul style="list-style-type: none"> <li>• Evaluation Report - Hardcopy Received</li> </ul>  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Florida Engineer or Architect Name who developed the Evaluation Report | Robert Nieminen   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Florida License  | PE-59166  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Quality Assurance Entity   | PRI Construction Materials Technologies, LLC  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Quality Assurance Contract Expiration Date                             | 11/02/2016  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Validated By   | John W. Knezevich, PE<br><ul style="list-style-type: none"> <li>• Validation Checklist - Hardcopy Received</li> </ul>   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Certificate of Independence  | <a href="#">EL7804_R7_COI_Trinity_ERD_CI - Nieminen.pdf</a>   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| <br>   |   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| Referenced Standard and Year (of Standard)                             | <table border="0"> <thead> <tr> <th><b>Standard</b></th> <th><b>Year</b></th> </tr> </thead> <tbody> <tr> <td>ASTM C1492</td> <td>2003</td> </tr> <tr> <td>FRSA/TRI 07320</td> <td>2005</td> </tr> <tr> <td>SSTD 11</td> <td>1997</td> </tr> <tr> <td>TAS 100</td> <td>1995</td> </tr> <tr> <td>TAS 101</td> <td>1995</td> </tr> <tr> <td>TAS 102</td> <td>1995</td> </tr> <tr> <td>TAS 102(A)</td> <td>1995</td> </tr> <tr> <td>TAS 112</td> <td>1995</td> </tr> </tbody> </table> | <b>Standard</b> | <b>Year</b> | ASTM C1492 | 2003 | FRSA/TRI 07320 | 2005 | SSTD 11 | 1997 | TAS 100 | 1995 | TAS 101 | 1995 | TAS 102 | 1995 | TAS 102(A) | 1995 | TAS 112 | 1995 |
| <b>Standard</b>  | <b>Year</b>   |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| ASTM C1492   | 2003  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| FRSA/TRI 07320   | 2005  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| SSTD 11  | 1997  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| TAS 100  | 1995  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| TAS 101  | 1995  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| TAS 102  | 1995  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| TAS 102(A)   | 1995  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |
| TAS 112  | 1995  |                 |             |            |      |                |      |         |      |         |      |         |      |         |      |            |      |         |      |

Equivalence of Product Standards  
Certified By

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted

06/22/2012

Date Validated

06/22/2012

Date Pending FBC Approval

06/27/2012

Date Approved

08/07/2012

**Summary of Products**

| FL #   | Model, Number or Name                                | Description  |
|--|--|--|
| 7804.1   | Entegra Concrete Roof Tiles (HVHZ jurisdictions)     | Concrete Roof Tile   |
| <b>Limits of Use</b><br>Approved for use in HVHZ: Yes<br>Approved for use outside HVHZ: No<br><br>Impact Resistant: N/A<br>Design Pressure: N/A<br>Other: Refer to ER Section 5 for Limits of Use. Refer to ER Section 6 for Installation. |  | <b>Installation Instructions</b><br><a href="#">FL7804_R7_II_er062212FINAL_ENTEGRA_FL7804-R7_HVHZ.pdf</a><br>Verified By: Robert Nieminen PE-59166<br><br>Created by Independent Third Party: Yes<br><br><b>Evaluation Reports</b><br><a href="#">FL7804_R7_AE_er062212FINAL_ENTEGRA_FL7804-R7_HVHZ.pdf</a><br>Created by Independent Third Party: Yes     |
| 7804.2   | Entegra Concrete Roof Tiles (non-HVHZ jurisdictions) | Concrete Roof Tile   |
| <b>Limits of Use</b><br>Approved for use in HVHZ: No<br>Approved for use outside HVHZ: Yes<br>Impact Resistant: N/A<br>Design Pressure: N/A<br>Other: Refer to ER Section 5 for Limits of Use. Refer to ER Section 6 for Installation.     |  | <b>Installation Instructions</b><br><a href="#">FL7804_R7_II_er062212FINAL_ENTEGRA_FL7804-R7_NON-HVHZ.pdf</a><br>Verified By: Robert Nieminen PE-59166<br>Created by Independent Third Party: Yes<br><br><b>Evaluation Reports</b><br><a href="#">FL7804_R7_AE_er062212FINAL_ENTEGRA_FL7804-R7_NON-HVHZ.pdf</a><br>Created by Independent Third Party: Yes |

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Contact Us :: 1940 North Monroe Street, Tallahassee, FL 32399 Phone: 850-487-1824

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Product Approval Accepts:





EXTERIOR RESEARCH & DESIGN, LLC.  
 Certificate of Authorization #9503  
 353 CHRISTIAN STREET, UNIT #13  
 OXFORD, CT 06478  
 PHONE: (203) 262-9245  
 FAX: (203) 262-9243

**EVALUATION REPORT**

**Entegra Roof Tile, Inc.**  
 1289 NE 9<sup>th</sup> Avenue  
 Okeechobee, FL 34972

**Evaluation Report E39310.11.11-2-R1**  
**FL7804-R7**  
**Date of Issuance: 11/02/2011**  
**Revision 1: 06/22/2012**

**SCOPE:**

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been designed to comply with the 2010 Florida Building Code (non-HVHZ) sections noted herein.

**DESCRIPTION: Entegra Concrete Roof Tiles (non-HVHZ jurisdictions)**

**LABELING:** Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

**CONTINUED COMPLIANCE:** This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

**ADVERTISEMENT:** The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

**INSPECTION:** Upon request, a copy of this entire Evaluation Report 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 Evaluation Report consists of pages 1 through 4.

**Prepared by:**

**Robert J.M. Nieminen, P.E.**  
 Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 06/22/2012. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

**CERTIFICATION OF INDEPENDENCE:**

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

**ROOFING SYSTEM EVALUATION:**

**1. SCOPE:**

**Product Category:** Roofing  
**Sub-Category:** Roofing Tiles

**Compliance Statement:** Entegra Concrete Roof Tiles, as produced by Entegra Roof Tile, Inc., have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

**2. STANDARDS:**

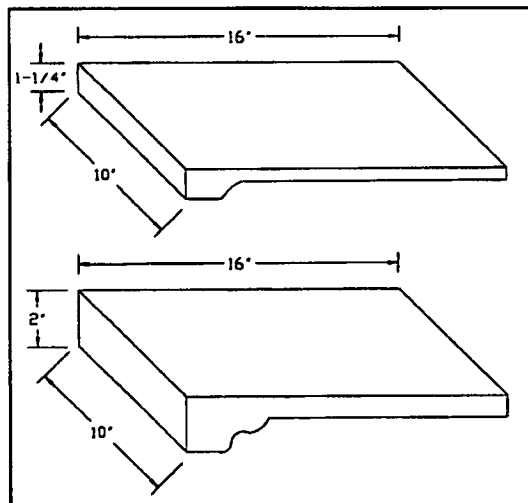
| <u>Code</u> | <u>Section</u> | <u>Property</u>         | <u>Standard</u>  | <u>Year</u> |
|-------------|----------------|-------------------------|------------------|-------------|
| 2007 & 2010 | 1507.3.5       | Physical Properties     | ASTM C1492       | 2003        |
| 2007 & 2010 | 1507.3.7       | Attachment Requirements | FRSA/TRI 07320/8 | 2005        |
| 2007        | 1715.2.1       | Overturning Moment      | SSTD 11          | 1997        |
| 2010        | 1716.2.1       | Overturning Moment      | SSTD 11          | 1997        |

**3. REFERENCES:**

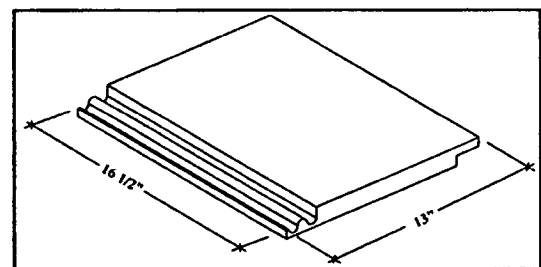
| <u>Entity</u>       | <u>Examination</u> | <u>Reference</u>        | <u>Date</u> |
|---------------------|--------------------|-------------------------|-------------|
| PRI (TST5878)       | ASTM C1492         | ESI-001-02-01           | 11/06/2006  |
| PRI (TST5878)       | ASTM C1492         | ESI-002-02-01           | 11/06/2006  |
| PRI (TST5878)       | ASTM C1492         | ESI-003-02-01           | 11/06/2006  |
| PRI (TST5878)       | ASTM C1492         | ESI-004-02-01           | 11/06/2006  |
| PRI (TST5878)       | ASTM C1492         | ESI-005-02-01           | 12/12/2006  |
| ATL (TST3782)       | ASTM C1492         | RT0615.01-11            | 06/28/2011  |
| ATL (TST3782)       | ASTM C1492         | RT0615.02-11            | 06/28/2011  |
| ATL (TST3782)       | ASTM C1492         | RT0615.03-11            | 06/28/2011  |
| ATL (TST3782)       | ASTM C1492         | RT0615.04-11            | 06/28/2011  |
| ATL (TST3782)       | ASTM C1492         | RT0615.05-11            | 06/28/2011  |
| Tile Roof Institute | SSTD 11            | Membership Confirmation | Current     |
| PRI (QUA9110)       | Quality Assurance  | Service Confirmation    | 11/02/2011  |

**4. PRODUCT DESCRIPTION:**

4.1 **BERMUDA FLAT** and **PLANTATION FLAT** are ASTM C1492, Type III (low-profile) concrete roof tiles.

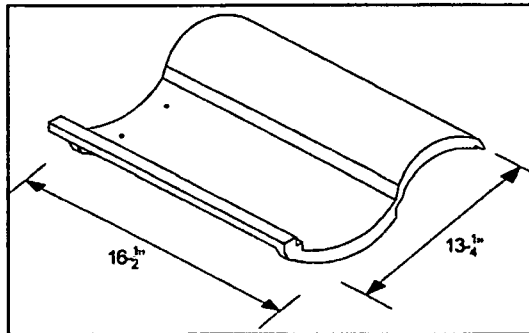


**Bermuda Flat**

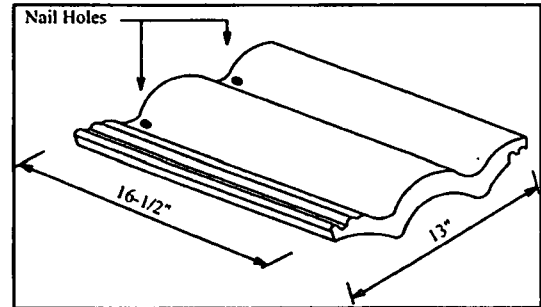


**Plantation Flat**

4.2 **BELLA HIGH "S"** and **ESTATE "S"** are ASTM D1492, Type II (medium-profile) concrete roof tiles.

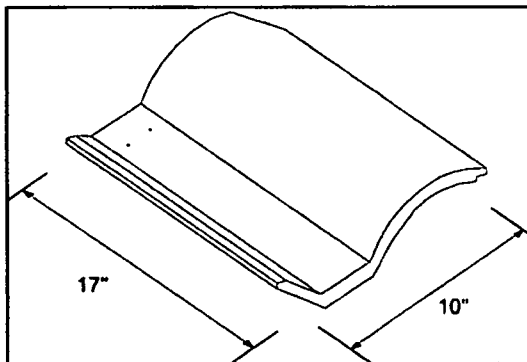


**Bella High "S"**



**Estate "S"**

4.3 **GALENA SPANISH "S"** are ASTM C1492, Type I (high-profile) concrete roof tiles.



## 5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in the HVHZ.
- 5.2 Fire classification is not part of this evaluation; refer to FBC Section 1505 and current Approved Roofing Materials Directory for fire rating of this product.
- 5.3 Installation shall comply with manufacturer's current published instructions, but not less than the requirements of FBC Section 1507.3 and the FRSA/TRI 07320.
- 5.4 For mechanically attached tiles, attachment for wind load resistance shall be in accordance with FRSA/TRI 07320/8-05.
- 5.5 For mortar-set or adhesive-set tiles, attachment for wind load resistance shall be in accordance with FBC Section 1609.5.3 and the mortar or adhesive manufacturer's Product Approval.
- 5.6 All products in the roof assembly shall have quality assurance audit in accordance with the Florida Building Code and F.A.C. Rule 9N-3.

## 6. INSTALLATION:

- 6.1 Entegra Concrete Roof Tiles may be mechanically fastened, mortar-set or adhesive-set. Installation shall comply with manufacturer's current published instructions, but not less than the requirements of FBC Section 1507.3, the FRSA/TRI 07320 and, for mortar-set or adhesive-set applications, the mortar or adhesive manufacturer's Product Approval.



**7. LABELING:**

7.1 Each unit shall bear the imprint or identifiable marking of the manufacturer's name or logo. Tile lots shall be labeled in accordance with the requirements of the Accredited Quality Assurance Agency noted herein.

**8. BUILDING PERMIT REQUIREMENTS:**

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

**9. MANUFACTURING PLANTS:**

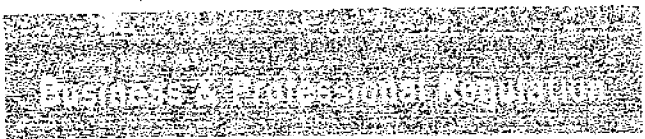
Contact the noted QA agency for information on product locations covered for F.A.C. Rule 9N-3 QA requirements.

**10. QUALITY ASSURANCE ENTITY:**

PRI Construction Materials Technologies, LLC. – QUA9110; (813) 621-5777

**- END OF EVALUATION REPORT -**

*Underlayment*



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**Business  
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Regulation**

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**Product Approval**  
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|   |  |                 |             |            |      |           |      |            |      |
|---|--|-----------------|-------------|------------|------|-----------|------|------------|------|
| <b>FL #</b>   | FL5259-R15   |                 |             |            |      |           |      |            |      |
| <b>Application Type</b>   | Revision   |                 |             |            |      |           |      |            |      |
| <b>Code Version</b>   | 2010   |                 |             |            |      |           |      |            |      |
| <b>Application Status</b>   | Approved   |                 |             |            |      |           |      |            |      |
| <b>Comments</b>   |  |                 |             |            |      |           |      |            |      |
| <b>Archived</b>   | <input type="checkbox"/>   |                 |             |            |      |           |      |            |      |
| <b>Product Manufacturer</b>   | POLYGLASS USA  |                 |             |            |      |           |      |            |      |
| <b>Address/Phone/Email</b>  | 150 Lyon Drive<br>Fernley, NV 89408<br>(570) 384-1230 Ext 242<br>jakins@polyglass.com  |                 |             |            |      |           |      |            |      |
| <b>Authorized Signature</b>   | James Akins<br>jakins@polyglass.com  |                 |             |            |      |           |      |            |      |
| <b>Technical Representative</b>   | Steve Wadding  |                 |             |            |      |           |      |            |      |
| <b>Address/Phone/Email</b>  | 150 Lyon Drive<br>Fernley, NV 98408<br>(602) 363-7139<br>steve@polyglass.com   |                 |             |            |      |           |      |            |      |
| <b>Quality Assurance Representative</b>                                       | James Akins  |                 |             |            |      |           |      |            |      |
| <b>Address/Phone/Email</b>  | 555 Oakridge Road<br>Humboldt Industrial Pkwy<br>Hazleton, PA 18201<br>(800) 894-4563<br>jakins@polyglass.com  |                 |             |            |      |           |      |            |      |
| <b>Category</b>   | Roofing  |                 |             |            |      |           |      |            |      |
| <b>Subcategory</b>  | Underlayments  |                 |             |            |      |           |      |            |      |
| <b>Compliance Method</b>  | Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer<br><input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received   |                 |             |            |      |           |      |            |      |
| <b>Florida Engineer or Architect Name who developed the Evaluation Report</b> | Robert Nieminen  |                 |             |            |      |           |      |            |      |
| <b>Florida License</b>  | PE-59166   |                 |             |            |      |           |      |            |      |
| <b>Quality Assurance Entity</b>   | UL LLC   |                 |             |            |      |           |      |            |      |
| <b>Quality Assurance Contract Expiration Date</b>                             | 11/30/2012   |                 |             |            |      |           |      |            |      |
| <b>Validated By</b>   | John W. Knezevich, PE<br><input checked="" type="checkbox"/> Validation Checklist - Hardcopy Received  |                 |             |            |      |           |      |            |      |
| <b>Certificate of Independence</b>  | <a href="#">FL5259_R15_COI_Trinity_ERD_CI - Nieminen.pdf</a>   |                 |             |            |      |           |      |            |      |
| <b>Referenced Standard and Year (of Standard)</b>                             | <table border="0"> <tr> <td><b>Standard</b></td> <td><b>Year</b></td> </tr> <tr> <td>ASTM D1970</td> <td>2001</td> </tr> <tr> <td>ASTM D226</td> <td>2006</td> </tr> <tr> <td>ASTM D6164</td> <td>2005</td> </tr> </table> | <b>Standard</b> | <b>Year</b> | ASTM D1970 | 2001 | ASTM D226 | 2006 | ASTM D6164 | 2005 |
| <b>Standard</b>   | <b>Year</b>  |                 |             |            |      |           |      |            |      |
| ASTM D1970  | 2001   |                 |             |            |      |           |      |            |      |
| ASTM D226   | 2006   |                 |             |            |      |           |      |            |      |
| ASTM D6164  | 2005   |                 |             |            |      |           |      |            |      |



|                |      |
|----------------|------|
| ASTM D6222     | 2002 |
| ASTM G154      | 2005 |
| ASTM G155      | 2005 |
| FM 4474        | 2004 |
| FRSA/TRI 07320 | 2005 |
| TAS 103        | 1995 |

Equivalence of Product Standards Certified By

Sections from the Code

Product Approval Method Method 1 Option D

Date Submitted 04/23/2012  
 Date Validated 04/25/2012  
 Date Pending FBC Approval 04/28/2012  
 Date Approved 06/11/2012

| Summary of Products  |                              |  |
|--|------------------------------|--|
| FL #   | Model, Number or Name        | Description  |
| 5259.1   | Polyglass Roof Underlayments | Roofing underlayments  |
| <b>Limits of Use</b><br>Approved for use in HVHZ: No<br>Approved for use outside HVHZ: Yes<br>Impact Resistant: N/A<br>Design Pressure: +N/A/-622.5<br>Other: 1.) The design pressure in this application relates to one particular underlayment system for use under foam-on tile systems. Refer to ER Section 5.5.2 for other systems and maximum design pressures. 2.) Refer to ER Section 5 for other limits of use. |                              | <b>Installation Instructions</b><br>FL5259 R15 II er042212FINAL POLYGLASS UNDERLAYMENTS FL5259-R15.pdf<br>Verified By: Robert Nieminen PE-59166<br>Created by Independent Third Party: Yes<br><b>Evaluation Reports</b><br>FL5259 R15 AE er042212FINAL POLYGLASS UNDERLAYMENTS FL5259-R15.pdf<br>Created by Independent Third Party: Yes |

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EXTERIOR RESEARCH & DESIGN, LLC.  
Certificate of Authorization #9503  
353 CHRISTIAN STREET, UNIT #13  
OXFORD, CT 06478  
PHONE: (203) 262-9245  
FAX: (203) 262-9243

## EVALUATION REPORT

**Polyglass USA, Inc.**  
150 Lyon Drive  
Fernley, NV 98408

**Evaluation Report P12060.02.09-R10**  
**FL5259-R15**  
**Date of Issuance: 02/24/2009**  
**Revision 10: 04/22/2012**

### SCOPE:

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been designed to comply with the 2010 Florida Building Code sections noted herein.

### DESCRIPTION: Polyglass Roof Underlayments

**LABELING:** Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

**CONTINUED COMPLIANCE:** This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

**ADVERTISEMENT:** The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

**INSPECTION:** Upon request, a copy of this entire Evaluation Report 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 Evaluation Report consists of pages 1 through 10.

### Prepared by:

**Robert J.M. Nieminen, P.E.**  
Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 04/22/2012. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

### CERTIFICATION OF INDEPENDENCE:

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.



**ROOFING COMPONENT EVALUATION:**

**1. SCOPE:**

**Product Category:** Roofing  
**Sub-Category:** Underlayment  
**Compliance Statement:** Roof Underlayments, as produced by Polyglass USA, Inc., have demonstrated compliance with the following sections of the Florida Building Code through testing in accordance with the following Standards. Compliance is subject to the Installation Requirements and Limitations / Conditions of Use set forth herein.

**2. STANDARDS:**

| Section  | Property               | Standard       | Year |
|--|------------------------|----------------|------|
| 1507.2.3, 1507.3.3, 1507.5.3, 1507.7.3, 1507.8.3, 1507.9.3 | Physical Properties    | ASTM D226      | 2006 |
| 1507.2.4, 1507.2.9.2, 1507.3.3, 1507.5.3                   | Physical Properties    | ASTM D1970     | 2001 |
| 1507.11.2  | Physical Properties    | ASTM D6164     | 2005 |
| 1507.11.2  | Physical Properties    | ASTM D6222     | 2002 |
| 1504.6   | Accelerated Weathering | ASTM G154      | 2005 |
| 1504.6   | Accelerated Weathering | ASTM G155      | 2005 |
| 1504.3.1   | Wind Uplift            | FM 4474        | 2004 |
| 1507.3.3   | Installation Practice  | FRSA/TRI 07320 | 2005 |
| 1523.6.5.2.1   | Physical Properties    | TAS 103        | 1995 |

**3. REFERENCES:**

| Entity                  | Examination         | Reference       | Date       |
|-------------------------|---------------------|-----------------|------------|
| FM Approvals (TST 1867) | Wind Uplift         | 3004091         | 01/12/2000 |
| PRI (TST 5878)          | Physical Properties | PRI01111        | 04/08/2002 |
| PRI (TST 5878)          | Physical Properties | PUSA-005-02-01  | 01/31/2002 |
| PRI (TST 5878)          | Physical Properties | PUSA-013-02-01  | 12/23/2002 |
| PRI (TST 5878)          | Physical Properties | PUSA-013-02-02  | 12/23/2002 |
| PRI (TST 5878)          | Physical Properties | PUSA-013-02-03  | 12/23/2002 |
| PRI (TST 5878)          | Physical Properties | PUSA-018-02-01  | 07/14/2003 |
| PRI (TST 5878)          | Physical Properties | PUSA-028-02-01  | 07/13/2005 |
| PRI (TST 5878)          | Physical Properties | PUSA-033-02-01  | 01/12/2006 |
| PRI (TST 5878)          | Physical Properties | PUSA-035-02-01  | 09/29/2006 |
| PRI (TST 5878)          | Physical Properties | PUSA-055-02-02  | 12/10/2007 |
| PRI (TST 5878)          | Physical Properties | PUSA-061-02-02  | 01/28/2008 |
| PRI (TST 5878)          | Physical Properties | PUSA-076-02-01  | 02/22/2008 |
| PRI (TST 5878)          | Physical Properties | PUSA-083-02-01  | 04/14/2008 |
| PRI (TST 5878)          | Physical Properties | PUSA-088-02-01  | 07/29/2009 |
| MTI (TST 2508)          | Physical Properties | JX20H7A         | 04/01/2008 |
| MTI (TST 2508)          | Physical Properties | RX14E8A         | 01/29/2009 |
| ERD (TST 6049)          | Physical Properties | 11752.09.99-1   | 02/08/2000 |
| ERD (TST 6049)          | Wind Uplift         | 11776.06.02     | 01/16/2003 |
| ERD (TST 6049)          | Physical Properties | 02200.07.03     | 07/14/2003 |
| ERD (TST 6049)          | Wind Uplift         | P1740.01.07     | 01/04/2007 |
| ERD (TST 6049)          | Physical Properties | P5110.04.07-1   | 04/11/2007 |
| ERD (TST 6049)          | Wind Uplift         | P9260.03.08     | 03/21/2008 |
| ERD (TST 6049)          | Physical Properties | P13450.08.09    | 08/13/2009 |
| ERD (TST 6049)          | Wind Uplift         | P30540.11.09-R1 | 11/30/2009 |
| ERD (TST 6049)          | Physical Properties | P33360.06.10    | 06/25/2010 |

| <u>Entity</u>         | <u>Examination</u>      | <u>Reference</u>       | <u>Date</u>     |
|-----------------------|-------------------------|------------------------|-----------------|
| ERD (TST 6049)        | Physical Properties     | P33370.03.11           | 03/02/2011      |
| ERD (TST 6049)        | Physical Properties     | P33370.04.11           | 04/26/2011      |
| ICC-ES (EVL 2396)     | IBC Compliance          | ESR-1697               | 11/01/2011      |
| Miami-Dade (CER 1592) | HVHZ Compliance         | NOA                    | Current         |
| Polyglass USA         | Manufacturing Affidavit | Products Current       | 02/18/2009      |
| Polyglass USA         | P/L Affidavit           | Mule-Hide Cross Ltg    | 03/01/2008      |
| Polyglass USA         | Materials Affidavit     | Polystick SA Compound  | 08/18/2011      |
| UL, LLC. (QUA9625)    | Quality Control         | File No. R14571, Vol 1 | Exp. 11/30/2012 |

#### 4. PRODUCT DESCRIPTION:

##### 4.1 Mechanically Fastened Underlayments:

- 4.1.1 ELASTOBASE is a fiberglass reinforced, SBS modified bitumen base sheet.
- 4.1.2 ELASTOBASE P is a polyester-reinforced, SBS modified bitumen base sheet.

##### 4.2 Self-Adhering Underlayments:

- 4.2.1 POLYSTICK MTS is a nominal 60-mil thick rubberized asphalt waterproofing membrane, glass fiber reinforced, surfaced with polyolefinic film surface; meets ASTM D1970 and TAS 103.
- 4.2.2 POLYSTICK IR-Xe is a nominal 60-mil thick rubberized asphalt waterproofing membrane, glass fiber reinforced, with an aggregate surface; meets ASTM D1970.
- 4.2.3 POLYSTICK TU is a nominal 100-mil thick rubberized asphalt waterproofing membrane, glass fiber reinforced, with a granular surface; meets ASTM D1970 and TAS 103.
- 4.2.4 POLYSTICK TU Plus is a nominal 80-mil thick rubberized asphalt waterproofing membrane, glass fiber reinforced, with a polyester fabric surface; meets ASTM D1970 and TAS 103.
- 4.2.5 POLYSTICK TU-P is a nominal 130-mil thick rubberized asphalt waterproofing membrane, glass-fiber/polyester reinforced, with a granular surface; meets ASTM D1970 and TAS 103.
- 4.2.6 POLYFLEX SAP, POLYFLEX SAP FR, MULE-HIDE SA-APP CAP SHEET AND MULE-HIDE SA-APP CAP SHEET (FR) are a polyester reinforced, APP modified bitumen cap sheets.
- 4.2.7 DUAL PRO™ is a nominal 60-mil thick dual-layer rubberized asphalt waterproofing membrane, fiberglass reinforced, with a polyester fabric surface.
- 4.2.8 TILE PRO™ is a nominal 60-mil thick dual-layer rubberized asphalt waterproofing membrane, fiberglass reinforced, with a polyester fabric surface.

##### 4.3 Mechanically Fastened and/or Bonded Underlayments:

- 4.3.1 ELASTOFLEX S6G AND ELASTOFLEX S6G FR are polyester reinforced, SBS modified bitumen cap sheets.
- 4.3.2 POLYFLEX G AND POLYFLEX G FR are polyester reinforced, APP modified bitumen cap sheets.

#### 5. LIMITATIONS:

- 5.1 This Evaluation Report is not for use in the HVHZ.
- 5.2 Fire Classification is not part of this Evaluation Report; refer to current Approved Roofing Materials Directory for fire ratings of this product.
- 5.3 Polyglass Roof Underlayments may be used with any prepared roof cover where the product is specifically referenced within FBC approval documents. If not listed, a request may be made to the AHJ for approval based on this evaluation combined with supporting data for the prepared roof covering.

5.4 Allowable roof covers applied atop the underlayments are as follows:

**Table 1: Roof Cover Options**

| Underlayment  | Asphalt Shingles | Nail-On Tile | Foam-On Tile     | Metal | Wood Shakes & Shingles | Stone |
|---|------------------|--------------|------------------|-------|------------------------|-------|
| Elastobase  | Yes              | Yes          | No               | Yes   | Yes                    | Yes   |
| Elastobase P  | Yes              | Yes          | No               | Yes   | Yes                    | Yes   |
| Polystick MTS                                       | Yes              | Yes          | No               | Yes   | Yes                    | Yes   |
| Polystick IR-Xe                                     | Yes              | No           | No               | No    | Yes                    | Yes   |
| Polystick TU  | Yes              | Yes          | Yes<br>See 5.4.1 | No    | Yes                    | Yes   |
| Polystick TU P                                      | Yes              | Yes          | Yes<br>See 5.4.1 | No    | Yes                    | Yes   |
| Polystick TU Plus                                   | Yes              | Yes          | Yes<br>See 5.4.1 | Yes   | Yes                    | Yes   |
| Dual Pro  | Yes              | Yes          | No               | Yes   | Yes                    | Yes   |
| Tile Pro  | Yes              | Yes          | Yes<br>See 5.4.1 | Yes   | Yes                    | Yes   |
| Elastoflex S6G or S6G FR                            | Yes              | Yes          | No               | No    | Yes                    | Yes   |
| Polyflex G or G FR                                  | Yes              | Yes          | Yes<br>See 5.4.1 | No    | Yes                    | Yes   |
| Polyflex SAP or SAP FR                              | Yes              | Yes          | Yes<br>See 5.4.1 | No    | Yes                    | Yes   |
| Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) | Yes              | Yes          | Yes<br>See 5.4.1 | No    | Yes                    | Yes   |

- 5.4.1 "Foam-On Tile" is limited to use of the following Approved tile adhesives unless tensile adhesion / long term aging data from an accredited testing laboratory is provided.
- **Polyfoam PolyPro AH160:** Polystick TU, Polystick TU P, Polystick TU Plus, Polyflex G, Polyflex G FR, Polyflex SAP, Polyflex SA Cap FR, Mule-Hide SA-APP Cap Sheet or Mule-Hide SA-APP Cap Sheet (FR) or Tile Pro.
  - **Dow TileBond:** Polystick TU P, Polystick TU Plus, Polyflex SAP or Tile Pro
- 5.4.2 For nail-on tile systems over Polystick MTS, battens are required for loading / staging of the tile.
- 5.4.3 A 2-ply underlayment system, consisting of Polystick MTS followed by Polystick MTS, TU, TU P or TU Plus, or Polyflex SAP is allowable for use under mechanically attached prepared roof systems. This is not a requirement, but is allowable if a 2-ply underlayment system is desired.

5.5 Allowable substrates are noted below:

5.5.1 Direct-Bond to Deck:

Polystick, Dual Pro, Tile Pro, Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) self-adhered to:

- > New untreated plywood;
- > ASTM D41 primed new untreated plywood;
- > Existing plywood;
- > ASTM D41 primed existing plywood;
- > ASTM D41 primed OSB;
- > Southern Yellow Pine;
- > ASTM D41 primed Southern Yellow Pine;
- > ASTM D41 primed structural concrete;
- > Huber Engineered Woods "ZIP System" Panels (designed and installed to meet wind loads for project).

*Note: Polyglass does not require priming of new or existing plywood sheathing. New or existing plywood sheathing should be cleaned of all dirt and debris prior to application of Polystick membranes.*

Elastoflex S6G or S6G FR in hot asphalt to:

- > ASTM D41 primed structural concrete.

Polyflex G or G FR torch-applied to:

- > ASTM D41 primed structural concrete.

5.5.2 Wind Resistance for Underlayment Systems in Foam-On Tile Applications: FRSA/TRI 07320 does not address wind uplift resistance of all underlayment systems beneath foam-on tile systems, where the underlayment forms part of the load-path. The following wind uplift limitations apply to underlayment systems that are not addressed in FRSA/TRI 07320 and are used in foam-on tile applications. Maximum Design Pressure is the result of testing for wind load resistance based on allowable wind loads. Refer to FBC 1609.1.5 for determination of design wind pressures.

5.5.2.1 Maximum Design Pressure = -622.5 psf.

Deck: Structural concrete to meet project requirements to satisfaction of AHJ.

Primer: ASTM D41

Underlayment: Polyflex G or G FR torch-applied.

5.5.2.2 Maximum Design Pressure = -315 psf.

Deck: Structural concrete to meet project requirements to satisfaction of AHJ.

Primer: ASTM D41

Underlayment: Polystick TU, Polystick TU P, Polystick TU Plus, Tile Pro, Polyflex SAP, PolyFlex SAP FR, Mule-Hide SA-APP Cap Sheet and Mule-Hide SA-APP Cap Sheet (FR).

5.5.2.3 Maximum Design Pressure = -135 psf.

Deck: Min. 15/32-inch plywood to meet project requirements to satisfaction of AHJ.

Primer: (Optional) ASTM D41

Joints: Min. 4-inch wide strips of Elastoflex SA-V over all plywood joints.

Underlayment: Polystick TU, Polystick TU P, Polystick TU Plus, Polyflex SAP, PolyFlex SAP FR, Mule-Hide SA-APP Cap Sheet and Mule-Hide SA-APP Cap Sheet (FR)

5.5.2.4 **Maximum Design Pressure = -90 psf.**

Deck: Min. 15/32-inch plywood to meet project requirements to satisfaction of AHJ.

Primer: (Optional) ASTM D41

Underlayment: Polystick TU, Polystick TU P, Polystick TU Plus, Polyflex SAP, PolyFlex SAP FR, Mule-Hide SA-APP Cap Sheet and Mule-Hide SA-APP Cap Sheet (FR)

5.5.2.5 All other direct-deck, adhered Polyglass underlayment systems beneath foam-on tile systems carry a Maximum Design Pressure of -45 psf.

5.5.3 **Bond-to-Insulation:**

➤ Polystick, Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) self-adhered to: ASTM C1289, Type II, Class 1 polyisocyanurate or Type V polyisocyanurate-composite insulation; DensDeck DuraGuard; DensDeck Prime; or SECUROCK Gypsum-Fiber Roof Board.

➤ Elastoflex S6G or S6G FR in hot asphalt to: DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board.

➤ Polyflex G or G FR torch-applied to: ASTM D41 primed structural concrete; DensDeck Prime or SECUROCK Gypsum-Fiber Roof Board.

For installation under mechanically attached prepared roof coverings, insulation shall be attached per minimum requirements of the prepared roof covering manufacturer's Product Approval. For installations under foam-on tile systems, insulation attachment shall be designed by a qualified design professional and installed based on testing of the insulation/underlayment system in accordance with FM 4470, Appendix K or TAS 114, Appendix J.

5.5.4 **Bond to Mechanically Attached Base Layer:**

➤ Polystick, Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) Dual Pro or Tile Pro self-adhered to: ASTM D226, Type I or II felt; Elastobase; Elastobase P or Mule-Hide Nail Base.

➤ Elastoflex S6G or S6G FR in hot asphalt to: ASTM D226, Type I or II felt; Elastobase; Elastobase P or Mule-Hide Nail Base.

➤ Polyflex G or G FR torch-applied to: Elastobase; Elastobase P or Mule-Hide Nail Base.

For installations under mechanically attached prepared roof coverings, base layer shall be attached per minimum codified requirements. For installations under foam-on tile systems, base layer shall be attached per minimum requirements of FRSA/TRI 07320/8-05 or RAS 120.

5.6 Exposure Limitations:

5.6.1 Elastobase, Elastobase P, shall not be left exposed for longer than 30-days after installation.

5.6.2 Polystick IR-Xe, Dual Pro or Tile Pro shall not be left exposed for longer than 90-days after installation.

5.6.3 Polystick MTS, TU, TU P or TU Plus shall not be left exposed for longer than 180-days after installation.

5.6.4 Polyflex SAP or SAP FR, or Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) does not have an exposure limitation, unless the prepared roof covering is to be adhesive-set tile, in which case the maximum exposure is 30 days.

5.6.5 Elastoflex S6G or S6G FR or Polyflex G or G FR does not have an exposure limitation, unless the prepared roof covering is to be adhesive-set tile (Polyflex G or G FR only), in which case the maximum exposure is 180 days.



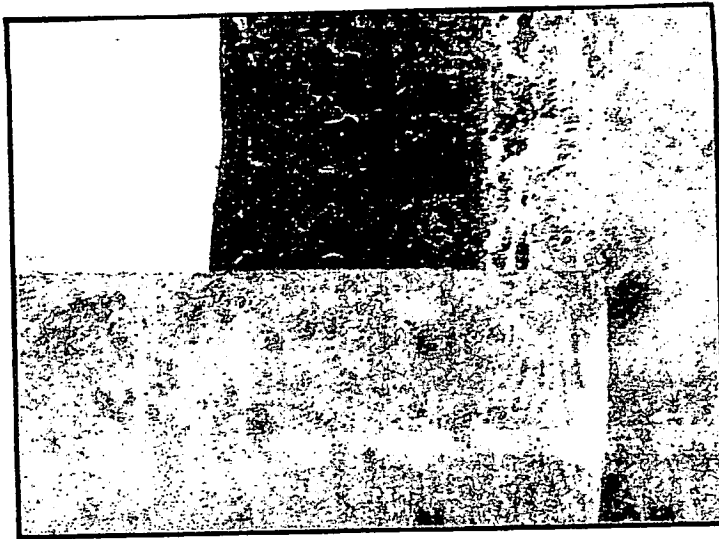
5.7 For tile roof installations governed by the FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, use is limited to the following. Reference is made to the FRSA/TRI Technical Brief titled "Florida High Wind Roof Tile Self-Adhered Underlayment Requirements as of 02/14/2011" for limitations for self-adhering underlayments used beneath tile roof systems.

| Table 2: Tile System Options per FRSA/TRI 07320/8-05                                     |                 |                      |                                    |   |
|--|-----------------|----------------------|------------------------------------|---|
| System   | Underlay Option | Section              | Reference                          | Product(s)  |
| <b>System One:</b><br>Mechanically Fastened Tile, Unsealed or Sealed Underlayment System | 1               | 3.02A<br>Batten only | Modified Cap Sheet                 | Elastoflex S6G or Elastoflex S6G FR; Polyflex G or G FR   |
|  | 2               | 3.02B                | No. 30 / Modified Cap Sheet        | Base Layer: Elastobase; Elastobase P<br>Top Layer: Elastoflex S6G or Elastoflex S6G FR; Polyflex G or G FR  |
|  | 4               | 3.02D                | No. 30                             | Elastobase; Elastobase P  |
|  | 5               | 3.02E                | Self-Adhered Underlayment          | Polystick MTS; TU; TU P; TU Plus; Polyflex SAP or SAP FR; Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR); Dual Pro; Tile Pro   |
|  | 6               | 3.02F                | No. 30 / Self-Adhered Underlayment | Base Layer: ASTM D226, Type II; Elastobase; Elastobase P; Mule-Hide Nail Base<br>Top Layer: Polystick MTS; TU; TU P; TU Plus; Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR); Dual Pro; Tile Pro |
| <b>System Two:</b><br>Mechanically Fastened Tile, Sealed Underlayment System             | 1               | 3.02A<br>Batten only | Modified Cap Sheet                 | Elastoflex S6G or Elastoflex S6G FR; Polyflex G or G FR   |
|  | 2               | 3.02B                | No. 30 / Modified Cap Sheet        | Base Layer: Elastobase; Elastobase P<br>Top Layer: Elastoflex S6G or Elastoflex S6G FR; Polyflex G or G FR  |
|  | 4               | 3.02D                | Self-Adhered Underlayment          | Polystick TU; TU P; TU Plus; Polyflex SAP or SAP FR; Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR); Dual Pro; Tile Pro  |
|  | 5               | 3.02E                | No. 30 / Self-Adhered Underlayment | Base Layer: ASTM D226, Type II; Elastobase; Elastobase P; Mule-Hide Nail Base<br>Top Layer: Polystick TU; TU P; TU Plus; Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) Dual Pro; Tile Pro       |
| <b>System Four "A":</b><br>Adhesive-Set Tile, Unsealed or Sealed Underlayment System     | 1               | 3.02A                | Modified Cap Sheet                 | Polyflex G or G FR  |
|  | 2               | 3.02B                | No. 30 / Modified Cap Sheet        | Base Layer: Elastobase; Elastobase P<br>Top Layer: Polyflex G or G FR   |
|  | 4               | 3.02D                | Self-Adhered Underlayment          | Polystick TU; TU P; TU Plus; Polyflex SAP or SAP FR; Tile Pro; Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR)  |
|  | 5               | 3.02E                | No. 30 / Self-Adhered Underlayment | Base Layer: ASTM D226, Type II; Elastobase; Elastobase P; Mule-Hide Nail Base<br>Top Layer: Polystick TU; TU P; TU Plus; Polyflex SAP or SAP FR; Tile Pro; Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR)                |
| <b>System Four "B":</b><br>Adhesive-Set Tile, Sealed Underlayment System                 | 1               | 3.02A                | No. 30 / Modified Cap Sheet        | Base Layer: ASTM D226, Type II; Elastobase; Elastobase P<br>Top Layer: Polyflex G or G FR   |
|  | 3               | 3.02C                | Self-Adhered Underlayment          | Polystick TU; TU P; TU Plus; Polyflex SAP or SAP FR; Tile Pro; Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR)  |
|  | 4               | 3.02D                | No. 30 / Self-Adhered Underlayment | Base Layer: ASTM D226, Type II; Elastobase; Elastobase P; Mule-Hide Nail Base<br>Top Layer: Polystick TU; TU P; TU Plus; Polyflex SAP or SAP FR; Tile Pro; Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR)                |



## 6. INSTALLATION:

- 6.1 Polyglass Roof Underlayments shall be installed in accordance with Polyglass published installation requirements subject to the Limitations set forth in Section 5 herein and the specifics noted below.
- 6.2 Re-fasten any loose decking panels, and check for protruding nail heads. Sweep the substrate thoroughly to remove any dust and debris prior to application, and prime the substrate (if applicable).
- 6.3 **Elastobase, Elastobase P or Mule-Hide Nail Base:**
- 6.3.1 Shall be installed in compliance with the codified requirements for ASTM D226, Type II underlayment in FBC Sections 1507 for the type of prepared roof covering to be installed.
- 6.3.2 For use in non-tile applications:
- 6.3.2.1 Reference is made to the current edition of the NRCA Steep-slope Roofing Manual and ARMA recommendations for installing shingle underlayments and flashings
- 6.3.2.2 Elastobase, Elastobase P or Mule-Hide Nail Base may be covered with a layer of Polystick, Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR), Dual Pro or Tile Pro, self-adhered, Elastoflex S6G or S6G FR in hot asphalt or Polyflex G or G FR, torch applied.
- 6.3.3 For use in tile applications, reference is made to Polyglass published installation instructions in conjunction with FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, and Table 2 herein.
- 6.4 **Polystick MTS, IR-Xe, TU, TU P or TU Plus, Polyflex SAP or SAP FR, Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR), Dual Pro or Tile Pro:**
- 6.4.1 Shall be installed in compliance with the codified requirements for ASTM D1970 underlayment in FBC Sections 1507 for the type of prepared roof covering to be installed.
- 6.4.2 For non-tile applications:
- 6.4.2.1 All self-adhering materials, with the exception of Polystick TU Plus, Polyflex SAP or SAP FR and Mule-Hide SA-APP Cap Sheet or SA-APP Cap Sheet (FR) should be back-nailed in selvage edge seam in accordance with Polyglass / Mule-Hide Back Nailing Guide. Nails shall be corrosion resistant, 11 gauge ring-shank type with a minimum 1-inch diameter metal disk or Simplex-type metal cap nail, at a minimum rate of 12" o.c. Polystick TU Plus should be back-nailed using the above noted fasteners and spacing, in area marked "nail area, area para clavar" on the face of membrane. The head lap membrane is to cover the area being back-nailed
- 6.4.2.2 All seal-lap seams (selvage laps) must be firmly rolled with a minimum 28 lb. hand roller to ensure full contact and adhesion. For Dual Pro and Tile Pro, align the edge of the top sheet to the end of the glue pattern (the sheet will overlap the fabric).



**View of Overlap Seam of Dual Pro and Tile Pro**

- 6.4.2.3 All over-fabric and over-granule end-laps shall have a 6-inch wide, uniform layer of Polyglass Polyplus 55 Premium Modified Flashing Cement, Polyglass Polyplus 50 Premium MB Flashing Cement, Polyglass PG500 MB Flashing Cement, Polystick TU Plus Tile Underlayment Flashing Cement, Mule-Hide 241 Premium Modified Flashing Cement, Mule-Hide 251 Premium Wet/Dry Electrometric Flashing Cement, or Mule-Hide 421 Mod Bit Flashing Adhesive Trowel Grade mastic, applied in between the application of the lap.
- 6.4.2.4 Polystick TU Plus, Dual Pro and Tile Pro may not be used in any exposed application such as crickets, exposed valleys, or exposed roof to wall details
- 6.4.2.5 Repair of Polystick membranes is to be accomplished by applying Polyglass Polyplus 55 Premium Modified Flashing Cement, Polyglass Polyplus 50 Premium MB Flashing Cement, Polyglass PG500 MB Flashing Cement, Polystick TU Plus Tile Underlayment Flashing Cement, Mule-Hide 241 Premium Modified Flashing Cement, Mule-Hide 251 Premium Wet/Dry Elastomeric Flashing Cement, or Mule-Hide 421 Mod Bit Flashing Adhesive Trowel Grade mastic to the area in need of repair, followed by a minimum 6 x 6 inch patch of the Polystick material of like kind, set and hand rolled in place over the repair area. Patch laps, if needed, shall be installed in a water shedding manner.
- 6.4.2.6 All Polystick membranes shall be installed to ensure full contact with approved substrates. Polyglass requires a minimum of 40-lb weighted-roller or, on steep slopes, use of a stiff broom with approximately 40-lbs of load applied for the field membrane. Hand rollers are acceptable for rolling of patches, laps (min. 28 lb roller) or small areas of the roof that are not accessible to a large roller or broom.
- 6.4.3 For tile applications (*not allowed for Polystick IR-Xe*):
- 6.4.3.1 Reference is made to Section 6.4.2 herein in conjunction with FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, and Table 2 herein, using the instructions noted above as a guideline.
- 6.4.3.2 For nail-on tile systems over Polystick MTS, battens are required for loading / staging of the tile.

**6.5 Elastoflex S6G or S6G FR:**

- 6.5.1 Elastoflex S6G or S6G FR shall be installed in compliance with current Polyglass published installation requirements. For use in nail-on tile applications, reference is made to FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, and Table 2 herein.
- 6.5.2 Elastoflex S6G or S6G FR shall be fully asphalt-applied to the substrates noted in Section 5.5. Side laps shall be minimum 3-inch and end-laps minimum 6-inch wide, and off set end-laps minimum 3 feet from course to course. Side and end laps shall be fully adhered in a complete mopping of hot asphalt with asphalt extending approximately 3/8-inch beyond the lap edge.

**6.6 Polyflex G or G FR:**

- 6.6.1 Polyflex G or G FR shall be installed in compliance with current Polyglass published installation requirements. For use in tile applications, reference is made FRSA/TRI 07320/8-05 Installation Manual, Fourth Edition, and Table 2 herein.
- 6.6.2 Polyflex G or G FR shall be fully asphalt-applied to the substrates noted in Section 5.5. Side laps shall be minimum 3-inch and end-laps minimum 6-inch wide, and off set end-laps minimum 3 feet from course to course. Side and end laps shall be fully heat-welded and inspected to ensure minimum 3/8-inch flow of modified compound beyond the lap edge.
- 6.7 **Tile Staging:**
- 6.7.1 Tile shall be loaded and staged in a manner that prevents tile slippage and/or damage to the underlayment. Refer to Polyglass published requirements for tile staging..
- 6.7.2 Battens and/or Counter-battens, as required by the tile manufacturer and FRSA/TRI 07320/8-05 must be used on all roof slopes greater than 7:12. For roof slopes in excess of 6¼:12, precautions should be taken, such as the use of battens, to prevent tile sliding during the loading process..
- 6.7.3 For nail-on tile systems over Polystick MTS, battens are required for loading / staging of the tile.
- 6.7.4 The minimum cure time after installation of self-adhering membranes and before loading of roofing tiles is forty-eight (48) hours.

**7. LABELING:**

Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.

**8. BUILDING PERMIT REQUIREMENTS:**

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

**9. MANUFACTURING PLANTS:**

Contact the noted QA agency for information on product locations covered for F.A.C. Rule 9N-3 QA requirements.

**10. QUALITY ASSURANCE ENTITY:**

UL, LLC – QUA9625; (314) 578-3406; k.chancellor@us.ul.com

**- END OF EVALUATION REPORT -**

# TOWN OF SEWALLS POINT

## BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

 Mon

 Tue

 Wed

 Thur

 Fri

7/18-14 Page 1 of 2

| PERMIT #            | OWNER/ADDRESS/CONTRACTOR                          | INSPECTION TYPE   | RESULTS                              | COMMENTS   |
|---------------------|---|---|--------------------------------------|--|
| 10922               | 5 Miramar Rd.<br>Beryne                           | Elite Gas<br>Interior Rough                             | PASS                                 | NOT READY<br>INSPECTOR <i>AF</i>                                   |
| none<br>repair only | 121 Hillcrest Dr.<br>Star Roofing + Sheet metal → | bird roost  | PASS                                 | 305-896-3938<br>CLOSE<br>INSPECTOR <i>CA</i>                       |
| 10897               | 7 Eumwita<br>Fore                                 | Stuart Fence<br>bird fence                              | PASS                                 | CLOSE<br>INSPECTOR <i>AF</i>                                       |
| <del>10919</del>    | <del>11 Middle Rd.</del>                          | <del>Dwight Coops Roofing</del><br>bird roost           | <del>PASS</del>                      | <del>772-545-3442</del><br><del>CLOSE</del><br>INSPECTOR <i>AF</i> |
| 10527               | 30 S Sewalls Pt. Rd.<br>Weston                    | bird<br>elect. plumb. ACHE<br>Weston Construction       | ELEC PASS<br>PLUMB PASS<br>HVAC FAIL | 521-676-4100<br>MAKE-UP AIR<br>INSPECTOR <i>AF</i>                 |
| 10901               | 24 S Sewalls Pt. Rd.<br>Caraso                    | Dockscope<br>bird elect. +<br>boat ramp.                | PASS                                 | CLOSE<br>INSPECTOR <i>AF</i>                                       |
| 10694               | 53 N River Rd.                                    | St. George Const.<br>fill & slab part 1<br>gar. + home? | CANCEL                               | 263-9000<br>INSPECTOR  |

**11290**

**REROOF**



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

## BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK**

**A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

|                        |                          |                       |                   |
|------------------------|--------------------------|-----------------------|-------------------|
| PERMIT NUMBER:         | 11290                    | DATE ISSUED:          | May 27, 2015      |
| SCOPE OF WORK:         | Re-Roof                  |                       |                   |
| CONTRACTOR:            | Capps Roofing            |                       |                   |
| PARCEL CONTROL NUMBER: | 13-38-41-002-000-00370-7 | SUBDIVISION:          | High Point Lot 37 |
| CONSTRUCTION ADDRESS:  | 11 Middle Road           |                       |                   |
| OWNER NAME:            | Winzurk                  |                       |                   |
| QUALIFIER:             | J Blake Capps            | CONTACT PHONE NUMBER: | 545-3442          |

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

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

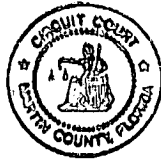
**24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE  
 CALL 287-2455 - 8:00AM TO 4:00PM**

INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY

### INSPECTIONS

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

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



THIS IS TO CERTIFY THAT THE  
FOREGOING PAGE(S) IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL  
DOCUMENT AS FILED IN THIS OFFICE  
CAROLYN TIMMANN, CLERK

INSTR # 2516578  
OR BK 2785 FG 2613  
(1 Pgs)  
RECORDED 05/22/2015 03:57:58 PM  
CAROLYN TIMMANN  
MARTIN COUNTY CLERK

BY: [Signature] D.C.  
DATE: 5/22/15

**NOTICE OF COMMENCEMENT**  
To be completed when construction value exceeds \$2,500.00

PERMIT #: \_\_\_\_\_ TAX FOLIO #: 13-38-41-002-000-00370-7

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 (AND STREET ADDRESS, IF AVAILABLE):  
High Point Lot 37 OR 342/2303

GENERAL DESCRIPTION OF IMPROVEMENT: re roof

OWNER INFORMATION OR LESSEE INFORMATION, IF THE LESSEE CONTRACTED FOR THE IMPROVEMENT:  
Name: Ute Winkler 11 Middle Rd, Stuart, FL 34996  
Address: \_\_\_\_\_  
Interest in property: Fee Simple  
Name and address of fee simple title holder (if different from Owner listed above): \_\_\_\_\_

CONTRACTOR'S NAME: Capps Roofing, Inc. Phone No.: \_\_\_\_\_  
Address: PO Box 8053 Hialeah South, FL 33475

SURETY COMPANY (if applicable, a copy of the payment bond is attached):  
Name and address: \_\_\_\_\_  
Phone No.: \_\_\_\_\_ Bond amount: \_\_\_\_\_

LENDER'S NAME: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_

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: \_\_\_\_\_ Phone No.: \_\_\_\_\_  
Address: \_\_\_\_\_

In addition to himself or herself, owner designates \_\_\_\_\_ of \_\_\_\_\_ to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.  
Phone number of person or entity designated by Owner: \_\_\_\_\_

Expiration date of Notice of Commencement:  
(the expiration date may not be before the completion of construction and final payment to the contractor, but will be 1 year from the date of recording unless a different date is specified): \_\_\_\_\_

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

Under penalty of perjury, I declare that I have read the foregoing and that the facts in it are true to the best of my knowledge and belief.

X Ute Winkler  
Signature of Owner or Lessee, or Owner's or Lessee's Authorized Officer/Director/Partner/Manager/Attorney-in-fact  
owner  
Signatory's Title/Office

The foregoing instrument was acknowledged before me this 22 day of May, 2015  
By: Ute Ingerborg Winkler as owner for Self  
Name of person Type of authority (e.g. officer, trustee) Party on behalf of whom instrument was executed

[Signature]  
Notary's Signature  
(Print, Type, or Stamp Commissioned Name of Notary)

Personally known  or produced identification   
Type of identification produced: FCID



# Town of Sewall's Point

## BUILDING PERMIT APPLICATION

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

Date: 5/22/15

OWNER/LESSEE NAME: Ute WinzURK Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_

Job Site Address: 11 Middle Rd. City: Stuart State: FL Zip: 34998

Legal Description: High Point Lot 37 or 342/2303 Parcel Control Number: 13-38-41-002-000-00370-7

Fee Simple Holder Name: Same As Above Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Telephone: \_\_\_\_\_

**\*SCOPE OF WORK (PLEASE BE SPECIFIC):**

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

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

**COST AND VALUES:** (Required on ALL permit applications)  
 Estimated Value of Improvements: \$ 16,500.00  
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)  
 Is subject property located in flood hazard area? VE10  AE9  AE8   
**FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:**  
 Estimated Fair Market Value prior to improvement: \$ 100,610.00  
 (Fair Market Value of the Primary Structure only, Minus the land value)  
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: CAMS Roofing, Inc. Phone: 545-3442 Fax: \_\_\_\_\_

Qualifiers name: J. Blake CAMS Street: P.O. Box 8053 City: Highland State: FL Zip: 33475

State License Number: CCC056739 OR: Municipality: \_\_\_\_\_ License Number: \_\_\_\_\_

LOCAL CONTACT: J. Blake CAMS Phone Number: 772-545-3442

DESIGN PROFESSIONAL: \_\_\_\_\_ Fla. License# \_\_\_\_\_

Street: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone Number: \_\_\_\_\_

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

Carport: \_\_\_\_\_ Total under Roof: 4400 Elevated Deck: \_\_\_\_\_ Enclosed area below BFE\*: \_\_\_\_\_  
 \* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

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

**WARNINGS TO OWNERS AND CONTRACTORS:**

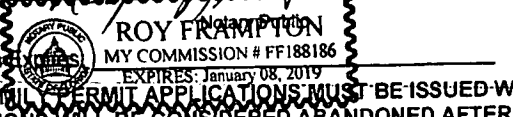
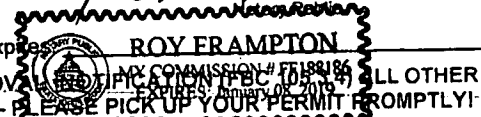
- YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
- IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
- BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 60-95.
- THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:  
 X J. Blake Camms  
 State of Florida, County of: Martin  
 On This the 22nd day of MAY, 2015  
 by J. Blake Camms who is personally  
 known to me or produced  
 As identification: [Signature]

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE:  
 X J. Blake Camms  
 State of Florida, County of: Martin  
 On This the 22nd day of MAY, 2015  
 by J. Blake Camms who is personally  
 known to me or produced  
 As identification: [Signature]

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



SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL. APPLICATION FEE (10%) AND ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!





Martin Co. (772) 545-3442  
N. Palm Beach Co. (561) 744-8765  
S. Palm Beach Co. (561) 964-7579  
St. Lucie & Indian River Co. (772) 336-5495  
P.O. Box 8053 • Hobe Sound • FL 33475  
Fax: (772) 546-4606 • office@cappsroofing.com

## PROPOSAL

April 30, 2015

Ute Winzark  
11 Middle Rd.  
Stuart, FL 34996  
781-4686  
INGE43@bellsouth.net

We propose to furnish all material and perform all labor necessary to complete the following:

### Asphalt Shingles on Sloped Portion of Roof

Pull required permit. Tear off existing shingles. Dispose of debris.  
Repair rotten plywood, trusses and fascia boards as needed (no additional charges).  
Re-nail decking on entire sloped roof.  
Install 30-lb. felt underlayment to plywood.  
Install new lead pipe coverings and vents. Remove one power vent.  
Install 3" x 3", painted, galvanized drip edge and galvanized valley flashing.  
Install Owens Corning Oakridge, fungus-resistant, fiberglass, architectural shingles with limited lifetime warranty.  
Install three, low-profile, 750 vents for attic ventilation.  
Any necessary painting or gutter work to be done by others.  
No work to be done on flat roof.  
Bid does not include any necessary or desired work on roof-to-wall connectors (i.e., "straps" or "clips").

Price: \$16,500.00

Draw Schedule: Due when old roof is stripped and dried in: 50%. Due upon completion of job: 50%. The price stated is good for 30 days.

Workmanship Warranty: Roofing contractor's workmanship warranty of five years, covering all labor and material for any leaks caused by defective workmanship.

Capps Roofing, Inc. is hereby authorized to furnish all materials and labor required to complete the work for which we agree to pay the amounts itemized above. In the event that litigation is instituted to enforce or interpret this contract, the prevailing party shall be entitled to reasonable attorney's fees and costs at both the trial and appellate levels.

Ute S. Winzark  
OWNER

5-6-15  
DATE

J. Blake Capps  
AUTHORIZED AGENT,  
CAPPS ROOFING, INC.

April 30, 2015  
DATE

O.C.B.S.



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

Site Provided by...  
 governmax.com 1.12

**Summary**



Parcel ID  
 1 of 1

**Tabs**  
**Summary**

- Print View
- Land
- Improvements
- Assessments & Exemptions
- Sales
- Taxes →
- NEW: Navigator
- Parcel Map →
- Notice of Prop.
- Taxes →

| Parcel ID                | Account # | Unit Address                 | Market Total Value | Website Updated |
|--------------------------|-----------|------------------------------|--------------------|-----------------|
| 13-38-41-002-000-00370-7 | 27725     | 11 MIDDLE RD, SEWALL'S POINT | \$300,610          | 5/23/2015       |

| Owner Information         |                                 |
|---------------------------|---------------------------------|
| <b>Owner(Current)</b>     | WINZURK UTE INGEBORG (TR)       |
| <b>Owner/Mail Address</b> | 11 MIDDLE RD<br>STUART FL 34996 |
| <b>Sale Date</b>          | 6/6/2008                        |
| <b>Document Book/Page</b> | <u>2332 2685</u>                |
| <b>Document No.</b>       | 2088469                         |
| <b>Sale Price</b>         | 0                               |

**Searches**

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

| Location/Description  |                              |                          |                               |
|-----------------------|------------------------------|--------------------------|-------------------------------|
| <b>Account #</b>      | 27725                        | <b>Map Page No.</b>      | SP-06                         |
| <b>Tax District</b>   | 2200                         | <b>Legal Description</b> | HIGH POINT LOT 37 OR 342/2303 |
| <b>Parcel Address</b> | 11 MIDDLE RD, SEWALL'S POINT |                          |                               |
| <b>Acres</b>          | .3440                        |                          |                               |

| Parcel Type         |                                   |
|---------------------|-----------------------------------|
| <b>Use Code</b>     | 0100 Single Family                |
| <b>Neighborhood</b> | 120000 HighPoint - Sewall's Point |

**Functions**

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

| Assessment Information          |           |
|---------------------------------|-----------|
| <b>Market Land Value</b>        | \$200,000 |
| <b>Market Improvement Value</b> | \$100,610 |
| <b>Market Total Value</b>       | \$300,610 |

[Print](#) [First](#) [Previous](#) [Next](#) [Last](#)

[Legal Disclaimer / Privacy Statement](#)





# CERTIFICATE OF LIABILITY INSURANCE

CAPH002 OP ID: KM

DATE (MM/DD/YYYY)  
05/21/15

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

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

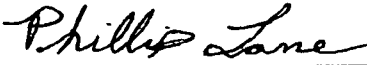
| <b>PRODUCER</b><br><b>J.W. Edens &amp; Company</b><br>Commercial Ins of Brevard, Inc<br>325 Fifth Avenue, Suite 108<br>Indialantic, FL 32903<br>Phillip Lane | <b>321-725-7000</b><br><b>321-725-7856</b>  | <b>CONTACT NAME:</b><br><b>PHONE (A/C, No, Ext):</b><br><b>FAX (A/C, No):</b><br><b>E-MAIL ADDRESS:</b> |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
|--|---|---|-------------------------------|--|--------|-------------|-----------------------|-------|-------------|----------------------------|--|-------------|--|--|-------------|--|--|-------------|--|--|-------------|--|
|  | <table border="1"> <tr> <th colspan="2">INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> <tr> <td>INSURER A :</td> <td>Axis Surplus Ins. Co.</td> <td>26620</td> </tr> <tr> <td>INSURER B :</td> <td>Evanston Insurance Company</td> <td></td> </tr> <tr> <td>INSURER C :</td> <td></td> <td></td> </tr> <tr> <td>INSURER D :</td> <td></td> <td></td> </tr> <tr> <td>INSURER E :</td> <td></td> <td></td> </tr> <tr> <td>INSURER F :</td> <td></td> <td></td> </tr> </table> |   | INSURER(S) AFFORDING COVERAGE |  | NAIC # | INSURER A : | Axis Surplus Ins. Co. | 26620 | INSURER B : | Evanston Insurance Company |  | INSURER C : |  |  | INSURER D : |  |  | INSURER E : |  |  | INSURER F : |  |
| INSURER(S) AFFORDING COVERAGE  |   | NAIC #  |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| INSURER A :  | Axis Surplus Ins. Co.   | 26620   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| INSURER B :  | Evanston Insurance Company  |   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| INSURER C :  |   |   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| INSURER D :  |   |   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| INSURER E :  |   |   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| INSURER F :  |   |   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |
| <b>INSURED</b><br><b>Capps Roofing, Inc.</b><br>P.O Box 8053<br>Hobe Sound, FL 33475   |   |   |                               |  |        |             |                       |       |             |                            |  |             |  |  |             |  |  |             |  |  |             |  |

**COVERAGES**                      **CERTIFICATE NUMBER:**                      **REVISION NUMBER:**

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

| INSR LTR | TYPE OF INSURANCE  | ADDL SUBR INSR WVD                                    | POLICY NUMBER | POLICY EFF (MM/DD/YYYY) | POLICY EXP (MM/DD/YYYY) | LIMITS  |
|----------|--|---|---------------|-------------------------|-------------------------|---|
| A        | GENERAL LIABILITY  |   | FLGLN00765AX  | 08/21/14                | 08/21/15                | EACH OCCURRENCE \$ 1,000,000                        |
|          | <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY               |   |               |                         |                         | DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 |
|          | <input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR |   |               |                         |                         | MED EXP (Any one person) \$ 5,000                   |
|          |  |   |               |                         |                         | PERSONAL & ADV INJURY \$ 1,000,000                  |
|          |  |   |               |                         |                         | GENERAL AGGREGATE \$ 2,000,000                      |
|          |  |   |               |                         |                         | PRODUCTS - COM/OP AGG \$ 2,000,000                  |
|          |  |   |               |                         |                         | \$  |
|          | AUTOMOBILE LIABILITY   |   |               |                         |                         | COMBINED SINGLE LIMIT (Ea accident) \$              |
|          | <input type="checkbox"/> ANY AUTO  | <input type="checkbox"/> SCHEDULED AUTOS              |               |                         |                         | BODILY INJURY (Per person) \$                       |
|          | <input type="checkbox"/> ALL OWNED AUTOS                                       | <input type="checkbox"/> NON-OWNED AUTOS              |               |                         |                         | BODILY INJURY (Per accident) \$                     |
|          | <input type="checkbox"/> HIRED AUTOS   |   |               |                         |                         | PROPERTY DAMAGE (Per accident) \$                   |
|          |  |   |               |                         |                         | \$  |
|          |  |   |               |                         |                         | \$  |
| B        | <input checked="" type="checkbox"/> UMBRELLA LIAB                              | <input checked="" type="checkbox"/> OCCUR             | XOVA856314    | 10/08/14                | 08/21/15                | EACH OCCURRENCE \$ 1,000,000                        |
|          | <input type="checkbox"/> EXCESS LIAB   | <input type="checkbox"/> CLAIMS-MADE                  |               |                         |                         | AGGREGATE \$ 1,000,000                              |
|          | <input type="checkbox"/> DED   | <input type="checkbox"/> RETENTION \$                 |               |                         |                         | \$  |
|          | WORKERS COMPENSATION AND EMPLOYERS' LIABILITY                                  |   |               |                         |                         | WC STATUTORY LIMITS                                 |
|          | ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)    | <input type="checkbox"/> Y <input type="checkbox"/> N | N/A           |                         |                         | OTHER   |
|          | If yes, describe under DESCRIPTION OF OPERATIONS below                         |   |               |                         |                         | E.L. EACH ACCIDENT \$                               |
|          |  |   |               |                         |                         | E.L. DISEASE - EA EMPLOYEE \$                       |
|          |  |   |               |                         |                         | E.L. DISEASE - POLICY LIMIT \$                      |

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

|   |   |
|---|---|
| <b>CERTIFICATE HOLDER</b><br><br><p style="text-align: center;"><b>SEWALLS</b></p> Town of Sewall's Point<br>One South Sewall's Point Rd.<br>Sewall's Point, FL 34996 | <b>CANCELLATION</b><br><br>SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. |
|   | AUTHORIZED REPRESENTATIVE<br>   |

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FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

# SELF INSURERS FUND

1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

**ISSUED TO:**

**COPY PROVIDED TO:**

Town Of Sewall's Point  
1 So. Sewall's Point Rd.  
Sewall's Point, FL 34996

Capps Roofing, Inc.  
P.O. Box 8053  
Hobe Sound, FL 33475

Attention: To Whom It May Concern

Capps Roofing, Inc.

**This is to Certify that:** P.O. Box 8053  
Hobe Sound, FL 33475

being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND, 4099 Metric Drive, Winter Park, FL 32792.

|                  |                   |                        |                                     |
|------------------|-------------------|------------------------|-------------------------------------|
| COVERAGE NUMBER: | <u>870-032496</u> | <u>LIMITS</u>          |                                     |
| EFFECTIVE DATE:  | <u>1/1/2015</u>   | Workers' Compensation: | Statutory - State of Florida        |
| EXPIRATION DATE: | <u>1/1/2016</u>   | Employers' Liability:  | \$100,000.00 Each Accident          |
|                  |                   |                        | \$100,000.00 Disease, Each Employee |
|                  |                   |                        | \$500,000.00 Disease, Policy Limit  |

REMARKS: Non-cancelable, without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

This certificate is issued as a matter of information only, is not a policy and of itself does not afford any insurance. Nothing contained in this certificate shall be constructed as extending coverage not afforded by the policy(ies) shown above or as affording insurance to any insured not named above. This provides coverage for Florida policyholders and Florida domiciled employees only.

By:

Brett Stiegel, Administrator

FRSA-SIF

By:

Debra Guidry, CPCU, Underwriting Manager

FRSA-SIF

2014-2015 **MARTIN COUNTY ORIGINAL BUSINESS TAX RECEIPT**

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

ACCOUNT 1993-520-0072 CERT \_\_\_\_\_  
PHONE (772) 545-3442 SIC NO 023561

LOCATION:  
8686 SE ALABAMA PL HS



**CHARACTER COUNTS IN MARTIN COUNTY**

|          |    |              |          |    |                     |
|----------|----|--------------|----------|----|---------------------|
| PREV YR. | \$ | <u>00</u>    | LIC. FEE | \$ | <u>26.25</u>        |
|          | \$ | <u>00</u>    | PENALTY  | \$ | <u>00</u>           |
|          | \$ | <u>00</u>    | COL. FEE | \$ | <u>00</u>           |
|          | \$ | <u>00</u>    | TRANSFER | \$ | <u>00</u>           |
|          |    | <b>TOTAL</b> |          |    | <b><u>26.25</u></b> |

CAPPS, JAMES BLAKE  
CAPPS ROOFING, INC.  
P.O. BOX 8053  
HOBE SOUND, FL 33475

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION  
OF **ROOFING CONTRACTOR**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

23 DAY OF JULY 2014  
AND ENDING SEPTEMBER 30, 2015

11 2013 41182.0001 26.25 PAID

RICK SCOTT, GOVERNOR

KEN LAWSON, SECRETARY

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

LICENSE NUMBER

CCC056739

The ROOFING CONTRACTOR  
Named below IS CERTIFIED  
Under the provisions of Chapter 489 FS.  
Expiration date: AUG 31, 2016

CAPPS, JAMES BLAKE  
CAPPS ROOFING INC  
8686 SE ALABAMA PL  
HOBE SOUND FL 33455



ISSUED: 06/29/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1406290001077



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
 One S. Sewall's Point Road  
 Sewall's Point, Florida 34996  
 Tel 772-287-2455 Fax 772-2204765

TOWN OF SEWALL'S POINT  
 BUILDING DEPARTMENT  
 FILE COPY

RE-ROOF CERTIFICATION

PERMIT # \_\_\_\_\_

CONTRACTOR'S NAME: Capps Roofing, Inc. PHONE #: 545-3442 FAX: \_\_\_\_\_

OWNER'S NAME: Cite Winzcrk

CONSTRUCTION ADDRESS: 15 Middle Rd. CITY Stuart STATE FL 34996

RE-ROOF:  RESIDENTIAL(SINGLE FAMILY)  
 COMMERCIAL \*\*--REMOVE/REINSTALL ROOF TOP HVAC EQUIP  YES  NO

\*\*...DISCONNECT/RECONNECT HVAC ELECTRIC  YES  NO

\*\* REQUIRES A CONTRACTOR VERIFICATION FORM (HVAC AND/OR ELECTRICAL) W/ PERMIT APPLICATION

RE-ROOF DEEMED TO COMPLY WITH 553.844 F. S.  YES  NO - INSURED VALUE OF RESIDENCE: \$

ROOF TYPE:  HIP  BOSTON-HIP  GABLE  FLAT  OTHER

ROOF PITCH: 4 /12 SLOPE

ROOF DECK:\*  SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED  
 RE-SHEATH - (REMOVAL OF SPACED SHEATHING/PLYWOOD FOR APPLICATION OF NEW PLYWOOD PANELS) - REQUIRES USE OF MINIMUM PLYWOOD AS PER FLORIDA BUILDING CODE "2004".  
 SPACED SHEATH FILL-IN - SPACES BETWEEN EXISTING SPACED-SHEATHING BOARD MAY BE FILLED-IN WITH BOARDS OF THE SAME SIZE AND THICKNESS TO PROVIDE A CLOSELY FITTED SOLID DECK NAIL NEW BOARDS AS PER FLORIDA BUILDING CODE "2004".  
 EXISTING DECK TO REMAIN/REPAIRED& RENAILED

EXISTING ROOF COVERING: tile EXISTING COVERING TO BE REMOVED? YES  NO

PROPOSED NEW ROOF COVERING: Shingles

MANUFACTURER Owens Corning PRODUCT NAME Okridge PRODUCT APPR # FL 10674-R9

(APPROVED ROOF COVERING MATERIAL WITH CURRENT FLORIDA PRODUCT APPROVAL)  
 MANUFACTURER'S INSTALLATION SPECS MUST BE ON THE JOB SITE AT TIME OF INSPECTION.

\*WHEN CONCRETE/CLAY TILES REPLACE ANY OTHER TYPE OF ROOF COVERING, THE EXISTING TRUSSES SHALL BE INSPECTED BY A FLORIDA REGISTERED ARCHITECT OR ENGINEER TO VERIFY ADEQUACY OF THE TRUSSES TO SUPPORT INCREASED DEAD LOADS. AN ENGINEERING INSPECTION REPORT SHALL BE SUBMITTED WITH THE PERMIT APPLICATION.

PROPOSED FLASHING:  GALV./STEEL  ALUMINUM  COPPER  OTHER

RIDGEVENT TO BE INSTALLED:  YES  NO

DESCRIPTION OF WORK: Tear off tile. Install shingles.  
No work on flat roof.

I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

SIGNATURE OF CONTRACTOR: [Signature] DATE: 5/22/15







TOWN OF SEWALL'S POINT BUILDING DEPARTMENT  
One S. Sewall's Point Road  
Sewall's Point, Florida 34996  
Tel 772-287-2455 Fax 772-2204765

**RESIDENTIAL REROOF WINDSTORM LOSS  
MITIGATION CERTIFICATION (FLORIDA STATUTE 553.844)**

**ALL RE-ROOFS REGARDLESS OF VALUE SHALL COMPLY WITH THE FOLLOWING:**

**Re-nailing:** All sheathing and decking shall be re-nailed per section 201.1 and a secondary water barrier installed.

- Existing fasteners that are 8d clipped head, round head or ring shank and spaced 6 in. or less o.c. may be counted. Additional fasteners shall be 8d ring shank nails with round heads spaced at 6 in. o.c. along framing.
- Indicate below which method is to be used to satisfy the secondary water barrier requirements:

\_\_\_\_\_ All joints in roof sheathing shall be covered with a minimum of 4 in. strip of self-adhering polymer modified bitumen tape. Wood deck and self-adhering tape shall be covered by one layer of approved underlayment.

\_\_\_\_\_ Entire roof deck shall be covered with an approved self-adhering polymer modified bitumen cap sheet. No additional underlayment is required.

✓ \_\_\_\_\_ Outside of the HVHZ, an underlayment complying with section 1507.2.3 of the Florida Building Code, Building fastened as described below or a layer of asphalt impregnated approved #30 felt shall be installed. The felt is to be fastened with 1" round plastic cap or metal cap nails, attached to a nailable deck in a grid pattern of 12 inches (305 mm) staggered between the overlaps, with 6-inch (152 mm) spacing at the overlaps. For slopes of 2:12 to 4:12 an additional layer of felt shall be installed in a single-fashion and lapped 19" and fastened as described above. (No additional underlayment shall be required over the top of this sheet.)

\_\_\_\_\_ Exception: An approved 30# underlayment installed per HVHZ using nails and tin-tags and covered with an approved self-adhering polymer modified bitumen cap sheet or an approved cap sheet hot-mopped shall be deemed to meet the requirements for secondary water barrier.

**Residential Structures valued at \$300,000 or more shall comply with the following:**

- Roof to wall connections must be enhanced up to 15% additional cost of the re-roofing cost.
- A certified or registered general, building or residential contractor compliance affidavit must accompany the re-roof permit application and submit details to perform the following:
  1. Sufficient amount of eave sheathing shall be removed to view 6 ft. of roof rafters.
  2. Wherever a strap is missing or an existing strap has fewer than 4 fasteners on each end of connection with the wall, the connection shall be strengthened by adding:
    - a. Metal connectors, clips, straps and fasteners to achieve an uplift capacity as specified in Table 201.3 OR
    - b. Approved strap ties or right angle gusset brackets with a minimum uplift capacity of 500 lbs shall be installed to the top plate or masonry wall below
    - c. Refer to sections 201.3.1 to 201.3.4 for prescriptive requirements.



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**Product Approval**  
USER: Public User

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| FL #   | FL10674-R9  |          |      |                     |      |            |      |                     |      |
|--|---|----------|------|---------------------|------|------------|------|---------------------|------|
| Application Type   | Revision  |          |      |                     |      |            |      |                     |      |
| Code Version   | 2010  |          |      |                     |      |            |      |                     |      |
| Application Status   | Approved  |          |      |                     |      |            |      |                     |      |
| Comments   |   |          |      |                     |      |            |      |                     |      |
| Archived   |   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Product Manufacturer   | Owens Corning   |          |      |                     |      |            |      |                     |      |
| Address/Phone/Email  | One Owens Corning Parkway<br>Toledo, OH 43659<br>(740) 404-7829<br>greg.keeler@owenscorning.com   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Authorized Signature   | Greg Keeler<br>greg.keeler@owenscorning.com   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Technical Representative   | Mel Sancrant  |          |      |                     |      |            |      |                     |      |
| Address/Phone/Email  | 1 Owens Corning PKWY<br>Toledo, OH 43659<br>(419) 376-8360<br>mel.sancrant@owenscomlq.com   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Quality Assurance Representative                                       |   |          |      |                     |      |            |      |                     |      |
| Address/Phone/Email  |   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Category   | Roofing   |          |      |                     |      |            |      |                     |      |
| Subcategory  | Asphalt Shingles  |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Compliance Method  | Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer<br>Evaluation Report - Hardcopy Received  |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Florida Engineer or Architect Name who developed the Evaluation Report | Robert J.M. Nieminen  |          |      |                     |      |            |      |                     |      |
| Florida License  | PE-59166  |          |      |                     |      |            |      |                     |      |
| Quality Assurance Entity   | UL LLC  |          |      |                     |      |            |      |                     |      |
| Quality Assurance Contract Expiration Date                             | 07/17/2017  |          |      |                     |      |            |      |                     |      |
| Validated By   | John W. Knezevich, PE<br>Validation Checklist - Hardcopy Received   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Certificate of Independence  | <a href="#">FL10674_R9_COI_2014_01_COI_Nieminen.pdf</a>   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Referenced Standard and Year (of Standard)                             | <table border="0"> <thead> <tr> <th>Standard</th> <th>Year</th> </tr> </thead> <tbody> <tr> <td>ASTM D3161, Class F</td> <td>2006</td> </tr> <tr> <td>ASTM D3462</td> <td>2007</td> </tr> <tr> <td>ASTM D7158, Class H</td> <td>2007</td> </tr> </tbody> </table> | Standard | Year | ASTM D3161, Class F | 2006 | ASTM D3462 | 2007 | ASTM D7158, Class H | 2007 |
| Standard   | Year  |          |      |                     |      |            |      |                     |      |
| ASTM D3161, Class F  | 2006  |          |      |                     |      |            |      |                     |      |
| ASTM D3462   | 2007  |          |      |                     |      |            |      |                     |      |
| ASTM D7158, Class H  | 2007  |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Equivalence of Product Standards Certified By                          |   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Sections from the Code   |   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Product Approval Method  | Method 1 Option D   |          |      |                     |      |            |      |                     |      |
| <br>   |   |          |      |                     |      |            |      |                     |      |
| Date Submitted   | 07/28/2014  |          |      |                     |      |            |      |                     |      |

Date Submitted: 03/05/2014  
 Date Validated: 03/05/2014  
 Date Pending FBC Approval: 03/05/2014  
 Date Approved: 04/18/2014

**Summary of Products**

| FL #  | Model, Number or Name                               | Description  |
|---|---|--|
| 10674.1   | Owens Corning Asphalt Roofing Shingles and Starters | 3-tab, 4-tab, 5-tab, laminated, starter and hip & ridge shingles   |
| <b>Limits of Use</b><br>Approved for use in HVHZ: No<br>Approved for use outside HVHZ: Yes<br>Impact Resistant: N/A<br>Design Pressure: N/A<br>Other: Refer to ER, Section 5. |   | <b>Installation Instructions</b><br><a href="#">EL10674_R9_II_2014_03_FINAL_OC_Aspphalt Shingles_EL10674-R9.pdf</a><br>Verified By: Robert J. M. Nieminen PE - 59166<br>Created by Independent Third Party: Yes<br><b>Evaluation Reports</b><br><a href="#">EL10674_R9_AE_2014_03_FINAL_OC_Aspphalt Shingles_EL10674-R9.pdf</a><br>Created by Independent Third Party: Yes |



Contact Us :: 1940 North Monroe Street, Tallahassee, FL 32399 Phone: 850-487-1824

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Product Approval Accepts:





EXTERIOR RESEARCH & DESIGN, LLC.  
 Certificate of Authorization #9503  
 353 CHRISTIAN STREET, UNIT #13  
 OXFORD, CT 06478  
 PHONE: (203) 262-9245  
 FAX: (203) 262-9243

**EVALUATION REPORT**

**Owens Corning**  
**One Owens Corning Parkway**  
**Toledo, OH 43659**

**Evaluation Report O37940.02.12-R4**  
**FL10674-R9**  
**Date of Issuance: 02/06/2012**  
**Revision 4: 03/04/2014**

**SCOPE:**

This Evaluation Report is issued under Rule 9N-3 and the applicable rules and regulations governing the use of construction materials in the State of Florida. The documentation submitted has been reviewed by Robert Nieminen, P.E. for use of the product under the Florida Building Code and Florida Building Code, Residential Volume. The products described herein have been designed to comply with the 2010 FBC and 2010 FBC Residential Volume sections noted herein.

**DESCRIPTION: Owens Corning Asphalt Roof Shingles**

**LABELING:** Each unit shall bear labeling in accordance with the requirements the Accredited Quality Assurance Agency noted herein.

**CONTINUED COMPLIANCE:** This Evaluation Report is valid until such time as the named product(s) changes, the referenced Quality Assurance documentation changes, or provisions of the Code that relate to the product change. Acceptance of this Evaluation Report by the named client constitutes agreement to notify Robert Nieminen, P.E. if the product changes or the referenced Quality Assurance documentation changes. Trinity|ERD requires a complete review of this Evaluation Report relative to updated Code requirements with each Code Cycle.

**ADVERTISEMENT:** The Evaluation Report number preceded by the words "Trinity|ERD Evaluated" may be displayed in advertising literature. If any portion of the Evaluation Report is displayed, then it shall be done in its entirety.

**INSPECTION:** Upon request, a copy of this entire Evaluation Report 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 Evaluation Report consists of pages 1 through 7.

**Prepared by:**

**Robert J.M. Nieminen, P.E.**  
 Florida Registration No. 59166, Florida DCA ANE1983



The facsimile seal appearing was authorized by Robert Nieminen, P.E. on 03/04/2014. This does not serve as an electronically signed document. Signed, sealed hardcopies have been transmitted to the Product Approval Administrator and to the named client.

**CERTIFICATION OF INDEPENDENCE:**

1. Trinity|ERD does not have, nor does it intend to acquire or will it acquire, a financial interest in any company manufacturing or distributing products it evaluates.
2. Trinity|ERD is not owned, operated or controlled by any company manufacturing or distributing products it evaluates.
3. Robert Nieminen, P.E. does not have nor will acquire, a financial interest in any company manufacturing or distributing products for which the evaluation reports are being issued.
4. Robert Nieminen, P.E. does not have, nor will acquire, a financial interest in any other entity involved in the approval process of the product.

- 5.3.1 All Owens Corning shingles noted herein are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F and/or ASTM D7158, Class H, indicating the shingles are acceptable for us in all wind zones up to  $V_{asd} = 150$  mph ( $V_{ult} = 194$  mph). Refer to Section 6 for installation requirements to meet this wind rating.
- 5.3.2 All Owens Corning hip & ridge shingles and Starter Strip Plus noted herein are Classified in accordance with FBC Tables 1507.2.7.1 and R905.2.6.1 to ASTM D3161, Class F, indicating the shingles are acceptable for us in all wind zones up to  $V_{asd} = 150$  mph ( $V_{ult} = 194$  mph). Refer to Section 6 for installation requirements to meet this wind rating.
- 5.3.3 Classification by ASTM D7158 applies to exposure category B or C and a building height of 60 feet or less. Calculations by a qualified design professional are required for conditions outside these limitations. Contact the shingle manufacturer for data specific to each shingle.
- 5.3.4 Refer to Owens Corning published information on wind resistance and installation limitations.
- 5.4 All products in the roof assembly shall have quality assurance audit in accordance with the Florida Building Code and F.A.C. Rule 9N-3.

## 6. INSTALLATION:

### 6.1 Underlayment:

- 6.1.1 Underlayment shall be acceptable to Owens Corning and shall hold current Florida Statewide Product Approval, or be Locally Approved per Rule 9N-3, per FBC Sections 1507.2.3, 1507.2.4 or R905.2.3.

### 6.2 Asphalt Shingles:

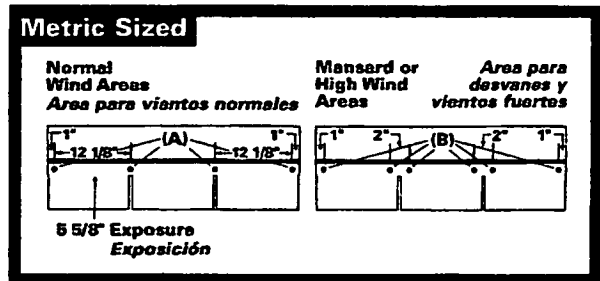
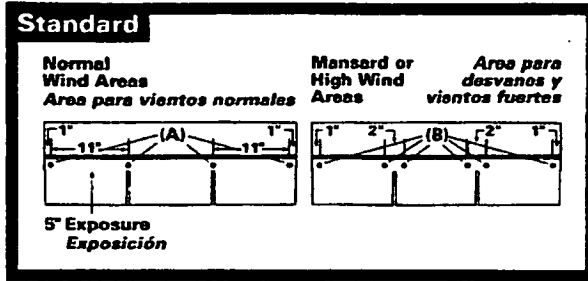
- 6.2.1 Installation of asphalt shingles shall comply with the manufacturer's current published instructions, using minimum four (4) nails per shingle in accordance with FBC Sections 1507.2 or R905.2, with the following exceptions:

- Berkshire® shingles require minimum five (5) nails per shingle.
- WeatherGuard® HP shingles require minimum six (6) nails per shingle.
- Devonshire™ shingles require minimum six (6) nails per shingle.
- Starter Strip Plus requires minimum five (5) nails per strip.

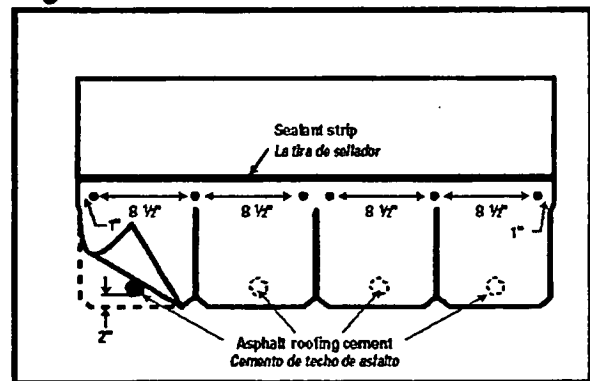
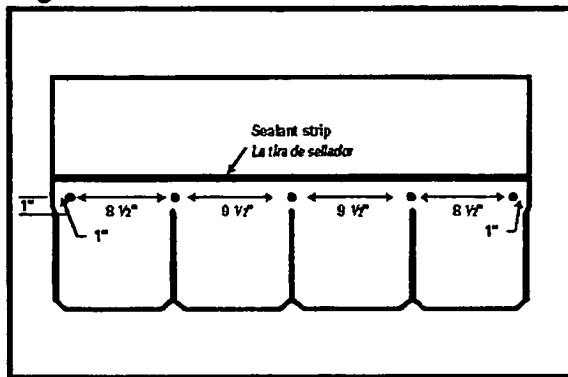
Refer to Owens Corning published information on wind resistance and installation limitations.

- 6.2.2 Fasteners shall be in accordance with the manufacturer's published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.
- 6.2.4 Where the roof slope exceeds 21 units vertical in 12 units horizontal, special methods of fastening are required. Contact the shingle manufacturer for details.

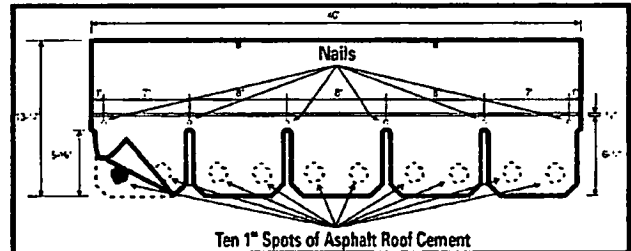
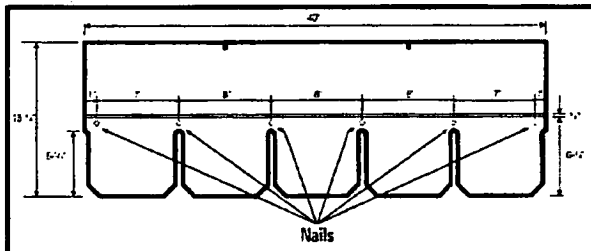
6.2.5 Minimum Nailing – Classic® & Supreme:



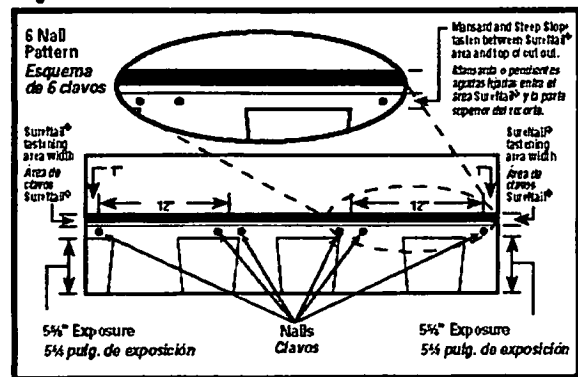
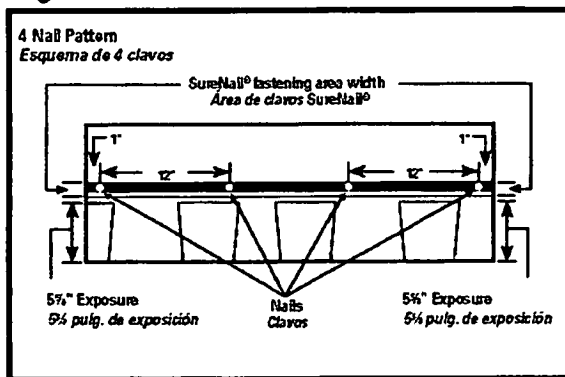
6.2.6 Minimum Nailing – Berkshire®:



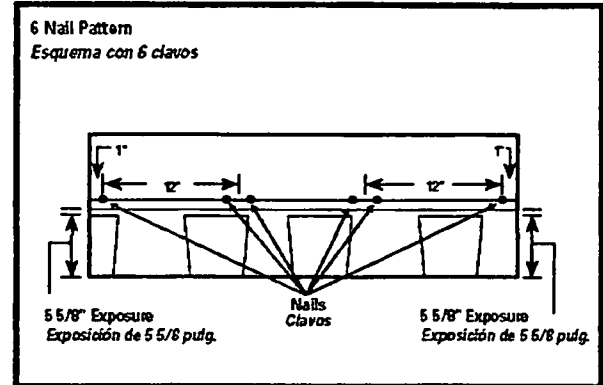
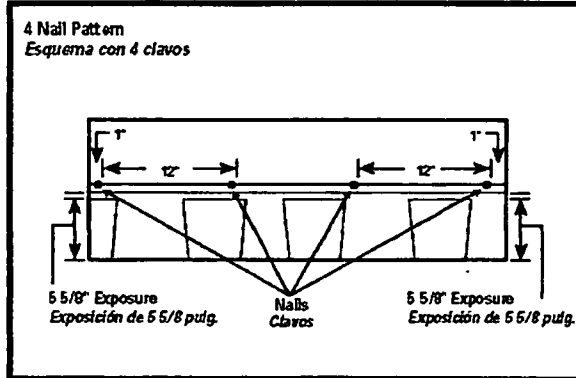
6.2.7 Minimum Nailing – Devonshire™:



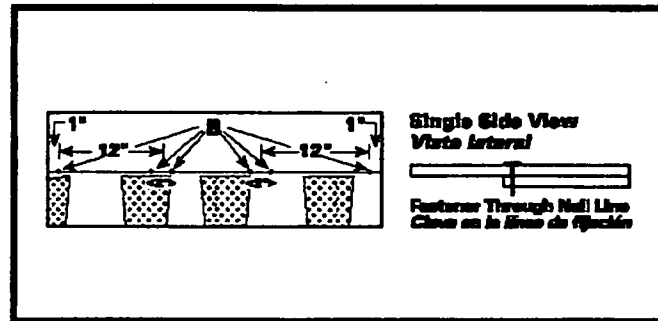
6.2.8 Minimum Nailing – Duration®, TruDefinition® Duration, Duration® Premium Cool & TruDefinition® Duration® Designer Color Collection:



6.2.9 Minimum Nailing – TruDefinition® Oakridge®, Oakridge®:



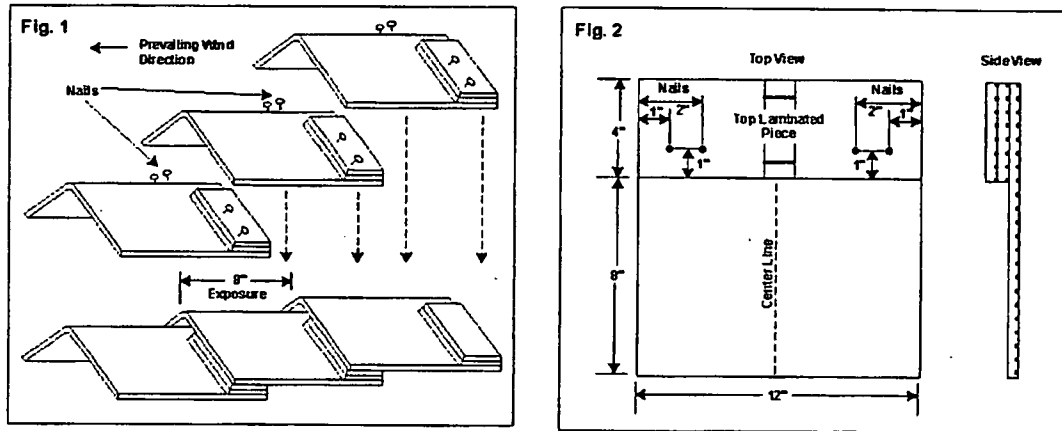
6.2.10 Minimum Nailing – WeatherGuard® HP:



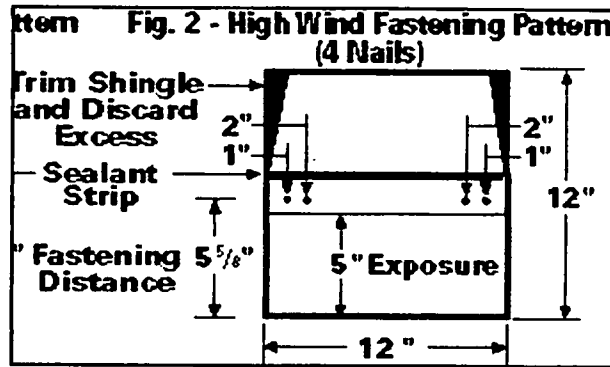
6.3 Hip & Ridge Shingles:

- 6.3.1 Installation of Berkshire® Hip and Ridge Shingles, High Ridge, Hip & Ridge with Sealant, WeatherGuard® HP Hip and Ridge Shingles and ProEdge Hip & Ridge Shingles shall comply with the manufacturer's current published instructions, using four (4) nails per shingle. Installation of DuraRidge™ Hip & Ridge Shingles shall comply with the manufacturer's current published instructions, using two (2) nails per shingle. Refer to Owens Corning published information on wind resistance and installation limitations, including the use of hand-sealing for wind warranties.
- 6.3.2 Fasteners shall be in accordance with the manufacturer's published requirements, but not less than FBC 1507.2.6 or R905.2.5. Staples are not permitted.

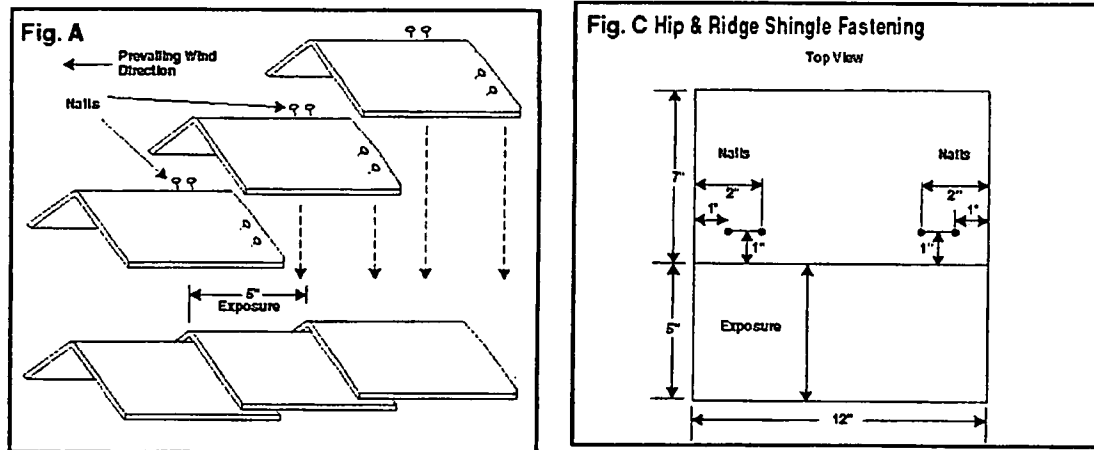
6.3.3 Minimum Nailing – Berkshire® Hip & Ridge and High Ridge:



6.3.4 Minimum Nailing – Hip & Ridge with Sealant:

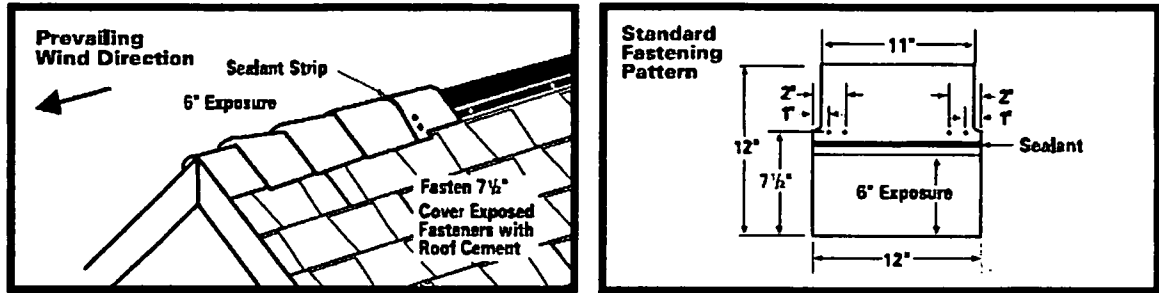


6.3.5 Minimum Nailing – WeatherGuard® HP Hip and Ridge:



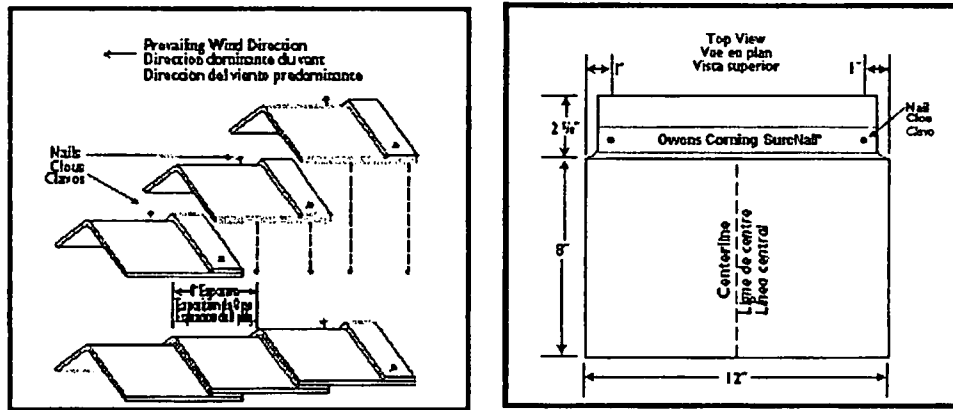


6.3.6 Minimum Nailing - ProEdge Hip & Ridge Shingles:



6.3.7 Minimum Nailing - DuraRidge™ Hip & Ridge Shingles:

Note: The drawings below pertain to minimum, as-tested attachment requirements. Refer to Owens Corning published installation instructions for their minimum requirements.



7. LABELING:

- 7.1 Each unit shall bear a permanent label with the manufacturer's name, logo, city, state and logo of the Accredited Quality Assurance Agency noted herein.
- 7.2 Asphalt shingle wrappers shall indicate compliance with one of the required classifications detailed in FBC Table 1507.2.7.1 / R905.2.6.1.

8. BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or Authority Having Jurisdiction in order to properly evaluate the installation of this product.

9. MANUFACTURING PLANTS:

Contact the named QA entity for information on which plants produce products covered by Florida Rule 9N-3 QA requirements.

10. QUALITY ASSURANCE ENTITY:

UL LLC- QUA9625 ; (414) 248-6409; [karen.buchmann@ul.com](mailto:karen.buchmann@ul.com)

- END OF EVALUATION REPORT -

# **TREE PERMITS**

TOWN OF SEWALL'S POINT, FLORIDA

Date 6-22-06 19 06 TREE REMOVAL PERMIT No 351

APPLIED FOR BY Wingzirk (Contractor or Owner)

Owner ~~McAdams Rd~~

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

Kind of Trees Queen Palm

No. Of Trees: REMOVE 2

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

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

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

Signed, \_\_\_\_\_ Applicant Signed, Phil Wintercorn  
Blog Inspector

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 drawing or site plan]

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

**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 single family resident see above.
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.

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Owner Ute Winzusk Address 11 Middle Rd. Phone 772-781-4686

Contractor \_\_\_\_\_ Address \_\_\_\_\_ Phone \_\_\_\_\_

No. of Trees: REMOVE 2 Type: queen palm

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

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

Written statement giving reasons: they are dead and/or dying (sp?)

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Signature of Property Owner Ute Winzusk Date 6-19-06

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Approved by Building Inspector: [Signature] Date 6/21 Fee: 0

Plans approved as submitted [checkmark] Plans approved as revised/marked: \_\_\_\_\_

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Backyard

House

Driveway

