

23 Middle Road

2559

SFR

TOWN OF SEWALL'S POINT, FLORIDA
APPLICATION FOR PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

PERMIT NUMBER

DATE OF APPLICATION 5/26/89

To obtain a permit the following are required:

1. Florida certification of builder and sub-contractors.
2. Certification of insurance from contractor or owner/builder re: liability and workers' compensation.
3. Two sets of building plans which must include: a) 1/4" scale building drawings, b) plot plan, c) foundation plan, d) floor plans, e) wall and roof cross-sections, e) plumbing, electrical and air conditioning layouts, f) at least two elevations showing the height of building from finished floor. Plans must be sealed by a Florida registered architect or engineer.
4. Recorded warranty deed to the property.
5. Septic tank permit and one set of plans with Martin County Health Department seal.
6. Energy code calculations.
7. Tree removal permit (for trees other than nuisance trees)
8. Certification of elevation from licensed surveyor and determination of flood zone.
9. Amount of fill anticipated - rough sketch showing location of fill
10. Manufacturer's schedule of windows.

Owner ANTHONY STRACUZZI Current Address 3260 SE ASTER LANE
 Telephone 283-2815 BLDG I APT 141 STUART FL 34994
 General Contractor Anthony Ruccolo Address 2745 NE CYPRESS LANE
 Telephone 334-5316 JENSEN BEACH FL 34957
 Where Licensed FLORIDA License Number CR5032277
 Plumbing Contractor Paul Donnelly License Number CFC025598
 Electrical Contractor RIVER SIDE ELECTRIC License Number 00243
 Roofing Contractor License Number _____
 A/C Contractor P. Pool License Number CAC016122

Describe the building or alterations. SINGLE FAMILY RES.
 Name the street on which the building, its front building line and its front yard will 22 MIDDLE RD
 Subdivision HIGH POINT Lot 42 Block 3

Building area (inside walls) 2877 Garage, porch, carport area 866
 Contract price (excluding carpet, land, appliances, landscaping) \$143,850.00
 Cost of permit ~~1572.00~~ 1572.00 as submitted 1793.000 as made

- In addition, the following are understood by owner and contractor:
1. Building area (inside walls) must be a minimum of 1,500 square feet.
 2. Building permit fee \$5.00 per \$1,000. of the cost of the building, plus \$50.00 per plumbing, electric, a.c. and roof. For example a \$100,000 building = \$500. plus \$200. (a.c., pl., el., roof) = \$700. cost of permit = \$5. impact fee = 1,065. total. Also there is a charge of 1 cent per square foot for radon gas trust fund.
 3. If no contract is submitted as proof as cost, the permit will be based on \$60. per square foot (inside walls) and \$25. per square foot (other areas). Other builder cost is 25% higher than the regular fee.
 4. The Town has adopted the South Florida Building Code.
 5. Building permits are issued for one year's duration.
 6. Construction must be started within 180 days or permit will be subject to revocation and forfeiture of fee.
 7. ALL changes in plans must be approved by the Building Department.
 8. Work hours are 8:AM to 5:PM Monday through Friday. NO SUNDAY WORK
 9. Portable toilets must be on all construction sites.
 10. Inspections are made Monday through Friday, 8:AM to Noon, 1:PM to 4:PM. 24 hour notice is required prior to all inspections.
 11. String lines along property lines to facilitate set back inspections.
 12. Before a certificate of occupancy is issued, the following are required:
 - a. An owner's affidavit of building cost. (form available) any discrepancy between the original fee and final fee (based on affidavit) will be adjusted.
 - b. Approval of septic tank installation by Martin Co. Health Dept.
 - c. Rough grading and clean up of grounds.
 - d. Affidavit from licensed surveyor showing slab elevation (if in "A" zone).

13. THIS SUMMARY IS NOT A SUBSTITUTE FOR TOWN ORDINANCES. APPROVAL OF THE BUILDING PLANS IN NO WAY RELIEVES THE OWNER OR CONTRACTOR FROM COMPLIANCE WITH TOWN ORDINANCES.

14. In addition to the requirements of this permit there may be additional restrictions applicable to this property that may be found in the public records of this county.

Contractor's Signature [Signature] Owner's Signature Anthony Stracuzzi
 Approval by Building Inspector Dale Brown Date 6/1/89
 Approval by Building Commissioner Wille Orles Date 6/9/89
 Certificate of Occupancy issued _____ Date _____



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Betty Lou Butler SEPTIC TANK PERMIT NO. H1089-293
LEGAL DESCRIPTION: Lot 42 High Point

The items which are checked off below must be certified by a surveyor or engineer and returned to the Martin County Health Unit prior to the first plumbing inspection by the Building Department.

- 1. Building Permit Number: _____ (Certification not required for this item).
- 2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches above benchmark elevation as indicated on septic tank permit.
- 3. I certify that the top of the lowest building plumbing stubout is _____ inches above crown of road elevation shown on septic tank permit.
- 4. I certify that all severe limited soil has been removed from an area of _____ feet by _____ feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date Observed: _____

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

NOTE: a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
b. Drainfield must be centered in the excavated area. Drainfield will not be approved if severe limited soils are not removed.

CERTIFIED BY: _____

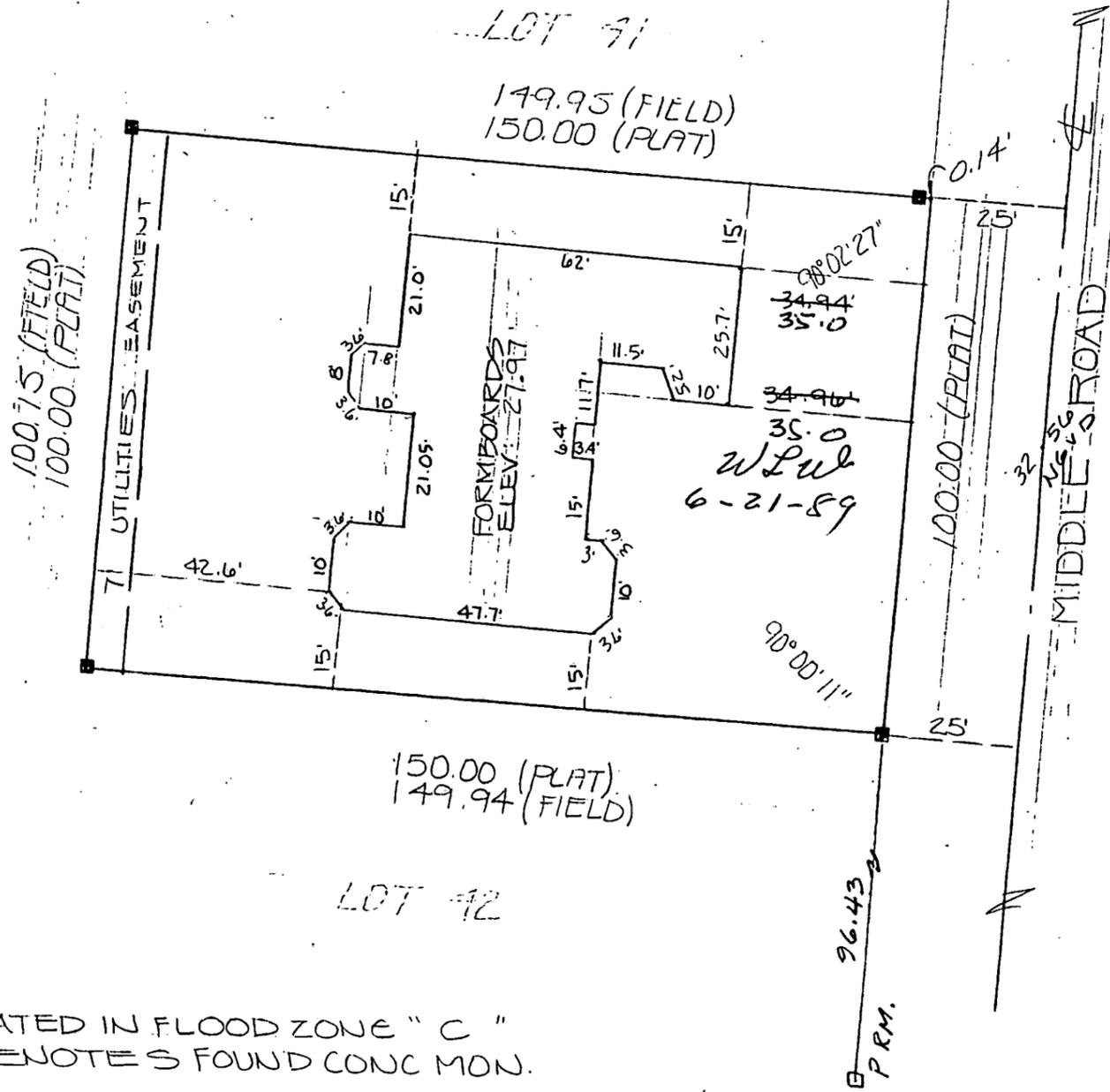
As applicant or applicant's representative, I understand the above requirements.

Date: _____ Job Number: _____

Betty Lou Butler
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

Martin County Health Unit Approval Signature (Date)



LOCATED IN FLOOD ZONE " C "

■ - DENOTES FOUND CONC MON.

A BOUNDARY SURVEY OF

LOT 42

HIGH POINT

According to the plat thereof as recorded in plat book 3, page 108 public records of Martin County, Florida

for

Anthony Stracuzzi

ADDED FORMBOARDS: 6-21-89, NO. 624

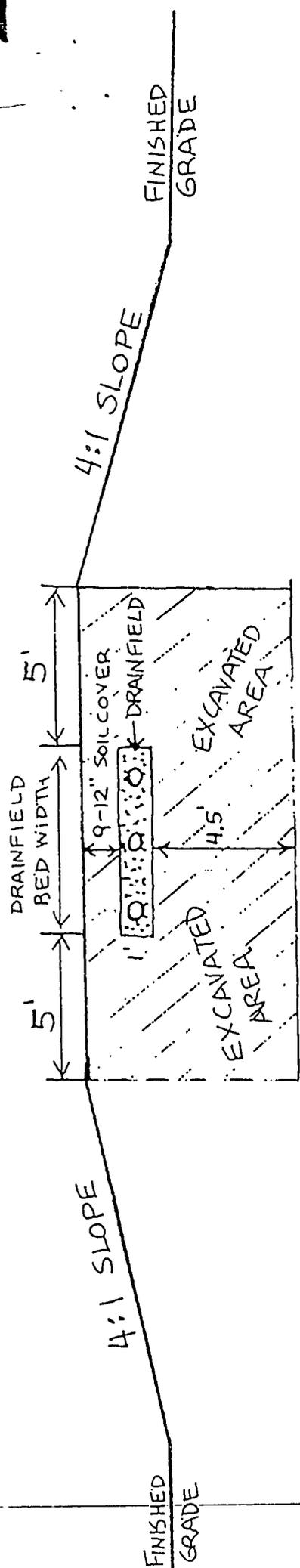
This survey meets the minimum technical standards for Land Surveying in Florida, as prescribed in Chapter 21HH-6, F.A.C. I hereby certify that the sketch shown hereon is a correct representation of a survey done under my direction and is true and correct the best of my knowledge and belief. There are no encroachments unless otherwise shown. No search of the public records made for errors or omissions of said description Easements of record not shown unless furnished.

DON WILLIAMS & ASSOCIATES, INC.
 LAND SURVEYORS
 1115 E. OCEAN BLVD. STUART, FLA. 34996
 (305) 283-2977

W.L. Williams
 W.L. WILLIAMS
 R.L.S. FLA. REG. No. 1272
 W.O. # 323

SCALE: 1" = 30'	DATE 4-4-89 (Drawn) 4-3-89 (Field)	F.B. 246 Page 72.73	PLAT BOOK: 3	PAGE: 108
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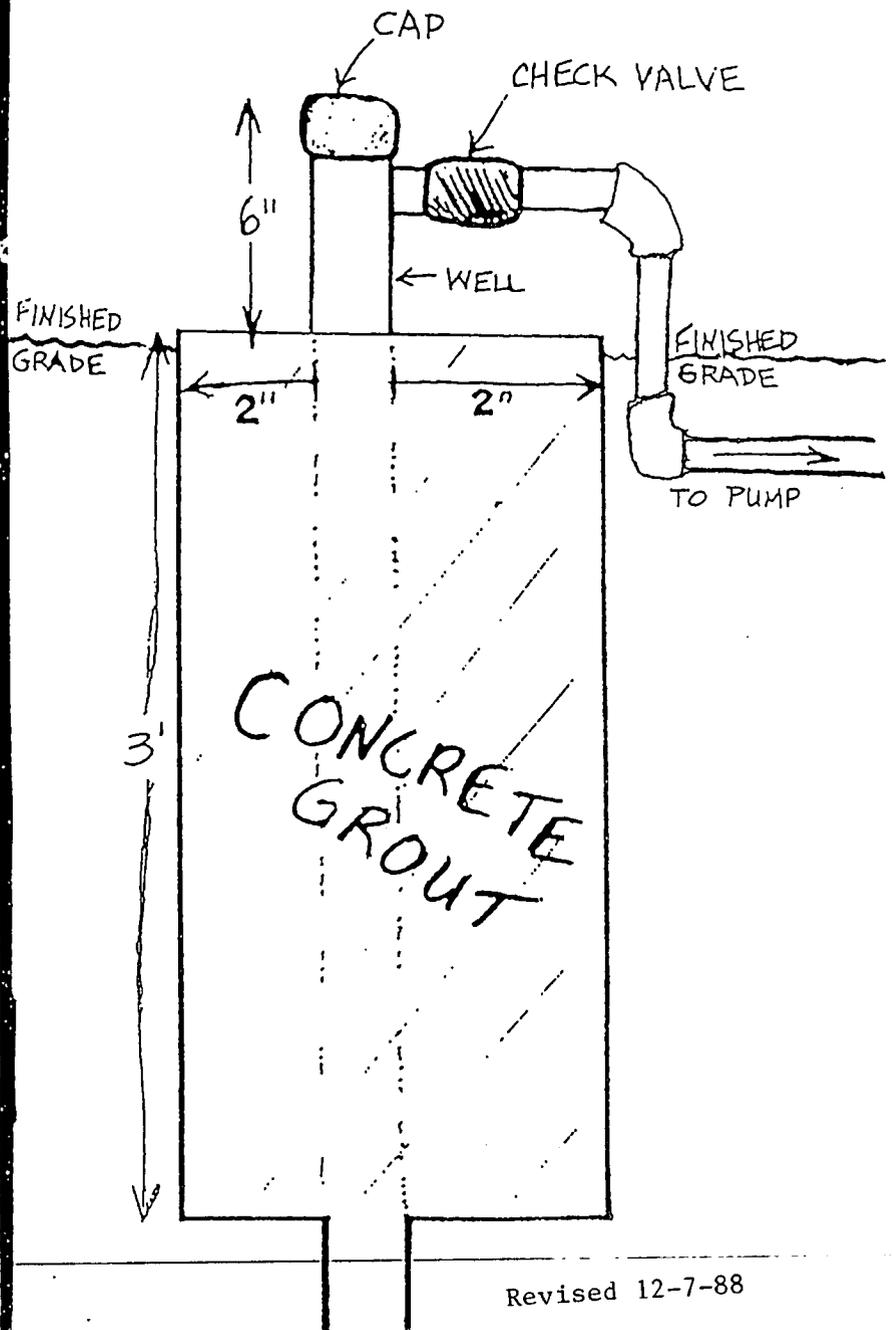
DRAINFIELD MOUND REQUIREMENTS



WELL REQUIREMENTS

NOTE:
 ALL WELLS MUST BE GROUTED AT LEAST 2" AROUND WELL CASING TO A DEPTH OF 3'. WELL CASING MUST EXTEND 6" ABOVE FINISHED GRADE AS SHOWN BELOW. NOTE LOCATION OF CHECK VALVE.

NOTE: THESE REQUIREMENTS MUST BE MET PRIOR TO FINAL APPROVAL.



MMAC 4185



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Betty Lou Butler SEPTIC TANK PERMIT NO. HD89-293
LEGAL DESCRIPTION: Lot 42 High Point

The items which are checked off below must be certified by a surveyor or engineer and returned to the Martin County Health Unit prior to the first plumbing inspection by the Building Department.

- 1. Building Permit Number: 2559. (Certification not required for this item).
- 2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches above benchmark elevation as indicated on septic tank permit.
- 3. I certify that the top of the lowest building plumbing stubout is _____ inches above crown of road elevation shown on septic tank permit.
- 4. I certify that all severe limited soil has been removed from an area of _____ feet by _____ feet to a minimum depth of six(6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date Observed: _____

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

- NOTE:
- a. Severe limited soil includes but is not limited to hardpan, clay, silt, marl or muck.
 - b. Drainfield must be centered in the excavated area. Drainfield will not be approved if severe limited soils are not removed.

CERTIFIED BY: [Signature]

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

Date: 6-21-89 Job Number: _____

(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

HRS-MARTIN COUNTY PUBLIC HEALTH UNIT

Environmental Health

Martin County Health Unit Approval Signature

612 So. Dixie Hwy
Stuart, FL 34994 - 407/220-2330

6-21-89

(Date)

MARTIN COUNTY PUBLIC HEALTH UNIT
ENVIRONMENTAL HEALTH

Revised 12-7-88

612 SOUTH DIXIE HIGHWAY • STUART, FLORIDA 34994

Bob Martinez, Governor • Gregory L. Coler, Secretary



APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER HD89-293 HOME PHONE 747-2856
 NAME OF APPLICANT Betty Lou Butler CALL Anthony Stracuzzi WORK PHONE 283-2815
 MAILING ADDRESS OF APPLICANT 17427 Jupiter Farms Road
Jupiter, FL ZIP CODE 33458
 LOT 42 BLOCK --- SUBDIVISION HIGH POINT
 IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION
 PLAT BOOK 3 PAGE 100 DATE SUBDIVIDED MARCH, 1959
 RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3
 LOT SIZE 15,000 FT² HEATED OR COOLED AREA OF HOME 2877 FT²
 COMMERCIAL: TYPE OF BUSINESS PROPOSED N/A
 BUILDING SIZE N/A FT²

-----AFFIDAVIT-----

I HAVE REVIEWED THIS PERMIT AND I CERTIFY THAT ALL WORK WILL BE PERFORMED IN ACCORDANCE WITH THE TERMS AND CONDITIONS OF THIS PERMIT AND ANY APPLICABLE STATE OR COUNTY REGULATIONS.

SIGNATURE OF PROPERTY OWNER OR OWNER'S LEGALLY AUTHORIZED REPRESENTATIVE

Betty Lou Butler

-----INSTALLATION SPECIFICATIONS-----

SEPTIC TANK CAPACITY 1050 GALLONS
 DRAINFIELD SIZE 400 SQUARE FEET
 DRAINFIELD ROCK MUST BE 5 FEET FROM FRONT OR REAR PROPERTY LINES
 AND 5 FEET FROM SIDE PROPERTY LINES. EXCAVATION CAN NOT EXTEND MORE THAN FIVE FEET FROM APPROVED INSTALLATION AREA.

TOP OF SEPTIC TANK IS REQUIRED TO BE A MINIMUM ELEVATION OF

** Do not exceed 18"*
FINISH SOIL GRADE of cover over D.F. rock.

ISSUED BY: A. Copertino DATE 5/24/89
MARTIN COUNTY PUBLIC HEALTH UNIT

PLEASE NOTE:

- (1) IF BUILDING CONSTRUCTION DOES NOT START WITHIN ONE YEAR FROM DATE OF ISSUANCE, THIS PERMIT EXPIRES. IF BUILDING CONSTRUCTION STARTS WITHIN 1 YEAR FROM DATE OF ISSUANCE, THE DATE OF EXPIRATION WILL BE EXTENDED AN ADDITIONAL 90 DAYS.
- (2) APPLICANT IS RESPONSIBLE FOR REPLACING EXCAVATED SOILS WITH A GOOD GRADE OF SAND.
- (3) NA REINSPECTION FEE IF WELL NOT INSTALLED AT TIME OF ONSITE SEWAGE DISPOSAL SYSTEM INSPECTION.
- (4) INSPECTION RESULTS WILL BE POSTED ON BUILDING PERMIT OR ON ELECTRICAL BOX.
- (5) IF BUILDING STUBOUT IS PLACED MORE THAN 20 FEET FROM SEPTIC TANK OR DRAINFIELD, A HIGHER STUBOUT ELEVATION THAN SHOWN ABOVE WILL BE REQUIRED.
- (6) IF FILL IS REQUIRED, CONTACT MARTIN COUNTY BUILDING DIVISION.
- (7) IF ANY INFORMATION ON THIS PERMIT CHANGES, AN UPDATED APPLICATION IS REQUIRED.
- (8) IF WELL OR MOUND DRAINFIELD IS PROPOSED, SEE ATTACHED SKETCH OF ADDITIONAL SPECIAL REQUIREMENTS.

-----FINAL INSPECTION-----

CONSTRUCTION APPROVED BY: _____ DATE _____
MARTIN COUNTY PUBLIC HEALTH UNIT

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE



APPLICANT Betty Lou Butler

LEGAL DESCRIPTION Lot 42 High Point

-----SITE INFORMATION-----

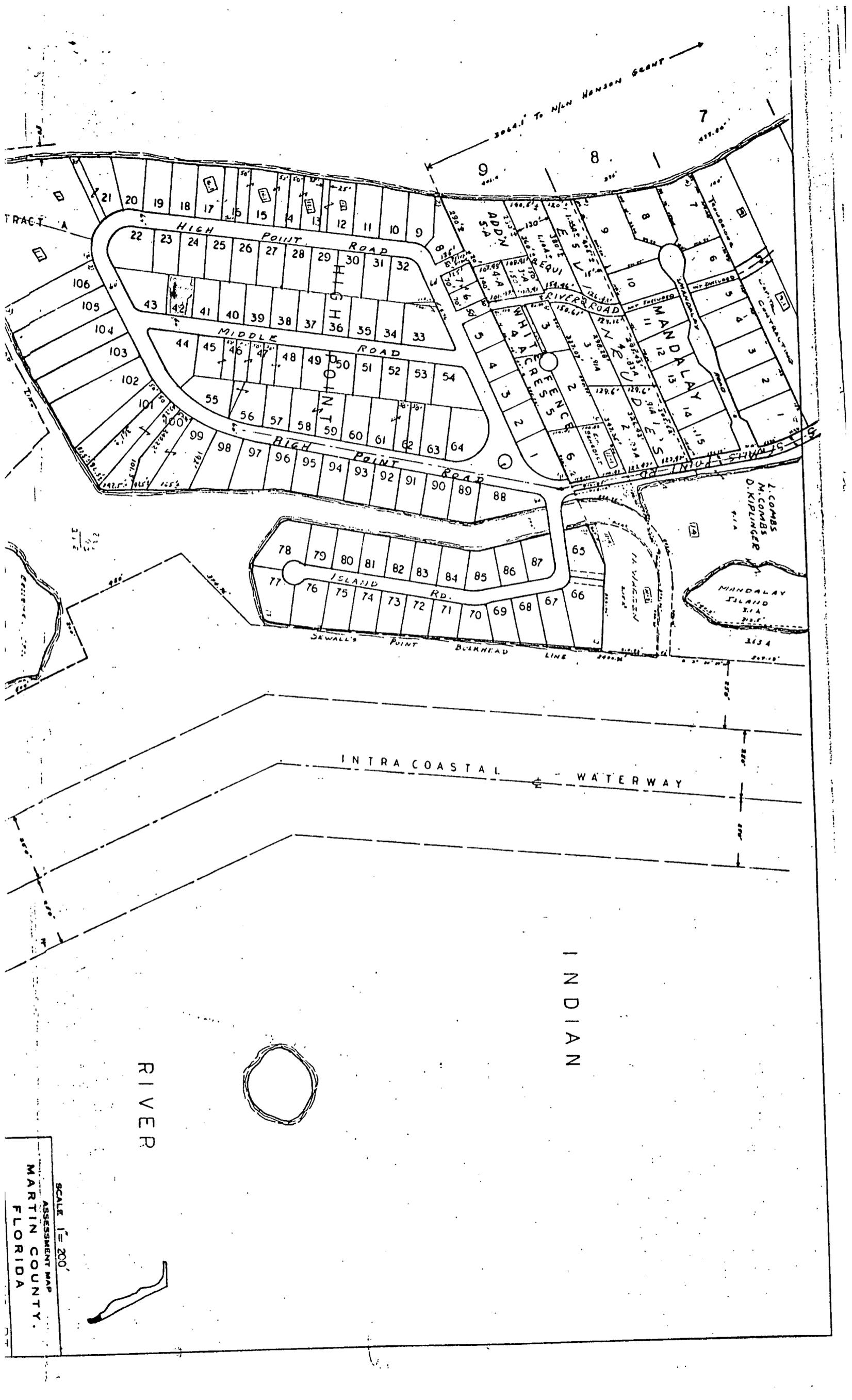
1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? NO
2. IS THERE A POTABLE PRIVATE WELL WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
3. IS THERE AN IRRIGATION WELL WITHIN 50 FEET OF THE AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
4. IS THERE A PUBLIC WELL THAT SERVES LESS THAN 25 PEOPLE OR LESS THAN 15 HOMES WITHIN 100 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
5. IS THERE A PUBLIC WELL WHICH SERVES MORE THAN 25 PEOPLE OR MORE THAN 15 HOMES WITHIN 200 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
6. IS THERE A GRAVITY SEWER LINE OR LIFT STATION WITHIN 100 FEET OF THE PROPOSED LOT? NO
7. IS THERE A LAKE, STREAM, WETLAND, OR SURFACE WATER WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? NO
8. IS THERE A PROPOSED OR EXISTING PUBLIC DRINKING WATER LINE WITHIN 10 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
9. IS THERE A STORM WATER RETENTION AREA OR DRAINAGE EASEMENT WITHIN 15 FEET OF THE PROPOSED SEPTIC SYSTEM? NO
10. IS THE SEPTIC SYSTEM IN AN AREA PROPOSED FOR PAVING OR VEHICULAR TRAFFIC? NO
11. ARE ALL PRIVATE WELLS, SEPTIC SYSTEMS AND SURFACE WATER ON ADJACENT OR CONTIGUOUS LAND WITHIN 75 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? yes
12. ARE ALL PUBLIC WELLS WITHIN 200 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? yes
13. DOES THE PLOT PLAN INCLUDE A PLAT OF THE LOT OR TOTAL SITE OWNERSHIP DRAWN TO SCALE, BOUNDARIES WITH DIMENSIONS, LOCATIONS OF BUILDING OR RESIDENCES, SWIMMING POOLS, RECORDED EASEMENTS, THE PROPOSED SEPTIC SYSTEM, ANY PROPOSED OR EXISTING WELLS, PUBLIC WATER LINES, PAVED AREAS OR DRIVEWAYS, AND SURFACE WATERS SUCH AS LAKES, PONDS, STREAMS, CANALS, OR WETLANDS? yes
14. THERE IS 1225⁺ SQUARE FEET OF AVAILABLE LAND TO INSTALL THE SEPTIC SYSTEM. THIS AREA EXCLUDES INTERFERENCES. SHADE THIS AVAILABLE AREA ON PLOT PLAN.

-----ELEVATIONS-----

1. CROWN OF ROAD ELEVATION 32.56 NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION _____ NGVD SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 24.91 NGVD SHOW LOCATION ON PLOT PLAN.
2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? NO IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING? _____ NGVD.

NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OF ENGINEER.

CERTIFIED BY: [Signature]
FL. PROFESSIONAL NO. 1272
DATE: 5-17-09 JOB NO. _____



30641' To N/4 N Hanson Grant

TRACT A

HIGH POINT ROAD

MIDDLE ROAD

RIVER ROAD

ISLAND RD.

SEWELL'S POINT BULKHEAD LINE

INTRA COASTAL WATERWAY

INDIAN

RIVER

MANDALAY ISLAND

L. COMBS
M. COMBS
D. KIPLINGER

SCALE 1" = 200'
ASSESSMENT MAP
MARTIN COUNTY,
FLORIDA



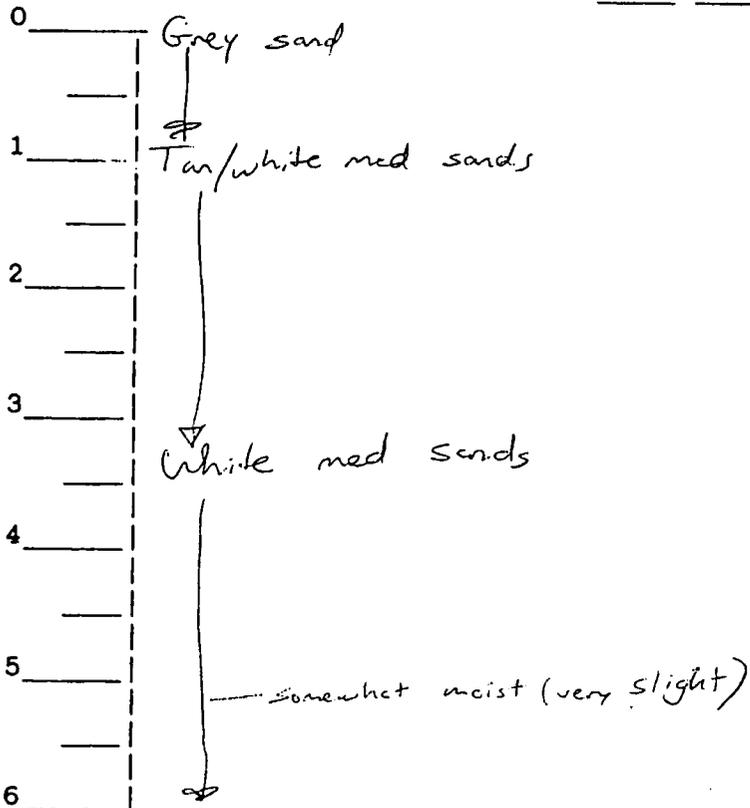
STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

SITE EVALUATION

APPLICANT: Betty Lou Butler

LEGAL DESCRIPTION: Lot 42 High Point

SOIL PROFILE



USDA SOIL TYPE St Lucie Sand/Paola Sand

USDA SOIL NUMBER #7/#6

Restrictive soils are present at 26' below the surface.

Present Water Depth Below Surface 26'

Wet Season Range per Soil Survey >72"

Estimated Wet Season Water Depth Below Surface 5'

Indicator Vegetation Present cleared

Is Benchmark Located on Plot Plan and Present on Site? yes

Approximate Amount of Fill on Neighbor Lots FSG

Depth of Fill in Soil Profile N/A

How Long Has Fill Been Present N/A

Evaluation by: M. D. [Signature] Date: 5/23/89

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

Address:

This Instrument Prepared by:

CHICAGO TITLE INSURANCE CO.
Address: 555 COLORADO AVE. SUITE 4
STUART, FL 34994

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

SPACE ABOVE THIS LINE FOR PROCESSING DATA

SPACE ABOVE THIS LINE FOR RECORDING DATA

Grantee's SS#: 097.22.3775

This Warranty Deed Made the 23rd day of March A. D. 1989 by
ROBERT F. HAAS and ROBERTA D. HAAS, husband and wife.

hereinafter called the grantor, to ANTHONY STRACUZZI

whose postoffice address is
hereinafter called the grantee:

P.O. Box 2692
Stuart, FL 34995

(Wherever used herein the terms "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth: That the grantor, for and in consideration of the sum of \$ 10.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in MARTIN County, Florida, viz:

Lot 42, HIGH POINT SUBDIVISION, according to the Plat thereof, filed on March 7, 1959, and recorded in Plat Book 3, at Page 108, Martin County, Florida public records.

SUBJECT TO RESTRICTIONS, EASEMENTS AND ZONING OF PUBLIC RECORDS.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in any-wise appertaining.

To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 1988

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

Signed, sealed and delivered in our presence:

Loebel Engel
Loebel Engel
Horraine Malesky

Robert F. Haas L.S.
Robert F. Haas
Robert D. Haas L.S.
Robert D. Haas

STATE OF NEW YORK
COUNTY OF New York

I HEREBY CERTIFY that on this day, before me, an

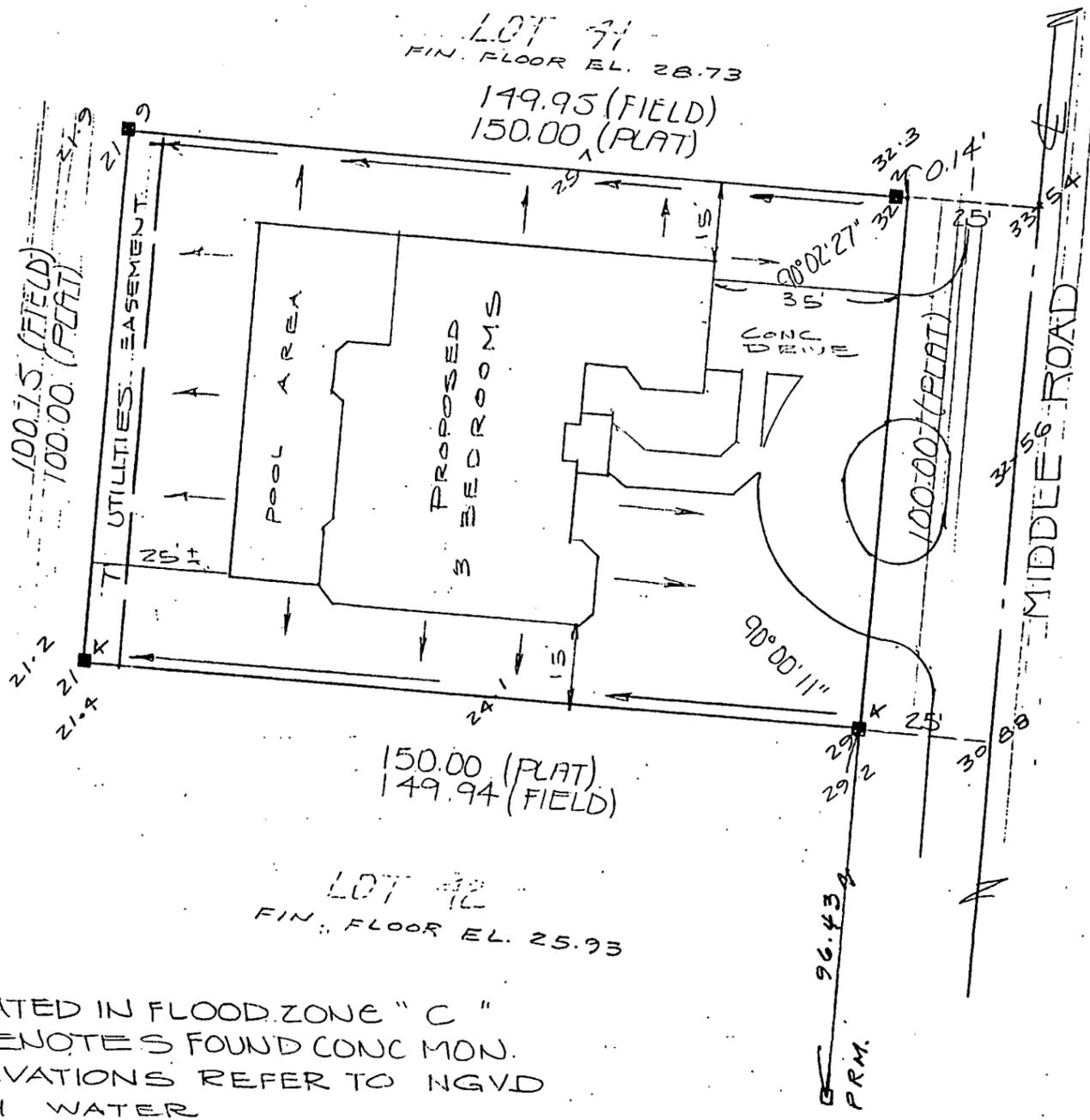
officer duly authorized in the State aforesaid and in the County aforesaid, to take acknowledgments, personally appeared ROBERT F. HAAS and ROBERTA D. HAAS, husband and wife.

to me known to be the person described in and who executed the foregoing instrument and they acknowledged before me that they executed the same.

WITNESS my hand and official seal in the County and State of New York
March A. D. 19 89
NOTARY PUBLIC
MY COMMISSION EXPIRES:

[Signature]

STEVEN A. KIRSCHENBAUM 23rd day of
Notary Public, State of New York
No. 31-4803563
Qualified in New York County
Commission Expires March 30, 1991



LOCATED IN FLOOD ZONE " C "
 ■ - DENOTES FOUND CONC MON.
 ELEVATIONS REFER TO NGVD
 CITY WATER

LOT 42
 FIN. FLOOR EL. 25.93

A DRAINAGE PLAN OF

LOT 42

HIGH POINT

According to the plat thereof as recorded in plat book 3, page 108
 public records of Martin County, Florida

for
 Anthony Stracuzzi.

This survey meets the minimum technical standards for Land Surveying in Florida, as prescribed in Chapter 21HH-6, F.A.C. I hereby certify that the sketch shown hereon is a correct representation of a survey done under my direction and is true and correct the best of my knowledge and belief. There are no encroachments unless otherwise shown. No search of the public records made for errors or omissions of said description Easements of record not shown unless furnished.

DON WILLIAMS & ASSOCIATES, INC.
 LAND SURVEYORS
 1115 E. OCEAN BLVD. STUART, FLA. 34996
 (305) 283-2977

W.L. Williams
 W.L. WILLIAMS
 R.L.S. FLA. REG. No. 1272
 W.O. # 323

SCALE: 1" = 30'

DATE 4-4-89 (Drawn)
 4-3-89 (Field)

F.B. 249 Page 72.73
 PLAT BOOK: 3

W.O. # 323
 PAGE: 108

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

RECORD OF INSPECTIONS

Date 11/14/89

This is to request a Certificate of Approval for Occupancy to be issued to Mr STROCUZZI for a structure built under Permit # 2559
(Owner of Property)

Subdivision High Point Lot 42 Street Address 23 Middle Road

when completed in conformance with the approved plans.


Signed (Owner)

- 1. Lot Stakes/Set Backs _____
- 2. Termite Protection 6/21/89
- 3. Footing - Slab 6/22/89
- 4. Rough Plumbing 6/20/89
- 5. Rough Electric 8/24/89
- 6. Lintel _____
- 7. Roof 9/15/89
- 8. Framing 9/24/89
- 9. Insulation 9/11/89
- 10. A/C Ducts 8/24/89
- 11. Final Electric 11/14/89
- 12. Final Plumbing 11/14/89
- 13. Final Construction 11/14/89

Final Inspection for Issuance of Certificate of Occupancy.

Approved by Building Inspector Dale Brown 11/14/89 date

Approved by Building Commissioner Edell Clark date

Utilities notified F.P.L. 11/14/89 date

Distribution:

original - owner

copies - Town Building Inspector, Deputy Clerk

2607

POOL

Permit No: ~~2607~~

Date

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

2607

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 ANTHONY STRACUZZI Present Address 3260 ASTER LANE BLDG I
Phone 283-2815 APT 141 STUART FL 34994

Contractor ANTHONY RUCCOLO Address CYPRESS LANE JENSEN BEACH FL
Phone 334-5316

Where licensed Florida License number _____

Electrical contractor RIVER STARS License number 00243

Plumbing contractor O'Donoghue License number CFC 025598

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

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

43 MIDDLE Rd High Point Sewall Point

Subdivision High Point Lot number 42 Block number _____

Contract price \$ 9,000.00 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-tapping" the construction project.

Contractor Anthony Rucolo

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 Anthony Stracuzzi

TOWN RECORD

Date submitted _____ Approved: _____
Building Inspector _____ Date _____

Approved: _____ Commissioner _____ Date _____
Final Approval given: _____ Date _____

Certificate of Occupancy issued (if applicable) _____
Date _____

SP1282

Permit No. _____

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

2700

SCREEN ENCLOSURE

Permit No. #2700

Date 1-19-90

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 ANTHONY STRACCOZZI Present Address 23 MIDDLE RD.

Phone 286-1619 SEWELL POINT

Contractor S&B ALUMINUM Address 1725 S.W. BILTMORE ST.

Phone 335-5254 PORT ST. LUCIE

Where licensed MARTIN CO. License number SP-00356

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: _____

SCREEN POOL ENCLOSURE

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

23 MIDDLE RD.

Subdivision HIGH POINT 42 Lot number 42 Block number _____

Contract price \$ 3,500 Cost of permit \$ 25XX

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Steph J. Malachuk

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 Betty L. Stracuzzi

TOWN RECORD
Approved: Dale Brown 1/19/90
Building Inspector Date

Date submitted _____

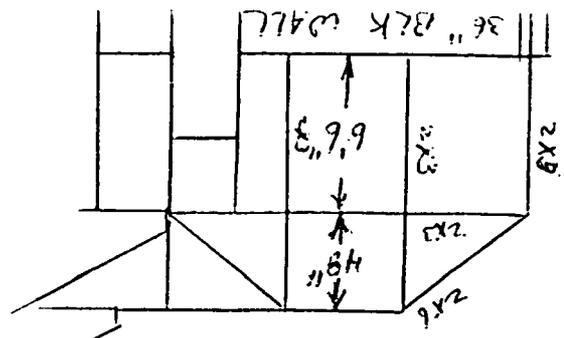
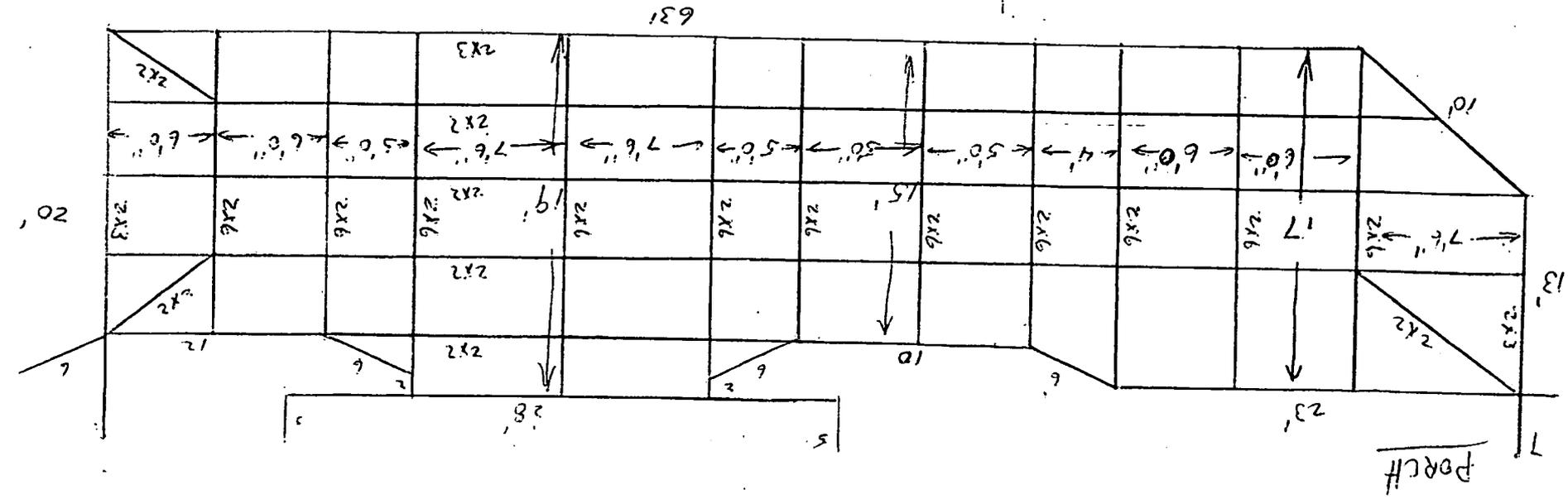
Approved: _____ Commissioner Date Final Approval given: _____ Date

Certificate of Occupancy issued (if applicable) _____ Date _____

SP1282

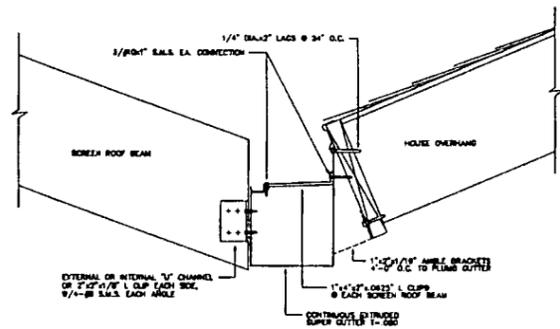
Permit No. #2700

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.

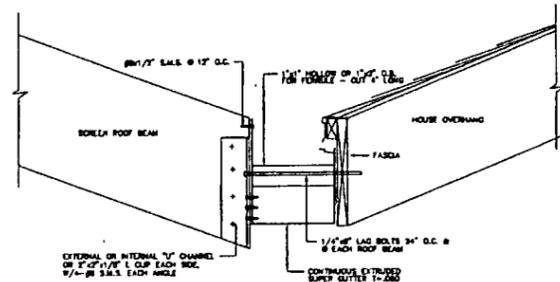


FRAME PLAN
 M/M STAC221
 23 MIDDLE RD.
 S & H ALUMINUM
 SCALE - AS SHOWN 1/8"

PORCH



SUPER GUTTER - FASCIA ATTACHMENT
(*CANTED* FASCIA TYPICAL)



SUPER GUTTER - FASCIA ATTACHMENT
(*PLUMB* FASCIA TYPICAL)

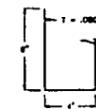
SUPER GUTTER
ALLOY 6063-T6
A = 1.20in²
WT = 1.44#/L.F.
I = 3.94in⁴
Sx = 1.973in³



2"x6" S.M.B.
ALLOY 6063-T6
A = 1.396in²
WT = 1.67#/L.F.
I = 8.46in⁴
Sx = 2.82in³



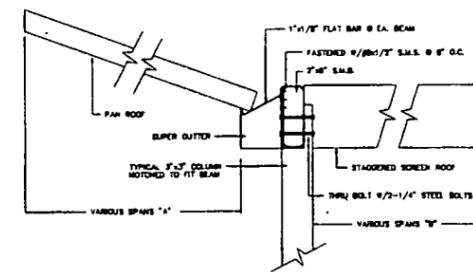
SUPER GUTTER
ALLOY 6063-T6
A = 1.20in²
WT = 1.44#/L.F.
I = 3.94in⁴
Sx = 1.973in³



2"x7" S.M.B.
ALLOY 6063-T6
A = 1.782in²
WT = 2.14#/L.F.
I = 17.13in⁴
Sx = 4.89in³



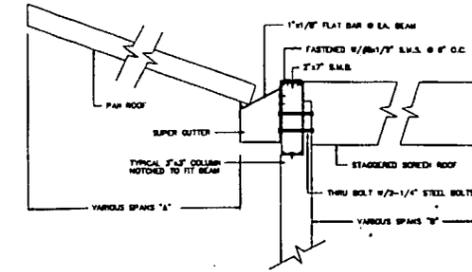
COMBINATION Sx = 4.80in³



SPAN TABLE - FOR COMBINATION - SUPER GUTTER + 2"x6" S.M.B.

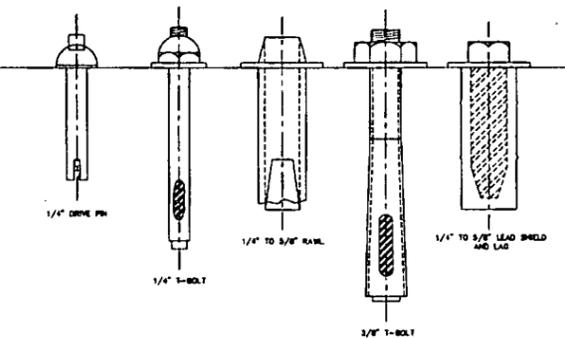
VARIOUS SPANS OF ROOF PANS "A"	VARIOUS SPANS OF SCREEN ROOFS "B"												
	18'	20'	22'	24'	26'	28'	30'	32'	34'	36'	38'	40'	42'
4'-0"	30'-5"	18'-10"	18'-4"	18'-10"	18'-4"	17'-10"	17'-4"	17'-1"	16'-8"	16'-5"	15'-10"	15'-4"	15'-0"
6'-0"	18'-5"	18'-0"	17'-4"	17'-3"	16'-10"	16'-4"	16'-2"	15'-10"	15'-7"	15'-4"	15'-1"	14'-10"	14'-7"
8'-0"	17'-0"	16'-8"	16'-3"	16'-0"	15'-8"	15'-5"	15'-2"	14'-11"	14'-8"	14'-5"	14'-2"	13'-10"	13'-6"
10'-0"	15'-8"	15'-0"	15'-3"	15'-0"	14'-8"	14'-5"	14'-2"	14'-0"	13'-8"	13'-5"	13'-2"	12'-10"	12'-6"
12'-0"	14'-10"	14'-7"	14'-4"	14'-2"	14'-0"	13'-8"	13'-5"	13'-2"	12'-10"	12'-7"	12'-4"	12'-1"	11'-10"
14'-0"	14'-0"	13'-10"	13'-7"	13'-5"	13'-2"	12'-11"	12'-8"	12'-5"	12'-2"	11'-10"	11'-7"	11'-4"	11'-0"

COMBINATION Sx = 6.87in³

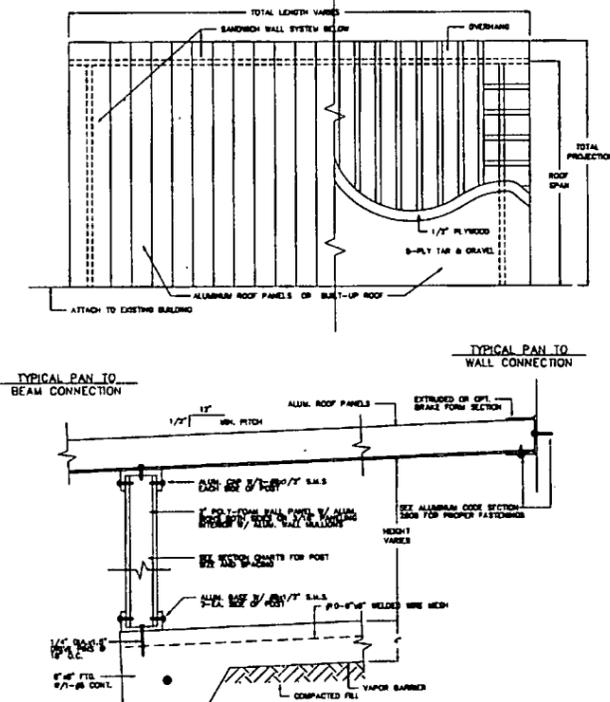


SPAN TABLE - FOR COMBINATION - SUPER GUTTER + 2"x7" S.M.B.

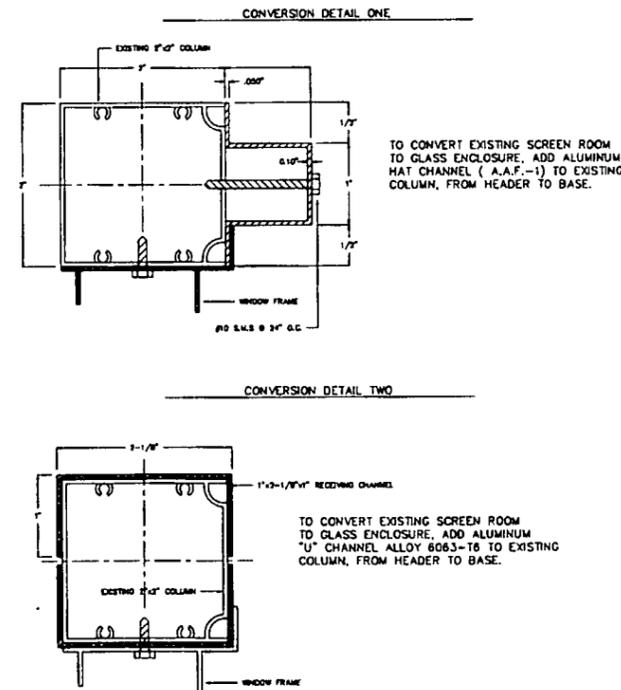
VARIOUS SPANS OF ROOF PANS "A"	VARIOUS SPANS OF SCREEN ROOFS "B"												
	18'	20'	22'	24'	26'	28'	30'	32'	34'	36'	38'	40'	42'
4'-0"	31'-5"	23'-6"	23'-0"	22'-6"	22'-0"	21'-6"	21'-0"	20'-6"	20'-0"	19'-6"	19'-0"	18'-6"	18'-0"
6'-0"	27'-0"	21'-4"	21'-0"	20'-7"	20'-3"	19'-8"	19'-4"	19'-0"	18'-6"	18'-2"	17'-8"	17'-4"	17'-0"
8'-0"	20'-5"	18'-11"	18'-6"	18'-3"	18'-0"	17'-8"	17'-4"	17'-0"	16'-8"	16'-4"	16'-0"	15'-8"	15'-4"
10'-0"	18'-10"	18'-7"	18'-3"	18'-0"	17'-8"	17'-4"	17'-0"	16'-8"	16'-4"	16'-0"	15'-8"	15'-4"	15'-0"
12'-0"	17'-8"	17'-4"	17'-1"	16'-11"	16'-8"	16'-4"	16'-0"	15'-10"	15'-6"	15'-2"	14'-10"	14'-6"	14'-2"
14'-0"	16'-8"	16'-4"	16'-0"	15'-10"	15'-6"	15'-2"	14'-10"	14'-6"	14'-2"	13'-10"	13'-6"	13'-2"	12'-10"



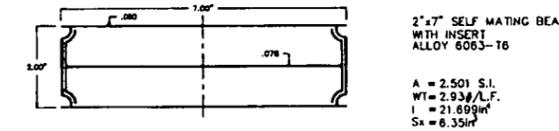
MASONRY - CONCRETE FASTENERS



GLASS ROOMS
(SANDWICH SYSTEM)



GLASS ROOM "HAT"
(REINFORCEMENT OF .040 POST)



SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	56'-9"	47'-6"	30'-0"	27'-5"
4'	49'-2"	41'-2"	26'-0"	23'-9"
5'	44'-0"	36'-10"	24'-3"	21'-3"
6'	40'-2"	33'-6"	21'-3"	19'-4"
7'	37'-2"	31'-1"	19'-8"	17'-11"
8'	34'-8"	29'-0"	18'-5"	16'-0"
9'	32'-9"	27'-5"	17'-4"	15'-10"
10'	31'-0"	26'-0"	16'-5"	15'-0"

2"x7" S.M.B. WITH INSERT

DATE	BY	DESCRIPTION

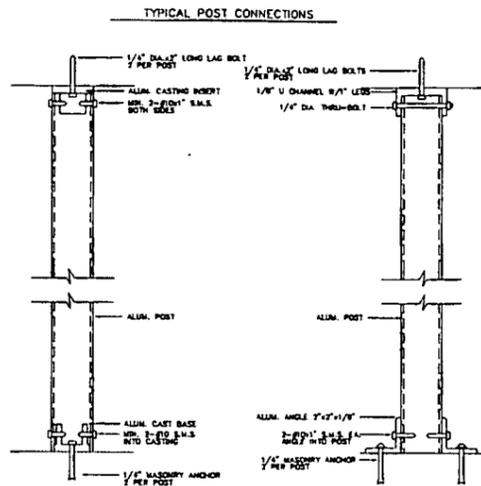
TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



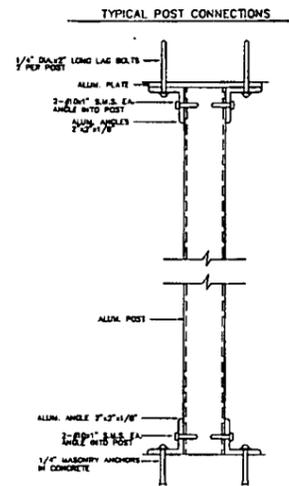
ALUMINUM CONSTRUCTION
DETAILS

DRAWN	COMPTON
CHECKED	NASH
SCALE	N.T.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

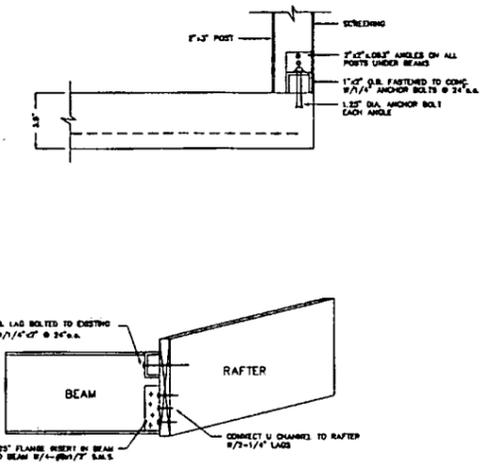
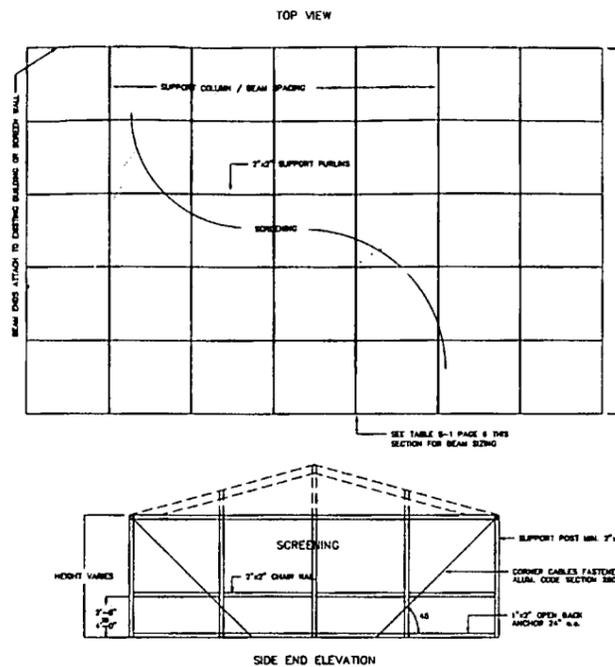
SEAL OF FIVE SHEETS
4



NOTE: ANGLES MAY HAVE 1 LEG INSIDE POST



NOTE: ANGLES MAY HAVE 1 LEG INSIDE POST

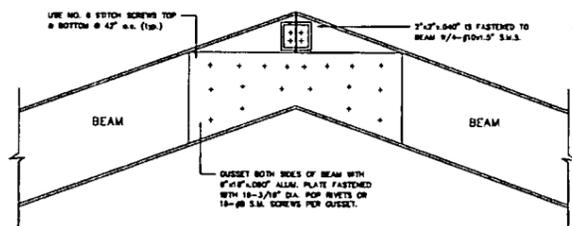


SCREEN ROOM
(UNDER WOOD ROOF)

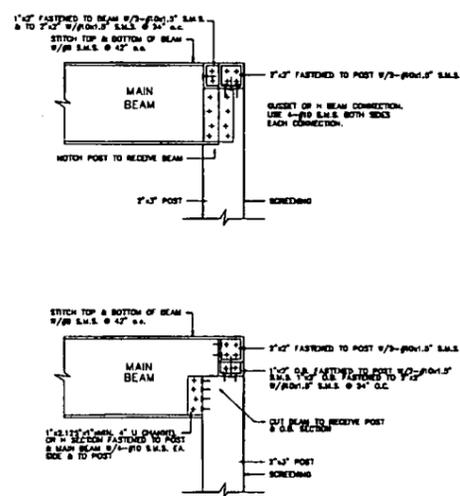
SCREEN ROOM
(UNDER WOOD ROOF)

POOL ENCLOSURE
(TYPICAL)

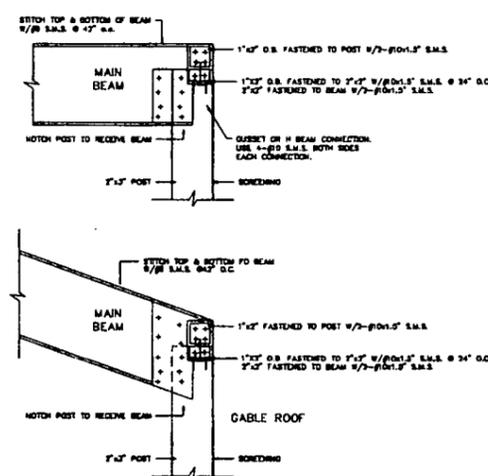
POOL ENCLOSURE
(CONNECTION TYPICALS)



POOL ENCLOSURE
(CONNECTION TYPICALS)



POOL ENCLOSURE
(POST TO BEAM TYPICALS)



POOL ENCLOSURE
(POST TO BEAM TYPICALS)

BEAM SIZE	MAXIMUM CLEAR SPAN FOR SCREENED ROOF BEAMS @ VARIOUS SPACING							
	4'-0\"/>							
2\"/>	21'-8\"/>	19'-4\"/>	18'-8\"/>	17'-8\"/>	17'-0\"/>	16'-4\"/>	15'-10\"/>	15'-3\"/>
2\"/>	25'-5\"/>	22'-9\"/>	21'-9\"/>	20'-9\"/>	20'-0\"/>	19'-3\"/>	18'-8\"/>	18'-0\"/>
2\"/>	32'-9\"/>	29'-4\"/>	28'-0\"/>	26'-9\"/>	25'-9\"/>	24'-9\"/>	24'-0\"/>	23'-2\"/>
2\"/>	42'-9\"/>	38'-3\"/>	36'-7\"/>	35'-0\"/>	33'-8\"/>	32'-4\"/>	31'-4\"/>	30'-3\"/>
2\"/>	49'-2\"/>	44'-0\"/>	42'-0\"/>	40'-2\"/>	38'-8\"/>	37'-2\"/>	36'-0\"/>	34'-9\"/>
3\"/>	25'-10\"/>	25'-0\"/>	24'-3\"/>	23'-7\"/>	23'-0\"/>	22'-5\"/>	21'-11\"/>	21'-5\"/>
3\"/>	34'-10\"/>	31'-1\"/>	29'-10\"/>	28'-6\"/>	27'-5\"/>	26'-4\"/>	25'-5\"/>	24'-8\"/>
4\"/>	42'-10\"/>	38'-4\"/>	36'-8\"/>	35'-0\"/>	33'-9\"/>	32'-5\"/>	31'-5\"/>	30'-4\"/>

NOTE: THIS TABLE IS BASED ON:
WINDLOAD OF 120 MPH LIVELOAD = 7 LBS/SQ. FT. SCREEN MESH 18x14

SCREEN ROOF BEAM - SPAN TABLE S-1

DATE	BY	DESCRIPTION

REVISIONS

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



ALUMINUM CONSTRUCTION
DETAILS

DRAWN	COMPTON
CHECKED	NASH
SCALE	NT.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

SEAL
9/18/87

SHEET
3
OF FIVE SHEETS

SEPTEMBER 1987

TREASURE COAST CHAPTER, INC
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



PREPARED BY:

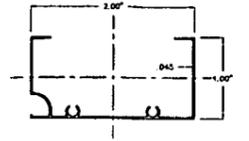
NASH ENGINEERING, INC.
810 SATURN ST. SUITE 16
JUPITER, FLORIDA 33477
(305)747-7254

ROOF PAN (ALLOY 3003 H-16)	PAN THICKNESS	Sx	MAX. SPAN @ WIND VELOCITIES SHOWN		
1.75" PAN #/032 CLEAT	.032	.238in ³	100MPH	110MPH	120MPH
					10'
CLEAT ALTERNATIVES FOR 1-3/4" PAN					
T-BAR 	.032				11'
T-BAR 	.032				11'
EXTRUDED "1" CLEAT 	.032				13'

NOTE:
PANS MAY OVERHANG 1/3 OF SIMPLE SPAN. SPANS MAY BE INCREASED 2% FOR EACH 12" OF OVERHANG UP TO 3'-0". CONSULT AN ENGINEER FOR GREATER OVERHANG.

ROOF PAN (ALLOY 3003 H-16)	PAN THICKNESS	Sx	MAX. SPAN @ WIND VELOCITIES SHOWN		
2" INTERLOCKING PANEL	.024	.450in ³	100MPH	110MPH	120MPH
					13'-4"
T-VARIABLES 	.032	.608in ³			15'-6"
2" INTERLOCKING PANEL 	.032	.346in ³			11'-0"

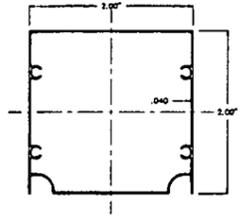
NOTE:
PANS MAY OVERHANG 1/3 OF SIMPLE SPAN. SPANS MAY BE INCREASED 2% FOR EACH 12" OF OVERHANG UP TO 3'-0". CONSULT AN ENGINEER FOR GREATER OVERHANG.



1"x2" OPEN BACK
ALLOY 6063-T5
A = 0.233in²
WT = 0.280#/L.F.
I = 0.1425in⁴
Sx = 0.1425in³

SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	8'-6"	7'-4"	4'-6"	4'-0"
4'	7'-4"	6'-2"	3'-10"	3'-6"
5'	6'-7"	5'-2"	3'-6"	3'-2"
6'	6'-0"	5'-0"	3'-2"	2'-10"
7'	5'-6"	4'-8"	2'-11"	2'-8"
8'	5'-2"	4'-4"	2'-9"	2'-6"
9'	4'-10"	4'-2"	2'-6"	2'-4"
10'	4'-8"	3'-10"	2'-5"	2'-3"



2"x2" PATIO BEAM
ALLOY 6063-T5
A = 0.412in²
WT = 0.494#/L.F.
I = 0.2133in⁴
Sx = 0.2133in³

SPACING AND SPAN TABLES

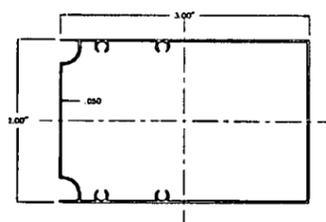
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	10'-5"	8'-8"	5'-6"	5'-0"
4'	9'-0"	7'-6"	4'-9"	4'-4"
5'	8'-0"	6'-9"	4'-3"	3'-10"
6'	7'-4"	6'-2"	3'-10"	3'-6"
7'	6'-10"	5'-8"	3'-8"	3'-4"
8'	6'-4"	5'-4"	3'-4"	3'-0"
9'	6'-0"	5'-0"	3'-2"	2'-11"
10'	5'-8"	4'-9"	3'-0"	2'-9"

CLEATED ROOF PANS

INTERLOCKING ROOF PANS

1"x2" OPEN BACK

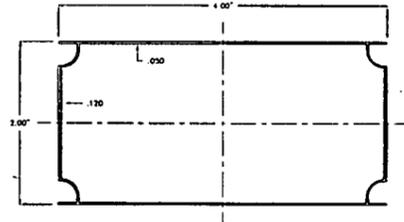
2"x2" PATIO BEAM



2"x3" PATIO BEAM
ALLOY 6063-T5
A = 0.65in²
WT = 0.78#/L.F.
I = 0.741in⁴
R_x = 1.068in
S_x = 0.435in³
S_y = 0.57in³

SPACING AND SPAN TABLES

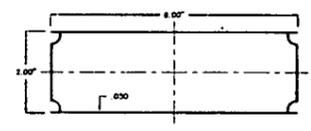
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	16'-5"	13'-9"	8'-8"	8'-0"
4'	14'-3"	11'-11"	7'-6"	6'-11"
5'	12'-9"	10'-8"	6'-9"	6'-2"
6'	11'-8"	9'-9"	6'-2"	5'-7"
7'	10'-9"	9'-1"	5'-8"	5'-2"
8'	10'-1"	8'-5"	5'-4"	4'-10"
9'	9'-6"	7'-11"	5'-0"	4'-7"
10'	9'-1"	7'-6"	4'-9"	4'-4"



2"x4" SELF MATING BEAM
ALLOY 6063-T6
WALL = .050
FLANGE = .120
A = 0.950in²
WT = 1.14#/L.F.
I = 2.45in⁴
S_x = 1.25in³

SPACING AND SPAN TABLES

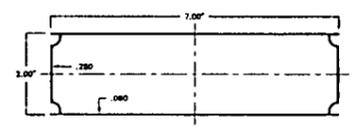
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	25'-0"	20'-11"	13'-3"	12'-0"
4'	21'-8"	18'-1"	11'-5"	10'-5"
5'	19'-4"	16'-2"	10'-3"	9'-4"
6'	17'-8"	14'-9"	9'-4"	8'-6"
7'	16'-4"	13'-8"	8'-8"	7'-11"
8'	15'-3"	12'-10"	8'-0"	7'-4"
9'	14'-4"	12'-0"	7'-8"	7'-0"
10'	13'-8"	11'-5"	7'-3"	6'-7"



2"x6" SELF MATING BEAM
ALLOY 6063-T6
A = 1.396in²
WT = 1.67#/L.F.
I = 8.46in⁴
S_x = 2.82in³

SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	37'-10"	31'-8"	20'-0"	18'-3"
4'	32'-9"	27'-5"	17'-4"	15'-10"
5'	29'-4"	24'-6"	15'-6"	14'-2"
6'	26'-9"	22'-5"	14'-2"	12'-11"
7'	24'-9"	20'-8"	13'-1"	12'-0"
8'	23'-2"	19'-5"	12'-3"	11'-2"
9'	21'-10"	18'-3"	11'-6"	10'-6"
10'	20'-9"	17'-4"	11'-0"	10'-0"



2"x7" SELF MATING BEAM
ALLOY 6063-T6
A = 1.782in²
WT = 2.14#/L.F.
I = 17.139in⁴
S_x = 4.89in³

SPACING AND SPAN TABLES

SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	49'-4"	41'-4"	26'-2"	23'-10"
4'	42'-9"	35'-9"	22'-8"	20'-8"
5'	38'-3"	32'-0"	20'-3"	18'-5"
6'	35'-0"	29'-2"	18'-5"	16'-10"
7'	32'-4"	27'-0"	17'-1"	15'-7"
8'	30'-3"	25'-3"	16'-0"	14'-7"
9'	28'-6"	23'-10"	15'-0"	13'-9"
10'	27'-0"	22'-8"	14'-4"	13'-0"

2"x3" PATIO BEAM

2"x4" SELF MATING BEAM

2"x6" SELF MATING BEAM

2"x7" SELF MATING BEAM

DATE	BY	DESCRIPTION

REVISIONS

TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



ALUMINUM CONSTRUCTION
DETAILS

DRAWN	COMPTON
CHECKED	NASH
SCALE	NT.S.
DATE	SEPTEMBER 1987
JOB NO.	87-031

John Nash
9/19/87

SHEET
1
OF FIVE SHEETS

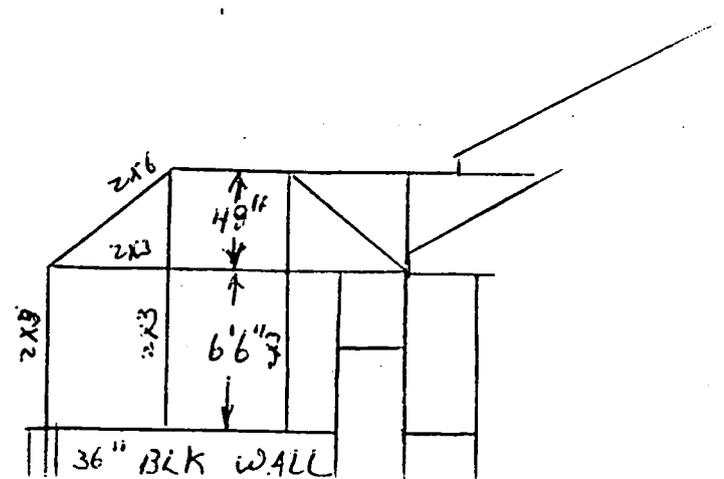
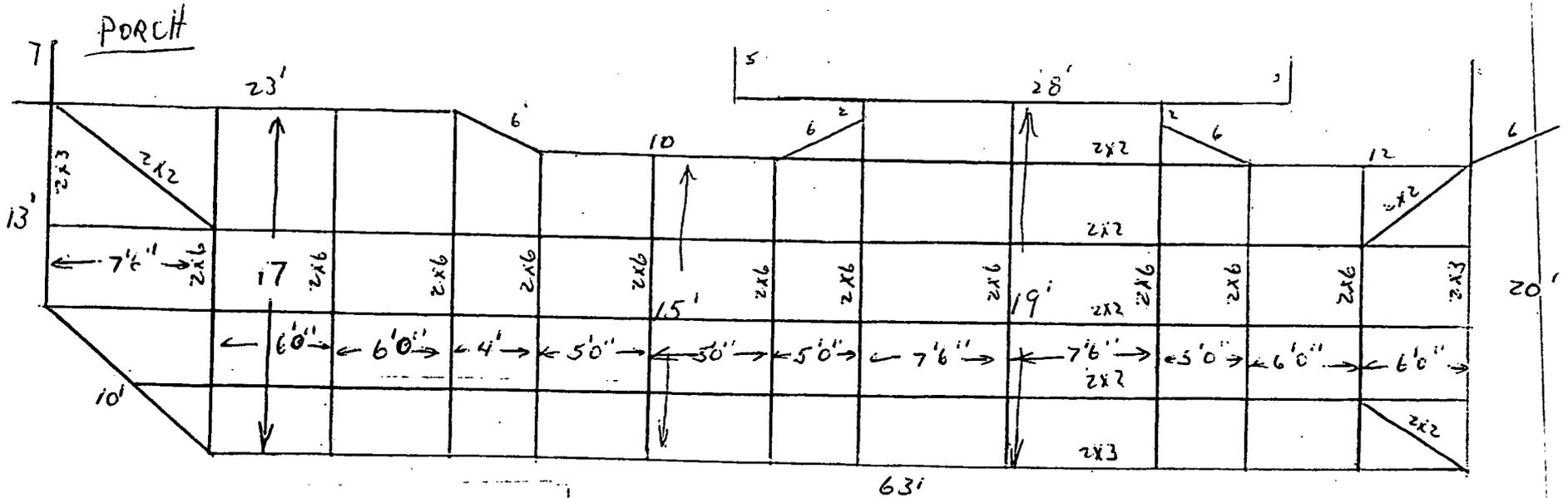
FRAME PLAN

M/M STRACUZZI

23 MIDDLE RD.

S & K ALUMINUM

SCALE - AS SHOWN 1-10-9



8172

2ND FLOOR ADDITION

RECEIVED
8-20-07
TOWN OF SEWALL'S POINT

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: # 8172

Date:

OWNER/TITLEHOLDER NAME: Nicholas & JOHNN MARIANO Phone (Day) 221-2157 (Fax) _____

Job Site Address: 23 Middle Road City: STUART State: FLA Zip: 34996

Legal Desc. Property (Subd/Lot/Block) High Point Lot #42 Parcel Number: _____

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

Scope of work: 2nd Floor Addition

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:

Estimated Value of Construction or Improvements: \$ 297,500.00
(Notice of Commencement required over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____
(FOR ADDITIONS AND REMODEL APPLICATIONS ONLY)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

Street: _____ City: _____ State: _____ Zip: _____

State Registration Number: _____ State Certification Number: _____ Municipality License Number: _____

ARCHITECT GARY POWELL Lic.#: _____ Phone Number: 223-1755

Street: 16 South River Rd City: STUART State: FLA Zip: 34996

ENGINEER _____ Lic# _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

AREA SQUARE FOOTAGE (SEWER & ELECTRIC): Living: 4871 Garage: _____ Covered Patios: _____ Screened Porch: _____

Carport: _____ Total Under Roof 4929 Wood Deck: _____ 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. 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 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.

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.

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.

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

OWNER OR AUTHORIZED AGENT SIGNATURE (required)
Nicholas Mariano

State of Florida, County of: Martin

This the 20 day of August, 2007

by Nicholas Mariano who is personally

known to me or produced FLDL m650-620-56-023-0

as identification.

CONTRACTOR SIGNATURE (required)
Nicholas Mariano

On State of Florida, County of: Martin

This the 20 day of August, 2007

by Nicholas Mariano who is personally

known to me or produced FLDL m650-620-56-023-0

as identification.

SHARON A. WALCZAK
Notary Public - State of Florida
My Commission Expires Mar 1, 2009

SHARON A. WALCZAK
Notary Public - State of Florida
My Commission Expires Mar 1, 2009

Notary Public
Seal

SINGLE FAMILY PERMITS 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!

Handwritten signature

MASTER PERMIT NO. 8172

TOWN OF SEWALL'S POINT

Date 6-5-06

BUILDING PERMIT NO. 8176

Building to be erected for MARRANO Type of Permit sub-roofer

Applied for by All American Roofing (Contractor) Building Fee /

Subdivision High Point Lot 42 Block _____ Radon Fee /

Address 23 Middle Rd Impact Fee _____

Type of structure SFR A/C Fee see

Print Qualifier Paul Wilkins Electrical Fee PN

FL Lic# CC058118 Plumbing Fee 8172

Parcel Control Number: 133841-002-000 004207 0000 Roofing Fee /

Amount Paid / Check # _____ Cash / Other Fees (_____) _____

Total Construction Cost \$ _____ TOTAL Fees _____

Signed [Signature]
Applicant

Signed Gene Simmons
Town Building Official 06/05/06

PERMIT

- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input checked="" type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> FENCE |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> TEMPORARY STRUCTURE | <input 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 _____ |

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID TV
ALLA002

DATE (MM/DD/YYYY)
10/13/06

PRODUCER
J.W. Edens & Company
 Commercial Ins of Brevard, Inc
 325 Fifth Avenue, Suite 108
 Indialantic FL 32903
 Phone: 321-725-7000 Fax: 321-725-7856

INSURED
All American Roofing of The
Treasure Coast, Inc.
 3006 SE Waaler Street
 Stuart FL 34991

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	Canal Indemnity Company	
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		

COVERAGES

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

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	GL92255	10/16/06	10/16/07	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 - COMP/OP AGG \$ 1,000,000
						GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
		<input type="checkbox"/> HIRED AUTOS				
		<input type="checkbox"/> NON-OWNED AUTOS				
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
		<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC \$
						AGG \$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
		<input type="checkbox"/> DEDUCTIBLE				\$
		<input type="checkbox"/> RETENTION \$				\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
		OTHER				E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

SEWALLS

Town of Sewall's Point
 One South Sewall's Point Rd.
 Stuart FL 33494

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 Theresa C. O'Brien *Theresa C. O'Brien*

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)

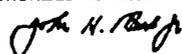
11/25/2005

PRODUCER CONDON MEEK 1211 COURT STREET CLEARWATER, FL 33756	Serial # 071955	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.												
INSURED CRUM STAFFING II, INC. 1-800-277-1620 100 S MISSOURI AVENUE CLEARWATER FL 33756		<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <th style="width: 80%;">INSURERS AFFORDING COVERAGE</th> <th style="width: 20%;">NAIC#</th> </tr> <tr> <td>INSURER A: FRANK WINSTON CRUM INSURANCE, INC.</td> <td></td> </tr> <tr> <td>INSURER B:</td> <td></td> </tr> <tr> <td>INSURER C:</td> <td></td> </tr> <tr> <td>INSURER D:</td> <td></td> </tr> <tr> <td>INSURER E:</td> <td></td> </tr> </table>	INSURERS AFFORDING COVERAGE	NAIC#	INSURER A: FRANK WINSTON CRUM INSURANCE, INC.		INSURER B:		INSURER C:		INSURER D:		INSURER E:	
INSURERS AFFORDING COVERAGE	NAIC#													
INSURER A: FRANK WINSTON CRUM INSURANCE, INC.														
INSURER B:														
INSURER C:														
INSURER D:														
INSURER E:														

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 OF OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED OR MAY PERTAIN, THE INSURANCE AFFORDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF SUCH POLICIES. AGGREGATE LIMITS SHOWN MAY HAVE BEEN REDUCED BY PAID CLAIMS.

INSR LTR	ADD'L INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		EXCESS / UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				BODILY INJURY (Per accident)	\$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR / PARTNER / EXECUTIVE OFFICER / MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC 6 0000 0000	1/1/2006	1/1/2007	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER	
		OTHER				E.L. EACH ACCIDENT	\$ 1,000,000
						E.L. DISEASE - EA EMPLOYEE	\$ 1,000,000
						E.L. DISEASE - POLICY LIMIT	\$ 1,000,000

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 THIS CERTIFICATE REMAINS IN EFFECT PROVIDED THE CLIENT'S ACCOUNT IS IN GOOD STANDING WITH CRUM STAFFING II, INC. COVERAGE IS NOT PROVIDED FOR ANY EMPLOYEE FOR WHICH THE CLIENT IS NOT REPORTING HOURS TO CRUM STAFFING II, INC. EFFECTIVE 09/03/2003, APPLIES TO 100% OF THE EMPLOYEES OF CRUM STAFFING II, INC. LEASED TO ALL AMERICAN ROOFING ENTERPRISES, INC. DBA ALL AMERICAN ROOFING ENTER. 727-697-0250

CERTIFICATE HOLDER TOWN OF SEWALLS POINT 1 S. SEWALLS POINT RD SEWALLS POINT, FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 
--	---

DATE	BATCH NUMBER	LICENSE NBR
09/2005	050113186	QB0020109

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2007
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF IT HAS A QUALIFIER.)
ALL AMERICAN ROOFING OF THE TREASURE COAST IN
3006 WAALER STREET FL 34997
STUART

JEB BUSH
GOVERNOR

SEP-14-2006 22:14

DISPLAY AS REQUIRED BY LAW

ALL AM ROOF

DIANE CARR
SECRETARY

7724638054 P.02/02

AC# 2018

STATE OF FLORIDA

DATE	BATCH NUMBER	LICENSE NBR
08/16/2006	050100534	CCC058118

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

WILKINS, PAUL D
ALL AMER ROOF OF THE TREASURE COAST INC
3006 SE WAALER ST
STUART FL 34997

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

SIMONE MARSTILLER
SECRETARY

2005-2008 MARTIN COUNTY
COUNTY OCCUPATIONAL LICENSE
Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

PHONE (772) 463-8055 LIC NO 023561
LOCATION 3006 SE WAALER ST STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	.00	LIC. FEE \$	25.00
\$	.00	PENALTY \$	.00
\$	.00	COL. FEE \$	.00
\$	.00	TRANSFER \$	.00
TOTAL		25.00	

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS PROFESSIONAL REGULATION
OF ROOFING CONTRACTOR
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

WILKINS, PAUL D (QUALIFIER)
ALL AMERICAN ROOFING OF THE
TREASURE COAST, INC.
3006 SE WAALER STREET
STUART, FL 34997

13 DAY OF SEPTEMBER 2005
AND ENDING SEPTEMBER 2006

12 05091303 006395

TOTAL P.01

OCT-20-2006 19:42

ALL AM ROOF

7724638054 P.01/01

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L06081601395

DATE	BATCH NUMBER	LICENSE NBR
08/16/2006	060100534	CCC058118

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

WILKINS, PAUL D
ALL AMER ROOF OF THE TREASURE COAST INC
3006 SE WAALER ST
STUART FL 34997

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

2006-2007 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34895
(772) 288-5604

LICENS ~~2002-513-0008~~ CERT ~~CC-C058118~~
PHONE ~~(772) 463-8055~~ SIC NO ~~023561~~

LOCATION:

3006 SE WAALER ST STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	.00	LIC FEE \$	25.00
\$	.00	PENALTY \$	.00
\$	.00	COL FEE \$	.00
\$	.00	TRANSFER \$	.00
TOTAL		25.00	

RECEIPT of PAYMENT
LARRY C. O'STEEN
99 09/13/2006 NORMA
20020005130000
002 2005 0014615
ALL AMERICAN ROOFIN

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF ROOFING CONTRACTOR

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

12 DAY OF SEPTEMBER 2006
AND ENDING SEPTEMBER 2007

WILKINS, PAUL D (QUALIFIER)
ALL AMERICAN ROOFING OF THE
TREASURE COAST, INC.
3006 SE WAALER STREET
STUART, FL 34997

TOTAL P.01

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
12/07/2005

PRODUCER (772)334-3181 FAX (772)334-7742
 Rick Carroll Insurance Agency
 2160 N.E. Dixie Highway
 P.O. Box 877
 Jensen Beach, FL 34958-0877
 INSURED Century Air Conditioning of the Treasure Coast,
 3044 SE Dominica Terrace
 Stuart, FL 34997

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE		NAIC #
INSURER A:	American States Insurance	19704
INSURER B:		
INSURER C:		
INSURER D:		
INSURER E:		

COVERAGES

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

INSR LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	01CL3499202	11/19/2005	11/19/2006	EACH OCCURRENCE \$ 300,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 200,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 300,000 GENERAL AGGREGATE \$ 600,000 PRODUCTS - COMP/OP AGG \$ 600,000
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
		OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

THIS CERTIFICATE IS FOR PROOF OF INSURANCE ONLY.

CERTIFICATE HOLDER

TOWN OF SEWELLS POINT
 1 SEWELLS POINT ROAD
 STUART, FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE
 Keith Carroll/LAG *Keith Carroll*

Certificate of Insurance

This certificate is issued as a matter of information only and confers no rights upon the Certificate Holder other than those provided by this policy. This certificate does not amend, extend, or alter the coverage afforded by the policies described herein.

Named Insured(s):

Gevity HR, Inc and its wholly owned subsidiaries including but not limited to Gevity HR, LP; Gevity HR II, LP; Gevity HR III, LP; Gevity HR IV, LP; Gevity HR V, LP; Gevity HR VI, LP; Gevity HR VII, LP; Gevity HR VIII, LP; Gevity HR IX, LP; Gevity HR X, LP; Gevity HR XI, LLC; Gevity HR XII Corp.
600 301 Boulevard West
Bradenton, Florida 34205

MARSH

Insurer Affording Coverage

American Home Assurance Co.,
Member of American International Group, Inc. (AIG)

Coverages:

This is to certify that the policy(ies) of insurance described herein have been issued to the insured named herein for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which the Certificate may be issued or may pertain, the insurance afforded by the policy(ies) described herein is subject to all the terms, conditions and exclusions of such policy(ies). (Aggregate) Limits shown may have been reduced by paid claims.

Type of Insurance	Certificate Exp. Date	Policy Number	Limits
Workers' Compensation	1-1-2007	RMWC9426922 RMWC9431313	Employers Liability
			Bodily Injury By Accident \$ 2,000,000 Each Accident
			Bodily Injury By Disease \$ 2,000,000 Policy Limit
			Bodily Injury By Disease \$ 2,000,000 Each Person

Other:

Employees Leased To:

Effective Date: 1/1/06

15970 Century Air Conditioning Inc.

The above referenced workers' compensation policy(ies) provide(s) statutory benefits only to the employees of the Named Insured(s) on such policy(ies), not to the employees of any other employer.

Notice of Cancellation: Should any of the policies described herein be cancelled before the expiration date thereof, the insurer affording coverage will endeavor to mail 30 days written notice to the certificate holder named herein, but failure to mail such notice shall impose no obligation or liability of any kind upon the insurer affording coverage, its agents or representatives.

Certificate Holder:

Town of Sewall Point
1 S Sewalls Point Rd
Stuart, FL 34996-6736



Michael C. Weiss
Authorized Representative of Marsh USA Inc.



(866) 443-8489

12/15/2005

Phone

Date Issued

2006-2007 MARTIN COUNTY ORIGINAL
OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9019, Stuart, FL 34995
(772) 288-6804

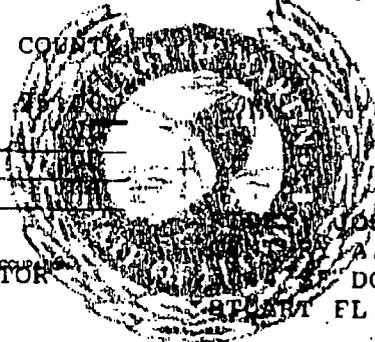
2005-518-023

ISS. NO. 29951592-4888 --- CANCELED
PHONE: 29951592-4888 SIC NO. 235110

LOCATION:
3044 SE DOMINICA TER STU

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	.00	LIC. FEE \$	0
0	.00	PENALTY \$	
1	.00	COL. FEE \$	
6	.00	TRANSFER \$	25.00
TOTAL			



RECEIPT OF PAYMENT
LARRY C. O'STEEN
99 08/17/2006 NORMA
20060005180002
001 2006 0011855
CENTURY A/C OF TREA

JOHN MATTHEW
A/C OF TREASURE COAST INC.
DOMINICA TER
STUART FL 34997

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF AIR CONDITIONING CONTRACTOR

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
17 DAY OF AUGUST 06
AND ENDING SEPTEMBER 30, 2007.

AC# 2750779

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L06082501786

DATE	BATCH NUMBER	LICENSE NBR
08/25/2006	050832775	CAC057676

The CLASS B AIR CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 F.S.
Expiration date: AUG 31, 2008



RILEY, JOHN MATTHEW
CENTURY A/C INC
3044 SE DOMINICA TERRACE
STUART, FL 34997

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

FAX TRANSMISSION

LLOYD JOHNSON ELECTRIC, INC.

P. O. Drawer O
Port Salerno, Florida 34992
(772) 223-7397
Fax: (772) 223-7145

Date	December 21, 2006	# Pages:	1
To:	Vallerie	Fax #:	(772)220-4765
Company:	Sewall's Point Building Department		
From:	Lloyd Johnson		
Subject:	Mariano Residence, 23 Middle Road		

Re.
Mariano Residence
23 Middle Road
Permit # 8172

Please be advised that Lloyd Johnson Electric will not be involved with this project, and I would to have our name remove from the permit for this project.
Thank you for your cooperation in this matter.

Respectfully,
Lloyd Johnson

10/14/06 City of State

MASTER PERMIT NO. 8172

TOWN OF SEWALL'S POINT

Date 6-2-06

BUILDING PERMIT NO. **8173**

Building to be erected for MARIANO

Type of Permit Sub-electric

Applied for by Lloyd Johnson Electric (Contractor)

Building Fee /

Subdivision High Point Lot 42 Block _____

Radon Fee /

Address 23 Middle Rd

Impact Fee see

Type of structure SFR

A/C Fee PN

Print Qualifier Tr
FL Lic #

Electrical Fee 8172

Parcel Control Number:
13-38-41-002-000-00420-7000

Plumbing Fee /

Roofing Fee /

Amount Paid / Check # _____ Cash /

Other Fees (_____) _____

Total Construction Cost \$ /

TOTAL Fees /

Signature [Signature]

Applicant

Signed [Signature]
Town Building Official as of 4/6/05

PERMIT

- | | | |
|---|--|--|
| <input type="checkbox"/> BUILDING | <input checked="" type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> FENCE |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> TEMPORARY STRUCTURE | <input 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 | _____ |

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID PS DATE (MM/DD/YYYY)
 LLOYD-7 09/25/06

PRODUCER Atlantic Pacific Insurance-PBG 11302 Prosperity Farms, #123 Palm Beach Gardens FL 33410 Phone: 800-538-0487 Fax: 561-626-3153	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Lloyd Johnson Electric, Inc. PO Drawer 0 Port Salerno FL 34992	INSURER A: Transcontinental Insurance Co.	20486
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

COVERAGES

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

INSR	ROOT LTR	INSRC	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A			GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	B2048001285	09/25/06	09/25/07	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 1,000,000
			AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
			GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
			EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
			OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

Electrical Work

CERTIFICATE HOLDER

CANCELLATION

SEWALLS

Town of Seawalls Point
 Building Dept
 1 80 Seawalls Point Rd.
 Seawalls Point FL 34996

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

 Richard Johnson, Inc.

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
04/15/06

PRODUCER
MIKE C KELLEY INS INC
561-747-5868
851 W INDIANTOWN RD STE D
JUPITER, FL, 33458

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURED
LLOYD JOHNSON ELECTRIC INC
P O BOX 0
PT SALERNO, FL 34992

INSURER A:
INSURER B: ALLSTATE
INSURER C: CYBERCOMP
INSURER D:
INSURER E:

COVERAGES

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

TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	048143183	02/05/06	02/05/07	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 100,000 BODILY INJURY (Per accident) \$ 300,000 PROPERTY DAMAGE (Per accident) \$ 50,000
GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCX0017821	04/17/06	04/17/07	<input checked="" type="checkbox"/> WC STAT-TORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
 30 DAYS NOTICE WILL BE GIVEN FOR CANCELLATION OF WORKERS COMPENSATION

CERTIFICATE HOLDER	<input checked="" type="checkbox"/> ADDITIONAL INSURED; INSURER LETTER:	CANCELLATION
TOWN OF SEWALLS POINT 1 SOUTH SEWALLS POINT RD SEWALLS POINT, FL 34996		SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE 

ACORD 26-8 (7/97)

© ACORD CORPORATION 1988

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/15/06

PRODUCER
MIKE C KELLEY INS INC
681-747-5888
851 W INDIANTOWN RD STE D
JUPITER, FL., 33458

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE

INSURED
LLOYD JOHNSON ELECTRIC INC
P O BOX 0
PT SALERNO, FL 34892

INSURER A:
INSURER B: ALLSTATE
INSURER C: CYBERCOMP
INSURER D:
INSURER E:

COVERAGES

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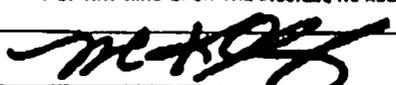
TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YYYY)	POLICY EXPIRATION DATE (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	048143183	02/05/06	02/05/07	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 100,000 BODILY INJURY (Per accident) \$ 300,000 PROPERTY DAMAGE (Per accident) \$ 50,000
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC AUTO ONLY: \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYER LIABILITY	WCX0017821	04/17/06	04/17/07	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 100,000 E.L. DISEASE - EA EMPLOYEE \$ 100,000 E.L. DISEASE - POLICY LIMIT \$ 500,000
C	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
30 DAYS NOTICE WILL BE GIVEN FOR CANCELLATION OF WORKERS COMPENSATION

CERTIFICATE HOLDER ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWN OF SEWALLS POINT
1 SOUTH SEWALLS POINT RD
SEWALLS POINT, FL 34896

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.
AUTHORIZED REPRESENTATIVE 

AC# 2685378

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L0607280178

DATE	ATCH NUMBLR	LICENSE NBR
07/28/2006	060075236	EC0003162

The ELECTRICAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

JOHNSON, O LLOYD
LLOYD JOHNSON ELECTRIC INC
PO DRAWER O
PORT SALERNO FL 34992

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

STATE OF FLORIDA AC# 2685378
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

EC0003162 07/28/06 060075236

CERTIFIED ELECTRICAL CONTRACTOR
JOHNSON, O LLOYD
LLOYD JOHNSON ELECTRIC INC

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date: AUG 31, 2008 L0607280178

2006-2007 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 289-5804

LICENSE ~~996-508-0001~~ CERT ~~EC-D003162~~
PHONE ~~(561)223-7397~~ SIG NO ~~001731~~

LOCATION:
2552 SE CLAYTON ST · MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	<u>00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>00</u>	PENALTY \$	<u>00</u>
\$	<u>00</u>	COL. FEE \$	<u>00</u>
\$	<u>00</u>	TRANSFER \$	<u>00</u>
TOTAL			<u>25.00</u>

RECEIPT of PAYMENT
LARRY C. O'STEEN
99 08/14/2006 NORMA
19960005080000
002 2005 0011143.
LLOYD JOHNSON ELECT

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF ELECTRICAL CONTRACTOR CERTIFIED

JOHNSON, LLOYD QUALIFIER
LLOYD JOHNSON ELECTRIC INC
PO DRAWER O
PORT SALERNO, FL 34992

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

14 DAY OF AUGUST 06
AND ENDING SEPTEMBER 26, 2007

FAYED
7-8-06

FAX COVER SHEET

**Ken Wendell
General Contractors, Inc.
3000 SE Waaler Street
Stuart, FL 34997
772-223-0800 (Phone)
772-223-1613 (Fax)**

Send to: Sewall's Point Building Dept	From: Jerry Kamins / Office Mgr.
Attention: Valerie	Date: 12/19/2006
Office Location:	Office Location:
Fax Number: 772-220-4765	Phone Number: 772 287 2455 (Ext # 13)

FAX OF SEVEN (7) PAGES, INCLUDING COVER:

Re: Permit #8172 - Mariano

Dear Valerie:

Please be advised that we have had a change in sub contractor for the above captioned project, as follows:

Remove: Lloyd's Electric
Add: Law's "Electrical Service, Inc. - licenses

We have already sent a fax to Lloyd's Electric for them to return their sub permit to your office and advised Law's Electrical Service, Inc. that it will be necessary for them to visit your office to pick up their sub permit at the appropriate time.

As always, please come back to us as to any other questions that you may have.

Cordially,

Jerry Kamins / Office Mgr.

KEN WENDELL GENERAL CONTRACTORS, INC.

Dec 21 06 02:32p Sokia Kim

772-223-1613

P.2

Dec 21 06 03:17p

Town of Sewall's Point

(772)220-4765

P.1

TOWN OF SEWALL'S POINT
VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: 8172

IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED.

OWNERS NAME: MARIANO, NICHOLAS & JOANN

CONSTRUCTION ADDRESS: 23 MIDDLE RD

PERMIT TYPE: RESIDENTIAL COMMERCIAL

ELECTRIC
 PLUMBING
 HVAC
 IRRIGATION
 FUEL GAS

TYPE OF SERVICE: NEW SERVICE EXISTING SERVICE OTHER

SCOPE OF WORK: Remodel - Addition

VALUE OF CONSTRUCTION \$ 36,875.00

<input type="checkbox"/> LOW VOLTAGE
TYPE OF EQUIPMENT: <input type="checkbox"/> SECURITY <input type="checkbox"/> VACUUM <input type="checkbox"/> SOUND SYSTEM <input type="checkbox"/> LANDSCAPE <input type="checkbox"/> OTHER
SCOPE OF WORK: _____ VALUE _____

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES.

James on Law 218 Beach Ave PSL 34952
SIGNATURE OF LICENSED CONTRACTOR ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: LAWS ELECTRIC, Inc.
PLEASE PRINT

TELEPHONE NO: 772-464-3969 FAX NO: 772-344-2196

MARTIN COUNTY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: ME0020

WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT. A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT.

***VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: MARIANO, NICHOLAS & JOANN

PARCEL CONTROL #: 133841-002-000-0042070000

SUBDIVISION: High Point LOT: 42 BLK: _____ PHASE: _____

SITE ADDRESS: 23 Middle Rd

Send or Fax to:
Town of Sewall's Building Department
1 S. Sewall's Point Road
Sewall's Point, FL 34996
FAX # (772) 220-4765

Fax: State County
licenses +
w/c no.
Completed
1/2/07



Martin County Building Department

2401 SE Monterey Road

Stuart, FL 34996

(772) 288-5482

Fax (772) 288-5911

LAW, JAMES W
LAWS ELECTRIC INC
218 BEACH AVE
PORT ST LUCIE, FL 34952

NOTICE TO ALL CONTRACTORS

PLEASE BE ADVISED THAT MARTIN COUNTY, FLORIDA SECTION 43.42 REQUIRES COMPLIANCE WITH THE FOLLOWING EXERPT FROM THE GENERAL ORDINANCES OF THE MARTIN COUNTY CODE:

PROHIBITED ACTIVITIES:

43.42 R Advertising contracting work in any advertisement to the public in a newspaper or telephone directory without including in the advertisement the number of the contractor license issued to the person or business being advertised.

43.42 S Operating any commercial vehicle in the course of conducting the practice of contracting that fails to display the contractor license number of the contractor.

If you have any questions relating to the information in this letter , please contact the Martin County Contractor's Licensing Division of the Martin County Building Department.



MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

MASTER ELECTRICIAN

License Number ME00020 Expires: 30-SEP-07

LAW, JAMES W
LAWS ELECTRIC INC
218 BEACH AVE
PORT ST LUCIE, FL 34952

ACORD CERTIFICATE OF LIABILITY INSURANCE

LAWSE-1

06/08/06

PRODUCER
Lowery-Yates Insurance, Inc.
 80 West Midway Road
 PO Box 12310
 Fort Pierce FL 34979-2310
 Phone: 772-461-3171 Fax: 772-461-3405

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

Laws Electric, Inc.
 218 Beach Avenue
 Port St. Lucie FL 34952-1345

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: **Owners Insurance Company**

09386

INSURER B:

INSURER C:

INSURER D:

INSURER E:

COVERAGES

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

INSR ADDL TR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	952312 20519341	06/06/06	06/06/07	EACH OCCURRENCE \$ 500000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person) \$ 5000
					PERSONAL & ADV INJURY \$ 500000
					GENERAL AGGREGATE \$ 500000
					PRODUCTS - COM/OP AGG \$ 500000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT \$
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE \$
	OTHER				E.L. DISEASE - POLICY LIMIT \$

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

ELECTRICAL CONTRACTOR

CERTIFICATE HOLDER

TOWNSEW

TOWN OF SEWALLS POINT
 1 SOUTH SEWALLS POINT RD.
 SEWALLS POINT FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Don Yates



06-27-2006

TOM GALLAGHER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

** CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW **

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation Law.

EFFECTIVE DATE: 06/22/2006 ** EXPIRATION DATE: 06/21/2008

PERSON: LAW

FEIN: 659531768

BUSINESS NAME AND ADDRESS: LAWS ELECTRIC INC
218 BEACH AVE
PORT SAINT LUCIE FL 34952

REISSUANCE REQUIREMENT

SCOPE OF BUSINESS OR TRADE: 1- ELECTRICAL CONTRACTOR

IMPORTANT: Pursuant to Chapter 440 . 05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

QUESTIONS? (850) 413-1111

DWC-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

AC# 2770470

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L0608310313

DATE	BATCH NUMBER	LICENSE NBR
08/31/2006	060034602	ER0000122

The ELECTRICAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008
(INDIVIDUAL MUST MEET ALL LOCAL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

LAW, JAMES W
LAWS ELECTRIC INC
218 BEACH AVE
PORT SAINT LUCIE FL 34952

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

LAW'S ELECTRIC, INC.

State of Florida Reg. # ER 0000122

" Serving St. Lucie County for 39 Years "

Ann Law
218 Beach Avenue, Port St. Lucie, Fl 34952
Phone: 772-464-3969 Fax: 772-344-2196

CONFIDENTIAL

MEMORANDUM

Date: <i>1-2-07</i>	Number of pages, including this sheet: <i>3</i>
To: <i>Valerie</i>	Corporation: <i>Swall Point</i>
Fax: <i>220-4765</i>	An original copy will not be mailed

The information contained in this facsimile memorandum is privileged and confidential, and is intended solely for the use of the person to whom it is directed. If you have received this transmission in error please be aware that any dissemination or copy of this communication strictly prohibited.

If this transmission is received in error please contact us at the number captioned above. Thank You

Reference: *License & W/C info*

TOWN OF SEWALL'S POINT
VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: _____

***IF NOT PERFORMED IN CONJUNCTION WITH A MAIN BUILDING PERMIT NUMBER, THEN THE VERIFICATION OF PARCEL CONTROL NUMBER BELOW MUST BE COMPLETED.

OWNERS NAME: MARIANO, NICHOLAS & JOANN

CONSTRUCTION ADDRESS: 23 MIDDLE RD

PERMIT TYPE: _____ RESIDENTIAL _____ COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS

TYPE OF SERVICE: _____ NEW SERVICE _____ EXISTING SERVICE _____ OTHER

SCOPE OF WORK: _____

VALUE OF CONSTRUCTION \$ _____

_____ LOW VOLTAGE

TYPE OF EQUIPMENT: _____ SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ OTHER

SCOPE OF WORK: _____ VALUE _____

IN CONSIDERATION TO THE GRANTING OF THE ABOVE REQUESTED PERMIT, I DO HEREBY AGREE THAT I WILL, IN ALL RESPECTS, PERFORM THE WORK IN ACCORDANCE WITH THE APPROVED PLANS AND ALL APPLICABLE CODES.

SIGNATURE OF LICENSED CONTRACTOR _____ ADDRESS OF CONTRACTOR _____

COMPANY OR QUALIFIER'S NAME: LAW'S ELECTRIC
PLEASE PRINT

TELEPHONE NO: _____ FAX NO: _____

MARTIN COUNTY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: _____

*** WORK CAN NOT BEGIN UNTIL THIS VERIFICATION IS COMPLETED AND SUBMITTED TO THE BUILDING DEPARTMENT. A PENALTY FEE WILL BE ASSESSED IF WORK IS STARTED PRIOR TO OBTAINING THIS PERMIT. *****

***VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: MARIANO, NICHOLAS & JOANN

PARCEL CONTROL #: 133841-002-000-0042070000

SUBDIVISION: High Point LOT: 42 BLK: _____ PHASE: _____

SITE ADDRESS: 23 Middle Rd

Fast State & County
Licenses &
w/c no.

Send or Fax to:
Town of Sewall's Building Department
1 S. Sewall's Point Road
Sewall's Point, FL 34996
FAX # (772) 220-4765

local state
renewals

MASTER PERMIT NO. 8172

TOWN OF SEWALL'S POINT

Date 6-1-06

BUILDING PERMIT NO. 8174

Building to be erected for MARIANO Type of Permit sub-mechanical

Applied for by Century Air Conditioning (Contractor) Building Fee _____

Subdivision High Point Lot 42 Block _____ Radon Fee _____

Address 23 Middle Rd Impact Fee _____

Type of structure SFR A/C Fee see

Print Qualifier Electrical Fee _____

Parcel Control Number: FL Licen # C Plumbing Fee PN

1338-41-002 00000420-70000 Roofing Fee 8172

Amount Paid ~~_____~~ Check # ~~_____~~ Cash ~~_____~~ Other Fees (_____)

Total Construction Cost \$ _____ TOTAL Fees _____

Signed _____ Applicant Signed [Signature] Town Building Official 6/1/06

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION
- ADDITION

INSPECTIONS

UNDERGROUND PLUMBING	_____	UNDERGROUND 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	_____

FAX COVER SHEET

Ken Wendell
General Contractors, Inc.
Stuart, FL 34997
772-223-0800 (Phone)
772-223-1613 (Fax)

Send to: DAVE'S PLUMBING	From: Jerry Kamins / Office Mgr.
Attention: Jeff	Date: 10/20/2006
Office Location:	Office Location:
Fax Number: 288-7127	Phone Number: 287 8128

FAX OF ONE (1) PAGE, INCLUDING COVER:

Re: Mariano / Sewall's Point Project (23 Middle Road)

Dear Jeff:

We are doing the above captioned project and have been advised by the Sewall's Point Bldg Dept that they need you to send them proof of the fact that you have State & Martin County licenses.

You can fax this aforementioned proof to:

**Town of Sewall's Point Building Dept
One South Sewall's Point Road
Sewall's Point, Florida 34996
Fax: 772 220 4765**

You should have already picked up your sub permit on this project when said project was being done by another GC that we have replaced.

Please advise when this has been achieved.

Cordially,

Jerry Kamins / Office Mgr.

KEN WENDELL GENERAL CONTRACTORS, INC.

10/20 Forwarding licenses as requested!

PP State & County updates

MASTER PERMIT NO. 8172

TOWN OF SEWALL'S POINT

Date 6-2-06

BUILDING PERMIT NO. 8175

Building to be erected for MARYANO Type of Permit sub-plumbing
Applied for by DAVE'S SEWER & PLUMBING (Contractor)

Subdivision High Point Lot 42 Block _____ Building Fee _____
Radon Fee _____

Address 23 Middle Rd Impact Fee _____

Type of structure SFR A/C Fee See

Print Qualifier David E. Husander Electrical Fee PN

Parcel Control Number: 1338-11-002-000 004 2070000 Plumbing Fee _____
Roofing Fee 8172

Amount Paid _____ Check # _____ Cash _____ Other Fees (_____) _____

Total Construction Cost \$ _____ TOTAL Fees _____

Signed Bill Jahn
Applicant

Signed Gene Simmons
Town Building Official 2006-6-06

PERMIT

- | | | |
|--|--|--|
| <input type="checkbox"/> BUILDING | <input type="checkbox"/> ELECTRICAL | <input type="checkbox"/> MECHANICAL |
| <input checked="" type="checkbox"/> PLUMBING | <input type="checkbox"/> ROOFING | <input type="checkbox"/> POOL/SPA/DECK |
| <input type="checkbox"/> DOCK/BOAT LIFT | <input type="checkbox"/> DEMOLITION | <input type="checkbox"/> FENCE |
| <input type="checkbox"/> SCREEN ENCLOSURE | <input type="checkbox"/> TEMPORARY STRUCTURE | <input 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	_____

ACCORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
01/04/06

PRODUCER

FEDERATED MUTUAL INSURANCE COMPANY
 302 Perimeter Center North
 Atlanta, GA 30348
 Phone: 770-390-3900
 Home Office: Owatonna, MN 55060

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

COMPANIES AFFORDING COVERAGE

COMPANY A FEDERATED MUTUAL INSURANCE COMPANY OR
 FEDERATED SERVICE INSURANCE COMPANY

INSURED 141-263-4
DAVES PLUMBING INC
 499 SE SEVILLE STREET
 STUART FL 34994

COMPANY B

COMPANY C

COMPANY D

COVERAGES

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.

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	9040854	04/01/06	04/01/07	GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMP/OP AGG \$ 2,000,000
					PERSONAL & ADV INJURY \$ 1,000,000
					EACH OCCURRENCE \$ 1,000,000
					FIRE DAMAGE (Any one fire) \$ 100,000
					MED EXP (Any one person) \$
A	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	9040854	04/01/06	04/01/07	COMBINED SINGLE LIMIT \$ 1,000,000
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL	9041337	04/01/06	04/01/07	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER \$
					EL EACH ACCIDENT \$ 500,000
					EL DISEASE - POLICY LIMIT \$ 500,000
					EL DISEASE - EA EMPLOYEE \$ 500,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

1412634
TOWN OF SEWALLS POINT 310
 ONE SOUTH SEWALLS POINT DR
 STUART FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE COMPANY, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

[Signature]
 PRESIDENT

AC# 1462733

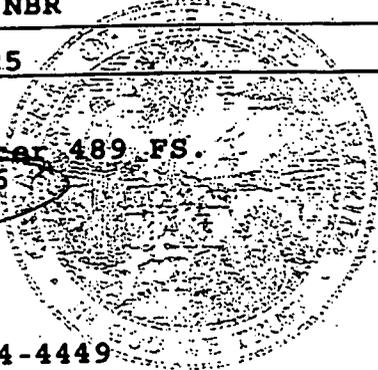
STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04062400655

DATE	BATCH NUMBER	LICENSE NBR
06/24/2004	030745402	CFC051625

The PLUMBING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2006



HUSNANDER, DAVID E JR
DAVE'S PLUMBING INC
499 SE SEVILLE ST
STUART

FL 34994-4449

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY



MARTIN COUNTY, FLORIDA
Construction Industry Licensing Board
Certificate of Competency

MASTER PLUMBER

License Number MP00030 Expires: 30-SEP-07

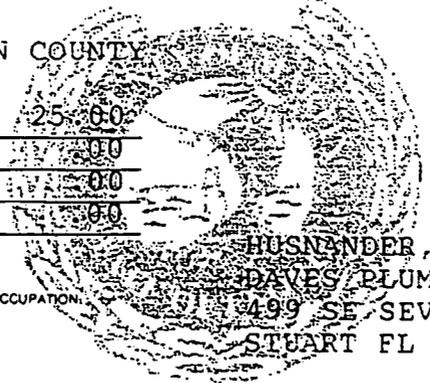
HUSNANDER, DAVE
DAVE'S PLUMBING INC
499 SE SEVILLE ST
STUART, FL 34994

2005-2006 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE
Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

LICENSE: 1900-524-007 CERT _____
PHONE: (561) 287-8128 SIC NO: 023511
LOCATION: 499 SE SEVILLE ST MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	_____	.00	LIC. FEE \$	_____	25.00
\$	_____	.00	PENALTY \$	_____	.00
\$	_____	.00	COL. FEE \$	_____	.00
\$	_____	.00	TRANSFER \$	_____	.00
TOTAL		_____	25.00		



HUSNANDER, DAVID E
DAVES PLUMBING INC
499 SE SEVILLE ST
STUART FL 34997

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF
PLUMBING

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
12 DAY OF AUGUST 2005
AND ENDING SEPTEMBER 30, 2006

RECEIPT OF PAYMENT

LARRY C. O'STEEN 6010
99 08/12/2005 OCCI NORMAL
19005240007000
0220050612005639CK \$25.00

Aug 20, 2007

Nicholas MARIANO
23 Middle Rd.
Swart, PA, 34996

I hereby on this day Aug. 20, 2007
is taking over as owner builder
and releasing Ken Wendell General
Contractor Inc. as contractor of this
project of permit # 8172

Richard A. Marino

11/8/06 - 11/8/07
 Date ~~10/18/06~~ 6-1-06

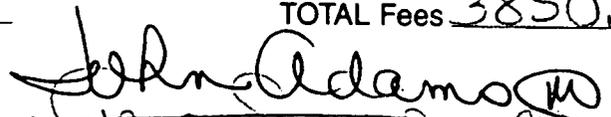
MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 8172

Building to be erected for MARIANO Type of Permit Addition & remodel
 Applied for by KEN WENDELL GEN'AL CONTRACTOR (Contractor) Building Fee 3360.00
 Subdivision High Point Lot 42 Block _____ Radon Fee +13.50
 Address 23 Middle Rd Impact Fee _____
 Type of structure SFR A/C Fee 35.00
 Electrical Fee 35.00
 Plumbing Fee 35.00
 Roofing Fee 35.00
 Amount Paid ADD RADON Check # _____ Cash 1350 Other Fees (1010) 350.00
 Total Construction Cost \$ 350,000 TOTAL Fees 3850.00

Signed 
 Applicant

Signed 
 Town Building Official

11/8/06 - 11/8/07 OK per John PERMIT
 5-22-07

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

Local/State

MASTER PERMIT NO. _____

6-606

TOWN OF SEWALL'S POINT

Date ~~3/10/06~~ ~~3/10/06~~

BUILDING PERMIT NO. 8172

10/18/06

Building to be erected for MARIANO Type of Permit Addition & remodel

Applied for by Ken Wendell, Gen'l Contr (Contractor) Building Fee 350 @ 96% / 1000 = 3360.00

Subdivision High Point Lot 42 Block _____ Radon Fee +13.51

Address 23 Middle Rd Impact Fee _____

Type of structure SFR A/C Fee 35.00

Parcel Control Number: 1338-41002-000-00420-70000 Electrical Fee 35.00

Amount Paid 1351 ADD'L RADON Check # _____ Cash _____ Other Fees (1010 PR) 350.00

Total Construction Cost 350,000 TOTAL Fees 3850.00

Signed _____ Applicant

[Signature] Town Building Official

PERMIT

- BUILDING
- PLUMBING
- DOCK/BOAT LIFT
- SCREEN ENCLOSURE
- FILL
- TREE REMOVAL
- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL
- MECHANICAL
- POOL/SPA/DECK
- FENCE
- GAS
- RENOVATION & ADDITION
- 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	_____



CERTIFICATE OF LIABILITY INSURANCE

OP ID LE
KENWZ-1DATE (MM/DD/YYYY)
10/23/06

PRODUCER
R.V. Johnson Agency, Inc.
2041 SE Ocean Blvd
Stuart FL 34996
Phone: 772-287-3366 Fax: 772-287-4255

INSURED
Ken Wendell General
Contractors, Inc.
3000 SE Waaler Street
Stuart FL 34997

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Auto-Owners Insurance Co	18988
INSURER B: Southern Owners Insurance	10190
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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

INSR	ADD'L LTR	INSRC	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
B			GENERAL LIABILITY	20606623	09/21/06	09/21/07	EACH OCCURRENCE	\$ 1,000,000
			<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 300,000
			<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	20606623	09/21/05	09/21/06	MED EXP (Any one person)	\$ 10,000
			<input checked="" type="checkbox"/> CGL Plus				PERSONAL & ADV INJURY	\$ 1,000,000
			GEN'L AGGREGATE LIMIT APPLIES PER				GENERAL AGGREGATE	\$ 1,000,000
			<input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				PRODUCTS - COMP/OP AGG	\$ 1,000,000
A			AUTOMOBILE LIABILITY	9659858800	02/06/06	02/06/07	COMBINED SINGLE LIMIT (Ea accident)	\$ 100000
			<input checked="" type="checkbox"/> ANY AUTO				BOODLY INJURY (Per person)	\$
			<input type="checkbox"/> ALL OWNED AUTOS				BOODLY INJURY (Per accident)	\$
			<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
			<input type="checkbox"/> HIRED AUTOS				AUTO ONLY - EA ACCIDENT	\$
			<input type="checkbox"/> NON-OWNED AUTOS				OTHER THAN AUTO ONLY: EA ACC	\$
				NOT COVERED W/THIS AGENCY			AGG	\$
			GARAGE LIABILITY				EACH OCCURRENCE	\$
			<input type="checkbox"/> ANY AUTO	NOT COVERED W/THIS AGENCY			AGGREGATE	\$
								\$
			EXCESS/UMBRELLA LIABILITY					\$
			<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE	NOT COVERED W/THIS AGENCY				\$
			<input type="checkbox"/> DEDUCTIBLE					\$
			<input type="checkbox"/> RETENTION \$					\$
			WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU-TORY LIMITS	OTH-ER
			ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?	NOT COVERED W/THIS AGENCY			E.L. EACH ACCIDENT	\$
			If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
			OTHER				E.L. DISEASE - POLICY LIMIT	\$
B			Prop & Equipment	20606623	09/21/06	09/21/07		
				20606623	09/21/05	09/21/06		

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

TOWN024

Town of Sewalls Point
Building Department
1 S. Sewalls Point Road
Stuart FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD™ CERTIFICATE OF LIABILITY INSURANCE Date
2/1/2006

Producer: Lion Insurance Company
2739 U.S. Highway 19 N.
Holiday, FL 34691
Phone: 727-838-5562 Fax: 727-837-2138

This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.

Insurers Affording Coverage		NAIC #
Insurer A:	Lion Insurance Company	11075
Insurer B:		
Insurer C:		
Insurer D:		
Insurer E:		

Insured: South East Personnel Leasing, Inc.
2739 U.S. Highway 19 N.
Holiday, FL 34691
Phone : (727)938-5562

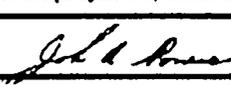
Coverages
The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADOL NSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits	
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur <hr/> General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence	\$
						Damage to rented premises (EA occurrence)	\$
						Med Exp	\$
						Personal Adv Injury	\$
						General Aggregate	\$
						Products - Comp/Op Agg	\$
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident)	\$
						Bodily Injury (Per Person)	\$
						Bodily Injury (Per Accident)	\$
						Property Damage (Per Accident)	\$
		GARAGE LIABILITY <input type="checkbox"/> Any Auto				Auto Only - Ea Accident	\$
						Other Than EA Acc.	\$
						Autos Only, AGG.	\$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible <input type="checkbox"/> Retention				Each Occurrence	\$
						Aggregate	\$
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? If Yes, describe under special provisions below.	WC 71949	01/01/2006	01/01/2007	X W/C Statutory Limits	OTHER
						E.L. Each Accident	\$1000000
						E.L. Disease - Ea Employee	\$1000000
						E.L. Disease - Policy Limits	\$1000000

Other 2101581 Ken Wendell Gen. Contractors, Inc. **COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED, NOT TO SUBCONTRACTORS.**

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: ADD ON DATE: 4/22/2002
COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF Ken Wendell Gen. Contractors, Inc. *
 FAX: 772-223-1613 / ISSUE 2-01-08 (SH)

Lion Insurance Company is A.M. Best Company rated A- (Excellent). AMB # 12616

CERTIFICATE HOLDER	CANCELLATION
TOWN OF SEWALL'S POINT BUILDING DEPARTMENT 1 SOUTH SEWALL POINT RD SEWALL FL 34996	Should any of the above described policies be cancelled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives. 



TOM GALLAGHER
CHIEF FINANCIAL OFFICER

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION

**** CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW ****

CONSTRUCTION INDUSTRY EXEMPTION

This certifies that the individual listed below has elected to be exempt from Florida Workers' Compensation Law.

EFFECTIVE DATE: 02/17/2005

** EXPIRATION DATE: 02/17/2007

PERSON: WENDELL KENNETH J JR

FEIN: 290534647

BUSINESS NAME AND ADDRESS: KEN WENDELL GENERAL CONTRACTORS INC
3000 S E WAALER ST
STUART FL 34997

SCOPE OF BUSINESS OR TRADE: 1- CERTIFIED GENERAL CONTRACTOR

IMPORTANT: Pursuant to Chapter 440.05(14), F.S., an officer of a corporation who elects exemption from this chapter by filing a certificate of election under this section may not recover benefits or compensation under this chapter.

C-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04

QUESTIONS? (850) 413-1609

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

STATE OF FLORIDA
DEPARTMENT OF FINANCIAL SERVICES
DIVISION OF WORKERS' COMPENSATION



CONSTRUCTION INDUSTRY
CERTIFICATE OF EXEMPTION FROM FLORIDA
WORKERS' COMPENSATION LAW

EFFECTIVE: 02/17/2005
* EXPIRATION DATE: 02/17/2007

PERSON: WENDELL KENNETH J JR

FEIN: 290534647

BUSINESS NAME AND ADDRESS: KEN WENDELL GENERAL CONTRACTOR
3000 S E WAALER ST
STUART FL 34997

SCOPE OF BUSINESS OR TRADE:
- CERTIFIED GENERAL CONTRACTOR

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IMPORTANT

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QUESTIONS? (850) 413-1609

CUT HERE

* Carry bottom portion on the job, keep upper portion for your records.

C-252 CERTIFICATE OF ELECTION TO BE EXEMPT REVISED 01-04



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

WENDELL, KENNETH JAMES
KEN WENDELL - GENERAL CONTRACTORS INC
P O BOX 3266
STUART FL 34997

STATE OF FLORIDA AC# 276512
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CGC060321 08/30/06 06014994!

CERTIFIED GENERAL CONTRACTOR
WENDELL, KENNETH JAMES
KEN WENDELL - GENERAL CONTRACTOR

IS CERTIFIED under the provisions of Ch.489 F
Expiration date: AUG 31, 2008 L0608300218

DETACH HERE

2765128

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L0608300218

DATE	BATCH NUMBER	LICENSE NBR
08/30/2006	060149945	CGC060321

The GENERAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

WENDELL, KENNETH JAMES
KEN WENDELL - GENERAL CONTRACTORS INC
3000 SE WALER ST
STUART FL 34997

**2006-2007 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE**

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

LICENSE ~~999-513-0014~~ CERT ~~CGC-060321~~
PHONE ~~772)223-0800~~ SIC NO ~~233210~~

LOCATION:
3000 SE WAALER ST MAR

RECEIPT of PAYMENT
LARRY C. O'STEEN
99 09/01/2008 NORMA
19990005130001
002 2005 0013610.
KEN WENDELL GENERAL

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	<u>.00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>.00</u>	PENALTY \$	<u>.00</u>
\$	<u>.00</u>	COL. FEE \$	<u>.00</u>
\$	<u>.00</u>	TRANSFER \$	<u>.00</u>
TOTAL		<u>25.00</u>	

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **CERTIFIED GENERAL CONTRACTOR**

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

01 DAY OF SEPTEMBER 06
AND ENDING ON THE 2007

WENDELL, KENNETH JAMES
KEN WENDELL GENERAL CONTRACTOR INC
3000 SE WAAALER STREET
STUART, FL 34997

**FOX, WACKEEN, DUNGEY
BEARD, SOBEL, BUSH & McCLUSKEY, L.L.P.**

Deborah B. Beard ◻
George W. Bush, Jr.
Richard J. Dungey †
M. Lanning Fox †
Michael J. McCluskey
Jack M. Sobel ◻
W. Thomas Wackeen ◻

Office:
The Tower Building at Willoughby Commons
3473 SE Willoughby Boulevard
P.O. Drawer 6
Stuart, Florida 34995-0006
Palm Beach Gardens (Limited Services Available)
Telephone:
(772) 287-4444 * (772) 878-3814 * (561) 744-6499
Fax:
Real Estate Transactions: (772) 283-4637
All Other Matters: (772) 220-1489
www.foxwackeen.com

Robert A. Goldman
Theodore J. Heinemann
Shelly J. Stirrat
† Frederik W. van Vonno
Susann B. Ward

J. Henry Cartwright
Francisco J. Garcia
Raymond G. Robison
Jason D. Siegel
Karen Jerome Smith
Jennifer Alcorta Waters

† Board Certified Real Estate Lawyer
◻ Board Certified Civil Trial Lawyer
◻ Board Certified Marital & Family Lawyer
† Board Certified City, County &
Local Government Lawyer



Of Counsel
Aaron A. Foosaner
Vicki J. Junod
Robert L. Seeley

September 7, 2007

VIA FIRST CLASS MAIL AND
CERTIFIED MAIL 7006 3450 0000 8551 5456

Mr. John Adams, Town Building Official
Sewall's Point Town Hall
One South Sewall's Point Road
Sewall's Point, FL 34996

RE: Nicholas & Joann Mariano
23 Middle Road
Sewall's Point, Florida 34996
Permit Number 8172

Dear Mr. Adams:

This firm represents Ken Wendell General Contractors, Inc. This letter confirms my conversation on September 6, 2007 with Valerie of your office, that effective August 20, 2007, Ken Wendell General Contractors, Inc. is no longer listed as the Contractor for the above-referenced Permit; that Wendell General Contractors, Inc. is released from all responsibility under the Permit; and, that the Permit is now showing the Owner as Contractor. The foregoing changes to the Permit were done at the written request of Mr. Mariano on August 20, 2007.

Please advise at your earliest convenience if the above is not correct, or if you need any additional information from my client.

Sincerely,

Francisco J. Garcia

FJG/ld

cc: Client

**FOX, WACKEEN, DUNGEY
BEARD, SOBEL, BUSH & McCLUSKEY, L.L.P.**

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¶ Board Certified City, County &
Local Government Lawyer



September 7, 2007

VIA FIRST CLASS MAIL AND
CERTIFIED MAIL 7006 3450 0000 8551 5456

✓ Mr. John Adams, Town Building Official
Sewall's Point Town Hall
One South Sewall's Point Road
Sewall's Point, FL 34996

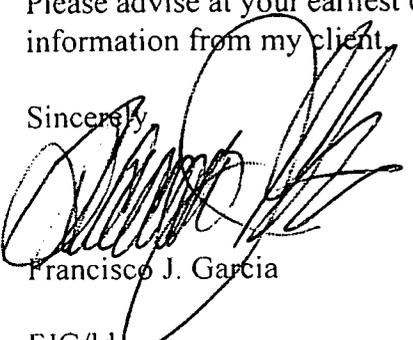
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Sewall's Point, Florida 34996
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Please advise at your earliest convenience if the above is not correct, or if you need any additional information from my client.

Sincerely,


Francisco J. Garcia

FJG/ld

cc: Client

**Town of Sewall's Point
Building Department
772-287-2455 ext 13
772-220-4765 FAX
email: builddpt@sewallspoint.martin.fl.us**

Fax

To: KEN WENDELL GEN'L CONTR Attn: Jerry Kamins
Fax: 772-223-1613 Date: 10/19/06
From: Valerie Pages: Cover +
Re: 23 Middle Rd CC:

Urgent For Review Please Comment Please Reply Please Recycle

Jerry:

I need the updates for the following:

- Ken Wendell Gen'l Contr - General Liability, state & county licenses ✓ ✓ +1351 Rodon
- ~~ok Lloyd Johnson Electric - General Liability, State & county licenses ✓ ✓ Laws Electric~~
- ok Century Air Conditioning - State & county licenses - refut
- ok Dave's Plumbing - State & county licenses ✓
- ok ~~All American Roofing - County license ✓ = remove as of 12-8-06~~

Please forward this information to me as soon as possible - Also, Century Air and Lloyd Johnson need to stop in and sign the sub-permits - After I receive all requested information, Ken Wendell can then come in and sign the master permit - ✓

Please call me if you have any questions.

Thanks,
Valerie
Valerie



KEN WENDELL GENERAL CONTRACTORS, INC.

- REMODELING
- ADDITIONS
- CUSTOM HOMES

3000 SE WAALER STREET STUART, FL 34997

TEL: 772-223-0800 FAX: 772-223-1613

Send to: Sewall's Point Building Dept	From: Jerry Kamins / Office Mgr.
Attention: Valerie	Date: 5/22/2007
Office Location:	Office Location:
Fax Number: 772-220-4765	Phone Number: 772 287 2455 (Ext # 13)

FAX OF ONE (1) PAGE, INCLUDING COVER:

Re: Permit #8172 - Marlano

Dear Valerie:

Just a note to confirm our phone conversation this morning; that the above captioned permit has an expiry date of 11/8/2007.

Awaiting any comments that you deem appropriate, I remain,

Cordially,

Jerry Kamins / Office Mgr.

KEN WENDELL GENERAL CONTRACTORS, INC.

*5-22-07
OK'd by John Adams
[Signature]*

RECEIVED 1/27/06

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: NICHOLAS & JO-ANN MARIANO City: STUART State: FL Zip: 34996
Legal Description of Property: HIGH POINT, LOT #42 Parcel Number: 13-38-41-002-000-00420-7
Location of Job Site: 23 MIDDLE ROAD Type of Work To Be Done: 2ND FLOOR ADDITION

CONTRACTOR/Company Name: Masterpiece Builders Phone Number: 772-283-2096
Street: 408 Colorado Ave City: Stuart State: FL Zip: 34994
State Registration Number: CGC048543 State Certification Number: _____ Martin County License Number: _____
FAX 283-2770 - Mike

ARCHITECT: Gary Powell Phone Number: 772-223-1755
Street: 16 South River Rd City: Stuart State: FL Zip: 34996

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 4821⁷ Garage: _____ Covered Patios: _____ Screened Porch: _____
Carpport: _____ Total Under Roof: 4929⁴ Wood Deck: _____ Accessory Building: _____
Type Sewage: _____ Septic Tank Permit Number From Health Depart. _____ Well Permit Number: _____
2ND FLOOR ADDITION OF 926⁴

FLOOD HAZARD INFORMATION Flood Zone: _____ Minimum Base Flood Elevation (BFE): _____ NGVD
Proposed First Floor Habitable Floor Finished Elevation: _____ NGVD (Minimum 1 Foot Above BFE)

COST AND VALUES Estimated Cost of Construction or Improvements: 297,500.00 Estimated Fair Market Value (FMV) Prior
To Improvements: _____ If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES _____ NO _____
\$350,000 - see attached

SUBCONTRACTOR INFORMATION
Electrical: HALDANE ELECTRICAL State: FL License Number: ECO 001346
Mechanical: HISAIR AIR CONDITIONING State: FL License Number: CACO 41199
Plumbing: DAVE'S PLUMBING State: FL License Number: MP00049 MP0003
Roofing: ALL American Roofing State: FL License Number: CCC058118
PARAGON INDOOR AIR QUALITY CACO 35593

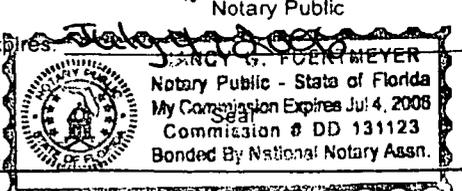
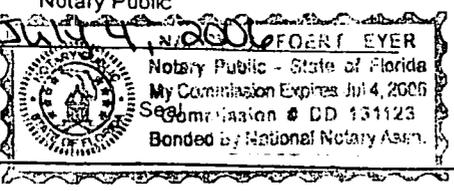
I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNANCE, BOILERS, HEATERS, TANKS, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND TREE REMOVAL AND RELOCATIONS.

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 _____

THEREBY 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: Stuart
This the 6 day of JAN, 2006
by _____ who is personally
known to me or produced
as identification. Nancy P. Fortmeyer

CONTRACTOR SIGNATURE (Required)
On State of Florida, County of: Stuart
This the 6 day of JAN, 2006
by _____ who is personally
known to me or produced
as identification. Nancy P. Fortmeyer



Valerie Meyer

From: "Mike Haag" <mhaag@masterpiecebuilders.com>
To: "Valerie Meyer" <builddpt@sewallspoint.martin.fl.us>
Sent: Thursday, June 01, 2006 10:17 AM
Subject: Mariano Renovation

Hello Valerie,

Per our conversation this morning, the estimated cost of construction for the Mariano project is approximately \$350,000.00. I've contacted the appropriate subcontractors and advised them to pick up their respective permits ASAP.

Please send me an invoice for the cost of the GC Permit for this project, so I may have a check cut for the appropriate dollar amount.

Thank you for your assistance.

**Michael Haag
mhaag@masterpiecebuilders.com
772-283-2096**

Valerie Meyer

From: "Mike Haag" <mhaag@masterpiecebuilders.com>
To: "Valerie Meyer" <builddpt@sewallspoint.martin.fl.us>
Sent: Thursday, June 01, 2006 10:27 AM
Subject: Mariano Project

Valerie,

Please accept the following Subcontractor changes for the Mariano Project.

- Dave's Plumbing to replace South Park Plumbing
- Paragon Indoor Air Quality to replace NisAir Air Conditioning

The other two subcontractors will remain as stated on the application – Haldane Electrical and All American Roofing.

Michael Haag
mhaag@masterpiecebuilders.com
772-283-2096

Dave's Plumbing
MP00030
\$350,000 -

RECEIVED

DEC 28 2005



STATE OF FLORIDA
DEPARTMENT OF HEALTH
MARTIN COUNTY HEALTH DEPARTMENT
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
APPLICATION FOR CONSTRUCTION PERMIT

PERMIT NO. 4355-08114
DATE PAID: 12-28-05
FEE PAID: 295.00
RECEIPT #: 70913
05-1344-M

APPLICATION FOR:

New System Existing System Holding Tank Innovative
 Repair Abandonment Temporary Modification

APPLICANT: MANTERPIECE BUILDERS / MARIALHO RESIDENCE

AGENT: G.I.B., INC. TELEPHONE: 288-7174

MAILING ADDRESS: 619 EAST 5TH STREET STUART, FL 34994

TO BE COMPLETED BY APPLICANT OR APPLICANT'S AUTHORIZED AGENT. SYSTEMS MUST BE CONSTRUCTED BY A PERSON LICENSED PURSUANT TO 489.105(3)(m) OR 489.552, FLORIDA STATUTES. IT IS THE APPLICANT'S RESPONSIBILITY TO PROVIDE DOCUMENTATION OF THE DATE THE LOT WAS CREATED OR PLATTED (MM/DD/YY) IF REQUESTING CONSIDERATION OF STATUTORY GRANDFATHER PROVISIONS.

PROPERTY INFORMATION

LOT: 42 BLOCK: _____ SUBDIVISION: HIGHPOINT PLATTED: 3/1/1999

PROPERTY ID #: _____ ZONING: _____ I/M OR EQUIVALENT: [Y / N]

PROPERTY SIZE: 0.34 ACRES WATER SUPPLY: [] PRIVATE PUBLIC [X] <=2000GPD [] >2000GPD

IS SEWER AVAILABLE AS PER 381.0065, FS? [Y / N] DISTANCE TO SEWER: ROOT FT.:

PROPERTY ADDRESS: 23 MIDDLE ROAD - SEWALL'S POINT

DIRECTIONS TO PROPERTY: EXISTING RESIDENCE - SEWALL'S POINT RD.
SOUTH TO HIGH POINT ENTRANCE WEST TO MIDDLE ROAD -
NEXT TO THE LAST HOUSE TO THE WEST

BUILDING INFORMATION

RESIDENTIAL [] COMMERCIAL

Unit No Type of Establishment No. of Bedrooms Building Area Sqft Commercial/Institutional System Design Table 1, Chapter 64E-6, FAC

1	<u>SINGLE FAMILY</u>	<u>4</u>	<u>4180</u>	<u>SJB</u>
2	<u>REMODEL</u>		<u>4800</u>	<u>12/28/05</u>
3				
4				

[] Floor/Equipment Drains Other (Specify) DISPOSAL

SIGNATURE: STEPHEN J. BROWN DATE: 12/23/05

APPLICANT'S NAME: MASTERPIECE BUILDERS/ MARIANO RESIDENCE

LEGAL DESCRIPTION: LOT 42 HIGH POINT

PROPOSED SEPTIC SYSTEM SITE INFORMATION

I certify that there are no potable private wells within 75 feet of the available area for the proposed septic system, that there are no non-potable wells within 50 feet of the available area for the proposed septic system, that there are no wells within 25 feet of a pesticide-treated building foundation, that there are no public wells that serve less than 25 people or less than 15 homes or businesses within 100 feet of the proposed septic system, that there are no public wells that serve more than 25 people or more than 15 homes or businesses within 200 feet of the proposed septic system, that the water line from the water meter or well to the structure is at least 10 feet from the available area for the proposed septic system unless the plans show the line to be double sleeved, that there is not a gravity sewer line, low pressure sewer line or vacuum sewage line in a public easement or right-of-way that abuts the property, that there are no lakes, streams, wetlands, or surface water within 75 feet of the available area for the proposed septic system unless the property was created prior to 1972, that the septic system is proposed on the side of the lot farthest from surface water, that all private wells, septic systems and surface water on adjacent or contiguous land within 75 feet of the applicant's lot are shown on the site plan, that all public wells within 200 feet of the applicant's lot are shown on the site plan, and that the location of building or residences, swimming pools, recorded easements, paved areas or driveways, sidewalks, the general slope of the property, filled areas, drainage features, and surface waters such as lakes, ponds, streams, canals, or wetlands are shown on the applicants lot.

The natural grade elevation in the area of the proposed septic system and the benchmark must be shown on the site plan. Please locate the benchmark within 200 feet of the proposed septic system.

NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OR ENGINEER.

CERTIFIED BY: STEPHEN J. BROWN
FLORIDA PROFESSIONAL NO.: 4049
DATE: 12/23/05 JOB NO.: 907-2301

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR ADDITION TO SINGLE FAMILY RESIDENCE

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

Application form must contain the following information:

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

Submittals (2 copies)

1. Energy Calculations and Compliance Certification.
2. Current survey (boundary & topographic) containing the following information:
 - a. Legal Description of Lot
 - b. Lot dimensions and bearings
 - c. Street and Waterway names
 - d. Grade elevations (proposed and existing)
 - e. Swale and/or drainage arrows
 - f. Finish Floor Elevations (proposed and existing)
 - g. Crown of road(s)
 - h. Adjacent occupied/unoccupied
 - i. Easements
 - j. ROW's
 - k. Well locations (proposed and existing)
 - l. Septic drainfield(s) (proposed and existing)
 - m. Canals, Ponds, or Riverfront locations
 - n. Retention areas (proposed and existing)
3. Wind Load Certification Form (signed and sealed by Architect/Engineer)
4. Product approvals from Miami/Dade for the following items:
 - a. Windows
 - b. Exterior Doors
 - c. Roof System
 - d. Garage Door
 - e. Hurricane Shutters
5. Health Department Approval for septic system or information on existing system.
6. Health Department Well permit or information on existing system.
7. Statement of Fact (owner/builder affidavit)
8. Proof of ownership (deed or tax recpt.)

9. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants
10. Application for tree removal or relocation (attach tree survey and removal or relocation plan)
11. Manufacturers specifications or shop drawings for fireplaces, stairs, etc.
12. A certified copy of the Notice of Commencement for any work over \$2500.00
13. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
14. Copy of Workmen's Compensation
15. Copy of Liability Insurance

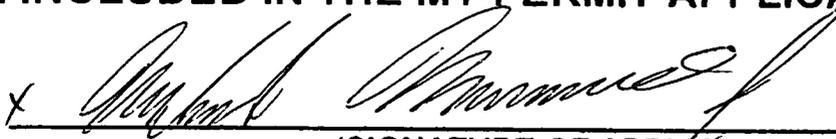
The following documents must be signed and sealed by a registered Architect or Engineer. (2 copies)

1. **Plot/Site plan containing the following information:**
 - a. Location of all structures proposed and existing along with dimensions
 - b. Location of driveway and turnabouts with dimensions
 - c. Walkways and planters
 - d. Location of all fences
 - e. Location of all docks
 - f. Location of all accessory buildings or structures
 - g. Setback requirements
 - h. Easements
 - i. All encroachments into setbacks
 - j. Location of existing septic, wells, retention areas
 - k. Flood Zone line or lines in relationship to structures proposed or existing
 - l. Elevations at three points along front of residence and at crown-of-road
 - m. Stormwater retention areas
 - n. Drainage Arrows
 - o. Computation of pervious and impervious areas
 - p. Desired finish floor elevation relative to Sea Level
2. **Floor Plan containing the following information:**
 - a. Square footage calculations
 - b. Scale – minimum ¼" per foot
 - o. All proposed and existing layouts of structures
 - p. Location of all pads/porches and patios
 - q. All dimensions exterior and interior to define design and construction
 - r. Room callouts
 - s. Elevations, steps, ramps, curbs, dashed outline for second story outline
 - t. Location of all windows and doors with egress requirements
 - u. Location of all bathroom fixtures
 - v. Location of all kitchen fixtures
 - w. Water heater location
 - x. Attic access with side of opening
 - y. Beam callouts
 - z. All through wall or ceiling ventilation such as garage vents, dryer vent etc.

3. **Elevation Plan containing the following information:**
 - a. Front, Rear, and Side Elevations
 - b. All beam heights and changes in beams heights
 - c. Building heights from finish floor to top of roof (maximum 27 feet)
 - d. Location of all windows and doors
 - e. Roof slope
 - f. Wall finishes
 - g. Vertical features and horizontal projections
4. **Foundation Plan containing the following information:**
 - a. Bearing walls exterior and interior
 - b. Dimensions of all bearing walls exterior and interior
 - c. All footings and pad locations
 - d. Dimensions of all footing and pads
 - e. Step downs (minimum for residence to garage 7 inches)
 - f. Footing and Pad call outs for size (width and depth), steel (size, lap and placement)
 - g. Any underslab mechanical duct work or gas piping
 - h. Location of any in slab receptacle locations
 - i. Column Layout
 - j. Columns Schedule
5. **Electrical Plan containing the following information:**
 - a. Show all receptacle, switch, and fixture locations
 - b. Show all WPGFI's and GFI's locations
 - c. Ceiling fan locations
 - d. Attic or roof top receptacles and fixtures
 - e. Service entrance
 - f. Panel layout with circuits, loads, wire, breaker and conduit sizes
 - g. Riser diagram with size of service, meter, ground, disconnects feeders and panels
 - h. Any specialty lighting requirements
 - i. Disconnect locations for residence, pool, pumps, etc.
 - j. Load calculations
 - k. Panel and sub-panel locations
 - l. Meter can location
6. **Heating/Air Conditioning Plan containing the following information:**
 - a. Air Handler locations showing kw rating
 - b. Condensing unit locations
 - c. Duct layout showing sizes of duct and size of diffusers
 - d. CFM per outlet
 - e. Distribution box locations
 - f. Equipment callouts with name of equipment, model numbers and sizes
 - g. Sensible and latent heat quantities
7. **Plumbing Plan containing the following information:**
 - a. Piping layout showing all pipe sizes
 - b. All fixtures, sanitary drainage, vents, water supply, water heaters
 - c. Indicate all slopes

8. **Truss Layout containing the following information:**
 - a. Show location of all trusses
 - b. Show location of all girders
 - c. Uplift quantities for all trusses
 - d. Connectors schedule for all trusses and girders
 - e. Location of roof mounted equipment
 - f. Location of all structural elements size and reinforcing
9. **Second Floor Framing Plan**
 - a. Location of all floor trusses or joists
 - b. Size of all structural members and spacing dimensions
 - c. Location of all girders
10. **Section/Detail Drawings and Schedules showing the following information:**
 - a. Wall section drawings for single and two story sections
 - b. Show footings, slab, wall, ceiling and roof construction and insulation
 - c. Window and door schedules showing design pressures (+ and -)
 - d. Stair details showing riser height and tread width also handrail with baluster and newel post design showing distance between balusters and height of handrail from leading edge of tread
 - e. Garage door buck detail showing type, size, length and spacing of connectors to be used
 - f. Window buck detail showing type, size, length and spacing of connectors to be used
 - g. Attic ventilation calculations

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: _____

OWNER'S AFFIDAVIT OF BUILDING COSTS

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

STATE OF FLORIDA
MARTIN COUNTY

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

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 292,500.00.
4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:

[Handwritten Signature]

Property Address:

23 MIDDLE ROAD

SEWALL'S POINT

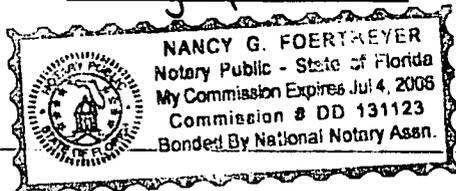
STUART, FL 34996

SWORN TO and subscribed before me this 6 day of JAN, 2006, by _____, who is personally known to me or produced _____ as identification.

Nancy G. Foertmeyer
Notary Public

My commission expires: July 4, 2006

(Notary Seal)





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

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

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

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

ALL QUESTIONS MUST BE ANSWERED. IF A QUESTION DOES NOT APPLY, INDICATE BY WRITING "N/A"

Owner/Builder Applicant Name: Nicholas & Jo-Ann MARIANO

Site address of the proposed building work: 23 Middle Rd, STUART FLA. 34996

Name of legal title owner of the address above: 13-38-41-002-000-00420-7 Lot# 92

Describe the scope of work for the proposed new construction: 2nd Floor Addition

Name of Architect of Record: GARY Powell Structural Engineer of Record: RICHARD JAMISON

Who will supervise the trade work to meet the applicable code? Nicholas MARIANO

What provisions have you made for Liability and Property Damage Insurance? NATIONWIDE INS. CO.

What provisions exist for withholding Social Security and Federal Income Taxes, as required by Federal Law, from wages paid to people you hire who are not licensed? MUST BE LICENSED + INSURED BEFORE HIRING

What previous Owner/Builder improvements have you done in the State of Florida?

Location: 1000 NW Fed Hwy STUART Scope of Work Done: Remodeling Year: 2000

Location: 8505 Rt 60 VERO BEACH Scope of Work Done: Remodeling Year: 2002

What code books do you have available for reference? Building: NONE

Electric: _____ Plumbing: _____ HVAC: _____

Other: _____

I have internet access and will view The Florida Building code at www.floridabuilding.org YES NO _____

Do you understand that as the permit holder you are liable for following all Local, County, State and Federal codes, laws and requirements, and you are also liable for anyone injured on the construction site? Yes (yes/no)

Have you consulted with your Homeowner's Insurance Agent? Lender? _____ Attorney? _____

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



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



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

12. YOU MUST BE FAMILIAR WITH AND CALL FOR THE REQUIRED INSPECTIONS OF ALL CONSTRUCTION/IMPROVEMENTS PERFORMED UNDER YOUR OWNER/BUILDER PERMIT.

13. AS AN OWNER/BUILDER YOU MUST VERIFY THAT ALL INDIVIDUALS OR FIRMS ENGAGED IN CONSTRUCTION/IMPROVEMENTS ACTIVITIES UNDER YOUR OWNER/BUILDER PERMIT ARE PROPERLY LICENSED AS REQUIRED BY STATE LAW OR LOCAL ORDINANCE.

14. AS AN OWNER/BUILDER, YOU ARE LIABLE TO AND RESPONSIBLE FOR THOSE PEOPLE HIRED TO ASSIST YOU. SUCH LIABILITY AND RESPONSIBILITY MAY INCLUDE, BUT IS NOT LIMITED TO, COMPLIANCE WITH APPLICABLE LAWS RELATING TO LIENS, WORKERS' COMPENSATION, SOCIAL SECURITY, UNEMPLOYMENT, FEDERAL WITHHOLDING TAX, AND PUBLIC LIABILITY.

15. I, AS AN OWNER/BUILDER, IN CONSIDERATION OF A BUILDING PERMIT ISSUED BY SEWALL'S POINT, FLORIDA, AGREE TO INDEMNIFY AND HOLD HARMLESS SAID SEWALL'S POINT, FLORIDA, ITS OFFICERS AND AGENTS FROM ANY AND ALL CLAIMS, DAMAGES, OR EXPENSES THAT SEWALL'S POINT MAY BE LIABLE FOR WHICH ARISE FROM THE CONSTRUCTION/IMPROVEMENTS ACCOMPLISHED IN CONNECTION WITH SAID BUILDING PERMIT.

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

ON THIS 20 DAY OF Aug., 2007.

PROPERTY ADDRESS 23 Middle Road

CITY STUART STATE FL ZIP 34996

Nicholas Mariano

SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 20 DAY OF August 202007

BY Nicholas Mariano

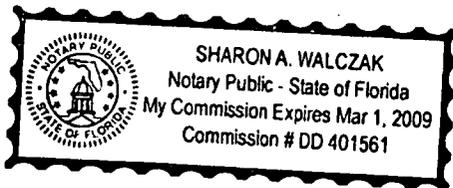
PERSONALLY KNOWN _____

OR PRODUCED ID

TYPE OF ID FL DL M650-620-56-023-0

Sharon A Walczak

NOTARY SIGNATURE



MANUAL

CHECK LIST FOR BUILDING PERMITS- SEWALLS POINT

PHONE: 287-2455

FAX: 220-4765

<http://sewallspoint.org/buiding.htm>

SINGLE FAMILY OR RESIDENTIAL ADDITIONS –Revised 5/23/02

- 1 COPY Completed application, including the property ID#, Legal description, Owner & license-holder's signatures must be notarized, all subcontractors and license #'s
- 1 COPY Notice of Commencement / May be issued by Bank or us
- 1 COPY Health Dept. septic tank permit and plans stamped-Martin County Well permit or information on existing well & pump
- 2 COPIES Complete set of plans signed and sealed, including elevations, plot plan, floor plan, foundation details, truss layout, vertical wall sections, and fireplace drawing; if prefabricated submit manufactures specs
- 2 COPIES Energy Code compliance
- 2 COPIES Manual J if HVAC work needed
- 2 COPIES Current Survey to include elevations
- 2 COPIES Product Approvals for ALL exterior windows, doors, garage doors, shutters, and similar envelope elements. These products must be tested and design pressures stated. Eng./Arch. Of record must review and sign each submit all or letter to verify that it meets design.
- N/A 2 COPIES Shutter specs that state design is in accordance with ASCR-7-98 and SSTD-12. Specs must be highlighted as to which mount, design pressure and fastener will be used. Show in plan, elevation, or schedule where shutters and types will be used.
- 2 COPIES Roof schedule & fasteners – full submittals –
- N/A 2 COPIES Specifications for fireplaces, stairs, etc...
- 2 COPIES Wind Load Certification- Their form
- 1 COPY Proof of ownership from homeowner
- 1 COPY License and Insurance Certificate
- 1 COPY Signed copy of their form - checklist

C

MASTER PERMIT NO. _____

11/8/06
6-1-06

TOWN OF SEWALL'S POINT

BUILDING PERMIT NO. 8172

Building to be erected for MARIANO Type of Permit Addition & remodel

Applied for by Ken Wendell GENA COSTA (Contractor) Building Fee 3360.00

Subdivision High Point Lot 42 Block _____ Radon Fee 13.50

Address 23 Middle Rd Impact Fee _____

Type of structure SFR AC Fee 35.00

Parcel Control Number: 1338-41002-000-00420-70000 Electrical Fee 35.00

Amount Paid ADOL RADON Check # _____ Cash 1350 Other Fees 1010 PR 350.00

Total Construction Cost 350000 TOTAL Fees 3850.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

RECEIPT

DATE 8/20/07 No. 37521

RECEIVED FROM MR Mariano Change contractor \$500 DOLLARS

FOR RENT FOR FW 8172 - 23 Middle Rd

ACCOUNT		<input type="checkbox"/> CASH	FROM _____ TO _____
PAYMENT	<u>500</u>	<input checked="" type="checkbox"/> CHECK	BY <u>[Signature]</u>
BAL. DUE		<input type="checkbox"/> MONEY ORDER	

adama 2701

RECEIVED
16-18-2006

Permit Number: 8172

Town of Sewall's Point
BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: So. Ann & Mariana Phone (Day) 772 221 2157 (Fax) _____

Job Site Address: 23 Middle Road City: Stuart State: FL Zip: 34996

Legal Description of Property: HIGH POINT LOT 42 Parcel Number: 1338 41 002 00 00420 7

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

Description of Work To Be Done: ADDITION & REMODEL

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

CONTRACTOR/Company: Ken Wendell GC INC Phone: 772 223 0800 Fax: 772 223 1613

Street: 3000 SE WATER ST City: STUART State: FL Zip: 34997

State Registration Number: _____ State Certification Number: CGC 060721 Martin County License Number: _____

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 350,000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: LAWSON ELECTRIC State: FLORIDA License Number: EC 000 3162

Mechanical: Century AIR CONDITIONING State: FLORIDA License Number: CAC 057 676

Plumbing: DAVE'S PLUMBING State: FLORIDA License Number: CPC 051 625

Roofing: AN AMERICAN ROOFING OF SEASIDE INC State: FLORIDA License Number: CCC 058 118

ARCHITECT GARY POWELL Phone Number: 772 223 1755

Street: 16 SOUTH RIVER ROAD City: SEWALL'S POINT State: FL Zip: 34996

ENGINEER _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 4180 Garage: _____ Covered Patios: _____ ScreenedPorch: _____
Carport: _____ Total Under Roof 4820 Wood Deck: _____ Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required)
Nicholas Mariana
State of Florida, County of: Martin
This the 28 day of Sept, 2006
by Nicholas Mariana who is personally
known to me or produced _____
as identification: [Signature]

CONTRACTOR SIGNATURE (required)
Ken Wendell
On State of Florida, County of: MARTIN
This the 16th day of OCTOBER, 2006
by KENNETH WENDELL who is personally
known to me or produced _____
As identification: _____

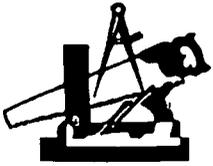
My Commission Expires: 1/5/08 Heather Gibson My Commission Expires: 1/5/08
Seal Seal

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

KENDRA S. BRAMBLE
MY COMMISSION # DD 167210
EXPIRES: November 24, 2006

BANK ATLANTIC
PALM CITY, FL 34990
267083763

FOR DEPOSIT ONLY
ALL AMERICAN ROOFING
OF THE TREASURE COAST, INC.



KEN WENDELL
GENERAL CONTRACTORS, INC.

- REMODELING
- ADDITIONS
- CUSTOM HOMES

3000 SE. WAALER STREET ■ STUART, FL 34997

TEL: 772-223-0800 FAX 772-223-1613

RECEIVED
10-18-06

October 18, 2006

**Mr. John Adams
Sewall's Point Bldg Dept
One South Sewall's Point Road
Sewall's Point, Florida 34996**

Re: Permit # 8172

Dear John:

In concert with a phone conversation that took place some weeks ago, the following paperwork is enclosed herewith for our company to become the Contractor of Record on Permit #8172:

- **Recorded Notice of Commencement**
- **New Building Permit Application Notarized by the home owner and by Ken Wendell General Contractors, Inc. In this regard, two of the four previous sub contractors are going to be working with us, as follows:**
 - 1. Dave's Plumbing**
 - 2. All American Roofing of Treasure Coast, Inc.**
- **A letter of resignation from Masterpiece Builders, the former General Contractor on the above captioned permit.**

Looking forward to any comments that you deem appropriate, I remain,

Cordially,

Jerry Kamins / Office Mgr.

KEN WENDELL GENERAL CONTRACTORS, INC.



September 26, 2006

Mr. John Adams
Town of Sewall's Point
Building Department
One South Sewall's Pt. Road
Stuart, FL 34996

RE: Permit #8172 – 23 Middle Road

Dear Mr. Adams,

Per the client's request, Nicholas & Joann Mariano, we will not proceed with the renovation of their house located at 23 Middle Road (Parcel ID # 1338-41-002-000-00420-70000), as per permit number 8172, dated June 6, 2006. Thus, we are withdrawing from any and all responsibility of the set renovation project for this site which is related to the stated permit number.

It is our understanding that the client has chosen a different contractor to perform this renovation and will be submitting the appropriate documentation for a new building permit. Please release us from building permit # 8172, which is issued to Masterpiece Builders, and issue to a different contractor of client selection. We want to be completely removed from any and all future liability.

Thank you for your cooperation.

Sincerely,

A handwritten signature in black ink that reads 'Jeff Bowers'. The signature is written in a cursive style with a large initial 'J'.

Jeff Bowers
President

FAX COVER SHEET

**Ken Wendell
General Contractors, Inc.
3000 SE Waaler Street
Stuart, FL 34997
772-223-0800 (Phone)
772-223-1613 (Fax)**

Send to: Sewalls Point Building Dept	From: Jerry Kamins / Office Mgr.
Attention: Valerie	Date: 9/22/2006
Office Location:	Office Location:
Fax Number: 772-220-4765	Phone Number: 772 287 2455 (Ext # 13)

FAX OF TWO (2) PAGES, INCLUDING COVER:

Re: Change In Contractor For Permit #8172

Dear Valerie:

In concert with the above captioned and our phone conversation, enclosed please find a letter written by the Sewall's Point Town Attorney, Thomas J. Baird, P.A. In answer to our request for the requirements to achieve a Change in Contractor on a issued permit.

As you can see, all of the requirements listed in Mr. Baird's communication makes no mention whatsoever about having to go to the previous contractor for his release from said existing permit.

Since the owner will not go forward with the existing contractor and since the existing contractor has been paid in full for any and all services that he may have provided and presupposing that an adversarial relationship exists between the owner and the previous contractor, it seems totally inappropriate that the old contractor has to agree to said Change in Contractor for us to go forward.

In any event, we would respectfully request that you call Mr. Baird ASAP and discuss whatever discrepancies that may exist between your understanding of what is required and the specific instructions that Mr. Baird gave to us in his correspondence of July 11, 2006 so that we, as the new contractor and the owner know how to proceed.

With respect, I remain,

Cordially,

Jerry Kamins / Office Mgr.

KEN WENDELL GENERAL CONTRACTORS, INC.

9-22-06 called Monica @ CAPTCC to verify my understanding that Masterpiece Bldgs has to remind this permit in order to issue to another contractor -

LAW OFFICES

THOMAS J. BAIRD, P.A.

11891 U.S. HIGHWAY ONE, SUITE 100
NORTH PALM BEACH, FL 33408

THOMAS J. BAIRD
Board Certified
City, County & Local Government Law

TELEPHONE (561) 625-4400
FACSIMILE (561) 625-0810
E-MAIL tbaird@tjbairdflaw.com

July 11, 2006

VIA FACSIMILE (772) 223-0800

Jerry Kamins, Office Manager
Ken Wendell General Contractors, Inc.
3000 SE Waler Street
Stuart, FL 34997

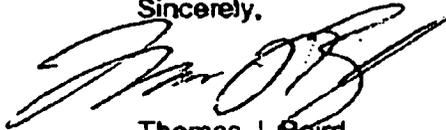
Re: Town of Sewall's Point - Change of (General) Contractor

Dear Mr. Kamins:

Please complete a new permit application and upon submittal please provide the Town with a letter from the Owner which confirms that the Owners has:

1. Terminated the contractor who originally pulled the permit; and
2. has retained Ken Wendell General Contractors, Inc.; and
3. Ken Wendell General Contractors, Inc. is conterminously submitting a new permit application

Sincerely,



Thomas J. Baird

TJB/mrg

Cc: Building Department



September 26, 2006

Mr. John Adams
Town of Sewall's Point
Building Department
One South Sewall's Pt. Road
Stuart, FL 34996

RE: Permit #8172 - 23 Middle Road

Dear Mr. Adams,

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It is our understanding that the client has chosen a different contractor to perform this renovation and will be submitting the appropriate documentation for a new building permit. Please release us from building permit # 8172, which is issued to Masterpiece Builders, and issue to a different contractor of client selection. We want to be completely removed from any and all future liability.

Thank you for your cooperation.

Sincerely,

A handwritten signature in black ink that reads 'Jeff Bowers'. The signature is written in a cursive style with a large, prominent 'J' and 'B'.

Jeff Bowers
President

Valerie Meyer

From: "Mike Haag" <mhaag@masterpiecebuilders.com>
To: "Valerie Meyer" <builddpt@sewallspoint.martin.fl.us>
Sent: Thursday, June 01, 2006 1:37 PM
Subject: RE: Mariano Project

All of the sub have been contacted and will pick up their respective permits by tomorrow afternoon. I'll call you on Monday to follow up.

Michael Haag
mhaag@masterpiecebuilders.com
772-283-2096

From: Valerie Meyer [mailto:builddpt@sewallspoint.martin.fl.us]
Sent: Thursday, June 01, 2006 10:38 AM
To: Mike Haag
Subject: Re: Mariano Project

Thanks for the info -

The total cost of your permit is \$3850.00 The sub permits have to be picked up before I can issue the Master permit - Let me know if they're coming -

Valerie

----- Original Message -----

From: Mike Haag
To: Valerie Meyer
Sent: Thursday, June 01, 2006 10:27 AM
Subject: Mariano Project

Valerie,

Please accept the following Subcontractor changes for the Mariano Project.

- **Dave's Plumbing to replace South Park Plumbing**
- **Paragon Indoor Air Quality to replace NisAir Air Conditioning**

The other two subcontractors will remain as stated on the application – Haldane Electrical and All American Roofing.

Michael Haag
mhaag@masterpiecebuilders.com
772-283-2096

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF Martin

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):

High Point Lot 42 - 23 Middle Rd

GENERAL DESCRIPTION OF IMPROVEMENT: Renovation

OWNER: Nicholas & Jo-Ann Mariano

ADDRESS: 23 Middle Rd, Stuart, FL 34996

PHONE #: 772-221-2157 FAX #: _____

CONTRACTOR: Masterpiece Builders

ADDRESS: 408 Colorado Ave., Stuart, FL 34994

PHONE #: 772-283-2096 FAX #: 772-283-2770

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE # _____ FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA STATUTES:

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

IN ADDITION TO HIMSELF, OWNER DESIGNATES _____

OF _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #: _____ FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____

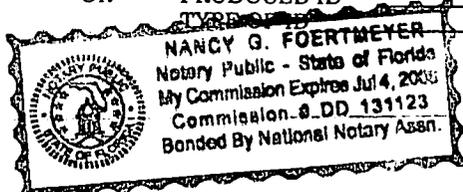
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 6 DAY OF JAN 2006 BY _____

[Signature]
NOTARY SIGNATURE

PERSONALLY KNOWN
OR
PRODUCED ID





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

REVISIONS - CORRECTIONS REQUEST FORM
 MUST BE SUBMITTED FOR ALL CORRECTIONS AND REVISIONS

DATE: 9-6-07 PERMIT NUMBER: 8172

JOB ADDRESS: 23 MIDDLE RD / HIGH POINT

PLEASE CHECK ONE OF THE FOLLOWING:

- CONDITION OF INSPECTION APPROVAL (Needed for an inspection)
- CONDITION OF PERMIT APPROVAL: (Corrections/Permit not issued, in review process)
- REVISIONS (Changes to an issued permit)

****ALL PLAN REVISIONS MUST BE HIGHLIGHTED OR CLOUDED ON DRAWING****

ALL REVISED PAGES ARE REQUIRED TO BE INSERTED IN FIELD PERMIT SET

DESCRIPTION OF REVISION(S): ADDED GENERATOR & LMC PAD ON SOUTH SIDE OF HOUSE

DOES REVISION(S) CHANGE THE VALUE OF CONSTRUCTION? YES NO VALUE \$
 INCREASED CONSTRUCTION VALUE WILL INCREASE PERMIT FEES AND MUST BE PAID AT TIME OF APPROVAL

CONTACT NAME: GARY POWELL SIGNATURE: [Signature]
 PHONE NUMBER: 772-223-1755 FAX NUMBER: 772-223-9943

FOR OFFICE USE ONLY:

Reviewed by: [Signature] Date: 9-7-07 Approve Deny

Additional conditioned space _____ sq. ft. @ \$104.65 per sq. ft. x 2% = N/A

Additional non-conditioned space _____ sq. ft. @ \$ 48.90 per sq. ft. x 2% = N/A

Other declared value increase (must be based on value not cost) _____ x 2% = _____

Other additional fees: _____ Revision review fee: 3 Pages @ \$25.00/Page 75.00

Radon Fee _____ Professional Regulation Fee _____ Road impact assessment _____

TOTAL ADDITIONAL BUILDING PERMIT FEE \$ _____

Applicant notified by: _____ Date: _____

pd 9/7/07
Cash
[Signature]

This Warranty Deed

Made this 30th day of November A.D. 19 94

by DANIEL J. LEFKOWITZ and AMY B. LEFKOWITZ, his wife

whose mailing address is 3 Pheasant Lane

hereinafter called the grantor, to Lloyd Harbor, New York 11743

NICHOLAS MARIANO, JR. and JO-ANN MARIANO, his wife

whose post office address is: 23 Middle Road
Stuart, Florida 34996

Grantees' SSN:

hereinafter called the grantee:

(Whenever used herein the term "grantor" and "grantee" include all the parties to this instrument and the heirs, legal representatives and assigns of individuals, and the successors and assigns of corporations)

Witnesseth, that the grantor, for and in consideration of the sum of \$ 10.00

and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, remises, releases, conveys and confirms unto the grantee, all that certain land situate in Martin

County, Florida, viz:

Lot 42, HIGH POINT, according to the Plat thereof, recorded in Plat Book 3, Page 108, of the Public Records of Martin County, Florida.

SUBJECT TO covenants, restrictions, easements of record and taxes for the current year.

Parcel Identification Number: 13-38-41-002-000-00420-7

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

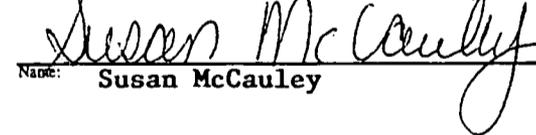
To Have and to Hold, the same in fee simple forever.

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 19 94

In Witness Whereof, the said grantor has signed and sealed these presents the day and year first above written.

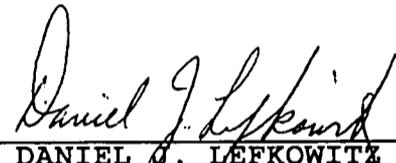
Signed, sealed and delivered in our presence:


Name: Judith B. Rowell


Name: Susan McCauley

Name: _____

Name: _____


Name & Address: DANIEL J. LEFKOWITZ LS


Name & Address: AMY B. LEFKOWITZ LS

Name & Address: _____ LS

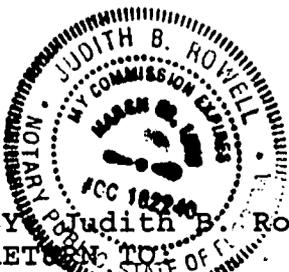
Name & Address: _____ LS

State of ~~New York~~ Florida
County of ~~New York~~ Martin

The foregoing instrument was acknowledged before me this _____ day of November, 19 94, by

DANIEL J. LEFKOWITZ and AMY B. LEFKOWITZ, his wife

who is personally known to me or who has produced Driver's License as identification.




Print Name: Judith B. Rowell
Notary Public
Commission Expires: _____

PREPARED BY Judith B. Rowell, CLS/CMA Commission Expires: _____

RECORD & RETURN TO:
First American Insurance Company
301 E. Ocean Blvd. Suite #300--P. O. Box 2008
Stuart, Florida 34994
File No: 94-4966

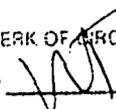
LAST PAGE

RECORDED & VERIFIED BY  D.C.

MARSHA STILLER
CLERK OF CIRCUIT COURT
MARTIN CO., FL

REC-0 AM 9:34
01093919

2467.50

DOC-DEED \$ _____ MARSHA STILLER
DOC-MTG \$ _____ MARTIN COUNTY
DOC-ASM \$ _____ CLERK OF CIRCUIT COURT
INT. TAX \$ _____ BY  D.C.

INSR # 1967840 OR BK 02189 PG 2598 RECD 10/18/2006 11:35:13 AM

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # 812a Sewer Pmt TAX FOLIO # 1338 41 002 000 00420 -7

NOTICE OF COMMENCEMENT

STATE OF FLORIDA COUNTY OF Martin

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):

High Point Lot 4a 23 Middle Road Stuart FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Additional + remodel

OWNER: Jo-Ann + Nicholas MARIANO

ADDRESS: 23 Middle Road Stuart, FL 34996

PHONE #: 772 221 2157 FAX #:

CONTRACTOR: Ken Wenzel Gail Contractors Inc.

ADDRESS: 300 SE Walker Street Stuart FL 34997

PHONE #: 772 223 0800 FAX #: 772 223 1613

INSURANCE COMPANY (IF ANY):

STATE OF FLORIDA
PHONE # _____ FAX # _____ MARTIN COUNTY

BOND AMOUNT: _____
LENDER: _____

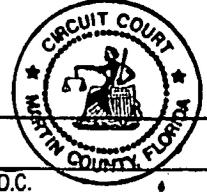
ADDRESS: _____

PHONE #: _____ FAX #: _____ DATE: 10/18/06

THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGE(S) IS A TRUE AND CORRECT COPY OF THE ORIGINAL.

MARSHA EWING, CLERK

BY: [Signature] DATE: 10/18/06



PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA STATUTES:

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ OF _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

PHONE #: _____ FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 28 DAY OF Sept 2006 by Nicholas Mariano

[Signature]
NOTARY SIGNATURE

OR PERSONALLY KNOWN _____
PRODUCED ID _____
TYPE OF ID FD

Heather Gibson
My Commission 00278863
Expires January 05 2008

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 MIDDLE ROAD, SEWALLS POINT, FL,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X	Conditioned	X	BSPM = Points	Type/SC	Overhang		Area X SPM X SOF = Points				
	Floor Area				Ornt	Len	Hgt				
.18	1123.0	32.50	6569.6	Single, Tint	N	2.0	5.0	60.0	29.33	0.88	1540.3
				Single, Tint	N	2.0	4.0	4.0	29.33	0.84	98.2
				Single, Tint	W	8.0	8.0	48.0	58.39	0.56	1575.9
				Single, Tint	W	2.0	5.0	12.0	58.39	0.81	569.8
				Single, Tint	E	2.0	5.0	30.0	65.40	0.81	1586.3
				As-Built Total:				154.0			5370.5
WALL TYPES				Area X BSPM = Points		Type	R-Value	Area X SPM = Points			
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior			11.0	744.0	2.70	2008.8	
Exterior	744.0	2.70	2008.8								
Base Total:				744.0	2008.8	As-Built Total:		744.0	2008.8		
DOOR TYPES				Area X BSPM = Points		Type	Area X SPM = Points				
Adjacent	0.0	0.00	0.0								
Exterior	0.0	0.00	0.0								
Base Total:				0.0	0.0	As-Built Total:		0.0	0.0		
CEILING TYPES				Area X BSPM = Points		Type	R-Value	Area X SPM X SCM = Points			
Under Attic	1123.0	2.80	3144.4	Under Attic			19.0	1201.0	3.72 X 1.00	4467.7	
Base Total:				1123.0	3144.4	As-Built Total:		1201.0	4467.7		
FLOOR TYPES				Area X BSPM = Points		Type	R-Value	Area X SPM = Points			
Slab	8.0(p)	-20.0	-160.0	Slab-On-Grade Edge Insulation			0.0	8.0(p)	-20.00	-160.0	
Raised	0.0	0.00	0.0								
Base Total:				-160.0	As-Built Total:		8.0	-160.0			
INFILTRATION				Area X BSPM = Points				Area X SPM = Points			
	1123.0	18.79	21101.2					1123.0	18.79	21101.2	

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 MIDDLE ROAD, SEWALLS POINT, FL,

PERMIT #:

BASE			AS-BUILT					
Summer Base Points:		32663.9	Summer As-Built Points:		32788.2			
Total Summer Points	X System Multiplier	= Cooling Points	Total Component	X Cap Ratio	X Duct Multiplier (DM x DSM x AHU)	X System Multiplier	X Credit Multiplier	= Cooling Points
32663.9	0.4266	13934.4	<small>32788.2</small> 32788.2	1.00	<small>(1.073 x 1.165 x 0.90)</small> 1.125	0.284	1.000	<small>10482.3</small> 10482.3

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 MIDDLE ROAD, SEWALLS POINT, FL,

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X WPM X WOF = Points			
.18	1123.0	2.36	477.1	Single, Tint	N	2.0	5.0	60.0	6.11	0.98	361.1
				Single, Tint	N	2.0	4.0	4.0	6.11	0.98	24.0
				Single, Tint	W	8.0	8.0	48.0	5.65	1.03	278.2
				Single, Tint	W	2.0	5.0	12.0	5.65	1.00	67.9
				Single, Tint	E	2.0	5.0	30.0	5.05	1.04	157.1
				As-Built Total:			154.0			888.3	
WALL TYPES											
Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Adjacent	0.0	0.00	0.0	Frame, Wood, Exterior	11.0		744.0	0.60		446.4	
Exterior	744.0	0.60	446.4								
Base Total:				744.0			446.4				
				As-Built Total:			744.0		446.4		
DOOR TYPES											
Area X BWPM = Points				Type	Area X WPM = Points						
Adjacent	0.0	0.00	0.0								
Exterior	0.0	0.00	0.0								
Base Total:				0.0			0.0				
				As-Built Total:			0.0		0.0		
CEILING TYPES											
Area X BWPM = Points				Type	R-Value		Area X WPM X WCM = Points				
Under Attic	1123.0	0.10	112.3	Under Attic	19.0		1201.0	0.14 X 1.00		168.1	
Base Total:				1123.0			112.3				
				As-Built Total:			1201.0		168.1		
FLOOR TYPES											
Area X BWPM = Points				Type	R-Value		Area X WPM = Points				
Slab	8.0(p)	-2.1	-16.8	Slab-On-Grade Edge Insulation	0.0		8.0(p)	-2.10		-16.8	
Raised	0.0	0.00	0.0								
Base Total:				-16.8			8.0		-16.8		
				As-Built Total:			8.0		-16.8		
INFILTRATION											
Area X BWPM = Points				Area X WPM = Points							
1123.0 -0.06 -67.4				1123.0 -0.06 -67.4							

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 MIDDLE ROAD, SEWALLS POINT, FL,

PERMIT #:

BASE				AS-BUILT						
Winter Base Points:			951.6	Winter As-Built Points:					1418.7	
Total Winter Points	X System Multiplier	=	Heating Points	Total Component	X Cap Ratio	X Duct Multiplier <small>(DM x DSM x AHU)</small>	X System Multiplier	X Credit Multiplier	=	Heating Points
951.6	0.6274		597.0	<small>1418.7</small> 1418.7	<small>1.000</small> 1.00	<small>(1.099 x 1.137 x 0.91)</small> 1.137	<small>1.000</small> 1.000	<small>1.000</small> 1.000		<small>1613.2</small> 1613.2

Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: 23 MIDDLE ROAD, SEWALLS POINT, FL,

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

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

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 86.0

The higher the score, the more efficient the home.

CUSTOM, 23 MIDDLE ROAD, SEWALLS POINT, FL,

<p>1. New construction or existing Addition <input type="checkbox"/></p> <p>2. Single family or multi-family Single family <input type="checkbox"/></p> <p>3. Number of units, if multi-family 1 <input type="checkbox"/></p> <p>4. Number of Bedrooms 1 <input type="checkbox"/></p> <p>5. Is this a worst case? No <input type="checkbox"/></p> <p>6. Conditioned floor area (ft²) 1123 ft² <input type="checkbox"/></p> <p>7. Glass area & type Single Pane <input type="checkbox"/> Double Pane <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Clear - single pane 0.0 ft² <input type="checkbox"/></p> <p style="margin-left: 20px;">b. Clear - double pane 154.0 ft² <input type="checkbox"/></p> <p style="margin-left: 20px;">c. Tin/other SHGC - single pane 0.0 ft² <input type="checkbox"/></p> <p style="margin-left: 20px;">d. Tin/other SHGC - double pane <input type="checkbox"/></p> <p>8. Floor types <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Slab-On-Grade Edge Insulation R=0.0, 8.0(p) ft <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">c. N/A <input type="checkbox"/></p> <hr/> <p>9. Wall types <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Frame, Wood, Exterior R=11.0, 744.0 ft² <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">c. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">d. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">e. N/A <input type="checkbox"/></p> <p>10. Ceiling types <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Under Attic R=19.0, 1201.0 ft² <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">c. N/A <input type="checkbox"/></p> <p>11. Ducts <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Sup: Unc. Ret: Unc. AH: Interior Sup. R=6.0, 100.0 ft <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p>	<p>12. Cooling systems <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Central Unit Cap: 24.0 kBtu/hr <input type="checkbox"/></p> <p style="margin-left: 40px;">SEER: 12.00 <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">c. N/A <input type="checkbox"/></p> <p>13. Heating systems <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Electric Strip Cap: 21.5 kBtu/hr <input type="checkbox"/></p> <p style="margin-left: 40px;">COP: 1.00 <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">c. N/A <input type="checkbox"/></p> <p>14. Hot water systems <input type="checkbox"/></p> <p style="margin-left: 20px;">a. Electric Resistance Cap: 50.0 gallons <input type="checkbox"/></p> <p style="margin-left: 40px;">EF: 0.88 <input type="checkbox"/></p> <p style="margin-left: 20px;">b. N/A <input type="checkbox"/></p> <p style="margin-left: 20px;">c. Conservation credits <input type="checkbox"/></p> <p style="margin-left: 40px;">(HR-Heat recovery, Solar DHP-Dedicated heat pump)</p> <p>15. HVAC credits <input type="checkbox"/></p> <p style="margin-left: 20px;">(CF-Ceiling fan, CV-Cross ventilation, HF-Whole house fan, PT-Programmable Thermostat, MZ-C-Multizone cooling, MZ-H-Multizone heating)</p>
--	--

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

Builder Signature: _____

Date: _____

Address of New Home: _____

City/FL Zip: _____



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

Residential System Sizing Calculation

Summary

CUSTOM
23 MIDDLE ROAD
SEWALLS POINT, FL

Project Title:
MARIANO ADD

Code Only
Professional Version
Climate: South

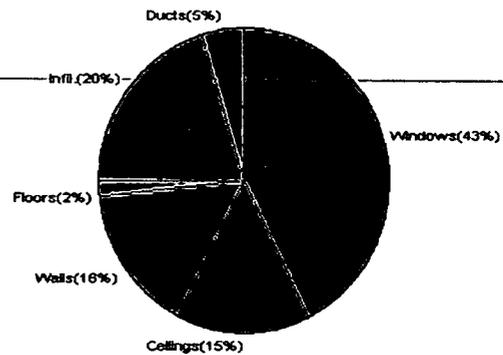
7/8/2005

Location for weather data: West Palm Beach - Defaults: Latitude(26) Temp Range(M)			
Humidity data: Interior RH (50%) Outdoor wet bulb (78F) Humidity difference(60gr.)			
Winter design temperature	45 F	Summer design temperature	91 F
Winter setpoint	70 F	Summer setpoint	75 F
Winter temperature difference	25 F	Summer temperature difference	16 F
Total heating load calculation	10367 Btuh	Total cooling load calculation	18321 Btuh
Submitted heating capacity	% of calc Btuh	Submitted cooling capacity	% of calc Btuh
Total (Electric Strip)	207.4 21500	Sensible (SHR = 0.7)	147.2 21000
		Latent	221.8 9000
		Total	163.7 30000

WINTER CALCULATIONS

Winter Heating Load (for 1123 sqft)

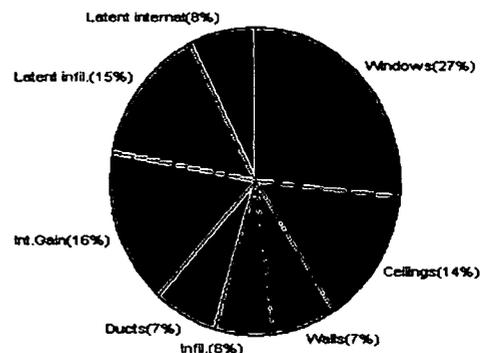
Load component		Load	
Window total	154 sqft	4451	Btuh
Wall total	744 sqft	1637	Btuh
Door total	0 sqft	0	Btuh
Ceiling total	1201 sqft	1561	Btuh
Floor total	8 ft	162	Btuh
Infiltration	75 cfm	2063	Btuh
Subtotal		9873	Btuh
Duct loss		494	Btuh
TOTAL HEAT LOSS		10367	Btuh



SUMMER CALCULATIONS

Summer Cooling Load (for 1123 sqft)

Load component		Load	
Window total	154 sqft	4916	Btuh
Wall total	744 sqft	1324	Btuh
Door total	0 sqft	0	Btuh
Ceiling total	1201 sqft	2570	Btuh
Floor total		0	Btuh
Infiltration	66 cfm	1155	Btuh
Internal gain		3000	Btuh
Subtotal(sensible)		12966	Btuh
Duct gain		1297	Btuh
Total sensible gain		14263	Btuh
Latent gain(infiltration)		2678	Btuh
Latent gain(internal)		1380	Btuh
Total latent gain		4058	Btuh
TOTAL HEAT GAIN		18321	Btuh



EnergyGauge® System Sizing based on ACCA Manual J.

PREPARED BY: _____

DATE: _____



**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 34th 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 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: Spanish "S" Roof Tile

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

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

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

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

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

This NOA consists of pages 1 through 5.

The submitted documentation was reviewed by Frank Zuloaga, RRC



**NOA No.: 02-0916-12
Expiration Date: 12/16/07
Approval Date: 12/19/02
Page 1 of 5**

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" Width: 9 7/8" 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 Width: varies 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>
Tile Nails	Min. 10dx 3" #8x 2 1/2" long	TAS 114 Appendix E	Corrosion resistant screw or smooth shank nails	Generic (With current NOA)
Tile Screws	0.335" head dia. 0.131" shank dia. 0.175" screw thread dia.	TAS 114 Appendix E	Corrosion resistant, coated, square drive, galvanized, coarse thread wood screws	Generic (With current NOA)
Hurricane Clip & Fasteners	Clips Min. 1/2" width Min. 0.060" thick Clip Fasteners Min. 8d x 1 1/4"	TAS 114 Appendix E	Corrosion resistant clips with corrosion resistant nails.	Generic (With current NOA)



NOA No.: 02-0916.12
 Expiration Date: 12/16/07
 Approval Date: 12/19/02
 Page 2 of 5

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 118,119, & 120.
- 4.2 Data For Attachment Calculations

Table 1: Aerodynamic Multipliers - λ (ft ³)	
Tile Profile	λ (ft ³) Direct Deck Application
Hanson Spanish 'S'	0.263

Table 2: Restoring Moments due to Gravity - M_g (ft-lbf)					
Tile Profile	3": 12"	4": 12"	5": 12"	6": 12"	7": 12"
Hanson Spanish 'S'	Direct Deck	DirectDeck	DirectDeck	DirectDeck	DirectDeck
	8.58	8.44	8.27	8.07	7.84

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



	1-10d Smooth or Screw Shank Nail (Eave Clip)	29.3	29.3
	2-10d Smooth or Screw Shank Nails (Field Clip)	27.6	27.6
	2-10d Smooth or Screw Shank Nails (Eave Clip)	38.1	38.1

Table 4: Attachment Resistance Expressed as a Moment M_r (ft-lbf) For Two Patty Adhesive Set Systems		
Tile Profile	Tile Application	Minimum Attachment Resistance
Hanson Spanish 'S'	Adhesive	29.3 ³
1 See manufactures component approval for installation requirements.		
2 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) For Single Patty Adhesive Set Systems		
Tile Profile	Tile Application	Minimum Attachment Resistance
Hanson Spanish 'S'	Polyfoam PolyPro™	66.5 ⁴
	Polyfoam PolyPro™	38.7 ⁵
3 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) 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".

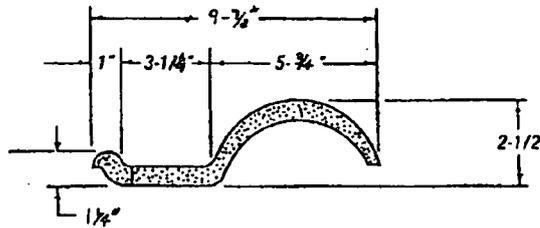
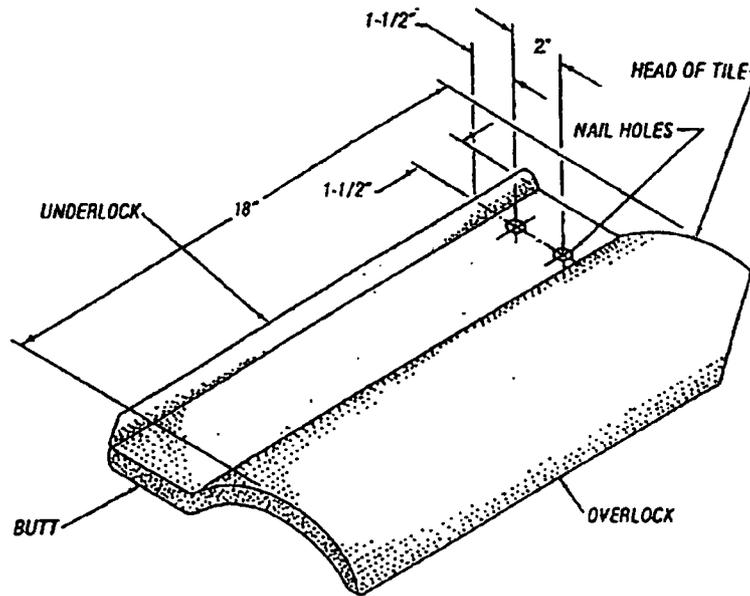
6. BUILDING PERMIT REQUIREMENTS

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.: 02-0916.12
Expiration Date: 12/16/07
Approval Date: 12/19/02
Page 5 of 5

NOTICE OF ACCEPTANCE (NOA)

Therma-Tru Corporation
108 Mutzfeld Road
Butler, IN 46721

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: ~~“Benchmark & Legend” Outswing Residential Insulated Steel Door Impact Resistant~~

APPROVAL DOCUMENT: Drawing No: ED-1701-B, titled “Outswing Residential Insulated Steel Door with Wood Frame”, sheets 1 through 5 of 5, prepared by Rick Wright Consulting, dated 2/21/99, bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

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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 # 99-0429.01 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Raul Rodriguez.



NOA No 02-0408.04
~~Expiration Date: May 30, 2007~~
Approval Date: May 09, 2002

.. Page 1

BENCHMARK / LEGEND

OUTSWING RESIDENTIAL INSULATED STEEL DOOR WITH WOOD FRAMES.

GENERAL NOTES

1. THIS PRODUCT IS DESIGNED TO MEET THE SOUTH FLORIDA BUILDING CODE 1994 EDITION FOR MIAMI-DADE COUNTY.
2. WOOD BUCKS BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.
3. PRODUCT ANCHORS SHALL BE AS LISTED AND SPACED AS SHOWN ON DETAILS. ANCHOR EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO.
4. IMPACT RESISTANT SHUTTERS NOT REQUIRED
5. DESIGNED PRESSURE RATING SHALL BE AS FOLLOWS:
 - FOR 6'8" WOOD FRAMES; SEE TABLE ON SHEET 2
 - FOR 8'0" WOOD FRAMES; SEE TABLE ON SHEET 3

RESIDENTIAL INSULATED STEEL DOOR (Common to all frame conditions)

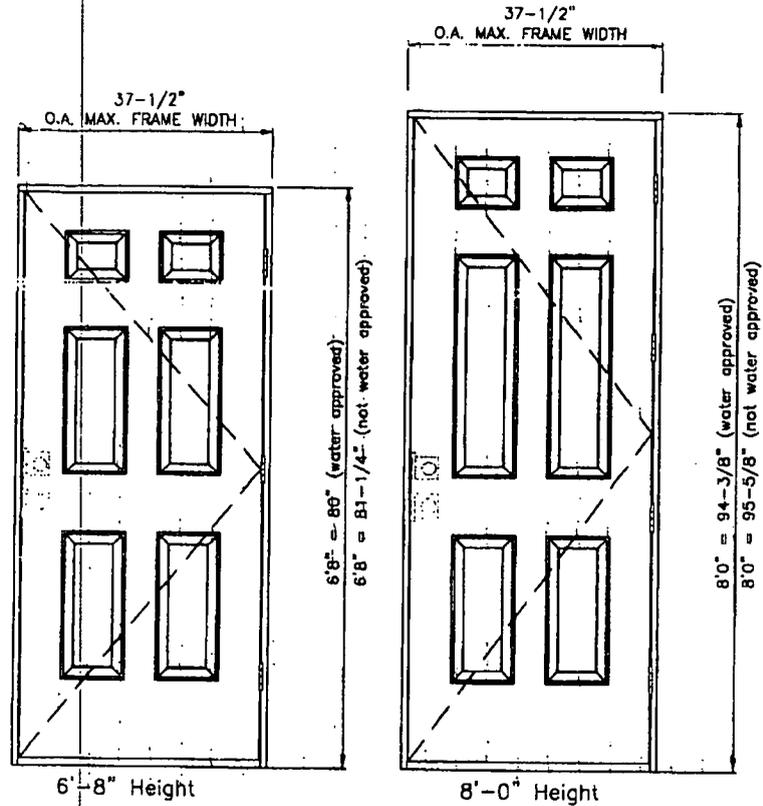
Door Leaf Construction:

Face sheets: 24 ga. (0.024") minimum thickness, Galvanized steel A-525 commercial quality - AKDQ per ASTM 620 with yield strength $F_y(\text{ave.})=23,300$ psi.
Core design: Polyurethane core, two-parts (isocyanate Resin components foam, with 2.15 lbs. density).

Construction: Flush or embossed type. The vertical edges are extensions of the skin, rolled formed to a mechanical interlock, horizontal edges are welded together at two places each.

TABLE OF CONTENTS

SHEET #	DESCRIPTION
1	COMMON (GENERAL NOTES, TYPICAL ELEVATION)
2	6'8" WOOD FRAME (BILL OF MATERIAL, ANCHORS, ELEVATION)
3	8'0" WOOD FRAME (BILL OF MATERIAL, ANCHORS, ELEVATION)
4	WOOD FRAME CROSS SECTIONS
5	COMMON (DOOR MODELS, LOCK DETAILS)



COLONIAL 6 PANEL DOOR VIEWED FROM EXTERIOR

(SHOWN FOR CLARITY OF VIEW)

GENERAL PRODUCTS CO. INC.
P.O. BOX 7387
FREDERICKSBURG, VA 22404
PH. (540) 898-5700

PRODUCT:
OUTSWING RESIDENTIAL
INSULATED STEEL DOOR
WITH WOOD FRAME

PART OR ASSEMBLY:
GENERAL NOTES
AND ELEVATIONS

NO.	DATE	REVISIONS

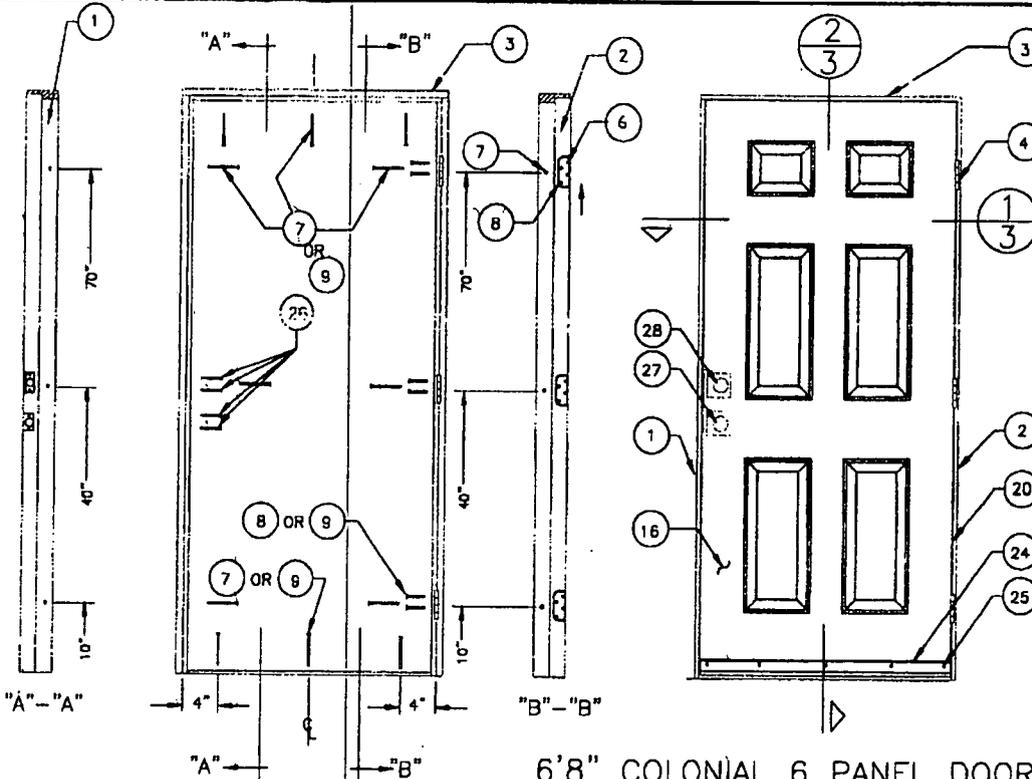
RW
CONSULTING
(813) 684-3831

PRODUCT REVIEWED
as complying with the Florida
Building Code.
Acceptance No. 02-0408-04
Expiration Date 03/20/02
By: *[Signature]*
Miami Dade Product Control
Division

APPROVED AS COMPLYING WITH THE
SOUTH FLORIDA BUILDING CODE
DATE: *May 20 1999*
BY: *[Signature]*
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
APPROVED NO. 99-0129-01

DATE: 2/21/99
SCALE: N.T.S.
DWG. BY: C.E.C.
CHK. BY:
DRAWING NO.:
ED-1701-B
SHEET 1 of 5

ITEM	DESCRIPTION
1	Latch jamb (1-1/4" x 4-1/2" Wood Jamb)
2	Hinge jamb (1-1/4" x 4-1/2" Wood Jamb)
3	Head jamb (1-1/4" x 4-1/2" Wood Jamb)
4	Benchmark 4" x 4" butt hinges 12ga. (.097") C.R steel
6	#10-24 x 5/8" PFH wood screw (hinge to frame)
7	#10-24 x 3" PFH wood screw
8	#13 x 2-1/2" PFH wood screw
9	3/16" tapcon (1-1/4" into masonry)
10	Saddle (barrier free) threshold 1/2 x 4 x 1/8" extruded alum.
11	One piece aluminum threshold (proprietary)
11A	Bump face wood capped aluminum threshold
12	Bumper threshold (1-1/4" x 4 5/8 x 5/8" extruded alum.)
13	Compression weatherstrip Schlegel Q-Lon QDS 650
14	Magnetic weatherstrip TPE
16	Face sheet 24ga. (.024 thk.min) galv. steel A-525 Fy=23,000 psi.
17	Hinge steel reinforcement for door (.055" x 1-1/8" x 5-1/4")
18	Corner foamstop
20	Foam fill hole plug
21	Cross bore reinforcement wood block
23	Face plate filler for deadbolt
24	Door sweep (not req'd with bump face threshold)
25	#8 x 1/2" lg. type "AB" PH. SMS.
26	#8 x 2" lg. PFH. wood screw
27	Kwikset titan series lock
27a	Weslock series 1800 lock
27b	Kwikset series 200 DL passage
27c	Kwikset series 400 DL passage
27d	Kwikset 680 lock
28	Kwikset titan series deadbolt
28a	Weslock series 1800 deadbolt
28b	Kwikset 660 deadbolt
28c	Kwikset 660 deadbolt
28d	Kwikset 680 deadbolt
29	Latch screws (see lock manufacturer's instructions)
30	Masonry wall
31	2x wood buck
32	Polyurethane (isocyanate & resin) foam (2.15 pounds density)
33	1/4" max. shim space



ANCHOR LOCATIONS

6'8" COLONIAL 6 PANEL DOOR
VIEWED FROM EXTERIOR
(SHOWN FOR CLARITY OF VIEW)

DESIGN PRESSURE RATING		
	WHERE WATER INFILTRATION REQUIREMENT IS NEEDED	WHERE WATER INFILTRATION REQUIREMENT IS NOT NEEDED
POSITIVE	+47.6 PSF	+76 PSF
NEGATIVE	-80.4 PSF	-76 PSF

PRODUCT REVIEWED
as complying with the Florida
Building Code
Acceptance No. 02-0408-04
Expiration Date 05/30/03
By: [Signature]
General Door Product Control
Division

APPROVED AS COMPLYING WITH THE
SOUTH FLORIDA BUILDING CODE
DATE: May 20, 1999
By: [Signature]
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 99-0429-01

DATE: 2/21/99
SCALE: N.T.S.
CHKD. BY: C.E.C.
CHK. BY:
DRAWING NO.:
ED-1701-B
SHEET 2 OF 5

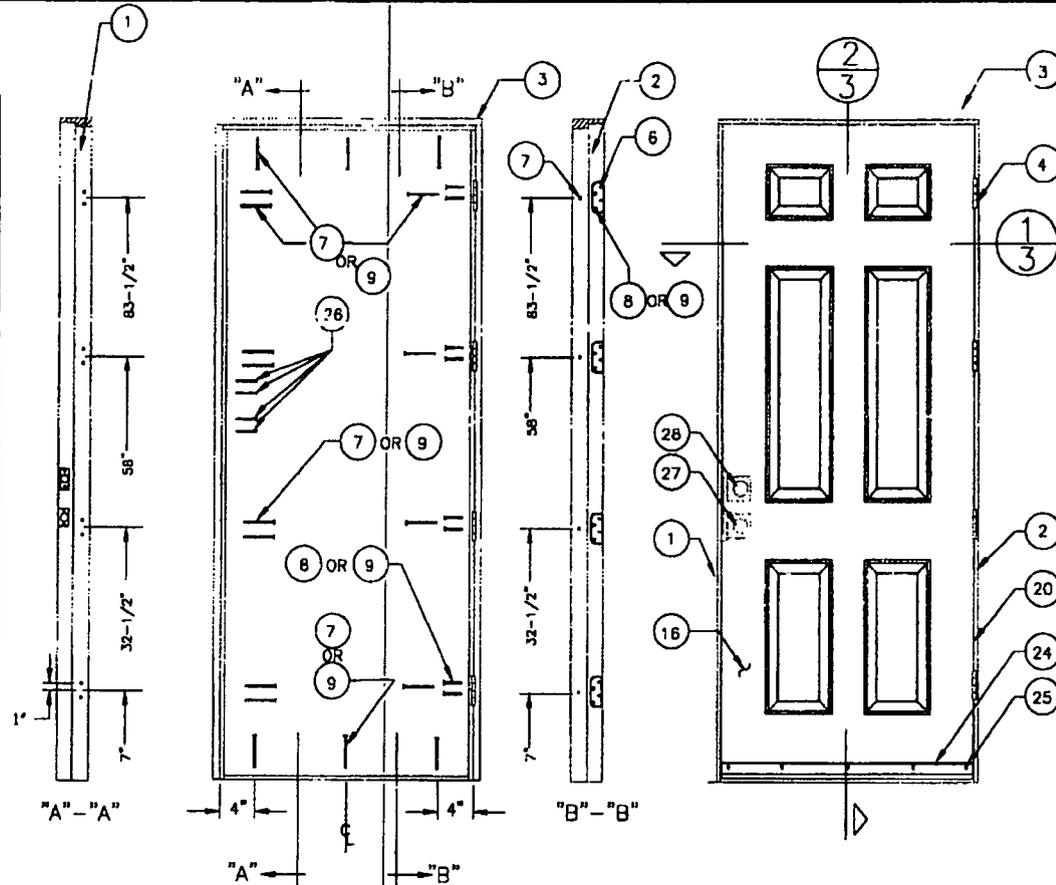
GENERAL PRODUCTS CO. INC.
P.O. BOX 7387
FREDERICKSBURG, VA 22404
PH. (540) 898-5700

PRODUCT:
OUTSWING RESIDENTIAL
INSULATED STEEL DOOR
WITH WOOD FRAME
PART OR ASSEMBLY

NO. DATE BY REVISIONS

FOR: RESIDENTIAL WOOD FRAME CROSS-SECTION LAYOUT, SEE: ED-1701-B / SHEET 3 OF 5
FOR: RESIDENTIAL DOOR PREPARATION LAYOUT, SEE: ED-1701-B / SHEET 5 OF 5

ITEM	DESCRIPTION
1	Latch jamb (1-1/4" x 4-1/2" Wood Jamb)
2	Hinge jamb (1-1/4" x 4-1/2" Wood Jamb)
3	Head jamb (1-1/4" x 4-1/2" Wood Jamb)
4	Benchmark 4" x 4" butt hinges 12ga.(.097") C.R steel
6	#10-24 x 5/8" PFH wood screw (hinge to frame)
7	#10-24 x 3" PFH wood screw
8	#10 x 2-1/2" PFH wood screw
9	3/16" tapcon (1-1/4" into masonry)
10	Saddle (barrier free) threshold 1/2 x 4 x 1/8" extruded alum.
11	One piece aluminum threshold (proprietary)
11A	Bump face wood capped aluminum threshold
12	Bumper threshold (1-1/4" x 4 5/8" x 5/8" extruded alum.)
13	Compression weatherstrip Schlegel Q-Lon ODS 650
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17	Hinge steel reinforcement for door (.055" x 1-1/8" x 5-1/4")
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21	Cross bore reinforcement wood block
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26	#8 x 2" lg. PFH. wood screw
27	Kwikset titan series lock
27a	Weslock series 1800 lock
27b	Kwikset series 200 DL passage
27c	Kwikset series 400 DL passage
27d	Kwikset 680 lock
28	Kwikset titan series deadbolt
28a	Weslock series 1800 deadbolt
28b	Kwikset 660 deadbolt
28c	Kwikset 660 deadbolt
28d	Kwikset 680 deadbolt
29	Latch screws (see lock manufacturer's instructions)
30	Masonry wall
31	2x wood buck
32	Polyurethane (isocyanate & resin) foam (2.15 pounds density)
33	1/4" max. shim space



ANCHOR LOCATIONS 8'0" COLONIAL 6 PANEL DOOR
VIEWED FROM EXTERIOR
(SHOWN FOR CLARITY OF VIEW)

FOR: RESIDENTIAL WOOD FRAME CROSS-SECTION LAYOUT, SEE: ED-1701-B / SHEET 3
FOR: RESIDENTIAL DOOR PREPARATION LAYOUT, SEE: ED-1701-3 / SHEET 5

DESIGN PRESSURE BUILDING RATING		
	WHERE WATER INFILTRATION REQUIREMENT IS NEEDED	WHERE WATER INFILTRATION REQUIREMENT IS NOT NEEDED
POSITIVE	+47.5 PSF	+70 PSF
NEGATIVE	-60.4 PSF	-70 PSF

PRODUCT RENEWED
as complying with the Florida
Building Code
Acceptance No. 02-0908-04
Expiration Date 03/30/07
By: *[Signature]*
Miami-Dade Product Control
Division

APPROVED AS COMPLYING WITH THE
SOUTH FLORIDA BUILDING CODE
DATE: May 20, 1999
BY: *[Signature]*
PRODUCT CONTROL DIVISION
BUILDING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 99-0429-01

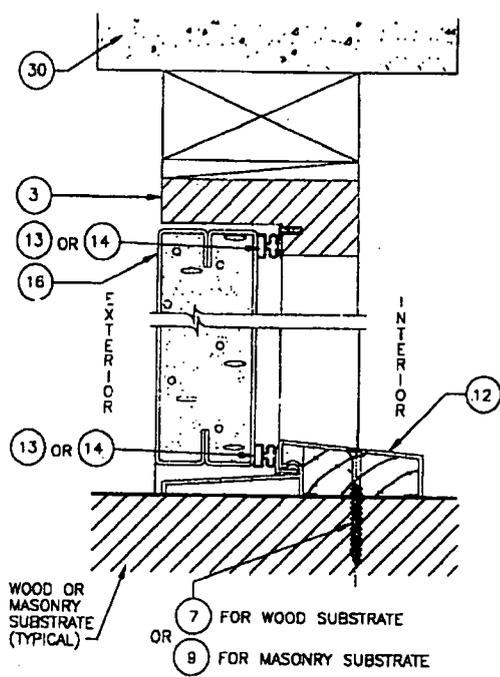
DATE: 2/21/99
SCALE: N.T.S.
DWG. BY: C.E.C.
CHK. BY:
DRAWING NO.: ED-1701-B
SHEET 3 OF 5

GENERAL PRODUCTS CO. INC.
P.O. BOX 7387
FREDERICKSBURG, VA 22404
PH. (540) 898-5760

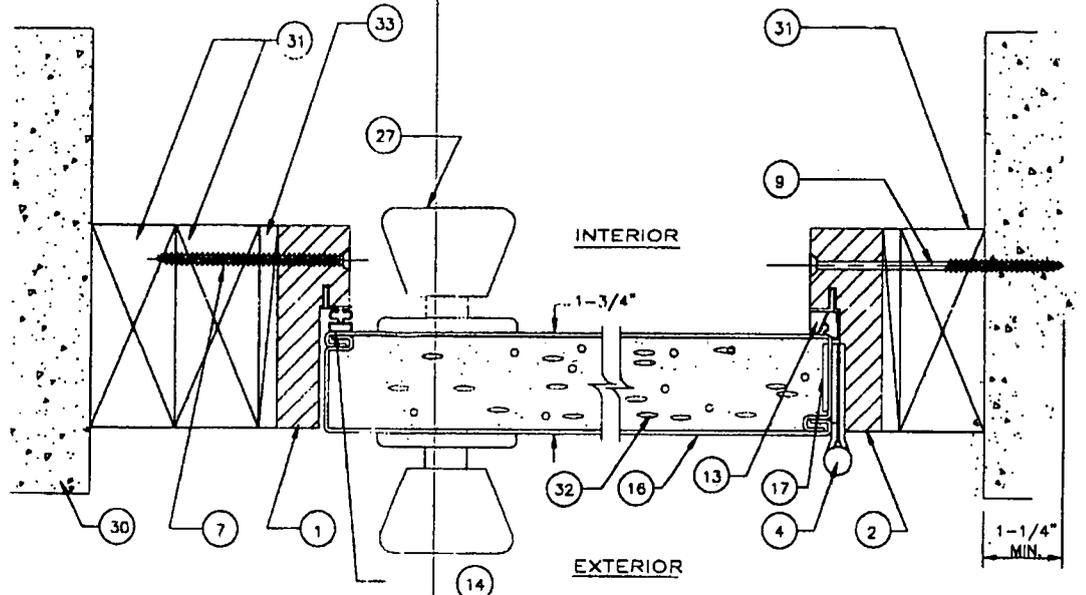
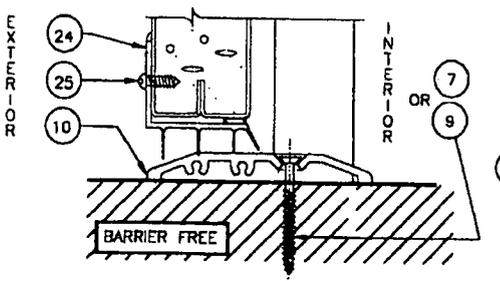
PRODUCT: OUTSWING RESIDENTIAL INSULATED STEEL DOOR WITH WOOD FRAME
PART OR ASSEMBLY:
GENERAL NOTES AND ELEVATIONS

NO.	DATE	BY	REVISIONS

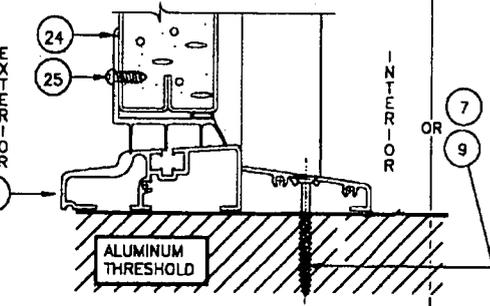
Rgw
CONSULTING
(813) 684-3831



2 VERTICAL CROSS SECTION



3 HORIZONTAL CROSS SECTION



OPTIONAL THRESHOLDS
(NOT TO BE USED WHERE WATER REQUIREMENT IS NEEDED)

FOR: RESIDENTIAL WOOD FRAME / SINGLE DOOR ANCHORING LAYOUT, SEE: ED-1701-B / SHEETS 2 & 3 OF 5
 FOR: RESIDENTIAL DOOR PREPARATION LAYOUT, SEE: ED-1701-B / SHEET 5 OF 5

GENERAL PRODUCTS CO. INC.
 P.O. BOX 7387
 FREDERICKSBURG, VA 22404
 PH. (540) 898-5700

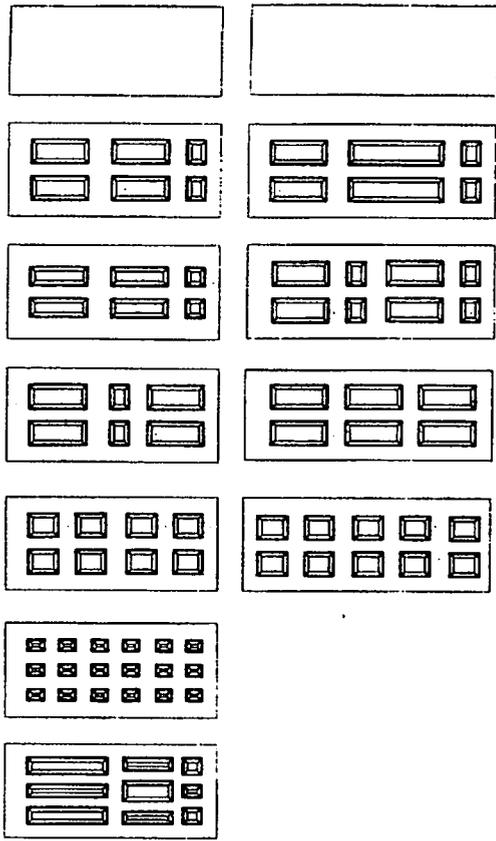
PRODUCT: OUTSWING RESIDENTIAL INSULATED STEEL DOOR WITH WOOD FRAME
 PART OR ASSEMBLY: WOOD FRAME CROSS SECTIONS

NO.	DATE	REVISIONS	BY

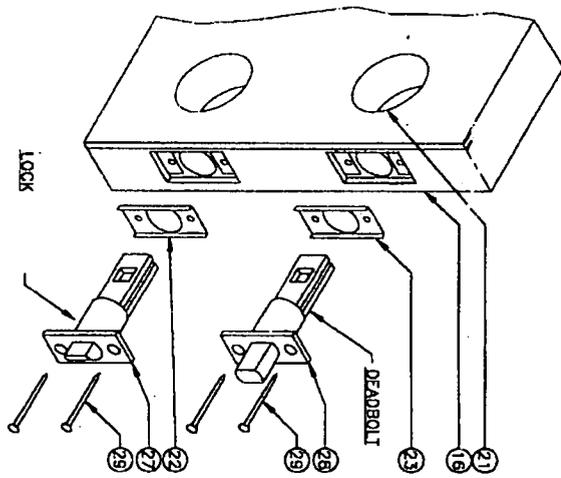
RW
 CONSULTING
 (813) 684-3831

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
 DATE: May 20 1999
 BY: *Michael Perry*
 ACCEPTANCE NO. 02-0408-04
 EXPIRATION DATE: 05/30/02
 PRODUCT DESIGN DIV. 5 ON BUILDING CODE COMPLIANCE OFFICE
 ACCEPTANCE NO. 99-0429-01

DATE: 2/21/99
 SCALE: N.T.S.
 DRAWN BY: C.E.C.
 CHECK BY:
 DRAWING NO.: ED-1701-B
 SHEET 4 OF 5



DOOR MODELS



PRODUCT REVIEWED
 as complying with the Florida
 Labeling Code
 Acceptance No. 99-0498-04
 Expiration Date 12/31/2003
 Miami Door Product Control
 Division

APPROVED AS COMPLYING WITH THE
 SOUTH FLORIDA BUILDING CODE
 DATE 11/14/99 BY *Michael J. [Signature]*
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE
 ACCEPTANCE NO. 99-0498-04

DATE 2/27/98
 SCALE N.T.S.
 DWG. BY C.E.C.
 CHECK BY
 DRAWING NO.
 ED-1701-B
 SHEET 5 OF 5

RW
 CONSULTING
 (613) 884-3831

NO.	DATE	BY

PRODUCT:
 OUTSWING RESIDENTIAL
 INSULATED STEEL DOOR
 WITH WOOD FRAME
 PART OR ASSEMBLY:
 DOOR SLAB MODELS
 AND DETAILS

 GENERAL PRODUCTS CO. INC.
 P.O. BOX 7387
 FREDERICKSBURG, VA 22404
 PH. (540) 898-570C



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

PGT Industries
1070 Technology Drive
Nokomis, FL 34275

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375-2538

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

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

Your application for Notice of Acceptance (NOA) of

~~SH-701 Aluminum Single Hung Window Impact Resistant~~

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

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

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

ACCEPTANCE NO.: 01-0629.08

~~EXPIRES: 11/01/2006~~

Raul Rodriguez
Chief Product Control Division

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

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

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

APPROVED: 11/01/2001

Vinyl Tech/Progressive Glass Technology

ACCEPTANCE No. : 01-0629.08

APPROVED : November 01, 2001

EXPIRES : November 01, 2006

NOTICE OF ACCEPTANCE: SPECIFIC CONDITIONS

1. SCOPE

This revises & renews Notice of Acceptance No. 98-0223.01, which was issued on October 22, 1998. It approves an aluminum single hung window, as described in Section 2 of this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County, for the locations where the pressure requirements, as determined by SFBC Chapter 23, do not exceed the Design Pressure Rating values indicated in the approved drawings.

2. PRODUCT DESCRIPTION

The Series SH-701 Aluminum Single Hung Window – Impact and its components shall be constructed in strict compliance with the following document: Drawing No. 4040, titled "SH-701 Aluminum Single Hung window" Sheets 1 thru 4 of 4, prepared by manufacturer, dated 2/9/98, 08-18-98 and last revised on 10-11-2001, signed and sealed by Robert L. Clark, P.E., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division. These documents shall hereinafter be referred to as the approved drawings.

3. LIMITATIONS

- 3.1 This approval applies to single unit applications only, as shown in approved drawings.
- 3.2 Water infiltration requirements: see design pressure table.

4. INSTALLATION

- 4.1 The aluminum single hung window and its components shall be installed in strict compliance with the approved drawings.
- 4.2 The installation of this product will not require a hurricane protection system.

5. LABELING

- 5.1 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".

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 Duplicate copies of the approved drawings, as identified in Section 2 of this Notice of Acceptance, clearly marked to show the components selected for the proposed installation.
 - 6.1.3 Any other documents required by the Building Official or the South Florida Building Code (SFBC) in order to properly evaluate the installation of this system.

Ishaq I. Chanda
Ishaq I. Chanda, P.E., Product Control Examiner
Product Control Division

Vinyl Tech/Progressive Glass Technology

ACCEPTANCE No. : 01-0629.08

APPROVED : November 01, 2001

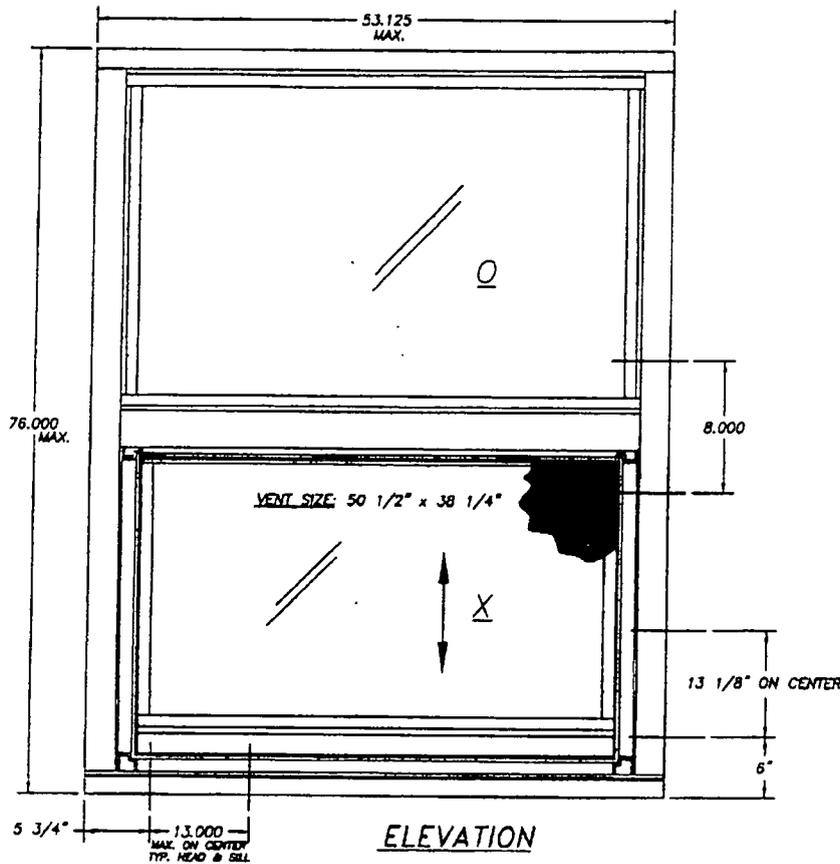
EXPIRES : November 01, 2006

NOTICE OF ACCEPTANCE: STANDARD CONDITIONS

1. Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documents, including test-supporting data, engineering documents, are no older than eight (8) years.
2. Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Miami-Dade County Product Control Approval", or as specifically stated in the specific conditions of this Acceptance.
3. Renewals of Acceptance will not be considered if:
 - a. There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes.
 - b. The product is no longer the same product (identical) as the one originally approved.
 - c. If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product.
 - d. The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
4. Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
5. Any of the following shall also be grounds for removal of this Acceptance:
 - a. Unsatisfactory performance of this product or process.
 - b. Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
6. The Notice of Acceptance 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 Notice of Acceptance is displayed, then it shall be done in its entirety.
7. A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all time. The engineer needs not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
9. This Notice of Acceptance consists of pages 1, 2 and this last page 3.

END OF THIS ACCEPTANCE

Ishaq I. Chanda
Ishaq I. Chanda, P.E., Product Control Examiner
Product Control Division



ELEVATION

LARGE MISSILE IMPACT WINDOWS

- 1.) GLAZING OPTIONS: A. 5/16" (.350) LAMINATED GLASS (1/8" annealed/.090 film/1/8" annealed)
B. 5/16" (.350) LAMINATED GLASS (1/8" heat strengthened/.090 film/1/8" heat strengthened)
- 2.) CONFIGURATIONS: DW
- 3.) DESIGN PRESSURE RATING: SEE TABLE
- 4.) ANCHORS:
MAX. 5 3/4" FROM EACH CORNER (HEAD & SILL)
MAX. 8" FROM EACH CORNER (JAMBS)
MAX. SPACING AT HEAD & SILL: 13.000
MAX. SPACING AT JAMBS: 13.125
- 5.) SHUTTER REQUIREMENT:
NO SHUTTERS REQUIRED
- 6.) REFERENCE TEST REPORT: FTL-1889

ITEM	DESCRIPTION	V.T. #	QTY. / LOCATION	VENDOR	VENDOR #
1	FLANGED FRAME HEAD (Alum. 6063-T5)	612228	1	ALUMAX	AF-12228
2	FLANGED FRAME SILL (Alum. 6063-T5)	612228	1	ALUMAX	AF-12228
3	FLANGED FRAME JAMB (Alum. 6063-T5)	612227	2	ALUMAX	AF-12227
4	FIXED MEETING RAIL (Alum. 6063-T5)	612228	1	ALUMAX	AF-12228
5	SASH TOP RAIL (Alum. 6063-T5)	612229	1	ALUMAX	AF-12229
6	SASH BOTTOM RAIL (Alum. 6063-T5)	612230	1	ALUMAX	AF-12230
7	SASH SIDE RAIL (Alum. 6063-T5)	612231	2	ALUMAX	AF-12231
8	GLAZING BEAD (Alum. 6063-T5)	6534571	8	ALUMAX	AF-534571
9	WEATHERSTRIP - VINYL BULB	81P247K	2 (1 per Glazing Bead)	TEAM PLASTICS	TP-247
10	SILICON	62899C		DOW CORNING	899
11	3/16" (.350) W/SAFELY BY SOLUTIA INTERLAYER		2	H.P.G.	
12	3/16" (.350) W/DUPONT PVB INTERLAYER		2	H.P.G.	
13	1/8" x 750 PHIL. PH. HD.	7658PFAA	2 (to attach Balances to Jamba)	AQUA FASTENERS	
14	SWEEP LATCH		1 (11.5" from end of vent top rail) 2 (if width is >= 42")	MINIATURE DIE CASTING	PGT.214.XX
15	1/8" x .825 PHIL. FLY. HD.	7888WW	2 (Sweep Latch Screws) 4 (when using 2 Sweep Latches)	MERCHANTS FASTENER	
16	WINDLOAD ADAPTER (Alum. 6063-T5)	812238	2 (Ø frame jamba, 30" from bot.)	ALUMAX	AF-12238
17	1/8" x 3/8 PHIL. P.H. TEK.	78X38PT	4 (Windload Adapter Screws)	MERCHANTS FASTENER	
18	WEATHERSTRIP - VINYL BULB/SASH	81P249K	1 (at Vent Bottom Rail)	TEAM PLASTICS	TP-249
19	SASH TOP GUIDE		2 (1 per each balance)	MASTER TOOL	
20	SCREEN		1	VINYL TECH./PGT	
21	BALANCE COVER		2 (1 per each balance)	WYBORG	STAVE
22	BALANCE		2 (1 Ø each frame jamba)	CALOWELL	
23	WEATHERSTRIP - PILE/FINSEAL	81082W	3 (Ø vent jamba & vent top rail)	SCHUEGL CORP.	FS7828-187
24	SASH FACE GUIDE	71007	2 (1/vent jamba, 2.5" from bot.)	VINYL TECH./PGT	
25	1/8" x 500 PHIL. FLY. HD.	78X125PFW	(each face guide screws)	SCHERER INC. PROD.	
26	SASH STOP (Alum. 6063-T5)	612244	2 (Ø top of each frame jamba)	ALUMAX	AF-12244
27	1/8" x 1.000 PHIL. P.H. SMS	78X1000	4 (Frame & Vent Assy. screws)	MERCHANTS FASTENER	
28	SEAM SEALER	65M554W		SCHNEE/MOREHEAD	SM5504
29	WINDLOAD ADAPTER (PLASTIC)	61207	2 (Ø frame jamba, 30" from bot.)	PROTOTYPE	WC588-1207

DESIGN PRESSURE RATING (P.S.F.)			
3/16 LAMINATED W/ ANNEALED GLASS		3/16 LAMINATED W/ HEAT STRENGTHENED GLASS	
WATER INFILTRATION REQUIRED	WATER INFILTRATION NOT REQUIRED	WATER INFILTRATION REQUIRED	WATER INFILTRATION NOT REQUIRED
-50.0	+50.0	-80.0	+88.7
		-80.0	+80.0

PRODUCT RENEWED
ACCEPTANCE No. 01-0629.08
MODIFICATION DATE November 1, 2005

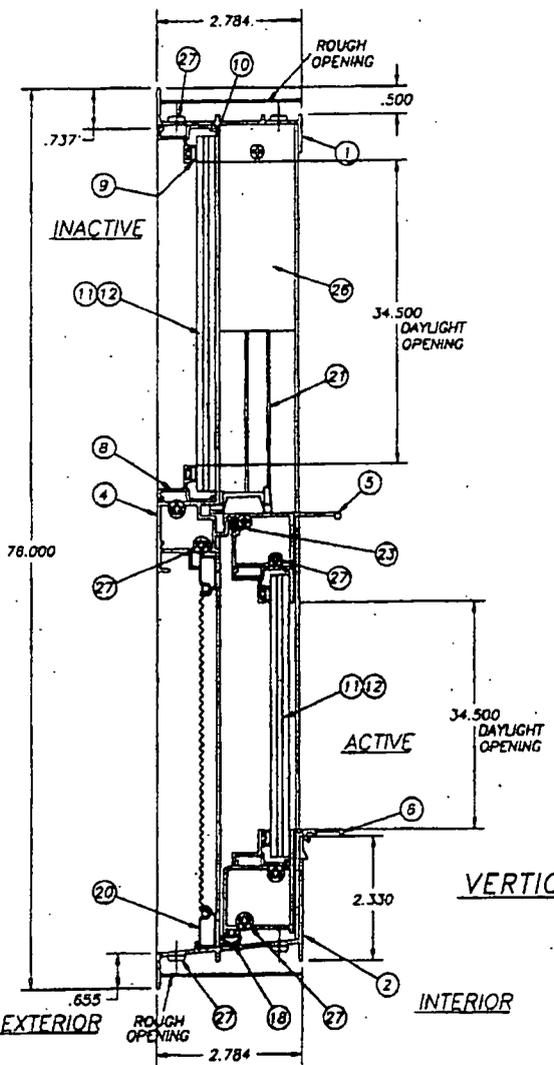
Robert L. Clark
10/16/98
Robert L. Clark, P.E.
PE #39712
Structural



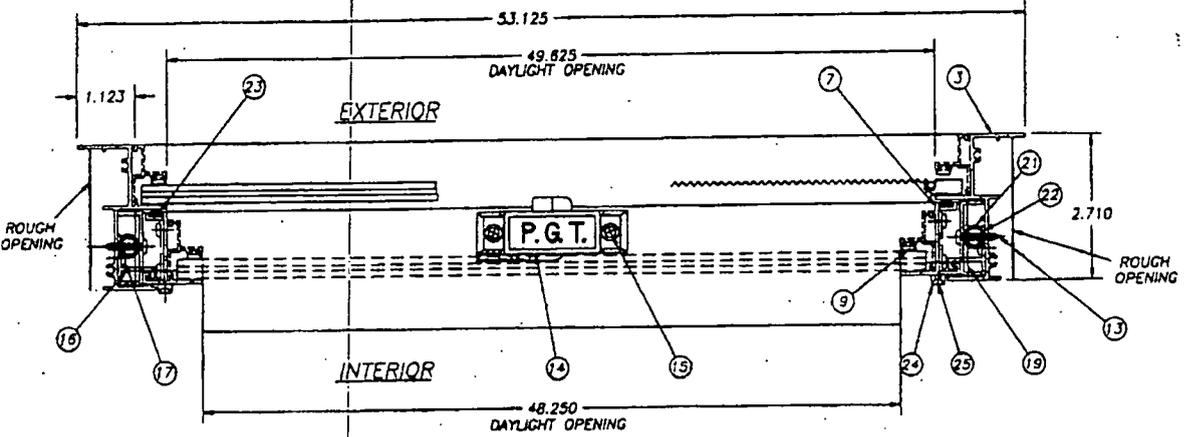
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NOROKIS, FL 34275
P.O. BOX 1529
NOROKIS, FL 34274

Drawn By: F.K.	Date: 10/11/0	Revisions: TB, TABLE, EXTR.
Drawn By: D.B.	Date: 8/18/98	Revisions:
Drawn By: D.B.	Date: 2/9/98	Revisions:

Description: ELEVATION & PARTS LIST				
Title: ALUMINUM SINGLE HUNG WINDOW				
Series/Model: SH-701	Scale: NTS	Sheet: 1 of 4	Drawing No. 4040	Rev: B



VERTICAL SECTION



HORIZONTAL SECTION

REFERENCE TEST REPORT: FTL-1889

PRODUCT RENEWED
 ACCEPTANCE No. 01-0629-08
 EXPIRATION DATE Nov 2006
 Ishaq J. Chanda
 PRODUCT CONTROL DIVISION
 BUILDING CODE COMPLIANCE OFFICE

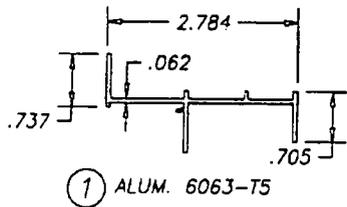
Robert L. Clark
 10/14/01
 Robert L. Clark, P.E.
 PE #39712
 Structural



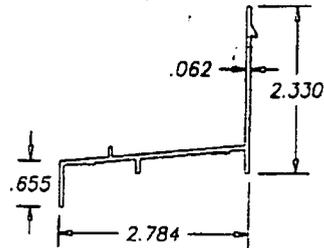
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 NORCOMS, FL 34275
 P.O. BOX 1329
 NORCOMS, FL 34274

Revised By: F.K.	Date: 10/11/01	Revised: TB, TABLE, EXTR.
Revised By: D.B.	Date: 8/18/98	Revisions:
Drawn By: D.B.	Date: 2/9/98	

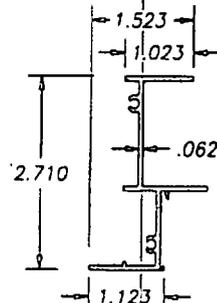
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Series/Model: SH-701	Scale: NTS	Sheet: 2 of 4	Drawing No. 4040
			Rev: B



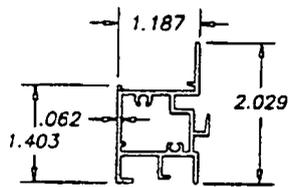
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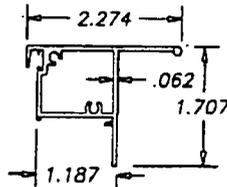
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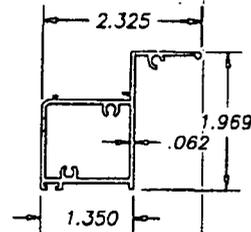
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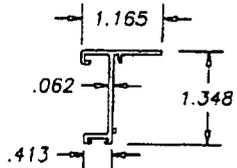
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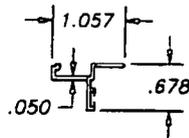
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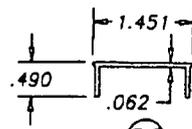
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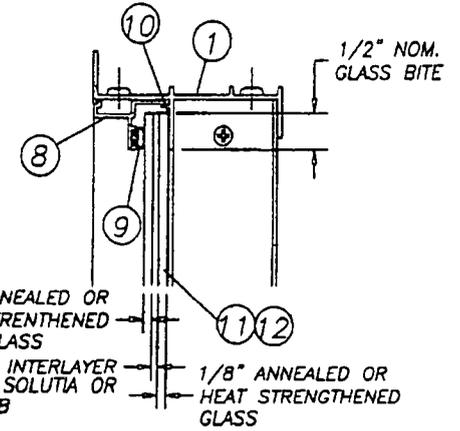
⑦ ALUM. 6063-T5



⑧ ALUM. 6063-T5



⑳ ALUM. 6063-T5



5/16" LAMINATED GLAZING DETAILS

REFERENCE TEST REPORT: FTL-1889

Robert L. Clark, P.E.
PE #39712
Structural



1070 TECHNOLOGY DRIVE
NOKOMIS, FL 34275
P.O. BOX 1329
NOKOMIS, FL 34274

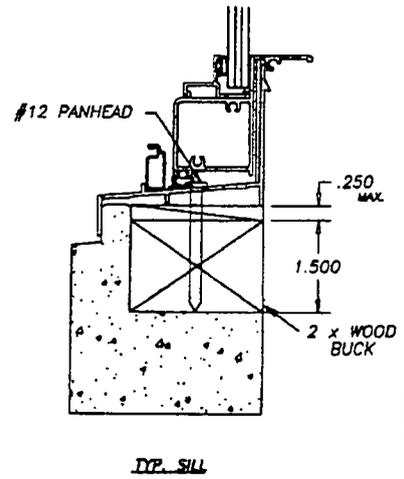
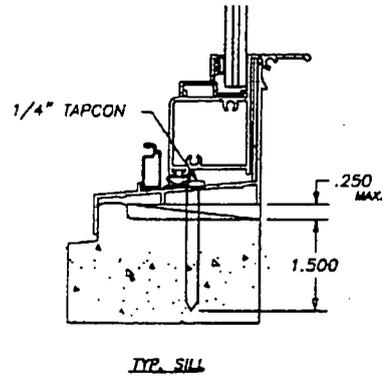
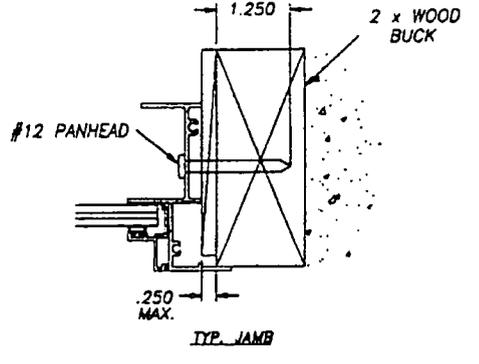
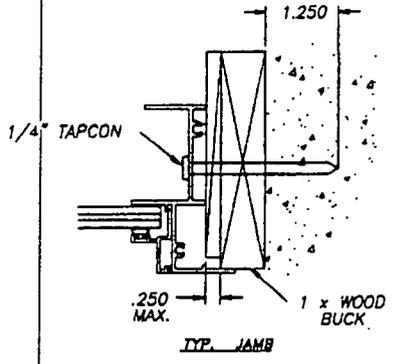
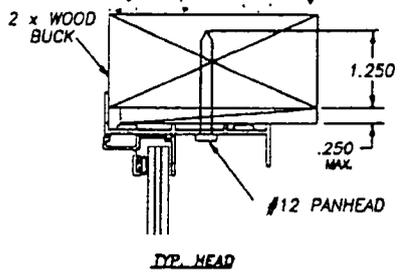
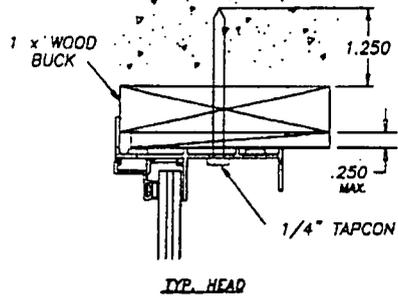
Revised By: F.K.	Date: 10/11/01	Revision: TB, TABLE, EXTR.
Revised By: D.B.	Date: 8/18/98	Revision:
Drawn By: D.B.	Date: 2/9/98	

PRODUCT REVIEWED
ACCEPTANCE NO. 01-0629-08
EXPIRATION DATE 04/01/2006
By: [Signature]
PRODUCT CONTROL DIVISION
BUILDING CODE COORDINATOR

Description:
EXTRUSIONS & GLAZING OPTIONS

Title:
ALUMINUM SINGLE HUNG WINDOW

Series/Model: SH-701	Scale: NTS	Sheet: 3 of 4	Drawing No. 4040	Rev. B
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REFERENCE TEST REPORT: FTL-1889

PRODUCT RENEWED
 INSURANCE NO. 01-02290K
 EXPIRATION DATE 11/30/2001
 By Sharon J. Landa
 PRODUCT GROUPING: AVENUE
 BUILDING CODE: DOING LOCAL OFFICE

[Signature]
 10/14/01
 Robert L. Clark, P.E.
 PE #39712
 Structural

PGT INDUSTRIES		Revised By: F.K.	Date: 10/11/01	Revisions: TB, TABLE, EXTR.
		Revised By: O.B.	Date: 8/18/98	Revisions:
		Drawn By: O.B.	Date: 2/9/98	
Description: ANCHORAGE				
Title: ALUMINUM SINGLE HUNG WINDOW				
Series/Model: SH-701	Scale: NTS	Sheet: 4 of 4	Drawing No. 4040	Rev: B



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING
140 WEST FLAGLER STREET, SUITE 1403
MIAMI, FLORIDA 33130-1563
(305) 375-2901 FAX (305) 375-2908

NOTICE OF ACCEPTANCE (NOA)

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

SCOPE:

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

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

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

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

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

MISSILE IMPACT RATING: Large and Small Missile Impact

LABELLING: 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.

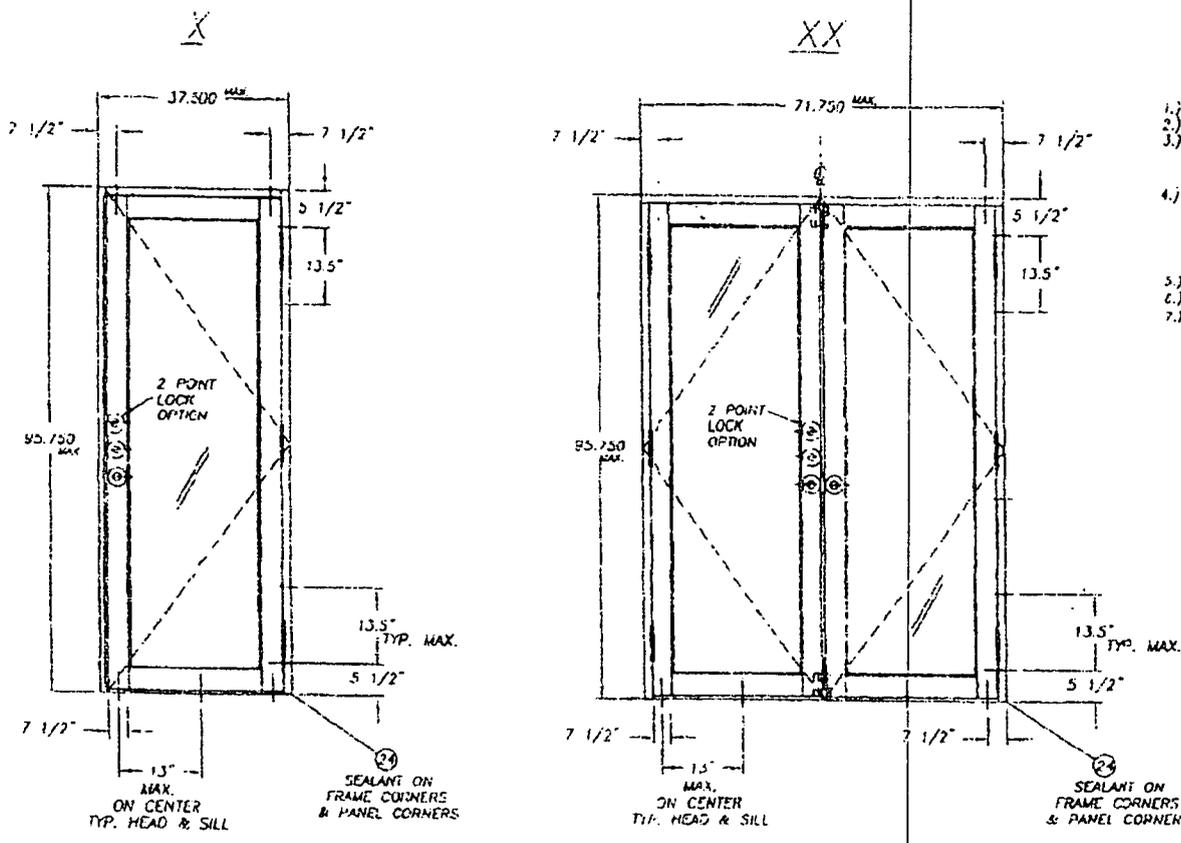
ADVERTISEMENT: The NOA number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the NOA is displayed, then it shall be done in its entirety.

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



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



LARGE MISSILE IMPACT DOORS

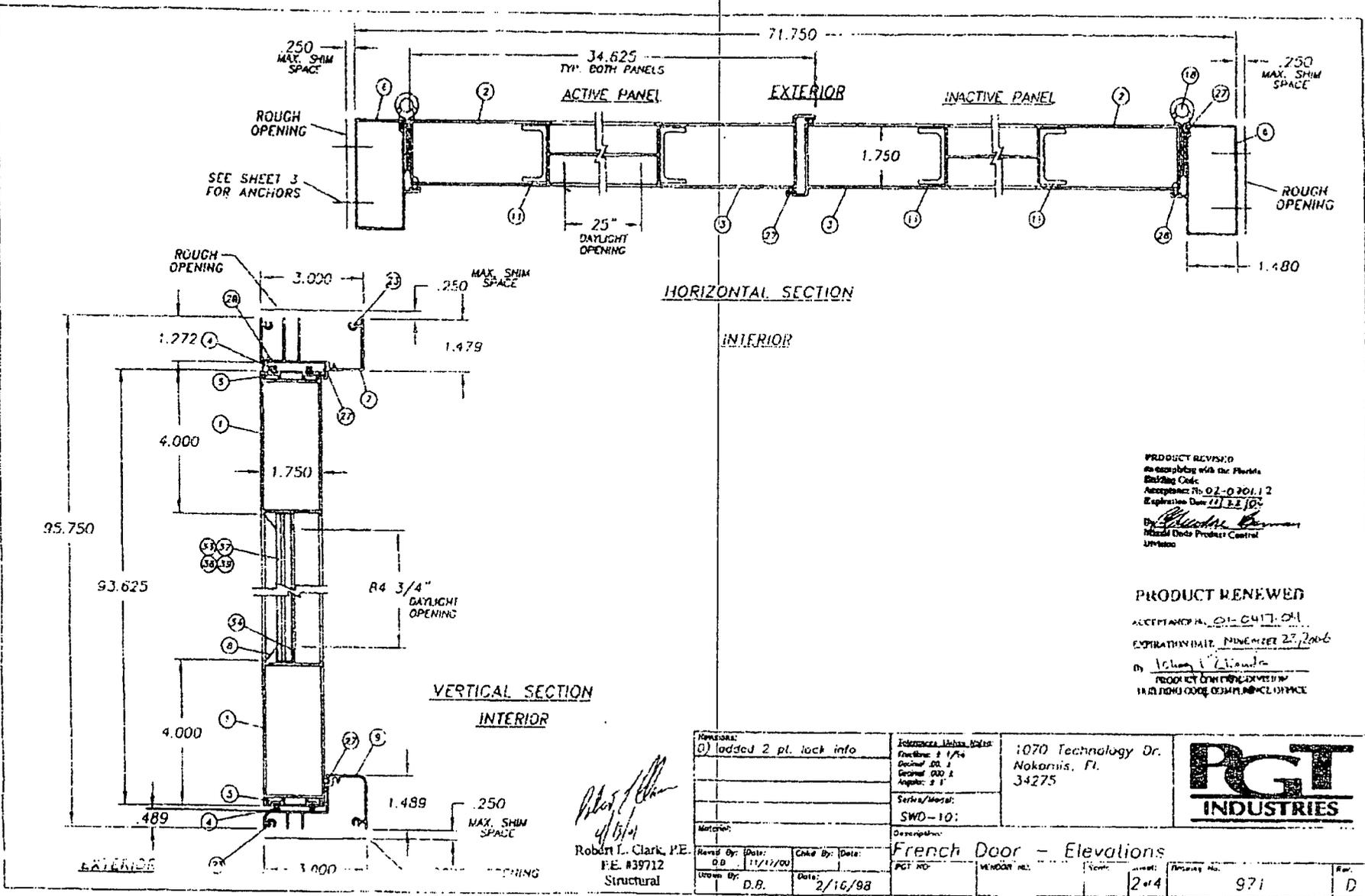
- 1.) GLAZING: 401/464 LAMINATED W/INTERLAYER (MONSANO OR DUPONT)
- 2.) CONFIGURATIONS: X, XX
- 3.) DESIGN PRESSURE RATING:
 3a) 464 LAM.: +75 P.S.F. -75 P.S.F.
 3b) 401 LAM.: +60 P.S.F. -60 P.S.F.
- 4.) ANCHORS:
 MAX. 7 1/2" FROM CORNERS (HEAD & SILL)
 MAX. 5 1/2" FROM CORNERS (JAMB)
 MAX. SPACING AT HEAD & SILL: 13.500
 MAX. SPACING AT JAMB: 13.500
- 5.) NO SHUTTERS REQUIRED
- 6.) REFERENCE TEST REPORT: FTI-7241
- 7.) FOR LOCKING ASSEMBLY OPTION - SEE SHEET J OF 4

PRODUCT REVISED
 as complying with the Florida
 Doorway Code
 Acceptance No. 01-0701.2
 Expiration Date: 11/22/10
 By: *Charles J. Liddick*
 Metal Door Product Control
 Director

PRODUCT RENEWED
 ACCEPTANCE No. 01-04471.04
 EXPIRATION DATE: November 23, 2016
 By: *Charles J. Liddick*
 PRODUCT CONTROL DIVISION
 ALUMINUM WINDOW COMPLIANCE OFFICE

Robert L. Clark
 4/13/01
 Robert L. Clark, P.E.
 P.E. #39712
 Structural

Revisions: 1) Revised Spc. from 1110 2)	Submittal No. 1110 Factory: Surface: 00 & Thickness: .002 & Radius: 1"	Location: Okomamis, FL 34275	
Material: SWD-101	Description: French Door - X, XX	PGT NO.: VENDOR NO.: Scale: 1x Sheet: 1 of 4 Drawing No: 9/1 Rev: 1	
Revisd By: Date: 11/22/00 Drawn By: Date: 11/22/00	CREA By: Date: 11/22/00		

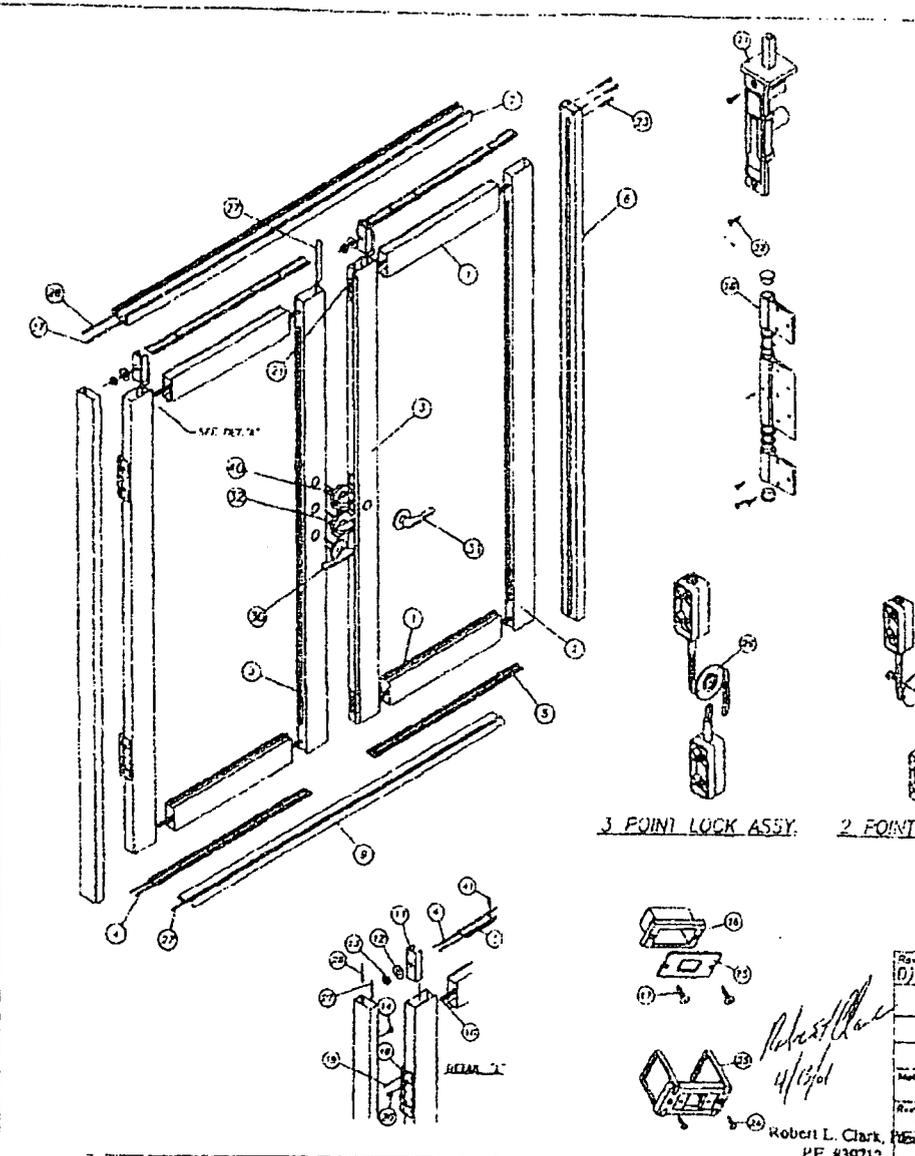


PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 02-0701.12
 Expiration Date 11.22.10
 By: *[Signature]*
 Internal Code Product Control
 Update

PRODUCT RENEWED
 ACCEPTANCE NO. 01-0417.01
 EXPIRATION DATE: NINE MONTHS 27, 2006
 By: *[Signature]*
 PRODUCT CONTROL SERVICE
 INTERNAL CODE CONTROL SERVICE

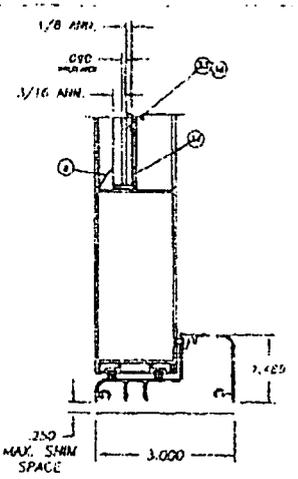
[Signature]
 Robert L. Clark, P.E.
 P.E. #39712
 Structural

Dimensions: (1) Lugged 2 pl. lock info		Reference: Urban, Dallas Fraction: 3/16" Decimal: 0.1875 General: 0.002" Angles: 3"	1070 Technology Dr. Nokomis, FL 34275	
Material: SWD-10:		Description: French Door - Elevations	PGT NO:	
Revised By: D.B. Date: 11/11/00	Check By:	Date: 2/16/98	VENDOR NO:	Qty: 2 of 4 Assembly No: 971 Rev: D

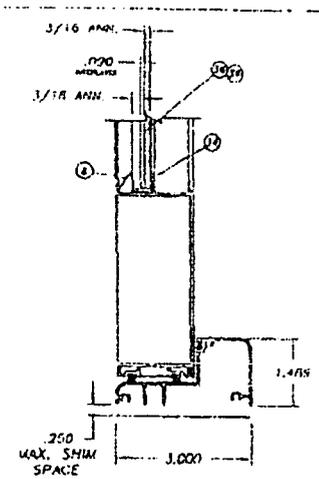


3 POINT LOCK ASSY.

2 POINT LOCK ASSY.



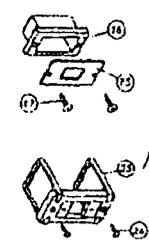
181" LAM. W/MONSANTO SAFETY FIBER INTERLAYER
 DE. 181" LAM. W/DUREON BUTYLITE INTERLAYER
 SEE NOTE 3 ON SHEET 1
 DESIGN PRESSURE RATING: 380 psf



184" LAM. W/MONSANTO SAFETY FIBER INTERLAYER
 DE. 184" LAM. W/DUREON BUTYLITE INTERLAYER
 SEE NOTE 3 ON SHEET 1
 DESIGN PRESSURE RATING: 373 psf

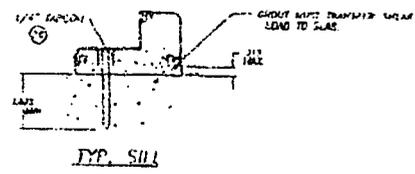
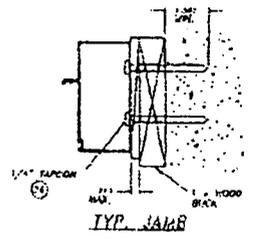
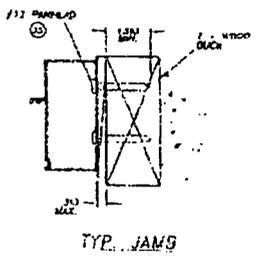
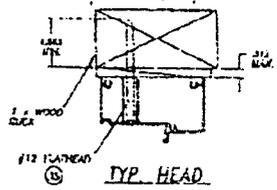
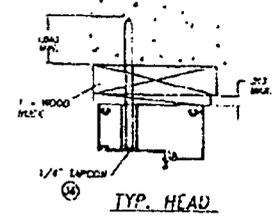
PRODUCT REVISED
 as complying with the Florida
 Building Code
 Approval No. 02-0701-12
 Expiration Date 11/22/06
 By: *[Signature]*
 Manager of Product Control
 Division

PRODUCT RENEWED
 APPROVAL NO. 01-0917-04
 EXPIRATION DATE: NOVEMBER 22, 2006
 BY: *[Signature]*
 MANAGER OF PRODUCT CONTROL
 DIVISION



Robert L. Clark
 4/10/06
 Robert L. Clark
 P.E. #39712
 Structural

Remarks: DJ added 2 pl. lock info		Fabrication (Mfg. Detail): Fractions: 1/8" Decimal: .005" Decimals: .005" Angles: 1°		1070 Technology Dr. Nokomis, FL 34275					
Material:		Series/Model: SWD-101		Description: French Door - Exploided/Glazing					
Revised By: D.B.	Date: 11/17/00	Check By: D.B.	Date: 2/16/98	PGL NO.:	WINDOW NO.:	Scale: 3/4"	Sheet: 971	Drawing No.: 971	App: D



ITEM	DESCRIPTION	V.T. #	QTY./DESCRIPTION	VENDOR	VENDOR #
1	DOOR HEAD/SILL	60375		ALUMAX	AF-10375
2	DOOR JAMB (HINGED)	60376		ALUMAX	AF-10376
3	DOOR ASTRAGAL	60377		ALUMAX	AF-10377
4	2x6 x 187 FONSEAL STRIP	679240	8 (2/each door top & bot rail)	SCHLEGEL CORP.	FS7024-187
5	DOOR W-STRIP CHANNEL	60378		ALUMAX	AF-10378
6	FRAME JAMB	60380		ALUMAX	AF-10380
7	FRAME HEAD	60413		ALUMAX	AF-12376
8	GLAZING BEAD (ROLL FORM)	65170		FLORIDA SCREEN	
9	CUTSWING THRESHOLD	61069M		ALUMAX	AF-12375
10	5/16x18 THREADED ROD	6YR0DA	4 (1/door top & bot rail)	FASTEC INDUSTRIAL	
11	TRUSS CLAMP	60378M	4 (2/ea door top & bot rail)	ALUMAX	AF-10378
12	5/16x1/16 TRUSS WASHER	7WASHA	8 (2/ea door top & bot rail)	FASTEC INDUSTRIAL	
13	5/16x1/8 TRUSS NUT	7NUTA	8 (2/ea door top & bot rail)	FASTEC INDUSTRIAL	
14	FRAME SCR. COVER CAP	41722W		PGI INDUSTRIES	41722W
15	STRIKE PLATE	7655X		CANTRIP	
16	STRIKE PLATE INSERT	41721		PGI INDUSTRIES	41721
17	10x3/4 SCR. FLT. HD. PHIL.	7103AA		MERCHANTS FASTENER	
18	HINGE ASSY.	7FRN0W	6 (3/frame jambs)	NATIONWIDE INT.	
19	10x625 FLT. HD. PHIL.	71058EP	26 (6/hinge - hinge-door jamb)	MERCHANTS FASTENER	
20	10x1/2 FLT. HD. PHIL.	710X1ZPPH	30 (5/hinge & hinge-frame jamb)	MERCHANTS FASTENER	
21	1/2P/BOTT. SLIDE BOLT LOCK	41720	2 (1 @ top/bot. of r.h. astragal)	PGI INDUSTRIES	41720
22	6x1/2 FLT. HD. PHIL.	7612FW	4 (2/side bolt locks)	MERCHANTS FASTENER	
23	8x1 1/2 SCR. PH. HD. QUAD.	78112A	12 (6/head & sill)	FASTEC INDUSTRIAL	
24	SEAL SEALER	6SM55W		SCHNEE MOREHEAD	SM5504
25	LOCK SUPPORT ASSY.	4UBLOK	3 (1/lock)	PGI INDUSTRIES	4UBLOK
26	6x3/4 FLT. HD. PHIL.	7634F	6 (2/lock support assy.)	FASTEC INDUSTRIAL	
27	2x40 x 190 QDON	60200K	5 (1/astragal, r. jambs & head)	SCHLEGEL CORP.	Q200X190
28	3/3 x 190 QDON	60300W	4 (1/astragal & frame jambs)	SCHLEGEL CORP.	Q375X190
29	3 POINT LOCK ASSY.	FD3PTAY	1 (0 r.h. astragal)	PGI INDUSTRIES	FD3PTAY
30	LOCK (ACTIVE)	7L0KAP	1 (0 r.h. astragal)	HARLOC	100
31	LOCK (DUMMY)	7L0KDP	1 (0 r.h. astragal)	HARLOC	880
32	DEAD-BOLT LOCK	7BLTP	1 (0 r.h. astragal)	HARLOC	820
33	471 LAM. W/MONSANTO			H.F.G.	
34	SILICONE	6ZB99C		DOW CORNING	959
35	1/2 Ph. Ph. SMS				
36	1/4 TAPCON				
37	43 LAM. W/DUPONT			H.P.G.	
38	45 LAM. W/DUPONT			H.P.G.	
39	45 LAM. W/MONSANTO			H.F.G.	
40	2 POINT LOCK ASSY.		1 (0 r.h. astragal)	PGI INDUSTRIES	
41	1/4 x .26 Ph. Fl. Yck	7834FP1		SPENCER PRODUCTS	

PRODUCT REVIEWED
 as per plan with the Florida
 Building Code
 Acceptance No. 02-0701.12
 Expiration Date 12/22/06
 By: *Robert L. Clark*
 District Product Control
 Director

PRODUCT RENEWED
 ACCEPTANCE NO. 02-0701.01
 EXPIRES DATE: November 22, 2006
 By: *Robert L. Clark*
 DISTRICT PRODUCT CONTROL
 DIRECTOR

Robert L. Clark
 4/12/06
 Robert L. Clark, P.E.
 P.E. #39712
 Structural

Information: D) added 2nd lock for	Telephone: 772.286.7058 1070 Technology Dr. 34275 Series/Model: SWD-101	
Description: Name (by): Date: 12/12/06 Drawn by: O.H. Date: 2/16/06	Description: French Door - Anchorage/B.O.M. Scale: 4 of 4	

FLORIDA ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

Florida Department of Community Affairs
Residential Whole Building Performance Method A

Project Name: Mariano 23 Middle Rd Address: 23 Middle Rd City, State: Sewals Point, FL 34996- Owner: Nick Mariano Climate Zone: South	Builder: Permitting Office: Martin County Permit Number: Jurisdiction Number:
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<table style="width: 100%; border-collapse: collapse;"> <tr><td>1. New construction or existing</td><td style="text-align: right;">Addition</td><td style="text-align: center;">—</td></tr> <tr><td>2. Single family or multi-family</td><td style="text-align: right;">Single family</td><td style="text-align: center;">—</td></tr> <tr><td>3. Number of units, if multi-family</td><td style="text-align: right;">1</td><td style="text-align: center;">—</td></tr> <tr><td>4. Number of Bedrooms</td><td style="text-align: right;">5</td><td style="text-align: center;">—</td></tr> <tr><td>5. Is this a worst case?</td><td style="text-align: right;">No</td><td style="text-align: center;">—</td></tr> <tr><td>6. Conditioned floor area (ft²)</td><td style="text-align: right;">4219 ft²</td><td style="text-align: center;">—</td></tr> <tr><td>7. Glass type¹ and area: (Label reqd. by 13-104.4.5 if not default)</td><td></td><td></td></tr> <tr><td> a. U-factor:</td><td style="text-align: right;">Description Area</td><td></td></tr> <tr><td> (or Single or Double DEFAULT)</td><td style="text-align: right;">7a. (Single, U=0.4) 96.0 ft²</td><td style="text-align: center;">—</td></tr> <tr><td> b. SHGC:</td><td></td><td></td></tr> <tr><td> (or Clear or Tint DEFAULT)</td><td style="text-align: right;">7b. (SHGC=0.32) 847.1 ft²</td><td style="text-align: center;">—</td></tr> <tr><td>8. Floor types</td><td></td><td></td></tr> <tr><td> a. Slab-On-Grade Edge Insulation</td><td style="text-align: right;">R=0.0, 289.0(p) ft</td><td style="text-align: center;">—</td></tr> <tr><td> b. N/A</td><td></td><td style="text-align: center;">—</td></tr> <tr><td> c. N/A</td><td></td><td style="text-align: center;">—</td></tr> </table>	1. New construction or existing	Addition	—	2. Single family or multi-family	Single family	—	3. Number of units, if multi-family	1	—	4. Number of Bedrooms	5	—	5. Is this a worst case?	No	—	6. Conditioned floor area (ft ²)	4219 ft ²	—	7. Glass type ¹ and area: (Label reqd. by 13-104.4.5 if not default)			a. U-factor:	Description Area		(or Single or Double DEFAULT)	7a. (Single, U=0.4) 96.0 ft ²	—	b. SHGC:			(or Clear or Tint DEFAULT)	7b. (SHGC=0.32) 847.1 ft ²	—	8. Floor types			a. Slab-On-Grade Edge Insulation	R=0.0, 289.0(p) ft	—	b. N/A		—	c. N/A		—	<table style="width: 100%; border-collapse: collapse;"> <tr><td>12. Cooling systems</td><td></td><td></td></tr> <tr><td> a. Central Unit</td><td></td><td style="text-align: right;">Cap: 35.0 kBtu/hr — SEER: 17.80 —</td></tr> <tr><td> b. Central Unit</td><td></td><td style="text-align: right;">Cap: 25.6 kBtu/hr — SEER: 18.30 —</td></tr> <tr><td> c. 2 Others (See details)</td><td style="text-align: right;">Additional</td><td style="text-align: right;">Cap: 36.0 kBtu/hr —</td></tr> <tr><td>13. Heating systems</td><td></td><td></td></tr> <tr><td> a. Electric Heat Pump/Split</td><td></td><td style="text-align: right;">Cap: 36.0 kBtu/hr — HSPF: 9.20 —</td></tr> <tr><td> b. Electric Heat Pump/Split</td><td></td><td style="text-align: right;">Cap: 22.6 kBtu/hr — HSPF: 8.50 —</td></tr> <tr><td> c. 2 Others (See details)</td><td style="text-align: right;">Additional</td><td style="text-align: right;">Cap: 35.6 kBtu/hr —</td></tr> <tr><td>14. Hot water systems</td><td></td><td></td></tr> <tr><td> a. N/A</td><td></td><td style="text-align: center;">—</td></tr> <tr><td> b. N/A</td><td></td><td style="text-align: center;">—</td></tr> <tr><td> c. Conservation credits</td><td></td><td style="text-align: center;">—</td></tr> <tr><td> (HR-Heat recovery, Solar</td><td></td><td></td></tr> <tr><td> DHP-Dedicated heat pump)</td><td></td><td></td></tr> <tr><td>15. HVAC credits</td><td></td><td style="text-align: right;">PT, —</td></tr> <tr><td> (CF-Ceiling fan, CV-Cross ventilation,</td><td></td><td></td></tr> <tr><td> HF-Whole house fan,</td><td></td><td></td></tr> <tr><td> PT-Programmable Thermostat,</td><td></td><td></td></tr> <tr><td> MZ-C-Multizone cooling,</td><td></td><td></td></tr> <tr><td> MZ-H-Multizone heating)</td><td></td><td></td></tr> </table>	12. Cooling systems			a. Central Unit		Cap: 35.0 kBtu/hr — SEER: 17.80 —	b. Central Unit		Cap: 25.6 kBtu/hr — SEER: 18.30 —	c. 2 Others (See details)	Additional	Cap: 36.0 kBtu/hr —	13. Heating systems			a. Electric Heat Pump/Split		Cap: 36.0 kBtu/hr — HSPF: 9.20 —	b. Electric Heat Pump/Split		Cap: 22.6 kBtu/hr — HSPF: 8.50 —	c. 2 Others (See details)	Additional	Cap: 35.6 kBtu/hr —	14. Hot water systems			a. N/A		—	b. N/A		—	c. Conservation credits		—	(HR-Heat recovery, Solar			DHP-Dedicated heat pump)			15. HVAC credits		PT, —	(CF-Ceiling fan, CV-Cross ventilation,			HF-Whole house fan,			PT-Programmable Thermostat,			MZ-C-Multizone cooling,			MZ-H-Multizone heating)		
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Glass/Floor Area: 0.20	Total as-built points: 23670	PASS
	Total base points: 39263	

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

PREPARED BY: R. Scott Dodd

DATE: 3-30-07

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

OWNER/AGENT: _____

DATE: _____

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



BUILDING OFFICIAL: _____

DATE: 3-30-07

¹ Predominant glass type. For actual glass type and areas, see Summer & Winter Glass output on pages 2&4.
EnergyGauge® (Version: FLRCSB v4.5)

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 Middle Rd, Sewals Point, FL, 34996-

PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BSPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X SPM X SOF = Points			
.18	4219.0	30.53	23185.0	1. Single, U=0.39, SHGC=0.3	S	3.0	5.8	36.0	27.12	0.66	648.0
				2. Single, U=0.39, SHGC=0.3	SW	3.0	5.8	13.8	29.80	0.69	285.0
				3. Single, U=0.39, SHGC=0.3	W	3.0	5.8	54.0	28.63	0.74	1143.0
				4. Single, U=0.39, SHGC=0.3	NW	3.0	5.8	13.8	19.42	0.79	210.0
				5. Single, U=0.39, SHGC=0.3	N	22.5	7.8	48.0	14.42	0.61	419.0
				6. Single, U=0.39, SHGC=0.3	W	13.0	7.8	96.0	28.63	0.46	1270.0
				7. Single, U=0.39, SHGC=0.3	S	22.5	7.8	48.0	27.12	0.43	557.0
				8. Single, U=0.39, SHGC=0.3	W	3.0	5.8	36.0	28.63	0.74	762.0
				9. Single, U=0.39, SHGC=0.3	W	3.0	7.8	24.0	28.63	0.82	565.0
				10. Double, U=0.39, SHGC=0	W	3.0	5.8	36.0	28.63	0.74	762.0
				11. Single, U=0.39, SHGC=0.	N	3.0	4.8	20.0	14.42	0.80	230.0
				12. Single, U=0.39, SHGC=0.	W	0.0	0.0	24.0	28.63	1.00	687.0
				13. Single, U=0.39, SHGC=0.	N	3.0	2.3	6.3	14.42	0.68	61.0
				14. Single, U=0.39, SHGC=0.	N	3.0	4.8	30.0	14.42	0.80	345.0
				15. Single, U=0.39, SHGC=0.	E	3.0	7.3	45.0	31.93	0.80	1150.0
				16. Single, U=0.39, SHGC=0.	E	10.0	8.0	48.0	31.93	0.48	729.0
				17. Single, U=0.39, SHGC=0.	E	3.0	7.3	45.0	31.93	0.80	1150.0
				18. Single, U=0.39, SHGC=0.	N	3.0	5.8	10.8	14.42	0.83	129.0
				19. Single, U=0.39, SHGC=0.	NE	3.0	5.8	21.0	22.37	0.76	355.0
				20. Single, U=0.39, SHGC=0.	SE	3.0	5.8	21.0	32.44	0.68	465.0
				21. Single, U=0.39, SHGC=0.	S	3.0	5.8	10.8	27.12	0.66	194.0
				22. Single, U=0.39, SHGC=0.	S	3.0	2.8	6.6	27.12	0.51	91.0
				23. Single, U=0.39, SHGC=0.	W	3.0	4.8	15.0	28.63	0.68	293.0
				24. Single, U=0.39, SHGC=0.	W	5.0	7.8	48.0	28.63	0.68	930.0
				25. Single, U=0.39, SHGC=0.	N	3.0	4.8	30.0	14.42	0.80	345.0
				26. Single, U=0.39, SHGC=0.	N	3.0	4.8	30.0	14.42	0.80	345.0
				27. Single, U=0.39, SHGC=0.	E	3.0	4.8	30.0	31.93	0.67	639.0
				As-Built Total:				847.1	14759.0		
WALL TYPES				Area X BSPM = Points		Type	R-Value	Area X SPM = Points			
Adjacent	153.0	1.00	153.0	1. Frame, Wood, Exterior		11.0	864.6	2.70	2334.4		
Exterior	2794.7	2.70	7545.7	2. Concrete, Ext Insul, Exterior		0.0	1930.1	4.20	8106.4		
				3. Frame, Wood, Adjacent		11.0	153.0	1.00	153.0		
Base Total:	2947.7		7698.7	As-Built Total:			2947.7		10593.8		
DOOR TYPES				Area X BSPM = Points		Type	Area X SPM = Points				
Adjacent	21.0	2.60	54.6	1. Adjacent Wood			21.0	3.80	79.8		
Exterior	0.0	0.00	0.0								
Base Total:	21.0		54.6	As-Built Total:			21.0		79.8		

SUMMER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 Middle Rd, Sewals Point, FL, 34996- PERMIT #:

BASE				AS-BUILT					
CEILING TYPES	Area X	BSPM =	Points	Type	R-Value	Area X	SPM X SCM =	Points	
Under Attic	3415.7	2.80	9564.0	1. Under Attic	30.0	3415.7	2.77 X 1.00	9461.5	
Base Total:	3415.7		9564.0	As-Built Total:		3415.7		9461.5	
FLOOR TYPES	Area X	BSPM =	Points	Type	R-Value	Area X	SPM =	Points	
Slab	289.0(p)	-20.0	-5780.0	1. Slab-On-Grade Edge Insulation	0.0	289.0(p)	-20.00	-5780.0	
Raised	0.0	0.00	0.0						
Base Total:			-5780.0	As-Built Total:		289.0		-5780.0	
INFILTRATION	Area X	BSPM =	Points			Area X	SPM =	Points	
	4219.0	18.79	79275.0			4219.0	18.79	79275.0	
Summer-Base-Points: 113997.3				Summer-As-Built-Points: 108389.1					
Total Summer X System = Cooling Points	Points	Multiplier	Points	Total X Cap X Duct X System X Credit = Cooling Component Ratio Multiplier Multiplier Multiplier Points	(System - Points)	(DM x DSM x AHU)			
				(sys 1: Central Unit 25600btuh, SEER/EFF(18.3) Ducts:Con(S),Con(R),Int(AH),R6.0(INS)					
				108389	0.27	(1.00 x 1.165 x 0.90)	0.186	0.950	5331.4
				(sys 2: Central Unit 35000btuh, SEER/EFF(17.8) Ducts:Con(S),Con(R),Int(AH),R6.0(INS)					
				108389	0.36	(1.00 x 1.165 x 0.90)	0.192	0.950	7493.8
				(sys 3: Central Unit 18000btuh, SEER/EFF(15.5) Ducts:Con(S),Con(R),Int(AH),R6.0(INS)					
				108389	0.19	(1.00 x 1.165 x 0.90)	0.220	0.950	4425.8
				(sys 4: Central Unit 18000btuh, SEER/EFF(15.5) Ducts:Con(S),Con(R),Int(AH),R6.0(INS)					
				108389	0.19	(1.00 x 1.165 x 0.90)	0.220	0.950	4425.8
113997.3	0.3250		37049.1	108389.1	1.00	1.048	0.200	0.950	21560.7

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 Middle Rd, Sewals Point, FL, 34996- PERMIT #:

BASE				AS-BUILT							
GLASS TYPES											
.18 X Conditioned X BWPM = Points Floor Area				Type/SC	Overhang Ornt Len Hgt			Area X WPM X WOF = Points			
.18	4219.0	3.60	2734.0	1. Single, U=0.39, SHGC=0.3	S	3.0	5.8	36.0	1.61	1.14	66.0
				2. Single, U=0.39, SHGC=0.3	SW	3.0	5.8	13.8	1.86	1.05	26.0
				3. Single, U=0.39, SHGC=0.3	W	3.0	5.8	54.0	2.01	1.01	109.0
				4. Single, U=0.39, SHGC=0.3	NW	3.0	5.8	13.8	2.17	0.98	29.0
				5. Single, U=0.39, SHGC=0.3	N	22.5	7.8	48.0	2.18	0.95	99.0
				6. Single, U=0.39, SHGC=0.3	W	13.0	7.8	96.0	2.01	1.03	199.0
				7. Single, U=0.39, SHGC=0.3	S	22.5	7.8	48.0	1.61	1.44	111.0
				8. Single, U=0.39, SHGC=0.3	W	3.0	5.8	36.0	2.01	1.01	73.0
				9. Single, U=0.39, SHGC=0.3	W	3.0	7.8	24.0	2.01	1.00	48.0
				10. Double, U=0.39, SHGC=0	W	3.0	5.8	36.0	2.01	1.01	73.0
				11. Single, U=0.39, SHGC=0.	N	3.0	4.8	20.0	2.18	0.98	42.0
				12. Single, U=0.39, SHGC=0.	W	0.0	0.0	24.0	2.01	1.00	48.0
				13. Single, U=0.39, SHGC=0.	N	3.0	2.3	6.3	2.18	0.96	13.0
				14. Single, U=0.39, SHGC=0.	N	3.0	4.8	30.0	2.18	0.98	63.0
				15. Single, U=0.39, SHGC=0.	E	3.0	7.3	45.0	1.68	1.04	78.0
				16. Single, U=0.39, SHGC=0.	E	10.0	8.0	48.0	1.68	1.14	92.0
				17. Single, U=0.39, SHGC=0.	E	3.0	7.3	45.0	1.68	1.04	78.0
				18. Single, U=0.39, SHGC=0.	N	3.0	5.8	10.8	2.18	0.98	23.0
				19. Single, U=0.39, SHGC=0.	NE	3.0	5.8	21.0	2.07	1.00	43.0
				20. Single, U=0.39, SHGC=0.	SE	3.0	5.8	21.0	1.48	1.11	34.0
				21. Single, U=0.39, SHGC=0.	S	3.0	5.8	10.8	1.61	1.14	19.0
				22. Single, U=0.39, SHGC=0.	S	3.0	2.8	6.6	1.61	1.35	14.0
				23. Single, U=0.39, SHGC=0.	W	3.0	4.8	15.0	2.01	1.01	30.0
				24. Single, U=0.39, SHGC=0.	W	5.0	7.8	48.0	2.01	1.01	98.0
				25. Single, U=0.39, SHGC=0.	N	3.0	4.8	30.0	2.18	0.98	63.0
				26. Single, U=0.39, SHGC=0.	N	3.0	4.8	30.0	2.18	0.98	63.0
				27. Single, U=0.39, SHGC=0.	E	3.0	4.8	30.0	1.68	1.06	53.0
				As-Built Total:				847.1	1687.0		
WALL TYPES				Area X BWPM = Points		Type	R-Value	Area X WPM = Points			
Adjacent	153.0	0.50	76.5	1. Frame, Wood, Exterior		11.0	864.6	0.60	518.8		
Exterior	2794.7	0.60	1676.8	2. Concrete, Ext Insul, Exterior		0.0	1930.1	1.90	3667.2		
				3. Frame, Wood, Adjacent		11.0	153.0	0.50	76.5		
Base Total:	2947.7		1753.3	As-Built Total:			2947.7		4262.5		
DOOR TYPES				Area X BWPM = Points		Type	Area X WPM = Points				
Adjacent	21.0	1.30	27.3	1. Adjacent Wood			21.0	1.90	39.9		
Exterior	0.0	0.00	0.0								
Base Total:	21.0		27.3	As-Built Total:			21.0		39.9		

WINTER CALCULATIONS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 Middle Rd, Sewals Point, FL, 34996-	PERMIT #:
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BASE	AS-BUILT
CEILING TYPES Area X BWPM = Points	Type R-Value Area X WPM X WCM = Points
Under Attic 3415.7 0.10 341.6	1. Under Attic 30.0 3415.7 0.10 X 1.00 341.6
Base Total: 3415.7 341.6	As-Built Total: 3415.7 341.6
FLOOR TYPES Area X BWPM = Points	Type R-Value Area X WPM = Points
Slab 289.0(p) -2.1 -606.9	1. Slab-On-Grade Edge Insulation 0.0 289.0(p) -2.10 -606.9
Raised 0.0 0.00 0.0	
Base Total: -606.9	As-Built Total: 289.0 -606.9
INFILTRATION Area X BWPM = Points	Area X WPM = Points
4219.0 -0.06 -253.1	4219.0 -0.06 -253.1
Winter-Base-Points: 3996.2	Winter-As-Built-Points: 5470.9
Total Winter X System = Heating Points Multiplier Points	Total X Cap X Duct X System X Credit = Heating Component Ratio Multiplier Multiplier Multiplier Points (System - Points) (DM x DSM x AHU)
	(sys 1: Electric Heat Pump 22600 btuh ,EFF(8.5) Ducts:Con(S),Con(R),Int(AH),R6.0 5470.9 0.240 (1.000 x 1.137 x 0.91) 0.401 0.950 517.6 (sys 2: Electric Heat Pump 36000 btuh ,EFF(9.2) Ducts:Con(S),Con(R),Int(AH),R6.0 5470.9 0.382 (1.000 x 1.137 x 0.91) 0.371 0.950 761.7 (sys 3: Electric Heat Pump 17800 btuh ,EFF(8.3) Ducts:Con(S),Con(R),Int(AH),R6.0 5470.9 0.189 (1.000 x 1.137 x 0.91) 0.411 0.950 417.5 (sys 4: Electric Heat Pump 17800 btuh ,EFF(8.3) Ducts:Con(S),Con(R),Int(AH),R6.0 5470.9 0.189 (1.000 x 1.137 x 0.91) 0.411 0.950 417.5
3996.2 0.5540 2213.9	5470.9 1.00 1.035 0.392 0.950 2109.7

WATER HEATING & CODE COMPLIANCE STATUS

Residential Whole Building Performance Method A - Details

ADDRESS: 23 Middle Rd, Sewals Point, FL, 34996-	PERMIT #:
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BASE	AS-BUILT
WATER HEATING	
Number of Bedrooms X Multiplier = Total	Tank Volume EF Number of Bedrooms X Tank Ratio X Multiplier X Credit = Total Multiplier
5 2273.00 0.0	5 1.00 2273.00 1.00 11365.0
	As-Built Total: 0.0

CODE COMPLIANCE STATUS							
BASE				AS-BUILT			
Cooling Points	+	Heating Points	+	Hot Water Points	=	Total Points	
37049		2214		0		39263	
21561		2110		0		23670	

PASS



Code Compliance Checklist

Residential Whole Building Performance Method A - Details

ADDRESS: 23 Middle Rd, Sewals Point, FL, 34996-

PERMIT #:

6A-21 INFILTRATION REDUCTION COMPLIANCE CHECKLIST

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

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

COMPONENTS	SECTION	REQUIREMENTS	CHECK
Water Heaters	612.1	Comply with efficiency requirements in Table 612.1.ABC.3.2. Switch or clearly marked circuit breaker (electric) or cutoff (gas) must be provided. External or built-in heat trap required.	
Swimming Pools & Spas	612.1	Spas & heated pools must have covers (except solar heated). Non-commercial pools must have a pump timer. Gas spa & pool heaters must have a minimum thermal efficiency of 78%.	
Shower heads	612.1	Water flow must be restricted to no more than 2.5 gallons per minute at 80 PSIG.	
Air Distribution Systems	610.1	All ducts, fittings, mechanical equipment and plenum chambers shall be mechanically attached, sealed, insulated, and installed in accordance with the criteria of Section 610. Ducts in unconditioned attics: R-6 min. insulation.	
HVAC Controls	607.1	Separate readily accessible manual or automatic thermostat for each system.	
Insulation	604.1, 602.1	Ceilings-Min. R-19. Common walls-Frame R-11 or CBS R-3 both sides. Common ceiling & floors R-11.	



STATE OF FLORIDA
DEPARTMENT OF HEALTH
MARTIN COUNTY HEALTH DEPARTMENT
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMIT

owner's copy

CENTRAX #: 43-SS-08114
OSTDSNBR: 05-1344-M

CONSTRUCTION PERMIT FOR:

[] New System [] Existing System [] Holding Tank [] Innovative Other
[] Repair [] Abandonment [] Temporary [] _____

APPLICANT: Masterpiece Builders/Mariano Residence AGENT: N/A, N/A

PROPERTY STREET ADDRESS: 23 Middle Rd SEWALL'S POINT FL 33494

LOT: 42 BLOCK: _____ SUBDIVISION: HIGH POINT
[Section/Township/Range/Parcel No.]

PROPERTY ID #: 13-38-41- [OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME PERIOD. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

SYSTEM DESIGN AND SPECIFICATIONS

(EXISTING TANK)

T [1350] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES: [Y]
A [0] Gallons MULTI-CHAMBERED/IN SERIES: []
N [0] GALLONS GREASE INTERCEPTOR CAPACITY
K [0] GALLONS DOSING TANK CAPACITY [0] GALLONS @ [0] DOSES PER 24 HRS # PUMPS [0]

D [500] SQUARE FEET PRIMARY DRAINFIELD SYSTEM *Trenches on Bed*
R [750] SQUARE FEET SYSTEM
A TYPE SYSTEM: [Y] STANDARD [N] FILLED [N] MOUND [N] _____
I CONFIGURATION: [Y] TRENCH OR [Y] BED [N] _____
N

F LOCATION TO BENCHMARK: Mag Nail/TT In Road Near SE Prop Line @ 31.28 NGVD
I ELEVATION OF PROPOSED SYSTEM SITE [32.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT
E BOTTOM OF DRAINFIELD TO BE [62.0] [INCHES] [BELOW] BENCHMARK/REFERENCE POINT
L
D FILL REQUIRED: [0.0] INCHES NATURAL/ EXISTING SOIL EXCAVATION REQUIRED: [0.0] INCHES
OTHER REMARKS:

The licensed contractor installing the system is responsible for installing the minimum category of tank in accordance with s. 64E-6.013(3)(f), F.A.C. System installation must meet all requirements of Chapter 64E-6, F.A.C. The drainfield must be at least 5 feet from the property line(s). Install an approved outlet filter device in the septic tank. A minimum of 6" and a maximum of 18" of moderately or slightly limited soil cap allowed over drainfield-grading may be necessary to prevent excess cover. Existing Septic tank must be properly abandoned. Replacement drainfield must be properly graded and stabilized within 14 days of system construction approval. All attached general and special conditions and items above must be completed prior to Final Inspection and Approval.

SPECIFICATIONS BY: DeWald, Angeline *DeWald 05-01-05* TITLE: EH Specialist II
APPROVED BY: Washam, Bob TITLE: Env. Manager Martin CHD

DATE ISSUED: 12/30/2005 EXPIRATION DATE: 6/30/2007

DH 4016, 03/97 (Obsoletes previous editions which may not be used)
(Stock Number: 5744-001-4016-0) [ostds_cons_4016-1] Page 1 of 2

** NOTE: See attached Applicant's notice of permitting rights. **



Martin County Health Department

SEPTIC SYSTEM GENERAL CONDITIONS LIST

RMIT 43-SS-8114

Existing

If the minimum finished floor foundation elevation (F.F.F.E.) is below the drainfield filled elevation of 0 inches (above original grade 28.6 NVD), please contact this office to determine possible setback changes from the drainfield (setback is calculated by adding 4:1 slope, 4-foot shoulder and possible berm). Additionally, if the driveway or sidewalk is proposed to be lower than the drainfield filled elevation, please contact the department to determine possible setback changes. Note: Local building authority determines minimum F.F.F.E. and stub out requirements. Health Department recommendations are used for drainfield fill and setback requirements only.

For single-family homes, if the roof drip line is within 5 feet of the drainfield, shoulder or slope and the roof drains toward the septic system, gutters are required.

Septic system must be installed in unobstructed area as shown on the approved site plan. Alteration of the information or conditions of this permit found to be in non-compliance will be sufficient cause for revocation of this permit. If any information on a permit changes, an amended application and \$50 review fee must be submitted to our office immediately.

Future ponds or surface water created onsite must be greater than 75' from septic system.

The mound area must be sodded prior to a request for final grade inspection.

Non-potable irrigation lines must be separated from the drainfield by two feet unless an approved backflow prevention device is properly installed.

\$70.00 re-inspection fee is required if the well is not installed at time of initial septic system inspection and a \$75.00 re-inspection fee is required if violations are found during the septic system inspection.

If an inspector does not witness the work conducted during a septic abandonment, the contractor must submit a statement that the work was completed.

If a professional engineer designs the septic system, the engineer must certify that the installed system complies with the design and installation requirements.

For commercial operations, occupational approval will not be given until all requirements for an onsite public water system, food operation or institutional establishment are met.

ADDITIONAL CONDITIONS LIST Special conditions marked "X" are in effect

X Driveway may NOT be installed in designated area available for septic.

- 1. Driveway and sidewalk elevation must be at least 6" higher than the top of the drainfield elevation. The driveway cannot be constructed within 4 feet of the system's available area.
2. Prior to final construction approval, the property owner must apply for an operating permit and pay the \$ Annual Permit Fee (For Indust./Manuf. Aerobic System Commercial System Performance-Based).

Excavation requirements: (Note: Excavation refers to removal of natural or existing soils, not pad fill)

- 1. Excavate one foot beyond drainfield area to a depth of inches below natural/ existing grade elevation of feet N.G.V.D. / Assumed. In addition to item #1, 33% of unsuitable soils at depths greater than inches below #1 elevation above must be removed to a depth of slightly limited soils.
2. If the proposed drainfield is to be installed within 10 feet of a building foundation or swimming pool structure, the four-foot drainfield shoulder must be filled with suitable soils prior to building construction.
3. If a mound or filled drainfield is proposed, see following sketch. An engineer's design is required if a retaining wall is proposed within the drainfield slope areas of a mound system. No boulders or trees are allowed within the drainfield or drainfield shoulder area. Applicant is responsible for replacing excavated soils with a good grade of soil suitable for drainfield installation.

Completed By [Signature] Date 12/30/05

See Reverse Side for Mound or Filled Drainfield Requirements



STATE OF FLORIDA
DEPARTMENT OF HEALTH
MARTIN COUNTY HEALTH DEPARTMENT
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
CONSTRUCTION PERMIT

CENTRAX #: 43-SS-08114
OSTDSNBR: 05-1348-A

CONSTRUCTION PERMIT FOR:

[] New System [] Existing System [] Holding Tank [] Innovative Other
[] Repair [X] Abandonment [] Temporary [] _____

APPLICANT: Masterpiece Builders/Mariano Residence AGENT: N/A, N/A

PROPERTY STREET ADDRESS: 23 Middle Rd SEWALL'S POINT FL 33494

LOT: 42 BLOCK: _____ SUBDIVISION: HIGH POINT

[Section/Township/Range/Parcel No.]

PROPERTY ID #: 13-38-41-

[OR TAX ID NUMBER]

SYSTEM MUST BE CONSTRUCTED IN ACCORDANCE WITH SPECIFICATIONS AND STANDARDS OF CHAPTER 64E-6, FAC DEPARTMENT APPROVAL OF SYSTEM DOES NOT GUARANTEE SATISFACTORY PERFORMANCE FOR ANY SPECIFIC TIME PERIOD. ANY CHANGE IN MATERIAL FACTS WHICH SERVED AS A BASIS FOR ISSUANCE OF THIS PERMIT, REQUIRE THE APPLICANT TO MODIFY THE PERMIT APPLICATION. SUCH MODIFICATIONS MAY RESULT IN THIS PERMIT BEING MADE NULL AND VOID. ISSUANCE OF THIS PERMIT DOES NOT EXEMPT THE APPLICANT FROM COMPLIANCE WITH OTHER FEDERAL, STATE OR LOCAL PERMITTING REQUIRED FOR PROPERTY DEVELOPMENT.

SYSTEM DESIGN AND SPECIFICATIONS

(EXISTING TANK)

T [1050] Gallons SEPTIC TANK MULTI-CHAMBERED/IN SERIES: [Y]

A [0] Gallons MULTI-CHAMBERED/IN SERIES: []

N [0] GALLONS GREASE INTERCEPTOR CAPACITY

~~K [0] GALLONS DOSING TANK CAPACITY [0] GALLONS @ [0] DOSES PER 24 HRS # PUMPS [0]~~

D [0] SQUARE FEET PRIMARY DRAINFIELD SYSTEM

R [0] SQUARE FEET SYSTEM

A TYPE SYSTEM: [N] STANDARD [N] FILLED [N] MOUND [N] _____

I CONFIGURATION: [N] TRENCH [N] BED [N] _____

N

F LOCATION TO BENCHMARK: _____

I ELEVATION OF PROPOSED SYSTEM SITE [0.0] [FEET] [BELOW] BENCHMARK/REFERENCE POINT

E BOTTOM OF DRAINFIELD TO BE [0.0] [FEET] [] BENCHMARK/REFERENCE POINT.

L

D FILL REQUIRED: [0.0] INCHES NATURAL/ EXISTING SOIL EXCAVATION REQUIRED: [0.0] INCHES

OTHER REMARKS:

The licensed contractor installing the system is responsible for installing the minimum category of tank in accordance with s. 64E-6.013(3)(f), F.A.C.

Pump tank, crush or rupture bottom, fill with suitable soil, provide pump out receipt, contact this department for inspection.

SPECIFICATIONS BY: DeWald, Angeline *DeWald*

TITLE: EH Specialist II

APPROVED BY: Washam, Bob

TITLE: Env. Manager

Martin CHD

DATE ISSUED: 12/30/2005

EXPIRATION DATE: 3/30/2006

DH 4016, 03/97 (Obsoletes previous editions which may not be used)

(Stock Number: 5744-001-4016-0) [ostds_cons_4016-1]

Page 1

** NOTE: See attached Applicant's notice of permitting rights. **



STATE OF FLORIDA
DEPARTMENT OF HEALTH
ONSITE SEWAGE TREATMENT AND DISPOSAL SYSTEM
SITE EVALUATION AND SYSTEM SPECIFICATIONS

PERMIT #. 4355 8114

APPLICANT: Nicholas Mariano AGENT: COOKE'S ENVIRONMENTAL SERVICES

LOT: 42 BLOCK: _____ SUBDIVISION: High Point

PROPERTY ID #: _____ [Sector/Township/Parcel No. or Tax ID Number]

TO BE COMPLETED BY ENGINEER, HEALTH DEPARTMENT EMPLOYEE, OR OTHER QUALIFIED PERSON. ENGINEERS MUST PROVIDE REGISTRATION NUMBER AND SIGN AND SEAL EACH PAGE OF SUBMITTAL. COMPLETE ALL ITEMS.

PROPERTY SIZE CONFORMS TO SITE PLAN: YES NO NET USABLE AREA AVAILABLE: _____ ACRES
 ANNUAL ESTIMATED SEWAGE FLOW: _____ GALLONS PER DAY [RESIDENCES-TABLE 1/OTHER-TABLE2]
 HORIZONTAL SEWAGE FLOW: _____ GALLONS PER DAY [1500 GPD/ACRE OR 2500 GPD/ACRE]
 UNOBSTRUCTED AREA AVAILABLE: _____ SQFT UNOBSTRUCTED AREA REQUIRED: _____ SQFT

BENCHMARK/REFERENCE POINT LOCATION: top of tank
 ELEVATION OF PROPOSED SYSTEM SITE IS 12 [INCHES/FT] [ABOVE/BELOW] BENCHMARK/REFERENCE POINT

MINIMUM SETBACK WHICH CAN BE MAINTAINED FROM THE PROPOSED SYSTEM TO THE FOLLOWING FEATURES
 SURFACE WATER: _____ FT DITCHES/SWALES: _____ FT NORMALLY WET? YES NO
 PAVEMENTS: PUBLIC: _____ FT LIMITED USE: _____ FT PRIVATE: _____ FT NON-POTABLE: _____ FT
 BUILDING FOUNDATIONS: _____ FT PROPERTY LINES: _____ FT POTABLE WATER LINES: _____ FT

IS SITE SUBJECT TO FREQUENT FLOODING: YES NO 10 YEAR FLOODING? YES NO
 10 YEAR FLOOD ELEVATION FOR SITE: _____ FT MSL/NGVD SITE ELEVATION: _____ FT MSL/NGVD

SOIL PROFILE INFORMATION SITE 1

MUNSELL #/COLOR	TEXTURE	DEPTH
<u>10YR 5/1 GRAY</u>	<u>sand</u>	<u>0 TO 5</u>
<u>4/1 light gray</u>	<u>u</u>	<u>5 TO 72</u>
		TO

USDA SOIL SERIES: #41 Jonathan sand

SOIL PROFILE INFORMATION SITE 2

MUNSELL #/COLOR	TEXTURE	DEPTH
<u>10YR 5/1 GRAY</u>		<u>0 TO 6</u>
<u>6/1 light gray</u>		<u>6 TO 72</u>
		TO

USDA SOIL SERIES: #41 Jonathan sand

UNOBSERVED WATER TABLE: N/A INCHES [ABOVE / ~~BELOW~~] EXISTING GRADE. TYPE: [PERCHED / APPARENT]
 ESTIMATED WET SEASON WATER TABLE ELEVATION: 72+ INCHES [ABOVE / ~~BELOW~~] EXISTING GRADE
 WATER TABLE VEGETATION: YES NO MOTTLING: YES NO DEPTH: _____ INCHES

SOIL TEXTURE/LOADING RATE FOR SYSTEM SIZING: 1/8 sand DEPTH OF EXCAVATION: _____ INCHES
 FIELD CONFIGURATION: TRENCH BED OTHER (SPECIFY) _____
 REMARKS/ADDITIONAL CRITERIA: _____

EVALUATED BY: [Signature] DATE: 11/23/05

City of Butler

subdiv

LEGAL DESCRIPTION Lot 42 High Point

STREET ADDRESS 23 Middle Road

SEPTIC PERMIT NO. HN 89-293

442

BUILDING PERMIT NO. 2559

NUMBER OF BEDROOMS 3

LOT SIZE 1500 FT² HEATED OR COOLED AREA 2877 FT² BUILDING TYPE CBS

WATER SUPPLY: PUBLIC PRIVATE

WELL PERMIT NO.: _____

WELL DRILLER: _____

SEPTIC INSTALLER: _____

TANK SIZE: 1050

DRAINFIELD DIMENSIONS: 12' W x 34' L

SOIL TYPE: Stone Sand / Prolo

DEPTH TO IMPERVIOUS SOIL: _____

IMPERVIOUS SOIL: 76'

WET SEASON WATER TABLE: 76'

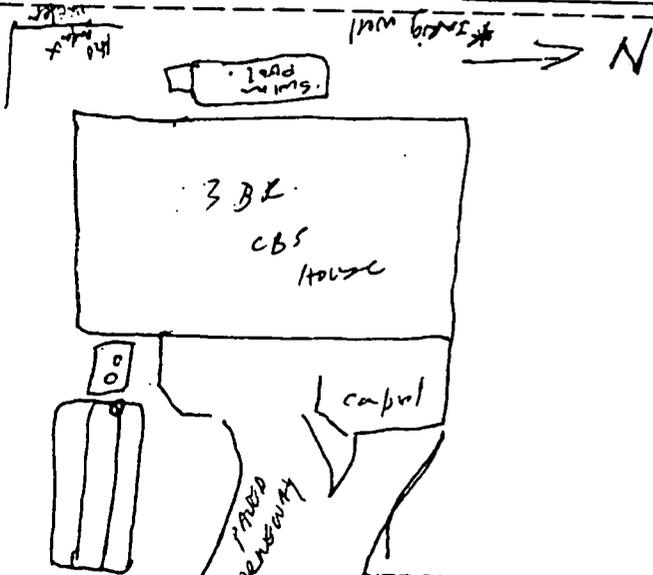
TOP OF STUBOUT IS: _____

TOP OF TANK IS: _____

MINIMUM DISTANCE OF DRAINFIELD

ROCK TO PROPERTY LINE: 5' E, S & R

OTHER SITE INFO.: _____



SITE PLAN

INCLUDE WELL, WATER LINE, DRIVEWAY, ROAD, SEPTIC SYSTEM, BUILDING AND NORTH ARROW.

ORIGINAL INSPECTOR: Richard

DATE: 7/25/89

DATE	DESCRIPTION
9/25/89	Cover held for final grade and driveway. wk.
11/7/89	FMI - excess cover on drainfield - approx 3' 9" 5' of cover over entire D.F. wk.
11-9-89	\$25.00 reinspection Res wk.
11/9/89	Septic system and driveway installed per code. Pass ins.
12/2005	Abandon this system; Mod house - Install new system 4355 8114

FINAL APPROVAL BY: Richard

DATE: 11/7/89

② 11-13-89

NOTICE OF RIGHTS

A party whose substantial interest is affected by this order may petition for an administrative hearing pursuant to sections 120.569 and 120.57, Florida Statutes. Such proceedings are governed by rule 28-106, Florida Administrative Code. A petition for administrative hearing must be in writing and must be received by the Agency Clerk for the Department, within twenty-one (21) days from the receipt of this order. The address of the Agency Clerk is 4052 Bald Cypress Way, Bin #A02, Tallahassee, Florida 32399-1703. The Agency Clerk's facsimile number is 850-410-1448.

Mediation is not available as an alternative remedy.

Your failure to submit a petition for hearing within 21 days from receipt of this order will constitute a waive of your right to an administrative hearing, and this order shall become a "Final Order".

Should this order become a final order, a party who is adversely affected by it is entitled to judicial review pursuant to Section 120.68, Florida Statutes. Review proceedings are governed by the Florida Rules of Appellate Procedure. Such proceedings may be commenced by filing one copy of a Notice of Appeal with Agency Clerk of the Department of Health and a second copy, accompanied by the filing fees required by law, with the Court of Appeal in the appropriate District Court. The notice must be filed within 30 days of rendition of the final order.

*Sewalls Point
HVAC Load Calculations*

for

Nick Mariano
23 Middle Rd
Sewals Point, FL 34996

Elite Software

**RHVAC RESIDENTIAL
HVAC LOADS**

Prepared By:

R Scott Dodd
Dodd Enterprises Inc
1296 SE Industrial Blvd.
Port Saint Lucie, FL 34952
772-398-2344 / 398-2392
Friday, March 30, 2007



Project Report

General Project Information

Project Title: Sewalls Point
 Project Date: 06/30/2006
 Client Name: Nick Mariano
 Client Address: 23 Middle Rd
 Client City: Sewalls Point, FL 34996
 Company Name: Dodd Enterprises Inc
 Company Representative: R Scott Dodd
 Company Address: 1296 SE Industrial Blvd.
 Company City: Port Saint Lucie, FL 34952
 Company Phone: 772-398-2344 / 398-2392
 Company Fax: 772-335-3310
 Company E-Mail Address: DoddEnterprises@Dodd.com
 Company Website: DoddEnterprises.Dodd.com
 Company Comment:

Design Data

Reference City: Fort Pierce, Florida
 Daily Temperature Range: Medium
 Latitude: 27 Degrees
 Elevation: 25 ft.
 Altitude Factor: 0.999
 Elevation Sensible Adj. Factor: 1.000
 Elevation Total Adj. Factor: 1.000
 Elevation Heating Adj. Factor: 1.000
 Elevation Heating Adj. Factor: 1.000

	Outdoor Dry Bulb	Outdoor Wet Bulb	Indoor Rel.Hum	Indoor Dry Bulb	Grains Difference
Winter:	42	0	50	70	23
Summer:	90	78	50	75	61

Check Figures

Total Building Supply CFM:	2,781	CFM Per Square ft.:	0.659
Square ft. of Room Area:	4,218	Square ft. Per Ton:	613
Volume (ft ³) of Cond. Space:	38,940	Air Turnover Rate (per hour):	4.3

Building Loads

Total Heating Required With Outside Air:	75,886 Btuh	75.886 MBH
Total Sensible Gain:	61,137 Btuh	79 %
Total Latent Gain:	16,039 Btuh	21 %
Total Cooling Required With Outside Air:	77,175 Btuh	6.43 Tons (Based On Sensible + Latent)
		6.89 Tons (Based On 77% Sensible Capacity) (and Elev. Derating.)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



Miscellaneous Report

System 1 Master	Outdoor	Outdoor	Indoor	Indoor	Grains
Input Data	Dry Bulb	Wet Bulb	Rel.Hum	Dry Bulb	Difference
Winter:	42	0	50	70	23.11
Summer:	90	78	50	75	61.09

System 2 Main	Outdoor	Outdoor	Indoor	Indoor	Grains
Input Data	Dry Bulb	Wet Bulb	Rel.Hum	Dry Bulb	Difference
Winter:	42	0	50	72	26.99
Summer:	90	78	50	75	61.09

System 3 Bed Rooms	Outdoor	Outdoor	Indoor	Indoor	Grains
Input Data	Dry Bulb	Wet Bulb	Rel.Hum	Dry Bulb	Difference
Winter:	42	0	50	72	26.99
Summer:	90	78	50	75	61.09

System 4 Upstairs	Outdoor	Outdoor	Indoor	Indoor	Grains
Input Data	Dry Bulb	Wet Bulb	Rel.Hum	Dry Bulb	Difference
Winter:	42	0	50	72	26.99
Summer:	90	78	50	75	61.09

Duct Sizing Inputs

	Main Trunk	Runouts
Calculate:	Yes	Yes
Use Schedule:	No	No
Roughness Factor:	0.00300	0.01000
Pressure Drop:	0.1000 in.wg./100 ft.	0.1000 in.wg./100 ft.
Minimum Velocity:	650 ft./min	450 ft./min
Maximum Velocity:	900 ft./min	750 ft./min
Minimum Height:	0 in.	0 in.
Maximum Height:	0 in.	0 in.

Outside Air Data

	Winter	Summer
Infiltration:	0.688 AC/hr	0.317 AC/hr
Above Grade Volume:	X 38,940 Cu.ft.	X 38,940 Cu.ft.
	26,793 Cu.ft./hr	12,341 Cu.ft./hr
	X 0.0167	X 0.0167
Total Building Infiltration:	447 CFM	206 CFM
Total Building Ventilation:	0 CFM	0 CFM

—System 1—

Infiltration & Ventilation Sensible Gain Multiplier:	16.49 = (1.10 X 0.999 X 15.00 Summer Temp. Difference)
Infiltration & Ventilation Latent Gain Multiplier:	41.50 = (0.68 X 0.999 X 61.09 Grains Difference)
Infiltration & Ventilation Sensible Loss Multiplier:	30.77 = (1.10 X 0.999 X 28.00 Winter Temp. Difference)

—System 2—

Infiltration & Ventilation Sensible Gain Multiplier:	16.49 = (1.10 X 0.999 X 15.00 Summer Temp. Difference)
Infiltration & Ventilation Latent Gain Multiplier:	41.50 = (0.68 X 0.999 X 61.09 Grains Difference)
Infiltration & Ventilation Sensible Loss Multiplier:	32.97 = (1.10 X 0.999 X 30.00 Winter Temp. Difference)

—System 3—

Infiltration & Ventilation Sensible Gain Multiplier:	16.49 = (1.10 X 0.999 X 15.00 Summer Temp. Difference)
Infiltration & Ventilation Latent Gain Multiplier:	41.50 = (0.68 X 0.999 X 61.09 Grains Difference)
Infiltration & Ventilation Sensible Loss Multiplier:	32.97 = (1.10 X 0.999 X 30.00 Winter Temp. Difference)

—System 4—

Infiltration & Ventilation Sensible Gain Multiplier:	16.49 = (1.10 X 0.999 X 15.00 Summer Temp. Difference)
Infiltration & Ventilation Latent Gain Multiplier:	41.50 = (0.68 X 0.999 X 61.09 Grains Difference)
Infiltration & Ventilation Sensible Loss Multiplier:	32.97 = (1.10 X 0.999 X 30.00 Winter Temp. Difference)



Load Preview Report

Scope	Area	Sens Gain	Lat Gain	Net Gain	Sens Loss	Win CFM	Sum CFM	Sys CFM	Duct Size
Building: 6.43 Net Tons, 6.89 Recommended Tons, 613 ft.²/Ton, 75.89 MBH Heating									
Building	4,218	61,137	16,039	77,175	75,886	696	2,781	2,781	
System 1: 1.30 Net Tons, 1.47 Recommended Tons, 571 ft.²/Ton, 16.63 MBH Heating									
System 1	838	13,551	2,084	15,634	16,627	165	617	617	12
AED Excursion		1,107		1,107					
Duct Loads		2,415	790	3,205	3,962				
Zone 1	838	10,028	1,294	11,322	12,665	165	617	617	
1-Master Bedroom	397	5,447	436	5,883	6,715	87	335	335	1-10
15-Master Bath	229	2,775	268	3,043	3,975	52	171	171	1-8
16-Water Closet	23	258	29	287	448	6	16	16	1-2
17-Walk-in	78	700	101	801	1,395	18	43	43	1-4
18-Dressing Rm	111	848	460	1,308	132	2	52	52	1-4
System 2: 2.69 Net Tons, 2.81 Recommended Tons, 546 ft.²/Ton, 26.14 MBH Heating									
System 2	1,532	24,552	7,744	32,296	26,137	246	1,117	1,117	16
AED Excursion		942		942					
Duct Loads		6,149	1,627	7,776	7,207				
Zone 2	1,532	17,461	6,117	23,578	18,930	246	1,117	1,117	
2-Living	399	4,082	1,834	5,916	4,604	60	261	261	1-9
3-Breakfast Nook	156	2,948	1,088	4,036	5,056	66	189	189	1-8
4-Kitchen	240	2,125	65	2,190	523	7	136	136	1-7
12-Dining	304	3,867	1,582	5,449	3,436	45	247	247	1-9
13-Entry	110	984	279	1,263	1,406	18	63	63	1-5
14-Media Rm	323	3,455	1,269	4,724	3,905	51	221	221	1-9
System 3: 1.47 Net Tons, 1.57 Recommended Tons, 618 ft.²/Ton, 22.59 MBH Heating									
System 3	967	13,353	4,320	17,673	22,591	196	607	607	12
AED Excursion		1,132		1,132					
Duct Loads		4,458	1,339	5,798	7,489				
Zone 3	967	7,763	2,981	10,744	15,102	196	607	607	
5-Bath 1	84	1,107	207	1,314	1,204	16	87	87	1-5
6-Bedroom 1	260	2,714	1,084	3,798	5,697	74	212	212	1-9
7-Bath 2	103	692	194	886	990	13	54	54	1-4
8-Stair	81	1,114	536	1,650	2,463	32	87	87	1-5
9-Bedroom 2	267	1,502	660	2,162	4,096	53	118	118	1-6
10-Mud Rm	60	334	0	334	617	8	26	26	1-3
11-Laundry	112	300	300	600	35	0	23	23	1-3
System 4: 0.96 Net Tons, 1.05 Recommended Tons, 841 ft.²/Ton, 10.53 MBH Heating									
System 4	881	9,681	1,891	11,572	10,530	89	440	440	11
AED Excursion		780		780					
Duct Loads		2,270	685	2,955	3,695				
Zone 4	881	6,631	1,206	7,837	6,835	89	440	440	
19-Study Area	59	705	172	877	779	10	47	47	1-4
20-Bedroom 3	218	2,285	271	2,556	1,879	24	152	152	1-7
21-Storage	469	2,899	608	3,507	3,074	40	193	193	1-8
22-Bath Up	95	492	99	591	710	9	33	33	1-3
23-Walk-in Bed 3	40	250	56	306	393	5	17	17	1-3



Total Building Summary Loads

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolc2: Glazing-Solar Cool Impact Anderson, u-value 0.39	823.1	9,457	0	15,401	15,401
Impactsolc2: Glazing-Solar Cool Impact Anderson, u-value 0.39	24	281	0	538	538
11D: Door-Solid Core	21	123	0	123	123
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	1696.9	12,795	0	7,617	7,617
12B-0sw: Part-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	153	223	0	223	223
12B-0sw: Wall-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	9.6	28	0	22	22
13A-3ocs: Wall-Block, board insulation only, R-3 board insulation, open core, siding finish	178.5	894	0	456	456
13AB-0ocs: Part-Block, no blanket or board insulation, open core, siding finish	54.6	211	0	211	211
12F-0sw: Wall-Frame, R-21 insulation in 2 x 6 stud cavity, no board insulation, siding finish, wood studs	855	1,667	0	850	850
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	3415.7	3,227	0	7,651	7,651
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	289	9,991	0	0	0
Subtotals for structure:		38,897	0	33,092	33,092
People:	12		2,760	3,600	6,360
Equipment:			300	1,800	2,100
Lighting:	0			0	0
Ductwork:		22,354	4,441	15,293	19,734
Infiltration: Winter CFM: 447, Summer CFM: 206		14,635	8,538	3,391	11,929
Ventilation: Winter CFM: 0, Summer CFM: 0		0	0	0	0
AED Excursion:		0	0	3,960	3,960
Total Building Load Totals:		75,886	16,039	61,137	77,175

Check Figures

Total Building Supply CFM:	2,781	CFM Per Square ft.:	0.659
Square ft. of Room Area:	4,218	Square ft. Per Ton:	613
Volume (ft ³) of Cond. Space:	38,940	Air Turnover Rate (per hour):	4.3

Building Loads

Total Heating Required With Outside Air:	75,886 Btuh	75.886 MBH
Total Sensible Gain:	61,137 Btuh	79 %
Total Latent Gain:	16,039 Btuh	21 %
Total Cooling Required With Outside Air:	77,175 Btuh	6.43 Tons (Based On Sensible + Latent)
		6.89 Tons (Based On 77% Sensible Capacity) (and Elev. Derating).

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 1 Master Summary Loads

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolcl2: Glazing-Solar Cool Impact Anderson, u-value 0.39	235.8	2,577	0	4,259	4,259
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	659.7	4,765	0	2,961	2,961
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	837.5	750	0	1,876	1,876
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	101	3,336	0	0	0
Subtotals for structure:		11,428	0	9,096	9,096
People:	2		460	600	1,060
Equipment:			0	0	0
Lighting:	0			0	0
Ductwork:		3,962	790	2,415	3,205
Infiltration: Winter CFM: 40, Summer CFM: 20		1,237	834	332	1,166
Ventilation: Winter CFM: 0, Summer CFM: 0		0	0	0	0
AED Excursion:		0	0	1,107	1,107
System 1 Master Load Totals:		16,627	2,084	13,551	15,634

Check Figures

Supply CFM:	617	CFM Per Square ft.:	0.736
Square ft. of Room Area:	838	Square ft. Per Ton:	571
Volume (ft ³) of Cond. Space:	7,537	Air Turnover Rate (per hour):	4.9

System Loads

Total Heating Required With Outside Air:	16,627 Btuh	16.627 MBH
Total Sensible Gain:	13,551 Btuh	87 %
Total Latent Gain:	2,084 Btuh	13 %
Total Cooling Required With Outside Air:	15,634 Btuh	1.30 Tons (Based On Sensible + Latent)
		1.47 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 2 Main Summary Loads

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolcl2: Glazing-Solar Cool Impact Anderson, u-value 0.39	318	3,724	0	5,866	5,866
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	461.7	3,575	0	2,072	2,072
12B-0sw: Part-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	35.1	51	0	51	51
12B-0sw: Wall-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	9.6	28	0	22	22
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	1532.7	1,472	0	3,433	3,433
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	92	3,257	0	0	0
Subtotals for structure:		12,107	0	11,444	11,444
People:	10		2,300	3,000	5,300
Equipment:			0	1,500	1,500
Lighting:	0			0	0
Ductwork:		7,207	1,627	6,149	7,776
Infiltration: Winter CFM: 207, Summer CFM: 92		6,823	3,817	1,517	5,334
Ventilation: Winter CFM: 0, Summer CFM: 0		0	0	0	0
AED-Excursion:		0	0	942	942
System 2 Main Load Totals:		26,137	7,744	24,552	32,296

Check Figures

Supply CFM:	1,117	CFM Per Square ft.:	0.729
Square ft. of Room Area:	1,532	Square ft. Per Ton:	546
Volume (ft ³) of Cond. Space:	13,794	Air Turnover Rate (per hour):	4.9

System Loads

Total Heating Required With Outside Air:	26,137 Btuh	26.137 MBH
Total Sensible Gain:	24,552 Btuh	76 %
Total Latent Gain:	7,744 Btuh	24 %
Total Cooling Required With Outside Air:	32,296 Btuh	2.69 Tons (Based On Sensible + Latent)
		2.81 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 3 Bed Rooms Summary Loads

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolcl2: Glazing-Solar Cool Impact Anderson, u-value 0.39	116.2	1,362	0	2,324	2,324
Impactsolcl2: Glazing-Solar Cool Impact Anderson, u-value 0.39	24	281	0	538	538
11D: Door-Solid Core	21	123	0	123	123
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	575.5	4,455	0	2,584	2,584
13A-3ocs: Wall-Block, board insulation only, R-3 board insulation, open core, siding finish	30	150	0	77	77
12B-0sw: Part-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	117.9	172	0	172	172
13AB-0ocs: Part-Block, no blanket or board insulation, open core, siding finish	54.6	211	0	211	211
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	165.4	159	0	370	370
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	96	3,398	0	0	0
Subtotals for structure:		10,311	0	6,399	6,399
People:	0		0	0	0
Equipment:			300	300	600
Lighting:	0			0	0
Ductwork:		7,489	1,339	4,458	5,798
Infiltration: Winter CFM: 145, Summer CFM: 65		4,791	2,681	1,064	3,745
Ventilation: Winter CFM: 0, Summer CFM: 0		0	0	0	0
AED Excursion:		0	0	1,132	1,132
System 3 Bed Rooms Load Totals:		22,591	4,320	13,353	17,673

Check Figures

Supply CFM:	607	CFM Per Square ft.:	0.628
Square ft. of Room Area:	967	Square ft. Per Ton:	618
Volume (ft³) of Cond. Space:	9,687	Air Turnover Rate (per hour):	3.8

System Loads

Total Heating Required With Outside Air:	22,591 Btuh	22.591 MBH
Total Sensible Gain:	13,353 Btuh	76 %
Total Latent Gain:	4,320 Btuh	24 %
Total Cooling Required With Outside Air:	17,673 Btuh	1.47 Tons (Based On Sensible + Latent)
		1.57 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 4 Upstairs Summary Loads

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolc12: Glazing-Solar Cool Impact Anderson, u-value 0.39	153	1,794	0	2,952	2,952
12F-0sw: Wall-Frame, R-21 insulation in 2 x 6 stud cavity, no board insulation, siding finish, wood studs	855	1,667	0	850	850
13A-3ocs: Wall-Block, board insulation only, R-3 board insulation, open core, siding finish	148.5	744	0	379	379
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	880.1	846	0	1,972	1,972
Subtotals for structure:		5,051	0	6,153	6,153
People:	0		0	0	0
Equipment:			0	0	0
Lighting:	0			0	0
Ductwork:		3,695	685	2,270	2,955
Infiltration: Winter CFM: 54, Summer CFM: 29		1,784	1,206	478	1,684
Ventilation: Winter CFM: 0, Summer CFM: 0		0	0	0	0
AED Excursion:		0	0	780	780
System 4 Upstairs Load Totals:		10,530	1,891	9,681	11,572

Check Figures

Supply CFM:	440	CFM Per Square ft.:	0.500
Square ft. of Room Area:	881	Square ft. Per-Ton:	84.1
Volume (ft³) of Cond. Space:	7,922	Air Turnover Rate (per hour):	3.3

System Loads

Total Heating Required With Outside Air:	10,530 Btuh	10.530 MBH
Total Sensible Gain:	9,681 Btuh	84 %
Total Latent Gain:	1,891 Btuh	16 %
Total Cooling Required With Outside Air:	11,572 Btuh	0.96 Tons (Based On Sensible + Latent)
		1.05 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 1, Zone 1 Summary Loads (Average Load Procedure for Rooms)

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolc2: Glazing-Solar Cool Impact Anderson, u-value 0.39	235.8	2,577	0	4,259	4,259
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	659.7	4,765	0	2,961	2,961
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	837.5	750	0	1,876	1,876
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	101	3,336	0	0	0
Subtotals for structure:		11,428	0	9,096	9,096
People:	2		460	600	1,060
Equipment:			0	0	0
Lighting:	0			0	0
Ductwork:		0	0	0	0
Infiltration: Winter CFM: 40, Summer CFM: 20		1,237	834	332	1,166
System 1, Zone 1 Load Totals:		12,665	1,294	10,028	11,322

Check Figures

Supply CFM:	617	CFM Per Square ft.:	0.736
Square ft. of Room Area:	838	Square ft. Per Ton:	802
Volume (ft ³) of Cond. Space:	7,537	Air Turnover Rate (per hour):	4.9

Zone Loads

Total Heating Required:	12,665 Btuh	12.665 MBH
Total Sensible Gain:	10,028 Btuh	89 %
Total Latent Gain:	1,294 Btuh	11 %
Total Cooling Required:	11,322 Btuh	0.94 Tons (Based On Sensible + Latent)
		1.05 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 2, Zone 2 Summary Loads (Average Load Procedure for Rooms)

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolc12: Glazing-Solar Cool Impact Anderson, u-value 0.39	318	3,724	0	5,866	5,866
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	461.7	3,575	0	2,072	2,072
12B-0sw: Part-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	35.1	51	0	51	51
12B-0sw: Wall-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	9.6	28	0	22	22
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	1532.7	1,472	0	3,433	3,433
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	92	3,257	0	0	0
Subtotals for structure:		12,107	0	11,444	11,444
People:	10		2,300	3,000	5,300
Equipment:			0	1,500	1,500
Lighting:	0			0	0
Ductwork:		0	0	0	0
Infiltration: Winter CFM: 207, Summer CFM: 92		6,823	3,817	1,517	5,334
System 2, Zone 2 Load Totals:		18,930	6,117	17,461	23,578

Check Figures

Supply CFM:	1,117	CFM Per Square ft.:	0.729
Square ft. of Room Area:	1,532	Square ft. Per Ton:	749
Volume (ft ³) of Cond. Space:	13,794	Air Turnover Rate (per hour):	4.9

Zone Loads

Total Heating Required:	18,930 Btuh	18.930 MBH
Total Sensible Gain:	17,461 Btuh	74 %
Total Latent Gain:	6,117 Btuh	26 %
Total Cooling Required:	23,578 Btuh	1.96 Tons (Based On Sensible + Latent) 2.05 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



System 3, Zone 3 Summary Loads (Average Load Procedure for Rooms)

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolc2: Glazing-Solar Cool Impact Anderson, u-value 0.39	116.2	1,362	0	2,324	2,324
Impactsolc2: Glazing-Solar Cool Impact Anderson, u-value 0.39	24	281	0	538	538
11D: Door-Solid Core	21	123	0	123	123
13AB-0ocs: Wall-Block, no blanket or board insulation, open core, siding finish	575.5	4,455	0	2,584	2,584
13A-3ocs: Wall-Block, board insulation only, R-3 board insulation, open core, siding finish	30	150	0	77	77
12B-0sw: Part-Frame, R-11 insulation in 2 x 4 stud cavity, no board insulation, siding finish, wood studs	117.9	172	0	172	172
13AB-0ocs: Part-Block, no blanket or board insulation, open core, siding finish	54.6	211	0	211	211
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	165.4	159	0	370	370
22A-pm-c: Floor-Slab on grade, No edge insulation, no insulation below floor, carpet covering, passive, heavy dry or light wet soil	96	3,398	0	0	0
Subtotals for structure:		10,311	0	6,399	6,399
People:	0		0	0	0
Equipment:			300	300	600
Lighting:	0			0	0
Ductwork:		0	0	0	0
Infiltration: Winter CFM: 145, Summer CFM: 65		4,791	2,681	1,064	3,745
System 3, Zone 3 Load Totals:		15,102	2,981	7,763	10,744

Check Figures

Supply CFM:	607	CFM Per Square ft.:	0.628
Square ft. of Room Area:	967	Square ft. Per Ton:	1,019
Volume (ft³) of Cond. Space:	9,687	Air Turnover Rate (per hour):	3.8

Zone Loads

Total Heating Required:	15,102 Btuh	15.102 MBH
Total Sensible Gain:	7,763 Btuh	72 %
Total Latent Gain:	2,981 Btuh	28 %
Total Cooling Required:	10,744 Btuh	0.90 Tons (Based On Sensible + Latent)
		0.95 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
All computed results are estimates as building use and weather may vary.
Be sure to select a unit that meets both sensible and latent loads.



System 4, Zone 4 Summary Loads (Average Load Procedure for Rooms)

Component Description	Area Quan	Sen Loss	Lat Gain	Sen Gain	Total Gain
Impactsolcl2: Glazing-Solar Cool Impact Anderson, u-value 0.39	153	1,794	0	2,952	2,952
12F-0sw: Wall-Frame, R-21 insulation in 2 x 6 stud cavity, no board insulation, siding finish, wood studs	855	1,667	0	850	850
13A-3ocs: Wall-Block, board insulation only, R-3 board insulation, open core, siding finish	148.5	744	0	379	379
16A-30: Roof/Ceiling-Under attic or knee wall, Unvented Attic, No Radiant Barrier, Any Roofing Material, Any Roof Color, R-30 insulation	880.1	846	0	1,972	1,972
Subtotals for structure:		5,051	0	6,153	6,153
People:	0		0	0	0
Equipment:			0	0	0
Lighting:	0			0	0
Ductwork:		0	0	0	0
Infiltration: Winter CFM: 54, Summer CFM: 29		1,784	1,206	478	1,684
System 4, Zone 4 Load Totals:		6,835	1,206	6,631	7,837

Check Figures

Supply CFM:	440	CFM Per Square ft.:	0.500
Square ft. of Room Area:	881	Square ft. Per Ton:	1,247
Volume (ft³) of Cond. Space:	7,922	Air Turnover Rate (per hour):	3.3

Zone Loads

Total Heating Required:	6,835 Btuh	6.835 MBH
Total Sensible Gain:	6,631 Btuh	85 %
Total Latent Gain:	1,206 Btuh	15 %
Total Cooling Required:	7,837 Btuh	0.65 Tons (Based On Sensible + Latent)
		0.71 Tons (Based On 77% Sensible Capacity)

Notes

Calculations are based on 8th edition of ACCA Manual J.
 All computed results are estimates as building use and weather may vary.
 Be sure to select a unit that meets both sensible and latent loads.



Detailed Room Loads - Room 1 - Master Bedroom (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	14.7 ft.	System Number:	1
Room Width:	27.0 ft.	Zone Number:	1
Area:	397.0 sq.ft.	Supply Air:	335 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	5.6 AC/hr
Volume:	3,572.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	335 CFM	Percent of Supply.:	0 %
Runout Duct Size:	10 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	614 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	21 CFM
Actual Loss:	0.120 in.wg./100 ft.	Actual Summer Infil.:	11 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
S-Wall-13AB-0ocs 25 X 9	189	0.258	7.2	1,365	4.5	0	848
SW-Wall-13AB-0ocs 3.5 X 9	17.7	0.258	7.2	128	4.5	0	79
W-Wall-13AB-0ocs 10 X 9	36	0.258	7.2	260	4.5	0	162
NW-Wall-13AB-0ocs 3.5 X 9	17.7	0.258	7.2	128	4.5	0	79
N-Wall-13AB-0ocs 10 X 9	42	0.258	7.2	303	4.5	0	189
S-Gls-Impactsolcl2 shgc-0.32 100%S (2)	36	0.390	10.9	394	12.6	0	454
SW-Gls-Impactsolcl2 shgc-0.32 92%S	13.8	0.390	10.9	151	13.7	0	189
W-Gls-Impactsolcl2 shgc-0.32 44%S (3)	54	0.390	10.9	591	25.8	0	1,395
NW-Gls-Impactsolcl2 shgc-0.32 0%S	13.8	0.390	10.9	151	28.0	0	386
N-Gls-Impactsolcl2 shgc-0.32 100%S	48	0.390	10.9	524	12.6	0	604
UP-Ceil-16A-30 14.7 X 27	396.9	0.032	0.9	356	2.2	0	889
Floor-22A-pm 52 ft..Per.	52	1.180	33.0	1,718	0.0	0	0
Subtotals for Structure:				6,069		0	5,274
Infil.: Win.: 21.0, Sum.: 10.5	468		1,380	646	0.370	436	173
Room Totals:				6,715		436	5,447



Detailed Room Loads - Room 15 - Master Bath (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	15.8 ft.	System Number:	1
Room Width:	14.5 ft.	Zone Number:	1
Area:	229.0 sq.ft.	Supply Air:	171 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	5.0 AC/hr
Volume:	2,062.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	171 CFM	Percent of Supply.:	0 %
Runout Duct Size:	8 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	489 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	13 CFM
Actual Loss:	0.103 in.wg/100 ft.	Actual Summer Infil.:	6 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
N -Wall-13AB-0ocs 3 X 9	16.2	0.258	7.2	117	4.5	0	73
NE-Wall-13AB-0ocs 3.5 X 9	10.5	0.258	7.2	76	4.5	0	47
E -Wall-13AB-0ocs 10 X 9	90	0.258	7.2	650	4.5	0	404
SE-Wall-13AB-0ocs 3.5 X 9	10.5	0.258	7.2	76	4.5	0	47
S -Wall-13AB-0ocs 12 X 9	97.2	0.258	7.2	702	4.5	0	436
N -Gls-Impactsolcl2 shgc-0.32 100%S	10.8	0.390	10.9	118	12.6	0	136
NE-Gls-Impactsolcl2 shgc-0.32 0%S	21	0.390	10.9	229	28.0	0	588
SE-Gls-Impactsolcl2 shgc-0.32 92%S	21	0.390	10.9	229	13.7	0	288
S -Gls-Impactsolcl2 shgc-0.32 100%S	10.8	0.390	10.9	118	12.6	0	136
UP-Ceil-16A-30 15.8 X 14.5	229.1	0.032	0.9	205	2.2	0	513
Floor-22A-pm 32 ft..Per.	32	1.180	33.0	1,057	0.0	0	0
Subtotals for Structure:				3,577		0	2,668
Infil.: Win.: 12.9, Sum.: 6.5	288		1.382	398	0.372	268	107
Room Totals:				3,975		268	2,775



Detailed Room Loads - Room 16 - Water Closet (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	6.5 ft.	System Number:	1
Room Width:	3.5 ft.	Zone Number:	1
Area:	23.0 sq.ft.	Supply Air:	16 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	4.6 AC/hr
Volume:	205.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	16 CFM	Percent of Supply.:	0 %
Runout Duct Size:	2 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	727 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	1 CFM
Actual Loss:	1.617 in.wg./100 ft.	Actual Summer Infil.:	1 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
S -Wall-13AB-0ocs 3.5 X 9	24.9	0.258	7.2	180	4.5	0	112
S -Gls-Impactsolcl2 shgc-0.32 100%S	6.6	0.390	10.9	72	12.6	0	83
UP-Ceil-16A-30 6.5 X 3.5	22.8	0.032	0.9	20	2.2	0	51
Floor-22A-pm 4 ft..Per.	4	1.180	33.0	132	0.0	0	0
Subtotals for Structure:				404		0	246
Infil.: Win.: 1.4, Sum.: 0.7	32		1.397	44	0.381	29	12
Room Totals:				448		29	258



Detailed Room Loads - Room 17 - Walk-in (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	6.5 ft.	System Number:	1
Room Width:	12.0 ft.	Zone Number:	1
Area:	78.0 sq.ft.	Supply Air:	43 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	3.7 AC/hr
Volume:	702.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	43 CFM	Percent of Supply.:	0 %
Runout Duct Size:	4 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	493 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	5 CFM
Actual Loss:	0.275 in.wg./100 ft.	Actual Summer Infil.:	2 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
S-Wall-13AB-0ocs 12 X 9	108	0.258	7.2	780	4.5	0	485
UP-Ceil-16A-30 6.5 X 12	78	0.032	0.9	70	2.2	0	175
Floor-22A-pm 12 ft..Per.	12	1.180	33.0	396	0.0	0	0
Subtotals for Structure:				1,246		0	660
Infil.: Win.: 4.8, Sum.: 2.4	108		1.380	149	0.370	101	40
Room Totals:				1,395		101	700



Detailed Room Loads - Room 18 - Dressing Rm (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	8.2 ft.	System Number:	1
Room Width:	13.5 ft.	Zone Number:	1
Area:	111.0 sq.ft.	Supply Air:	52 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	3.1 AC/hr
Volume:	996.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	52 CFM	Percent of Supply.:	0 %
Runout Duct Size:	4 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	597 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	0 CFM
Actual Loss:	0.402 in.wg./100 ft.	Actual Summer Infil.:	0 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
UP-Ceiling-16A-30 8.2 X 13.5	110.7	0.032	0.9	99	2.2	0	248
Floor-22A-pm 1 ft..Per.	1	1.180	33.0	33	0.0	0	0
Subtotals for Structure:				132		0	248
Infil.: Win.: 0.0, Sum.: 0.0	0		0	0	0	0	0
People: 230 lat/per, 300 sen/per:	2					460	600
Room Totals:				132		460	848



Detailed Room Loads - Room 2 - Living (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	19.0 ft.	System Number:	2
Room Width:	21.0 ft.	Zone Number:	2
Area:	399.0 sq.ft.	Supply Air:	261 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	4.4 AC/hr
Volume:	3,591.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	261 CFM	Percent of Supply.:	0 %
Runout Duct Size:	9 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	591 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	50 CFM
Actual Loss:	0.128 in.wg./100 ft.	Actual Summer Infil.:	22 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
W -Wall-13AB-0ocs 21 X 9	93	0.258	7.7	720	4.5	0	417
W -Gls-Impactsolcl2 shgc-0.32 100%S (2)	96	0.390	11.7	1,124	12.6	0	1,208
UP-Ceil-16A-30 19 X 21	399	0.032	1.0	383	2.2	0	894
Floor-22A-pm 21 ft..Per.	21	1.180	35.4	743	0.0	0	0
Subtotals for Structure:				2,970		0	2,519
Infil.: Win.: 49.5, Sum.: 22.0	189		8.646	1,634	1.921	914	363
People: 230 lat/per, 300 sen/per:	4					920	1,200
Room Totals:				4,604		1,834	4,082



Detailed Room Loads - Room 3 - Breakfast Nook (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	12.0 ft.	System Number:	2
Room Width:	13.0 ft.	Zone Number:	2
Area:	156.0 sq.ft.	Supply Air:	189 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	8.1 AC/hr
Volume:	1,404.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	189 CFM	Percent of Supply.:	0 %
Runout Duct Size:	8 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	540 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	59 CFM
Actual Loss:	0.126 in.wg./100 ft.	Actual Summer Infil.:	26 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
S -Wall-13AB-0ocs 10 X 9	42	0.258	7.7	325	4.5	0	189
SW-Wall-13AB-0ocs 3.5 X 9	31.5	0.258	7.7	244	4.5	0	141
W -Wall-13AB-0ocs 8 X 9	36	0.258	7.7	279	4.5	0	162
NW-Wall-13AB-0ocs 3.5 X 9	31.5	0.258	7.7	244	4.5	0	141
S -Gls-Impactsolcl2 shgc-0.32 100%S	48	0.390	11.7	562	12.6	0	604
W -Gls-Impactsolcl2 shgc-0.32 44%S (2)	36	0.390	11.7	422	25.8	0	930
UP-Ceil-16A-30 12 X 13	156	0.032	1.0	150	2.2	0	349
Floor-22A-pm 25 ft..Per.	25	1.180	35.4	885	0.0	0	0
Subtotals for Structure:				3,111		0	2,516
Infil.: Win.: 59.0, Sum.: 26.2	225		8.644	1,945	1.920	1,088	432
Room Totals:				5,056		1,088	2,948



Detailed Room Loads - Room 4 - Kitchen (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	15.5 ft.	System Number:	2
Room Width:	15.5 ft.	Zone Number:	2
Area:	240.0 sq.ft.	Supply Air:	136 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	3.8 AC/hr
Volume:	2,162.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	136 CFM	Percent of Supply.:	0 %
Runout Duct Size:	7 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	509 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	4 CFM
Actual Loss:	0.134 in.wg/100 ft.	Actual Summer Infil.:	2 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
W-Wall-13AB-0ocs 1.5 X 9	13.5	0.258	7.7	104	4.5	0	61
UP-Ceil-16A-30 15.5 X 15.5	240.2	0.032	1.0	231	2.2	0	538
Floor-22A-pm 2 ft..Per.	2	1.180	35.4	71	0.0	0	0
Subtotals for Structure:				406		0	599
Infil.: Win.: 3.5, Sum.: 1.6	14		8.667	117	1.926	65	26
Equipment:						0	1,500
Room Totals:				523		65	2,125



Detailed Room Loads - Room 12 - Dining (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	12.4 ft.	System Number:	2
Room Width:	24.5 ft.	Zone Number:	2
Area:	304.0 sq.ft.	Supply Air:	247 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	5.4 AC/hr
Volume:	2,734.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	247 CFM	Percent of Supply.:	0 %
Runout Duct Size:	9 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	560 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	36 CFM
Actual Loss:	0.115 in.wg/100 ft.	Actual Summer Infil.:	16 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
N -Part-15°/15°-12B-0sw 3.9 X 9	35.1	0.097	1.5	51	1.5	0	51
E -Wall-13AB-0ocs 11.8 X 9	61.2	0.258	7.7	474	4.5	0	275
S -Wall-13AB-0ocs 3.4 X 9	30.6	0.258	7.7	237	4.5	0	137
E -Gls-Impactsolcl2 shgc-0.32 35%S	45	0.390	11.7	527	28.0	0	1,260
UP-Ceil-16A-30 12.4 X 24.5	303.8	0.032	1.0	292	2.2	0	681
Floor-22A-pm 19 ft..Per.	19	1.180	35.4	673	0.0	0	0
Subtotals for Structure:				2,254		0	2,404
Infil.: Win.: 35.9, Sum.: 15.9	137		8.640	1,182	1.923	662	263
People: 230 lat/per, 300 sen/per:	4					920	1,200
Room Totals:				3,436		1,582	3,867



Detailed Room Loads - Room 13 - Entry (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	6.3 ft.	System Number:	2
Room Width:	17.5 ft.	Zone Number:	2
Area:	110.0 sq.ft.	Supply Air:	63 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	3.8 AC/hr
Volume:	992.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	63 CFM	Percent of Supply.:	0 %
Runout Duct Size:	5 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	462 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	15 CFM
Actual Loss:	0.176 in.wg./100 ft.	Actual Summer Infil.:	7 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
E -Wall-12B-0sw 6.4 X 9	9.6	0.097	2.9	28	2.3	0	22
E -Gls-Impactsolcl2 shgc-0.32 100%S	48	0.390	11.7	562	12.6	0	604
UP-Ceil-16A-30 6.3 X 17.5	110.2	0.032	1.0	106	2.2	0	247
Floor-22A-pm 6 ft..Per.	6	1.180	35.4	212	0.0	0	0
Subtotals for Structure:				908		0	873
Infil.: Win.: 15.1, Sum.: 6.7	58		8.646	498	1.927	279	111
Room Totals:				1,406		279	984



Detailed Room Loads - Room 14 - Media Rm (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	21.0 ft.	System Number:	2
Room Width:	15.4 ft.	Zone Number:	2
Area:	323.0 sq.ft.	Supply Air:	221 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	4.6 AC/hr
Volume:	2,911.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	221 CFM	Percent of Supply.:	0 %
Runout Duct Size:	9 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	500 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	44 CFM
Actual Loss:	0.092 in.wg./100 ft.	Actual Summer Infil.:	20 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
N -Wall-13AB-0ocs 3.4 X 9	30.6	0.258	7.7	237	4.5	0	137
E -Wall-13AB-0ocs 15.2 X 9	91.8	0.258	7.7	711	4.5	0	412
E -Gls-Impactsolcl2 shgc-0.32 35%S	45	0.390	11.7	527	28.0	0	1,260
UP-Ceil-16A-30 21 X 15.4	323.4	0.032	1.0	310	2.2	0	724
Floor-22A-pm 19 ft..Per.	19	1.180	35.4	673	0.0	0	0
Subtotals for Structure:				2,458		0	2,533
Infil.: Win.: 43.9, Sum.: 19.5	167		8.644	1,447	1.924	809	322
People: 230 lat/per, 300 sen/per:	2					460	600
Room Totals:				3,905		1,269	3,455



Detailed Room Loads - Room 5 - Bath 1 (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	13.2 ft.	System Number:	3
Room Width:	6.4 ft.	Zone Number:	3
Area:	84.0 sq.ft.	Supply Air:	87 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	6.8 AC/hr
Volume:	760.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	87 CFM	Percent of Supply.:	0 %
Runout Duct Size:	5 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	635 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	11 CFM
Actual Loss:	0.331 in.wg/100 ft.	Actual Summer Infil.:	5 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
W -Wall-13AB-0ocs 6.4 X 9	33.6	0.258	7.7	260	4.5	0	151
W -Gls-Impactsolcl2 shgc-0.32 33%S	24	0.390	11.7	281	28.5	0	685
UP-Ceil-16A-30 13.2 X 6.4	84.5	0.032	1.0	81	2.2	0	189
Floor-22A-pm 6 ft..Per.	6	1.180	35.4	212	0.0	0	0
Subtotals for Structure:				834		0	1,025
Infil.: Win.: 11.2, Sum.: 5.0	58		6.424	370	1.424	207	82
Room Totals:				1,204		207	1,107



Detailed Room Loads - Room 6 - Bedroom 1 (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	17.6 ft.	System Number:	3
Room Width:	14.8 ft.	Zone Number:	3
Area:	260.0 sq.ft.	Supply Air:	212 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	5.4 AC/hr
Volume:	2,344.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	212 CFM	Percent of Supply.:	0 %
Runout Duct Size:	9 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	481 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	59 CFM
Actual Loss:	0.085 in.wg./100 ft.	Actual Summer Infil.:	26 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
W -Wall-13AB-0ocs 14.8 X 9	97.2	0.258	7.7	752	4.5	0	436
N -Wall-13AB-0ocs 18.7 X 9	148.3	0.258	7.7	1,148	4.5	0	666
W -Gls-Impactsolcl2 shgc-0.32 44%S (2)	36	0.390	11.7	422	25.8	0	930
N -Gls-Impactsolcl2 shgc-0.32 100%S (2)	20	0.390	11.7	234	12.6	0	252
Floor-22A-pm 34 ft..Per.	34	1.180	35.4	1,204	0.0	0	0
Subtotals for Structure:				3,760		0	2,284
Infil.: Win.: 58.7, Sum.: 26.1	302		6.425	1,937	1.426	1,084	430
Room Totals:				5,697		1,084	2,714



Detailed Room Loads - Room 7 - Bath 2 (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	8.6 ft.	System Number:	3
Room Width:	12.0 ft.	Zone Number:	3
Area:	103.0 sq.ft.	Supply Air:	54 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	3.5 AC/hr
Volume:	929.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	54 CFM	Percent of Supply.:	0 %
Runout Duct Size:	4 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	621 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	11 CFM
Actual Loss:	0.433 in.wg./100 ft.	Actual Summer Infil.:	5 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
W -Wall-13A-3ocs 6 X 9	30	0.167	5.0	150	2.6	0	77
W -Gls-Impactsolcl2 shgc-0.32 0%S	24	0.390	11.7	281	22.4	0	538
Floor-22A-pm 6 ft..Per.	6	1.180	35.4	212	0.0	0	0
Subtotals for Structure:				643		0	615
Infil.: Win.: 10.5, Sum.: 4.7	54		6.426	347	1.426	194	77
Room Totals:				990		194	692



Detailed Room Loads - Room 8 - Stair (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	11.4 ft.	System Number:	3
Room Width:	7.1 ft.	Zone Number:	3
Area:	81.0 sq.ft.	Supply Air:	87 CFM
Ceiling Height:	21.0 ft.	Supply Air Changes:	3.1 AC/hr
Volume:	1,700.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	87 CFM	Percent of Supply.:	0 %
Runout Duct Size:	5 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	639 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	29 CFM
Actual Loss:	0.336 in.wg./100 ft.	Actual Summer Infil.:	13 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
N -Wall-13AB-0ocs 7.1 X 21	142.8	0.258	7.7	1,106	4.5	0	641
N -Gls-Impactsolcl2 shgc-0.32 100%S	6.2	0.390	11.7	73	12.6	0	79
UP-Ceil-16A-30 11.4 X 7.1	80.9	0.032	1.0	78	2.2	0	181
Floor-22A-pm 7 ft..Per.	7	1.180	35.4	248	0.0	0	0
Subtotals for Structure:				1,505		0	901
Infil.: Win.: 29.0, Sum.: 12.9	149		6.425	958	1.429	536	213
Room Totals:				2,463		536	1,114



Detailed Room Loads - Room 9 - Bedroom 2 (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	13.1 ft.	System Number:	3
Room Width:	20.4 ft.	Zone Number:	3
Area:	267.0 sq.ft.	Supply Air:	118 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	2.9 AC/hr
Volume:	2,405.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	118 CFM	Percent of Supply.:	0 %
Runout Duct Size:	6 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	599 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	36 CFM
Actual Loss:	0.229 in.wg./100 ft.	Actual Summer Infil.:	16 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
N -Wall-13AB-0ocs 20.4 X 9	153.6	0.258	7.7	1,189	4.5	0	690
E -Part-15°/15°-12B-0sw 13.1 X 9	117.9	0.097	1.5	172	1.5	0	172
N -Gls-Impactsolcl2 shgc-0.32 100%S (2)	30	0.390	11.7	352	12.6	0	378
Floor-22A-pm 34 ft..Per.	34	1.180	35.4	1,204	0.0	0	0
Subtotals for Structure:				2,917		0	1,240
Infil.: Win.: 35.8, Sum.: 15.9	184		6.422	1,179	1.427	660	262
Room Totals:				4,096		660	1,502



Detailed Room Loads - Room 10 - Mud Rm (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	8.4 ft.	System Number:	3
Room Width:	7.2 ft.	Zone Number:	3
Area:	60.0 sq.ft.	Supply Air:	26 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	2.9 AC/hr
Volume:	544.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	26 CFM	Percent of Supply.:	0 %
Runout Duct Size:	3 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	532 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	0 CFM
Actual Loss:	0.483 in.wg./100 ft.	Actual Summer Infil.:	0 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
E -Part-15°/15°-13AB-0ocs 8.4 X 9	54.6	0.258	3.9	211	3.9	0	211
E -Door-11D 3 X 7	21	0.390	5.9	123	5.9	0	123
Floor-22A-pm 8 ft..Per.	8	1.180	35.4	283	0.0	0	0
Subtotals for Structure:				617		0	334
Infil.: Win.: 0.0, Sum.: 0.0	0		0	0	0	0	0
Room Totals:				617		0	334



Detailed Room Loads - Room 11 - Laundry (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	8.4 ft.	System Number:	3
Room Width:	13.3 ft.	Zone Number:	3
Area:	112.0 sq.ft.	Supply Air:	23 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	1.4 AC/hr
Volume:	1,005.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	23 CFM	Percent of Supply.:	0 %
Runout Duct Size:	3 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	478 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	0 CFM
Actual Loss:	0.391 in.wg/100 ft.	Actual Summer Infil.:	0 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
Floor-22A-pm 1 ft..Per.	1	1.180	35.4	35	0.0	0	0
Subtotals for Structure:				35		0	0
Infil.: Win.: 0.0, Sum.: 0.0	0		0	0	0	0	0
Equipment:						300	300
Room Totals:				35		300	300



Detailed Room Loads - Room 19 - Study Area (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	8.0 ft.	System Number:	4
Room Width:	7.4 ft.	Zone Number:	4
Area:	59.0 sq.ft.	Supply Air:	47 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	5.3 AC/hr
Volume:	533.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	47 CFM	Percent of Supply.:	0 %
Runout Duct Size:	4 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	537 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	8 CFM
Actual Loss:	0.325 in.wg./100 ft.	Actual Summer Infil.:	4 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
S -Wall-12F-0sw 8 X 9	72	0.065	2.0	140	1.0	0	72
W -Wall-12F-0sw 7.4 X 9	51.6	0.065	2.0	101	1.0	0	51
N -Wall-12F-0sw 2.9 X 9	26.1	0.065	2.0	51	1.0	0	26
W -Gls-Impactsolcl2 shgc-0.32 53%S	15	0.390	11.7	176	23.7	0	355
UP-Ceil-16A-30 8 X 7.4	59.2	0.032	1.0	57	2.2	0	133
Subtotals for Structure:				525		0	637
Infil.: Win.: 7.7, Sum.: 4.1	165		1.542	254	0.413	172	68
Room Totals:				779		172	705



Detailed Room Loads - Room 20 - Bedroom 3 (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	14.5 ft.	System Number:	4
Room Width:	15.0 ft.	Zone Number:	4
Area:	218.0 sq.ft.	Supply Air:	152 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	4.7 AC/hr
Volume:	1,958.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	152 CFM	Percent of Supply:	0 %
Runout Duct Size:	7 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	568 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	12 CFM
Actual Loss:	0.167 in.wg/100 ft.	Actual Summer Infil.:	7 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
W -Wall-12F-0sw 14.4 X 9	81.6	0.065	2.0	159	1.0	0	81
N -Wall-12F-0sw 14.5 X 9	100.5	0.065	2.0	196	1.0	0	100
W -Gls-Impactsolcl2 shgc-0.32 54%S	48	0.390	11.7	562	23.6	0	1,131
N -Gls-Impactsolcl2 shgc-0.32 100%S (2)	30	0.390	11.7	352	12.6	0	378
UP-Ceil-16A-30 14.5 X 15	217.5	0.032	1.0	209	2.2	0	487
Subtotals for Structure:				1,478		0	2,177
Infil. Win.: 12.2, Sum.: 6.5	260		1.542	401	0.415	271	108
Room Totals:				1,879		271	2,285



Detailed Room Loads - Room 21 - Storage (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	21.5 ft.	System Number:	4
Room Width:	21.8 ft.	Zone Number:	4
Area:	469.0 sq.ft.	Supply Air:	193 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	2.7 AC/hr
Volume:	4,218.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	193 CFM	Percent of Supply.:	0 %
Runout Duct Size:	8 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	552 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	27 CFM
Actual Loss:	0.131 in.wg./100 ft.	Actual Summer Infil.:	15 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
N -Wall-12F-0sw 21.5 X 9	163.5	0.065	2.0	319	1.0	0	163
E -Wall-12F-0sw 21.8 X 9	166.2	0.065	2.0	324	1.0	0	165
S -Wall-12F-0sw 21.5 X 9	193.5	0.065	2.0	377	1.0	0	192
N -Gls-Impactsolcl2 shgc-0.32 100%S (2)	30	0.390	11.7	352	12.6	0	378
E -Gls-Impactsolcl2 shgc-0.32 53%S (2)	30	0.390	11.7	352	23.7	0	710
UP-Ceil-16A-30 21.5 X 21.8	468.7	0.032	1.0	450	2.2	0	1,050
Subtotals for Structure:				2,174		0	2,658
Infil.: Win.: 27.3, Sum.: 14.6	583		1.543	900	0.413	608	241
Room Totals:				3,074		608	2,899



Detailed Room Loads - Room 22 - Bath Up (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	9.0 ft.	System Number:	4
Room Width:	10.5 ft.	Zone Number:	4
Area:	95.0 sq.ft.	Supply Air:	33 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	2.3 AC/hr
Volume:	851.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	33 CFM	Percent of Supply.:	0 %
Runout Duct Size:	3 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	666 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg/100 ft.	Actual Winter Infil.:	4 CFM
Actual Loss:	0.750 in.wg/100 ft.	Actual Summer Infil.:	2 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Cig HTM	Lat Gain	Sen Gain
S -Wall-13A-3ocs 10.5 X 9	94.5	0.167	5.0	473	2.6	0	241
UP-Ceil-16A-30 9 X 10.5	94.5	0.032	1.0	91	2.2	0	212
Subtotals for Structure:				564		0	453
Infil.: Win.: 4.4, Sum.: 2.4	95		1.545	146	0.413	99	39
Room Totals:				710		99	492



Detailed Room Loads - Room 23 - Walk-in Bed 3 (Average Load Procedure)

General

Calculation Mode:	Htg. & clg.	Occurrences:	1
Room Length:	6.0 ft.	System Number:	4
Room Width:	6.7 ft.	Zone Number:	4
Area:	40.0 sq.ft.	Supply Air:	17 CFM
Ceiling Height:	9.0 ft.	Supply Air Changes:	2.8 AC/hr
Volume:	362.0 cu.ft.	Required Vent.:	0 CFM
Number of Registers:	1	Actual Winter Vent.:	0 CFM
Runout Air:	17 CFM	Percent of Supply.:	0 %
Runout Duct Size:	3 in.	Actual Summer Vent.:	0 CFM
Runout Air Velocity:	338 ft./min.	Percent of Supply:	0 %
Design Loss:	0.100 in.wg./100 ft.	Actual Winter Infil.:	3 CFM
Actual Loss:	0.198 in.wg./100 ft.	Actual Summer Infil.:	1 CFM

Item Description	Area Quantity	-U- Value	Htg HTM	Sen Loss	Clg HTM	Lat Gain	Sen Gain
S -Wall-13A-3ocs 6 X 9	54	0.167	5.0	271	2.6	0	138
UP-Ceil-16A-30 6 X 6.7	40.2	0.032	1.0	39	2.2	0	90
Subtotals for Structure:				310		0	228
Infil.: Win.: 2.5, Sum.: 1.4	54		1.537	83	0.407	56	22
Room Totals:				393		56	250



System 1 Room Load Summary

Room No	Room Name	Area SF	Htg Sens Btuh	Htg Nom CFM	Run Duct Size	Run Duct Vel	Clg Sens Btuh	Clg Lat Btuh	Clg Nom CFM	Air Sys CFM
—Zone 1—										
1	Master Bedroom	397	6,715	87	1-10	614	5,447	436	335	335
15	Master Bath	229	3,975	52	1-8	489	2,775	268	171	171
16	Water Closet	23	448	6	1-2	727	258	29	16	16
17	Walk-in	78	1,395	18	1-4	493	700	101	43	43
18	Dressing Rm	111	132	2	1-4	597	848	460	52	52
	AED Excursion						1,107			
	Duct Loads		3,962				2,415	790		
	System 1 total	838	16,627	165			13,551	2,084	617	617

System 1 Main Trunk Size: 12 in.
 Velocity: 785 ft./min
 Loss per 100 ft.: 0.109 in.wg

Cooling System Summary

	Cooling Tons	Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	1.30	87% / 13%	13,551	2,084	15,634
Recommended:	1.47	77% / 23%	13,551	4,048	17,598
Actual:	2.03	77% / 23%	18,800	5,500	24,300

Equipment Data

	Heating System	Cooling System
Type:	Heat Pump	Heat Pump
Model:	25HNA924A003	25HNA924A003
Brand:	Carrier	Carrier
Description:	Infinity	Infinity
Efficiency:	8.5 HSPF	18.3 SEER
Blower CFM:	800	800
Sound:		
Capacity:	22600	25600
Sensible Capacity:	n/a	18,800 Btuh
Latent Capacity:	n/a	5,500 Btuh



System 2 Room Load Summary

Room No	Room Name	Area SF	Htg Sens Btuh	Htg Nom CFM	Run Duct Size	Run Duct Vel	Clg Sens Btuh	Clg Lat Btuh	Clg Nom CFM	Air Sys CFM
---Zone 2---										
2	Living	399	4,604	60	1-9	591	4,082	1,834	261	261
3	Breakfast Nook	156	5,056	66	1-8	540	2,948	1,088	189	189
4	Kitchen	240	523	7	1-7	509	2,125	65	136	136
12	Dining	304	3,436	45	1-9	560	3,867	1,582	247	247
13	Entry	110	1,406	18	1-5	462	984	279	63	63
14	Media Rm	323	3,905	51	1-9	500	3,455	1,269	221	221
	AED Excursion						942			
	Duct Loads		7,207				6,149	1,627		
	System 2 total	1,532	26,137	246			24,552	7,744	1,117	1,117

System 2 Main Trunk Size: 16 in.
Velocity: 800 ft./min
Loss per 100 ft.: 0.079 in.wg

Cooling System Summary

	Cooling Tons	Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	2.69	76% / 24%	24,552	7,744	32,296
Recommended:	2.81	77% / 23%	25,926	7,744	33,670
Actual:	2.85	79% / 21%	27,000	7,200	34,200

Equipment Data

	Heating System	Cooling System
Type:	Heat Pump	Heat Pump
Model:	25HNA936A003	25HNA936A003
Brand:	Carrier	Carrier
Description:	Infinity	Infinity
Efficiency:	9.2 HSPF	17.8 SEER
Blower CFM:	1200	1200
Sound:		
Capacity:	36000	35000
Sensible Capacity:	n/a	27,000 Btuh
Latent Capacity:	n/a	7,200 Btuh



System 3 Room Load Summary

Room No	Room Name	Area SF	Htg Sens Btuh	Htg Nom CFM	Run Duct Size	Run Duct Vel	Clg Sens Btuh	Clg Lat Btuh	Clg Nom CFM	Air Sys CFM
—Zone 3—										
5	Bath 1	84	1,204	16	1-5	635	1,107	207	87	87
6	Bedroom 1	260	5,697	74	1-9	481	2,714	1,084	212	212
7	Bath 2	103	990	13	1-4	621	692	194	54	54
8	Stair	81	2,463	32	1-5	639	1,114	536	87	87
9	Bedroom 2	267	4,096	53	1-6	599	1,502	660	118	118
10	Mud Rm	60	617	8	1-3	532	334	0	26	26
11	Laundry	112	35	0	1-3	478	300	300	23	23
	AED Excursion						1,132			
	Duct Loads		7,489				4,458	1,339		
	System 3 total	967	22,591	196			13,353	4,320	607	607

System 3 Main Trunk Size: 12 in.
 Velocity: 774 ft./min
 Loss per 100 ft.: 0.106 in.wg

Cooling System Summary

	Cooling Tons	Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	1.47	76% / 24%	13,353	4,320	17,673
Recommended:	1.57	77% / 23%	14,464	4,320	18,784
Actual:	1.50	75% / 25%	13,500	4,500	18,000

Equipment Data

	<u>Heating System</u>	<u>Cooling System</u>
Type:	Heat Pump	Heat Pump
Model:	25HPA518A003	25HPA518A003
Brand:	Carrier	Carrier
Description:	Performance	Performance
Efficiency:	8.3 HSPF	15.5 SEER
Blower CFM:	600	600
Sound:		
Capacity:	17800	18000
Sensible Capacity:	n/a	13,500 Btuh
Latent Capacity:	n/a	4,500 Btuh



System 4 Room Load Summary

Room No	Room Name	Area SF	Htg Sens Btuh	Htg Nom CFM	Run Duct Size	Run Duct Vel	Clg Sens Btuh	Clg Lat Btuh	Clg Nom CFM	Air Sys CFM
—Zone 4—										
19	Study Area	59	779	10	1-4	537	705	172	47	47
20	Bedroom 3	218	1,879	24	1-7	568	2,285	271	152	152
21	Storage	469	3,074	40	1-8	552	2,899	608	193	193
22	Bath Up	95	710	9	1-3	666	492	99	33	33
23	Walk-in Bed 3	40	393	5	1-3	338	250	56	17	17
	AED Excursion						780			
	Duct Loads		3,695				2,270	685		
	System 4 total	881	10,530	89			9,681	1,891	440	440

System 4 Main Trunk Size: 11 in.
Velocity: 667 ft./min
Loss per 100 ft.: 0.089 in.wg

Cooling System Summary

	Cooling Tons	Sensible/Latent Split	Sensible Btuh	Latent Btuh	Total Btuh
Net Required:	0.96	84% / 16%	9,681	1,891	11,572
Recommended:	1.05	77% / 23%	9,681	2,892	12,573
Actual:	1.50	75% / 25%	13,500	4,500	18,000

Equipment Data

	<u>Heating System</u>	<u>Cooling System</u>
Type:	Heat Pump	Heat Pump
Model:	25HPA518A003	25HPA518A003
Brand:	Carrier	Carrier
Description:	Performance	Performance
Efficiency:	8.3 HSPF	15.5 SEER
Blower CFM:	600	600
Sound:		
Capacity:	17800	18000
Sensible Capacity:	n/a	13,500 Btuh
Latent Capacity:	n/a	4,500 Btuh

TOWN OF SEWALL'S POINT

PAMELA M. BUSHA
Mayor

NEIL SUBIN
Vice Mayor

E. DANIEL MORRIS
Commissioner

THOMAS P. BAUSCH
Commissioner

DON OSTEEEN
Commissioner

ROBERT KELLOGG
Town Manager

JOHN R. ADAMS
Building Official

ERIC CERNIGLIA
Chief of Police

ANN MARIE BASLER
Town Clerk



BUILDING DEPARTMENT

CERTIFICATE OF: OCCUPANCY COMPLETION

- Single Family Residence Other SUBSTANTIAL IMPROVEMENT LEVEL II
- Temporary: Expiration Date _____
- Partial (Area description) _____

BUILDING PERMIT NO: 8172 DATE OF ISSUE: 6-1-06

OWNER(S): MARIANO PROPERTY ADDRESS: 23 MIDDLE RD

LEGAL DESCRIPTION: LOT 42 BLOCK _____ SUBDIVISION High Point

GENERAL CONTRACTOR: OWNER/BUILDER LIC/CERT NO: -

ARCHITECT OR ENGINEER: GARY POWELL LIC/CERT NO: _____

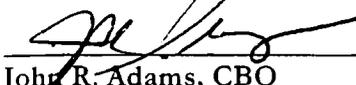
CODE EDITION: FBC 2004 CONST. TYPE: III B USE: _____ OCCUPANCY: R-3

OCCUPANT LOAD: _____ SPRINKLERS REQUIRED: _____ SPRINKLERS USED: _____

The described portion of the structure has been inspected for compliance with the requirements of this Code for occupancy and division of occupancy and the use for which the proposed occupancy is classified.

In accordance with the requirements of the Florida Building Code and the Codes and Ordinances of the Town of Sewall's Point, Florida, this Certificate of Occupancy is hereby issued for the foregoing described property.

Entered at Sewall's Point, Florida, this 8th day of May, 2006


John R. Adams, CBO
Building Official, Town of Sewall's Point



One S. Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (772) 287-2455 • Fax (772) 220-4765 • E-Mail: abasler@sewallspoint.org
Building Department (772) 287-2455 • Fax (772) 220-4765 • E-Mail: jadams@sewallspoint.org

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~Thu~~ **Thurs** 5-8, 2008

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8589	Hardin	rough plumbing	FAIL	
7	275 River Stratton	rough gas (11:00)	FAIL	INSPECTOR: <i>[Signature]</i>
8535	Stark	Engineering	PASS	
5	875 River Rd Emil LaViola	(TRUSS FIX BY ENGR.)		INSPECTOR: <i>[Signature]</i>
8867	Geller	footing, steel	PASS	(FRONT ADDITIONS)
4	10 Palmetto Ken Wendell	& slab		INSPECTOR: <i>[Signature]</i>
8823	Sebastianer	tie down +	FAIL	
1	6 W High Pt OB	wind brace (sign card)		INSPECTOR: <i>[Signature]</i>
CE		plants obstructing		
6	24 NSPR	view for neighbor @ 26 NSPR - MROTH		INSPECTOR:
8869	Miele	Final	PASS	CLOSE
2	6 E High Pt Reel Fence	(Reel)		INSPECTOR: <i>[Signature]</i>
8836	Masterpiece	Final	PASS	CLOSE
3	5 Mandalay Reel Fence	(Rear only) reel letter		INSPECTOR: <i>[Signature]</i>
OTHER:	3172 73 MIDDLE RD.	FINAL		CLOSE
				<i>[Signature]</i>

ENERGY PERFORMANCE LEVEL (EPL) DISPLAY CARD

ESTIMATED ENERGY PERFORMANCE SCORE* = 92.8

The higher the score, the more efficient the home.

Nick Mariano, 23 Middle Rd, Sewals Point, FL, 34996-

<p>1. New construction or existing Addition <input type="checkbox"/></p> <p>2. Single family or multi-family Single family <input type="checkbox"/></p> <p>3. Number of units, if multi-family 1 <input type="checkbox"/></p> <p>4. Number of Bedrooms 5 <input type="checkbox"/></p> <p>5. Is this a worst case? No <input type="checkbox"/></p> <p>6. Conditioned floor area (ft²) 4219 ft² <input type="checkbox"/></p> <p>7. Glass type¹ and area: (Label reqd. by 13-104.4.5 if not default)</p> <table border="0" style="width: 100%;"> <tr> <td style="width: 30%;">a. U-factor:</td> <td style="width: 30%;">Description</td> <td style="width: 40%;">Area</td> </tr> <tr> <td>(or Single or Double DEFAULT)</td> <td>7a. (Single, U=0.4)</td> <td>96.0 ft² <input type="checkbox"/></td> </tr> <tr> <td>b. SHGC:</td> <td>7b. (SHGC=0.32)</td> <td>847.1 ft² <input type="checkbox"/></td> </tr> <tr> <td>(or Clear or Tint DEFAULT)</td> <td></td> <td></td> </tr> </table> <p>8. 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I certify that this home has complied with the Florida Energy Efficiency Code For Building Construction through the above energy saving features which will be installed (or exceeded) in this home before final inspection. Otherwise, a new EPL Display Card will be completed based on installed Code compliant features.

Builder Signature: *[Signature]*

Date: 5.17.08

Address of New Home: 23 Middle Rd, Sewals Pt, FL

City/FL Zip: Sewals Pt, FL



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

¹ Predominant glass type. For actual glass type and areas, see Summer & Winter Glass output on pages 2&4.
EnergyGauge© (Version: FLRCSB v4.5)

OWNER'S AFFIDAVIT OF BUILDING COSTS

STATE OF FLORIDA
COUNTY OF MARTIN

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

1. That Affiant is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affiant's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 362,400.00.
4. That this affidavit is made for the purpose of inducing the building official of the Town to issue a certificate of occupancy for the improvements, with the intention that it be relied upon for that purpose.

FURTHER Affiant sayeth not.

Affiant's Signature:

Nicholas Mayreau

Property Address:

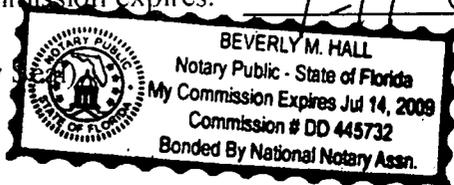
23 Middle Road

Stuart, Fla. 34996

SWORN TO and subscribed before me this 6th day of May, 2008, by Nicholas Mayreau who is personally known to me or produced Fla Driver LC as identification.

Beverly M Hall
Notary Public
My commission expires: 7-14-09

(Notary)





8172
FILE

Martin County Health Department

TO BUILDING DEPARTMENT INSPECTIONS:

- MARTIN COUNTY (772) 288-5916 FAX: (772) 288-5911
- CITY OF STUART (772) 288-5326 FAX: (772) 288-5388
- JUPITER ISLAND (772) 545-0150 FAX: (772) 545-0188
- SEWALLS POINT (772) 287-2455 FAX: (772) 220-4765

FROM: Duonda O'Grawe DATE: 04/22/08

SUBJECT: FINAL CONSTRUCTION APPROVAL FOR: SEPTIC SYSTEMS (SS)
 LIMITED USE PUBLIC WATER (58)

<u>HEALTH DEPT. PERMIT#</u>	<u>BUILDING DEPT. PERMIT #</u>	<u>LOCATION</u>
• 43-SS-0 <u>8114</u> 43-58- _____	8172	23 MARBLE RD SEWALLS POINT
• 43-SS-0 _____ 43-58- _____		

B & B
Engineers & Consultants, Inc.

706 SOUTH 7th STREET
FT. PIERCE, FL. 34950
TEL (772) 708-7785
FAX (863) 467-1292

December 13, 2006

STRUCTURAL REVISIONS

Re: Permit # 8172

Project: Mariano
23 Middle Road

FILE

Prepared for: Sewalls Point Building Dept. (Attn. Phillip Wintercorn)

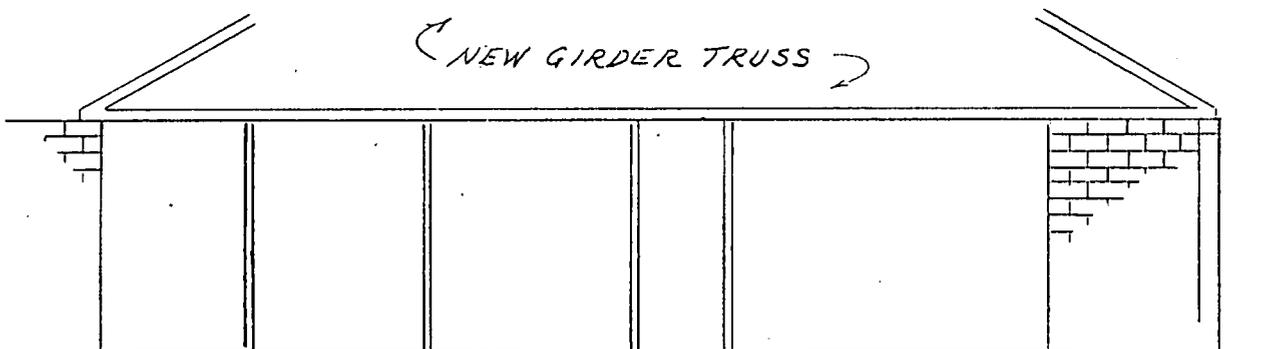
Client: Ken Wendell General Contractors, Inc.

Background:

The contractor has requested several revisions to the approved plans and specifications submitted for permitting. B & B Engineers & Consultants have been commissioned to submit the engineered revisions for the Building Dept. approval.

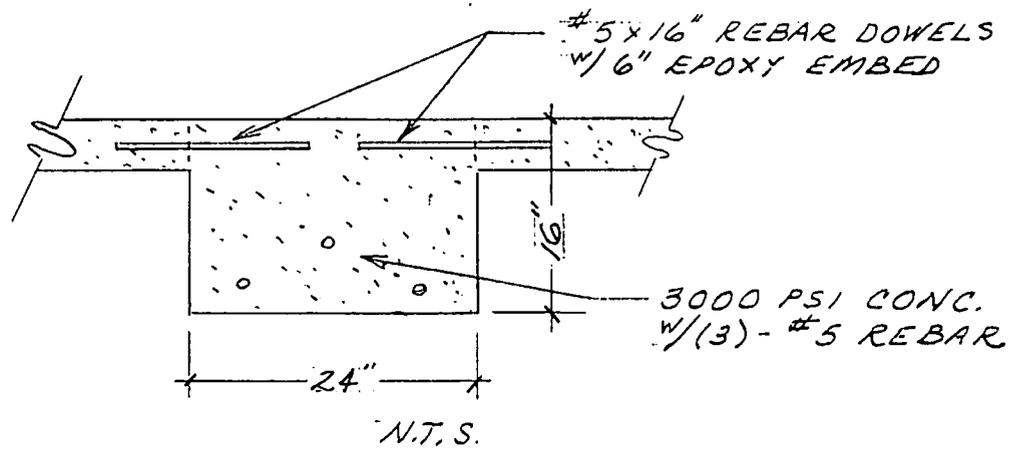
Revisions:

- 1.) The 3 ½"x 3 ½"x ¼" steel columns supporting the (3 member) main girder have been relocated as shown below:

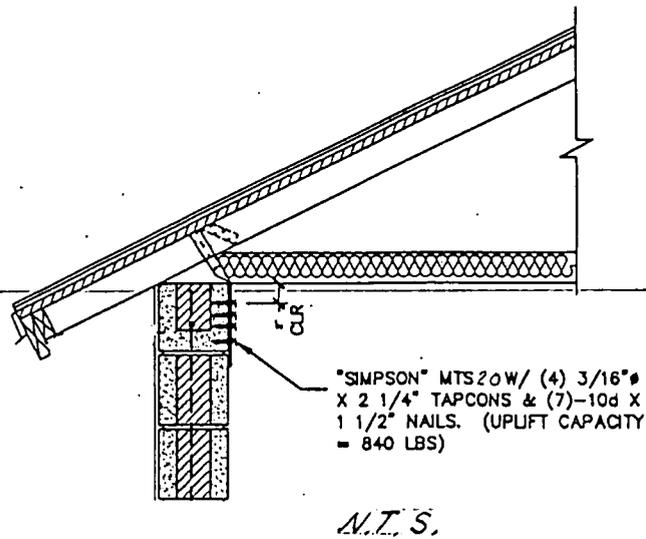


(SEE TRUSS PLANS FOR EXACT COL. LOC.)
N.T.S.

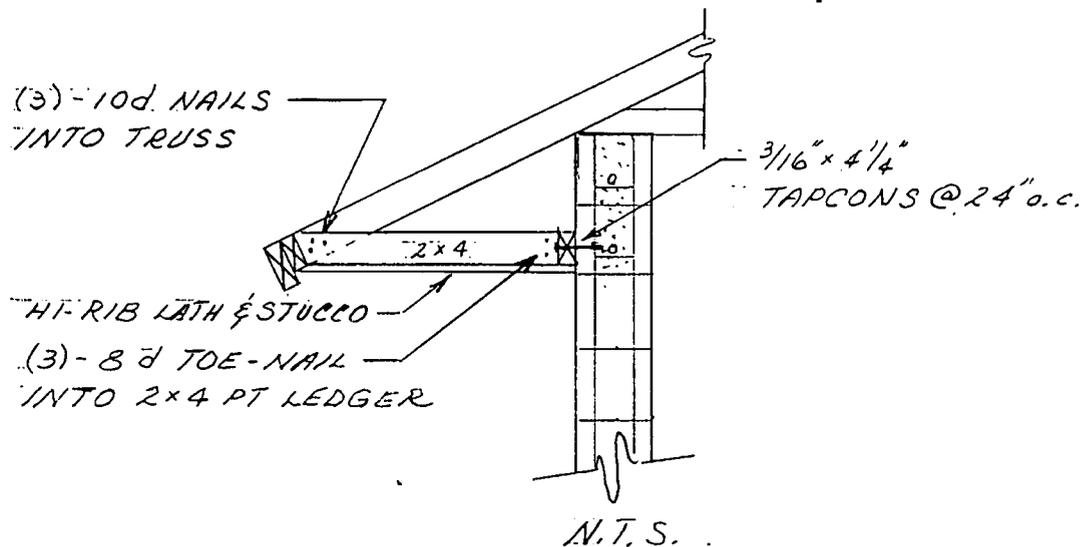
- 2.) The footings required to support the aforementioned columns and the bearing partitions have been relocated. The footings are to be 16"x 24" wide with (3) #5 rebars and #5 rebars doweled into the existing footings.



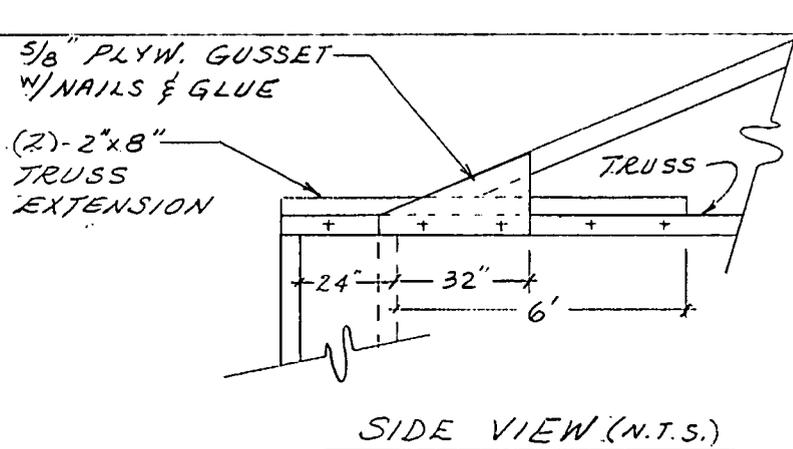
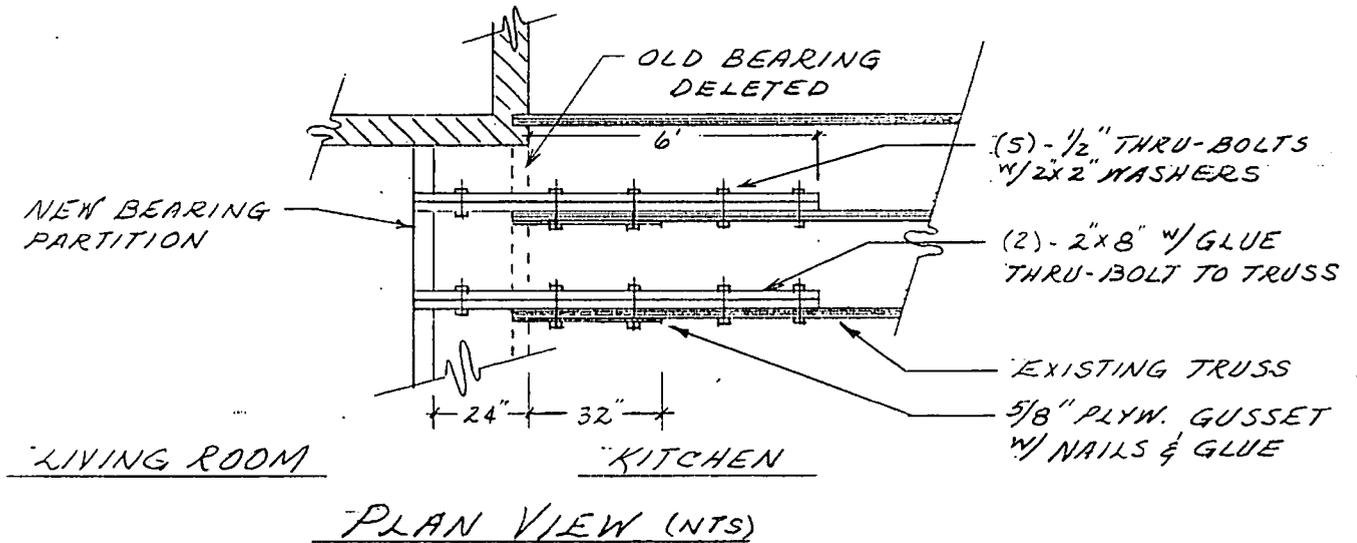
- 3.) The existing trusses have questionable strapping at the tie beam and we recommend that additional strapping be installed. A Simpson MTS 20 with (4)- 3/16"x 2 1/4" Tapcons & (7)- 10d x 1 1/2" nails @ the tie beam.



- 4.) Level returns to be added to the trusses with stucco soffits per detail:

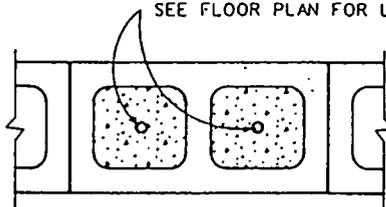


- 5.) Two existing roof trusses must be extended to bear on the new bearing partition (relocation of south wall of the kitchen) per detail:

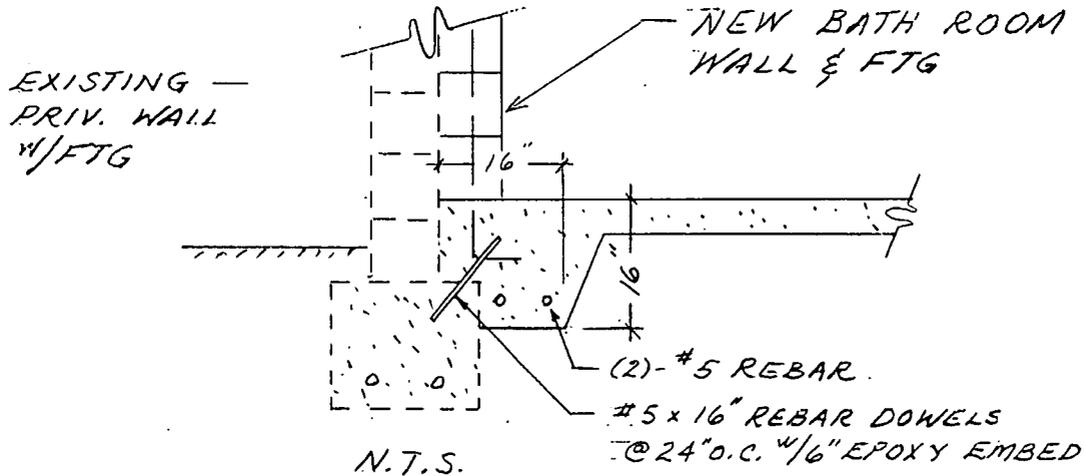


- 6.) Block columns with filled cells may be used where poured concrete columns are indicated on the plan at the contractors discretion.

FILLED CELL MASONRY COLUMN
WITH ONE #5 FROM FOOTING
TO TIE BEAM
CONC. FILL TO BE 3000 P.S.I.
SEE FLOOR PLAN FOR LOCATION



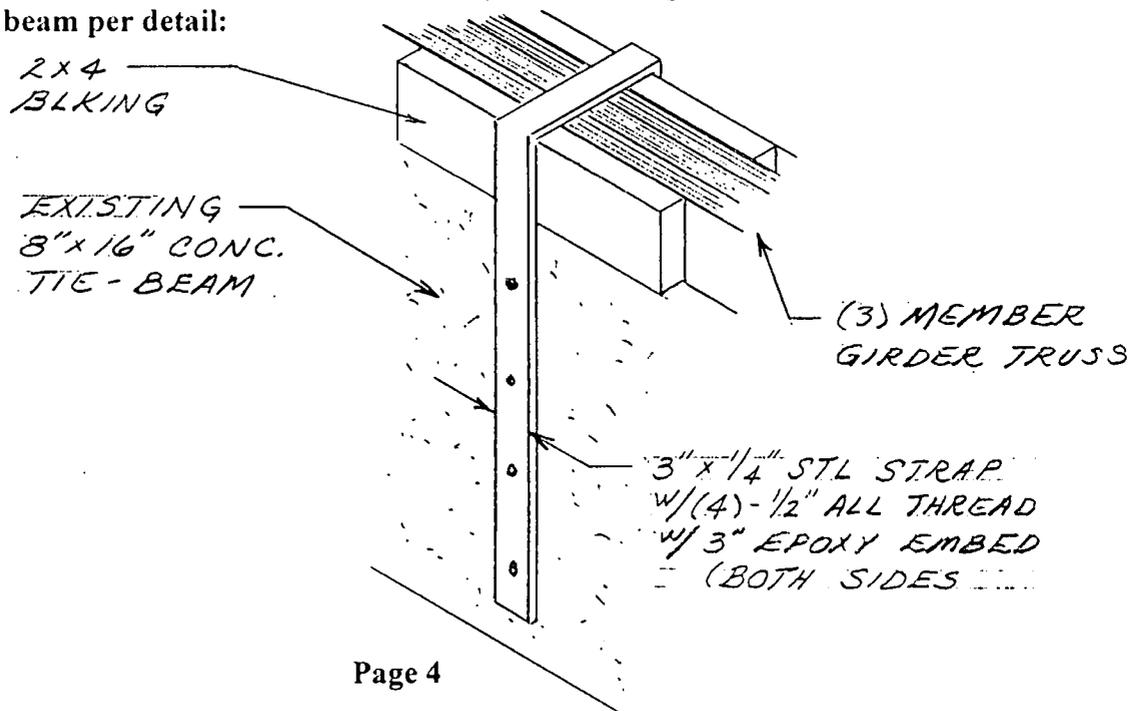
- 7.) Change French Doors to Sliding Glass Doors on the Covered Patio and the NW Bedroom on the first floor.
- 8.) The detail for the footing on the front wall of the Master Bath to be changed per new detail utilizing the existing privacy wall footing per detail:



- 9.) The tie beam above the 6' SGD on the west wall of the NW Bedroom on the first floor to be knoched up to 1 3/4" if necessary to accept a standard 6080 SGD if no rebar is exposed when cutting.

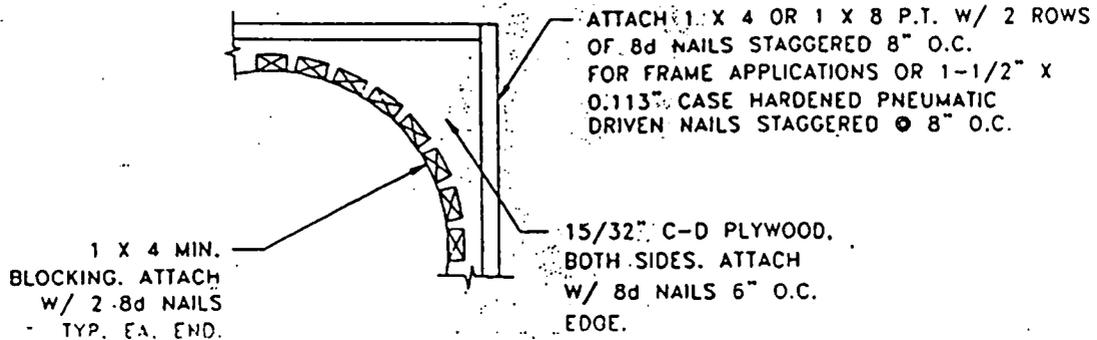
- 10.) The poured concrete tie beam above the existing 6068 doors of the Kitchen and Master Bedroom to the Covered Porch to be knoched to accept standard 6080 SGD, some rebar may be exposed with no structural damage.

- 11.) The connection detail for main (3-member) girder tie down to tie beam per detail:



11.) Circle head window above Front Entry per framing detail:

FRAMING OF DECORATIVE ARCHES AT WINDOW AND DOOR OPENINGS SHALL COMPLY WITH THE FOLLOWING:



Structural Certification:

The above structural revisions meet the 2004 FBC for 140 mph wind loading.

Limitations:

Our professional services have been performed, our findings obtained and our recommendations are in accordance with general accepted structural engineering principles and practices. This company is not responsible for the conclusions, opinions or recommendations made by others based on these findings. The scope of this inspection was intended to provide the contractor with engineering to correct the existing conditions as discovered. The recommendations submitted in this report are based upon the field inspection made on 10/5/06.

Certify,


Oscar M. Bermudez, P.E. 12/14/06
FL. Lic. #55141



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 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.

FOOTERS

NEED COMP. TEST

NEED ENGR DETAIL FOR
REVISED INTERIOR PANS

NEED ENGR DETAIL FOR
TRUSS MODIFICATION AT

RELATED BEARING WALL

NEED REVISION FROM ENGR
FOR COL. #3 & 2.

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

DATE: 12/13

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-13, 2006 Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8453	Bills	Final	PASS	CLOSE
8	31 Via Lucinda Reamer			INSPECTOR: <i>[Signature]</i>
8463	Cocorullo	Final-fence	PASS	CLOSE
4	20 Island Rd Berley Gates			INSPECTOR: <i>[Signature]</i>
mm	Cathay	Final	FAIL	
9	41 S Sewall St Duffwood	215-0074 <u>ALAN</u>		INSPECTOR: <i>[Signature]</i>
2172	Morano	Boony Slab	PASS	ASSUMING RECEIPT OF BURR. FOOTING DESIGN CHANGES.
13	23 Middle Rd Ken Wendell			INSPECTOR: <i>[Signature]</i>
	Smith	Flags on lot		
5	1335 River Rd owner	(see me)		INSPECTOR: <i>[Signature]</i>
MC 0027		TIE BEAM	FAIL	
11	3 TUSCAN MASTER PIECE		PASS	REINSPECTED LATE MORNING INSPECTOR: <i>[Signature]</i>
MC 0088	POOLE	SLAB	FAIL	
13	94 S.S.P.R.			INSPECTOR: <i>[Signature]</i>
OTHER:	POWERS	FINAL		
10413	70 SOUTH S.P. RD. F.P.C.		PASS	CLOSE <i>[Signature]</i>

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-20, 2006

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
0016	Rivera	Plumbing-Final	PASS	
6	3 Emarita OB	meter POWER RELEASE	FAIL	INSPECTOR: <i>OW</i>
Tree	Gotfried Gumpf	Tree	PASS	
5	19 N Via Lucinda OB			INSPECTOR: <i>OW</i>
8172	Mariano	rough plumbing	PASS	PARTIAL/MISER B.
2	23 Middle Rd. Ken Wendell			INSPECTOR: <i>OW</i>
8105	Galini's	TRUSS ERECTION/STRAPPING	PASS	
7	26 S Sewall St Driftwood	framing plumbing form on stairs	PASS P P P	INSPECTOR: <i>OW</i>
8459	TRAVOTA	form	PASS	
151	99 S Sewall St OB			INSPECTOR: <i>OW</i>
8394	Foster	steel	PASS	
4	7 Tuma St Schiller			INSPECTOR: <i>OW</i>
8384	Noheyl	final tiki hut	FAIL	
3	26 W High St OB	(before 10AM)		INSPECTOR: <i>OW</i>
OTHER: _____				



A. M. ENGINEERING AND TESTING, INC.

860 JUPITER PARK DRIVE, UNIT #1

JUPITER, FLORIDA 33458

LOCAL OFFICE: (561) 745-1060 FAX: (561) 745-0981

REPORT OF FOUNDATION PAD COMPACTION

Client: **Ken Wendall General Contractor**
3000 SE Waaler Street
Stuart, Florida 34997
Site: **23 Middle Road, Sewell's Point,**
Martin County, Florida
Foundation Pad for Additions

Report Date: December 21, 2006
Project No: 1559
Report No: 2
Permit No: -

FILE

Density tests and Hand Cone Penetrometer (HCP) readings were made from slab grade through the depth of fill at a minimum of three locations in the building pad. The density tests were performed in general compliance with ASTM D 2922. The HCP test, in conjunction with information about the soil type, is empirically correlated to the relative density of subsurface soils.

Density Test No.	Date Tested	Location	Elevation (feet)	Dry Density (pcf)		Percent Compaction
				In Place	Proctor	
1	12/13/2006	North Pad, Center	0-1	102.3	106.8	95.8
2		South Pad, Center	0-1	103.1	106.8	96.5
3		South Footing, Center	**0-1	104.4	106.8	97.8
4		East Footing, Center	**0-1	104.5	106.8	97.8
5		North Footing, Center	**0-1	104.0	106.8	97.4

- * All elevations are below slab grade.
- ** All elevations are below footing grade.

The depth of the fill was approximately one foot. The fill should extend at least five feet beyond the building perimeter. At the time of our testing no information was available regarding the foundation pad setbacks.

In the locations and depths that were tested, the soil has been compacted to a minimum of 95 percent of the modified Proctor maximum dry density (ASTM D 1557). No soil borings were performed below the recently placed fill.

Distribution:
Client (3)

KF/cs

Submitted by:
A. M. ENGINEERING AND TESTING, INC.

Kevin Ferguson 12/21/06

Kevin Ferguson, P.E.
Florida Registration No. 60712

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-29, 2006

Page 1 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8105	Galinis	Insulation	PASS	
8	26 S Sewall Pt Driftwood			INSPECTOR: <i>[Signature]</i>
8469	Cooney	IN-progress	PASS	
11 AM	17 Middle Rd Stuart Roof (LINDA)			INSPECTOR: <i>[Signature]</i>
8476	Cooney	bond wire	PASS	
1A	17 Middle Rd A+G Pool			INSPECTOR: <i>[Signature]</i>
0016	Briera	meter	FAIL	
7	35 Emaita OB permit on kitchen counter		408-3990	INSPECTOR: <i>[Signature]</i>
8102	Morano	rough plumbing	PASS	
2	23 Middle Rd Ken Wendell			INSPECTOR: <i>[Signature]</i>
Tree	Snyder	Tree	PASS	
5	16 Heron's Nest OB			INSPECTOR: <i>[Signature]</i>
7801	Summings	stomached soaker foundation	Cancel	reschedule Wed
	835 Briera Rd Elias Agmt			INSPECTOR: 1/3/07
OTHER:				



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 MIDDLE RD

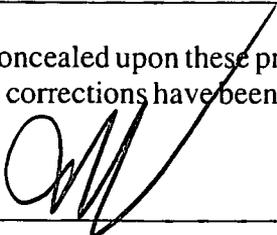
I have this day inspected this structure and these premises and have found the following violations of the City, County, and/or State laws governing same.

~~TIE BM / COL.~~

MISSING 1 #5 IN FILLED
CELL @ EA. #2 COLUMN
PER CHANGE FROM
ENGINEER -

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

DATE: 1/5/07


INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-5, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8469	Cooney	Final	FAIL	
3	17 Middle Rd Struct Roofing			INSPECTOR: <i>OM</i>
0016	Revera	meter	PASS	
6	3 Emarita O/B	10:30		INSPECTOR: <i>OM</i>
8415	Clifford	Final shutters, etc	PASS	CLOSE
7	20 N. River Rd Reamer Const	11:00 Call Brian to meet 2-15-2007		INSPECTOR: <i>OM</i>
8476	Cooney	patio	PASS	
3	17 Middle Rd A+G Pools			INSPECTOR: <i>OM</i>
8441	Dressler	stem wall footing	FAIL	
4	12 Island Rd Harbor Course			INSPECTOR: <i>OM</i>
6192	Marras	summit beam	FAIL	
1A	23 Middle Rd Ken Wendell	footing		INSPECTOR: <i>OM</i>
in copy 0119	Kline	final - remove	PASS	CLOSE
5	8 Cranes Nest Fitness	contracting hailer debris No permit - Seale - Val		INSPECTOR: <i>OM</i>
OTHER: _____				

B & B
Engineers & Consultants, Inc.

706 SOUTH 7th STREET
FT. PIERCE, FL. 34950
TEL (772) 708-7785
FAX (863) 467-1292

January 5, 2007

INSPECTION

Re:

Permit # 8172

FILE

Project:

Mariano
23 Middle Road

Prepared for: Sewalls Point Building Dept.

Client:

Ken Wendell General Contractors, Inc.

Background:

The structural revisions previously submitted by our firm indicated the use of (2) filled cells in block columns in lieu of the poured columns indicated on the approved plans. The contractor chose to use block columns with (1) filled cell due to the proximity of other block columns in the wall (within 4' of each other).

Structural Certification:

The above design modification meets the 2004 FBC for 140 mph wind loading.

Limitations:

Our professional services have been performed, our findings obtained and our recommendations are in accordance with general accepted structural engineering principles and practices. This company is not responsible for the conclusions, opinions or recommendations made by others based on these findings. The scope of this inspection was intended to verify code compliance based on the aforementioned change to the use of block columns. The recommendations submitted in this report are based upon the field inspection made on 1/5/07.

Certify,



Oscar M. Bermudez, P.E. 01/09/07
FL. Lic. #55141

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-12, 2007

Page 3 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
872	Mariano 23 Middle Rd Ken Wendell	Column & beam	PASS	INSPECTOR: <i>GM</i>
8457	Rossario 137 S River Rd Mitchell Vaughn	sheathing	PASS	INSPECTOR: <i>GM</i>
5A	Rossario 137 S River Rd Mitchell Vaughn	Final driveway	(Cancel)	INSPECTOR:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-24, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
0043	Vienen	Final-roof	PASS	CLOSE
4	10 Pineapple La All American			INSPECTOR: <i>[Signature]</i>
8484	Harte	Hotmap	PASS	
1	3 High Pt - E - Cardinal Roof			INSPECTOR: <i>[Signature]</i>
Tree	Zachiel	Tree	PASS	
3	1 Riverview DR Trop. Palms			INSPECTOR: <i>[Signature]</i>
6102	Monano	Roof Sheathing	PASS	
2	23 Middle Rd Ken Wendell			INSPECTOR: <i>[Signature]</i>
6195	Shank	Final-gene	PASS	CLOSE
9	73 N. Swains Pt OB	see file/Val		INSPECTOR: <i>[Signature]</i>
6481	Hepworth	GAS ROUGH mechancial	PASS FAIL	
8	Blue Vista Sand Castle	Cancel no forms		INSPECTOR: <i>[Signature]</i>
Tree	Fidje	Tree	PASS	
8	28 Castle Hill Way Vacant lot #31			INSPECTOR: <i>[Signature]</i>

OTHER:

January 31, 2007

STRUCTURAL INSPECTION

Re:

Permit # 8172*FILE*

Project:

Mariano Residence at 23 Middle RoadPrepared for: **Sewalls Point Building Dept.**

Client:

Ken Wendell General Contractors, Inc.**Background:**

The approved plans and specifications do not address all of the structural conditions that exist with the modification of this structure. The contractor has requested that we provide additional design requirements in order to comply with the 2004 FBC.

Requirements:**NORTH SIDE ROOF EXTENTION (EYEBROW)**

The 3' garage overhang roof extension along the north side of the residence is to be supported by (2) parallel 2"x 6" P.T. ledgers attached to the existing tie beam with (2) 3¼" tapcons @ 24" o.c. The bottom chord to be attached to the ledger with a Simpson LUS 26 hangers with (4) 3/16"x 4 ¼" tapcons and (2) 10d x 1 ½" nails each. The top chord to be attached to the ledger with a Simpson MTS 20 twist strap with (4) 10d x 1 ½" nails on back side of ledger and (5) 10d x 1 ½" nails into top chord.

EXTERIOR PARTITION ABOVE GIRDER TRUSS

The 2"x 6' studs above the girder truss to be strapped to the truss every 32" with Simpson MSTA 24 flat straps and (18) 10d nails. Studs to be secured top & bottom with Simpson SP 6 or UPS connectors.

ROOF TRUSS STRAPS

Each roof truss to be strapped with a Simpson TS 22 with (18) 16d x 1 ½" nails.

EXISTING M/ BATH EAST WALL:

The new east wall of the bath is located where the existing privacy wall is. The existing privacy wall footing to be utilized by pouring a 16" x 18" conc. footing with (3) #5 rebars beside the existing footing and doweled together with #5 x 18" rebars with 6" epoxy embed @ 24" o.c. The block wall to be layed on top of the existing privacy wall with a 8"x 16" conc. tie beam with (2) #5 rebars. Vertical conc. columns to be installed on each side of the window openings with (1) #5 vertical rebar doweled into the existing footing with a 6" epoxy embed, continuous from footing to tie beam.

CHIMNEY TOWER:

Each leg of the tower to be strapped continuously from foundation to the top of all (4) corners with flat straps or twist straps where required. The minimum allowable uplift per connector to be 600#. In addition the (4) legs of the tower to be cross braced with 2"x 6" braces (nailed with (3) 16d ring shank nails and glued).

Structural-Certification:

The above design modifications meet the 2004 FBC for 140 mph wind loading.

Limitations:

Our professional services have been performed, our findings obtained and our recommendations are in accordance with general accepted structural engineering principles and practices. This company is not responsible for the conclusions, opinions or recommendations made by others based on these findings. The scope of this inspection was intended to address certain design deficiencies that were discovered after the plans were presented and approved. The aforementioned requirements are necessary to bring the structure into compliance with the 2004 code. The recommendations submitted in this report are based upon the field inspection made on 1/26/07.

Certify,

Oscar M. Bermudez, P.E. 1/31/2007
FL. License # 55141



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 MIDDLE

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.

STRAPPING / TRUSS END,

FG9 CHORD NOT NAILED CORRECTLY.

FG7 " " " "

FG1 " " " "

TRUSS REMAIN OVER KITCHEN MISSING
1- 1/2" BOLT

MISSING STRAP @ FRONT ENTRY
TRUSS.

MISSING STRAP @ MASTER BATH
TRUSS -

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

DATE: 2/5

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 25, 2007

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8457	Rossario	insulation	PASS	
7	1375 River Rd Mitchell	electric rough	PASS	INSPECTOR: <i>[Signature]</i>
7844	Valdes	Demo final	PASS	CLOSE
3	107 N. Sewall Pt OB			INSPECTOR: <i>[Signature]</i>
8482	Ginsheimer 63 N. River Rd	framing-rough	PASS	PARTIAL @ 2nd fl FL. JOIST
4	Masterpiece			INSPECTOR: <i>[Signature]</i>
8192	Mariano 23 Middle Rd	tie down TRUSS ENBL.	PASS PASS	REINSPECTED DATE MON
6	Ken Wendell			INSPECTOR: <i>[Signature]</i>
7993	COIACHINO 11 WENOU SEABATE	ROOF IN PROG.	PASS	INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-9, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172	Marians	Back insp.	PASS	PATIAL
2	23 Middle Rd Ken Wendell	Window + Door		
		133-0800	514-078	INSPECTOR: <i>JW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8530	Lulok	Interior rough	PASS	
1	20 E High Pt CTC Div.			INSPECTOR: <i>JW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8526	Carlson/Premier	rough insp.	PASS	
4	3 Tuxanda Prop Disc			INSPECTOR: <i>JW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6182	MUR	FENCE	PASS	CLOSE
5	14 PERRIWINKLE			INSPECTOR: <i>JW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8531	Cummings	Foundation	PASS	
3	835 Levee Rd Elias	Guest House		INSPECTOR: <i>JW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

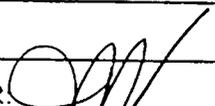
OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ~~THURS~~ ~~3-22~~, 2007

Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8105	Galenis	Meter final	PASS	CONTACT FPL
3	26 S Sewall St Driftwood	reinspect		FOR METER INSTALLATION INSPECTOR: ✓
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8175	Marciano	door bucks	PASS	
1	23 Middle Rd Ken Wendell			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8535	Stark	Temp tower	PASS	CONTACT FPL
2	87 S Kyer Rd Emil Law	reins		FOR METER INST. INSPECTOR: ✓
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

B & B
Engineers & Consultants, Inc.

706 SOUTH 7th STREET
FT. PIERCE, FL. 34950
TEL (772) 708-7785
FAX (863) 467-1292

March 27, 2007

STRUCTURAL INSPECTION

Re: **Permit # 8172**

Project: **Mariano**
23 Middle Road

Prepared for: **Sewalls Point Building Dept.**
Attn: John Adams

Client: **Ken Wendell General Contractors, Inc.**

Background:

The approved plans and specifications do not address all of the structural conditions that exist with the modification of this structure. The contractor has requested that we provide additional design requirements in order to comply with the 2004 FBC.

Requirements:

EXTERIOR WALL LIVING ROOM / PATIO

The existing wall supporting a (3) panel 12080 sliding glass door was not adequate to provide for shear from the wind load. The new 2x10 framing with (2)- 1/2"x 4" wedge anchors each side of the sliding doors and 1/4"x 4 1/4" tapcons @ 16"o.c. around the perimeter meets the shear requirements for the 140 mph wind loading.

FIREPLACE BEARING WALL (TRUSS TIE-DOWN)

The tie-down of (4) trusses supported by this wall to be accomplished by the installation of a 3'x 6' sheet of 5/8" plywood (nail & glue w/ 8d ring shank nails) to the leg of each truss and flat strapped to the partition below with Simpson MSTA18 w/ (14) 10d nails. The double 2x4 stud at the doorway to be anchored w/ a Simpson HD5A w/ (1)- 5/8"x 4" wedge anchor and (2)- 3/4" thru-bolts; top of double studs attach to 2x6 header with (2) Simpson MSTA18 w/ (14) 10d nails.

TRUSS MODIFICATION FOR ACCESS TO ATTIC AHU's

The roof truss at the access doorway located in the upstairs bedroom closet to be modified by cutting (1) of the interior members. The 2x8 sandwich headers to be installed above the cut member and thru-bolt with (1)- 5/8" bolt & 1 1/2" washers on each member. A 2x4 vertical member to be added, sandwiched with the header and thru-bolted at the top and to have gusset at the bottom chord of truss.

Structural Certification:

The above design modifications meet the 2004 FBC for 140 mph wind loading.

Limitations:

Our professional services have been performed, our findings obtained and our recommendations are in accordance with general accepted structural engineering principles and practices. This company is not responsible for the conclusions, opinions or recommendations made by others based on these findings. The scope of this inspection was intended to address certain design deficiencies that were discovered after the plans were presented and approved. The aforementioned requirements are necessary to bring the structure into compliance with the 2004 code. The recommendations submitted in this report are based upon the field inspection made on 3/23/07.

Certify,


Oscar M. Bermudez, P.E. 3/26/07
FL. Lic. #55141

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-29, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8545	Wattles	Pre pour slab	PASS	
2	20 Ridgview Steve Conway			INSPECTOR: <i>[Signature]</i>
8441	Dressler	slab	PASS	2ND FLOOR SLAB
1	12 Island Rd Harbor Course			& 1ST FL. COLS INSPECTOR: <i>[Signature]</i>
817	Morano	Pool	PASS	
3	23 Middle Rd Ken Wendell	AFTER 9:30 873-4848 MARK	ROMASCO	INSPECTOR: <i>[Signature]</i>
7993	Gachini	Entrance foundation	PASS	
1A	11 Wendy Ln Seagate			INSPECTOR: <i>[Signature]</i>
		GRADING @	OK	NEEDS FINAL
	30 RIO VISTA	RET WALL		GRADE INSPECTION
				INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 MIDDLE ROAD

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.

ROUGH PLB/ELEC.

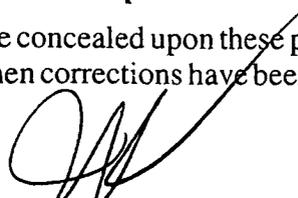
NO TRAP @ TUB WASTE, END OF TUB.

SEPARATE COPPER FROM CONTACT W/ METAL FRAMING (MASTER) WHERE IS VENT FOR TUB/S.H. (MASTER) W/H. PDN DR. ? (MASTER)

FILL IN TUB WASTE VOIDS - (EXT. WALL RIGHT SIDE ENTRY) EXPOSED COPPER LINE IN WALL ?

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

DATE: 4-2


INSPECTOR

DO NOT REMOVE THIS TAG



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 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.

CAAT

NEED NAILING @ ALL
RIBS WHERE MISSING -

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

DATE: 4/2

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-2, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6531	Cummings 83 S. River Rd Elias/Ed	Guest House slab	PASS	
				INSPECTOR: <i>[Signature]</i>
8172	Morano	rough plumbing	FAIL	
1	23 Middle Rd Ken Wendell	rough electrical LATH	FAIL FAIL	INSPECTOR: <i>[Signature]</i>
8539	Sheets 101 S River Rd Smart Roof	Final	FAIL PASS	REINSPECTED LATER MORN - Close
4				INSPECTOR: <i>[Signature]</i>
8500	Toledo 9 N River Rd Pauzie Roof.	Final - roof	FAIL	
8				INSPECTOR: <i>[Signature]</i>
8549	Demorest 92 S River Rd Demorest Const	Final Pool Guard Rail	PASS	CLOSE
5				INSPECTOR: <i>[Signature]</i>
8397	Rossario 137 S River Rd Hardware Elec	Final (gen)	FAIL	
2				INSPECTOR: <i>[Signature]</i>
Tree	Breene 113 Helcrest DR OB	Tree	PASS	
7				INSPECTOR: <i>[Signature]</i>

OTHER:

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-11, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8515	Olney	in-progress	PASS	
3	91 S Sewalls All American			INSPECTOR: <i>[Signature]</i>
8560	allen	slab	PASS	
5	6 St Lucie Ct Jimmy Powell	(END HILLCREST)		INSPECTOR: <i>[Signature]</i>
8172	Morano	rough die	PASS	
1	23 Middle Ken Wendell	rough die		INSPECTOR: <i>[Signature]</i>
8145	Gessinger & Castle Hill	beam (bond)	PASS	
6	O/B (ASP)			INSPECTOR: <i>[Signature]</i>
8557	Pope	rough	PASS	ADDED GAS ROUGH
2	124 S Sewalls Prop Disc			FOR U.H. - NORTH EXTERIOR INSPECTOR: <i>[Signature]</i>
8566	Hepworth	steel-bond	cancel	
4	8 Rio Vista Keith Mahaffey	main drain		INSPECTOR:
8A23	SILAS	ROOF METAL	PASS	
7	10 CASTLE HILL O.B. (8A3-247-5783)	LATH		INSPECTOR: <i>[Signature]</i>
OTHER:	CELL			
8481	Galiniis	Final gas	CANCEL	- WILL RESCHEDULE
	26 S Sewalls			<i>[Signature]</i>
	Prop Disc			



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: ~~4777 SEWALL'S POINT ROAD~~ 23 MIDDLE

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.

~~SEE~~ A/C ROUGH -

FRAMING -

NEED ENCL LETTER ADDRESSING

ADDED DEAD LOAD OF AHU.

NEED ENCL LETTER ADDRESSING

MODIFIED TRUSS IN ATTIC

ENTRY -

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

DATE: 4/12

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed THUR 4-12, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172 1	Mariano 23 Middle Rd Ken Wendell-	Rough AC Removal	PASS PASS	INSPECTOR: <i>OM</i>
7220	Clements	Final dock	PASS	CLOSE
6680 3	11 W High Pt O/B	Final bracket	PASS	CLOSE INSPECTOR: <i>AW</i>
8568 2	Mariano 23 Middle Rd C/C Di V	Interior rough	PASS	INSPECTOR: <i>OM</i>
8027	Hartse 3 E High Pt TC Garage	Final	PASS	CLOSE INSPECTOR: <i>OM</i>
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:
				INSPECTOR:

OTHER: _____

B & B
Engineers & Consultants, Inc.

706 SOUTH 7th STREET
FT. PIERCE, FL. 34950
TEL (772) 708-7785
FAX (863) 467-1292

April 12, 2007

AIR HANDLER UNITS INSTALLED IN ATTIC

Re: Permit # 8172 *FILE*

Project: Mariano
23 Middle Road

Prepared for: Sewalls Point Building Dept. (Attn. Phillip Wintercorn)

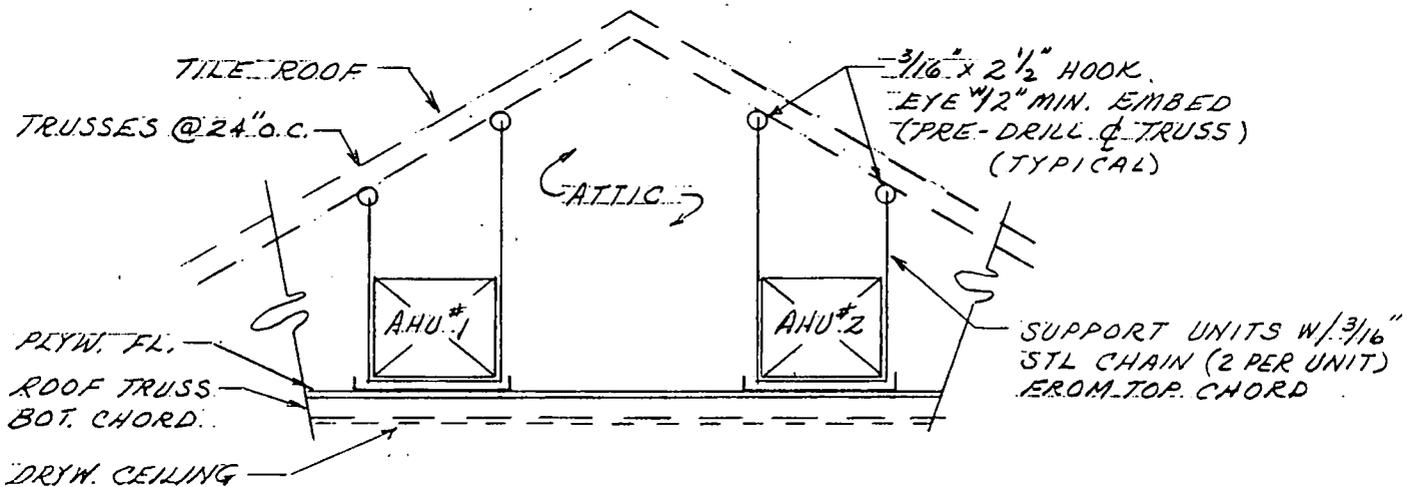
Client: Ken Wendell General Contractors, Inc.

Background:

The contractor has requested that we inspect the installation of the (2) Air Handler Units in the attic that were supported by plywood flooring nailed to the bottom chords of the roof trusses.

Reccomendations:

The AHU's should be suspended from the top chords of (2) trusses directly above with a 3/16" dia. steel chain per the detail below:



DETAIL
(N.T.S)

RECEIVED
11/3/07

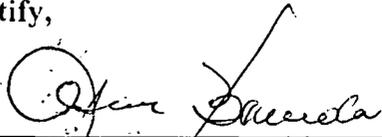
Structural Certification

The above design is in accordance with general accepted structural engineering principles and practices.

Limitations

Our professional services have been performed and we are not responsible for any conclusions or opinions made by others based on these findings. The scope of this inspection was intended to provide the contractor with engineering to correct the existing conditions as discovered. The recommendation submitted in this report is based on the field inspection made on 4/11/07.

Certify,



Oscar M. Bermudez, P.E. 4/13/07
FL.Lic. #55141

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-20, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6079	Tennant	Final fence		MONDAY
7	715 Sewalls Pt OTB			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172	Mariano	...	PASS	
2	23 Middle Rd Ken Wendell	...	PASS	INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8535	Stark	plumbing rough	FAIL	
4	875 River Rd Emil LaVieja			INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
0088	Boole	tie down ^{turse}	FAIL	
8	94 N Sewalls w. white			INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8381	Giachino	final gas	PASS	Close
X	Wendula			INSPECTOR: <i>OW</i>
	PROP Disc.			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8545	Wattles	tin tag metal	PASS	
5	20 Kulgeview N. Stephen Conway			INSPECTOR: <i>OW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8537	Bober	Final KIT.	FAIL	
1	10 E High Pt Swiecz Const.			INSPECTOR: <i>OW</i>
OTHER:				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-2, 2007

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172	Norwiche	Electric panel	PASS	
2A	23 Middle Rd Ken Wendell			INSPECTOR:
8493	Galino	Final	FAIL PASS	CLOSE
8	265 Sewall Pt Olympic Pools			INSPECTOR:
8552	Seinfeld	In Progress	PASS	
6	3 Palmetto Hoeker Services	tin tag		INSPECTOR:
6829	Kearney	Final	- CANCEL -	- will RESCHEDULE
9	12 N River Rd JA Taylor Roof.			INSPECTOR:
6881	Hicks	Final	FAIL	INSPECTOR:
7	7 Emarita Way JA Taylor Roof.			INSPECTOR:
8566	Hepworth	rough plumb	FAIL	
124 AST	8 Rio Vista Keith Malaffey Pools			INSPECTOR:
8571	Bush	window bucks	PASS	
5	2 Mindoro St Park Co			INSPECTOR:

OTHER:

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6-1, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5533	West 7 Palmetto Dr O/B	Windows Windows		Cancel INSPECTOR:
8162	McComick	Final	FAIL	
8A	59 N River Rd Advantage Pool			INSPECTOR: <i>[Signature]</i>
7930	Lapikas	Windows only	PASS	
9	3 Indialucie Pkwy Sears			INSPECTOR: <i>[Signature]</i>
7929	Lapikas	SIDING	PASS	Close
9	3 Indialucie Pkwy Sears			INSPECTOR: <i>[Signature]</i>
8606	Larsen	Footst slab	FAIL	
3	11 Lantana La AP		PASS	REINSPECTED LATE MON.
				INSPECTOR: <i>[Signature]</i>
8192	Mariano	Temp Power	PASS	no contact
2	23 Middle Rd Ken Wendell			INSPECTOR: <i>[Signature]</i>
8145	Geisenger	concrete pour	PASS	
8	8 Curlett Hill O/B	in hallway		INSPECTOR: <i>[Signature]</i>
OTHER:				

Valerie Meyer

From: Valerie Meyer [vmeyer@sewallspoint.martin.fl.us]
Sent: Tuesday, June 05, 2007 8:39 AM
To: FPL (tc_inspections@fpl.com)
Subject: 23 Middle Rd

Please install meter at the following:

Mariano
23 Middle Rd
Sewall's Point, FL 34996

Thank you

Valerie Meyer
Town of Sewall's Point
Building Department
772-287-2455 Ext. 13

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 10/8/07, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8348 2	OLCOTT 107 HENRY SEWALLWAY	FINAL WINDOWS/DRS		Reschedule 10/9 INSPECTOR:
8711 6	Foch 145 Sewalls Pt Custom Craftsmen	rough electric rough plumbing interior framing	PASS FAIL PASS	INSPECTOR: <i>[Signature]</i>
7338 1	McCormick 59 N River Rd Pine Orchard	Final (8:30)	FAIL	INSPECTOR: <i>[Signature]</i>
8655 5	Moscattello 1 Worth Ct O/B	gas final	PASS	INSPECTOR: <i>[Signature]</i>
8172 3	Manley 23 Middle Rd O/B	gen final call owner before to meet	PASS	INSPECTOR: <i>[Signature]</i> 260-3290
8222 4	Manley 39 W High Pt Worrell	Final house final electric final AC	PASS PASS	INSPECTOR: <i>[Signature]</i> need cost of final survey
8198 1	McCormick 59 N River Rd Propane Sew	gas final	FAIL	INSPECTOR: <i>[Signature]</i>
OTHER: 8045	Kendall 8 Kingston Propane Elec	Gen final	PASS	@ WSP <i>[Signature]</i>



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: ~~33~~ MIDDLE ROAD

23

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

POWER RELEASE

CONNECT BONDING WIRES
@ POOL EQUIP.

EXPOSED WIRES @ WEST SIDE
OF POOL WALL, (ABANDONED)

CABLE PANEL BREAKERS FOR
A/C EQUIP. #'S \square

OK TO INSTALL METER

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

DATE: 4/23


INSPECTOR

DO NOT REMOVE THIS TAG

(2) 40th, North
30 / 40 South.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-23, 2008 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172	MANSON	[REDACTED]	PASS	Call FFC
1	23 MIDDLE RD OB	METER FINAL		INSPECTOR: <i>[Signature]</i>
8820	DE SORRE		FAIL	
3	64 N. RIVER RD IMC	Column & Beam		INSPECTOR: <i>[Signature]</i>
8936	FOOMAN		PASS	
2	37 W. WILSON PT FFC	FOODS		INSPECTOR: <i>[Signature]</i>
8805	JACHEM 22 RIDGELAND PRIVACY FENCE	FENCE FINAL	PASS	CLOSE
				INSPECTOR:

OTHER: _____

Valerie Meyer

From: Valerie Meyer
Sent: Thursday, April 24, 2008 9:40 AM
To: 'FPL (tc_inspections@fpl.com)'
Subject: 23 Middle Rd

Please set meter at the following – Was inspected and passed:

Mariano
23 Middle Rd
Sewalls's Point, FL

If you have any questions, please contact me.

Thank you,

Valerie Meyer
Town of Sewall's Point
Building Department
772-287-2455 Ext. 13



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 MIDDLE ROAD.

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.

FINAL

SUPPLEMENT TO INCLUDE OVERALL
BLDG HEIGHT. STRUCTURE IS
2 STORY NOT ONE STORY.

INSTALL WEATHER STRIP ON
DOOR TO GAR.

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

DATE: 5-7

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-7, 2008 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8857	Geller	UG Plumbing	Pass	
8867	10 Palmetto DR			
9A	Ken Wendell			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8859	Coverdale	Final	Pass	Close
11	51 N River Rd	(Garage door)		
	OB			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8801	Barnfather	Final	FAIL	
1st	49 S Sewalls			
	Everglades			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8855	Weder	Reinspection	FAIL	
10	49 N River	cap, steel		
	TCBI	tie back		
		deadman		INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	Fabinsky	Trees	Pass	
7	10 Mandalay			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	Jochem	Tree	Pass	
9	22 Lidgeland Dr			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172	Mann	Final	FAIL	
8172	23 Middle Rd			
8172	OB			INSPECTOR: <i>[Signature]</i>
OTHER:	- WARNING -			
	64 N. RIVER WORKERS OK			
	8-9			

8468

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 12-6-06

BUILDING PERMIT NO. 8468

Building to be erected for Mariano

Type of Permit Reroof

Applied for by Heaton Roofing (Contractor)

Building Fee _____

Subdivision High Point Lot 42 Block _____

Radon Fee _____

Address 23 Middle Rd

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

133841-002-000-004207-0000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee 120-

Amount Paid \$120- Check # 3065 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 37500-

TOTAL Fees 120-

Signed [Signature]
Applicant

Signed John Adams
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED
12-04-06

MASTER PERMIT #8172

Town of Sewall's Point

Date: 12-4-06

BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: NICHOLAS MARIANO Phone (Day) _____ (Fax) _____

Job Site Address: 23 MIDDLE ROAD City: SEWALLS POINT State: FL. Zip: 34996

Legal Desc. Property (Subd/Lot/Block) LOT 42 High Point Parcel Number: 13384100200000420-7

Owner Address (if different): 23 MIDDLE RD. City: SEWALLS POINT State: FL. Zip: 34996

Description of Work To Be Done: RE-ROOF: TILE TO TILE

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES: (RE-ROOF ONLY)

Estimated Cost of Construction or Improvements: \$ 37,500.00
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

Is Improvement cost 50% or more of Fair Market Value? YES NO

Method of Determining Fair Market Value: _____

(If no, fill out the Contractor & Subcontractor sections below)
(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: DAN HEATON ROOFING Phone: 287-0116 Fax: 221-2299

Street: 3371 S.W. 42nd AV./MAIL-PO BOX 1143 P. City: PALM CITY State: FL. Zip: 34990

State Registration Number: _____ State Certification Number: CCC036970 Martin County License Number: 1986-520-0019

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: DAN HEATON ROOFING INC. State: FL. License Number: CCC036970

ARCHITECT _____ Lic.#: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

ENGINEER _____ Lic.#: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required) _____

State of Florida, County of: MARTIN

This the 4th day of December, 2006

by Nicholas Mariano who is personally

known to me or produced as identification. _____

Notary Public

My Commission Expires: FEB 12 2010

CONTRACTOR SIGNATURE (required) _____

On State of Florida, County of: MARTIN

This the 4th day of DECEMBER, 2006

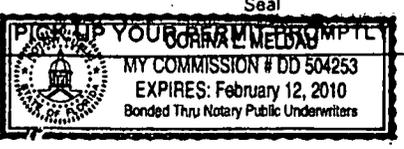
by DANIEL E. HEATON who is personally

known to me or produced as identification. _____

Notary Public

My Commission Expires: FEB 12th 2010

PERMIT APPLICATIONS VALID 30 DAYS FROM REPAIR NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY



TOWN OF SEWALL'S POINT RE-ROOF PERMIT CERTIFICATION

PERMIT # _____
CONTRACTOR'S NAME: HEATON ROOFING PHONE # 287-0116 FAX: 221-2299

OWNER'S NAME: NICHOLAS MARIANO

CONSTRUCTION ADDRESS: 23 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

ROOF TYPE: HIP BOSTON-HIP GABLE FLAT OTHER

ROOF PITCH: 6 /12 SLOPE

ROOF DECK: SHEATH-OVER - (APPLYING PLYWOOD PANELS OVER EXISTING SPACED SHEATHING) - REQUIRES A FLORIDA REGISTERED ENGINEER'S WRITTEN SPECIFICATIONS AND PLANS WITH DETAILS DESCRIBING ATTACHMENT REQUIREMENTS (NAIL OR SCREW LENGTH AND FASTENING PATTERN INTO FRAMING MEMBERS.) SPECIFICATIONS SHALL BE SUBMITTED AT TIME OF ROOFING PERMIT APPLICATION.

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

EXISTING ROOF COVERING: CEMENT TILES EXISTING COVERING TO BE REMOVED? YES NO

PROPOSED NEW ROOF COVERING: SPANISH-S CEMENT TILES

MANUFACTURER: ENTEGRA PRODUCT NAME: SPANISH-S PRODUCT APPR # 06-0606.06

(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: REMOVE EXISTING ROOF TO SHEATHING, RE-NAIL TO CODE, DRY-IN 1-30LB
INSTALL METAL FLASHINGS, HOT MOP MODIFIED UNDERLAYMENT,

INSTALL TILES USING POLYFOAM ADHESIVE.

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: 12-5-06
SIGNATURE OF CONTRACTOR

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE 12/5/06
[Signature]
BUILDING OFFICIAL

SEWALL'S POINT BUILDING DEPARTMENT

MUST BE SUBMITTED WITH PERMIT APPLICATION

	ROOFING MATERIAL LIST	QUANTITY	REMARKS
1	30lb felt	33rolls	
2	TIN-TAGS	2 BOXES	
3	1 1/2" ROOFING COIL NAILS	1 BOX	
4	#8 RING-SHANK COIL NAILS	1 BOX	
5	COPPER DRIP EDGE, FLASHING, VALLEYS	400' x 200' x 2rolls	
6	HOT TAR (ASPHALT)	20qt's	
7	MODIFIED-BITUMEN TILE UNDERLAYMENT	70rolls	
8	MODIFIED BITUMEN ADHESIVE (BULL)	3 CANS	
9	6" MEMBRANE	1 roll	
10	ENTEGRA SPANISH-S CEMENT TILES	65sqr's	
11	POLYFOAM TILE ADHESIVE 17gal.	2 sets	
12	METAL HIP & RIDGE	250'	
13	MASONRY CEMENT	15bags	
14	WHITE MASONRY SAND	2 yrd's	
15			
16			
17			
18			
19			
20			

*From HEATON Roofing - 287-0116
For - Mariano Res.*



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

www.buildingcodeonline.com

NOTICE OF ACCEPTANCE (NOA)

Entegra Sales, Inc.
819 N. Federal Highway, Suite 300
Stuart, FL. 34994

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: Valencia Spanish "S" Concrete Roof Tile

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

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

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

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

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

This replaces NOA # 06-0310.07 and consists of pages 1 through 6
The submitted documentation was reviewed by Alex Tigera.



NOA No. 06-0606.06
Expiration Date: 06/07/11
Approval Date: 07/06/06
Page 1 of 6

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub Category: Roofing Tiles
Material: Concrete

1. SCOPE

This revises a roofing system using Entegra Valencia Spanish "S" Concrete Roof Tile, as manufactured Entegra Roof Tile Corporation described in Section 2 of this Notice of Acceptance, designed to comply with the Florida Building Code, 2004 Edition for High Velocity Hurricane Zone. For the locations where the pressure requirements, as determined by applicable Building Code, does not exceed the design pressure values obtain by calculations in compliance with RAS 127 using 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>
Valencia Spanish "S"	l = 18" w = 10 1/4" min. 3/4" thick	TAS 112	High profile, interlocking, one-piece, "S" shaped, concrete roof tile equipped with two nail holes. For direct deck nail-on, mortar set or adhesive set applications.
Trim Pieces	l = varies w = varies 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 36" x 75' roll or 60" x 75' roll	TAS 104	Single ply, nail-on underlayment with 2" self-adhering top edge.	Protect-O-Wrap, Inc. (with current NOA)
Ice and Water Shield	36" x 75' roll	TAS 103	Self-adhering underlayment	W.R. Grace Co. (with current NOA)
Tile Nails	Min. 10dx 3"	TAS 114 Appendix E	Corrosion resistant screw or smooth shank nails	generic
Tile Screws	#8x 2 1/2" long 0.335" head dia. 0.131" shank dia. 0.175" screw thread dia.	TAS 114 Appendix E	Corrosion resistant, coated, square drive, galvanized, coarse thread wood screws	generic



<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Roof Tile Mortar ("TileTite™")	N/A	TAS 123	Prepared mortar mix designed for mortar set roof tile applications.	Bermuda Roof Company, Inc. with current PCA
Roof Tile Mortar ("Quikrete® Roof Tile Mortar #1140")	N/A	TAS 123	Prepared mortar mix designed for mortar set roof tile applications.	Quikrete Construction Products with Current PCA
Roof Tile Mortar ("BONSAL® Roof Tile Mortar Mix")	N/A	TAS 123	Prepared mortar mix designed for mortar set roof tile applications.	W. R. Bonsal Co. with current PCA
Roof Tile Adhesive ("Polypro® AH160")	N/A	See PCA	Two component polyurethane adhesive designed for adhesive set roof tile applications.	Polyfoam Products, Inc.
Roof Tile Adhesive TileBond	Factory premixed canisters	Sec PCA	Single component polyurethane foam roof tile adhesive	Flexible Products (with current NOA)
Hurricane Clip & Fasteners	Clips Min. ½" width Min. 0.060" thick Clip Fasteners Min. 8d x 1 ¼"	TAS 114 Appendix E	Corrosion resistant clips with corrosion resistant nails.	Generic

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 shall be performed in accordance with RAS 106.
- 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 underlayments 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

- 4.1.1 Entegra Valencia Spanish "S" Concrete Roof Tile and its components shall be installed in strict compliance with Miami Dade County Roofing Application Standard RAS 118, RAS 119, and RAS 120.



NOA No. 06-0606.06
Expiration Date: 06/07/11
Approval Date: 07/06/06
Page 3 of 6

4.2 Data For Attachment Calculations

Table 1: Average Weight (W) and Dimensions (l x w)			
Tile Profile	Weight-W (lbf)	Length-l (ft)	Width-w (ft)
Valencia Spanish "S" Tile	11.1	1.5	.854

Table 2: Aerodynamic Multipliers - λ (ft ³)		
Tile Profile	λ (ft ³) Batten Application	λ (ft ³) Direct Deck Application
Valencia Spanish "S" Tile	0.232	0.252

Table 3: Restoring Moments due to Gravity - M_g (ft-lbf)										
Tile Profile	3":12"		4":12"		5":12"		6":12"		7":12" or greater	
	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck
Valencia Spanish "S" Tile	6.70	7.10	6.60	7.00	6.46	6.84	6.30	6.67	4.08	N/A

Table 4: Attachment Resistance Expressed as a Moment - M_t (ft-lbf) for Nail-On Systems				
Tile Profile	Fastener Type	Direct Deck (min 15/32" plywood)	Direct Deck (min. 19/32" plywood)	Battens
Valencia Spanish "S" Tile	2-10d Ring Shank Nails	28.6	41.2	19.4
	1-10d Smooth or Screw Shank Nail	5.1	6.8	2.8
	2-10d Smooth or Screw Shank Nails	6.9	9.2	7.3
	1 #8 Screw	20.7	20.7	18.1
	2 #8 Screw	43.2	43.2	29.8
	1-10d Smooth or Screw Shank Nail (Field Clip)	23.1	23.1	19.0
	1-10d Smooth or Screw Shank Nail (Eave Clip)	29.3	29.3	24.0
	2-10d Smooth or Screw Shank Nails (Field Clip)	27.6	27.6	38.6
	2-10d Smooth or Screw Shank Nails (Eave Clip)	38.1	38.1	41.8
	2-10d Ring Shank Nails ¹	33.1	48.1	

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



PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR RE-ROOFING

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

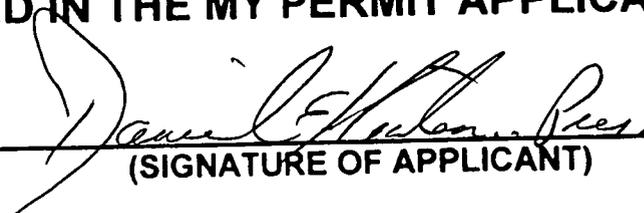
Application form must contain the following information:

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

Submittals (2 copies)

1. Product approvals from Miami/Dade for the following items:
 - a. Roofing
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. A certified copy of the Notice of Commencement for any work over \$2500.00
5. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
6. Copy of Workmen's Compensation
7. Copy of Liability Insurance

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: 12-4-06

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID DD
HEAR001

DATE (MM/DD/YYYY)
08/01/06

PRODUCER
J.W. Edens & Company
Commercial Ins of Brevard, Inc
325 Fifth Avenue, Suite 108
Indialantic FL 32903
Phone: 321-725-7000 Fax: 321-725-7856

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.

INSURED

Heaton Roofing Inc.
P O Box 1143
Palm City FL 34991

INSURERS AFFORDING COVERAGE

NAIC #

INSURER A: Canal Indemnity Company
INSURER B:
INSURER C:
INSURER D:
INSURER E:

COVERAGES

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

INSR ADD'L LTR	INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS								
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	GL91627	07/14/06	07/14/07	EACH OCCURRENCE \$ 500,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 500,000 GENERAL AGGREGATE \$ 1,000,000 PRODUCTS - COMP/OP AGG \$ 500,000								
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$								
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$								
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$								
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICE/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				<table border="1"> <tr> <td>WC STATU-TORY LIMITS</td> <td>OTH-ER</td> </tr> <tr> <td>E.L. EACH ACCIDENT</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - EA EMPLOYEE</td> <td>\$</td> </tr> <tr> <td>E.L. DISEASE - POLICY LIMIT</td> <td>\$</td> </tr> </table>	WC STATU-TORY LIMITS	OTH-ER	E.L. EACH ACCIDENT	\$	E.L. DISEASE - EA EMPLOYEE	\$	E.L. DISEASE - POLICY LIMIT	\$
WC STATU-TORY LIMITS	OTH-ER													
E.L. EACH ACCIDENT	\$													
E.L. DISEASE - EA EMPLOYEE	\$													
E.L. DISEASE - POLICY LIMIT	\$													
		OTHER												

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

SEWALLS

Town of Sewall's Point
One South Sewall's Point Rd.
Stuart FL 33494

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Theresa C. O'Brien

Theresa C. O'Brien



FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

SELF INSURERS FUND

P.O. BOX 4907 • WINTER PARK, FL 32793 • (407) 671-FRSA
1-800-767-3772 • FAX (407) 671-2520

CERTIFICATE OF INSURANCE

ISSUED TO:

COPY PROVIDED TO:

Town of Sewalls Point
1 S. Sewalls Point Rd.
Sewalls Point FL 34996

Heaton Roofing, Inc.

P.O. Box 1143
Palm City FL 34991

ATTN: Laura

Date: 12/13/2005

This is to certify that Heaton Roofing, Inc.
P.O. Box 1143
Palm City FL 34991

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.

COVERAGE NUMBER:	<u>870-032640</u>	<u>LIMITS</u>	
EFFECTIVE DATE:	<u>01/01/2006</u>	Workers' Compensation	Statutory - State of Florida
EXPIRATION DATE:	<u>01/01/2007</u>	Employers' Liability	\$100,000 - Each Accident \$100,000 - Disease, Each Employee \$500,000 - 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 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 domicile employees only.

By: Brett Stiegel
Brett Stiegel, Administrator
FRSA-SIF

By: Debbie Kemmerer
Debbie Kemmerer - Underwriting Manager
FRSA-SIF



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

HEATON, DANIEL E
HEATON ROOFING INC
PO BOX 1143
PALM CITY

FL 34991

STATE OF FLORIDA AC# 2675899
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CCC036970 07/23/06 050841199
 CERTIFIED ROOFING CONTRACTOR
 HEATON, DANIEL E
 HEATON ROOFING INC

IS CERTIFIED under the provisions of Ch. 489 FS.
 Expiration date: AUG 31, 2008 L06072300043

DETACH HERE

AC# 2675899

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD SEQ# L06072300043

DATE	BATCH NUMBER	LICENSE NBR
07/23/2006	050841199	CCC036970

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2008

HEATON, DANIEL E
HEATON ROOFING INC
4036 SW HONEY TER
PALM CITY FL 34990

JEB BUSH
GOVERNOR

SIMONE MARSTILLER
SECRETARY

DISPLAY AS REQUIRED BY LAW

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

DATE: 08/23/2006 BATCH NUMBER: 058019607 LICENSE NBR: CCC024411

The ROOFING CONTRACTOR
 Named Below IS CERTIFIED
 Under the provisions of Chapter 489, FS.
 Expiration date: AUG 31, 2008

TURNER, JOHN WESLEY
 STUART ROOFING INC
 140 NE DIXIE HWY
 STUART FL 34994

JEB BUSH GOVERNOR SIMONE MARSTILLER SECRETARY

DISPLAY AS REQUIRED BY LAW

2006-2007 MARTIN COUNTY ORIGINAL
 COUNTY OCCUPATIONAL LICENSE
 Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
 (772) 288-5604

LICENSE 1984-518-0782 CERT CCC024411
 PHONE (772)286-2317 SIC NO 001761
 LOCATION: 140 NE DIXIE HWY ST

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	.00	LIC. FEE \$	25.00
\$	.00	PENALTY \$	0.00
\$	.00	COL. FEE \$	0.00
\$	.00	TRANSFER \$	0.00
TOTAL			25.00

RECEIPT OF PAYMENT
 LARRY C. O'STEEN
 99 08/14/2006 NORMA
 19940006180078
 002 2005 0011105
 STUART ROOFING INC



TURNER, JOHN WESLEY
 STUART ROOFING INC
 P.O. Box 2556
 STUART FL 34995

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF
 ROOFING CONTR.

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
 14 DAY OF AUGUST 2006
 AND ENDING SEPTEMBER 30, 2007

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 1338410020000420-7

NOTICE OF COMMENCEMENT

STATE OF FL

COUNTY OF Martin

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):

Lot 42 High Point 23 Middle Rd. Stuart, FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Re Roof

OWNER: Nicholas Mariano

ADDRESS: 23 Middle Rd Stuart, FL 34996

PHONE #: _____ FAX #: _____

CONTRACTOR: DAV HEATON Roofing

ADDRESS: P.O. Box 1143 Palmetto, FL 34990

PHONE #: _____ FAX #: _____

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE # _____ FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA STATUTES:

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

IN ADDITION TO HIMSELF, OWNER DESIGNATES _____ OF _____ TO RECEIVE A COPY OF THE LIENOR'S NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.

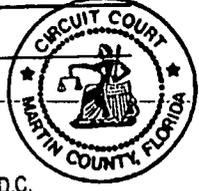
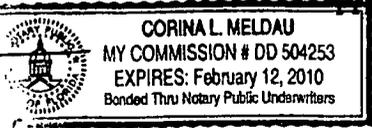
PHONE #: _____ FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Nicholas Mariano
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 7th DAY OF Dec 2006 BY Nicholas Mariano OR _____ PERSONALLY KNOWN PRODUCED ID _____

Corina L. Meldau
NOTARY SIGNATURE



INSTR # 1977686 OR BK 02202 PG 2712 RECD 12/04/2006 02:52:43 PM
Pg 2712 (1Pg)
MARSHA EWING MARTIN COUNTY DEPT CLERK C Hunter

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-14, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8537	Bober	Plumbing rough	FAIL	
1A	10 E High Pt Swirey Const.			INSPECTOR: <i>[Signature]</i>
8524	Dunn	Day-in	PASS	
4	29 N River Rd JA Taylor			INSPECTOR: <i>[Signature]</i>
8542	Pope	rough plumbing	PASS	
3	124 S Sewalls Louder Boals			INSPECTOR: <i>[Signature]</i>
8508	Smith	in progress	FAIL	
2	24 Middle Rd Blue Water Coast			INSPECTOR: <i>[Signature]</i>
8468	Mariano	tin tag/metal	PASS	
2A	23 Middle Rd Heaton Roof.			INSPECTOR: <i>[Signature]</i>
8266	Carlson/Brennan	window buck	PASS	
1A	3 Tuscan Dr Masterpiece			INSPECTOR: <i>[Signature]</i>
CE				
	25 15			INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-2, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
0100	Hockett	Courtesy to	FAIL	TALKED w/ OWNER
1st	12 S River Rd O/B	determine status		INSPECTOR: <i>AM</i>
7711	Utrata	Final DOCK	PASS	CLOSE
11	117 N Sewalls Pt J+B Boatlift			INSPECTOR: <i>AM</i>
1204	Commins	Asst	FAIL	
	83 S River Rd	not needed		INSPECTOR:
	Separate			
8441	Dressler	2nd Fl Column	CANCEL	
3	12 Island Rd Harbor Court	1 roof beam		INSPECTOR: <i>AM</i>
8468	Mariano	In progress	PASS	
2	23 Middle Rd Heaton Roof			INSPECTOR: <i>AM</i>
8528	Masterpiece	slub	PASS	
4	5 Mandalay Masterpiece	AFTER 9:00		INSPECTOR: <i>AM</i>
8478	Villar	insulation	FAIL	
10	92 N Sewalls Pt Mager			INSPECTOR: <i>AM</i>

OFFICER: WEEKS & BOAT
C.E. 26 N.S.P.R. IN BACKYARD.



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 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.

FINAL ROOF

NEED 'PRODUCT APPROVAL' SUBMITTALS
FOR SKYLITES -

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

DATE: 11/17/07

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11-16-07, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8757	Donaldson	ROOF FINAL	PASS	CLOSE
5	35 N. RIVER H.P. BLOG COOP.			INSPECTOR:
8468	Mamans	Final	FAIL	
1	23 Middle Rd Heaton Roof.			INSPECTOR: <i>AW</i>
8746	Nohejl	Final	FAIL	
2	26 W High Pt Nis Air			INSPECTOR: <i>AW</i>
Tree	Holland	Tree	PASS	
3	16 N Ridgview Rd OB			INSPECTOR: <i>AW</i>
6991	Donaldson	Final-dock repair	PASS	CLOSE
5	35 N River Rd O/B			INSPECTOR: <i>AW</i>
8148	McGovern	Stemwall footer	FAIL	NEED COMP. TEST
6	2 Tuxanda Driftwood			INSPECTOR: <i>AW</i>
8762	McCravy	gasline rough	PASS	
8702	22 Palmetto	INTERIOR DEMO	PASS	CLOSE
4	Final Details			INSPECTOR: <i>AW</i>

OTHER:

20A
30A

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

TUES.

Date of Inspection: Mon ~~Wed~~ Fri Nov. 20, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8512		WALL SHEATH.	FAIL	
1	107 N.S.P.R. VALDES,	(8:30)		INSPECTOR: <i>JW</i>
2158	XXXXXXXXXX	XXXXXXXXXX	PASS	CLOSE
2	23 MIDDLE ROAD MARIANO			INSPECTOR: <i>JW</i>
8441	DRESSLER	WIRE LATH	PASS	
3	ISLAND RD			INSPECTOR: <i>JW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

8568

GAS TANK & LINES

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4-10-07 BUILDING PERMIT NO. 8568
 Building to be erected for Mariano Type of Permit Gas tanks & lines
 Applied for by C&C Diversified (Contractor) Building Fee 35-
 Subdivision High Point Lot 42 Block _____ Radon Fee _____
 Address 23 Middle Rd Impact Fee _____
 Type of structure SFR A/C Fee _____
 Electrical Fee _____
 Plumbing Fee _____
 Roofing Fee _____
 Parcel Control Number: _____
133841-002-000-00420-7
 Amount Paid \$35- Check # 3527 Cash _____ Other Fees (_____) _____
 Total Construction Cost \$ 1900 TOTAL Fees 35-

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

PERMIT

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

INSPECTIONS

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

RECEIVED
4-3-07

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: _____ Permit Number: _____

OWNER/TITLEHOLDER NAME: MAGLIANO, NICHOLAS Phone (Day) _____ (Fax) _____

Job Site Address: 23 MIDDLE ROAD City: STUART State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) HIGH POINT LOT 42 Parcel Number: 13-38-41-002-000-00420-7

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

Description of Work To Be Done: INSTALL 1000 GPM W/G UP TANK WITH INT./EXT. GAS PIPING

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 1,900.⁰⁰

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

(If no, fill out the Contractor & Subcontractor sections below)

Is improvement cost 50% or more of Fair Market Value? YES NO

(If yes, Owner Builder Affidavit must accompany application)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: CFC DIVERSIFIED SERVICES Phone: 772-597-1022 Fax: 772-597-1021

Street: PO Box 517 City: INDIANTOWN State: FL Zip: 34956

State Registration Number: 21079 State Certification Number: _____ Martin County License Number: CLF 19946

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

ENGINEER _____ Lic.# _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

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

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

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required) _____

CONTRACTOR SIGNATURE (required) _____

State of Florida, County of: MARTIN

On State of Florida, County of: MARTIN

This the 3 day of APRIL, 2007

This the 3 day of APRIL, 2007

by NICHOLAS MAGLIANO who is personally

by BRIAN CRITOPH who is personally

known to me or produced _____

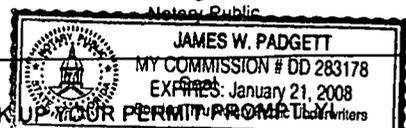
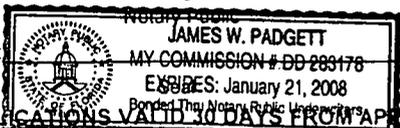
known to me or produced _____

as identification. James W. Padgett

As identification. James W. Padgett

My Commission Expires: _____

My Commission Expires: _____



PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT FROM THE BUILDING DEPARTMENT

Renewal: 4/10/08-4/10/09 \$35 Pd. Cash

pd 4/30/08 MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4-10-07

BUILDING PERMIT NO. 8568

Building to be erected for Mareano

Type of Permit Gas tanks & line

Applied for by C & C Diversified

(Contractor) Building Fee 35

Subdivision High Point Lot 42 Block _____

Radon Fee _____

Address 23 Middle Rd

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

Electrical Fee _____

133841-002-000-00420-7

Plumbing Fee _____

Amount Paid \$35 Check # 3527 Cash _____

Roofing Fee _____

Total Construction Cost \$ 1900

Other Fees (_____) _____

TOTAL Fees 35

Signed [Signature]

Signed John Adamson

ACORD. CERTIFICATE OF LIABILITY INSURANCE		OP ID LP CANDC06	DATE (MM/DD/YYYY) 02/21/07
PRODUCER Gateway Insurance Agency Fort Lauderdale Branch 2430 W. Oakland Park Blvd. Fort Lauderdale FL 33311 Phone: 954-735-5500 Fax: 954-735-2852		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED C & C Diversified Services LLC Attn: Brian Critoph P O Box 517 Indiantown FL 34956		INSURERS AFFORDING COVERAGE	NAIC #
		INSURER A: Mid-Continent Casualty Co.	
		INSURER B:	
		INSURER C:	
		INSURER D:	
		INSURER E:	

COVERAGES

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

INSR ADD'LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input checked="" type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	04GL677410	02/21/07	02/21/08	EACH OCCURRENCE \$ 1000000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100000 MED EXP (Any one person) \$ Excluded PERSONAL & ADV INJURY \$ 1000000 GENERAL AGGREGATE \$ 2000000 PRODUCTS - COMP/OP AGG \$ 1000000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC \$ AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS

CERTIFICATE HOLDER

TOW9E01

TOWN OF SEWALLS POINT
 BUILDING DEPARTMENT
 1 SOUTH SEWALLS POINT RD.
 SEWALLS POINT FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

ACORD™ CERTIFICATE OF LIABILITY INSURANCE		Date 1/18/2007
Producer: Lion Insurance Company 2739 U.S. Highway 19 N. Holiday, FL 34691 Phone: 727-938-5562 Fax: 727-937-2138	This Certificate is issued as a matter of information only and confers no rights upon the Certificate Holder. This Certificate does not amend, extend or alter the coverage afforded by the policies below.	
Insured: South East Personnel Leasing, Inc. 2739 U.S. Highway 19 N. Holiday, FL 34691 Phone : (727)938-5562	Insurers Affording Coverage	NAIC #
	Insurer A: Lion Insurance Company	11075
	Insurer B:	
	Insurer C:	
	Insurer D:	
	Insurer E:	

Coverages
 The policies of insurance listed below have been issued to the insured named above for the policy period indicated. Notwithstanding any requirement, term or condition of any contract or other document with respect to which this certificate may be issued or may pertain, the insurance afforded by the policies described herein is subject to all the terms, exclusions, and conditions of such policies. Aggregate limits shown may have been reduced by paid claims.

INSR LTR	ADOL NSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur General aggregate limit applies per: <input type="checkbox"/> Policy <input type="checkbox"/> Project <input type="checkbox"/> LOC				Each Occurrence \$ Damage to rented premises (EA occurrence) \$ Med Exp \$ Personal Adv Injury \$ General Aggregate \$ Products - Comp/Op Agg \$
		AUTOMOBILE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/> All Owned Autos <input type="checkbox"/> Scheduled Autos <input type="checkbox"/> Hired Autos <input type="checkbox"/> Non-Owned Autos				Combined Single Limit (EA Accident) \$ Bodily Injurv (Per Person) \$ Bodily Injurv (Per Accident) \$ Property Damage (Per Accident) \$
		GARAGE LIABILITY <input type="checkbox"/> Any Auto				Auto Only - Ea Accident \$ Other Than EA Acc \$ Autos Only AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> Occur <input type="checkbox"/> Claims Made <input type="checkbox"/> Deductible <input type="checkbox"/> Retention				Each Occurrence Aggregate
A		Workers Compensation and Employers' Liability Any proprietor/partner/executive officer/member excluded? If Yes, describe under special provisions below.	WC 71949	01/01/2007	01/01/2008	<input checked="" type="checkbox"/> WC Statutory Limits <input type="checkbox"/> OTH-ER E.L. Each Accident \$1000000 E.L. Disease - Ea Employee \$1000000 E.L. Disease - Policy Limits \$1000000

Other 0886657
 C & C Diversified Services LLC
 COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED, NOT TO SUBCONTRACTORS.

Descriptions of Operations/Locations/Vehicles/Exclusions added by Endorsement/Special Provisions: ADD ON DATE: 6/6/2005
 COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF C & C Diversified Services LLC * FAX: 772-597-1021 & 772-220-4765 / ISSUE 01-18-07 (NM)

Lion Insurance Company is A.M. Best Company rated A- (Excellent). AMB # 12616

CERTIFICATE HOLDER TOWN OF SEAWALL'S POINT ONE SOUTH SEWALL'S POINT RD SEWALL'S POINT FL 34988	CANCELLATION Should any of the above described policies be canceled before the expiration date thereof, the issuing insurer will endeavor to mail 30 days written notice to the certificate holder named to the left, but failure to do so shall impose no obligation or liability of any kind upon the insurer, its agents or representatives
---	---

2006-2007 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(772) 288-5604

LICENSE 2005-520-0061 CERT CERTIF# 19946

PHONE (772)597-1022 SSC NO 235990

LOCATION
16654 SW WARFIELD BLVD IND

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	<u>.00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>.00</u>	PENALTY \$	<u>0.00</u>
\$	<u>.00</u>	COL. FEE \$	<u>0.00</u>
\$	<u>.00</u>	TRANSFER \$	<u>0.00</u>
TOTAL			<u>.00</u>



IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION OF
LP GAS INSTALLER
 OF **BRIAN M. (QUALIFIER)**
DIVERSIFIED SERVICES, LLC.
BOX 517
DAHLANTOWN, FL 34956

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

21 DAY OF SEPTEMBER 2006
AND ENDING SEPTEMBER 2007

2 2005 14696.0001 PAID

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 1650
Tallahassee, Florida 32399-1650

Master Qualifier Mailing Address

BRIAN M CRITOPH
C & C DIVERSIFIED SERVICES, LLC
PO BOX 474
INDIANTOWN, FL 34956-0474

Licensed Location Address

C & C DIVERSIFIED SERVICES, LLC
15702 SW MORGAN ST
INDIANTOWN, FL 34956-3719

Certificate Number

19946

License Number

21079

This Master Qualifier Certificate is issued pursuant to Chapter 527, Florida Statutes. This certificate is valid only for the person and licensed holder listed. Any changes to the Master Qualifier status (such as transfer or termination of employment) must be reported to the Bureau of LP Gas Inspections at 850/921-8001 immediately.

The Master Qualifier Certificate is valid only through the date noted on the Certificate. A notice of renewal will be sent to you in advance of your expiration date. A Master Qualifier Certificate may be renewed if certification of a minimum of 12 (twelve) hours continuing education is provided along with the renewal. If training cannot be documented, an examination must be taken.

For future correspondence, please make any needed corrections or changes to this certificate, and return the upper portion with corrections to:

Bureau of Liquefied Petroleum Gas Inspections
P.O. Box 1650
Tallahassee, Florida 32399-1650



Cut Here



State of Florida
Department of Agriculture and Consumer Services

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

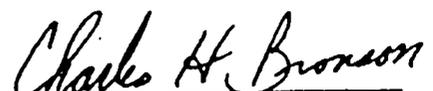
Certificate No: 19946
Exam Date: January 7, 2005
Issue Date: March 8, 2005
Expiration Date: March 7, 2008
Exam: 0803

MASTER QUALIFIER CERTIFICATE

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

BRIAN M CRITOPH

Valid For
License Number: 21079
C & C DIVERSIFIED SERVICES, LLC
15702 SW MORGAN ST
INDIANTOWN, FL 34956-3719


CHARLES H. BRONSON
COMMISSIONER OF AGRICULTURE

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 6720
Tallahassee, Florida 32399-6720

License Number: 21079

Business Mailing Address

C & C DIVERSIFIED SERVICES, LLC
PO BOX 517
INDIANTOWN, FL 34956-0517

Licensed Location Address

C & C DIVERSIFIED SERVICES, LLC
16654 SW WARFIELD BLVD
INDIANTOWN, FL 34956-4407

The liquefied petroleum gas license at the bottom of this form is valid ONLY for the company located at the address on the license. Each business location of a company must be licensed. All LP Gas licenses must be renewed annually. Any license allowed to expire shall become inoperative because of failure to renew. The fee for restoration of a license is equal to the original license fee and must be paid before the licensee may resume operations.

Pursuant to Chapter 527, Florida Statutes, LP Gas licensees must present proof of licensure to any consumer, owner, or end user upon request when engaged in the business of servicing, testing, repairing, maintaining or installing LP Gas systems and/or equipment.

For future correspondence, please make any needed corrections or changes to your business mailing address and/or your licensed location address and return the UPPER PORTION with corrections to:

Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas
P.O. Box 6720
Tallahassee, Florida 32399-6720



Cut Here



POST LICENSE
CONSPICUOUSLY

State of Florida
Department of Agriculture and Consumer Services

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

License Number: 21079
Expiration Date: August 31, 2007
Date of Issue: September 1, 2006
License Fee: \$200.00
Type and Class: 0803

Liquefied Petroleum Gas License

LP GAS INSTALLER

GOOD FOR ONE LOCATION

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

C & C DIVERSIFIED SERVICES, LLC
16654 SW WARFIELD BLVD
INDIANTOWN, FL 34956-4407

Charles H. Bronson
CHARLES H. BRONSON
COMMISSIONER OF AGRICULTURE

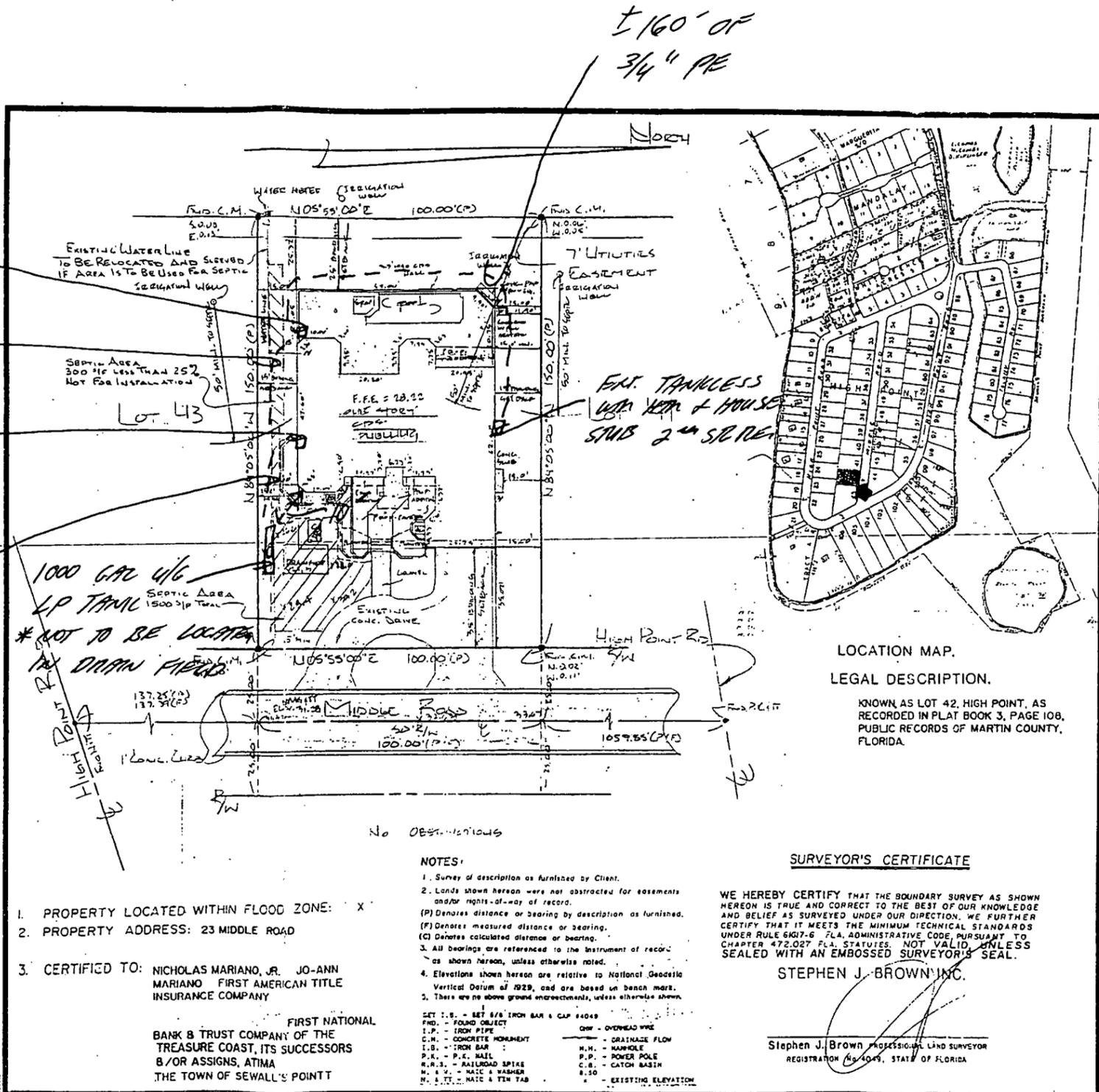
FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 4/19/07
BUILDING OFFICIAL

± 50' 01"
 3/4" PE

GRILL
 2nd STD REC

HOUSE STUB
 2nd STD REC

± 50' 01"
 3/4" PE



± 160' 01"
 3/4" PE

1. PROPERTY LOCATED WITHIN FLOOD ZONE: X
2. PROPERTY ADDRESS: 23 MIDDLE ROAD
3. CERTIFIED TO: NICHOLAS MARIANO, JR. JO-ANN MARIANO FIRST AMERICAN TITLE INSURANCE COMPANY
- FIRST NATIONAL BANK & TRUST COMPANY OF THE TREASURE COAST, ITS SUCCESSORS B/OR ASSIGNS, ATIMA THE TOWN OF SEWALL'S POINT

- NOTES:
- Survey of description as furnished by Client.
 - Lands shown hereon were not abstracted for easements and/or rights-of-way of record.
 - (P) Denotes distance or bearing by description as furnished.
 - (M) Denotes measured distance or bearing.
 - (C) Denotes calculated distance or bearing.
 - All bearings are referenced to the instrument of record as shown hereon, unless otherwise noted.
 - Elevations shown hereon are relative to National Geodetic Vertical Datum of 1929, and are based on bench marks.
 - There are no shown ground encroachments, unless otherwise shown.
- SET I.B. - SET 8/8" IRON BAR & CAP #1049
 F.O. - FOUND OBJECT
 I.P. - IRON PIPE
 C.M. - CONCRETE MONUMENT
 I.B. - IRON BAR
 P.C. - P.C. BAIL
 R.R.S. - RAILROAD SPIKE
 M. & V. - NAIL & WASHER
 M. & T. - NAIL & TIN TAB
- Q.W. - OVERHEAD WIRE
 D.F. - DRAINAGE FLOW
 H.M. - HATCHOLE
 P.P. - POWER POLE
 C.B. - CATCH BASIN
 E.S. - EXISTING ELEVATION

SURVEYOR'S CERTIFICATE

WE HEREBY CERTIFY THAT THE BOUNDARY SURVEY AS SHOWN HEREON IS TRUE AND CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF AS SURVEYED UNDER OUR DIRECTION. WE FURTHER CERTIFY THAT IT MEETS THE MINIMUM TECHNICAL STANDARDS UNDER RULE 6K17-6 FLA. ADMINISTRATIVE CODE, PURSUANT TO CHAPTER 472.027 FLA. STATUTES. NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.

STEPHEN J. BROWN, INC.

Stephen J. Brown, Professional Land Surveyor
 REGISTRATION No. 10049, STATE OF FLORIDA

REVISIONS	BY
10/29/78	SJB
02/15/80	SJB
11/28/05	SJB

BOUNDARY SURVEY

PREPARED FOR: MARIANO

STEPHEN J. BROWN INC.
 LICENSED BUSINESS NUMBER 6484
 SURVEYORS • DESIGNERS • LANDPLANNERS • CONSULTANTS
 619 EAST 5TH STREET STUART, FLORIDA 34994

DRAWN W. G. H.
CHECKED S. J. B.
DATE 06/04/87
SCALE 1" = 20'
JOB NO. 957-23-01
SHEET ONE

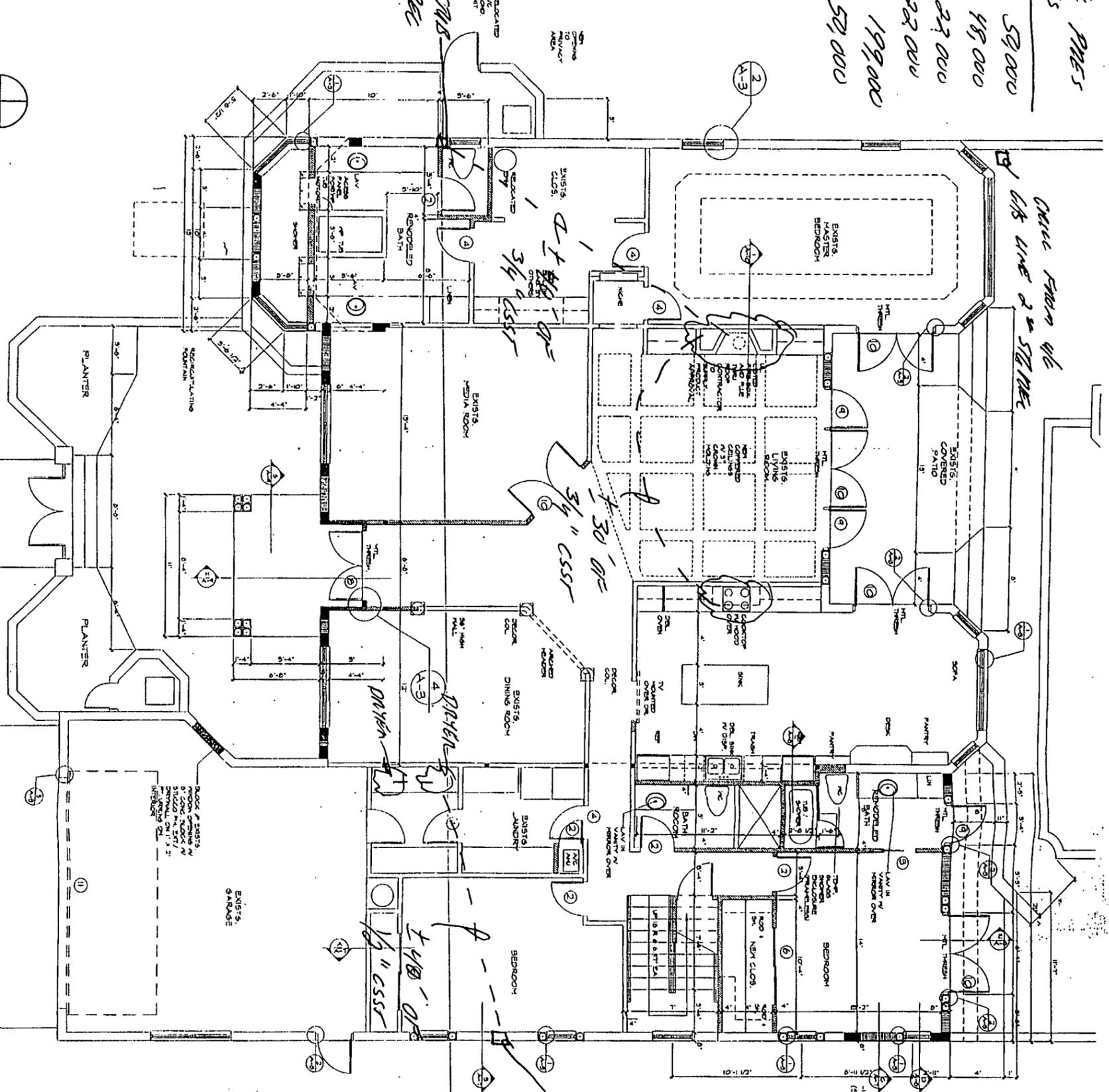
11 W.C. DEL PRES
BR'S

FINE PACE 52,000
COOK TOP 48,000
DRYER 27,000
TRAILERS WITH HW 199,000
CRILL 52,000



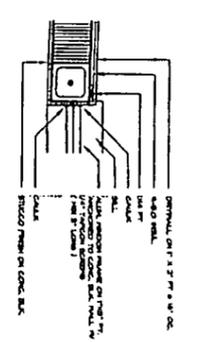
REVISED GROUND FLOOR PLAN

SCALE: 1/4" = 1'-0"

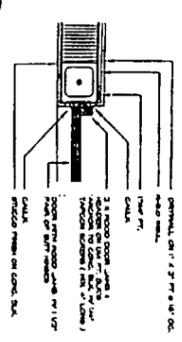


CRILL FROM W/C
CR LINE 2nd STAGE

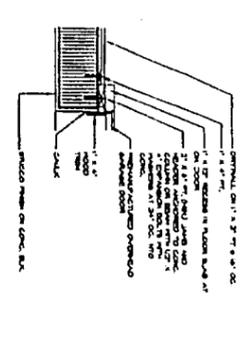
EXTERIOR TRAILERS &
WATER HEATER &
HOUSE STAIRS
2nd STG REC.



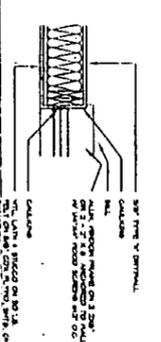
① WINDOW JAMB DETAIL



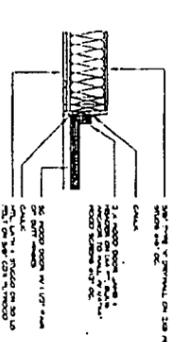
② DOOR JAMB DETAIL



③ GARAGE DOOR BUCK DETAIL



④ WINDOW JAMB DETAIL



⑤ WOOD DOOR JAMB DETAIL

INSULATION NOTES:
BLACK EXTERIOR WALLS: R-4.2
ROOF INSULATION: R-30.0
2 X 6 NO STD WALL: R-19.0

BATH FINISH NOTE:
1. FLOOR: CERAMIC TILE
2. BASE: PAINTED WOOD
3. WALLS: PAINTED CEMENTAL

MANUAL: Current Health Department
THIS PLAN IS APPROVED FOR
RECORDING PURPOSES ONLY.
RECORDING NUMBER: 13355744
DATE: 11/1/2005
BY: GARY POWELL
Comments: Part of a business plan
See permit for regulations. Both approved regional paper 10.

ADDITION FOR:
MR. AND MRS. NICHOLAS MARIANO
23 MIDDLE ROAD
SEWALLS POINT, FLORIDA

GARY POWELL
ARCHITECTURE
AND
PLANNING
323 S.E. 6TH
AVE.
FORT PIERCE, FL
34901
1-888-537-5161
1-888-228-1759

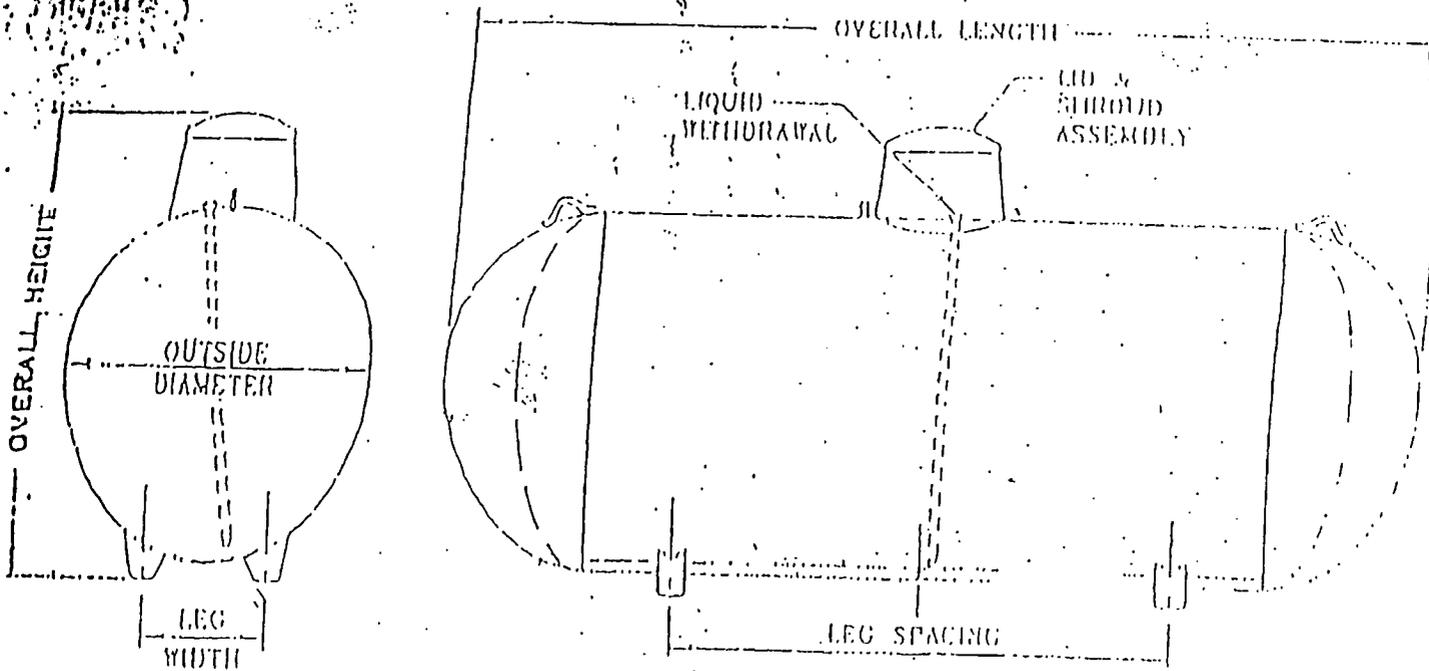
DATE: NOV. 1, 2005
SCALE: AS NOTED
JOB NO.: 05
REVISIONS:
DRAWN BY: MSP
CHECKED BY: MSP
DATE: NOV. 1, 2005
SCALE: AS NOTED
JOB NO.: 05
REVISIONS:
A-3
10 0 = 17

PROPANE CONSTRUCTION NOTES

1. All pipe and fittings above ground and inside building shall be SCH. 40 Galvanized ASTM A120 or AGA approved corrugated stainless steel (C.S.S.T.) pipe.
 2. All poly pipe and fittings shall be ASTM D2513 or ASTM D2517 and shall be buried outside underground at a depth of 18" with warning tape and tracer wire.
 3. All pipe and meter locations are approximate and subject to change.
 4. All poly pipe shall be joined by heat fusion or approved mechanical couplings.
 5. All galvanized pipe shall be threaded.
 6. All pipe shall be pressure tested to 20 # PSI for a period of 24 hours.
-

Standard Domestic Propane Tank Specifications

<u>CAPACITY</u>	<u>DIAMETER</u>	<u>LENGTH</u>	<u>WEIGHT</u>
120 Gal (454 l)	24" (610 mm)	68" (1727 mm)	288 lb (131 kg)
150 Gal (568 l)	24" (610 mm)	84" (2134 mm)	352 lb (160 kg)
200 Gal (757 l)	30" (762 mm)	79" (2007 mm)	463 lb (210 kg)
250 Gal (946 l)	30" (762 mm)	94" (2387 mm)	542 lb (246 kg)
325 Gal (1230 l)	30" (762 mm)	119" (3023 mm)	672 lb (305 kg)
500 Gal (1893 l)	37" (940 mm)	119" (3023 mm)	1062 lb (482 kg)
1000 Gal (3785 l)	41" (1041 mm)	192" (4877 mm)	1983 lb (900 kg)

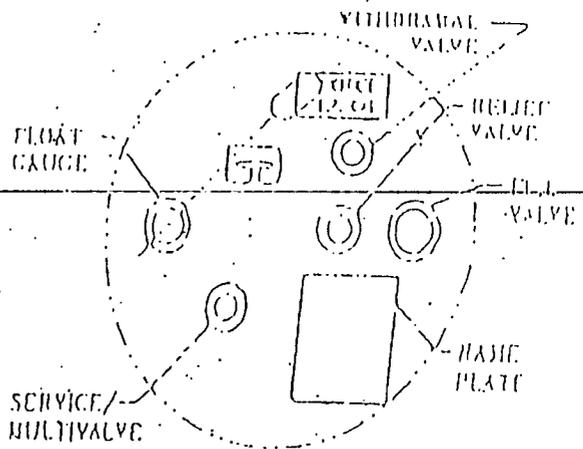


General Specifications

Conforms to the latest edition and addenda of the ASME Code for Pressure Vessels, Section VIII Division I. Complies with NIP-A-58 and is listed by Underwriters Laboratories, Inc.

Rated at 250 psig from -20° F. to 125° F. All tanks may be evacuated to a full (14.7 psi) vacuum.

Vessel Finish: Coated with epoxy red powder. (Tanks coated with the epoxy powder must be buried). For aboveground use, tanks may be coated with TGIC powder.

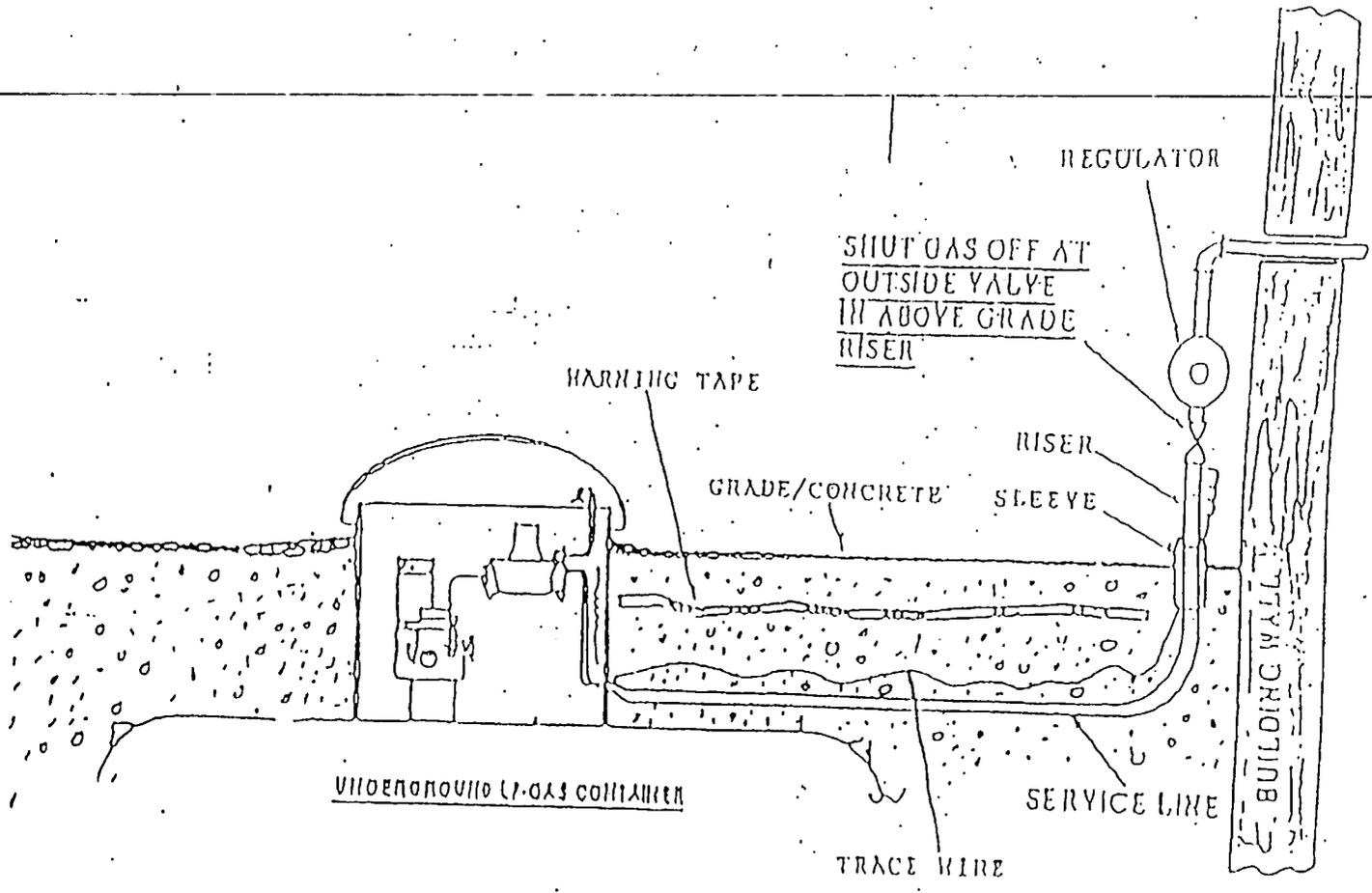
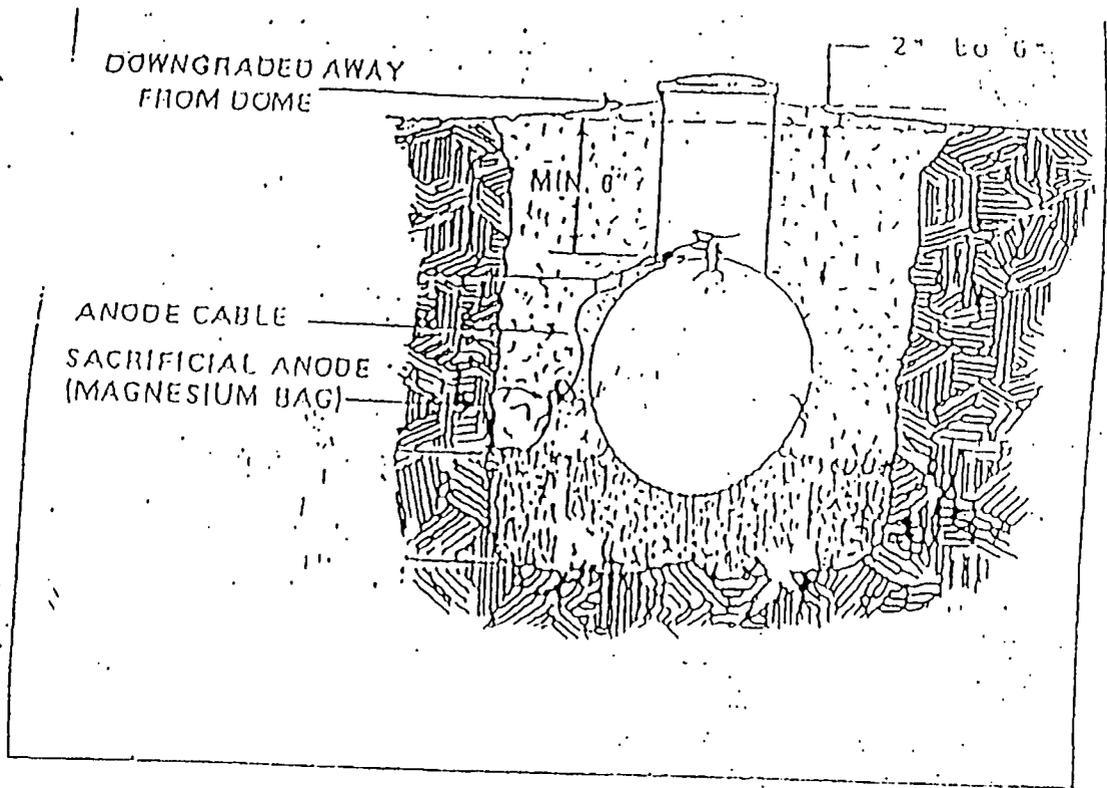


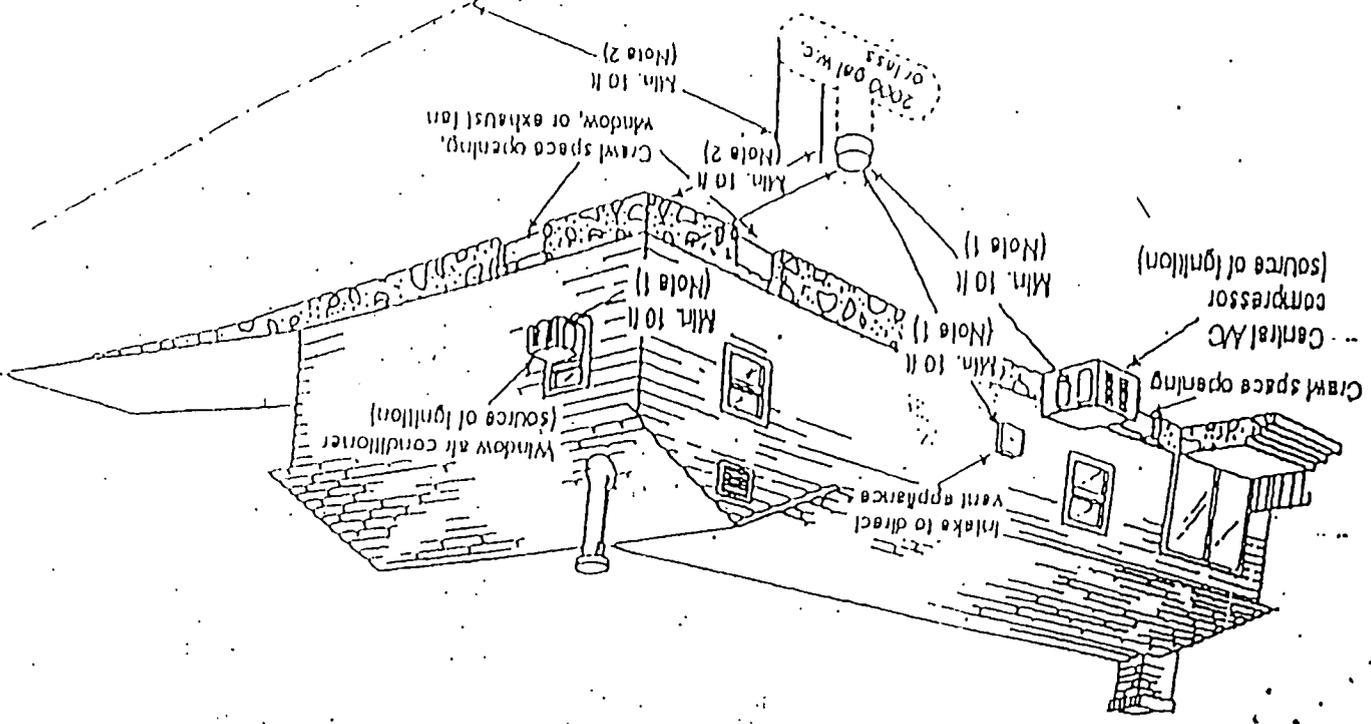
OPENING ARRANGEMENT

Applicable federal, state or local regulations may contain specific requirements for protective coatings and cathodic protection. The purchaser and installer are responsible for compliance with such federal, state or local regulations.

If vessel dimensions are approximate.

WATER CAPACITY	OUTSIDE DIAMETER	HEAD TYPE	OVERALL LENGTH	OVERALL LENGTH WITH LID & SHROUD ASSEMBLY		LEG WIDTH	LEG SPACING	WEIGHT	QUANTITY IN FULL LOAD
				8"	18"				
120 wg. 454.2 l.	24" 609.6 mm	Ellip	5'-5 7/8" 1671.6 mm	3'-0 1/4" 919.2 mm	3'-10 1/4" 1122.4 mm	10 1/8" 257.2 mm	3'-0" 914.4 mm	223 lbs. 111.1 kg	96
150 wg. 567.8 L	24" 609.6 mm	Ellip	6'-9 1/2" 2070.1 mm	3'-0 1/4" 919.2 mm	3'-10 1/4" 1122.4 mm	10 1/8" 257.2 mm	3'-7" 1092.0 mm	292 lbs. 132.4 kg	72
250 wg. 946.3 L	31.5" 800.1 mm	Helml	7'-2 1/2" 2197.1 mm	3'-6 3/4" 1109.7 mm	3'-3 3/4" 1063.7 mm	12 3/4" 323.9 mm	3'-8" 1066.8 mm	472 lbs. 214.1 kg	54
20 wg. 111.2 L	31.5" 800.1 mm	Helml	8'-11 3/4" 2736.9 mm	3'-9 3/4" 1109.7 mm	3'-3 3/4" 1063.7 mm	12 3/4" 323.9 mm	4'-0 1/4" 1235.6 mm	588 lbs. 266.7 kg	45
30 wg. 92.5 L	37.42" 950.5 mm	Helml	9'-10" 2997.2 mm	4'-1 3/8" 1260.5 mm	4'-11 3/8" 1514.5 mm	13" 331.0 mm	3'-0" 1524.0 mm	871 lbs. 395.1 kg	30
100 wg. 45.0 L	40.96" 1040.4 mm	Helml	13'-10 7/8" 4246.6 mm	4'-3 3/4" 1351.0 mm	5'-3 1/4" 1605.0 mm	16 1/4" 412.8 mm	3'-0" 2743.2 mm	1729 lbs. 784.3 kg	15





Note 1: The relief valve, filling connection, and liquid level gauge vent connection at the container must be at least 10 ft from any exterior source of ignition openings into direct-vent appliances, or mechanical ventilation air intakes. Refer to Note (d) under Table 3-2.2.2.

Note 2: No part of an underground container shall be less than 10 ft from an adjacent building or the adjoining property that may be built upon. Refer to Note (d) under Table 3-2.2.2.

Figure 1-3. Underground ASME containers. (This figure for illustrative purposes only; text shall govern.)

Appendix J Referenced Publications

- the following documents or portions thereof are referred to within this standard for informational purposes and thus are not considered part of the requirements document. The edition indicated for each reference current edition as of the date of the NFPA issuance document.
- NFPA Publications, National Fire Protection Association, 1 Batterymarch Park, P.O. Box 9101, Quincy, MA 0101.
- A 10, Standard for Portable Fire Extinguishers, 1994.
- A 57, Standard for the Installation and Use of Stationary Gas Engines and Gas Turbines, 1994 edition.
- A 50, Standard for Bulk Oxygen Systems at Consumer Locations, 1994 edition.
- 50A, Standard for Gaseous Hydrogen Systems at Consumer Locations, 1994 edition.

- NFPA 66, Guide for Testing of Discharge, 1994 edition.
- NFPA 77, Recommended Practice on Static Electricity, 1993 edition.
- NFPA 80, Standard for Fire Doors and Fire Windows, 1992 edition.
- NFPA 920, Standard on Types of Building Construction, 1992 edition.
- NFPA 951, Standard Methods of Fire Tests of Building Construction and Materials, 1990 edition.
- NFPA 952, Standard Methods of Fire Tests of Door Assemblies, 1995 edition.
- NFPA 921, Standard on Basic Classification of Flammable and Combustible Liquids, 1991 edition.
- NFPA 780, Lightning Protection Code, 1992 edition.
- J-1.2 API Publications, American Petroleum Institute, 2101 L St., NW, Washington, DC 20037.
- API 690, Design and Construction of Large, Welded, Low-

TABLE 402.4(24)
SCHEDULE 40 METALLIC PIPE
Pipe Sizing Between Single or Second Stage
(Low Pressure Regulator) and Appliance

Gas	Undiluted propane
Inlet Pressure	11.0 inch WC
Pressure Drop	0.5 inch WC
Specific Gravity	1.50

Nominal Inside	PIPE SIZE (in.)								
	1/2	3/4	1	1 1/4	1 1/2	2	3	3 1/2	4
Actual	0.622	0.824	1.049	1.38	1.61	2.067	3.068	3.548	4.026
Length (ft)	Maximum Capacity In Thousands of Btu/h								
10	291	608	1,145	2,352	3,523	6,786	19,119	27,993	38,997
20	200	418	787	1,616	2,422	4,664	13,141	19,240	26,802
30	160	336	632	1,298	1,945	3,745	10,552	15,450	21,523
40	137	287	541	1,111	1,664	3,205	9,031	13,223	18,421
50	122	255	480	984	1,475	2,841	8,004	11,720	16,326
60	110	231	434	892	1,337	2,574	7,253	10,619	14,793
80	94	197	372	763	1,144	2,203	6,207	9,088	12,661
100	84	175	330	677	1,014	1,952	5,501	8,055	11,221
125	74	155	292	600	899	1,730	4,876	7,139	9,945
150	67	140	265	543	814	1,568	4,418	6,468	9,011
200	58	120	227	465	697	1,342	3,781	5,536	7,712
250	51	107	201	412	618	1,189	3,351	4,906	6,835
300	46	97	182	373	560	1,078	3,036	4,446	6,193
350	42	89	167	344	515	991	2,793	4,090	5,698
400	40	83	156	320	479	922	2,599	3,805	5,301

For SI: 1 inch = 25.4 mm, 1 foot = 304.8 mm, 1-inch water column = 0.2488 kPa, 1 British thermal unit per hour = 0.2931 W.

Table P-1 Propane Low Pressure (Standard)

**Maximum Capacity of Omega Flex TracPipe™
in Thousands of BTU per Hour Propane Gas**

Gas Pressure: 11 in. W.C.

Pressure Drop: 0.5 in. W.C. (based on a 1.52 Specific Gravity Gas)

Size (EHD)	TUBING LENGTH (FEET)																	
	5	10	15	20	25	30	40	50	60	70	80	90	100	150	200	250	300	
3/8"	15	99	69	55	49	42	39	33	30	26	25	23	22	20	15	14	12	11
1/2"	19	211	150	121	106	94	87	74	66	60	57	52	50	47	36	33	30	26
3/4"	25	456	325	267	232	209	191	166	149	136	126	118	112	106	87	76	68	62
1"	31	863	605	490	425	379	344	297	265	241	222	208	197	186	143	129	117	107
1-1/4"	37	1424	971	775	661	583	528	449	397	359	330	307	286	270	217	183	163	147
1-1/2"	46	2830	1993	1623	1404	1254	1143	988	884	805	745	696	656	621	506	438	390	357
2"	62	6547	4638	3791	3285	2940	2684	2327	2082	1902	1761	1647	1554	1475	1205	1045	934	854

see notes below*

EHD (Effective Hydraulic Diameter) A relative measure of Low Capacity; This number is used to compare individual sizes between different manufacturers. The higher the EHD number the greater flow capacity of the piping.

40

Table P-2 Propane Medium Pressure

**Maximum Capacity of Omega Flex TracPipe
in Thousands of BTU per Hour Propane Gas**

Gas Pressure: 1/2 psi (12-14 in. W. C.)

Pressure Drop: 2.5 in. W. C. (based on a 1.52 Specific Gravity Gas)

Size (EHD)	TUBING LENGTH (FEET)																	
	5	10	15	20	25	30	40	50	60	70	80	90	100	150	200	250	300	
3/8"	15	222	159	131	114	102	93	81	73	67	62	58	55	52	43	37	33	30
1/2"	19	491	353	290	254	228	209	182	164	150	140	131	124	118	97	85	76	70
3/4"	25	1094	782	642	559	501	459	399	358	328	304	285	269	256	210	183	164	136
1"	31	2512	1863	1720	1343	1106	976	883	825	771	719	673	632	596	470	398	352	320
1-1/4"	37	3476	2368	1891	1612	1424	1288	1099	971	877	805	748	700	661	528	449	397	359
1-1/2"	46	6383	4496	3663	3168	2830	2580	2230	1993	1818	1682	1571	1481	1404	1143	988	884	805
2"	62	14586	10330	8443	7317	6547	5980	5183	4638	4236	3923	3671	3462	3285	2684	2327	2082	1902

NOTES: Tables above include losses for four 90-degree bends and two end fittings. Tubing runs with larger numbers of bends and/or fittings shall be increased by an equivalent length of tubing to the following equation: $L=1.3n$ where L is additional length of tubing and n is the number of additional fittings and/or bends.



TABLE 402(32) — LP-GAS
 MAXIMUM CAPACITY OF POLYETHYLENE PLASTIC IN THOUSANDS OF BTU PER HOUR
 FOR GAS PRESSURE OF 10 psf AND A PRESSURE DROP OF 1 psf

SIZING BETWEEN FIRST STAGE (HIGH PRESSURE REGULATOR) AND SECOND STAGE (LOW PRESSURE REGULATOR)
 (BASED ON A 1.52 SPECIFIC GRAVITY GAS)

Plastic Pipe Length (Feet)	Plastic pipe nominal outside diameter (IPS) (dimensions in parenthesis are inside diameter)					
	1/2 Inch SDR 9.33 (0.660)	3/4 Inch SDR 11.0 (0.860)	1 Inch SDR 11.00 (1.077)	1 1/4 Inch SDR 10.00 (1.328)	1 1/2 Inch SDR 11.00 (1.554)	2 Inch SDR 11.00 (1.943)
30	2143	4292	7744	13416	20260	36402
40	1835	3673	6628	11482	17340	31155
50	1626	3256	5874	10176	15368	27612
60	1473	2950	5322	9220	13924	25019
70	1355	2714	4896	8483	12810	23017
80	1251	2525	4555	7891	11918	21413
90	1183	2369	4274	7404	11182	20091
100	1117	2238	4037	6994	10562	18978
125	990	1983	3578	6199	9361	16820
150	897	1797	3242	5616	8482	15240
175	826	1653	2983	5167	7803	14020
200	778	1539	2775	4807	7259	13043
225	721	1443	2603	4510	6811	12238
250	681	1363	2459	4260	6434	11560
275	646	1294	2336	4046	6111	10979
300	617	1235	2228	3860	5830	10474
350	557	1136	2050	3551	5363	9636
400	508	1057	1907	3304	4989	8965
450	475	992	1789	3100	4681	8411
500	448	937	1690	2928	4422	7945
600	404	849	1531	2653	4007	7199
700	370	781	1409	2441	3686	6623
800	343	726	1311	2271	3429	6161
900	320	682	1230	2131	3217	5781
1000	302	644	1162	2012	3039	5461
1500	258	517	933	1616	2441	4385
2000	231	443	798	1383	2089	3753

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed

THUR 4-12, 2007

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8172	Mariano	Rough AC	FAIL	
1	23 Middle Rd Ken Wendell-	Frame all	FAIL	
				INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7220	Clements	Final dock	PASS	CLOSE
6680	11 W High Pt	Final bracket	PASS	CLOSE
3	O/B			INSPECTOR: <i>FW</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8568	Mariano	Interior rough	PASS	
2	23 Middle Rd C&C Div			INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8027	Hansa	Final	PASS	CLOSE
	3E High Pt TC Garage			INSPECTOR: <i>OM</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 23 MIDDLE ROAD

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

GAS FINAL

MISSING GAS PERMIT INSPECTION
SIGN OFF SHEET

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

DATE: 5/1

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed ~~THURS~~ **THURS** 5-1, 2008

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8852	Millard	Final	PASS	CLOSE
4	5 Indialucie	(shutter)		
	Tripp Assoc	rec'd affidavit		INSPECTOR: <i>[Signature]</i>
CE	Zigler	fence &	OK.	MR ZIEGLER w/ FATC w/neighbor
2	15 Emarita	brazilian pepper		
	781-5640	@ 17 Emarita		INSPECTOR: <i>[Signature]</i>
8814	Cotler	Final	PASS	CLOSE
3	60 Sever Rd			
	All American Log			INSPECTOR: <i>[Signature]</i>
8513	Morand	gas final	FATC	MISW/INSPECTION
1st	23 Middle Rd			SIGN OFF SHIT.
	@ CAC Div.			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-2, 2008

Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8874	Bush	Plumbing	PASS	
3	2 Windsor Olympic Pools			INSPECTOR: <i>[Signature]</i>
8823	Sebastian	roof inspection tie down	CANCEL	
2	64 High PE OB	roof inspection		INSPECTOR:
8568	Manning	Final	PASS	CLOSE
155	23 Middle Rd C/O Div	MARIANO cell 260-3290	PASS	INSPECTOR: <i>[Signature]</i>
8849	Hardin	UG plumbing	PASS	
4	275 River Advantage Pools			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of inspection: Mon Wed Fri 5-30, 2007 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8533	West	Insulation	PASS	
4	7 Palmetto DR OIB			INSPECTOR: <i>[Signature]</i>
Tree	Brunelle	Tree	PASS	
2	32 E High Pt OB			INSPECTOR: <i>[Signature]</i>
8520	Tidikis	Fence	PASS	CLOSE
3	12 Cranes Nest H&G			INSPECTOR: <i>[Signature]</i>
8558	Maman	UG tank + line	PASS	
1	23 Middle Rd etc			INSPECTOR: <i>[Signature]</i>
Tree	Heckinberg	Tree	PASS	
5	5 Lagoon Isl. Carbone			INSPECTOR: <i>[Signature]</i>
8582	Riostano	Steel	PASS	
	8 Terraville Cir OIB	reinspect		INSPECTOR: <i>[Signature]</i>
8592	LELO	FINAC	FAIL	
	27 SIMARA ST. S. HAYNES			INSPECTOR: <i>[Signature]</i>
OTHER:	8535 STARK	Alab	PASS	<i>[Signature]</i>
	87 S River Rd Emil Salv			

8822

POOL ENCLOSURE



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:	8822	DATE ISSUED:	FEBRUARY 12, 2008
SCOPE OF WORK:	REPLACE POOL ENCLOSURE		
CONDITIONS:			
CONTRACTOR:	EAST COAST SPECIALTIES		
PARCEL CONTROL NUMBER:	133841002000004207	SUBDIVISION	HIGH POINT - LOT 45
CONSTRUCTION ADDRESS:	23 MIDDLE ROAD		
OWNER NAME:	MARIANO		
QUALIFIER:	MICHAEL HALL	CONTACT PHONE NUMBER:	772-873-6958

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.

INSTR # 2055399 OR BK 02296 PG 2411 RECD 12/12/2007 10:02:44 AM

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 13-38-41-00 2-000-00420-7

NOTICE OF COMMENCEMENT

STATE OF Fla

COUNTY OF Martin

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE): 23 Middle Rd Sewall's Point / Disjoint Lot 42

GENERAL DESCRIPTION OF IMPROVEMENT: Pool Enclosure

OWNER: Nicholas + Jo-Ann MARIANO

ADDRESS: 23 Middle Road Stuart FLA 34996

PHONE #: (772) 221-2157 FAX #: _____

INTEREST IN PROPERTY: OWNERS

NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): _____

SEACOAST NATIONAL BANK STUART, FLA. 34994

CONTRACTOR: East Coast Spec Inc Michael A Hall

ADDRESS: 1806 SW Biltmore ST Ft. St. Lucie FL 34984

PHONE #: 772-873-6958 FAX #: 772-873-6960

SURETY COMPANY (IF ANY) N/A
ADDRESS: _____
PHONE # _____
BOND AMOUNT: _____

STATE OF FLORIDA
MARTIN COUNTY
FAX # _____
THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.
[Signature]
MARSHA EWING, CLERK
FAX # _____ D.C.
DATE: 12.12.07



LENDER/MORTGAGE COMPANY N/A
ADDRESS: _____
PHONE #: _____

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: NONE
ADDRESS: _____
PHONE #: _____

FAX #: _____

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 #: _____ FAX #: _____

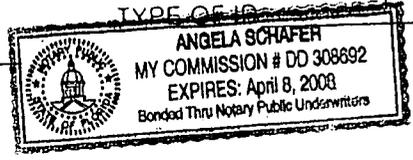
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 12th DAY OF December 2007
BY Nicholas Mariano

PERSONALLY KNOWN ✓
OR PRODUCED ID _____
TYPE OF ID _____

[Signature]
NOTARY SIGNATURE



288. 7176

JW#

767-23-01

619 East 5th St Stuart,

DATE 12-12-07
TOWN OF SEWALL'S POINT

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Nick Mariano Phone (Day) (772) 221-2157 (Fax) _____

Job Site Address: 23 Middle Road City: STUART State: FLA. Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Lot 42 High Point Parcel Number: 13-38-41-002-000-00420-7

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

Scope of work: Pool Enclosure Replace Old

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:

Estimated Value of Construction or Improvements: \$ 9,200-
(Notice of Commencement required over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____
(FOR ADDITIONS AND REMODEL APPLICATIONS ONLY)

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: Fast Coat Spec Inc Phone: 772-873-6958 Fax: 772-873-6960

Street: 1806 S.W. B. H. Moore ST City: PT. ST. LUCIE State: FLA Zip: 34984

State Registration Number: _____ State Certification Number: _____ Municipality License Number: _____

ARCHITECT _____ Lic. # _____ Phone Number: _____

Street: _____ City: _____ State: _____ Zip: _____

ENGINEER: Skylin Engineering Lic# 65726 Phone Number: 772-429-1000

Street: 7003 Brookline Ave City: FT. PIERCE State: FLA Zip: 34951

AREA SQUARE FOOTAGE (SEWER & ELECTRIC): Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: 1260
Carpport: _____ Total Under Roof: _____ Wood Deck: _____ 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. 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 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

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 ORIGINALLY 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. 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.

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

OWNER OR AUTHORIZED AGENT SIGNATURE (required)

Nick Mariano

State of Florida, County of: Martin

This the 12th day of December 2007

by Nicholas Mariano who is personally

known to me or produced

as identification. [Signature]

My Commission Expires: 4/8



CONTRACTOR SIGNATURE (required)

Michael Hall

On State of Florida, County of: Martin

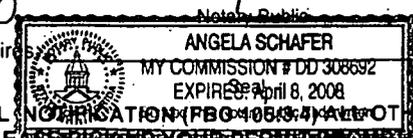
This the 12th day of December 2007

by Michael Hall 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 NOTIFICATION (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 1-22-08
BUILDING OFFICIAL

- LEGEND**
- * = OPTIONAL
 - OB=OPEN BACK
 - KB=KNEE BRACING
 - WB=WINDBRACE
 - KP=KICKPLATE
 - SP=SOLE PLATE
 - WB=2X2 = 2X2X.090
 - KB=2X3 = 2X3X.045
 - SP=1X2,1X3X.044 OR RECEIVING CHANNEL
 - OB=1X2 OR 1X3X.044
 - 1X2 = 1X2X.044 PATIO
 - 1X3 = 1X3X.044 PATIO
 - 2X2 = 2X2X.044 PATIO
 - 2X2H = 2X2X.090
 - 2X3 SMS = 2X3X.045 SELF MATING SNAP
 - 2X3 = 2X3X.045 PATIO
 - 2X3 S = 2X3X.050
 - W/6 SCREW BOSSES
 - 2X3 SPECIAL = 2X3X.063 6005 ALLOY
 - 2X3H = 2X3X.090
 - 3X2 = 3X2X.070 PATIO
 - 3X3 = 3X3X.093 PATIO
 - 3X3S = 3X3X.072 W/2 SPLINE GROVES
 - 2X4 = 2X4X.050 SMB OR PATIO
 - 2X5 = 2X5X.050 SMB
 - 2X6 = 2X6X.050 SMB
 - 2X7 = 2X7X.055 SMB
 - 2X8 = 2X8X.072 SMB
 - 2X9LT = 2X9X.072 SMB
 - 2X9H = 2X9X.082 SMB
 - 2X10L = 2X10X.092 SMB
 - 2X10H = 2X10X.125 SMB

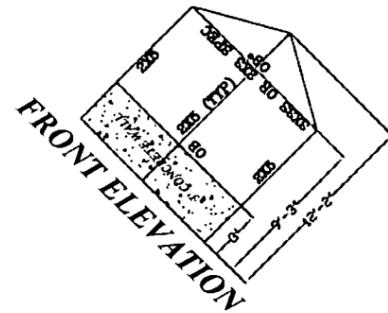
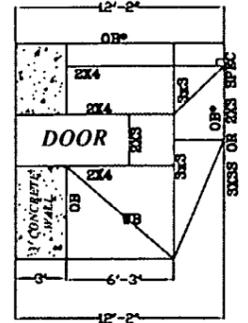
MICHAEL EDGERLY
 P.E. # 65276
 NY

Contractor:
EAST COAST SPECIALTIES
 488 S. MARKET AVE.
 FORT PIERCE, FL 34982
 DATE: 11-2-2007
 DRAWN BY: BJK
 CHECKED BY:
 SHEET NO. 1 OF 5

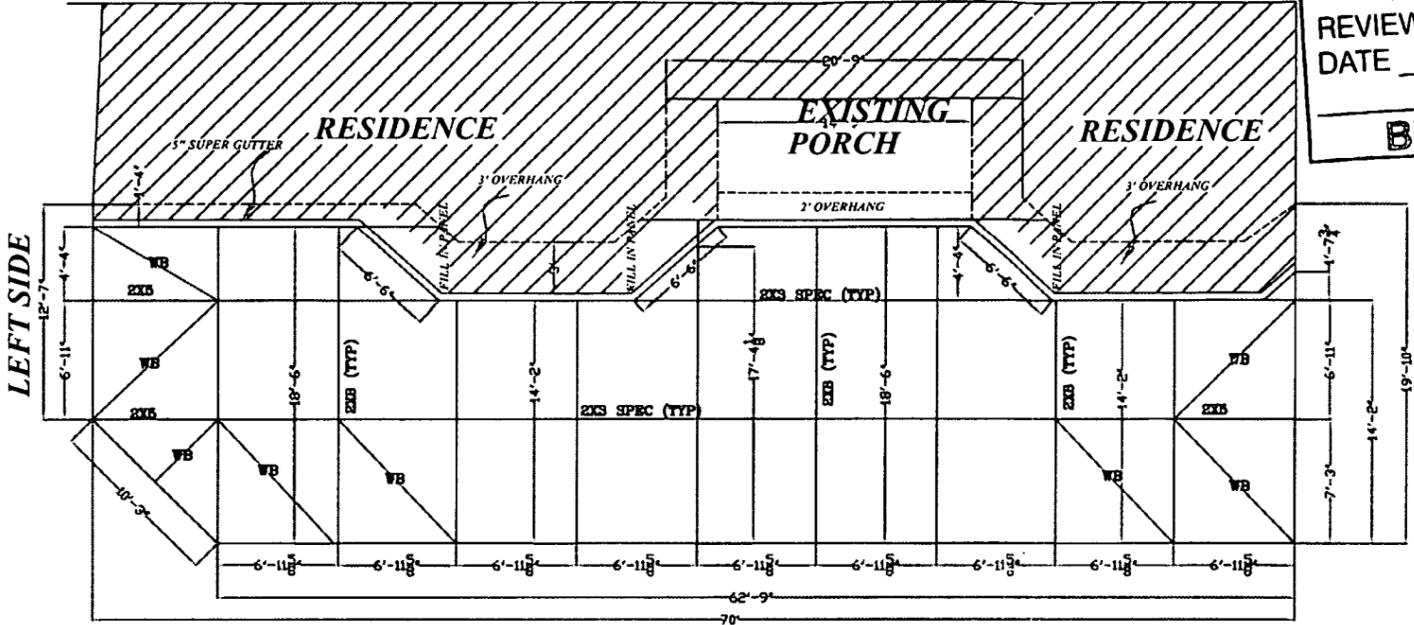
PROJECT FOR:
MARIANO RESIDENCE
 23 MIDDLE RD.
 SEWALLS POINT, FL
 MARTIN COUNTY

SKYLINE ENGINEERING
 STRUCTURAL-CIVIL
 CERT. OF AUTH. # 27223
 7003 Brookline Avenue
 Ft. Pierce, Florida 34946
 PH: 772-465-5441
 FAX: 772-465-5442

LEFT ELEVATION

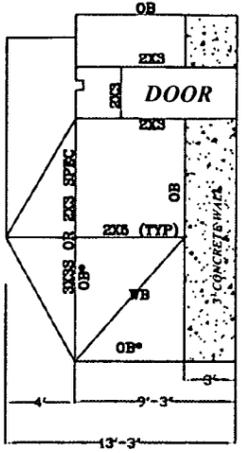


LEFT SIDE

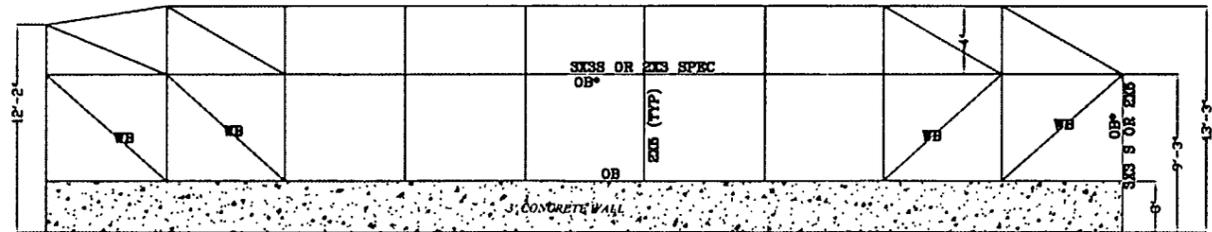


FRONT PLAN VIEW

RIGHT SIDE



RIGHT ELEVATION



FRONT ELEVATION

WIND SPEED = 140 M.P.H.
 WIND EXP. CLASSIFICATION = "B"

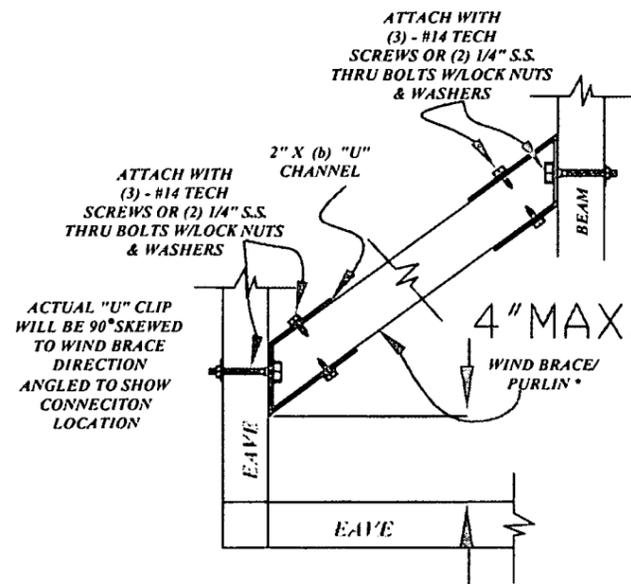
GENERAL NOTES

- 1) THIS STRUCTURE HAS BEEN DESIGNED AND SHALL BE FABRICATED IN ACCORDANCE WITH THE REQUIREMENTS OF THE 2004 FLORIDA BUILDING CODE (FBC) & AS AMENDED BY THE 2006 SUPPLEMENTS, THE 2004 ALUMINUM DESIGN MANUAL. ALL LOADS BASED ON 100% SCREEN OPENING, FLAT SPLINE & FBC TABLE 7002.4 (1) (NON-HYDZ), CATEGORY I (11-16.7) (H/H2) AND ASCE-7-02.
- **ALTERATIONS, ADDITIONS, HIGHLIGHTS OR OTHER MARKINGS TO THIS DOCUMENT ARE NOT PERMITTED AND WILL ANNULL OUR CERTIFICATION.
- 2) THE EXISTING STRUCTURE IS CAPABLE OF SUPPORTING THE LOADS IMPOSED BY THIS STRUCTURE. CONTRACTOR/BUILDER IS RESPONSIBLE TO CONFIRM AND CONSTRUCT TO THE DETAILS IN THESE PLANS. CONTACT ENGINEER IF SITE CONDITIONS VARY.
- 3) RESPONSIBILITY WILL BE OF THE BUILDER/CONTRACTOR, TO INSURE THE EXISTING STRUCTURE & MATERIALS ARE SOUND. REPLACE ALL STRUCTURALLY DEFECTIVE MATERIALS.
- 4) ALL MEMBERS SHALL BE AND HAVE BEEN DESIGNED USING ALUMINUM ALLOY TYPE 6063-T6, UNLESS SPECIFIED OTHERWISE. ALL ALUMINUM EXTRUSIONS SPECIFIED IN THIS PROJECT SHALL BE AS SHOWN IN THE A.A.F. MANUAL.
- 5) ANY FASTENERS STRIPPED OR NOT ADEQUATELY HOLDING SHALL BE REPLACED.
- 6) ALL FASTENERS TO BE 304-T4 ALLOY, NON-MAGNETIC STAINLESS STEEL OR CADMIUM PLATED OR OTHERWISE CORROSION RESISTANT MATERIAL AND SHALL COMPLY WITH S.I.C. SPECIFICATIONS FOR ALUM. STRUCTURES - SECTION I, THE ALUMINUM ASSOCIATION, INC. & APPLICABLE FEDERAL STATE & LOCAL CODES.
- 7) ALL TAPCONS MUST BE GRADE 517W CARBON STEEL TAPCONS OR EQUIVALENT W/ 1/2" EMBEDMENT, 3" MIN EDGE DISTANCE, FASTENED TO MINIMUM 2500 PSI CONCRETE.
- 8) ALL EXPOSED SCREW HEADS IN ROOF TO BE CAULKED.
- 9) ENGINEER SEAL AFFIXED HERETO VALIDATES STRUCTURAL DESIGN AS SHOWN ONLY. USE OF THIS SPECIFICATION BY CONTRACTOR, E.T.A.L. INDEMNIFIES AND SAVES HARMLESS THIS ENGINEER FOR ALL COSTS AND DAMAGES INCLUDING LEGAL FEES AND APPRIATE FEES RESULTING FROM MATERIAL FABRICATION, SYSTEM ERECTION, AND CONSTRUCTION PRACTICES BEYOND THAT WHICH IS CALLED FOR BY LOCAL, STATE AND FEDERAL CODES AND FROM DEVIATIONS OF THIS PLAN.
- 10) EXCEPT AS EXPRESSLY PROVIDED IN THIS SPECIFICATION, NO ADDITIONAL CERTIFICATIONS OR AFFIRMATIONS ARE INTENDED.
- 11) SEAL ALL JOINTS W/ CONTINUOUS CAULKING
- 12) ROOF PITCH SHALL BE A MIN. OF 1/4" PER FOOT AND A MAX. OF 3" PER FOOT.
- 13) COMPOSITE PANELS MUST BE SEALED AT SIDES AND END.
- 14) ALL CONCRETE MUST HAVE MINIMUM COMPRESSIVE STRENGTH OF 2,500 PSI.

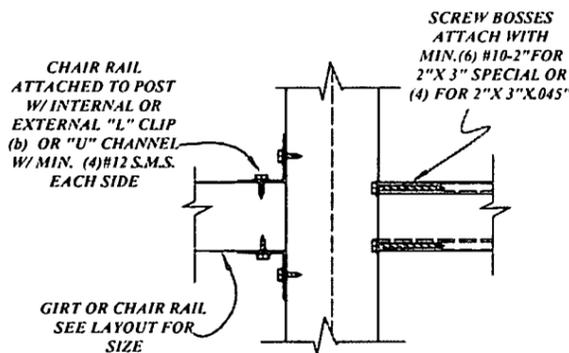
RATIONAL ANALYSIS CALCULATION
 PER FBC 2004 FOR EXISTING SLAB

$q_2 = 8 \text{ PSF} \times 1.5 \text{ GCF FACTOR} - 1.5 \text{ PSF (DEAD LOAD)} = 10.5 \text{ PSF}$
 WIND UPLIFT = $10.5 \text{ PSF} \times 70' \times 9.25' = 6798.75 \text{ LBS}$
 APPLY SAFETY FACTOR = $1.67 \times 6798.8 = 11353.9 \text{ LBS}$
 WEIGHT OF 4" CONC. SLAB = $144 \times 33' \times 70' \times 8 = 20157.98 \text{ LBS}$
 TOTAL WEIGHT = $20158 \text{ LBS} > 11353.9 \text{ LBS}$
 ...OK EXIST. SLAB & NO FOOTING IS REQUIRED.

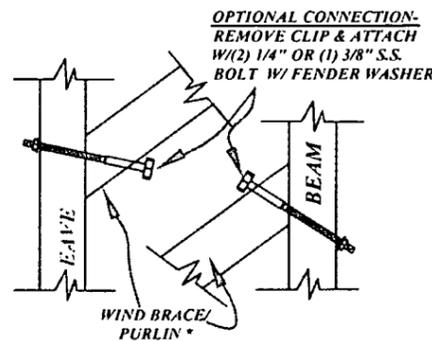
NOTE: IF THERE IS AN EXISTING FOOTING, 6" OF 4" CONC. MUST EXIST BETWEEN FOOTING AND EDGE OF SLAB



WIND BRACING CONNECTION DETAIL



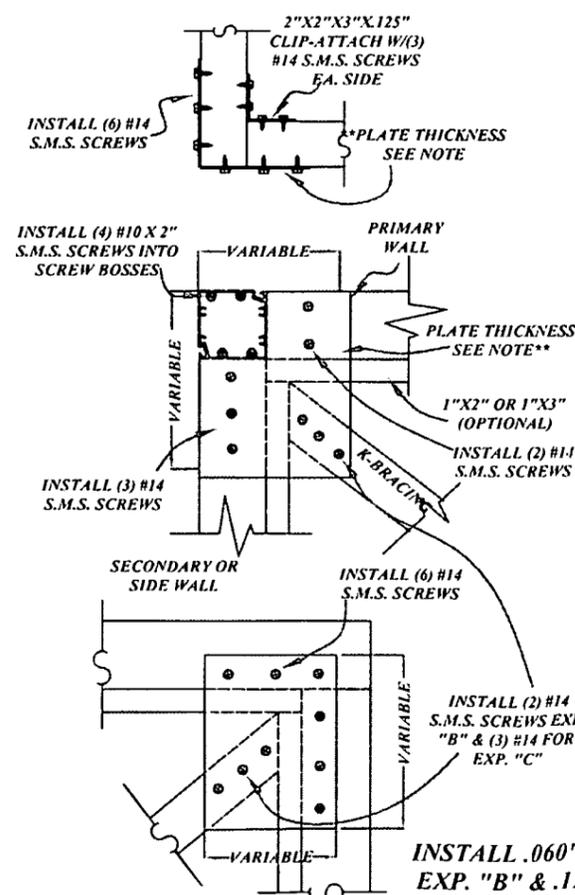
GIRT TO POST DETAIL



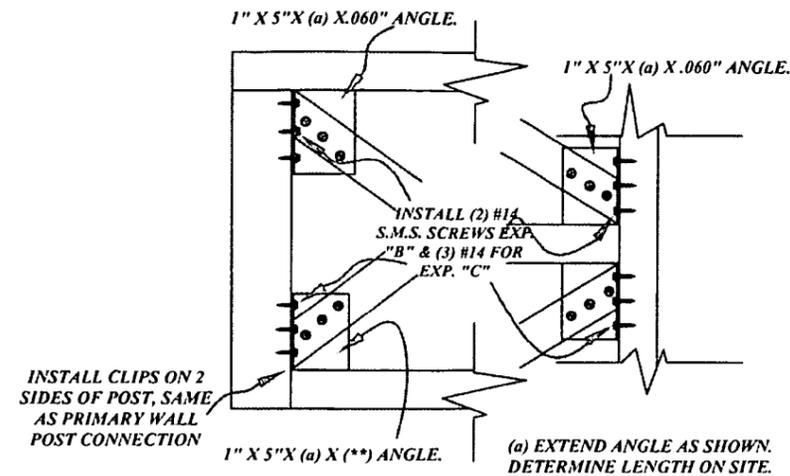
OPTIONAL WIND BRACING CONNECTION DETAIL

*** SEE LAYOUT FOR MEMBER OR MATERIAL SIZING GENERAL CONSTR. NOTES:**

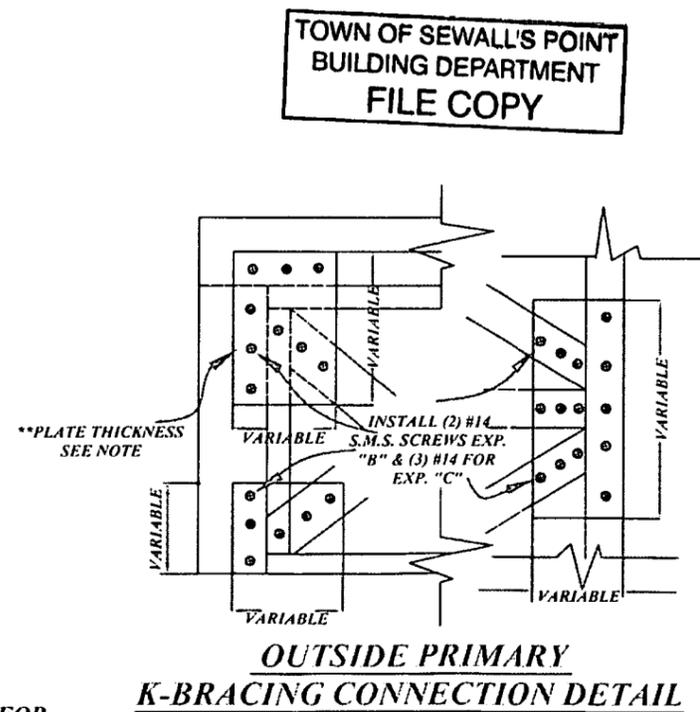
- NOTE: STITCH ALL S.M.B.'S W/ #12 S.M.S. SCREWS ON 18" O.C.
- (a.) ALL CONCRETE SCREWS MINIMUM EMBEDMENT OF 3" INTO SOLID CONCRETE. MINIMUM EDGE DISTANCE 5 TIMES DIAMETER.
 - (b.) U-CHANNEL THICKNESS: .125" \geq EXPOSURE "C"
 - FOR 2" X 6" POST OR BIGGER, USE STRUCTURAL .25" CLIPS
 - (c.) CONCRETE SCREW SIZE: SCREEN ROOM: 1/4" POOL ENCLOSURE: 3/8" OR OTHERWISE SPECIFIED
 - (d.) LENGTH OF ANGLE AND/OR PLATE VARIES BY SIZE OF COLUMN AND/OR BASE PLATE SIZE
 - (e.) CONCRETE SCREW SIZE- POOL ENCLOSURE: EXPOSURE "B" - 1/4" EXPOSURE "C" - 3/8" USE 1/4" FOR ALL SCREEN ROOMS FOR 6" POST OR BIGGER, USE (2) 3/8" CONC. SCREWS



SIDE VIEW EAVE RAIL CORNER DETAIL



INSIDE PRIMARY K-BRACING CONNECTION DETAIL

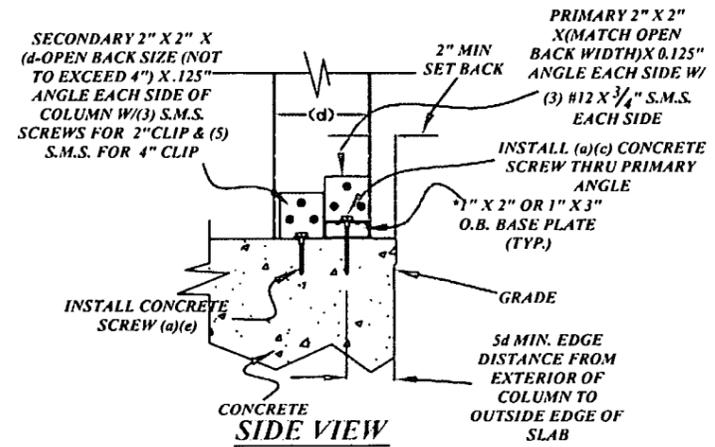


OUTSIDE PRIMARY K-BRACING CONNECTION DETAIL

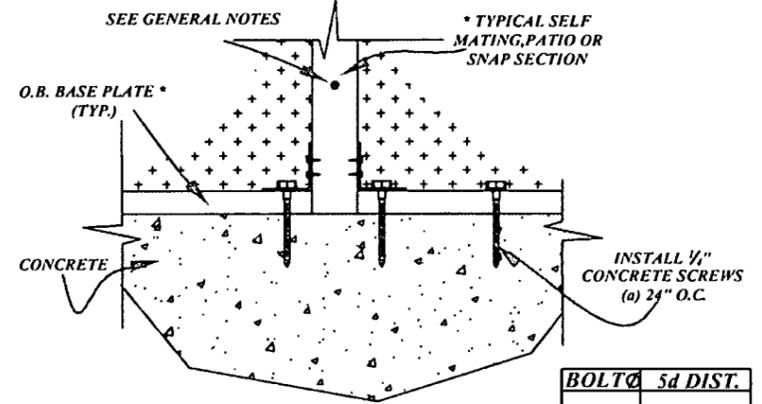
****NOTE!**
INSTALL .060" PLATE OR ANGLE FOR EXP. "B" & .125" FOR EXP. "C"-SIZE VARIES

****NOTE!**
INSTALL .060" PLATE OR ANGLE FOR ALL PLATES

Contractor:	<p>MICHAEL EDGERLY P.E. # 65276</p> <p>EAST COAST SPECIALTIES 488 S. MARKET AVE. FORT PIERCE, FL 34982</p> <p>DATE: 11-2-2007 DRAWN BY: BJK CHECKED BY: SHEET NO. 2 OF 5</p>
PROJECT FOR:	<p>MARIANO RESIDENCE 23 MIDDLE RD. SEWALLS POINT, FL MARTIN COUNTY</p>
SKYLINE ENGINEERING	<p>STRUCTURAL-CIVIL CERT. OF AUTH. # 27223 7003 Brookline Avenue Ft. Pierce, Florida 34946 PH: 772-465-5441 FAX: 772-465-5442</p>

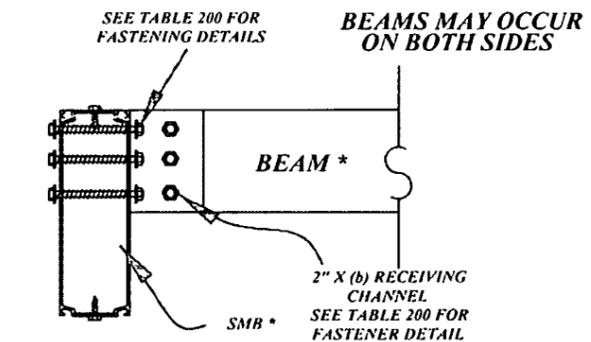


CONCRETE SIDE VIEW



FRONT VIEW POST TO DECK DETAILS

BOLT Ø	5d DIST.
1/4"	1-1/4"
3/8"	1-7/8"



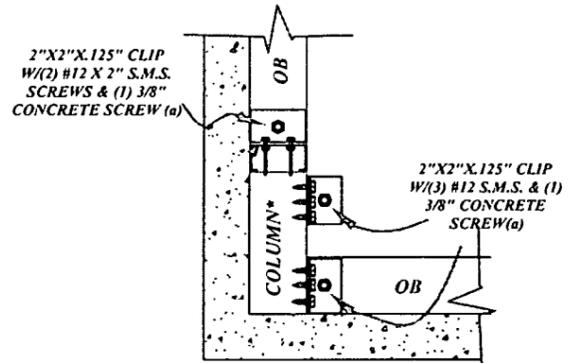
BEAM TO BEAM CONNECTION DETAIL

TABLE 200 FASTENER SCHEDULE

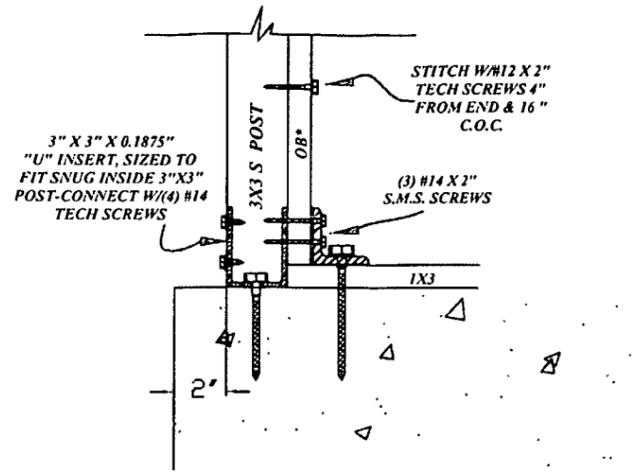
BEAM SIZE *	SCREW SIZE *	FASTENERS PER SIDE	OPTIONAL BOLTS
2" X 3"	12	3	(2) - 3/8"
2" X 4"	12	4	(3) - 3/8"
2" X 5"	12	5	(3) - 3/8"
2" X 6"	12	6	(3) - 3/8"
2" X 7"	12	7	(4) - 3/8"
2" X 8"	12	8	(4) - 3/8"
2" X 9"	14	8	(4) - 7/16"
2" X 10"	14	8	(5) - 7/16"

*** SEE LAYOUT FOR MEMBER OR MATERIAL SIZING GENERAL CONSTR. NOTES:**

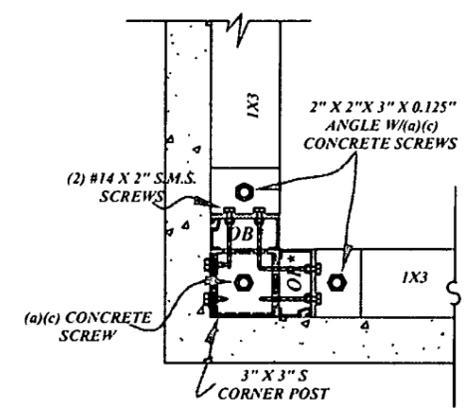
- NOTE: STITCH ALL S.M.B.'S W/ #12 S.M.S. SCREWS ON 18" O.C.
- (a.) ALL CONCRETE SCREWS MINIMUM EMBEDMENT OF 3" INTO SOLID CONCRETE. MINIMUM EDGE DISTANCE 5 TIMES DIAMETER.
 - (b.) U-CHANNEL THICKNESS: .125" ≥ EXPOSURE "C"
 - FOR 2" X 6" POST OR BIGGER, USE STRUCTURAL .25" CLIPS
 - (c.) CONCRETE SCREW SIZE: SCREEN ROOM: 1/4" POOL ENCLOSURE: 3/8" OR OTHERWISE SPECIFIED
 - (d.) LENGTH OF ANGLE AND/OR PLATE VARIES BY SIZE OF COLUMN AND/OR BASE PLATE SIZE
 - (e.) CONCRETE SCREW SIZE- POOL ENCLOSURE: EXPOSURE "B" - 1/4" EXPOSURE "C" - 3/8" USE 1/4" FOR ALL SCREEN ROOMS FOR 6" POST OR BIGGER, USE (2) 3/8" CONC. SCREWS



OPTIONAL EXTERIOR CORNER CONNECTION TO FOUNDATION

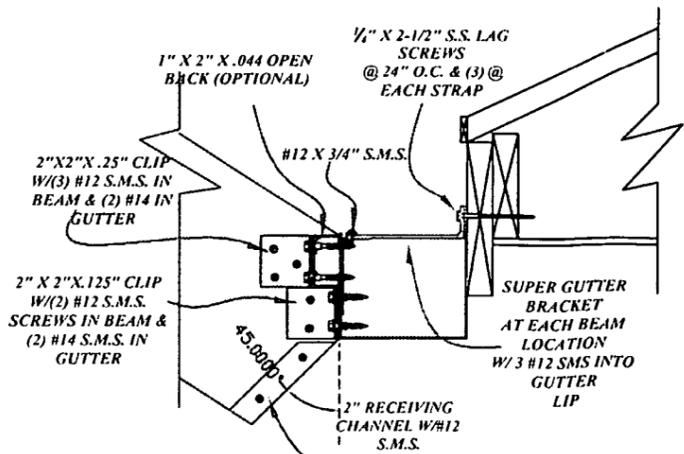


ELEVATION VIEW/EXTERIOR CORNER CONNECTION TO FOUNDATION

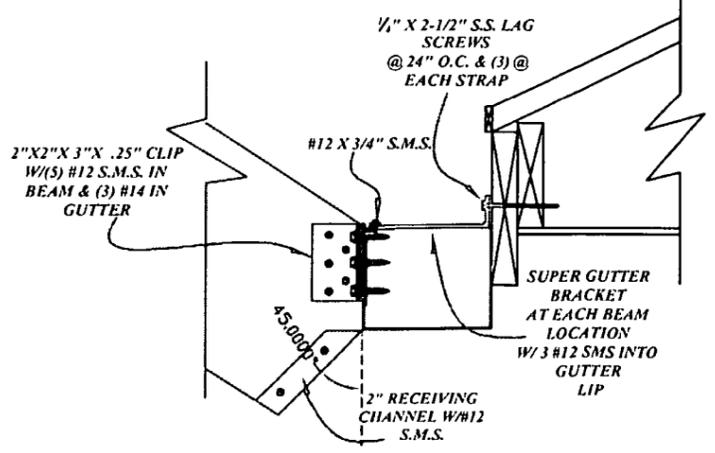


PLAN VIEW/EXTERIOR CORNER CONNECTION TO FOUNDATION

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT FILE COPY



SELF MATING BEAM CONNECTION TO 5" SUPER OR EXTRUDED GUTTER



(OPTIONAL) SELF MATING BEAM CONNECTION TO 5" SUPER OR EXTRUDED GUTTER

MICHAEL EDGERLY
P.E. # 65276
SCALE: N.T.S.

Contractor:
EAST COAST SPECIALTIES
488 S. MARKET AVE.
FORT PIERCE, FL 34982
DATE: 11-2-2007
DRAWN BY: BJK
CHECKED BY:
SHEET NO. 3 OF 5

PROJECT FOR:
MARIANO RESIDENCE
23 MIDDLE RD.
SEWALLS POINT, FL
MARTIN COUNTY

SKYLINE ENGINEERING
STRUCTURAL-CIVIL
CERT. OF AUTH. # 27223
7003 Brookline Avenue
Ft. Pierce, Florida 34946
PH: 772-465-5441
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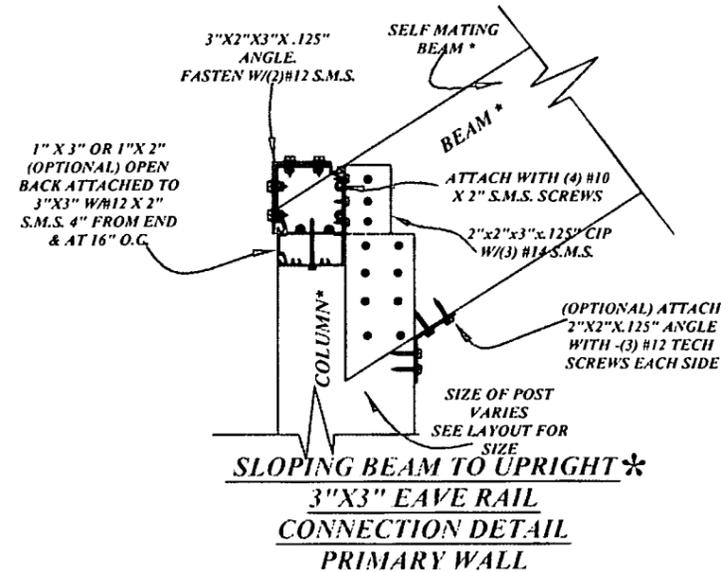
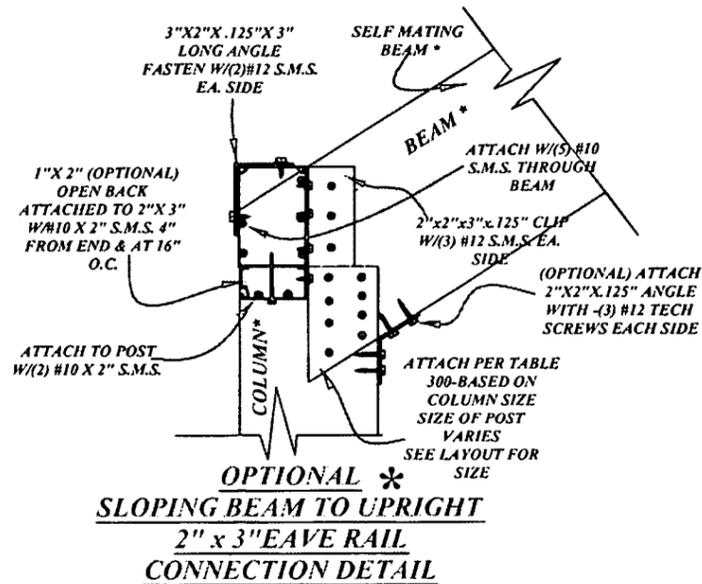


TABLE 300 FASTENER SCHEDULE

COLUMN SIZE *	ANGLE LENGTH (.125")	SCREW SIZE	*BEAM FASTENERS PER SIDE
5"	6"	#12	8
6"	6"	#12	8
7"	6"	#12	8
8"	6"	#14	10
9"	6"	#14	12
10"	6"	#14	12

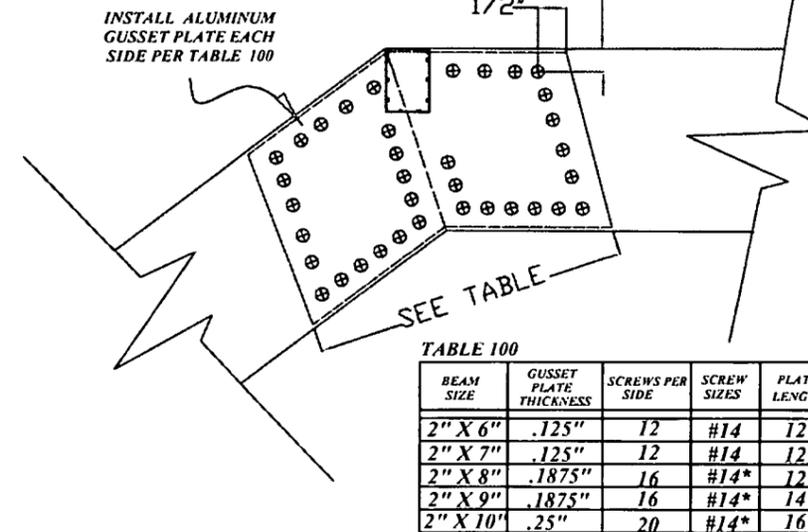
NOTE!
* POSTS > 7"-INSTALL SCREWS EQUALLY SPACED IN OVERLAP AREA

*** SEE LAYOUT FOR MEMBER OR MATERIAL SIZING GENERAL CONSTR. NOTES:**

- NOTE: STITCH ALL S.M.B.'S W#12 S.M.S. SCREWS ON 18" O.C.
- (a) ALL CONCRETE SCREWS MINIMUM EMBEDMENT OF 3" INTO SOLID CONCRETE. MINIMUM EDGE DISTANCE 5 TIMES DIAMETER.
 - (b) U-CHANNEL THICKNESS: .125 - ≥ EXPOSURE "C"
 - FOR 2" X 6" POST OR BIGGER, USE STRUCTURAL .25" CLIPS
 - (c) CONCRETE SCREW SIZE: SCREEN ROOM: 1/4" POOL ENCLOSURE: 3/8" OR OTHERWISE SPECIFIED
 - (d) LENGTH OF ANGLE AND/OR PLATE VARIES BY SIZE OF COLUMN AND/OR BASE PLATE SIZE
 - (e) CONCRETE SCREW SIZE- POOL ENCLOSURE: EXPOSURE "B" - 1/4" EXPOSURE "C" - 3/8" USE 1/4" FOR ALL SCREEN ROOMS FOR 6" POST OR BIGGER, USE (2) 3/8" CONC. SCREWS

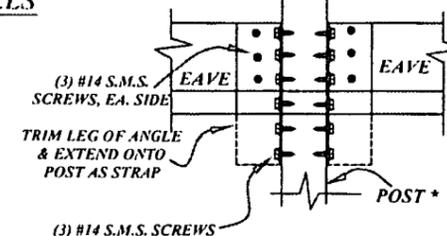
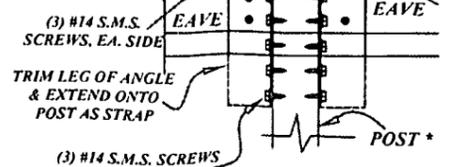
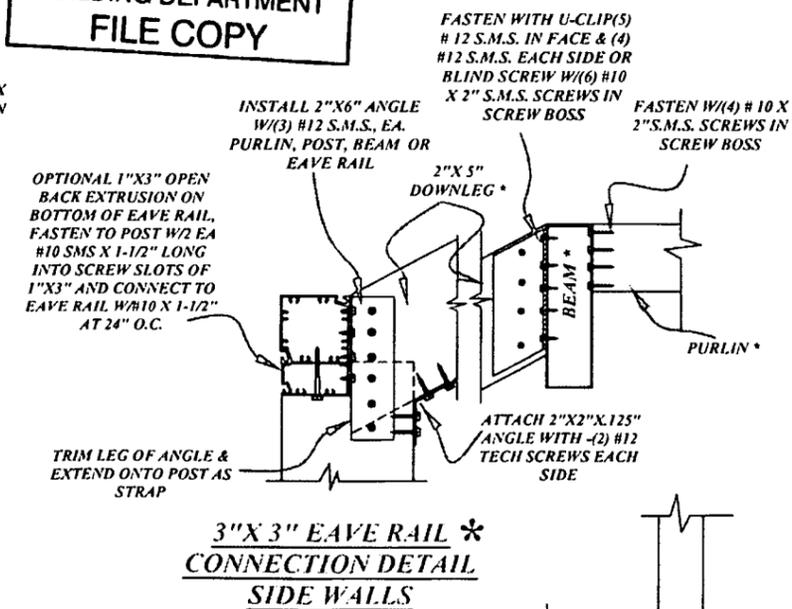
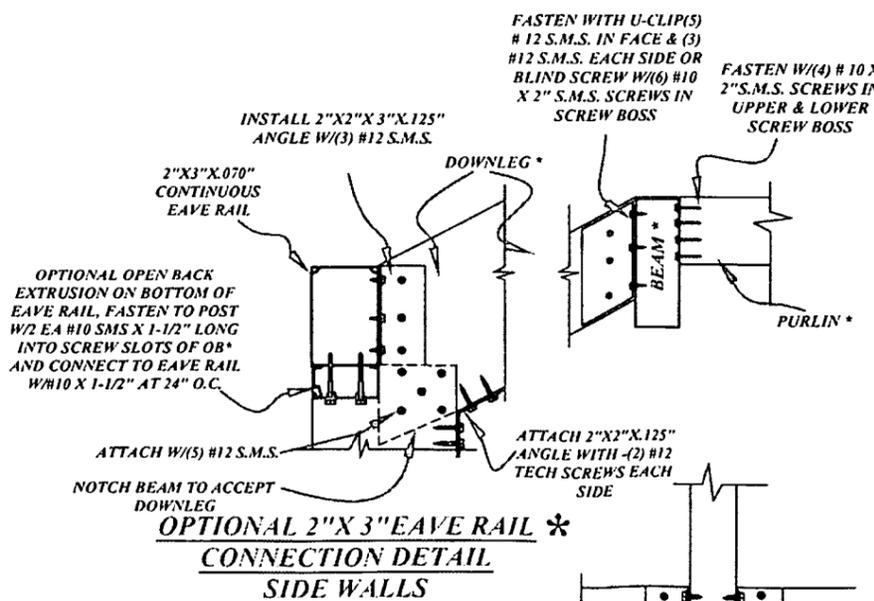
ALL GUSSET PLATES SHALL BE A MINIMUM OF 5052 H-32 ALLOY OR HAVE A MINIMUM YIELD STRENGTH OF 23 ksi & CUT TO INSIDE WEB LESS .125

FASTENER SIZE & SPACING PER DETAIL



TYPICAL GUSSET PLATE CONNECTION MANSARD ROOF OR GABLE

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT FILE COPY

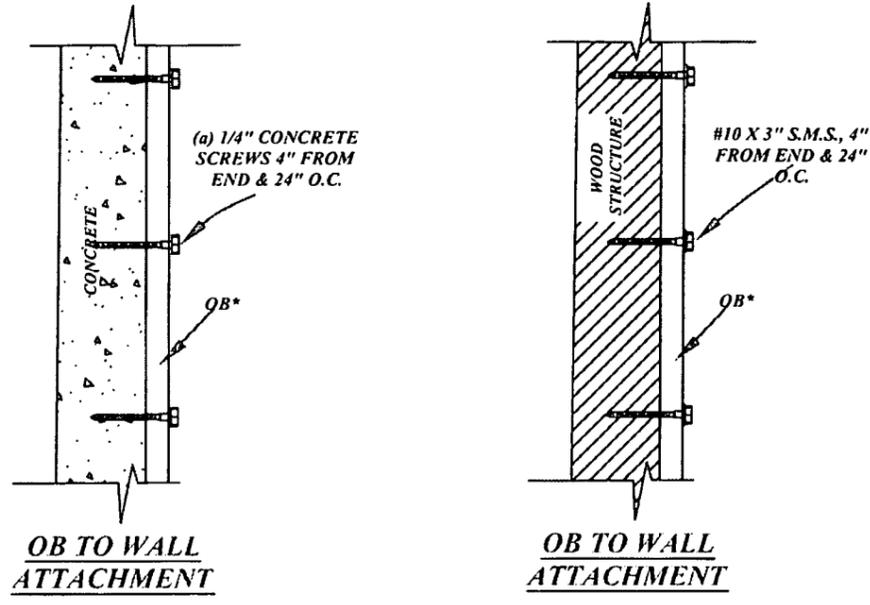


MICHAEL EDGERLY
P.E. # 65276
SCALE: N.T.S.

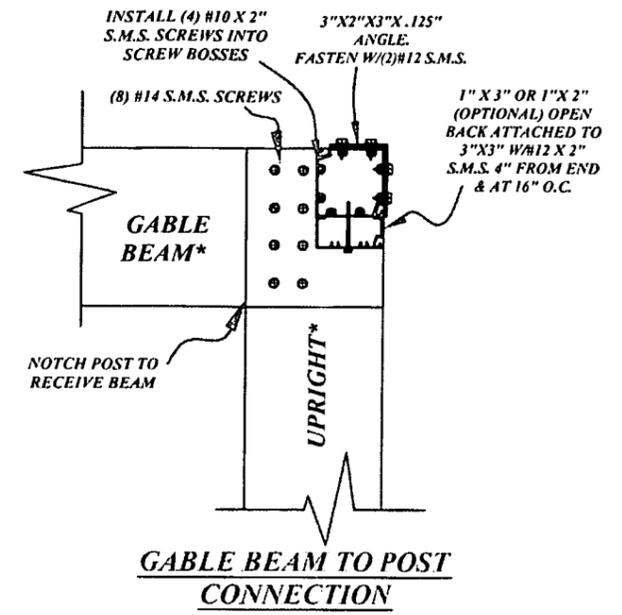
Contractor:
EAST COAST SPECIALTIES
488 S. MARKET AVE.
FORT PIERCE, FL 34982
DATE: 11-2-2007
DRAWN BY: BJK
CHECKED BY:
SHEET NO. 4 OF 5

PROJECT FOR:
MARIANO RESIDENCE
23 MIDDLE RD.
SEWALLS POINT, FL
MARTIN COUNTY

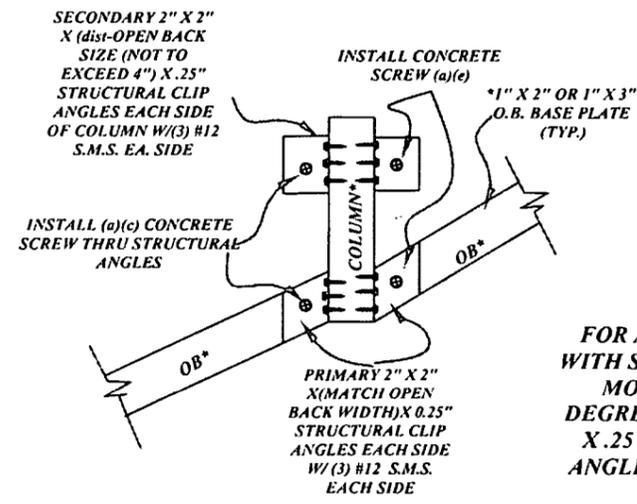
SKYLINE ENGINEERING
STRUCTURAL-CIVIL
CERT. OF AUTH. # 27223
7003 Brookline Avenue
Ft. Pierce, Florida 34946
PH: 772-465-5441
FAX: 772-465-5442



ATTACHMENT TO STRUCTURE CONNECTION DETAIL



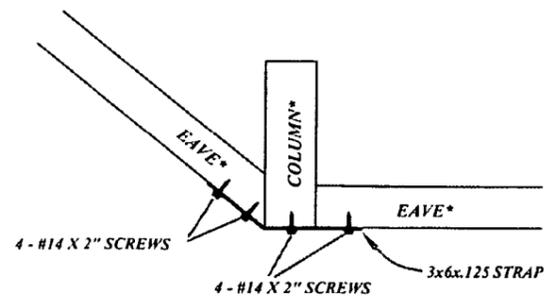
GABLE BEAM TO POST CONNECTION



SKEWED WALL POST TO DECK CONNECTION DETAIL

NOTE!
FOR A STRUCTURE WITH SKEWED WALLS MORE THAN 10 DEGREES, USE 2" X 2" X .25 STRUCTURAL ANGLES-SEE DETAIL "A"

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY



CORNER STRAP FOR ANGLES LESS THAN 90 DEGREES

<p>Contractor: EAST COAST SPECIALTIES 488 S. MARKET AVE. FORT PIERCE, FL 34982</p>	<p>MICHAEL EDGERLY P.E. # 65276 SCALE: N.T.S.</p>
<p>DATE: 11-2-2007 DRAWN BY: BJK CHECKED BY: SHEET NO. 5 OF 5</p>	<p>PROJECT FOR: MARIANO RESIDENCE 23 MIDDLE RD. SEWALLS POINT, FL MARTIN COUNTY</p>
<p>SKYLINE ENGINEERING STRUCTURAL-CIVIL CERT. OF AUTH. # 27223 7003 Brookline Avenue Ft. Pierce, Florida 34946 PH: 772-465-5441 FAX: 772-465-5442</p>	



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Name	Company	License Type	License & Exp	Status	Address	Phone	Liability & Exp	Wk Comp & Exp
HALL, MICHAEL A	EAST COAST SPECIALTIES INC	ALUMINUM/CONCRETE CONTRACTOR	SP02074 30-SEP-09	REDTAG	1806 SW BILTMORE AVE PRT ST LUCIE FL 34984	772-873-6958 772-873-6960	STUART INS 01-SEP-08	STUART INS 23-APR-08

[Spread Sheet](#)

1 - 1

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 13-38-41-00 2-000-00420-7

NOTICE OF COMMENCEMENT

STATE OF Fla

COUNTY OF Martin

THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE): 23 Middle Rd Seawalk Point / Disappoint Lot 42

GENERAL DESCRIPTION OF IMPROVEMENT: Pool Enclosure

OWNER: Nicholas + Jo-Ann MARIANO

ADDRESS: 23 Middle road Stuart FLA 34996

PHONE #: (772) 221-2157 FAX #: _____

INTEREST IN PROPERTY: OWNERS

NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): _____

SEACREST NATIONAL BANK STUART, FLA. 34994

CONTRACTOR: East Coast Spec Inc Michael A Hall

ADDRESS: 1806 SW Britmore ST Pt-St Lucie Fl 34984

PHONE #: 772-873-6958 FAX #: 772-873-6960

SURETY COMPANY (IF ANY) N/A

ADDRESS: _____

PHONE # _____ FAX #: _____

BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY N/A

ADDRESS: _____

PHONE # _____ FAX #: _____

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OR OTHER DOCUMENTS MAY BE SERVED AS PROVIDED BY SECTION 713.13(1)(A)7., FLORIDA STATUTES:

NAME: NONE

ADDRESS: _____

PHONE #: _____ FAX #: _____

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 # _____ FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____

THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE

Nicholas Mariano
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 12th DAY OF December 2007

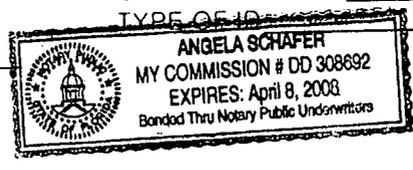
BY Nicholas Mariano

PERSONALLY KNOWN

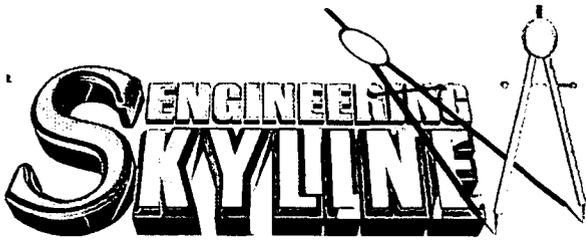
OR PRODUCED ID _____

TYPE OF ID _____

Angela Schaper
NOTARY SIGNATURE



INSTR # 2055399 OR BK 02296 PG 2411 RECD 12/12/2007 10:02:44 AM
PG 2411 (1pg)
MAINTENANCE



P.E. No. 65276

7003 Brookline Ave • Ft. Pierce, FL 34951 • Phone (772) 429-1000 • Fax (772) 465-5442

December 20, 2007

Town of Sewell's Point
One South Sewell's Point Road
Sewell's Point, FL 34996



RE: Building permit for a screen enclosure at:
Marianno Residence
23 Middle Road
Sewell's Point, Fl

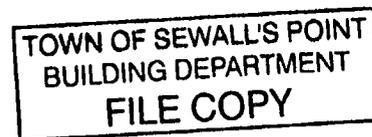
Dear Mr. Adams,

I understand there are some concerns over the distance from the pool deck to the edge of the pool for the above mentioned pool enclosure. Thank you for bringing it to my attention. Having less than three feet from the edge of the pool may not provide enough dead weight to offset the uplift forces imposed by the structure. In this case there is a concrete stem wall that provides for additional deadweight and will adequately withstand the uplift imposed.

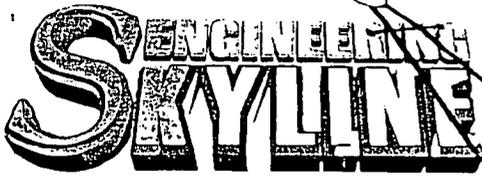
If you have any questions, please contact me at this address or at 772-519-4566.

Sincerely,

Michael J. Edgerly, PE




DEC 20 2007



P.E. No. 65276 - Audit No. 0507-029661

7003 Brookline Ave • Ft. Pierce, FL 34951 • Phone (772) 429-1000 • Fax (772) 465-5442

Design Certification for Wind Load Compliance

Project Name: <i>MARIANO RESIDENCE</i>	Permit #:
Street Address: <i>#23 MIDDLE RD. SEWALLS POINT, FL</i>	Construction Type: <i>ALUMINUM POOL ENCLOSURE</i>

Certification Statement:

I certify that, to the best of my knowledge and belief, these plans and specifications have been designed to comply with the applicable structural portion of the Building Codes currently adopted by MARTIN, County. I also certify that structural elements depicted on these plans provide adequate resistance to wind loads and forces specified by current code provisions.

Design Parameters and Assumptions Used:

- Florida Building Code 2004 Ed.(and as amended by the 2006 supplements)ASCE 7-02 SEC. 6.5
 - Building Design is: Enclosed _____ Partially Enclosed _____ Open Building
 - Building Height: 13'3"
 - Wind Speed Used in Building Design: 140 3 Second Gust
 - Wind Exposure Classification (refer to exposure tables in Bldg. Code identified in Line 1: B)
 - Importance/Use Factor: Following pressures include importance factor table 2002.4 .77
- Loads: 21 PSF-Horizontal Windward Roof 6 PSF
15 PSF-Horizontal Leeward

As witnessed by mail seal, I hereby certify that the information included with this certification is true and correct, to the best of my knowledge and belief.

Name: Michael Edgerly

Certification #: 65276

Design Firm: Skyline Engineering

Date: 11-15-07



NOV 15 2007

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 5-7, 2008

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8883	Church 8 Island Rd	Final	PASS	CLOSE
4	Krauss & Crane			INSPECTOR: <i>[Signature]</i>
8882	Miser 21 Island Rd	Final	PASS	CLOSE
5	Krauss & Crane			INSPECTOR: <i>[Signature]</i>
8822	Mariano 23 Middle Rd	Final (screened)	PASS	CLOSE
2ND	East Coast Spec.			INSPECTOR: <i>[Signature]</i>
8745	Nelson 3 Margueta	3 trusses	PASS	
6	Nelson Homes (call first 215-4571)			INSPECTOR: <i>[Signature]</i>
8804	Harte 3 E High Pt	pad-slab	PASS	
3	Elec Con by Mike			INSPECTOR: <i>[Signature]</i>
8884	Mulcahy 138 S Sewalls	Final-garage door	PASS FAIL	
8885	11AM Palm Beach Garage			INSPECTOR: <i>[Signature]</i>
8872	Bean 112 S Sewalls	dry-in sheathing	PASS	
7	WB		PASS	INSPECTOR: <i>[Signature]</i>

OTHER: _____