

5 Miramar Road

2887

SFR

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Mr Robert Schulte

CONTRACTOR Don Anderson

LOT 13 BLOCK _____ SUB MIRAMAR

NO. 5 MIRAMAR

NO. 2887 DATE ISSUED 11-14-90

Call 287-2455 From 8:00 A.M. - 12:00 Noon and
1:00 P.M. - 4:00 P.M. For Inspections of Items 1 thru 13.

TOWN OF SEWALL'S POINT BUILDING PERMIT

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1. LOT STAKES/SET BACKS	11/2/90	DB
2. TERMITE PROTECTION	10/20/90	DB
3. FOOTING - SLAB	OK 11/21/90	DB
4. ROUGH PLUMBING	OK 11/20/90	DB
5. ROUGH ELECTRIC	OK 12/20/90	DB
6. LINTEL	OK 11/30/90	DB
7. ROOF	OK 11/4/90	DB
8. FRAMING	OK 12/20/90	DB
9. INSULATION	OK 12/24/90	DB
10. A/C DUCTS	OK 12/20/90	DB
11. FINAL ELECTRIC	OK 1/30/91	DB
12. FINAL PLUMBING	OK 1/30/91	DB
13. FINAL CONSTRUCTION	OK 1/30/91	DB

- REQUESTS FOR INSPECTIONS REQUIRE AT LEAST 24 HOURS NOTICE.
- ALL WORK MUST BE IN COMPLIANCE WITH THE TOWN OF SEWALL'S POINT ORDINANCES, THE SOUTH FLORIDA BUILDING CODE, THE STATE OF FLORIDA ENERGY EFFICIENCY BUILDING CODE AND ELEVATIONS BASED ON THE STATE FLOOD INSURANCE RATE.

HRS-MARTIN COUNTY
PUBLIC HEALTH UNIT

- PORTABLE TOILET FACILITY: Your septic system was inspected on 1/29/91
- WORKING HOURS AFTER 10-446 SATURDAY.

TO CONSTRUCT _____

REMARKS:

- Approved and Cover
 - Cover but hold for:
 - Final Grade (see Permit for specifications)
 - Other: Direct irrigation
sprinklers away from
discharging over drainfield.
 - Do not cover, disapproved for the following reasons:
 - Well and well reinspection fee _____
 - Other: _____
 - System Reinspection Not Approved
 - Reason(s): _____
 - Final Grade Pass-System Approved
- Please allow this office two working days to schedule a reinspection. If you have any questions, contact Walt at 221-4090.

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

PERMIT NUMBER _____ DATE OF APPLICATION 11/14/90

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 Robert & Loretta Schulte Current Address 61 RADNIR CIRCLE GR. DTE FARMS MOH 45236

Telephone 1-313

General Contractor Don Anderson Const. Address 612 ORANGE AVE, D-12,

Telephone 407-744-9977 JUPITER FLA. 33457

Where Licensed MARTIN & PB COUNTIES License Number MC-00042 / U-14117

Plumbing Contractor Arrow Plumbing License Number CFL029692

Electrical Contractor Precision Electrical License Number 90508009 / ME00393

Roofing Contractor Don Anderson Const. License Number MC00042 / U-14117

A/C Contractor Professional A/C License Number 88520196

Describe the building or alterations 3/2 RESIDENTIAL

Name the street on which the building, its front building line and its front yard will face # 5 MIRIMAR DR. SOUTH SEWALLS POINT, STUART

Subdivision Sewalls Point Lot # 13 Block —

Building area (inside walls) 1929 # Garage, porch, carport area 795 #

Contract price (excluding carpet, land, appliances, landscaping) \$ 107,550.

Cost of permit \$ _____ Plans approved as submitted _____ as marked _____

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 fees are \$5 per \$1,000. of the cost of the building, plus \$50. each for plumbing, electric, a.c. and roof. For example a \$100,000. building x \$5. = \$500. plus \$200. (a.c., pl., el., roof) = \$700. cost of permit + \$365. 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). Owner-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).
- e. An interim proprietary and general service fee will be charged to defray costs to the Town on newly improved property prior to imposition of ad valorem taxes on such property. Building Department will compute charge at time of c.o..

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 _____

Approval by Building Inspector [Signature] Date 11/14/90

Approval by Building Commissioner _____ Date _____

Certificate of Occupancy issued _____ Date _____

NOTICE



Summarization of Mechanics' Lien Law

CONTRACTORS:

THIS NOTICE MUST BE GIVEN TO
PROPERTY OWNERS BEFORE CONSTRUCTION BEGINS.

PROPERTY OWNERS:

READ THIS STATEMENT CAREFULLY. YOUR FAILURE TO COMPLY WITH THE
MECHANICS' LIEN LAW MAY RESULT IN A LIEN BEING FILED AGAINST YOUR
PROPERTY AND MAY RESULT IN YOU PAYING TWICE FOR BUILDING IMPROVEMENTS.

The Florida Department of Agriculture and Consumer Services is required by Florida law (Section 713.135, Florida Statutes) to supply issuing authorities with a printed statement that ... "The right, title, and interest of the person who has contracted for the improvement may be subject to attachment under the Mechanics' Lien Law." Florida law also requires the issuing authority to provide such information to any applicant who applies for a building permit, as well as to the owner of the real property upon which improvements are to be constructed.

The Mechanics' Lien Law (Chapter 713, Part I, Florida Statutes) provides a method by which a contractor, subcontractor, laborer, building material supplier, architect, landscape architect, interior designer, engineer, or land surveyor may claim a lien on real property on which they have done work or to which they have furnished materials. If the lien is not satisfied, your property may be sold to pay the lien.

WHAT IS IT?

A "lien" is a charge or encumbrance on real property (land that is improved and the improvements thereon, including fixtures) which must be satisfied by the property owner to ensure clear title.

"Attachment" means that if a court finds a claim of lien valid, the owners' property may be seized and sold to satisfy the lien if it is not voluntarily paid.

A "Notice of Commencement" is a notice which is filed with the Clerk of the Circuit Court in the county where the work will be performed. The notice should not be recorded before the construction or development mortgage is recorded, but must be recorded before actual construction begins. It contains detailed information on the property owner, financing arrangements, and other specifics regarding the construction project. If a performance bond is to be posted, a copy of the bond must be attached to the "Notice of Commencement".

THE OWNERS' RESPONSIBILITY

Before any construction begins, and after the construction mortgage has been recorded, the owner should take the following steps:

1. At the time application is made for a building permit, a "Notice of Commencement" form may be obtained from an office supply store

CONSTRUCTION/PURCHASE AGREEMENT

This Agreement is entered into this 22 day of Oct., 1990 between DON ANDERSON CONSTRUCTION, INC., (hereinafter referred to as "CONTRACTOR") and Robert & Loretta Schulte

(hereinafter referred to as "PURCHASER/OWNER"), who's current address is: 61 Radnor Cir. GR. PTE. FARMS - Grosse Pointe Farms Mich. 48236 PHONE # 313-885-3286 Michigan

Daughter 407 391-9521 Al & Peg Raden

The CONTRACTOR and PURCHASER/OWNER in consideration of the mutual covenants of this agreement and other good and valuable consideration agree as follows:

ARTICLE 1 - WORK AND LOCATION

CONTRACTOR shall complete all work in accordance with the contract documents for the construction of a single family residential home as per the Sunset (revised) model said construction to be completed on the real property located in Martin County, Florida more particularly described as: Lot 13 South Sewalls Point
5 Miramar Dr South Sewalls Point, Stuart, Fl 33996

ARTICLE 2 - CONTRACT DOCUMENTS

The contract documents which comprise the entire Agreement between the parties are attached to this Agreement and made a part hereof by reference and consist of the following:

- (a) This Agreement pages 1 through 4.
- (b) General Conditions pages 1 through 3.
- (c) Specifications attached to this Agreement as Exhibit "A".
- (d) ~~Real estate purchase contract attached hereto as Exhibit C~~
- (e) Any addendum or changes to this Agreement.

ARTICLE 3 - COSTS OF CONSTRUCTION

For completion of the work, the PURCHASER/OWNER agrees to pay the CONTRACTOR the sum of \$ 121,100.00. Payment of the contract sum will be paid as follows:

- This total includes all items listed on page 9 & 10 of contract.
- (a) Base price for work and materials for construction of Sunset (revised). \$ 115,500.00
 - (b) Changes and extras chosen by the PURCHASER/OWNER in writing \$ 1,600.00
 - (c) Costs of lot clearing and fill (estimate) \$ 4,000.00
- Total cost of Construction \$ 121,100.00

ARTICLE 4 - PAYMENT PROCEDURES

The PURCHASER/OWNER shall pay the CONTRACTOR progress payments as follows:

1
AS

A. \$ 3,000.00 upon execution of this Agreement.

B. For cash transactions, all payments shall be made by cash or cashiers check in accordance with the draw schedule attached hereto and made a part hereof by reference as Exhibit "D".

C. In the event payment by the PURCHASER/OWNER under this contract is being made through a construction or other institutional loan, all payments shall be made in accordance with the draw schedule of the financial institution providing financing to the PURCHASER/OWNER. This contract is contingent upon approval of such draw schedule by the contractor. The financial institution's draw schedule shall be attached hereto and made a part hereof by reference as Exhibit "E".

ARTICLE 5 - CONTRACT TIME

All construction work under this contract shall be commenced within 10 days of receipt of all necessary building permits and shall be completed within 120 days from commencement unless the contract time is extended under other provisions of this contract. If this contract is contingent upon approval of financing for the PURCHASER/OWNER, then the PURCHASER/OWNER understands and agrees that no work shall be commenced until the loan commitment is issued. This contract ~~is~~ not contingent upon the PURCHASER/OWNER obtaining financing. If this contract is contingent upon financing, the PURCHASER/OWNER agrees to file an application immediately upon executing this contract and to cooperate in good faith with the lending institution including providing said institution with all necessary documents and information for issuance of a financing commitment.

ARTICLE 6 - INSURANCE

A. Prior to starting work, the CONTRACTOR shall obtain the necessary insurance to protect it, its employees and agents from claims under worker or workmens compensation acts and other employee acts, claims for damages because of bodily injury, including death, and for claims or damages other than to the work its self, to the property which may arise out of or result from the CONTRACTOR's operations under this contract, whether such operations be by its self or by any subcontractor or anyone directly or indirectly employed by any of them.

B. Prior to commencement of the work under this contract, the PURCHASER/OWNER agrees to purchase a liability insurance policy with the CONTRACTOR named as an additional insured, to provide coverage against fire, vandalism, theft, personal injury or property damage. The PURCHASER/OWNER shall provide the CONTRACTOR with a certificate of said insurance prior to commencement of the work under this contract. Should the PURCHASER/OWNER fail to obtain said insurance, then the CONTRACTOR may obtain said insurance and shall be reimbursed by the PURCHASER/OWNER within seven (7) days from the date the PURCHASER/OWNER is billed for same.

ARTICLE 7 - LOT PREPARATION

PURCHASER/OWNER authorizes the CONTRACTOR to order all necessary lot preparation including but not limited to clearing, grading and fill. In the event the cost of clearing, grading, or fill is in excess of \$ 4,000.00, the PURCHASER/OWNER agrees to execute a change order for payment of such additional services within seven (7) days from receipt of the bill for such services. The PURCHASER/OWNER understands

that the CONTRACTOR does not warrant the underlying soil conditions of the property. In the event that the CONTRACTOR or a licensed engineer deems the soil conditions unsatisfactory or unsuitable, the PURCHASER/OWNER agrees to pay the CONTRACTOR all costs for correction of said conditions.

ARTICLE 8 - FINANCING COSTS AND INTEREST

If this contract is contingent upon financing, the PURCHASER/OWNER understands and agrees that all financing costs and interest for such financing shall be paid by the PURCHASER/OWNER as required by said lending institution.

ARTICLE 9 - REFUND - TERMINATION

In the event the PURCHASER/OWNER is unable to obtain financing within forty-five (45) days from execution of this Agreement, then all monies received by the CONTRACTOR from the PURCHASER/OWNER shall be refunded except those costs incurred by the CONTRACTOR. The PURCHASER/OWNER may terminate this Agreement at any time prior to the issuance of a building permit, however, if the Agreement is terminated by the PURCHASER/OWNER for any reason other than failure to obtain financing, then the CONTRACTOR shall retain all amounts paid by the PURCHASER/OWNER as liquidated damages.

ARTICLE 10 - MISCELLANEOUS

10.1 Terms used in this Agreement which are defined in Article I of the General Conditions will have the meanings indicated in the General Conditions.

10.2 No assignment by a party hereto of any rights under or interest in the Contract Documents will be binding on another party hereto without the written consent of the party sought to be bound; and specifically but without limitation of monies that may become due and moneys that are due may not be assigned without such consent (except to the extent that the effect of this restriction may be limited by law), and unless specifically stated to the contrary in any written consent to an assignment, no assignment will release or discharge the assignor from any duty or responsibility under the terms of the Contract Documents.

10.3 PURCHASER/OWNER and CONTRACTOR each binds itself, its partners, successors, assigns and legal representatives to the other party hereto, its partners, successors, assigns and legal representatives in respect to all covenants, agreements and obligations contained in the Contract Documents.

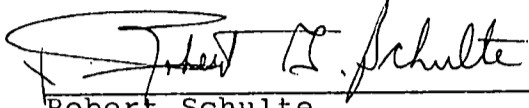
10.4 Should any single provision of this agreement found by court of competent jurisdiction to be unenforceable, the remaining terms and conditions of this Agreement shall remain in full force and effect as if the unenforceable provision had not been included therein.

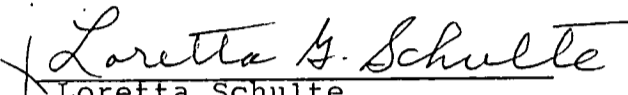
10.5 The PURCHASER/OWNER understands and agree that they will not visit the construction site between the hours of 6:30 a.m. to 4:30 p.m. while construction is ongoing.

ARTICLE 11 - ATTORNEY FEES

Should litigation be necessary for the enforcement of this Agreement, the prevailing party shall be entitled to reasonable costs and attorneys fees, including attorneys' fees and costs for any appellate proceedings associated with such action.

By 
DON ANDERSON CONSTRUCTION,
INC.


Robert Schulte


Loretta Schulte

CONTRACT Price	115,550.-
- CARPETING	3,300.-
- APPLIANCES	2,500.-
- landscaping & Sod	2,200.-
	<u>\$107,550.-</u>

537. ⁷⁵	Sq. Ft. rate
27.24	radon
836.-	impact
200.-	Trades

Tree PMT.

Deed



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER _____ HOME PHONE _____
 NAME OF APPLICANT _____ WORK PHONE _____
 MAILING ADDRESS OF APPLICANT _____
 _____ ZIP CODE _____

LOT 13 BLOCK _____ SUBDIVISION MIRAMAR
 IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION
 PLAT BOOK 3 PAGE 111 DATE SUBDIVIDED 3/59/90
 RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3
 LOT SIZE 15,000 FT² HEATED OR COOLED AREA OF HOME _____ FT²
 COMMERCIAL: TYPE OF BUSINESS PROPOSED _____
 BUILDING SIZE _____ 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

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

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

ISSUED BY: _____ DATE _____
 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) _____ 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

GENERAL CONDITIONS

ARTICLE I - DEFINITIONS:

Wherever used in these General Conditions or in the other contract documents, the following terms have the meanings indicated which are applicable to both the singular and plural thereof:

Change Order - A written order to the CONTRACTOR signed by the PURCHASER/OWNER, or its authorized representative, authorizing an addition, deletion or revision in the work, or an adjustment in the contract sum or the contract time issued after the effective date of the Agreement.

Modification - (A) A written amendment of the contract documents signed by both parties; (B) a change order. A modification may only be issued after the effective date of the Agreement.

ARTICLE II - CONTRACTOR'S RESPONSIBILITIES:

A. The CONTRACTOR shall supervise and direct the work competently and efficiently, devoting such attention thereto and applying such skills and expertise as may be necessary to perform the work in accordance with the contract documents. The CONTRACTOR shall be solely responsible for the means, methods, techniques and procedures of construction. The CONTRACTOR shall be responsible to see that finished work complies accurately with the contract documents and the building codes adopted by Martin County.

B. The CONTRACTOR shall provide competent, suitably qualified personnel to lay out the work and perform construction as required by the contract documents. The CONTRACTOR shall at all times maintain good discipline and order at the site.

C. The CONTRACTOR shall furnish all materials, equipment, labor, transportation, construction equipment, machinery, tools, appliances, fuel, and other facilities and incidentals necessary for the execution and completion of the work.

D. Whenever materials or equipment are specified or described in the drawings or specifications by using the name of a proprietary item, or the name of a particular manufacturer, fabricator, supplier or distributor, the naming of the item is intended to establish the type, function and quality required. Any change of materials or equipment specified or described in the drawings or specifications, shall be changed only upon approval by the parties to this Agreement.

E. CONTRACTOR shall pay all sales, consumer, use and other similar taxes required to be paid by him in accordance with the law at the place of the project.

F. During the progress of the work, the CONTRACTOR shall keep the premises free from accumulations of waste materials, rubbish and other debris resulting from the work. At the completion of the work, the CONTRACTOR shall remove all waste materials, rubbish and debris from and about the premises, as well as all tools, appliances, construction equipment and machinery, surplus materials and machinery, surplus materials,

(5)
[Handwritten signature]

and shall leave the site clean and ready for occupancy by the PURCHASER/OWNER.

ARTICLE III - SAFETY:

A. The CONTRACTOR shall be responsible for initiating, maintaining and supervising all safety precautions and programs in connection with the work. The CONTRACTOR shall take all necessary precautions for the safety of, and shall provide the necessary protection to prevent damage, injury or loss to: (a) all employees on the work, and other persons who may be affected thereby; (b) and all the work and all materials or equipment to be incorporated therein, whether in storage on or off the site.

B. The CONTRACTOR shall comply with all applicable laws, ordinances, rules, regulations and orders of any public body having jurisdiction for the safety of persons or property or to protect them from damage, injury or loss; and shall erect and maintain all necessary safeguards for such safety and protection.

ARTICLE IV - WARRANTY AND GUARANTEE:

A. The CONTRACTOR warrants and guarantees to the PURCHASER/OWNER that all work will be done in accordance with the contract documents and the building codes adopted by Martin County. Provisions of this Article apply to work done by subcontractors as well as work by direct employees of the CONTRACTOR.

B. The CONTRACTOR warrants and guarantees all workmanship and materials for a period of one (1) year from the date of the completion of construction.

C. The CONTRACTOR agrees to provide the PURCHASER/OWNER with a ten (10) year Home Owners Warranty issued by Home Owners Warranty Corporation. This warranty is strictly limited to the terms and conditions of said warranty insurance contract. The PURCHASER/OWNER understands and agrees that DON ANDERSON CONSTRUCTION, INC. only warrants and guarantees workmanship and materials for one (1) year from the date of completion of the contract and that the PURCHASER/OWNER will look to the Home Owners Warranty Corporation only pursuant to the contract policy after one (1) year from the date of completion of construction. The provisions of this paragraph shall survive the closing of this transaction.

ARTICLE V - DELAYS

If the CONTRACTOR is delayed at any time during the progress of the work by any act or neglect of the PURCHASER/OWNER or by any separate contractor employed by the PURCHASER/OWNER, or by changes ordered in the work, or by labor disputes, fire, unusual delay in transportation, adverse weather conditions not reasonably anticipated, unavoidable casualties, or any causes beyond the CONTRACTOR'S control, then the contract time shall be extended by such reasonable time as is necessary to complete the contract.

ARTICLE VI - OCCUPANCY

The PURCHASER/OWNER shall not take occupancy of the property until such time as a certificate of occupancy has been



issued by appropriate governmental agency and the CONTRACTOR has been paid in full for all services rendered. The PURCHASER/OWNER making final payment or taking occupancy of the premises shall constitute a waiver of all claims by the PURCHASER/OWNER except those arising from the terms and conditions of those warranties included in this contract.

ARTICLE VII - CHANGES IN THE WORK

Any changes in the work, adjustment in the contract sum or contract time shall be in writing and shall be signed by the parties to this contract. Should the PURCHASER/OWNER request a change in the work without executing a written change order, and the CONTRACTOR proceeds to complete said work, then the PURCHASER/OWNER agrees to pay the CONTRACTOR cost of such completion of additional work.

ARTICLE VIII - PLANS

The Parties understand and agree that all plans for construction are and shall remain the property of DON ANDERSON CONSTRUCTION, INC. and shall not be released for use by anyone without written permission of DON ANDERSON CONSTRUCTION, INC.

⑦ *JAS*

Standard Features

We believe we offer a superior home, constructed of the finest materials and products and built by the area's most outstanding craftsmen. Our psychology of offering all upgraded items as standard while keeping prices competitive with those who offer less is a benefit our existing and future homeowners appreciate.

Take some time to review our extensive list of standard features.

CONSTRUCTION FEATURES

- CBS
- ~~Frame construction with R-11 insulation in walls and R-19 in ceilings~~
 - Marblecrete stucco exterior ~~with stone or brick detailing and cedar trim~~ Banding
 - Energy efficient, aluminum frame single-hung windows (bronze w/screens) *White*
 - Tinted sliding glass patio doors
 - Steel exterior doors with dead bolt lock
 - Fungus resistant fiberglass shingles - *Deminisonal same AS model -*
 - ~~7200 square feet of Bahia sod~~ Full Lot Floratam sod
 - Custom elevation
 - Fully vented aluminum soffit
 - ~~xxx20xxx20~~ concrete parking pad 17x35 *walk to Front Door -*
 - ~~Well package and septic system~~ city water
 - Monolithic slab construction 4" min *Excluding Drive + walks*
 - 5/12 Roof pitch
 - Copper Wiring Throughout*
 - Copper Plumbing*
 - Ceramic Board In Showers*
 - Flat textured drywall ceilings
 - Chime doorbell system
 - High vaulted ceilings-per individual plan
 - Marble window sills
 - Decorator colonial trim and baseboards and 6 panel doors painted with semi-gloss white
 - Closets feature air-flow vinyl coated closet shelving
 - Walk-in closets feature air conditioning vent and florescent light
 - Deluxe carpet with and upgraded padding-total allowance of ~~\$12~~ ^{\$12.50} per sq. yd.
 - Quality wood louvered closet doors
 - Prewired for cable television and telephone (3 outlets of each)
 - Prewired for ceiling fans with switches (4) all rooms
 - Kitchen cabinets are wood or European mica
 - Full Kenmore kitchen appliance package including self-cleaning range, hood fan, dishwasher, refrigerator with icemaker and garbage disposal.
 - Ceramic tile bathrooms in wet areas, and entry and kitchen floors
 - Decorator elongated toilets with your choice of colors.
 - Moew Bath + Kitchen Fixtures - AS EN model*
 - GFI outlets and hose bibs (3 of each)
 - Garage is finished, complete with flourescent light and pull down attic stair
 - Automatic garage door opener with 2 transmitters
 - ~~\$500.00 Electrical allowance for choice of lights, fans, door chime and smoke detectors~~ *ALL LIGHTING FIXTURES BY OWNER*
 - 40 gallon hot water heater *Rhodd*
 - Energy efficient Rheem air conditioning unit

INTERIOR FEATURES

Our prices also include all permit and impact fees, architectural fees, soil testing energy calcs and fees and surveys.

Plus-additional space or modifications by individual quote. We're happy to make plan changes.

⑧ CBS

WBS

ADDENDUM TO CONTRACT DATED: Oct. 1990

BETWEEN: DON ANDERSON CONSTRUCTION, INC.

AND: Robert And Loretta Schulte

ITEM:

Sunset model (revised) Concrete block construction

1947 sqft Living area

440 sqft Garage

290 sqft Screened porch

44 sqft Front porch

2721 sqft Total area

To include all standard features as in the Southwood model &

As per plan

~~Round~~ ^{octagon} window in master toilet area

2ft Louvered closet door in den

French door off nook to screened porch

6 panel elite double doors into den

→ Lido locksets ~~ant. brass~~ ^{polished brass}

Laundry tub with base cabinet ^(Fiberglass Tub)

Mirror closet door in master ^(2 Sets)

Gutters

Copper flashing

Exterior door off 2nd bath (miami Slide)

City water & septic

48" cabinets in laundry room w/ upper cabinet

Vented range hood

~~Marblecrete-stucco-finish~~ ^{Painted SEE color chart}

Interior paint will be Benjamin Moore ^{Flat Enamel + Door + Trim In Semi Gloss}

flood lights on front like model

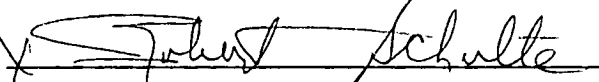
Desk unit in kitchen as per plan

Stanley door opener 1/2 hp chain

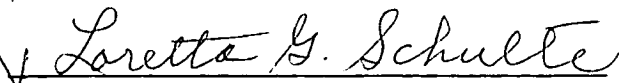
Fold down ironing board in utility room

Merillat cabinets , pickled w/almond knobs, base lazy susan corner cabinet, cutting board knife tray ,& cutlery tray

Shower in 2nd bath with chrome enclosure

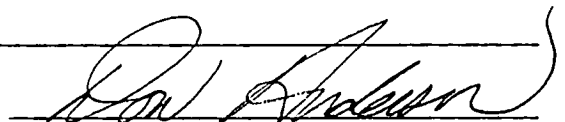


BUYER




BUYER





DON ANDERSON



WITNESS

ADDENDUM TO CONTRACT DATED: 10/22/90

BETWEEN: DON ANDERSON CONSTRUCTION, INC.

AND: Robert and Loretta Schulte

ITEM:

Counter top Wilsonart Mauve Mist D11-13

Sealer in all grout

Install water filter under Kitchen sink supplied by owner

Almond appliances Kenmore with slide by side like model

Garbage disposal 1/2 hp

Credit on lighting allowance \$500 owner will supply

House number (5)

Double front door (steel) with clear small square window

Built in ironing board

Sub Total 116500.00

Rebate of \$ 1000.00 by DON ANDERSON

Total \$ 115500.00

Irrigation system on City Water System

1600.00

\$ 117,100.00

ADD 23 windows in GAR.

150.00

TOWEL RACKS MUST BE CLEAR NOT TINTED

Ironing Board from Cupress lighting clear finish

Robert Schulte

BUYER

Loretta G. Schulte

BUYER

10

DON ANDERSON

William [Signature]

WITNESS

Total 121,100.00

10% Down 12,110.00

\$108,990-

EXHIBIT "D"

Completion of concrete slab (20%)	\$	<u>21798</u>
When the roof is dried in (20%)	\$	<u>21798</u>
Upon completion of A/C, electrical and plumbing rough in (20%)	\$	<u>21798</u>
Upon completion of drywall (10%)	\$	<u>10899</u>
Upon completion of trim and cabinets (20%)	\$	<u>21798</u>
Upon final completion, remaining balance of contract price	\$	<u>10899</u>

[Signature]
Buyer

10/22/90
Date

[Signature]
Buyer

Date

[Signature]
Don Anderson, President

10/22/90
Date

10% Down 12,110.00
 Plans 500.00
 Permits 2500.00

Balance of Deposit \$9110.00

(11) [Signature]

[Signature]

FRASER ENGINEERING AND TESTING, INC.

220 HIBISCUS STREET • JUPITER, FLORIDA 33458

JUPITER (407) 746-7698
 DEERFIELD (305) 698-6155
 DELRAY (407) 265-1211
 STUART (407) 283-7711
 FT. PIERCE 1-800-233-9011

Report
 of
 DENSITY OF SOIL IN PLACE
 ASTM D2922

Client Don Anderson Construction

Date November 12, 1990

Contractor Client

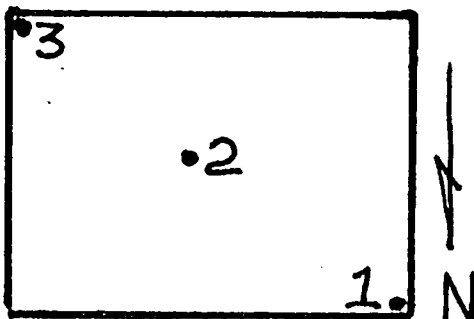
Site Lot 13, miramar Road
 Sewell's Point S/D

FET #J-4381

PERMIT # _____

Test No.	Location	Elevation	In Place Dry Density	Moisture Density Relationship		Percent Compaction
				Test No.	Max Dry Density	
4381	Map Location #1	0 - 1'	104.0	4381	106.0	98.1
	Map Location #1	1 - 2'	103.7		106.0	97.8
	Map Location #2	0 - 1'	104.2		106.0	98.3
	Map Location #2	1 - 1½'	104.1		106.0	98.2
	Map Location #3	0 - 1'	105.1		108.3	97.0
	Map Location #3	1 - 2'	105.8		108.3	97.7
All elevations below slab grade.						

Copies Client - 2



Respectfully submitted,

ALEXANDER H. FRASER, P.E.

FRASER ENGINEERING AND TESTING, INC.

220 HIBISCUS STREET • JUPITER, FLORIDA 33458

JUPITER (407) 744-7698
 DEERFIELD (305) 698-6155
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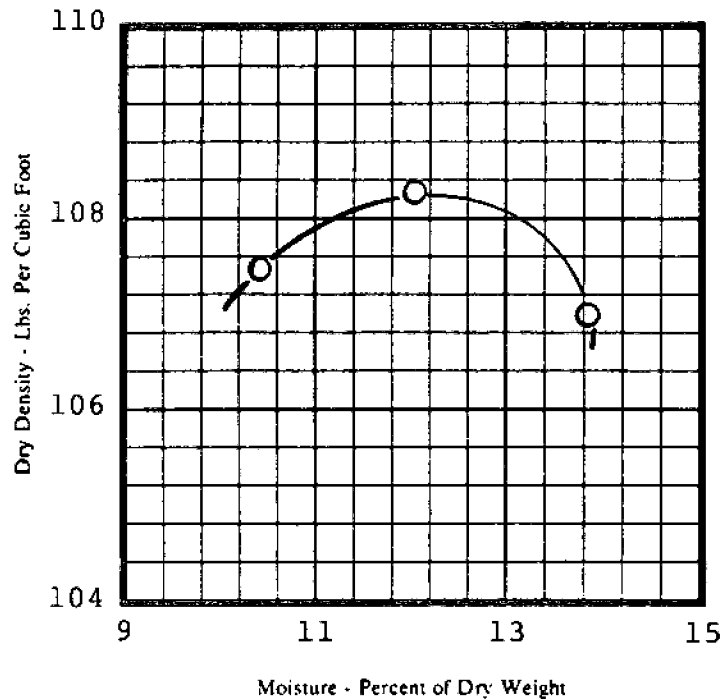
Report
 of
MOISTURE DENSITY RELATIONSHIP
 ASTM 1557-70

Client Don Anderson

Date November 12, 1990

Contractor Client

Site Lot 13, Miramar Road
 Sewell's Point S/D



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
4381	A	Composite	12.0	108.3	Brown Fine Sand

Copies Client - 2

Respectfully submitted,

ALEXANDER H. FRASER, P. E.

FRASER ENGINEERING AND TESTING, INC.

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 DEERFIELD (305) 698-6155
 DELRAY (407) 263-1211
 STUART (407) 283-7711
 FT. PIERCE 1-800-233-9011

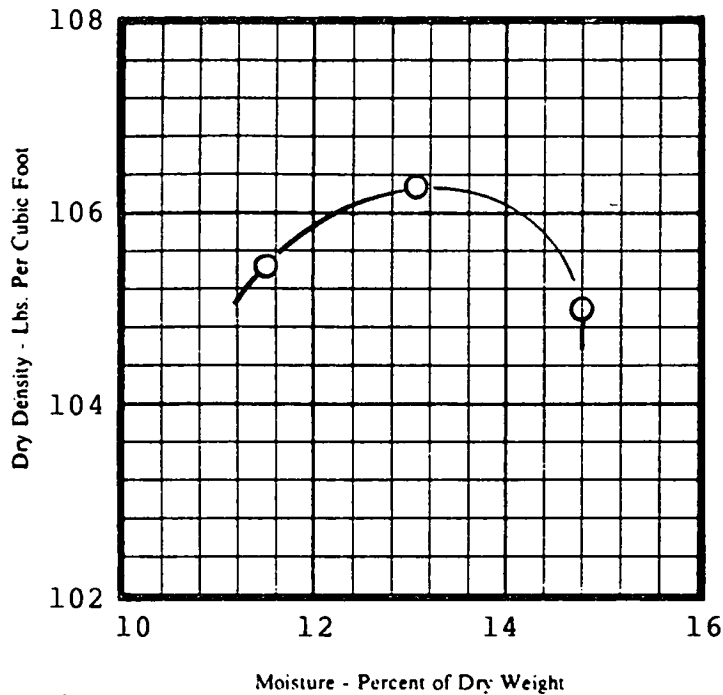
Report
 of
MOISTURE DENSITY RELATIONSHIP
 ASTM 1557-70

Client Don Anderson

Date November 12, 1990

Contractor Client

Site Lot 13, Miramar Road
 Sewell's Point S/D



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
4381	A	Composite	13.1	106.0	Tan Fine Sand

Copies Client - 2

Respectfully submitted,

ALEXANDER H. FRASER, P. E.



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER _____ HOME PHONE _____
NAME OF APPLICANT _____ WORK PHONE _____
MAILING ADDRESS OF APPLICANT _____
ZIP CODE _____

LOT 13 BLOCK _____ SUBDIVISION MIRAMAR
IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION
PLAT BOOK 3 PAGE 111 DATE SUBDIVIDED 3/59/90
RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3
LOT SIZE 15,000 FT² HEATED OR COOLED AREA OF HOME _____ FT²
COMMERCIAL: TYPE OF BUSINESS PROPOSED _____
BUILDING SIZE _____ 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

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

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

ISSUED BY: _____ DATE _____
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) _____ 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.
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- (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 _____

LEGAL DESCRIPTION _____

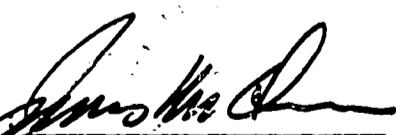
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1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? NO
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6. IS THERE A GRAVITY SEWER LINE OR LIFT STATION WITHIN 100 FEET OF THE PROPOSED LOT? NO
7. IS THERE 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 900 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 7.54 NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION _____ NGVD SHOW LOCATION ON PLOT PLAN.
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2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? YES IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING? 8.0 NGVD.

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

CERTIFIED BY 
 FL. PROFESSIONAL NO. 1652
 DATE NOV 2 1990 JOB NO. 90-225

This Warranty Deed Made and executed the 5th day of December A. D. 19 69 by
SEWALL'S POINT ESTATES, INC.

a corporation existing under the laws of Florida and having its principal place of
business at Sewall's Point, Jensen Beach, Florida 33457
hereinafter called the grantor, to

ROBERT G. SCHULTE and LORETTA G. SCHULTE, his wife,

whose post-office address is: 51 Gardner Circle
Grosse Pointe Farms, Michigan 48236
hereinafter called the grantees

(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, by these presents does grant, bargain, sell,
alien, remise, release, convey and confirm unto the grantees, all that certain land situate in Martin
County, Florida, viz:

Lot 13, MIRAMAR, according to plat thereof appearing in
Plat Book 3, page 111, Martin County, Florida, public records; subject
to restrictive covenants recorded in O. R. Book 24, page 517, on May 1,
1959, public records of Martin County, Florida

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 grantees that it is lawfully seized of said land in fee
simple; that it has good right and lawful authority to sell and convey said land; that it hereby fully war-
rants 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 subsequent to Dec. 31, 1969

In Witness Whereof the grantor has caused these presents to
be executed in its name, and its corporate seal to be hereunto affixed, by its
proper officers thereunto duly authorized, the day and year first above written.

SEWALL'S POINT ESTATES, INC.

XXXXXX

XXXXX

Signed, sealed and delivered in the presence of:

Gertrude E. Kennedy
Loretta G. Schulte

By: *Gertrude E. Kennedy*
Gertrude E. Kennedy
formerly Gertrude E. Kennedy

STATE OF FLORIDA
COUNTY OF MARTIN

I HEREBY CERTIFY that on this day, before me an officer duly authorized in the State and County aforesaid, to take acknowledgments,
personally appeared Gertrude E. Kennedy, formerly Gertrude E. Kennedy

well known to me to be the she President XXX

in the foregoing deed, and that XXXXXXXX acknowledged executing the same in the presence of two subscribing witnesses freely and voluntarily
under authority duly vested in them by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

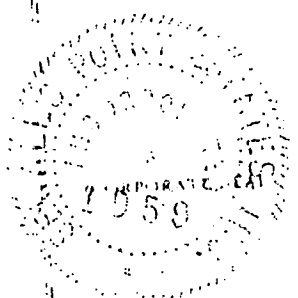
WITNESS my hand and official seal of the County and State last aforesaid this 5th day of December A. D. 19 69

XXXXXX of the corporation named as grantor

Walter T. Coyle
WALTER T. COYLE, CLERK OF PUBLIC RECORDS
MY COMMISSION EXPIRES APRIL 25, 1973
RECORDED THRU FRED W. DIESTELHORST

O. R. BOOK 278 PAGE 320

President, Sewall's Point Estates, Inc.
Jensen Beach, Florida 33457





APPLICANT _____

LEGAL DESCRIPTION _____

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

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

CERTIFIED BY [Signature]
FL. PROFESSIONAL NO. 1052
DATE NOV 1 1990 JOB NO. 90-225



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER _____ HOME PHONE _____
 NAME OF APPLICANT _____ WORK PHONE _____
 MAILING ADDRESS OF APPLICANT _____
 _____ ZIP CODE _____

LOT 13 BLOCK _____ SUBDIVISION MIRAMAR
 IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION
 PLAT BOOK 3 PAGE 111 DATE SUBDIVIDED 3/59/90
 RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3
 LOT SIZE 15,000 FT² HEATED OR COOLED AREA OF HOME _____ FT²
 COMMERCIAL: TYPE OF BUSINESS PROPOSED _____
 BUILDING SIZE _____ 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

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

SEPTIC TANK CAPACITY _____ GALLONS
 DRAINFIELD SIZE _____ SQUARE FEET
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 AND _____ FEET FROM SIDE PROPERTY LINES. EXCAVATION CAN NOT EXTEND MORE
 THAN FIVE FEET FROM APPROVED INSTALLATION AREA.

ISSUED BY: _____ DATE _____
 MARTIN COUNTY PUBLIC HEALTH UNIT

PLEASE NOTE:

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

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

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE



APPLICANT _____

LEGAL DESCRIPTION _____

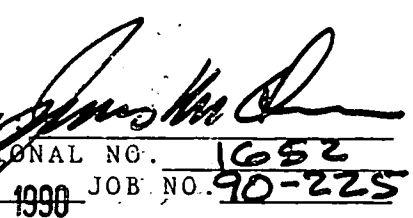
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NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OF ENGINEER.

CERTIFIED BY 
FL. PROFESSIONAL NO. 1652
DATE NOV 1 1990 JOB NO. 90-225

CC: file (envelope)
 owner (orig.)
 Varne
 L. Siviini
 file drawer

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/30/91

This is to request that a Certificate of Approval for Occupancy be issued to MR Robert Schulte
 For property built under Permit No. 2887 Dated 11/14/90 when completed in
 conformance with the Approved Plans.

Item		Signed	Approved by
1. LOT STAKES/SET BACKS			
2. TERMITE PROTECTION	<u>11/20/90</u>		
3. FOOTING - SLAB	<u>11/21/90</u>		
4. ROUGH PLUMBING	<u>11/20/90</u>		
5. ROUGH ELECTRIC	<u>12/20/90</u>		
6. LINTEL	<u>1/30/90</u>		
7. ROOF	<u>12/29/90</u>		
8. FRAMING	<u>12/20/90</u>		
9. INSULATION	<u>12/24/90</u>		
10. A/C DUCTS	<u>12/20/90</u>		
11. FINAL ELECTRIC	<u>1/30/91</u>		
12. FINAL PLUMBING	<u>1/30/91</u>		
13. FINAL CONSTRUCTION	<u>1/30/91</u>		

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Dale Brown 1-30-91
 date

Approved by Building Commissioner R. L. Chardawse 1-30-91
 date

Utilities notified F.P.L. 2/1/91 date

Original Copy sent to OWNER

(Keep carbon copy for Town files)

7763

RE-ROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9/12/05

BUILDING PERMIT NO. 7763

Building to be erected for SCHULTE

Type of Permit REROOF

Applied for by CODE RED ROOFERS (Contractor)

Building Fee _____

Subdivision MIRAMAR Lot 3 Block _____

Radon Fee _____

Address 5 MIRAMAR ROAD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

0138410090000013060000

Roofing Fee 120.00

Amount Paid 120.00 Check # 1291 Cash _____

Other Fees (_____) 1

Total Construction Cost \$ 13,000

TOTAL Fees 120.00

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

PERMIT

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

- ELECTRICAL
- ROOFING
- DEMOLITION
- TEMPORARY STRUCTURE
- HURRICANE SHUTTERS
- STEMWALL

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

INSPECTIONS

UNDERGROUND PLUMBING _____

UNDERGROUND MECHANICAL _____

STEMWALL FOOTING _____

SLAB _____

ROOF SHEATHING _____

TRUSS ENG/WINDOW/DOOR BUCKS _____

ROOF TIN TAG/METAL _____

PLUMBING ROUGH-IN _____

MECHANICAL ROUGH-IN _____

FRAMING _____

FINAL PLUMBING _____

FINAL MECHANICAL _____

FINAL ROOF _____

UNDERGROUND GAS _____

UNDERGROUND ELECTRICAL _____

FOOTING _____

TIE BEAM/COLUMNS _____

WALL SHEATHING _____

LATH _____

ROOF-IN-PROGRESS _____

ELECTRICAL ROUGH-IN _____

GAS ROUGH-IN _____

EARLY POWER RELEASE _____

FINAL ELECTRICAL _____

FINAL GAS _____

BUILDING FINAL _____

RECEIVED
7/12/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 9-12-05 Permit Number: _____

OWNER/TITLEHOLDER NAME: Loretta Schulte Phone (Day) 286-9824 (Fax) _____

Job Site Address: 5 Miramar St City: Sewalls Point State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Miramar Lot 3 Parcel Number: 01-38-41-009-000-00130-6

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

Description of Work To Be Done: RE-ROOF

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 13,000

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

(If no, fill out the Contractor & Subcontractor sections below)
(If yes, Owner Builder Affidavit must accompany application)

Is improvement cost 50% or more of Fair Market Value? YES NO

Method of Determining Fair Market Value: _____

CONTRACTOR/Company: Code Red Roofers Phone: 287-2829 Fax: 287-7763

Street: 1213 S.E. Dixie Cutoff Rd City: Stuart State: FL Zip: 34994

State Registration Number: CCC1326574 State Certification Number: _____ Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____
Mechanical: _____ State: _____ License Number: _____
Plumbing: _____ State: _____ License Number: _____
Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____

ENGINEER _____ Lic.#: _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____
Carport: _____ Total Under Roof 4000 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): 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)
Loretta B. Schulte
State of Florida, County of: Martin
This the 12 day of Sept, 2005
by _____ who is personally
known to me or produced
as identification. 5430-527-21-501-0

CONTRACTOR SIGNATURE (required)
Douglas & Roe
On State of Florida, County of: Martin
This the 12 day of Sept, 2005
by DOUGLAS & ROE who is personally
known to me or produced
as identification. _____

My Commission Expires: _____
NOTARY PUBLIC-STATE OF FLORIDA

NOTARY PUBLIC-STATE OF FLORIDA
My Commission Expires: _____

PERMIT APPLICATION _____ NOTARY PUBLIC-STATE OF FLORIDA
Seal Donna K. Malizia Seal Malizia
Commission # DD392371
Expires: FEB. 02, 2009
Bonded Thru Atlantic Bonding Co., Inc. Bonded Thru Atlantic Bonding Co., Inc.

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.

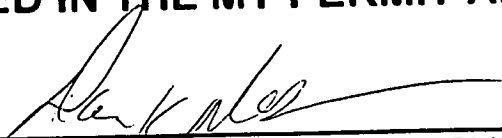
Application form must contain the following information:

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: _____

9-12-05

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):

Miramar Lot 3 01-38-41-009-000-00130-6

GENERAL DESCRIPTION OF IMPROVEMENT: PC-ROOF

OWNER: Loretta Schulte

ADDRESS: 5 Miramar St Seawalls Point, FL 34996

PHONE #: 386-9824 FAX #: _____

CONTRACTOR: Code Red Roofers

ADDRESS: 1213 S.E. Dixie Cut-off Rd Stuart, FL 34994

PHONE #: 287-2829 FAX #: 287-7763

SURETY COMPANY(IF ANY) _____

ADDRESS: _____ STATE OF FLORIDA
MARTIN COUNTY

PHONE # _____ FAX #: _____

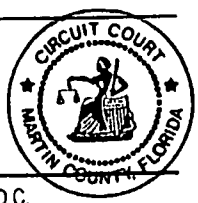
BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
MARSHA EWING, CLERK
BY: [Signature] D.C.
DATE: 9-12-05



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

NAME: _____

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(1XB), FLORIDA STATUTES.
PHONE #: _____ FAX #: _____

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

Loretta B. Schulte
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 12 DAY OF Sept.
2005 BY _____

[Signature]
NOTARY SIGNATURE

NOTARY PUBLIC-STATE OF FLORIDA
Donna K. Malizia
Commission # DD392371
Expires: FEB. 02, 2009
Bonded Thru Atlantic Bonding Co., Inc.

PERSONALLY KNOWN _____
PRODUCED ID _____
TYPE OF ID Drivers Lic 5430-527-21-501

INSTR # 1871531 OR BK 02059 PG 0484 RECD 09/12/2005 11:19:59 AM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK T Copus (asst. mgr.)

12/01/99

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
08/03/2005

PRODUCER (352)245-5455 FAX (352)245-9866
Clifford Insurance Center
9790 SE 160th Lane
Summerfield, FL 34491
Alicia R Clifford

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 Code Red Roofers, Inc.
1278 Jasmine Trace
Palm City, FL 34990

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: First Mercury Insurance 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'L TR	INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY	FMFL000548	03/21/2005	03/21/2006	EACH OCCURRENCE \$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GENL AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJ <input type="checkbox"/> LOC				DAMAGE TO RENTED PREMISES (EA ACC) \$ 50,000 MED EXP (Any One Person) \$ Excluded PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (EA accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
		GARAGE LIABILITY				ANY AUTO AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
		EXCESS/UMBRELLA LIABILITY				<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$ EACH OCCURRENCE \$ AGGREGATE \$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below OTHER WC STATUTORY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

Copy to Donna @ 772-287-7763

CERTIFICATE HOLDER

Sewalls Point Building Dept.
Attn: Laura
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 MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES.

AUTHORIZED REPRESENTATIVE

Donna K Clifford

ACORD 25 (2001/08) FAX: (772)220-4765

©ACORD CORPORATION 1988

ACORD <small>TM</small>		CERTIFICATE OF LIABILITY INSURANCE		Date 8/3/2005
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 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 <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	01/01/2005	01/01/2006	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:5%; text-align: center;">X</td> <td style="width:15%;">WC Statutory Limits</td> <td style="width:5%;"></td> <td style="width:15%;">OTH-ER</td> <td style="width:60%;"></td> </tr> <tr> <td></td> <td>E.L. Each Accident</td> <td></td> <td></td> <td style="text-align: right;">\$1000000</td> </tr> <tr> <td></td> <td>E.L. Disease - Ea Employee</td> <td></td> <td></td> <td style="text-align: right;">\$1000000</td> </tr> <tr> <td></td> <td>E.L. Disease - Policy Limits</td> <td></td> <td></td> <td style="text-align: right;">\$1000000</td> </tr> </table>	X	WC Statutory Limits		OTH-ER			E.L. Each Accident			\$1000000		E.L. Disease - Ea Employee			\$1000000		E.L. Disease - Policy Limits			\$1000000
X	WC Statutory Limits		OTH-ER																							
	E.L. Each Accident			\$1000000																						
	E.L. Disease - Ea Employee			\$1000000																						
	E.L. Disease - Policy Limits			\$1000000																						

Other 3686002
Code Red Roofers, 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: 3/14/2005
 COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF Code Red Roofers, Inc. FAX: 772-287-7763 & 772-220-4765 / ISSUE 4/04/05 (JJG) / REISSUE 08-03-05 (TD)

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

CERTIFICATE HOLDER SEWALL'S POINT BUILDING DEPT. ATTN: LAURA 1 SOUTH SEWALL'S POINT RD. SEWALL'S 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.
---	---

John A. Roman

C# 021517

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L05060800150

DATE	REGISTRATION NUMBER	LICENSE NBR
06/08/2005	040956349	CCC1326574

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

ROE, DOUGLAS EDWARD
 CODE RED ROOFERS INC
 1278 SW JASMINE TRACE
 PALM CITY FL 34990-8512

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

021517



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)

Owens Corning
One Owens Corning Parkway
Toledo, OH 43659

SCOPE:

This NOA is being issued under the applicable rules and regulations governing the use of construction materials. The documentation submitted has been reviewed by the BCCO and accepted by the Building Code and Product Review Committee to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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

This product is approved as described herein, and has been designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County or Florida Building Code.

DESCRIPTION: Oakridge PRO 40 AR

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 3.
The submitted documentation was reviewed by Frank Zuloaga, RRC

FILE COPY

TOWN OF SEWALL'S POINT

THESE PLANS HAVE BEEN

REVIEWED FOR CODE COMPLIANCE

DATE: 9/12/05

[Signature]

BUILDING OFFICIAL

NOA No: 01-127.08
Gene Simmons
Expiration Date: 07/19/06



Approval Date: 01/31/02

ROOFING SYSTEM APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles
Material: Laminate

1. Scope:

This renews a roofing system using Owens Corning Oakridge PRO 40 AR. Asphalt shingles manufactured by Owens Corning as described in this Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Oakridge PRO 40 AR	13 1/2" x 39 3/4"	PA 110	A heavy weight, fiberglass reinforced four tab asphalt shingle.

3. LIMITATIONS:

- 3.1. Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 3.2. Shall not be installed on roof mean heights in excess of 33 ft.

4. INSTALLATION:

- 4.1 Shingles shall be installed in compliance with Miami-Dade County Product Control Shingle Installation Procedure No. 115.
- 4.2 Flashing shall be in accordance with Section 9.3 Option "B" (step-flashings) of Miami-Dade County Product Control Shingle Installation Procedure No. 115.
- 4.3 The manufacturer shall provide clearly written application instructions.
- 4.4 Exposure and course layout shall be in compliance with Detail 'A', attached.
- 4.5 Nailing shall be in compliance with Detail 'B', attached.

5. LABELING:

- 5.1 Shingles shall be labeled with the Miami-Dade Logo or the wording "Miami-Dade County Product Control Approved".

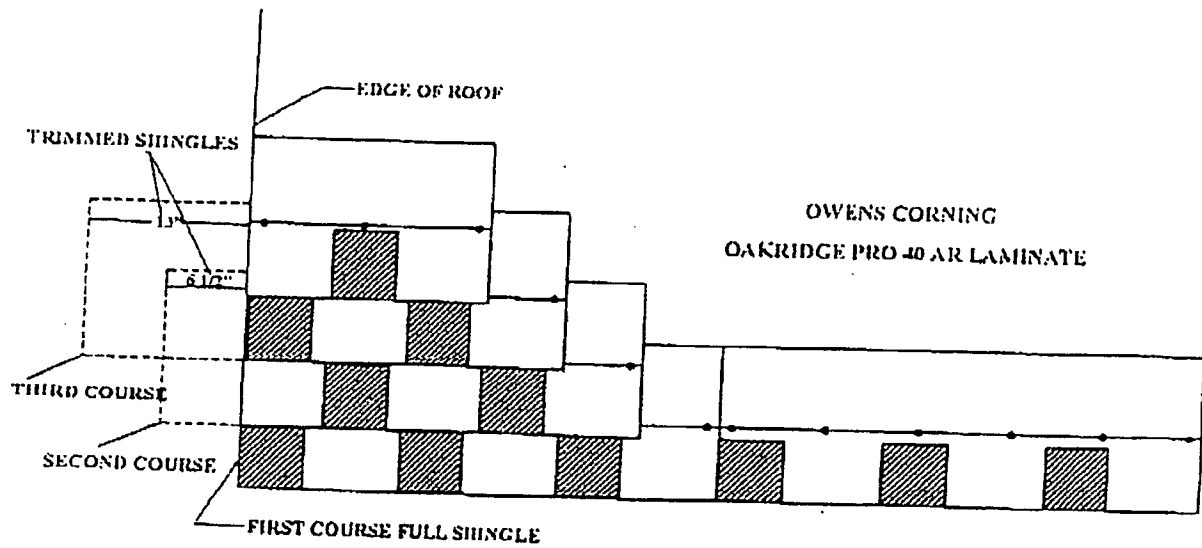
6. BUILDING PERMIT REQUIREMENTS:

- 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 document required by Building Official or the Applicable Code in order to properly evaluate the installation of this system.



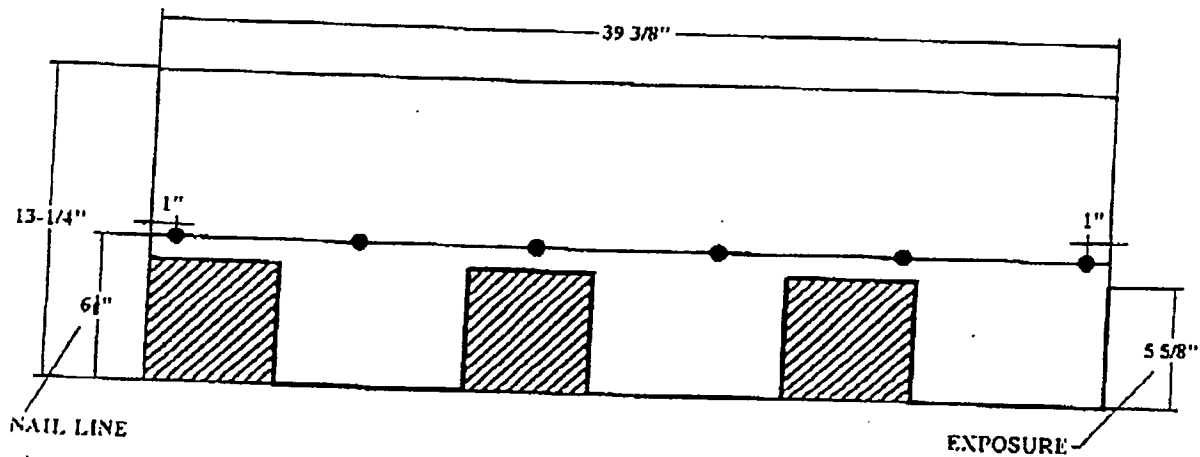
NOA No.: 01-1127-08
 Expiration Date: 07/19/06
 Approval Date: 01/31/02
 Page 2 of 3

DETAIL A



DETAIL B

OWENS CORNING
FASTENING PATTERN & PHYSICAL DIMENSIONS
OAKRIDGE PRO 40 AR LAMINATE



END OF THIS ACCEPTANCE



NOA No.: 01-1127.08
Expiration Date: 07/19/06
Approval Date: 01/31/02
Page 3 of 3

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/16, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7763	SEWELL	DRY IN	PASS	
1	5 MIRAMAR MODE RED	FIRST PLEASE		INSPECTOR: <i>OW</i>
6812	MADER	TEUSSENG	CXL	WILL RESCHEDULE
7	106 ABBIE COURT BUFORD CONST			INSPECTOR: <i>OW</i>
7221	CLEMENTS 11 W. HIGH POINT	SEWALL GAP PARTIAL	PASS	CENTER PORTION OF WALL
6	WILCO CONST			INSPECTOR: <i>OW</i>
6858	POTSDAM	FINAL A/C	—	NO ACCESS
11	50 RIO VISTA FLYNN'S A/C	C/OOT	MUST	RESCHEDULE INSPECTOR: <i>OW</i>
7605	CRANE	DRY-IN	PASS	
9	2 TIMOR PACIFIC ROOFING			INSPECTOR: <i>OW</i>
7464	YOUNG	FINAL SCREEN	PASS	CLOSE
4	40 N. RIVER RD SCREEN BUILDERS	Permit @ Garden Gate		INSPECTOR: <i>OW</i> <small>on east side of house</small>
7727	SLATER	PUMBINA PAW	PASS	
2	4 LAGOON ISLG CONNAY	EARLY AS POSS		INSPECTOR: <i>OW</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/26, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7338	MCCORMICK	UG ELEC	PASS	
7	59 B. RIVER RD	UG ALC	PASS	
	PINE ORCHARD			INSPECTOR: <i>[Signature]</i>
6781	SANGHRASIA	ADDN/REMODEL	PASS	CLOSE
1	20 S. HALICINDA	FINAL		
	ARTELA CONST			INSPECTOR: <i>[Signature]</i>
7390	GOLMAN	TRUSS ENA	FAIL	
4	4 SUMMER LA			
	OIB			INSPECTOR: <i>[Signature]</i>
7163	SCHULTE	FINAL ROOF	PASS	CLOSE
3	5 MIRAMAR			
	COE RED ROOFER			INSPECTOR: <i>[Signature]</i>
7138	WHALEN	ROUGH ELEC	PASS	
6	9 KNOWLES			
	LOYD JOHNSON			INSPECTOR: <i>[Signature]</i>
7712	WEBER	IN PROGRESS		
2	12 RIDGELAND	DM-1U	PASS	
	MARZO ROOFING			INSPECTOR: <i>[Signature]</i>
7217	ROSE	REPAIR SCREEN	PASS	CLOSE
5	4 INDIA WUCLER	FINAL		
	PIONEER SCREEN			INSPECTOR: <i>[Signature]</i>

OTHER:

TEMP POWER POLE GROUND.

10922

GAS TANK

&

LINES



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:	10922	DATE ISSUED:	7/3/2014
SCOPE OF WORK:	GAS TANK AND LINES		
CONTRACTOR:	ELITE GAS CONTRATORS		
PARCEL CONTROL NUMBER:	01384100900001306	SUBDIVISION	MIRAMAR LOT 13
CONSTRUCTION ADDRESS:	5 MIRAMAR ROAD		
OWNER NAME:	BYRNE		
QUALIFIER:	CHEYENNE ELLISON	CONTACT PHONE NUMBER:	772 220-9678

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM**

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	10922		
ADDRESS:	5 MIRAMAR ROAD		
DATE ISSUED:	7/3/2014	SCOPE OF WORK:	GAS TANK AND LINES

SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	\$	
---	--	----------------	----	--

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

ACCESSORY PERMIT	Declared Value:	\$	\$ 2,925.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 3.00	\$ 300.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 4.50
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 4.50
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	\$ 314.00

Pa 7-7-14
 CK-1337

Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 6/23/14

Permit Number: 10922

OWNER/LESSEE NAME: Alfred Byrne Phone (Day) _____ (Fax) _____
 Job Site Address: 5 Miramar Road City: Sewall's Point State: FL Zip: 34996
 Legal Description Miramar Lot 13 Parcel Control Number: 01-38-41-009-000-00130-6
 Fee Simple Holder Name: _____ Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Propane tank install to cooktop & BBQ

WILL OWNER BE THE CONTRACTOR?
 (If yes, Owner Builder questionnaire must accompany application)
 YES _____ NO X
Has a Zoning Variance ever been granted on this property?
 YES _____ (YEAR) _____ NO _____
 (Must include a copy of all variance approvals with application)

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 2925.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 _____ AE9 _____ AE8 _____ X _____
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Elite Gas Contractors Phone: (772) 220-9678 Fax: (772) 220-1829
 Qualifiers name: Cheyenne Ellison Street: 2130 SW Poma Drive City: Palm City State: FL Zip: 34990
 State License Number: 18361 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Cheyenne Ellison Phone Number: (772) 215-2110
 DESIGN PROFESSIONAL: _____ Fla. License# _____

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

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

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

WARNINGS TO OWNERS AND CONTRACTORS:

1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. A NOTICE OF COMMENCEMENT MUST BE RECORDED AND POSTED ON THE JOB SITE BEFORE THE FIRST INSPECTION.
2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT. THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 50-95.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE:
 X [Signature]
 State of Florida, County of: MARTIN
 On This the 20th day of JUNE, 2014
 by ALFRED BYRNE who is personally known to me or produced FL DC
 As identification: [Signature] **ALYSSA ATKINSON**
 My Commission Expires: EXPIRES June 9, 2018

CONTRACTOR/LICENBEE NOTARIZED SIGNATURE:
 X [Signature]
 State of Florida, County of: MARTIN
 On This the 25th day of JUNE, 2014
 by CHEYENNE ELLISSON who is personally known to me or produced _____
 As identification: [Signature]
 My Commission Expires: 6/9/18

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL NOTIFICATION (FBC 105.3.4) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY!
 (407) 398-0153 FloridaNotaryService.com



CERTIFICATE OF LIABILITY INSURANCE

ELITG-1

OP ID: SN

DATE (MM/DD/YYYY)

12/30/13

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Stuart Insurance, Inc. 3070 S W Mapp Palm City, FL 34990 Rick Halcomb, CIC, ARM	Phone: 772-286-4334 Fax: 772-286-9389	CONTACT NAME: _____ PHONE (A/C, No, Ext): _____ E-MAIL ADDRESS: _____ FAX (A/C, No): _____													
	<table border="1"> <thead> <tr> <th>INSURER(S) AFFORDING COVERAGE</th> <th>NAIC #</th> </tr> </thead> <tbody> <tr> <td>INSURER A: United States Fire Ins. Co.</td> <td>21113</td> </tr> <tr> <td>INSURER B: Bridgefield Employers Ins. Co.</td> <td>10701</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> <tr> <td>INSURER F:</td> <td></td> </tr> </tbody> </table>		INSURER(S) AFFORDING COVERAGE	NAIC #	INSURER A: United States Fire Ins. Co.	21113	INSURER B: Bridgefield Employers Ins. Co.	10701	INSURER C:		INSURER D:		INSURER E:		INSURER F:
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INSURER E:															
INSURER F:															
INSURED Elite Gas Contractors Propane Services Inc C Michael Brown, Inc 2130 SW Poma Drive Palm City, FL 34990															

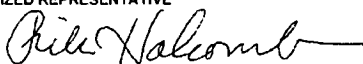
COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL SUBR INSR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	GENERAL LIABILITY		5068718856	11/27/13	11/27/14	EACH OCCURRENCE \$ 1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY					DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000
	<input type="checkbox"/> CLAIMS-MADE <input checked="" type="checkbox"/> OCCUR					MED EXP (Any one person) \$ 5,000
	GEN'L AGGREGATE LIMIT APPLIES PER:					PERSONAL & ADV INJURY \$ 1,000,000
	<input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC					GENERAL AGGREGATE \$ 2,000,000
						PRODUCTS - COMP/OP AGG \$ 2,000,000
						\$
A	AUTOMOBILE LIABILITY		5068718856	11/27/13	11/27/14	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input type="checkbox"/> ANY AUTO					BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (Per accident) \$
						\$
A	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR		5237069454	11/27/13	11/27/14	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE					AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DED <input type="checkbox"/> RETENTION \$					\$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY		83040370	01/01/14	01/01/15	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y <input type="checkbox"/> N				E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below	N/A				E.L. DISEASE - EA EMPLOYEE \$ 500,000
						E.L. DISEASE - POLICY LIMIT \$ 500,000

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

CERTIFICATE HOLDER**CANCELLATION**

TOWSP-1 Town of Sewalls Point 1 South Sewalls Point Road Sewalls Point, FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS. AUTHORIZED REPRESENTATIVE 
---	---

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Florida Department of Agriculture and Consumer Services
Bureau of Liquefied Petroleum Gas Inspection
P.O. Box 6700
Tallahassee, Florida 32399-6700

License Number: 18361

Business Mailing Address

PROPANE SERVICES, INC. DBA ELITE GAS CONTRACTORS
2130 SW POMA DR
PALM CITY, FL 34990-6615

Licensed Location Address

PROPANE SERVICES, INC. DBA ELITE GAS CONTRACTOR
2130 SW POMA DR
PALM CITY, FL 34990-6615

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.

IN THE EVENT OF AN OWNERSHIP CHANGE AT THIS BUSINESS LOCATION: This license may be transferred to any person, firm or corporation for the remainder of the current license year upon written request to the department by the original license holder. License transfers must be approved by the department. All licensing requirements must be met by the transferee and a transfer fee of \$50 will apply. To apply for a transfer, contact the Bureau of LP Gas Inspections at (850) 921-1600.

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 Inspection
P.O. Box 6700
Tallahassee, Florida 32399-6700

Cut Here



POST LICENSE
CONSPICUOUSLY

State of Florida
Department of Agriculture and Consumer Services

Division of Consumer Services
Bureau of Liquefied Petroleum Gas Inspection
(850) 921-1600
Tallahassee, Florida

License Number: 18361
Expiration Date: August 31, 2014
Date of Issue: September 1, 2013
License Fee: \$425.00
Type and Class: 0601


Liquefied Petroleum Gas License

CATEGORY I LP GAS DEALER

GOOD FOR ONE LOCATION ONLY
ANY CHANGE OF OWNERSHIP OR SALE OF THIS BUSINESS RENDERS THIS LICENSE INVALID

This license is issued under authority of Section 527.02, Florida Statutes, to:

PROPANE SERVICES, INC. DBA ELITE GAS CONTI
2130 SW POMA DR
PALM CITY, FL 34990-6615


ADAM H. PUTNAM
COMMISSIONER OF AGRICULTURE

2013-2014 MARTIN COUNTY ORIGINAL

BUSINESS TAX RECEIPT

HONORABLE RUTH PIETRUSZEWSKI CFC, TAX COLLECTOR
3485 S.E. WILCOUGHBY BLVD, STUART, FL 34994
(772) 289-5804

ACCOUNT 2013-249-0658 GEN
PHONE (772) 220-9678 FAX 420710
LOCATION
2730 SW POMA DR DE

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YEAR	00	2013	26-25
ADDITIONAL	00	00	00
ADDITIONAL	00	00	00
ADDITIONAL	00	00	00
TOTAL	00	00	00

PROpane SERVICES

PRIME GAS CONTRACTING
PROPERT SERVICES INC
21180Y CHEYENNE
2730 SW POMA DR
DEPT CITY FL 34990

07 AUG AUGUST 13

and please refer to

2013

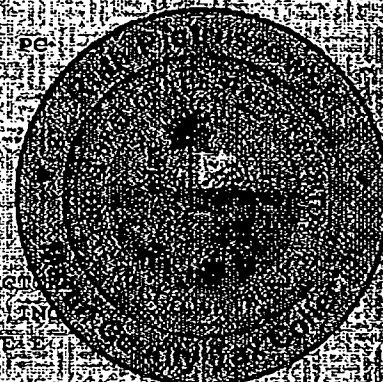
2012 30569-0001

26-25 PAID

THIS FORM BECOMES A RECEIPT ONLY WHEN VALIDATED BY RECEIPTING MACHINE

ANYONE DOING BUSINESS WITHOUT A VALID BUSINESS TAX RECEIPT IS SUBJECT TO A \$200 FINE IF NOT PAID BY OCT 1. A DELINQUENT PENALTY OF 10% FOR THE MONTH OF OCTOBER, PLUS A 5% PENALTY FOR EACH MONTH THEREAFTER UP TO 25% PLUS COLLECTION COSTS WILL APPLY.

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





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

GAS CHECKLIST
COMPLIANT TO 2010 FBC FUEL GAS CODE & NFPA 54 & 58

USE:

RESIDENTIAL: COMMERCIAL: _____

HOOK UP:

TANK METERED UTILITY GAS: _____ OTHER: _____

TANK SPECS:

SIZE: 120 GALS ABOVE GROUND: _____ UNDERGROUND:

TANK TYPE: D.O.T. _____ ASME: OTHER: _____

TANK DISTANCE: (MINIMUM)

SOURCE OF IGNITION: 10 FT. BUILDING OPENINGS: _____ FT. BUILDING: _____ FT.

PROPOSED SETBACKS FROM LOT LINE:

FRONT: 40 FT. SIDE 1: 10 FT. SIDE 2: 100 FT. REAR: 30 FT.

GAS SPECS: (SEE FBC/FUEL GAS TABLES 402)

NATURAL: _____ LP: OTHER: _____

GAS PRESSURE OF 10 psi AND PRESSURE DROP OF .05

BASED ON A .05 SPECIFIC GRAVITY GAS

PIPE/TUBING SPECS: (CHECK ALL THAT APPLY)

IRON _____ SCH. 40 _____ SEMI-RIGID _____ CSST _____ COPPER _____

POLYETHYLENE PLASTIC S. S.: _____ OTHER: _____

COMBUSTION AIR:

REQUIRED: YES: NO: _____

METHOD FOR SUPPLYING COMBUSTION AIR: _____

COMBUSTION AIR
 must be provided for all
 indoor fuel gas appliances
 Sect. M1701 - 3 FBC(FI)

WHO PROVIDED THE COMBUSTION AIR CALCS?

ARCHITECT/ENGINEER OF RECORD: _____ GAS COMPANY:

OTHER: _____

GAS APPLIANCE SPECS: (LIST APPLIANCE TYPE AND BTU)

APPLIANCE #1: Cooktop 60,000 BTU 1/2" *DIA. PIPE 30 FT.-LENGTH

APPLIANCE #2: Barbecue 40,000 BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #3: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #4: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #5: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

APPLIANCE #6: _____ BTU _____ *DIA. PIPE _____ FT.-LENGTH

(LENGTH BASED ON THE TOTAL PIPE LENGTH FROM THE GAS SOURCE TO THE APPLIANCE)

*THE ABOVE PIPE SIZES WERE TAKEN FROM 2010 FBC FUEL GAS TABLE NO. _____

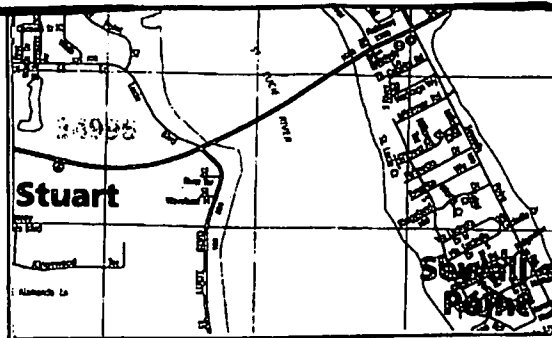
TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

LEGEND:

LB = LICENSED BUSINESS
 C.B.S. = CONCRETE BLOCK STRUCTURE
 A/C = AIR CONDITIONER
 R/W = RIGHT OF WAY
 W.P.P. = WOOD POWER POLE
 -O- = OVERHEAD ELECTRIC

BOUNDARY SURVEY

5 MIRAMAR ROAD
 STUART, FLORIDA 34998



LOCATION MAP: NOT TO SCALE

LEGAL DESCRIPTION:

LOT 13, MIRAMAR, ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT BOOK 3, PAGE 111, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

CERTIFICATIONS:

1. ALFRED J.T. BYRNE, JR.
2. USAA FEDERAL SAVINGS BANK, AND/OR THE SECRETARY OF VETERANS AFFAIRS, THEIR RESPECTIVE SUCCESSORS AND ASSIGNS, AS THEIR INTEREST MAY APPEAR.
3. FIRST AMERICAN TITLE INSURANCE COMPANY

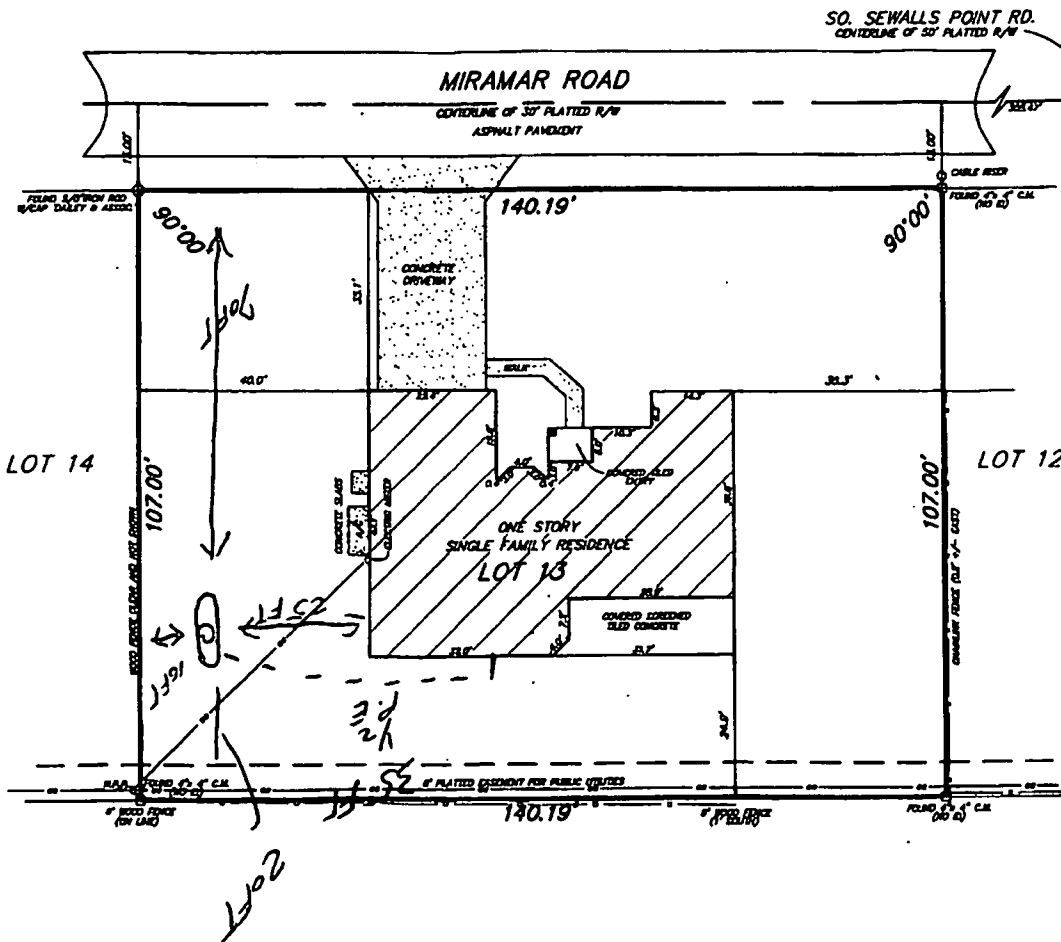
SURVEYOR'S NOTES:

1. NO ATTEMPT WAS MADE BY THIS FIRM TO LOCATE UNDERGROUND UTILITIES ON/OR ADJACENT TO THIS SITE. THE APPROXIMATE LOCATION OF ALL UTILITIES SHOWN HEREON WERE TAKEN FROM ASBUILT DRAWINGS AND/OR ON-SITE LOCATION AND SHOULD BE VERIFIED BEFORE CONSTRUCTION.
2. NO ATTEMPT WAS MADE BY THIS FIRM TO LOCATE UNDERGROUND FOOTINGS OF BUILDINGS OR FENCES ON OR ADJACENT TO THIS SITE.
3. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS AND/OR RIGHTS OF WAY OF RECORD EXCEPT AS SHOWN ON THE RECORD PLAT IF ANY.
4. SITE AREA: 15,000 SQUARE FEET.
5. FLOOD NOTE: BY GRAPHIC PLOTTING ONLY, THIS PROPERTY FALLS IN FLOOD ZONE "X" AND "AE" BASE EL. = 8.0', ACCORDING TO THE FLOOD INSURANCE RATE MAP NO. 13050C0154 F, DATED: OCTOBER 4, 2002. (NOTE: HOUSE APPEARS TO LIE IN FLOOD ZONE "X").
6. LEGAL DESCRIPTION FURNISHED BY CLIENT.
7. ALL BEARINGS AND DISTANCES SHOWN ARE PLAT AND MEASURED UNLESS OTHERWISE NOTED.
8. ADDITIONS OR DELETIONS TO SURVEY MAPS OR REPORTS BY OTHER THAN THE SIGNING PARTY OR PARTIES IS PROHIBITED WITHOUT WRITTEN CONSENT OF THE SIGNING PARTY OR PARTIES.

SURVEYOR'S CERTIFICATION:

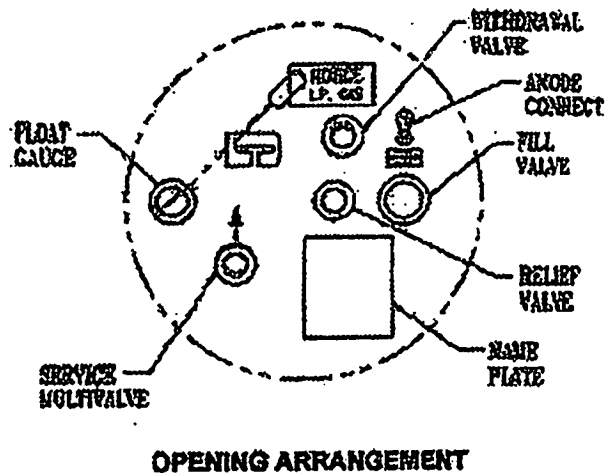
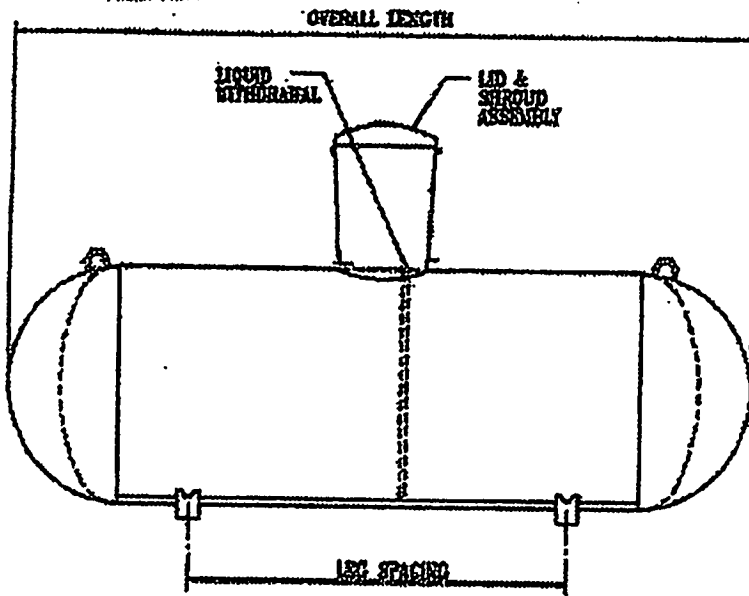
I HEREBY CERTIFY THAT THIS PLAT OF SURVEY WAS PREPARED UNDER MY RESPONSIBLE CHARGE AND MEETS THE MINIMUM TECHNICAL STANDARDS AS SET FORTH BY THE FLORIDA BOARD OF PROFESSIONAL LAND SURVEYORS AND MAPPERS IN CHAPTER 15-17, FLORIDA ADMINISTRATIVE CODE, AND THAT IT IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. THE MAP AND REPORT OR THE COPIES THEREOF ARE NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER. THE SURVEY DEPICTED HERE IS NOT COVERED BY PROFESSIONAL LIABILITY INSURANCE.

CRAIG D. WATSON
 PROFESSIONAL SURVEYOR & MAPPER
 NO. 5647 STATE OF FLORIDA



CRAIG D. WATSON, PROFESSIONAL SURVEYOR & MAPPER
 162 SW WALKING PATH, STUART, FLORIDA 34987
 PHONE # (772) 260-0249
 CRAIGWATSON@LIVE.COM
 LAND SURVEYING - CAD SERVICES

DRAWN	C.D.W.
CHECKED	C.D.W.
DATE (FIELD)	5-8-2014
SCALE	1" = 30'
LOT NUMBER	14-153
SHEET	1 of 1



Aboveground / Underground LPG Tank

General Specifications

Conforms to the latest edition and addenda of the ASME Code for Pressure Vessels, Section VIII Division I. Complies with NFPA 58 and is listed by Underwriters Laboratories, Inc.

All tanks are pre-purged and ready to be filled.

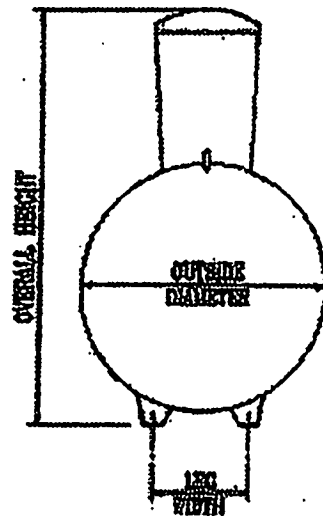
Rated at 250 psig from -200 degrees F. to 125 degrees F. All tanks may be evacuated to a full (14.7 in.) vacuum.

Please read and understand all warranty and installation instructions before installing the tank.

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.

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.

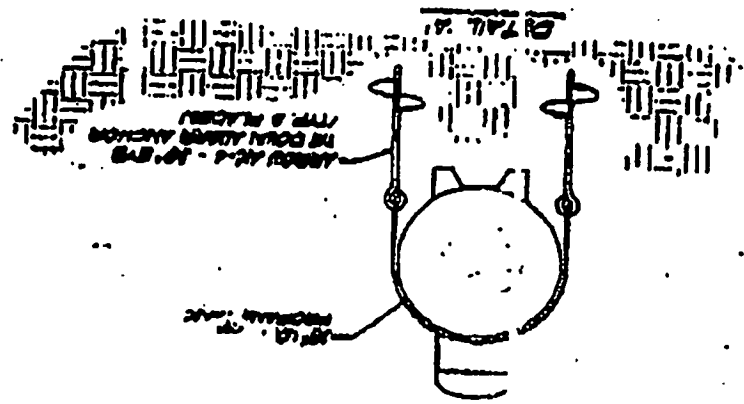
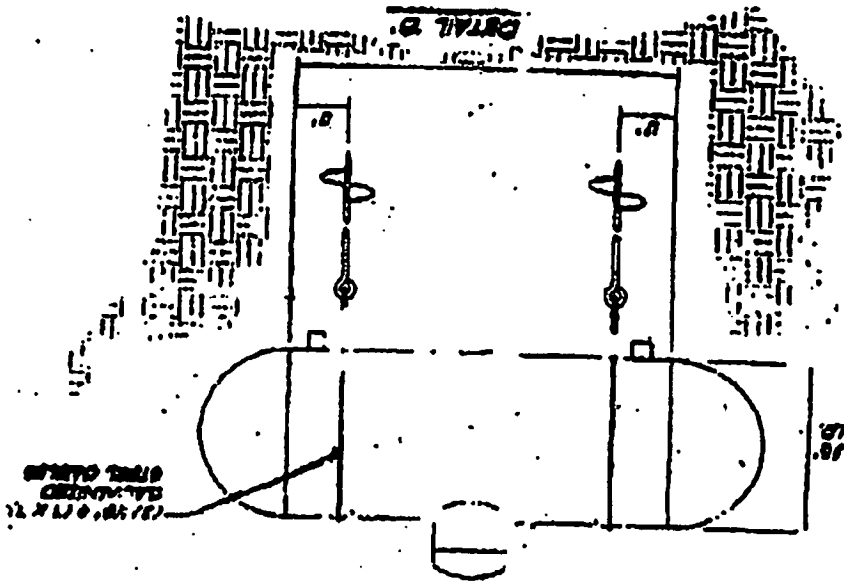
All vessel dimensions are approximate.



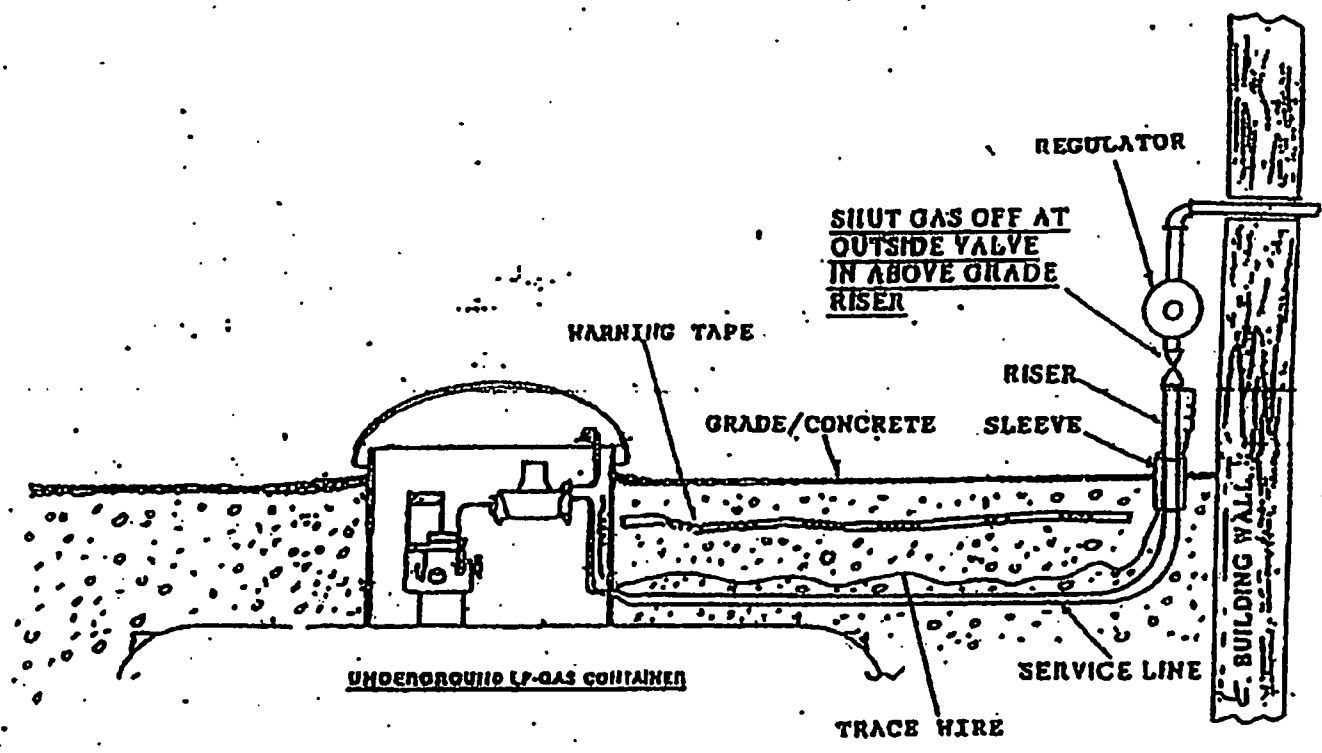
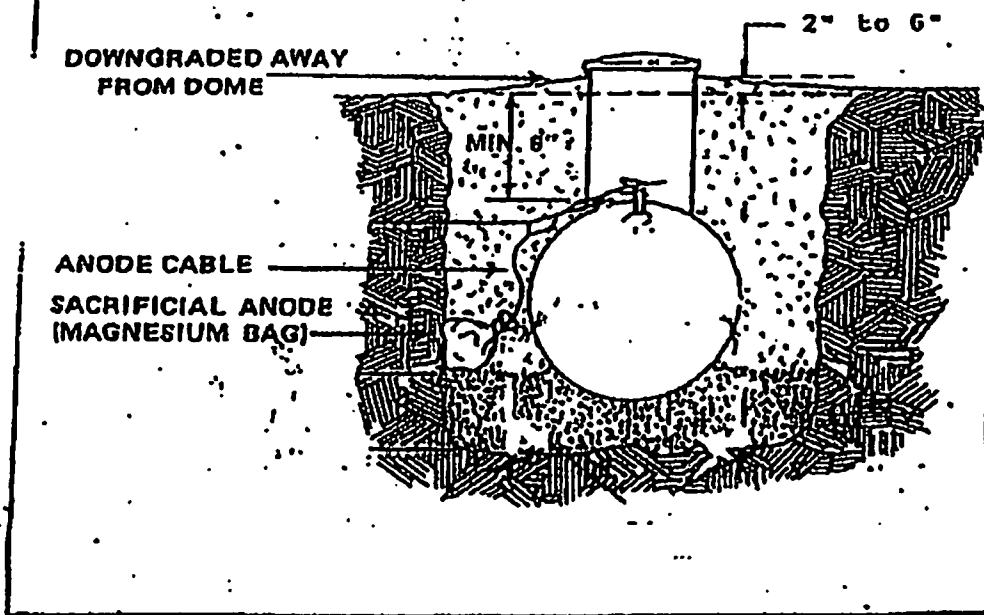
WATER CAPACITY	OUTSIDE DIAMETER	HEAD TYPE	OVERALL LENGTH	OVERALL HEIGHT W/ LID & SHROUD ASSEMBLY		LEG WIDTH	LEG SPACING	WEIGHT
				8"	18"			
120 wg. 454.2 L	24" 609.6 mm	Ellip.	5'-5 7/8" 1671.6 mm	3'-0 1/4" 919.2 mm	3'-10 1/4" 1122.4 mm	10 1/8" 257.2 mm	3'-0" 914.4 mm	245 lbs. 111.1 kg
250 wg. 946.3 L	31.5" 800.1 mm	Heml.	7'-2 1/2" 2197.1 mm	3'-9 3/4" 1109.7 mm	4'-5 3/4" 1363.7 mm	12 3/4" 323.9 mm	3'-6" 1066.8 mm	472 lbs. 214.1 kg
320 wg. 946.3 L	31.5" 800.1 mm	Heml.	8'-11 3/4" 2736.9 mm	3'-9 3/4" 1109.7 mm	4'-5 3/4" 1363.7 mm	12 3/4" 323.9 mm	4'-0 1/4" 1225.6 mm	588 lbs. 266.7 kg
500 wg. 1892.5 L	37.42" 950.5 mm	Heml.	9'-10" 2997.2 mm	4'-1 5/8" 1260.5 mm	4'-11 5/8" 1514.5 mm	15" 381.0 mm	5'-0" 1524.0 mm	871 lbs. 395.1 kg
1,000 wg. 3785.0 L	40.96" 1040.4 mm	Heml.	15'-10 7/8" 4846.6 mm	4'-5 3/4" 1351.0 mm	5'-3 1/4" 1605.0 mm	16 1/4" 412.8 mm	9'-0" 2743.2 mm	1729 lbs. 784.3 kg

DRAWING NO. 117777 DATE 11/27/77 PROJECT NO. 117777 SHEET NO. 117777	APPROVED BY: [Signature] DATE: 11/27/77	CARNO ENGINEERING ASSOCIATES, INC. 1000 15th Street (408) 251-5555
---	--	--

PROPANE TANK HOLDOWN DETAILS



UNDERGROUND TANK INSTALLATION



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 polypipe 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 polypipe 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.

Table 7B. Pipe Sizing Between First-Stage (High Pressure Regulator) And Second-Stage (Low Pressure Regulator)

MAXIMUM UNDILUTED PROPANE CAPACITIES BASED ON 10 PSIG FIRST STAGE SETTING AND 1 PSIG PRESSURE DROP. CAPACITIES ARE IN 1,000 BTU PER HOUR.

Type	ACR (Refrigeration)					Type L Tubing					
	Nominal	3/8-inch	1/2-inch	5/8-inch	3/4-inch	7/8-inch	3/8-inch	1/2-inch	5/8-inch	3/4-inch	7/8-inch
Outside	(0.375)	(0.500)	(0.625)	(0.750)	(0.875)	(0.500)	(0.625)	(0.750)	(0.875)	(1.000)	
Inside	0.311	0.436	0.555	0.68	0.785	0.430	0.545	0.666	0.785	0.906	
Length, Feet											
30	299	726	1,367	2,329	3,304	309	700	1,303	2,205	3,394	
40	256	621	1,170	1,993	2,904	265	599	1,115	1,887	2,904	
50	227	551	1,037	1,766	2,574	235	531	988	1,672	2,574	
60	206	499	939	1,600	2,332	213	481	896	1,515	2,332	
70	189	459	864	1,472	2,146	196	443	824	1,394	2,146	
80	176	427	804	1,370	1,996	182	412	767	1,297	1,996	
90	165	401	754	1,285	1,873	171	386	719	1,217	1,873	
100	156	378	713	1,214	1,769	161	365	679	1,149	1,769	
150	125	304	572	975	1,421	130	293	546	923	1,421	
200	107	260	490	834	1,216	111	251	467	790	1,216	
250	95	230	434	739	1,078	90	222	414	700	1,078	
300	86	209	393	670	976	89	201	375	634	976	
350	79	192	362	616	898	82	185	345	584	898	
400	74	179	337	573	836	76	172	321	543	836	
450	69	168	316	538	784	71	162	301	509	784	
500	65	158	298	508	741	68	153	284	481	741	
600	59	144	270	460	671	61	138	258	436	671	
700	54	132	249	424	617	56	127	237	401	617	
800	51	123	231	394	574	52	118	221	373	574	
900	48	115	217	370	539	49	111	207	350	539	
1,000	54	109	205	349	509	46	105	195	331	509	
1,500	36	87	165	281	409	37	84	157	266	409	
2,000	31	75	141	240	350	32	72	134	227	350	

Data taken and reprinted from Table 15.1(h) and 15.1(k) in NFPA 58, 2007 ed. Always check www.nfpa.org for the latest updates.

Table 7C. Polyethylene Plastic Tube And Pipe Sizing Between First-Stage And Second-Stage Regulators

MAXIMUM UNDILUTED PROPANE CAPACITIES BASED ON 10 PSIG FIRST STAGE SETTING AND 1 PSI PRESSURE DROP. CAPACITIES ARE IN 1,000 BTU PER HOUR.

Length of Pipe or Tubing, Feet	Polyethylene Plastic Tube And Pipe Size (IPS) (Dimensions in Parenthesis are Inside Diameter)											
	1/2-inch CTS SDR 7.00 (0.445)	1-inch CTS SDR 11.00 (0.688)	1 1/2-inch CTS SDR 15.00 (0.938)	2-inch CTS SDR 19.00 (1.188)	3-inch CTS SDR 24.00 (1.500)	4-inch CTS SDR 29.00 (1.812)	5-inch CTS SDR 34.00 (2.125)	6-inch CTS SDR 39.00 (2.438)	8-inch CTS SDR 49.00 (3.063)	10-inch CTS SDR 59.00 (3.688)	12-inch CTS SDR 69.00 (4.313)	15-inch CTS SDR 84.00 (5.250)
30	753	1,143	1,635	2,127	2,619	3,111	3,603	4,095	4,587	5,079	5,571	6,063
40	653	972	1,364	1,856	2,348	2,840	3,332	3,824	4,316	4,808	5,300	5,792
50	578	854	1,186	1,678	2,170	2,662	3,154	3,646	4,138	4,630	5,122	5,614
60	524	779	1,091	1,583	2,075	2,567	3,059	3,551	4,043	4,535	5,027	5,519
70	482	725	1,016	1,508	1,999	2,491	2,983	3,475	3,967	4,459	4,951	5,443
80	448	681	952	1,434	1,925	2,417	2,909	3,401	3,893	4,385	4,877	5,369
90	421	647	918	1,390	1,881	2,373	2,865	3,357	3,849	4,341	4,833	5,325
100	397	613	884	1,346	1,837	2,329	2,821	3,313	3,805	4,297	4,789	5,281
125	352	548	809	1,261	1,752	2,244	2,736	3,228	3,720	4,212	4,704	5,196
150	319	504	755	1,186	1,677	2,169	2,661	3,153	3,645	4,137	4,629	5,121
175	294	470	711	1,142	1,633	2,125	2,617	3,109	3,601	4,093	4,585	5,077
200	273	446	677	1,108	1,600	2,092	2,584	3,076	3,568	4,060	4,552	5,044
225	258	422	643	1,074	1,566	2,058	2,550	3,042	3,534	4,026	4,518	5,010
250	242	408	619	1,040	1,532	2,024	2,516	3,008	3,500	3,992	4,484	4,976
275	230	394	595	1,006	1,498	1,990	2,482	2,974	3,466	3,958	4,450	4,942
300	219	380	571	972	1,464	1,956	2,448	2,940	3,432	3,924	4,416	4,908
350	202	356	527	928	1,420	1,912	2,404	2,896	3,388	3,880	4,372	4,864
400	188	332	483	884	1,376	1,868	2,360	2,852	3,344	3,836	4,328	4,820
450	176	318	459	850	1,342	1,834	2,326	2,818	3,310	3,802	4,294	4,786
500	166	304	435	816	1,308	1,800	2,292	2,784	3,276	3,768	4,260	4,752
600	151	279	391	772	1,233	1,725	2,217	2,709	3,201	3,693	4,185	4,677
700	139	255	347	728	1,158	1,646	2,142	2,634	3,126	3,618	4,110	4,602
800	128	231	303	684	1,083	1,567	2,067	2,559	3,051	3,543	4,035	4,527
900	121	217	289	650	1,039	1,523	2,023	2,515	3,007	3,499	3,991	4,483
1,000	114	203	275	616	1,005	1,489	1,989	2,481	2,973	3,465	3,957	4,449
1,500	92	159	211	471	784	1,162	1,616	2,070	2,524	3,078	3,632	4,186
2,000	79	137	177	396	621	1,033	1,487	1,941	2,395	2,949	3,503	4,057

Data taken and reprinted from Table 15.1(p) and 15.1(q) in NFPA 58, 2007 ed. Always check www.nfpa.org for the latest updates.

Table 8A. Pipe Sizing Between Second-Stage (Low Pressure Regulator) And Appliance
 MAXIMUM UNDILUTED PROPANE CAPACITIES BASED ON 11-INCHES W.C. SETTING AND 0.5-INCH W.C. PRESSURE DROP. CAPACITIES ARE IN 1,000 BTU PER HOUR.

Piping Length, Foot	Schedule 40 Pipe Size, inches (Actual Inside Diameter, inches)								
	1/2-inch NPT (0.622-inch)	3/4 NPT (0.824-inches)	1 NPT (1.049-inches)	1-1/4 NPT (1.38-inches)	1-1/2 NPT (1.61-inches)	2 NPT (2.067-inches)	3 NPT (3.068-inches)	3-1/2 NPT (3.548-inches)	4 NPT (4.026-inches)
10	291	406	1,146	2,352	3,523	6,789	19,130	29,008	39,018
20	200	278	788	1,617	2,423	4,666	13,148	19,250	26,917
30	161	236	632	1,299	1,946	3,747	10,558	15,458	21,535
40	137	207	541	1,111	1,665	3,207	9,036	13,230	18,431
50	122	185	480	985	1,476	2,842	8,009	11,726	16,335
60	110	171	435	892	1,337	2,575	7,296	10,625	14,801
80	94	148	372	764	1,144	2,204	6,211	9,093	12,668
100	84	135	330	677	1,014	1,954	5,504	8,059	11,227
125	74	121	292	600	899	1,731	4,878	7,143	9,950
150	67	111	265	544	815	1,569	4,420	6,472	9,016
200	58	96	227	465	697	1,343	3,783	5,539	7,716
250	51	87	201	412	618	1,190	3,353	4,909	6,839
300	46	80	182	373	560	1,078	3,038	4,448	6,196
350	43	76	167	344	515	992	2,795	4,092	5,701
400	40	73	156	320	479	923	2,600	3,807	5,303

Data taken and reprinted from Table 15.1(c) in NFPA 58, 2007 ed. Always check www.nfpa.org for the latest updates.

Table 8B. Tube Sizing Between Second-Stage And Appliance
 MAXIMUM UNDILUTED PROPANE CAPACITIES BASED ON 11-INCHES W.C. SETTING AND 0.5-INCH W.C. PRESSURE DROP. CAPACITIES ARE IN 1,000 BTU PER HOUR.

Type	ACR (Refrigeration)					Type L Tubing				
	3/8-inch	1/2-inch	5/8-inch	3/4-inch	7/8-inch	3/8-inch	1/2-inch	5/8-inch	3/4-inch	7/8-inch
Nominal	0.375	0.500	0.625	0.750	0.875	0.375	0.500	0.625	0.750	0.875
Outside	0.375	0.500	0.625	0.750	0.875	0.375	0.500	0.625	0.750	0.875
Inside	0.311	0.436	0.555	0.68	0.785	0.315	0.430	0.545	0.666	0.785
Length, Feet										
10	47	115	216	368	536	49	110	206	348	535
20	32	79	148	253	368	34	76	141	239	368
30	26	63	119	203	296	27	61	113	192	296
40	22	54	102	174	253	23	52	97	164	253
50	20	48	90	154	224	20	46	86	146	224
60	18	43	82	139	203	19	42	78	132	203
80	15	37	70	119	174	16	36	67	113	174
100	14	33	62	106	154	14	32	59	100	154
125	12	29	55	94	137	12	28	52	89	137
150	11	26	50	85	124	11	26	48	80	124
200	9	23	43	73	106	10	22	41	69	106
250	8	20	38	64	94	9	19	36	61	94
300	8	18	34	58	85	8	18	33	55	85
350	7	17	32	54	78	7	16	30	51	78
400	6	16	29	50	73	7	15	28	47	73

Data taken and reprinted from Table 15.1(f) and 15.1(j) in NFPA 58, 2007 ed. Always check www.nfpa.org for the latest updates.

STATE OF FLORIDA
MARTIN COUNTY



INSTR # 2463420
OR BK 2726 PG 1068

THIS IS TO CERTIFY THAT THE
FOREGOING PAGE(S) IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
DOCUMENT AS FILED IN THIS OFFICE

NOTICE OF COMMENCEMENT

TO BE RECORDED WHEN CONSTRUCTION VALUE EXCEEDS \$500,000

RECORDED 06/27/2014 03:25:47 PM
CAROLYN TIMMANN
MARTIN COUNTY CLERK

TAX FOLIO #: 01-38-41-009-000-001308

BY Carolyn Timmann
CAROLYN TIMMANN, CLERK
STATE OF FLORIDA D.C.

COUNTY OF MARTIN

DATE 06/27/2014 THE UNDERSIGNED HEREBY GIVES NOTICE THAT IMPROVEMENT WILL BE MADE TO CERTAIN REAL PROPERTY, AND IN ACCORDANCE WITH CHAPTER 713, FLORIDA STATUTES, THE FOLLOWING INFORMATION IS PROVIDED IN THIS NOTICE OF COMMENCEMENT.

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE):
Miramar Lot 13; 5 Miramar Road, Sewall's Point

GENERAL DESCRIPTION OF IMPROVEMENT: Propane tank and line to cooktop and barbecue

OWNER NAME: Alfred Byrne Jr.
ADDRESS: 5 Miramar Road, Stuart, FL 34996
PHONE NUMBER: _____ FAX NUMBER: _____

INTEREST IN PROPERTY:
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER):

CONTRACTOR: Elite Gas Contractors
ADDRESS: 2130 SW Poma Drive, Palm City, FL 34990
PHONE NUMBER: (772) 220-9678 FAX NUMBER: (772) 220-1829

SURETY COMPANY (IF ANY): _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____
BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY: _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

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

NAME: _____
ADDRESS: _____
PHONE NUMBER: _____ FAX NUMBER: _____

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

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

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

[Signature]
SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER
SIGNATORY'S TITLE/OFFICE: OWNER

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 27TH DAY OF JUNE, 2014

BY: ALFRED BYRNE AS OWNER FOR _____
NAME OF PERSON TYPE OF AUTHORITY

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION
TYPE OF IDENTIFICATION PRODUCED: FL DL

NAME OF NOTARY: ARLENE ATKINSON
WHOM INSTRUMENT COMMISSIONED: FF117904
EXPIRES June 9, 2018
[Signature]
NOTARY SIGNATURE/ SEAL

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING AND THAT THE FACTS IN IT ARE TRUE TO THE BEST OF MY KNOWLEDGE AND BELIEF (SECTION 92.525, FLORIDA STATUTES).

(Signature of Natural Person Signing Above)

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7-11 - 14 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10904	NESSEN	WINDOW		341-2750
	109 N. SEWALLS Pt. Rd	FINAL	CANCELED	
	GLENMARK HOMES			INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10909	VEINER	Final		283-4114
<u>W-23</u>	10 Pineapple Ln Flynn & W/C		PASS	
				INSPECTOR

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	MANTIL	WINDOW		
	32 Rio Vista	FINAL	PASS	
	FL WINDOW & DOOR	ROUGH		INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	BARLEY	ALL TRADES		
	117 N. Sewalls		FAIL	
	DRIFWOOD HOMES			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
<u>10922</u>	<u>BEAN</u>	<u>U.G. TANK</u>		
	5 Miriam Ave	& LINES	PASS	
				INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10923	FED MGT	A/C		No Access
	3 BANYAN	FINAL	FAIL	NO ONE HOME
	ALLIGATOR A/C			INSPECTOR <i>[Signature]</i>

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10934	FARMICY	ROOF JOLE		FPL
	6' OAKHILL WAY		PASS	
	SEAGATE PUDS			INSPECTOR <i>[Signature]</i>

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection

~~Mon~~
 Tue

 Wed

 Thur

 Fri

7/18-14 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10922	5 Micams Rd. Beryne	Elite Cms Interior Rough	Fail	Not Ready INSPECTOR <i>AF</i>
none repair only	121 Hillcrest Dr. Star Roofing + Sheet metal →	bird roost	PASS	305-896-3938 CLOSE INSPECTOR <i>AF</i>
10897	7 Eversite Fore	Stuart Fence bird fence	PASS	CLOSE INSPECTOR <i>AF</i>
10919	11 Middle Rd.	Dwight Leaps Roofing bird roost	PASS PICTURES	772-545-3442 CLOSE INSPECTOR <i>AF</i>
10527	30 S Sewalls Pt. Rd. Weston	bird elect., plumb., ACHC Weston Construction	ELEC PASS PLUMB PASS AVAC FAIL	521-676-4100 MADE-UP BIR INSPECTOR <i>AF</i>
10901	24 S Sewalls Pt. Rd. Caraso	Dockscope bird elect. + boat ramp.	PASS	CLOSE INSPECTOR <i>AF</i>
10694	53 N River Rd.	St. George Const. fill slabs part 1 gar. + home?	CANCEL	263-9000 INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7/18-14 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10798	Robert Green Stuart Roof Repair 26 ISLAND RD	Final Inspection	PASS PICCOLI	CLOSE INSPECTOR <i>CF</i>
10927	AM 17 ISLAND RD KRAUSS & CRANE	A/C FINAL	PASS	CLOSE INSPECTOR <i>CF</i>
10926	86 S. 8TH RD KRAUSS & CRANE	A/C FINAL	PASS	CLOSE INSPECTOR <i>CF</i>
10889	WILLIAMS 110 HENRY SEWALLS KRAUSS & CRANE	A/C FINAL	FAIL NO ANSWER	INSPECTOR <i>CF</i>
10922	MEAN 5 MAPLE ELITE GAS	INT GAS INT GAS	CANCELLED	INSPECTOR
10833	POURHERTY 15 ORA HILL WAY W. WHITE CONSO	FRAME & TRADES	PASS	INSPECTOR <i>CF</i>
10792	LAGANA 1 PINEAPPLE ADVANCED CONCEPTS	FLOOR FINAL	PASS	CLOSE INSPECTOR <i>CF</i>

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7/21 - 14 Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10701	DANLOW	2 N FLOOR		
	7 ORR HILL WAY	COLUMN & BEAM	PASS	
	JMC			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10722	BENN	GAS ROUTE		
	5 MILLMAN	INTERIOR	PASS	
	ELITE GAS			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	RIDGVIEW	TRUCK	OK	
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **8-28-14** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10206		Roof Repair		
	7 Pineapple Lane	Final	Pass	CLOSE
	Star Pro Roofing	(Expired)		INSPECTOR <i>J</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10985	Rowe	Final		
9:30 AM	5 S River Maria	Mechanical	Pass	CLOSE
	NisAir 603-5642 or 283-2037			INSPECTOR <i>J</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10972	Byrne	Final Gas		
	S. M. ... Rd	Tank + Lines	Pass	CLOSE
	Elite Gas Contractors			INSPECTOR <i>J</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10959	Van Deusen	Roofing		
	75. Vic Lucindia	Final	Pass	CLOSE
	JA Taylor			INSPECTOR <i>J</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10778	NEHME	Window		
	44 S. Dennis Pt Rd	BUCKS	Pass	
	Ocean Side Building			INSPECTOR <i>J</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

11075

A/C CHANGEOUT



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	11075		
ADDRESS:	5 Miramar Road		
DATE ISSUED:	11/5/2014	SCOPE OF WORK:	A/C Change Out

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

ACCESSORY PERMIT	Declared Value:	\$	\$ 7,465.00
Total number of inspections: @ \$ 100.00 per insp. # insp		1	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	5.00

TOTAL ACCESSORY PERMIT FEE:		\$	109.00
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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:	11075	DATE ISSUED:	November 5, 2014
SCOPE OF WORK:	A/C Change Out		
CONTRACTOR:	Seacoast		
PARCEL CONTROL NUMBER:	01-38-41-009-000-00130-6	SUBDIVISION:	Miramar Lot 13
CONSTRUCTION ADDRESS:	5 Miramar Road		
OWNER NAME:	Byrne		
QUALIFIER:	John V. Longel	CONTACT PHONE NUMBER:	466-2400

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM**

INSPECTIONS: 9:00AM TO 3:00PM - MONDAY THROUGH FRIDAY

INSPECTIONS

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

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	11075		
ADDRESS:	5 Miramar Road		
DATE ISSUED:	11/5/2014	SCOPE OF WORK:	A/C Change Out

SINGLE FAMILY OR ADDITION /REMODEL		Declared Value	\$	
---	--	-----------------------	----	--

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

ACCESSORY PERMIT	Declared Value:	\$	\$ 7,465.00
Total number of inspections: @ \$ 100.00 per insp. # insp		\$ 1	\$ 100.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	\$ 2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	\$ 2.00
Road impact assessment: (.04% of construction value - \$5 min.)		\$	\$ 5.00

TOTAL ACCESSORY PERMIT FEE:		\$	\$ 109.00
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Town of Sewall's Point

Date: 10/31/14 BUILDING PERMIT APPLICATION Permit Number: 11075

OWNER/LESSEE NAME: Alfred Byrne Phone (Day) 912-220-8510 (Fax)

Job Site Address: 5 Miramar Rd City: Stuart State: FL Zip: 34996

Legal Description: Miramar lot 13 Parcel Control Number: 01-38-41-009-000 00130-6

Fee Simple Holder Name: Address: City: State: Zip: Telephone:

*SCOPE OF WORK (PLEASE BE SPECIFIC):

WILL OWNER BE THE CONTRACTOR? (If yes, Owner Builder questionnaire must accompany application) YES [] NO [X] Has a Zoning Variance ever been granted on this property? YES [] (YEAR) NO []

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$1465 Is subject property located in flood hazard area? VE10 AE9 AE8 X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: Sea Coast A/C Phone: 466-2400 Fax: 466-2053 Qualifiers name: Johnny Langel Street: 2601 Ind. Ave 3 City: Ft. Pierce State: FL Zip: 34946

State License Number: 00000000 OR: Municipality: License Number:

LOCAL CONTACT: Tracy Langel Phone Number: 466-2400

DESIGN PROFESSIONAL: Fla. License# Street: City: State: Zip: Phone Number:

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

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

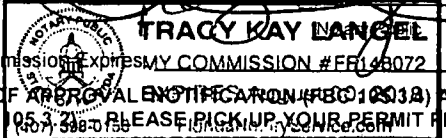
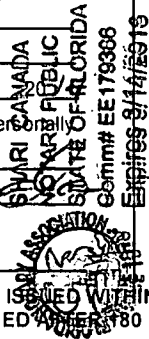
WARNINGS TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. 2. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY DEED RESTRICTIONS. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED.

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

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

OWNER /AGENT/LESSEE - NOTARIZED SIGNATURE: X [Signature] State of Florida, County of: Martin On This the 31 day of October by Alfred Joseph Byron Byrne Jr who is personally known to me or produced by FLDY As identification: [Signature] Notary Public My Commission Expires: 03/14/2016

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: X [Signature] State of Florida, County of: St. Lucie On This the 31 day of October 2014 by Johnny Langel who is personally known to me or produced by [Signature] As identification: TRACY KAY LANGEL My Commission Expires: MY COMMISSION # FF148072



SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL BY THE TOWN OF SEWALL'S POINT (FBC 105.4.1.1) ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.4.1.1) PLEASE PICK UP YOUR PERMIT PROMPTLY!



INSTALL
Sea Coast *Monday*
11/3

AIR CONDITIONING
 AND
 SHEET METAL, INC.

2601 Industrial Ave #3, Ft. Pierce, FL 34946
 772-466-2400 / 772-770-1971 - Vero Beach
 Fax 772-466-3053

www.seacoastair.com

Proposal/Agreement

Customer Name J.T. Byrne Date 10/31/14
 Street 5 MIRAMAR RD Street _____
 City, State, Zip SCWALL'S POINT, FL 34916 City, State, Zip _____
 Phone/Cell 912-220-8510 Email _____

We hereby propose: To furnish, install and service under warranty (stated below) Sea Coast A/C products or related equipment for your home in accordance with the conditions and specifications set forth in this proposal.

NEW EQUIPMENT By CARRIER 2-speed
 Air Conditioning - Size 4 TON Model 24ACB7040A003 SEER 116.5
 Air Handler - Size 4 TON Heat KW 10 Model FV4CNFO05 SEER 14
 Package Unit - Size _____ Model _____ SEER _____
 MERV 16 Filter UV Germicidal Light Sea Coast Anti-corrosion coating
 Other _____

INSTALLATION
 All work done in accordance with existing codes
 All required permits
 Removal of existing equipment from premises
 Pre-cast composite slab
 Hurricane straps & isolation pads
 Manual "J" Energy Calculations
 New supply grille(s) associated ductwork
 New return grille(s) and associated ductwork
 Balance air distribution system for uniform temperature
 Reconnect to existing ductwork
 Other _____

PIPING
 Opti-sized refrigerant lines with armallex insulation (Type L Copper)
 Architectural exterior refrigerant line enclosure
 Primary condensate drain
 Anti-theft Freon caps
 Refrigerant filter drier
 Emergency drain pan and float switch
 Rust and corrosion coating Here site
 Non rust drain pan
 Emergency drain overflow switch
 Reconnect new equipment to existing control & hi-voltage wiring
 Other GE 60/40 Breakers

ELECTRICAL / CONTROLS
 Programmable thermostat
 Digital thermostat
 Communicating thermostat CARRIER TC-WH501
 Time delay protection
 Humidstat

GUARANTEES
 24 hours a day, 365 days/year emergency service
 Labor Warranty
 1 year 2 year 10 year
 Manufacturer's Parts Warranty
 1 year 5 year 10 year
 Manufacturer's Compressor Warranty
 1 year 5 year 10 year
 Annual maintenance required for 10 year parts & labor warranty

MC, VISA, DISCOVER, AM. EXP.
 EASY FINANCING PLANS AVAILABLE

This Proposal good for 50 DAYS
 Total Investment \$7465.00
 Utility Rebate - FPL \$685 - \$125 coupon
 Balance Due to Sea Coast at Completion \$6,655.00
 Manufacturer's Rebate to Customer _____
 Net Cost after Rebates _____

Approval [Signature]
 Date 10/31/14
 LIC. # CA 6016446 Member of Better Business Bureau
 BBB Phone # 772-223-1492

Approval [Signature]
 Date 10/31/14

100% FINANCING AVAILABLE TO QUALIFIED BUYERS

Option: _____



SEACOAS-01

MUNOZG

CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)

6/13/2014

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFIRMATIVELY OR NEGATIVELY AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW. THIS CERTIFICATE OF INSURANCE DOES NOT CONSTITUTE A CONTRACT BETWEEN THE ISSUING INSURER(S), AUTHORIZED REPRESENTATIVE OR PRODUCER, AND THE CERTIFICATE HOLDER.

IMPORTANT: If the certificate holder is an ADDITIONAL INSURED, the policy(ies) must be endorsed. If SUBROGATION IS WAIVED, subject to the terms and conditions of the policy, certain policies may require an endorsement. A statement on this certificate does not confer rights to the certificate holder in lieu of such endorsement(s).

PRODUCER Insurance Office of America-JUP Abacoa Town Center 1200 University Blvd, Suite 200 Jupiter, FL 33458	CONTACT NAME: Teresa Barwick	
	PHONE (A/C, No, Ext): (561) 776-0660	FAX (A/C, No): (561) 776-0670
E-MAIL ADDRESS: Teresa.Barwick@ioausa.com		
INSURER(S) AFFORDING COVERAGE		NAIC #
INSURER A: Southern-Owners Insurance Company		10190
INSURER B: Owners Insurance Company		32700
INSURER C: Auto-Owners Insurance Company		18988
INSURER D: Bridgefield Employers Insurance Company		10701
INSURER E:		
INSURER F:		

INSURED

 SeaCoast Air Conditioning and Sheet Metal Inc.
 2601 Industrial Ave 3
 Ft. Pierce, FL 34946

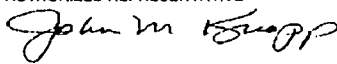
COVERAGES**CERTIFICATE NUMBER:****REVISION NUMBER:**

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

INSR LTR	TYPE OF INSURANCE	ADDL INSR	SUBR WVD	POLICY NUMBER	POLICY EFF (MM/DD/YYYY)	POLICY EXP (MM/DD/YYYY)	LIMITS
A	<input checked="" type="checkbox"/> GENERAL LIABILITY			72704759-14 (AC)	01/17/2014	01/17/2015	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						MED EXP (Any one person) \$ 10,000
							PERSONAL & ADV INJURY \$ 1,000,000
							GENERAL AGGREGATE \$ 2,000,000
							PRODUCTS - COMP/OP AGG \$ 2,000,000
							\$
B	<input checked="" type="checkbox"/> AUTOMOBILE LIABILITY			9542458203	01/17/2014	01/17/2015	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000
	<input checked="" type="checkbox"/> ANY AUTO						BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS	<input type="checkbox"/> SCHEDULED AUTOS					BODILY INJURY (Per accident) \$
	<input type="checkbox"/> HIRED AUTOS	<input type="checkbox"/> NON-OWNED AUTOS					PROPERTY DAMAGE (PER ACCIDENT) \$
							\$
C	<input checked="" type="checkbox"/> UMBRELLA LIAB <input checked="" type="checkbox"/> OCCUR			9542458201	01/17/2014	01/17/2015	EACH OCCURRENCE \$ 1,000,000
	<input type="checkbox"/> EXCESS LIAB <input type="checkbox"/> CLAIMS-MADE						AGGREGATE \$ 1,000,000
	<input type="checkbox"/> DED <input checked="" type="checkbox"/> RETENTION \$ 10,000						\$
D	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY			83038868	01/17/2014	01/17/2015	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? (Mandatory in NH)	<input type="checkbox"/> Y/N	N/A				E.L. EACH ACCIDENT \$ 500,000
	If yes, describe under DESCRIPTION OF OPERATIONS below						E.L. DISEASE - EA EMPLOYEE \$ 500,000
							E.L. DISEASE - POLICY LIMIT \$ 500,000
A	Equipment Floater			72704759-14 (AC)	01/17/2014	01/17/2015	Scheduled Equipment 28,000

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

CERTIFICATE HOLDER**CANCELLATION**

TOWN OF SEWALLS POINT ONE S SEWALLS POINT RD Sewalls Point, FL 34996	SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, NOTICE WILL BE DELIVERED IN ACCORDANCE WITH THE POLICY PROVISIONS.
	AUTHORIZED REPRESENTATIVE 

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



LICENSE NUMBER

CAC016446

The CLASS A AIR-CONDITIONING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS
Expiration date: AUG 31, 2016

LANGEL, JOHN V
SEA COAST A/C & SHEET METAL IN
2601 INDUSTRIAL AVENUE 3
FORT PIERCE FL 34946



ISSUED: 07/17/2014

DISPLAY AS REQUIRED BY LAW

SEQ # L1407170000895



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

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

Air Conditioning Change out Affidavit

Residential Commercial
 Package Unit Yes No (Use Condenser side of form below for equipment listing)
 Duct Replacement Yes No - Refrigerant line replacement Yes No
 Flushing Existing Refrigerant lines Yes No - Adding Refrigerant Drier Yes No
 Rooftop A/C Stand Installation Yes No - Curb Installation Yes No
 Smoke Detector in Supply (over 2000 CFM) Yes No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: <u>Carrier</u> Model# <u>FV40KAS</u>	Condenser: Mfg: <u>Carrier</u> Model# <u>24ACB748A</u>
Volts <u>240</u> CFM's _____ Heat Strip <u>10</u> Kw _____	Volts <u>240</u> SEER/EER <u>14.5</u> BTU's <u>48000</u>
Min. Circuit Amps <u>58.5</u> Wire gauge <u>6</u>	Min. Circuit Amps <u>27.8</u> Wire gauge <u>8</u>
Max. Breaker size <u>60</u> Min. Breaker size _____	Max. Breaker size <u>40</u> Min. Breaker size _____
Ref. line size: Liquid <u>3/8</u> Suction <u>7/8</u>	Ref. line size: Liquid <u>3/8</u> Suction <u>7/8</u>
Refrigerant type <u>R-410A</u>	Refrigerant type <u>R-410A</u>
Location: Existing <input checked="" type="checkbox"/> New <input type="checkbox"/>	Location: Existing <input checked="" type="checkbox"/> New <input type="checkbox"/>
<u>Attic</u> Garage/Closet (specify)	Left/Right/Rear/Front/Roof _____
Access: <u>pull down stairs</u>	Condensate Location <u>Ground</u>

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

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: _____ Model# _____	Condenser: Mfg: _____ Model# _____
Volts _____ CFM's _____ Heat Strip _____ Kw _____	Volts <u>240</u> SEER/EER <u>16.5</u> BTU's <u>48000</u>
Min. Circuit Amps <u>58.5</u> Wire gauge <u>6</u>	Min. Circuit Amps <u>27.8</u> Wire gauge <u>8</u>
Max. Breaker size <u>60</u> Min. Breaker size _____	Max. Breaker size <u>40</u> Min. Breaker size _____
Ref. line size: Liquid <u>3/8</u> Suction <u>7/8</u>	Ref. line size: Liquid <u>3/8</u> Suction <u>7/8</u>
Refrigerant type <u>R-22</u>	Refrigerant type <u>R-22</u>
Location: Ext. <input checked="" type="checkbox"/> New <input type="checkbox"/>	Location: Ext. <input checked="" type="checkbox"/> New <input type="checkbox"/>
<u>Attic</u> Garage/Closet (specify)	Left/Right/Rear/Front/Roof _____
Access: <u>pull down stairs</u>	Condensate Location <u>ground</u>

Certification:

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

Signature [Handwritten Signature]

Date 10/31/14



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

FLORIDA ENERGY CONSERVATION CODE

Mandatory Duct Inspection Certification for HVAC change-out

For use when part of the duct and/or HVAC system has been replaced (Section 101.4.7.1.1 & FS 553.912)

Owner: Byrne Contractor name: Sea Coast
 Street address: 5 Miramar Rd Jurisdiction: _____
 City: Sewalls Point Permit No.: _____
 Zip: 34996 Final inspection date: _____

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

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

Signature: [Signature] Date: 10/31/14
 Printed Name: _____
 Contractor License #: _____

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

Signature: _____ Date: _____
 Printed Name: _____

ACCESSORY ELECTRIC HEATER ELECTRICAL DATA

HEATER PART NO.	kW		P H A S E	INTERNAL CIRCUIT PROTECTION	HEATER AMPS 208/230V			BRANCH CIRCUIT														
								Min Ampacity 208/230V**			Min Wire Size (AWG) 208/230V††			Min Gnd Wire Size 208/230V			Max Fuse/Ckt Bkr Amps 208/230V			Max Wire Length 208/230V (ft) †††		
	240v	208v			Single Circuit	Dual Circuit		Single Circuit	Dual Circuit		Single Circuit	Dual Circuit		Single Circuit	Dual Circuit		Single Circuit	Dual Circuit		Single Circuit	Dual Circuit	
						L1,L2	L3,L4		L1,L2	L3,L4		L1,L2	L3,L4		L1,L2	L3,L4		L1,L2	L3,L4		L1,L2	L3,L4
KFCEH0501N05	5	3.8	1	None	18.1/20.0	—	—	31.2/30.5	—	—	8/8	—	—	10/10	—	—	35/35	—	—	85/88	—	—
KFCEH2401C05	5	3.8	1	Ckt Bkr	18.1/20.0	—	—	31.2/33.5	—	—	8/8	—	—	10/10	—	—	35/35	—	—	85/88	—	—
KFCEH0801N08	8	6.0	1	None	28.8/32.0	—	—	44.7/48.5	—	—	8/8	—	—	10/10	—	—	45/50	—	—	58/60	—	—
KFCEH2501C08	8	6.0	1	Ckt Bkr	28.8/32.0	—	—	44.7/48.5	—	—	8/8	—	—	10/10	—	—	45/50	—	—	58/60	—	—
KFCEH2901N09*	9	6.8	1	None	32.8/38.0	—	—	49.5/53.5	—	—	8/8	—	—	10/10	—	—	50/60	—	—	54/67	—	—
KFCEH2901N09*‡	9	6.8	3	None	18.8/20.8	—	—	32.0/34.5	—	—	8/8	—	—	10/10	—	—	35/35	—	—	83/85	—	—
KFCEH0901N10	10	7.5	1	None	36.2/40.0	—	—	53.8/58.5	—	—	8/8	—	—	10/10	—	—	60/60	—	—	78/80	—	—
KFCEH2601C10	10	7.5	1	Ckt Bkr	36.2/40.0	—	—	53.8/58.5	—	—	6/6	—	—	10/10	—	—	60/60	—	—	78/80	—	—
KFCEH3001F15*†	15	11.3	1	Fuse	54.2/50.8	36.2/40.0	18.1/20.0	76.3/83.4	53.8/58.5	22.7/25.0	4/4	6/6	10/10	8/8	10/10	10/10	60/90	60/60	25/25	88/89	78/80	75/76
KFCEH3101C15*	15	11.3	1	Ckt Bkr	—	36.2/40.0	18.1/20.0	—	53.8/58.5	22.7/25.0	—	6/6	10/10	—	10/10	10/10	—	60/60	25/25	—	78/80	75/76
KFCEH1601315	15	11.3	3	None	31.3/34.8	—	—	47.7/51.8	—	—	8/8	—	—	10/10	—	—	50/60	—	—	50/60	—	—
KFCEH2001318	18	13.5	3	None	37.8/41.5	—	—	55.8/60.4	—	—	8/8	—	—	10/8	—	—	60/70	—	—	78/77	—	—
KFCEH3201F20*†	20	15.0	1	Fuse	72.3/78.8	39.2/40.0	36.2/40.0	98.8/108.4	53.8/58.5	45.3/50.0	3/2	6/6	8/8	8/8	10/10	10/10	100/110	60/60	50/50	85/108	78/80	58/59
KFCEH3301C20*	20	15.0	1	Ckt Bkr	—	36.2/40.0	36.2/40.0	—	53.8/58.5	45.3/50.0	—	6/6	8/8	—	10/10	10/10	—	60/60	50/50	—	78/80	58/59
KFCEH3401F24*†	24	18.0	3	Fuse	50.1/55.4	—	—	71.2/77.8	—	—	4/4	—	—	8/8	—	—	80/80	—	—	94/95	—	—
	24	18.0	1	Fuse	86.7/95.5	—	—	116.9/127.8	—	—	1/1	—	—	6/6	—	—	125/150	—	—	115/118	—	—
KFCEH3501F30*†	30	22.5	3	Fuse	62.6/69.2	—	—	86.8/95.0	—	—	3/3	—	—	8/8	—	—	90/100	—	—	97/98	—	—
	30	22.5	1	Fuse	108.0/120.0	—	—	144.8/158.5	—	—	0/00	—	—	6/6	—	—	150/175	—	—	117/150	—	—

FIELD MULTIPOINT WIRING OF 24- AND 30-kW SINGLE PHASE

HEATER PART NO.	kW		P H A S E	HEATER AMPS 208/230V			MIN AMPACITY 208/230V**			MIN WIRE SIZE (AWG) 208/230V††			MIN GND WIRE SIZE 208/230V	MAX FUSE/CKT BKR AMPS 208/230V			MAX WIRE LENGTH 208/230V (FT) †††		
	240V	208V		L1,L2	L3,L4	L5,L6	L1,L2	L3,L4	L5,L6	L1,L2	L3,L4	L5,L6		L1,L2	L3,L4	L5,L6	L1,L2	L3,L4	L5,L6
KFCEH3401F24*†	24	18.0	1	28.8/32.0	28.8/32.0	28.8/32.0	44.7/48.5	36.2/40.0	36.2/40.0	8/8	8/8	8/8	10/10	45/50	40/40	40/40	59/60	73/73	73/73
KFCEH3501F30*†	30	22.5	1	36.2/40.0	36.2/40.0	36.2/40.0	53.8/58.5	45.3/50.0	45.3/50.0	8/6	8/8	8/8	10/10	60/60	50/50	50/50	78/80	59/59	59/59

* Heaters are Intelligent Heat capable when used with the FV fan coil and Comfort Zone II™ or Infinity Control™.

† Field convertible to 1 phase, single or multiple supply circuit.

‡ Field convertible to 3 phase.

** Includes blower motor amps of largest fan coil used with heater.

†† Copper wire must be used. If other than uncoated (non-plated), 75°C copper wire (solid wire for 10 AWG and smaller, stranded wire for larger than 10 AWG) is used, consult applicable tables of the National Electric Code (ANSI/NFPA 70).

††† Length shown is as measured 1 way along wire path between unit and service panel for a voltage drop not to exceed 2%.

NOTES:

1. Single circuit application of F15 and F20 heaters requires single-point wiring kit accessory.

ELECTRICAL DATA

UNIT SIZE - SERIES	V/PH	OPER VOLTS*		COMPR		FAN	MCA	MIN WIRE SIZE†	MIN WIRE SIZE†	MAX LENGTH ft. (m)‡	MAX LENGTH ft. (m)‡	MAX FUSE** or CKT BRK AMPS
		MAX	MIN	LRA	RLA	FLA		60° C	75° C	60° C	75° C	
24-31	208-230/1	253	197	58.3	11.1	0.6	14.5	14	14	54 (16.6)	52 (15.7)	20
36-31				83.0	15.3	0.7	19.8	12	12	63 (19.2)	60 (18.3)	35
48-31				104.0	21.2	1.3	27.0	10	10	72 (21.9)	68 (20.8)	50
60-30				118.0	23.0	1.3	30.1	8	10	93 (28.3)	57 (17.4)	50

* Permissible limits of the voltage range at which the unit will operate satisfactorily

† If wire is applied at ambient greater than 30°C, consult table 310-16 of the NEC (NFPA 70). The ampacity of non-metallic-sheathed cable (NM), trade name ROMEX, shall be that of 60°C conditions, per the NEC (NFPA 70) Article 336-26. If other than uncoated (no-plated), 60 or 75°C insulation, copper wire (solid wire for 10 AWG or smaller, stranded wire for larger than 10 AWG) is used, consult applicable tables of the NEC (NFPA 70).

‡ Length shown is as measured one way along wire path between unit and service panel for voltage drop not to exceed 2%.

** Time-Delay fuse.

FLA - Full Load Amps

LRA - Locked Rotor Amps

MCA - Minimum Circuit Amps

RLA - Rated Load Amps

NOTE: Control circuit is 24-V on all units and requires external power source. Copper wire must be used from service disconnect to unit.

All motors/compressors contain internal overload protection.

Complies with 2010 requirements of ASHRAE Standards 90.1

A-WEIGHTED SOUND POWER LEVEL

UNIT SIZE - VOLTAGE, SERIES	STANDARD RATING (dBA)	TYPICAL OCTAVE BAND SPECTRUM (dBA, without tone adjustment)					
		125	250	500	1000	4000	8000
24-31	73 - High Stage	49.0	58.0	66.5	69.5	61.0	57.5
	74 - Low Stage	52.0	59.5	67.0	69.5	61.0	55.0
36-31	74 - High Stage	53.5	61.5	68.0	71.0	62.5	57.5
	73 - Low Stage	54.0	61.5	67.5	68.0	63.0	56.0
48-31	74 - High Stage	54.5	59.5	67.0	68.0	60.0	53.5
	72 - Low Stage	55.5	61.5	67.0	66.0	60.5	55.0
60-30	74 - low stage	51.4	58.4	63.3	62.5	57.0	50.9
	74 - high stage	52.4	62.4	62.3	65.5	58.0	51.9

NOTE: Tested in accordance with AHRI Standard 270-08. (Not listed with AHRI).

CHARGING SUBCOOLING (TXV-TYPE EXPANSION DEVICE)

UNIT SIZE - VOLTAGE, SERIES	REQUIRED SUBCOOLING °F (°C)
24-31	10 (5.6)
36-31	14 (7.8)
48-31	13 (7.2)
60-30	10 (5.6)

THERMOSTATS

PART NUMBER	PROGRAM	GAS	ELECTRIC	HEAT	COOL
Performance					
TP-PAC01	7-Day	√	√	1	1
TP-NAC01	NP	√	√	1	1

THERMOSTAT ACCESSORIES		
PART NUMBER	BRIEF DESCRIPTION	THERMOSTATS USED WITH
SYSTXCCRRS01	Indoor Remote Room Temperature Sensor	All TP- thermostats
TP-EXP01-A	ExP® Computer Programming Accessory	TP-P thermostats
TSTATXXCNV10‡	Thermostat Conversion Kit (4 to 5 wire) - 10 pack	All Carrier® branded thermostats
TX-LBP01	Large Decorative Backplate	TP-Pxx, TP-Nxx, TC-Pxx
TSTATXXSEN01-B*	Outdoor Air Temperature Sensor	All TP- thermostats

24ACB7

LONG LINE APPLICATIONS

An application is considered Long Line, when the refrigerant level in the system requires the use of accessories to maintain acceptable refrigerant management for systems reliability. See Accessory Usage Guideline table for required accessories. Defining a system as long line depends on the liquid line diameter, actual length of the tubing, and vertical separation between the indoor and outdoor units.

For Air Conditioner systems, the chart below shows when an application is considered Long Line.

AC WITH PURON® REFRIGERANT LONG LINE DESCRIPTION ft (m)
Beyond these lengths, long line accessories are required

Liquid Line Size	Units On Same Level	Outdoor Below Indoor	Outdoor Above Indoor
1/4	No accessories needed within allowed lengths	No accessories needed within allowed lengths	175 (53.3)
5/16	120 (36.6)	50 (15.2) vertical or 120 (36.6) total	120 (36.6)
3/8	80 (24.4)	35 (10.7) vertical or 80 (24.4) total	80 (24.4)

Note: See Long Line Guideline for details

VAPOR LINE SIZING AND COOLING CAPACITY LOSS

Acceptable vapor line diameters provide adequate oil return to the compressor while avoiding excessive capacity loss. The suction line diameters shown in the chart below are acceptable for AC systems with Puron refrigerant:

Vapor Line Sizing and Cooling Capacity Losses — Puron® Refrigerant 2-Stage Air Conditioner Applications

Unit Nominal Size (Btuh)	Maximum Liquid Line Diameters (In. OD)	Vapor Line Diameters (In.) OD	Cooling Capacity Loss (%) Total Equivalent Line Length ft. (m)								
			26-50 (7.9-15.2)	51-80 (15.5-24.4)	81-100 (24.7-30.5)	101-125 (30.8-38.1)	126-150 (38.4-45.7)	151-175 (46.0-50.3)	176-200 (53.6-60.0)	201-225 (61.3-68.6)	226-250 (68.9-76.2)
024 2-Stage Puron AC	3/8	5/8	0	1	1	2	3	3	4	4	5
		3/4	0	0	0	0	1	1	1	1	1
036 2-Stage Puron AC	3/8	5/8	1	2	4	5	6	7	9	10	11
		3/4	0	0	1	1	2	2	3	3	4
		7/8	0	0	0	0	1	1	1	1	2
048 2-Stage Puron AC	3/8	3/4	1	2	2	3	4	5	6	7	7
		7/8	0	1	1	2	2	2	3	3	3
		1-1/8	0	0	—	—	—	—	—	—	—
060 2-Stage Puron AC	3/8	3/4	1	2	4	5	6	7	9	10	11
		7/8	0	1	2	2	3	4	4	5	5
		1-1/8	0	0	0	1	1	1	1	1	1

Applications in this area may be long line and may have height restrictions. See the Residential Piping and Long Line Guideline.

— Applications in this area are not recommended due to insufficient oil return

PHYSICAL DATA

UNIT SIZE SERIES	24-31	36-31	48-31	60-30
Operating Weight lb (kg)	183 (83.0)	216 (98.0)	277 (125.6)	316 (143)
Shipping Weight lb (kg)	222 (100.7)	255 (115.7)	318 (144.2)	373 (169)
Compressor Type	Ultratech 2-Stage Scroll			
REFRIGERANT	Puron® (R-410A)			
Control	TXV (Puron Hard Shutoff)			
Charge lb (kg)	6.64 (3.01)	9.26 (4.20)	12.94 (5.87)	15.13 (6.86)
COND FAN	Propeller Type, Direct Drive			
Air Discharge	Vertical			
Air Qty (CFM)	2481	3068	4700	4450
Motor HP	1/12	1/10	1/4	1/4
Motor RPM	800	825	825	800
COND COIL				
Face Area (Sq ft)	19.38	19.38	25.12	30.18
Fins per In.	25	20	20	20
Rows	1	2	2	2
Circuits	5	7	7	8
VALVE CONNECT. (In. ID)				
Vapor	3/4	7/8	7/8	7/8
Liquid	3/8			
REFRIGERANT TUBES (In. OD)				
Rated Vapor*	3/4	7/8	1-1/8	1-1/8
Liquid	3/8			

*Units are rated with 25 ft (7.6 m) of lineset length. See Vapor Line Sizing and Cooling Capacity Loss table when using other sizes and lengths of lineset.



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2013.

Certificate of Product Ratings

AHRI Certified Reference Number: 6937619

Date: 10/30/2014

Product: Split System: Air-Cooled Condensing Unit, Coil with Blower

Outdoor Unit Model Number: 24ACB748A**31

Indoor Unit Model Number: FV4CN(B,F)005L

Manufacturer: CARRIER AIR CONDITIONING

Trade/Brand name: CARRIER

Series name: PERFORMANCE SERIES PURON AC

Manufacturer responsible for the rating of this system combination is CARRIER AIR CONDITIONING

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

Cooling Capacity (Btuh):	48000
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.50
IEER Rating (Cooling):	

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

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we make life better™

CERTIFICATE NO.:

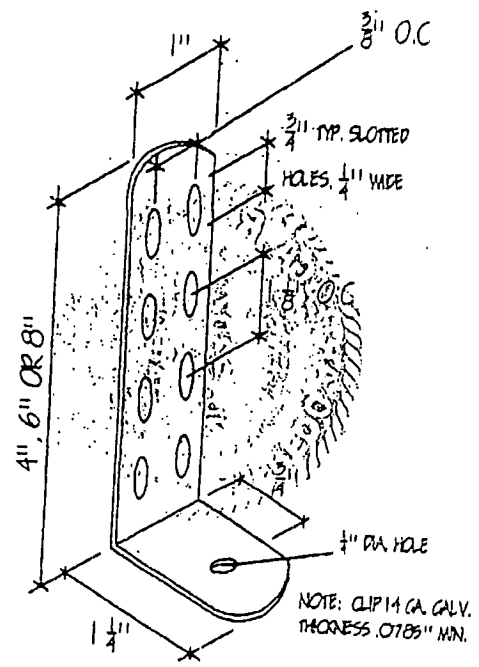
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ALFREDO ARTEAGA JR. & ASSOC. INC
 ENGINEERING CONSULTANTS
 CA 3886
 850 W. 68 ST. MIAMI, FLORIDA #33014
 305 - 828 - 7876

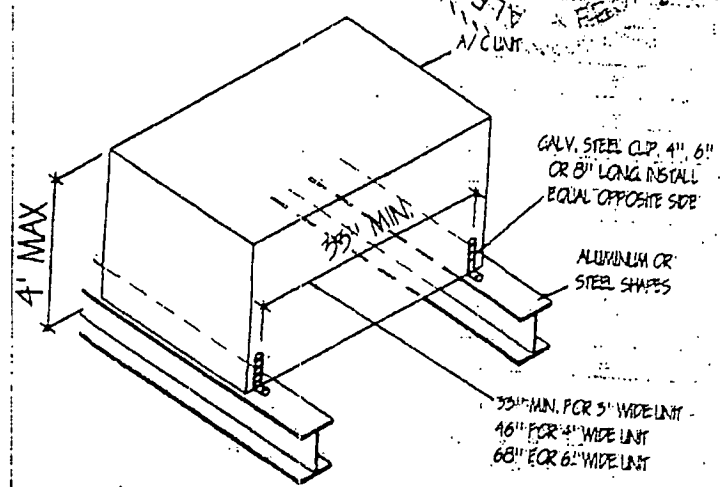
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 BY: BMP INTERNATIONAL INC.
 INSTALLATION DRAWING**

DATE: 1-28-10 1 of 2
 SEE REVERSE SIDE FOR ADDITIONAL INFORMATION

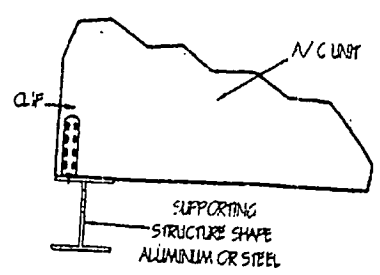
ALFREDO ARTEAGA JR. P.E.
 FLA. REG. NO. 38070 DATE: 2.3.10



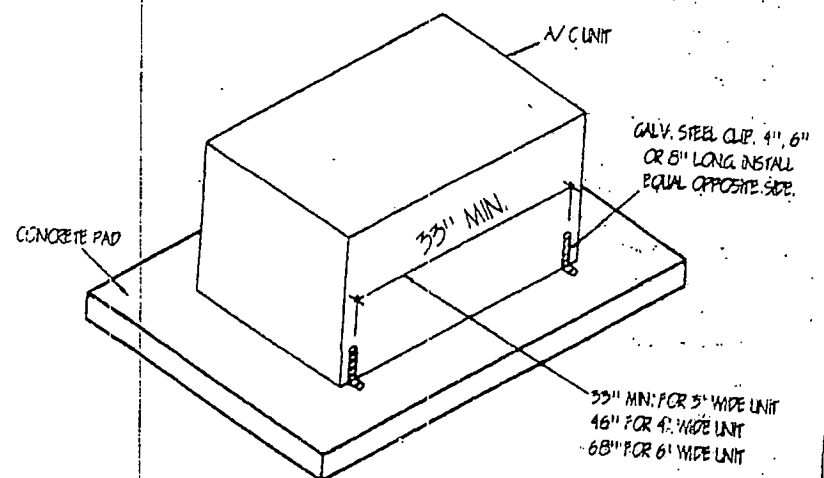
CLIP CONSTRUCTION DETAIL
 N.T.S.



ISOMETRIC A/C UNIT ON
 ELEVATED STRUCTURE
 N.T.S.



ELEVATION SKETCH
 N.T.S.



ISOMETRIC A/C UNIT ON GROUND OR
 ELEVATED CONCRETE
 N.T.S.

TABLE OF CLIP ATTACHMENT SUPPORTING STRUCTURE OR A/C UNIT (146 MPH)			
HEIGHT ABOVE GROUND FT.	NUMBER OF SCREWS TO HOUSING OF A/C. GALV. NO. 14 SELF DRILLING	TAPCON TO CONCRETE 1/2" DIA. X 2" LONG	GALV. SCREW SELF DRILLING TO ALUM. RACK SUPPORT 1/2" DIA. X 1 1/2"
15'	2	1	1
20'	2	1	1
25'	2	1	1
30'	2	1	1
40'	2	1	1
50'	2	1	1
60'	3	1	1
70'	3	1	1
80'	3	1	1
90'	3	1	1

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DATE: 1-28-10 2 of 2
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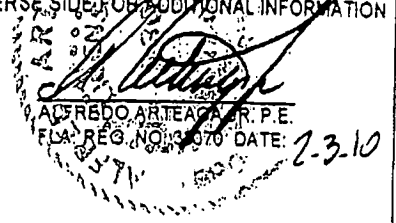


TABLE OF CLIP ATTACHMENT SUPPORTING STRUCTURE OR A/C UNIT (155 MPH)			
HEIGHT ABOVE GROUND FT.	NUMBER OF SCREWS TO HOUSING OF A/C. GALV. NO. 14 SELF DRILLING	TAPCON TO CONCRETE 1/2" DIA. X 2" LONG	GALV. SCREW SELF DRILLING TO ALUM. RACK SUPPORT 1/2" DIA. X 1 1/2"
15'	2	1	1
20'	2	1	1
25'	2	1	1
30'	2	1	1
40'	3	1	1
50'	3	1	1
60'	3	1	NO
70'	3	1	NO
80'	3	1	NO
90'	3	1	NO

- NOTES: 1) FOR STEEL SUPPORTING STRUCTURES, USE SELF DRILLING GALVANIZED 1/2" DIA. SCREWS X 1 1/2" LONG AS FOR ALUMINUM RACKS.
 2) SPACING OF SCREWS IN A/C HOUSING SHALL BE A MIN. OF 1".
 3) STAINLESS STEEL SCREWS MAY BE USED WHERE REQUIRED BY GOVERNING AGENCY.

GENERAL NOTES:

- DESIGN CALCULATIONS WERE BASED ON THE FLORIDA BUILDING CODE 2007 EDITION WITH 2009 AMENDMENTS AND ASCE 7-05 CHAPTER 6 FOR WIND LOADS AND VELOCITIES OF 146 MPH AND 155 MPH. IMPORTANCE FACTOR USED IN THE DESIGN IS 1.0, EXPOSURE C AS CRITICAL.
- A/C UNIT MAXIMUM SIZE TO BE 3 FT. WIDE X 4 FT. HIGH AND A MAXIMUM WEIGHT OF 150 POUNDS FOR COUNTERACTING WEIGHT OR 4' X 4' X 4' HIGH.
- MOUNTING HEIGHT OF UNIT AS TO TABLES INDICATES TOP OF UNIT.
- ALL SCREWS USED IN ATTACHING CLIP SHALL BE GALVANIZED A307, BE SELF DRILLING WITH A MINIMUM HEAD DIAMETER OF .3125 INCHES. SCREWS SHALL BE DRILLED TIGHT, NOT OVER TIGHTENED AND BE 1/2 INCH DIAMETER AND 1 1/2 INCH LONG FOR CLIP TO SUPPORTING STRUCTURE OR NO. 14 SELF DRILLING AND 1 INCH LONG FOR ATTACHMENT TO HOUSING.
- TAPCONS USED IN ATTACHING CLIP BOTTOM TO CONCRETE SHALL BE PRODUCT APPROVED, WITH A RATED TENSILE STRENGTH OF 460 POUNDS INTO 2700 PSI MIN. COMPRESSIVE STRENGTH CONCRETE. ALL TAPCONS SHALL BE EMBEDDED A MINIMUM OF 1 INCH INTO CONCRETE.
- INSTALLATION OF SCREWS INTO HOUSING OF UNIT SHALL BE WITH A MINIMUM SPACING OF 1 INCH. ALL SHALL BE INSTALLED ON THE TOP END OF THE SLOTTED HOLES, WHERE POSSIBLE.
- ALL SCREWS AT THE BOTTOM OF THE CLIP ATTACHMENT TO SUPPORTING STRUCTURE SHALL HAVE WASHERS OF 14G OR THICKER GALVANIZED STEEL WITH A MIN. YIELD STRENGTH OF 33 KSI. AND BE AT LEAST 1/2 INCH DIAMETER, FOR 155 MPH WIND VELOCITY.
- STEEL USED IN THE MANUFACTURE OF THE CLIPS SHALL HAVE A MINIMUM YIELD STRENGTH OF 33 KSI, BE GALVANIZED IN ACCORDANCE WITH ASTM G90 AFTER FABRICATION.
- SUPPORTING ALUMINUM STRUCTURE BEAMS SHALL BE OF 6061 T6 ALLOY FOR THE SCREW CAPACITY TO APPLY.
- THIS DRAWING WAS PREPARED BY ALFREDO ARTEAGA JR. AND ASSOCIATES CORP., ALFREDO ARTEAGA JR. P.E., 850 WEST 68TH STREET, HIALEAH, FLORIDA 33014, CA3888 AND REG. NO. 33070. ALL PARTS OF THIS DRAWING MUST BE USED IN DETERMINING CONNECTIONS TO BE UTILIZED. USE OF THESE SPECIFICATIONS BY THE CONTRACTOR INDICATES HE OR SHE HAS UNDERSTOOD ALL PARTS AND HOLDS HARMLESS THE ENGINEER FOR ANY ERRORS DUE TO IMPROPER USE. FURTHERMORE, THE ENGINEER IS NOT RESPONSIBLE FOR THE FABRICATION OF THE HOLD DOWN CLIP NOR THE COMPONENTS USED IN ITS INSTALLATION, ANY DEVIATION FROM THESE SPECIFICATIONS OR DETAILS IS STRICTLY PROHIBITED UNLESS PRIOR APPROVAL IS RECEIVED FROM THE ENGINEER, IN WRITING, NO ADDITIONAL CERTIFICATIONS ARE MADE OR IMPLIED BY THESE SPECIFICATIONS OR DRAWING.
- UNIT SIZE MAY INCREASE TO 6' X 6' X 6' HIGH AND DOUBLE CLIPS SHALL BE USED EACH CORNER WITH SAME CONNECTORS AS SMALLER UNITS, HOWEVER, MAY NOT BE HIGHER THAN 15' FROM GRADE.
- WHEN UNIT IS SUPPORTED BY WOOD, SCREW USED AT THE BOTTOM OF THE CLIP MUST BE SIZE 10G AND BE AT LEAST 1 1/2" LONG.
- SIZE NO. 12 GALVANIZED SELF DRILLING SCREWS MAY BE USED ON UNITS WHICH ARE INSTALLED NO HIGHER THAN 40' FROM GRADE AND ONLY FOR 146 MPH OR LESS WIND VELOCITY ZONE.

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

generated on 11/5/2014 2:39:04 PM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-009-000-00130-6	17753	5 MIRAMAR RD, SEWALL'S POINT	\$332,460	11/1/2014

Owner Information

Owner(Current)	BYRNE ALFRED J JR
Owner/Mail Address	5 MIRAMAR RD STUART FL 34996
Sale Date	5/14/2014
Document Book/Page	<u>2717 2937</u>
Document No.	2455264
Sale Price	327000

Location/Description

Account #	17753	Map Page No.	SP-03
Tax District	2200	Legal Description	MIRAMAR LOT 13
Parcel Address	5 MIRAMAR RD, SEWALL'S POINT		
Acres	.3440		

Parcel Type

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

Assessment Information

Market Land Value	\$150,000
Market Improvement Value	\$182,460
Market Total Value	\$332,460

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection Mon Tue Wed Thur Fri 3/12/15 Page 1 of 2

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	COMMENTS
11073	Byrne			
AM requested	5 Miramar Rd Seacoast A/c	A/c Final	Pass	11073
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11147	Darrow 7 Oak Hill Way Pools by Gres	Rough-in Plumbing	Pass	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
10934	Fabricey 6 Oak Hill Way Seagate Builders	Gas Tank	Pass	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11179	Alteslaben 7 N River Rd Independent Contractors	FOOTER/ Slab	Pass	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
10680	Winslow 10 S Sewalls Pt Rd Green Building	Partial Lath	Pass	
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11073	Ihle 121 Hillcrest Drive Pioneer Screen	Final Screen Enclosure	Pass	Close
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSEPECTION TYPE	RESULTS	INSPECTOR COMMENTS
11127	Armstrong 82 S Sewalls Pt Rd Seagate Builders	Second Floor Slab	Pass	
				INSPECTOR

TREE



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

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

CALL 8:00 AM - 12:00 NOON FOR INSPECTION - WORK HOURS 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner ALFRED J.T. BYRNE Address 5 MIRAMAR RD Phone 912-220-8510
 Contractor OUT ON A LIMB Address 964 NW 12TH TERR Phone 772-631-6211
 (JASON MOORE) STUART, FL 34994
 No. of Trees: REMOVE 1 Species: ROBELLINIS
 No. of Trees: RELOCATE 0 Species: N/A
 No. of Trees: REPLACE 0 Species: N/A

ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

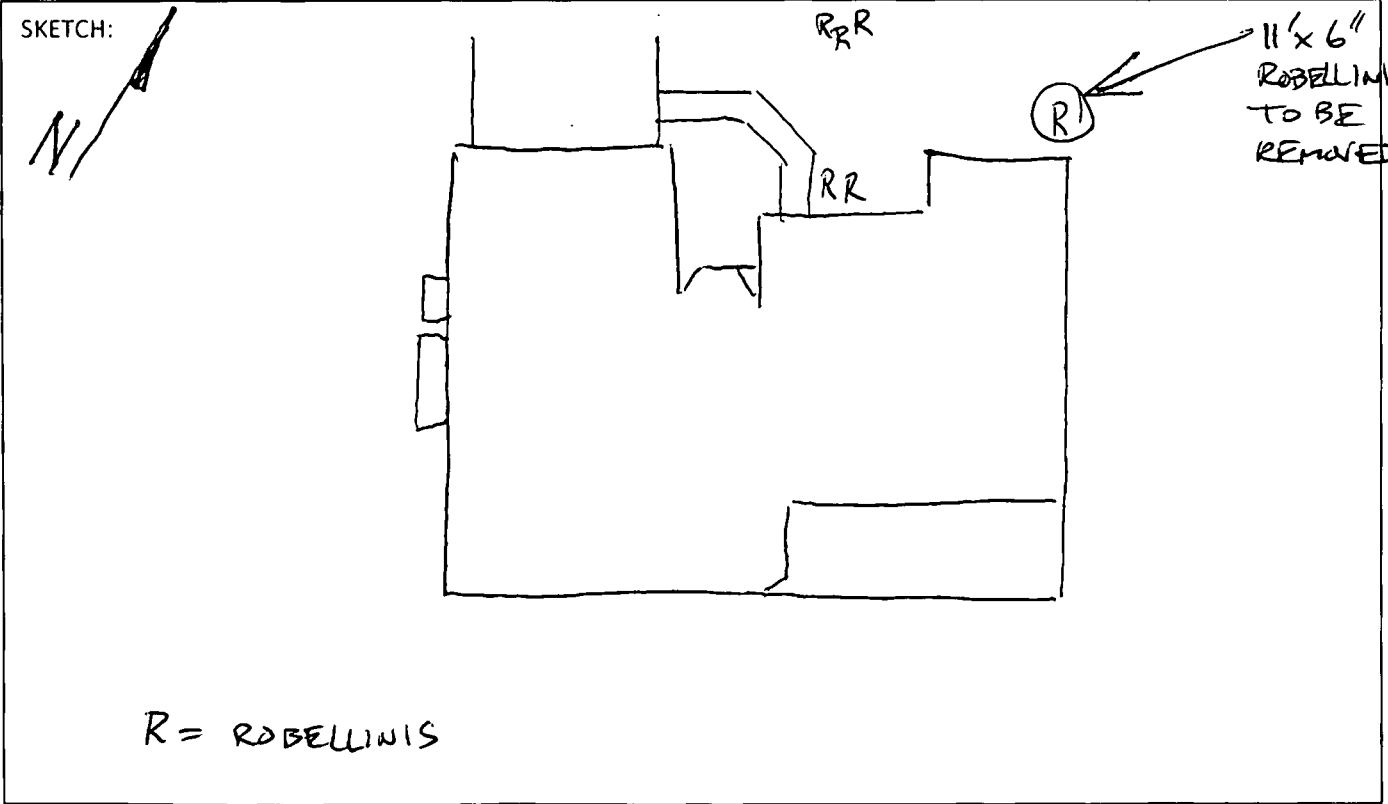
Reason for tree removal /relocation (See notice above) ROBELLINIS PALM IS
DISEASED WITH "GAMA PERMA"

Signature of Property Owner [Signature] Date 08/19/2014

Approved by Building Inspector: [Signature] Date 8-19-14 Fee: N/C

NOTES: DEAD

← 5 MIRAMAR RD →



425

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # _____

Date Issued _____

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

Owner R. L. WEST Address 4115 SW 72 DR Palm Phone 281-5294

Contractor owner Address _____ Phone _____

Number of trees to be removed (list kinds of trees) 10 same 5 oak trees and 5 Palm trees

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

Number of trees to be replaced within 30 days (list kinds of trees) _____

Permit Fee: \$ 15.00 (\$5. for first tree plus \$1. for each additional tree - not to exceed \$25.)

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

Plans approved as submitted _____ Plans approved as marked _____

Permit good for one year. Fee for renewal of expired permit \$5.

Signature of applicant R. L. West Date submitted _____

Approved by Building Inspector Dale Brown Date 9/19/88

Approved by Building Commissioner _____ Date _____

Completed 9-19-88
Date Checked by

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

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