

7 Miramar Road

2386

SFR

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

OWNER R.L. & I.Y. West
CONTRACTOR owner
LOT 14 BLOCK 7 SUB Miramar
NO. 7 Miramar Road St. or Ave.

TOWN OF SEWALL'S POINT BUILDING PERMIT

DO NOT REMOVE UNTIL JOB IS COMPLETED

NO. 2386 Date Issued 8-31-88

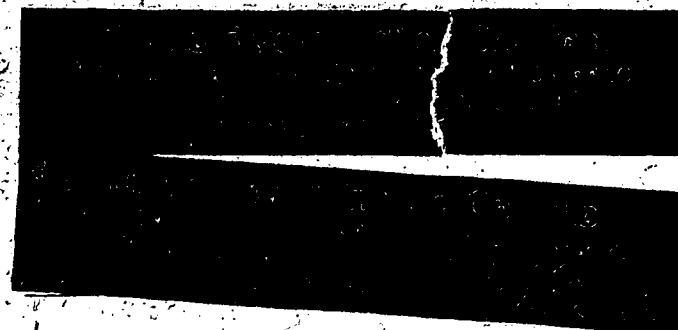
Call 287-2455 From 8:00 A.M. - 12:00 Noon and
1:00 P.M. - 4:00 P.M. For Inspections of Items 1 thru 13.

- * 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 LATEST FLOOD INSURANCE RATE MAP.
- * WORKING HOURS ARE FROM 8:00 to 5:00 P.M. MONDAY THRU SATURDAY. PORTABLE TOILET FACILITIES MUST BE ON JOB SITE BEFORE INITIAL INSPECTION.

INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1. KICK SET BACKS		
2. EROSION PROTECTION	<u>OK 11/18/88</u>	
3. FOOTING - SLAB	<u>OK 11/14/88</u>	<u>DB</u>
4. ROUGH PLUMBING	<u>OK 11/8/88</u>	<u>Walle</u>
5. ROUGH ELECTRIC	<u>OK 11/20</u>	<u>dale</u>
6. LINTEL	<u>OK 12/2</u>	<u>De</u>
7. ROOF	<u>OK 2/2/99</u>	<u>DB</u>
8. FRAMING	<u>OK 11/20</u>	<u>dale</u>
9. INSULATION	<u>OK 2/10/99</u>	<u>DB</u>
10. A/C DUCTS	<u>OK 1/20</u>	<u>dale</u>
11. FINAL ELECTRIC		
12. FINAL PLUMBING		
13. FINAL CONSTRUCTION		

TO CONSTRUCT residence

REMARKS:



PERMIT NUMBER #2386 DATE OF APPLICATION 8-29-88

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.
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 I. Yo. WEST R. L. WEST Current Address _____
Telephone 287-5294

General Contractor Owner Address _____
Telephone _____

Where Licensed _____ License Number _____

Plumbing Contractor _____ License Number _____

Electrical Contractor _____ License Number _____

Roofing Contractor _____ License Number _____

A/C Contractor _____ License Number _____

Describe the building or alterations _____

Name the street on which the building, its front building line and its front yard will face 7 Mirimar Road

Subdivision Mirimar Road Lot 14 Block 7

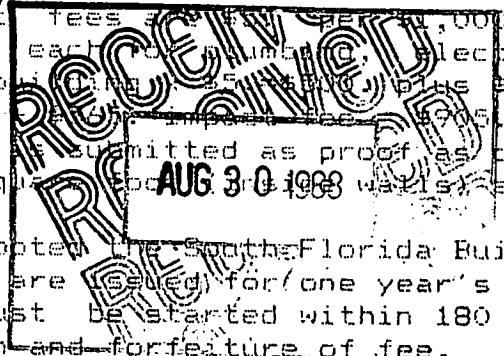
Building area (inside walls) 2075 Garage, porch, carport area 628

Contract price (including carpet, land, appliances, landscaping) \$ 90,000.00

Cost of permit ~~\$405~~ \$7045 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 \$10.00 per \$1,000 of the cost of the building, plus \$10. each for plumbing, electric, a.c. and roof. For example a \$100,000. building (\$100,000 / \$10,000) plus \$40. (a.c., pl., el., roof) = \$540. cost of permit = \$540. total = \$905.
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).



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. Certification by a qualified engineer or architect of the structural adequacy of the building.

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 I. Yo. West Owner's Signature I. Yo. West

Approval by Building Inspector [Signature] Date 8/31/88

Approval by Building Commissioner [Signature] Date 9/1/88

Certificate of Occupancy issued _____ Date _____

2386



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

F56

APPLICATION FOR ONSITE SEWAGE DISPOSAL SYSTEM

PERMIT NUMBER HD 88-514 HOME PHONE 287-5294
 NAME OF APPLICANT RICHARD & I. Yo. WEST WORK PHONE ---
 MAILING ADDRESS OF APPLICANT 4115 SW 72nd DRIVE
STUART, FLA. ZIP CODE 33497
 LOT 14 BLOCK --- SUBDIVISION MIRIMAR
 IF NOT SUBDIVIDED, ATTACH A COMPLETE LEGAL DESCRIPTION
 PLAT BOOK 3 PAGE III DATE SUBDIVIDED APRIL 6 1959
 RESIDENTIAL: NUMBER DWELLING UNITS 1 NUMBER BEDROOMS 3
 LOT SIZE 15,000.33 FT² HEATED OR COOLED AREA OF HOME 2075 FT²
 COMMERCIAL: TYPE OF BUSINESS PROPOSED N/A
 BUILDING SIZE N/A FT²

-----AFFIDAVIT-----

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

SIGNATURE OF PROPERTY OWNER OR OWNER'S LEGALLY AUTHORIZED REPRESENTATIVE

Richard J West

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

SEPTIC TANK CAPACITY 900 GALLONS
 DRAINFIELD SIZE 300 SQUARE FEET
 DRAINFIELD ROCK MUST BE 5 FEET FROM FRONT OR REAR PROPERTY LINES
 AND 5 FEET FROM SIDE PROPERTY LINES. EXCAVATION CAN NOT EXTEND MORE THAN FIVE FEET FROM APPROVED INSTALLATION AREA.

TOP OF BUILDING STUB OUT IS REQUIRED TO BE A MINIMUM ELAVATION OF * NOT TO
FINISH SOIL GRADE Exceed 18" of Cover.

ISSUED BY: Robert B. Woodman, RS. DATE 8.24.88
 MARTIN COUNTY PUBLIC HEALTH UNIT

PLEASE NOTE:

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

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

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

AN APPROVED SYSTEM DOES NOT GUARANTEE PERFORMANCE



APPLICANT RICHARD & I. VO WEST
LEGAL DESCRIPTION LOT 14 MIRIMAR

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

1. IS THERE A SEPTIC SYSTEM OR OTHER INTERFERENCE WITHIN 75 FEET OF THE PROPOSED PRIVATE WELL? No
2. IS THERE A POTABLE PRIVATE WELL WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? No
3. IS THERE AN IRRIGATION WELL WITHIN 50 FEET OF THE AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? No
4. IS THERE A PUBLIC WELL THAT SERVES LESS THAN 25 PEOPLE OR LESS THAN 15 HOMES WITHIN 100 FEET OF THE PROPOSED SEPTIC SYSTEM? No
5. IS THERE A PUBLIC WELL WHICH SERVES MORE THAN 25 PEOPLE OR MORE THAN 15 HOMES WITHIN 200 FEET OF THE PROPOSED SEPTIC SYSTEM? No
6. IS THERE A GRAVITY SEWER LINE OR LIFT STATION WITHIN 100 FEET OF THE PROPOSED LOT? No
7. IS THERE A LAKE, STREAM, WETLAND, OR SURFACE WATER WITHIN 75 FEET OF THE PROPOSED AVAILABLE AREA FOR THE PROPOSED SEPTIC SYSTEM? No
8. IS THERE A PROPOSED OR EXISTING PUBLIC DRINKING WATER LINE WITHIN 10 FEET OF THE PROPOSED SEPTIC SYSTEM? No
9. IS THERE A STORM WATER RETENTION AREA OR DRAINAGE EASEMENT WITHIN 15 FEET OF THE PROPOSED SEPTIC SYSTEM? No
10. IS THE SEPTIC SYSTEM IN AN AREA PROPOSED FOR PAVING OR VEHICULAR TRAFFIC? No
11. ARE ALL PRIVATE WELLS, SEPTIC SYSTEMS AND SURFACE WATER ON ADJACENT OR CONTIGUOUS LAND WITHIN 75 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? Yes
12. ARE ALL PUBLIC WELLS WITHIN 200 FEET OF THE APPLICANT'S LOT, IF PRESENT, SHOWN ON PLOT PLAN? Yes
13. DOES THE PLOT PLAN INCLUDE A PLAT OF THE LOT OR TOTAL SITE OWNERSHIP DRAWN TO SCALE, BOUNDARIES WITH DIMENSIONS, LOCATIONS OF BUILDING OR RESIDENCES, SWIMMING POOLS, RECORDED EASEMENTS, THE PROPOSED SEPTIC SYSTEM, ANY PROPOSED OR EXISTING WELLS, PUBLIC WATER LINES, PAVED AREAS OR DRIVEWAYS, AND SURFACE WATERS SUCH AS LAKES, PONDS, STREAMS, CANALS, OR WETLANDS? Yes
14. THERE IS 2,300+ 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 8.04 NGVD SHOW LOCATION ON PLOT PLAN. IF ROAD IS NOT PAVED, BENCHMARK ELEVATION _____ NGVD SHOW LOCATION ON PLOT PLAN.
2. NATURAL GRADE ELEVATION IN AREA OF PROPOSED SEPTIC SYSTEM 7.89 NGVD SHOW LOCATION ON PLOT PLAN.
2. IS BUILDING LOCATED IN FLOOD HAZARD AREA "A" OR "V" AS IDENTIFIED ON FEMA MAPS? No B IF YES, WHAT IS THE MINIMUM REQUIRED FLOOD HAZARD FLOOR ELEVATION OF BUILDING? _____ NGVD.

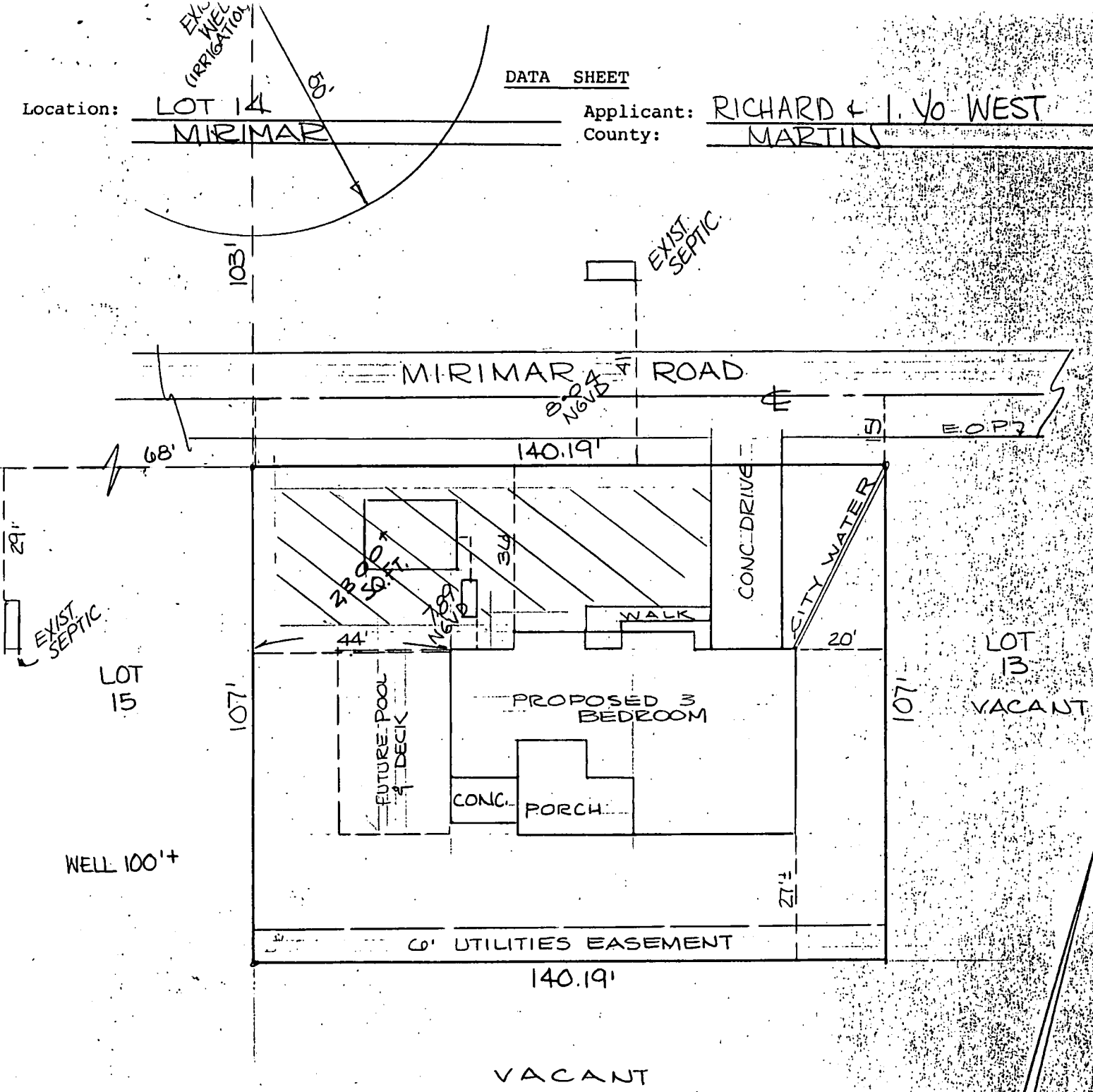
NOTE: MUST BE CERTIFIED BY A FLORIDA REGISTERED SURVEYOR OF ENGINEER.

CERTIFIED BY: [Signature]
FL. PROFESSIONAL NO. 1272
DATE: 8-18-88 JOB NO. _____

DATA SHEET

Location: LOT 14
MIRIMAR

Applicant: RICHARD & I. VO WEST
County: MARTIN



Certified By: W. H. Williams
 Florida Professional No.: 1272
 Date: 8-18-88
 Field Book: 232 Page: 11
 Work Order No.: _____
 Sheet 3 of 3

Plan
 Scale 1" = 30'

R
CIE

ST LUCIE BUILDING CONDO

C KENNEDY

RIVER ROAD

NORTH LINE ARBELA SID

L. F. KNOWLES

COPAIRE ROAD

ZWELDDY HILL

AMBERGE

MARTIN WATER UTILITIES

2
L.S.A.
RUISE WASHINGTON

L.F. KNOWLES

MIRANAR

18

17

16

15

14

13

12

11

10

9

10

470

SEWALL'S POINT ROAD

INDIAN RIVER



ASSESS
MARTIN
FLO

SCALE 1" = 1'

SE
REC
TOW
MAP
\$P-3-

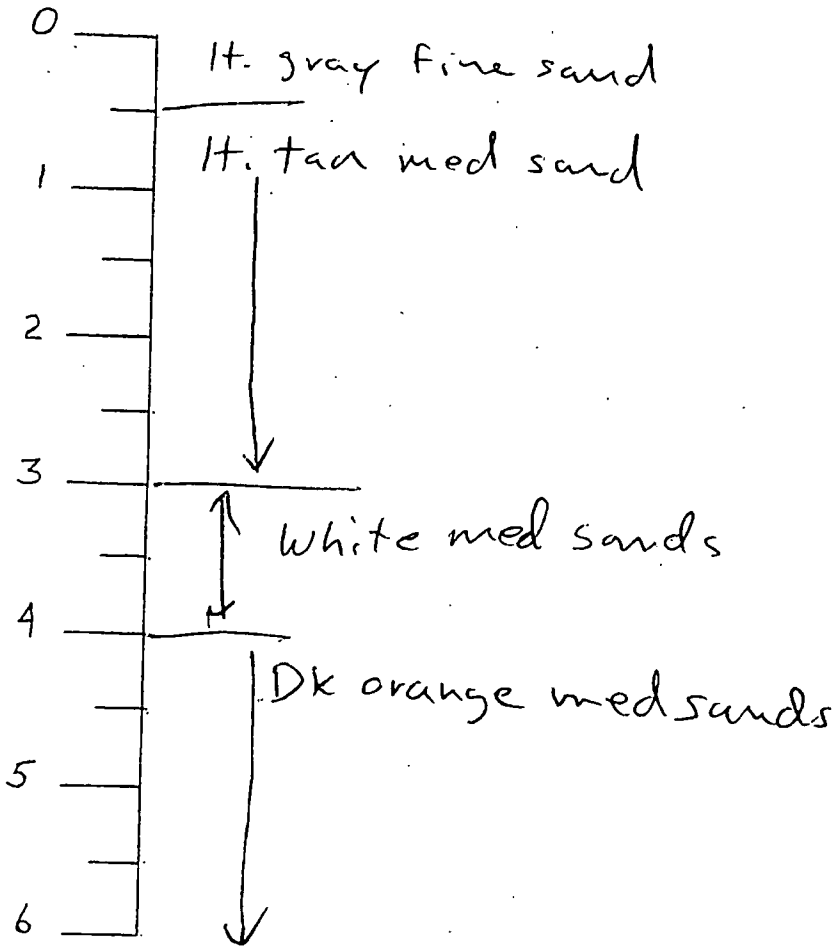
MARTIN COUNTY PUBLIC HEALTH UNIT
131 East 7th Street
Stuart, Florida 33497
287-2277

SITE EVALUATION

APPLICANT: Richard E. I. yo. West.

LEGAL DESCRIPTION: Lot 14 Mirimar

SOIL PROFILE



USDA SOIL TYPE Paola

USDA SOIL NUMBER #6

No Impervious soils are present at 6' feet below natural grade.

Present Water Depth Below Natural Grade 76' Feet.

Wet Season Range Per Soil Survey 6' Feet.

Estimated Wet Season Water Depth Below Natural Grade 6' Feet.

Indicator Vegetation Present live oak, scrub oak, cacti

Is Benchmark Located on Plot Plan and Present on Site? Yes.

Approximate Amount of Fill on Neighboring Lots 0 -> 1'

Other Findings: Sand ridge

EVALUATION BY: Keith Fevris

DATE: 8-22-84

This Warranty Deed Made the 29th day of April A. D. 1986 by
600354 JAMES B. CHAMBERS, JR. and MARY R. CHAMBERS, husband and wife

hereinafter called the grantor, to

RICHARD L. WEST and I YO WEST, husband and wife

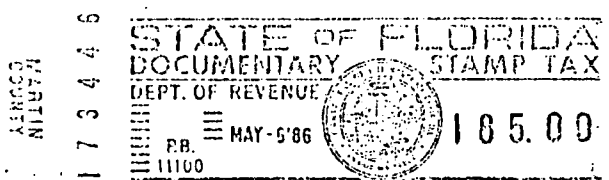
whose postoffice address is 4115 S.W. 72nd Drive, Stuart, FL 33497
hereinafter called the grantee:

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

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

Lot 14, MIRAMAR, according to plat thereof appearing in Plat Book 3, Page 111, Martin County, Florida public records.

Subject to easements, restrictions and zoning of record.



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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 1985.

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

Signed, sealed and delivered in our presence:

Lerna M. Hall
Patricia A. ...

X *James B. Chambers, Jr.* L.S.
X *Mary R. Chambers* L.S.
Mary R. Chambers

STATE OF *Massachusetts*
COUNTY OF *Middlesex*

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

James B. Chambers, Jr. and Mary R. Chambers,
husband and wife

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

WITNESS my hand and official seal in the County and State last aforesaid this 29th day of
april, A. D. 1986

J. Gerald Richards

This instrument prepared by:
Address

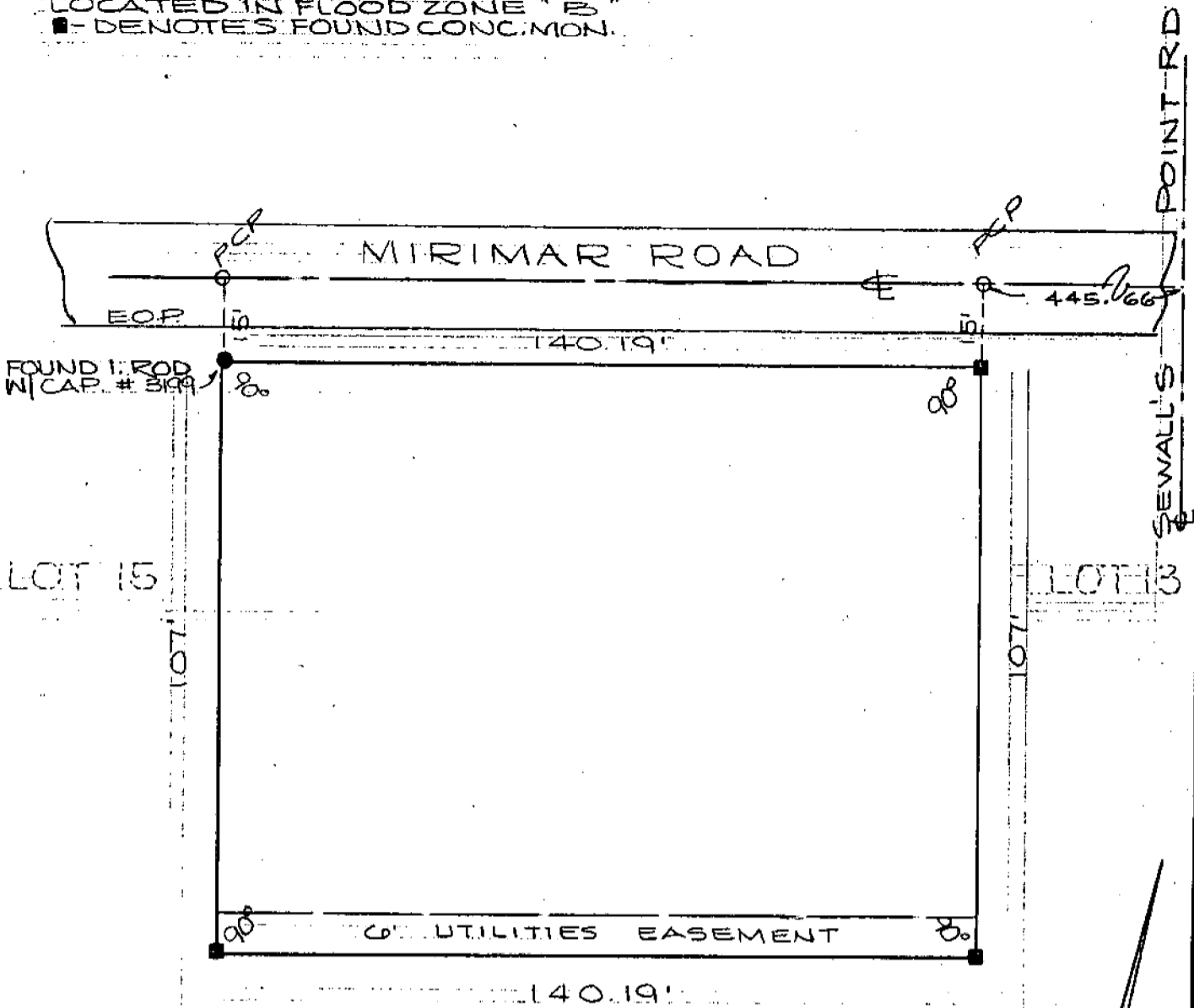
The instrument was prepared by
ONE AND THE SAME,
Honey ...
555 COLORADO AVE. SUITE 4
STUART, FLORIDA 33497

SPACE BELOW FOR RECORDERS USE

D.R. BOOK 673 PAGE 1531

MAY 6 P 1:22

CITY WATER
 LOCATED IN FLOOD ZONE "B"
 ■ - DENOTES FOUND CONC. MON.



A BOUNDARY SURVEY OF

LOT 14

MIRIMAR

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

for

RICHARD & I. YOHNST.

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

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

W.L. Williams
 W.L. WILLIAMS
 R.L.S. FLA. REG. No. 1272

F.B. 230 Page 79 W.O. # 1061

SCALE: 1" = 30'	DATE: 8-18-88	PLAT BOOK: 3	PAGE: 111
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MARTIN COUNTY PUBLIC HEALTH UNIT
131 East 7th Street
Stuart, Florida, 34997
287-2277

STUBOUT ELEVATION AND EXCAVATION CERTIFICATION

APPLICANT: Richard West
LEGAL DESCRIPTION: Lot 14 Miramar
SEPTIC TANK PERMIT NUMBER: HD 88-514

The items noted below must be certified by a surveyor or engineer and returned to the Health Department prior to the first plumbing inspection by the Building Department.

- X 1. Building Permit Number: _____.
- ___ 2. I certify that the elevation of the top of the lowest plumbing stubout is _____ inches above benchmark elevation as indicated on septic tank permit.
- ___ 3. I certify that the top of the lowest building plumbing stubout is _____ inches above crown of road elevation shown on septic tank permit.
- ___ 4. I certify that all severe limited soil has been removed from an area of _____ feet by _____ feet to a minimum depth of six (6) feet below top of required stubout elevation. Submit plot plan to scale of excavated area.

Date Observed: _____

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

CERTIFIED BY: _____

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

Date: _____ Job Number: _____

Richard West
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY

(Signature of Environmental Health Specialist) (Date)



Ardaman & Associates, Inc.

P.O. BOX 8687
Port St. Lucie, Florida 34985
(305) 337-1200

B.P. #2385
Sewalls Point

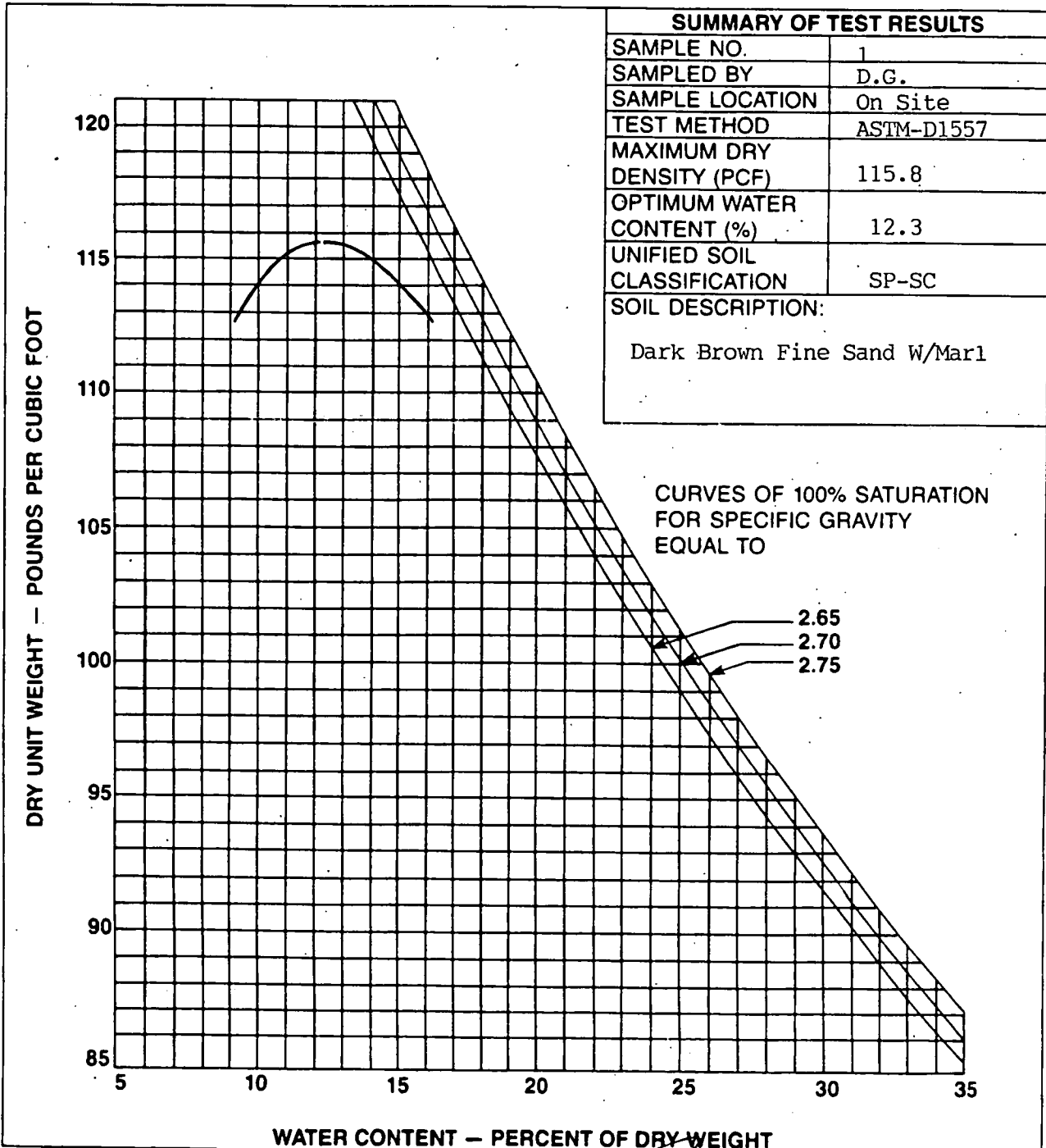


MOISTURE - DENSITY RELATIONSHIP

PROJECT: Mrs. West
7 Miramar Road
REPORTED TO: Mrs. West

FILE NO.: 88-5610 Report #1

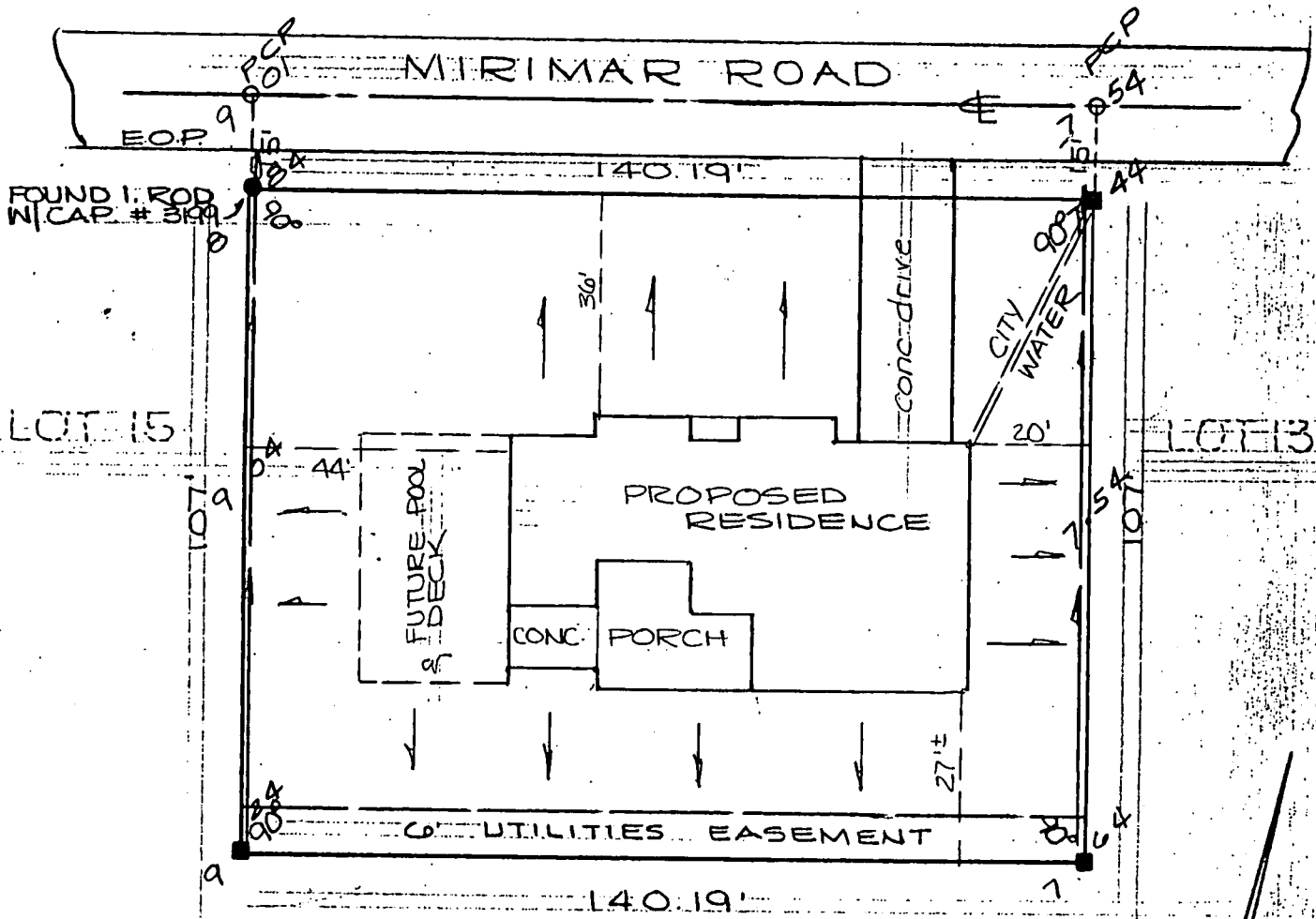
DATE: October 28, 1988



FORM 407 (Rev. 4/86)

By *[Signature]*

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



A DRAINAGE PLAN OF
LOT 14
MIRIMAR

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

for
RICHARD & I. YO WEST.

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

DON WILLIAMS & ASSOCIATES, INC.
LAND SURVEYORS
1115 E. OCEAN BLVD. STUART, FLA. 34996
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W.L. Williams
W.L. WILLIAMS
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F.B. 230 Page 79		W.O. # 1061	

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CERTIFIED BY: _____

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

Date: _____ Job Number: _____

[Signature]
(Signature)

FOR MARTIN COUNTY PUBLIC HEALTH UNIT USE ONLY
131 E. 7th Street
Phone 287-2277 • Stuart, FL 34994

(Signature of Environmental Health Specialist)

8/31/88
(Date)

TOWN OF SEWALL'S POINT, FLORIDA
CERTIFICATE OF APPROVAL FOR OCCUPANCY

RECORD OF INSPECTIONS



Date 6/5/89

This is to request a Certificate of Approval for Occupancy to be issued to R.L. + I.Y. West for a structure built under Permit # 2386
(Owner of Property)

Subdivision Miramar Lot 14 Street Address 7 Miramar Road
when completed in conformance with the approved plans.

Signed (Owner)

1. Lot Stakes/Set Backs _____
2. Termite Protection 11/11/88
3. Footing - Slab 11/14/88 DB
4. Rough Plumbing 11/8/88 DB
5. Rough Electric 1/20/89 delc
6. Lintel 12/2/88 delc
7. Roof 2/2/89 DB
8. Framing 1/20/89 delc
9. Insulation 2/6/89 DB
10. A/C Ducts 1/20/89 delc
11. Final Electric 6/5/89 DB
12. Final Plumbing 6/5/89 DB
13. Final Construction 6/5/89 DB

Final Inspection for Issuance of Certificate of Occupancy.

Approved by Building Inspector DB 6/5/89 date

Approved by Building Commissioner delc date

Utilities notified F.P.L. 6/6/89 date

Distribution:

original - owner

copies - Town Building Inspector, Deputy Clerk

6/6/89
1

2821

FENCE

Permit No. _____

Date _____

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

2821

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

Owner R. L. WEST present Address same

Phone 286 2581

Contractor owner Address _____

Phone _____

Where licensed _____ License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

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

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

7 MIRAMAR SE Walk Point FL 34996

Subdivision M MIRAMAR Lot number 14 Block number _____

Contract price \$ 300 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor owner

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

Owner R. L. West

TOWN RECORD

Date submitted _____ Approved: Dale Brown Building Inspector _____ Date _____

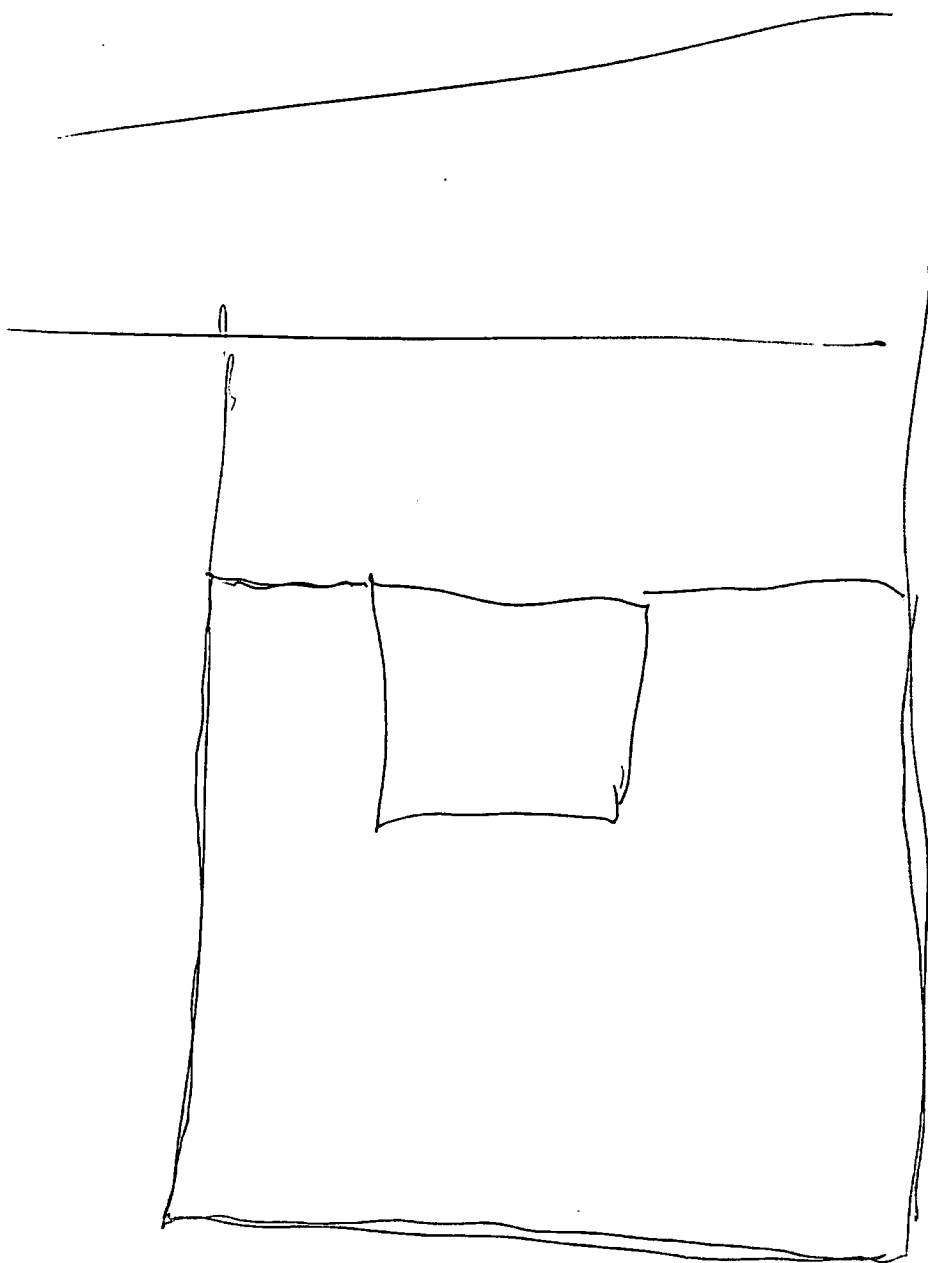
Approved: _____ Commissioner Date _____ Final Approval given: _____ Date _____

Certificate of Occupancy issued (if applicable) _____ Date _____

SP1282

Permit No. _____

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



4263

POOL

&

SCREEN ENCLOSURE

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9 / 29 / 97 BUILDING PERMIT NO. 4263
 Building to be erected for ANTHONY & ANDREA PIZZO Type of Permit Sw. Pool
 Applied for by INDIAN RIVER POOLS, INC. (Contractor) Building Fee _____
 Subdivision MIRAMAR Lot 14 Block _____ Radon Fee _____
 Address 7 SE MIRAMAR Rd. Impact Fee _____
 Type of structure Sw. Pool A/C Fee _____
 Electrical Fee _____
 Parcel Control Number: Plumbing Fee _____
13841009000661404000 Roofing Fee _____
 Amount Paid 200 Check # _____ Cash _____ Other Fees (POOL) 200
 Total Construction Cost \$ 19,000 TOTAL Fees 200

Signed Richard [Signature]
Applicant

Signed [Signature]
Town Building Inspector

4263

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):

GENERAL DESCRIPTION OF IMPROVEMENT: SWIMMING POOL, PATIO, SCREEN

OWNER: ANTHONY + ANDREA PIZZO

ADDRESS: 7 SE MIRAMAR RD

PHONE #: 781-1379

FAX #: _____

CONTRACTOR: INDIAN RIVER POOLS INC

ADDRESS: 540 CAMELIA LAKE UTO BEACH, FLA 32963

PHONE #: 561-234-5599

FAX #: _____

SURETY COMPANY(IF ANY) _____

ADDRESS: _____

PHONE # _____

FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____

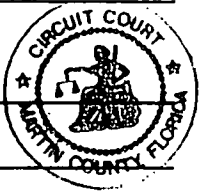
FAX #: _____

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE
FOREGOING _____ PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

MARSHA STILLER, CLERK

BY Charlotte Bullock D.C.

DATE 9-29-97



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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

PHONE #: _____

FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____

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

Andrea Pizzo
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 26 DAY OF SEPT
19 97 BY DAVID A MARSHALL

OR PERSONALLY KNOWN X
PRODUCED ID _____
TYPE OF ID _____

David A Marshall
NOTARY SIGNATURE

CITY OF VERO BEACH
P.O. BOX 1389 - 1053 20TH PLACE
VERO BEACH, FL 32961-1389
(561) 978-4550

FIRST CLASS
U.S. POSTAGE
PAID
VERO BEACH, FL
PERMIT NO. 200
PRE-SORTED FIRST CLASS

CITY OCCUPATIONAL LICENSE TAX
LICENSE YEAR 10/01/97 - 09/30/98

ACCOUNT NO: 044941
AUDIT NO: 12225

TYPE LICENSE: SERVICE
CLASS NUMBER: 0039
LOCATION: 540 CAMELIA LANE

LICENSE FEE: 30045.00
TRANSFER FEE: \$0000.00
DEL. PENALTY: \$0000.00
TOTAL 45.00

FIRM NAME: INDIAN RIVER POOLS, INC.
OWNER/MGR: RICHARD G JONES

DATE ISSUED: 09/05/97

ADDRESS: 540 CAMELIA LANE
VERO BEACH FL 32963

NOTE: THIS LICENSE MUST BE EXHIBITED CONSPICUOUSLY
AT YOUR ESTABLISHMENT OR PLACE OF BUSINESS

James R. ...
DIRECTOR OF PLANNING

AC# 4053880

STATE OF FLORIDA
Department of Business and Professional Regulation
CONST INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
07/23/1996	96900376	CP -CA10984

The COMMERCIAL POOL/SPA CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489, FS.
Expiration date: AUG 31, 1998

JONES, RICHARD G
INDIAN RIVER POOLS INC
540 CAMELIA LANE
VERO BEACH FL 32963

LAWTON CHILES
GOVERNOR

DISPLAY AS REQUIRED BY LAW

RICHARD T. FARRELL
SECRETARY

ACORD. CERTIFICATE OF INSURANCE

ISSUE DATE: MM/DD/YY
05/30/97

PRODUCER

SCHLITT INSURANCE SVC INC
1717 INDIAN RIVER BLVD
SUITE 300
VERO BEACH FL 32960

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

COMPANIES AFFORDING COVERAGE

- COMPANY LETTER **A** SCOTTSDALE INSURANCE CO.
- COMPANY LETTER **B**
- COMPANY LETTER **C**
- COMPANY LETTER **D**
- COMPANY LETTER **E**

INSURED

INDIAN RIVER POOLS, INC.
DAVE MARSHALL
540 CAMELIA LANE
VERO BEACH, FLORIDA 32963

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLASS IS MADE <input checked="" type="checkbox"/> OWNER'S CONTRACTOR'S P...	CLS0381057	06/05/97	06/05/98	GENERAL AGGREGATE \$ 300,000
	AUTOMOBILE LIABILITY ANY AUTO ALL OWNED AUTOS COMMERCE AUTOS TRAILED AUTOS NON-OWNED AUTOS GARAGE LIABILITY				PRODUCTS-COMP/OP AGGR. \$ 300,000 PERSONAL & ADV. INJURY \$ 300,000 EACH OCCURRENCE \$ 300,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED. EXPENSE (Any one person) \$ 1,000
	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN U... LLA FORM				COMBINED SINGLE LIMIT \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$ EACH OCCURENCE \$ AGGREGATE \$
	WORKER'S COMPENSATION AND EMPLOYERS' LIABILITY				STATUTORY LIMITS EACH ACCIDENT \$ DISEASE-POLICY LIMIT \$ DISEASE-EACH EMPLOYEE \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
SWIMMING POOL INSTALLATION.

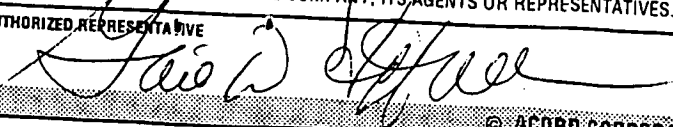
CERTIFICATE HOLDER

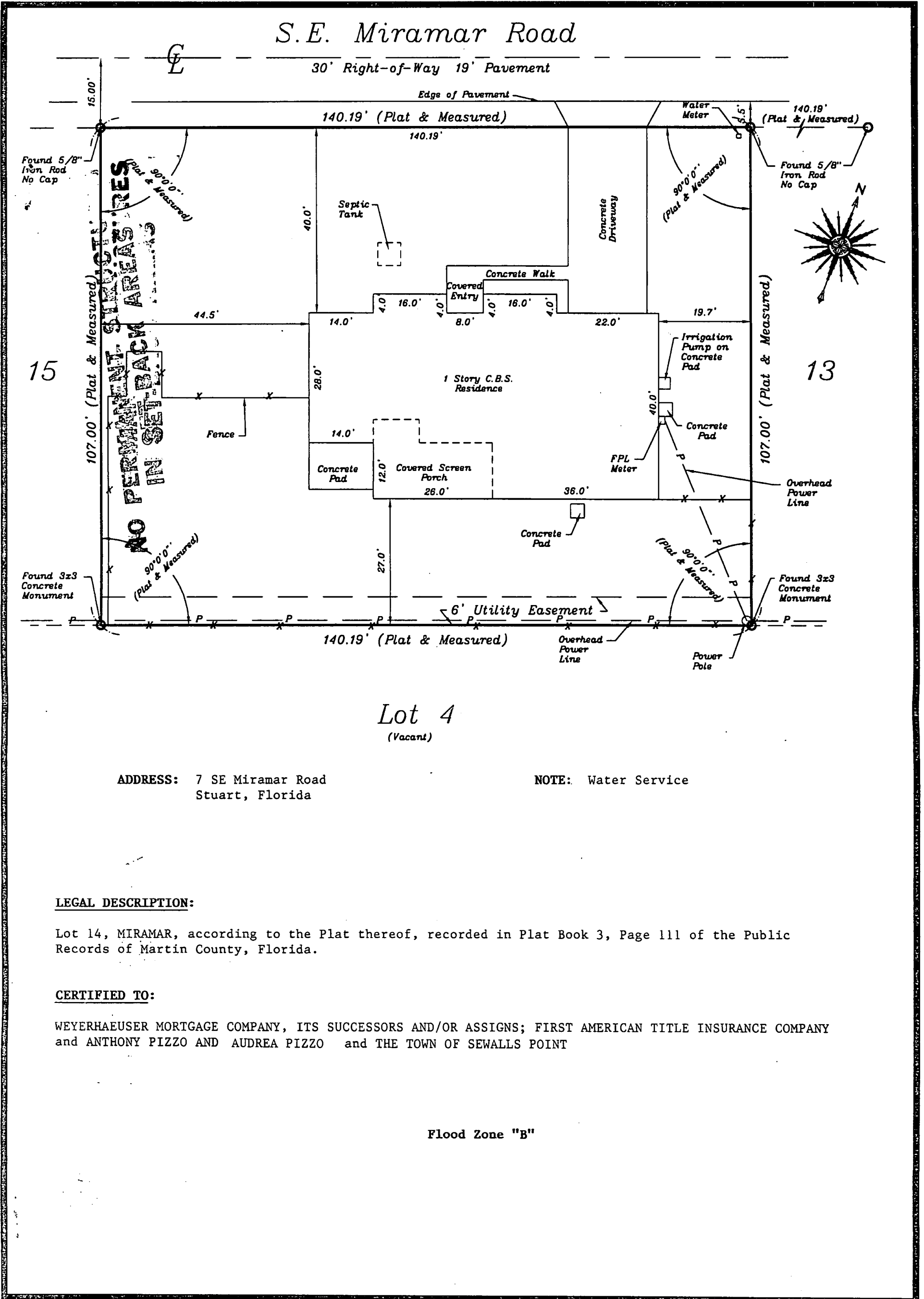
I.N.S.U.R.E.D.

CANCELLATION

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

AUTHORIZED REPRESENTATIVE





Lot 4
(Vacant)

ADDRESS: 7 SE Miramar Road
Stuart, Florida

NOTE: Water Service

LEGAL DESCRIPTION:

Lot 14, MIRAMAR, according to the Plat thereof, recorded in Plat Book 3, Page 111 of the Public Records of Martin County, Florida.

CERTIFIED TO:

WEYERHAEUSER MORTGAGE COMPANY, ITS SUCCESSORS AND/OR ASSIGNS; FIRST AMERICAN TITLE INSURANCE COMPANY and ANTHONY PIZZO AND AUDREA PIZZO and THE TOWN OF SEWALLS POINT

Flood Zone "B"

MIRAMAR . Lot 14 .

BY	
REVISION	

PHILIP W. LANGBEHN
Land Surveyor, Inc.
382 N.W. Alice Avenue, Stuart, Florida 34994
(561) 692-1254 / (561) 692-1257
FAX (561) 692-2110

CERTIFICATE: This is to certify that this SKETCH OF SURVEY, of the hereon described property, is true and correct to the best of my knowledge and belief, contains no visible encroachments, unless shown, and meets the Minimum Technical Standards set forth in Chapter 61017-8 F.A.C. by the Florida Board of Land Surveyors pursuant to Section 472.027, Florida Statutes.

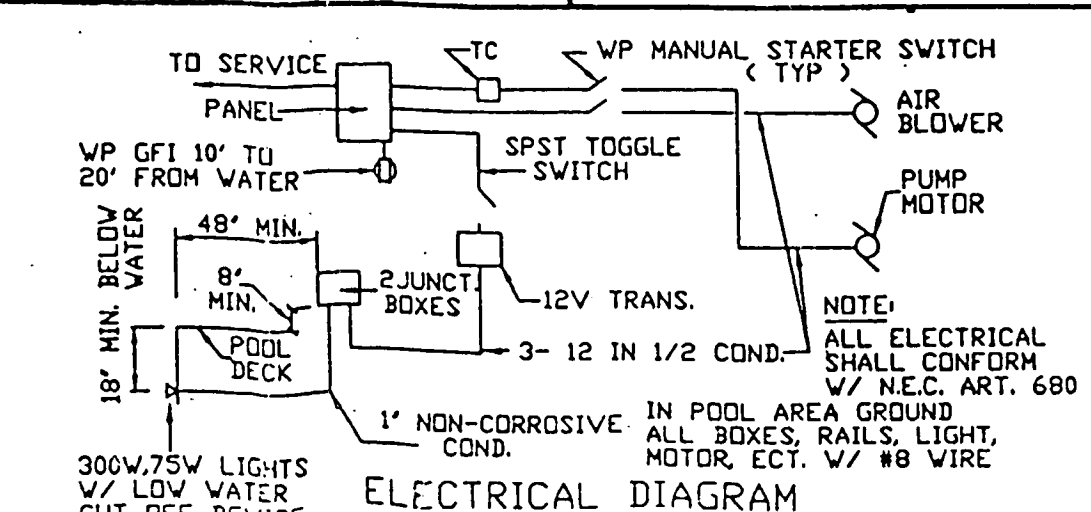
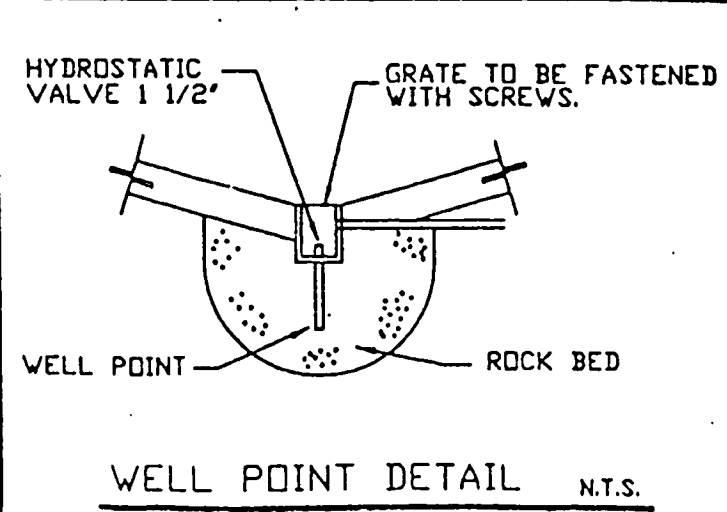
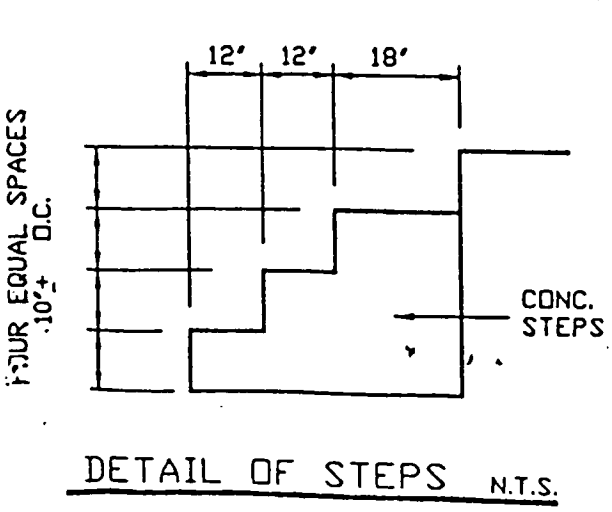
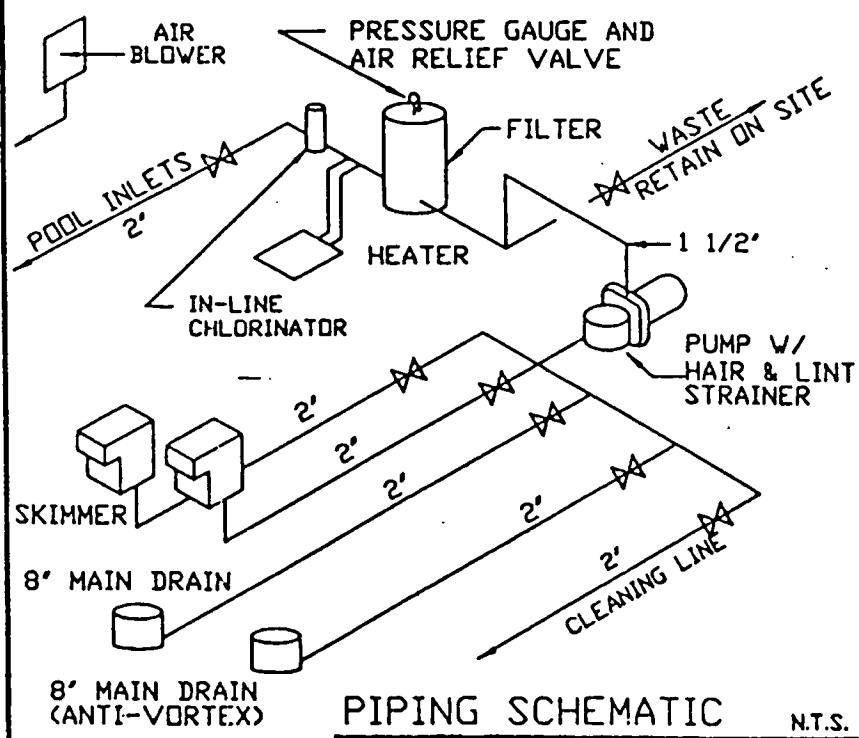
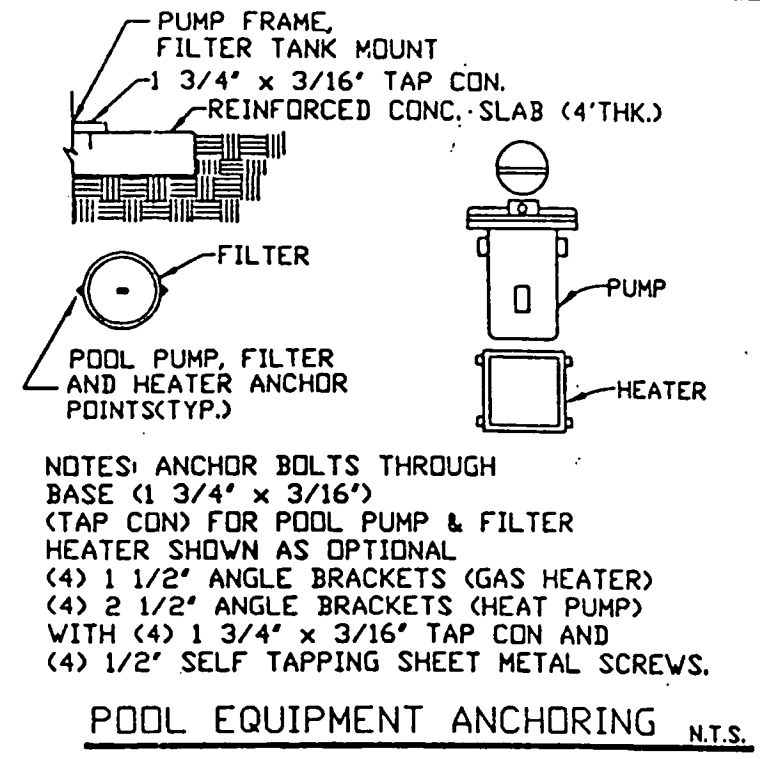
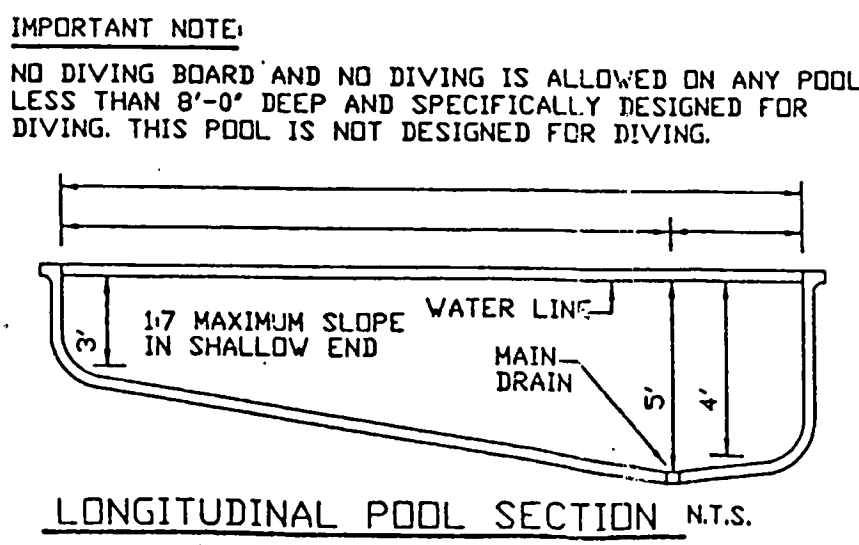
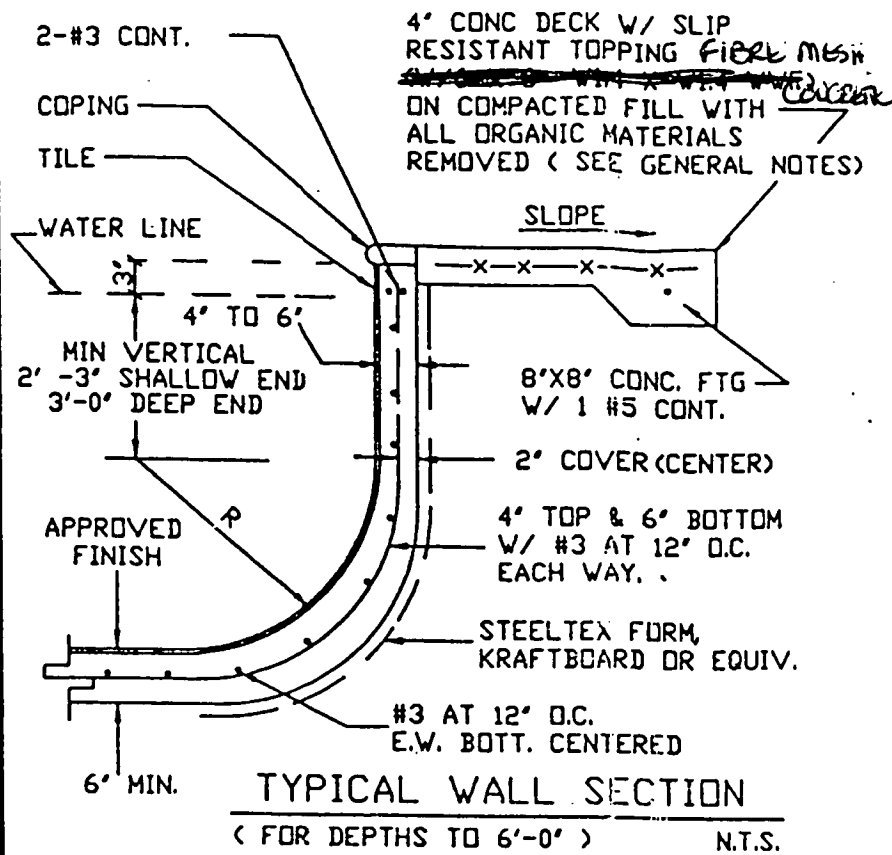
Philip W. Langbehn
PROFESSIONAL LAND SURVEYOR
STATE OF FLORIDA REGISTRATION NO. 3152

NOTE: NOT VALID UNLESS SEALED WITH AN EMBOSSED SURVEYOR'S SEAL.
This SURVEY prepared from legal description supplied by client.

DRAWN	PF/JC
CHECKED	DF
DATE OF FIELD SURVEY	4-21-97
SCALE	1" = 20'
JOB NO.	97-9669
FIELD BOOK AND PAGE	145-23

GENERAL NOTES:

- ALL FLOORS & WALLS OF POOL TO BE PNEUMATICALLY APPLIED CONC. WITH A MIN. 28 DAY COMPRESSIVE STRENGTH OF 2500 PSI.
- ALL REINF. STEEL TO CONFORM TO A.S.T.M. 615 GRADE 40.
- ALL POOL PIPING TO BE SCHED 40 PVC BEARING NSF APPROVAL
- SOIL STATEMENT:
NO POOL CONSTRUCTION SHALL BEAR ON ANY TYPE SOILS EXCEPT CLEAN SANDS OR ROCK.
THIS PROJECT IS IN THE VICINITY OF PROJECTS THAT THIS FIRM HAS PREVIOUSLY DESIGNED. THE SOIL IS SANDY IN NATURE AND ADEQUATE TO SUPPORT THIS SWIMMING POOL. IF OTHER CONDITIONS ARE ENCOUNTERED THE CONTRACTOR SHALL NOTIFY THIS OFFICE FOR INSPECTION AND INSTRUCTIONS.
- THE POOL CONTRACTOR SHALL ALWAYS TAKE ALL PRECAUTIONS TO PROTECT EXISTING STRUCTURES FROM FAILURE BY SHEETING AND/OR SHORING OR OTHER METHODS THE DESIGN ENGINEER ACCEPTS NO RESPONSIBILITY FOR THE SAFETY OF EXISTING STRUCTURES.
- THIS DESIGN ENGINEER ASSUMES NO RESPONSIBILITY FOR POOL CONSTRUCTION IN EASEMENTS OR REQUIRED SETBACK AREAS. PLOT PLANS NOT PREPARED FROM LEGAL SURVEYS OF THE EXISTING LOT AND RESIDENCE ARE SO INDICATED. THE POOL CONTRACTOR SHALL VERIFY ALL DIMENSIONS IN THE FIELD AND ESTABLISH LOT LINES.
- THE POOL CONTRACTOR SHALL ESTABLISH LOCATIONS OF ALL UTILITIES AT THE SITE. MIN. CLEARANCE DIMENSIONS SHALL BE HELD AS REQUIRED BY THE LOCAL REGULATORY AGENCY. IN GENERAL, HOLD A DISTANCE OF 10 FEET FROM OVERHEAD ELECTRIC LINES TO OPEN POOL WATER.
- TEMPERATURE OF THE WATER SHALL BE SET SO THAT MAX. WATER TEMP. = 102 DEGREES F.
- MIN. 4' FENCE, WITH SELF-LOCKING GATES, REQUIRED AROUND ALL UNSCREENED POOLS.
- THE CONTRACTOR SHALL BACKFILL THE POOL SHELL WITH CAUTION. THE PLUMBING SHALL NOT BE DISTURBED. BACKFILL SHALL BE ACCOMPLISHED WITH CLEAN SANDS, FREE OF ORGANIC MATERIAL AND SHALL BE PLACED IN 12" THICK LAYERS. EACH LAYER SHALL BE COMPACTED TO 90% OF THE SOILS MAXIMUM DENSITY BY TAMPING SOLIDLY. SOILS BELOW THE PATIO SHALL BE PLACED IN A SIMILAR MANNER.
- WHERE PATIOS ARE INDICATED BY OTHERS, THE PATIO DESIGN NOTES SHOWN ON THE TYPICAL WALL SECTION DO NOT APPLY. THE PATIO DESIGN IS BY OTHERS.
- WARNING: TO EMPTY POOL AFTER CONSTRUCTION, FOR REPAIRS OR ANY OTHER REASON, THE HYDROSTATIC UPLIFT PRESSURES BENEATH THE POOL MUST BE ELIMINATED TO PREVENT THE POOL FROM FLOATING UPWARD. THE OWNER MUST CONSULT A POOL CONTRACTOR OR POOL REPAIR CONTRACTOR EXPERIENCED IN ELIMINATING UPLIFT PRESSURES.
- THIS PLAN REMAINS THE PROPERTY OF HORNER CONSULTING ENGINEERS, INC. IT IS NOT TRANSFERABLE FROM ONE CONTRACTOR TO ANOTHER WITH OUT WRITTEN PERMISSION OF HORNER CONSULTING ENGINEERS, INC.



INDIAN RIVER POOLS, INC.

UNFINISHED FRAME IN SWIMMING POOL CONSTRUCTION

ORDER: 8X3XX	SHEET # 2 OF 2
C.E. 96999-94	



PIONEER SCREEN CO., INC.
 9011 S.W. OLD KANSAS AVENUE
 STUART, FLORIDA 34997
 (561) 283-9197

DATE	INVOICE	AMOUNT

63-643
670

No 16291

PAY AMOUNT One hundred dollars 00/100 DOLLARS

DATE	TO THE ORDER OF	DESCRIPTION	CHECK NO.	CHECK AMOUNT
12/22/97	Seawall Pt.	Permit	16291	\$ 100.00

FIRST UNION NATIONAL BANK of FLORIDA - STUART, FLORIDA 34997

Craig Rice

⑈016291⑈ ⑆067006432⑆2169125805634⑈

MASTER PERMIT NO. 4263

TOWN OF SEWALL'S POINT

Date 12/22/97 BUILDING PERMIT NO. 4310
 Building to be erected for LINDA PIZZO Type of Permit SCREEN ENCL
 Applied for by PIONEER SCREEN (Contractor) Building Fee _____
 Subdivision MIRAMAR Lot 14 Block _____ Radon Fee _____
 Address 7 SE MIRAMAR RD Impact Fee _____
 Type of structure SCREEN ENCL. A/C Fee _____
 Electrical Fee _____
 Parcel Control Number: _____ Plumbing Fee _____
 Roofing Fee _____
 Amount Paid _____ Check # _____ Cash _____ Other Fees (ENCL) 100
 Total Construction Cost \$ _____ TOTAL Fees 100

Signed [Signature] Applicant Signed [Signature] Town Building Inspector

TAX FOLIO NO. _____

DATE 12/19/97

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

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

Owner Linda Pizzo Present address 7 SE Miramar Rd
Phone _____ Stuart Fl

Contractor Pioneer Screen Address 9011 SW Old Kansas
Phone 283-9197 Stuart Fl 34997

Where licensed State License number SECO46064

Electrical Contractor _____ License number _____

Plumbing Contractor _____ License number _____

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

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

7 SE Miramar Rd

Subdivision Miramar Lot Number 14 Block Number _____

Contract price \$ 3250.00 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Craig Rice

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

Owner Craig Rice

TOWN RECORD

Date submitted _____

Approved: [Signature] 12/22/97
Building Inspector Date

Approved: [Signature]
Commissioner Date

Final approval given: _____
Date

CERTIFICATE OF OCCUPANCY issued (if applicable) _____
Date

PERMIT NO. _____

NOC AT STEWART PT. BTZ

Marsha Stiller
Martin County Clerk of Circuit Court
P.O. BOX 9016 Stuart, Florida 34995
General Receipting

Validation: PAYMENT
NOT A RECEIPT WITHOUT PROPER VALIDATION

Receipt Number: 97 045296 Invoice NO: 00 000000
Cashier - Dept: TOTLC-00434 Date/Time : 09/29/97 14:19

Received from : INDIAN RIVER POOLS, INC.
 : 510 CAMELIA LANE
 : VERO BEACH FL 32963 0000

Q1	Item - Description	Total Amount	Comments
0001	RECORDING	6.00	NO PIZZA
0002	COPIES \$3.00	3.00	
0003	CERTIFY COPIES	1.00	
0004	POSTAGE RETURNED	.32	
0000		.00	

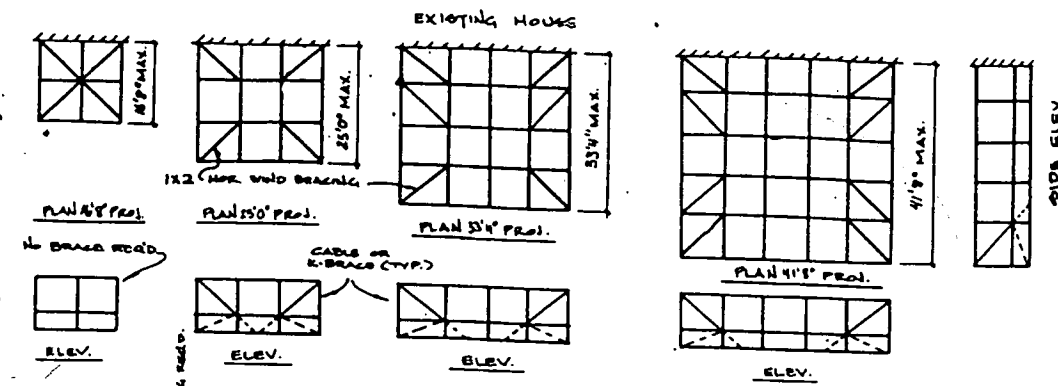
Receivable Amt	\$8.32
Cash	\$3.00
Other Charge MO	\$8.32
Payroll Charge	\$3.00
Total Applied	\$8.32
Overpay Amount	\$3.00
Refund Amount	\$3.00
New Balance	\$3.00
Amount Tendered	\$8.32
Change	\$3.00

Comments: 1863 \$8.32

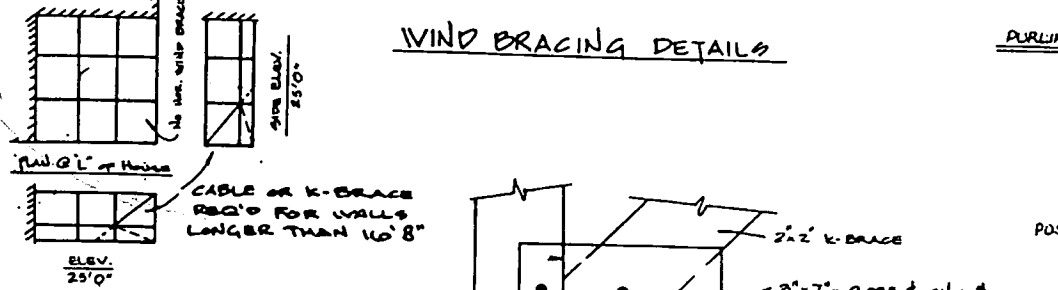
Receipt 97 045296 Validated for

VALIDATION:
\$8.32 by TOTLC 09/29/97 14:19

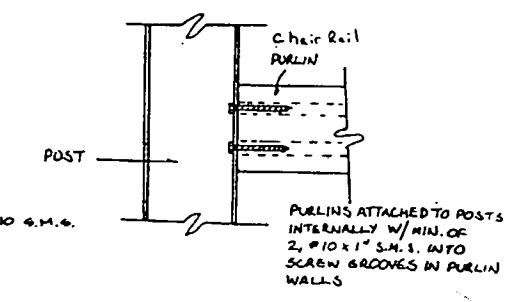
1863



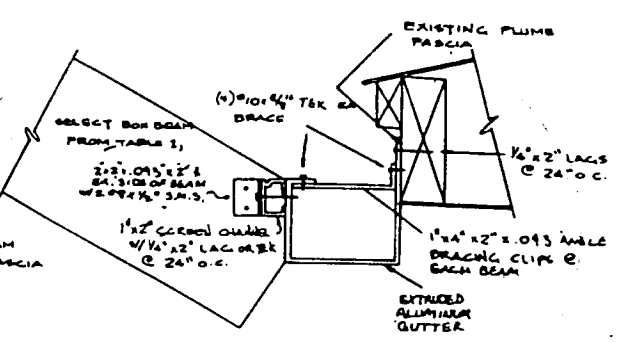
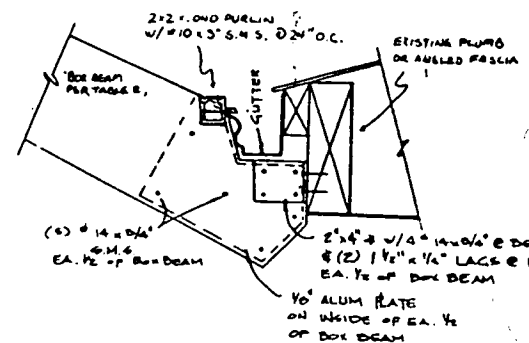
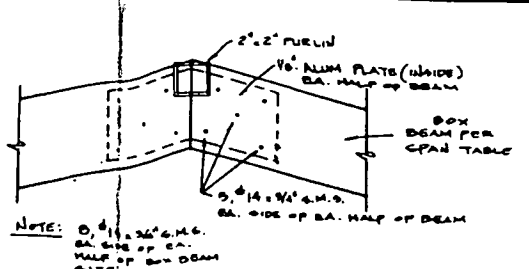
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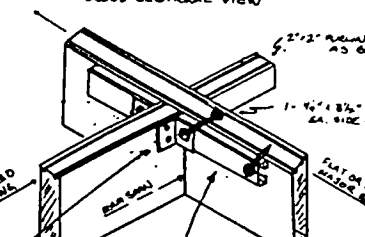
PURLIN TO POST CONNECTION DETAIL



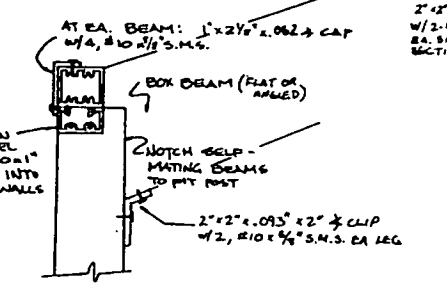
BOX BEAM SPlice PLATE



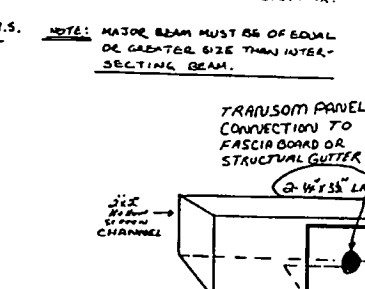
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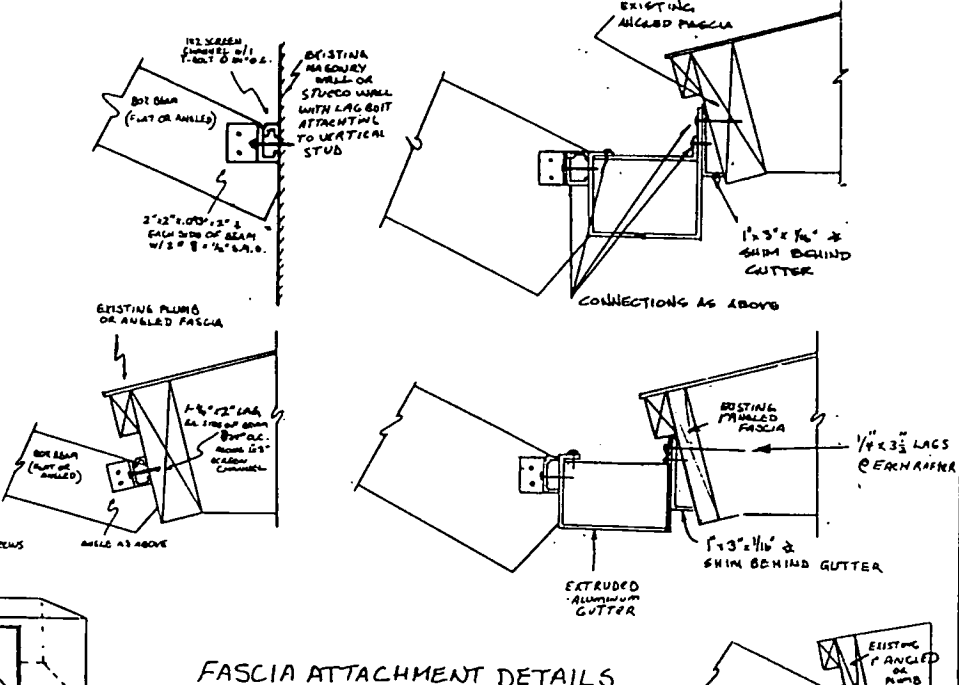
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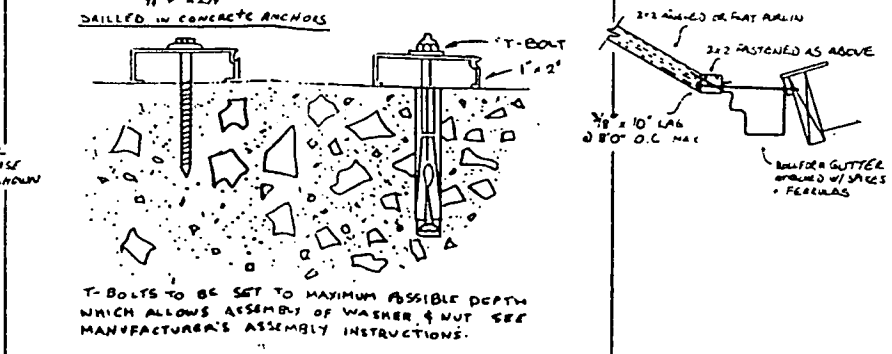
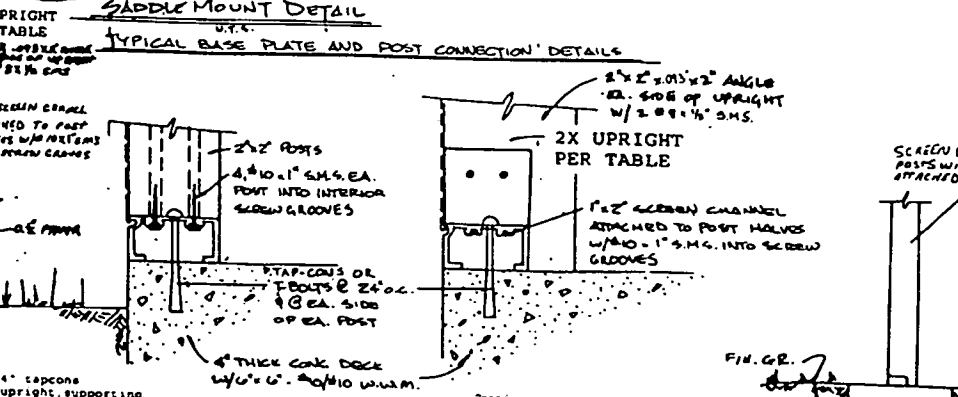
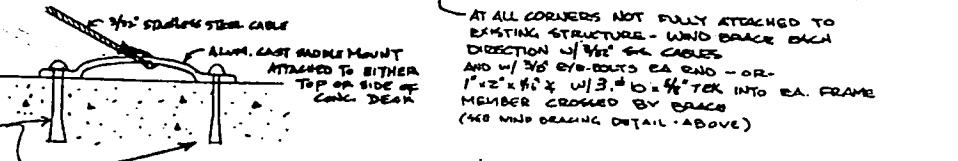
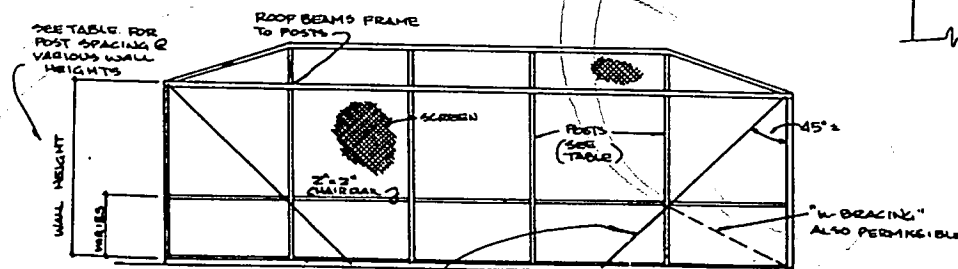
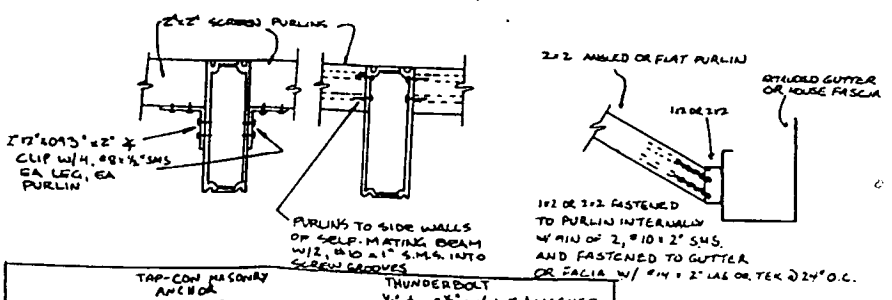
TRANSOM PANEL CONNECTION TO FASCIA BOARD OR STRUCTURAL GUTTER



FASCIA ATTACHMENT DETAILS



ROOF PURLIN CONNECTION DETAILS



- SPECIFICATIONS:**
- 1 SHEET METAL SCREWS (S.M.S.) SHALL BE STAINLESS OR CADMIUM PLATED
 - 2 ALUMINUM BOLTS SHALL BE ALLOY 2024 T4 STEEL BOLTS SHALL BE STAINLESS OR CADMIUM PLATED
 - 3 MAJOR BEAMS: ALLOY 6063 T6
 - 4 POSTS, PURLINS, CHANNELS & ANGLES: ALLOY 6063 T5
 - 5 CONCRETE: $f_c = 2500$ PSI

TABLE 1 - POST LENGTHS AND SPACING FOR SCREEN WALLS

POST SIZE	MAX. WALL HEIGHT	MAX. POST SPACING O.C.
2x2 x .030 OR EQUIVALENT	7'7"	7'7"
	8'2"	5'3"
2x3 x .030 OR EQUIVALENT	7'6"	9'0"
	8'5"	8'4"
	9'0"	7'0"
	10'0"	6'0"
2' x 4" x 5/8" BEAM USED AS POST	8'6"	17'0"
	9'0"	15'6"
	15'0"	7'6"
	19'0"	8'0"
	19'0"	8'6"
	18'0"	13'0"
	16'0"	13'0"
	17'0"	11'0"
	18'0"	10'0"
	19'0"	9'0"
	20'0"	8'4"
	21'0"	18'0"
	22'0"	18'0"
	23'0"	10'0"
	24'0"	9'0"
	25'0"	8'4"

TABLE 2 - SPAN TABLE FOR SCREENED ROOF BOX BEAMS

BEAM SIZE	SPAN (ft)								
	4'0" O.C.	5'0" O.C.	5'6" O.C.	6'0" O.C.	6'6" O.C.	7'0" O.C.	7'6" O.C.	8'0" O.C.	8'6" O.C.
2' x 4" x 5/8" BM	14'4"	14'4"	14'4"	14'4"	15'0"	15'2"	15'4"	15'4"	15'4"
2' x 3" x 5/8" BM	12'6"	20'0"	19'6"	19'0"	18'6"	18'0"	17'4"	17'6"	17'6"
2' x 2" x 5/8" BM	9'0"	29'0"	28'0"	27'0"	26'5"	25'6"	25'5"	25'0"	25'0"
2' x 1 1/2" x 5/8" BM	30'0"	39'0"	34'0"	33'0"	32'6"	31'4"	32'2"	32'0"	32'0"
2' x 1" x 5/8" BM	43'0"	42'0"	40'0"	39'0"	37'7"	36'2"	35'0"	33'10"	33'10"
2' x 3/4" x 5/8" BM	44'0"	44'0"	42'0"	41'0"	40'5"	39'6"	38'7"	38'0"	38'0"

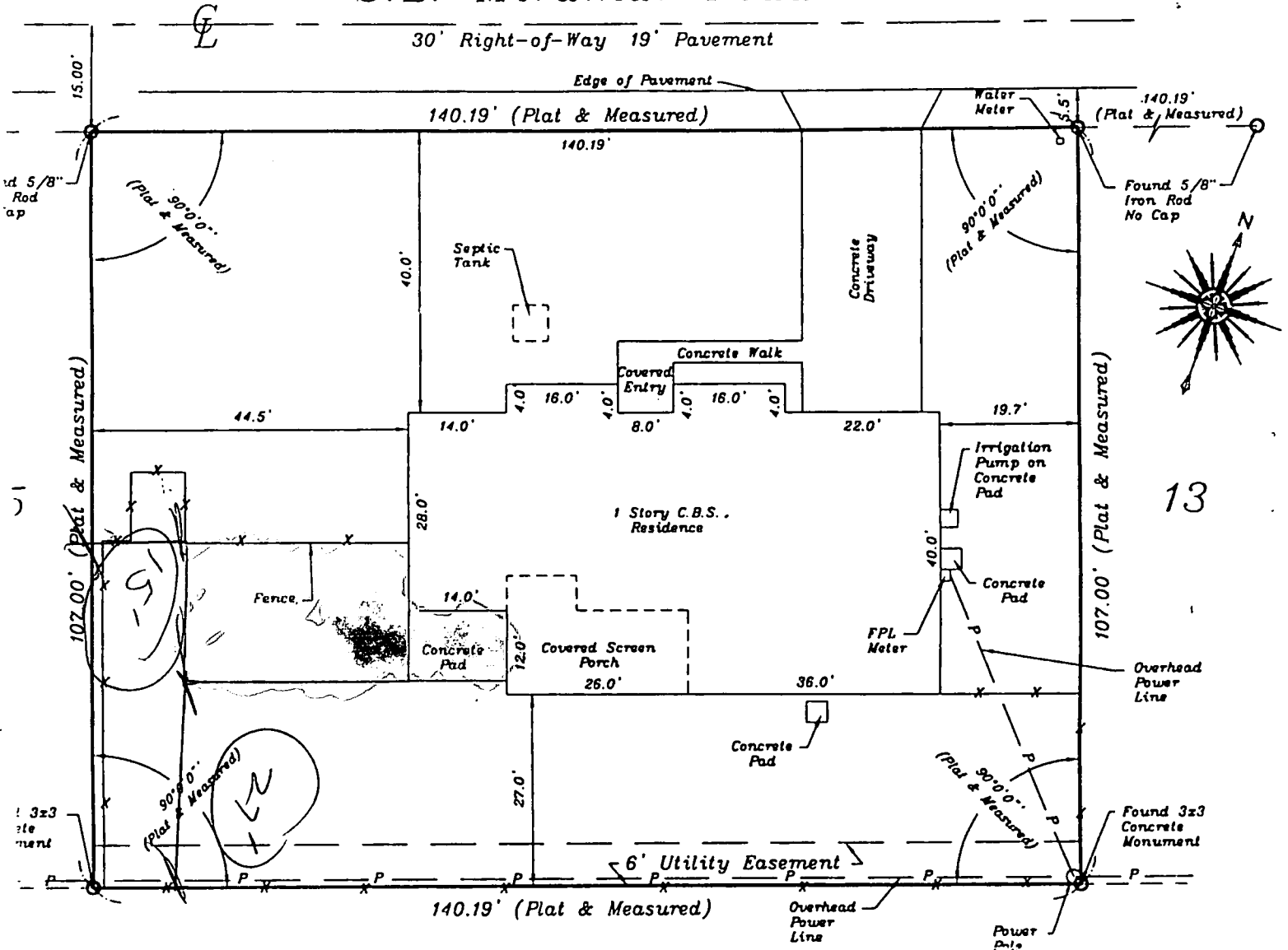
STRUCTURES DETAILED & SPECIFIED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH THE STANDARD BUILDING CODE (S.B.C.C.) FOR WIND ZONES. DESIGNED TO CONFORM TO P.C. COUNTY ZONE.

MASTER PLANS - ALUMINUM SCREEN ENCLOSURES (110 M.P.H. WIND REGIONS)

NAGENDRA N. KHANAL, P.E.
 355 LELIN ROAD
 W.P.B. FLA. 33406
 PH (407) 433-5361
 (561)

PLANS EFFECTIVE: JANUARY 10, 1997

S.E. Miramar Road



Lot 4
(Vacant)

ADDRESS: 7 SE Miramar Road
Stuart, Florida

NOTE: Water Service

LEGAL DESCRIPTION:

Lot 14, MIRAMAR, according to the Plat thereof, recorded in Plat Book 3, Page 111 of the Public Records of Martin County, Florida.

CERTIFIED TO:

MEYERHAEUSER MORTGAGE COMPANY, ITS SUCCESSORS AND/OR ASSIGNS; FIRST AMERICAN TITLE INSURANCE COMPANY and ANTHONY PIZZO AND ANDREA PIZZO

Flood Zone "B"

4295

FENCE

TOWN OF SEWALL'S POINT BUILDING PERMIT

DO NOT REMOVE UNTIL JOB IS COMPLETED

NO. 4295 DATE ISSUED 12/2/97

FOR INSPECTIONS CALL 287-2455 FROM
8:00 A.M. - 12:00 NOON AND 1:00 P.M. - 4:00 P.M.

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

OWNER Pizzo
 CONTRACTOR JUST WOOD FENCE CO
 LOT 14 BLOCK _____ SUB MIRAMAR
 NO. 7 MIRAMAR Rd.

1384100900001404000

- 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 LATEST FLOOD INSURANCE RATE MAP.
- WORKING HOURS ARE FROM 8:00 A.M. TO 5:00 P.M. MONDAY THRU SATURDAY.

TO CONSTRUCT FENCE

REMARKS:

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
ROOF:		
A. TIN TAG		
B. FINAL		
POOL:		
A. STEEL & GROUND		
B. DECK		
C. FINAL		
DOCK:		
A. PILINGS		
B. FINAL		
FENCE:		<i>[Signature]</i>
STORM SHUTTERS:		
OTHER:		

Town of Sewall's Point



P.I.N. _____

Date 12/2/97

BUILDING PERMIT APPLICATION

to construct:

RESIDENTIAL NEW CONSTRUCTION ADDITION ALTERATION
COMMERCIAL

SQ. FEET _____
DEMOLITION _____
SQ. FEET _____
NET CHANGE _____

OTHER: FENCE CONTRACT PRICE 2,400.00

Owner's Name MR & MRS PIZZO

Owner's Address 7 MIRAMAR RD.

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

Fee Simple Titleholder's Address (If other than owner) _____

City _____ State _____ Zip _____

Contractor's Name DANIEL RIMER (JUSTWOOD FENCE)

Contractor's Address 5030 PINERIDGE WAY

City STUART State FLA Zip 34997

Job Name _____

Job Address _____

City _____ County _____

Legal Description _____

Bonding Company _____

Bonding Company Address _____

City _____ State _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____

Mortgage Lender's Address _____

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured for ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, and AIR CONDITIONERS, etc.

4295

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

WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY.

IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.

Owner or Agent

Date

Daniel Kemmer

DEC 2, 1997

Contractor

Date

COUNTY OF MARTIN
STATE OF FLORIDA

Sworn to and subscribed before me this __ day of ____, 199__, by

_____, who: [] is/are personally known to me, or [] has/have produced ___
_____ as identification, and who did not take an oath.

Name: _____

Typed, printed or stamped

(NOTARY SEAL)

I am a Notary Public of the State of Florida having a
commission number of _____

_____ and my
commission expires: _____

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this __ day of ____, 199__, by

_____, who: [] is/are personally known to me, or [] has/have produced ___
_____ as identification, and who did not take an oath.

Name: _____

Typed, printed or stamped

(NOTARY SEAL)

I am a Notary Public of the State of Florida having a
commission number of _____

_____ and my
commission expires: _____

Certificate of Competency Holder

Contractor's State Certification or Registration No. _____

Contractor's Certificate of Competency No. _____

APPLICATION APPROVED BY

[Signature] Permit Officer


[Signature] Building Commissioner

JUSTWOOD FENCE CO.
 PHONE 407-220-8451
 5030 PINE RIDGE WAY
 STUART, FL 34997

1191
 83-8711/2870
 8

DEC 2 19 97

PAY TO THE ORDER OF SEWALL'S POINT \$ 25.00
Twenty-five and no/100 DOLLARS

 **Community Savings**
 STUART, FLORIDA 34997-6695

FOR Daniel Komer

⑆ 26 708 7 1 1 2 ⑆ ⑆ 6000006 7493 7 ⑆ ⑆ 1 9 ⑆

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 12/2/97 BUILDING PERMIT NO. 4295

Building to be erected for Pizza Type of Permit _____

Applied for by JUST WOOD FENCE CO (Contractor) Building Fee _____

Subdivision MIRAMAR Lot 2 Block _____ Radon Fee _____

Address 7 MIRAMAR RD Impact Fee _____

Type of structure FENCE A/C Fee _____

Electrical Fee _____

Parcel Control Number: 13841009000001404000 Plumbing Fee _____

Roofing Fee _____

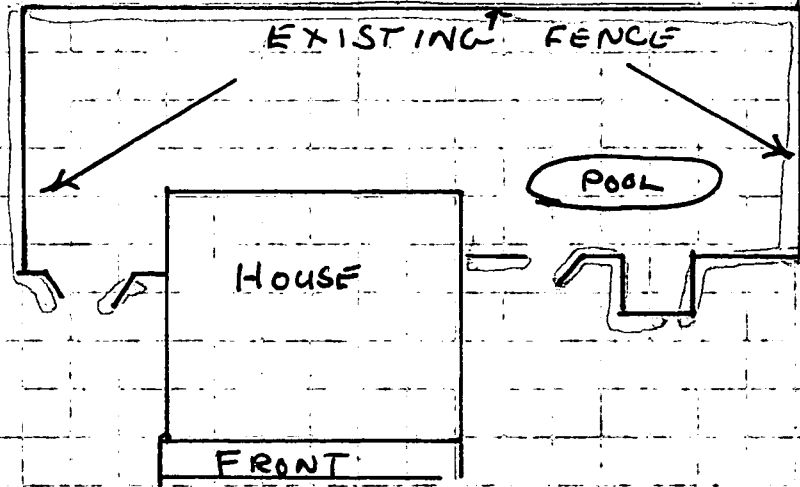
Amount Paid 25.00 Check # 1191 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 2400 TOTAL Fees _____

Signed X Danny Komer Applicant Signed _____ Town Building Inspector

JUSTWOOD Fence Co.
5030 Pineridge Way
Stuart, FL 34997

REPLACING EXISTING FENCE



7 MIRAMAR RD

7466

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4/6/05

BUILDING PERMIT NO. 7466

Building to be erected for BURKE Type of Permit REROOF

Applied for by CODE RED ROOFERS (Contractor) Building Fee _____

Subdivision MIRAMAR Lot 14 Block _____ Radon Fee _____

Address 7 MIRAMAR ROAD Impact Fee _____

Type of structure SR A/C Fee _____

Parcel Control Number:

0138410090000014040000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee 120.00

Amount Paid 120.00 Check # 107 Cash _____ Other Fees (_____) 1

Total Construction Cost \$ 15,300.

TOTAL Fees 120.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

INSPECTIONS

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

APR 04 2005

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: BY 3/21/05

OWNER/TITLEHOLDER NAME: Maria Burke

Phone (Day) 220-9894 (Fax) _____

Job Site Address: 7 Miramar Rd.

City: Sewalls Point State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Miramar Lot 14

Parcel Number: 01-38-41-009-000-00140-4

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: \$ 15,300

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

(If no, fill out the Contractor & Subcontractor sections below)

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: Code Red Roofers

Phone: 287-2829 Fax: 283-1513

Street: 1278 SW Jasmine Trace

City: Palm City State: FL Zip: 34990

State Registration Number: _____ State Certification Number: CRC1326582 Martin County License Number: 20003-513-046

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.# _____ Phone Number: _____

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required)

State of Florida, County of: Martin

This the 18 day of March, 2005

by Maria Burke who is personally

known to me or produced _____

as identification. 2261-557-65-584-0

My Commission Expires: Donna K Malizia Notary Public

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: Martin

This the 29 day of March, 2005

by Douglas E ROE who is personally

known to me or produced _____

As identification. _____

My Commission Expires: Donna K Malizia Notary Public

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL - PLEASE PICK UP YOUR PERMIT PROMPTLY
Expires: FEB. 02, 2009

Bonded Thru Atlantic Bonding Co., Inc.

NOTARY PUBLIC-STATE OF FLORIDA
Seal
Donna K. Malizia

Commission # DD392371
Expires: FEB. 02, 2009
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.

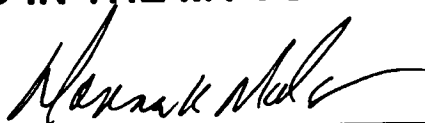
Application form must contain the following information:

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: _____

3/31/05

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):

01-38-41-009-000-00140-4 Miramar Lot 14

GENERAL DESCRIPTION OF IMPROVEMENT: _____

OWNER: Maria Burke

ADDRESS: 7 Miramar Rd. Sewalls Point, FL 34996

PHONE #: 220-9894

FAX #: _____

CONTRACTOR: Code Red Roofers, Inc.

ADDRESS: 1278 SW JASMINE TRACE Palm City FL 34990

PHONE #: 287-2829

FAX #: 283-1513

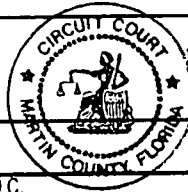
SURETY COMPANY (IF ANY) _____

STATE OF FLORIDA
ADDRESS: MARTIN COUNTY

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

BOND AMOUNT _____
LENDER: MARSHA EWING, CLERK

ADDRESS: _____
DATE 4-4-05 D.C.



PHONE #: _____

FAX #: _____

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

NAME: _____

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.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 18 DAY OF March 2005 BY Maria Burke

[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 FL Dr. Lic
TYPE OF ID 2261-557-65-584-0

INSR # 1827458 OR BK 01998 PG 1792 RECD 04/04/2005 11:41:47 AM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK S Phoenix

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
04/04/2005

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
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 ADDL TYPE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	FMFL000548	03/21/2005	03/21/2006	EACH OCCURRENCE \$ 1,000,000
	DAMAGE TO RENTED PREMISES (EA OCC) \$ 50,000				
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO. SECT <input type="checkbox"/> LOC.				MED EXP (Any one person) \$ Excluded
					PERSONAL & ADV INJURY \$ 1,000,000
					GENERAL AGGREGATE \$ 2,000,000
					PRODUCTS - COMPROP AGG \$ 2,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA accident) \$
					BODILY INJURY (Per person) \$
					BODILY INJURY (Per accident) \$
					PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$
					OTHER THAN AUTO ONLY: EA ACC \$
					AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				EACH OCCURRENCE \$
	DEDUCTIBLE				AGGREGATE \$
	RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS Below				WC STATUTORY LIMITS OTH. ER
	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

CERTIFICATE HOLDER

Sewalls Point Building Dept.
Attn: Laura
1 South Sewalls Point Road
Sewalls Point, FL 34996

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

Alicia R Clifford

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

©ACORD CORPORATION 1988

ACORD <small>TM</small>		CERTIFICATE OF LIABILITY INSURANCE		Date 4/4/05
Producer: Lion Insurance Company 2739 U.S. Highway 19 N. Holiday, FL 34691 Phone: 727-838-5662 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.

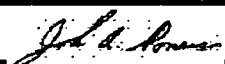
INSR LTR	ADDL INSRD	Type of Insurance	Policy Number	Policy Effective Date (MM/DD/YY)	Policy Expiration Date (MM/DD/YY)	Limits																
		GENERAL LIABILITY <input type="checkbox"/> Commercial General Liability <input type="checkbox"/> Claims Made <input type="checkbox"/> Occur <input type="checkbox"/> <input type="checkbox"/> 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 <input type="checkbox"/> <input type="checkbox"/>				Combined Single Limit (EA Accident) \$ Bodily Injury (Per Person) \$ Bodily Injury (Per Accident) \$ Property Damage (Per Accident) \$																
		GARAGE LIABILITY <input type="checkbox"/> Any Auto <input type="checkbox"/>				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="text-align: center;">X</td> <td style="text-align: center;">WC Statutory Limits</td> <td style="text-align: center;">OTH-ER</td> <td></td> </tr> <tr> <td></td> <td>E.L. Each Accident</td> <td></td> <td style="text-align: right;">\$1000000</td> </tr> <tr> <td></td> <td>E.L. Disease - Ea Employee</td> <td></td> <td style="text-align: right;">\$1000000</td> </tr> <tr> <td></td> <td>E.L. Disease - Policy Limits</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 3886002
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: 3/14/05**
COVERAGE APPLIES ONLY IN THE STATE OF FLORIDA TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF Code Red Roofers, Inc. ' FAX: 772-283-1513 & 772-220-4765 / ISSUE 4/04/05 (JJG)

CERTIFICATE HOLDER SEWALL'S POINT BUILDING DEPT. ATTN: LAURA 1 SOUTH SEWALL'S POINT RD. SEWALL'S POINT FL 34988	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.
--	--



AC#1830184

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L0501190204

DATE	BATCH NUMBER	LICENSE NBR
01/19/2005	040522312	CRC1326582

The RESIDENTIAL 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

JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

2004-2005 MARTIN COUNTY ORIGINAL
COUNTY OCCUPATIONAL LICENSE

Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
(561) 288-5604

LICENSE 2003-513-046 CERT CRC1326582
PHONE (772)260-0633 SIC NO 233210

LOCATION:
1278 JASMINE TR SW PC

CHARACTER COUNTS IN MARTIN COUNTY

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

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

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

27 DAY OF JANUARY 2005
AND ENDING SEPTEMBER 30, 2005

ROE, DOUGLAS EDWARD (QUALIFIER)
CODE RED ROOFERS, INC.
PO BOX 126
PALM CITY FL 34991-0126



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

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

NOTICE OF ACCEPTANCE (NOA)

**Tamko Roofing Products, Inc.
P.O. Box 1404
Joplin, MO 64802**

SCOPE:

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

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

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

DESCRIPTION: TAMKO Heritage 30, 40 & 50 Roof Shingles

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

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

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

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

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

This NOA revises NOA #02-0501.03 and consists of pages 1 through 4.
The submitted documentation was reviewed by Frank Zuloaga, BCCO



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 4/5/05

BUILDING OFFICIAL
Gene Simmons

**NOA No.: 04-0227.01
Expiration Date: 03/21/07
Approval Date: 06/17/04
Page 1 of 4**

ROOFING SYSTEM APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles
Materials: Dimensional
Deck Type: Wood

1. SCOPE

This revises **Tamko Heritage 30 AR, Heritage 40 AR and Heritage 50 AR** Asphalt Shingles, manufactured by **Tamko Roofing Products, Inc.** as described in this Notice of Acceptance.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Heritage 30 AR	12" x 37"	TAS 110	A heavy weight, 240lb/sq, dimensional asphalt shingle.
Heritage 40 AR	12" x 36"	TAS 110	A heavy weight, 275lb/sq, dimensional asphalt shingle.
Heritage 50 AR	12" x 36"	TAS 110	A heavy weight, 305lb/sq, dimensional asphalt shingle.

3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Underwriters Laboratories, Inc.	TAS 107	01NK409172	12/04/01
Underwriters Laboratories, Inc.	ASTM D3462	R2919	02/25/02
PRI Asphalt Technologies, Inc.	TAS 100	TAP-052-02-01	11/28/01
		TAP-053-02-01	11/29/01
		TAP-054-02-01	11/29/01

4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.
- 4.3 All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

5. INSTALLATION

- 5.1 Shingles shall be installed in compliance with Roofing Application Standard RAS 115.
- 5.2 Flashing shall be in accordance with Roofing Application Standard RAS 115
- 5.3 The manufacturer shall provide clearly written application instructions.
- 5.4 Exposure and course layout shall be in compliance with Detail 'A', attached.
- 5.5 Nailing shall be in compliance with Detail 'B', attached.

6. LABELING

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



NOA No.: 04-0227.01
Expiration Date: 03/21/07
Approval Date: 06/17/04
Page 2 of 4

7. BUILDING PERMIT REQUIREMENTS

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

7.1.1 This Notice of Acceptance.

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

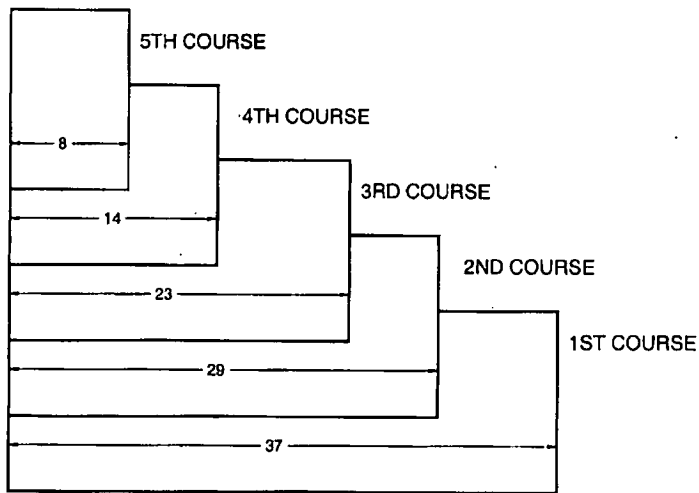
8. MANUFACTURING PLANTS

8.1 Tuscaloosa, AL

DETAIL A

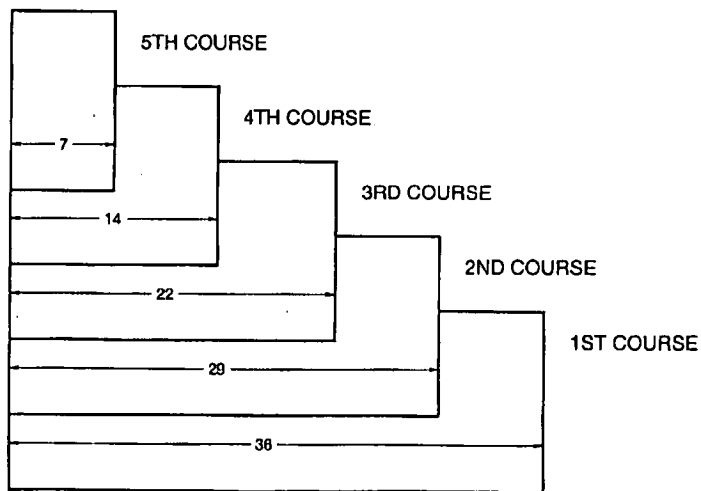
HERITAGE 30

All dimensions are in inches.



HERITAGE 40 & 50

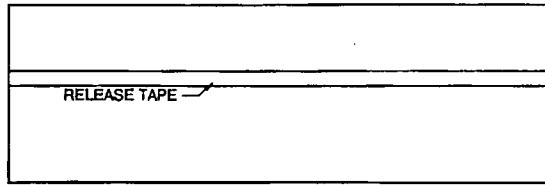
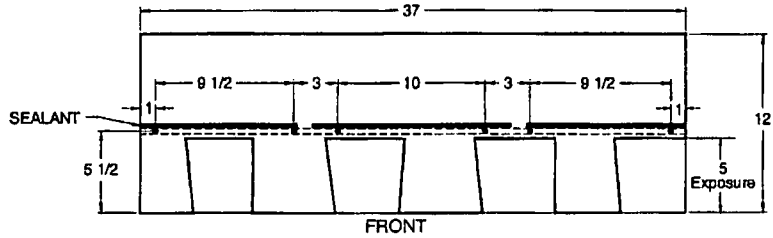
All dimensions are in inches.



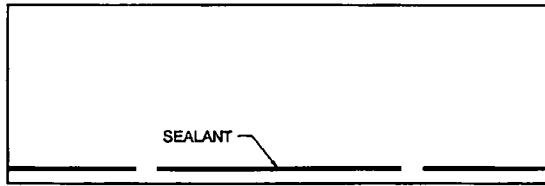
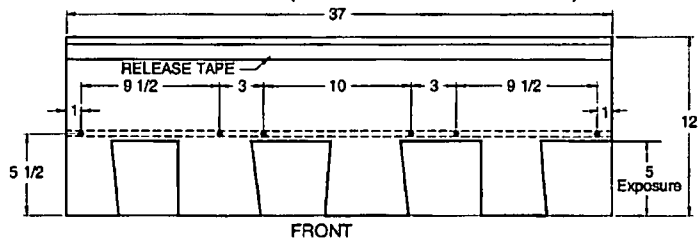
NOA No.: 04-0227.01
Expiration Date: 03/21/07
Approval Date: 06/17/04
Page 3 of 4

DETAIL B

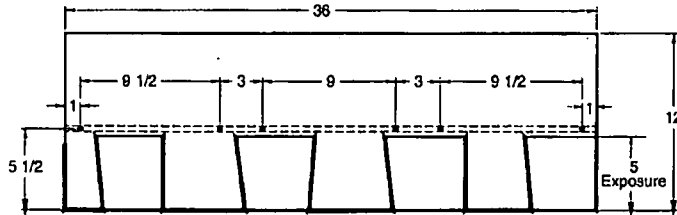
HERITAGE 30
12" x 37" LAMINATED SHINGLE
All dimensions are in Inches.



HERITAGE 30 (New Sealant Placement)



HERITAGE 40 & 50
12" x 36" LAMINATED SHINGLE
All dimensions are in inches.



END OF THIS ACCEPTANCE



NOA No.: 04-0227.01
Expiration Date: 03/21/07
Approval Date: 06/17/04
Page 4 of 4



7466

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 7 MIRAMAR

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

FINAL ROOF

ROOF DEBRIS & TRASH MUST
BE CLEANED FROM YARD &
DRIVEWAY - & DRIVEWAY
SWEEP CLEAN.

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

DATE: 4/20

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/20, 20085 Page 2 of


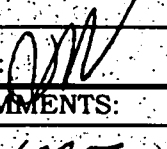
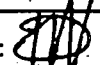



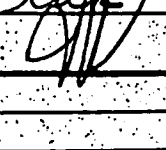
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6749	NAUDIN	PRE POUR GARAGE FOUNDATION	FAIL	
11	19 N. RIDGEVIEW O/B	(FIRST PLEAS)		INSPECTOR: <i>[Signature]</i>
7031	LASKY	TANK & LINE	PASS	
1	27 W. HIGH POINT FERRELL GAS			INSPECTOR: <i>[Signature]</i>
7484	LASKY	COLD STEEL FENCE	PASS	
1	27 W. HIGH POINT SEAGATE BUILDERS			INSPECTOR: <i>[Signature]</i>
7430	MURPHY	DECK FINAL	PASS	DUPLICATE INSPECTION
10	8 HERON'S NEST O/B			INSPECTOR: <i>[Signature]</i>
7466	BURDE	FINAL ROOF	FAIL	
15	7 MIRAMAR RD CODE RED			INSPECTOR: <i>[Signature]</i>
7262	4 BASSO SAGUIN	ELECTRICAL PANEL		SCHEDULE FOR 4/22 FRI.
17	3760 SE OCEAN KIRCHMAN	FRAMING MECH.		INSPECTOR: <i>[Signature]</i>
7408	FARSELY	DOCK REPAIR FINAL	FAIL	
19	3 LAGOON ISLG TCBI			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4/22, 20015 Page 3 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	Fenstermaker	Tree	PASS	
10	71 S. Sewall St			INSPECTOR: 
6965	Fenstermaker	STRAPPING	PASS	
10	71 S. SEWALL'S OIB			INSPECTOR: 
7428	Boucher	FINAL ROOF	PASS	CLOSE
1	21 MIDDLE RD DENNIS CONS			INSPECTOR: 
7440	BURKE	FINAL ROOF	PASS	CLOSE
16	7 MIRAMAR RD CODE RED ROOFERS			INSPECTOR: 
Tree	DIMITRIU	TREE	PASS	
17	6 BANYAN DR			INSPECTOR: 
7496	MACKAM	DRY-IN	FAIL	
11	19 S. VIA LUCINDA FLORIDA PEREOP			INSPECTOR: 
7494	VAN T BOSCH	GASTANK & LINES	FAIL	7 TANK ON
12	36 S. RIVER RD PROPANE DISCOUNTERS			CMU BLOCK INSPECTOR: 

OTHER: _____

9138

RENOVATIONS



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:	9138	DATE ISSUED:	APRIL 15, 2009
SCOPE OF WORK:	RENOVATIONS		
CONDITIONS:			
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:	01384100909990991404	SUBDIVISION	MIRAMAR - LOT 14
CONSTRUCTION ADDRESS:	7 MIRAMAR RD		
OWNER NAME:	LENAHAN		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	879-1048

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

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

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

REQUIRED INSPECTIONS

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

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

RECEIVED
DATE: 4-9-09
TOWN OF SEWALL'S POINT

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

Date: April 9, 2009

OWNER/TITLEHOLDER NAME: EDWARD J. LENAHAN Phone (Day) 772-879-1048 (Fax) _____

Job Site Address: 7 MIRAMAR RD. City: STUART State: FL Zip: 34996

Legal Description: Miramar Lot 14 Parcel Control Number: 01-38-41-009-000-00140-4

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

Scope of work (Please be specific): ACB... Floors, Floor, Paint, Carpentry, Landscap...

WILL OWNER BE THE CONTRACTOR?

(If yes, Owner Builder questionnaire must accompany application)
YES X NO _____

Has a Zoning Variance ever been granted on this property?

YES _____ (YEAR) _____ NO _____
(Must include a copy of all variance approvals with application)

COST AND VALUES (Required on ALL permit applications)

Estimated Value of Improvements: \$ 259,900

(Notice of Commencement required when over \$2500 prior to first inspection \$7,500 on HVAC change out)
Is subject property located in flood hazard area? VE10 AE9 AE8 X

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

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

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

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____

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

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

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 2004 W/ 2006 REV.
National Electrical Code: 2005 Florida Energy Code: 2004/6 Florida Accessibility Code: 2004/6 Florida Fire Prevention Code 2004/6

NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

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

State of Florida, County of: Martin

This the 9th day of April

by EDWARD LENAHAN who is personally

known to me or produced FDL#5550-230-483 known to me or produced _____

as identification. Valerie Meyer identification. _____

My Commission Expires: _____

CONTRACTOR SIGNATURE: (required)

On State of Florida, County of: _____

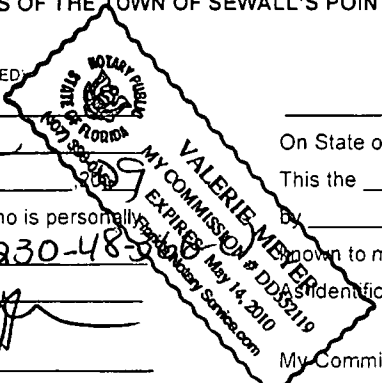
This the _____ day of _____ 20__

by _____ who is personally

known to me or produced _____ known to me or produced _____

as identification. _____ identification. _____

My Commission Expires: _____



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



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

Site Provided by...
governmax.com T1.12

Summary

print | | | | | Address
1 of 1

Parcel Info

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
001-38-41-009 000-000140-4	7 MIRAMAR RD	17754	Address	0	1

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

Summary

Property Location 7 MIRAMAR RD
Tax District 2200 Sewall's Point
Account # 17754
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.344

Legal Description

Property Information

MIRAMAR LOT 14

Search By

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

Owner Information

Owner Information
LENAHAN EDWARD J & PAMELA K

Mail Information

7 MIRAMAR RD
STUART FL 34996

Assessment Info

Front Ft. 0.00

Market Land Value \$218,500
Market Impr Value \$259,190
Market Total Value \$477,690

Site Functions

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

Recent Sale

Sale Amount \$284,700

Sale Date 3/20/2009
Book/Page 2380 0885

Print | << First < Previous Next > Last >>

Legal disclaimer / Privacy Statement

Data updated on 4/2/2009





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

SUBCONTRACTORS LIST
 RESIDENTIAL, ADDITIONS, COMMERCIAL

APPLICANT'S NAME EDWARD J. LENAHAN. BLDG. PERMIT # _____

MAILING ADDRESS 7 MIRAMAR RD, S. SEWALLS PT. STUART, FL. 34996.

PLEASE PROVIDE A PRELIMINARY SUBCONTRACTORS LIST FOR VERIFICATION. THIS LIST WILL BE RETURNED TO YOU WHEN THE BUILDING PERMIT IS ISSUED TO ENABLE YOU TO COMPLETE AND RETURN TO THE BUILDING DEPARTMENT. WE REQUIRE, PRIOR TO STARTING WORK, UPDATES, CHANGES AND ADDITIONS THROUGHOUT CONSTRUCTION. USING UNLICENSED CONTRACTORS OR SUBCONTRACTORS MAY PREVENT YOU FROM BEING ELIGIBLE FOR INSPECTIONS AND OR A CERTIFICATE OF OCCUPANCY. FOR INFORMATION CONTACT THE CONTRACTOR'S LICENSING OFFICE AT (772) 288-5482 OR (772) 288-5917. PLEASE INCLUDE ALL MUNICIPAL COMPETENCY CARD NUMBERS OR STATE CERTIFICATION NUMBERS. (NOT OCCUPATIONAL LICENSE NUMBERS)

	TYPE	COMPANY NAME	LICENSE NUMBER
CFO	CONCRETE - FORM		
CFI	- FINISH		
BM	BLOCK MASON		
CB	COLUMNS & BEAMS		
CA	CARPENTRY ROUGH		
GD	GARAGE DOOR		
DH	DRYWALL - HANG		
DF	- FINISH		
IN	INSULATION		
LA	LATHING		
FI	FIREPLACE		
PAV	PAVERS		
AL	ALUMINUM		
LP	LP GAS		
PAV	PAINTING		
PL	PLASTER & STUCCO		
ST	STAIRS & RAILS		
RO	ROOFING		
TM	TILE & MARBLE		
WD	WINDOWS & DOORS		
PLU	* PLUMBING	The Plumbing Co	CFE CFC 1425875
AC	* HARV		
EL	* ELECTRICAL	David Chamber Elec	ME 00216



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

AL	* LOW VOLTAGE BURGLAR ALARM		
VS	VACUUM SOUND		
IR	* IRRIGATION		
SH	SHUTTERS		

* REQUIRES SEPARATE VERIFICATION FORMS.

I CERTIFY THAT THE INFORMATION STATED ON THE SUBCONTRACTORS' LIST IS ACCURATE AND THAT ALL WORK WILL BE PERFORMED BY MUNICIPAL OR STATE LICENSED CONTRACTORS. I UNDERSTAND THAT A COMPLETE NOTARIZED SUBCONTRACTORS LIST IS REQUIRED PRIOR TO ISSUANCE OF A CERTIFICATE OF OCCUPANCY.

[Handwritten Signature]

SIGNATURE OF CONTRACTOR
 (OR OWNER BUILDER IF APPLICABLE)

STATE OF Florida
 COUNTY OF Martin

SWORN TO AND SUBSCRIBED before me this 9th day
 of Apr, 2009

[Handwritten Signature]
 NOTARY PUBLIC

MY COMMISSION EXPIRES: _____





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

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

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

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

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

Owner/Builder Applicant Name: EDWARD J. LENAHAN

Site address of the proposed building work: 7 MIRAMAR RD. S. SEWALLS PT. STUART FL 34996

Name of legal title owner of the address above: EDWARD & PAMELA LENAHAN

Describe the scope of work for the proposed new construction: FLOOR TILE, SHOWER TILE (2), KITCHEN CABINETS
 DOORS + WINDOWS TRIM, PAINT EXT. + INT.

Name of Architect of Record: _____ Structural Engineer of Record: _____

Who will supervise the trade work to meet the applicable code? SELF

What provisions have you made for Liability and Property Damage Insurance? N/A

What provisions exist for withholding Social Security and Federal Income Taxes, as required by Federal Law, from wages paid to people you hire who are not licensed? _____

What previous Owner/Builder improvements have you done in the State of Florida? None

Location: _____ Scope of Work Done: _____ Year: _____

Location: _____ Scope of Work Done: _____ Year: _____

What code books do you have available for reference? Building: _____

Electric: _____ Plumbing: _____ HVAC: _____

Other: _____

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

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

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

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



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



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

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

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

14. ANY PERSON WORKING ON YOUR BUILDING WHO IS NOT LICENSED MUST WORK UNDER YOUR DIRECT SUPERVISION AND MUST BE EMPLOYED BY YOU, WHICH MEANS THAT YOU MUST DEDUCT F.I.C.A. AND WITHHOLDING TAX AND PROVIDE WORKERS' COMPENSATION FOR THAT EMPLOYEE, ALL AS PRESCRIBED BY LAW.

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

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

ON THIS 9 DAY OF April, 2009.

PROPERTY ADDRESS 7 MIRAMAR RD. S. Sewalls.

CITY Stuart STATE Fl. ZIP 34996.

Edward Kenahan
 SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 9th DAY OF April 2009

BY EDWARD KENAHAN

PERSONALLY KNOWN _____

OR PRODUCED ID

TYPE OF ID FLDL# L550-230-48-366-0

Valerie Meyer
 NOTARY SIGNATURE



The Plumbing Company of the Treasure Coast, Inc.

3321 S.E. Slater St.
 Stuart, FL 34997
 (772) 223-8688, Fax (772) 286-3315



PLUMBING FIXTURE LIST

CONTRACTOR: Ed Lenahan
 JOB NAME:
 JOB ADDRESS: 7 Miramar Sewall's Point

DATE: 04/01/09

PAGE 1

LOCATION/ITEM	QTY	DESCRIP. OF ITEM	COLOR
Master Bath			
Tub	1	Move and Reset Fixture By Others	Free standing tub w/wallmount fixtures
Tub Drain	1	Install New Fixture By Others	
Tub Faucet	1	Install New Fixture By Others	WALL MOUNT CTR. WALL ABOVE TUB
Shower	1	Install New Pan	BRICK CURB
Shower Faucet	1	Move and Install New Fixture By Others	N. WALL fixtures - E. wall shower head
Water Closet	1	Move and Reset Fixture By Others	OFFSET
Lavatory	1	Move and Reset Fixture By Others	
Lavatory Faucet	1	Install New Fixture By Others	
Bath # 2			
Shower	1	Change Tub To Shower Install New Pan	BRICK CURB
Shower Faucet	1	Move and Install New Fixture By Others	N. WALL fixtures, E. wall shower head
Water Closet	1	Move and Reset Fixture By Others	OFFSET
Lavatory	1	Install New Fixture By Others	
Lavatory Faucet	1	Install New Fixture By Others	
Kitchen			
Kitchen Sink	1	Install New Fixture By Others	
Kitchen Faucet	1	Install New Fixture By Others	
Disposal	1	Install New Fixture By Others	
Dishwasher	1	Hook Up Only	
Icemaker	1	Hook Up Only	
Laundry			
Washer	1	Move Washer Box to Garage (flip)	
Water Heater	1	Relocate Existing to Garage	

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 4-14-09
BUILDING OFFICIAL

Replace 2 outside HOSE B.B.s
 Replace water shut off outside garage
 MASTER BATH vanity had 2 sink set up - changed to 1 ctr. sink
 BATH # 2 vanity have to move water and drain 12" WEST
 M.B + BATH #2 shower DRAIN moved to ctr of PAN

ELECTRICAL

- #1) Move outlet for Washer + Dry From closet TO GARAGE
 - #2) Move water heater outlet From closet to GARAGE
 - #3) Add circuit for Freezer in GARAGE
 - #4) Add new circuit for microwave in kitchen
 - #5) Bring Power to island in kitchen
 - #6) Replace switches + Devices
 - #7) Replace old Lighting + FANS (Fixtures)
 - #8) Add switch, from Existing, for new vanity Lighting in Master BATH (HEES)
- IF NOT ACCEPTABLE CHANGES WILL
FILL OUT Additional Info. (IF ANY)

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Corinne Russell

From: Cristina Emmons [cemmons@pauldecorative.com]
Sent: Tuesday, April 07, 2009 8:58 AM
To: Corinne Russell
Subject: SPECS ON PAUL DECORATIVE ITEMS

EACH EXPOSED SET HAS A 7" C-C

C713-17 - SPOUT PROJECTS 7" FROM WALL *wall mount +*
C751-16 - SPOUT PROJECYS 7" FROM 6" HIGH RISERS *Deck mount +*
C752-18 - SPOUT PROJECTS 14" FROM 27" HIGH RISERS *FLOOR mount +*

IF THERE ARE ANY SPECIFIC MEASUREMENTS YOU NEED, LET ME KNOW AND I CAN GO OUT IN FACTORY AND TRY TO MEASURE ONE.

*Please share your email address and we will forward Allied Brass updates!
You can view our **NEW** products at www.alliedbrass.com!*

**THANK YOU AND HAVE A WONDERFUL DAY!
CRISTINA**

cemmons@pauldecorative.com
Paul Decorative Products / Customer Service
Phone 540-967-0400 ext 113
Fax 540-967-5948

cemmons@alliedbrass.com
Allied Brass / Customer Service
Phone 540-967-5970 ext 113
Fax 540-967-2580

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

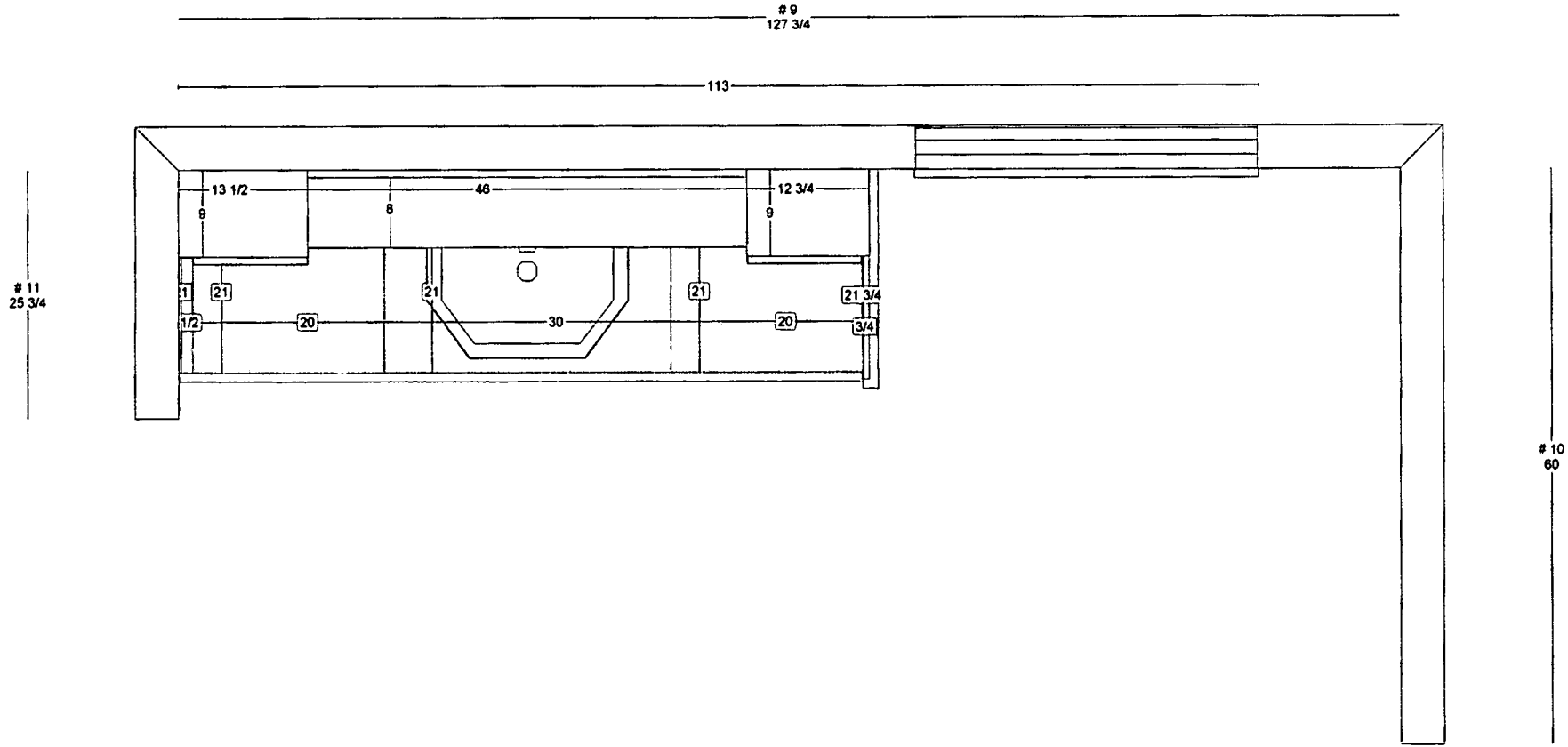
Flgett Enterprises
12894 S.E. Suzanne Dr.
Hobe Sound, Fl. 33455
772-546-6863

Lenahan Kitchen
White with Chocolate Glaze
Her Vanity White

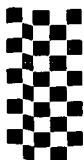
[03-31-09]

Her Master Bath

Not To Scale



TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY



JK



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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: _____

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

OWNERS NAME: Edward J. Lenoan

CONSTRUCTION ADDRESS: 7 Miramar Rd. S. Sewalls Pt. Street, Fl. 34996.

PERMIT TYPE: _____ RESIDENTIAL _____ COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS

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

SCOPE OF WORK: _____

VALUE OF CONSTRUCTION \$ _____

_____ LOW VOLTAGE	
TYPE OF EQUIPMENT: _____ SECURITY _____ VACUUM _____ SOUND SYSTEM _____ LANDSCAPE _____ OTHER	
SCOPE OF WORK: _____	VALUE _____

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

[Signature]

SIGNATURE OF LICENSED CONTRACTOR

4280 SW Post way

ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: The Plumbing Company

TELEPHONE NO: 772-223-8088 FAX NO: 772-280-3315

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: CFC1425875

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

VERIFICATION OF PARCEL CONTROL NUMBER

OWNER'S FULL NAME AS STATED ON DEED: _____

PARCEL CONTROL #: _____

SUBDIVISION: _____ LOT: _____ BLK: _____ PHASE: _____

SITE ADDRESS: _____

SEND OR FAX TO: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT



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

CONTRACTOR, OWNER /BUILDER ASBESTOS NOTIFICATION STATEMENT

Date: April 8 2009

Building Permit # _____

Site Address: 7 MIRAMAR Rd. S. Sewalls Pt. STUART FL. 34996

FBC 104.1.10 Asbestos. The enforcing agency shall require each building permit for the demolition or renovation of an existing structure to contain an asbestos notification statement which indicates the owner's or operator's responsibility to comply with the provisions of s. 469.003 Florida Statutes and to notify the Department of Environmental Protection of her or his intentions to remove asbestos, when applicable, in accordance with state and federal law. 469.003 License required.--

(1) No person may conduct an asbestos survey, develop an operation and maintenance plan, or monitor and evaluate asbestos abatement unless trained and licensed as an asbestos consultant as required by this chapter.

(2)(a) No person may prepare asbestos abatement specifications unless trained and licensed as an asbestos consultant as required by this chapter.

(b) Any person engaged in the business of asbestos surveys prior to October 1, 1987, who has been certified by the Department of Labor and Employment Security as a certified asbestos surveyor, and who has complied with the training requirements of s. 469.013(1)(b), may provide survey services as described in s. 255.553(1), (2), and (3). The Department of Labor and Employment Security may, by rule, establish violations, disciplinary procedures, and penalties for certified asbestos surveyors.

(3) No person may conduct asbestos abatement work unless licensed by the department under this chapter as an asbestos contractor, except as otherwise provided in this chapter.

FBC 105.3.6 Asbestos removal. (Owner /Builder Exemption)

Moving, removal or disposal of asbestos-containing materials on a residential building where the owner occupies the building, the building is not for sale or lease, and the work is performed according to the owner-builder limitations provided in this paragraph. To qualify for exemption under this paragraph, an owner must personally appear and sign the building permit application. The permitting agency shall provide the person with a disclosure statement in substantially the following form: **Disclosure Statement:** State law requires asbestos abatement to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own asbestos abatement contractor even though you do not have a license. You must supervise the construction yourself. You may move, remove or dispose of asbestos-containing materials on a residential building where you occupy the building and the building is not for sale or lease, or the building is a farm outbuilding on your property. If you sell or lease such building within 1 year after the asbestos abatement is complete, the law will presume that you intended to sell or lease the property at the time the work was done, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. Your work must be done according to all local, state and federal laws and regulations which apply to asbestos abatement projects. It is your responsibility to make sure that people employed by you have licenses required by state law and by county or municipal licensing ordinances.

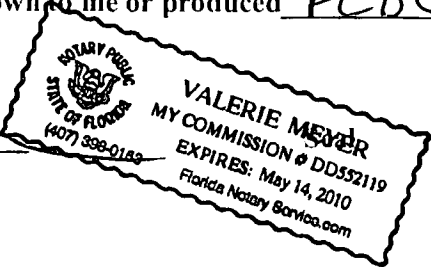
____ Contractor or ____ Owner/Builder Signature Edward Renahan

Subscribed and sworn to before me this 9th day of April, 2009, personally appeared

Edward Renahan who is personally known to me or produced ADC as

identification, and who did/did not take an oath.

Notary Public Signature Valerie Meyer



Handwritten signatures and initials on the left margin.



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

VERIFICATION OF CONTRACTOR

BUILDING PERMIT NUMBER: _____

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

OWNERS NAME: ED LEVATHAN

CONSTRUCTION ADDRESS: 7 MIRAMAR LANE

PERMIT TYPE: RESIDENTIAL _____ COMMERCIAL

- ELECTRIC
- PLUMBING
- HVAC
- IRRIGATION
- FUEL GAS

TYPE OF SERVICE: _____ NEW SERVICE EXISTING SERVICE _____ OTHER

SCOPE OF WORK: Relocate existing kitchen electrical wiring

VALUE OF CONSTRUCTION \$ 2000.00

LOW VOLTAGE

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

SCOPE OF WORK: _____ VALUE _____

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

David Chambers
SIGNATURE OF LICENSED CONTRACTOR

PO BOX 8467, Hobe Sound FL 33475
ADDRESS OF CONTRACTOR

COMPANY OR QUALIFIER'S NAME: DAVID CHAMBERS ELECTRIC

TELEPHONE NO: 772-546-4760 FAX NO: 772-546-0608

MUNICIPALITY OR STATE OF FLORIDA CONTRACTOR'S LICENSE NUMBER: ER0010098

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

VERIFICATION OF PARCEL CONTROL NUMBER

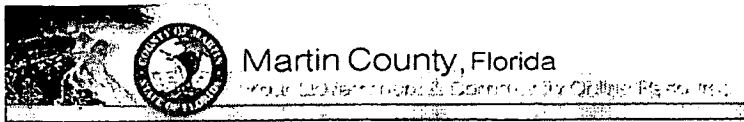
OWNER'S FULL NAME AS STATED ON DEED: _____

PARCEL CONTROL #: _____

SUBDIVISION: _____ LOT: _____ BLK: _____ PHASE: _____

SITE ADDRESS: _____

SEND OR FAX TO: TOWN OF SEWALL'S POINT BUILDING DEPARTMENT



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Contractor List

[Reset](#)

Search Display 15

Name	Company	License Type	License & Exp	Status	Address	Phone	Liability & Exp	Wk Comp & Exp
CHAMBERS, DAVID H	DAVID CHAMBERS ELECTRIC	MASTER ELECTRICIAN	ME00216 30-SEP-09	ACTIVE	BOX 8467 HOBE SOUND FL 33475	772-546- 4760 772- 546-0608	CAMPBELL- WILSON 29-DEC-09	CAMPBELL-WILSON INS 29-DEC-09

[Spread Sheet](#)

1 - 1

NOTICE OF COMMENCEMENT

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00

PERMIT #: _____ TAX FOLIO #: 01-38-41-009-000-00140-4

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE): Lot 14 Miramar 7 Miramar Rd. S. Sewalls Pt. Stuart Fl. 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Landscape, Paint, Cabinets, Bathroom Showers, Floors.

OWNER NAME: Edward J. Lenahan ADDRESS: 7 Miramar Rd. S. Sewalls Pt. Fl. 34996 PHONE NUMBER: 772-879-1048 FAX NUMBER: _____

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

CONTRACTOR: Owner Builder STATE OF FLORIDA ADDRESS: _____ MARTIN COUNTY PHONE NUMBER: _____ FAX NUMBER: _____

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

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

WARNING TO OWNER: ANY PAYMENTS MADE BY THE OWNER AFTER THE EXPIRATION OF THE NOTICE OF COMMENCEMENT ARE CONSIDERED IMPROPER PAYMENTS UNDER CHAPTER 713, PART 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 TO 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 OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER: [Signature]

SIGNATORY'S TITLE/OFFICE: Owner

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 9th DAY OF Apr 2009

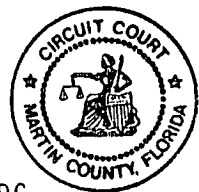
BY: Ed Lenahan AS Owner FOR _____ NAME OF PARTY ON BEHALF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN OR PRODUCED IDENTIFICATION: [check]

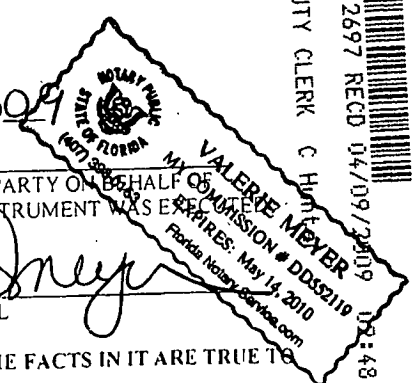
TYPE OF IDENTIFICATION PRODUCED: FDH# L550-230-48-366-0 VALERIE MEYER NOTARY SIGNATURE/ SEAL

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] (Signature of Natural Person Signing Above)



INSTR # 2140180 OR BK 02383 PG 2697 RECD 04/09/2009 Pg 2697 (189) MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hinkley



STOP WORK ORDER

DATE: 4-8-09

ADDRESS: 7 MIRAMAR

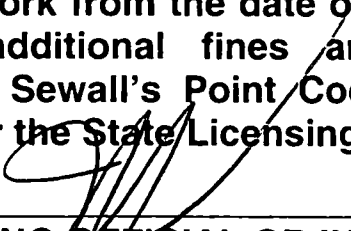
OWNER/CONTRACTOR is hereby notified to STOP WORK immediately upon reading this notice.

The work described below requires a permit:

FRAMING, DRYWALL

PLUMBING, ELECTRICAL

Continued work from the date of this notice will constitute additional fines and prosecution through the Sewall's Point Code Enforcement Board and/or the State Licensing Board.



BUILDING OFFICIAL OR INSPECTOR

**DO NOT REMOVE THIS NOTICE
UNTIL PERMIT IS OBTAINED!**

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 4-8 2009 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9114	Olney	slab-porches	PASS	
1 ST	108 Henry Sewalls Parks W			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
02	1 Miramar	re-check - a lot of work being done - make sure permit not required -	ISSUED S.W.O.	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8589	Hardin	Final	CANCEL	WILL RESCHEDULE
8:45	275 River Rd Stratton			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR



P/N: 9138

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 7 MIRAMAR

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

PLB / ELEC. ROUGH
NEED GFI @ ALL KIT RECEP.
" WAPYER VENT TO OUTSIDE
" GFI IN BATHS -

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

DATE: 4/22

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 4-22 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9130	Lenahan	electrical	FAIL	
2 9AM	7 Miramar OB	plumbing	PASS	INSPECTOR <i>[Signature]</i>
9132	O Steen	post anchor on back porch	PASS	
1	1 Ridgeway Rd OB			INSPECTOR <i>[Signature]</i>
CE		FENCE	WORK	ISSUED
	36 CASTLE HILL		w/o PERMIT.	S. W. O. INSPECTOR <i>[Signature]</i>
8928	Almond	final	PASS	CLOSE
	11 Oakwood Elec Conn by Mike			INSPECTOR <i>[Signature]</i>
9070	Frederick	final	PASS	CLOSE
	32 S Sewalls Anicon			INSPECTOR <i>[Signature]</i>
9129	Applied Prop.	sub-sheathing	PASS	
	114 N Sewalls Libra			INSPECTOR <i>[Signature]</i>
				INSPECTOR



P/N: 9138

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 7 MIRAMAR

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

SHOWER PAN

PAN IS INCORRECTLY
INSTALLED @ CORNER OF
CURB.

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

DATE: 4/24

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 5-1 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8919	Majewski	Final	PASS	CLOSE
2	24 E High Pt AAG Pools			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9146		ROOF REPAIR		
4	15 N. VIA LUCINDIA J.A. TAYLOR	DRY-IN	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8934	Packer	Final	PASS	CLOSE
15	12 Knowles Am Palm Beach	Garage door (neighbor will be there)		INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
CE	letters to owners	Witch Hunt - Dodder		
		Palm Rd Tuscan La any more		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8589	Hardin	Final	PASS	READY FOR CO.
5	275 River Rd Station	AFTER 10:00		INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
Tree	Read	Tree	PASS	
3	13 Simara St OB			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9133	Kurachan	SHOWER PAN	PASS	
6	7 MIRAMAR OB			INSPECTOR <i>[Signature]</i>

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 5-22 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9151	Burkholts	Final	FAIL	
2	7 Riverview Thynn's AC			INSPECTOR <i>[Signature]</i>
9138	[REDACTED]	electrical	PASS	CLOSE
1st	7 Miriam OB	Final		INSPECTOR <i>[Signature]</i>
9122	Juriet 14 CASTLE HILL GULICK	FINAL	PASS	CLOSE INSPECTOR <i>[Signature]</i>
				INSPECTOR
				INSPECTOR
				INSPECTOR
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 7-8 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
8839	Tooman 31 W High Pt Flouides Finest	Final Roof Deck	FAIL	NOT REASON INSPECTOR <i>JA</i>
8436	Tooman 31 W High Pt Flouides Finest	drainage site retention	FAIL	INSPECTOR <i>JA</i>
9142	Hinners 4 Morgan Cir Gribben	retaining wall	PASS	INSPECTOR <i>JA</i>
9142	Lenahan	Final AC	PASS	INSPECTOR <i>JA</i>
151	Miramar Ranger Air		PASS	INSPECTOR <i>JA</i>
9000	CDZ LLC 4 RIVER OAK PL SDH	PORCH CEILING ELECT	PASS	INSPECTOR <i>JA</i>
				INSPECTOR
				INSPECTOR

9177

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 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:	9177	DATE ISSUED:	JUNE 2, 2009
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS :			
CONTRACTOR:	RANGER AIR CONDITIONING		
PARCEL CONTROL NUMBER:	013841009000001404	SUBDIVISION	MIRAMAR - LOT 14
CONSTRUCTION ADDRESS:	7 MIRAMAR RD		
OWNER NAME:	LENAHAN		
QUALIFIER:	THOMAS RANGER	CONTACT PHONE NUMBER:	546-7777

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

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

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

REQUIRED INSPECTIONS

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

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

NOTICE OF COMMENCEMENT
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00

PERMIT #: _____ TAX FOLIO #: _____

STATE OF FLORIDA COUNTY OF MARTIN

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

LEGAL DESCRIPTION OF PROPERTY (AND STREET ADDRESS IF AVAILABLE):
7 Miramar Rd

GENERAL DESCRIPTION OF IMPROVEMENT: Hvac Change out

OWNER NAME: Edward L. Nathan
 ADDRESS: 7 Miramar Rd Sweet Fl 34996
 PHONE NUMBER: 772-463-6607 FAX NUMBER: _____

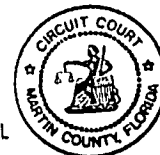
INTEREST IN PROPERTY: owner

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

CONTRACTOR: Ranger A/C Service
 ADDRESS: 9845 SE FM Hwy Hobe Sound Fl 33455
 PHONE NUMBER: 772-546-7777 FAX NUMBER: 772-546-0322

SURETY COMPANY (IF ANY): _____ STATE OF FLORIDA
 ADDRESS: _____ MARTIN COUNTY
 PHONE NUMBER: _____ FAX NUMBER: _____
 BOND AMOUNT: _____

LENDER/MORTGAGE COMPANY: _____
 ADDRESS: _____
 PHONE NUMBER: _____ FAX NUMBER: MARSHA EWING, CLERK



THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL

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: _____

DATE 6/2/09

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

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

PHONE NUMBER: _____ FAX NUMBER: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
 (THE 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.

x [Signature]
 SIGNATURE OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

+ [Signature]
 SIGNATORY'S TITLE/OFFICE
 THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 2nd DAY OF JUNE, 2009

BY: Edward Nathan AS owner FOR _____
 NAME OF PERSON TYPE OF AUTHORITY NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN OR PRODUCED IDENTIFICATION _____

TYPE OF IDENTIFICATION PRODUCED _____
Ashley L. Hoffa
 NOTARY SIGNATURE

NOTARY PUBLIC-STATE OF FLORIDA
Ashley L. Hoffa
 Commission # DD482043
 Expires: OCT. 16, 2010
 Bonded Thru Atlantic Bond

NOTARY 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)

INSTR # 2149707 OR BK 02393 PG 1469 RECD 06/02/2009 03:13:05 PM Pg 1469 (1ps) MARSHA EWING MARTIN COUNTY DEPUTY CLERK T Copus (asst mgr)

RECEIVED

Town of Sewall's Point BUILDING PERMIT APPLICATION

Permit Number: _____

Date: 6-2-09 TOWN OF SEWALL'S POINT

OWNER/TITLEHOLDER NAME: EDWARD LENAHAN Phone (Day) 772-463-6607 (Fax) _____

Job Site Address: 7 MIRAMAR Rd City: Stuart State: FL Zip: 34996

Legal Description MIRAMAR LOT 14 Parcel Control Number: 01-38-41-009-000-00140-4

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

Scope of work (please be specific): Change out Hvac System Like Air Like

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: \$ 9145.00 (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 AEG AEB X FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Ranger Air Conditioning Inc Phone: 772-546-7777 Fax: 772-546-0322

Street: 9545 SE Fed Hwy City: Hobe Sound State: FL Zip: 33455

State License Number: CAC 009726 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Ron Bennett Phone Number: 772-260-4719

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____

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

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

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

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

NOTICES TO OWNERS AND CONTRACTORS: 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT. 2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCOMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES. 3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 80-96. 4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF. FBC 2004 W/ 2006 REVISIONS SECT. 106.4.1, 106.4.1.1 - .5.

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

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

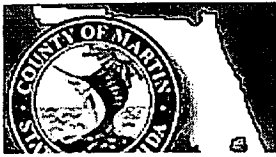
OWNER SIGNATURE: (required) Ashley L. Hoffa OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED) Commission # _____ Expires: OCT 16, 2009

CONTRACTOR SIGNATURE: (required) Ashley L. Hoffa Commission # DD48204 Expires: OCT 16, 2009

State of Florida, County of: MARTIN This the 2nd day of June, 2009 by Edward Lenahan who is personally known to me or produced personally known as identification. Ashley R Hoffa Notary Public My Commission Expires: Oct. 16, 2009

On State of Florida, County of: _____ This the 2nd day of June, 2009 by Thomas Ranger who is personally known to me or produced personally known as identification. Ashley R Hoffa Notary Public My Commission Expires: Oct. 16, 2009

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



Martin County, Florida

Laurel Kelly, C.F.A

Site Provided by...
governmax.com T1.11

Summary

print | | | | | Owner
1 of 1

Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-009-000-00140-4	7 MIRAMAR RD	17754	Owner	0	1

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

Summary
Property Location 7 MIRAMAR RD
Tax District 2200 Seawalls Point
Account # 17754
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.344

Legal Description
Property Information
 MIRAMAR LOT 14

Search By

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

Owner Information
Owner Information
 LENAHAN EDWARD J & PAMELA K

Mail Information
 7 MIRAMAR RD
 STUART FL 34996

Assessment Info
 Front Ft. 0.00

Market Land Value \$218,500
Market Impr Value \$259,190
Market Total Value \$477,690

Site Functions

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

Recent Sale
Sale Amount \$284,700

Sale Date 3/20/2009
Book/Page 2380 0885

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

Legal disclaimer / Privacy Statement Data updated on 05/10/2009



281

RANGER
AIR CONDITIONING SERVICE, INC.
9845 S.E. Federal Hwy., Hobe Sound, FL 33455
(561) 747-4554 (772) 546-7777
(772) 287-3333

Proposal and Agreement

Customer Name Ed Lenahan Phone 407-6607 Date 5-28-09
Address 7 Miramar Rd Job Address _____
City, State, Zip Stuart, FL 34997 Work Phone(s) _____

We will furnish, install and service the equipment listed below at the price, terms and conditions outlined on both sides of this proposal.

EQUIPMENT SPECIFICATIONS

Make TRANE Model Number(s) 4TEE3006A 4TTZ0048A 17.5 Seer
10 Kev Hicut

Installation shall include: Removal of old units, Install new
RL 20i system with new plenums, slab, clean copper line set
for RL10, disconnect at air handler, safety float switches, and
TRANE Thermostat

- | | | |
|--|---|--|
| <input type="checkbox"/> New _____ Amp disconnect | <input checked="" type="checkbox"/> Remove existing equipment from premises | <input type="checkbox"/> New condensate drain system |
| <input checked="" type="checkbox"/> Reclaim refrigerant | <input checked="" type="checkbox"/> Install energy saving setback thermostat | <input type="checkbox"/> New condensate pump |
| <input type="checkbox"/> New low voltage wiring | <input type="checkbox"/> New copper wire from _____ to _____ | <input checked="" type="checkbox"/> Install aux. condensate drain pan |
| <input type="checkbox"/> New fungus & mold strip | <input checked="" type="checkbox"/> Make air tight plenum transition | <input type="checkbox"/> New high efficiency air filter |
| <input checked="" type="checkbox"/> New reinforced equipment pad | <input type="checkbox"/> _____ new supply diffuser(s) | <input type="checkbox"/> New washable filter |
| <input type="checkbox"/> New vibration isolation pads | <input type="checkbox"/> New duct run from _____ to _____ | <input type="checkbox"/> New return air filter grill |
| <input type="checkbox"/> New properly sized refrigerant lines | <input type="checkbox"/> Noise reducing flexible duct connector | <input checked="" type="checkbox"/> Meet all code requirements |
| <input checked="" type="checkbox"/> New clean, dry ACR copper tubing | <input checked="" type="checkbox"/> Balance for uniform supply air distribution | <input checked="" type="checkbox"/> Complete system start up |
| <input type="checkbox"/> Insulate refrigerant suction line(s) | <input type="checkbox"/> New humidistat | <input checked="" type="checkbox"/> <u>10</u> year parts warranty |
| <input type="checkbox"/> Install refrigerant drier(s) | <input type="checkbox"/> New time delay relay | <input checked="" type="checkbox"/> <u>2</u> year labor warranty |
| <input checked="" type="checkbox"/> Charge to manufacturer's specs | <input type="checkbox"/> New standard thermostat | <input checked="" type="checkbox"/> <u>12</u> year compressor warranty |
| <input checked="" type="checkbox"/> Evacuate refrigerant system | <input checked="" type="checkbox"/> Clean work area to customer's satisfaction | <input checked="" type="checkbox"/> <u>1</u> year service agreement |
| <input checked="" type="checkbox"/> <u>Safety float switches</u> | <input checked="" type="checkbox"/> <u>Clean copper line set</u> | <input checked="" type="checkbox"/> <u>6</u> filters |

X in boxes = Yes

Option (below) Alternative (below) Is Is Not included in price

Installed price \$	<u>9145.00</u>
FPL Rebate \$	<u>1020.00</u>
37% off price	<u>244.00</u>
Taxes \$	<u>Incl'd</u>
Total Amount \$	<u>7861.00</u>
Down Payment \$	<u>3940.50</u>
BALANCE DUE \$	<u>3940.50</u>

Check # 4019

Terms: 500 TRANE Roberts back by mail from Trane if purchased before 6-1-09

Acceptance (Customer) By James Lenahan Date 5/28/09 Approval (Company) By Bill Gutzwiller Date 5-28-09

9253

SHUTTERS



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:	9232	DATE ISSUED:	AUGUST 14, 2009
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONDITIONS :			
CONTRACTOR:	ACTION HURRICANE SHUTTERS		
PARCEL CONTROL NUMBER:	013841009-000-001404	SUBDIVISION	MIRAMAR-LOT 14
CONSTRUCTION ADDRESS:	7 MIRAMAR RD		
OWNER NAME:	LENAHAN		
QUALIFIER:	EDWARD SCOZZARI	CONTACT PHONE NUMBER:	561-745-0605

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.

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 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS 8:30AM TO 12:00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

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

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

RECEIVED
DATE: 8-13-09
TOWN OF SEWALL'S POINT

**Town of Sewall's Point
BUILDING PERMIT APPLICATION**

Permit Number: _____

Date: 8/12/09

OWNER/TITLEHOLDER NAME: Edward + Pamela Lenahan Phone (Day) 463-6607 (Fax) _____

Job Site Address: 7 Miramar City: Sewalls Point State: FL Zip: 34996

Legal Description: Miramar Lot 14 Parcel Control Number: 01384100900000140-4

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

Scope of work (Class or class description): hurricane panels on 12 openings

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: \$ 3,460
(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 AEB X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only. Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Action Hurricane Shutters Phone: (561) 745-0605 Fax: (561) 745-0691

Street: 150 Toney Penna Drive, B City: Jupiter State: FL Zip: 33458

State License Number: _____ OR: Municipality: Martin License Number: SPO2234

LOCAL CONTACT: Eddy Scozzari Phone Number: (561) 262-9591

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____

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

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

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

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

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

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

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

OWNER SIGNATURE: (required)
OF OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Pamela Lenahan

State of Florida, County of: Martin

This the 13th day of Aug

by Pamela Lenahan who is personally

known to me or produced EDDY S

as identification. Valerie Meyer

Notary Public

My Commission Expires: _____

CONTRACTOR SIGNATURE: (required)
Edward Scozzari

On State of Florida, County of: Palm Beach

This the 13 day of August 2009

by Edward Scozzari who is personally

known to me or produced _____

as identification. _____

My Commission Expires: _____

ERIN JEAN MARTENS
Notary Public - State of Florida
My Comm. Expires Aug 14, 2012
Commission # DD 815052
Bonded Through National Notary Assn.

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

[Handwritten signature]



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

Site Provided by...
 governmax.com T1.11

Summary

print | | | | | Owner 1 of 1

Parcel Info

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
01-38-41-009-000-00140-4	7 MIRAMAR RD	17754	Owner	0	1

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

Summary
Property Location 7 MIRAMAR RD
Tax District 2200 Sewall's Point
Account # 17754
Land Use 101 0100 Single Family
Neighborhood 120200
Acres 0.344

Legal Description
Property Information
 MIRAMAR LOT 14

Search By

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

Owner Information
Owner Information
 LENAHAN EDWARD J & PAMELA K

Mail Information
 7 MIRAMAR RD
 STUART FL 34996

Assessment Info
Front Ft. 0.00

Market Land Value \$218,500
Market Impr Value \$259,190
Market Total Value \$477,690

Site Functions

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

Recent Sale
Sale Amount \$284,700

Sale Date 3/20/2009
Book/Page 2380 0885

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

Legal disclaimer / Privacy Statement

Data updated on 6/22/2009



NOTICE OF COMMENCEMENT
TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2,500.00

PERMIT #: _____ TAX FOLIO #: _____

STATE OF FLORIDA COUNTY OF MARTIN

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

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

LOT 14 - MIRAMAR

GENERAL DESCRIPTION OF IMPROVEMENT:

INSTALL HURRICANE SHUTTERS

OWNER NAME:

Edward Lenahan

ADDRESS:

#7 - MIRAMAR RD. - STUART, FL.

PHONE NUMBER:

FAX NUMBER:

INTEREST IN PROPERTY:

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

CONTRACTOR:

Action Hurricane Shutters Inc.

ADDRESS:

P.O. Box 12 - Jupiter, FL 33468

PHONE NUMBER:

FAX NUMBER:

561-745-0691

STATE OF FLORIDA
MARTIN COUNTY

SURETY COMPANY (IF ANY):

ADDRESS:

PHONE NUMBER:

BOND AMOUNT:

FAX NUMBER:

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

LENDER/MORTGAGE COMPANY:

ADDRESS:

PHONE NUMBER:

FAX NUMBER:

BY: _____ D.C.

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

NAME:

ADDRESS:

PHONE NUMBER:

FAX NUMBER:

IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES _____ OF

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

PHONE NUMBER:

FAX NUMBER:

EXPIRATION DATE OF NOTICE OF COMMENCEMENT:

(THE 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 OF OWNER OR OWNER'S AUTHORIZED OFFICER/DIRECTOR/PARTNER/MANAGER

SIGNATORY'S TITLE/OFFICE

THE FOREGOING INSTRUMENT WAS ACKNOWLEDGED BEFORE ME THIS 13th DAY OF July, 2009

BY: Edward Lenahan Jr AS Owner

NAME OF PERSON TYPE OF AUTHORITY

FOR Edward Lenahan Jr NAME OF PARTY ON BEHALF OF WHOM INSTRUMENT WAS EXECUTED

PERSONALLY KNOWN _____ OR PRODUCED IDENTIFICATION

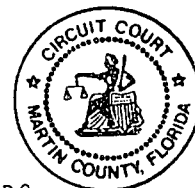
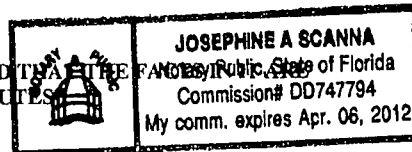
TYPE OF IDENTIFICATION PRODUCED FL DL L550-230-48-366-C

NOTARY SIGNATURE

NOTARY SEAL

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

(Signature of Natural Person Signing Above)



INSTR # 2156157 OR BK 02400 PG 1549 RECD 07/13/2009 10:52:15 AM
Pg 1549 (1pg)
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter



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

HURRICANE SHUTTER INSTALLATION CHECKLIST

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

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

- 1 Copy Completed Permit application
- 2 Copies Shutter schedule
- 2 Copies Floor plan sketch showing the location and ID number of each shutter.
MUST MATCH SHUTTER SCHEDULE.
- 2 Copies Shutter engineering specifications complying with the
2007 FBC
- 1 Copy Prior to the final inspection; an impact installation affidavit must be submitted.

ACTION HURRICANE SHUTTERS, INC.

Mailing Address: P.O. Box 12 Jupiter, FL 33468
Physical Address: 150 Toney Penna Drive, Suite B Jupiter, FL 33458
(561) 745- 0605 Fax (561) 745-0691

License # U-17248

Sales Estimate Date: 06/29/09

Sold To: Eddie and Pam Lenoham

Phone: (772) 463-6607 Fax: (561)

Job address: 7 Miramar Road

Action Hurricane Shutters, Inc. (Seller) and the Purchaser agree to the sale and installation and delivery of the specified goods or service at the below specified price and terms.

12 Total openings

12 openings covered with aluminum panels and track.

Materials and Labor Costs: \$3,860.00	\$ 3460.
Permit Fee: \$120.00	
Total Cost: \$3,980.00	\$ 3580
½ Deposit Due: \$1,990.00	1740
Balance Due Upon Completion: \$1,990.00	1740

This estimate is valid for 30 days only.

All products meet the standards as adopted by Dade County, Florida and comply with the Florida Building Code standards for wind pressure(140 mph) and impact from wind borne debris (ASE 7/88). This does not apply to decorative shutters.

Includes stainless fasteners, track, and full installation. If electrical work is required this must be contracted separately by a licensed electrician.

Please allow estimated time frame of 3-6 weeks for delivery from the date the contract is signed by both parties and deposit is paid. Action Hurricane Shutters reserves the right to reschedule the work referenced in this agreement according to availability of materials, labor, and weather.

This contract shall not be binding until approved and countersigned by an officer of Action Hurricane Shutters, Inc.

This agreement can not be modified without the express written agreement of both parties.

DEPOSIT DUE: UPON SIGNATURE OF SALES AGREEMENT.

BALANCE DUE TERMS: UPON COMPLETION.

Purchaser certifies by his/her signature that he/she has read and fully understands and accepts all the terms and conditions of this contract.

Purchaser:  Date July 1 '09

Seller:  Date 7/18/09



Town of Sewalls Point

MARTIN COUNTY BUILDING DEPARTMENT
 900 SE RUIHKE STREET
 STUART, FL 34994
 (772) 288-5916
 FAX (772) 288-5911

SHUTTER SCHEDULE

I.D. NO.	APPOX OPENING SIZE (WXH)	APPOX SHUTTER WIDTH	APPOX HEIGHT	# OF STORM BARS REQ'D	ANCHOR SPACING	# OF WINDOW BARS EACH SIDE	HEADER REINF. REQ'D YES/NO	REMARKS Design Pressures
	37" X 63"	45"	71"	N/A	12"	N/A	NO	EXAMPLE
1	SAME →	7'	88"	N/A	9"	N/A	NO	-41.9
2		8 1/2'	78				U + F Trac	-41.9
3		3	69				H + F	-46.2
4		2	44					-46.2
5		3	69					-46.2
6		3	69					-46.2
7		3	69					-46.2
8		3	69					-46.2
9		3	69					-46.2
10		3	69					-46.2
11		3	69					-57.1
12		8 1/2'	78				U + F Trac	-41.9
13								
14								
15								
16								
17								
18								
19								
20								
21								
22								
23								
24								
25								

Zone 4

Zone 5
Zone 4

FILE COPY
 TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 8.13.09
 BUILDING OFFICIAL

Exposure C

Worst Case = 9"

ACTION HURRICANE SHUTTERS, INC.

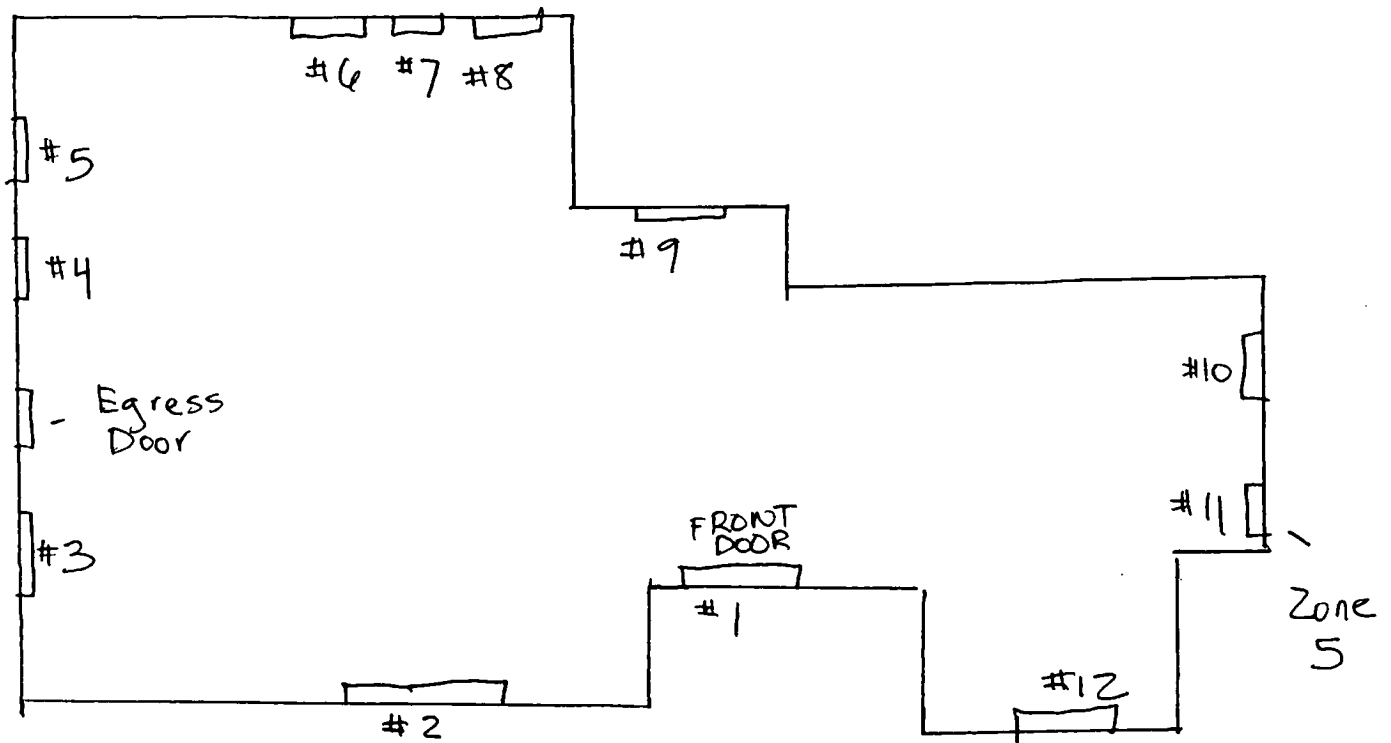
150 Toney Penna Dr., Suite # B, Jupiter, FL 33458

(561) 745- 0605

Fax (561) 745-0691

License # U-17248

Address: 7 Miramar Rd



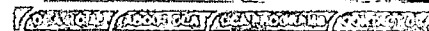
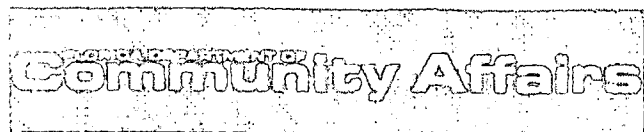
TOWN OF PALM BEACH

Florida Building Code, Residential 2007

Wall components and cladding pressures for 140 MPH basic wind speed, Exposure "C" from Table R301.2(2) with adjustment factors as required by Table R301.2(3), Florida Building Code, Residential 2007.

Zone 4	Building Mean Roof Height																			
	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-	+	-
10	42.7	46.2	45.5	49.2	47.7	51.6	49.4	53.5	51.2	55.4	52.6	56.9	54.0	58.4	55.1	59.6	56.1	60.7	57.2	61.9
20	40.8	44.4	43.4	47.3	45.5	49.5	47.2	51.4	48.9	53.2	50.2	54.7	51.6	56.2	52.6	57.2	53.6	58.4	54.6	59.5
50	38.2	41.9	40.8	44.6	42.7	46.7	44.2	48.4	45.8	50.2	47.1	51.6	48.3	52.9	49.3	54.0	50.2	55.0	51.2	56.1
100	36.3	39.9	38.7	42.6	40.5	44.6	42.0	46.2	43.5	47.9	44.7	49.2	45.9	50.5	46.8	51.5	47.7	52.5	48.6	53.5
Zone 5	10% of least horizontal dimension or 0.4h whichever is less. Not less than 4% of least horizontal dimension or 3 feet.																			
10	42.7	57.1	45.5	60.9	47.7	63.7	49.4	66.1	51.2	68.4	52.6	70.3	54.0	72.2	55.1	73.6	56.1	75.0	57.2	76.5
20	40.8	53.2	43.5	56.8	45.5	59.4	47.2	61.6	48.9	63.8	50.2	65.6	51.6	67.3	52.6	68.6	53.6	70.0	54.6	71.3
50	38.2	48.2	40.8	51.3	42.7	53.7	44.2	55.7	45.8	57.7	47.1	59.3	48.3	60.9	49.3	62.1	50.2	63.2	51.2	64.5
100	36.3	44.4	38.7	47.3	40.5	49.5	42.0	51.4	43.5	53.2	44.7	54.7	45.9	56.1	46.8	57.3	47.7	58.4	48.6	59.5

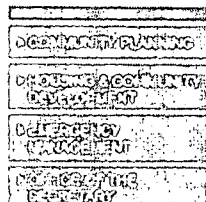
Non-residential buildings and residential buildings higher than 60 feet will required signed/sealed wind load calculations to ASCE7-05, 140 MPH, Exposure "C"



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Product Approval Menu > Product or Application Search > Application List > **Application Detail**



FL # FL11964
 Application Type New
 Code Version 2007
 Application Status Approved
 Comments
 Archived

Product Manufacturer Eastern Metal Supply
 Address/Phone/Email 4268 Westroads Drive
 West Palm Beach, FL 33407
 (800) 432-2204
 Irodriguez@easternmetal.com

Authorized Signature Bill Feeley
 Irodriguez@easternmetal.com

Technical Representative
 Address/Phone/Email

Quality Assurance Representative
 Address/Phone/Email

Category Shutters
 Subcategory Storm Panels

Compliance Method Evaluation Report from a Florida Registered Architect or a Licensed Florida Professional Engineer
 Evaluation Report - Hardcopy Received

Florida Engineer or Architect Name who developed the Evaluation Report Walter A. Tillit, Jr
 Florida License PE-44167
 Quality Assurance Entity National Accreditation and Management Institute
 Quality Assurance Contract Expiration Date 12/31/2010
 Validated By John Henry Kampmann Jr.
 Validation Checklist - Hardcopy Received

Certificate of Independence FL11964_R0_COI_Certification of independence 08-0522.03.PDF

Referenced Standard and Year (of Standard)	Standard	Year
	ASTM E1886	2002
	ASTM E1996	2002
	ASTM E330	2002

Equivalence of Product Standards
 Certified By

Sections from the Code

GENERAL NOTES:

1. STORM PANEL SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2007 EDITION OF THE FLORIDA BUILDING CODE. THIS STORM PANEL SHALL NOT BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES (MIAMI-DADE / BROWARD COUNTIES). DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE, FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE STORM PANEL WILL BE INSTALLED, AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, IN ACCORDANCE WITH ASCE 7-05 STANDARD. IN ORDER TO VERIFY THAT COMPONENTS AND ANCHORS ON THIS P.E.D. AS TESTED WERE NOT OVER STRESSED, A 33% INCREASE IN ALLOWABLE STRESS FOR WIND LOADS WAS NOT USED IN THEIR ANALYSIS. A DURATION FACTOR $CD=1.60$ WAS USED FOR VERIFICATION OF FASTENERS IN WOOD.

STORM PANEL'S ADEQUACY FOR IMPACT AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.2 OF THE ABOVE MENTIONED CODE AS PER AMERICAN TEST LAB REPORTS # 0321.01-05, # 0812.01-05 AND # 0119.01-05, PER ASTM E 1886-02, E 1996-02 AND ASTM E-330 STANDARDS, QUALIFIED FOR WIND ZONES 1, 2 AND 3; MISSILE TYPE D (BASIC PROTECTION ONLY) AND FOR INSTALLATION AT NON ESSENTIAL FACILITIES AS DEFINED BY SECTIONS 6.2.1.1 AND 6.2.1.2 OF ASTM E 1996-02.

- 2. ALL ALUMINUM SHEET METAL PANELS SHALL HAVE 5052-H32 OR 3004-H34 ALLOY.
- 3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 6063-T6 ALLOY & TEMPER UNLESS OTHERWISE NOTED. STORM PANEL COMPONENTS (1) STUCCO PLATE AND (2) SNAP CAP ARE PATENT PENDING.
- 4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 W/ 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH.
- 5. BOLTS TO BE ASTM A-307 GALVANIZED STEEL OR AISI 304 SERIES STAINLESS STEEL WITH 35 ksi MINIMUM YIELD STRENGTH.
- 6. ANCHORS TO WALL SHALL BE AS FOLLOWS: (UNLESS OTHERWISE NOTED)

- 1/4" TAPCON ANCHORS AS MANUFACTURED BY I.T.W./BUILDEX.
- 1/4" S.G. TAPCONS AS MANUFACTURED BY ITW/ BUILDEX.
- 1/4" PANEL MATE ANCHORS MALE OR TVAS AS MANUFACTURED BY ELCO FASTENING SYSTEMS LLC.
- 1/4" x 3/4" SOLID SET ANCHORS, AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

NOTES:

- A.1) MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS AND S.G. TAPCONS IS 3/4"; FOR ELCO PANELMATE AND ELCO TVAS IS 2".
- A.2) 3/4" SOLID SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED.
-1/4" -20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
- A.3) IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, OR PAVERS BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS, ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE.

(B) TO EXISTING CONCRETE BLOCK WALL:

- 1/4" TAPCON ANCHORS AS MANUFACTURED BY I.T.W./BUILDEX.
- 1/4" S.G. TAPCONS AS MANUFACTURED BY ITW/ BUILDEX.
- 1/4" PANEL MATE ANCHORS MALE OR TVAS AS MANUFACTURED BY ELCO FASTENING SYSTEMS LLC.
- 1/4" x 3/4" SOLID SET ANCHORS, AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.

NOTES:

- B.1) MINIMUM EMBEDMENT OF TAPCON ANCHORS, S.G. TAPCONS, ELCO PANELMATE, ELCO TVAS. INTO THE CONCRETE BLOCK UNIT SHALL BE 1 1/4".
- B.2) -3/4" SOLID SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK UNIT NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED.
1/4" -20 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
- B.3) IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES IN B.1) & B.2) ABOVE.

(C) TO EXISTING WOOD FRAME BUILDINGS, SEE SPECIFICATIONS ON SHEETS 12, 13, 14 & 15. ANCHORAGE SHALL BE PERFORMED BEYOND ANY FINISH MATERIAL AT WALL LIKE BRICK VENEER, STUCCO OR ANY OTHER FINISH.

(D) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

- 7. PANELS MAY ALSO BE INSTALLED HORIZONTALLY FOLLOWING INSTALLATION DETAILS SHOWN ON SECTIONS 1 THRU 13 (SHEET 4 THRU 8) EXCEPT THAT HEADERS 2, 3, 3A & 4 SHALL NOT BE USED.
- 8. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE. THIS SHUTTER SHALL ONLY BE ATTACHED TO CONCRETE, BLOCK OR WOOD FRAME BUILDINGS.
- 9. THE INSTALLATION CONTRACTOR IS TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION. CAULK AND SEAL SHUTTER TRACKS ALL AROUND FULL LENGTH.
- 10. (a) THIS P.E.D. PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; I.E. WHERE THE SITE CONDITIONS DEVIATE FROM THE P.E.D.
(b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS P.E.D. PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.
(c) THIS P.E.D. WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.
(d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA REGISTERED ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER, SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.
(e) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.
- 11. SHUTTER MANUFACTURER'S LABEL SHALL BE LOCATED ON A READILY VISIBLE LOCATION AT STORM PANEL IN ACCORDANCE WITH SECTION 1714.8.3 OF FLORIDA BUILDING CODE. ONE LABEL SHALL BE PLACED FOR EVERY OPENING. LABELING TO COMPLY WITH SECTION 1714.8.2 OF THE FLORIDA BUILDING CODE.



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TILIT TESTING & ENGINEERING COMPANY

4350 N.W. 20th St., Ste. 203, WINGNA GARDENS, FL 33164
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 EE-0006719

WALTER A. TILIT JR., P.E.
 FLORIDA LIC. 44187

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL
 (2.00" DEEP)

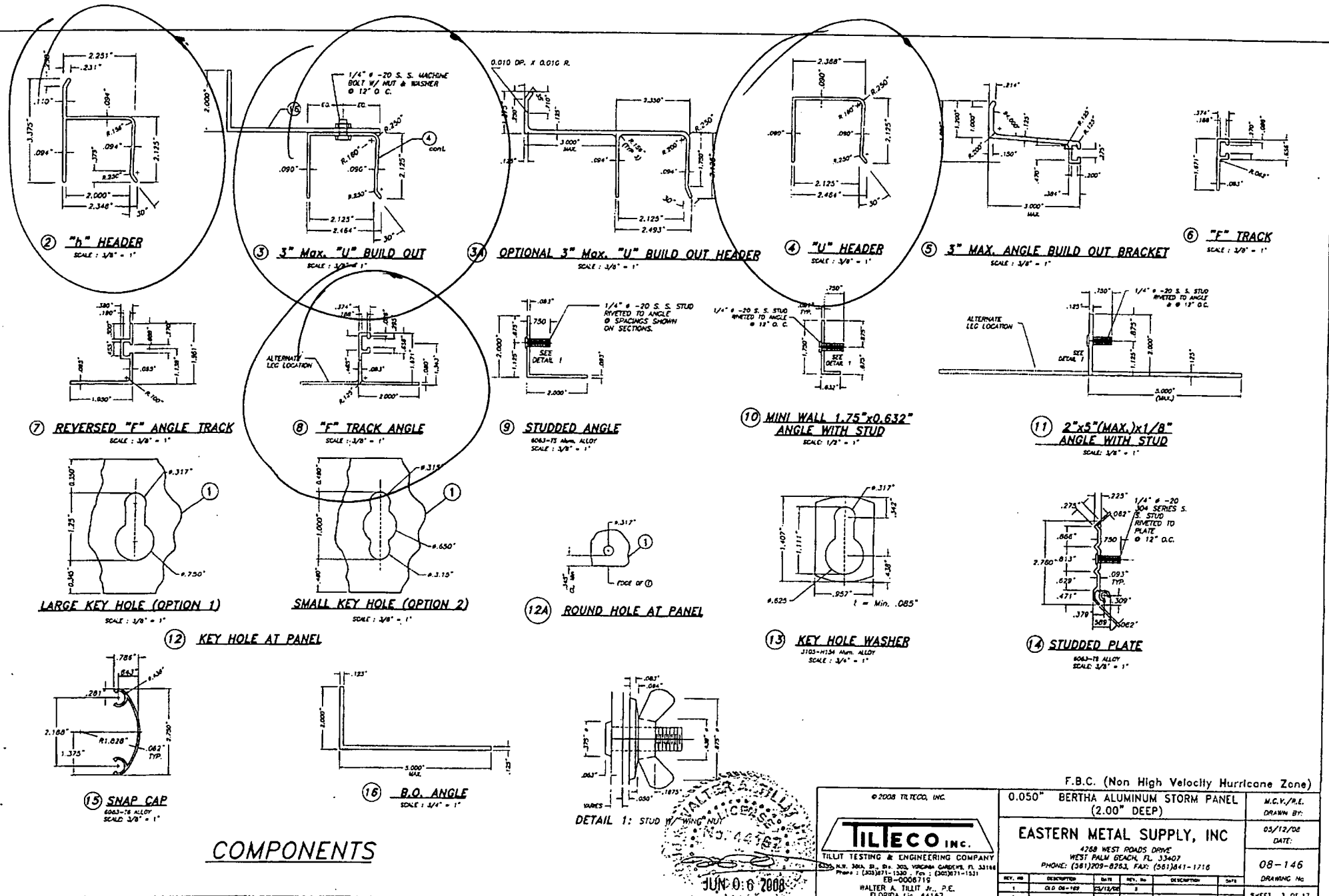
EASTERN METAL SUPPLY, INC

4258 WEST ROADS DRIVE
 WEST PALM BEACH, FL 33407
 PHONE: (561)208-8263, FAX: (561)841-1716

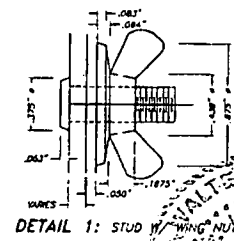
M.C.V./P.E.
 DRAWN BY:
 05/13/08
 DATE:
 08-146
 DRAWING NO.

REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD CHG. 149	01/27/08	2		

SHEET 1 OF 17



COMPONENTS



WALTER A. TILIT, P.E.
JUN 06 2008

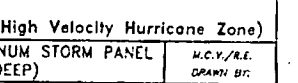
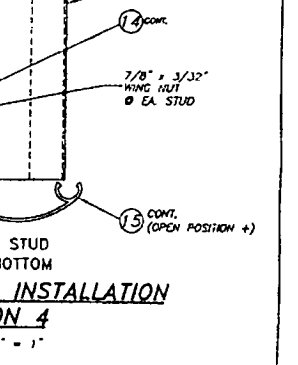
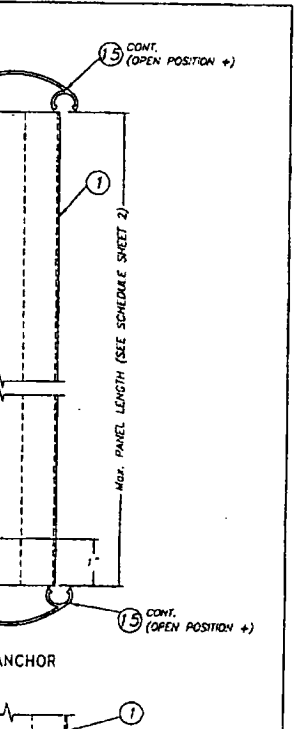
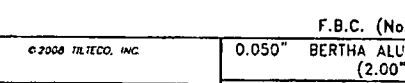
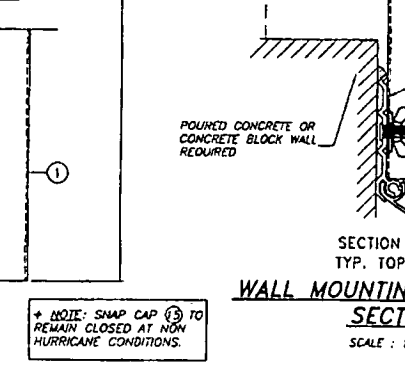
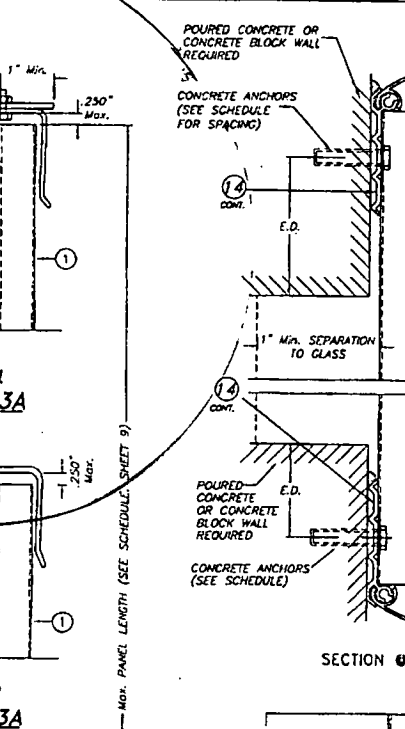
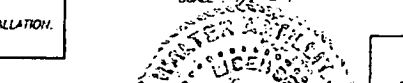
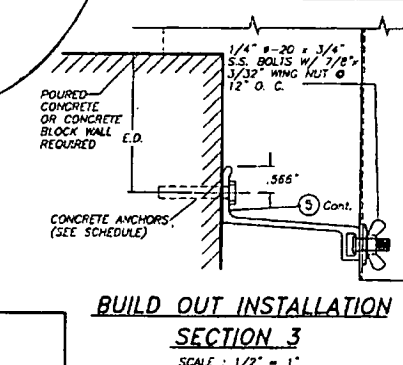
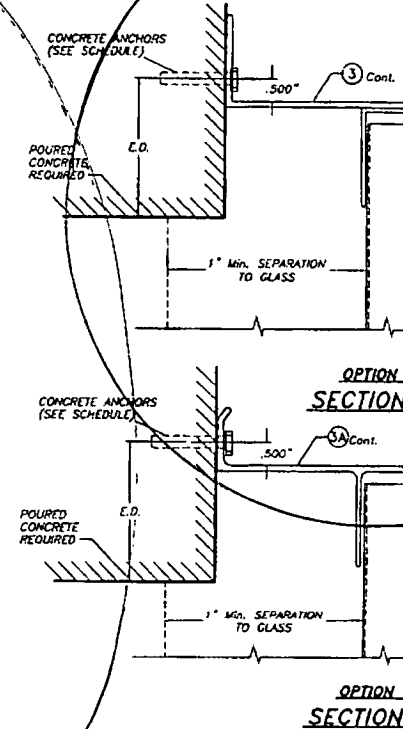
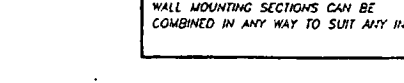
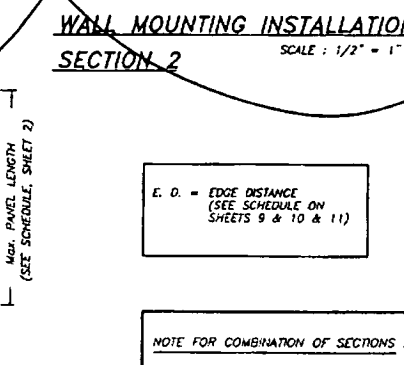
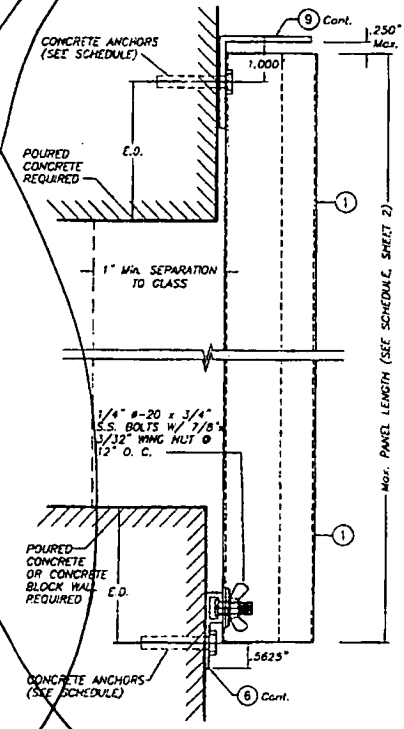
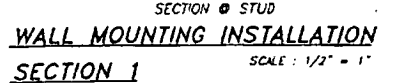
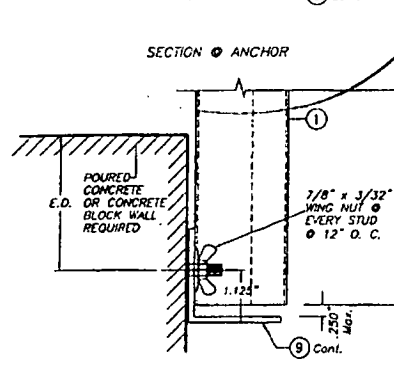
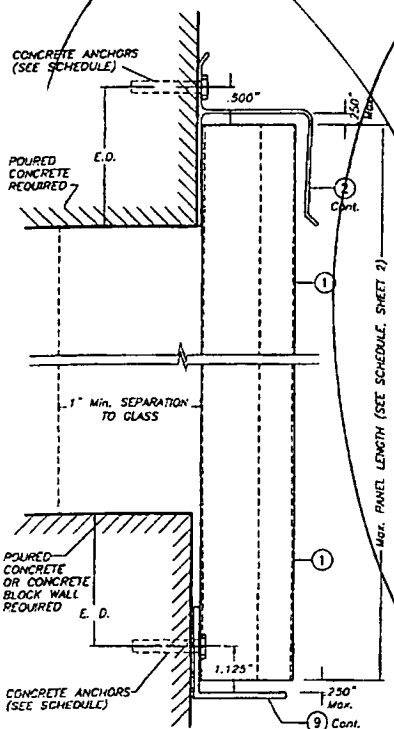
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TILTECO INC.

TILIT TESTING & ENGINEERING COMPANY

1305 N.W. 30th St., Ste. 202, VORCARRA GARDENS, FL 33416
 Phone: (202)711-1340 Fax: (202)711-1521
 EB-0006719
 WALTER A. TILIT, P.E.
 FLORIDA LIC. 44167

F.B.C. (Non High Velocity Hurricane Zone)		0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./P.E. DRAWN BY:
EASTERN METAL SUPPLY, INC		4388 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)209-0263, FAX: (561)841-1716		05/12/08 DATE:
REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION
1	OLD OR-162	05/12/08	2	
3				
				08-146 DRAWING NO
				SHEET 3 OF 17



WALL MOUNTING INSTALLATION
SECTION 2
SCALE: 1/2" = 1"

OPTION #1
SECTION 3A

OPTION #2
SECTION 3A

WALL MOUNTING INSTALLATION
SECTION 4
SCALE: 1/2" = 1"

E. D. = EDGE DISTANCE
(SEE SCHEDULE ON
SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS :
WALL MOUNTING SECTIONS CAN BE
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

+ NOTE: SNAP CAP (3) TO
REMAIN CLOSED AT NON
HURRICANE CONDITIONS.

WALL MOUNTING INSTALLATION
SECTION 1
SCALE: 1/2" = 1"

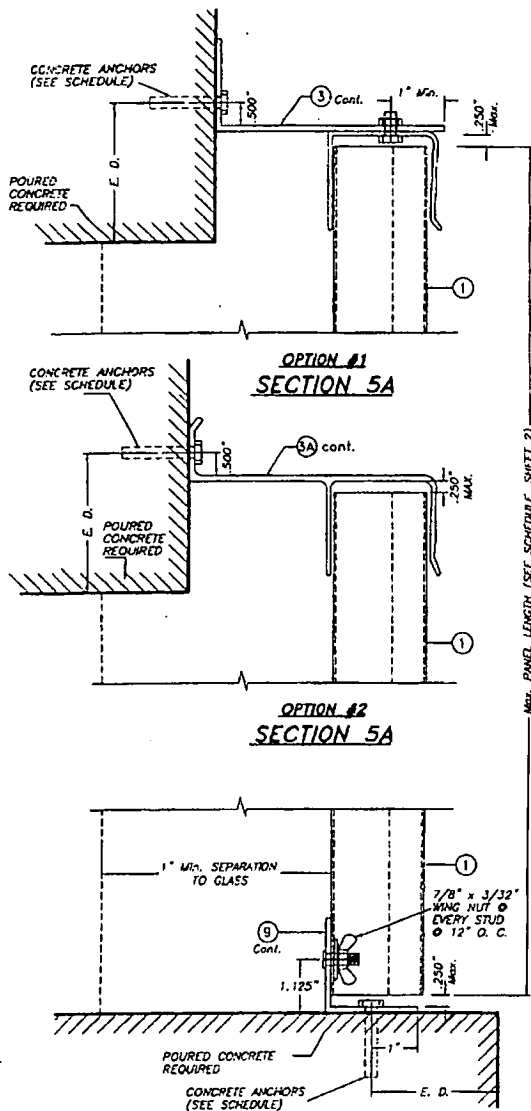
NOTE: DETAIL OF SECTION 0 STUD VALID ALSO FOR
WALL MOUNTING INSTALLATION - SECTION 2 (TOP)

BUILD OUT INSTALLATION
SECTION 3
SCALE: 1/2" = 1"



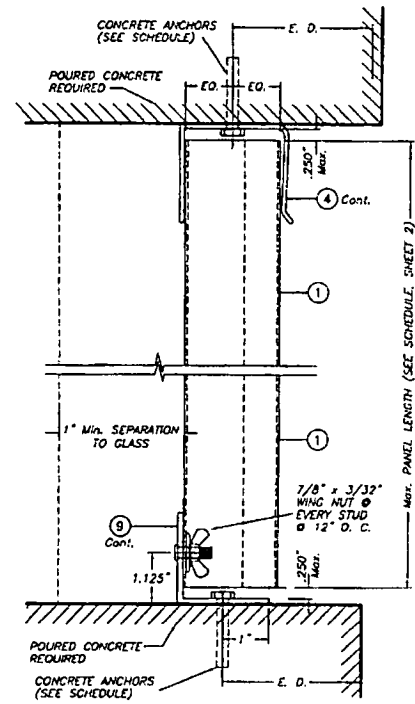
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TILTECO INC.
TILLIT TESTING & ENGINEERING COMPANY
1123 N.W. 56th St., Box 355, WIPACAH GARDENS, FL 33188
Phone: (305)871-1530 • Fax: (305)871-1531
E8-00067:9
WALTER A. TILLIT JR., P.E.
FLORIDA 12-44187

0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		H.C.V./R.E. GRANTY BT:	
EASTERN METAL SUPPLY, INC		05/12/08 DATE:	
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)208-8218, FAX: (561)841-1718		08-146 DRAWING NO:	
REV. NO	DESCRIPTION	DATE	REV. NO
1	OLD 08-146	05/12/08	1



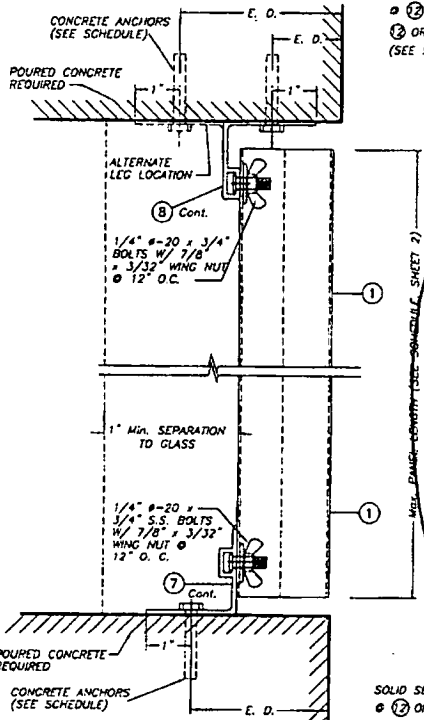
**BUILD-OUT & FLOOR MOUNTING
INSTALLATION - SECTION 5**

SCALE: 1/2" = 1"



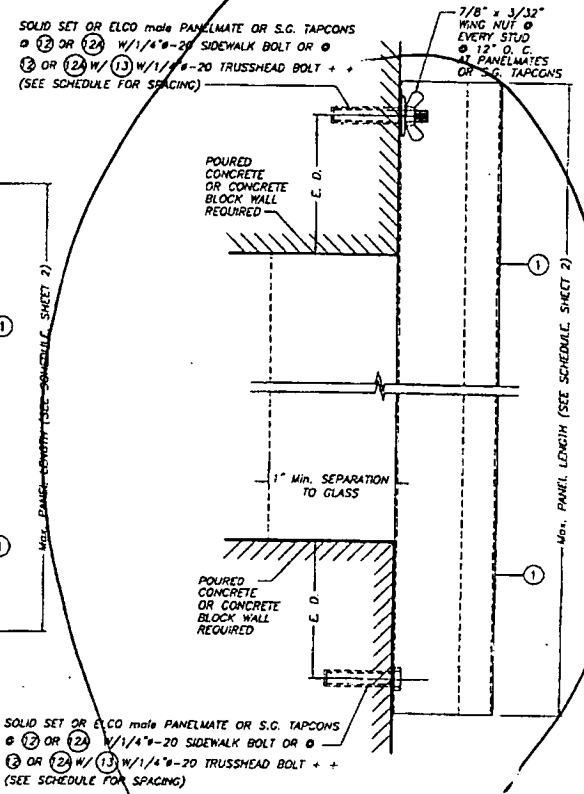
**CEILING & FLOOR MOUNTING
INSTALLATION - SECTION 6**

SCALE: 1/2" = 1"



**CEILING & FLOOR MOUNTING
INSTALLATION - SECTION 7**

SCALE: 1/2" = 1"



**DIRECT WALL MOUNTING INSTALLATION (D. M.)
- SECTION 8**

SCALE: 1/2" = 1"

**FRONT
DOOR**

E. D. = EDGE DISTANCE
(SEE SCHEDULE ON
SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS:
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



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EO-0008719

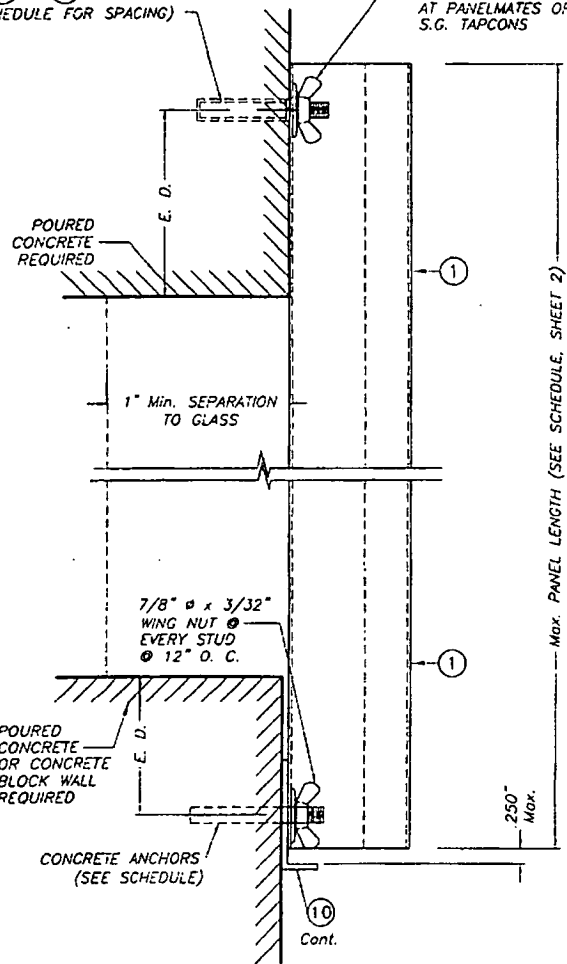
WALTER A. TILLET, JR., P.E.
FLORIDA Lic. 44107

F.B.C. (Non High Velocity Hurricane Zone)		0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./R.E. DRAWN BY:
EASTERN METAL SUPPLY, INC		4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)208-8783, FAX: (561)841-1716		05/12/08 DATE:
REV. NO.	DESCRIPTION	DATE	BY	REVISION
1	OLD DR-146	05/12/08		
				08-146 DRAWING NO
				SHEET 5 OF 17

SOLID SET OR ELCG male PANELMATE OR S.G. TAPCONS

⊙ (2) OR (2A) W/1/4"φ-20 SIDEWALK BOLT OR ⊙

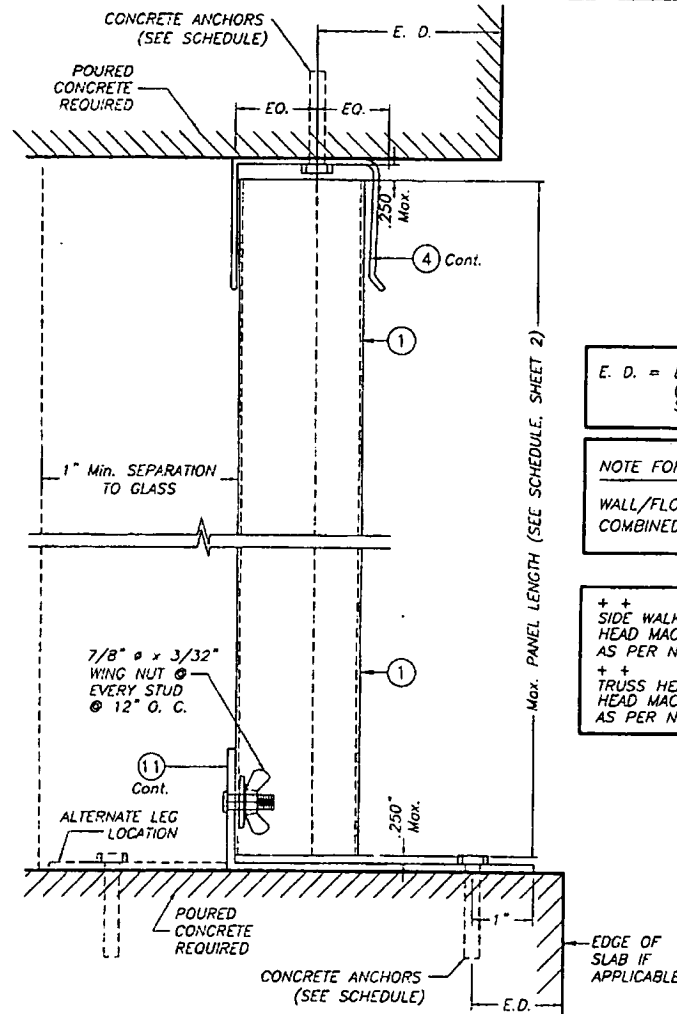
(2) OR (2A)W/ (13) W/1/4"φ-20 TRUSSHEAD BOLT + + 7/8"φ x 3/32" WING NUTS ⊙ 12" O.C. AT PANELMATES OR S.G. TAPCONS



WALL MOUNTING INSTALLATION

SECTION 9

SCALE : 1/2" = 1"



CEILING & FLOOR MOUNTING INSTALLATION

SECTION 10

SCALE : 1/2" = 1"

E. D. = EDGE DISTANCE
(SEE SCHEDULE ON SHEETS 9 & 10 & 11)

NOTE FOR COMBINATION OF SECTIONS :
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

+ + SIDE WALK BOLTS ARE 3/4"φx3/32"THICK HEAD MACHINE SCREW W/LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)
+ + TRUSS HEAD BOLTS ARE 1/2"φx1/8"THICK HEAD MACHINE SCREW W/LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)



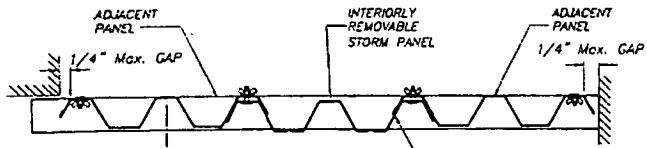
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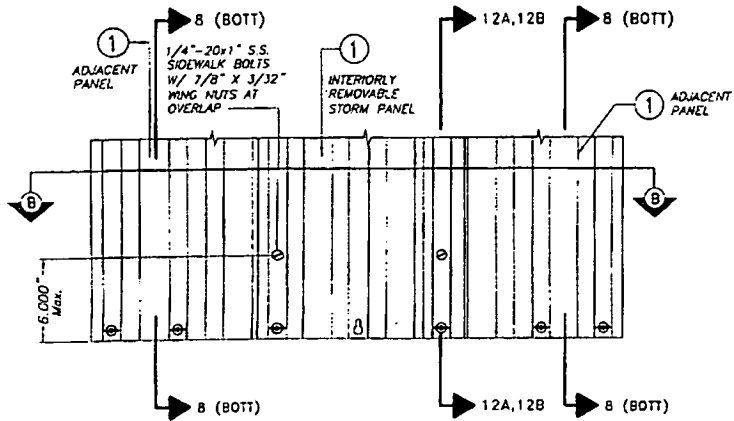
TILLIT TESTING & ENGINEERING COMPANY
1700 N.W. 34th St., Ste. 305, Virginia Gardens, FL 33118
Tel: (305)871-1530, Fax: (305)871-1531
EO-0006719

WALTER A. TILLIT, P.E.
FLORIDA Lic. 44107

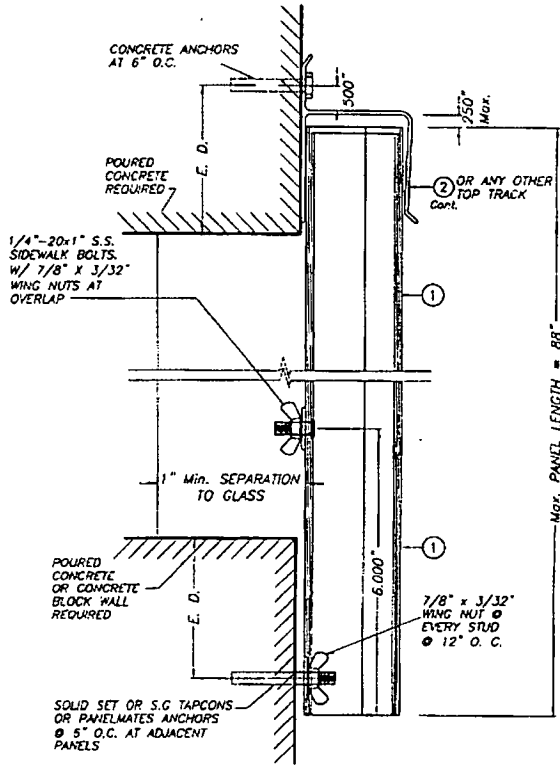
F.B.C. (Non High Velocity Hurricane Zone)		0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./P.E. DRAWN BY: 05/12/08 DATE: 08-146 DRAWING No	
EASTERN METAL SUPPLY, INC		4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)209-8263, FAX: (561)841-1716		SHEET 6 OF 17	
REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
1	OLD OR-189	05/12/08	1		
2			2		



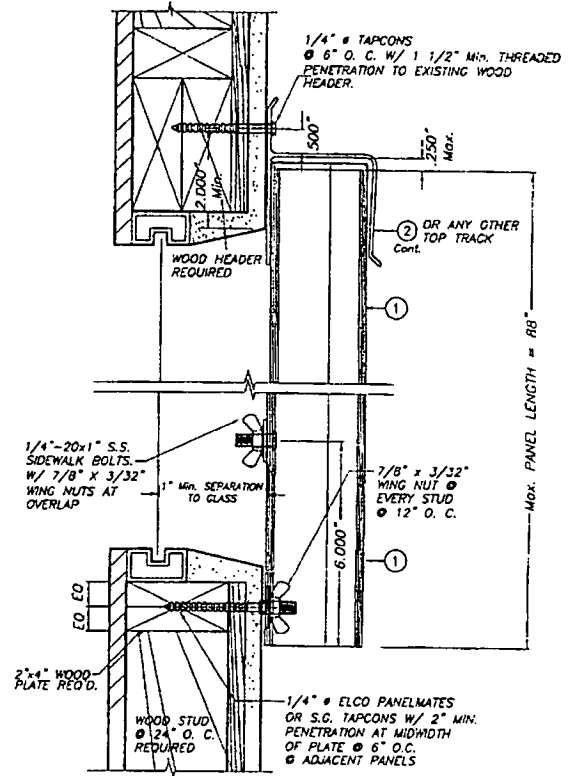
SECTION B-B
SCALE: 1 1/2" = 1"



**INTERIORLY REMOVABLE STORM PANEL
PARTIAL ELEVATION**
SCALE: 1 1/2" = 1"



**WALL MOUNTING INSTALLATION
SECTION 12A**
SCALE: 1/2" = 1"



**WALL MOUNTING INSTALLATION
SECTION 12B**
SCALE: 1/2" = 1"

INTERIORLY REMOVABLE STORM PANEL SECTIONS
MAX. DESIGN LOAD = +50.0, -50.0 p.s.f.



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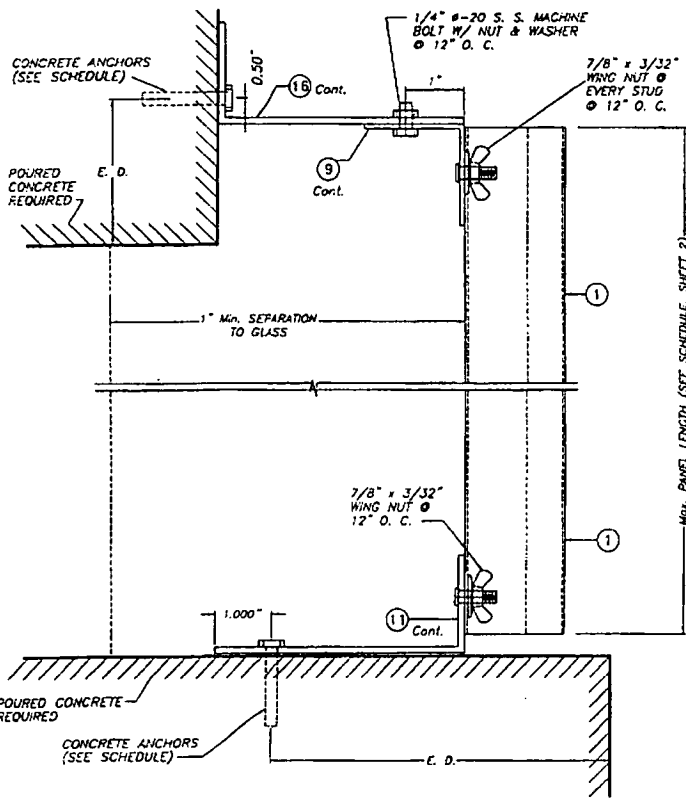
TILTECO INC.

TILLIT TESTING & ENGINEERING COMPANY

200 N.E. 34th St., Ste. 200, VERO BEACH, FL 33418
 PHONE: (305) 771-1530, Fax: (305) 771-1531
 ED-0006719

WALTER A. TILLIT Jr., P.E.
 FLORIDA Lic. 44187

0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./R.E. DRAWN BY:
EASTERN METAL SUPPLY, INC.		05/12/08 DATE:
4288 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 209-8263, FAX: (561) 841-1716		08-146 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD OR-117	01/12/08
2		

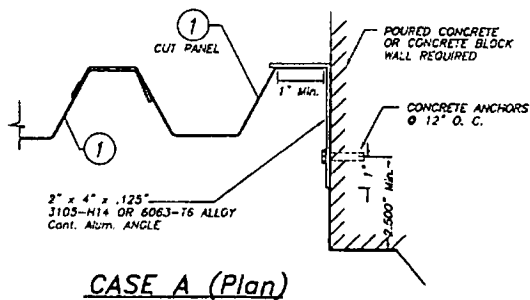


**CEILING & FLOOR MOUNTING
INSTALLATION - SECTION 13**

SCALE: 1/2" = 1"

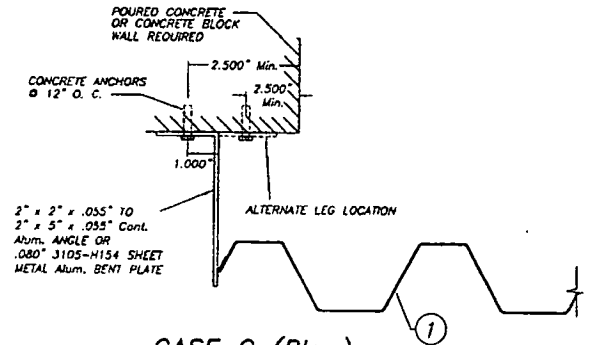
E. D. = EDGE DISTANCE
(SEE SCHEDULE ON
SHEETS 9, 10 & 11)

NOTE FOR COMBINATION OF SECTIONS:
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE
COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



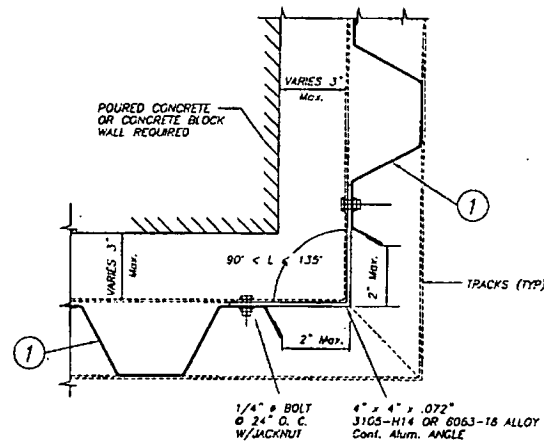
CASE A (Plan)

SCALE: 1/4" = 1"



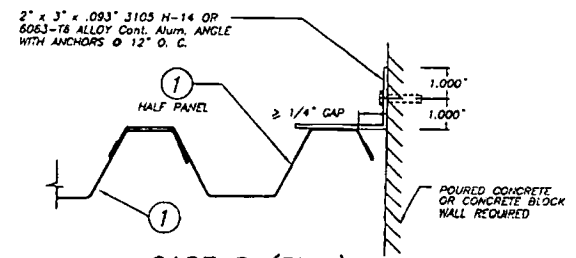
CASE C (Plan)

SCALE: 1/4" = 1"



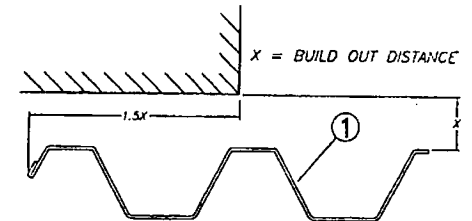
CASE B (Plan)

SCALE: 1/4" = 1"



CASE D (Plan)

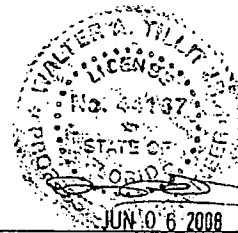
SCALE: 1/4" = 1"



CASE E (Plan)

SCALE: 1/4" = 1"

END CLOSURES DETAILS



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ED-0006719

WALTER A. TILT, P.E.
FLORIDA Lic. 44167

F.B.C. (Non High Velocity Hurricane Zone)				
0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)			M.C.V./P.E. DRAWN BY:	
EASTERN METAL SUPPLY, INC			05/12/08 DATE:	
4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561) 209-8263, FAX: (561) 841-1718			08-146	
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION
1	REV. 02-10-08	02/11/08	2	
2				
			DRAWING NO.	
			SHEET B OF 17	

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS IN CONCRETE AND CONCRETE BLOCK STRUCTURES

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH 1' (CL)	
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATE		PANELMATE TMS				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+40.0, -40.0 OR LESS	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	1	(TOP)	8'-0" OR LESS
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	1	(BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2	(TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2	(BOTTOM)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	2	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A	(TOP)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	3	(BOTTOM)	
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	4	(TOP)	
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	4	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A	(TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	5	(BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6	(TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6	(BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7	(TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7	(BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8	(TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8	(BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	9	(TOP)	
	12"	11"	12"	12"	12"	12"	12"	12"	12"	12"	9	(BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	10	(TOP)	
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10	(BOTTOM)		
9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	11A	(TOP)		
9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	11	(BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	13	(TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13	(BOTTOM)		

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH 1' (CL)	
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATE		PANELMATE TMS				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+40.0, -40.0 OR LESS	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	1	(TOP)	> 8'-0" UP TO 13'-0"
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	1	(BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2	(TOP)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2	(BOTTOM)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	2	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A	(TOP)	
	9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	3	(BOTTOM)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4	(TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A	(TOP)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	5	(BOTTOM)	
	9"	N/A	11 1/2"	N/A	12"	N/A	12"	N/A	N/A	N/A	6	(TOP)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	6	(BOTTOM)	
	9"	N/A	11"	N/A	12"	N/A	12"	N/A	N/A	N/A	7	(BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8	(TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8	(BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	9	(TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	9	(BOTTOM)	
	9"	N/A	11 1/2"	N/A	12"	N/A	12"	N/A	N/A	N/A	10	(TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10	(BOTTOM)	
9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	11A	(TOP)		
9"	9"	9"	9"	9"	9"	9"	9"	9"	9"	11	(BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	13	(TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	13	(BOTTOM)		

* USE 6" OC FOR PANEL LENGTHS LARGER THAN 10' - 0" AND USE 12" OC AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10' - 0"

** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (NOTE: MIN. E. D. FOR SOLIDSET ANCHORS IS 3") FOR THIS OPERATION TO BE POSSIBLE, REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE AT ANCHORS LEGEND.

ACTUAL E. D.	FACTOR		
	TAPCON (REGULAR)	S.G. TAPCON, PANELMATE OR PANELMATE TMS	SOLID SET
3"	-	.85	.75
2 1/2"	-	.71	.50
2"	-	.50	-
1 1/2"	.35	-	-

ANCHORS LEGEND

ANCHOR TYPE	Min. ANCHOR SPACING
TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TMS	3"
SOLID SET	3"

E. D. = EDGE DISTANCE



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TILTECO INC.

TILLET TESTING & ENGINEERING COMPANY
 6333 A.W. 34th St., Ste. 305, WINDY GARDENS, FL 33164
 Phone: (561)208-1530, Fax: (561)871-1331
 ED-0068719
 WALTER A. TILLET, J., P.E.
 FLORIDA LIC. 44167

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL
(2.00" DEEP)

EASTERN METAL SUPPLY, INC

4368 WEST ROADS DRIVE
WEST PALM BEACH, FL 33407
PHONE: (561)208-8263, FAX: (561)841-1218

M.C.V./R.E.
DRAWN BY:
05/12/08
DATE:
08-146
DRAWING NO

SHEET 9 of 17

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS IN CONCRETE AND CONCRETE BLOCK STRUCTURES

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2"										APPLICABLE TO SECTIONS 9 & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATE		PANELMATE TWS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	1 (TOP)	8'-0" OR LESS
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	1 (BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2 (TOP)	
	9"	7"	9"	9"	9"	9"	9"	9"	9"	9"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	9"	7"	9"	9"	9"	9"	9"	9"	9"	9"	3 (BOTTOM)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4 (TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	5 (BOTTOM)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (TOP)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	6 (BOTTOM)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (TOP)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	8 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	12"	12"	12"	9 (TOP)	
	12"	7"	12"	12"	12"	12"	12"	12"	12"	12"	9 (BOTTOM)	
	10"	N/A	12"	N/A	12"	N/A	12"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
	9"	7"	N/A	N/A	N/A	N/A	9"	7"	9"	7"	11A (TOP)	
	9"	7"	N/A	N/A	N/A	N/A	9"	7"	9"	7"	11 (BOTTOM)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)	

MAXIMUM DESIGN LOAD W (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2"										APPLICABLE TO SECTIONS 9 & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATE		PANELMATE TWS			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
	11"	N/A	11"	N/A	11"	N/A	11"	N/A	11"	N/A	1 (TOP)	8'-0" OR LESS
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	1 (BOTTOM)	
	11"	N/A	11"	N/A	11"	N/A	11"	N/A	11"	N/A	2 (TOP)	
	8"	4"	8"	8"	8"	8"	8"	7"	8"	7"	2 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A (TOP)	
	8"	4"	8"	8"	8"	8"	8"	7"	8"	7"	3 (BOTTOM)	
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	4 (TOP)	
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	4 (BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A (TOP)	
	5"	8"	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	5 (BOTTOM)	
	9"	N/A	10"	N/A	12"	N/A	11"	N/A	N/A	N/A	6 (TOP)	
	8"	N/A	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	6 (BOTTOM)	
	5"	N/A	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	7 (TOP)	
	5"	N/A	7"	N/A	9"	N/A	8"	N/A	N/A	N/A	7 (BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	6"	12"	6"	8 (TOP)	
	N/A	N/A	12"	12"	12"	12"	12"	6"	12"	6"	8 (BOTTOM)	
	11"	4"	11"	11"	11"	11"	11"	7"	11"	7"	9 (BOTTOM)	
	9"	N/A	10"	N/A	12"	N/A	11"	N/A	N/A	N/A	10 (TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10 (BOTTOM)	
	8"	4"	N/A	N/A	N/A	N/A	9"	7"	8"	7"	11A (TOP)	
	8"	4"	N/A	N/A	N/A	N/A	9"	7"	8"	7"	11 (BOTTOM)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (TOP)	
	6"	N/A	12"	N/A	6"	N/A	6"	N/A	N/A	N/A	13 (BOTTOM)	

+40.0 -40.0
UP TO
+60.0 -60.0

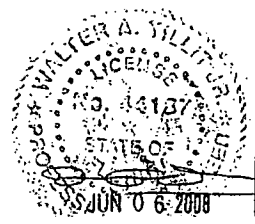
+60.0 -60.0
UP TO
+80.0 -80.0

ANCHORS LEGEND

** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE. FOR E.D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS (NOTE: MIN. E.D. FOR SOLIDSET ANCHORS IS 3") FOR THIS OPERATION TO BE POSSIBLE, REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE AT ANCHORS LEGEND.

ACTUAL E. D.	FACTOR		
	TAPCON (REGULAR)	S.G. TAPCON, PANELMATE OR PANELMATE TWS	SOLID SET
3"	-	.85	.75
2 1/2"	-	.71	.50
2"	-	.50	-
1 1/2"	.35	-	-

ANCHOR TYPE	MIN. ANCHOR SPACING
TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TWS	3"
SOLID SET	3"



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TILTECO INC.

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 EB-0006719
 WALTER A. TILT, Jr., P.E.
 FLORIDA Lic. 44187

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)

EASTERN METAL SUPPLY, INC

4268 WEST ROADS DRIVE
 WEST PALM BEACH, FL 33407
 PHONE: (561)209-8263 FAX: (561)841-1716

REV.	DATE	BY	CHK.	DESCRIPTION
1	05/12/08			

M.C.V./P.E.
DRAWN BY:
05/12/08
DATE
08-146
DRAWING NO
SHEET 10 OF 17

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS IN CONCRETE AND CONCRETE BLOCK STRUCTURES

MAXIMUM DESIGN LOAD # (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)	
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATE		PANELMATE TYS				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+40.0, -40.0 UP TO +60.0, -60.0	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	1	(TOP)	>8'-0" UP TO 12'-6"
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	1	(BOTTOM)	
	12"	N/A	12"	N/A	12"	N/A	12"	N/A	12"	N/A	2	(TOP)	
	9"	4 1/2"	9"	9"	9"	9"	9"	8 1/2"	9"	8 1/2"	2	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A	(TOP)	
	9"	4 1/2"	9"	9"	9"	9"	9"	8 1/2"	9"	8 1/2"	3	(BOTTOM)	
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	4	(TOP)	
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	4	(BOTTOM)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	6"	N/A	5A	(TOP)	
	6 1/2"	N/A	7 1/2"	N/A	6"	N/A	7 1/2"	N/A	N/A	N/A	5	(BOTTOM)	
	9"	N/A	9 1/2"	N/A	10"	N/A	9 1/2"	N/A	N/A	N/A	6	(TOP)	
	6 1/2"	N/A	7 1/2"	N/A	8"	N/A	7 1/2"	N/A	N/A	N/A	6	(BOTTOM)	
	6"	N/A	6 1/2"	N/A	7"	N/A	6 1/2"	N/A	N/A	N/A	7	(TOP)	
	6"	N/A	6 1/2"	N/A	7"	N/A	6 1/2"	N/A	N/A	N/A	7	(BOTTOM)	
	N/A	N/A	12"	12"	12"	12"	12"	6"	12"	6"	8	(TOP) *	
	N/A	N/A	12"	12"	12"	12"	12"	6"	12"	6"	8	(BOTTOM) *	
	N/A	N/A	12"	12"	12"	12"	12"	6"	12"	6"	9	(TOP) *	
	12"	4 1/2"	12"	12"	12"	12"	12"	8 1/2"	12"	8 1/2"	9	(BOTTOM)	
	9"	N/A	9 1/2"	N/A	10"	N/A	9 1/2"	N/A	N/A	N/A	10	(TOP)	
	6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10	(BOTTOM)	
9"	4 1/2"	N/A	N/A	N/A	N/A	9"	4 1/2"	9"	4 1/2"	11A	(TOP)		
9"	4 1/2"	N/A	N/A	N/A	N/A	9"	4 1/2"	9"	4 1/2"	11	(BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13	(TOP)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13	(BOTTOM)		

MAXIMUM DESIGN LOAD # (p.s.f.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" **										APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)	
	REGULAR TAPCONS		SOLID SET		S.G. TAPCON		PANELMATE		PANELMATE TYS				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+80.0, -80.0 UP TO +100.0, -100.0	8 1/2"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	1	(TOP)	7'-0" OR LESS
	9"	7"	9"	9"	9"	9"	9"	7"	9"	7"	1	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	2	(TOP)	
	9"	4"	9"	9"	9"	9"	9"	7"	9"	9"	2	(BOTTOM)	
	9"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	3A	(TOP)	
	9"	4"	9"	9"	9"	9"	9"	7"	9"	9"	3	(BOTTOM)	
	9"	7"	9"	9"	9"	9"	9"	7"	9"	9"	4	(TOP)	
	9"	7"	9"	9"	9"	9"	9"	7"	9"	9"	4	(BOTTOM)	
	8"	N/A	9"	N/A	9"	N/A	9"	N/A	9"	N/A	5A	(TOP)	
	5"	N/A	6"	N/A	7"	N/A	6"	N/A	N/A	N/A	5	(BOTTOM)	
	7"	N/A	8"	N/A	10"	N/A	8"	N/A	N/A	N/A	6	(TOP)	
	5"	N/A	6"	N/A	7"	N/A	6"	N/A	N/A	N/A	6	(BOTTOM)	
	5"	N/A	6"	N/A	7"	N/A	6"	N/A	N/A	N/A	7	(TOP)	
	5"	N/A	6"	N/A	7"	N/A	6"	N/A	N/A	N/A	7	(BOTTOM)	
	N/A	N/A	12"	6"	12"	6"	12"	6"	12"	6"	8	(TOP)	
	N/A	N/A	12"	6"	12"	6"	12"	6"	12"	6"	8	(BOTTOM)	
	N/A	N/A	12"	6"	12"	6"	12"	6"	12"	6"	9	(TOP)	
	9"	7"	9"	9"	9"	9"	9"	7"	9"	9"	9	(BOTTOM)	
	7"	N/A	8"	N/A	10"	N/A	8"	N/A	N/A	N/A	10	(TOP)	
	5"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	10	(BOTTOM)	
5"	4"	N/A	N/A	N/A	N/A	7"	7"	7"	7"	11A	(TOP)		
5"	4"	N/A	N/A	N/A	N/A	7"	7"	7"	7"	11	(BOTTOM)		
6"	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13	(TOP)		
5	N/A	6"	N/A	6"	N/A	6"	N/A	N/A	N/A	13	(BOTTOM)		

* USE 6" OC FOR PANEL LENGTHS LARGER THAN 10'-0" AND USE 12" AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10'-0"

ANCHORS LEGEND

** MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE, FOR E.D. LESS THAN 3 1/2".
REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS.
(NOTE: MIN. E.D. FOR SOLIDSET ANCHORS IS 3")
FOR THIS OPERATION TO BE POSSIBLE, REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE AT ANCHORS LEGEND.

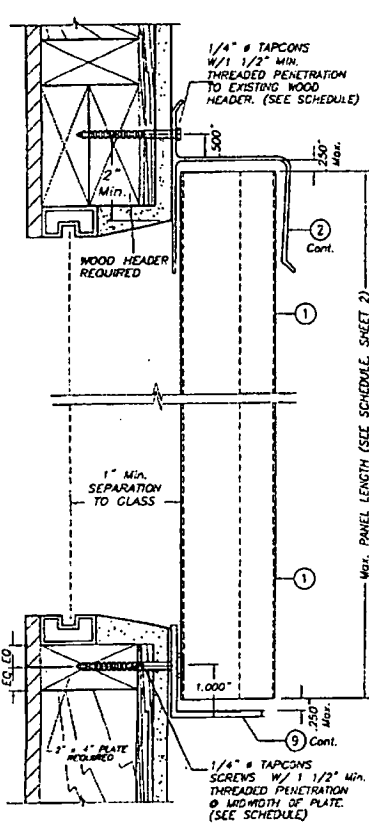
ACTUAL E. D.	FACTOR		
	TAPCON (REGULAR)	S.G. TAPCON, PANELMATE OR PANELMATE TYS	SOLID SET
3"	-	.88	.73
2 1/2"	-	.71	.50
2"	-	.50	-
1 1/2"	.35	-	-

ANCHOR TYPE	MIN. ANCHOR SPACING
TAPCON (REGULAR OR S.G.) PANELMATE OR PANELMATE TYS	3"
SOLID SET	3"

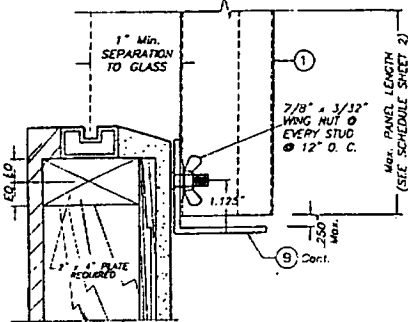
E. D. = EDGE DISTANCE



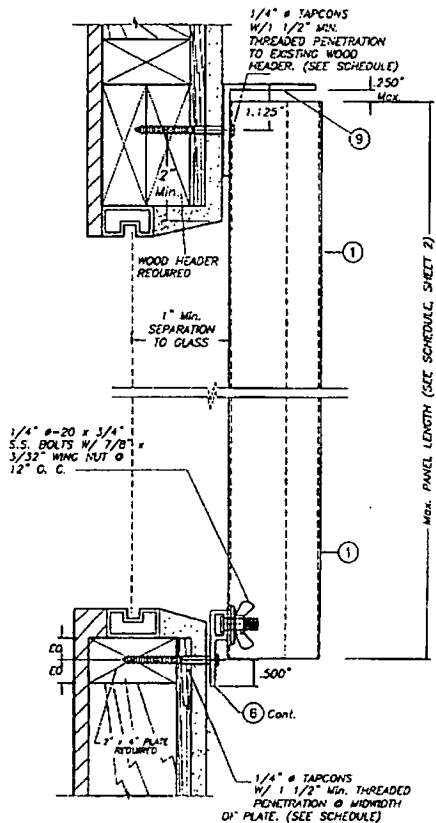
© 2008 TILECO, INC. TILLIT TESTING & ENGINEERING COMPANY 4333 N.W. 38th St., Suite 305, Virginia Gardens, FL 33146 Phone: (305)871-1530, Fax: (305)871-1531 EB-0006719 WALTER A. TILLIT, P.E. FLORIDA LIC. 15341	F.B.C. (Non High Velocity Hurricane Zone) 0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP) EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)208-8263, FAX: (561)841-1716	M.C.V./A.E. DRAWN BY: 05/12/08 DATE: 08-146 DRAWING NO. SHEET 13 OF 17
REV. NO. DESCRIPTION DATE REV. NO. DESCRIPTION DATE 1 OLD 08-146 05/12/08 2		



SECTION @ ANCHOR



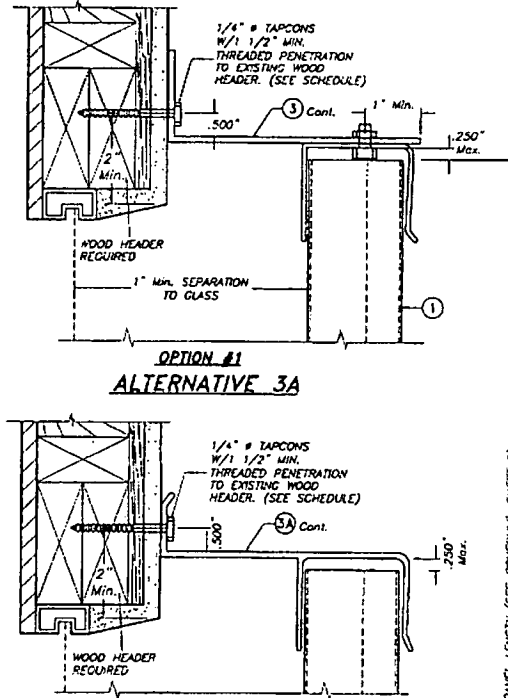
SECTION @ STUD
ALTERNATIVE 1
SCALE: 1/2" = 1"



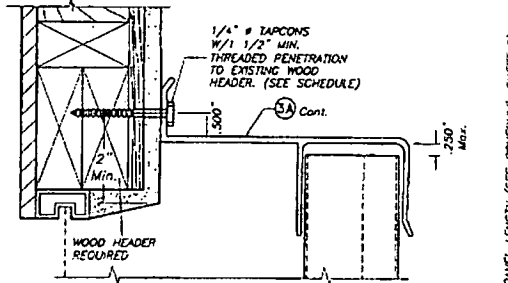
ALTERNATIVE 2
SCALE: 1/2" = 1"

NOTE FOR COMBINATION OF SECTIONS:
WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

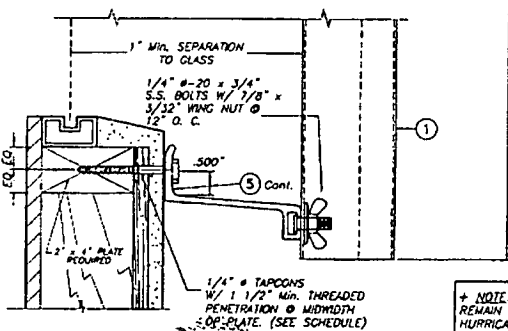
- NOTES:
- INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL LENGTHS AS PER SCHEDULES ON SHEET 2
 - SEE ANCHOR SCHEDULE ON SHEETS 16 & 17.
 - FOR NEW WOOD FRAME CONSTRUCTION; WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.



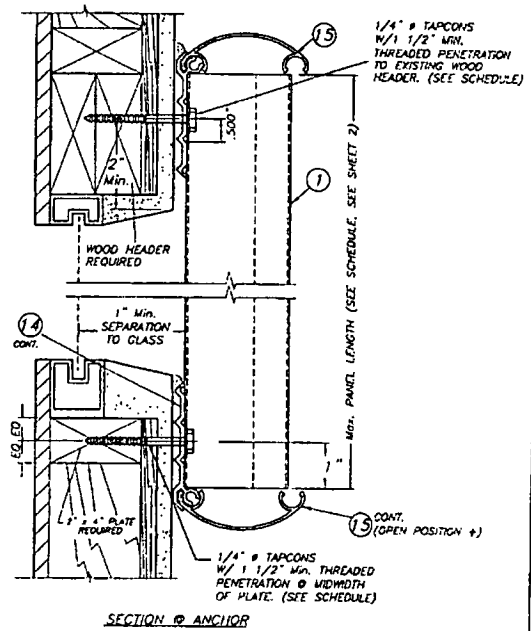
OPTION #1
ALTERNATIVE 3A



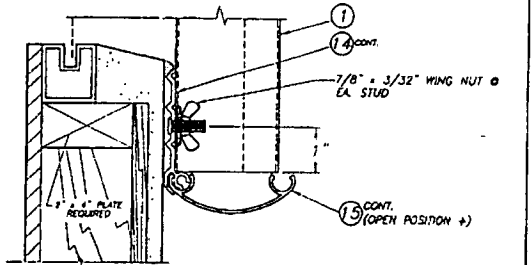
OPTION #2
ALTERNATIVE 3A



ALTERNATIVE 3B



SECTION @ ANCHOR



SECTION @ STUD
ALTERNATIVE 4
SCALE: 1/2" = 1"

+ NOTE: SHAP CAP (3) TO REMAIN CLOSED AT NON HURRICANE CONDITIONS.



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TILTIT TESTING & ENGINEERING COMPANY
6355 N.W. 26th St., Box 303, WICHITA SARASOTA, FL 33716
Phone: (305)871-1530, Fax: (305)871-1531
E9-0008719
WALTER A. TILIT JR., P.E.
FLORIDA Lic. 44187

F.B.C. (Non High Velocity Hurricane Zone)

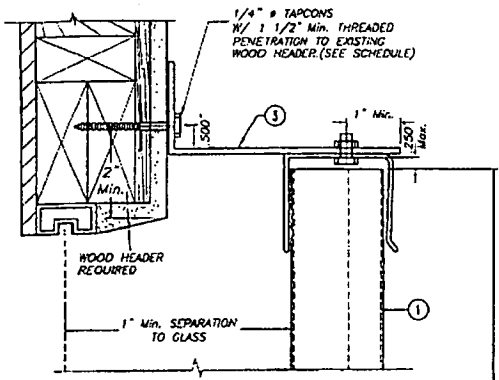
0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)

EASTERN METAL SUPPLY, INC.

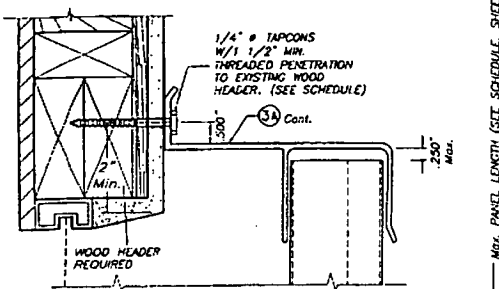
4268 WEST ROADS DRIVE
WEST PALM BEACH, FL 33407
PHONE: (561)209-8263, FAX: (561)841-1716

REV. NO.	DESCRIPTION	DATE	BY	CHKD BY	DATE
1	OLD OR - 118	02/12/08			

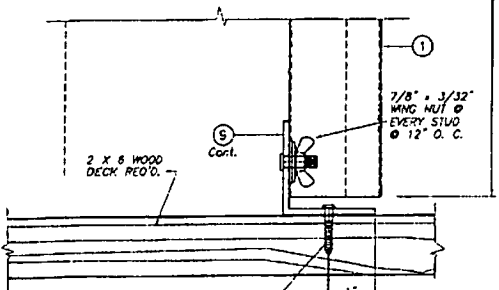
M.C.V./R.E. DRAWN BY: 03/12/08 DATE: 08-146 DRAWING No: SHEET 12 OF 17



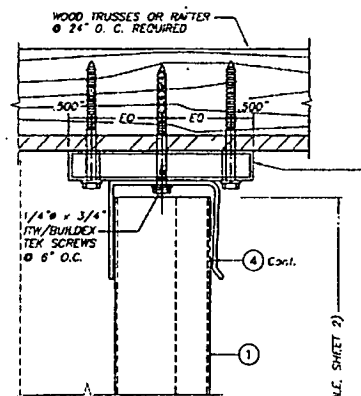
OPTION #1
ALTERNATIVE 5A



OPTION #2
ALTERNATIVE 5A

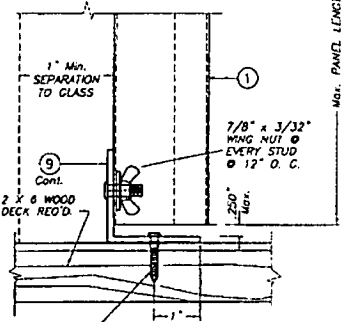


ALTERNATIVE 5
SCALE: 1/2" = 1"



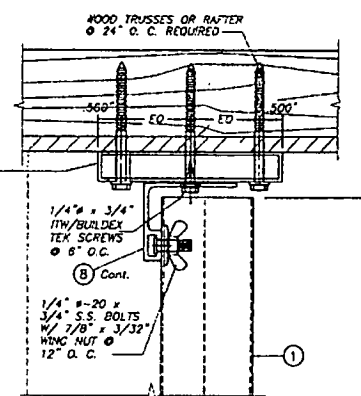
ALTERNATIVE 6A

SCALE: 1/2" = 1"
(LIMITED TO +60.0, -66.0 p.s.f. DESIGN LOAD AND UP TO 9'-0" Max. PANEL LENGTH)



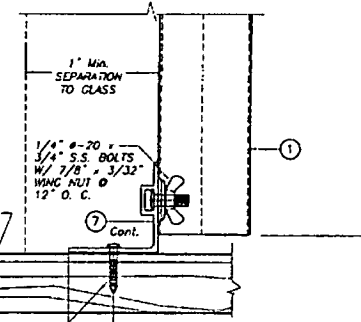
ALTERNATIVE 6

SCALE: 1/2" = 1"



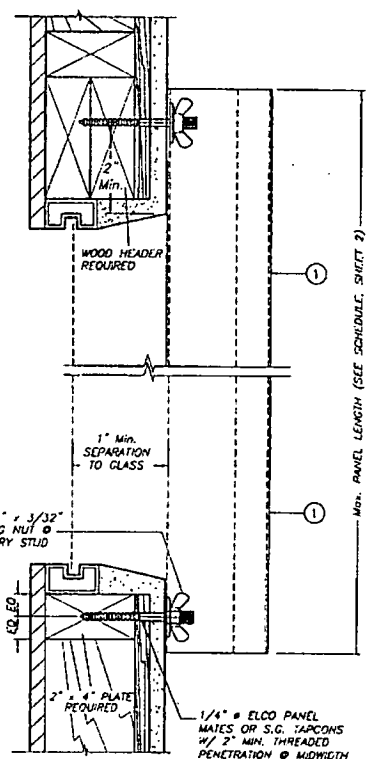
ALTERNATIVE 7A

SCALE: 1/2" = 1"
(LIMITED TO +60.0, -66.0 p.s.f. DESIGN LOAD AND UP TO 9'-0" Max. PANEL LENGTH)



ALTERNATIVE 7

SCALE: 1/2" = 1"

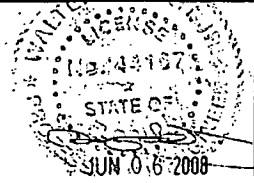


ALTERNATIVE 8

SCALE: 1/2" = 1"

- NOTES:**
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2 (EXCEPT AS NOTED)
 2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
 3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

NOTE FOR COMBINATION OF SECTIONS:
WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



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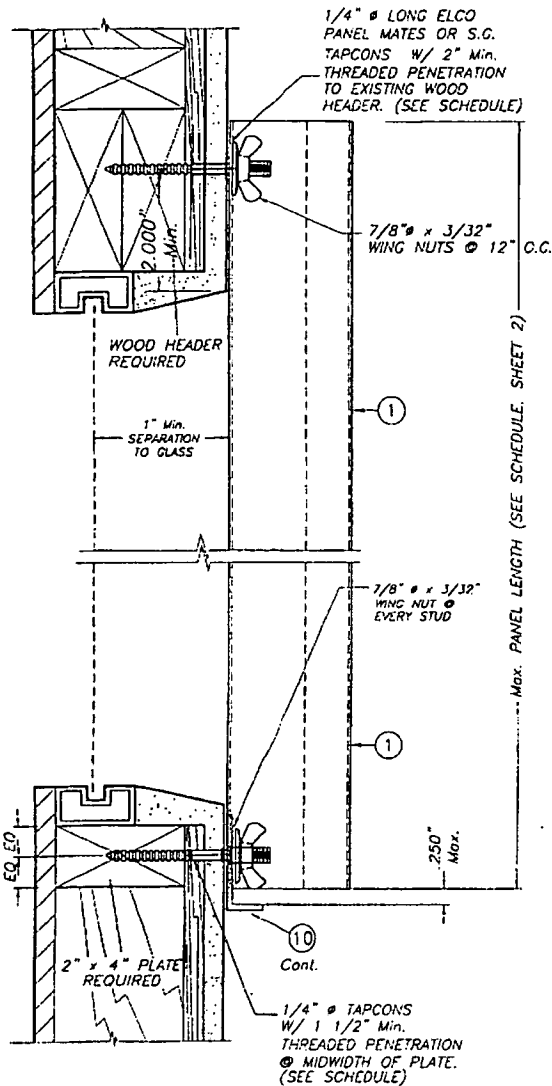
TILECO INC.
TILT TESTING & ENGINEERING COMPANY
8155 N.W. 36th St., Ste. 300, Virginia Gardens, FL 33407
Phone: (305)871-1520 Fax: (305)871-1521
EB-0006719
WALTER A. TILT, P.E.
FLORIDA Lic. 44187

F.B.C. (Non High Velocity Hurricane Zone)
0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)

EASTERN METAL SUPPLY, INC.
4266 WEST ROADS DRIVE
WEST PALM BEACH, FL 33407
PHONE: (561)209-8243, FAX: (561)841-1716

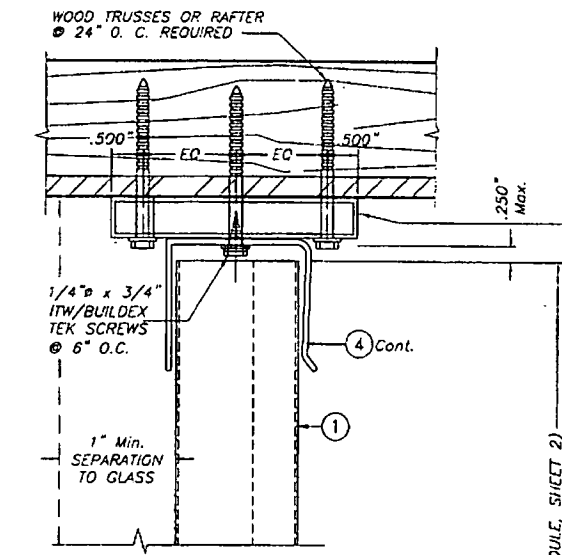
REV. NO.	DESCRIPTION	DATE	BY	CHKD.
1	OLD DR-187	05/12/08		
2				

M.C.V./R.E.
DRAWN BY:
05/12/08
DATE:
08-146
DRAWING NO.
SHEET 13 OF 17



ALTERNATIVE 9

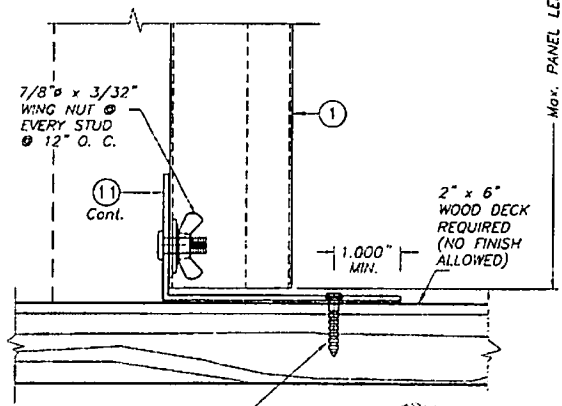
SCALE : 1/2" = 1"



ALTERNATIVE 10A

SCALE : 1/2" = 1"

(LIMITED TO +60.0. -66.0 p.s.f. DESIGN LOAD AND UP TO 9'-0" Max. PANEL LENGTH)



ALTERNATIVE 10

SCALE : 1/2" = 1"

- NOTES:**
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2 (EXCEPT AS NOTED)
 2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
 3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

NOTE FOR COMBINATION OF SECTIONS :

WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)

U.C.V./R.E. DRAWN BY: 05/12/28 DATE: 08-146 DRAWING NO

TILECO INC.
TILLIT TESTING & ENGINEERING COMPANY
4288 WEST ROADS DRIVE
WEST PALM BEACH, FL 33407
PHONE: (561)208-8763, FAX: (561)841-1718
EB-0006719
WALTER A. TILLIT, P.E.
FLORIDA LIC. #4167

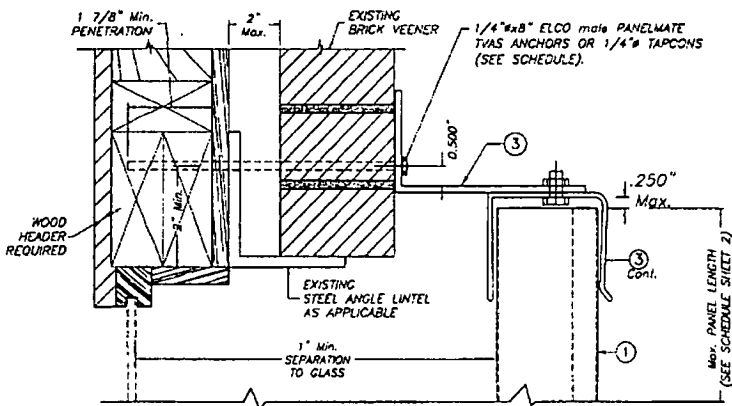
REV. NO	DESCRIPTION	DATE	REV. NO	DESCRIPTION	DATE
1	OLD OR-129	02/12/28	2		

FLORIDA STATE ENGINEERING SEAL

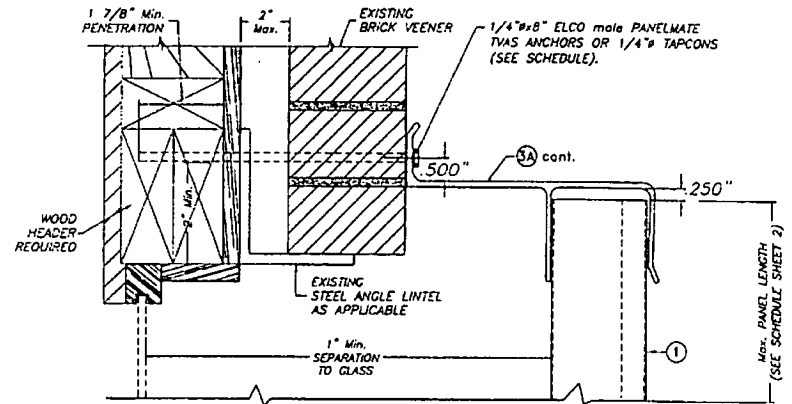
DATE: 08-146

FLORIDA LIC. #4167

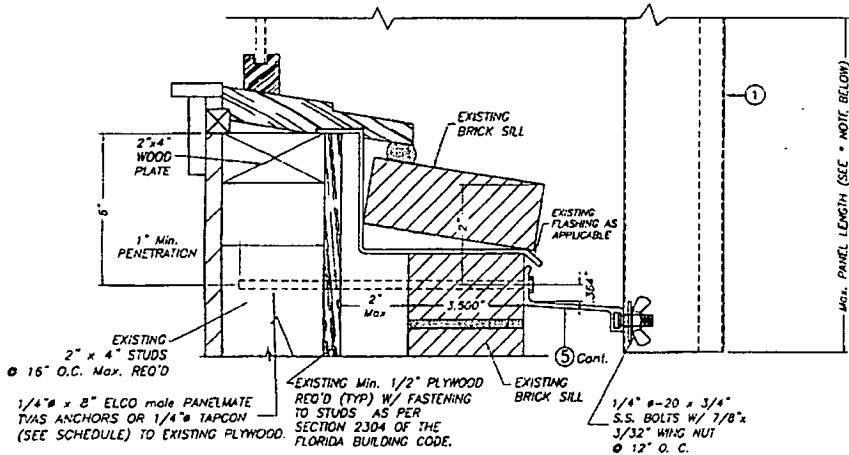
SHEET 14 OF 17



OPTION #1
ALTERNATIVE 11A



OPTION #2
ALTERNATIVE 11A



ALTERNATIVE 11
BUILD-OUT INSTALLATION
SCALE: 1/2" = 1"

* VALID FOR Max. +50.0, -60.0 p.s.f. DESIGN LOAD, FOR UP TO 78" PANELS LENGTHS, AND FOR +50.0, -50.0 p.s.f., FOR PANEL LENGTHS GREATER THAN 78" UP TO 108"

NOTES:

1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2 (EXCEPT AS NOTED)
2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

NOTE FOR COMBINATION OF SECTIONS :

WALL/FLOOR/CEILING MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

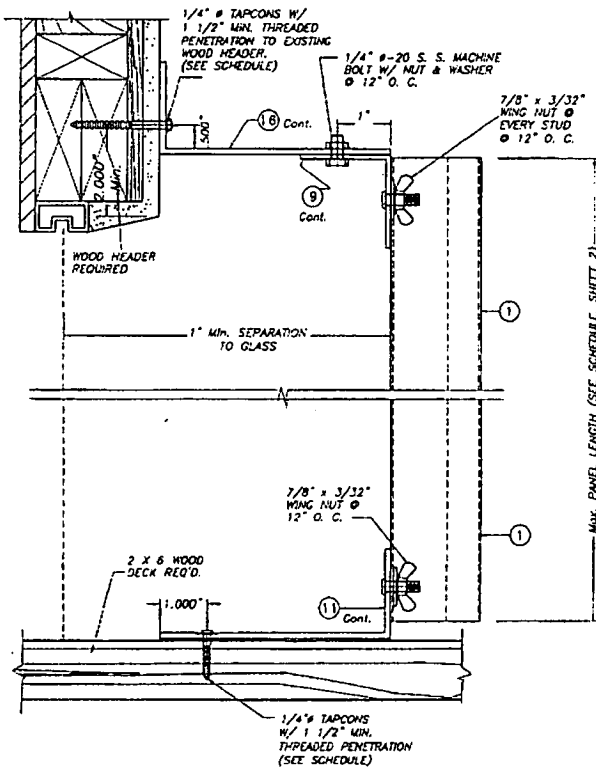


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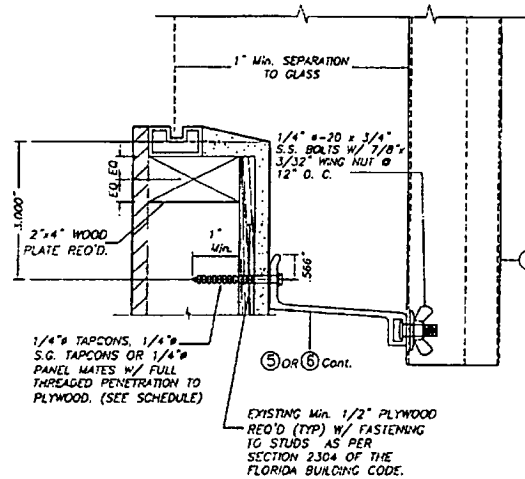
TILIT TESTING & ENGINEERING COMPANY
6355 W.W. 3RD. ST., SUITE 303, VINCENNES GARDENS, FL 33178
Phone: (305)871-1530, Fax: (305)871-1531
EB-0006719
WALTER A. TILUT, P.E.
FLORIDA LIC. #44167

F.B.C. (Non High Velocity Hurricane Zone)		0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./R.E. DRAWN BY:	
EASTERN METAL SUPPLY, INC		4268 WEST RIDGE DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)209-8263, FAX: (561)841-1716		05/12/08 DATE:	
KEY NO		DESCRIPTION		DATE	
1	0.050" BERTHA	2	2/11/08	1	08-146 DRAWING NO
					SHEET 14A OF 17



ALTERNATIVE 13

SCALE : 1/2" = 1'



ALTERNATIVE 14

SCALE : 1/2" = 1'

NOTES:

1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULES ON SHEET 2
2. SEE ANCHOR SCHEDULE ON SHEET 16 & 17.
3. FOR NEW WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

NOTE FOR COMBINATION OF SECTIONS :

WALL MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

* VALID FOR Max. +50.0, -60.0 p.s.f. DESIGN LOAD, FOR UP TO 78" PANELS LENGTHS, AND FOR +50.0, -50.0 p.s.f., FOR PANEL LENGTHS GREATER THAN 78" UP TO 108"



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TILLIT TESTING & ENGINEERING COMPANY
 8235 N.W. 58th, BL. 302, WINDY HARBOR, FL 33468
 Phone: (305)871-1530 Fax: (305)871-1531
 EB-0006719
 WALTER A. TILL, P.E.
 FLORIDA Lic. 44167

F.B.C. (Non High Velocity Hurricane Zone)		
0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./P.E. DRAWN BY:
EASTERN METAL SUPPLY, INC		05/12/08 DATE:
4228 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)209-8263, FAX: (561)841-1716		08-146 DRAWING No
REV. NO	DESCRIPTION	DATE
1	OLD OR-157	02/12/08
		SHEET 15 OF 17

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS

MAXIMUM DESIGN LOAD # (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	REGULAR TAPCONS	S.C.TAPCON	PANELMATES OR PANELMATE TRUS		
+40.0, -40.0 OR LESS	12"	N/A	N/A	1 (TOP)	8'-0" OR LESS
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	9"	N/A	N/A	5 (BOTTOM)	
	8"	N/A	N/A	6 (BOTTOM)	
	8 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	12"	8 (TOP)	
	N/A	12"	12"	8 (BOTTOM)	
N/A	12"	12"	9 (TOP)		
12"	N/A	N/A	9 (BOTTOM)		
6"	N/A	N/A	10 (BOTTOM)		
9"	N/A	9"	11A (TOP)		
4"	N/A	4"	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
6"	N/A	N/A	13 (BOTTOM)		
4"	4"	4"	14 (BOTTOM)		

MAXIMUM DESIGN LOAD # (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	REGULAR TAPCONS	S.C.TAPCON	PANELMATES OR PANELMATE TRUS		
+40.0, -40.0 OR LESS	12"	N/A	N/A	1 (TOP)	>8'-0" UP TO 13'-0"
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	5 1/2"	N/A	N/A	5 (BOTTOM)	
	5 1/2"	N/A	N/A	6 (BOTTOM)	
	5"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	12"	8 (TOP)	
	N/A	12"	12"	8 (BOTTOM)	
N/A	12"	12"	9 (TOP)		
12"	N/A	N/A	9 (BOTTOM)		
5 1/2"	N/A	N/A	10 (BOTTOM)		
9"	N/A	9"	11A (TOP)		
4" **	N/A	4" **	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
5 1/2"	N/A	N/A	13 (BOTTOM)		
4" **	4" **	4" **	14 (BOTTOM)**		

MAXIMUM DESIGN LOAD # (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH "L" (ft.)
	REGULAR TAPCONS	S.C.TAPCON	PANELMATES OR PANELMATE TRUS		
+40.0, -40.0 UP TO +60.0, -60.0	12"	N/A	N/A	1 (TOP)	8'-0" OR LESS
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	8"	N/A	N/A	5 (BOTTOM)	
	8"	N/A	N/A	6 (BOTTOM)	
	5 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	12"	8 (TOP)	
	N/A	12"	12"	8 (BOTTOM)	
N/A	12"	12"	9 (TOP)		
12"	N/A	N/A	9 (BOTTOM)		
6"	N/A	N/A	10 (BOTTOM)		
9"	N/A	9"	11A (TOP)		
4" *	N/A	4" *	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
6"	N/A	N/A	13 (BOTTOM)		
4" *	4" *	4" *	14 (BOTTOM)		

* USE 6" OC SPACING FOR PANEL LENGTHS LARGER THAN 10' - 0" AND USE 12" OC AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10' - 0"

** VALID ONLY FOR UP TO 108" PANELS LENGTHS.

* VALID ONLY FOR UP TO +50.0, -60.0 p.s.f. DESIGN LOAD WITH 78" Max. PANEL LENGTHS OR FOR UP TO +50.0, -50.0 p.s.f. DESIGN LOAD WITH 96" Max. PANEL LENGTHS.



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TILTECO INC.

TILLIT TESTING & ENGINEERING COMPANY
 4355 W.W. BIRD, BL. 204 3024 WINGDALE CIRCLE, FL 33148
 Phone: (305) 971-1330, Fax: (305) 971-1531
 EB-0008719
 WALTER A. TILLY, P.E.
 FLORIDA I.C. 44167

F.B.C. (Non High Velocity Hurricane Zone)

0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)

EASTERN METAL SUPPLY, INC

4268 WEST ROADS DRIVE
 WEST PALM BEACH, FL 33407
 PHONE: (561) 929-8763, FAX: (561) 941-1716

REV. NO.	DESCRIPTION	DATE	BY, IN.	CHECKED BY	DATE
1	OLD DWG-189	02/12/08			

M.C.V./R.E. DRAWN BY: 05/12/08 DATE: 08-146 DRAWING NO. SHEET 16 OF 17

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO WOOD FRAME BUILDINGS

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE PWS		
+60.0, -60.0 UP TO +80.0, -90.0	11"	N/A	N/A	1 (TOP)	9'-0" OR LESS
	11"	N/A	N/A	1 (BOTTOM)	
	11"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	9"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	11"	N/A	N/A	4 (TOP)	
	11"	N/A	N/A	4 (BOTTOM)	
	9"	N/A	N/A	5A (TOP)	
	3 1/2"	N/A	N/A	5 (BOTTOM)	
	3 1/2"	N/A	N/A	6 (BOTTOM)	
	3 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	6"	8 (TOP)	
	N/A	12"	6"	8 (BOTTOM)	
N/A	12"	6"	9 (TOP)		
11"	N/A	N/A	9 (BOTTOM)		
3 1/2"	N/A	N/A	10 (BOTTOM)		
9"	N/A	9"	11A (TOP)		
N/A	N/A	N/A	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
3 1/2"	N/A	N/A	13 (BOTTOM)		
N/A	N/A	N/A	14 (BOTTOM)		

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE PWS		
+40.0, -40.0 UP TO +60.0, -60.0	12"	N/A	N/A	1 (TOP)	5'-8"-0" UP TO 12'-6"
	12"	N/A	N/A	1 (BOTTOM)	
	12"	N/A	N/A	2 (TOP)	
	12"	N/A	N/A	2 (BOTTOM)	
	12"	N/A	N/A	3A (TOP)	
	12"	N/A	N/A	3 (BOTTOM)	
	12"	N/A	N/A	4 (TOP)	
	12"	N/A	N/A	4 (BOTTOM)	
	12"	N/A	N/A	5A (TOP)	
	4"	N/A	N/A	5 (BOTTOM)	
	4"	N/A	N/A	6 (BOTTOM)	
	3 1/2"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	6"	8 (TOP)	
	N/A	12"	6"	8 (BOTTOM)	
N/A	12"	6"	9 (TOP)		
12"	N/A	N/A	9 (BOTTOM)		
4"	N/A	N/A	10 (BOTTOM)		
12"	N/A	10 1/2"	11A (TOP)		
4" **	N/A	4" **	11 (BOTTOM) **		
12"	N/A	N/A	13 (TOP)		
4"	N/A	N/A	13 (BOTTOM)		
4" **	4" **	4" **	14 (BOTTOM) **		

MAXIMUM DESIGN LOAD W (p.s.f.)	WOOD FASTENERS			APPLICABLE TO ALTERNATIVES # & ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH L' (ft.)
	REGULAR TAPCONS	S.G.TAPCON	PANELMATES OR PANELMATE PWS		
+90.0, -50.0 UP TO +100.0, -130.0	8 1/2"	N/A	N/A	1 (TOP)	7'-0" OR LESS
	9"	N/A	N/A	1 (BOTTOM)	
	9"	N/A	N/A	2 (TOP)	
	9"	N/A	N/A	2 (BOTTOM)	
	8"	N/A	N/A	3A (TOP)	
	9"	N/A	N/A	3 (BOTTOM)	
	9"	N/A	N/A	4 (TOP)	
	9"	N/A	N/A	4 (BOTTOM)	
	8"	N/A	N/A	5A (TOP)	
	3"	N/A	N/A	5 (BOTTOM)	
	3"	N/A	N/A	6 (BOTTOM)	
	3"	N/A	N/A	7 (BOTTOM)	
	N/A	12"	6"	8 (TOP)	
	N/A	12"	6"	8 (BOTTOM)	
N/A	12"	6"	9 (TOP)		
9"	N/A	N/A	9 (BOTTOM)		
3"	N/A	N/A	10 (BOTTOM)		
5"	N/A	6"	11A (TOP)		
N/A	N/A	N/A	11 (BOTTOM)		
6"	N/A	N/A	13 (TOP)		
3"	N/A	N/A	13 (BOTTOM)		
N/A	N/A	N/A	14 (BOTTOM)		

* USE 6" OC SPACING FOR PANEL LENGTHS LARGER THAN 10' - 0" AND USE 12" OC AS SHOWN ON SCHEDULE FOR PANELS LENGTHS EQUAL OR SHORTER THAN 10' - 0"
 ** VALID ONLY FOR UP TO +50.0, -50.0 p.s.f. DESIGN LOAD WITH 108" Max. PANEL LENGTHS.



0.050" BERTHA ALUMINUM STORM PANEL (2.00" DEEP)		M.C.V./R.E. DRAWN BY: 05/12/08 DATE: 08-146 DRAWING NO.			
TILECO INC. TILT TESTING & ENGINEERING COMPANY 4358 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)209-8263, FAX: (561)841-1216 EB-0000718 WALTER A. TILT M., P.E. FLORIDA LIC. 44187		EASTERN METAL SUPPLY, INC. 4288 WEST ROADS DRIVE WEST PALM BEACH, FL 33407 PHONE: (561)209-8263, FAX: (561)841-1216			
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1	OLD OF-146	05/12/08	1		

TOWN OF SEWALL'S POINT

IMPACT PROTECTION INSTALLATION AFFIDAVIT

BLDG. PERMIT NUMBER: 9232
JOB SITE ADDRESS: #7 Miramar
CONTRACTOR/OWNER: Action Hurricane Shutters Inc.
PHONE NUMBER: 561-745-0605
QUALIFIER NAME: Edward Scozzari
LICENSE NUMBER: SPO 2234

I Edward Scozzari, do hereby affirm:

Owner or ~~Contractor~~ Please print name

The following impact protection was used as per the 2004 FBC 1609.1.4 for all exterior glazed openings at the above referenced job site.

- Impact Resistant Glass
- Approved Shutters

That I personally observed the complete installation of all hurricane panel/shutters on the above referenced project and further affirm that they are fitted properly for the openings they are intended to protect.

Edward Scozzari Date: 8/19/09
Signature of Owner or Contractor

Sworn to and subscribed before me this
19 Day of August 2009
By EDWARD SCOZZARI

Notary Public, State of Florida Notary Seal/Stamp

Personally known to me _____

Produced ID _____

Type FD # S260-230-54-4040



Valeris Meyer

Sewall' Point Building Department will inspect the structural attachment of the panel rails and/or the shutter assembly attachment to the building, per the manufacturer's product approvals, ASCE 7-02 and the 2007 Florida Building code at final inspection.

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **8-19** 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9181	Hardin 27 S River Rd Station	fill cells bond beam	Pass	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9000	CDZ 4 River Oak Pl SOH	insulation	CDZ	CANCEL INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9232
1 PM	7 Muammar Return Shutters	Shutters	<i>[Signature]</i>	Close INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

10587

GARAGE DOOR



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:	10587	DATE ISSUED:	SEPTEMBER 16, 2013
SCOPE OF WORK:	GARAGE DOOR		
CONTRACTOR:	D&D GARAGE DOORS		
PARCEL CONTROL NUMBER:	013841009-000-001404	SUBDIVISION	MIRAMAR - LOT 14
CONSTRUCTION ADDRESS:	7 MIRAMAR RD		
OWNER NAME:	LENAHAN		
QUALIFIER:	DALLAS MILLER	CONTACT PHONE NUMBER:	941-371-7242

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

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



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:	10587
ADDRESS	7 MIRAMAR RD - LENAHAN
DATE 9/16/13	SCOPE OF WORK GARAGE DOOR

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 space: (@ \$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.		\$	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$100 per insp.)			
Total number of inspections (Value < \$200K)@\$100ea		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	1820
Total number of inspections @ \$100.00 each			100
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5
TOTAL ACCESSORY PERMIT FEE:		\$	109

Handwritten notes:
 \$ Cash
 VC
 \$100 copies

**Town of Sewall's Point
BUILDING PERMIT APPLICATION**

Permit Number: 10587

Date: _____

OWNER/LESSEE NAME: Lenahan, Pamela and Ed Phone (Day) 772 463 6607 (Fax) _____

Job Site Address: 7 Miramar Road City: Stuart State: FL Zip: 34996

Legal Description: Miramar Lot 14 Parcel Control Number: 01-38-41-009-000-00140-4

Fee Simple Holder Name: _____ Address: _____

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

***SCOPE OF WORK (PLEASE BE SPECIFIC):** Remove and Replace garage door with Miami Dade Impact Door 4x52 PSF

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 1820.00
(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: D+D Garage Doors Phone: 941 371 7242 Fax: 941 377 1804

Qualifiers name: Dallas Miller Street: 1177 Cattleman Rd City: Sarasota State: FL Zip: 34232

State License Number: CBC 1258265 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Chris Bryce @ Overhead Phone Number: 541 881-9700

DESIGN PROFESSIONAL: _____ Fla. License# _____

Street: _____ City: _____ State: FL 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 3000 ft require a Non-Conversion Covenant Agreement

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

WARNINGS TO OWNERS AND CONTRACTORS:

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

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

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

OWNER/AGENT/LESSEE - NOTARIZED SIGNATURE: _____

State of Florida, County of: Palm Beach

On This the 7 day of August, 2013

by Dallas Miller who is personally

known to me or produced _____

As identification, _____

NOTARY PUBLIC STATE OF FLORIDA
Kimberly A. Weir
Notary Public
Commission # DD957980
Expires: FEB. 03, 2014

My Commission Expires: _____

CONTRACTOR/LICENSEE NOTARIZED SIGNATURE: _____

X _____
State of Florida, County of: Palm Beach

On This the 7 day of August, 2013

by Dallas Miller who is personally

known to me or produced _____

As identification, _____

NOTARY PUBLIC STATE OF FLORIDA
Kimberly A. Weir
Notary Public
Commission # DD957980
Expires: FEB. 03, 2014

My Commission Expires: _____

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

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

generated on 8/8/2013 9:29:57 AM EDT

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
01-38-41-009-000-00140-4	17754	7 MIRAMAR RD, SEWALL'S POINT	\$293,770	8/3/2013

Owner Information

Owner(Current)	LENAHAN PAMELA K L/E
Owner/Mail Address	7 MIRAMAR RD STUART FL 34996
Sale Date	3/12/2012
Document Book/Page	2565 0555
Document No.	2320651
Sale Price	100

Location/Description

Account #	17754	Map Page No.	SP-03
Tax District	2200	Legal Description	MIRAMAR LOT 14
Parcel Address	7 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	\$137,000
Market Improvement Value	\$156,770
Market Total Value	\$293,770

SALES/SERVICE ORDER



OVERHEAD DOOR COMPANY OF THE TREASURE COAST

3755 FISCAL CT. - #3 • Riviera Beach, FL 33404

Telephone: (561) 881-9700

NATIONWIDE
SALES • INSTALLATION • SERVICE

44045
WORK ORDER NO.

ASAP
DATE REQUIRED

SOLD TO: Ed Henahan
7 Mirimar Dr
Stuart FL 33496

SHIP TO: _____

ACCT. NO. () T/C STATE () CNTY () CITY ()

CUSTOMER ORDER DATE	CUSTOMER ORDER NO	CUSTOMER PHONE NO	SALESMAN	INSTALLER	DATE COMPLETED							
7-12-2013	772-463-6607		<i>Rodney</i>									
QUAN.	SERIES	PANELS	DOOR SIZE		PATTERN	KIND GLASS	HEAD ROOM	HOW KEYED	TYPE C/B	TRACK #	TYPE TRACK	PRICE
1	183		16	0	70	white		inside stand			wood	
SPECIAL NOTES: <i>46152 PSA ME.</i>												
P/C												
SPECIAL NOTES:												

P/C

SERVICE RENDERED / PARTS & MATERIAL USED:
*To get old door
install new 16x7 Miami Gold Impact Door -
Price includes removal*

1430 + 150 + 240

*Loss Deposit
OK # 5553*

*1800
910*

TIME IN: _____ TRAVEL TIME: _____

JOB TIME: _____

TIME OUT: _____ WAITING TIME: _____

THIS SERVICE HAS BEEN COMPLETED TO MY SATISFACTION:

[Signature]
SIGNATURE PLEASE PRINT NAME DATE

*NOTE: PRICES SUBJECT TO CORRECTION FOR MATHEMATICAL OR CLERICAL ERRORS.

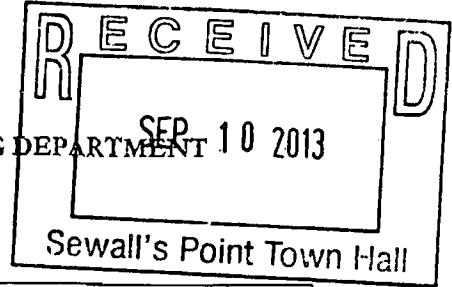
<input type="checkbox"/> C.O.D.	
PARTS	
SERVICE	
SUB-TOTAL	
% SALESTAX	
SERVICE	
TOTAL DUE	<i>910</i>

8+5 CALY BOOKS

ED LEAHAN
7 MIRIMAR DR.



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



FORMULA FOR DESIGN PRESSURES

Example: 25 ft mean roof height, exposure C - 16 X 7 Door 140mph.

TOWN OF SEWALL'S POINT
BUILDING DEPARTMENT
FILE COPY

Pressure	Exposure C multiplier	Req. Design Pressure
29.7	X 1.35	= +40.095
-33.1	X 1.35	= -44.685

Garage Door must be rated at +40.1/-44.68 minimum. **This must be completed for exposure C:**

Pressure	Exposure C multiplier	Req. Design Pressure
34.1	X 1.29	= 43.99 (+)
38.0	X 1.29	= 49.02 (-)

OUR DOOR NO# 12-0605-09
+46 / -52 PSF
Impact Rated

TABLE 1609.3.1
EQUIVALENT BASIC WIND SPEEDS_{a,b,c}

V3S	85	90	100	105	110	120	125	130	140	145	150	160	170
Vfm	71	76	85	90	95	104	109	114	123	128	133	142	152

- For SI: 1 mile per hour = 0.44 m/s.
 a. Linear interpolation is permitted.
 b. V3S is the 3-second gust wind speed (mph).
 c. Vfm is the fastest mile wind speed (mph).

TABLE 1609.6(2)

MEAN ROOF HEIGHT (feet)	EXPOSURE		
	B	C	D
15	1.00	1.21	1.47
20	1.00	1.29	1.55
25	1.00	1.35	1.61
30	1.00	1.40	1.66
35	1.05	1.45	1.70
40	1.09	1.49	1.74
45	1.12	1.53	1.78
50	1.16	1.56	1.81
55	1.19	1.59	1.84
60	1.22	1.62	1.87

For SI: 1 foot = 304.8 mm.
 All table values shall be adjusted for other exposures and heights by multiplying by the above coefficients.

TABLE 1609.6(1)

Effective Wind Area		Basic Wind Speed V (mph - 3 second gust)															
Width (ft)	Height (ft)	85	90	100	110	120	130	140	150								
Roof Angle 0 - 10 degrees																	
8	8	10.5	-11.9	11.7	-13.3	14.5	-16.4	17.5	-19.9	20.9	-23.6	24.5	-27.7	28.4	-32.2	32.6	-36.9
10	10	10.1	-11.4	11.4	-12.7	14.0	-15.7	17.0	-19.0	20.2	-22.7	23.7	-26.6	27.5	-30.8	31.6	-35.4
14	14	10.0	-10.7	10.8	-12.0	13.3	-14.8	16.1	-17.9	19.2	-21.4	22.5	-25.1	26.1	-29.1	30.0	-33.4
Roof Angle > 10																	
9	7	11.4	-12.9	12.8	-14.5	15.8	-17.9	19.1	-21.6	22.8	-25.8	26.7	-30.2	31.0	-35.1	35.6	-40.2
16	7	10.9	-12.2	12.3	-13.7	15.2	-16.9	18.3	-20.4	21.8	-24.3	25.6	-28.5	29.7	-33.1	34.1	-38.0

- For SI: 1 Square foot = 0.929 m², 1 mph = 0.447 m/s, 1 psf = 47.88 N/m²
 1. For effective areas or wind speeds between those given above the load may be interpolated, otherwise use the load associated with the lower effective area.
 2. Table values shall be adjusted for height and exposure by multiplying by adjustment coefficients in Table 1609.6 (2).
 3. Plus and minus signs signify pressures acting toward and away from the building surfaces.
 4. Negative pressures assume door has 2 feet of width in building's end zone



MIAMI-DADE COUNTY
PRODUCT CONTROL SECTION

11805 SW 26 Street, Room 208
Miami, Florida 33175-2474
T (786) 315-2590 F (786) 315-2599
www.miamidade.gov/economy

DEPARTMENT OF REGULATORY AND ECONOMIC RESOURCES (RER)
BOARD AND CODE ADMINISTRATION DIVISION

NOTICE OF ACCEPTANCE (NOA)

Wayne Dalton a Div. of Overhead Door Corporation
3395 Addison Drive
Pensacola, FL 32514

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

This NOA shall not be valid after the expiration date stated below. The Miami-Dade County Product Control Section (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. RER reserves the right to revoke this acceptance, if it is determined by Miami-Dade County Product Control Section that this product or material fails to meet the requirements of the applicable building code.

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

DESCRIPTION: Models 8024/8124 Code 1320 Steel Sectional Garage Door up to 16'-0" Wide

APPROVAL DOCUMENT: Drawing No. 329929, titled "Models 8024/8124, Windload Specification Option Code 1320", sheets 1 through 3 of 3, dated 05/04/2007, with last revision P2 dated 05/19/2010, prepared by Overhead Door Corporation, signed and sealed by John E. Scates, P.E., bearing the Miami-Dade County Product Control renewal stamp with the NOA number and expiration date by the Miami-Dade County Product Control Section.

MISSILE IMPACT RATING: Large & Small Missile Impact Resistant

LABELING: A permanent label with the manufacturer's name or logo, manufacturing address, model/series number, the positive and negative design pressure rating, indicate impact rated if applicable, installation instruction drawing reference number, approval number (NOA), the applicable test standards, and the statement reading 'Miami-Dade County Product Control Approved' is to be located on the door's side track, bottom angle, or inner surface of a panel.

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

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

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

INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA renews NOA # 11-0411.05 and consists of this page 1 and evidence page E-1, as well as approval document mentioned above.

The submitted documentation was reviewed by Carlos M. Utrera, P.E.

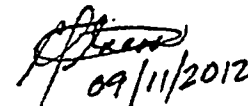


Handwritten signature and date: 09/11/2012

NOA No: 12-0605.09
Expiration Date: September 27, 2017
Approval Date: September 20, 2012
Page 1

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

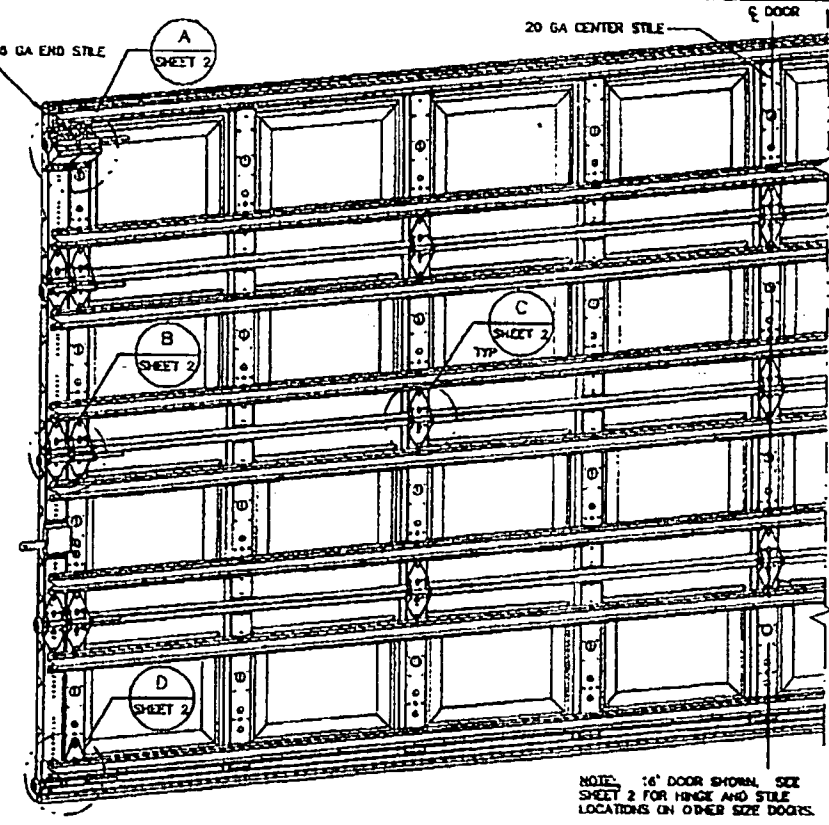
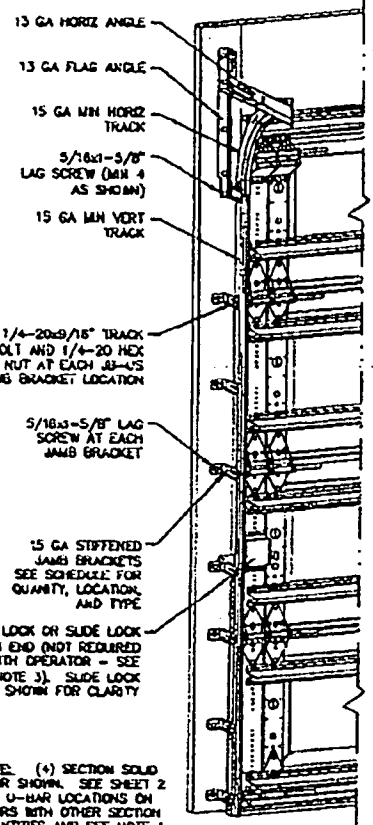
- A. DRAWINGS "Submitted under NOA # 11-0411.05"**
1. Drawing No. 329929, titled "Models 8024/8124, Windload Specification Option Code 1320", sheets 1 through 3 of 3, dated 05/04/2007, with last revision P3 dated 05/19/2010, prepared by Overhead Door Corporation, signed and sealed by John E. Scates, P.E.
- B. TESTS "Submitted under NOA # 07-0808.02"**
1. Test report on:
 - 1) Uniform Static Air Pressure Test, per FBC, TAS 202-94
 - 2) Large Missile Impact Test, per FBC, TAS 201-94
 - 3) Cyclic Wind Pressure Loading Test, per FBC, TAS 203-94,along with marked-up drawings, prepared by Certified Testing Laboratories, Inc., Report # **CTLA 1672W-3**, dated 05/21/2007, signed and sealed by Ramesh Patel, P.E.
 2. Test report on:
 - 1) Uniform Static Air Pressure Test, per FBC, TAS 202-94
 - 2) Large Missile Impact Test, per FBC, TAS 201-94
 - 3) Cyclic Wind Pressure Loading Test, per FBC, TAS 203-94,along with marked-up drawings, prepared by Certified Testing Laboratories, Inc., Report # **CTLA 1734W-1**, dated 11/09/2007, signed and sealed by Ramesh Patel, P.E. "**Submitted under NOA # 08-0304.03**"
- C. CALCULATIONS "Submitted under NOA # 11-0411.05"**
1. Anchoring calculations prepared by John E. Scates, P.E., dated 12/08/2010, signed and sealed by John E. Scates, P.E.
 2. Fastening calculations prepared by Wayne Dalton Corporation, dated 10/24/2007, signed and sealed by Mark R. Barrow, P.E. "**Submitted under NOA # 07-1105.02**"
- D. MATERIAL CERTIFICATIONS "Submitted under NOA # 07-0808.02"**
1. Test report on Tensile Test, per ASTM E8, dated 05/22/2007, prepared by Certified Testing Laboratories, Inc., Report # **CTLAW**, signed and sealed by Ramesh Patel, P.E.
 2. Notice of Acceptance No. **10-0329.03**, issued to Sheffield Plastic, Inc., for their Makrolon Polycarbonate Sheets, approved on 07/07/2010 and expiring on 08/27/2012.
- E. QUALITY ASSURANCE**
1. Miami-Dade Department of Regulatory and Economic Resources (RER)
- F. STATEMENTS**
1. Statement letter of code conformance to 2010 FBC and no financial interest, issued by John E. Scates, Professional Engineer, dated 05/22/2012, signed and sealed by John E. Scates, P.E. "**Submitted under NOA # 11-0411.05**"
 2. Statement letter of code conformance to 2007 and 2010 FBC and no financial interest, issued by John E. Scates, Professional Engineer, dated 12/01/2011, signed and sealed by John E. Scates, P.E.
 3. Purchase agreement dated 11/19/2009.



Carlos M. Utrera, P.E.
Product Control Examiner
NOA No 12-0605.09
Expiration Date: September 27, 2017
Approval Date: September 20, 2012

NOTES:

- IMPACT RESISTANT GLAZING SYSTEM MAY BE DETAILLED IN TOP OR INTERMEDIATE SECTION (WITH OR WITHOUT DECORATIVE OVERLAYS). GLAZING SHALL BE 1/4" WAFROLOM-AR POLYCARBONATE (MIAMI-DACOR NOA #10-0329.03) OR EQUAL. MAXIMUM GLAZING DIMENSIONS SHALL BE 10.56' x 12.26'. SEE DETAIL E ON SHEET 2 FOR ASSEMBLY DETAILS.
- VINYL OR WOOD DOOR STOP NAILED A MAXIMUM OF 6" O.C. MUST OVERLAP TOP AND BOTH ENDS OF PANELS MAXIMUM 7/16" TO MEET NEGATIVE PRESSURES.
- KEY LOCK SLIDE LOCKS, OR OPERATOR REQUIRED.
- SECTION STEEL TO HAVE A MINIMUM 24 GA THICKNESS WITH A MINIMUM G60 COATING AND A MINIMUM YIELD STRENGTH OF 33.8 KSI.
- THE DESIGN OF THE SUPPORTING STRUCTURAL ELEMENTS SHALL BE THE RESPONSIBILITY OF THE PROFESSIONAL OF RECORD FOR THE BUILDING OR STRUCTURE AND IN ACCORDANCE WITH CURRENT BUILDING CODES FOR THE LOADS LISTED ON THIS DRAWING.
- WOOD SUBSTRATE FOR DOOR JAMS IS TO BE MINIMUM 2x6 NO. 3 SOUTHERN PINE. RELATIVELY NOT FRIEZE BOTTOM TO SHEET 3 FOR ATTACHMENT TO SUPPORTING STRUCTURE. FOR DIRECT MOUNTING OF JAMB BRACKETS TO OTHER SUBSTRATES, SEE JAMB DETAIL SHEET 2 FOR MOUNTING OF CONTINUOUS WALL ANGLE. SEE CONTINUOUS WALL ANGLE DETAIL SHEET 3.
- FOR LOW HEAD ROOM LIFT OPERATIONS, TOP BRACKET SHALL BE A 15 GA UHR 7/4 TOP BRACKET WITH A MINIMUM OF (3) 1/4"-1x7/8" SELF DRILLING CORRUPTE SCREWS IN LINE OF THE BRACKET SHOWN ON THIS DRAWING. U-BAR ON TOP SECTION SHALL BE INSTALLED ON TOP OF UHR TOP BRACKETS.
- LOUVERS MAY BE INSTALLED ON THE DOOR IF THE TOTAL AREA OF THE LOUVER DOES NOT EXCEED 120 SQUARE INCHES.
- DOORS WITH DECORATIVE OVERLAY ARE LIMITED TO A MAX SIZE OF 12" WIDE BY 8" HIGH FOR THIS OPTION CODE.



- REVISIONS**
- P1 MODIFIED NOTES AND TRACK NOTE FOR DOORS WITH DECORATIVE OVERLAYS. ADDED CONTINUOUS WALL ANGLE DETAIL SHEET 3. UPDATED NOTES FOR CONTINUOUS WALL ANGLE MOUNTING. GRT 10/7/07
 - P2 ADDED IMPACT RESISTANT GLAZING. MODIFIED NOTES SHEET 1 FOR GLAZING. ADDED DETAIL E SHEET 2 FOR GLAZING. GRT 11/10/07
 - P3 UPDATED TITLE BLOCK. ADDED STRUT PROFILE. UPDATED POLYCARBONATE NOA. GRT 5/18/10

NOTE: 16" DOOR SHOWN. SEE SHEET 2 FOR HINGE AND STILE LOCATIONS ON OTHER SIZE DOORS.

NOTE: (4) SECTION SOLID DOOR SHOWN. SEE SHEET 2 FOR U-BAR LOCATIONS ON DOORS WITH OTHER SECTION QUANTITIES AND SEE NOTE 1 THIS SHEET FOR GLAZING OPTIONS.

SUPERIMPOSED DESIGN PRESSURE LOADS ON SUPPORTING STRUCTURE

DOOR WIDTH	DOOR HEIGHT	UNIFORM LOAD EACH JAMB (PLF)
10'-0"	ALL	+220.0/-260.0
12'-0"	ALL	+278.0/-312.0
14'-0"	ALL	+322.0/-364.0
15'-0"	ALL	+348.0/-390.0
16'-0"	ALL	+368.0/-416.0

NOTE: (JB-US) FOLLOWING DIVISION DENOTES SLOTTED JAMB BRACKET ATTACHED TO TRACK WITH 1/4"-20x1/8" TRACK BOLT AND NUT AS SHOWN ABOVE.
ALL DOORS GREATER THAN 6' IN HEIGHT OR WITH DECORATIVE OVERLAY REQUIRE USE OF CONTINUOUS WALL ANGLE. SEE SHEET 3 FOR DETAILS.

PRODUCT REVISED
as complying with the Florida Building Code
Acceptance No 11-0411.05
Expiration Date 09/27/2012
By *[Signature]*
Miami Dade Product Control

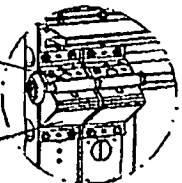
John E. Schaefer
12/8/10
JOHN E. SCHAEFER, PE
3121 FARGATE DR.
CARROLLTON, TX 75007
P. PE 31737 TX PE 04308/2203
PROFESSIONAL ENGINEER'S SEAL PROVIDED ONLY FOR VERIFICATION OF WINDLOAD CONSTRUCTION DETAILS.

Wayne Dalton
A DIVISION OF OVERHEAD DOOR CORP.
3365 ADDISON DRIVE
PENSACOLA, FLORIDA 32514
(850) 474-9890

STATIC PRESSURE RATINGS		APPROVED SIZES	SCALE: N.T.S.	SIZE: A
DESIGN (PSF):	+46.00/-52.00	MAX WIDTH: 16'-0"	DATE	NAME
TEST (PSF):	+69.00/-78.00	MAX HEIGHT: 14'-0"	DRAWN	GRT
IMPACT/CYCLIC RATED (YES/NO): YES		MAX SECTION HEIGHT: 21"	CHECKED	MRB
MODELS 8024/8124			SHEET 1 OF 3	
WINDLOAD SPECIFICATION OPTION: CODE 1320			DRAWING PART NO.	REV.
			329929	P3

PRODUCT RENEWED
as complying with the Florida Building Code
Acceptance No 12-0605.09
Expiration Date 09/27/2017
By *[Signature]*
Miami Dade Product Control

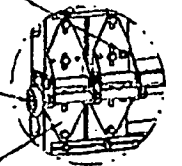
15 GA ROLLER SLIDE ATTACHED TO BRACKET WITH 5/16-18 BOLT & NUT IN CENTER SLOT AND 1/4-20x3/16" TRACK BOLT & 1/4-20 HEX NUT THROUGH ANY TWO ALIGNING HOLES



(2) 15 GA COMMERCIAL 'A' FRAME TOP BRACKETS EACH ATTACHED WITH (4) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS

DETAIL A

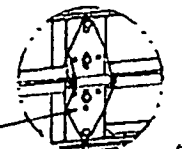
ADD (2) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS (INSIDE OF EACH INSIDE END HINGE)



DETAIL B

3" STEEL ROLLER WITH 9" GRADE 3144 OR EQUIVALENT STEM AND 7/16" NUT AT EACH ROLLER LOCATION 1/4" MAX BETWEEN PUSHNUT AND BRACKET OR HINGE

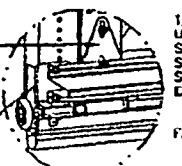
(2) 14 GA WIRE BODY END FRANGES EACH ATTACHED WITH (4) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS



DETAIL C

14 GA WIRE BODY INTERMEDIATE HINGE ATTACHED WITH (4) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS

12 GA EXTENSION BRACKET ATTACHED WITH (3) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS (2 THROUGH STRUT AND BRACKET)

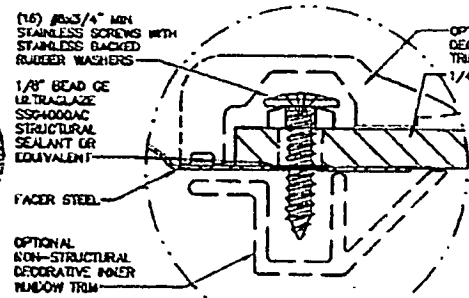
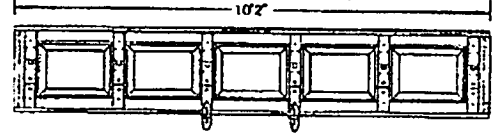
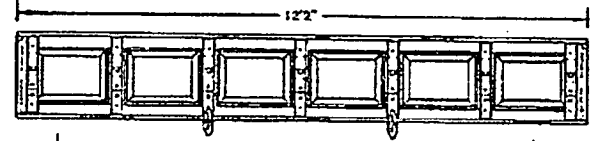
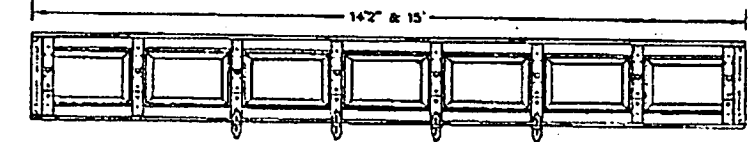
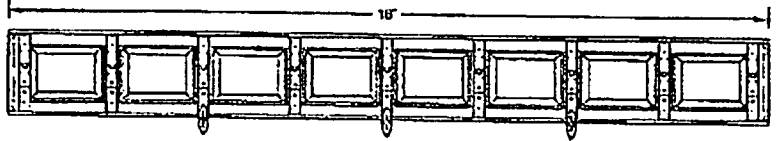


DETAIL D

14 GA BOTTOM BRACKET ATTACHED WITH (2) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS THROUGH STRUT AND BOTTOM TRACK AND (1) 1/4-14x5/8" SELF DRILLING TAMPER RESISTANT SCREW

DETAIL D

ENTER SIDE & INTERMEDIATE HINGE LOCATIONS



DETAIL E

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By *[Signature]*
Miami Trade Product Control

PRODUCT REVISED
as complying with the Florida Building Code
Acceptance No 11-0411.05
Expiration Date 09/27/2012

By *[Signature]*
Miami Trade Product Control

John E. Scates 12/18/10
JOHN E. SCATES, PE
371 FARGATE DR.
CAROLINA, FL 33007
FL PE 51757 IN PE 04306/12200

PROFESSIONAL ENGINEER'S SEAL PROVIDED ONLY FOR VERIFICATION OF WINDOW CONSTRUCTION DETAILS.

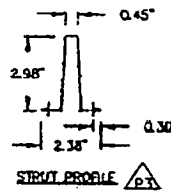


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3395 ADDISON DRIVE
PENSACOLA, FLORIDA 32514
(850) 474-9890

CONCRETE MOUNTING DETAIL

3/8" SIMPSON TITEN HD, 2-3/4" MIN EMBED INTO MIN 2000 PSI CONCRETE FOR EACH JAMB BRACKET LOCATION
JAMB BRACKET
1/4-20x3/16" TRACK BOLT AND 1/4-20 HEX NUT
TRACK

ATTACH U-BAR WITH (2) 1/4-14x7/8" SELF DRILLING CRIMPITE SCREWS AT EACH SIDE LOCATION, TOP.



U-BAR LOCATIONS

(8) SECTION DOORS WITH (16) 3" 18 GA 80 KSI U-BARS LOCATED AS SHOWN

(7) SECTION DOORS WITH (14) 3" 18 GA 80 KSI U-BARS LOCATED AS SHOWN

(6) SECTION DOORS WITH (12) 3" 18 GA 80 KSI U-BARS LOCATED AS SHOWN

(5) SECTION DOORS WITH (10) 3" 18 GA 80 KSI U-BARS LOCATED AS SHOWN

(4) SECTION DOORS WITH (8) 3" 18 GA 80 KSI U-BARS LOCATED AS SHOWN

(16) #5-3/4" MIN STAINLESS SCREWS WITH STAINLESS BACKED RUBBER WASHERS

1/8" BEAD GE ULTRAGLASS SSP3000G STRUCTURAL SEALANT OR EQUIVALENT

OPTIONAL NON-STRUCTURAL DECORATIVE OUTER WINDOW TRIM 1/4" POLYCARBONATE

FACER STEEL

OPTIONAL NON-STRUCTURAL DECORATIVE INNER WINDOW TRIM

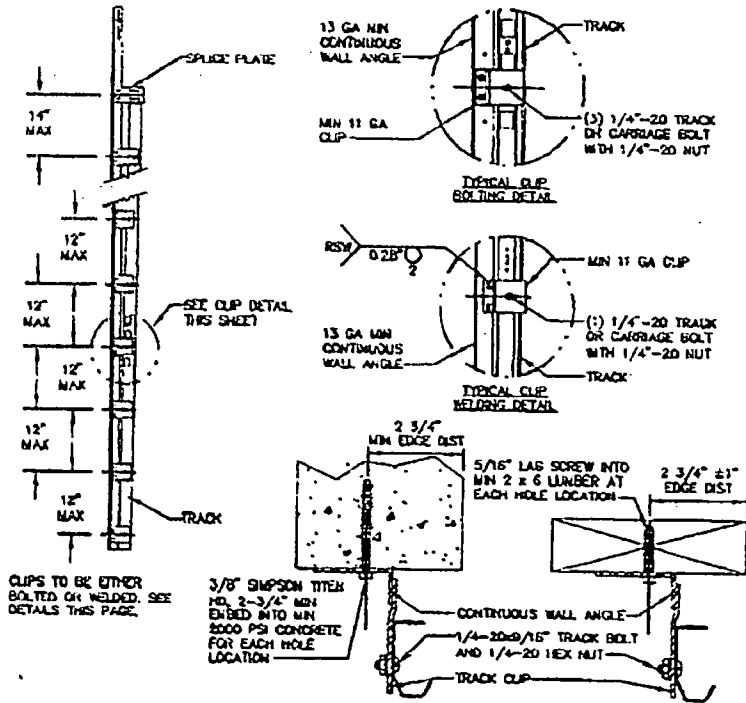
REVISIONS

P1 MODIFIED NOTES AND TRACK NOTE FOR DOORS WITH DECORATIVE OVERLAYS. ADDED CONTINUOUS WALL ANGLE DETAIL SHEET 3. UPDATED NOTES FOR CONTINUOUS WALL ANGLE MOUNTING. GRT 10/1/07

P2 ADDED IMPACT RESISTANT GLAZING. MODIFIED NOTES SHEET 1 FOR GLAZING. ADDED DETAIL E SHEET 2 FOR GLAZING. GRT 11/10/07

P3 UPDATED TITLE BLOCK. ADDED STRUT PROFILE. UPDATED POLYCARBONATE MGA. GRT 5/19/10

STATIC PRESSURE RATINGS		APPROVED SIZES	SCALE: N.T.S.	SIZE: A
DESIGN (PSF):	+48.00/-52.00	MAX WIDTH: 16'-0"	DATE	NAME
TEST (PSF):	+69.00/-73.00	MAX HEIGHT: 14'-0"	DRAWN	GRT
IMPACT/CYCLIC RATED (YES/NO):	YES	MAX SECTION HEIGHT: 21'	CHECKED	WRB
MODELS 8024/8124			SHEET 2 OF 3	
WINDLOAD SPECIFICATION OPTION CODE 1320			DRAWING PART NO.	REV.
			329929	P3



CLIPS TO BE EITHER BOLTED OR WELDED. SEE DETAILS THIS PAGE.

3/8\"/>

CONTINUOUS WALL ANGLE DETAILS

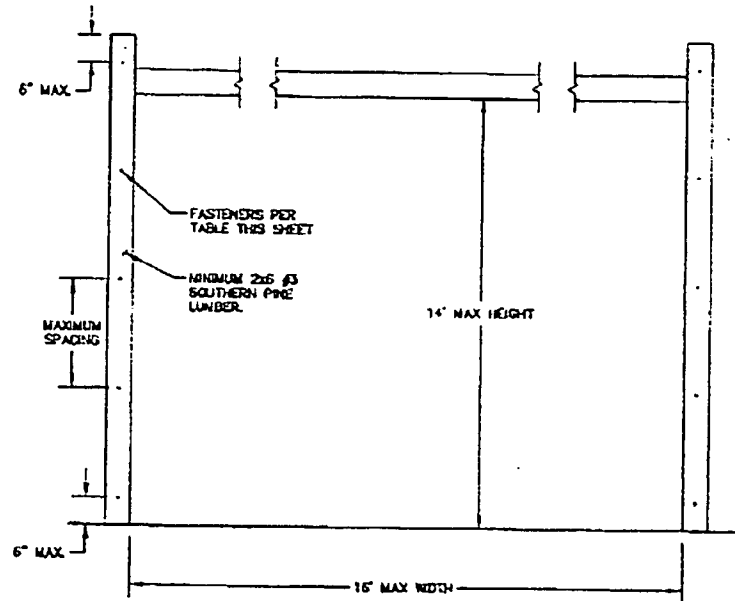
PRODUCT RENEWED
 as complying with the Florida Building Code
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 By [Signature]
 Miami Dade Product Control

PRODUCT REVISED
 as complying with the Florida Building Code
 Acceptance No 11-0411.05
 Expiration Date 09/27/2012
 By [Signature]
 Miami Dade Product Control

John E. Steiner
 12/8/10
 JOHN E. STEINER, P.E.
 3121 FISCAGATE DR.
 CARROLLTON, TX 75007
 P. O. BOX 24737 TX, PE 84304/77203
 PROFESSIONAL ENGINEER'S SEAL. PREPARED ONLY FOR
 VERIFICATION OF WINDLOAD CONSTRUCTION DETAILS.

MAX SPACING OF ANCHORS/SCREWS PER JAMB (IN)		
3/8\"/>	3/8\"/>	3/8\"/>
21	20	15

- BASED ON 3/8\"/>
- BASED ON 3/8\"/>
- BASED ON 3/8\"/>
- PROVIDE QUANTITY OF SCREW ANCHORS OR LAG SCREWS AS REQUIRED TO MAINTAIN MAXIMUM SPACING AS SHOWN IN TABLE WITH A MINIMUM OF THREE (3) SCREW ANCHORS OR LAG SCREWS PER JAMB. SCREW ANCHORS OR LAG SCREWS AT TOP AND BOTTOM OF JAMB SHALL BE PLACED A MAXIMUM OF 6\"/>
- LOAD PER JAMB CALCULATED TO BE A MAXIMUM OF +368.0/-416.0 LBS PER FOOT.
- CHART INCLUDES A SAFETY FACTOR OF 4.
- DOOR JAMB TO BE MINIMUM 2x6 NO. 3 SOUTHERN PINE LUMBER (MIN) MOUNTED DIRECTLY TO SUPPORT STRUCTURE.
- DESIGN OF THE SUPPORT STRUCTURE SHALL BE THE SOLE RESPONSIBILITY OF THE BUILDING DESIGNER AND SHALL BE DESIGNED FOR THE LOADS LISTED IN NOTE 5.
- SCREW ANCHORS OR LAG SCREWS SHALL BE INSTALLED PER MANUFACTURER'S WRITTEN INSTRUCTIONS.



REVISIONS

- P1 MODIFIED NOTES AND TRACK NOTE FOR DOORS WITH DECORATIVE OVERLAYS ADDED. CONTINUOUS WALL ANGLE DETAIL SHEET 3. UPDATED NOTES FOR CONTINUOUS WALL ANGLE MOUNTING. CRT 10/1/07
- P2 ADDED IMPACT RESISTANT GLAZING. MODIFIED NOTES SHEET 1 FOR GLAZING. ADDED DETAIL E SHEET 2 FOR GLAZING. CRT 11/10/07
- P3 UPDATED TITLE BLOCK. ADDED STRUT PROFILE. UPDATED POLYCARBONATE WCA. CRT 5/8/10

Wayne Dalton
 A DIVISION OF OVERHEAD DOOR CORP.
 3395 ADDISON DRIVE
 PENSACOLA, FLORIDA 32514
 (850) 474-9890

STATIC PRESSURE RATINGS		APPROVED SIZES		SCALE: N.T.S.		SIZE: A	
DESIGN (PSF):	+46.00/-52.00	MAX WIDTH:	16'-0"	DATE		NAME	
TEST (PSF):	+69.00/-78.00	MAX HEIGHT:	14'-0"	DRAWN	2/22/07	CRT	
IMPACT/CYCLIC RATED (YES/NO):	YES	MAX SECTION HEIGHT:	21'	CHECKED	5/4/07	MRB	
MODELS 8024/8124				SHEET 3 OF 3			
WINDLOAD SPECIFICATION OPTION CODE 1320				DRAWING PART NO.		REV.	
				329929		P3	

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **3-10-14** Page of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10762	Reusano 16 E. Nigh Pt Rd Dreamworks	SLAB	rschedjem Friday PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10587	Enkakan 7 Miramar Dx Garage	Final	PASS	561-881-9700 INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10786	Chapman 11 Palm Rd Stuart Fence Co	Final Fence	PASS	Close INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10797	Boosom	EL		INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10793	BELL 34 S. Sewalls Blvd Gates Professionals	WINDOW ATTACHMENT	PARTIAL PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	Dayton 19 Palm Ct	TREE	OK	INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR