

**2 Oakwood Drive**

**1430**

**PORCH**

RECEIVED NOV 19 1981

Recd 11/19/81 Jan

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1430

Date 11/16/81

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

This application must be accompanied by three sets of complete plans, to scale, (1/4" scale for building drawings), including plot plan, foundation plan, floor plans, wall and roof cross-sections; plumbing, electrical and air-conditioning layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house or commercial building construction.

Owner MRS Edmond Morris Present address 10 Rodman Lane Westfield NJ 07090  
Phone 1-201-232-3920

General contractor Tropical Homes Address 1388 Post St. Lucie Blvd PS 1716  
Phone 335-498

Where licensed State License No. CXC-013361

Plumbing contractor Miller License No. 18290 & 60019

Electrical contractor St. Lucie Elec License No. 103

Air-conditioning contractor Custom Aire License No. 00235

Describe the building, or alteration to existing building CBS 3 Bedroom 2 Bath 2 car Garage Living Area  
Porch 343  
Garage 456  
Area 1903 } TOTAL 2742

Name the street on which the building, its front building line and its front yard will face #2 Oakwood Drive

Subdivision Oakwood Lot No. 6 Area Parcel 1

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 1903

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 60605  
333+70=363

Cost of permit \$ 363 Plans approved as submitted or, as marked or

I understand that this permit is good for 12 months from the date of its issue and that the building for which this permit is issued must be completed within that time and in accordance with the approved plans. 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. I agree that the building site will be clean and rough-graded before a Certificate of Occupancy is sought, and, moreover, that I shall be 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 with the above requirements may result in a Building Inspector or a Town Commissioner "Red-tagging" the building project.

Contractor Wesley Kimmel Tropical Homes

I understand that this building must be in accordance with the approved plans and that it must comply with all code requirements before a Certificate of Occupancy will be issued and the property approved for all utility services. I agree that within 90 days after the building has been approved for occupancy, the property will be landscaped so as to be compatible with its neighborhood, as required by the Town's zoning ordinance.

Out of state Owner James M. Shady atty for Owner

Note: Speculation builders will be required to sign both of the above statements.

Approval of these plans in TOWN RECORD relieves the contractor or builder of Building Inspector (date) 11/25/81 Inspector's initials JSL

Approved by Point's Ordinances the South Florida Building Code and the State of Florida (date) 12/2/81 Commissioner's initials JS

Certificate of Occupancy Issued (date) 1/29/82

1430

# TOWN of SEWALL'S POINT

One Sewall's Point Road South, Jensen Beach, Florida 33457 Telephone 287-2455

## BUILDING DEPARTMENT

1. The Town has adopted the South Florida Building Code as a part of its building ordinances.
2. Building Permits are issued for one year's duration. Construction must be started within 90 days or permit will be subject to revocation, with forfeiture of fee.
3. All changes in plans must be approved by Building Department.
4. Work hours - 8:00 A.M. - 5:00 P.M. Monday thru Saturday. NO Sunday work.
5. Portable Toilets must be on all construction sites.
6. Roof Sheeting Plywood must be 5/8", not 1/2" as in County.
7. Inspections are made Monday thru Friday, 8:00 A.M. - Noon. 24 hours notice is required for all inspections.
8. Rough grading and property clean-up must be completed before Certificate of Occupancy is issued.
9. Trash, debris and scrap building materials must be policed daily.
10. Building Permit Fee = \$5. per thousand of cost of building, plus \$10. for plumbing, \$10. for electric and \$10. for air conditioning. (for example, \$50,000. building x \$5. = \$250. plus \$30. (plumbing, electric, etc.) = \$280. total cost.
11. All poured concrete footings must be formed.
12. Business or advertising signs on the job site will be permitted only with prior approval of the Town Commission.
13. If more than three (3) trees are to be removed, replaced or relocated, a permit is required.

# TOWN of SEWALL'S POINT

One Sewall's Point Road South, Jensen Beach, Florida 33457 Telephone 287-2455

## BUILDING PERMIT REQUIREMENTS

1. Town of Sewall's Point building permit application (signed by owner and builder)
2. Copy of Recorded Deed
3. Three (3) copies of plans and plat plan
4. Letter of approval from homeowners' association if deed restrictions apply
5. County Sewage Disposal Permit
- \* 6. State of Florida Model Energy Efficiency Code Calculations
7. Proof of competency for Builder
8. Proof of Insurance for Builder (Workmen's Comp. & General Liability)

\* THE TOWN OF SEWALL'S POINT HAS ADOPTED SECTION 9  
USING FORM 900-789 FOR ALL ENERGY CALCULATIONS

By law, the Town has fifteen (15) days from the receipt of the above items to issue a building permit or request further information.

SEE NEXT SHEET

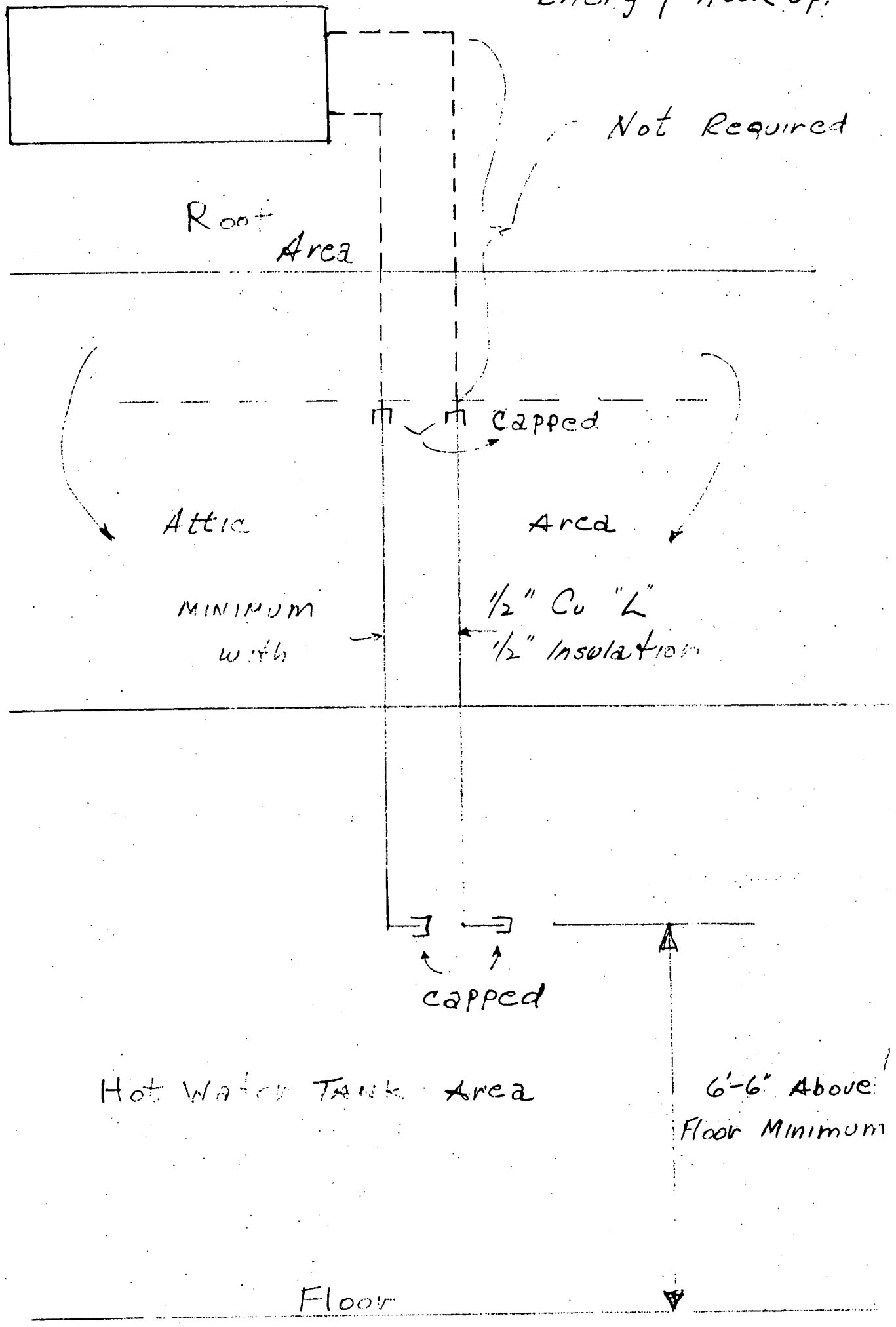
## NOTICE TO BUILDERS

PLEASE BE ADVISED THAT HOUSE SLABS WILL NOT BE APPROVED UNLESS THE STAKES OR MONUMENTS FOR THE PROPERTY CORNERS ARE IN PLACE AND STRING LINES ARE RUN TO EACH STAKE OR MONUMENT FOR THE PURPOSE OF CHECKING THE SETBACKS BY THE BUILDING INSPECTOR.

IT IS THE RESPONSIBILITY OF THE BUILDER NOT TO VIOLATE THE TOWN'S ORDINANCE REGARDING SETBACKS. THIS IS JUST AN EXTRA SERVICE BY THE BUILDING DEPARTMENT TO PREVENT THE POSSIBILITY OF ERROR.

*J. C. Struelens*  
BUILDING COMMISSIONER

Minimum requirements  
for future solar  
energy hook up.



Not to Scale

as it enacted by the Legislature of the State of Florida:

Section 1. Section 553.87, Florida Statutes, is amended to read:

(Substantial rewording of section. See  
s. 553.87, F.S., for present text.)

553.87 Solar water heating and waste heat recovery requirement.--  
Notwithstanding the provisions of ss. 553.12 and 553.13, buildings for  
which a building permit is obtained after October 1, 1980, shall be  
constructed with plumbing designed to facilitate the future installation  
of solar and waste heat recovery equipment for water heating. The phrase  
"facilitate the future installation" means the provision of readily  
accessible piping and pipe fittings to permit easy connection of solar  
and waste heat recovery equipment for water heating. The phrase "waste  
heat recovery equipment" means equipment designed to recover otherwise  
wasted heat from air conditioning systems, or to use the unused capacity  
of a heat pump to heat water. It is the intent of the Legislature to  
minimize the cost of rearranging plumbing should solar or waste heat  
recovery equipment for heating water be added to buildings after





STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

CLIENT'S COPY

APPLICATION FOR SEPTIC TANK PERMIT
AND FINAL INSPECTION FORM

Permit VOID if well or septic system is installed in a location other than the area permitted.
PRIOR HEALTH DEPARTMENT APPROVAL REQUIRED

Authority Chapter 381, 382, 383, 384, 385, 386, 387, 388, 389, 390, 391, 392, 393, 394, 395, 396, 397, 398, 399, 400, 401, 402, 403, 404, 405, 406, 407, 408, 409, 410, 411, 412, 413, 414, 415, 416, 417, 418, 419, 420, 421, 422, 423, 424, 425, 426, 427, 428, 429, 430, 431, 432, 433, 434, 435, 436, 437, 438, 439, 440, 441, 442, 443, 444, 445, 446, 447, 448, 449, 450, 451, 452, 453, 454, 455, 456, 457, 458, 459, 460, 461, 462, 463, 464, 465, 466, 467, 468, 469, 470, 471, 472, 473, 474, 475, 476, 477, 478, 479, 480, 481, 482, 483, 484, 485, 486, 487, 488, 489, 490, 491, 492, 493, 494, 495, 496, 497, 498, 499, 500, 501, 502, 503, 504, 505, 506, 507, 508, 509, 510, 511, 512, 513, 514, 515, 516, 517, 518, 519, 520, 521, 522, 523, 524, 525, 526, 527, 528, 529, 530, 531, 532, 533, 534, 535, 536, 537, 538, 539, 540, 541, 542, 543, 544, 545, 546, 547, 548, 549, 550, 551, 552, 553, 554, 555, 556, 557, 558, 559, 560, 561, 562, 563, 564, 565, 566, 567, 568, 569, 570, 571, 572, 573, 574, 575, 576, 577, 578, 579, 580, 581, 582, 583, 584, 585, 586, 587, 588, 589, 590, 591, 592, 593, 594, 595, 596, 597, 598, 599, 600, 601, 602, 603, 604, 605, 606, 607, 608, 609, 610, 611, 612, 613, 614, 615, 616, 617, 618, 619, 620, 621, 622, 623, 624, 625, 626, 627, 628, 629, 630, 631, 632, 633, 634, 635, 636, 637, 638, 639, 640, 641, 642, 643, 644, 645, 646, 647, 648, 649, 650, 651, 652, 653, 654, 655, 656, 657, 658, 659, 660, 661, 662, 663, 664, 665, 666, 667, 668, 669, 670, 671, 672, 673, 674, 675, 676, 677, 678, 679, 680, 681, 682, 683, 684, 685, 686, 687, 688, 689, 690, 691, 692, 693, 694, 695, 696, 697, 698, 699, 700, 701, 702, 703, 704, 705, 706, 707, 708, 709, 710, 711, 712, 713, 714, 715, 716, 717, 718, 719, 720, 721, 722, 723, 724, 725, 726, 727, 728, 729, 730, 731, 732, 733, 734, 735, 736, 737, 738, 739, 740, 741, 742, 743, 744, 745, 746, 747, 748, 749, 750, 751, 752, 753, 754, 755, 756, 757, 758, 759, 760, 761, 762, 763, 764, 765, 766, 767, 768, 769, 770, 771, 772, 773, 774, 775, 776, 777, 778, 779, 780, 781, 782, 783, 784, 785, 786, 787, 788, 789, 790, 791, 792, 793, 794, 795, 796, 797, 798, 799, 800, 801, 802, 803, 804, 805, 806, 807, 808, 809, 810, 811, 812, 813, 814, 815, 816, 817, 818, 819, 820, 821, 822, 823, 824, 825, 826, 827, 828, 829, 830, 831, 832, 833, 834, 835, 836, 837, 838, 839, 840, 841, 842, 843, 844, 845, 846, 847, 848, 849, 850, 851, 852, 853, 854, 855, 856, 857, 858, 859, 860, 861, 862, 863, 864, 865, 866, 867, 868, 869, 870, 871, 872, 873, 874, 875, 876, 877, 878, 879, 880, 881, 882, 883, 884, 885, 886, 887, 888, 889, 890, 891, 892, 893, 894, 895, 896, 897, 898, 899, 900, 901, 902, 903, 904, 905, 906, 907, 908, 909, 910, 911, 912, 913, 914, 915, 916, 917, 918, 919, 920, 921, 922, 923, 924, 925, 926, 927, 928, 929, 930, 931, 932, 933, 934, 935, 936, 937, 938, 939, 940, 941, 942, 943, 944, 945, 946, 947, 948, 949, 950, 951, 952, 953, 954, 955, 956, 957, 958, 959, 960, 961, 962, 963, 964, 965, 966, 967, 968, 969, 970, 971, 972, 973, 974, 975, 976, 977, 978, 979, 980, 981, 982, 983, 984, 985, 986, 987, 988, 989, 990, 991, 992, 993, 994, 995, 996, 997, 998, 999, 1000

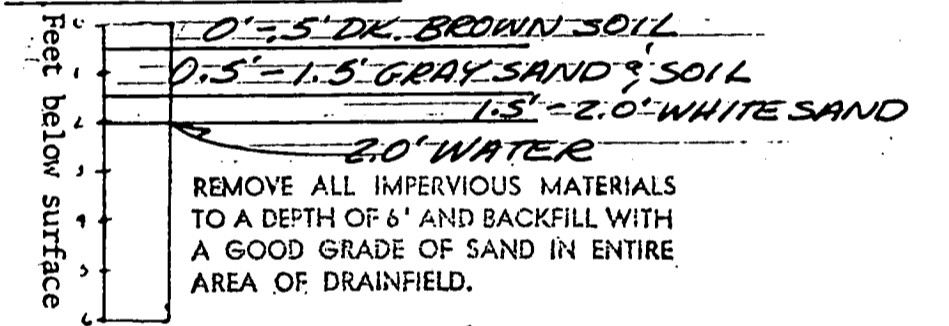
Permit Number HD 81-736 THIS PERMIT EXPIRES ONE (1) YEAR FROM DATE OF ISSUANCE

Name of Applicant RCH DLOUGHY - TROP. HOMES CONST. Telephone 335-2755
Mailing Address of Applicant 1380 PT. ST. LUCIE BLVD. 335-4198
To be Installed at: (Give Street Address) OAKWOOD DR SEWALLS PT. RD.
Lot 6 Block - Subdivision OAKWOOD S/P
Plat Book & Page M-8-53 Date Recorded 2-20-81
Residential: No. Living Units 1 Number Bedrooms 3
Commercial: Type of Business N/A Number People N/A Number Toilets N/A
\*Note: Attach site location map and other supportive documents.
Signature of Applicant

SITE INFORMATION

Is there a private well within 75 ft. of the proposed septic system? NO
Is there a public well within 100 ft. of the proposed septic system? NO
Is there a public sewer within 100 ft. of the proposed lot? NO
Is there a lake, stream, canal or other body of water within 50 ft. of the proposed septic system? NO
Is there a septic system or other interference within 75 ft. of the proposed private well? NO
Is the proposed or existing public water line within 10 ft. of the proposed septic system? NO
There is square feet of unobstructed land for future expansion of the drainfield.

SOIL PROFILE AND PERCOLATION DATA



BETHAM GROUP, INC.
LAND SURVEYING
732 N.E. COMMERCIAL ST.
JENSEN BEACH, FLORIDA 33457
334-1442 465-2583

Water table..... 2.0'
Wet season water table... 2.2' EST.
Compacted fill of..... 24" required.
Compacted fill check by... J.S.B. (In place)
Date..... 1/18-81

Certified by: [Signature]
Florida Professional Number: 3199
Date: 11-9-81 Job Number 81-097A
Percolation Rate 1.5 Minutes/Inch
Soil Identification: SAND & SOIL
Class I, II Group S.P. & SM.

INSTALLATION SPECIFICATIONS

Septic Tank Capacity 900 Gallons Absorption Bed Size 345 Square Ft.
Dosing Tank Capacity Gallons Lateral Drainfield Size Square Ft.
Grease Trap Capacity Gallons Sand Filter Size Square Ft.
Specifications: 11-19-81 Date Processed

\$35 WELL FEE IF WELL NOT INSTALLED AT TIME OF SEPTIC SYSTEM INSPECTION
MARTIN County Health Department

[Signature]
Signature of Sanitarian

FINAL INSPECTION DATA

Date and Time of Inspection Type of Tank (Concrete, Fiberglass, Etc.)
Size Tank Installed Drainfield Size
Dosing Tank Size Grease Trap Size Sand Filter Size
Who Made Installation

RECOMMENDATION: Approval Disapproval Signature of Sanitarian

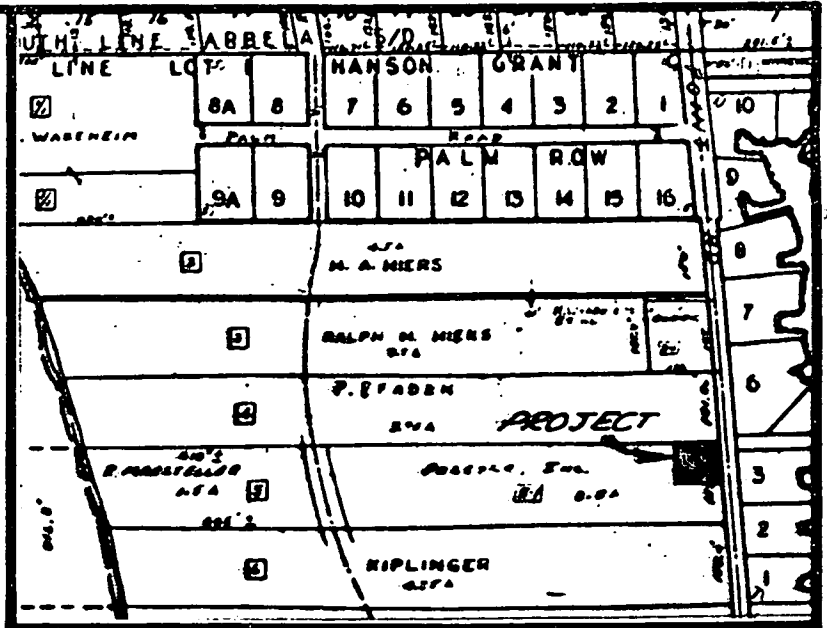
Note: Contractor is responsible for verifying all dimensions shown in the above note prior to installation of septic tank system.

**DESCRIPTION:**

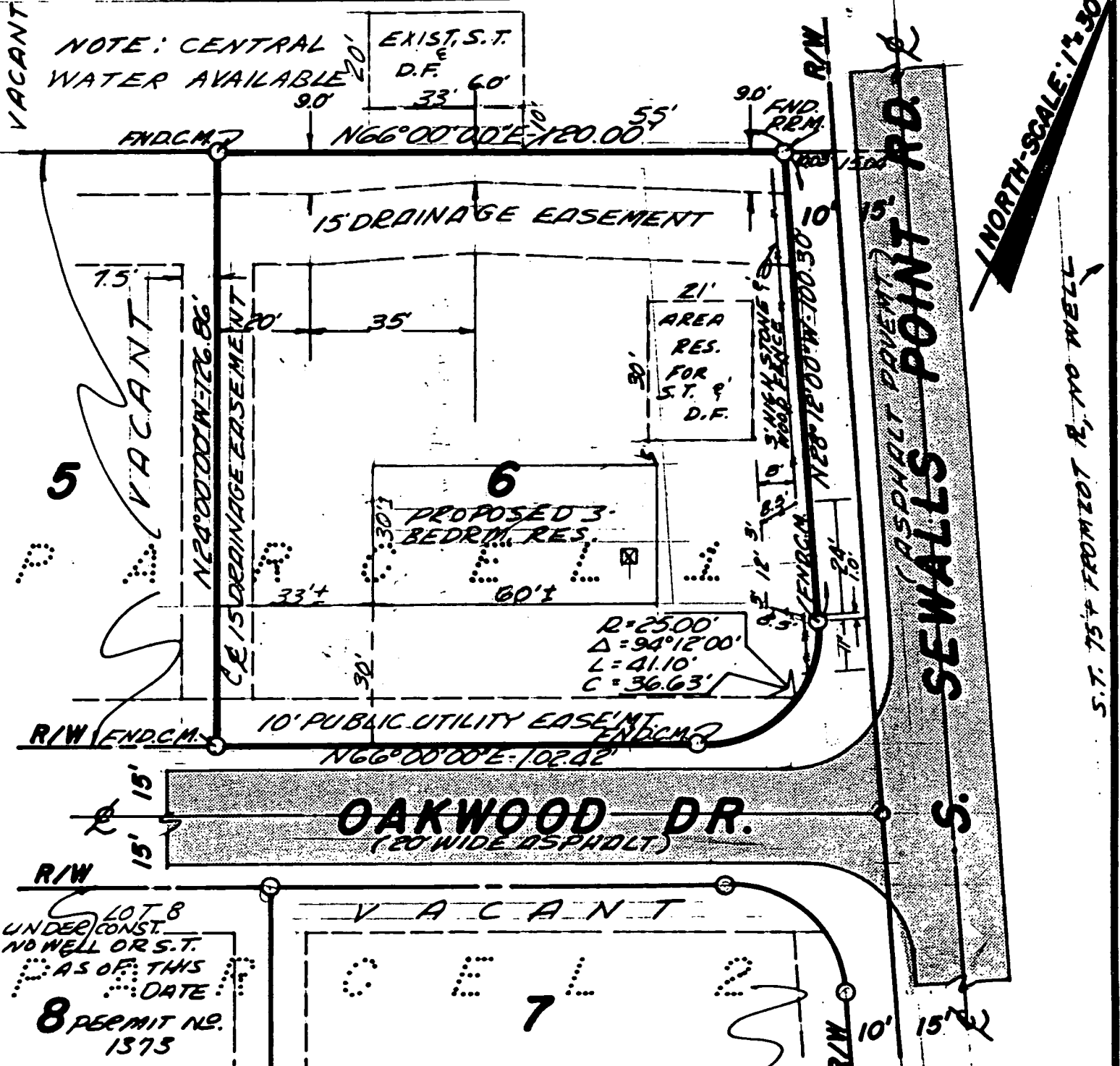
LOT 6, PARCEL 1 OF OAKWOOD SUB-DIVISION AS RECORDED IN PLAT BOOK 8, PAGE 53, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

SUBJECT TO ANY EASEMENTS, RIGHTS OF WAY OR OTHER RESTRICTIONS OF RECORD.

NOTE: A SEARCH OF THE PUBLIC RECORDS HAS NOT BEEN MADE BY THIS OFFICE.



**VICINITY MAP**



PREPARED AT THE REQUEST OF EDMOND L. MORRIS

REVISED 11-9-81

I HEREBY CERTIFY that the plat shown hereon is a true and correct representation of a survey made under my direction and that said survey is accurate to the best of my knowledge and belief and that, unless otherwise shown, there are no encroachments. NOT VALID unless sealed with an EMBOSSED SEAL.



**THE BETHAM GROUP, INC.**  
 LAND SURVEYING  
 P. O. BOX 2264  
 STUART, FLA. 33494  
 PH. 334-1442 465-2583

*Edmond L. Morris*  
 PROFESSIONAL LAND SURVEYOR  
 FLORIDA CERTIFICATE NO. 3199

DATE: 5-12-81

DRAWN BY: P.D.R.

PLAT BOOK: 8 PG. 53

FIELD BK. NO. 18

SCALE: 1"=30'

ORDER NO. 81-97



**This Warranty Deed** Made and executed the *28th* day of *May* A. D. 19 *81* by

BRADEN INVESTMENT CORPORATION  
a corporation existing under the laws of *Florida*, and having its principal place of  
business at *135 South River Road, Sewall's Point, Jensen Beach, Florida 33457*  
hereinafter called the grantor, to  
*EDMOND L. MORRIS and AGNES I. MORRIS, his wife,*

whose postoffice address is *10 RODMAN LANE*  
*WESTFIELD, NEW JERSEY 07090*

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

*LOT 6, OAKWOOD SUBDIVISION, Town of Sewall's Point, according to the*  
*plat thereof as recorded in Plat Book 8, Page 53, public records*  
*of Martin County, Florida.*

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

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

**And** the grantor hereby covenants with said grantee that it is lawfully seized of said land in fee  
simple; that it has good right and lawful authority to sell and convey said land; that it hereby fully war-  
rants the title to said land and will defend the same against the lawful claims of all persons whomsoever;  
and that said land is free of all encumbrances excepting taxes for 1981.

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

(CORPORATE SEAL)

ATTEST, *Evelyn Braden*  
Secretary

BRADEN INVESTMENT CORPORATION

Signed, sealed and delivered in the presence of:  
*Gertrude C. Kennedy*  
*William G. D. Cook*

*Philip R. Braden*  
By *Philip R. Braden*  
President

STATE OF FLORIDA  
COUNTY OF MARTIN

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

well known to me to be the *President and Secretary* respectively of the corporation named as grantor  
in the foregoing deed, and that they severally acknowledged executing the same in the presence of two subscribing witnesses freely and voluntarily  
under authority duly vested in them by said corporation and that the seal affixed thereto is the true corporate seal of said corporation.

WITNESS my hand and official seal in the County and State last aforesaid this *28th* day of *May*, A. D. 19 *81*

This Instrument prepared by: *Evelyn Braden*

Address *135 S. River Road, Jensen Beach, Florida 33457*

*Gertrude C. Kennedy*  
NOTARY PUBLIC STATE OF FLORIDA  
MY COMMISSION EXPIRES *MAR. 11 1983*  
BONDED THRU GENERAL INS. UNDERWRITERS



# Building Insulation

Fiber Glass Blankets when installed according to the manufacturer's recommendations will provide its full rated thermal resistance value.

To meet the thermal resistance value (R), the manufacturer has specified the number of bags per 1000 sq. ft. of net area that must be installed to meet both the minimum design thickness and minimum wt./sq. ft. requirements. Installing the correct number of bags/1000 sq. ft. is necessary to meet the corresponding labeled resistance (R) value. (Based on 34 lb. nominal weight bag.)

**Blanket Insulation**

R Value	Minimum Thickness
To obtain an insulation resistance (R) of:	Installed insulation should not be less than:
<b>R-30</b>	9 1/4" Thick
<b>R-22</b>	7 1/2" Thick
<b>R-19</b>	6 1/2" Thick
<b>R-13</b>	3 1/2" Thick
<b>R-11</b>	3 1/2" Thick

\*Kraft-Faced and Un-Faced Products Only.

**Blowing Wool—34 lb. Bag**

R Value	Bags per 1000 sq. ft.	Minimum Thickness	Maximum Net Coverage	Minimum Wt./sq. ft.
To obtain an insulation resistance (R) of:	The number of bags per 1000 sq. ft. of net area should not be less than:	Installed insulation should not be less than:	Contents of this bag should not cover more than:	The weight per sq. ft. of installed insulation should not be less than:
<b>R-44</b>	28 1/2	19 1/2" Thick	35 sq. ft.	0.977 lbs.
<b>R-38</b>	25	16 3/4" Thick	40 sq. ft.	0.844 lbs.
<b>R-30</b>	19 1/2	13 1/4" Thick	51 sq. ft.	0.666 lbs.
<b>R-22</b>	14 1/2	9 3/4" Thick	70 sq. ft.	0.488 lbs.
<b>R-19</b>	12 1/2	8 1/2" Thick	81 sq. ft.	0.422 lbs.
<b>R-11</b>	7	5" Thick	139 sq. ft.	0.244 lbs.

Wt./bag. minimum 33 lbs. This product conforms to the performance requirements of Federal Specification HH-I-1030A.

**Framing Correction for 34 lb. Bag Blowing Wool**

When installing in attics of new homes or existing homes where no insulation is present, it is acceptable to adjust the coverage figures to compensate for the presence of the framing members as indicated in the following table.

Thermal Resistance	Joists Dimensions	Framing 16" on center. Bags per 1000 sq. ft. (gross)	Framing 24" on center. Bags per 1000 sq. ft. (gross)
<b>R-44</b>	2x8	27.7	28.0
	2x6	28.0	28.2
	2x4	28.2	28.4
<b>R-38</b>	2x8	23.8	24.1
	2x6	24.1	24.3
	2x4	24.3	24.5
<b>R-30</b>	2x8	18.6	18.9
	2x6	18.8	19.1
	2x4	19.1	19.3
<b>R-22</b>	2x8	13.3	13.7
	2x6	13.6	13.9
	2x4	13.9	14.0
<b>R-19</b>	2x8	11.4	11.7
	2x6	11.6	11.9
	2x4	11.9	12.1
<b>R-11</b>	2x8	6.5	6.7
	2x6	6.5	6.7
	2x4	6.7	6.9

Batts and Rolls have been installed in conformance with the above recommendations to provide an R-value of 11 in the ceiling, of rear porch in the exterior walls, and kneewalls in the floors or crawl space perimeter.

Blowing Wool has been installed in the ceiling in conformance with the above recommendations to provide an R-value of \_\_\_\_\_ using \_\_\_\_\_ bags of this insulation to cover \_\_\_\_\_ square feet of area.

Date 1/27/82  
 Signature [Signature]  
 Date 1/27/82  
 Signature [Signature]

**TROPICAL HOMES**  
 Home Builder  
**TREASURE COAST INSULATION, INC.**  
 Insulation Contractor

1430

**BETHAM ASSOCIATES**  
**ARCHITECTS • ENGINEERS • PLANNERS • SURVEYORS**  
**921 NORTHEAST COMMERCIAL STREET • JENSEN BEACH, FLORIDA 33457**  
**(305) 334-1800 • 465-6380**

**DAVID W. BETHAM • P.L.S. • PRESIDENT**

**JOHN M. FOSTER • ARCHITECT**

**ERNEST R. DIKE, JR. • P.E.**

Mr. Wes Klimmek  
C/O Tropical Homes Construction  
1380 Port St. Lucie Blvd.  
Port St. Lucie, Florida 33452

Dear Mr. Klimmek:

This is to certify that we have obtained a finished main floor elevation of the residence building situated on the following described land:

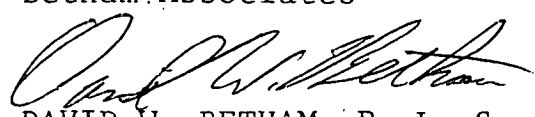
**LEGAL DESCRIPTION:**

Lot 6 of Oakwood Subdivision, Plat Book  
8, Page 53, Public Records of Martin  
County, Florida.

The resultant elevation of the finished floor was 8.07 feet. This elevation is related to the National Geodetic Vertical Datum of 1929, formerly known as Mean Sea Level.

Certified correct the 22nd day of January, 1982.

Betham Associates



DAVID W. BETHAM, P. L. S.  
Florida Certificate No. 3199

Redevelopment of Property

RECEIVED NOV 19 1981

OAKWOOD DR.  
102.42

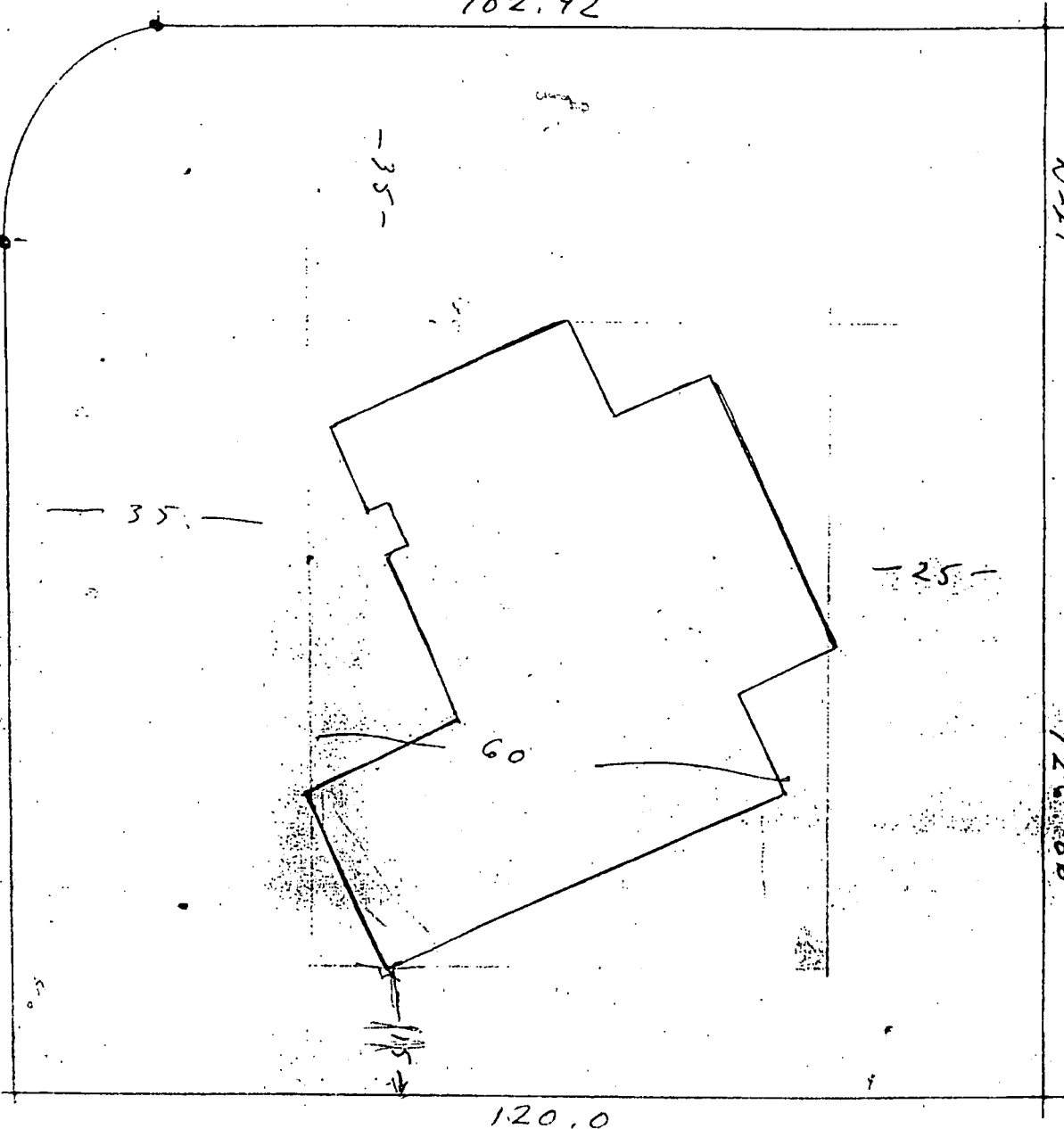
SEWALLS POINT RD

N-28°

100.36

N-24°

126.86



120.0

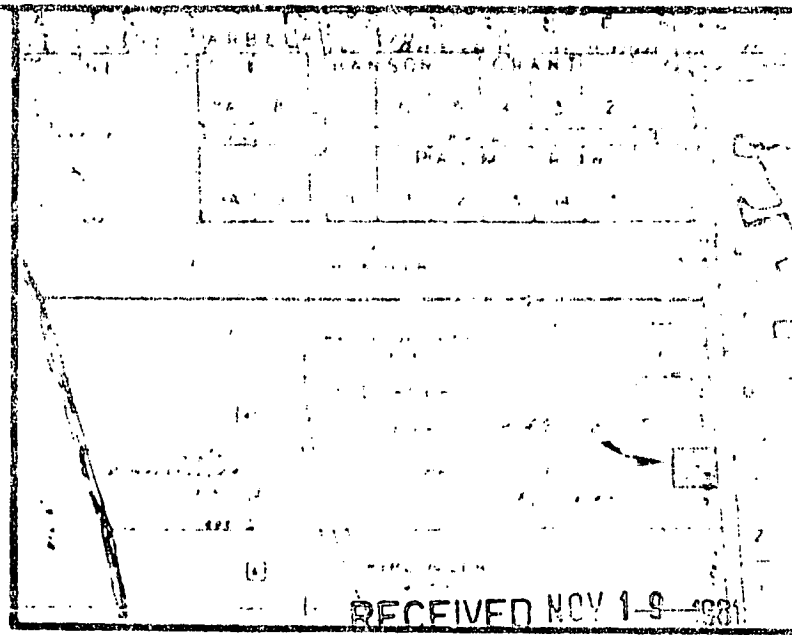
126  
22  
232  
256  
1512

3

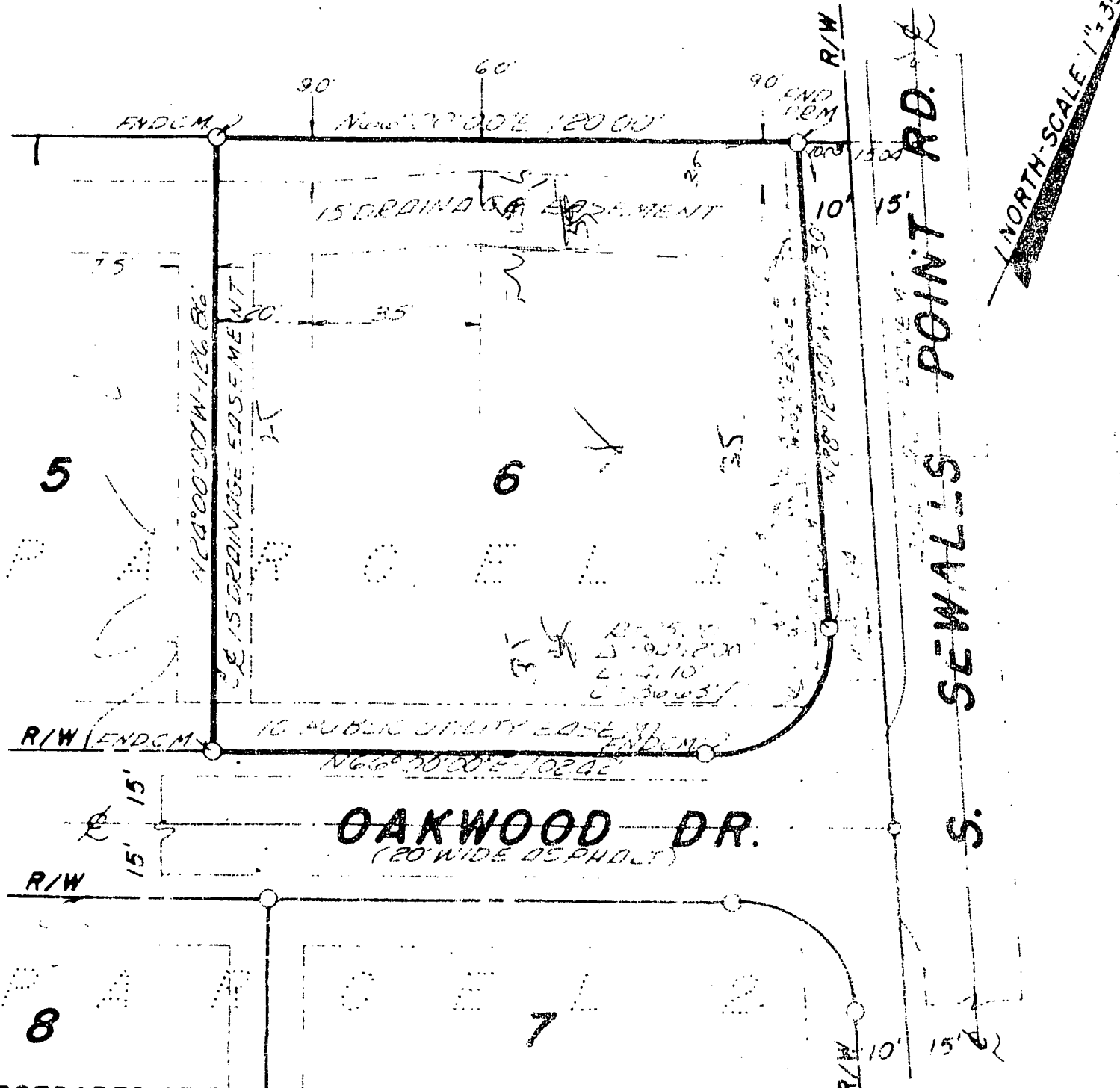
John Jones, FLS

253-2602

THIS PLAT BOOK IS A PUBLIC RECORD... DIVISION OF LAND MANAGEMENT... COUNTY, FLORIDA... WAY OR OTHER RESTRICTION OF RECORD... A SEARCH OF THE PUBLIC RECORDS... NOT BEEN MADE BY THIS OFFICE.



RECEIVED NOV 19 1981  
VICINITY MAP



NORTH SCALE 1" = 30'

PREPARED AT THE REQUEST OF EDMOND L. MORRIS

I HEREBY CERTIFY that the plat shown hereon is a true and correct representation of a survey made under my direction and that said survey is accurate to the best of my knowledge and belief and that, unless otherwise shown there are no encroachments. NOT VALID unless sealed with an EMPRESSED SEAL.



THE BETHAM GROUP, INC.  
LAND SURVEYING  
P. O. BOX 2774  
STUART, FLA. 34994  
PH. 334-1442 465-2563

*Edmond L. Morris*  
PROFESSIONAL LAND SURVEYOR  
FLORIDA CERTIFICATE NO 3199

PLAT BOOK: 8 PG. 53 FIELD BK. 218 DATE: 5-12-81 DRAWN BY: J.L.E. SCALE: 1" = 30' ORDER NO. 51297



WINDOW ANALYSIS

Address	Area	Elevation	Orientalic	Ovng.	WOF	SOF	Comment
4 1/2 35	46.4 ✓	Left	West	3'	1.00	.95	<del>46.4</del> 46.4
2 1/2 34	<sup>18.6</sup> <del>37.7</del>	Rear	Rear <sup>NORTH</sup> NO	3	1.00	1.00	18.6
1/2-32	4.8 ✓	Rear	NORTH	12			} 136.8
12-slides	80 ✓	Rear	NORTH	12	1.00	.97	
13x3.6	44.0 ✓	Rear	NORTH	12'			
5-slides	33.0 ✓	Right	East	12	1.00	.62	33.0
✓ 2-1/2 35	23.2 ✓	Right	East	3	.87	.89	23.2
4-25	64.8 ✓	Front	South	3			} 82.4
1/2 35	11.4 ✓	"	"	4	.87	.86	
1x4	6.0 ✓	"	"	"			
							Total 340.4

FLORIDA MODEL ENERGY EFFICIENCY CODE

SECTION 9 POINTS METHOD

CB 1376 - 20 - 340.4 = 1015.6  
 Fr 160 - 10 = 143

ENVELOPE ANALYSIS

FRAME \_\_\_\_\_ CBS  LIVING AREA 1703 WALL AREA 1536 PERIMETER 192'

ROOF R-VALUE 19 WALL R-VALUE 6-11

TOTAL GLASS AREA 340.4 TOTAL DOOR AREA 377

A/C SYSTEM EER- 7.0 f

HEATING SYSTEM

STRIP  HT. PUMP \_\_\_\_\_ GAS \_\_\_\_\_ OIL \_\_\_\_\_ SOLAR \_\_\_\_\_

HOT WATER HEATER

ELECTRIC  HT. REC. \_\_\_\_\_ GAS \_\_\_\_\_ OIL \_\_\_\_\_ SOLAR \_\_\_\_\_

FRASER ENGINEERING AND TESTING, INC.

PHONE: (305) 461-7508

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

Report  
of  
DENSITY OF SOIL IN PLACE

ASTM D2922

Client: Tropical Homes

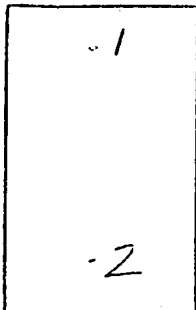
Date: November 25, 1981

Contractor: Client

Site: Lot 6, Oakwood Subdivision  
Sewalls Point

Test No.	Location	Elevation	In Place Dry Density	Moisture Density Relationship		Percent Compaction
				Test No.	Max. Dry Density	
50979	Map Location #1	0 - 1'	103.8	50979	106.0	97.9
	Map Location #1	1 - 2'	106.2		106.0	100.2
	Map Location #1	2 - 3'	105.9		106.0	99.9
	Map Location #1	3 - 4'	104.3		106.0	98.4
	Map Location #2	0 - 1'	105.2		106.0	99.2
	Map Location #2	1 - 2'	107.3		106.0	101.2
	Map Location #2	2 - 3'	105.3		106.0	99.3
	Map Location #2	3 - 4'	103.6		106.0	97.7
All elevations below slab grade.						

Copies Client - 2



Respectfully submitted,  
*Alexander H. Fraser*  
ALEXANDER H. FRASER, P. E.

# FRASER ENGINEERING AND TESTING

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

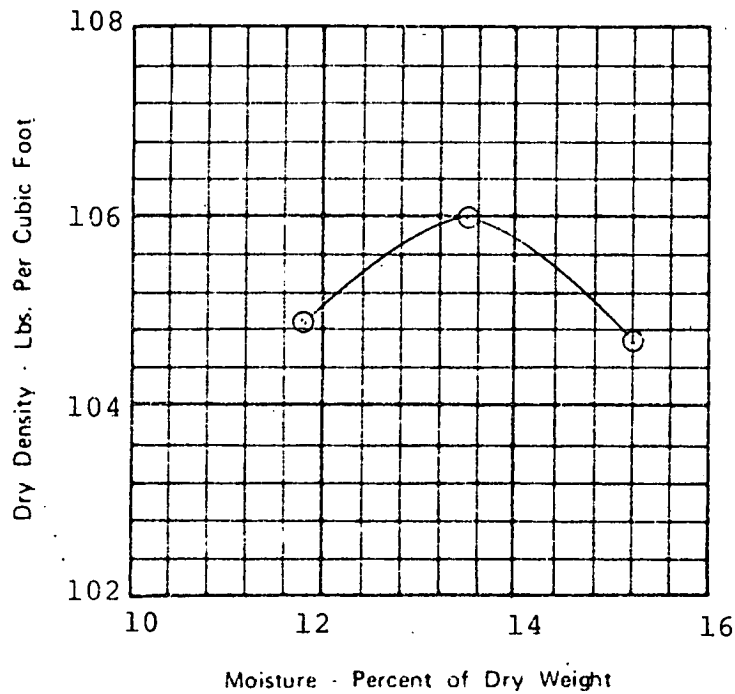
Report  
 of  
**MOISTURE DENSITY RELATIONSHIP**  
 ASTM 1557-70

Client: Tropical Homes

Date: November 25, 1981

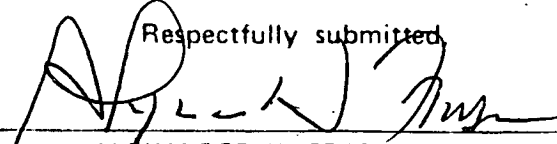
Contractor: Client

Site: Lot 6, Oakwood Subdivision  
 Sewalls Point



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
50979	A	Composite	13.5	106.0	Tan fine sand with shell fragments.

Copies

Respectfully submitted,  
  
 ALEXANDER H. FRASER, P. E.



WINTER				GROSS WINTER POINTS	SUMMER				GROSS SUMMER POINTS
COMPONENT	AREA	X	WPM	=	COMPONENT	AREA	X	SPM	=

WALLS	CONCRETE	R3-3.9		6.2		WALLS	CONCRETE	R3-3.9		16.6	
		R4-5.9	1016	5.0	5080			R4-5.9	1016	15.0	15240
		R6 & UP		4.4				R6 & UP		13.9	
	FRAME OR BRICK OR VENEER	R11-18.9	143	2.5	358	R11-18.9	143	13.9	1988		
		R19-25.9		1.5		R19-25.9		8.6			
		R26 & UP		1.1		R26 & UP		6.5			
	COMMON			5.5		COMMON			7.6		

DOORS	WOOD OR METAL	37	86.5	3200	DOORS	WOOD OR METAL	37	55.4	2050
	INSULATED		84.0			INSULATED		22.2	
	STORM DOOR		44.6			STORM DOOR		44.3	
	COMMON		43.3			COMMON		13.9	

CEILING	UNDER ATTIC	R11-18.9		2.9		CEILING	UNDER ATTIC	R11-18.9		13.3	
		R19-21.9	1903	1.9	3616			R19-21.9	1903	8.4	15985
		R22-29.9		1.7				R22-29.9		7.6	
		R30 & UP		1.5				R30 & UP		5.5	
	SINGLE ASSEMBLY (NO ATTIC)	R6-7.9		5.4			SINGLE ASSEMBLY (NO ATTIC)	R6-7.9		22.6	
		R8-9.9		4.0				R8-9.9		17.3	
		R10-11.9		3.5				R10-11.9		14.6	
		R12-18.9		2.5				R12-18.9		10.6	
		R19 & UP		1.9				R19 & UP		8.4	
		COMMON			3.4				COMMON		

FLOOR OVER UNCONDITIONED SPACE DO NOT ADD CARPETS	WOOD	R0-6.9		5.8		FLOOR OVER UNCONDITIONED SPACE DO NOT ADD CARPETS	WOOD	R0-6.9		6.6	
		R7-10.9		2.4				R7-10.9		2.9	
		R11-18.9		2.1				R11-18.9		2.3	
		R19 & UP		1.4				R19 & UP		1.5	
	CONCRETE	R0-2.9		6.8			CONCRETE	R0-2.9		8.2	
		R3-5.9		4.3				R3-5.9		5.7	
		R6-10.9		3.4				R6-10.9		3.6	
		R11-18.9		2.3				R11-18.9		2.9	
		R19 & UP		1.5				R19 & UP		1.9	
		COMMON			3.4				COMMON		

<b>SLAB ON GRADE PERIMETER</b>	EDGE INSULATION	PERIMETER	WPM	GWP
	R0 - 2.9	192	28.3	5434
	R3 - 5.9		20.4	
	R6 & UP		12.4	

OR	AREA	SINGLE	DOUBLE	WOF	GWP	OR	AREA	SINGLE		DOUBLE		SOF	GSP
								CLR	TIN	CLR	TIN		
N	18.6	55.4	38.5	1.00	1030	N	18.6	204	176	163	139	1.00	3794
NE		55.4	38.5			NE		309	264	258	218		
E	23.2	55.4	38.5	.87	1255	E	23.2	425	360	362	304	.89	8775
SE		55.4	38.5			SE		418	354	355	298		
S	82.4	55.4	38.5	.87	4565	S	82.4	346	294	287	242	.86	24519
SW		55.4	38.5			SW		418	354	355	298		
W	46.4	55.4	38.5	1.00	2571	W	46.4	425	360	362	304	.95	18734
NW		55.4	38.5			NW		309	264	258	218		
H		22.6	6.8			H		720	605	627	524		
12'	NO	136.8	55.4			12'	NO	136.8	204			.97	27070
12'	EAG	33.0	55.4			12'	E	33.0	425			.62	8695

H = HORIZONTAL GLASS (SKYLIGHTS)      FOR TINTED GLASS SL # 0.83 SEE SEC. 902.2d

TOTAL GROSS WINTER POINTS	35,786	TOTAL GROSS SUMMER POINTS	156,850
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<b>DUCT INSULATION MULTIPLIER</b>	1" FIBERGLASS	35,786	1.18	41,157	<b>DUCT INSULATION MULTIPLIER</b>	1" FIBERGLASS	156,850	1.18	145,877
	1.5" FIBERGLASS		1.12			1.5" FIBERGLASS		1.12	
	DUCT IN COND. SP.		1.00			DUCT IN COND. SP.		1.00	

HSM FROM TABLE 9A	41,157 X 1.00	41,157	CSM FROM TABLE 9B	145,877 X .93	135,666
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FLOOR AREA (DIVIDE)	41,157 ÷ 1903	21.6	FLOOR AREA (DIVIDE)	135,666 ÷ 1903	71.2
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WINTER POINTS (WP)	21.6	SUMMER POINTS (SP)	71.2
--------------------	------	--------------------	------

FORM 900 AND 901 - 789					ZONES - 789	
WINTER POINTS	SUMMER POINTS	HOT WATER POINTS	CREDIT POINTS	PENALTY POINTS	91.8 EPI	
21.6	+ 71.2	=	4	+ 3	=	
FEWER TOTAL POINTS ARE ENCOURAGE FOR MAXIMUM ENERGY SAVINGS						

9F	WINTER OVERHANG FACTOR (WOF)								
	FEET	N	NE	E	SE	S	SW	W	NW
0-0.99	1.00	0.99	0.85	0.75	0.63	0.96	1.00	1.00	
1-1.99	1.00	0.99	0.85	0.76	0.64	0.98	1.00	1.00	
2-2.99	1.00	0.99	0.86	0.77	0.66	0.99	1.00	1.00	
3-3.99	1.00	0.99	0.87	0.80	0.67	0.99	1.00	1.00	
4-4.99	1.00	0.99	0.89	0.83	0.70	0.99	1.00	1.00	
5-5.99	1.00	0.99	0.91	0.86	0.72	1.00	1.00	1.00	
6-6.99	1.00	0.99	0.92	0.90	0.74	1.00	1.00	1.00	
7-7.99	1.00	1.00	0.94	0.92	0.76	1.00	1.00	1.00	
8-8.99	1.00	1.00	0.96	0.95	0.77	1.00	1.00	1.00	
9-9.99	1.00	1.00	0.97	0.97	0.78	1.00	1.00	1.00	
10-10.99	1.00	1.00	0.98	0.98	0.79	1.00	1.00	1.00	
11 & UP	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	

9F	SUMMER OVERHANG FACTOR (SOF)								
	FEET	N	NE	E	SE	S	SW	W	NW
0-0.99	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00	1.00
1-1.99	1.00	1.00	0.99	0.99	0.98	0.99	0.99	1.00	1.00
2-2.99	1.00	0.98	0.95	0.93	0.92	0.93	0.95	0.96	1.00
3-3.99	1.00	0.95	0.89	0.87	0.86	0.87	0.89	0.95	1.00
4-4.99	1.00	0.91	0.84	0.81	0.80	0.81	0.84	0.91	1.00
5-5.99	0.99	0.88	0.80	0.76	0.76	0.76	0.80	0.88	1.00
6-6.99	0.99	0.85	0.76	0.72	0.72	0.72	0.76	0.85	1.00
7-7.99	0.99	0.83	0.72	0.68	0.70	0.68	0.72	0.83	1.00
8-8.99	0.98	0.81	0.69	0.66	0.68	0.66	0.69	0.81	1.00
9-9.99	0.98	0.79	0.67	0.64	0.66	0.64	0.67	0.79	1.00
10-10.99	0.98	0.78	0.65	0.62	0.65	0.62	0.65	0.78	1.00
11-11.99	0.97	0.76	0.63	0.61	0.65	0.61	0.63	0.76	1.00
12 & UP	0.97	0.76	0.62	0.59	0.64	0.59	0.62	0.76	1.00

9A	HEATING SYSTEM MULTIPLIER (HSM)									
	HEAT PUMP	COP	1.0-1.19	2.2-2.39	2.4-2.59	2.6-2.79	2.8-2.99	3.0-3.19	3.2-3.39	3.4 & UP
		HSM	0.50	0.45	0.42	0.39	0.36	0.33	0.31	0.29
SOLAR HEAT		(BACKUP SYSTEM FRACTION) X (BACKUP SYSTEM HSM)								
GAS HEAT		0.50								
OIL HEAT		0.70								
ELECTRIC STRIP HEAT		1.00								

9B	COOLING SYSTEM MULTIPLIER (CSM)												
	ELECTRIC	SEER	1.5-1.99	2.0-2.49	2.5-2.99	3.0-3.49	3.5-3.99	4.0-4.49	4.5-4.99	5.0-5.49	5.5-5.99	6.0-6.49	6.5-6.99
		CSM	1.00	0.93	0.87	0.81	0.76	0.72	0.68	0.65	0.62	0.59	0.57
GAS	COP	0.60-0.65		0.65-0.70		0.70-0.75		0.75-0.80		0.80-0.85		0.85 & UP	
	CSM	1.00		1.05		1.10		1.15		1.20		0.92	

NOTE: SEER = COOLING MODE COP x 3.413 = AIRATED COOLING OUTPUT IN BTUH ÷ TOTAL WATTS CONSUMED

9C	HOT WATER CREDIT POINTS (HWP)	
	UNIT	POINTS
ELECTRIC	RESISTANCE HEATERS	0.0
GAS		7.0
SOLAR	MINIMUM CERTIFIED DCR OF 6,000 BTU PER BEDROOM AND 15 GALLON STORAGE PER BEDROOM	19.6
	MINIMUM CERTIFIED DCR OF 9,000 BTU PER BEDROOM AND 20 GALLON STORAGE PER BEDROOM	22.6
	MINIMUM CERTIFIED DCR OF 12,000 BTU PER BEDROOM AND 27 GALLON STORAGE PER BEDROOM	24.5
A/C HEAT RECOVERY	MINIMUM CERTIFIED RATING OF 1500 BTUH/TON MINIMUM HOT WATER STORAGE TANK 40 GALLONS	11.3
	MINIMUM CERTIFIED RATING OF 2500 BTUH/TON MINIMUM HOT WATER STORAGE TANK 40 GALLONS	17.9

NOTE: DAILY COLLECTION RATE (DCR) IS MEASURED AT 122°F USING FBEC STANDARD FLORIDA SOLAR DAY

# ThermoCon SPRAY-ON ACOUSTICAL INSULATION

## Recommended Coverage

1430

Thermo Products Company • 2508 New Marlin Highway • Waco, Texas 76705

ThermoCon cellulose base material as tested by independent laboratories, was found to be in compliance with CPSC Safety Act of 1978, as amended in 1979 P.L. 95-319, GSA Spec. HHI 515-D and HUD use of Materials Bulletin # 80. (UM 80).

### MANUFACTURERS CERTIFICATION:

The thermal resistance has been determined by accepted ASTM test procedures, conducted at a mean temperature of 75°F. The manufacturer recommends that the insulation be installed at these minimum thicknesses, maximum coverages, to provide the levels of insulation thermal resistance (R) shown.

Weight: 30 lb. bag

R-Value	Minimum Thickness	Max. Net Coverage	Weight per sq.ft.	Coverage per 1000 sq. ft.
To obtain the insulation "R"	Installed insulation shall not be less than	Contents of bag shall not cover more than	Weight per sq. ft. installed not less than	Minimum bags per 1000 net sq. ft.
R-3.5	3/4"	87	0.344	11
R-4.7	1"	66	0.458	15
R-7.1	1-1/2"	44	0.687	23
R-11	2-1/3"	28	1.069	36
R-13	2-3/4"	24	1.260	42
R-16	3-1/2"	19	1.603	53

For 2 by framing, 16" o.c. add 15% to MAX NET Coverage.

For 2 by framing, 24" o.c. add 10% to MAX NET Coverage.

"R" Values are determined in accordance with ASTM C-236. "R" means resistance to heat flow. The higher the "R" value, the greater the insulating powers.

### BUILDERS AND APPLICATORS STATEMENT & SIGNATURE

This is to certify that the insulation has been installed in conformance with the requirements indicated on the card for 1280 gross sq. ft. to provide a Value "R" = 3.5 using 15 bags of insulation to cover 1280 square feet of area.

1/27/82 TROPICAL HOMES

Date BUILDERS COMPANY NAME

BUILDERS SIGNATURE

1/27/82 TREASURE COAST INSUL. INC.

Date APPLICATOR COMPANY NAME

APPLICATOR SIGNATURE

A flame spread of 25 or less rates the Material as non-flammable TYPE I. Underwriters Laboratory, Inc. R-7500W

Flame Spread 5  
Fuel Contributed 10  
Smoke Develops 0



# ThermoCon<sup>®</sup> CELLULOSE LOOSE-FILL INSULATION 1430

## Recommended Coverage

ThermoCon Loose Fill Insulation  
 Unicus Associates, Inc.  
 Fort Lauderdale, Florida

### ThermoCon CELLULOSE LOOSE-FILL PNEUMATICALLY INSTALLED.

UNDERWRITERS LABORATORIES, INC., examination in accordance with the test methods described in G.S.A. HH-1-515-D yields the following physical characteristics results. Settled density 2.6 p.c.f., starch - negative, Thermal resistance 3.5 R/in., moisture absorption - 7.7%, odor emission - negative, fungi resistance - acceptable, critical radiant flux - acceptable, and smoldering combustion - acceptable. R 8993

### MANUFACTURERS CERTIFICATION:

The manufacturer, based on the above test, certifies that ThermoCon cellulose loose-fill is in compliance with CPSC Safety Act of 1978 as amended in 1979 P.L. 95-319 and GSA Spec. HH-1-515-D. When pneumatically installed at the below coverages, the corresponding thickness will provide the levels of insulation (R) values shown.

Weight: 30 lb. bag

R-Value at 75° Mean Temp.	Min. Thickness	Max. Net Coverage	Weight per sq. ft.	Coverages per 1000 sq. ft.
To obtain the insulation "R"	Installed insulation not to be less than	Contents of bag shall not cover more than	Wt. per sq. ft. installed not less than	Minimum bags per 1000 net sq. ft.
R-40	11.4 in.	12.0 sq. ft.	2.5 lbs.	83
R-32	9.2 in.	15.0 sq. ft.	2.02 lbs.	67
R-24	6.7 in.	20.4 sq. ft.	1.47 lbs.	49
<u>R-19</u>	5.4 in.	25.2 sq. ft.	1.19 lbs.	40
R-13	3.7 in.	37.0 sq. ft.	0.81 lbs.	27
R-11	3.1 in.	44.1 sq. ft.	0.68 lbs.	23

For 2 by framing, 16" o.c. add 15% to MAX NET Coverage.

For 2 by framing, 24" o.c. add 10% to MAX NET Coverage.

"R" Means resistance to heat flow. The higher the "R" value, the greater the insulating power.

### BUILDERS AND APPLICATORS STATEMENT & SIGNATURE

This is to certify that the insulation has been installed in conformance with the requirements indicated on this card to provide a Value "R" = 19 using 72 bags of insulation to cover 1800 square feet of area.

1/27/82 TROPICAL HOMES

Date BUILDERS COMPANY NAME

BUILDER SIGNATURE

1/27/82 TREASURE COAST INSUL. INC.

Date APPLICATOR COMPANY NAME

APPLICATOR SIGNATURE

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/29/82

This is to request that a Certificate of Approval for Occupancy be issued to Mr. Morris  
For property built under Permit No. 1430 Dated 11/30/81 when completed in  
conformance with the Approved Plans.

Signed \_\_\_\_\_

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings		
Rough plumbing	<u>12/10/81</u>	
Slab	<u>12/11/81</u>	
Perimeter beam	<u>12/18/81</u>	
Close-in, roof and rough electric	<u>12/31/81</u> G. S.	
Final Plumbing	<u>1/29/82</u>	
Final Electric	<u>1/29/82</u>	
<u>INSULATION</u>	<u>1/8/82</u>	
Final Inspection for Issuance of Certificate for Occupancy.		
Approved by Building Inspector	<u>[Signature]</u>	date <u>1/29/82</u>
Approved by Building Commissioner	<u>[Signature]</u>	date <u>2/8/82</u>
Utilities notified	<u>1/29/82</u>	date
Original Copy sent to	_____	

(Keep carbon copy for Town files)

**3177**

**REROOF**

TAX FOLIO NO. 3177 Date \_\_\_\_\_

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

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

Owner Jim Giacinto Present Address 2 OAKWOOD

Phone \_\_\_\_\_

Contractor All Star Roofing Inc Address 1805 SW Baltimore

Phone 879-7262 P.S.L.

Where licensed Martin Co. License number SP01514

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: REROOF PORCH by Removing gravel

built-up roof Replace with 4 GNS MANVILLE  
State the street address at which the proposed structure will be built:

Subdivision OAKWOOD Lot number 6 Block number PARCEL 6

Contract price \$ 1,600. Cost of permit \$ 29.00

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

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

Contractor [Signature]

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

Owner [Signature]

TOWN RECORD  
Approved: [Signature] 5/6/92  
Building Inspector Date

Date submitted 5/6/92

Approved: [Signature] 5/6/92  
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.

**3298**

**ENCLOSE PORCH**

TAX FOLIO NO. 13-38-41-009-000-00060.50000 DATE 11/18/92

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.

**3298**

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 James Giacinto Present Address 2 Oakwood, Sewall's Point  
Phone 220-9576

Contractor Jeffery A. Bowers/Masterpiece Builders Address 424 Colorado Ave.  
Phone 283-2096

Where licensed Florida License Number CG C048543

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: enclose existing screened porch

State the street address at which the proposed structure will be built:  
2 Oakwood, Sewall's Point

Subdivision Oakwood Lot Number 6 Block Number \_\_\_\_\_

Contract Price \$ 6,500.00 Cost of Permit \$ ~~1500~~ 56.00

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

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

Contractor Jeffery A. Bowers

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 Jim Haughmeyer

TOWN RECORD

Date submitted 11-18-92

Approved: Rale Brun 11-19-92  
Building Inspector Date

Approved: A. Chandrasekhar 11/18/92 Final Approval given: 11-19-92  
Commissioner Date Date

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

SP1282 Permit No. \_\_\_\_\_

**3305**

**WIRE PORCH**

TAX FOLIO NO. \_\_\_\_\_ DATE 12-11-92

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 JAMES F GIACINTO Present Address 2 Oakwood Dr

Phone \_\_\_\_\_

Contractor Mattoupiere Address TREASURE COAST ELE INC  
1775 NE 22nd St JENSEN BCH

Phone \_\_\_\_\_

Where licensed MARTIN CO. License Number \_\_\_\_\_

Electrical Contractor TREASURE COAST ELE INC License Number ME00284

Plumbing Contractor \_\_\_\_\_ License Number \_\_\_\_\_

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: 20 CURBS PORCH AREA

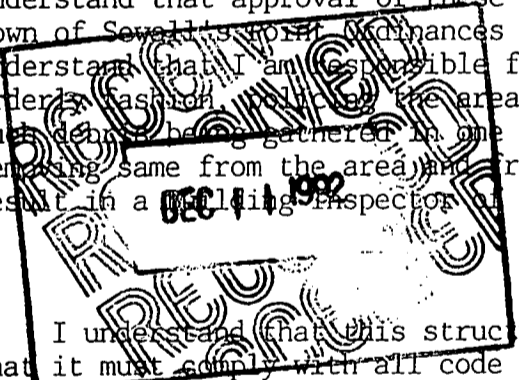
REAR 6 RECES 12 HIGHTS 4 SW 1 FAN.  
State the street address at which the proposed structure will be built:

Subdivision OAKWOOD Lot Number 6 Block Number \_\_\_\_\_

Contract Price \$ 1500 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, including 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 Robert R Harris

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 JAMES F. GIACINTO R.H.

TOWN RECORD

Date submitted 12/11/92

Approved: Dale Brown 12/11/92  
Building Inspector Date

Approved: [Signature] 12/11/92 Final Approval given: \_\_\_\_\_  
Commissioner Date Date

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

SP1282

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



**3537**

**WOODEN DECK**

APPLICATION FOR A PERMIT TO BUILD A DECK, 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 James Giacinto Susan Shaughnessy Address 2 Oakwood Drive

Phone 407-220-9576 Stuart, FL 34996

Contractor Husband Building Address above

Phone above

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: Wooden deck

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

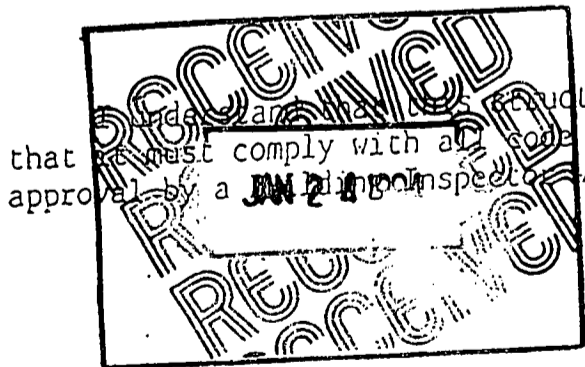
Subdivision OAK wood Lot Number 6 Block Number \_\_\_\_\_

Contract Price \$ 2400 Cost of Permit \$ 24.00

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

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

Contractor Jim Shaughnessy



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

Owner Jim Shaughnessy

TOWN RECORD

Approved: Rale Brown 1/24/94  
Building Inspector Date

Date submitted \_\_\_\_\_  
Approved: [Signature] 1/24/94  
Commissioner Date

Final Approval given: \_\_\_\_\_ Date

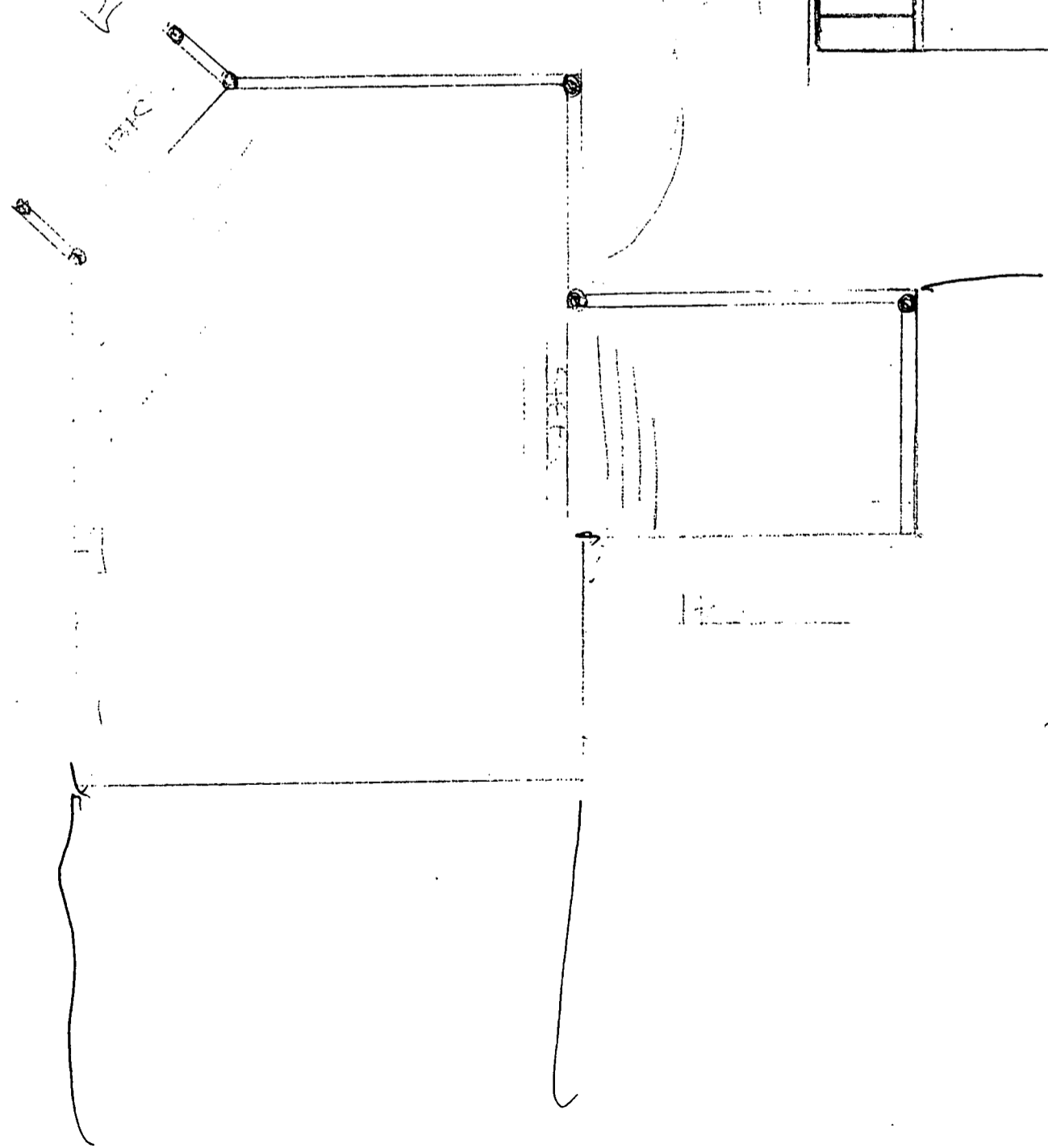
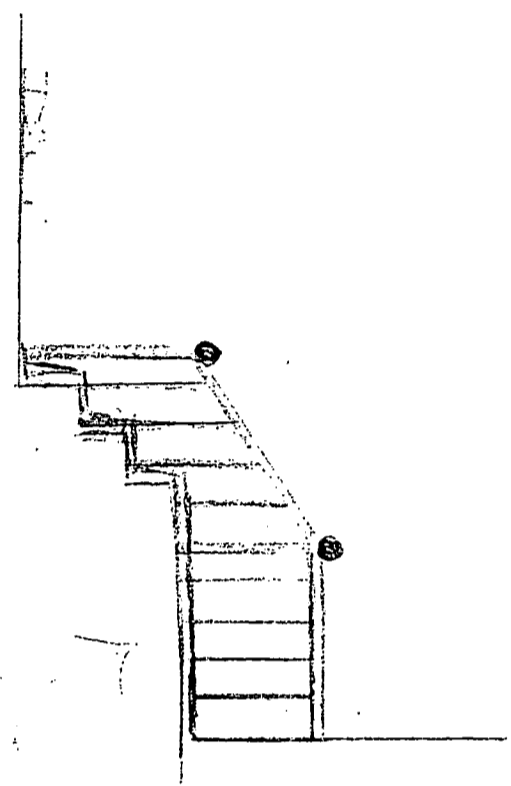
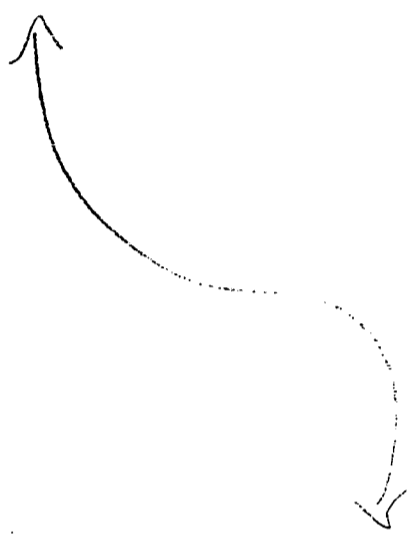
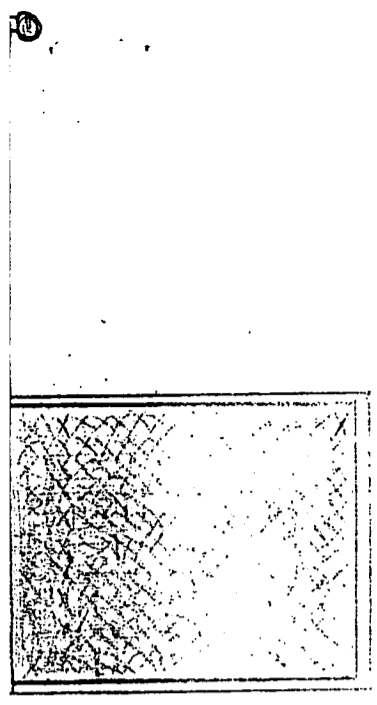
Certificate of Occupancy issued(if applicable) \_\_\_\_\_ Date

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

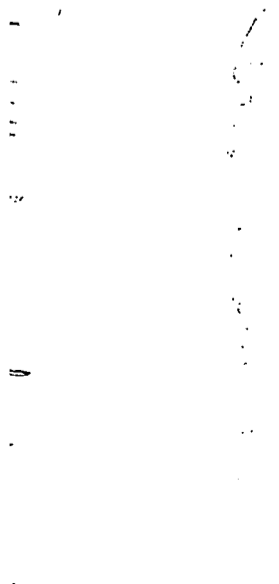
ground

deck

6x11"

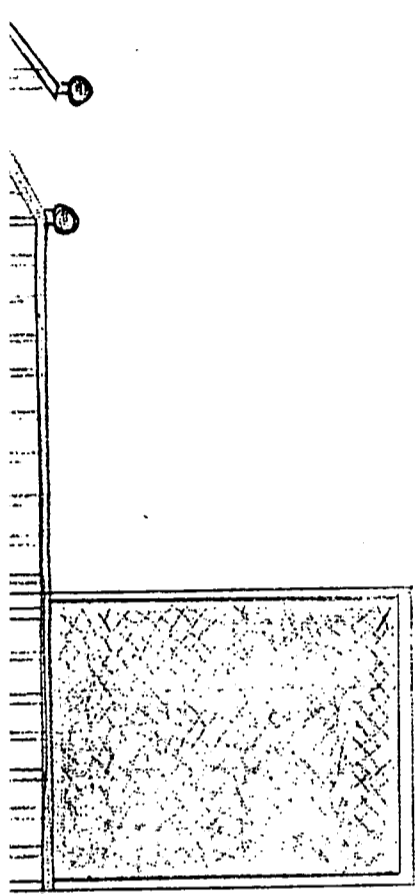
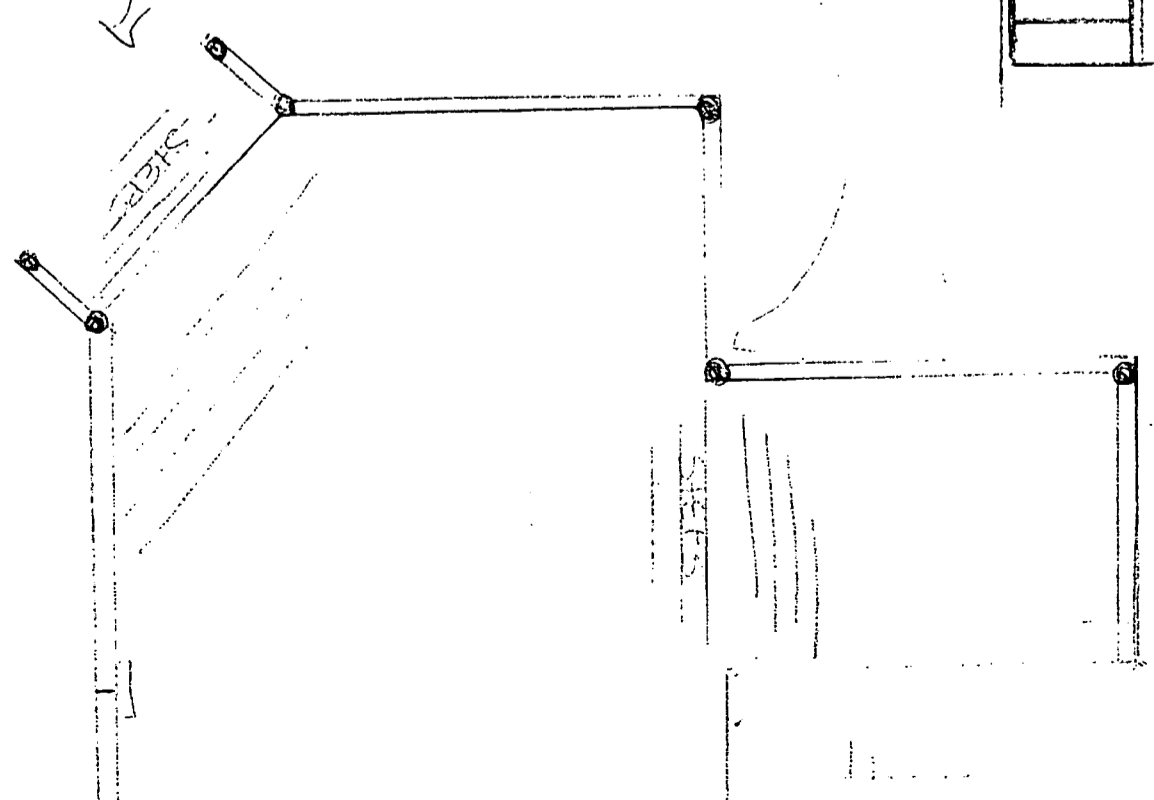
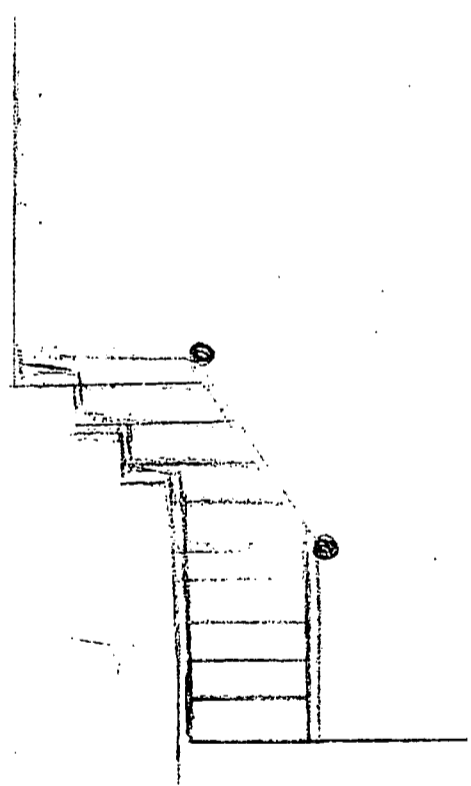


6x11"

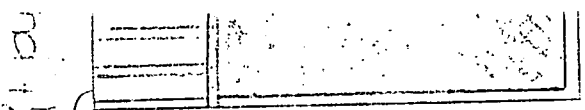


Kiosks

Roofs 13' deep & ground  
8' apart  
Joist 16" on center  
Trusses 42" from deck  
Steps 6 or 8 wide 11"



Rail to F1.

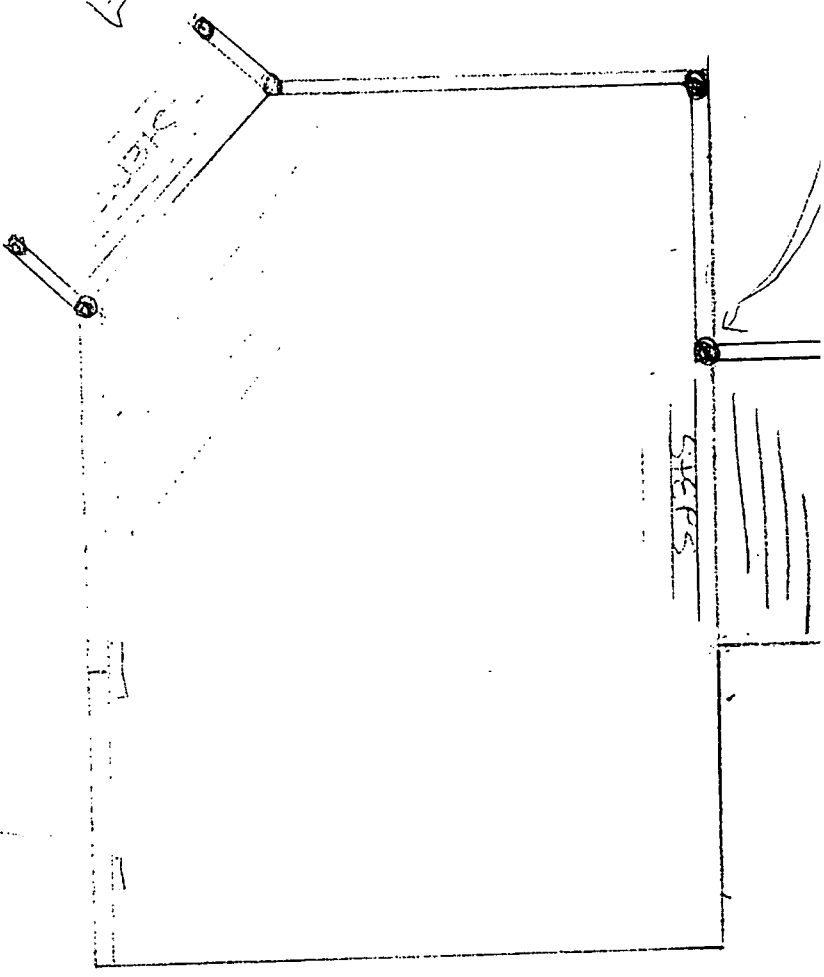


no 1

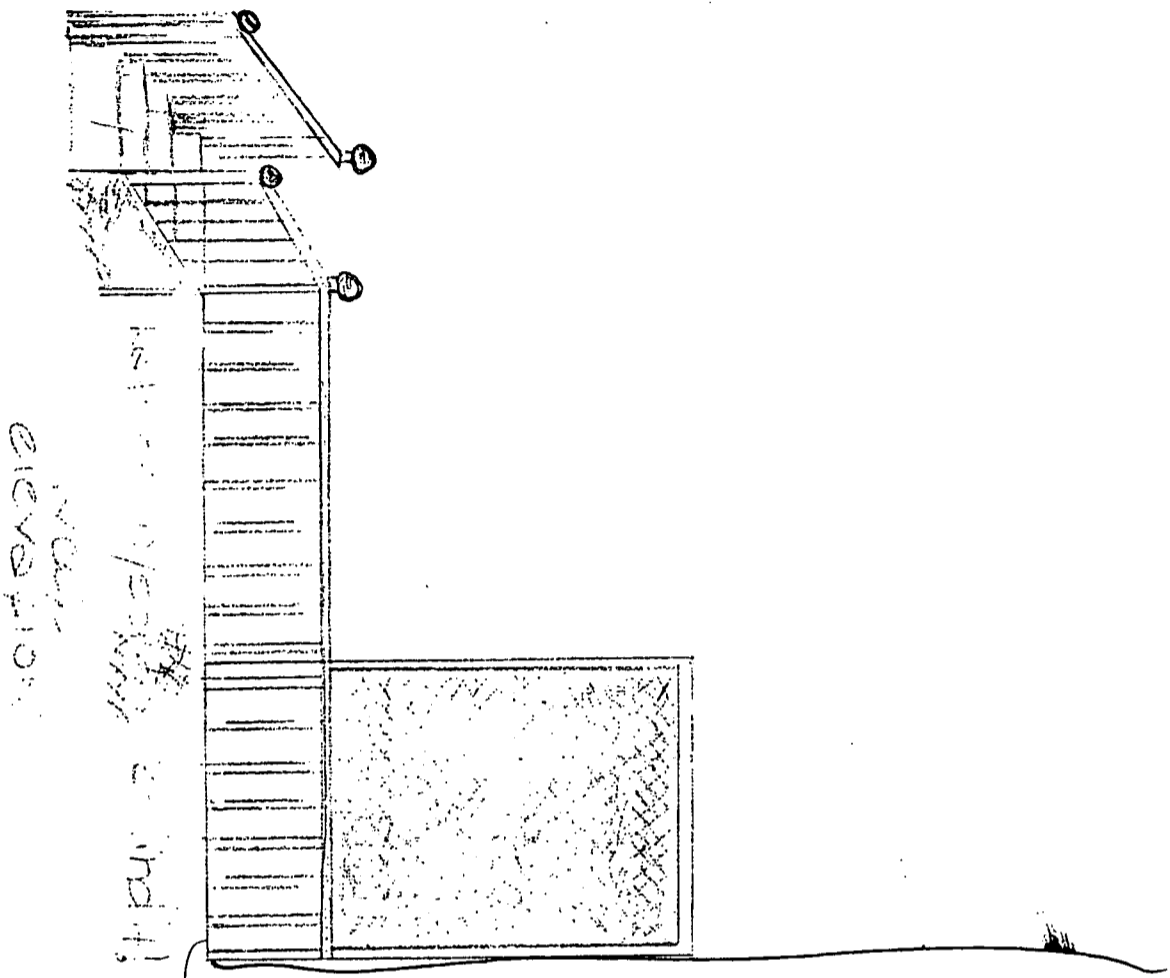
space 6' 5" x 10' 10"

Rail to first pipe on deck

to be installed on deck



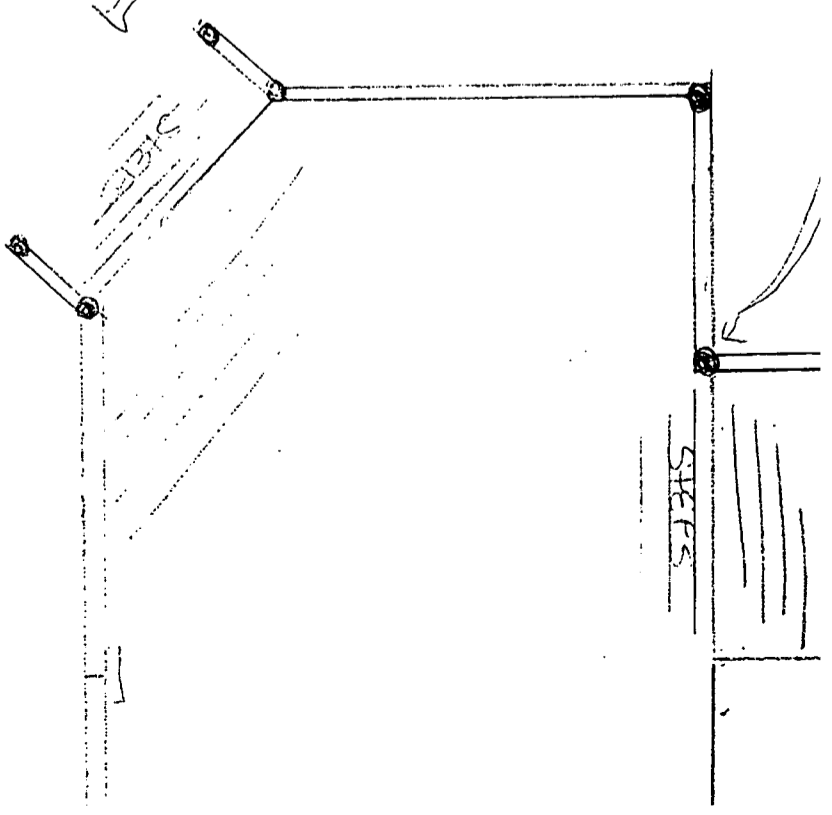
Reelers 4 1/2" from deck  
steps to be to code 11"



Deck elevation

Space 6" condition

Space 6" condition



Rail to 1 1/2"

**3782**

**SHADOW BOX FENCE**

Form No. 13-38-41-009-000-00060 - 50000

Date 4-19-95

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 setbacks, plumbing and electrical layouts, if applicable, and at least two (2) elevations, as applicable.

3782

Owner James Giacinto Present Address 2 Oakwood Dr

Phone 220-9576 Stuart, FL 34996

Contractor All American Fence Address PO Box 13269

Phone 878-1650 Ft Pierce, FL 34979

Where licensed Martin County License number 5P00872

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:

6' high shadowbox wood fence

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

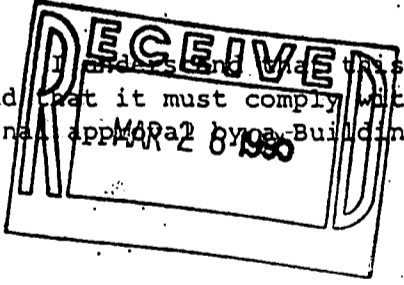
Subdivision Oakwood Lot number 6 Block number

Contract price \$ 1070 Cost of permit \$ 25.00

Plans approved as submitted Plans approved as marked

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

Contractor Michael J. Dempsy



It is understood 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 [Signature]

TOWN RECORD

Date submitted Approved: Dale Brown 4/26/95 Building Inspector Date

Approved: [Signature] Commissioner Date Final Approval given: Date

Certificate of Occupancy issued (if applicable) Date

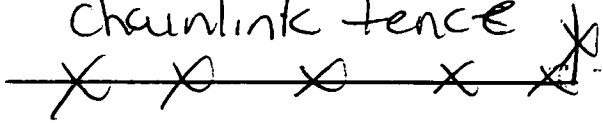
SP1282

Permit No.

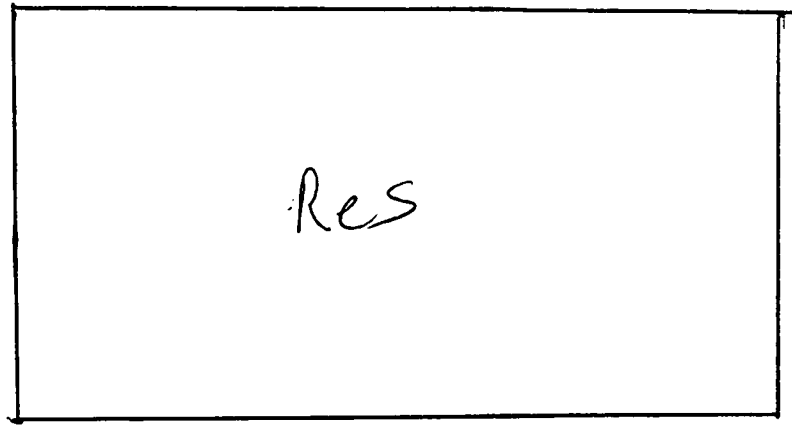
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.



Existing  
chainlink fence



120'



# **ADMIN VARIANCE**

01150484

95 DEC 19 PM 2:41

Prepared by and return to:  
Town of Sewall's Point  
One South Sewall's Point Road  
Stuart Florida 34996

**TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPROVAL**

1. Owner of Property: James F. Giacinto & Susan K. Shaughnessy

2. Legal Description of Property:

OAKWOOD Subdivision  
lot 6

3. Date of Administrative Variance Application: 11-16-95

Whereas, the Town of Sewall's Point Building Commissioner (the "Building Commissioner") has authority under the Town of Sewall's Point Code of Ordinances to grant administrative variances upon making certain findings of fact; and

Whereas, the Building Commissioner has reviewed an Administrative Variance Application (the "Application") for the Property described above and determined that the Application is complete; and

Whereas, the Building Commissioner has made the appropriate findings of fact and finds that:

(1) The setback violation(s) for the encroachments shown on the survey attached as Exhibit "A" (the "Survey") was/were a good faith error(s) and was/were not intentional; and

(2) The encroachment(s) is/are less than or equal to five percent (5%) of the

setback requirement(s) in effect on the date that the encroachment was first created, or twenty inches (20"), whichever is less; and

(3) No letters of objection to the administrative variance application have been filed by adjacent owners with the Town Clerk; and

(4) The Application meets the conditions of the Town of Sewall's Point Code of Ordinances for an administrative variance.

NOW, THEREFORE, the Town of Sewall's Point hereby grants and approves the Application for an administrative variance for the encroachments shown on the Survey.

Dated this 15<sup>th</sup> day of December, 1995.

The Town of Sewell's Point, a  
Florida municipal corporation

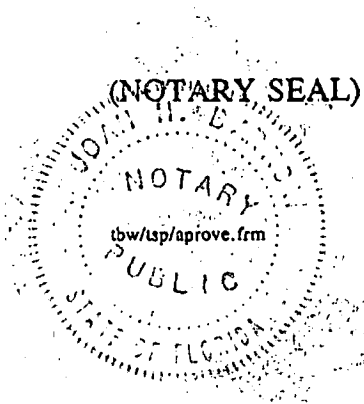
By: [Signature]  
Its: Building Commissioner

STATE OF FLORIDA  
COUNTY OF MARTIN

Sworn to and subscribed before me this 15<sup>th</sup> day of December, 1995,  
by Y.A. Vorraso, as Building Commissioner of the Town of Sewall's  
Point, a Florida municipal corporation, who is personally known to me or who has produced  
Fl. d. I. as identification and who did not take an oath.

[Signature]  
Name: Joan H. Barrow  
I am a Notary Public of the  
State of Florida and my  
commission expires:

OFFICIAL NOTARY SEAL  
JOAN H BARROW  
NOTARY PUBLIC STATE OF FLORIDA  
COMMISSION NO. CC22705  
MY COMMISSION EXP. NOV. 23, 1998



**TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPLICATION FORM**

1. Owner of Property: James F. Giacinto & Susan K. Shaughnessy  
2. Address of Property: 2 Oakwood Drive  
3. Address of Applicant: above  
4. Phone No. of Applicant: 220-9576  
5. Length and Location (front, rear, side) of Encroachment (if more than one, please list separately):

23.8

6. Have you included the following materials with your application? \_\_\_\_\_

A. \$250.00 Filing Fee

B. \$250.00 Costs Deposit

C. Certificate of Ownership

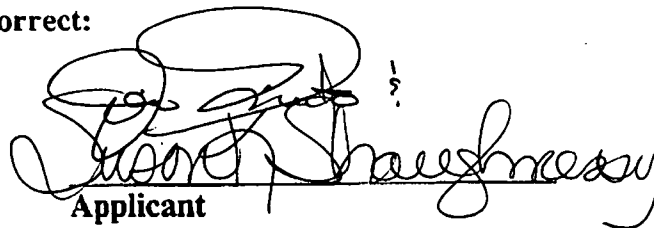
D. Certificate of Adjacent Owners

E. Survey

F. Letters of No Objection or Proof of Mailing Notice

7. Does/do the encroachment(s) result from development under a permit for which a certificate of occupancy was issued prior to March 11, 1992? yes

I hereby certify that all of the information above and the application materials I have provided are true and correct:

  
Applicant

Dated this 16<sup>th</sup> day of November, 1995.

Prepared by and return to:  
Town of Sewall's Point  
One South Sewall's Point Road  
Stuart Florida 34996

**TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPROVAL**

1. Owner of Property: James F. Giacinto & Susan K. Shaughnessy
2. Legal Description of Property:  
OAKWOOD Subdivision  
lot 6
3. Date of Administrative Variance Application: 11-16-95

Whereas, the Town of Sewall's Point Building Commissioner (the "Building Commissioner") has authority under the Town of Sewall's Point Code of Ordinances to grant administrative variances upon making certain findings of fact; and

Whereas, the Building Commissioner has reviewed an Administrative Variance Application (the "Application") for the Property described above and determined that the Application is complete; and

Whereas, the Building Commissioner has made the appropriate findings of fact and finds that:

(1) The setback violation(s) for the encroachments shown on the survey attached as Exhibit "A" (the "Survey") was/were a good faith error(s) and was/were not intentional; and

(2) The encroachment(s) is/are less than or equal to five percent (5%) of the

**TOWN OF SEWALL'S POINT ADMINISTRATIVE  
VARIANCE APPLICATION FORM**

1. Owner of Property: James F. Giacinto & Susan B. Shaughnessy

2. Address of Property: 2 Oakwood Drive

3. Address of Applicant: above

4. Phone No. of Applicant: 220-9576

5. Length and Location (front, rear, side) of Encroachment (if more than one, please list separately):

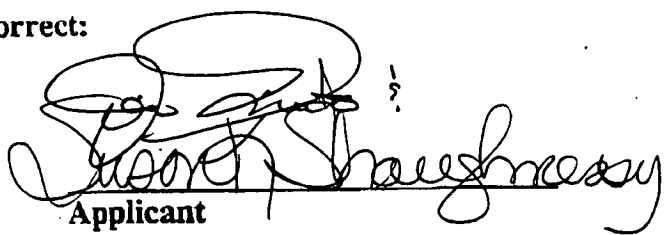
23.8' vs 25'

6. Have you included the following materials with your application? \_\_\_\_\_

- A. \$250.00 Filing Fee
- B. \$250.00 Costs Deposit
- C. Certificate of Ownership
- D. Certificate of Adjacent Owners
- E. Survey
- F. Letters of No Objection or Proof of Mailing Notice

7. Does/do the encroachment(s) result from development under a permit for which a certificate of occupancy was issued prior to March 11, 1992? yes

I hereby certify that all of the information above and the application materials I have provided are true and correct:

  
Applicant

Dated this 16<sup>th</sup> day of November, 1995.

**FORM LETTER OF NO OBJECTION**

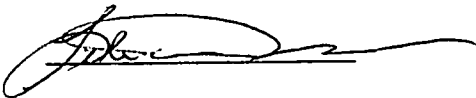
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: **Application for Administrative Variance Pursuant to Appendix B - Zoning, Section VIII.F, Town of Sewall's Point Code of Ordinances** Filed by \_\_\_\_\_

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by *James Gaicardo* ~~Susan Shaughnessy~~, the Town of Sewall's Point. I am an adjacent property owner to the property which is the subject of the Administrative Variance and I have no objection to the Town of Sewall's Point granting the Administrative Variance.

Sincerely yours,



kathy/tosp/letter/form



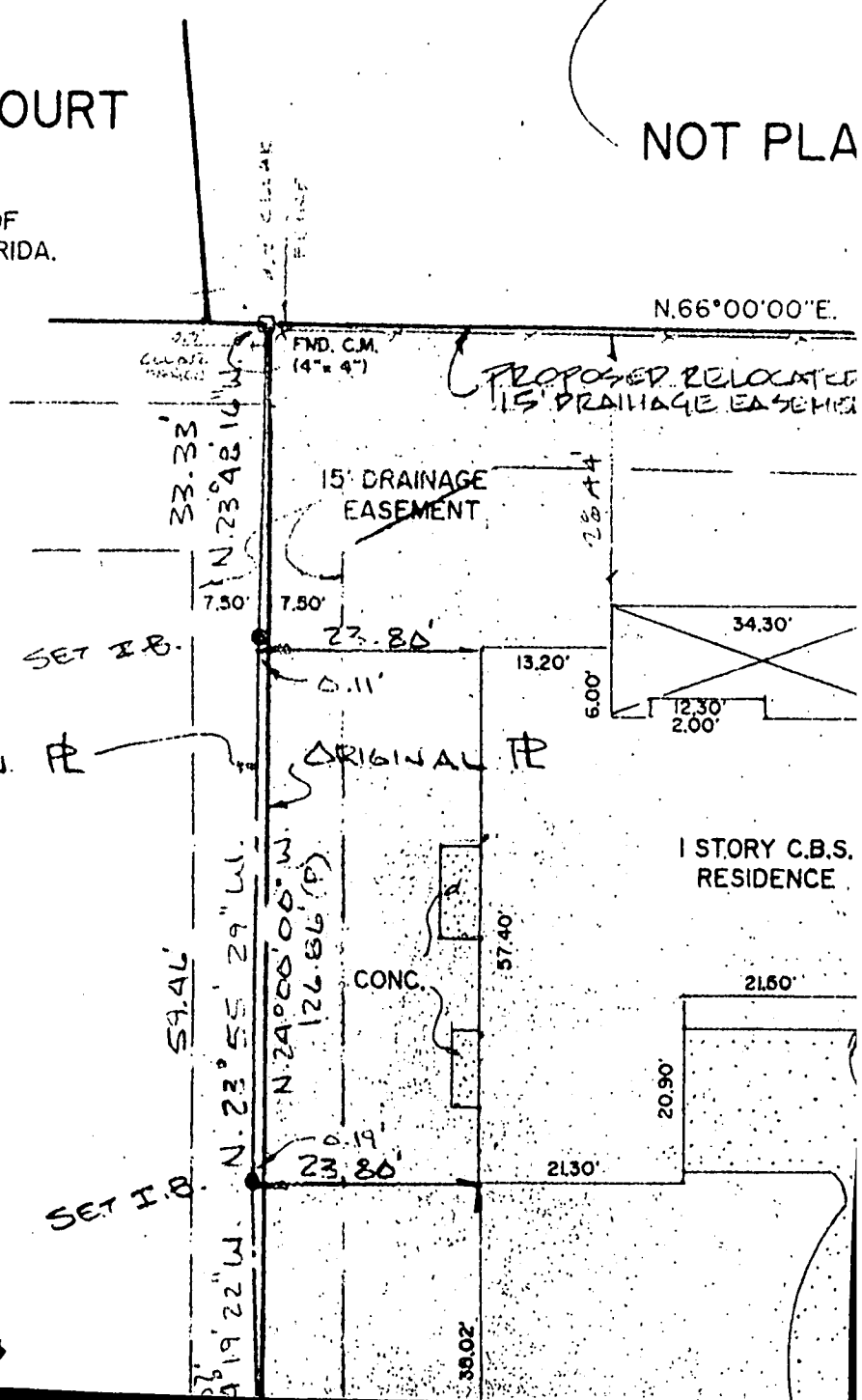
# KINGSTON COURT

AMENDED  
P.B. 8, PAGE 82,  
PUBLIC RECORDS OF  
MARTIN COUNTY, FLORIDA.

## NOT PLANNED

### LOT 5

ORX 153 P 2673



TTED

120.00'(P)

6' WIDE FENCE

6' CLEARANCE

P.R.M. FND. C.M. (4" x 4")

0.3' FENCE CLEAR

10.00'

15.00'

COV'D SCREEN ROOM

12.00'

39.32'

29.50'

30.40'

Lot 6

2.40'  
5.30'

11.80'

FENCE

N.28°12'00"W. 100.30'(P)  
BEARIN BASE WEST P/W  
SEWALL'S POINT ROAD  
ALL OTHERS RELATIVE THERE TO

SOUTH SEWALL'S POINT ROAD

FND. C.M. (4" x 4")

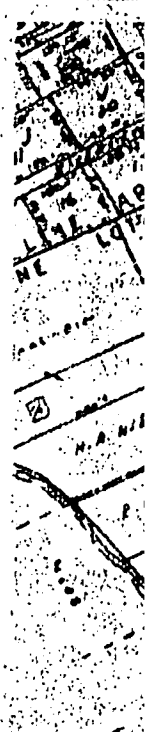
CONC. DRIVE

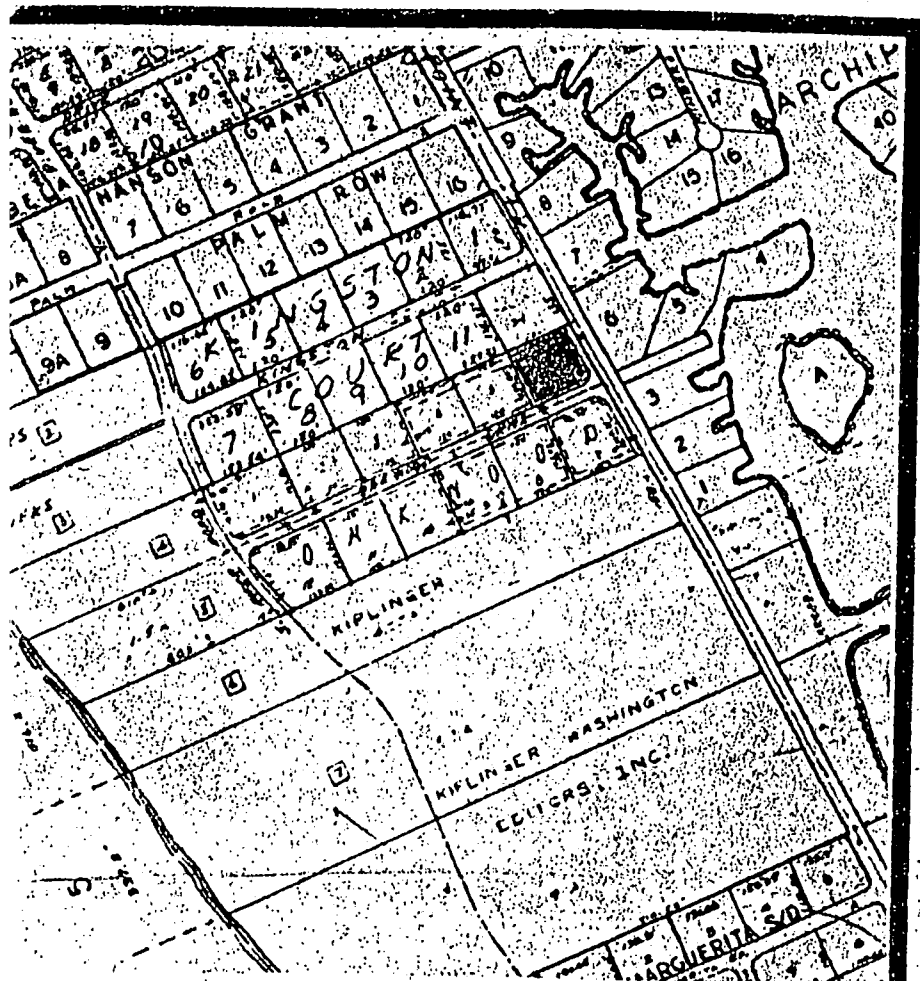
$\Delta = 94^{\circ}12'00''$   
 $R = 25.00'(P)$

02/21/83 102574

KNO  
AS F  
PUB  
FLO

Toc





LOCATION MAP

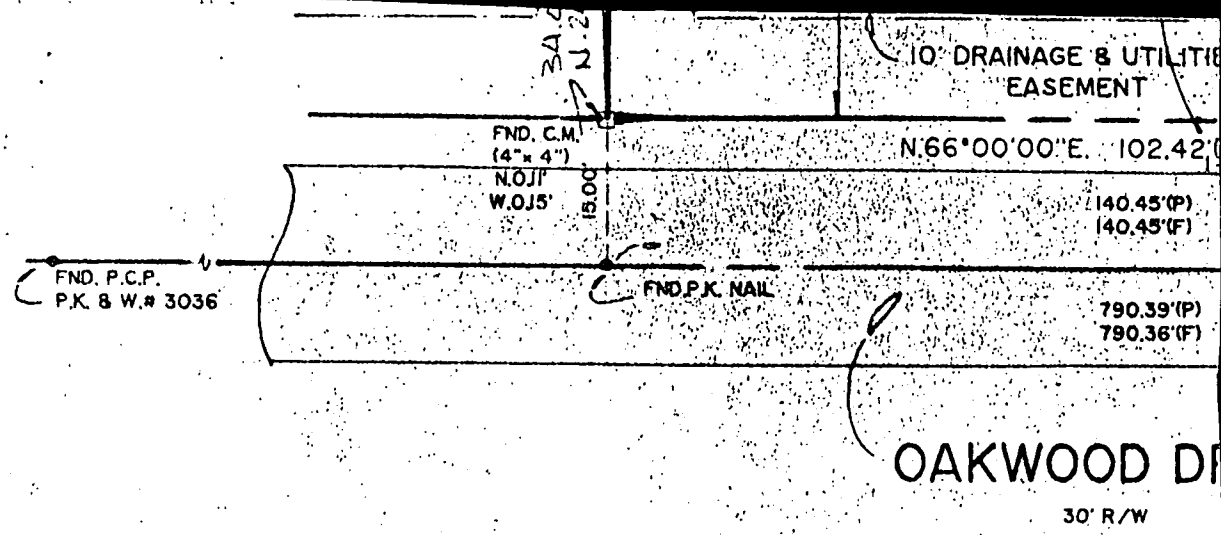
LEGAL DESCRIPTION  
 "LOT 6, OAKWOOD SUBDIVISION",  
 RECORDED IN PLAT BOOK 8, PAGE 53,  
 PUBLIC RECORDS OF MARTIN COUNTY,  
 FLORIDA.

OR BK 1153 PB 2675

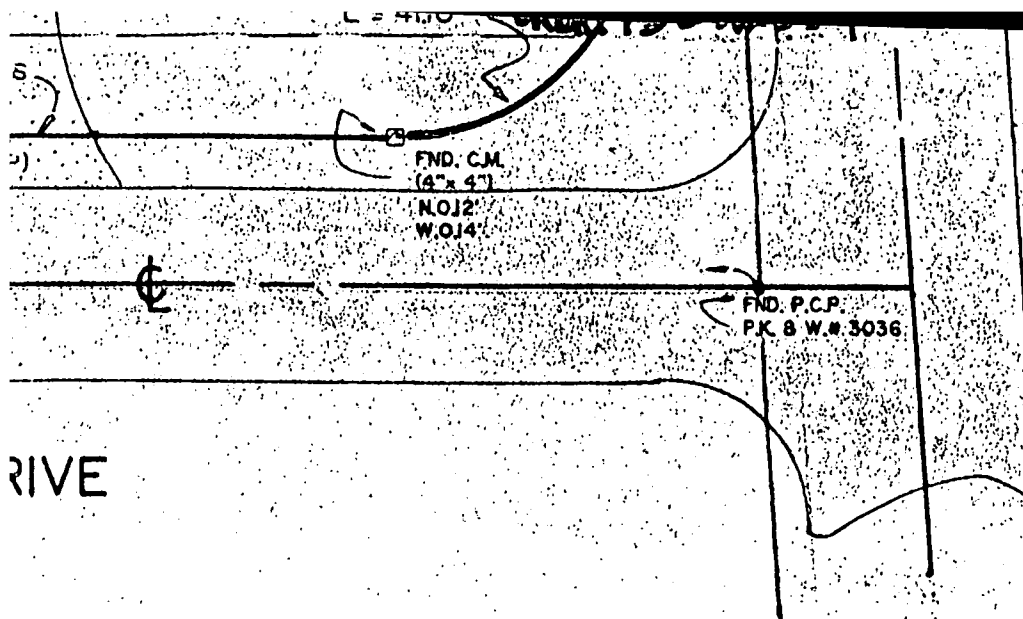
TOGETHER WITH THE FOLLOWING:

REVISIONS	BY
UPDATE SURVEY 6/13/95	BLC
7/21/95 NEW PL	SJB

F. GIACINTO  
 IDPLANNERS • CONSULTANTS  
 (407) - 287 - 0525



1. PROPERTY LOCATED WITHIN FLOOD ZONE "A8"
2. PROPERTY ADDRESS: 2 OAKWOOD DRIVE
3. CERTIFIED TO: JAMES F. GIACINTO, FOSTER & FOSTER, P.A., ATTORNEY'S TITLE INSURANCE FUND, INC., DUVALL SAVINGS & LOAN ASSOC. OF JACKSONVILLE



KNOWN AS A PORTION  
 IN PLAT BOOK 8, 1  
 FLORIDA, AND BEING  
 BEGINNING AT THE S  
 OF-WAY OF OAKWOOD  
 THROUGH LOT 6 A DI  
 23° 55' 24" WEST CONT  
 TO A POINT; THENCE  
 A DISTANCE OF 33.33  
 SOUTH 24° 00' 00" EA  
 LINE OF LOT 6 A  
 BEGINNING.  
 CONTAINING: 14 S/

RIVE

**NOTES:**

1. Survey of description as furnished by Client.
2. Lands shown hereon were not abstracted for easements and/or rights-of-way of record.
- (P) Denotes distance or bearing by description as furnished.
- (F) Denotes measured distance or bearing.
- (C) Denotes calculated distance or bearing.
3. All bearings are referenced to the instrument of record as shown hereon, unless otherwise noted.
4. Elevations shown hereon are relative to National Geodetic Vertical Datum of 1929, and are based on bench mark.
5. There are no above ground encroachments, unless otherwise shown.

**SURVEY**

**WE HEREBY CERTIFY**  
 HEREON IS TRUE AND COI  
 AND BELIEF AS SURVEYER  
 CERTIFY THAT IT MEETS  
 UNDER RULE 21 HH-6 FLA  
 CHAPTER 472.027 FLA  
**SEALED WITH AN EM**

**STEPHEN**

SET 1/8" SET 5/8 IRON BAR & CAP #4049

FND. - FOUND OBJECT	DRAINAGE FLOW
T.P. - IRON PIPE	H.H. - HAMMOLE
C.M. - CONCRETE MONUMENT	P.P. - POWER POLE
I.B. - IRON BAR	C.B. - CATCH BASIN
P.K. - P.K. NAIL	B.S. -
R.R.S. - RAILROAD SPIKE	X. - EXISTING ELEVATION
N. & W. NAIL & WASHER	
N. & W. NAIL & TIN TAB	

**Stephen J. Br**  
 REGISTRATION

OR PK1153 PG2677

OR BK 1153 Pg 2675

OF LOT 5, " OAKWOOD SUBDIVISION 6, 7, 8 RECORDED PAGE 53, PUBLIC RECORDS OF MARTIN COUNTY MORE PARTICULARLY DESCRIBED AS FOLLOWS:

NORTHEAST CORNER OF LOT 5 AND THE NORTH RIGHT-DRIVE. THENCE NORTH 24° 19' 22" WEST PASSING A DISTANCE OF 34.07 FEET TO A POINT; THENCE NORTH 23° 48' 16" WEST CONTINUING THROUGH LOT 5 A DISTANCE OF 59.48 FEET TO THE NORTHEAST CORNER OF LOT 5; THENCE ALONG THE EAST LINE OF LOT 5 AND THE WEST DISTANCE OF 126.86 FEET TO THE POINT OF

+/-

LAND SURVEYOR'S CERTIFICATE

THAT THE BOUNDARY SURVEY AS SHOWN ON THIS MAP IS CORRECT TO THE BEST OF OUR KNOWLEDGE AND BELIEF UNDER OUR DIRECTION WE FURTHER CERTIFY THAT THE MINIMUM TECHNICAL STANDARDS OF THE ADMINISTRATIVE CODE PURSUANT TO THE STATUTES, NOT VALID, UNLESS APPROVED BY THE BOSSSED SURVEYOR'S SEAL

STEPHEN J. BROWN INC.

PROFESSIONAL LAND SURVEYOR No. 4049, STATE OF FLORIDA

OR BK 1153 Pg 2678

TITLE SURV

PREPARED FOR: JAMES

STEPHEN J. BROWN IN SURVEYORS · DESIGNERS · LAND

295 FLORIDA STREET, STUART, FLORIDA, 33497

DRAWN W.G.H.
CHECKED S.J.B.
DATE 8/16/1989
SCALE 1" = 20' 00"
JOB NO. 1430-01-01
SHEET
OF ONE SHEETS

PLAS

PREPARED BY AND RETURN TO:  
Laine E. Mathis  
FOSTER & FOSTER, P.A.  
1897 Palm Beach Lakes Blvd.  
Suite 219  
West Palm Beach, FL 33409  
R-988-T

RECORD VERIFIED

FLA. DOC. PAID  
\$ 8910  
Lisha Still  
Clerk of Circuit Court  
Martin Co., Fla.  
By [Signature] D.C.

786707

Parcel ID Number: 13 38 41 009 000 00060  
Grantor #1 TIN: 062-44-9526

[Space Above This Line For Recording Data]

### Warranty Deed

This Indenture, Made this 31st day of August, 1989 A.D., Between

of the County of Martin, State of Florida, grantor, and  
JAMES F. GIACINTO,

whose address is: 2 Oakwood Drive, Stuart, Florida 34996

of the County of Martin, State of Florida, grantee.

Witnesseth that the GRANTOR, for and in consideration of the sum of  
TEN & NO/100 (\$10.00) DOLLARS,  
and other good and valuable consideration to GRANTOR in hand paid by GRANTEE. The receipt whereof is hereby acknowledged, has  
granted, bargained and sold to the said GRANTEE and GRANTEE'S heirs and assigns forever, the following described land, situate,  
lying and being in the county of MARTIN, State of Florida to wit:

Lot 6, OAKWOOD SUBDIVISION, Town of Sewall's Point, according  
to the Plat thereof as recorded in Plat Book 8, Page 53, public  
records of Martin County, Florida.

Subject to restrictions, reservations and encumbrances of record,  
if any, and taxes subsequent to 1988.

FOR RECORD  
MARTIN COUNTY FLA.  
89 SEP -5 AM 9:10  
MARSH STILLER  
CLERK OF CIRCUIT COURT  
D.C.

and the grantor does hereby fully warrant the title to said land, and will defend the same against lawful claims of all persons whomsoever.  
In Witness Whereof, the grantor has hereunto set his hand and seal the day and year first above written.  
Signed, sealed and delivered in our presence:

[Signatures of witnesses: Laine E. Mathis, Hillego V. Deau]

[Signature of Edward K. Bania]  
Edward K. Bania, a single man (Seal)  
\_\_\_\_\_  
(Seal)  
\_\_\_\_\_  
(Seal)  
\_\_\_\_\_  
(Seal)

STATE OF Florida  
COUNTY OF Martin

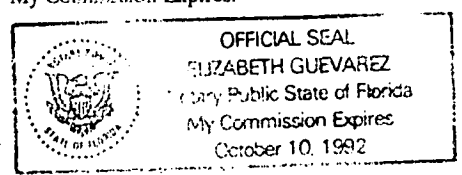
I HEREBY CERTIFY that on this day, before me, an officer duly qualified to take acknowledgements, personally appeared  
Edward K. Bania, a single man,

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

WITNESS my hand and official seal in the County and State last aforesaid this 31st day of August, 1989.  
This Document Prepared By: and return to:

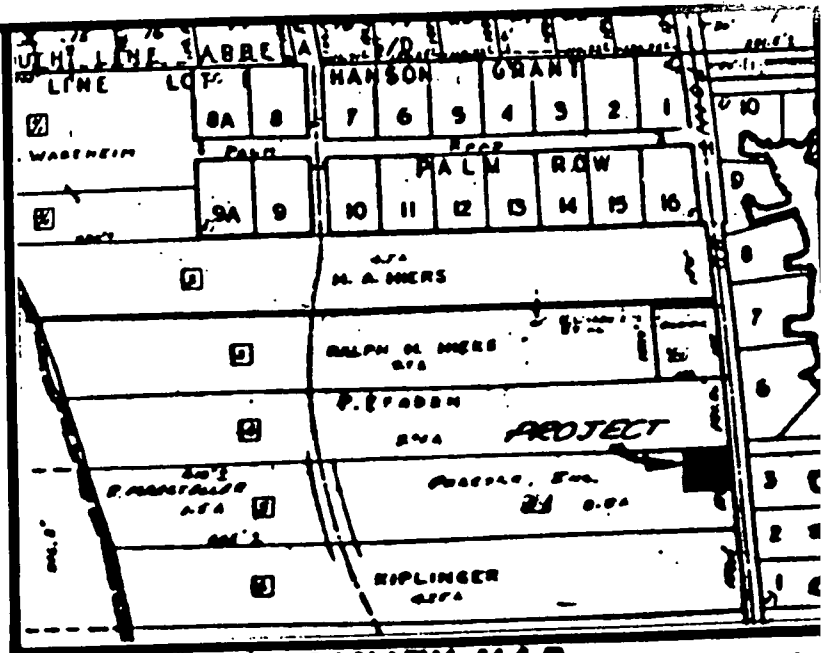
JOHN FENN FOSTER, ESQ.  
1897 Palm Beach Lks Blvd Suite 219  
West Palm Beach, FL 33409  
R-988-T

[Signature of Elizabeth Guevarez]  
NOTARY PUBLIC, STATE OF Florida  
My Commission Expires:

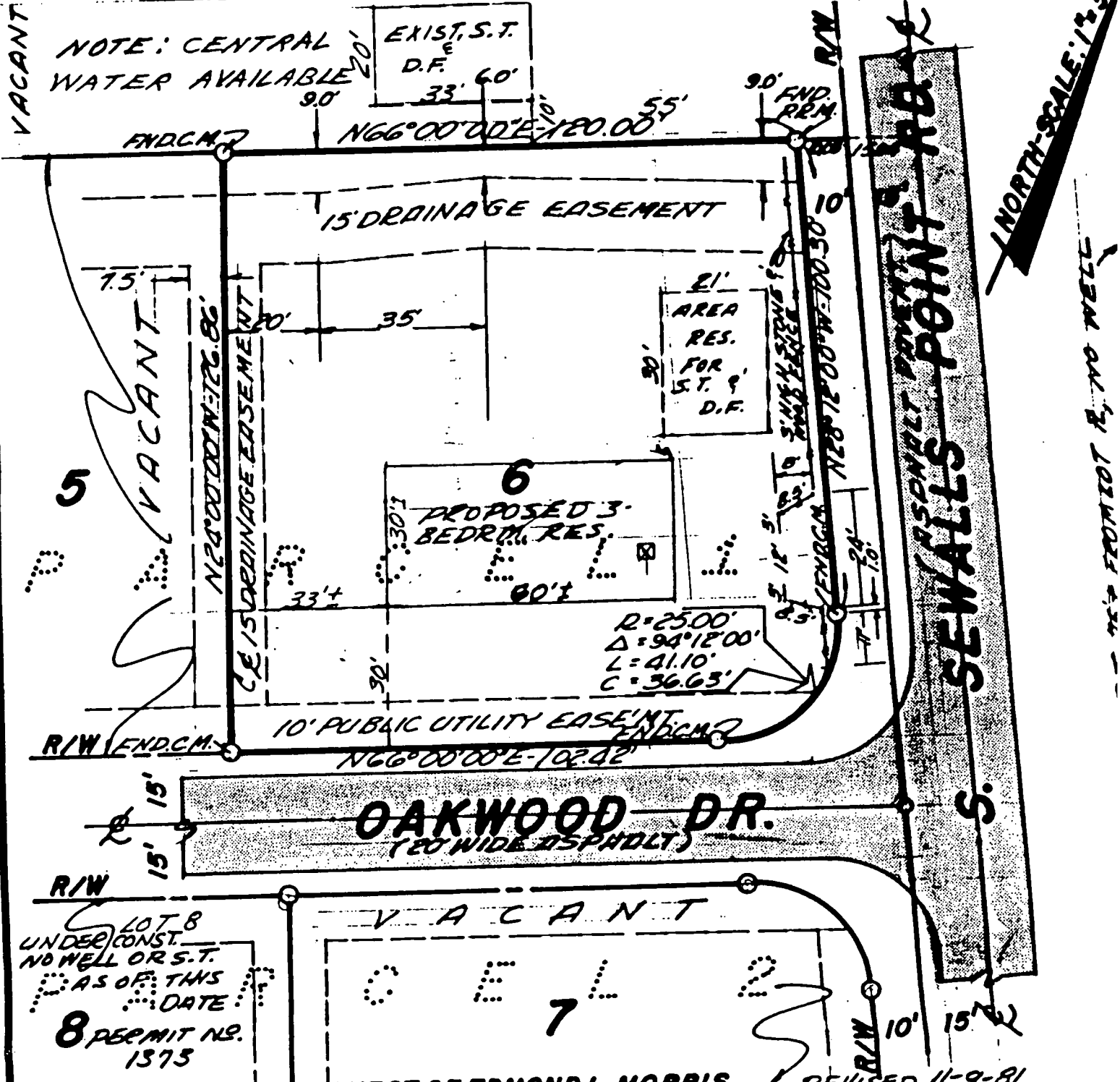


BOOK 826 PAGE 1861

SECTION 1 OF OAKWOOD SUB-DIVISION AS RECORDED IN PLAT BOOK 8, PAGE 53, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.  
 SUBJECT TO ANY EASEMENTS, RIGHTS OF WAY OR OTHER RESTRICTIONS OF RECORD.  
 NOTE: A SEARCH OF THE PUBLIC RECORDS HAS NOT BEEN MADE BY THIS OFFICE.



VICINITY MAP



PREPARED AT THE REQUEST OF EDMOND L. MORRIS REVISED 11-9-81

I HEREBY CERTIFY that the plat shown hereon is a true and correct representation of a survey made under my direction and that said survey is accurate to the best of my knowledge and belief and that, unless otherwise shown, there are no encroachments. NOT VALID unless sealed with an EMBOSSED SEAL.

*[Signature]*  
 PROFESSIONAL LAND SURVEYOR  
 FLORIDA CERTIFICATE NO. 3199

DATE: 5-12-81 DRAWN BY: P.D.E.  
 SCALE: 1"=30' ORDER NO. 81-9



THE BETHAM GROUP, INC.  
 LAND SURVEYING  
 P. O. BOX 2264  
 STUART, FLA. 33494  
 PH. 334-1442 465-2583

PLAT BOOK: 8 PG. 53 FIELD BK. No. 18

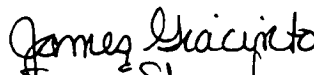


**FORM LETTER OF NO OBJECTION**

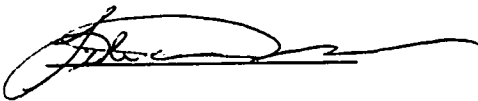
The Town of Sewall's Point  
One South Sewall's Point Road  
Stuart, Florida 34996

RE: Application for Administrative Variance Pursuant to Appendix B - Zoning, Section VIII.F, Town of Sewall's Point Code of Ordinances Filed by \_\_\_\_\_

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed by  ~~Susan Shaughnessy~~, the Town of Sewall's Point. I am an adjacent property owner to the property which is the subject of the Administrative Variance and I have no objection to the Town of Sewall's Point granting the Administrative Variance.

Sincerely yours,



# TOWN of SEWALL'S POINT

COMMISSIONERS:  
B.J. ESCUE, MAYOR  
DAVID L. MILLARD, VICE MAYOR  
ERIC B. HOLLY, COMMISSIONER  
JOAN PERRY WILCOX, COMMISSIONER  
VINCENT A. VORRASO, COMMISSIONER



TELEPHONE: (407) 287-2455  
FAX: (407) 220-4765

TOWN CLERK  
JOAN H. BARROW

CHIEF OF POLICE  
LOUIS J. SAVINI

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

January 19, 1996

Mr. James F. Giacinto  
2 Oakwood Drive  
Sewall's Point, Florida 34996

Re: Variance request for Lot 6, Oakwood

Dear Mr. Giacinto:

Enclosed is a recorded copy of the administrative variance for the above-referenced property as well as the Town's check in the amount of \$213.50.

Please do not hesitate to contact me if you have any questions.

Sincerely,

TOWN OF SEWALL'S POINT

Joan Barrow, Town Clerk

STATEMENT REGARDING ADMINISTRATIVE VARIANCE  
LOT 6, OAKWOOD

Received check from J. F. Giacinto	+ \$500.00
Filing fee	- 250.00
Recording fee	- 46.50
	-----
Balance returned to J. F. Giacinto	\$203.50

#33

MAIL  
JAN 17 1966

ACCOUNT NUMBER #3218  
ACCOUNT NAME Adm. Var.  
PURCHASE ORDER #:

DATE:  
APPROVAL:

FOR: refund re: adm. var.  
#500.00 - 250.00 fee - 46.50  
recording = \$203.50

ACCOUNT: \$203.50

\_\_\_\_\_  
\_\_\_\_\_

PAID TO: J. F. Giacinto

DATE: 1-10-96

TOWN OF SEWELL'S POINT  
FLORIDA  
REQUEST FOR CHECK

**4416**

**WOODEN PORCH DECK**

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

### TOWN OF SEWALL'S POINT

Date 6-24-98

BUILDING PERMIT NO. 4416

Building to be erected for J. Mackay Type of Permit \_\_\_\_\_

Applied for by Southern Shore (Contractor) Building Fee \_\_\_\_\_

Subdivision Oakwood Lot 6 Block — Radon Fee \_\_\_\_\_

Address 2 Oakwood Drive Impact Fee \_\_\_\_\_

Type of structure wood porch deck A/C Fee \_\_\_\_\_

Electrical Fee \_\_\_\_\_

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

1338410090000006050000 Roofing Fee ~~100<sup>XX</sup>~~

Amount Paid \_\_\_\_\_ Check # \_\_\_\_\_ Cash \_\_\_\_\_ Other Fees ( 100<sup>XX</sup> )

Total Construction Cost \$ 2,000<sup>XX</sup> TOTAL Fees \_\_\_\_\_

Signed [Signature] Signed [Signature]

Applicant

Town Building Inspector

# ACCESSORY BUILDING NON-HABITABLE STRUCTURE PERMIT

SETBACKS		DATE _____		INSPECTIONS		DATE _____	
				FOUNDATION FINAL		DATE <u>7-31-98</u>	
<b>24 HOURS NOTICE REQUIRED FOR INSPECTIONS.</b>				<b>CALL 287-2455</b>			
<b>WORK HOURS - 8:00 AM UNTIL 5:00 PM</b>							
<b>MONDAY THROUGH SATURDAY</b>							

New Construction     Remodel     Addition     Demolition

**This permit must be visible from the street, accessible to the inspector.  
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,  
NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.  
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!**

# Town of Sewall's Point

#4416

PLN \_\_\_\_\_

Date May 27, 1998

## BUILDING PERMIT APPLICATION

to construct:

NEW CONSTRUCTION    ADDITION    ALTERATION    DEMOLITION

RESIDENTIAL    COMMERCIAL   \_\_\_\_\_ SF   \_\_\_\_\_ CF

OTHER: \_\_\_\_\_ CONTRACT PRICE \$ 7,000.00

Owner's Name Jay MacKay

Owner's Address 2 Oakwood Drive Sewall's Point Florida

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

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

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contractor's Name Southern Shore Construction, Corp.

Contractor's Address 132 N. E. Dixie Highway

City Stuart State FL Zip 34994

Job Name The MacKay Residence

Job Address 2 Oakwood Drive Sewall's Point Florida

City Sewall's Point State FL Zip \_\_\_\_\_

Legal Description Lot 6, "Oakwood Subdivision" Plat Bk 8, pg 53 M.C.

Bonding Company N/A

Bonding Company Address N/A

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

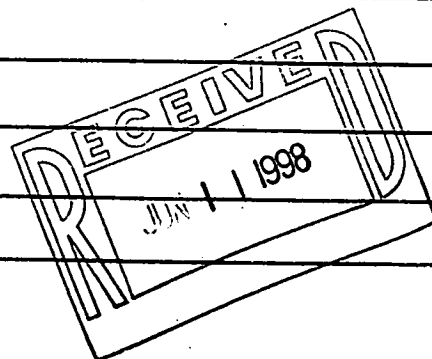
Architect/Engineer's Name N/A

Architect/Engineer's Address N/A

Mortgage Lender's Name N/A

Mortgage Lender's Address N/A

*Approved as noted  
BSB Bot BU000084E*



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.

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.

X Darlen Mackay May 27, 1998  
Owner or Agent Date

Stephen M. Blanton May 27, 1998  
Contractor Date

COUNTY OF MARTIN  
STATE OF FLORIDA

Sworn to and subscribed before me this 11 day of June, 1998 by Stephen Blanton who: [] is/are personally known to me, or [] has/have produced \_\_\_\_\_ as identification, and who did not take an oath.

Name: Deborah A. Ford

Typed, printed or stamped

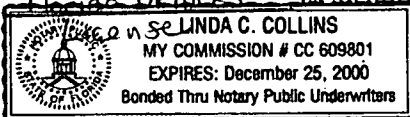


Deborah A. Ford  
MY COMMISSION # CC503261 EXPIRES  
October 18, 1999  
BONDED THRU TROY FAIR INSURANCE, INC.

I am a Notary Public of the State of Florida having a commission number of CC503261 and my commission expires: October 18, 1999

STATE OF FLORIDA  
COUNTY OF MARTIN

Sworn to and subscribed before me this 11 day of June, 1998 by DARLEN Mackay who: [] is/are personally known to me, or [] has/have produced Florida DRIVERS as identification, and who did not take an oath.



Name: Linda C. Collins

Typed, printed or stamped

(NOTARY SEAL)

I am a Notary Public of the State of Florida having a commission number of CC 609801 and my commission expires: 12/25/00

Certificate of Competency Holder

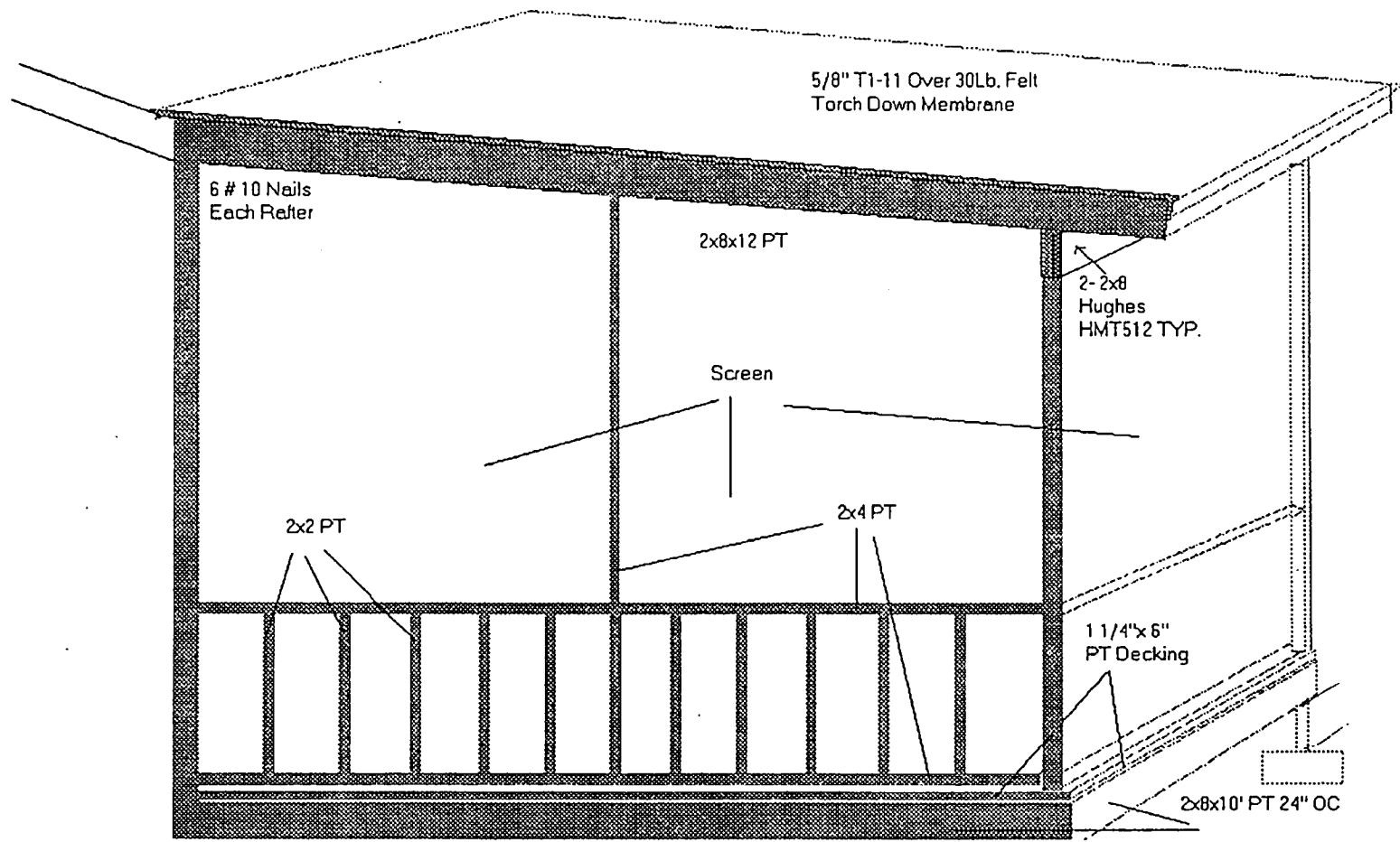
Contractor's State Certification or Registration No. CRC 027-177

Contractor's Certificate of Competency No. \_\_\_\_\_

APPLICATION APPROVED BY \_\_\_\_\_ Permit Officer

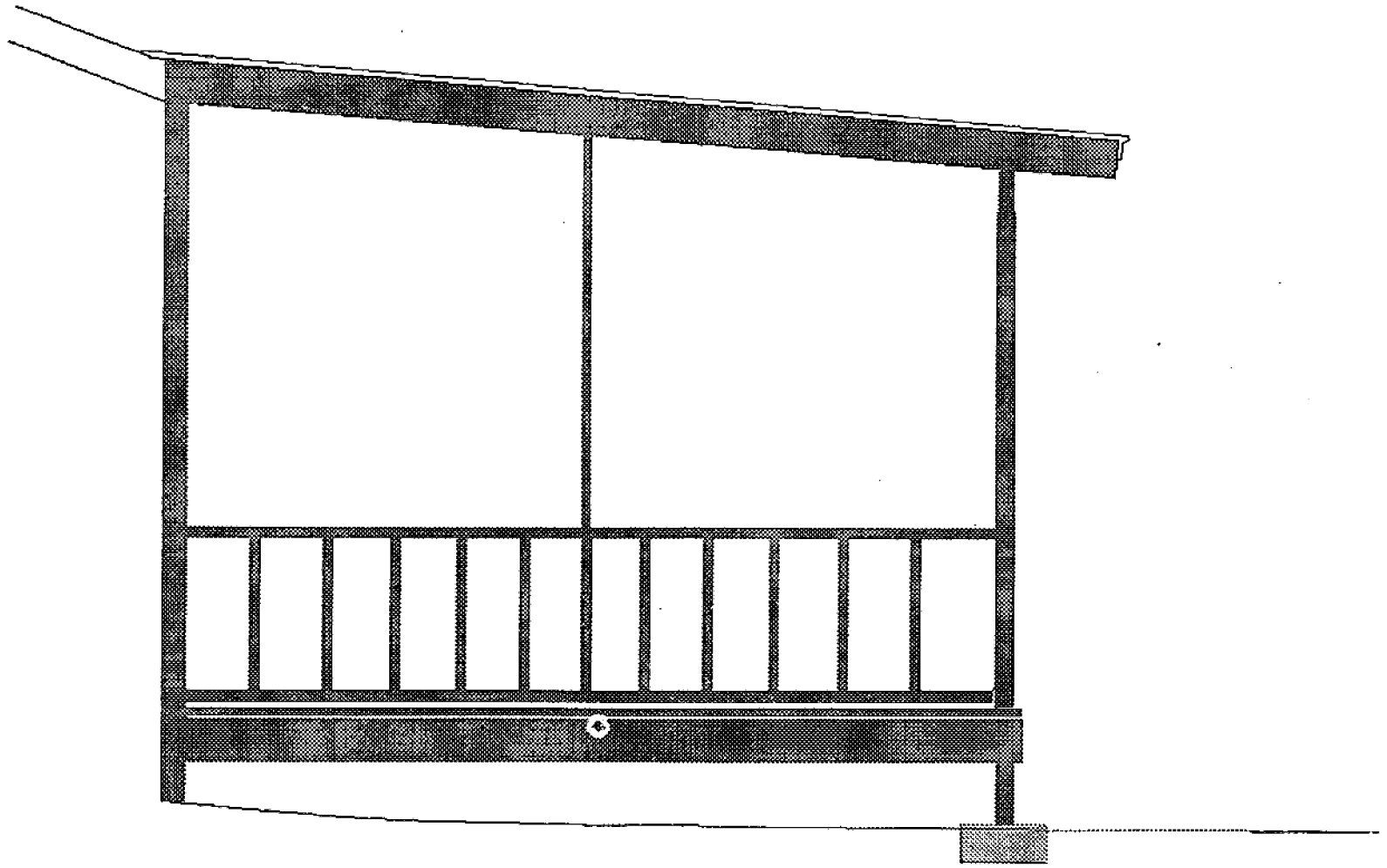
\_\_\_\_\_ Building Commissioner





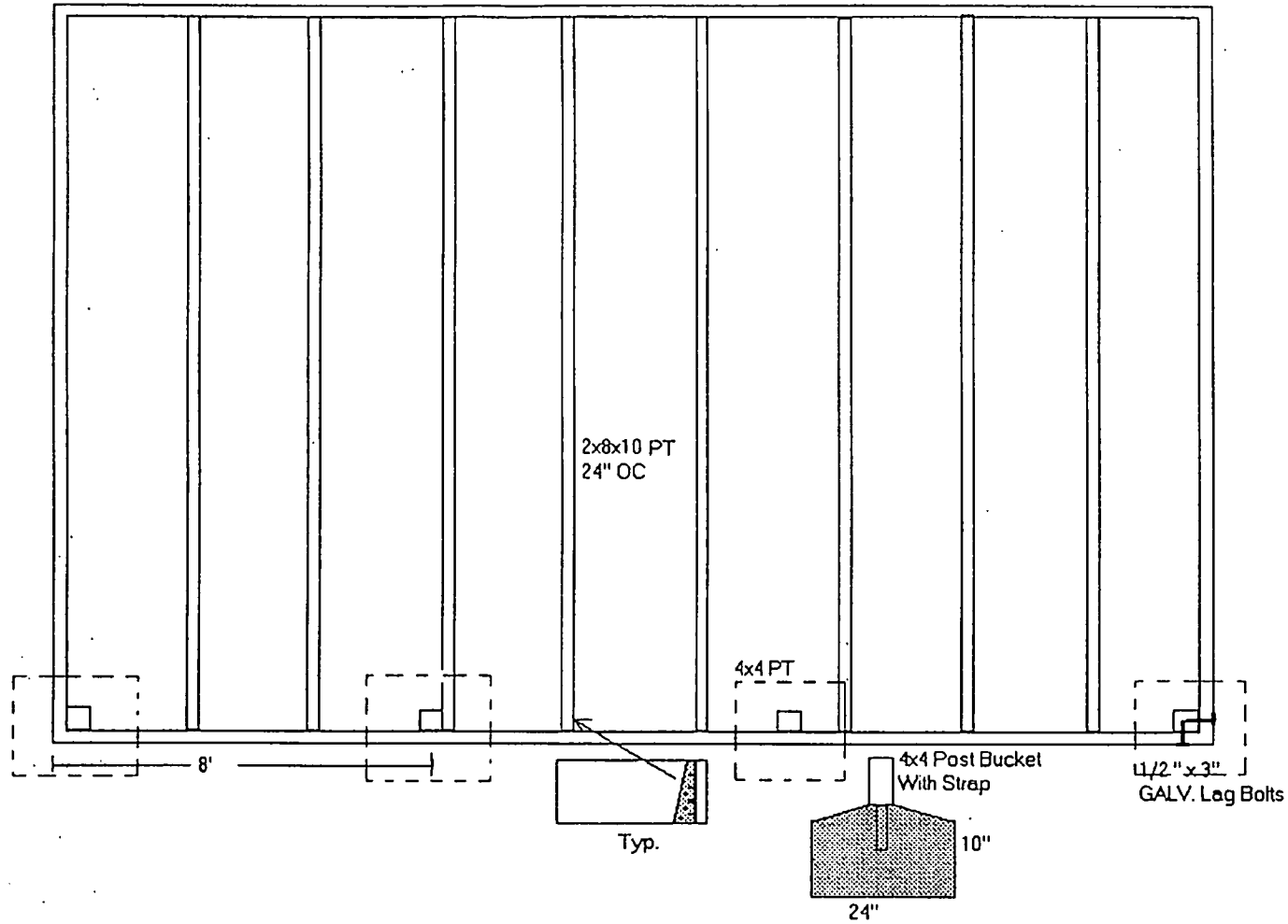
*T. Stiles Peet*

**T. STILES PEET, P.E.**  
 1046 SE ST. LUCIE BLVD  
 STUART, FL 34996  
 VOICE 360223-9883 ■ FAX 360223-9542



T. Shilpa

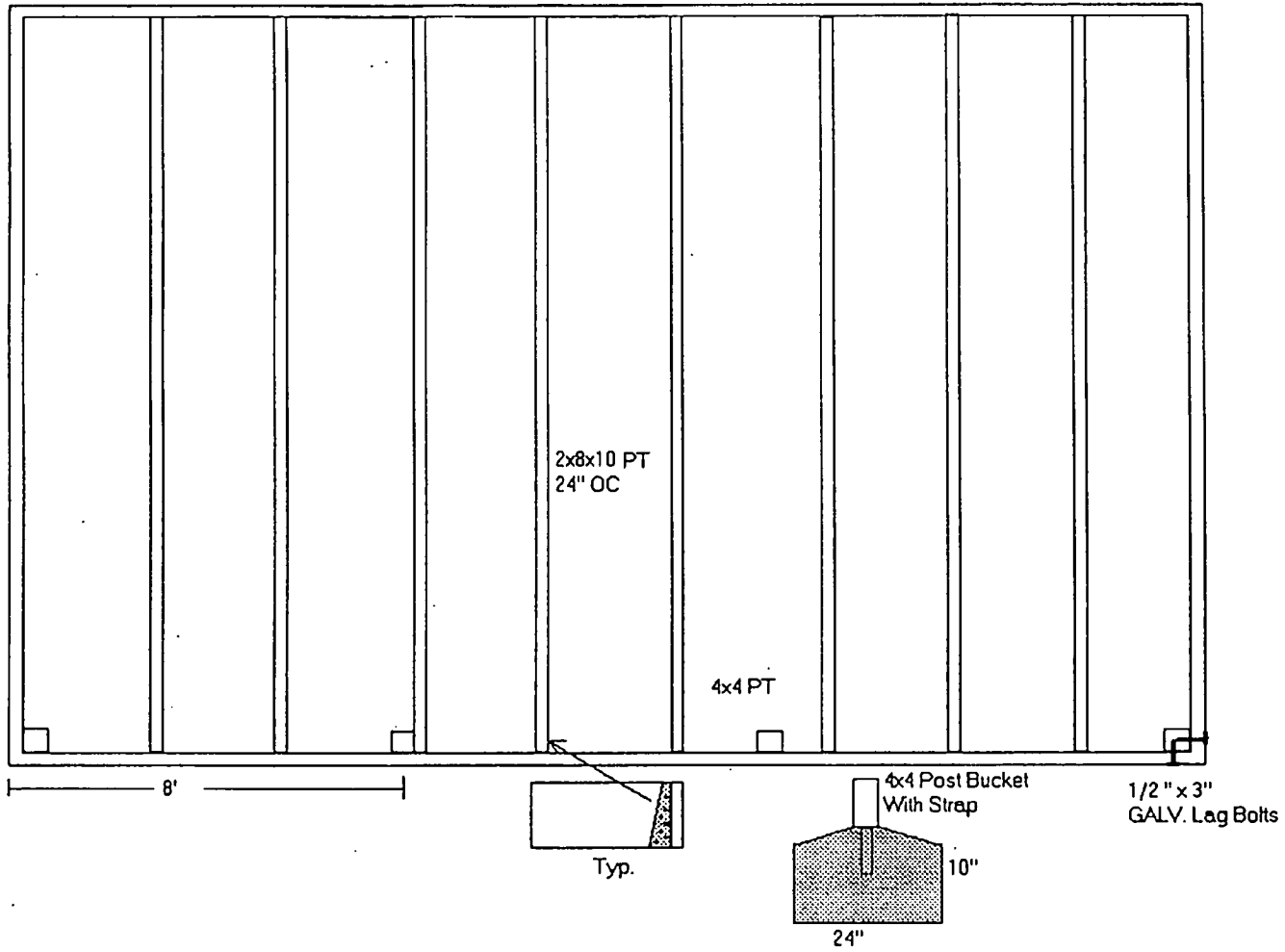
Floor System Lay-Out



Per Footing  
24" x 24" x 10"  
w/ 2 #5 bars @ way  
Grade 40 steel  
Bob Both BU00004E

T. Stiles Post

Floor System Lay-Out



*T. Sturp*

# THA ADJUSTABLE TRUSS HANGERS

The THAC422 concealed strap hanger is designed for single and double 4x2 floor trusses.

The THA series' extra long straps allow full code nailing and can be field-formed to give top flange hanger convenience. The THA uses double shear nailing for added strength and safety.

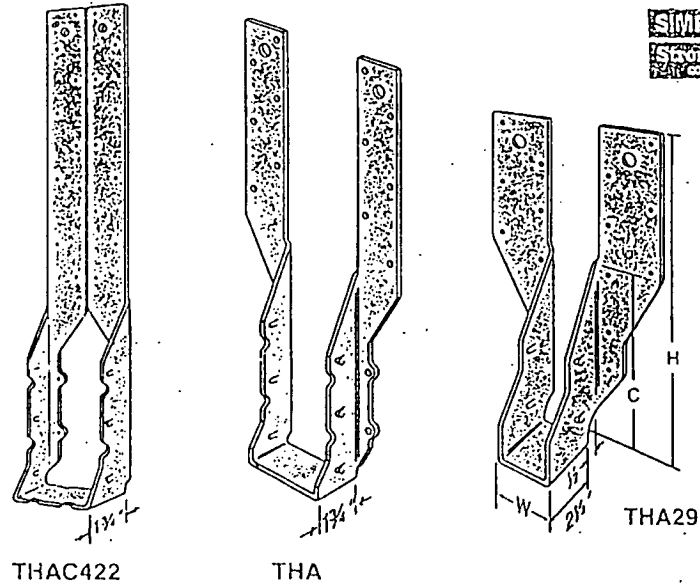
MATERIAL: See table

FINISH: Galvanized

INSTALLATION: • Use all specified fasteners. See General Notes.

- Two different installation methods may be used:
- Maximum nailing—All face nails must be applied according to the table. The nails used for the joist attachment must be driven at an angle so that the nails penetrate through the corner of the joist into the header.
- Minimum nailing—For the THA29, the minimum nailing schedule requires the use of joist double shear nailing as detailed above, and that the strap be field-formed over the header a minimum of 2½". A minimum of four top and four face nails must be used.
- For all models except the THA29, the minimum nailing schedule may be followed where double shear nailing is not possible, provided the strap is field-formed over the top of the header a minimum of 1½" for the THA213 and THA413, and 2½" for all others, and a minimum of four top and two face nails are used. The joist double shear nailing tabs are easily straightened so that the nails can be driven straight into the joist.

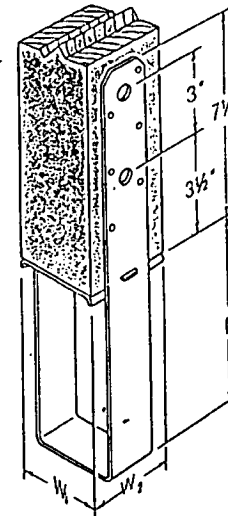
CODES: BOCA, ICBO, SBCCI NER-209; City of L.A. RR 24949; Dade County, FL 93-0928.8.



Typical THA Installation with a 4x2 floor truss

Model No.	Minimum Joist Size	Ga	Dimensions			Fasteners <sup>1</sup>				Down Avg UII	Allowable Loads <sup>1</sup>		
			W	H <sup>2</sup>	C	Header		Joist			Uplift <sup>1</sup> (133 & 160)	Floor (100)	Roof (125)
						Top	Face	Straight	Slant				
MINIMUM NAILING—TOP FLANGE													
THA29	2x6	18	1½	7½	5½	4-10d	4-10d	—	4-10d	8167	750	2460	2550
THA213	2x6	18	1½	11½	5½	4-10d	2-10d	4-10dx1½	—	5343	—	1615	1615
THA218	2x6	18	1½	14½	5½	4-10d	2-10d	4-10dx1½	—	5343	—	1615	1615
THA218-2	(2) 2x10	16	3½	15½	8	4-16d	2-16d	6-16dx2½	—	5085	—	1635	1635
THA222-2	(2) 2x10	16	3½	19½	8	4-16d	2-16d	6-16dx2½	—	5085	—	1635	1635
THA413	4x6	18	3½	11½	4½	4-10d	2-10d	4-10d	—	5343	—	1615	1615
THA418	4x10	16	3½	15	7½	4-16d	2-16d	6-16d	—	5085	—	1635	1635
THA422	4x10	16	3½	19½	7½	4-16d	2-16d	6-16d	—	5085	—	1635	1635
THAC422	4x2 truss	16	3½	19½	8	4-16d	2-16d	6-16d	—	6853	—	1635	1635
THA422-2	(2) 4x2 truss	14	7½	20½	9½	4-16d	4-16d	6-16d	—	7502	—	2450	2450
THAC422-2	(2) 4x2 truss	14	7½	20½	9½	4-16d	4-16d	6-16d	—	7502	—	2450	2450
MAXIMUM NAILING—ALL NAIL HOLES FILLED													

Model No.	Nominal Post Size	Material		Dimensions			Post Fasteners			Uplift average UII	Allowable Loads			
		Strap	Base (Ga)	W <sub>1</sub>	W <sub>2</sub>	D	Nails	Bolts			Nails		Bolts	
								Qty	Dia		(133)	(160)	(133)	(160)
LCB44	4x4	12 ga x2	16	3 <sup>3</sup> / <sub>16</sub>	3 <sup>1</sup> / <sub>2</sub>	6 <sup>1</sup> / <sub>2</sub>	12-16d	2	1/2	17853	2255	2705	3545	4250
CB44	4x4	7 ga x2	7	3 <sup>3</sup> / <sub>16</sub>	3 <sup>3</sup> / <sub>16</sub>	8	—	2	3/8	14350	—	—	4200	4200
LCB46	4x6	12 ga x2	16	3 <sup>3</sup> / <sub>16</sub>	5 <sup>1</sup> / <sub>2</sub>	6 <sup>1</sup> / <sub>2</sub>	12-16d	2	1/2	17853	2255	2705	3530	4240
CB46	4x6	7 ga x2	7	3 <sup>3</sup> / <sub>16</sub>	5 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	14350	—	—	4200	4200
CB48	4x8	7 ga x2	7	3 <sup>3</sup> / <sub>16</sub>	7 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	14350	—	—	4200	4200
CB5	GLULAM	7 ga x3	7	5 <sup>1</sup> / <sub>2</sub>	SPEC	8	—	2	3/8	14350	—	—	4200	4200
LCB66	6x6	12 ga x2	16	5 <sup>1</sup> / <sub>2</sub>	5 <sup>1</sup> / <sub>2</sub>	5 <sup>1</sup> / <sub>2</sub>	12-16d	2	1/2	17853	2255	2705	3525	4230
CB66	6x6	7 ga x3	7	5 <sup>1</sup> / <sub>2</sub>	5 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	14350	—	—	4200	4200
CB6-7	6x	7 ga x3	7	5 <sup>1</sup> / <sub>2</sub>	7	8	—	2	3/8	14350	—	—	4200	4200
CB7 <sup>1</sup> / <sub>2</sub> -4	PSL	3 ga x3	7	7 <sup>1</sup> / <sub>8</sub>	3 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650
CB7 <sup>1</sup> / <sub>2</sub> -6	PSL	3 ga x3	7	7 <sup>1</sup> / <sub>8</sub>	5 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650
CB7 <sup>1</sup> / <sub>2</sub> -7	PSL	3 ga x3	7	7 <sup>1</sup> / <sub>8</sub>	7	8	—	2	3/8	20650	—	—	6650	6650
CB68	6x8	7 ga x3	7	5 <sup>1</sup> / <sub>2</sub>	7 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	14350	—	—	4200	4200
CB86	6x8	3 ga x3	7	7 <sup>1</sup> / <sub>2</sub>	5 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650
CB7	GLULAM	3 ga x3	7	6 <sup>1</sup> / <sub>8</sub>	SPEC	8	—	2	3/8	20650	—	—	6650	6650
CB88	8x8	3 ga x3	7	7 <sup>1</sup> / <sub>2</sub>	7 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650
CB9	GLULAM	3 ga x3	7	8 <sup>1</sup> / <sub>8</sub>	SPEC	8	—	2	3/8	20650	—	—	6650	6650
CB1010	10x10	3 ga x3	3	9 <sup>1</sup> / <sub>2</sub>	9 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650
CB1012	10x12	3 ga x3	3	9 <sup>1</sup> / <sub>2</sub>	11 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650
CB1212	12x12	3 ga x3	3	11 <sup>1</sup> / <sub>2</sub>	11 <sup>1</sup> / <sub>2</sub>	8	—	2	3/8	20650	—	—	6650	6650



LCB

1. Uplift loads have been increased 33% and 60% for earthquake or wind loading, with no further increase allowed.
2. PSL is parallel strand lumber.

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

**TOWN OF SEWALL'S POINT**

Date 6-24-98

**BUILDING PERMIT NO. 4416**

Building to be erected for J. Mackay Type of Permit \_\_\_\_\_

Applied for by Southern Shore (Contractor) Building Fee \_\_\_\_\_

Subdivision Oakwood Lot 6 Block — Radon Fee \_\_\_\_\_

Address 2 Oakwood Drive Impact Fee \_\_\_\_\_

Type of structure wood porch deck A/C Fee \_\_\_\_\_

Electrical Fee \_\_\_\_\_

Parcel Control Number:

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

1338410090000006050000

Roofing Fee ~~100<sup>XX</sup>~~

Amount Paid \_\_\_\_\_ Check # 691 Cash \_\_\_\_\_ Other Fees ( 100<sup>XX</sup> )

Total Construction Cost \$ 7,000<sup>XX</sup>

TOTAL Fees \_\_\_\_\_

Signed Billy Lewis

Signed [Signature]

Applicant

Town Building Inspector

**7343**

**FENCE**



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

### TOWN OF SEWALL'S POINT

Date 2/25/05

BUILDING PERMIT NO. 7343

Building to be erected for MACKAY

Type of Permit FENCE

Applied for by LAWRENCE FENCE (Contractor)

Building Fee 30.00

Subdivision OAKWOOD Lot 6 & P15 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 2 OAKWOOD DRIVE

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Parcel Control Number:

1338410090000006050000

Electrical Fee \_\_\_\_\_

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

Amount Paid 30.00 Check # 22491 Cash \_\_\_\_\_

Other Fees ( \_\_\_\_\_ ) \_\_\_\_\_

Roofing Fee \_\_\_\_\_

Total Construction Cost \$ 3330.

TOTAL Fees 30.00

Signed Margaret Kelly  
Applicant

Signed Gene Simmons (RB)  
Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

FEB 16 2005

BY:

Town of Sewall's Point
BUILDING PERMIT APPLICATION

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

Date: \_\_\_\_\_

OWNER/TITLEHOLDER NAME: Darlene Mackay Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_

Job Site Address: 2 SE Oakwood Drive City: Sewall's Point State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Oakwood Lot 6 & A Strip of Lots Parcel Number: 13-38-41-009-000-00060-5

Owner Address (if different): \_\_\_\_\_ City: 61st State: \_\_\_\_\_ Zip: \_\_\_\_\_

Description of Work To Be Done: Remove & replace 130' Vert. shad. box wood fence

WILL OWNER BE THE CONTRACTOR?:

YES

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 3330.00

(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_

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

Method of Determining Fair Market Value: \_\_\_\_\_

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: Lawrence Fence Corp. Phone: 561-252-6774 Fax: 561-747-4416

Street: 211 Commerce Way, #4-8 City: Jupiter State: FL Zip: 33458

State Registration Number: U-17143 State Certification Number: \_\_\_\_\_ Martin County License Number: \_\_\_\_\_

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

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

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

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

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

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

Carpport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

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)

Darlene Mackay

State of Florida, County of: Palm Bch

This the 20 day of Jan, 2005

by Darlene Mackay who is personally

known to me or produced

as identification. Margaret Fillingier

Notary Public

Margaret Fillingier

Commission # DD257637

Expires Oct. 9, 2007

Bonded Thru

CONTRACTOR SIGNATURE (required)

Gloria Lawrence

On State of Florida, County of: Palm Bch.

This the 20 day of Jan, 2005

by Gloria Lawrence who is personally

known to me or produced

as identification. Margaret Fillingier

Notary Public

Margaret Fillingier

Commission # DD257637

Expires Oct. 9, 2007

Bonded Thru

My Commission Expires:

Seal



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

# ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID LE  
LAWRE-9

DATE (MM/DD/YYYY)

02/07/05

**PRODUCER**  
The Plastridge Agency-SO  
710 S. E. Ocean Blvd.  
Stuart FL 34994-2427  
Phone: 772-287-5532 Fax: 772-287-5572

**INSURED**  
Lawrence Fence Corporation  
211 Commerce Way #4-8  
Jupiter FL 33458

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

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: AmComp Preferred Ins. Co.	
INSURER B: Old Dominion Ins.	40231
INSURER C:	
INSURER D:	
INSURER E:	

## COVERAGES

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

INSR ADD'L LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
B	GENERAL LIABILITY	MPG67971	02/04/05	02/04/06	EACH OCCURRENCE	\$ 1000000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 500000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 10000
					PERSONAL & ADV INJURY	\$ 1000000
					GENERAL AGGREGATE	\$ 2000000
					PRODUCTS - COMP/OP AGG	\$ 1000000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
	<input type="checkbox"/> HIRED AUTOS					
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: EA ACC	\$
B	EXCESS/UMBRELLA LIABILITY	CUG67971	02/04/05	02/04/06	EACH OCCURRENCE	\$ 1000000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 1000000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$10000					\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCV7056648	03/01/05	03/01/06	WC STATU-TORY LIMITS	OTH-ER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 1000000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 1000000
	OTHER				E.L. DISEASE - POLICY LIMIT	\$ 1000000

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

Fencing Contractor/Installation and  
Erection/No Manufacturing Fax #772-220-4765

## CERTIFICATE HOLDER

TOWNSE1

Town of Sewall's Point  
Attn: Bldg Dept  
1 S Sewall's Point Road  
Sewall's Pt FL 34996

## CANCELLATION

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

AUTHORIZED REPRESENTATIVE



# ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)  
03/29/04

**PRODUCER**  
FRANK H. FURMAN, INC.  
FRANK H. FURMAN #A091425  
P. O. BOX 1927  
POMPAN0 BEACH, FL 33061

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**

**INSURED**  
LAWRENCE FENCE CORP  
211 COMMERCE WAY BAYS #4-8  
JUPITER FL 33458

COMPANY A TRANSPORTATION INS CO  
COMPANY B BRIDGEFIELD EMPLOYERS INS CO  
COMPANY C  
COMPANY D

**RECEIVED**  
BY: \_\_\_\_\_

**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	<b>GENERAL LIABILITY</b> <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> OWNER'S & CONTRACTOR'S PROT	B2049051490	2/04/04	2/04/05	GENERAL AGGREGATE \$2,000,000 PRODUCTS - COMP/OP AGG \$2,000,000 PERSONAL & ADV INJURY \$1,000,000 EACH OCCURRENCE \$1,000,000 FIRE DAMAGE (Any one fire) \$ 100,000 MED EXP (Any one person) \$ 10,000
	<b>AUTOMOBILE LIABILITY</b> <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 \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
A	<b>EXCESS LIABILITY</b> <input checked="" type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	2063996931	3/01/04	3/01/05	EACH OCCURRENCE \$1,000,000 AGGREGATE \$1,000,000
B	<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input type="checkbox"/> INCL <input type="checkbox"/> EXCL	83029897	3/01/04	3/01/05	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER EL EACH ACCIDENT \$1,000,000 EL DISEASE-POLICY LIMIT \$1,000,000 EL DISEASE-EA EMPLOYEE \$1,000,000
	<b>OTHER</b>				

**DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS**  
FAX: 561-220-4765; 561-747-4416

**CERTIFICATE HOLDER**  
TOWN OF SEWALL'S POINT  
ATTN: BUILDING DEPT,  
1 S. SEWALL'S POINT ROAD  
SEWALL'S POINT, FL 34996

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

Contractor's Licensing Division of the Martin County Building Department.



**MARTIN COUNTY, FLORIDA**  
**Construction Industry Licensing Board**  
**Certificate of Competency**

***FENCE ERECTION***

License Number SP02962 Expires: 30-SEP-05

LAWRENCE, GLORIA J  
LAWRENCE FENCE CORP  
211 COMMERCE WAY #4-8  
JUPITER, FL 33458

2000-23983

STATE OF FLORIDA  
PALM BEACH COUNTY  
OCCUPATIONAL LICENSE  
**EXPIRES: SEPTEMBER - 30 - 2005**

CW-008  
CLASSIFICATION

LAWRENCE FENCE CORP  
LAWRENCE GLORIA J

\*\* LOCATED AT

211 COMMERCE WAY #4-8  
JUPITER FL 33458

C/WIDE \$185.85

TOTAL \$185.85

Is hereby licensed at above address for the period beginning on the first day of October and ending on the thirtieth day of September to engage in the business, profession or occupation of:

FENCE ERECTION CONTRACTOR

U17143

**THIS IS NOT A BILL - DO NOT PAY**

PAID. PBC TAX COLLECTOR  
\$185.85 OCC 049 34719 08-26-2004

JOHN K. CLARK, CFC  
TAX COLLECTOR, PALM BEACH COUNTY

**THIS LICENSE VALID ONLY WHEN RECEIPTED BY  
TAX COLLECTOR**

# IMPORTANT!

## THIS IS YOUR CERTIFICATE OF COMPETENCY PALM BEACH COUNTY, FLORIDA

### PALM BEACH COUNTY CONTRACTORS CERTIFICATE OF COMPETENCY

EXPIRES SEPTEMBER 30, 20 05

AUDIT  
CONTROL  
NUMBER

A-0354529

CERTIFICATE NUMBER

U-17143

FEE : 180.00

CERTIFIED  
CONTRACTOR FENCE CONTRACTOR

ID #0028828  
09/12/03

JES

NAME: GLORIA J. LAWRENCE  
FIRM: LAWRENCE FENCE CORP

UNLIMITED  
211 COMMERCE WAY BAYS 4-8  
JUPITER, FL 33458

SIGNATURE: \_\_\_\_\_

ATTEST: *J.E. Stainfield*

CONSTRUCTION INDUSTRY LICENSING BOARD  
OF PALM BEACH COUNTY

1) PLEASE CHECK ALL INFORMATION TO  
INSURE THAT IT IS CORRECT

2) CERTIFICATE MUST BE SIGNED

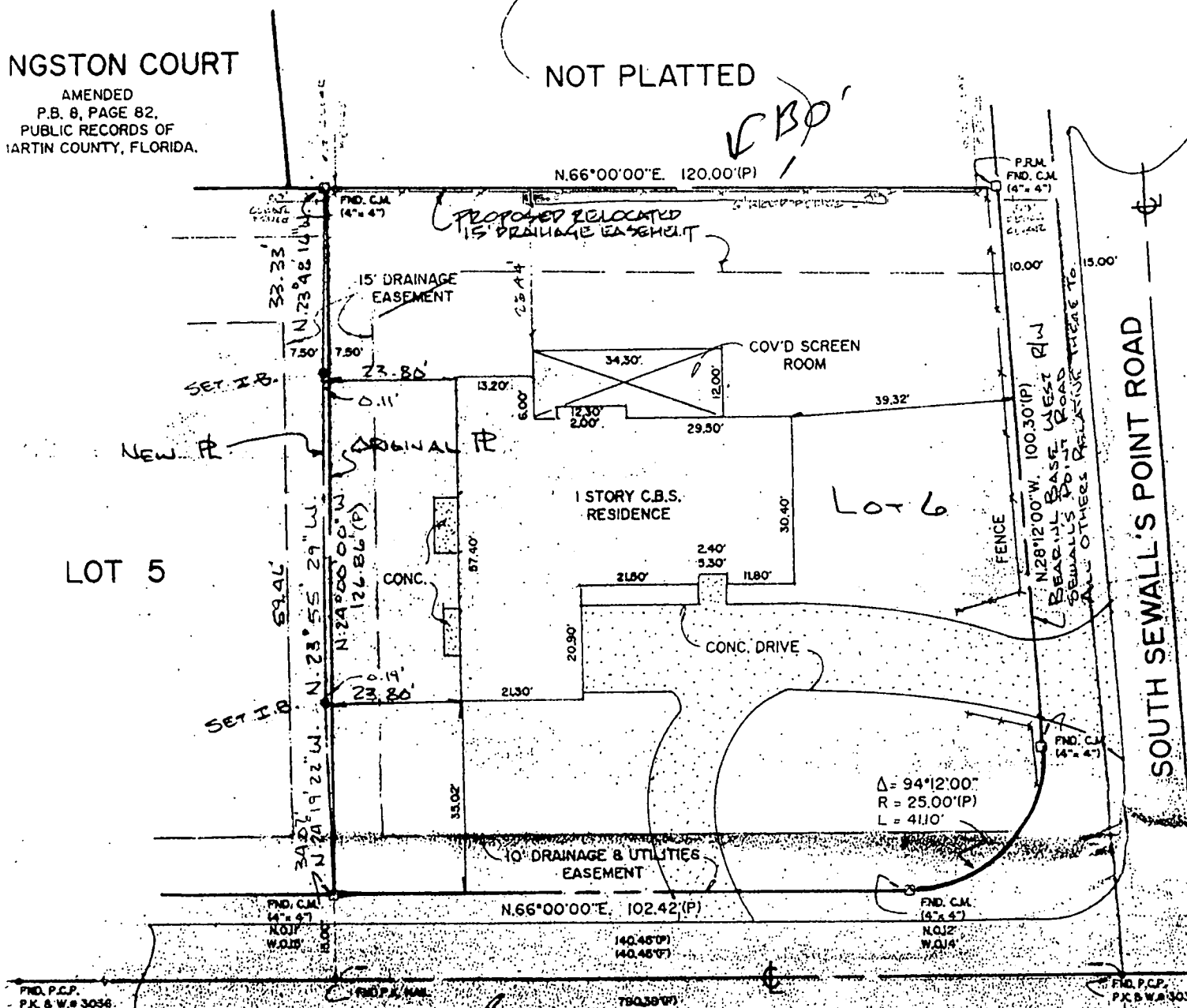
3) FOLD THE CARD WHERE INDICATED  
FOR EASE IN CARRYING

Remove existing & replace  
130' VS B Wood fence 6' ht.

NGSTON COURT

AMENDED  
P.B. 8, PAGE 82,  
PUBLIC RECORDS OF  
HARTIN COUNTY, FLORIDA.

NOT PLATTED



LOT 5

LOT 6

SOUTH SEWALL'S POINT ROAD

FILE COPY  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE  
DATE: 2/18/05  
BUILDING OFFICIAL  
Gene Simmons

OAKWOOD DRIVE  
30' R/W

REPAIR WORK FOR  
HURRICANE DAMAGE

1. PROPERTY LOCATED WITHIN FLOOD ZONE "A8"
2. PROPERTY ADDRESS: 2 OAKWOOD DRIVE
3. CERTIFIED TO: JAMES F. GIACINTO, FOSTER & FOSTER, P.A. ATTORNEY'S TITLE INSURANCE FUND, INC. DUVALL SAVINGS & LOAN ASSOC. OF JACKSONVILLE

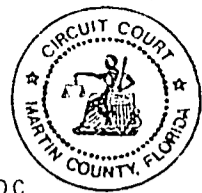
- NOTES:
1. Survey of description as furnished by Client
  2. Lands shown hereon were not abstracted for, and/or, rights-of-way of record.
  - (P) Denotes distance or bearing by description or (F) Denotes measured distance or bearing. (C) Denotes calculated distance or bearing.
  3. All bearings are referenced to the instrument or as shown hereon, unless otherwise noted.
  4. Elevations shown hereon are relative to Nation Vertical Datum of 1929, and are based on be
  5. There are no above ground encroachments, unless oth

SET 1, 8... SET 1/8 IRON BAR & CAP #8049  
FND. FOUND OBJECT  
I.P. IRON PIPE  
C.L. CONCRETE (CONCRETE)  
E.L. IRON BAR  
S.P. SAND PILE  
R.C. REINFORCED CONCRETE

DRAWN  
MAKING  
POWER  
DATE



THIS IS TO CERTIFY THAT THE  
FOREGOING 1 PAGES IS A TRUE  
AND CORRECT COPY OF THE ORIGINAL.  
MARSHA EWING, CLERK



BY: T Copus D.C.  
DATE: 2-25-05

State of Florida  
County of Martin

### NOTICE OF COMMENCEMENT

Tax Folio No. 13-38-41-009-000-00060-5 Permit No. \_\_\_\_\_

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:

1. Description of property: Address: 2 SE Oakwood Drive City: Sewall's Point  
Lot: 6 Block:      Subdivision: Oakwood  
and a strip of lot 5

2. General description of improvement: Install 130'-6' ht. Vertical Shadow Box Wood fence, Goodside In,

3. Owner Name: Joseph B. & Darlene M. Mackay  
information: Address: 2 SE Oakwood Drive City/State: Sewall's Point, FL Zip: 34996

4. Contractor LAWRENCE FENCE CORP.  
information: 211 Commerce Way, #4-8  
Jupiter, FL 33458

5. Surety: Nan 561-747-4228 Fax: 561-747-4416  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

6. Lender Name: \_\_\_\_\_  
information: Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

7. Persons within the State of Florida designated by Owner upon whom notices or other documents may be served as provided by Section 713.13 (1)(a)(7), Florida Statutes:

Name: \_\_\_\_\_  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

8. In addition to, the Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided by Section 713.13 (1)(B), Florida Statutes:

Name: Above Named Contractor  
Address: \_\_\_\_\_ City/State: \_\_\_\_\_ Zip: \_\_\_\_\_

9. Expiration date of Notice of Commencement (Expires one year from date recorded unless a different date is specified): \_\_\_\_\_

(X) Darlene Mackay  
Signature of Owner

Darlene Mackay  
Printed Name

\_\_\_\_\_ Title (if owner information in corporation's name)

State of Florida  
County of Palm Beach

Sworn to (or affirmed) and subscribed before me this  
20 day of Jan., 2005 by

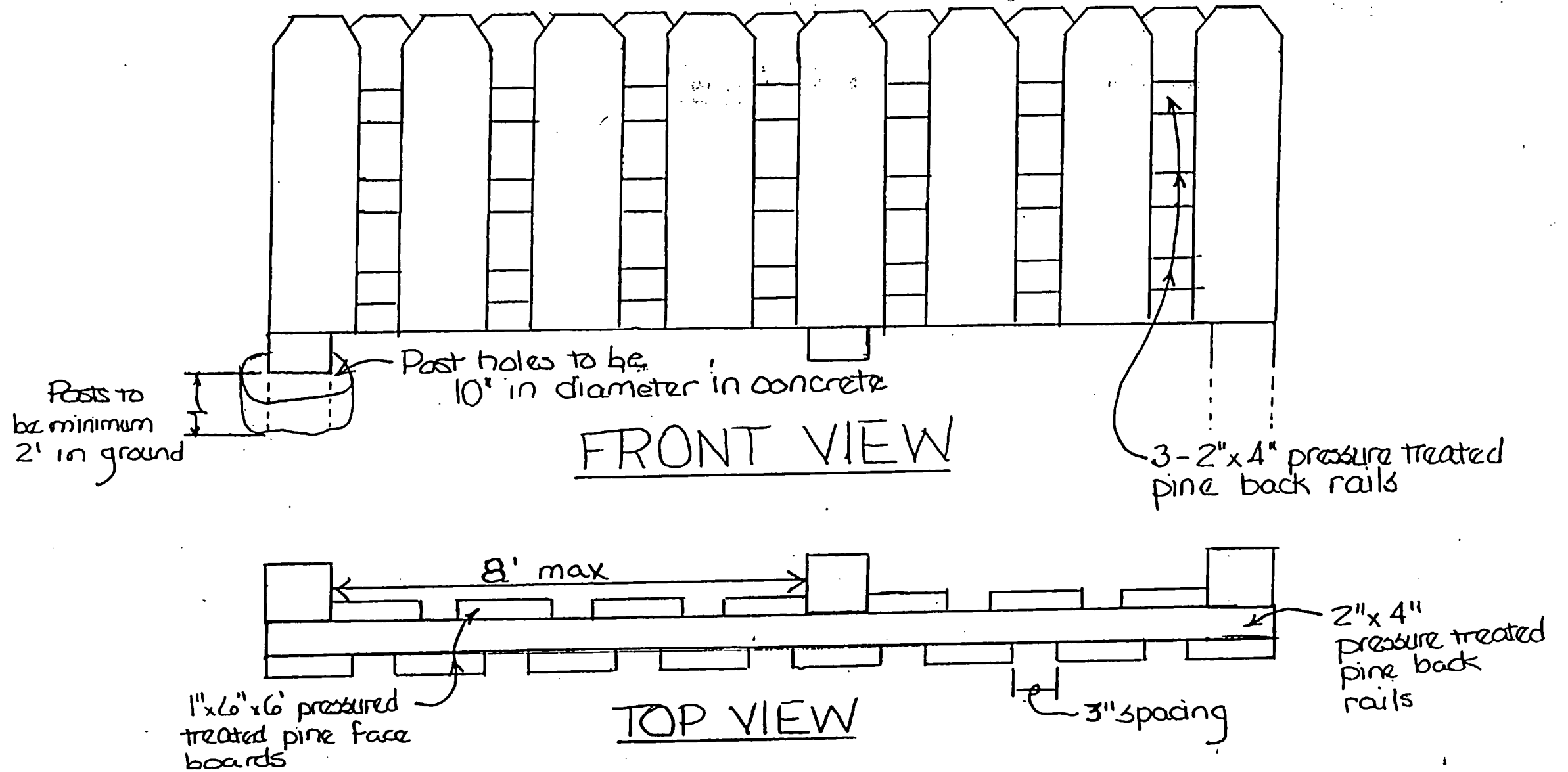
Darlene Mackay  
(Name of person acknowledging)

Personally known \_\_\_\_\_ OR Produced identification \_\_\_\_\_

Type of identification produced     

Margaret Fillinger  
Margaret Fillinger  
(Signature of person taking acknowledgment) # PD257537  
Expires Oct. 3, 2007  
Bonded Thru Atlantic Bonding Co., Inc. SEAL

# VERTICAL SHADOW BOX



LAWRENCE FENCE CORP.  
211 Commerce Way, #4-8  
Jupiter, FL 33458  
561-747-4228 Fax: 561-747-4416

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri MAR 9, 2005 Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7223	RAOS	STEEL-DRAIN	PASS	
9	16 CASTLE HILL WY	POOL		
	SCHUEER POOLS			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7371	O'CONNOR	DRY IN	PASS	
5	14 EMARITA WAY			
	TUTTLE ROOFING			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
<del>7373</del>	<del>INDACAY</del>	<del>FINAL FENCE</del>	<del>PASS</del>	<del>CLOSE</del>
2	2 OAKWOOD DR			
	LAWRENCE FENCE			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7365	SHORT	SPA ELEC	PASS	
12	10 N. RIVER RD			
	OLB			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6708	ANDERSON	PUMPING Peh	FAIL	
6	9 PALMETTO DR			
	PAUM BEACH CR			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7156	MORAN	RAH FRAMING	PASS	
8	32 N. SEWALL'S	RAH ELEC		
	MCCOMB			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7321	KIPLINGER	DRY-IN	---	WILL RESCHEDULE
1	143 S. RIVER RD			
	STUART ROOFING			INSPECTOR: <i>[Signature]</i>
OTHER:				
7325	25 FIELD WAY	FINAL GAS		<del>    </del>
	MARTIN COUNTY GAS			<i>[Signature]</i>

**7448**

**ROOF REPAIR**

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

### TOWN OF SEWALL'S POINT

Date 4/1/05

BUILDING PERMIT NO. 7448

Building to be erected for MACKAY

Type of Permit ROOF REPAIR

Applied for by STUART ROOF REPAIR (Contractor)

Building Fee \_\_\_\_\_

Subdivision OAKWOOD Lot 6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 2 OAKWOOD DRIVE

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Parcel Control Number:

Electrical Fee \_\_\_\_\_

1338410090000006050000

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

Roofing Fee 35.00

Amount Paid 35.00 Check # 9039 Cash \_\_\_\_\_

Other Fees (\_\_\_\_\_) 1

Total Construction Cost \$ 2420.00

TOTAL Fees 35.00

Signed \_\_\_\_\_

Applicant

Signed \_\_\_\_\_

Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

MAR 31 2005

BY:

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

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

Date: March 29 05

OWNER/TITLEHOLDER NAME: Mac Kay Phone (Day) 772 2206086 (Fax) \_\_\_\_\_

Job Site Address: 2<sup>nd</sup> Oakwood Dr City: Sewall Pt. State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block): Lot #6 Oakwood Sub Div Parcel Number: \_\_\_\_\_

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

Description of Work To Be Done: To repair damaged tile roof valley, gable, field

WILL OWNER BE THE CONTRACTOR?:

YES  NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ \_\_\_\_\_  
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ 2420.00

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: Smart Roof Repair Inc Phone: 772 2860444 Fax: 8890955

Street: P.O. Box 1269 City: Palmdale State: CA Zip: 91344

State Registration Number: \_\_\_\_\_ State Certification Number: MC 1326087 Martin County License Number: SP01174

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)  
Darlene Mackay

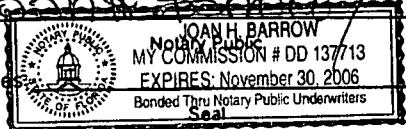
State of Florida, County of: Martin

This the 29 day of March, 2005

by Darlene Mackay who is personally known to me or produced \_\_\_\_\_

as identification \_\_\_\_\_

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



CONTRACTOR SIGNATURE (required)  
James Arnes

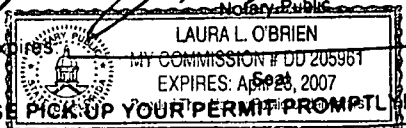
On State of Florida, County of Martin

This the 28 day of March, 2005

by James Arnes who is personally known to me or produced FLDL A620-440-49-161-0

As identification \_\_\_\_\_ X 5/1/05

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



ACORD

CERTIFICATE OF LIABILITY INSURANCE

OP ID BL STUR001

DATE (MM/DD/YYYY) 08/30/04

PRODUCER J.W. Edens & Company Commercial Ins of Brevard, Inc 5005 Wickham Road Melbourne FL 32940 Phone: 321-751-3737 Fax: 321-751-3738

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.

Table with 2 columns: INSURERS AFFORDING COVERAGE, NAIC #. Rows for INSURER A (Canal Indemnity Company), B, C, D, E.

INSURED Stuart Roof Repair, Inc. P.O. Box 1269 Port Salerno FL 34992

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.

Main table with columns: INSR ADD'L LTR INSRD, TYPE OF INSURANCE, POLICY NUMBER, POLICY EFFECTIVE DATE, POLICY EXPIRATION DATE, LIMITS. Rows include General Liability, Automobile Liability, Garage Liability, Excess/Umbrella Liability, Workers Compensation, etc.

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

CERTIFICATE HOLDER

SEWALLS

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

CANCELLATION

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

AUTHORIZED REPRESENTATIVE Theresa C. O'Brien



FLORIDA ROOFING, SHEET METAL &amp; AIR CONDITIONING CONTRACTORS ASSOCIATION, INC.

# SELF INSURERS FUND

P.O. BOX 4907 • WINTER PARK, FL 32793 • (407) 671-FRSA  
1-800-767-3772 • FAX (407) 671-2520

## CERTIFICATE OF INSURANCE

## ISSUED TO:

Town of Sewall Point  
1 S. Sewall Point Road  
Stuart FL 34996

ATTN: To whom it may concern

## COPY PROVIDED TO:

Stuart Roof Repair, Inc.  
PO Box 1269  
Port Salerno FL 34992-1269

Date: 03/31/2005

This is to certify that Stuart Roof Repair, Inc.  
PO Box 1269  
Port Salerno FL 34992-1269

being subject to the provisions of the Florida Workers' Compensation Act, has secured the payment of compensation by insuring their risk with the FLORIDA ROOFING, SHEET METAL & AIR CONDITIONING CONTRACTORS ASSOCIATION SELF INSURERS FUND.

COVERAGE NUMBER: : 870-019151**LIMITS**

Workers' Compensation Statutory - State of Florida

EFFECTIVE DATE: 01/01/2005

Employers' Liability

\$100,000 - Each Accident

EXPIRATION DATE: 01/01/2006

\$100,000 - Disease, Each Employee

\$500,000 - Disease, Policy Limit

**REMARKS:** Non-cancelable without 30 days prior written notice, except for non-payment of premium which will be a 10 day written notice.

This certificate is not a policy and of itself does not afford any insurance. Nothing contained in this certificate shall be constructed as extending coverage not afforded by the policy(ies) shown above or as affording insurance to any insured not named above. This provides coverage for Florida policyholders and Florida domicile employees only.

Brett Steigel, Administrator  
FRSA-SIF

By: Debbie Kemmerer - Underwriting Manager  
FRSA-SIF





STATE OF FLORIDA

AC# 1141224

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CCC1326087 09/03/04 040078876

CERTIFIED ROOFING CONTRACTOR  
ARES, JAMES  
STUART ROOF REPAIR INC

IS CERTIFIED under the provisions of Ch. 489 FS.  
Expiration date: AUG 31, 2006 L04090300103



STATE OF FLORIDA

AC# 1141224

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

QB3-110 09/03/04 040078870

QUALIFIED BUSINESS ORGANIZATION  
STUART ROOF REPAIR INC

(NOT A LICENSE TO PERFORM WORK.  
ALLOWS COMPANY TO DO BUSINESS IF  
IT HAS A LICENSED QUALIFIER.)

IS QUALIFIED under the provisions of Ch. 489 FS.  
Expiration date: AUG 31, 2005 L04090300157

2004-2005 MARTIN COUNTY ORIGINAL  
COUNTY OCCUPATIONAL LICENSE

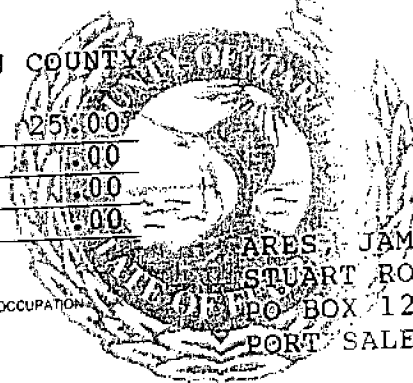
Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995  
(772) 288-5604

LICENSE # 989-520-087 CERT # CCC1326087  
PHONE (772) 286-0444 SIC NO 235110

LOCATION: 1690 SE COVE RD MAR

CHARACTER COUNTS IN MARTIN COUNTY

PREV. YR. \$	.00	LIC. FEE \$	25.00
\$	.00	PENALTY \$	15.00
\$	.00	COL. FEE \$	15.00
\$	.00	TRANSFER \$	25.00
TOTAL			



ARES, JAMES (QUALIFIER)  
STUART ROOF REPAIR INC  
PO BOX 1269  
POINT SALERNO FL 34992

RECEIPT OF PAYMENT  
6818  
LARRY C. O'STEEN  
99 09/13/2004 DCCI NORMAL  
19852668687868  
4:28:48 913877933X  
\$25.00

IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION  
OF ROOFING  
AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE

13 DAY OF SEPTEMBER 20 04  
AND ENDING SEPTEMBER 30 2005

2005 Martin occupational



MARTIN COUNTY, FLORIDA  
Construction Industry Licensing Board  
Certificate of Competency

ROOFING CONTRACTOR

License Number: SP01171 Expires: 30-SEP-2005

ARES, JAMES  
STUART ROOF REPAIR INC  
BOX 1269  
POINT SALERNO, FL 34997

STUART ROOF REPAIR INC  
BOX 1269  
POINT SALERNO, FL 34997

**8112**

**REROOF**

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

### TOWN OF SEWALL'S POINT

Date 3-16-06

BUILDING PERMIT NO. 8112

Building to be erected for MACKAY

Type of Permit REROOF

Applied for by SUPERIOR ROOFING (Contractor)

Building Fee \_\_\_\_\_

Subdivision Oakwood Lot P15&6 Block \_\_\_\_\_

Radon Fee \_\_\_\_\_

Address 2 OAKWOOD DRIVE

Impact Fee \_\_\_\_\_

Type of structure SFR

A/C Fee \_\_\_\_\_

Parcel Control Number:

1338410090000000050000

Electrical Fee \_\_\_\_\_

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

Roofing Fee 120.00

Amount Paid 120.00 Check # \_\_\_\_\_ Cash

Other Fees ( \_\_\_\_\_ ) 1

Total Construction Cost \$ 36,000.

TOTAL Fees 120.00

Signed Shannen Elgoyen

Applicant

Signed Gene Sumner

Town Building Official

## PERMIT

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

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

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

## INSPECTIONS

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

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

44585  
5/12

RECEIVED  
3/15/06

Town of Sewall's Point  
BUILDING PERMIT APPLICATION

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

Date: 3/10/06

OWNER/TITLEHOLDER NAME: Mackay Phone (Day) \_\_\_\_\_ (Fax) \_\_\_\_\_

Job Site Address: 2 Oakwood Dr. City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) \_\_\_\_\_ Parcel Number: \_\_\_\_\_

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

Description of Work To Be Done: Tearing off tile and replacing w/ Duro-lac

WILL OWNER BE THE CONTRACTOR?:

YES

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 36,000.00  
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ \_\_\_\_\_

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

Method of Determining Fair Market Value: \_\_\_\_\_

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: Superior Roofing System Phone: 772-460-9662 Fax: 772-460-6313

Street: 2651 Twin Oaks Trail City: Stuart State: FL Zip: 34945

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

SUBCONTRACTOR INFORMATION:

Electrical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Mechanical: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Plumbing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

Roofing: \_\_\_\_\_ State: \_\_\_\_\_ License Number: \_\_\_\_\_

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

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

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

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

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

Carport: \_\_\_\_\_ Total Under Roof \_\_\_\_\_ Wood Deck: \_\_\_\_\_ Accessory Building: \_\_\_\_\_

NOTICE: In addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies, or federal agencies.

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Gas): 2004  
National Electrical Code: 2002 Florida Energy Code: 2004 Florida Accessibility Code: 2004 Florida Fire Code 2004

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

OWNER OR AGENT SIGNATURE (required)

Charles Mackay

State of Florida, County of: Martin

This the 15th day of March, 2006

by Darlene E Mackay who is personally known to me or produced \_\_\_\_\_

as identification [Signature] x 8/10/05

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

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

CONTRACTOR SIGNATURE (required)

[Signature]

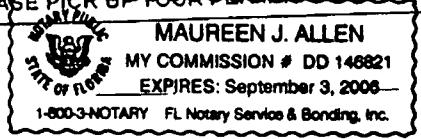
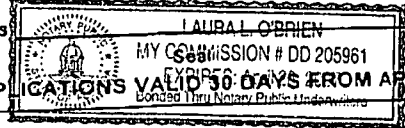
On State of Florida, County of: St. Lucie

This the 15 day of March, 2006

by Kevin McClard who is personally known to me or produced \_\_\_\_\_

As identification \_\_\_\_\_

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



# ACORD. CERTIFICATE OF LIABILITY INSURANCE

CSR WC  
SUPER-2

DATE (MM/DD/YYYY)  
08/05/05

**PRODUCER**  
  
**HARBOR INSURANCE AGENCY**  
 2222 Colonial Road, Suite 100  
 Port Pierce FL 34950-5309  
 Phone: 772-461-6040 Fax: 772-460-2315

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**  
  
 Superior Roofing Systems, Inc.  
 2651 Twin Oaks Trail  
 Ft Pierce FL 34945

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: North Pointe Insurance	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

**COVERAGES**

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

INSR ADD'L LTR	INSRE	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A		GENERAL LIABILITY	2094099584	06/01/05	06/01/06	EACH OCCURRENCE	\$ 1,000,000
		<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				DAMAGE TO RENTED PREMISES (Ea occurrence)	\$ 100,000
		<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR				MED EXP (Any one person)	\$ 5,000
						PERSONAL & ADV INJURY	\$ 1,000,000
						GENERAL AGGREGATE	\$ 2,000,000
						PRODUCTS - COMP/OP AGG	\$ 1,000,000
						GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	
		AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident)	\$
		<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person)	\$
		<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident)	\$
		<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident)	\$
		<input type="checkbox"/> HIRED AUTOS					
		<input type="checkbox"/> NON-OWNED AUTOS					
		GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT	\$
		<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC	\$
						AUTO ONLY: AGG	\$
		EXCESS/UMBRELLA LIABILITY				EACH OCCURRENCE	\$
		<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$
							\$
							\$
							\$
							\$
		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS	OTH-ER
		ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$
		If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$
		OTHER				E.L. DISEASE - POLICY LIMIT	\$

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

**CERTIFICATE HOLDER**  
  
 SEWAL-1  
  
 Town of Sewalls Point  
 1 South Sewalls Point Road  
 Stuart FL 34996

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

# ACORD.. CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)  
01/01/2006

**PRODUCER**  
Insurance Company of the Americas  
1310 Utica Street  
P.O. Box 855  
Oriskany, New York 13424  
Tel: (315) 768-2726 Fax: (315) 736-8731

**INSURED**  
Employee Leasing Solutions, Inc.  
  
1401 Manatee Ave W. Suite 600  
Bradenton, FL 34205

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

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Insurance Company of the Americas	33030
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

## COVERAGES

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

INSR LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		<b>GENERAL LIABILITY</b> <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR  GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (Ea occurrence) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
		<b>AUTOMOBILE LIABILITY</b> <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) \$
		<b>GARAGE LIABILITY</b> <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		<b>EXCESS/UMBRELLA LIABILITY</b> <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE  <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A		<b>WORKERS COMPENSATION AND EMPLOYERS' LIABILITY</b> ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	WC69203010103	01/01/2006	01/01/2007	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
		<b>OTHER</b> Client ID: #4043064 Print Ref #: 23251:27522				

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS  
 COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF:

**Superior Roofing Systems Inc**  
 Qualifiers Name: Kevin McClelland

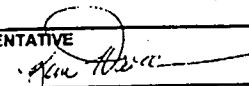
Aprox active employee count: 41

**CERTIFICATE HOLDER**

Town Of Sewells Point  
 1 South Sewells Point Road  
 Stuart, FL 34996

**CANCELLATION**

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

AUTHORIZED REPRESENTATIVE  


2005-2006

ST. LUCIE COUNTY OCCUPATIONAL LICENSE

ACCOUNT 1761-00970001

BOB DAVIS, CPA, CGFO, CFC, ST. LUCIE COUNTY TAX COLLECTOR

EXPIRES SEP 30, 2006

SEATS

EMPLOYEES 1-10

ILITIES  
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ROOMS

1761-ROOFING CONTRACTOR

2651 Twin Oaks Tr  
St Lucie County

X RENEWAL  
NEW LICENSE  
TRANSFER-  
ORIGINAL TAX

11.25

Kevin McClelland  
Superior Roofing Systems Inc  
McClelland, Kevin  
2651 Twin Oaks Tr  
Fort Pierce FL 34945

4902

AMOUNT  
PENALTY  
COLLECTION COST  
TOTAL

11.25

Please see back for additional information

PAID 08/23/2005

99-20050823-165961

11.25



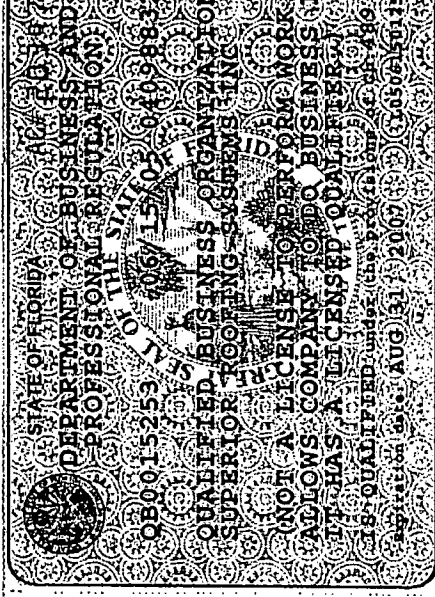
STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(850) 487-1395

SUPERIOR ROOFING SYSTEMS INC  
2651 TWIN OAKS TR  
FT PIERCE FL 34945



DETACH HERE

16-2034732

DATE	BATCH NUMBER	LICENSE NUMBER
06/15/2005	040988323	080015251

The BUSINESS ORGANIZATION Named below IS QUALIFIED Under the provisions of Chapter 489, F.S. Expiration date: AUG 31, 2007 (THIS IS NOT A LICENSE TO PERFORM WORK THIS ALLOWS COMPANY TO DO BUSINESS ONLY IN THE STATE OF FLORIDA)

SUPERIOR ROOFING SYSTEMS INC  
2651 TWIN OAKS TR  
FT PIERCE FL 34945

JERRY BUSH  
GOVERNOR

DIANE CARR  
SECRETARY

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

IN GOD WE TRUST

DISPLAY AS REQUIRED BY LAW



**NOTICE OF COMMENCEMENT**

A RECORDED COPY MUST BE POSTED ON THE JOB SITE AT TIME OF FIRST INSPECTION

INSTR # 1917227  
OR BK 02121 PG 0404  
Pg 0404 (1pg)  
RECORDED 03/13/2006 02:20:47 PM  
MARSHA EWING  
CLERK OF MARTIN COUNTY FLORIDA  
RECORDED BY T Copus (asst mgr)

PERMIT NO. \_\_\_\_\_ TAX FOLIO NO. 13-38-41-009

STATE OF FLORIDA:  
COUNTY OF MIAMI-DADE:

000-00060-5

THE UNDERSIGNED hereby gives notice that improvements 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.

1. Legal description of property and street/address: Carwood lot 6 & a strip of lot 5 all described in or 11491-788 - 2 Carwood Dr. Street FL 34996

2. Description of improvement: Roof

3. Owner(s) name and address: Darlene Mackay

Interest in property: \_\_\_\_\_  
Name and address of fee simple titleholder: \_\_\_\_\_

4. Contractor's name and address: Superior Roofing Systems Inc. 2651 Twin Oaks Trail FL 34952

5. Surety: (Payment bond required by owner from contractor, if any)  
Name and address: \_\_\_\_\_

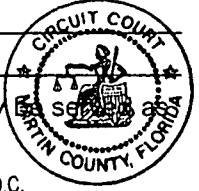
Amount of bond \$ \_\_\_\_\_

6. Lender's name and address: \_\_\_\_\_

7. Persons within the state of Florida designated by Owner upon whom notice is provided by Section 713.13(1)(a)7., Florida Statutes,

Name and address: \_\_\_\_\_

STATE OF FLORIDA  
MARTIN COUNTY  
THIS IS TO CERTIFY THAT THE FOREGOING \_\_\_\_\_ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL AS SUBSCRIBED BY \_\_\_\_\_ MARSHA EWING, CLERK  
BY: T Copus D.C.  
DATE: 3/13/06



8. In addition to himself, Owners designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes.

Name and address: \_\_\_\_\_

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

\* Darlene Mackay  
Signature of Owner

Print Owner's Name DARLENE MACKAY

Sworn to and subscribed before me this 30th day of January, 2006.

Notary Public Rosalind M. Green

Print Notary's Name Rosalind M. Green

My commission expires: July 25, 2007



Address: 3727 SE Ocean Blvd Ste 102 Stuart, FL 34996



**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)**

**Dura-Loc Roofing Systems Limited  
P.O box 220, R.R. #2  
Courtland, Ontario, Canada NOJ 1E0**

**SCOPE:**

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

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

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

**DESCRIPTION: Dura-Loc Continental Tile, Woodshake Tile and ShadowLine Tile**

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

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

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

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

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

This consists of pages 1 through 7.

The submitted documentation was reviewed by Frank Zuloaga, RRC.



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

DATE: 3/10/07

*ln*

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**BUILDING OFFICIAL  
Gene Simmons**

NOA No.: 02-0128.02  
Expiration Date: 05/23/07  
Approval Date: 05/23/02  
Page 1 of 7

## ROOFING ASSEMBLY APPROVAL

**Category:** Roofing  
**Sub-Category:** Panels  
**Type:** Non-Structural  
**Sub-Type:** Metal

**Maximum Design Pressure:** -63 psf.

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

<u>Product</u>	<u>Covered Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Dura-Loc Continental Tile, woodshake tile Shadowline Tile	Length: 47 1/4" Width: 15 13/16" Thickness 0.0217 galvanized	PA 110	SFQ AZ150 (AZ50) Grade 33 Acrylic Coated w/ color quartz stones
Trim pieces	Length: varies Width: varies	PA 110	SFQ AZ150 (AZ50) Grade 33 Acrylic Coated

### TRADE NAMES OF PRODUCTS MANUFACTURED OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Pop Rivets	#8	PA 114 Appendix E	Corrosion Resistant, standard steel pop rivets	Generic (With current NOA)
Tile Fixing Screws	1 1/2" #10 1/4" Hex Head	PA 114 Appendix E	Corrosion resistant, metal screws approved by manufacturer..	Generic (With current NOA)
Fire Barrier Board ("Dens Deck")	min. 1/4" thick	N/A	Fire barrier over-layment board for installation of metal panels. For Class 'A' fire rating.	Georgia-Pacific (with current NOA)
Sealant	N/A	N/A	Sealant for use at foam closure strip.	Dura-Loc (With current NOA)
Wood Battens	nominal 2" x 2"	N/A	Decay resistant lumber battens	Generic (With current NOA)



NOA No.: 02-0128.02  
 Expiration Date: 05/23/07  
 Approval Date: 05/23/02  
 Page 2 of 7

<b>System: A:</b>	Dura-Loc Continental Tile, Shadowline Tile and Shake Tile
<b>Deck Type:</b>	Wood, Non-insulated
<b>Deck Description:</b>	New Construction or $1\frac{19}{32}$ " or greater plywood or wood plank or Re-roof $1\frac{15}{32}$ " plywood.
<b>Maximum Uplift Pressure:</b>	The maximum allowable design pressure for the panel shall be -63 psf.
<b>Deck Attachment:</b>	In accordance with applicable building code, but in no case shall it be less using minimum #8 x $1\frac{3}{4}$ " wood screws or annular ring shank nails at a spacing of 6" o.c. at supports. In re-roofing, where the deck is less than $1\frac{19}{32}$ " thick (Minimum $1\frac{15}{32}$ "") The above attachment method must be in addition to existing attachment.
<b>Underlayment:</b>	Minimum underlayment shall be a double layer underlayment system comprised of a #15 felt (ASTM D 226, type 1) applied with a 50% overlap or application of a #30 felt (ASTM D 226, type II) or #43 coated base sheet (ASTM D 2626) installed with a minimum 6" side-laps and 2" headlaps. Underlayment shall be fastened with corrosion resistant tin-caps and $1\frac{1}{4}$ " annular ring-shank nails, spaced 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll.
<b>Fire Barrier Board:</b>	For class A or B fire rating, install minimum $\frac{1}{4}$ " thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4 mm thick of Tritex, RockRoof (with current NOA) or $\frac{1}{8}$ " water resistance type X gypsum sheathing with treated core and facer.
<b>Valleys:</b>	Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with the current published installation instructions and details in Dura-Loc Roofing System Limited installation instructions.
<b>Battens:</b>	Install nominal 2" x 2" battens decay resistant lumber over underlayment at a maximum spacing of 15- $\frac{13}{16}$ " using minimum of one #12-13 x $3\frac{1}{2}$ " pan screws spaced 24" o.c. and at $\frac{1}{2}$ " from each end.
<b>Metal Panels and Accessories:</b>	Install the "Dura-Loc Continental Tile, Woodshake Tile and Shadowline Tile" panels including flashing penetrations, valleys endlaps and accessories in compliance with "Dura-Loc Roofing Systems Limited current, published installation instructions and in compliance with the minimum requirements detailed in Roofing Application Standard RAS 133.
	Fasteners shall be a minimum of #10 $1\frac{1}{2}$ " long hex head metal/wood fasteners to be installed in the front downturn, at the low profile in each panel as per manufacturer instructions. This leads to 6 fasteners per panel width and 4 fasteners in the field of the panel.



NOA No.: 02-0128.02  
Expiration Date: 05/23/07  
Approval Date: 05/23/02

<b>SYSTEM A-2:</b>	Dura-Loc Continental Tile, WoodShake Tile and Shadowline Tile
<b>Deck Type:</b>	Wood, Non-insulated
<b>Deck Description:</b>	Recover over existing Asphalt Shingle Roof <sup>15</sup> / <sub>32</sub> " or greater plywood
<b>Maximum Uplift Pressure:</b>	The maximum allowable design pressure for the panel shall be -63 psf.
<b>Deck Attachment:</b>	For recover applications, existing deck attachments shall be confirmed to be in compliance with applicable building code.
<b>Existing Shingles:</b>	Existing shingles shall be minimum Class 'C' organic felt shingles or minimum Class 'A' fiberglass shingles to maintain a Class 'A' or 'B' fire rating, as noted below.
<b>Underlayment:</b>	Minimum underlayment shall be a double layer underlayment system comprised of a #15 felt (ASTM D 226, type I) applied with a 50% overlap or application of a #30 felt (ASTM D 226, type II) or #43 coated base sheet (ASTM D 2626) installed with a minimum 6" side-laps and 2" headlaps. Underlayment shall be fastened with corrosion resistant tin-caps and 1/4" annular ring-shank nails, spaced 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll.
<b>Fire Barrier:</b>	For class A or B fire rating, installed minimum 1/4" thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4 mm thick of Tritex, RockRoof (with current NOA) or 5/8" water resistant type X gypsum sheathing with treated core and facer.
<b>Battens:</b>	(For a Class 'B' Fire Rating) Install minimum 2" x 2" wood battens of decay resistant lumber, running perpendicular to the roof slope, at a spacing of 15- <sup>13</sup> / <sub>16</sub> " using a minimum of one #12-13 x 3-1/2" pan screws spaced 24" o.c. and 1/2" from each end.
<b>Valleys:</b>	Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with current published installation instructions and details in Dura-Loc Roofing System Limited current published installation instructions.
<b>Metal Panels and Accessories:</b>	Install the Dura-Loc Continental, WoodShake Tile and Shadowline Tile panels including flashing, penetrations, valleys, end laps and accessories in compliance with Dura-Loc Roofing Systems Limited current, published installation instructions and in compliance with the minimum requirements detailed in Roofing Application Standard RAS 133.  Fastener shall be #10 1-1/2" long minimum hex head metal/wood fasteners to be installed in the front downturn, at the low profile in each panel as per manufacturers instructions. This leads to 6 fasteners per panel width and 4 fasteners in the field of the panel.

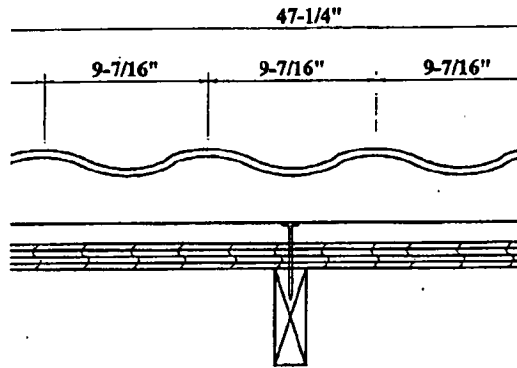


NOA No.: 02-0128.02  
Expiration Date: 05/23/07  
Approval Date: 05/23/02

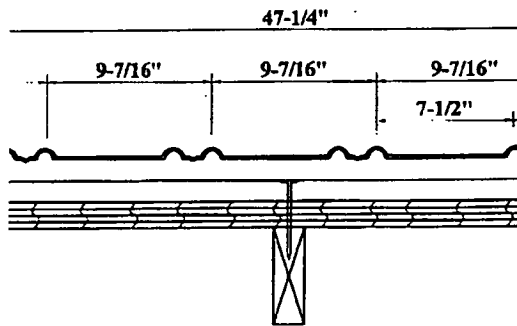
## SYSTEM LIMITATIONS

1. Increased design pressure at perimeter and corner areas, in compliance with applicable building code may be met through rational analysis by increasing the number of attachment points in these areas. The maximum fasteners spacing noted in the "Systems Description" section of this approval shall not be exceeded. All rational analysis computation shall be prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant.
2. All panels shall be permanently labeled with the manufacturer's name and/or logo, and the following statement: "Miami-Dade County Product Control Approved."
3. Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire rating of this product.
4. For minimum slope requirements, refer to applicable building code.

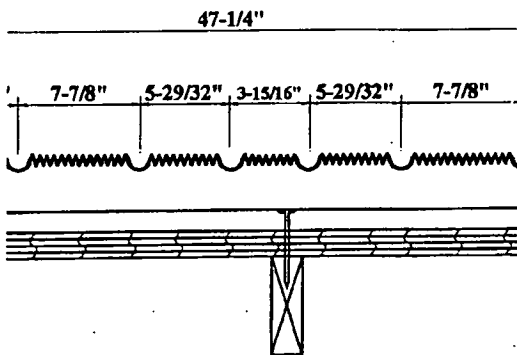




**CONTINENTAL TILE**



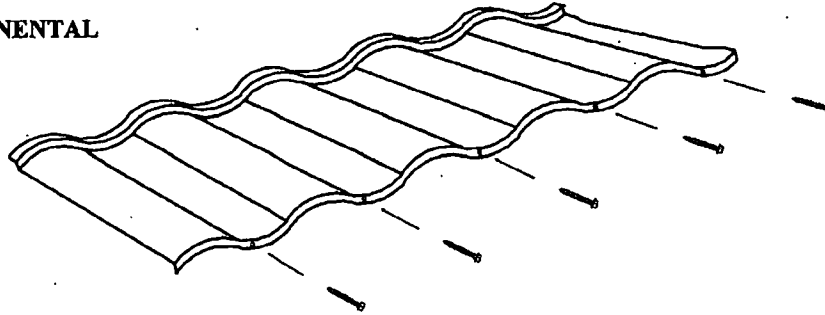
**SHADOWLINE TILE**



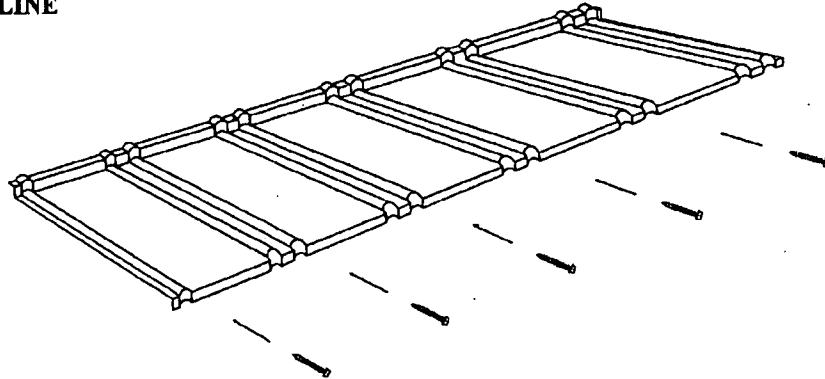
**SHAKE TILE**



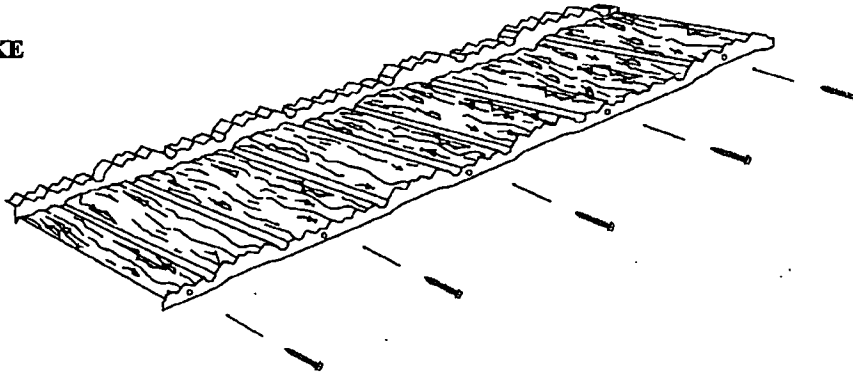
**CONTINENTAL**



**SHADOWLINE**



**SHAKE**



**END OF THIS ACCEPTANCE**



NOA No.: 02-0128.02  
Expiration Date: 05/23/07  
Approval Date: 05/23/02  
Page 7 of 7





BUILDING CODE COMPLIANCE OFFICE (BCCO)  
PRODUCT CONTROL DIVISION

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

## NOTICE OF ACCEPTANCE (NOA)

CertainTeed Corporation (PA)  
1400 Union Meeting Road, P.O. Box 1100  
Blue Bell, PA 19422

### **SCOPE:**

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

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

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

**DESCRIPTION:** CertainTeed Modified Bitumen Roofing Systems Over Wood Decks

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

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

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

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

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

This NOA consists of pages 1 through 30.  
The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 02-1205.02  
Expiration Date: 06/19/2008  
Approval Date: 01/30/03  
Page 1 of 30

## ROOFING ASSEMBLY APPROVAL

Category: Roofing  
Sub-Category: APP/SBS Modified Bitumen  
Deck Type: Wood  
Maximum Design Pressure -60 psf  
Fire Classification: See General Limitation #1

### TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT: TABLE 1

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
All Weather/Empire Base Sheet	36" x 72', Roll weight: 86 lbs. (2 squares)	ASTM D 2626 UL Type 15	Asphalt coated organic base sheet.
Flex-I-Glas™ Base Sheet	36" x 108', Roll weight: 90 lbs. (3 squares)	UL Type G2 ASTM D 4601, type II	Modified Bitumen coated fiberglass base sheet.
Flex-I-Glas™ FR Base Sheet	39 3/8" x 50', Roll weight: 90 lbs. (1.5 squares)	UL Type G2 ASTM D 4601, type II	Modified Bitumen coated fiberglass base sheet.
Flintglas® Ply Sheet Type IV or VI	36" x 180', Roll weight: 40/55 lbs. (5 squares)	ASTM D 2178 Type IV or VI UL Type G1	Fiberglass, asphalt impregnated ply sheet.
Flintlastic STA STA Plus 5.0	39 3/8" x 33', Roll weight: 90 lbs. (1 square)	ASTM D 6222, Grade S, Type II	Smooth surfaced APP Modified Bitumen membrane with non-woven polyester mat reinforcement for torch application.
Flintlastic GTA, GTA-FR or Flintlastic Diamond GTA	39 3/8" x 33' 3", Roll weight: 105 lbs. (1 square)	ASTM D 6222, Grade G, type II	Granule surfaced APP Modified Bitumen membrane with non-woven polyester mat reinforcement for torch application.
Flintlastic GTS	39 3/8" x 24'9", Roll weight: 92 lbs. (3/4 square)	ASTM D 6164, Grade G, Type II	Granule surfaced SBS Modified Bitumen membrane with non-woven polyester mat reinforcement for torch application.
Flintlastic GMS, Premium GMS	39 3/8" x 34' 2", Roll weight: 100/105 lbs. (1 square)	ASTM D 6164, Grade G, Type II	Granule surfaced SBS Modified Bitumen membrane with non-woven polyester mat reinforcement for mop application.
Flintlastic FR-P, Premium FR-P	39 3/8" x 34' 2", Roll weight: 105 lbs. (1 square)	ASTM D 6164, Grade G, Type I	Fire resistant, granule surfaced SBS Modified Bitumen Membrane with non-woven polyester mat reinforcement for mop application.
Flintlastic FR Cap	39 3/8" x 34' 2", Roll weight: 90 lbs. (1 square)	ASTM D 6163, Grade G, Type I	Fire resistant, granule surfaced SBS Modified Bitumen membrane with fiberglass mat reinforcement for mop applications.
Flexiglas Premium Cap 960	36" x 38" (1 square)	ASTM D 6163, Grade G, Type I	Granule surfaced SBS Modified Bitumen membrane with fiberglass ,mat reinforcement for mop application



<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
Ultra Poly SMS	36" x 64'4" (2 squares)	ASTM D 6164 Grade S, Type I	Smooth surfaced SBS Modified Bitumen Membrane with non-woven polyester mat reinforcement for mop application. Asphalt coated, fiberglass base sheet.
GlasBase™ Base Sheet	36" x 108', Roll weight: 69 lbs. (3 squares)	ASTM D 4601 UL Type G2	
PolySMS Base Sheet	39 3/8" x 64' 4", Roll weight: 90 lbs. (2 squares)	ASTM D 5147	Modified Bitumen coated polyester base sheet.
Yosemite® Mineral Surfaced Cap Sheet	36" x 36', Roll weight: 90 lbs. (1 square)	ASTM D 249 UL Type 30	Mineral Surfaced organic cap and buffer sheet.
Black Diamond Base Sheet	36" x 75', Roll weight 75 lbs. (2.25 squares)	PA 103 ASTM D 1970	Slag surfaced SBS Modified Bitumen sheet with fiberglass reinforcement for peel and stick application.

**APPROVED INSULATIONS:**

<b>Product Name</b>	<b>Product Description</b>	<b>Manufacturer (With Current NOA)</b>
PYROX	Polyisocyanurate foam insulation	Apache Products Co.
ACFoam II	Polyisocyanurate foam insulation	Atlas Energy Products
ISO 95+	Polyisocyanurate foam insulation	Firestone Building Products, Inc.
High Density Wood Fiberboard	Wood fiber insulation board	generic
Perlite Insulation	Perlite insulation board	generic
Dens Deck	Water resistant gypsum board	G-P Gypsum Corp.
ENRGY-1, ENRGY-2, Plus, UltraGard Gold, PSI-25 FiberGlass Roof Insulation	Polyisocyanurate foam insulation	Johns Manville
Fesco Board	Glass fiber/Mineral fiber insulation	Johns Manville
ISORoc	Expanded mineral fiber insulation	Johns Manville
Paroc Cap Board	Polyisocyanurate foam / rockwool composite insulation	Johns Manville
Multi-Max, FA	Rockwool insulation	Partek, Inc.
	Polyisocyanurate foam insulation	Rmax, Inc.



**APPROVED FASTENERS:**

**TABLE 3**

<b>Fastener Number</b>	<b>Product Name</b>	<b>Product Description</b>	<b>Dimensions</b>	<b>Manufacturer (With Current NOA)</b>
1.	#12 & #14 Dekfast Fastener	Insulation fastener		Construction Fasteners, Inc.
2.	Dekfast Hex Plate	Galvalume AZ50 steel plate	2 7/8" x 3 1/4"	Construction Fasteners, Inc.
3.	Olympic Fastener #12 & #14	Insulation fastener		Olympic Manufacturing Group, Inc.
4.	Olympic Standard	3" round galvalume AZ50 steel plate	3" round	Olympic Manufacturing Group, Inc.
5.	Insul-Fixx Fastener	Insulation fastener for steel and wood decks		SFS Stadler, Inc.
6.	Insul-Fixx S Plate	3" round galvalume AZ50 steel plate	3" round	SFS Stadler, Inc.

**EVIDENCE SUBMITTED:**

<u>Test Agency</u>	<u>Name</u>	<u>Report</u>	<u>Date</u>
Applied Research Laboratories	Physical Properties	28013	06/02/87
Factory Mutual Research Corporation	Current Insulation Fastening Requirements	FMRC 1994	01/01/95
Factory Mutual Research Corporation	PA 114 (FMRC 4470)	J.I. #3Y8A1.AM	03/23/96
Underwriters Laboratories, Inc.	Fire Classification Compliance	R11656	07/13/87
United States Testing Company, Exterior Research & Design, LLC	ASTM D 5147	97457-4	06/03/88
Exterior Research & Design, LLC	TAS 114 (J)	#3507.08.99-1	04/18/01
		#3514.02LAB	11/11/02



**APPROVED ASSEMBLIES:**

- Membrane Type:** APP MODIFIED
- Deck Type II:** Wood, Insulated, New Construction
- Deck Description:** 1<sup>9</sup>/<sub>32</sub>" or greater plywood or wood plank
- System Type A (1):** Anchor sheet mechanically fastened; all layers of insulation adhered with approved asphalt.

All General and System Limitations apply.

One or more layers of any of the following insulations.

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	N/A	N/A
<b>ACFoam-II, UltraGard Gold, ENRGY-1, ENRGY-2, PSI-25</b> Minimum 1.5" thick	N/A	N/A
<b>Fiberglas</b> Minimum 1 <sup>5</sup> / <sub>16</sub> " thick	N/A	N/A
<b>Perlite</b> Minimum 3/4" thick	N/A	N/A
<b>High Density Wood Fiberboard</b> Minimum 1/2" thick	N/A	N/A
<b>Dens-Deck</b> Minimum 1/4" thick	N/A	N/A

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

- Anchor Sheet:** One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS base mechanically attached as detailed below.
- Fastening:** Anchor sheet shall be lapped 4" and fastened with approved roofing nails and tin caps 9" o.c. in the lap and two rows staggered in the center of the sheet 12" o.c.
- Base/Ply Sheet:** One ply of products listed under 'Anchor Sheet' above, or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.



Membrane: Flintlastic STA, Flintlastic STA Plus 5.0, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base/ply sheet.

Surfacing: (Optional) Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.

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



Membrane Type: SBS MODIFIED  
 Deck Type II: Wood, Insulated, New Construction  
 Deck Description: 1 9/32" or greater plywood or wood plank  
 System Type A (2): Anchor sheet mechanically fastened; all layers of insulation adhered with approved asphalt.

All General and System Limitations apply.

One or more layers of any of the following insulations.

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
Pyrox Minimum 1.3" thick	N/A	N/A
ACFoam-II, UltraGard Gold, E'NRG'Y-1, E'NRG'Y-2, PSI-25 Minimum 1.5" thick	N/A	N/A
Fiberglas Minimum 1 5/16" thick	N/A	N/A
Perlite Minimum 3/4" thick	N/A	N/A
High Density Wood Fiberboard Minimum 3/4" thick	N/A	N/A
Dens-Deck Minimum 3/4" thick	N/A	N/A

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

Anchor Sheet: One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS base mechanically attached as detailed below.

Fastening: Anchor sheet shall be lapped 4" and fastened with approved roofing nails and tin caps 9" o.c. in the lap and two rows staggered in the center of the sheet 12" o.c.

Base/Ply Sheet: One ply of products listed under 'Anchor Sheet' above, or one ply of Ultra Poly SMS or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.



Membrane: One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap sheet, Flexiglas Premium Cap 960, Ultra Poly SMS or Flintglas Mineral Surfaced Cap Sheet adhered to base/ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to base/ply sheet.

Surfacing: (Optional) Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.

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





**Membrane Type:** APP MODIFIED

**Deck Type II:** Wood, Insulated, New construction

**Deck Description:** Minimum  $1\frac{9}{32}$ " thick plywood attached using wood screws spaced 6" o.c. at wood joists spaced maximum 24" o. c.

**System Type A (3):** Anchor sheet mechanically fastened; all layers of insulation adhered with approved asphalt.

All General and System Limitations apply.

One or more layers of any of the following insulations.

<b>Insulation Layer</b>	<b>Insulation Fasteners (Table 3)</b>	<b>Fastener Density/ft<sup>2</sup></b>
<b>Pyrox</b> Minimum 1.3" thick	N/A	N/A
<b>ACFoam-II, UltraGard Gold; ENRGY-1, ENRGY-2, PSI-25</b> Minimum 1.5" thick	N/A	N/A
<b>Fiberglas</b> Minimum $1\frac{5}{16}$ " thick	N/A	N/A
<b>Perlite</b> Minimum $\frac{3}{4}$ " thick	N/A	N/A
<b>High Density Wood Fiberboard</b> Minimum $\frac{1}{2}$ " thick	N/A	N/A
<b>Dens-Deck</b> Minimum $\frac{1}{4}$ " thick	N/A	N/A

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

**Anchor Sheet:** One ply of GlasBase, Flex-I-Glas Base, Flex-I Glas FR Base or All Weather/Empire Base sheet mechanically attached as detailed below.

**Fastening:** Anchor sheet shall be lapped 4" and fastened with Simplex Mega Cap Nails spaced 9" o.c. in the lap and the 9" o.c. in two staggered rows in the center of the sheet.

**Base/Ply Sheet:** One Ply of products listed under 'Anchor Sheet' above, or one or more plies of Flintglas Ply Sheet (type IV) or Flintglas Premium Ply Sheet (type VI) adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40lbs. /sq.

**Membrane:** Flintlastic STA, Flintlastic STA Plus 5.0, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base/ply sheet.



Surfacing:

(Optional) Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.

Maximum Design  
Pressure:

-60psf. (See General Limitation #7)



Membrane Type: SBS MODIFIED

Deck Type 1I: Wood, Insulated, New Construction

Deck Description: Minimum <sup>19</sup>/<sub>32</sub>" thick plywood attached using wood screws spaced 6" o.c. at word joists spaced maximum 24" o.c.

System Type A (4): Anchor sheet mechanically fastened; all layer of insulation adhered with approved asphalt.

All General and System Limitations apply.

One or more layers of any of the following insulations.

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	N/A	N/A
<b>ACFoam-II, UltraGard Gold, ENRGY-2, PSI-25</b> Minimum 1.5" thick	N/A	N/A
<b>Fiberglas</b> Minimum <sup>15</sup> / <sub>16</sub> " thick	N/A	N/A
<b>Perlite</b> Minimum <sup>3</sup> / <sub>4</sub> " thick	N/A	N/A
<b>High Density Wood Fiberboard</b> Minimum <sup>1</sup> / <sub>2</sub> " thick	N/A	N/A
<b>Dens-Deck</b> Minimum <sup>1</sup> / <sub>4</sub> " thick	N/A	N/A

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

Anchor Sheet: One ply of Glasbase, Flex-I Glas Base, Flex-I- Glas FR Base or All Weather/ Empire Base Sheet mechanically attached as detailed below.

Fastening: Anchor sheet shall be lapped 4" and fastened with Simplex Mega Cap Nails spaced 9" o.c. in the lap and the 9" o.c. in two staggered rows in the center of the sheet.

Base/Ply Sheet: One ply of products listed under 'Anchor Sheet' above, or one ply Ultra Poly SMS or more plies of FlintGlas Ply Sheet (type IV) or FlintGlas Premium Ply Sheet (Type VI) adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs. /sq.



- Membrane: One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap sheet, Flexiglas Premium Cap 960, Ultra Poly SMS or Flintglas Mineral Surfaced Cap Sheet adhered to base/ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to base/ply sheet.
- Surfacing: (Optional) Install one of the following:
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
  2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.
- Maximum Design Pressure: -60psf. (See General Limitation #7)



**Membrane Type:** APP MODIFIED  
**Deck Type II:** Wood, Insulated, New Construction  
**Deck Description:** 19/32" or greater plywood or wood plank  
**System Type B (1):** Base layer of insulation mechanically attached, optional top layer adhered with approved asphalt.

All General and System Limitations apply.

one or more layers of any of the following insulations under those listed as Top Layer:

Base Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>ENRGY-2, PSI-25</b> Minimum 1.4" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>ACFoam-II, UltraGard Gold</b> Minimum 1.5" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Fiberglas</b> Minimum 1 5/16" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Perlite</b> Minimum 3/4" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>High Density Wood Fiberboard</b> Minimum 1/2" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Dens-Deck</b> Minimum 1/4" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>

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

Top Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
Any of the insulations listed for Base Layer		

**Note:** Optional top layer of insulation shall be adhered with approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft<sup>2</sup>. Please refer to Roofing Application Standard RAS 117 for insulation attachment. Composite insulation boards used as a top layer shall be installed with the polyisocyanurate face down.

**Base Sheet:** One ply of Glasbase, Flex-I Glas Base, Flex-I Glas FR Base, Poly SMS, FlintGlas Ply Sheet (Type IV) or FlintGlas Premium Ply Sheet (Type VI) adhered to the insulated substrate with approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.



- Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of FlintGlas Ply Sheet (Type IV) or FlintGlas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Membrane:** Flintlastic STA, Flintlastic STA Plus 5.0, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base or ply sheet.
- Surfacing:** (Optional) Install one of the following:
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
  2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.
- Maximum Design Pressure:** -45psf. (See General Limitation #9)



Membrane Type: SBS MODIFIED  
 Deck Type II: Wood, Insulated, New Construction  
 Deck Description: 1 9/32" or greater plywood or wood plank  
 System Type B (2): Base layer of insulation mechanically attached, optional top layer adhered with approved asphalt.

All General and System Limitations apply.

One or more layers of any of the following insulations under those listed as Top Layer:

Base Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>ENRGY-2, PSI-25</b> Minimum 1.4" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>ACFoam-II, UltraGard Gold</b> Minimum 1.5" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Fiberglas</b> Minimum 1 5/16" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Perlite</b> Minimum 3/4" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>High Density Wood Fiberboard</b> Minimum 1/2" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Dens-Deck</b> Minimum 1/2" thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>

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

Top Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
Any of the insulations listed for Base Layer		

Note: Optional top layer of insulation shall be adhered with approved hot asphalt within the EVT range and at a rate of 20-40 lbs/100 ft<sup>2</sup>. Please refer to Roofing Application Standard RAS 117 for insulation attachment. Composite insulation boards used as a top layer shall be installed with the polyisocyanurate face down.

Base Sheet: One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base, Poly SMS, Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) or Ultra Poly SMS adhered to the insulated substrate with approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.



**Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap sheet, Flexiglas Premium Cap 960, Ultra Poly SMS or Flintglas Mineral Surfaced Cap Sheet adhered to base/ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to base/ply sheet.

**Surfacing:** (Optional) Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97, APOC 212 Fibrated Aluminum at an application rate of 1.5 gal./sq.

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





Membrane Type: APP MODIFIED  
 Deck Type II: Wood, Insulated, New Construction  
 Deck Description:  $1\frac{9}{32}$ " or greater plywood or wood plank  
 System Type C (1): All layers of insulation simultaneously attached.

All General and System Limitations apply.

One or more layers of any of the following insulations:

Base Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	N/A	N/A
<b>ACFoam-II, UltraGard Gold, ENRGY-2, PSI-25</b> Minimum 1.5" thick	N/A	N/A
<b>Fiberglas</b> Minimum $1\frac{5}{16}$ " thick	N/A	N/A
<b>Perlite</b> Minimum $\frac{3}{4}$ " thick	N/A	N/A
<b>High Density Wood Fiberboard</b> Minimum $\frac{1}{2}$ " thick	N/A	N/A
<b>Dens-Deck</b> Minimum $\frac{1}{4}$ " thick	N/A	N/A

Note: All layers shall be simultaneously fastened; see top layer below for fasteners and density.

Top Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Perlite</b> Minimum $\frac{3}{4}$ " thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>High Density Wood Fiberboard</b> Minimum $\frac{1}{2}$ " thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Dens-Deck</b> Minimum $\frac{1}{4}$ " thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>

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



- Base Sheet:** One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base, Poly SMS, Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered to the insulated substrate with approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Membrane:** Flintlastic STA, Flintlastic STA Plus 5.0, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base or ply sheet.
- Surfacing:** (Optional) Install one of the following:
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
  2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.
- Maximum Design Pressure:** -45psf. (See General Limitation #9)



Membrane Type: SBS MODIFIED  
 Deck Type II: Wood, Insulated, New Construction  
 Deck Description:  $1\frac{9}{32}$ " or greater plywood or wood plank  
 System Type C (2): All layers of insulation simultaneously attached.

All General and System Limitations apply.

One or more layers of any of the following insulations under those listed as Top Layer:

Base Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	N/A	N/A
<b>ACFoam-II, UltraGard Gold, ENRGY-2, PSI-25</b> Minimum 1.5" thick	N/A	N/A
<b>Fiberglas</b> Minimum $1\frac{5}{16}$ " thick	N/A	N/A
<b>Perlite</b> Minimum $\frac{3}{4}$ " thick	N/A	N/A
<b>High Density Wood Fiberboard</b> Minimum $\frac{1}{2}$ " thick	N/A	N/A
<b>Dens-Deck</b> Minimum $\frac{1}{4}$ " thick	N/A	N/A

Note: All layers shall be simultaneously fastened; see top layer below for fasteners and density.

Top Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Perlite</b> Minimum $\frac{3}{4}$ " thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>High Density Wood Fiberboard</b> Minimum $\frac{1}{2}$ " thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>
<b>Dens-Deck</b> Minimum $\frac{1}{4}$ " thick	Any approved fasteners in Table 3	1:2 ft <sup>2</sup>

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



- Base Sheet:** One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base, Poly SMS, Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) or Ultra Poly SMS adhered to the insulated substrate with approved mopping asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Membrane:** One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap sheet, Flexiglas Premium Cap 960, Ultra Poly SMS or Flintglas Mineral Surfaced Cap Sheet adhered to base/ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to base/ply sheet.
- Surfacing:** (Optional) Install one of the following:
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
  2. Karnak 97, APOC 212 Fibrated Aluminum at an application rate of 1.5 gal./sq.
- Maximum Design Pressure:** -45psf. (See General Limitation #9)



Membrane Type: APP MODIFIED  
 Deck Type II: Wood, Insulated, New Construction  
 Deck Description: 1 9/32" or greater plywood or wood plank  
 System Type D (1): All layers of insulation and base sheet simultaneously attached.

All General and System Limitations apply.

One or more layers of any of the following insulations:

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
Pyrox Minimum 1.3" thick	N/A	N/A
ACFoam-II, UltraGard Gold, ENRGY-2, PSI-25 Minimum 1.5" thick	N/A	N/A
Fiberglas Minimum 1 5/16" thick	N/A	N/A
Perlite Minimum 3/4" thick	N/A	N/A
High Density Wood Fiberboard Minimum 1/2" thick	N/A	N/A
Dens-Deck Minimum 1/4" thick	N/A	N/A

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

- Base Sheet: One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS base mechanically attached as detailed in Fastening #1, below or one ply of Poly SMS mechanically attached as detailed in Fastening #2 or #3, below.
- Fastening #1: Olympic Screws #12 or #14 and metal plates, Dekfast #14 or #15 and metal plates or SFS Insul-Fixx #12 or #14 and metal plates spaced 4" o.c. at a 4" side lap and two staggered rows in the center of the sheet, 24" o.c.
- Fastening #2: Olympic Screws #12 or #14 and metal plates, Dekfast #14 or #15 and metal plates or SFS Insul-Fixx #12 or #14 and metal plates spaced 12" o.c. at a 4" side lap and two staggered rows in the center of the sheet, 36" o.c.
- Fastening #3: SFS Insul-Fixx screws and 2" round metal plates at a 4" side lap, 12" o.c.



- Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Membrane:** Flintlastic STA, Flintlastic STA Plus 5.0, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base or ply sheet.
- Surfacing:** (Optional) Install one of the following:
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
  2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.
- Maximum Design Pressure:** -45psf. (See General Limitation #9)



Membrane Type: SBS MODIFIED  
 Deck Type II: Wood, Insulated, New Construction  
 Deck Description: 1 9/32" or greater plywood or wood plank  
 System Type D (2): All layers of insulation and base sheet simultaneously attached.  
 All General and System Limitations apply.

One or more layers of any of the following insulations:

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft <sup>2</sup>
<b>Pyrox</b> Minimum 1.3" thick	N/A	N/A
<b>ACFoam-II, UltraGard Gold, ENRGY-2, PSI-25</b> Minimum 1.5" thick	N/A	N/A
<b>Fiberglas</b> Minimum 1 5/16" thick	N/A	N/A
<b>Perlite</b> Minimum 3/4" thick	N/A	N/A
<b>High Density Wood Fiberboard</b> Minimum 1/2" thick	N/A	N/A
<b>Dens-Deck</b> Minimum 1/4" thick	N/A	N/A

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

- Base Sheet: One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS base mechanically attached as detailed in Fastening #1, below or one ply of Poly SMS mechanically attached as detailed in Fastening #2 or #3, below.
- Fastening #1: Olympic Screws #12 or #14 and metal plates, Dekfast #14 or #15 and metal plates or SFS Insul-Fixx #12 or #14 and metal plates spaced 4" o.c. at a 4" side lap and two staggered rows in the center of the sheet, 24" o.c.
- Fastening #2: Olympic Screws #12 or #14 and metal plates, Dekfast #14 or #15 and metal plates or SFS Insul-Fixx #12 or #14 and metal plates spaced 12" o.c. at a 4" side lap and two staggered rows in the center of the sheet, 36" o.c.
- Fastening #3: SFS Insul-Fixx screws and 2" round metal plates at a 4" side lap, 12" o.c.



**Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) or Ultra Poly SMS adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap Sheet, Flexiglas Premium Cap 960 or Ultra Poly SMS adhered to ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to ply sheet.

**Surfacing:** (Optional) Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97, APOC 212 Fibrated Aluminum at an application rate of 1.5 gal./sq.

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





**Membrane Type:** APP MODIFIED  
**Deck Type 1:** Wood, Non-insulated  
**Deck Description:** 19/32" or greater plywood or wood plank decks  
**System Type E (1):** Base sheet mechanically fastened.  
 All General and System Limitations apply.

**Base Sheet:** One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS base mechanically attached as detailed below.

**Fastening:** Base sheet shall be lapped 4" and fastened with approved roofing nails and tin caps 9" o.c. in the lap and two rows staggered in the center of the sheet 12" o.c.

**Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** Flintlastic STA, Flintlastic STA Plus 5.0, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base or ply sheet.

**Surfacing:** (Optional) Install one of the following:
 

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 1/2 gal./sq.

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



**Membrane Type:** SBS MODIFIED

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

**Deck Description:**  $1\frac{9}{32}$ " or greater plywood or wood plank decks

**System Type E (2):** Base sheet mechanically fastened.

All General and System Limitations apply.

**Anchor Sheet:** One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or Poly SMS base mechanically fastened as detailed below.

**Fastening:** Base sheet shall be lapped 4" and fastened with approved roofing nails and tin caps 9" o.c. in the lap and two rows staggered in the center of the sheet 12" o.c.

**Ply Sheet:** (Optional) One ply of Glas Base, Flex-I-Glas Base, Flex-I-Glas FR Base, PolySMS or one or more plies of Flintglas Ply Sheet (Type IV) or Flintglas Premium Ply Sheet (Type VI) or Ultra Poly SMS adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap sheet, Flexiglas Premium Cap 960, Ultra Poly SMS or Flintglas Mineral Surfaced Cap Sheet adhered to base/ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to base/ply sheet.

**Surfacing:** (Optional) Install one of the following:

1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
2. Karnak 97 or APOC 212 Fibrated Aluminum at an application rate of 1.5 gal./sq.

**Maximum Design Pressure:**

-45 psf (See General Limitation #9)



**Membrane Type:** APP MODIFIED  
**Deck Type 1:** Wood, Non-insulated  
**Deck Description:** Minimum  $1\frac{9}{32}$ " thick plywood attached using wood screws spaced 6" o.c. at wood joists spaced maximum 24" o.c.  
**System Type E (3):** Base sheet mechanically fastened.

**All General and System Limitations apply.**

**Base Sheet:** One ply of Glas Base, Flex-I Glas Base, Flex-I Glas FR Base or All Weather / Empire Base Sheet mechanically fastened as detailed below.

**Fastening:** Anchor sheet shall be lapped 4" and fastened with Simplex Mega Cap Nails spaced 9" o.c. in the lap and 9" o.c. in two staggered rows in the center of the sheet.

**Ply Sheet:** (Optional) One ply of GlasBase, Flex-I-GlasBase, Flex-I-Glas FR Base, PolySMS or one or more plies of FlintGlas Ply Sheet (Type IV) or FlintGlas Premium Ply Sheet (Type VI) adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** Flintlastic STA, Flintlastic Diamond GTA, Flintlastic GTA or GTA-FR torch adhered to base or ply sheet.

**Surfacing:** (Optional) Install one of the following:  
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb/sq.  
2. Karnak 97, APOC 212 Fibrated Aluminum, Henry 520 Aluminum or Grundy AL MB at an application rate of 1 ½ gal. /sq.

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



- Membrane Type:** SBS MODIFIED
- Deck Type 1:** Wood, Non-insulated
- Deck Description:** Minimum  $1\frac{9}{32}$ " thick plywood attached using wood screws spaced 6" o.c. at wood joists spaced maximum 24" o.c.
- System Type E (4):** Base sheet mechanically fastened.

All General and System Limitations apply.

- Base Sheet:** One ply of GlasBase, Flex-I Glas Base, Flex-I Glas FR Base or All Weather/Empire Base Sheet mechanically fastened as detailed below.
- Fastening:** Anchor sheet shall be lapped 4" and fastened with Simplex Mega Cap Nails spaced 9" o.c. in the lap and 9" o.c. in two staggered rows in the center of the sheet.
- Ply Sheet:** (Optional) One ply of GlasBase, Flex-I-GlasBase, Flex-I-Glas FR Base, PolySMS or one or more plies of FlintGlas Ply Sheet (Type IV) or FlintGlas Premium Ply Sheet (Type VI) or Ultra Poly SMS adhered to the base sheet in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.
- Membrane:** One ply of Flintlastic GMS, Flintlastic Premium GMS, Flintlastic FR-P, Flintlastic Premium FR-P, Flintlastic FR Cap sheet, Flexiglas Premium Cap 960, Ultra Poly SMS or Flintglas Mineral Surfaced Cap Sheet adhered to base/ply sheet with approved mopping asphalt applied within the EVT range and at a rate of 20 to 40 lbs./sq. or Flintlastic GTS torch adhered to base/ply sheet.
- Surfacing:** (Optional) Install one of the following:
1. 400-lb./sq. gravel or 300-lb./sq. slag in a flood coat of approved mopping asphalt at an application rate of 60 lb./sq.
  2. Karnak 97 or APOC 212 Fibrated Aluminum at an application rate of 1.5 gal./sq.
- Maximum Design Pressure:** -60psf. (See General Limitation #7)



**Membrane Type:** N/A

**Deck Type 1:** Wood

**Deck Description:** 1<sup>9</sup>/<sub>32</sub>" or greater plywood or wood plank

**System Type:** Tile Underlayment, Base Sheet mechanically attached.

**All General and System Limitations shall apply.**

**Anchor sheet:** One ply of #30 asphalt saturated organic felt, All Weather/Empire Base, GlasBase, Flex-I Glas or Flex-I Glas FR Base applied with a minimum 2" side lap and a minimum 6" end lap. Base sheet may be applied at a right angle (90°) to the slope of the deck with approved annular ring shank nails and tin caps at a fastener spacing of 6" o.c. at the 2" side lap, and two 12" o.c. staggered rows along the center of the sheet.

**Ply Sheet:** (Optional) One or more plies of FlintGlas Ply Sheet (Type IV) or FlintGlas Premium Ply Sheet (Type VI) adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq.

**Membrane:** One ply of FlintGlas Mineral Surface Cap Sheet, Yosemite Mineral Surface Cap Sheet, Flexiglas Premium Cap 960, Flintlastic GMS or Flintlastic FR-PGMS membrane may be applied at a right angle (90°) to the slope of the deck\* adhered in a full mopping of Type IV asphalt applied within the EVT range and at a rate of 20-40 lbs./sq. or Flintlastic GTA torch applied or Black Diamond Base Sheet applied to the base sheet by peel and stick application. Membrane shall be backnailed to deck with approved annular ring shank nails and tin caps in accordance to applicable Building Code. No nails or tin caps shall be exposed

\* Membrane may also be installed parallel to the slope of the roof (i.e. strapping). If membrane is strapped, then anchor sheet and ply sheet must also be strapped.

**Maximum Design Pressure:**

Refer to tile manufacturer's NOA.

**Maximum Slope:**

Must Comply with Roofing Application Standard RAS 118, RAS 119, RAS 120 and applicable Building Code.



## WOOD DECK SYSTEM LIMITATIONS:

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

## GENERAL LIMITATIONS:

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

END OF THIS ACCEPTANCE



NOA No.: 02-1295.02  
Expiration Date: 06/19/2008  
Approval Date: 01/30/03  
Page 30 of 30



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)**

Maxim Industries, Inc.  
6170 Vanderbilt Avenue  
Dallas, TX 75214

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

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

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

**DESCRIPTION: Dade Curb-Mount & Self-Flashing Skylight.**

**APPROVAL DOCUMENT:** Drawing No. DCM-1 & DSF-1, titled "Dade Curb Mount & Dade Self Flashing", sheets No 1 and 2 of 2, prepared by Maxim Industries, Inc dated 04/01/03 with no revisions bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

**MISSILE IMPACT RATING: Large & Small Missile Impact**

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

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

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

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

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

This NOA consists of this page 1 & approval document mentioned above  
The submitted documentation was reviewed by Candido E. Font, P.E.



FILE COPY *5/15/03*  
TOWN OF SEWALL'S POINT  
THESE PLANS HAVE BEEN  
REVIEWED FOR CODE COMPLIANCE  
DATE: *4/11/06*  
BUILDING OFFICIAL  
Gene Simmons

NOA No 03-0224.11  
Expiration Date: May 15, 2008  
Approval Date: May 15, 2003  
Page 1

**Maxim Industries, Inc.****NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**  
(For File ONLY. Not part of NOA)**A. DRAWINGS**

1. Drawing No. DCM-1 & DSF-1, sheet 1 and 2 of 2, titled "Dade Curb Mount & Dade Self Flashing", prepared by Maxim Industries, Inc, dated 04/01/03, with no revision, signed and sealed by R. Boyette, P.E.

**B. TESTS**

1. Test report on Large Missile Impact Test per TAS 201, Cyclic Load Test per TAS 203 and Uniform Static air Pressure Test per TAS 202 on "Dade Self-Flashing, Dade Curb mount", prepared by Architectural Testing, Inc, report No. 01-43381.01 issued on 01/29/03, signed and sealed by S. M. Uric, P.E.

**C. CALCULATIONS**

1. Anchor calculations prepared by Richard Burette, signed and sealed by R. Burette on 02/11/03

**D. MATERIAL CERTIFICATIONS**

1. Notice of Acceptance No. 01-0709.07 issued to Sheffield Plastics, Inc on 08/23/01, expiring on 08/27/06.

**E. STATEMENTS**

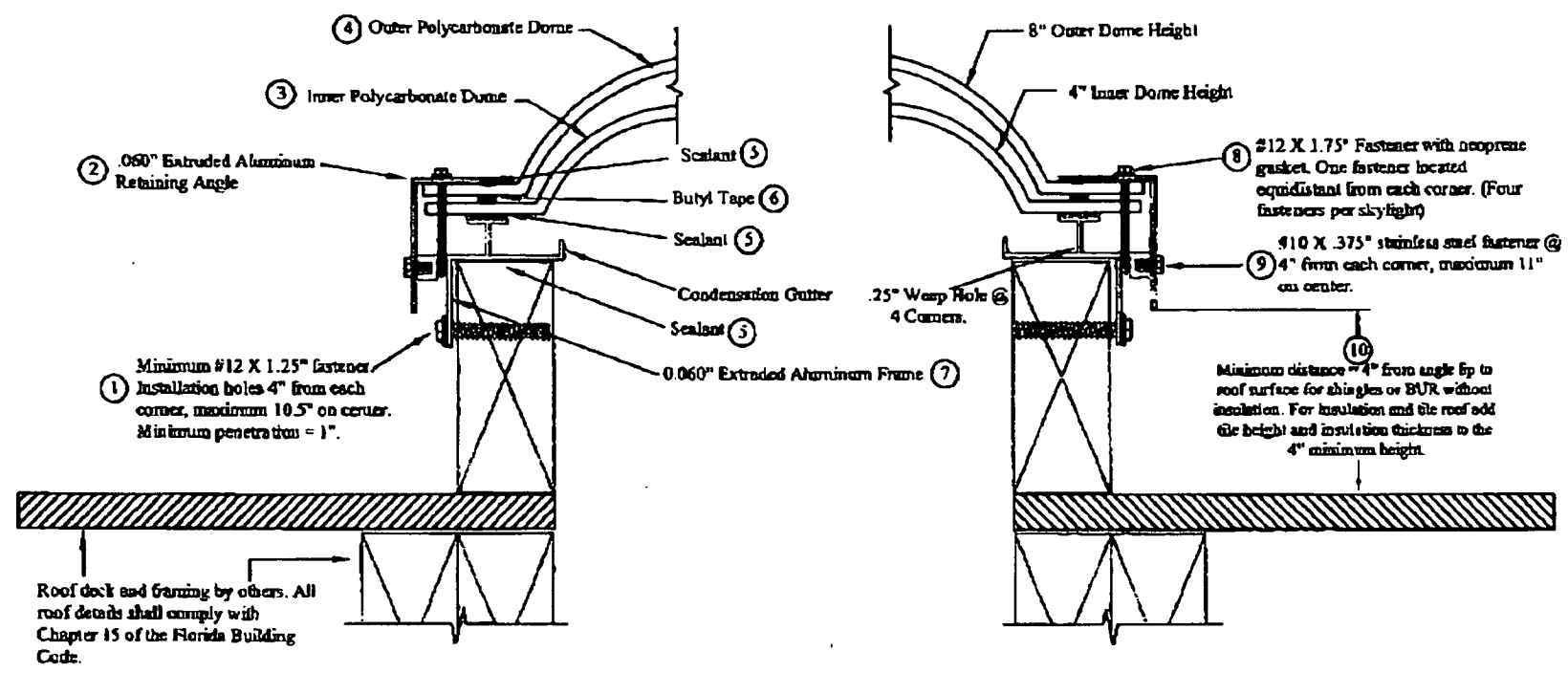
1. Code compliance letter issued by Richard Burette, PE on 02/11/03, signed and sealed by R. Boyette, PE.



**Candido F. Font, P. E.**  
**Senior Product Control Examiner**  
**NOA No 03-0224.11**  
**Expiration Date: May 15, 2008**  
**Approval Date: May 15, 2003**



- ① Minimum #12 X 1.25" fastener by others. Pre-punched installation holes 4" from each corner, maximum 10.5" on center. Minimum penetration = 1".
- ② .060" X 1.5" X 1.75" 6063-T6 extruded aluminum retaining angle. Aluminum angle mitered and welded @ 4 corners.
- ③ 52.5" X 100.375" X .118" Hyzod inner polycarbonate dome @ 4" height. NOA: #01-0709-07.
- ④ 52.5" X 100.375" X .118" Hyzod outer polycarbonate dome @ 8" height. NOA: #01-0709-07.
- ⑤ OSI PR 216 urethane sealant. Located between aluminum angle retainer and top dome & between bottom dome and aluminum frame.
- ⑥ Butyl tape: 1" X .125" located between top and bottom domes.
- ⑦ 6063-T5 Extruded Aluminum Frame. 0.060" shape mitered and welded @ 4 corners.
- ⑧ #12 X 1.75" Fastener. One fastener located equidistant from each corner. (Four fasteners per skylight)
- ⑨ #10 X .375" stainless steel fastener @ 4" from each corner, maximum 11" on center.
- ⑩ Minimum distance = 4" from angle lip to roof surface for shingles or BUR without insulation. For insulation and tile roof add tile height and insulation thickness to the 4" minimum height.
- ⑪ All units equal to or less than 32 square feet will be accepted under this NOA.



**Dade Curb Mount Model**

RICHARD BOYETTE

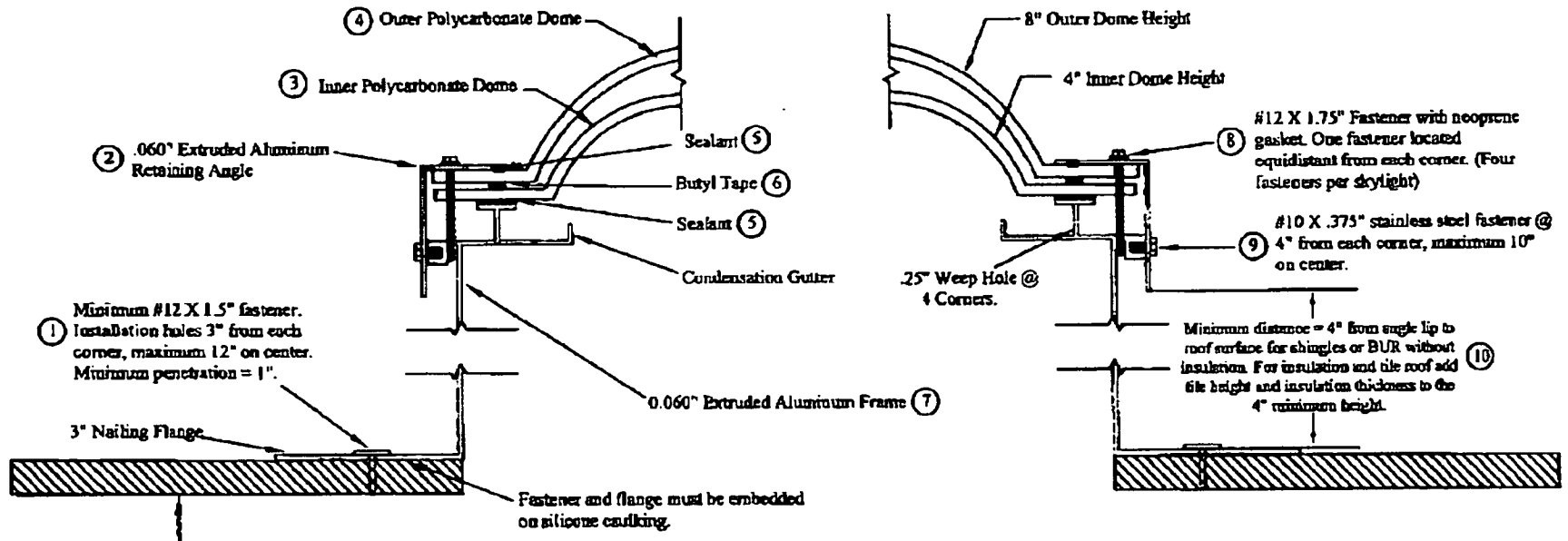
Date: 04/01/03 Draw. #DCM-1  
 Drawing: Dade Curb Mount  
 Sheet#: 1 of 2  
 Design Pressure: 60psf +/-  
 Max. Skylight ID: 51.75" X 99.75"

Approved as complying with the Florida Building Code  
 Date: 05/15/03  
 NOA#: 03-0224-11  
 Miami Dade District Control Division  
 By: *[Signature]*

FL PE # 42485  
 4031 COCONUT BLVD  
 ROYAL PALM BCH FL 33411  
 561-790-5766  
*[Signature]*  
 4/10/03

**MAXIM INDUSTRIES, INC**  
 6170 Vanderbilt Avenue Dallas, TX 75214  
 Phone: 214.824.1557 Fax: 240.371.7345

- ① Minimum #12 X 1.5" fastener by others. Pre-punched installation holes 3" from each corner, maximum 12" on center. Minimum penetration = 1".
- ② .060" X 1.5" X 1.75" 6063-T6 extruded aluminum retaining angle. Aluminum angle mitered and welded @ 4 corners.
- ③ 49" X 97" X .118" Hyzod inner polycarbonate dome @ 4" height. NOA: #01-0709-07.
- ④ 49" X 97" X .118" Hyzod outer polycarbonate dome @ 8" height. NOA: #01-0709-07.
- ⑤ OSI PR 256 urethane sealant: Located between aluminum angle retainer and top dome & between bottom dome and aluminum frame.
- ⑥ Butyl tape: 1" X .125" located between top and bottom domes.
- ⑦ 6063-T5 Extruded Aluminum Frame. 0.060" shape mitered and welded @ 4 corners.
- ⑧ #12 X 1.75" Fastener. One fastener located equidistant from each corner. (Four fasteners per skylight)
- ⑨ #10 X .375" stainless steel fastener @ 4" from each corner, maximum 10" on center.
- ⑩ Minimum distance = 4" from angle lip to roof surface for shingles or BUR without insulation. For insulation and tile roof add tile height and insulation thickness to the 4" minimum height.
- ⑪ All units equal to or less than 32 square feet will be accepted under this NOA.



Roof deck by others. Minimum thickness = 1" for 1" fastener penetration. All roof details shall comply with Chapter 15 of the Florida Building Code.

### Dade Self Flashing Model

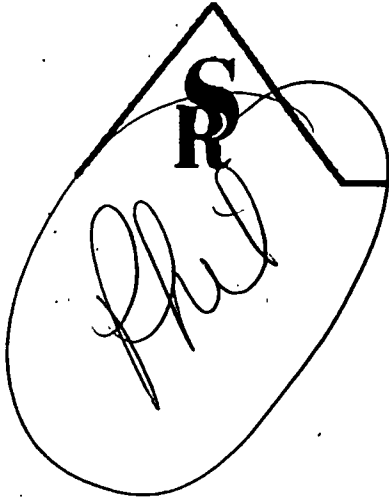
Date: 04/01/03 Draw. #DSF-1  
 Drawing: Dade Self Flashing  
 Sheet#: 2 of 2  
 Design Pressure: 60psf +/-  
 Max Skylight ID: 48" X 96"

Approved as complying with the Florida Building Code  
 Date: 05/15/03  
 NOA#: 03-0222-11  
 Miami Dade Building Control Division  
 By: *[Signature]*

RICHARD BOYETTE  
 FL PE # 42485  
 4031 COCONUT BLVD  
 ROYAL PALM BCH FL 334  
 561-790-5766  
*[Signature]*

**MAXIM INDUSTRIES, INC**  
 6170 Vanderbilt Avenue Dallas, TX 75214  
 Phone: 214.824.1557 Fax: 240.371.7345

005/005  
004/004



**SUPERIOR ROOFING SYSTEMS, INC.**  
COMMERCIAL • RESIDENTIAL • INDUSTRIAL Lic CC-C058013 / Insured

FILE # 8112 2 OAKWOOD

**FAX COVER SHEET**

SEND TO: Sewell's Point  
COMPANY NAME: Bldg. Dept.  
ATTENTION: Valarie  
FAX NUMBER: ~~772/287-2455~~  
220-4765

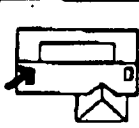
FROM: Mary  
DATE: 5/31/06  
PHONE NUMBER: 772-460-9662  
FAX NUMBER: 772-460-6313

Urgent     Reply ASAP     Please Comment     Please Review     For Your Information

TOTAL PAGES INCLUDING COVER: 8

MESSAGE: Detail & installation for Permit # 8112  
on Hip Cap, Vent Flashing & Skylight used  
at Mackay. & Oakwood Dr.

Thanks,  
Mary



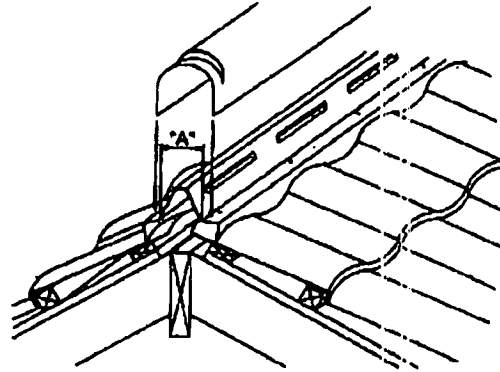
SECTION  
**Top Course Installation**

PAGE TITLE  
**Continental - Vented and Unvented**

PAGE  
**H-2**  
REVISED DATE  
**04.03.01**

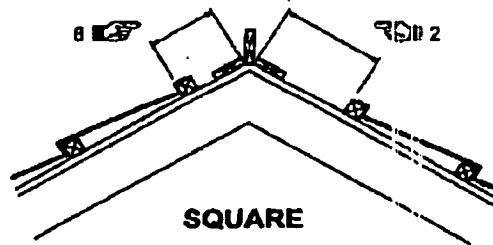
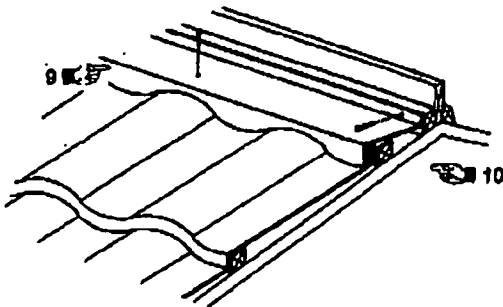
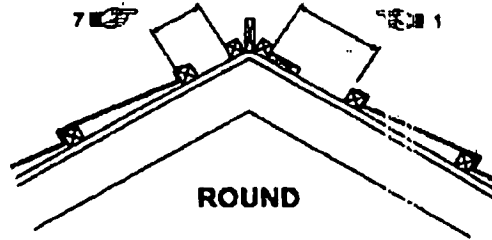
**VENTED TOP ROW**

Cut a slot in the deck 1" (25 mm) wide at the ridge. If the roof is constructed with a ridge board you will have to cut the slot wider. A 1" (25 mm) strapping is installed just below the slot to support the last course of tile. The last course of panels is cut off so as to allow 1" (25 mm) of free air between sides. After fastening the front of the panel in normal fashion, fasten the top of the panel through the pan into the 1" (25 mm) board at the top. Position the 2 pieces of vented top row so that measurement "A" is approximately 4 1/2" (114 mm) and chalk line for positioning. Secure the vented top row to the panel with screws at the high portions of tile. Stitch screw the 2 pieces of vented top row together with 1 screw per length per side. The barrel cap trims can now be fastened to the vented top row in the normal fashion.



**UNVENTED SHORT COURSE**

If the measurement shown in note 7 (round) or note 8 (square) is less than 3" (75 mm), the vented top row accessory may be used (note 9). Remove the top portion by cutting just below the vent louvres and install by butting against the ridge backer then telescope down over the adjacent course of tile.



1) Minimum #12 X 1.5" flanges by others. Pre-punched installation holes 3" from each corner, maximum 12" on center. Minimum penetration = 1".

2) #60° X 1.5" X 1.75" 6063-T6 extruded aluminum retaining angle. Aluminum retaining angle mitered and welded @ 4 corners.

3) 49° X 97° X .118" spaced inner polycarbonate dome @ 4" height. NOA: #01-0709-07.

4) 49° X 97° X .118" spaced outer polycarbonate dome @ 8" height. NOA: #01-0709-07.

5) OSI PR 256 urethane sealant. Located between aluminum angle retainers and top dome & between bottom dome and aluminum frame.

6) Butyl tape: 1" X .125" located between top and bottom domes.

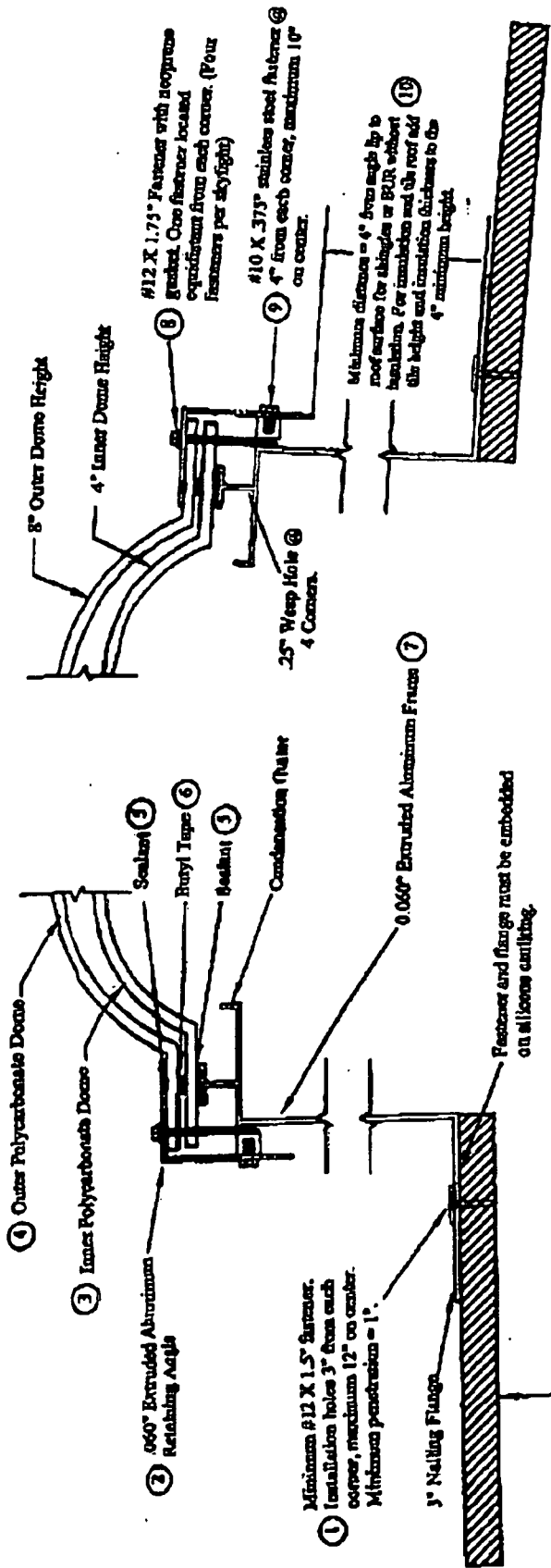
7) 6063-T6 Extruded Aluminum Frame. 0.060" shape mitered and welded @ 4 corners.

8) #12 X 1.75" Fastener. One fastener located equidistant from each corner. (Four fasteners per skylight)

9) #10 X .375" stainless steel flange @ 4" from each corner, maximum 10" on center.

10) Minimum distance = 4" from angle lip to roof surface for shingles or BUR without insulation. For insulation and life roof add the height and insulation thickness to the 4" minimum height.

11) All units equal to or less than 32 square feet will be accepted under this NOA.



Roof deck by others. Minimum thickness = 1" for 1" fastener penetration. All roof details shall comply with Chapter 15 of the Florida Building Code.

**Dade Self Flashing Model**

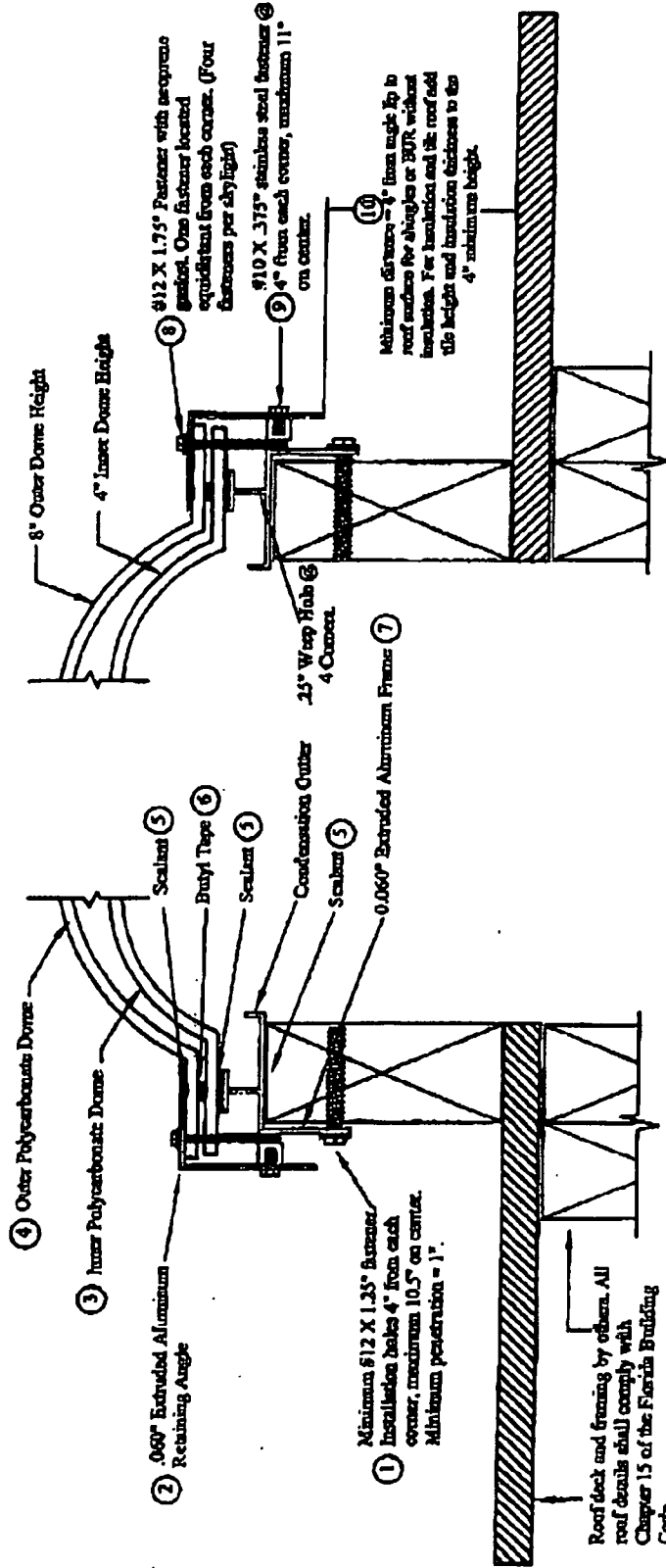
**RICHARD BOYETTE**  
 FL PE # 42485  
 4031 COCONUT BLVD  
 ROYAL PALM BCH FL 334  
 561-790-5766

Approved as complying with the Florida Building Code  
 Date: 04/15/03  
 NOA# 03-0709-07  
 Miami Dade Permit Center  
 Ibrahim

Date: 04/01/03 Draw. #DSF-1  
 Drawing: Dade Self Flashing  
 Sheet#: 2 of 2  
 Design Pressure: 60psf +/-  
 Max. Suction: 10.400 v.c.c.

**MAXIM INDUSTRIES, I**  
 6170 Vanderbilt Avenue Dallas, TX  
 Phone: 214 874 1557

- ① Minimum #12 X 1.25" fastener by others. Pre-punched installation holes 4" from each corner, maximum 10.5" on center. Minimum penetration = 1".
- ② #609" X 1.5" X 1.75" 6063-T6 extruded aluminum retaining angle. Aluminum angle mitered and welded @ 4 corners.
- ③ 52.5" X 100.375" X .118" Hyzoid inner polycarbonate dome @ 4" height. NOA: #01-0709-07.
- ④ 52.5" X 100.375" X .118" Hyzoid outer polycarbonate dome @ 8" height. NOA: #01-0709-07.
- ⑤ OSI PR 256 urethane sealant. Located between aluminum angle retainer and top dome & between bottom dome and aluminum frame.
- ⑥ Butyl tape: 1" X .125" located between top and bottom domes.
- ⑦ 6063-T5 Extruded Aluminum Frame. 0.060" slope mitered end welded @ 4 corners.
- ⑧ #12 X 1.75" Fastener. One fastener located equidistant from each corner. (Four fasteners per skylight)
- ⑨ #10 X .375" stainless steel fastener @ 4" from each corner, maximum 11" on center.
- ⑩ Minimum clearance = 4" from angle lip to roof surface for shingles or BUR without insulation. For insulation and tile roof add tile height and insulation thickness to the 4" minimum height.
- ⑪ All units equal to or less than 32 square feet will be accepted under this NOA.



**Dade Curb Mount Model**  
**RICHARD BOYETTE**

FL PE # 42485  
4031 COCONUT BLVD  
ROYAL PALM BCH FL 33411  
561-790-5766

Approved as complying with the Florida Building Code  
Date: 05/15/03  
NOA# 01-0709-07  
Miami Dade Building Control Division  
By: *[Signature]*

**MAXIM INDUSTRIES, INC**  
6170 Vanderbilt Avenue Dallas, TX 75214

Date: 04/01/03 Draw. #DCM-1  
Drawing: Dade Curb Mount  
Sheet#: 1 of 2  
Design Pressure: 60psf +/-  
Max. Skylight ID: 51.75" X 99.75"

Roof deck and framing by others. All roof details shall comply with Chapter 15 of the Florida Building Code.

Maxim Industries, Inc.

**NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED**  
(For File ONLY. Not part of NOA)

**A. DRAWINGS**

- 1. Drawing No. DCM-1 & DSF-1, sheet 1 and 2 of 2, titled "Dade Curb Mount & Dade Self Flashing", prepared by Maxim Industries, Inc, dated 04/01/03, with no revision, signed and sealed by R. Boyette, P.E.

**B. TESTS**

- 1. Test report on Large Missile Impact Test per TAS 201, Cyclic Load Test per TAS 203 and Uniform Static air Pressure Test per TAS 202 on "Dade Self-Flashing, Dade Curb mount", prepared by Architectural Testing, Inc, report No. 01-43381.01 issued on 01/29/03, signed and sealed by S. M. Uric, P.E.

**C. CALCULATIONS**


- 1. Anchor calculations prepared by Richard Burette, signed and sealed by R. Burette on 02/11/03

**D. MATERIAL CERTIFICATIONS**

- 1. Notice of Acceptance No. 01-0709.07 issued to Sheffield Plastics, Inc on 08/23/01, expiring on 08/27/06.

**E. STATEMENTS**

- 1. Code compliance letter issued by Richard Burette, PE on 02/11/03, signed and sealed by R. Boyette, PE.



\_\_\_\_\_  
**Candido H. Font, P. E.**  
 Senior Product Control Examiner  
 NOA No 03-0224.11  
 Expiration Date: May 15, 2008  
 Approval Date: May 15, 2003



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

**MIAMI-DADE COUNTY, FLORIDA  
METRO-DADH FLAGLER BUILDING  
140 WEST FLAGLER STREET, SUITE 1603  
MIAMI, FLORIDA 33130-1563  
(305) 375-2101 FAX (305) 375-2908**

**NOTICE OF ACCEPTANCE (NOA)**

**Maxim Industries, Inc.  
6170 Vanderbilt Avenue  
Dallas, TX 75214**

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

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

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

**DESCRIPTION:** Dade Curb-Mount & Self-Flashing Skylight.

**APPROVAL DOCUMENT:** Drawing No. DCM-1 & DSP-1, titled "Dade Curb Mount & Dade Self Flashing", sheets No 1 and 2 of 2, prepared by Maxim Industries, Inc dated 04/01/03 with no revisions bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

**MISSILE IMPACT RATING:** Large & Small Missile Impact

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

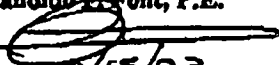
**RENEWAL** of this NOA shall be considered after a renewal application has been filed and there has been no change in the applicable building code negatively affecting the performance of this product.

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

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

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

This NOA consists of this page 1 & approval document mentioned above  
The submitted documentation was reviewed by Candido E. Font, P.E.

  
5/15/03



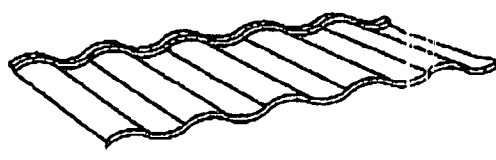
**NOA No 03-0224.11  
Expiration Date: May 15, 2008  
Approval Date: May 15, 2003  
Page 1**



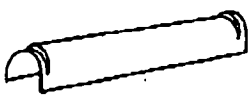
<b>PAGE</b> <b>C-1</b>	<b>SECTION</b> <b>Panels and Accessories</b>
<b>REVISED DATE</b> 04.03.01	<b>PAGE TITLE</b> <b>Continental</b>

\* Drawings are not to scale.

	<u>IMPERIAL</u>	<u>METRIC</u>
<b>"CONTINENTAL" TILE</b>		Part # 10-XX-01
Overall Length	49 1/4"	1250 mm
Length of Cover	47 1/4"	1200 mm
Width of Cover	15 13/16"	402 mm
Upstand	1/8"	22 mm
Tile Coverage	5.2 ft <sup>2</sup>	0.48 m <sup>2</sup>
Weight	6 lbs	2.8 kg



<b>BARREL TRIM</b>		Part # 10-XX-02
Overall Length	16 1/2"	420 mm
Length of Cover	15 3/16"	402 mm
Width	5 1/2"	140 mm
Overall Height	3 1/2"	90 mm
Weight	1.2 lbs	0.6 kg



**END DISC** Part # 10-XX-05



<b>VENTED TOP ROW</b>		Part # 10-XX-12
Overall Length	8'-0"	2443 mm
Length of Cover	7'-10 1/2"	2400 mm
Rear Upstand	4"	101 mm
Horizontal Width	3"	76 mm
Profiled Down Turn	2"	51 mm
Free Area	45 in <sup>2</sup>	290 cm <sup>2</sup>
Weight	8.5 lbs	3.9 kg

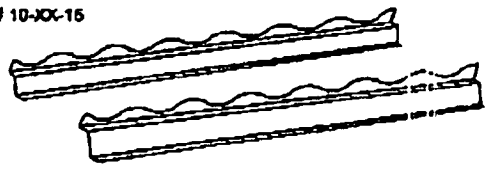


<b>METAL RIDGE/HIP BACKER</b>		Part # 10-XX-21
Overall Length	10'-0 3/4"	3087 mm
Overall Height	5"	127 mm
Overall Width	6"	152 mm
Thickness	.019" min.	0.48 mm min.
Weight	5.1 lbs	2.3 kg

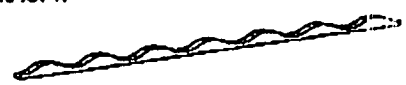


Note: Available vented with special request. (Part # 10-XX-22)  
 Note: Part # 10-XX-21 and 10-XX-22 are not boxed.

<b>METAL BIRD EDGE 3" / 5"</b>		Part # 10-XX-13 / Part # 10-XX-15
Overall Length	8'-0"	2443 mm
Profiled Height	2"	51 mm
Pitched Return	3/4"	19 mm
Kick	1/2"	12 mm
Weight	3.2 / 4.6 lb	1.5 / 2 kg



<b>CONTINENTAL UNIVERSAL CLOSURE</b>		Part # 10-XX-17
Length	47 1/4"	1200 mm
Width	3/4"	19 mm
Weight	1.4 oz	40 g



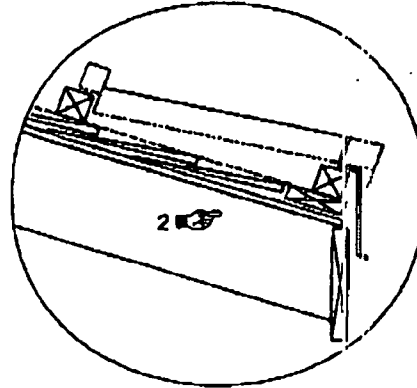
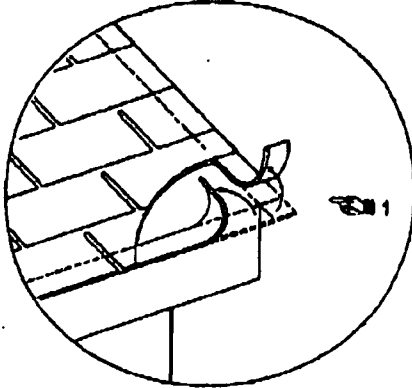
<b>VALLEY FLASHING</b>		Part # 10-XX-04
Overall Length	8'-0"	2443 mm
Length of Cover	7'-8"	2340 mm
Horizontal Flange	1"	25 mm
Gutter Width	5"	127 mm
Upstand	1 1/8"	35 mm
Weight	8.7 lbs	3 kg



	SECTION <b>Re-Roofing</b>	PAGE <b>F-1</b>
	PAGE TITLE <b>Re-Roof Preparations</b>	REVISED DATE <b>04.03.01</b>

**EAVES AND GABLE PREPARATIONS**

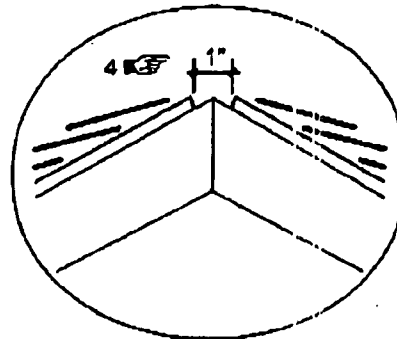
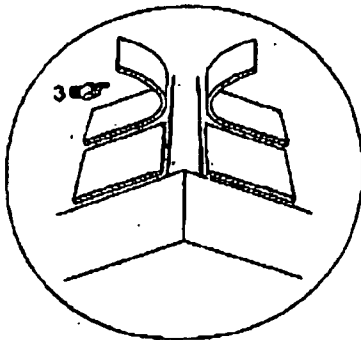
All existing protruding roofing should be removed to a point inside the vertical line of the fascia (note 1). In cases of multiple layers of shingles or cedar shakes, it will become necessary to install a filler, shim or thicker starter batten (note 2).



**NOTE:** If the starter course is not held in the same plane as the balance of the roof the profiles will look distorted. Please ensure proper shimming of the eave batten.

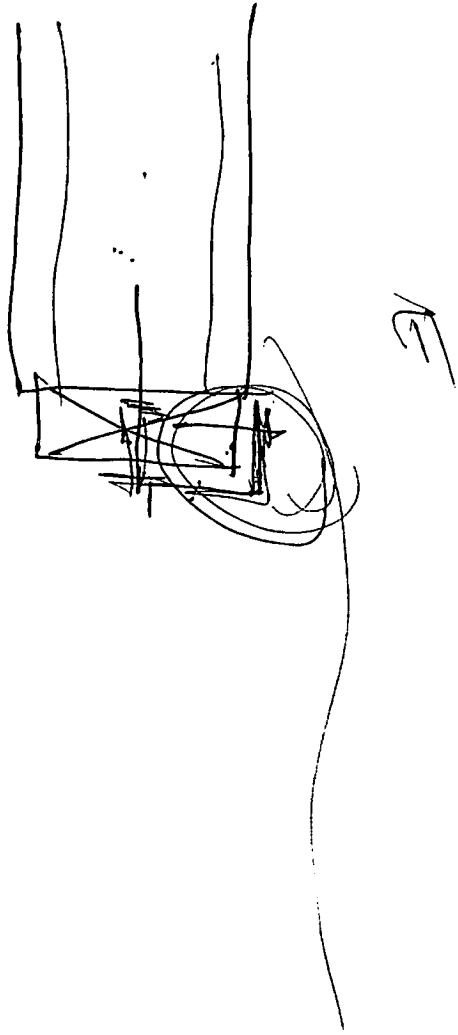
**HIP AND RIDGE PREPARATIONS**

Remove any existing hip and ridge caps that protrude above the plane of the roof (note 3). If the attic space is to be ventilated through the ridge, cut back the existing roof materials and decking to provide a minimum 1" wide slot along the required area (note 4).



#7850

SPEZ. APP. M.E.H.





8112

**TOWN OF SEWALL'S POINT**

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

**CORRECTION NOTICE**

ADDRESS: 2 OAKWOOD DR

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

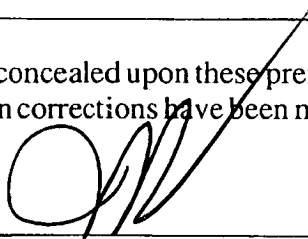
DRY-IN / WORK IN PROGRESS  
ON FLAT DECK

ROOF UNDERLAYMENT / BASE SHEET  
DOES NOT MEET PRODUCT  
APPROVAL SUBMITTED

DECK NOT NAILLED PER F.B.C  
2004

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

DATE: 3/17

  
\_\_\_\_\_

INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri 3/17, 2006

Page 2 of     

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7897	BARTELS	RIP RAP	PASS	CLOSE
4	3 ST. LUCIE COURT TROPIC MARINE			INSPECTOR: <i>[Signature]</i>
7097	BARTELS	DOCK REPAIR	PASS	CLOSE
4	3 ST LUCIE COURT TROPIC MARINE			INSPECTOR: <i>[Signature]</i>
<del>8112</del>	<del>MACLEAN</del>	<del>DOWN</del>	<del>FAIL</del>	
3	2 OAKWOOD DR SUPERIOR ROOFING	IN PROGRESS	FAIL	INSPECTOR: <i>[Signature]</i>
8004	BARTELS	FINAL DOCK FEE	PASS	CLOSE
4	3 ST LUCIE CT CHAMPION ELECT.			INSPECTOR: <i>[Signature]</i>
8062	CARLTON	FINAL ROOF	FAIL	
9	PEREWINNUECE ROOF CONCEPTS			INSPECTOR: <i>[Signature]</i>
	<del>GOLDMAN</del>			
	<del>H SUMMER</del>			
	<del>O.B.</del>			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:

OTHER: \_\_\_\_\_

# **B & B**

**Engineers Consultants and Development Inc.**

706 South 7<sup>th</sup> Street  
Ft. Pierce Fl. 34950  
Phone: (772) 708-7785  
Fax: (863) 467 1292

May 17, 2006

*FILE*

## **DRY-IN INSPECTION (WITH STRUCTURAL CERTIFICATION)**

Project: Re-Roof installation for **Darlene & Joseph Mackey** Residence at:  
2 Oakwood Dr. Seawall' Point, Fl.34996  
Permit No. 8112

Prepared for: **Town of Seawall's Martin County Building Department**

Client: **Superior Roofing Systems Inc. 498 S. Market Ave. Ft. Pierce, Fl 34982**

### **Background.**

On May 08, 2006, B & B Engineering Inc. was requested by Superior Roofing Systems Inc. a Roofing Contractor to certify the installation of the dry-in prior the installation of new roof cover for the above residence.

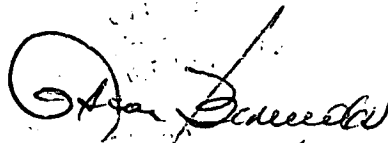
### **Certification:**

B & B Engineering Inc Certify that the above Re-Roof Sheathing re-nailing has been properly installed to meet the required wind loading as per ASCE 7-98, Exposure B. Nails were nailed through the peel and stick underlayment with 10d ring shank nails at 6" on center edge and 8" center field, also a 30# 226 felt with a minimum of 6" side lap was placed on top and secured to the roof deck with corrosion resistant tin-cap and 1 1/2 annular ring shank nails 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll, as per the 2004 FBC, the Town of Seawall' Point Building Code, Miami-Dade County NOA No 02-0128.02 and as per manufacture recommendations. Battens were installed using 2x2 decay resistant lumber over the underlayment at a maximum spacing of 15-13/14" using # 12 4" screws at 24" o.c. and at 1/2" from each end To the best of our knowledge and professional ability, it is B & B Engineering Inc. opinion that the work was properly done.

### **Limitations.**

Our professional services has been performed, our finding obtained and our opinions prepared in accordance with general accepted structural engineering principles and practices. The scope of the inspection performed on May 12, 2006 was intended to assure the installation of the Sheathing and to assure its integrity.

Approved,



*5/18/06*

Oscar M. Bermudez, PE  
FL License # 55141



8112

## TOWN OF SEWALL'S POINT

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

### CORRECTION NOTICE

ADDRESS: 2 OAKWOOD

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.

ROOF FINAL

SUBMIT PRODUCT APPROVAL  
& MANU. INSTALLATION  
INSTRUCTIONS FOR SKYLIGHTS-

PROVIDE METAL ROOF MANUFACTURERS  
DETAIL FOR HIP CAP  
TERMINATION & VENT PIPE  
FLASHING DETAIL

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

DATE: 5/26


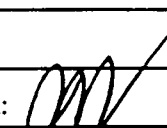
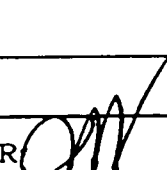
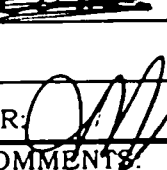
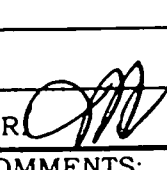
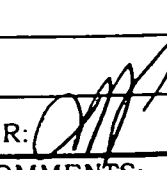
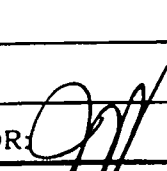
INSPECTOR

**DO NOT REMOVE THIS TAG**

# TOWN OF SEWALL'S POINT

## Building Department Inspection Log

Date of Inspection:  Mon  Wed  Fri 5-26, 2006 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8100	DALY	ROOF IN PROG.	PASS	
1	5 WORTH ALL-AMER.			INSPECTOR: 
8184	TAPPER	Plumbing	PASS	
2	22 Island Rd Advantage Pools			INSPECTOR: 
8216	Cary	Rough gas	PASS	
8	76 S River Rd Propane Disc.			INSPECTOR: 
<del>8112</del>	<del>MacKay</del>	<del>Final</del>	<del>PASS</del>	<del>INSPECTOR</del>
4	2 Oakwood Dr Superior Roof.			INSPECTOR: 
8183	Zigler	Tin Tag & Metal 10:00	PASS	
7	17 Emanita Way Ralph Wilson Roof.	215-4460- must be there code		INSPECTOR: 
Tree	Wilson	Tree	PASS	
9	5 St. Lucie Ct M-Trees			INSPECTOR: 
Tree	Wilson	Tree	PASS	
5	11 Riverview Dr Accurate Tree			INSPECTOR: 
OTHER: _____				



# TOWN OF SEWALL'S POINT

## Building Department - Inspection Log

Date of Inspection:  Mon  Wed  Fri JUNE 5, 2006

Page 1 of 2

SP01-20060014

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
M.C.	DAVIS	DRY-IN	PASS	
1	11 MIRAMAR MARZO			INSPECTOR: <i>[Signature]</i>
8119	Cotler	WINDOWS	PASS	FASTENERS &
3	60 S River Rd Steve Conway	FINAL	(CLOSE)	BUCKS WERE NOT INSPECTED INSPECTOR: <i>[Signature]</i>
#1850	DESANTIS	FINAL GAS	PASS	CLOSE
4	82 SSPR SPECIALTY APPL.			INSPECTOR: <i>[Signature]</i>
8112	MACKAY	FINAL ROOF	PASS	CLOSE
5	2 OAKWOOD SUPERIOR ROOF			INSPECTOR: <i>[Signature]</i>
1541	LIPPISCH	FINAL FENCE	PASS	CLOSE
6	18 Reiview DR OB			INSPECTOR: <i>[Signature]</i>
7	Valco 109 Hillcrest Ct	Work w/o Permits		DID NOT SEE UNUSUAL ACTIVITY INSPECTOR: <i>[Signature]</i>
7991	Zarvo	STEEL IN WALL	PASS	
8	124 N SPR Buford Const			INSPECTOR: <i>[Signature]</i>

OTHER: