

7 Oakwood Drive

no way
builder

8/30/82

Approval of these plans
relieves the contractor of
complying with the Town of Sewall's
Point's Ordinances, the South Florida
Building Code and the State of Florida
Model Energy Efficiency Building Code.

Single permit fee is allowed
with understanding that unless the
Commissioner incurs another fee
Date 7/82
will be necessary because work is
already started 8/30

TOWN OF SEWALL, S. DOL. FLORIDA
#1505
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 William McGee, Trustee Present address 2700 E. Oakland Pk. Ft. Laud.

Phone 1-566-5464

General contractor East Ocean Constr., Inc. Address 1045 E. Ocean Blvd., Stuart

Phone 286-4933

Where licensed State of Florida License No. CGC 010622

Plumbing contractor Morton's Plumbing License No. 00069

Electrical contractor LaChance Elect. License No. ~~RA 0023529~~ will call

Air-conditioning contractor Commerical Cooling License No. RA 0023529

Describe the building, or alteration to existing building
4 bedroom 3 bath CBS House

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

Subdivision Oakwood Lot No. 10 Area South Sewalls

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 2622

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 100,000

Cost of permit \$ 530 Plans approved as submitted 500 x 30 = 530 or, as marked

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 Charles J. [Signature]

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.

Owner William McGee

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

TOWN RECORD
Approved by Building Inspector (date) 8/30/82 Date submitted _____
Inspector's initials [Signature]
Approved by Town Commissioner (date) 8/30/82 Commissioner's initials [Signature]
Certificate of Occupancy issued (date) 5/10/83

SEE ATTACHMENTS #1505



STATE OF FLORIDA
DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

APPLICATION FOR SEPTIC TANK PERMIT
AND FINAL INSPECTION FORM

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

Authority:
Chapter 381, 386, 387, FS
Chapter 100-B, FAC

#35 WELL FEE IF WELL NOT INSTALLED AT
TIME OF SEPTIC SYSTEM INSPECTION
HD 82-407

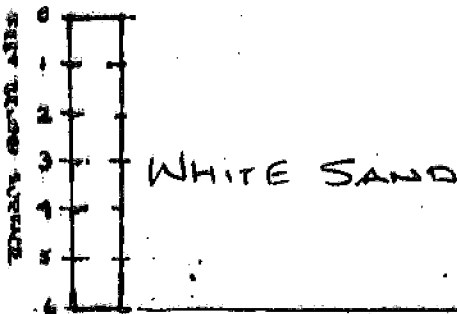
Permit Number HD 82-406

Name of Applicant EAST OCEAN CONSTRUCTION Telephone 286-4933
Mailing Address of Applicant 1045 E. OCEAN BLVD., STUART
To Be Installed at: (Give Street Address)* OAKWOOD DRIVE
Lot 10 Block — Subdivision OAKWOOD SUBDIVISION
Plat Book & Page BK 8 PAGE 53 Date Recorded 2/20/81
Residential: No. Living units 1 No. Bedrooms 4
Commercial: Type of Business RES No. People — No. Toilets 3
*Note: Attach site location map and other supportive documents.
Signature of applicant [Signature]

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 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? —
Is the proposed or existing public water line within 10 ft. of the propo
septic system? NO
There is 1300 square feet of unobstructed land for future expansion
the drainfield.

SOIL PROFILE AND PERCOLATION DATA



Water table..... 72"
Wet season water table. 72"
Compacted fill of..... -0- req'd.
Compacted fill check by _____
Date..... _____

Certified by: RONALD J. PRICE
Fla. Professional No.: 17788
Date: 8/16/82 Job No. 82-217
Percolation Rate 1 Min/Inch
Soil Identification: SANDY
Class _____ Group _____

INSTALLATION SPECIFICATIONS

Septic Tank Capacity 1050 Gallons Absorption Bed size.... 350 Square F
Dosing Tank Capacity _____ Gallons Lateral Drainfield size _____ Square F
Grease trap Capacity _____ Gallons Sand Filter size..... _____ Square F

Specifications:

8-24-82
Date Processed

THIS PERMIT EXPIRES ONE (1)
YEAR FROM DATE OF ISSUANCE

Robert B. Wainwright, R.S.
Signature of Sanitarian

MARTIN County Health Department

FINAL INSPECTION DATA

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

081954

This instrument was prepared by
Name: James R. Williams
Address: P. O. Box 118
Stuart, Florida 31

405-344

Warranty Deed

(SIMPLE FORM - SEVEN (7) PAGES)

Warranty Deed, Made this 2nd day of March 1981, at

ROBERT E. PAW, Individually and as Trustee,

of the County of Martin, State of Florida, grants

WILLIAM E. MOORE, as Trustee

whose post office address is 505 N. E. Ocean Blvd., Stuart

of the County of Martin, State of Florida

for and in consideration of the sum of _____

TWO HUND 12/100 (\$12.00)

of lawful money of the United States to said grantee in hand paid by said grantee, the receipt whereof is hereby acknowledged and admitted to the said grantee, and grantee's heirs and assigns forever, the said grantee, his heirs and assigns in Martin County, Florida, to-wit:

the North one-half of Lot 4 of the Subdivision of Lot 1 of Miles
of Acres, according to map of Commissioner's Subdivision as recd
in Plat Book 5, Page 59, Brevard County (now Martin County), Florida, 2d
Edition. More particularly described as follows: Begin at the E
corner of the Northwesterly line of said Lot 4 intersects the Westerly right
of way line of the Small's Point Road; thence proceed in a West
direction along said Northwesterly line of Lot 4 a distance of 795 feet,
thence to the Westerly right of way line of the proposed Town
of Small's Point Road; thence proceed in a Southeasterly direction
along said Westerly right of way of said proposed Town of Small's Point Road
a distance of 120.00 feet Southerly of, when measured along
said Lot 4, thence proceed Easterly along said boundary a distance
of 120.00 feet or less, to a point on the Westerly right of way line
of the Small's Point Road; thence proceed Northwesterly to Point of Begin
ning of said Lot 4, 12, 11, and 12, of the Subdivision, as recd
in Plat Book 5, Page 59, Martin County, Florida.

Witness my hand and the hand of said grantee, this _____ day of _____ 1981.

Robert E. Paw

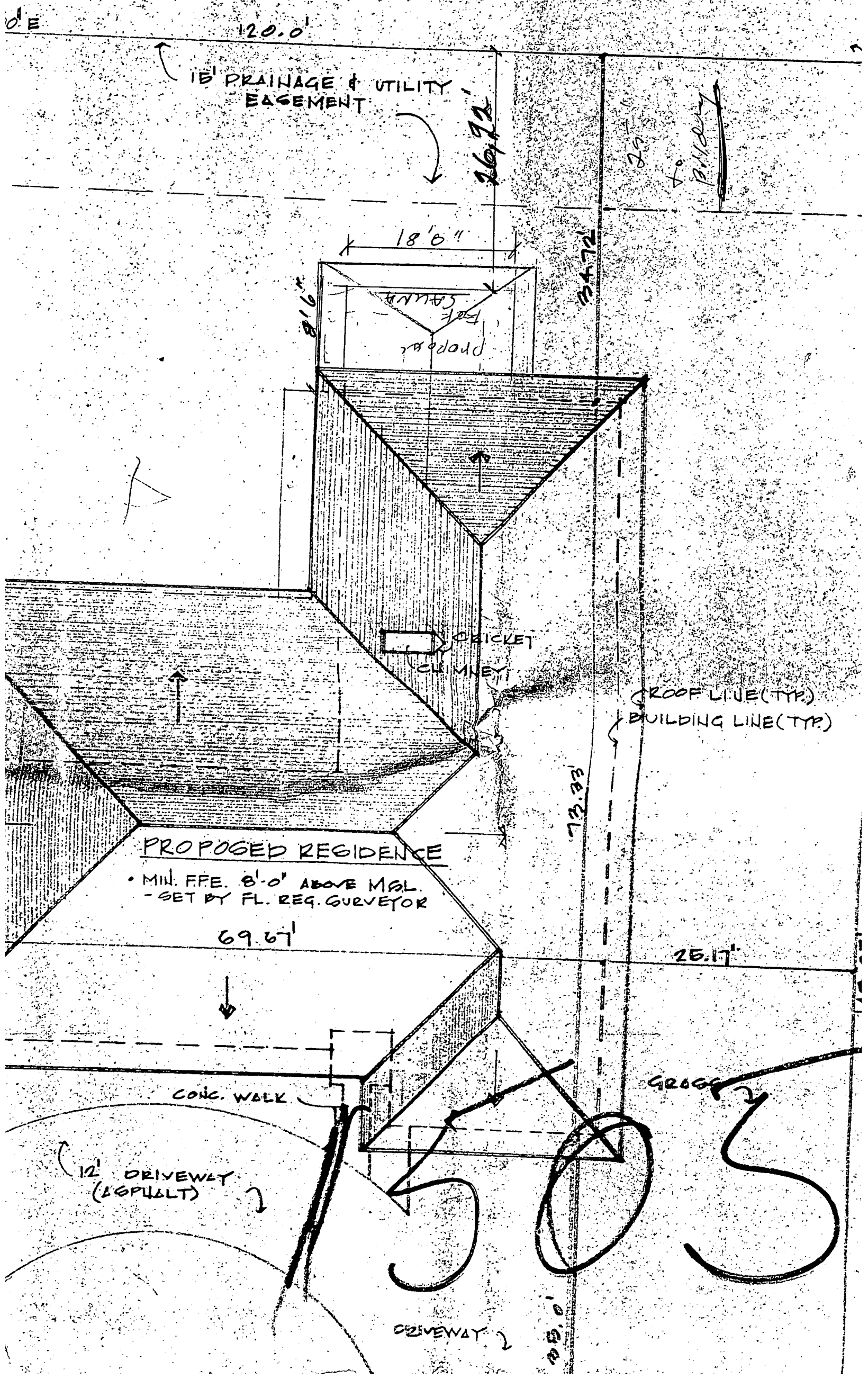
Notary Public for the State of Florida



517-2234

Commission of the
Notary Public for the State of Florida

2. All walls, fences, hedges or other enclosures, outside of building lines, shall not be over five (5) feet in height from the front line of property back to the front building line, and not more than seven (7) feet in height elsewhere, measured on both sides of the wall, fence, hedge or other enclosure from the finished grade of the lot, except that where the front or rear property line borders on a bay or canal, wall, fence or hedge heights shall be maintained at not in excess of three (3) feet above the finished grade of the lot or bulkhead, back to the nearest building line and no wall, fence or hedge along the property line or bulkhead on the water shall exceed three (3) feet in height. (Ord. No. 111, § 4, 9-13-78; Ord. No. 140, 8-10-83)
 3. Notwithstanding the foregoing, hedges located along a side lot line behind the front building line or along a rear lot line may exceed the seven (7) foot height limitation imposed in paragraph 2 above, so long as the owners of property adjacent to such lot line do not file an objection with the Building Inspector of the Town.
 4. On a corner lot, no fence, wall, hedge, shrubbery or other obstruction to vision (except utility poles) shall be permitted within forty (40) feet of the intersection of the adjacent right-of-way lines of the two (2) streets, unless such wall, hedge or other obstruction does not exceed three (3) feet in height and is set back no less than ten (10) feet from the edge of the paved surface of the street or streets. (Ord. No. 140, 8-10-83)
- D. Required Lot Area: Lot areas shall not be less than fifteen thousand (15,000) square feet for any lot existing on [the date of this ordinance], and not less than eighteen thousand (18,000) square feet for any lot created thereafter. The area of any private road, right-of-way or easement to be used for access to or egress from another lot or a street shall be excluded in the determination of required lot area. For the purposes of this provision, lots within a subdivision shall be deemed to be created on the date that an untermiated preliminary plan approval was granted by the town for such subdivision. (Ord. No. 145, 2-8-84)



120.0'

15' DRAINAGE & UTILITY EASEMENT

16.72'

25'

to property

18' 0"

8' 6"

34.72'

CRICKET CHIMNEY

ROOF LINE (TYP.)
BUILDING LINE (TYP.)

PROPOSED RESIDENCE

- MIN. FFE. 8'-0" ABOVE MSL.
- SET BY FL. REG. SURVEYOR

69.67'

73.83'

25.17'

CONC. WALK

GRASS

12' DRIVEWAY (6' SPLT)

DRIVEWAY

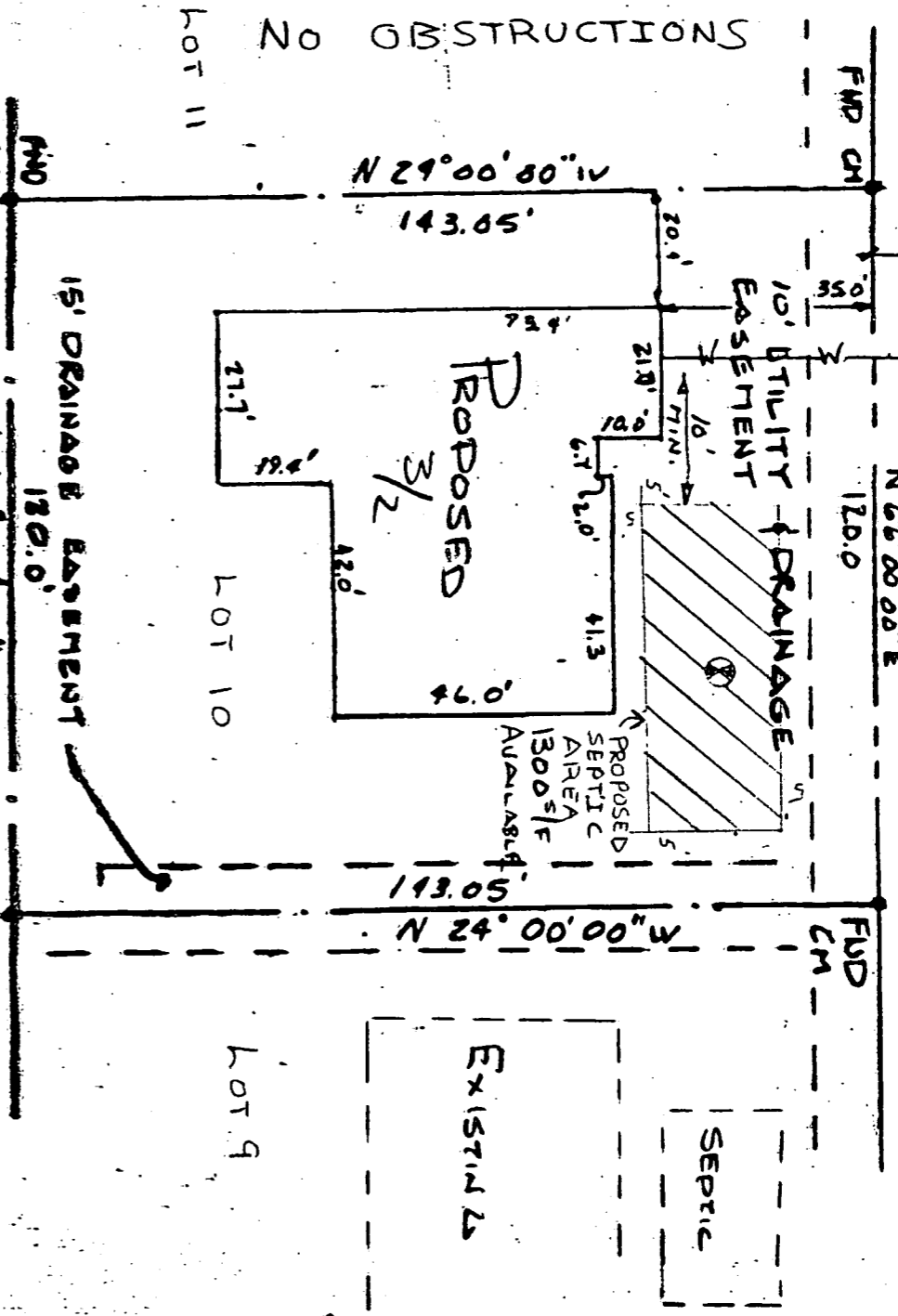
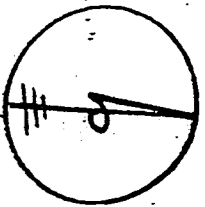
25.0'

SOS

NO OBSTRUCTIONS

CITY WATER
DARWOOD DRIVE
(30' WIDE ROAD)

SCALE: 1" = 30'



PREPARED BY
PHILIP ENGINEERING CO.
STUART, FLORIDA

PREPARED FOR
EAST OCEAN CONSTRUCTION

* All Lots City Water

Plot Plan
-- DESCRIPTION --

BEING KNOWN AS LOT 10, "ONKWOOD 3/2"
AS RECORDED IN PLAT BOOK 8
PAGE 53, PUBLIC RECORDS OF
MARTIN COUNTY, FLORIDA.

DWG. BY: BK DATE: 8/16/82 DRAWN BY: DATE: Job No. 82-247

SHEET 3 OF 3

Prepared by:
Price Engineering Company
MARTIN COUNTY HEALTH DEPARTMENT
131 E. 7th Street
Stuart, Florida 33494

Applicant: EAST OCEAN CONSTRUCTION

Legal Description: LOT 10, "OAKWOOD 2/D" BK B, PG. 53

Present water depth 6 feet below natural grade, not including fill.

Wet season water depth 6 feet below natural grade, not including fill.

Elevation of crown of road, midway between front lot boundary 5.54'


Elevation of natural grade at area of septic system 5.75'

Average depth of fill under proposed building 0 feet above natural grade.

Average depth of fill in area of septic system 0 feet above natural grade.

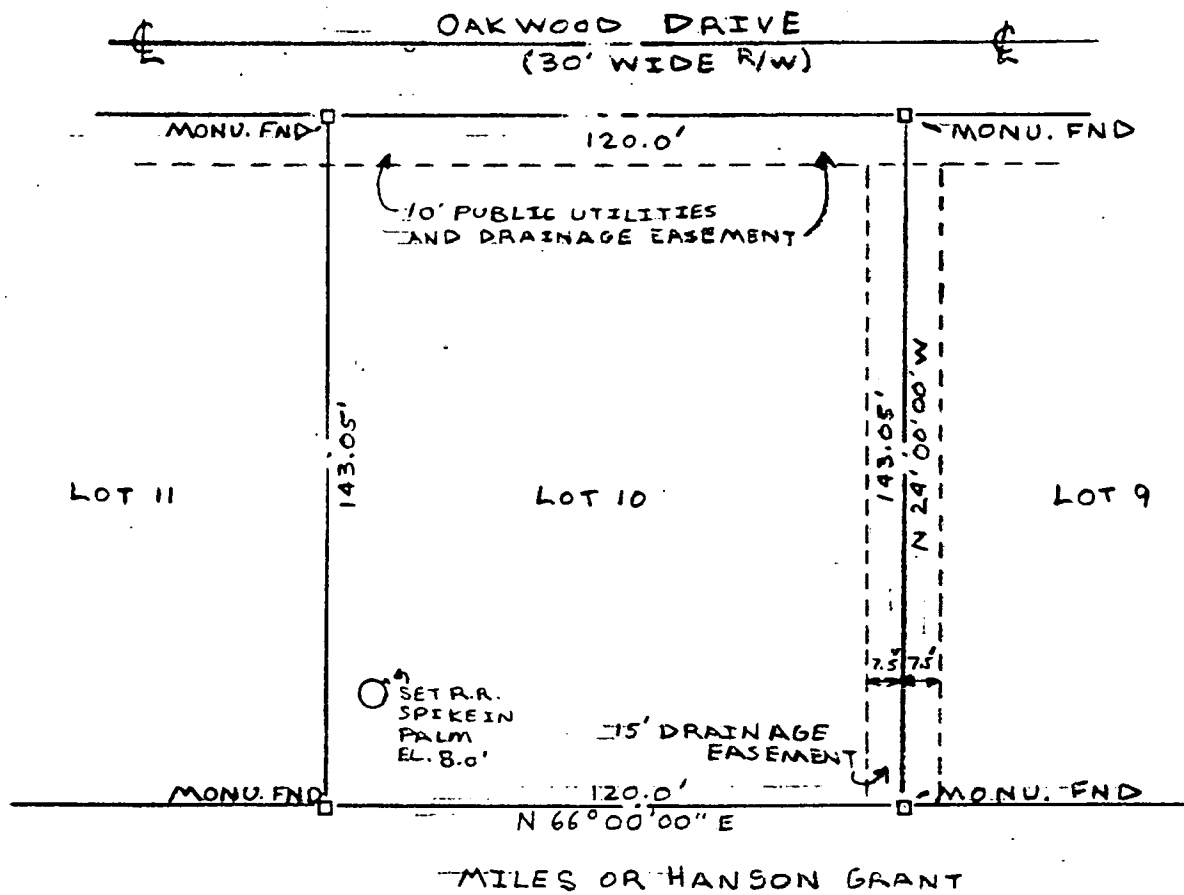
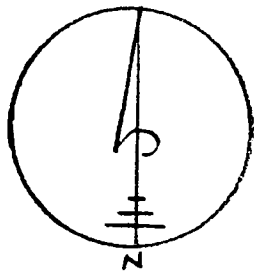
Surface area of required fill in area of septic system 450 feet².

- NOTE: 1. 150 feet² area of fill required for each bedroom in area of septic system.
2. Fill has been compacted to a density comparable to the surrounding natural soil.
3. Elevation of crown of road can be assumed to be 10.00


CERTIFIED BY: Ronald J. Price

Florida Professional Number 17788

Date: 8/16/82 Job Number 82-247

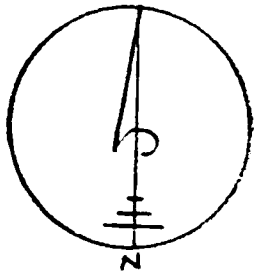


BOUNDARY SURVEY

DESCRIPTION

BEING KNOWN AS LOT 10,
 "OAKWOOD SUBDIVISION",
 AS RECORDED IN PLAT
 BOOK 8, PAGE 53, PUBLIC
 RECORDS OF MARTIN
 COUNTY, FLORIDA.

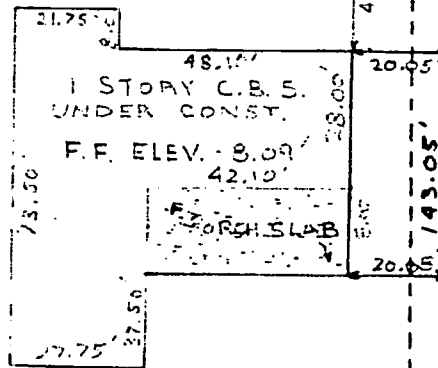
<p>PRICE ENGINEERING COMPANY Engineers - Planners - Surveyors 1320 PALM BEACH ROAD STUART, FLORIDA 33494</p>	<p>PREPARED FOR EAST OCEAN CONSTRUCTION</p>	<p><i>Ronald J. Price</i> RONALD J. PRICE</p>
<p>DRAWN: BK SCALE: 1"=40' DATE: 8/16/82</p>	<p>ISSUED BY _____ DATE _____</p>	<p>FLORIDA LICENSE NO. 2683</p>
<p>W.O. NO. 82247 PROJECT NO. 2152</p>		



OAKWOOD DRIVE
(30' WIDE R/W)

MONU. FND 120.0' MONU. FND

10' PUBLIC UTILITIES
AND DRAINAGE EASEMENT



LOT 11

143.05'

LOT 9

MONU. FND 120.0' MONU. FND

75' DRAINAGE
EASEMENT

SET R.A.
SPIKE IN
PALM
EL. 8.0'

N 66° 00' 00" E

MILES OR HANSON GRANT

BOUNDARY SURVEY

DESCRIPTION

BEING KNOWN AS LOT 10,
"OAKWOOD SUBDIVISION",
AS RECORDED IN PLAT
BOOK 8, PAGE 53, PUBLIC
RECORDS OF MARTIN
COUNTY, FLORIDA.

PRICE ENGINEERING COMPANY

Engineers - Planners - Surveyors
1320 PALM BEACH ROAD
STUART, FLORIDA 33494

PREPARED FOR

EAST OCEAN CONSTRUCTION

Ronald J. Price
RONALD J. PRICE

DRAWN: BK SCALE: 1"=40' DATE: 8/16/82

ISSUED BY _____ DATE _____

FLORIDA LICENSE NO. 2623

REVISED TEE-JM 9/24/82 DRAWN: BK

W.O. NO. 22247 PROJECT NO. 2152

505

FRASER ENGINEERING AND TESTING, INC.

PHONE: (305) 481-7508

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

Report of DENSITY OF SOIL IN PLACE

ASTM D2922

Client: East Ocean Construction

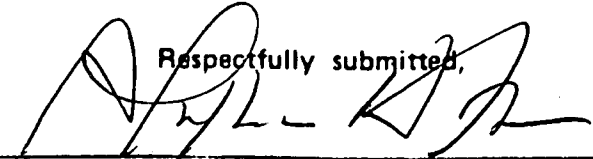
Date: August 19, 1982

Contractor: Client

Site: Lot 10, Sewalls Point
Oakwood Dr.
Foundation Pad

Test No.	Location	Elevation	In Place Dry Density	Moisture Density Relationship		Percent Compaction
				Test No.	Max. Dry Density	
59300	Northwest Corner	1 - 2'	102.4	59300	104.6	97.9
	Northwest Corner	0 - 1'	106.5		108.8	97.9
	Center	1 - 2'	102.3		104.6	97.8
	Center	0 - 1'	106.6		108.8	98.0
	Southeast Corner	1 - 2'	102.1		104.6	97.6
	Southeast Corner	2 - 3'	103.1		104.6	98.6
	Southeast Corner	0 - 1'	106.6		108.8	98.0
All elevations below slab grade.						

Copies Client - 2

Respectfully submitted,


ALEXANDER H. FRASER, P. E.

FRASER ENGINEERING AND TESTING

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

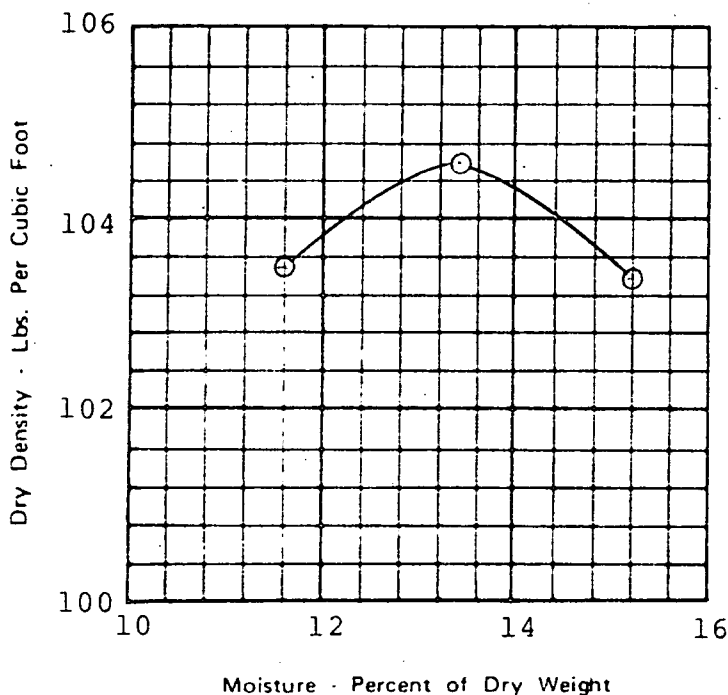
Report
 of
MOISTURE DENSITY RELATIONSHIP
 ASTM 1557-70

Client: East Ocean Construction

Date: August 19, 1982

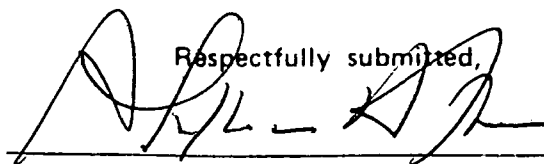
Contractor: Client

Site: Lot 10, Sewalls Point
 Oakwood Dr.



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
59300	A	Composite	13.4	104.6	Brown fine sand.

Copies

Respectfully submitted,

 ALEXANDER H. FRASER, P. E.

FRASER ENGINEERING AND TESTING

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

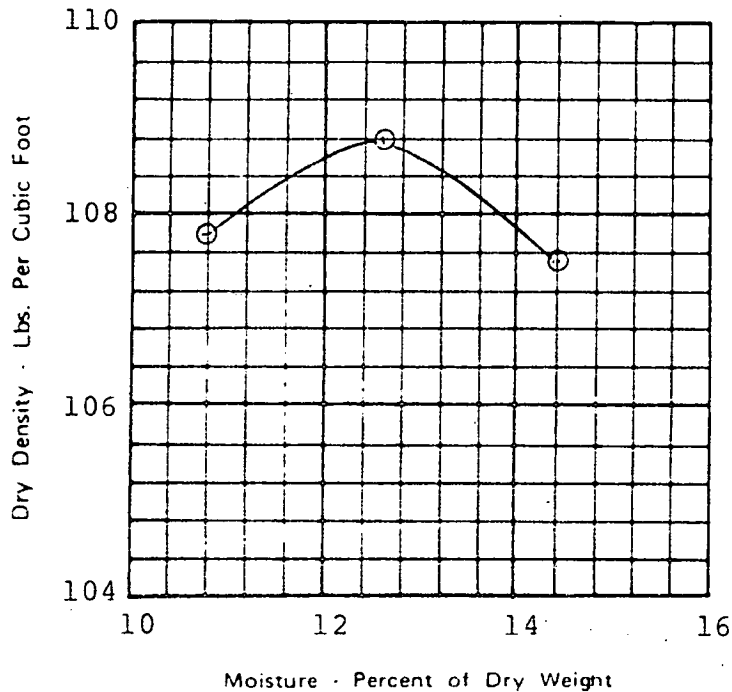
Report
 of
MOISTURE DENSITY RELATIONSHIP
 ASTM 1557-70

Client: East Ocean Construction

Date: August 23, 1982

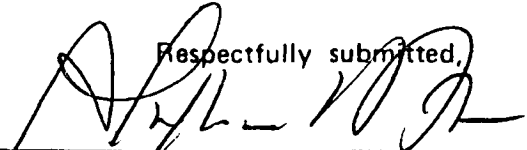
Contractor: Client

Site: Lot 10, Sewalls Point
 Oakwood Dr.



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description.
59300	A	Composite	12.6	108.8	Brown, slightly silty, slightly clayey, fine sand.

Copies

Respectfully submitted,

 ALEXANDER H. FRASER, P. E.



FLORIDA MODEL ENERGY EFFICIENCY CODE FOR BUILDING CONSTRUCTION

BOB GRAHAM **SECTION 9** **GOVERNOR'S ENERGY OFFICE**
GOVERNOR **POINTS METHOD** **LEX HESTER, DIRECTOR**
PREPARED BY: BRABHAM KUHN'S DEBAY - CONSULTING ENGINEERS

PROJECT NAME AND ADDRESS	RESIDENCE / WILLIAM MCGEE	JURISDICTION
		BUILDING PERMIT NO.
BUILDER	EAST OCEAN CONSTRUCTION INC	
OWNER		

← TO BE FILLED IN BY BLDG OFFICIAL
 ← TO BE FILLED IN BY DESIGNER

STATISTICAL DATA																					
ZONE	JURISDICTION CODE	FLOOR AREA	GROSS WALL AREA	GLASS AREA	WALL INSUL R-VALUE	ROOF INSUL R-VALUE	EER OR SEER	COP	MAXIMUM ALLOWED EPI	EPI	HEATING SYSTEM TYPE			HOTWATER SYSTEM TYPE			WALL CONSTRUCTION	NUMBER OF UNITS			
STRIP	HEAT PUMP	GAS	OIL	SOLAR	ELEC.	HEAT REC.	GAS	OIL	SOLAR	CBS	FRAME	THIS BUILDING	ENTIRE PROJECT								
8		2588	2120	449	R3/R-11	R-19	8.5		100	71.73	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	1	

THIS DATA TO BE SENT TO THE GOVERNOR'S ENERGY OFFICE BY THE BUILDING OFFICIAL UPON REQUEST

BASE BUDGET	COMMON WALLS	COMMON ROOF	MAXIMUM ALLOWED
	X5	X12	
FROM APPENDIX E	FEWER TOTAL POINTS MEANS GREATER SAVINGS		EPI
CERTIFIED BY:	<i>Ben A. Butth AIA</i>	DATE:	8-30-82
		EPI:	71.73

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

WALLS	CONCRETE	R3-3.9	2120	6.2	13144	WALLS	CONCRETE	R3-3.9	2120	16.6	35192
		R4-5.9		5.0				R4-5.9		15.0	
		R6 & UP		4.4				R6 & UP		13.9	
	FRAME OR BRICK VENEER	R11-18.9		2.5			FRAME OR BRICK VENEER	R11-18.9		13.9	
		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	54	86.5	4671	DOORS	WOOD OR METAL	54	55.4	2992
	INSULATED		84.0	4671		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	2588	1.9	4917			R19-21.9	2588	8.4	21739
		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		4.1	

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		4.1	

SLAB ON GRADE PERIMETER	EDGE INSULATION PERIMETER	WPM	GWP	
	R0 - 2.9	265	28.3	7500
	R3 - 5.9		20.4	
	R6 & UP		12.4	

OR	AREA	GLASS		WOF	GWP
		SINGLE	DOUBLE		
N	86	55.4	38.5	1.	4764
NE		55.4	38.5		
E	117	55.4	38.5	.86	6432 5574
SE		55.4	38.5		
S	180	55.4	38.5	1.	9972
SW		55.4	38.5		
W	66	55.4	38.5	1.	3656
NW		55.4	38.5		
H		22.6	6.8		

DO NOT APPLY INTERIOR SHADING

H = HORIZONTAL GLASS (SKYLIGHTS)

OR	AREA	GLASS				SOF	GSP
		SINGLE		DOUBLE			
		CLR	TIN	CLR	TIN		
N	86	204	176	163	139	1.	15136
NE		309	264	258	218		
E	117	425	360	362	304	.81	34117
SE		418	354	355	298		
S	180	346	294	287	242	.68	35986
SW		418	354	355	298		
W	66	425	360	362	304	.95	22572
NW		309	264	258	218		
H		720	605	627	524		

DO NOT APPLY INTERIOR SHADING

FOR TINTED GLASS SL ≠ 0.83 SEE SEC. 902.2d

TOTAL GROSS WINTER POINTS	54198	TOTAL GROSS SUMMER POINTS	167734
---------------------------	-------	---------------------------	--------

DUCT INSULATION MULTIPLIER	WINTER				SUMMER			
	1" FIBERGLASS	1.18	62328	1" FIBERGLASS	1.18	192894		
	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	62328 x 1.	62328	CSM FROM TABLE 9B	192894 x .76	146600
-------------------	------------	-------	-------------------	--------------	--------

FLOOR AREA (DIVIDE)	62328 ÷ 2588	24.08	FLOOR AREA (DIVIDE)	146600 ÷ 2588	56.65
---------------------	--------------	-------	---------------------	---------------	-------

WINTER POINTS (WP)	24.08	SUMMER POINTS (SP)	56.65
--------------------	-------	--------------------	-------

FORM 900 AND 901 - 789					ZONES - 789	
WINTER POINTS	SUMMER POINTS	HOT WATER POINTS	CREDIT POINTS	PENALTY POINTS	71.73 EPI	
24.08	+ 56.65	-	- 10	+ 1	=	
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	0.83	0.98	1.00	1.00
1-1.99	1.00	0.99	0.85	0.76	0.84	0.98	1.00	1.00
2-2.99	1.00	0.99	0.86	0.77	0.86	0.99	1.00	1.00
3-3.99	1.00	0.99	0.87	0.80	0.87	0.99	1.00	1.00
4-4.99	1.00	0.99	0.89	0.83	0.90	0.99	1.00	1.00
5-5.99	1.00	0.99	0.91	0.86	0.92	1.00	1.00	1.00
6-6.99	1.00	0.99	0.92	0.90	0.94	1.00	1.00	1.00
7-7.99	1.00	1.00	0.94	0.92	0.96	1.00	1.00	1.00
8-8.99	1.00	1.00	0.96	0.95	0.97	1.00	1.00	1.00
9-9.99	1.00	1.00	0.97	0.97	0.98	1.00	1.00	1.00
10-10.99	1.00	1.00	0.98	0.98	0.99	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
1-1.99	1.00	1.00	0.99	0.99	0.98	0.99	0.99	1.00
2-2.99	1.00	0.98	0.95	0.93	0.92	0.93	0.95	0.96
3-3.99	1.00	0.95	0.89	0.87	0.86	0.87	0.89	0.95
4-4.99	1.00	0.93	0.84	0.84	0.80	0.81	0.84	0.91
5-5.99	0.99	0.88	0.80	0.78	0.76	0.76	0.80	0.88
6-6.99	0.99	0.85	0.76	0.72	0.72	0.72	0.76	0.85
7-7.99	0.99	0.83	0.72	0.68	0.70	0.68	0.72	0.83
8-8.99	0.98	0.81	0.69	0.66	0.68	0.66	0.69	0.81
9-9.99	0.98	0.79	0.67	0.64	0.66	0.64	0.67	0.79
10-10.99	0.98	0.78	0.65	0.62	0.65	0.62	0.65	0.78
11-11.99	0.97	0.76	0.63	0.61	0.65	0.61	0.63	0.76
12 & UP	0.97	0.76	0.62	0.59	0.64	0.59	0.62	0.76

30% x 38 15% x 28

9A	HEATING SYSTEM MULTIPLIER (HSM)									
HEAT PUMP	COP	2.0-2.19	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	0.38	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	6.0-6.99	7.0-7.49	7.5-7.99	8.0-8.49	8.5-8.99	9.0-9.49	9.5-9.99	10.0-10.49	10.5-10.99	11.0-11.99	12.0, UP	
	CSM	1.10	0.93	0.87	0.81	0.76	0.72	0.68	0.65	0.62	0.59	0.54	
GAS	COP	11.41-11.44		11.45-11.49		11.50-11.54		11.55-11.59		11.60-11.64		11.65-11.69	11.70, UP
	CSM	1.51		1.25		1.23		1.09		1.00		0.89	

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

9C	HOT WATER CREDIT POINTS (HWP)	
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 UNIT	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

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 5/10/83

This is to request that a Certificate of Approval for Occupancy be issued to Wm McKee
For property built under Permit No. 1505 Dated 8/30/82 when completed in
conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings	9/8/82	} <u>Jay</u>
Rough plumbing	9/8/82 & 10/26/82	
Slab	9/13/82	
Perimeter beam	9/23/82	
Close-in, roof and rough electric	10/26/82	
Final Plumbing	5/10/83	
Final Electric	5/10/83	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector J. Mazzurca date 5/10/83

Approved by Building Commissioner A.C. Strubell date 5/24/83

Utilities notified _____ date

Original Copy sent to _____

(Keep carbon copy for Town files)

1519
Permit No. 1519

TOWN OF SEWALL'S POINT FLORIDA

RECEIVED

OCT 25 1982

APPLICATION FOR A PERMIT TO BUILD A HOUSE OR COMMERCIAL BUILDING

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

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 WILLIAM MCGEE Present address 2700 ~~W~~ E OAKLAND PARK BLVD FT. LAUDERDALE

Phone 286-4933 % EAST OCEAN

General contractor Olympic Pools Address 1565 SW MARTIN Hwy.

Phone 286-6070

Where licensed STATE License No. CPC-011014

Plumbing contractor _____ License No. _____

Electrical contractor _____ License No. _____

Air-conditioning contractor _____ License No. _____

Describe the building, or alteration to existing building _____

Name the street on which the building, its front building line and its front yard will face 7 OAKWOOD DR.

Subdivision OAKWOOD Lot No. 10 Area ~~7500~~

Building area, inside walls (excluding garage, carport, porches, pools, etc.)...square feet 450 SQ FT

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 8000⁰⁰

Cost of permit \$ 45^{XX} Plans approved as submitted _____ or, as marked _____

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 W M King Olympic Pools

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.

Owner Charles McGee
AGENT

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

TOWN RECORD Date submitted 10/25/82

Approved by Building Inspector (date) 10/26/82 Inspector's initials JAM

Approved by Town Commissioner (date) 11/3/82 Commissioner's initials ES

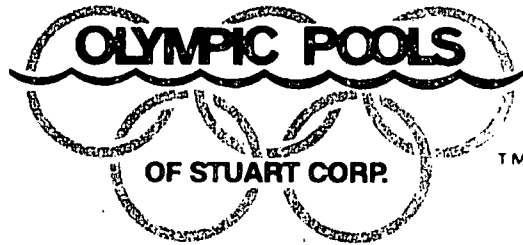
Certificate of Occupancy issued (date) _____

RECEIVED

OCT 25 1982

Ans'd.....

1519



DOUGLAS M. ALLEN
PRESIDENT

TO: Sewall Pt.
~~Martin County~~ Building Dept.

Dear Sir:


Please accept this letter as a POWER-OF-ATTORNEY for Mike
Keefe to sign for and pick up pool permit for: East Ocean
Construction, whose address is 1045 E. Ocean Blvd., Stuart,
~~Vero Beach~~, Florida, for Lot 10, Oakwood S/D, Sewall's Point.

Thank you,

Douglas Allen
Qualifier CP-C011014

"STATE OF FLORIDA, COUNTY OF MARTIN"

Before me, the undersigned authority, personally appeared Douglas
Allen, who upon being duly sworn, deposes and says that the above
foregoing statement is true and correct.



Douglas Allen

Sworn to and subscribed before me this 22nd day of Oct. 1982.

Michael Lecher

Notary Public, State of Florida at Large

My commission expires _____
NOTARY PUBLIC STATE OF FLORIDA AT LARGE
COMMISSION EXPIRES DEC 17, 1985
STATE OF FLORIDA - DEPARTMENT OF HEALTH SERVICES - DIVISION OF HEALTH SERVICES - UNDERWRITERS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 12/13/83

Mr. Mc Gee

This is to request that a Certificate of Approval for Occupancy be issued to
For property built under Permit No. 1519 Dated 10/26/82 when completed in
conformance with the Approved Plans.

Signed

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings		
Rough plumbing		
Slab		
Perimeter beam		
Close-in, roof and rough electric		
Final Plumbing		
Final Electric		

Steel & Grounding 11/10/82 Jan
Water pressure checked 12/1/82
Patio Steel 12/7/82

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector J. Mazurka date 12/13/83

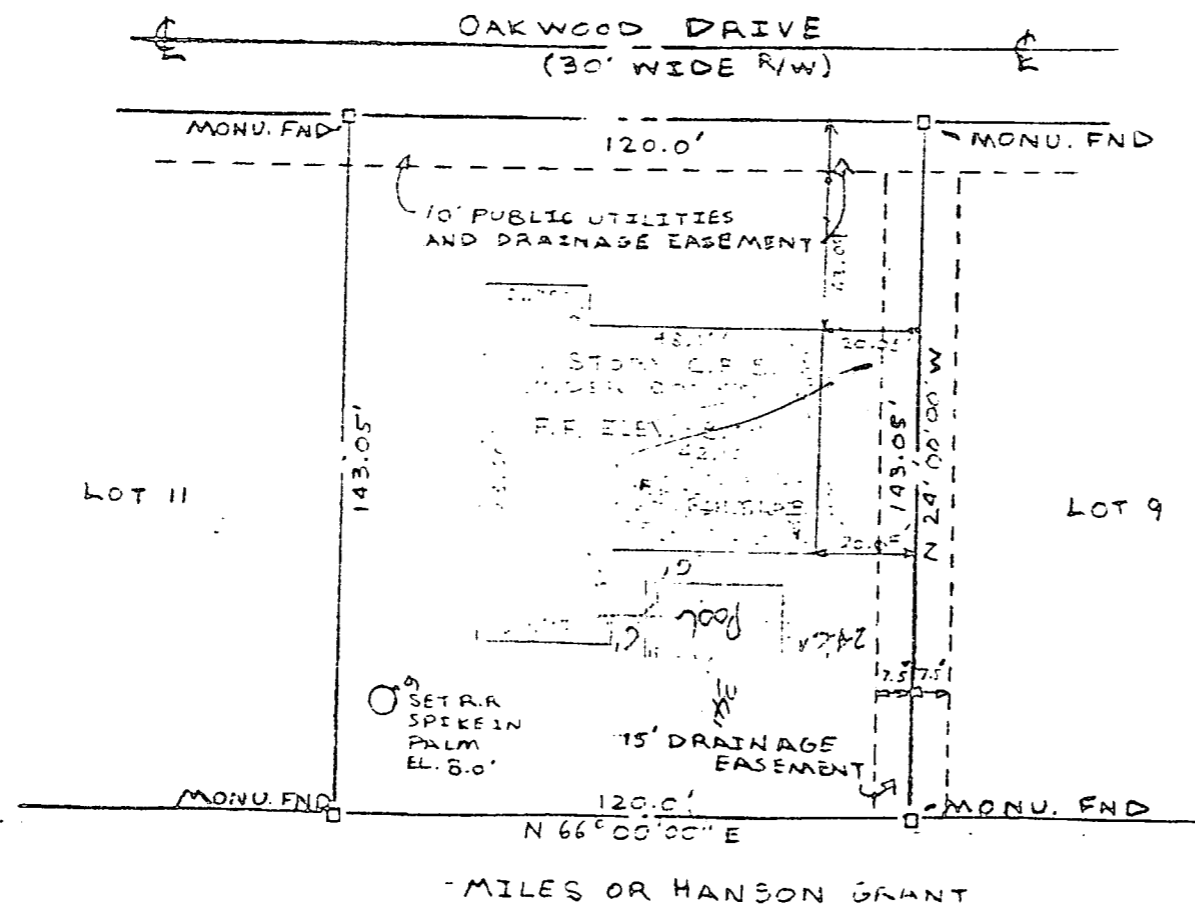
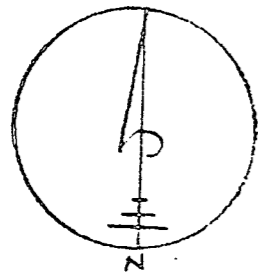
Approved by Building Commissioner _____ date _____

Utilities notified Not Req date _____

Original Copy sent to _____

(Keep carbon copy for Town files)

RECEIVED
 OCT 25 1982
 Ans'd.....



BOUNDARY SURVEY

DESCRIPTION

BEING KNOWN AS LOT 10,
 "OAKWOOD SUBDIVISION",
 AS RECORDED IN PLAT
 BOOK 8, PAGE 53, PUBLIC
 RECORDS OF MARTIN
 COUNTY, FLORIDA.

PRICE ENGINEERING COMPANY
 Engineers - Planners - Surveyors
 1320 PALM BEACH ROAD
 STUART, FLORIDA 33494

PREPARED FOR
 EAST OCEAN CONSTRUCTION

Ronald J. Price
 RONALD J. PRICE

DRAWN BK SCALE 1"=20' DATE 2/16/82

ISSUED BY _____ DATE _____

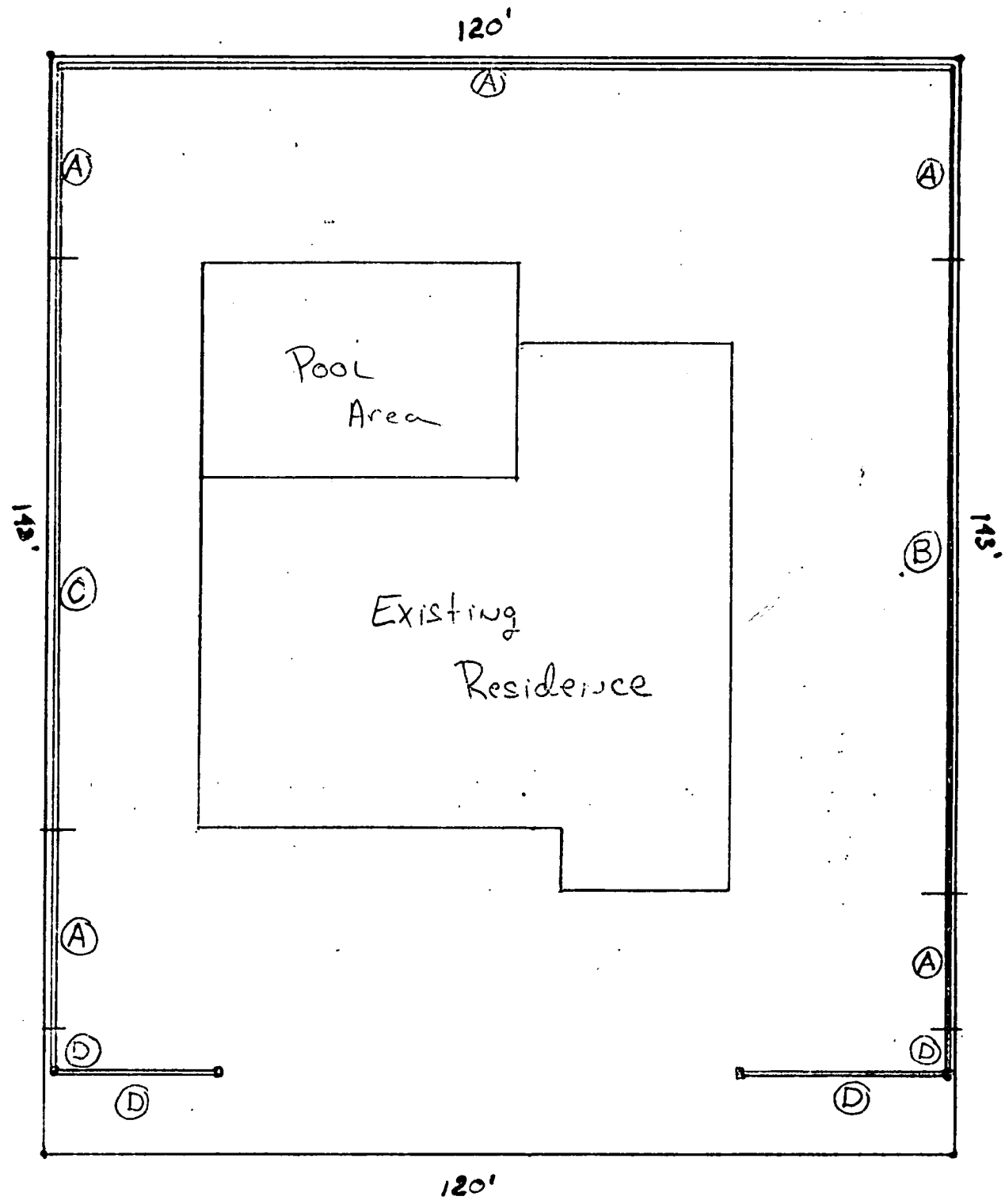
FLORIDA LICENSE NO. 2623

2/24/82

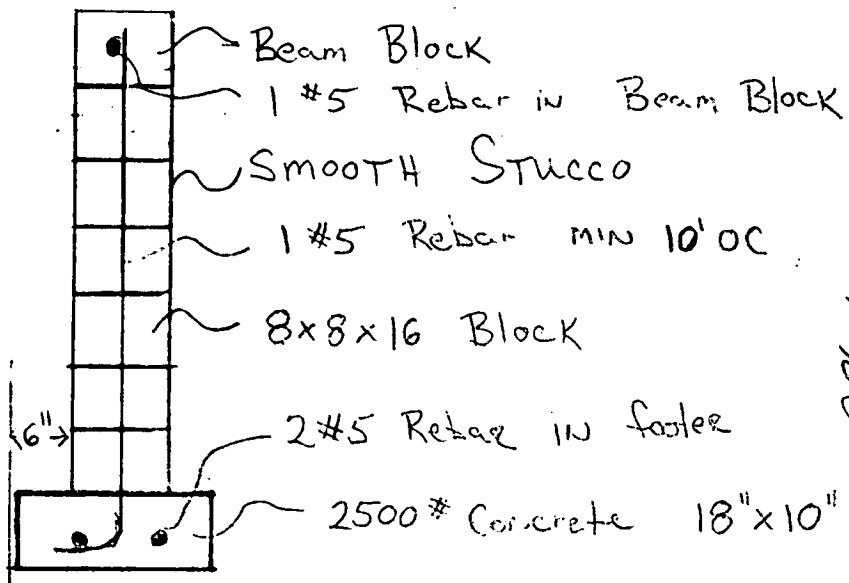
W.O. NO. 21227 PROJECT NO. 21227

Proposed Wall for: DR DAVID MURKIN -
 7 SE OAKWOOD DR
 Sewalls Point, Fla

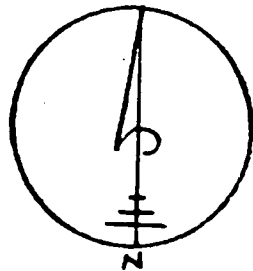
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewalls Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.



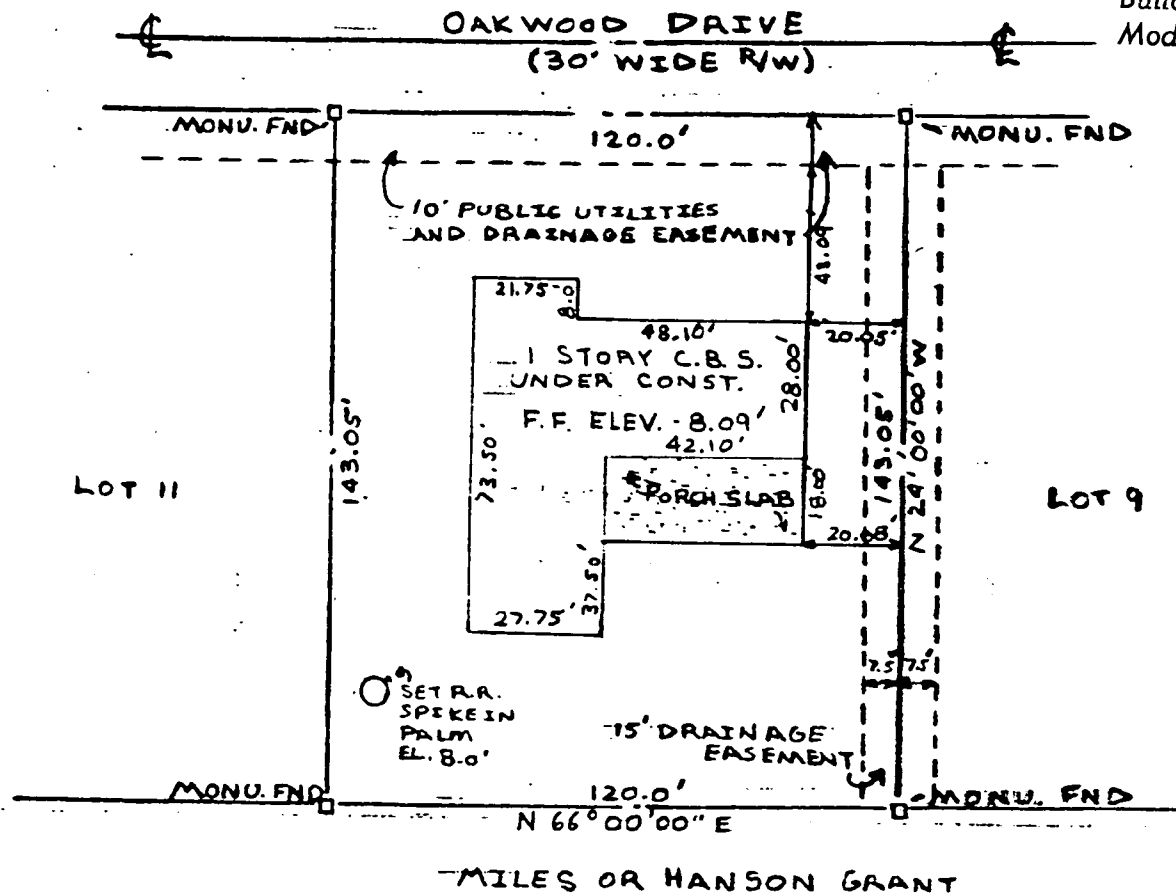
KEY
 (A) = 5' High
 (B) = 6' High
 (C) = 7' High
 (D) = 4' High



RECEIVED
 RECEIVED
 RECEIVED
 JUL 22 1985



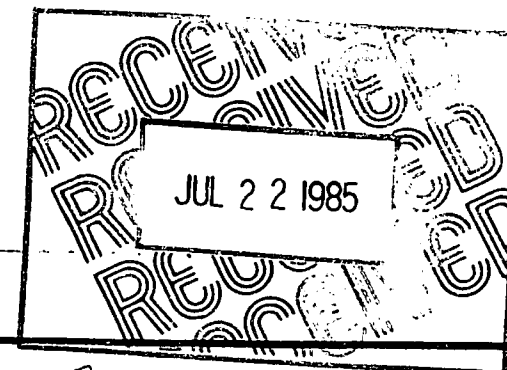
Approval of these plans in no way
relieves the contractor or builder of
complying with the Town of Sewall's
Point's Ordinances, the South Florida
Building Code and the State of Florida
Model Energy Efficiency Building Code.



BOUNDARY SURVEY

DESCRIPTION

BEING KNOWN AS LOT 10,
"OAKWOOD SUBDIVISION",
AS RECORDED IN PLAT
BOOK 8, PAGE 53, PUBLIC
RECORDS OF MARTIN
COUNTY, FLORIDA.



PRICE ENGINEERING COMPANY

Engineers - Planners - Surveyors
1320 PALM BEACH ROAD
STUART, FLORIDA 33494

PREPARED FOR

EAST OCEAN CONSTRUCTION

Ronald J. Price
RONALD J. PRICE

DRAWN: BK SCALE: 1"=40' DATE: 8/16/82

ISSUED BY _____ DATE _____

FLORIDA LICENSE NO. 2683

REVISED TIE-IN 9/24/82 DWG. BK

W.O. NO. 32247 PROJECT NO. 2152

2705

SAUNA

Permit No. _____

Date _____

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

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 ERIKKI SUOMI Present Address 7 OAKWOOD RD

Phone 286-5753

Contractor LENN ROYALTY'S HOME JOHANNES SEONANTILA Address 9267 SE GETTYS BURG CT

Phone 546-7871 - 546-8650 Hobe Sound, FL 33455

Where licensed STATE License number CR 1035240

Electrical contractor STUART ELECTRIC License number _____

Plumbing contractor MASTER PLUMBING License number _____

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

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

7 OAKWOOD RD.

Subdivision OAKWOOD Lot number 10 Block number _____

Contract price \$ 6000⁰⁰ 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 this permit in no way relieves me of complying with the requirements of the South Florida Building Code. Moreover, I will be responsible for maintaining the construction site in a neat and clean condition, free of trash, scrap building materials and other debris, and at least once a week, or oftener when necessary, to remove such materials from the Town of Sewall's Point. Failure to comply with these requirements may result in a fine or Town Commissioner "red-tagging" the construction site.

unc Dale -
To: Final Insp.
unc
or: # 2705
su
sa
pl
pr

Contractor Johannes Seonantila

_____ must be in accordance with the approved plans and requirements of the Town of Sewall's Point before a permit will be given.

Owner Erkki Suomi

ar
f: Monday, if possible!

TOWN RECORD

Date submitted _____ Approved: Dee Brown 2/5/90
Building Inspector _____ Date _____

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

Certificate of Occupancy issued (if applicable) _____
Date _____

SP1282

Permit No. _____

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

3581

BREAKFAST ROOM

3581

TAX FOLIO NO. _____

DATE 4.4.94

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

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

Owner Mr. & Mrs. Don DeMeulemeester Present address 7 Middle Rd.

Phone 221-3977 Stuart, FL 34996

Contractor William Flint Address 600 B West 1st St.

Phone 220-0424 Stuart, FL 34996

Where licensed Martin Co. License number MC 00082

Electrical Contractor Riverside Elec. License number _____

Plumbing Contractor White Plumbg. License number _____

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

A/C addition of breakfast area onto existing covered porch

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

7 Oakwood Dr.

Subdivision Oakwood # Lot Number 10 Block Number Oakwood

Contract price \$ 3800.- Cost of permit \$ 50XX

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 William A. Flint, Jr

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 Kathryn DeMeulemeester

TOWN RECORD

Date submitted 4.5.94

Approved: R/M
Building Inspector _____ Date _____

Approved: [Signature] 4/5/94
Commissioner _____ Date _____

Final approval given: _____ Date _____

CERTIFICATE OF OCCUPANCY issued (if applicable) _____ Date _____

3581
PERMIT NO. 3581

ACORD CERTIFICATE OF INSURANCE

DATE (MM/DD/YY)
4/05/94

PRODUCER
REARDON INSURANCE AGENCY, INC
P.O. BOX 1046
205 E. OSCEOLA ST
STUART FL 34995

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

COMPANIES AFFORDING COVERAGE

COMPANY A AUTO-OWNERS INSURANCE CO.

COMPANY B

COMPANY C

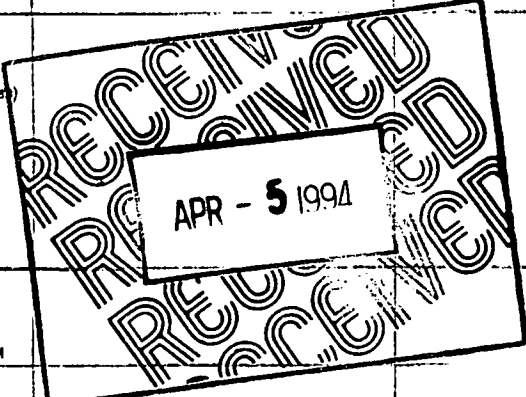
COMPANY D

INSURED
WILLIAM A. FLINT, III
500 W. FIRST ST. SUITE B
STUART FL 34994

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	922312 20438309	E/25/93	5/25/94	BODILY INJURY OCC \$ 300,000
	COMPREHENSIVE FORM				BODILY INJURY AGG \$ 300,000
X	PREMISES/OPERATIONS UNDERGROUND EXPLOSION & COLLAPSE HAZARD				PROPERTY DAMAGE OCC \$ 300,000
X	PRODUCTS/COMPLETED OPER CONTRACTUAL				PROPERTY DAMAGE AGG \$ 300,000
	INDEPENDENT CONTRACTORS				BI & PD COMBINED OCC \$
	BROAD FORM PROPERTY DAMAGE				BI & PD COMBINED AGG \$
X	PERSONAL INJURY				PERSONAL INJURY AGG \$ 300,000
	AUTOMOBILE LIABILITY				
	ANY AUTO				BODILY INJURY (Per accident) \$
	ALL OWNED AUTOS (Private Pass)				PROPERTY DAMAGE \$
	ALL OWNED AUTOS (Other than Private Passenger)				BODILY INJURY & PROPERTY DAMAGE COMBINED \$
	HIRED AUTOS				EACH OCCURRENCE \$
	NON-OWNED AUTOS				AGGREGATE \$
	GARAGE LIABILITY				\$
	EXCESS LIABILITY				STATUTORY LIMITS
	UMBRELLA FORM				EACH ACCIDENT \$
	OTHER THAN UMBRELLA FORM				DISEASE - POLICY UNIT \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				DISEASE - EACH EMPLOYEE \$
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE:				
	<input type="checkbox"/> INCL <input type="checkbox"/> EXCL				
	OTHER				



Post-It™ brand fax transmittal memo 7671 # of pages 1

To: Joann	From: Rachel
Co: Reardon Ins Agency	Phone # 287-3262
Dept:	Fax # 7-287-3311
Fax # 7-220-4765	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS

CERTIFICATE HOLDER

TOWN OF SEWALL'S POINT
ATT: JOAN
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

Joan Mencil

ACORD 25-N (3/89)

ACORD CORPORATION 1989

TOTAL P.01

TERMINAL ID: SEWALLSPOINT

(APR 05 '94 08:51AM)

DATE	START TIME	PERIOD IDENTIFICATION	RESULTS	TOTAL PAGES
MAR 24	10:15AM	7877345	OK	01
MAR 31	11:22AM	2370211	OK	01
	11:54AM	521 1232	OK	01
	03:44PM		OK	01
APR 02	06:45AM	407 287 311	OK	02
APR 04	09:07AM	407 287 311	OK	01
	10:37AM	297 1232	OK	01
	01:43PM	140 1402000	OK	02
	01:43PM	140 1402000	OK	01
APR 05	08:52AM	407 287 311	OK	01

00 00 P:1002518

ADMINISTRATIVE

VARIANCE


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

1. Owner of Property: **Donald and Kathryn Demeulemeester**
2. Address of Property: **7 Oakwood Drive, Sewall's Point, Florida**
- 2a. Applicant: **Timothy and Gail Digby**
3. Address of Applicant: **555 NE Ocean Blvd., Stuart, Florida 34996**
4. Phone No. of Applicant: **561-225-3700**
5. Length and Location (front, rear, side) of Encroachment (if more than one, please list separately): **Front setback encroachment of three inches**
6. Have you included the following materials with your application? **No. Letters of No Objection will be provided upon receipt. Other items attached.**

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:

Gunster, Yoakley, Valdes-Fauli & Stewart, P.A.
800 S.E. Monterey Commons Boulevard
Suite 200
Stuart, FL 34996



Karen Kaplan as agent for Timothy and Gail Digby
June 19, 1997

*Timothy Digby
250.00 PAID
250.00 PAID 6-24-97*

OUR FILE NUMBER: 09000
WRITER'S DIRECT DIAL NUMBER: (561) 288-1980

June 19, 1997

Mr. Vincent Vorraso, Vice Mayor
Town of Sewall's Point
One South Sewall's Point Road
Stuart Florida 34996

Re: Application for Administrative Variance (3 inches) on Lot 10,
Oakwood Subdivision

Dear Vice Mayor Vorraso:

Enclosed is an application for an administrative variance filed
on behalf of Tim and Gail Digby, the contract purchasers of Lot
10, Oakwood Subdivision. The transaction is scheduled to close
on June 27, 1997.

The letters of no objection will be submitted upon receipt of
same from the owners of Lots 9 and 11, Oakwood. *JK*

Please let me know if there is anything else you require in order
to issue the variance.

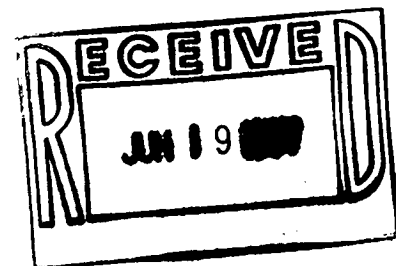
Sincerely,

Karen Kaplan

Karen Kaplan

KK/by: 96083

*Called KK
6-23-97
Survey not
right size
not cert. to TSP*



Our File Number: 18222.09000

WRITER'S DIRECT DIAL NUMBER: (561) 223-2217

June 23, 1997

Ms. Joan Barrow, Town Clerk
Town of Sewall's Point
One South Sewall's Point Road
Stuart, Florida 34996

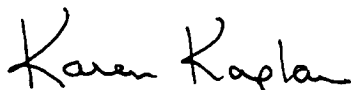
RE: Digby - Purchase from Demeulemeester

Dear Ms. Barrow:

Find attached a survey and one legal size, certified copy of the survey regarding the abovementioned matter. Please fax a copy of the recording receipt to me as soon as possible.

Thank you in advance for your prompt attention to this matter.

Sincerely,



Karen Kaplan

KK:kc/95305.1

rec.
3:40PM
6-23-97

TOWN OF SEWALL'S POINT

DAVID L. MILLARD
Mayor
VINCENT A. VORRASO
Vice Mayor
CYRUS KISSLING
Commissioner
KATHRYN J. KRAMER
Commissioner
DONALD B. WINER
Commissioner



JOAN H. BARROW
Town Clerk
WILBUR C. KIRCHNER
Chief of Police
PHILIP CARUANA
Building Inspector

One South Sewall's Point Road, Sewall's Point, Florida 34996
Phone: (561) 287-2455 • FAX: (561) 220-4765

June 24, 1997

Ms. Karen Kaplan
Gunster, Yoakley, Valdes-Fauli & Stewart, P.A.
800 S.E. Monterey Commons Boulevard - Suite 200
Stuart, Florida 34996

Re: Administrative Variance, Lot 10 Oakwood subdivision

Dear Ms. Kaplan:

Attached is the variance that I will record today in the public records of Martin County.

Sincerely,

Joan Barrow, Town Clerk/Treasurer
TOWN OF SEWALL'S POINT

01241269

97 JUN 24 PM 1:17

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: **Donald and Kathryn Demeulemeester**
2. Legal Description of Property: **Lot 10 of Oakwood Subdivision according to the plat thereof as recorded in Plat Book 8, Page 53, Public Records of Martin County, Florida.**
3. Date of Administrative Variance Application: **June 19, 1997**

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 23rd day of June, 1997.

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

By: [Signature]
Its: Building Commissioner

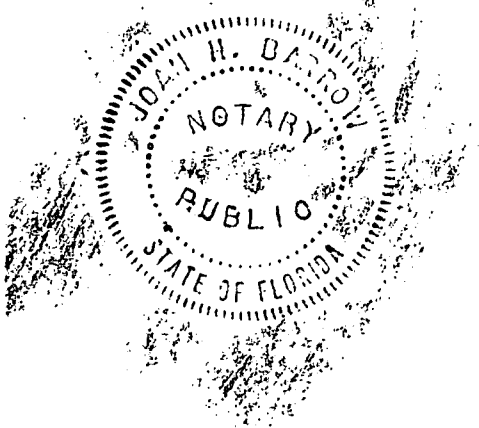
STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 23rd day of June, 1997, by V.A. Verrisso, as Building Commissioner of the Town of Sewall's Point, a Florida municipal corporation, who is personally known to me or who has produced _____ as identification and who did not take an oath.

(NOTARY SEAL)

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. CC423705
MY COMMISSION EXP. NOV. 30,1998



CERTIFICATE OF OWNERSHIP AND ADJACENT OWNERS

Town of Sewall's Point
Building Commissioner

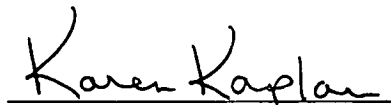
Re: Application for Administrative Variance Pursuant to Appendix B - Zoning, Section VIII.F,
Town of Sewall's Point Code of Ordinances Filed on behalf of Timothy and Gail Digby: Lot 10 or
Oakwood Subdivision

I, KAREN KAPLAN, a member of the Florida Bar in good standing, hereby certify that as of
June 13, 1997, record title to the real property described as Lot 10 of Oakwood Subdivision
according to the plat thereof as recorded in Plat Book 8, Page 53, Public Records of Martin
County, Florida, is held in fee simple by **Donald and Kathryn Demeulemeester**;

And further certify that, according to the Martin County tax rolls, **Emanuela G. Ford** is the
owner of Lot 9 of Oakwood Subdivision according to the plat thereof as recorded in Plat Book 8,
Page 53, Public Records of Martin County, Florida;

And further certify that, according to the Martin County tax rolls, **Audrey and Paul Desrosiers**
are the owners of Lot 11 of Oakwood Subdivision according to the plat thereof as recorded in
Plat Book 8, Page 53, Public Records of Martin County, Florida.

Dated June 18, 1997.



Karen Kaplan
Karen Kaplan, Attorney
Florida Bar No. 0714763

96029

**Donald C. and Kathryn Demeulemeester
7 Oakwood Drive
Sewall's Point, Florida 34996**

June 16, 1987

Town of Sewall's Point
1 South Sewall's Point Road
Sewall's Point, Florida 34996

Re: Application for Administrative Variance - 7 Oakwood Drive

To Whom It May Concern:

We have entered into a contract with Timothy J. Digby and Call W. Digby, his wife, in connection with the sale of our home located at 7 Oakwood Drive. This letter shall authorize the Digbys and/or the firm of Gunster, Yoakley, Valdes-Fauli and Stewart, P.A. to file with the Town an Application for Administrative Variance and whatever other documents are necessary to obtain an Administrative Variance for a set-back violation that exists on our property.

Sincerely,


Donald C. Demeulemeester


Kathryn Demeulemeester

LETTER OF NO OBJECTION

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 on behalf of Timothy and Gail Digby -
7 Oakwood Drive (Lot 10, Oakwood Subdivision)

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed on behalf of Timothy and Gail Digby with the Town of Sewall's Point for the property located at 7 Oakwood Drive. I am an adjacent property owner to 7 Oakwood Drive, 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,

Audrey H. Desrosiers

Paul E. Desrosiers

LETTER OF NO OBJECTION

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 on behalf of Timothy and Gail Digby -
7 Oakwood Drive (Lot 10, Oakwood Subdivision)

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed on behalf of Timothy and Gail Digby with the Town of Sewall's Point for the property located at 7 Oakwood Drive. I am an adjacent property owner to 7 Oakwood Drive, 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,

Emanuela G. Ford

79476

GUNSTER, YOAKLEY, VALDES-FAULI & STEWART, P.A.
ATTORNEYS AT LAW
800 S.E. MONTEREY COMMONS BOULEVARD, SUITE 200
STUART, FLORIDA 34996

TELEPHONE (561) 288-1980
TELECOPY (561) 288-0610

OTHER OFFICES IN:
MIAMI, FL (305) 376-6000
WEST PALM BEACH, FL (561) 655-1980
PALM BEACH, FL (561) 655-1980
FT. LAUDERDALE, FL (954) 462-2000
TALLAHASSEE, FL (904) 222-6660
VERO BEACH, FL (561) 234-1040

FAX TRANSMITTAL FORM

DATE: 6-20-97

TO: Joan Barrow

FIRM: _____

CITY, STATE: _____

FAX #: 220-4765

PHONE #: _____

FROM: Karen Kaplan

PHONE #: (561)288-1980

ORIGINAL FOLLOWS: _____

NO. OF PAGES TRANSMITTED (INCLUDING THIS COVER PAGE) 4
PLEASE CALL IMMEDIATELY IF ALL PAGES ARE NOT RECEIVED

MESSAGE:

*Please deliver a copy to
Bldg. Commissioner Vorosso.
Thank you.*

CONFIDENTIALITY NOTE:

THE INFORMATION CONTAINED IN THIS TRANSMISSION IS LEGALLY PRIVILEGED AND CONFIDENTIAL, INTENDED ONLY FOR THE USE OF THE INDIVIDUAL OR ENTITY NAMED ABOVE. IF THE READER OF THIS MESSAGE IS NOT THE INTENDED RECIPIENT, YOU ARE HEREBY NOTIFIED THAT ANY DISSEMINATION, DISTRIBUTION, OR COPYING OF THIS COMMUNICATION IS STRICTLY PROHIBITED. IF YOU RECEIVE THIS COMMUNICATION IN ERROR, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE (COLLECT) AND RETURN THE ORIGINAL MESSAGE TO US AT THE ABOVE LISTED ADDRESS VIA THE U.S. POSTAL SERVICE. WE WILL REIMBURSE YOU FOR POSTAGE AND/OR TELEPHONE EXPENSES INVOLVED. THANK YOU.

CLIENT/MATTER#: _____

LETTER OF NO OBJECTION

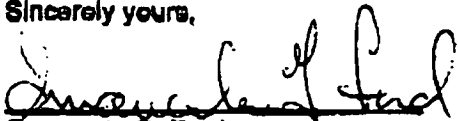
Town of Sewall's Point
One South Sewall's Point Road
Stuart, Florida 34996

Re: Application for Administrative Variance Pursuant to Appendix B - Zoning, Section VIII, F,
Town of Sewall's Point Code of Ordinances Filed on behalf of Timothy and Gail Digby -
7 Oakwood Drive (Lot 10, Oakwood Subdivision)

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed on behalf of Timothy and Gail Digby with the Town of Sewall's Point for the property located at 7 Oakwood Drive. I am an adjacent property owner to 7 Oakwood Drive, 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,



Emanuela G. Ford

06993.1

LETTER OF NO OBJECTION

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 on behalf of Timothy and Gail Digby -
7 Oakwood Drive (Lot 10, Oakwood Subdivision)

Dear Town of Sewall's Point:

I have reviewed the Administrative Variance Application filed on behalf of Timothy and Gail Digby with the Town of Sewall's Point for the property located at 7 Oakwood Drive. I am an adjacent property owner to 7 Oakwood Drive, 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,


Audrey H. Desrosiers


Paul E. Desrosiers

4869

REROOF

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 03/21/00

BUILDING PERMIT NO. 4869

Building to be erected for GAIL DIGBY

Type of Permit REROOF

Applied for by PACIFIC ROOFING

(Contractor)

Building Fee _____

Subdivision OAKWOOD Lot 10 Block _____

Radon Fee _____

Address 7 OAKWOOD DRIVE

Impact Fee _____

Type of structure S.F.R.

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

13-38-41-009-000-0010.0-70000

Plumbing Fee _____

Amount Paid \$120.00 Check # 3837 Cash _____ Other Fees (_____)

Roofing Fee \$120.00

Total Construction Cost \$ 8,000.00

TOTAL Fees \$120.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Inspector

FILE

RE-ROOFING PERMIT

<u>SHEATHING</u>	<u>3/22/00</u>	INSPECTIONS	<u>105P</u>	<u>NOTES ATTACHED</u>	<u>4</u>
DRY IN PROGRESS	DATE <u>3/29/00</u>	PROGRESS		DATE	<u>4/7/00</u>
	DATE _____	FINAL		DATE	

24 HOURS NOTICE REQUIRED FOR INSPECTIONS. CALL 287-2455

WORK HOURS - 8:00 AM UNTIL 5:00 PM

MONDAY THROUGH SATURDAY

- New Construction Remodel Addition Demolition

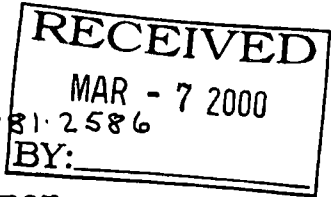
This permit must be visible from the street, accessible to the inspector.
FURTHER CONDITIONS ARE SET FORTH IN THE APPLICATION FOR PERMIT,
NOTATIONS ON THE APPROVED SUBMITTALS, AND ATTACHMENTS IN THE PERMIT FILE.
DO NOT FASTEN THIS OR ANY OTHER SIGN TO A TREE!

Bldg. Pmt#

Town of Sewall's Point

Date 3.4.00

BUILDING PERMIT APPLICATION



Owner's Name GAIL DIGBY Phone No. 781-2586
Owner's Present Address:
Fee Simple Titleholder's Name & Address if other than owner

Location of Job Site: 7 OAKWOOD DRIVE
TYPE OF WORK TO BE DONE: COMPLETE REMOVAL OF EXISTING WOOD SHAKE ROOF TO PLYWOOD
CONTRACTOR INFORMATION
Contractor/Company Name: RICHARD J. GOMES / PACIFIC ROOFING Phone No. 283-7662
COMPLETE MAILING ADDRESS P.O. BOX 2697 STUART, FL. 34995
State Registration State License CC056793
Legal Description of Property Oakwood Lot 10
Parcel Number 13-38-41-009-000-0010-0-70000

ARCHITECT/ENGINEER INFORMATION

Architect Phone No.
Address
Engineer Phone No.
Address
Area Square Footage: Living Area 57.54 Garage Area Carport
Accessory Bldg. Covered Patio Scr. Porch Wood Deck
Type Sewage: Septic Tank Permit # from Health Dept.
NEW electrical SERVICE SIZE AMPS

FLOOD HAZARD INFORMATION

flood zone minimum Base Flood Elevation (BFE) NGVD
proposed finish floor elevation NGVD (minimum 1 foot above BFE)
Cost of construction or Improvement \$8,000
Fair Market Value (FMV) prior to improvement
Substantial Improvement 50% of FMV yes No
Method of determining FMV

SUBCONTRACTOR INFORMATION: (Notify this office if subcontractor's change.)

Electrical State License
Mechanical State License#
Plumbing State License#
Roofing PACIFIC ROOFING State License# CC056793

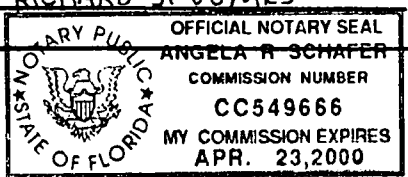
Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standard of all laws regulating construction in this jurisdiction. I understand that a separate permit from the Town may be required for ELECTRICAL, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AIRCONDITIONERS, DOCKS, SEAWALLS, ACCESSORY BLDGS, SAND REMOVAL, TREE REMOVAL.

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, INCLUDING FLORIDA MODEL ENERGY CODES.

OWNER/ CONTRACTOR MUST SIGN APPLICATION

OWNER OR AGENT SIGNATURE [Signature] Sworn to and subscribed before me this 4 day of MARCH, 1998 by GAIL DIGBY who is personally known to me or has produced and who did (did not) take an oath.

CONTRACTOR SIGNATURE [Signature] Sworn to and subscribed before me this 4 day of MARCH, 1998 by RICHARD J. GOMES who is personally known to me or has produced and who did (did not) take an oath.



Angela R. Schaffer Page 1 4-23-00

TREE REMOVAL (Attach sealed survey)

No. of trees to be removed _____ No. to be retained _____ No. to be planted _____
Specimen tree removed _____ Fee _____ Authorized/Date _____
DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE :

- A. Property Appraiser's Parcel Number.
 - B. A Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
 - C. Contractor's name, address, phone number & license numbers.
 - D. Name all sub-contractors (properly licensed).
 - E. Current Survey
 - F. Take completed application to the Permits and Inspections Office for approval. Provide construction details and a plot plan(s) showing setbacks, yard coverage, parking and position of all buildings on the property, stormwater retention plan, etc. Compliance with subdivision regulations can also be determined at this time.
3. Take the application showing Zoning approval (complete with plans & plot plan) to the Health Department for septic tank. Attach the pink copy to the building application.
4. Return all forms to the Permits and Inspection Office. All planned construction requires: two (2) sets of plans, drawn to scale with engineer's or architect's seal and the following items:
1. Floor Plan
 2. Foundation Details
 3. Elevation Views - Elevation Certificate due after slab inspection.
 4. A Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
 5. Truss layout
 6. Vertical Wall Sections (one detail for each wall that is different)
 7. Fireplace drawing: If prefabricated submit manufacturers data.

ADDITIONAL Required Documents are:

1. Use Permit (for driveway connection to public Right of Way). Return form with plot plan showing driveway location (Atlantic Ave. only).
2. Well Permit or information on existing well & pump.
3. Flood Hazard Elevation (if applicable).
4. Energy Code Compliance Certification plus any Approved Forms and/or Energy Code Compliance Sheets.
5. Statement of Fact (for Homeowner Builder), and proof of ownership - (Deed or Tax receipt).
6. Irrigation Sprinkler System layout showing location of heads, valves, etc.
7. A certified copy of the Notice of Commencement must be filed in this office and posted at the job site prior to the first inspection.
9. Replat required upon completion of slab or footing inspection and prior to any further inspections.

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 COUNTY OF MARTIN, and there may be additional permits required from other governmental entities such as water management districts, state and federal agencies.

Approved by Building Official _____

Approved by Town Engineer _____



FILE

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Owens-Corning
One Owens Corning Parkway
Toledo, OH 43659

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

Your application for Product Approval of:

Owens Corning Oakridge Shadow AR Asphalt Shingles

under Chapter 8 of the Metropolitan Dade County Code governing the use of Alternate Materials and types of Construction, and completely described in the plans, specifications and calculations as submitted by:

Underwriters Laboratories, Inc. and Center for Applied Engineering, Inc.

Has been recommended for acceptance by the Building Code Compliance Department to be used in Dade

County, Florida under the specific conditions set forth on page 2 through 19 and the standard conditions set forth on page 20.

The approval shall not be valid after the expiration date stated below. The Building Code Compliance Office reserves the right to secure this product or material at any time from a jobsite or manufacturer's plant for quality control testing. If this product or material fails to perform in the approved manner, the Building Code Compliance Office may revoke, modify or suspend the use of such product or material immediately. The applicant shall re-evaluate this product or material should any amendments to the South Florida Building Code be enacted affecting this product or material. The Building Code Compliance Office reserves the right to revoke this approval, if it is determined by the Building Code Compliance Office that this product or material fails to meet the requirements of the South Florida Building Code. The expense of such testing will be incurred by the manufacturer.

Acceptance No.: 97-0226-011 Renews No.: 94-0105-01

Expires: 05/02/2000

Raul Rodriguez
Product Control Supervisor

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

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

Charles Danger, P.E.
Director
Building Code Compliance Dept.
Metropolitan Dade County

Approved: 05/02/97

① 3/17/00 TOWN OF SHERBORN'S POINT
REVIEW:
Bldg. Official

PN 4869

TOWN COPY
7 OAKWOOD DRIVE



PROOF OF NOTICE:
SUBDIVISION REVIEW/APPROVAL

To: Building Official, Town of Sewall's Point
FROM: Permit Applicant
RE: Subject structure described as follows:

RECEIVED
MAR - 7 2000
BY: _____

OWNER: GAIL DIGBY ; ADDRESS: 7 OAKWOOD DRIVE

PROJECT ADDRESS: 7 OAKWOOD DRIVE ; LEGAL DESCRIPTION: LOT 10 BLK _____ SUB _____

GENERAL CONTRACTOR: PACIFIC ROOFING ; Lic/CERT No. CLL056793

ADDRESS: P.O. BOX 2697 STUART, FL. 34995 ; TEL 283-7663; FAX 283-9505

ARCHITECT OR ENGINEER: _____ ; Lic/REG No. _____

ADDRESS: _____ ; TEL _____ ; FAX _____

PERMIT No: _____ ; DATE OF ISSUE: _____ ; DATE OF THIS STATEMENT: _____

The proposed project is located in the located in SEWALLS POINT Subdivision.

In compliance with permit application review requirements, please be advised as follows:

SUBDIVISION/ASSOCIATION REVIEW AND APPROVAL IS NOT REQUIRED.

SUBDIVISION/ASSOCIATION REVIEW AND APPROVAL IS REQUIRED.

APPROVAL DOCUMENTATION IS ATTACHED

NOTICE OF THE ABOVE PROPOSED CONSTRUCTION WAS PROVIDED TO THE SUBDIVISION/ASSOCIATION ON _____

Executed at _____, this 4 day of MARCH, 2000.

NAME: RICHARD J. GOMES ; SIGNATURE: [Signature] ; Lic. No: CLL056793

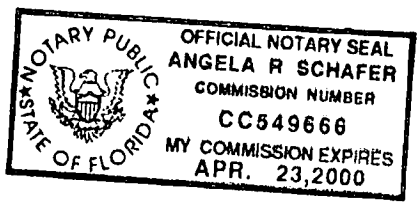
STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 4 day of MARCH, 2000, by RICHARD J. GOMES, who is personally known to me or who has produced _____ as identification and who did not take an oath.

[Signature]
Name Angela R. Schaffer

I am a Notary Public of the State of Florida and my commission expires: 4-23-00

(NOTARY SEAL)



ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
08/27/1999

PRODUCER (561)746-4546 FAX (561)746-9599

Tequesta Agency, Inc.
393 Tequesta Drive
Tequesta, FL 33469

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.

Attn: Debra Hicks

Ext:

INSURED Pacific Roofing Corp., Inc.
PO Box 2697
Stuart, FL 34994

FILE
PERMIT

COMPANIES AFFORDING COVERAGE	
COMPANY A	Transcontinental Insurance co.
COMPANY B	Transportation Insurance Co.
COMPANY C	COPY
COMPANY D	

COVERAGES

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY CLAIMS MADE <input checked="" type="checkbox"/> OCCUR OWNER'S & CONTRACTOR'S PROT	C155821031	08/27/1999	10/28/2000	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) \$ 50,000 MED EXP (Any one person) \$ 5,000
	AUTOMOBILE LIABILITY <input checked="" type="checkbox"/> ANY AUTO ALL OWNED AUTOS SCHEDULED AUTOS HIRED AUTOS NON-OWNED AUTOS	C144640569	08/27/1999	10/28/2000	COMBINED SINGLE LIMIT \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE \$
	GARAGE LIABILITY ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EACH ACCIDENT \$ AGGREGATE \$
	EXCESS LIABILITY UMBRELLA FORM OTHER THAN UMBRELLA FORM				EACH OCCURRENCE \$ AGGREGATE \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input checked="" type="checkbox"/> EXCL	WC177093784	10/28/1999	10/28/2000	<input checked="" type="checkbox"/> WC STATUTORY LIMITS OTHER EL EACH ACCIDENT \$ 100,000 EL DISEASE - POLICY LIMIT \$ 500,000 EL DISEASE - EA EMPLOYEE \$ 100,000
	OTHER				
	DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS				

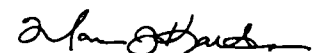
CERTIFICATE HOLDER

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 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
Mark Kasten/DEBBIE



Certificate of Insurance

This certificate is issued as a matter of information only and confers no rights upon you the certificate holder. This certificate is not an insurance policy and does not amend, extend, or alter the coverage by the policies listed below.

Named Insured(s):

Staff Leasing, LP, by Staff Acquisition, Inc., The General Partner, and
The Affiliated Limited Partnerships of Which Staff Acquisition, Inc. is
The General Partner and their Successor Corporations
600 301 Boulevard West, Suite 202
Bradenton, Florida 34205

RECEIVED
JAN 3 1 2000
BY: _____

CNA
RISK MANAGEMENT

FILE

Insurer Affording Coverage

Continental Casualty Company

Coverages:

The policy(ies) of insurance listed below have been issued to the insured named above for the policy period indicated. The insurance afforded by the policy(ies) described herein is subject to all the terms, exclusions and conditions of such policy(ies).

Type of Insurance	Certificate Exp. Date <input type="checkbox"/> Continuous <input type="checkbox"/> Extended <input checked="" type="checkbox"/> Policy Term	Policy Number	Limits	
			Employer's Liability	
Workers' Compensation	1-1-2001	WC 189165165 WC 189165182	Bodily Injury By Accident	Each Accident
			\$1,000,000	
			Bodily Injury By Disease	Policy Limit
			\$1,000,000	Each Person

Other:

Employees Leased To:

Effective Date: 1/1/00

16455
Pacific Roofing Corp Inc

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

*If the certificate expiration date is continuous or extended term, you will be notified if coverage is terminated or reduced before the certificate expiration date. However, you will not be notified annually of the continuation of coverage.

Notice of Cancellation: (Not applicable unless a number of days are entered below)

Before the stated expiration date the company will not cancel or reduce the insurance afforded under the above policy(ies) until at least 30 days notice of such cancellation has been mailed to:

Certificate Holder:

TOWN OF SEWALL'S POINT
1 S SEWALLS POINT RD
STUART, FL 34996-6736



Martin Oosterbaan

Martin Oosterbaan
Authorized Representative

Office: St. Louis, MO

Phone: (877) 427-5567

12/15/99

Date Issued



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CONST INDUSTRY LICENSING BOARD
7960 ARLINGTON EXPRESSWAY
SUITE 300
JACKSONVILLE FL 32211-7467

(904) 727-6530

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
1501 DECKER AVE UNIT 303 & 304
PO BOX 2697
STUART FL 34995

STATE OF FLORIDA AC# 5640369
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CC -C056793 09/01/1999 9900611
 CERTIFIED ROOFING CONTRACTOR
 GOMES, RICHARD JOHN
 PACIFIC ROOFING CORP
 IS CERTIFIED under the provisions of Ch. 489
 Expiration Date: AUG 31, 2000

DETACH HERE

AC# 5640369

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

DUPLICATE

DATE	BATCH NUMBER	LICENSE NBR
09/01/1999	99006114	CC -C056793

The ROOFING CONTRACTOR named below IS CERTIFIED under the provisions of Chapter 489 FS. Expiration date: AUG 31, 2000

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
1501 DECKER AVE UNIT 303 & 304
PO BOX 2697
STUART FL 34995

JEB BUSH GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON SECRETARY

PERMIT # _____

TAX FOLIO # 12-38-41-009-000-0010.0-70000

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF Martin

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

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

Oakwood Lot 10

GENERAL DESCRIPTION OF IMPROVEMENT: Reroof

OWNER: Gail Digby

ADDRESS: 7 Oakwood Drive Stuart, FL 34996

PHONE #: 781-2586

FAX #: na

CONTRACTOR: Pacific Roofing

ADDRESS: P.O. Box 2697 Stuart, FL 34995

PHONE #: 283-7663

FAX #: 283-9505

SURETY COMPANY (IF ANY): _____

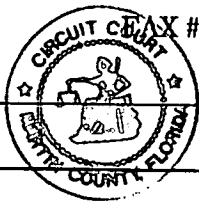
ADDRESS: _____

PHONE # _____

STATE OF FLORIDA
MARTIN COUNTY

BOND AMOUNT: _____

THIS IS TO CERTIFY THAT THE
FOREGOING _____ PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
MARSHA STILLER, CLERK



LENDER: _____

ADDRESS: _____

BY TCOPUS D.C.
DATE 3-7-00

PHONE #: _____

FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____

FAX #: _____

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

PHONE #: _____

FAX #: _____

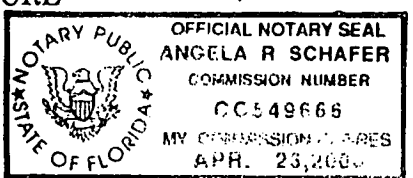
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Gail Digby
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 4 DAY OF MARCH 192000 BY GAIL DIGBY

Angela R Schaffer
NOTARY SIGNATURE

OR PERSONALLY KNOWN
PRODUCED ID _____
TYPE OF ID _____



**PRODUCT CONTROL NOTICE OF ACCEPTANCE
ROOFING SYSTEM APPROVAL**

Applicant:

Owens-Corning
One Owens Corning Parkway
Toledo, Ohio 43659

Product Control No.: 97-0226.01

Approval Date: May 02, 1997

Expiration Date: May 02, 2000

Category:

Prepared Roofing

Sub-Category:

Shingles

Type:

Asphalt

Sub-Type:

Laminated

System Description

The sloped roof system described above has been accepted by the Metro-Dade Office of Code Compliance as an approved shingle system in compliance with the requirements of Chapter 34 of the South Florida Building Code. This Product Control Approval is issued to the following shingle 'Profile':

Oakridge Shadow AR - Laminate

This system is approved for use under the South Florida Building Code when the listed components are assembled in accordance with the application instructions described below. No components may be substituted.

Contact:


Darrel P. Higgs
One Owens Corning Parkway
Toledo, OH 43659
Phone: (419) 248-7060
Fax: (419) 248-5303



Frank Zuloaga, Roofing Plans Examiner
Product Control Division

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
→ Oakridge Shadow AR	12 ¹ / ₈ " x 39 ¹ / ₂ "	PA 110	Fiberglas reinforced medium weight asphalt roof shingle, with a Laminate profile.



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Product Control Division

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
→ Edge metal	.021" min., 26 ga., 3" x 3"	ASTM A 525	Corrosion resistant edge metal for system termination	generic
→ Tin Caps	Min. .010" x 1 5/8", 32 ga.		Corrosion resistant tin caps	generic
Flashing Cement	Various	ASTM D 4586	Cut back, asphalt modified adhesive for flashing attachment.	generic
→ Shingle Nails	Min. 12 ga. x 1 1/4"	PA 110	Corrosion resistant, deformed, roofing nails for Shingle application	generic
Roofing Nails	Min 12ga. x 1 1/4"	PA 110	Corrosion resistant, deformed, annular ring shank roofing nails for metal and accessory attachment	generic
Valley Metal	Min. 26 ga., 16" wide	ASTM A 525	Galvanized metal valley flashing.	generic
Mineral Surface Roll Roofing	Various	ASTM D 249	Asphalt impregnated, mineral surfaced organic roll roofing.	generic
Smooth Surfaced Asphalt Rolled Roofing		ASTM D 224	Smooth surfaced organic rolled roofing	generic


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Roofing Fabric	Various	ASTM D1668	Organic or inorganic woven fabric to reinforce flashing cement.	generic
→ # 30 Felt	Various	ASTM D 226 type II	Asphalt impregnated organic felt. for use as a shingle underlayment.	generic
#15 Felt	Various	ASTM D 226, type I	Asphalt impregnated organic felt for use as a shingle underlayment.	generic


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TEST REPORTS

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	PA 100	Uplift and wind driven rain resistance.	03/07/94
Underwriters Laboratories, Inc.	PA 107	Wind uplift resistance Modified ASTM D 3161.	04/04/94
Underwriters Laboratories, Inc.	ASTM 3462	Material properties ASTM 3462	04/18/94


The testing listed above, submitted with this application confirms the shingle assembly complies with all test requirements set forth under Chapter 34 of the South Florida Building Code. The shingle system has been tested in compliance with Dade County Protocols PA 100 and 107. The shingle component physical properties have been tested in compliance with ASTM D 3462. All accessory components listed within this application are in compliance with South Florida Building Code Requirements.

System Trade Names:

Oakridge Shadow AR - Laminate

Maximum Fire Classification

<u>Deck Type</u>	<u>Classification</u>
Min. 1 ⁹ / ₃₂ " Plywood, or Wood Plank	Class A


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SYSTEM APPLICATION
Slope Range: 2":12" to <4":12"

Underlayment:

Underlayment shall be applied in accordance with the South Florida Building Code, Section 3403.5(b)(6): All underlayments applied at a roof pitch less than 4":12" shall be applied in a double layer of ASTM D 226, type I with a 19" overlap or by the application of a single layer of ASTM D 226, type II organic felt or an ASTM D 2626 coated base sheet as a base ply with a 4" overlap. Head laps shall be 6". Underlayment shall be installed with minimum 12 ga. x 1/4" corrosion resistant roofing nails and minimum 32 ga. x 1 3/8" diameter tin caps, spaced 12" o.c. in a grid pattern in the field and 6" o.c. at the laps. Nails shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1".

Note: All flashing cement used shall be ASTM D 4586 asbestos-free flashing cement. All products shall have Metro-Dade Component Approval.

Edge Metal:

Edge metal and installation shall be in compliance with the South Florida Building Code Section 3408.2 and 3408.3: Minimum .021" (26 ga.), 2" x 2" galvanized or other approved corrosion resistant material nailed over top of the underlayment at 4" o.c., with minimum 12 ga. x 1/4" corrosion resistant annular ring shank roofing nails at all perimeters. The nails shall be manufactured from similar and compatible material to the termination profile. All composite materials shall be fashioned with non-ferrous nails. At corners, the ends of adjoining approved drip edge shall be overlapped 7", notched and bent around the corner. Straight lengths of approved drip edge shall be overlapped not less than 3". See Dade County Protocol PA 111(4.3.4), figure 2.

Note:

All intersections, eaves, rakes, valleys, gable ends, and starter course shall be set in a 8" wide strip of ASTM D 4586 flashing cement.

Valleys:

Valleys may be applied in open, closed or weaved fashion. Valley metal shall be in compliance with the South Florida Building Code section 3408.4. A 36" wide sheet of ASTM D 249 mineral surfaced rolled roofing; or ASTM D 224 smooth roll roofing shall be installed over the underlayment at all close cut or woven valleys, centered in the valley. The roll roofing shall be nailed 6" o.c. with minimum 12 ga. x 1/4" roofing nails at each edge. Nails shall penetrate the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Endlaps shall be 12" and adhered with ASTM D 4586 flashing cement. In open valley applications a minimum 16" wide, 26 ga. galvanized metal; or other approved corrosion resistant material shall be installed, and may be rolled or preformed. Set valley in a bed of ASTM D 4586 flashing cement, applied in two 4" wide strips at each exterior edge, with a maximum thickness of 1/8". Fasten valley metal with minimum 12 ga. x 1/4" galvanized

annular ring shank roofing nails 12" o.c. 1" in from each exterior edge. Nails shall penetrate the sheathing or wood plank a minimum of $\frac{3}{16}$ " or penetrate a 1" or greater thickness of lumber a minimum of 1". Strip in the the two exterior edges with flashing cement and approved reinforcement. Overlaps shall be 12" minimum and adhered with ASTM D 4586 flashing cement.

→ **Starter strip:**

The starter-strip may be either a row of non-laminated shingles trimmed to the shingle manufacturer's recommendations or a strip of mineral-surfaced roll roofing not less than 7 inches wide. Starter strip and shingles shall overhang the eaves by $\frac{1}{4}$ " to $\frac{3}{4}$ ".


If self-sealing shingles are used for the starter strip, remove the tab portion of each shingle and position the remaining strip with the factory-applied adhesive face up along the eaves. Trim material from the end of the first shingle in the starter strip according to manufacturer's specifications to ensure that the cutouts of the first course of shingles are not placed over the starter strip joints. Fasten starter strips parallel to the eaves along a line above the eave line according to manufacturer's specifications. Position fasteners to insure they will not be exposed under the cutouts in the first course.

If shingles without a self-sealing strip are applied, the tabs shall be removed and ASTM D 4586 flashing cement shall be applied in spots approximately the size of a quarter at the corner of each tab of the first course. Starter shingles shall be nailed along a line not greater than 4" above the eave line nailing not greater than 6" o.c.. Trim at least three inches from the end of the first shingle to ensure that the cutouts of the first course are not placed over the starter strip joints.

If roll roofing is used for the starter strip, nail along a line not greater than 4" above the eave line nailing not greater than 12" o.c. ASTM D 4586 flashing cement shall be applied as noted above for non sealing shingle starter. If more than one piece of roll roofing must be used, the end joint shall be butted. Joints shall be staggered with succeeding shingle joints. Number of starter joints shall be kept to a minimum.

First and Succeeding Courses:

Be sure the first course is laid straight, checking it regularly during application against a horizontal chalk line. A few vertical chalk lines aligned with the ends of shingles in the first course will ensure proper alignment of cutouts. A shingle hatchet is an acceptable alternative to the use of succeeding chalk lines. If starter used does not provide a 'seal strip, bond the tabs of each shingle in the first course to the starter strip by placing a spot of ASTM D 4586 flashing cement about the size of a quarter on the starter strip beneath each tab if a non self sealing starter is used. Avoid excessive use of the cement, as it may cause blistering.


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Product Control Division

The first course starts with a full shingle, while succeeding courses start with 4, 5, or 6 inches removed relative to the preceding course, or as approved by the manufacturer. Rake and valley courses shall be terminated with tabs not less than 12" wide.

To obtain the correct exposure for square-tab strip shingles, align the butts with the top of the cutouts in the course below. Install no-cutout shingles and those with variable butt lines according to the manufacturer's directions to obtain correct exposure.

Note:

Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning shingle alignment. See 'Expose and Course Layout' - Detail 'A' attached.

→ Fastening:

Use six nails or approved fasteners per shingle. Fasteners shall be minimum 12 ga. x 1¹/₄" galvanized roofing nails, or other fasteners with Dade County Component Approval. Place the fasteners according to fastener Detail 'B', attached. Align the shingles properly to avoid exposing fasteners in the course below. Fasteners shall penetrate through the sheathing or wood plank a minimum of ³/₁₆" or penetrate a 1" or greater thickness of lumber a minimum of 1". Drive the fasteners straight and do not break the shingle surface with the fastener head. Do not drive fasteners into knot holes or cracks in the roof deck. Repair faulty fastening immediately. If fastener does not penetrate the deck properly, remove the fastener and repair the hole in the shingle with ASTM D 4586 flashing cement or replace the entire shingle.


Do not nail into or above factory-applied adhesives. Ensure no cutout or end joint is less than 2 inches from a nail in an underlying course. Start nailing from the end nearest the shingle just laid and proceed across. Do not attempt to re-align a shingle by shifting the free end after two nails are in place. Drive nails straight so that the edge of the nail head does not cut into the shingle. Nail heads should be driven flush with the shingle surface. Fasteners shall not be overdriven.

Note:

Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning fastener alignment. See Fastening Pattern and Physical Dimensions - Detail "B" attached.

Flashing:

Roof planes that butt against vertical walls shall be step flashed with 10" long metal shingles which are 2" wider than the exposed face of the roofing shingles. Place the first flashing unit over the end of the starter strip and position it so that the tab of the end shingle in the first course covers it completely. Secure the horizontal arm to the roof with two approved roofing nails. Do not nail flashing to the wall; settling of the roof could damage the seal. Apply the first course of shingles up to the wall. Position the second step flashing strip over the end shingle



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Product Control Division


in the first course 5 inches up from the butt so that the tab of the end shingle in the second course covers it completely. Fasten the horizontal arm to the roof. The second course of shingles follows, the end is flashed as in the preceding courses and so on to the top of the intersection. Bring siding or other wall treatment down over the vertical sections of the step flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line.

Vertical sidewalls shall be flashed. Apply shingles up the roof until a course must be trimmed to fit at the base of the vertical wall. Adjust the exposure slightly in the previous two courses so that the last course is at least 8 inches wide. Apply a continuous piece of metal flashing over the last course of shingles by embedding it in approved flashing cement and nailing it to the roof. The metal flashing strip shall be bent to extend at least 5 inches up the vertical wall and at least 4 inches onto the last shingle course. Do not nail the strip to the wall. Apply an additional row of shingles over the metal flashing strip, trimmed to the width of the strip. Bring siding down over the vertical flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line. Do not nail siding into the vertical flashing. If the vertical front wall meets a sidewall, as in dormer construction, cut flashing so that it extends at least 7 inches around the corner. Continue up the sidewall with step flashing as detailed above.

Soil Stacks and Vent Pipes:

Apply shingles up to the vent pipe. Cut a hole in a shingle to go over the pipe and set the shingle in ASTM D 4586 flashing cement. A preformed flashing flange that fits snugly over the pipe is then placed over the shingle and vent pipe and set in approved flashing cement. Place the flange over the pipe to lay flat on the roof. After the flashing is in place, resume shingle application. Cut shingles in successive courses to fit around the pipe and embed them in approved flashing cement where they overlap the flange. Avoid excessive use of cement as it may cause blistering. Do not drive fasteners close to the pipe. The lower part of the flange shall overlap the lower shingles and the side and upper shingles shall overlap the flange.

For ventilator and exhaust stacks, follow the same procedure, but bring the shingles up to the pipe from both sides and bend the flange over the ridge to lie in both roof planes, overlapping the roof shingles at all points. Ridge shingles are then positioned to cover the flange. Embed the ridge shingles in approved flashing cement where they overlap the flange.



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Chimneys:

Chimneys shall be flashed with a two-piece base and cap flashing to allow for differential movement. Apply shingles up to the front edge of the chimney before any flashings are installed. Apply a coat of ASTM D 41 asphalt primer if the chimney is constructed of masonry or metal to seal the surface and to provide good adhesion to all points where flashing cement will later be applied.

Install 26 ga. corrosion resistant metal, or other approved corrosion resistant materials, as base flashing between the chimney and the roof deck, on all sides. Apply the base flashing to the low side of the chimney first. Bend the base flashing so that the lower section extends at least 4" over the shingles and the upper section extends at least 12" up the vertical face of the chimney. Work the flashing firmly and smoothly into the joint between the shingles and chimney. Set both the roof and chimney overlaps in approved flashing cement placed over the shingles and on the chimney face. The flashing may be secured against the chimney with one or two nails to hold it in place until the cement sets. Use metal step flashing for the sides of the chimney, positioning the units in the same manner as flashing on a vertical sidewall. Cut, bend and apply the step flashing around the side of the chimney. Secure each flashing unit to the masonry with approved flashing cement and to the deck with approved nails. Embed the end shingles in each course that overlap the flashing in an 8" bed of approved flashing cement. Place the rear base flashing over the cricket and the high side of the chimney.

Apply the high side base flashing by bringing the end shingles in each course up to the cricket and secure in a bed of approved flashing cement. Cap flashings shall be installed over all base flashings. Set the metal cap flashing into the brickwork or exterior siding material. If brick, rake out the mortar joint to a depth of 1½ inches and insert the bent edge of the flashing into the cleared joint. Refill the joint with mortar. Bend the cap flashing down to overlap the base flashing. Use one continuous piece of cap flashing on the low side of the chimney. On the sides and high side of the chimney, use several pieces of similar-sized flashing, trimming each to fit the particular location of brick joint or substrate material. Start the side units at the lowest point and overlap at least 3 inches. Chimney crickets shall be waterproofed in compliance with options published by the shingle manufacturer. If crickets are formed from wood, or other nailable materials a double layer underlayment shall be applied prior to waterproofing.

Hips and Ridges:

Apply premanufactured hip and ridge shingle components or cut hip and ridge shingles from manufacturer's shingles, where approved. Lay hip and ridge away from prevailing wind. Insure all fasteners are covered. Exposure shall not exceed 5" unless premanufactured hip and ridge specifically allows for greater exposure. Taper the lap portion of each cap shingle slightly so that it is narrower than the exposed portion.

Minimum Slope: 2":12" to 4":12"

Maximum Fire Classification: Class 'A'

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Frank Zuloaga, Roofing Plans Examiner
Product Control Division


SYSTEM APPLICATION
Slope Range: 4":12" and Greater

Underlayment: Underlayment shall be applied in accordance with the South Florida Building Code, Section 3403.5(f)(2): Two plies of minimum ASTM D 226, Type I felt overlapped 19", or a single layer of ASTM D 226 Type II felt overlapped 4". Head lap shall be 6". Underlayment shall be installed with minimum 12 ga. x 1 1/4" corrosion resistant roofing nails and minimum 32 ga. x 1 3/8" diameter tin caps, spaced 12" o.c. in a grid pattern in the field and 6" o.c. at the laps. Nails shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1".

Edge Metal: Edge metal and installation shall be in compliance with the South Florida Building Code Section 3408.2 and 3408.3: Minimum .021" (26 ga.), 2" x 2" galvanized or other approved corrosion resistant material nailed over top of the underlayment at 4" o.c., with minimum 12 ga. x 1 1/4" corrosion resistant annular ring shank roofing nails at all perimeters. The nails shall be manufactured from similar and compatible material to the termination profile. All composite materials shall be fashioned with non-ferrous nails. At corners, the ends of adjoining approved drip edge shall be overlapped 7", notched and bent around the corner. Straight lengths of approved drip edge shall be overlapped not less than 3". See Dade County Protocol PA 111(4.3.4), figure 2.

Note: All intersections, eaves, rakes, valleys, gable ends, and starter course shall be set in a 8" wide strip of ASTM D 4586 flashing cement.

Valleys: Valleys may be applied in open, closed or weaved fashion. Valley metal shall be in compliance with the South Florida Building Code section 3408.4. A 36" wide sheet of ASTM D 249 mineral surfaced rolled roofing; or ASTM D 224 smooth roll roofing shall be installed over the underlayment at all close cut or woven valleys, centered in the valley. The roll roofing shall be nailed 6" o.c. with minimum 12 ga. x 1 1/4" roofing nails at each edge. Nails shall penetrate the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Endlaps shall be 12" and adhered with ASTM D 4586 flashing cement. In open valley applications a minimum 16" wide, 26 ga. galvanized metal; or other approved corrosion resistant material shall be installed, and may be rolled or preformed. Set valley in a bed of ASTM D 4586 flashing cement, applied in two 4" wide strips at each exterior edge, with a maximum thickness of 1/8". Fasten valley metal with minimum 12 ga. x 1 1/4" galvanized annular ring shank roofing nails 12" o.c. 1" in from each exterior edge. Nails shall penetrate the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Strip in the the two exterior edges with flashing cement and approved reinforcement. Overlaps shall be 12" minimum and adhered with ASTM D 4586 flashing cement.


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Product Control Division

Starter strip:

The starter strip may be either a row of non-laminated shingles trimmed to the shingle manufacturer's recommendations or a strip of mineral-surfaced roll roofing not less than 7 inches wide. Starter strip and shingles shall overhang the eaves by $\frac{1}{4}$ " to $\frac{3}{4}$ ".

If self-sealing shingles are used for the starter strip, remove the tab portion of each shingle and position the remaining strip with the factory-applied adhesive face up along the eaves. Trim material from the end of the first shingle in the starter strip according to manufacturer's specifications to ensure that the cutouts of the first course of shingles are not placed over the starter strip joints. Fasten starter strips parallel to the eaves along a line above the eave line according to manufacturer's specifications. Position fasteners to insure they will not be exposed under the cutouts in the first course.


If shingles without a self-sealing strip are applied, the tabs shall be removed and ASTM D 4586 flashing cement shall be applied in spots approximately the size of a quarter at the corner of each tab of the first course. Starter shingles shall be nailed along a line not greater than 4" above the eave line nailing not greater than 6" o.c.. Trim at least three inches from the end of the first shingle to ensure that the cutouts of the first course are not placed over the starter strip joints.

If roll roofing is used for the starter strip, nail along a line not greater than 4" above the eave line nailing not greater than 12" o.c. ASTM D 4586 flashing cement shall be applied as noted above for non sealing shingle starter. If more than one piece of roll roofing must be used, the end joint shall be butted. Joints shall be staggered with succeeding shingle joints. Number of starter joints shall be kept to a minimum.

First and Succeeding Courses:

Be sure the first course is laid straight, checking it regularly during application against a horizontal chalk line. A few vertical chalk lines aligned with the ends of shingles in the first course will ensure proper alignment of cutouts. A shingle hatchet is an acceptable alternative to the use of succeeding chalk lines. If starter used does not provide a seal strip, bond the tabs of each shingle in the first course to the starter strip by placing a spot of ASTM D 4586 flashing cement about the size of a quarter on the starter strip beneath each tab if a non self sealing starter is used. Avoid excessive use of the cement, as it may cause blistering.

The first course starts with a full shingle, while succeeding courses start with 4, 5, or 6 inches removed relative to the preceding course, or as approved by the manufacturer. Rake and valley courses shall be terminated with tabs not less than 12" wide.



Frank Zuloaga, Roofing Plans Examiner
Product Control Division

To obtain the correct exposure for square-tab strip shingles, align the butts with the top of the cutouts in the course below. Install no-cutout shingles and those with variable butt lines according to the manufacturer's directions to obtain correct exposure.


Note: Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning shingle alignment. See 'Expose and Course Layout' - Detail 'A' attached.

Fastening: Use six nails or approved fasteners per shingle. Fasteners shall be minimum 12 ga. x 1 1/4" galvanized roofing nails, or other fasteners with Dade County Component Approval. Place the fasteners according to fastener Detail 'B', attached. Align the shingles properly to avoid exposing fasteners in the course below. Fasteners shall penetrate through the sheathing or wood plank a minimum of 3/16" or penetrate a 1" or greater thickness of lumber a minimum of 1". Drive the fasteners straight and do not break the shingle surface with the fastener head. Do not drive fasteners into knot holes or cracks in the roof deck. Repair faulty fastening immediately. If fastener does not penetrate the deck properly, remove the fastener and repair the hole in the shingle with ASTM D 4586 flashing cement or replace the entire shingle.

Do not nail into or above factory-applied adhesives. Ensure no cutout or end joint is less than 2 inches from a nail in an underlying course. Start nailing from the end nearest the shingle just laid and proceed across. Do not attempt to re-align a shingle by shifting the free end after two nails are in place. Drive nails straight so that the edge of the nail head does not cut into the shingle. Nail heads should be driven flush with the shingle surface. Fasteners shall not be overdriven.

Note: Manufacturer's label states additional installation requirements for this product. Follow manufacturer's instructions concerning fastener alignment. See Fastening Pattern and Physical Dimensions - Detail "B" attached.

Flashing: Roof planes that butt against vertical walls shall be step flashed with 10" long metal shingles which are 2" wider than the exposed face of the roofing shingles. Place the first flashing unit over the end of the starter strip and position it so that the tab of the end shingle in the first course covers it completely. Secure the horizontal arm to the roof with two approved roofing nails. Do not nail flashing to the wall; settling of the roof could damage the seal. Apply the first course of shingles up to the wall. Position the second step flashing strip over the end shingle in the first course 5 inches up from the butt so that the tab of the end shingle in the second course covers it completely. Fasten the horizontal arm to the roof. The second course of shingles follows, the end is flashed as in the preceding courses and so on to the top of the intersection. Bring siding or other wall treatment down



Frank Zuloaga, Roofing Plans Examiner
Product Control Division

over the vertical sections of the step flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line.

Vertical sidewalls shall be flashed. Apply shingles up the roof until a course must be trimmed to fit at the base of the vertical wall. Adjust the exposure slightly in the previous two courses so that the last course is at least 8 inches wide. Apply a continuous piece of metal flashing over the last course of shingles by embedding it in approved flashing cement and nailing it to the roof. The metal flashing strip shall be bent to extend at least 5 inches up the vertical wall and at least 4 inches onto the last shingle course. Do not nail the strip to the wall. Apply an additional row of shingles over the metal flashing strip, trimmed to the width of the strip. Bring siding down over the vertical flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line. Do not nail siding into the vertical flashing. If the vertical front wall meets a sidewall, as in dormer construction, cut flashing so that it extends at least 7 inches around the corner. Continue up the sidewall with step flashing as detailed above.


Soil Stacks and Vent Pipes:

Apply shingles up to the vent pipe. Cut a hole in a shingle to go over the pipe and set the shingle in ASTM D 4586 flashing cement. A preformed flashing flange that fits snugly over the pipe is then placed over the shingle and vent pipe and set in approved flashing cement. Place the flange over the pipe to lay flat on the roof. After the flashing is in place, resume shingle application. Cut shingles in successive courses to fit around the pipe and embed them in approved flashing cement where they overlap the flange. Avoid excessive use of cement as it may cause blistering. Do not drive fasteners close to the pipe. The lower part of the flange shall overlap the lower shingles and the side and upper shingles shall overlap the flange.

For ventilator and exhaust stacks, follow the same procedure, but bring the shingles up to the pipe from both sides and bend the flange over the ridge to lie in both roof planes, overlapping the roof shingles at all points. Ridge shingles are then positioned to cover the flange. Embed the ridge shingles in approved flashing cement where they overlap the flange.

Chimneys:

Chimneys shall be flashed with a two-piece base and cap flashing to allow for differential movement. Apply shingles up to the front edge of the chimney before any flashings are installed. Apply a coat of ASTM D 41 asphalt primer if the chimney is constructed of masonry or metal to seal the surface and to provide good adhesion to all points where flashing cement will later be applied.



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Product Control Division


Install 26 ga. corrosion resistant metal, or other approved corrosion resistant materials, as base flashing between the chimney and the roof deck, on all sides. Apply the base flashing to the low side of the chimney first. Bend the base flashing so that the lower section extends at least 4" over the shingles and the upper section extends at least 12" up the vertical face of the chimney. Work the flashing firmly and smoothly into the joint between the shingles and chimney. Set both the roof and chimney overlaps in approved flashing cement placed over the shingles and on the chimney face. The flashing may be secured against the chimney with one or two nails to hold it in place until the cement sets. Use metal step flashing for the sides of the chimney, positioning the units in the same manner as flashing on a vertical sidewall. Cut, bend and apply the step flashing around the side of the chimney. Secure each flashing unit to the masonry with approved flashing cement and to the deck with approved nails. Embed the end shingles in each course that overlap the flashing in an 8" bed of approved flashing cement. Place the rear base flashing over the cricket and the high side of the chimney.

Apply the high side base flashing by bringing the end shingles in each course up to the cricket and secure in a bed of approved flashing cement. Cap flashings shall be installed over all base flashings. Set the metal cap flashing into the brickwork or exterior siding material. If brick, rake out the mortar joint to a depth of 1½ inches and insert the bent edge of the flashing into the cleared joint. Refill the joint with mortar. Bend the cap flashing down to overlap the base flashing. Use one continuous piece of cap flashing on the low side of the chimney. On the sides and high side of the chimney, use several pieces of similar-sized flashing, trimming each to fit the particular location of brick joint or substrate material. Start the side units at the lowest point and overlap at least 3 inches. Chimney crickets shall be waterproofed in compliance with options published by the shingle manufacturer. If crickets are formed from wood, or other nailable materials a double layer underlayment shall be applied prior to waterproofing.

Hips and Ridges: Apply premanufactured hip and ridge shingle components or cut hip and ridge shingles from manufacturer's shingles, where approved. Lay hip and ridge away from prevailing wind. Insure all fasteners are covered. Exposure shall not exceed 5" unless premanufactured hip and ridge specifically allows for greater exposure. Taper the lap portion of each cap shingle slightly so that it is narrower than the exposed portion.

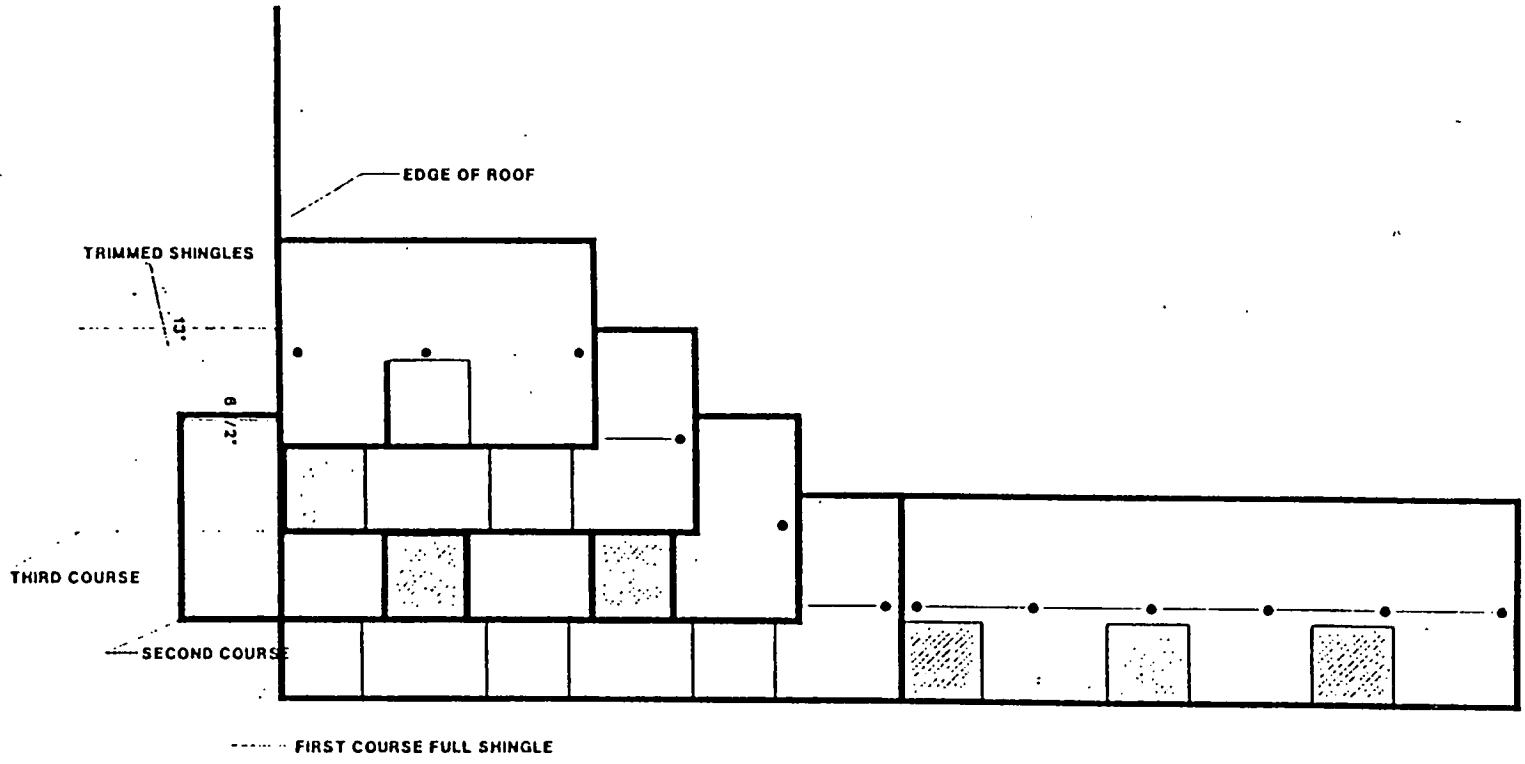
Slope Range: 4":12" and Greater

Maximum Fire Classification: Class 'A'



Frank Zuloaga, Roofing Plans Examiner
Product Control Division


OAKRIDGE SHADOW AR
DETAIL A



[Signature]
Eric Zetoga, Roofing Process Examiner
Product Control Division

Limitations:

1. Shingles shall be labeled with the Product Acceptance Number noted above.
2. The manufacturer shall provide clearly written application instructions.
3. Underlayment materials and application shall be in compliance with Chapter 34 of the South Florida Building Code.
4. This is a general application procedure for asphalt and modified asphalt shingles. Manufacturers may place additional requirements upon roof system installations in the South Florida Building Code jurisdiction for warranty purposes. Consult manufacturer's application instructions before system installation.
5. Exposure and course layout shall be in compliance with Detail 'A', attached.
6. Nailing shall be in compliance with Detail 'B', attached.
7. System shall not be installed at slopes less than 2":12".
8. Applications for roofing permits must be accompanied by Section II of the Uniform Building Permit, clearly indicating the extent of the work to be performed, along with current manufacturer's specifications and details. In addition, a copy of this approval shall be attached to the permit application. Reference shall be made to all appropriate data for the required fire rating.


Frank Zuloaga, Roofing Plans Examiner
Product Control Division

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, including test supporting data, engineering documents, are no older than eight (8) years.
- 2 Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Metro-Dade County Product Control Approved", or as specifically stated in the specific conditions of this Acceptance.
- 3 Renewals of Acceptance will not be considered if:
 - a) There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes;
 - b) The product is no longer the same product (identical) as the one originally approved;
 - c) If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product;
 - d) The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
- 4 Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
- 5 Any of the following shall also be grounds for removal of this Acceptance:
 - a) Unsatisfactory performance of this product or process;
 - b) Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
- 6 The Notice of Acceptance number preceded by the words Metro-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
- 7 A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 20.

END OF THIS ACCEPTANCE

Page 20 of 20



Frank Zuloaga, Roofing Plans Examiner
Product Control Division

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 3-22-1, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4832	COCORULLO	insulation	Passed	
(10)	20 Island Rd. WILSON BLDGS.		BG	
4657	Demar Kaman	insulation	---	DUPLICATE -
	19 Castle Hill			SEE PAGE 1
4740	Gniffis	deck		
(11)	140 S.S.P. Rd. MASTER PLAN BLDG/REMOD	to ?		
4869	Digby	Sheathing	Passed	
(8)	7 Oakwood PACIFIC CFG.		BG.	
4868	Pitsickis	sheathing	Passed	
(9)	28 W. Hi. Pt. PACIFIC CFG.		BG	
41691	Wattle	rough	Passed	2 ND REINSPECT; IF NOT
(6)	20 N. Ridgeview DRIPTWOOD - ACHW MORRIS	framing MUST HAVE REU. DRGS.	BG.	READY/INCOMPLETE REINSPE. FEE (\$30.00) NEXT CALSP.

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~2000~~, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
7869	Digby	tin-tag &	Passed	
(3)	Rosewood Pacific	metal	BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4527	Seely	tie-beam &	PASSED	as late as
(10)	37 Lofting Way Enbber	stairs	BG (VERIFIED - SU)	possible
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4691	Wattle	tin-tag &	Reject	NOT Ready.
(2)	20 N Ridgeview Dn/twood	metal	BG - *	Re-inspection Fee.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
	ZARRO	TIE BEAM	Passed	
4717	124 N.S.P. Rd.		BG.	
(11)	Buford			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 4-7, 2000; Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4659	Conway	mechanicals	Reject	Tape or mastic
(2)	17 Lofting Way Conway		BG.	Duct Connections
			No Fee	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4870	Doathy Stephens	Tin-Tag	Passed	
(5)	62 N. River Rd. PACIFIC REG. (PERMITS)	Metal	BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4869	Yael Digby	Final Inspe	Passed	
(6)	7 Oakwood Dr. 7 OAKWOOD DR.; PACIFIC REG.	RE ROOF	BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4654	Faglin	Shutter	Reject	FIELD COPY OF SHUTTER DOC'S
(7)	105 Henry Sewall Way		BG.	APPROVED - FOR REVIEW
			No Fee	DRAWING NOT COMPLETE Will Get CORRECT DRAWING
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4813	Folweiler	tie beam &	Partial	NO SUB PERMITS!
(3)	11 Lofting Way AKK HOMES	column	BG.	- A/C; PLUMB; REG.
			SAID they	Have permits except Roof
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4779	Van Wagner	roof metal &	Passed	STOP WORK ON REG. PENDING
4771	3 Paloma Way	tintag	BG.	SUBMITAL OF M-DC PROD. APPR
(4)	Diaz 2 (ENGINEERED HOMES)	(REG. CONTR.??)		FOR REVIEW/APPROVAL
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4613	Subin	driveway	Passed	REVISED D/W TURNOUT
(1)	3 Palm Court MORRIS		BG.	APPROVED - FIELD COPY TO CASE

OTHER: (8) LIND; 6 ISLAND RD.; DELIVER C.D. (w/cc FOR CONTR.)
ADDIN4 DRAIN IN ONE SECTION OF SWALE.

INSPECTOR (Name/Signature): _____

9962

TRELLIS

&

PAVER PATIO



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK

A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	9992	DATE ISSUED:	02/02/2012
SCOPE OF WORK:	TRELLIS AND PAVER PATIO		
CONTRACTOR:	O/B		
PARCEL CONTROL NUMBER:	133841-009-000 - 00100-7	SUBDIVISION	Oakwood-L 10
CONSTRUCTION ADDRESS:	7 OAKWOOD		
OWNER NAME:	CORSON		
QUALIFIER:		CONTACT PHONE NUMBER:	954-605-2684

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

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

**24 HOUR NOTICE REQUIRED FOR INSPECTIONS – ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS: 9:00AM TO 3:00PM – MONDAY THROUGH FRIDAY**

INSPECTIONS

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

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

Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 1/30/12 Permit Number: 9992
 OWNER/TITLEHOLDER NAME: MARTIN & DIANE CORSON Phone (Day) 954-605-2684 (Fax) 877-828-2126
 Job Site Address: 7 OAKWOOD DR City: STUART State: FL Zip: 34986

Legal Description _____ Parcel Control Number: _____
 Owner Address (if different): _____ City: _____ State: _____ Zip: _____

Scope of work (please be specific): LANDSCAPE TRELLIS & PAVEL PATIO

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

COST AND VALUES: (Required on ALL permit applications)
 Estimated Value of Improvements: \$ 500.00
 (Notice of Commencement required when over \$2500 prior to first inspection, \$7,500 on HVAC change out)
 Is subject property located in flood hazard area? VE10 AE9 AE8 X
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
 Estimated Fair Market Value prior to improvement: \$ _____
 (Fair Market Value of the Primary Structure only, Minus the land value)
 PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

State License Number: _____ OR: Municipal License Number: _____

LOCAL CONTACT: _____

DESIGN PROFESSIONAL: MARK CORSON License # JAN 31 2012 Phone Number: _____

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

AREAS SQUARE FOOTAGE: Living: _____ Garage: _____ Enclosed Storage: _____

Carport: _____ Total under Roof _____ Elevated Deck: _____ Enclosed area below BFE*: _____

* Enclosed non-habitable areas below the Base Flood Elevation greater than 300 sq. ft. require a Non-Conversion Covenant Agreement.

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

NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

OWNER SIGNATURE: (required)
 (OF OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED))
Martin Corson

CONTRACTOR SIGNATURE: (required)

State of Florida, County of: Martin

On State of Florida, County of: _____

This the 30th day of January, 2012

This the _____ day of _____, 20__

by Martin Corson who is personally

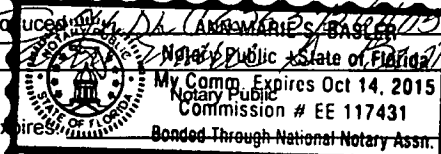
by _____ who is personally

known to me or produced _____

known to me or produced _____

as identification. _____

As identification. _____



My Commission Expires: _____

My Commission Expires: _____

Notary Public

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



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

BUILDING PERMIT RECEIPT

PERMIT NUMBER:	9992
ADDRESS	7 OAKWOOD
DATE 02/12/2012	SCOPE OF WORK

SINGLE FAMILY OR ADDITION /REMODEL	Declared Value	\$	
Plan Submittal Fee (\$350.00 SFR, \$175.00 Remodel < \$200K)		\$	
(No plan submittal fee when value is less than \$100,000)			
Total square feet air-conditioned space: (@ \$121.75 per sq. ft.)		s.f.	
Total square feet non-conditioned space, or interior remodel: (@ \$59.81 per sq. ft.)		s.f.	
Total square feet remodel with new trusses: @ \$90.78 per sq. ft.		\$	
Total Construction Value:		\$	
Building fee: (2% of construction value SFR or >\$200K)		\$	
Building fee: (1% of construction value < \$200K + \$75 per insp.)			
Total number of inspections (Value < \$200K) @\$75 ea.		\$	
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	500.00
Total number of inspections @ \$75.00 each	1		75.00
Dept. of Comm. Affairs Fee: (1.5% of permit fee - \$2.00 min)		\$	2.00
DBPR Licensing Fee: (1.5% of permit fee - \$2.00 min.)		\$	2.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	84.00

pd
 CK# 3983

**Martin County, Florida
Laurel Kelly, C.F.A**
generated on 1/31/2012 1:24:34 PM EST
Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-009-000-00100-7	27848	7 OAKWOOD DR, SEWALL'S POINT	\$387,980	1/28/2012

Owner Information

Owner(Current)	CORSON MARTIN & DIANE
Owner/Mail Address	7 OAKWOOD DR STUART FL 34996
Sale Date	8/8/2007
Document Book/Page	2269 2702
Document No.	2031211
Sale Price	584500

Location/Description

Account #	27848	Map Page No.	SP-05
Tax District	2200	Legal Description	OAKWOOD LOT 10
Parcel Address	7 OAKWOOD DR, SEWALL'S POINT		
Acres	.3940		

Parcel Type

Use Code	0100 Single Family
Neighborhood	120400 Hmwd,Palm Ro,Kngstn,Okwd, Pine

Assessment Information

Market Land Value	\$175,000
Market Improvement Value	\$212,980
Market Total Value	\$387,980



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

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

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

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

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

Owner/Builder Applicant Name: MARTIN CORSON

Site address of the proposed building work: 7 OAKWOOD DR

Name of legal title owner of the address above: MARTIN & DIANG CORSON

Describe the scope of work for the proposed new construction: LANDSCAPE TRELLIS & PAVED PATIO

Name of Architect of Record: M.A. CORSON Structural Engineer of Record: _____

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

What provisions have you made for Liability and Property Damage Insurance? _____

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

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

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

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

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

Electric: N/A Plumbing: N/A HVAC: N/A

Other: _____

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

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

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

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



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



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

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

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

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

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

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

ON THIS 30th DAY OF January, 2012.

PROPERTY ADDRESS 7 ORKWOOD DR

CITY STUART STATE FL ZIP 34996

Martin L. Corson

SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 30th DAY OF January 2012

BY Martin L. Corson

PERSONALLY KNOWN _____

OR PRODUCED ID FL DL C625372640572

TYPE OF ID "

Ann-Marie S. Basler

NOTARY SIGNATURE



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 1-24-12 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9947	Pfeiffer 104 Henry Sewall Chitwood	Final Pavers	Pass	None INSPECTOR <i>[Signature]</i>
	118 S. SA RD	UNSATISFACTORY Pool	fail	INSPECTOR
9917	Ford 98 N Masterpiece	W/G Plumbing	Pass	INSPECTOR <i>[Signature]</i>
9953	Lepaw 61 S Sewalls Cosmopolitan Land	Final driveway	Pass	None INSPECTOR <i>[Signature]</i>
	Lot accross from H. Sewalls Way	BRACIL Pavers	fail	INSPECTOR
	114 N DRIVEWAY		fail	INSPECTOR
	OAKWOOD	ROBERTA ALBON A.D. PERENA	fail	INSPECTOR

TOWN OF SEWALL'S POINT
APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Tree Defined: Any self-supporting, woody plant which normally grows to an overall height of at least fifteen (15) feet in the vicinity of the town. Replant and landscape trees shall be considered a tree.

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Trees with a diameter of less than one inch.

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new S.F.R., a site plan which shall include the dimensional location on a survey, scale drawing or aerial photograph, superimposed with lot lines of scale, of all existing or proposed structures, improvements and site uses, location of affected trees identified with an estimated size and number, etc.
 - d. for an existing residence, a drawing of house with location of trees to be removed, relocated can be submitted in lieu of site plan.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner DIGBY Address 7 OAKWOOD DR. Phone 781-2586

Contractor NATURAL BALANCE Address _____ Phone 287-5149

No. of Trees: REMOVE 1 Type: EUGENIA

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: TOO CLOSE TO CORNER OF HOUSE + ROOF.

Signature of Applicant [Signature] Date 6/29/04

Approved by Building Inspector: [Signature] Date 6/30 Fee: 0

Plans approved as submitted _____ Plans approved as revised/marked: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date JUNE 30 ~~12 2004~~ TREE REMOVAL PERMIT No 2292

APPLIED FOR BY DIGBY (Contractor or Owner)

Owner 70 ANWOOD DRIVE

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 1 EUCENIA

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____ FEE \$ 0

Signed, _____ Applicant Signed, Gene Simmons (JOS) Town Clerk BUILDING OFFICIAL

TO TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M. - NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for drawing or site plan]

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/30, 20014 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6677	GOUER	ALL TRADES		
5	5 RIVERVIEW O/B	FRAMING	PASS	INSPECTOR:
6544	LANCASTER	BEAM	PASS	
3	5 PINEAPPLE LA MASTERPIECE			INSPECTOR:
TREE	DUGBY	TREE	PASS	
4	7 OAKWOOD			INSPECTOR:
TREE	READ	TREE	PASS	
6	13 SIMARA ST			INSPECTOR:
6480	WADE	FOOTER		CANCEL
	9 E. HIGH POINTS PINE OCEAN BLUES			INSPECTOR:
6551	LANGER	FOOTER PADS	PASS	(6) FT 6 PADS @
13	3 LOFTING WAY FLORIDA'S FINEST			REAR OF HOUSE INSPECTOR:
6781	SANGRAN KA	FOOTER/SLAB	FAIL	
7	20 S. VIA LUCINDIA ARTELA			INSPECTOR:

OTHER: _____



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

OK

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

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

Owner MARTIN L. & DIANE J. CORSON Address 7 OAKWOOD DR Phone (772) 781-2125

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 1 Species: Carrot wood

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

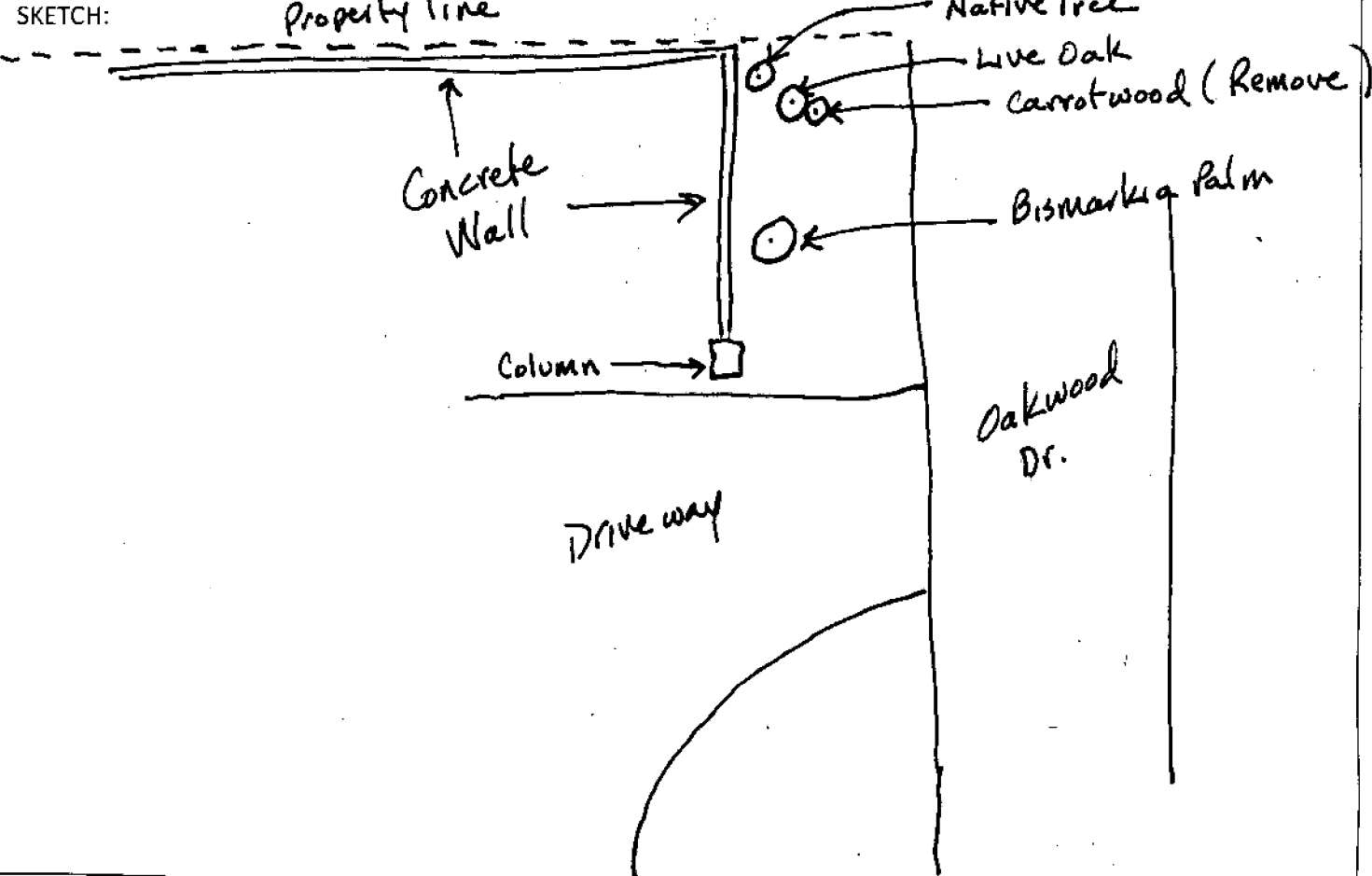
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal/relocation (See notice above) This tree is growing next to both a Live Oak and other native tree (paper type bark that peels). Need to thin that area and Carrotwood is more like a weed than tree

Signature of Property Owner Martin L. Corson Date 1/23/09

Approved by Building Inspector: [Signature] Date 1/26 Fee: -

NOTES: Approval is also given to remove BRAZILIAN PEPPER TREES - CARROTWOOD STUMP SHOULD BE BRUNED OR IT WILL REGERMINATE NEW SHOOTS -





TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road
Sewall's Point, Florida 34996
Tel 772-287-2455 Fax 772-220-4765

ok

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

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

Owner: ~~MARTIN & DIANE~~ ^{COLSON} Address: ~~XXXXXXXXXX~~ Phone: (772) 781-2125

Contractor: _____ Address: _____ Phone: _____

No. of Trees: REMOVE 1 Species: Carrot wood

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

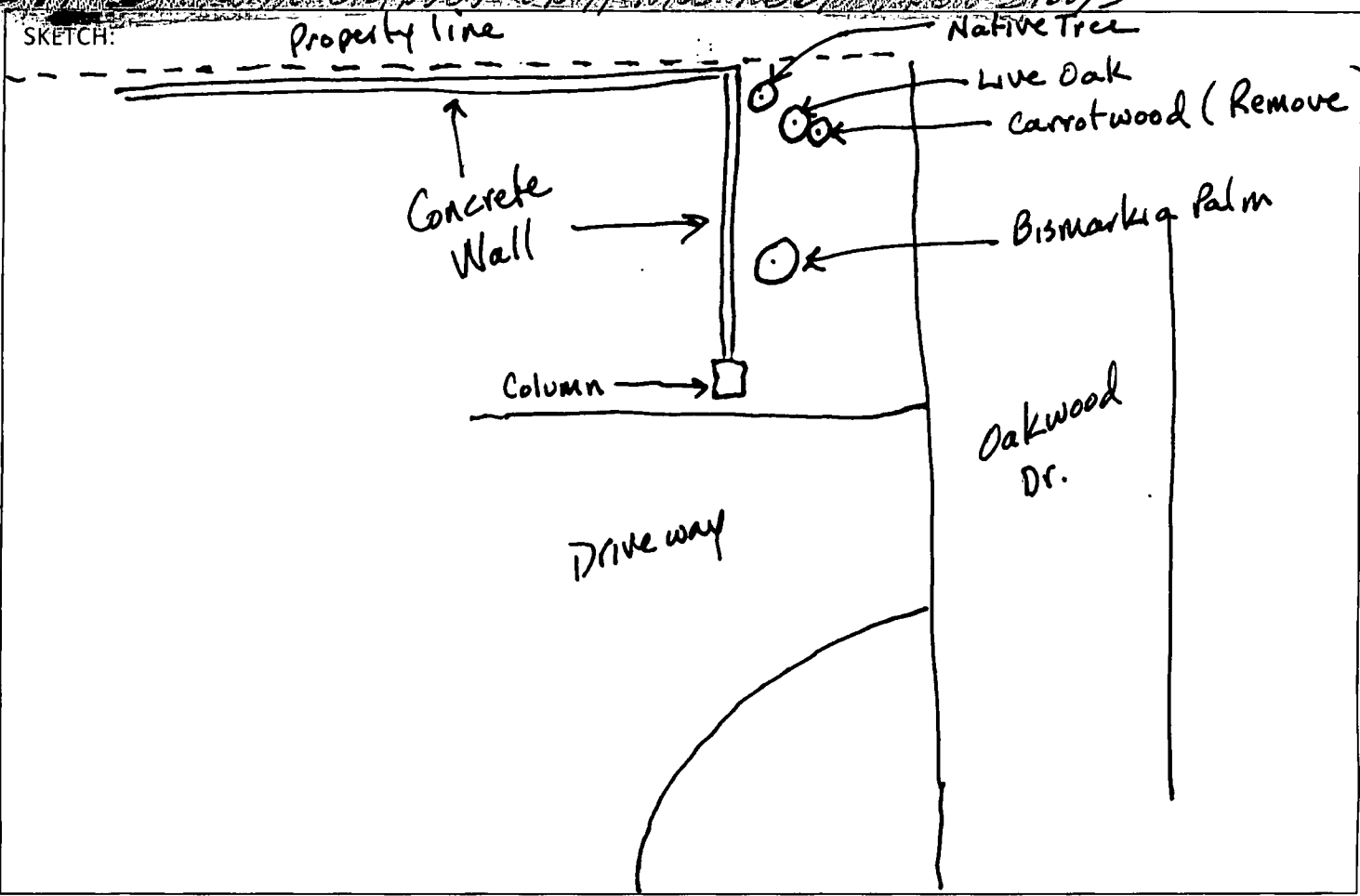
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) This tree is growing next to both a Live Oak and other Native tree (paper type bark that peels). Need to thin that area and Carrotwood is more like a weed than tree

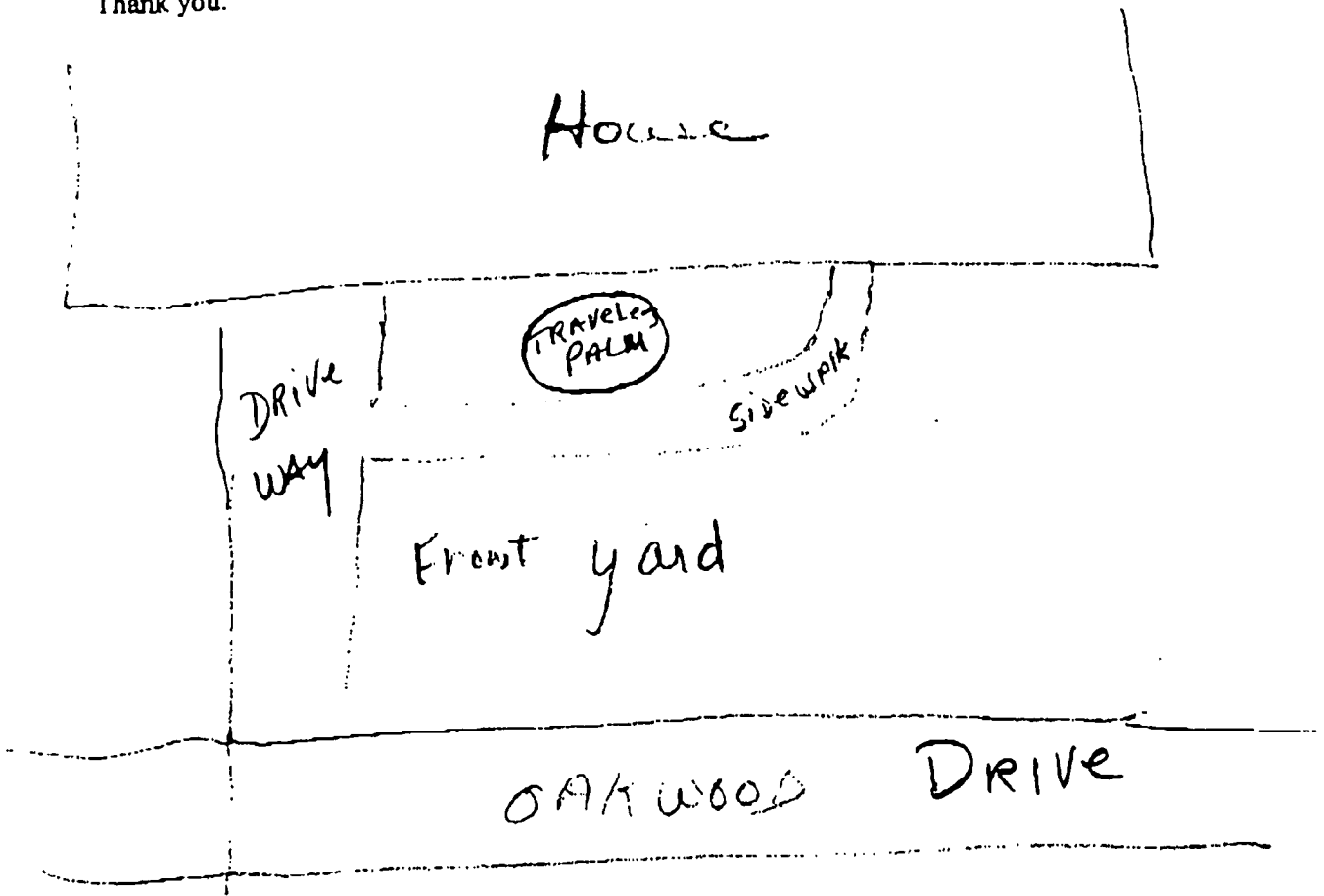
Signature of Property Owner: Martin & Diane Date: 1/23/09

Approved by Building Inspector: [Signature] Date: 1/26 Fee: -

NOTES: ~~There is no other vegetation in the area.~~



I planted a cute little 5 foot traveler's palm a few years ago, in a flower bed near my house, not realizing how huge it was going to get. It has now become massive and is growing out of control and is spreading too close to the house with no apparent stopping. I would like to remove it before it continues to grow too close to the house threatening the structure and possibly a water line which is just a couple of feet away. Thank you.



~~289-5511~~ Fax to: 220-4765

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Mariberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeve, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new single family resident see above.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary. *see ATTACHED*
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner Elizabeth Wilkinson Address 8 OAKWOOD DR Phone 349-0961

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE Type: TRAVELER'S PALM

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: see attached

Signature of Property Owner [Signature] Date 1-8-07

Approved by Building Inspector: [Signature] Date 1/15 Fee: 0

Plans approved as submitted _____ Plans approved as revised/marked: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date 1-15-07 ~~1/15/07~~ TREE REMOVAL PERMIT No 0567

APPLIED FOR BY Wilkinson (Contractor or Owner)

Owner 8 Oakwood Dr

Sub-division _____, Lot _____, Block _____

Kind of Trees Traveler palm

No. Of Trees: REMOVE _____

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____
FEE \$ 0

Signed, _____ Applicant

Signed, Phil Wintercorn
Bldg Inspector

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M. - NO SUNDAY WORK

TREE REMOVAL PERMIT

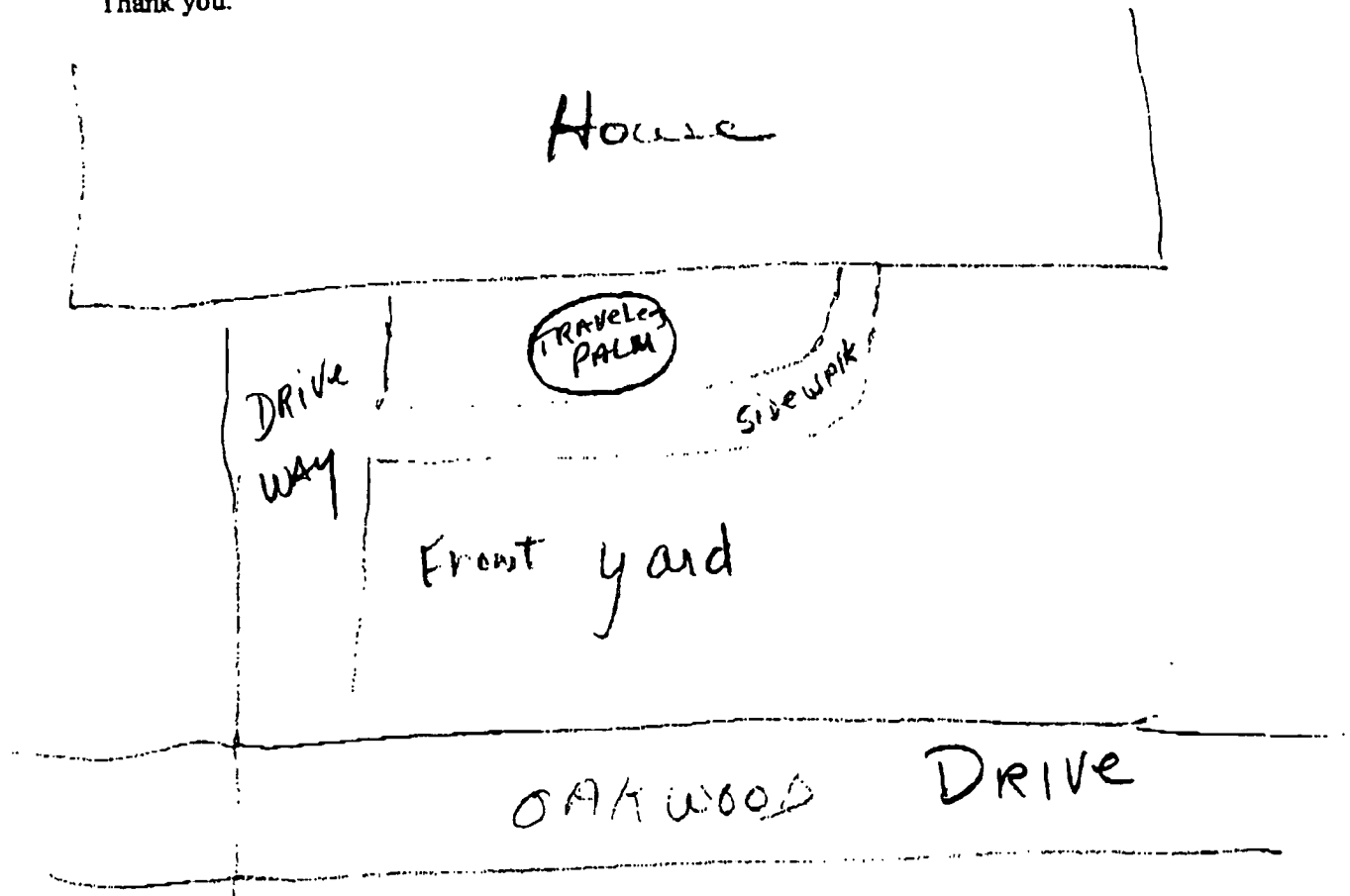
RE: ORDINANCE 103

Large empty rectangular box with horizontal lines, likely for site plan or drawing.

PROJECT DESCRIPTION _____

REMARKS _____

I planted a cute little 5 foot traveler's palm a few years ago, in a flower bed near my house, not realizing how huge it was going to get. It has now become massive and is growing out of control and is spreading too close to the house with no apparent stopping. I would like to remove it before it continues to grow too close to the house threatening the structure and possibly a water line which is just a couple of feet away. Thank you.



~~289-5511~~ FAX to: 220-4765

Permit Fee:

1. Tree permits are \$15.00, payable in advance.
2. No permit fee needed for tree which is dead, diseased, injured, hazardous to life or property, or a prohibited species. Prohibitive species include Earleaf Acacia, Woman's Tongue, Norfolk Island Pine, Bischofia, Schefflera, Ear Tree, Eucalyptus, Non-Native Ficus, Silk Oak, Chinese Tallow Tree, Java Plum, Chinaberry, Brazilian Peppers, Australian Pine, and Melaleuca and must be removed before construction begins on new single family residence (S.F.R.).

No removal permits will be issued for native species trees: Black Ironwood, Black Mangrove, Blolly, Buttonwood, Cabbage Palm, Cocoplum (red tip and green tip), Coral Bean, Deer Moss, Gray Twig, Gopher Apple, Gumbo Limbo, Inkwood, Laurel Oak, Leather Fern, Live Oak, Mahogany, Marlberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrub Pine, Satinleaf, Saw Palmetto, Scrub Hickory, Sea Grape, Sea Oxeye, Slash Pine, Stoppers, Wild Lime, Sumac (southern), Sugar Berry (Hackberry), Torchwood, Wild Coffee, Varnish Leaf, Water Oak, Wax Myrtle, West Indian Cherry White Mangrove

Application procedures:

1. Fill out application information below to include:
 - a. applicant information
 - b. written statement giving reasons for removal, relocation, or replacement if necessary
 - c. for a new single family resident see above.
2. Place identification tape or ribbon on each tree for clarity to inspector if necessary. *see ATTACHED*
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Owner Elizabeth Wilkinson Address 8 OAKWOOD DR Phone 349-0961

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE Type: TRAVELER'S PALM

No. of Trees: RELOCATE _____ WITHIN 30 DAYS Type: _____

No. of Trees: REPLACE _____ WITHIN 30 DAYS Type: _____

Written statement giving reasons: see attached

Signature of Property Owner E. Wilkinson Date 1-8-07

Approved by Building Inspector: [Signature] Date 1/15 Fee: 0

Plans approved as submitted _____ Plans approved as revised/marked: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date 1-15-07 ~~1-15-07~~ TREE REMOVAL PERMIT No 0567

APPLIED FOR BY Wilkinson (Contractor or Owner)

Owner 800 Oakwood Dr

Sub-division _____, Lot _____, Block _____

Kind of Trees Traveler palm

No. Of Trees: REMOVE _____

No. Of Trees: RELOCATE _____ WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

Signed, _____ Applicant

Signed, Phil Wintercorn
Bldg Inspector
FEE \$ 0
~~Time Clock~~

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspectio
WORK HOURS 8:00 A.M. - 5:00 P.M. - NO SUNDAY WORK

TREE REMOVAL PERMIT

RE: ORDINANCE 103

Large empty rectangular box for drawing or additional notes.

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection Mon Wed Fri 10:30, 2000; Page 1 of 1.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ N	5001 Bercau	1st floor	PASSED	
	④ 11 River Crest Renar	tie-beam & column	✗	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ N	5092 Aune	form	PASSED	as late as
	⑥ 6 Michael Rd. Masterpiece	board SCMB	✗	possible FORMBOARD SURVEY W/VOID ✗
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ N	5091 O'Connor	sh. eathing	PASSED	10:00-10:50 REG. 11:00 + ✓
	⑤ 16 Fieldway Dr. Pacific	(REINSPECT - EATT) - COMPLETE ✓	✗	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ N	4717 Zerro	"30 day	PASSED	AGMT TO CONTR. FOR EXEC.
	③ 124 N.S.P. Rd. BUFOA) CONST (12/2/00)	temp. power"	✗	- REVIEWED REG; REINSPT. - NO FEE
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ S	4956 Foglia	final pool	PASSED	
	① 101 H. Sewall Way STARLITE POOL KUDS	(KLOG PINK 10/25-4803)	✗	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ S	██████████ DILKINSON	██████████ FIELD VENT. ✓	PASSED	EXCESSIVE = PROHIBITED
	② ██████████		✗	PERMS = THREAT TO SEPTIC.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS

OTHER: _____

INSPECTOR (Name/Signature): _____

which because of the easily breakable
 branches could be a hazard during a
 hurricane. In the 4 years we have
 lived here we have planted many trees,
 shrubs and flowers to beautify the yard.
 But unfortunately these 2 must come
 out. The stand of ~~plum~~ palms need to
 come out very soon so we can fix the
 septic problem.

The Eucalyptus can be removed later.
 Will be replaced by a Guava tree
 somewhere in the front or side yard.

P.S. We would be happy to give the palms away
 if someone wants to remove them and
 it doesn't cause further damage to septic
 + drain field.

(Facing house - Palms are to right of entry way) ✓
 (Eucalyptus - Right side of house) ✓
 FIELD
 VENEZUELA
 W/20/08

FAX 220-4765

RECEIVED
OCT 27 2000

TOWN OF SEWALL'S POINT

TREE REMOVAL, RELOCATION, REPLACEMENT

10/30/00 (NO LOCATION SKETCH)

BY: [Signature]

Permit #

Date Issued

B. Wilkinson

Sewall's Point

PLEASE RUSH

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

Owner Bruce Wilkinson Address 8 OAKWOOD DR. Phone 286-1851
Contractor _____ Address _____ Phone _____

Number of trees to be removed (list kinds of trees) 2 ONE IS A STAND OF PALMS PLANTED ON DRAIN FIELD OF SEPTIC TANK. WE'VE BEEN ADVISED THEY
Number of trees to be relocated within 30 days (no fee) (list kinds of trees):
MUST BE TAKEN OUT PER RAY COOKE SEPTIC BEFORE REPAIRS CAN BE MADE

Number of trees to be replaced (list kinds of trees):
THE OTHER TREE IS ALSO NEAR THE DRAIN FIELD (A MESSY EUCALYPTUS)

Permit Fee \$ ~~(\$75.00)~~ first tree plus \$10.00 - each additional tree - not to exceed \$100.00 \$15.00

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

Plans approved as submitted _____ Plans approved, as marked _____

Permit good for one year. Fee for renewal of expired permit is \$5.00

Signature of applicant Bruce Wilkinson Date submitted 10-27-00

Approved by Building Inspector _____ Date _____

Approved by Building Commissioner _____ Date _____

Completed _____ Date _____ Checked by _____

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

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

TOWN OF SEWALL'S POINT, FLORIDA

FILE

Date 10/30/00 19____ TREE REMOVAL PERMIT No 0378

APPLIED FOR BY BRUCE WILKINSON (Contractor or Owner)

Owner 8 OAKWOOD DR.

Sub-division _____, Lot _____, Block _____

Kind of Trees EUCALYPTUS / PALMS (OVER SEPTIC PUMPH) - STAND

No. Of Trees: REMOVE PER KPP (1) EUCALYPTUS + SIMIL STAND OF PALMS

No. Of Trees: RELOCATE -0- WITHIN 30 DAYS (NO FEE)

No. Of Trees: REPLACE -0- WITHIN 30 DAYS

*FILED VERIF.
10/30/00*

REMARKS SEE APPLICATION FOR BETTER DESCRIPTION OF LOCATION & REASON FOR REMOVAL

Signed, (SIGNATURE ON FILE)
Applicant

Signed, [Signature]
Town Clerk Bruce Atkinson

FEE \$ 0

TOWN OF SEWALL'S POINT

Call 287-2455 - 8:00 A.M.-12:00 Noon for Inspection
WORK HOURS 8:00 A.M. - 5:00 P.M.—NO SUNDAY WORK.

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Empty grid area for project details]

PROJECT DESCRIPTION _____

[Empty lines for project description]

REMARKS _____

[Empty lines for remarks]

OK

866-219-4071

04/09/2013 09:58

7722204765

TOWN OF SEWALLS POINT

PAGE 02/02



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

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

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

Owner Elizabeth Wilkinson Address 8 ORCHWOOD DR Phone 772-223-6720

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 2 Species: Coconut Palms

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

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

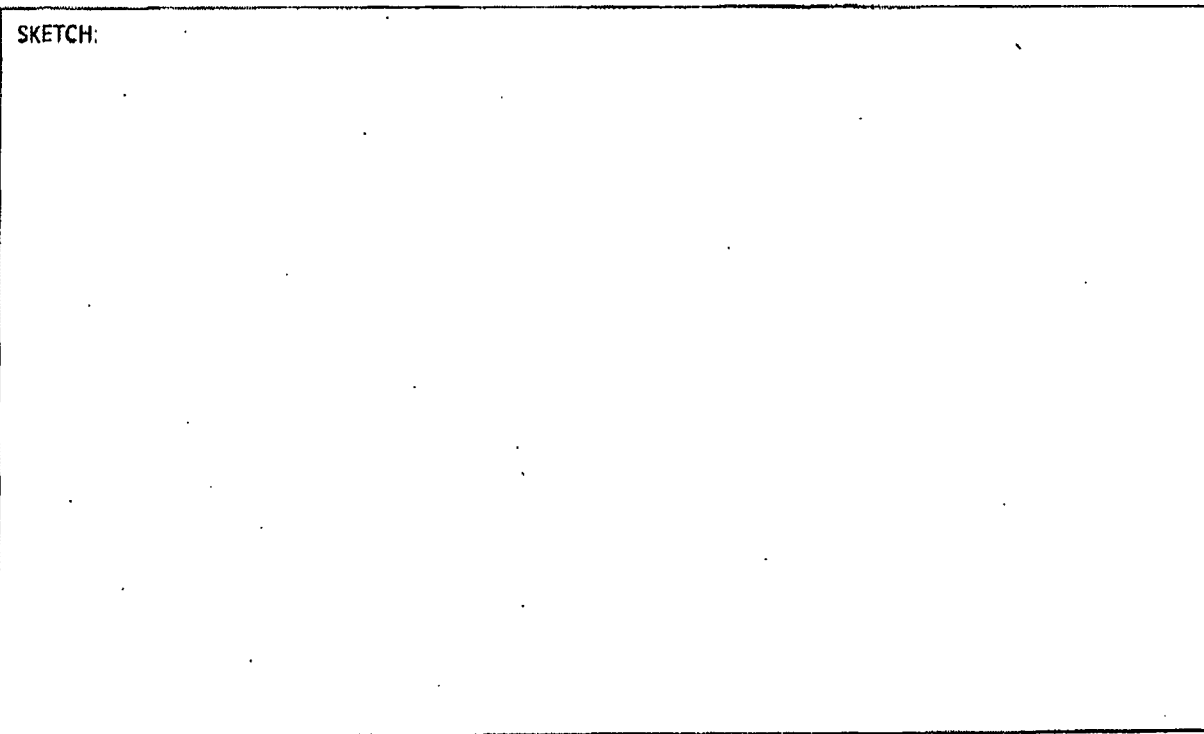
ALL VEGETATIVE DEBRIS MUST BE REMOVED FROM THE PROPERTY

Reason for tree removal /relocation (See notice above) 2 Coconut Palm trees by driveway ARE infested with invasive species; "SPIRILING White Flies" Per Adaptive Pest Control

Signature of Property Owner [Signature] Date 4-9-13

Approved by Building Inspector: [Signature] Date 4-11-13 Fee: N/A

NOTES: _____



-04/09/2013 09:58

7722204765

TOWN OF SEWALLS POIT

PAGE 01/02



TOWN OF SEWALL'S POINT BUILDING DEPARTMENT

One S. Sewall's Point Road
 Sewall's Point, Florida 34996
 Tel 772-287-2455 Fax 772-220-4765

**APPLICATION FOR TREE REMOVAL, RELOCATION OR
 REPLACEMENT PERMIT ON DEVELOPED RESIDENTIAL PROPERTY**

No permit required for:

1. Trimming of trees unless it effectively removes it, meaning trimming or pruning to the extent that a plant's natural function is severely altered.
2. Removal of trees with a diameter of less than two inches.
3. Removal of citrus or non-native fruit trees.

Sec. 70-22. Permit required for tree removal.

A permit as provided for in this chapter shall be required for the removal (or transplant) of any tree with a two-inch caliber or more upon any parcel upon which there is a residence under a validly issued permit. Permit requirements are outlined under article V Town Ordinances. If the town has to procure the services of a suitable professional licensed in the State of Florida to ascertain the condition or type of a tree(s) prior to or after removal of the tree(s) then the cost of such will be borne by the property owner. (Ord. No. 303, 7-20-04)

Application procedures:

1. Complete application information including sketch below.
2. Place identification tape or ribbon on each tree for clarity to Inspector if necessary.
3. Inspector will visit site and review application and pass, fail or revise.
4. Permit must be picked up and posted on site prior to work proceeding.
5. Permits expire if work does not begin within 3 months and if activity is interrupted over 45 days.

Permit Fee:

1. Tree permits are \$15.00.
2. Permit - No fees are assessed for tree which is dead, diseased, injured, hazardous to life or property, or listed as a prohibited species by the Florida Department of Environmental Protection.

NOTICE:

A PERMIT WILL NOT BE ISSUED FOR THE REMOVAL ANY NATIVE SPECIES TREES UNLESS ONE OR MORE OF THE FOLLOWING CONDITIONS EXIST: (SEC. 70-87. PERMIT ISSUANCE OR DENIAL TOWN ORDINANCES).

- A. THE VEGETATION IS LOCATED IN AN AREA WHERE STRUCTURES, UTILITIES OR IMPROVEMENTS MAY BE PLACED ACCORDING TO THE TOWN CODE; AND TO PRESERVE THE VEGETATION WOULD UNREASONABLY RESTRICT THE ECONOMIC ENJOYMENT OF THE PROPERTY; AND THE VEGETATION CANNOT BE RELOCATED ON THE SITE BECAUSE OF AGE, TYPE OR SIZE.
- B. THE VEGETATION IS DISEASED, INJURED, LOCATED TOO CLOSE TO THE EXISTING OR PROPOSED STRUCTURES, INTERFERES WITH EXISTING UTILITY SERVICE; OR CREATES UNSAFE VISUAL OBSTRUCTION. (A PROFESSIONAL ARBORIST'S OPINION WILL BE REQUIRED)
- C. THE VEGETATION IS TO BE MOVED TO ANOTHER LOCATION ON THE OWNER'S PROPERTY OR IS TO BE REPLACED BY ANOTHER TREE OR SHRUB ON THE OWNER'S PROPERTY, REGARDLESS OF LOCATION.

IF THE PERMIT IS DENIED, THE DEPARTMENT SHALL NOTIFY THE APPLICANT IN WRITING OF THE BASIS FOR DENIAL USING THE CRITERIA LISTED IN THIS SECTION.

*****THE FOLLOWING SPECIES ARE CONSIDERED NATIVE, PROTECTED SPECIES***:**

BLACK IRONWOOD, BLACK MANGROVE, BLOLLY, BUTTONWOOD, CABBAGE (SABLE) PALM, COCOPLUM (RED TIP AND GREEN TIP), CORAL BEAN, DEER MOSS, GRAY TWIG, GOPHER APPLE, GUMBO LIMBO, INKWOOD, LAUREL OAK, LEATHER FERN, LIVE OAK, MAHOGANY, MARLBERRY, MASTIC, MULBERRY, MYRTLE OAK, PARADISE TREE, PIGEON PLUM, POND APPLE, PRICKLY PEAR, RED MANGROVE, RED MAPLE, RED BAY, SAFFRON PLUM, SAND PINE, SCRUB PINE, SATINLEAF, SAW PALMETTO, SCRUB HICKORY, SEA GRAPE, SEA OXEYE, SLASH PINE, STOPPERS, WILD LIME, SUMAC (SOUTHERN), SUGAR BERRY (HACKBERRY), TORCHWOOD, WILD COFFEE, VARNISH LEAF, WATER OAK, WAX MYRTLE, WEST INDIAN CHERRY, WHITE MANGROVE.

COMPLETE FOR TODAY

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # 418

Date Issued _____

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

Owner Christopher Ramey Address 2820 SE Market Pl Phone 286 1818

Contractor Wilson Builders, Inc. Address 450 S. Fed. Hwy, Phone 288 2000
Stuart, Fl. 34994

Number of trees to be removed (list kinds of trees) _____

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

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

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

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant _____ Date submitted _____

Approved by Building Inspector _____ Date _____

Approved by Building Commissioner _____ Date _____

Completed _____
Date _____ Checked by _____

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

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

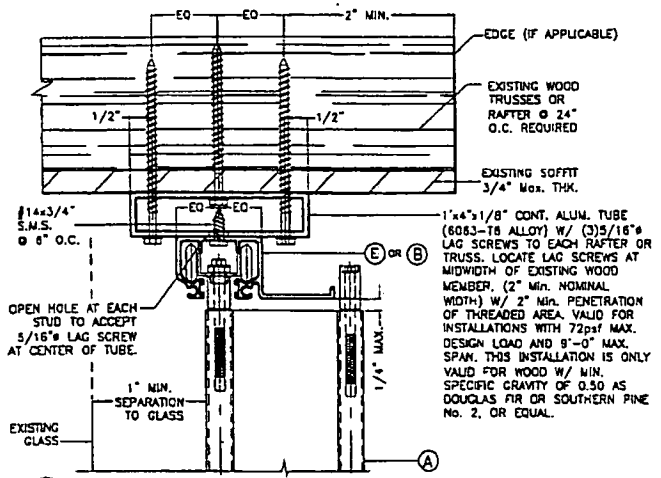
TOWN OF SEWALL'S POINT

Building Department - Inspection Log

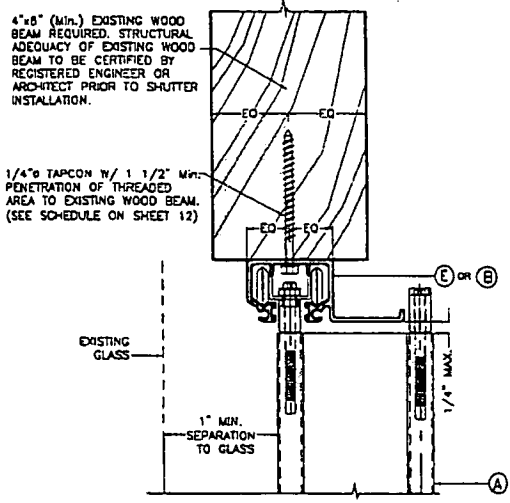
Date of Inspection: Mon Wed Fri 4/5, 2006 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
8151	WILKINSON	FINAL HURRICANE SHUTTERS	PASS	CLOSE
6	8 Oakwood Dr GULFSTREAM			INSPECTOR: <i>[Signature]</i>
7670	Elder	Pool FINAL	FAIL	
5	4 MARAVERITA OLYMPIC POOL			INSPECTOR: <i>[Signature]</i>
8136	HARDIN	Temp Svc	PASS	CALL FPL FOR METER INSTALLATION
10	27 S. RIVER CANAM ELECTRIC			INSPECTOR: <i>[Signature]</i>
8152	FREORICK	FINAL DOCK REPAIR	FAIL	
13	32 S. Sewall's Pt HARBOR BAY MARINE			INSPECTOR: <i>[Signature]</i>
8153	FREDRICK	FINAL PER. WALL	PASS	CLOSE
18	32 S. Sewall's Pt HARBOR BAY MARINE			INSPECTOR: <i>[Signature]</i>
7380	BONIFACE	Pool PERIMETER	PASS	
9	63 S. RIVER RD WILSON			INSPECTOR: <i>[Signature]</i>
7390	GOLDMAN	FINAL ROOF	PASS	
11	4 Summer LA O/B			INSPECTOR: <i>[Signature]</i>

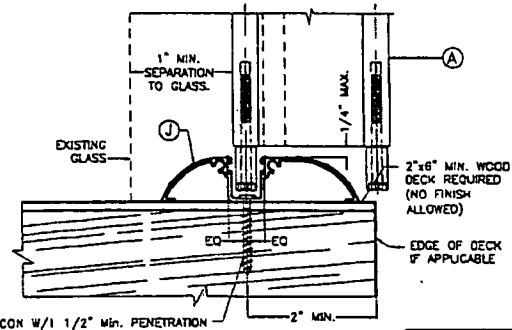
OTHER: _____



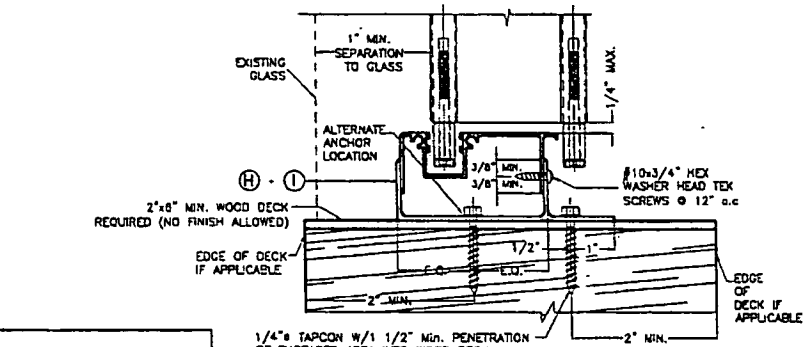
7W HOLLOW CEILING MOUNTING INSTALLATION



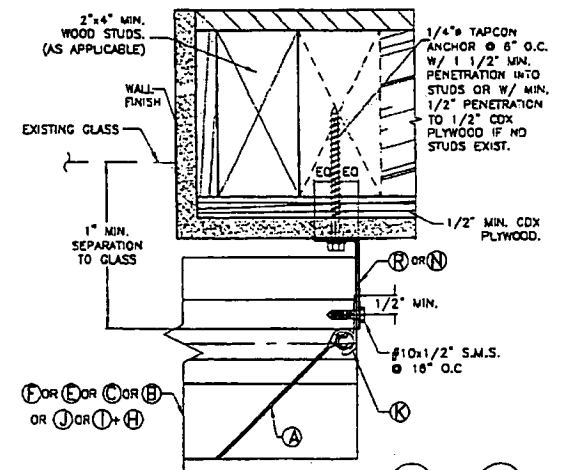
8W SOFFIT MOUNTING INSTALLATION



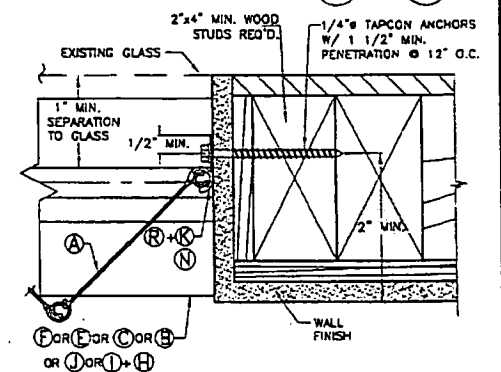
9W FLOOR CONNECTION



10W FLOOR CONNECTION



END CONNECTION DETAIL 1W & 4W



END CONNECTION DETAIL 5W

NOTES:
 1-SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2-MOUNTING SECTIONS CAN BE COMBINED
 IN ANY WAY TO SUIT ANY INSTALLATION.

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

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BERTHA HV™ Accordion Shutter System			
REV. No	DESCRIPTION	DATE	Drawn By: J.A.S.
1	REV. CD-03	7/13/05	DATE: 7/13/05 -
2			DRAWING No
3			05-196
4			SHEET
5			14 OF 14
6			

TILLIT TESTING & ENGINEERING COMPANY
 6333 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33168
 Phone: (305)871-1330 Fax: (305)871-1331
 e-mail: tillit@tillit.com
 EB-0006719
 WALTER A. TILLIT Jr., P. E.
 FLORIDA Lic. # 44167

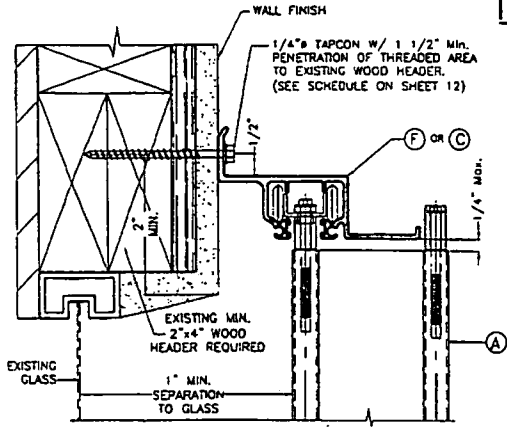
P.E. SEAL/SIGNATURE/DATE

TILTECO INC.
 TILLIT TESTING & ENGINEERING COMPANY
 6333 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33168
 Phone: (305)871-1330 Fax: (305)871-1331
 e-mail: tillit@tillit.com
 EB-0006719
 WALTER A. TILLIT Jr., P. E.
 FLORIDA Lic. # 44167

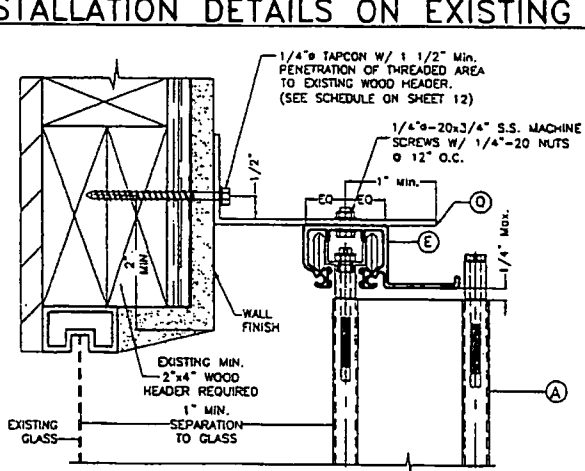
A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

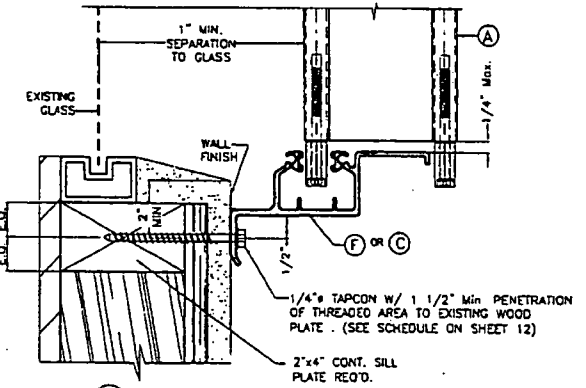
NOTE:
 1-SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2-MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.



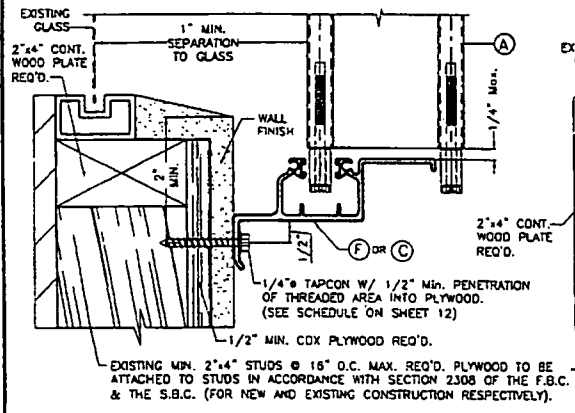
1W WALL CONNECTION AT TOP



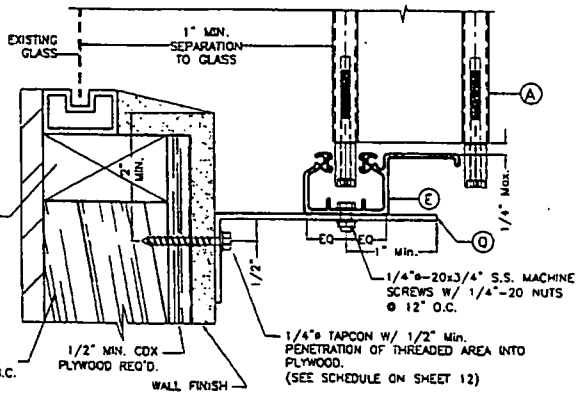
2W WALL CONNECTION AT TOP



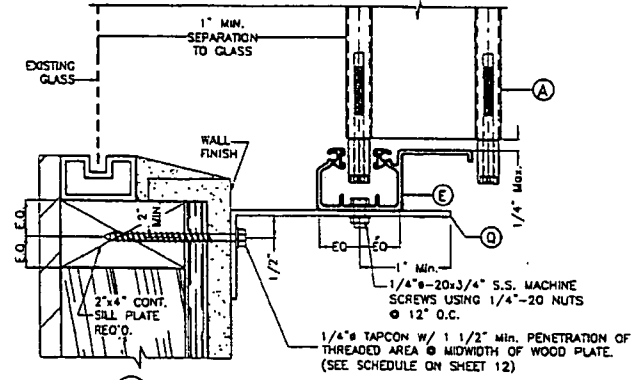
3W WALL CONNECTION AT BOTTOM



4W WALL CONNECTION AT BOTTOM



5W WALL CONNECTION AT BOTTOM



6W WALL CONNECTION AT BOTTOM

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

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TILTECO INC.
 TILIT TESTING & ENGINEERING COMPANY
 333 N.W. 38th St., Ste. 302, VIRGINIA GARDENS, FLORIDA 33166
 Phone: (305)871-1530 Fax: (305)871-1531
 e-mail: tilteco@aol.com
 EB-0008719
 WALTER A. TILIT Jr., P. E.
 FLORIDA Lic. # 44187

TILTECO INC.
 TILIT TESTING & ENGINEERING COMPANY
 333 N.W. 38th St., Ste. 302, VIRGINIA GARDENS, FLORIDA 33166
 Phone: (305)871-1530 Fax: (305)871-1531
 e-mail: tilteco@aol.com
 EB-0008719
 WALTER A. TILIT Jr., P. E.
 FLORIDA Lic. # 44187

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

BERTHA HV™			
Accordion Shutter System			
REV. No	DESCRIPTION	DATE	Drawn by/Blm.1
1	REV 03-031	7/13/03	DATE: 7/13/03
2			DRAWING No
3			05-196
4			SHEET
5			13 OF 14
6			

**MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR⁺ SPACING (in.) SCHEDULE FOR
A GIVEN MAX. SHUTTER SPAN, NEGATIVE DESIGN LOAD AND A CORRESPONDING MOUNTING TYPE.**

(SEE MOUNTINGS ON SHEETS 13 & 14).

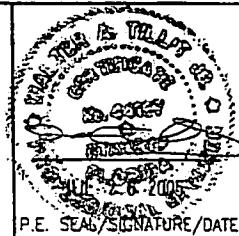
MAXIMUM SPAN (ft)	SUBSTRATE																																									
	SOUTHERN PINE No. 2 W/ MIN. G=0.55, DOUGLAS FIR W/ MIN. G=0.50						SPRUCE PINE FIR NORTH W/ MIN. G=0.43						SPRUCE PINE FIR SOUTH W/ MIN. G=0.36						1/2" MIN. CDX PLYWOOD																							
	WALL MOUNTINGS 1W, 2W, 3W & 6W			CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W			WALL MOUNTINGS 1W, 2W, 3W & 6W			CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W			WALL MOUNTINGS 1W, 2W, 3W & 6W			CEILING MOUNT 8W FLOOR MOUNTINGS 9W & 10W			WALL MOUNTINGS 4W & 5W																							
	NEGATIVE DESIGN LOAD (psf)						NEGATIVE DESIGN LOAD (psf)						NEGATIVE DESIGN LOAD (psf)						NEGATIVE DESIGN LOAD (psf)																							
	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105	30	40	60	75	90	105												
3'-0" OR LESS	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	6	5	4	4	4	3
4'-0"	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	12	10	10	9	8	8	6	6	6	6	6	6	6	5	4	4	4	3
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6'-0"	12	10	10	9	8	6.5	6	6	6	6	5.5	4.5	12	10	10	9	8	5	6	6	6	5.5	5	4.5	12	10	10	9	6	3.5	6	6	6	6	5	4.5	6	5	4	4	3.5	-
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8'-0"	12	10	10	7.5	4.5	3	6	6	6	5	4	3.5	12	10	10	6	3.5	-	6	6	5	4.5	3.5	3	12	10	10	4	-	-	6	6	5	4.5	3.5	3	6	5	4	-	-	-
9'-0"	12	10	10	5	3.5	-	6	6	5.5	4.5	3.5	3	12	10	9	4	-	-	6	6	4.5	4	3	3	12	10	4	3	-	-	6	6	4.5	4	3	3	6	5	3.5	-	-	-
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11'-0"	12	10	5.5	-	-	-	6	6	4.5	-	-	-	12	10	4.5	-	-	-	6	5.5	3.5	-	-	-	12	10	-	-	-	-	6	5.5	4	-	-	-	6	5	-	-	-	-
12'-0"	12	10	4.5	-	-	-	6	6	4	-	-	-	12	10	3.5	-	-	-	6	5	3.5	-	-	-	12	10	-	-	-	-	6	5	3.5	-	-	-	6	5	-	-	-	-
13'-0"	12	10	-	-	-	-	6	6	-	-	-	-	12	10	-	-	-	-	6	4.5	-	-	-	-	12	7.5	-	-	-	-	6	4.5	-	-	-	-	6	4.5	-	-	-	-
14'-0"	12	10	-	-	-	-	6	5.5	-	-	-	-	12	7	-	-	-	-	5.5	4.5	-	-	-	-	12	7	-	-	-	-	5.5	4.5	-	-	-	-	6	3	-	-	-	-
15'-0"	12	-	-	-	-	-	6	-	-	-	-	-	12	-	-	-	-	-	5	-	-	-	-	-	12	-	-	-	-	-	5	-	-	-	-	-	6	-	-	-	-	-
16'-0"	12	-	-	-	-	-	6	-	-	-	-	-	12	-	-	-	-	-	5	-	-	-	-	-	11.5	-	-	-	-	-	5	-	-	-	-	-	6	-	-	-	-	-

+ NOTES ON ANCHORS REQUIREMENTS: WOOD SUBSTRATES.

- ANCHORS TO WALL, FLOOR OR SOLID WOOD SOFFT SHALL BE AS FOLLOWS:
- 1/4" TAPCON ANCHORS, AS MANUFACTURED BY L.T.W. BUILDEX W/ MINIMUM EMBEDMENT AS INDICATED AT EACH SECTION ON SHEETS 13 & 14.
EXCEPTION: SEE NOTE 2 BELOW.
- ANCHORS TO HOLLOW CEILING SHALL BE AS PER MOUNTING TYPE 7W, SHEET 14 AND SHALL CONSIST OF LAG SCREWS AS PER NDS 1997 SPECIFICATIONS.
- SUBSTRATE SHALL CONSIST OF THE FOLLOWING:
-SOUTHERN PINE No. 2 W/ G=0.55 (N.D.S.)
-DOUGLAS FIR W/ G=0.50 (N.D.S.)
-SPRUCE PINE FIR NORTH W/ G=0.43 (N.D.S.)
-SPRUCE PINE FIR SOUTH W/ G=0.36 (N.D.S.)
-MIN. 1/2" CDX PLYWOOD (1986 APA)
- ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.

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

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TILLIT TESTING & ENGINEERING COMPANY
6335 N.W. 36th St., Ste. 303, VIRENA GARDENS, FLORIDA 33168
Phone : (305)871-1530 . Fax : (305)871-1531
e-mail: titeco@aol.com
EB-0008719
WALTER A. TILLIT Jr., P. E.
FLORIDA Lic. # 44167

A.S.S.A.
American Shutter Systems
Association, Inc.
4268 Westroads Drive
West Palm Beach, FL 33407

BERTHA HV™
Accordion Shutter System

REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 03-034	7/13/03	DATE: 7/13/05
2			DRAWING No
3			05-196
4			SHEET
5			12 OF 14
6			

ANCHOR SPACING LEGEND

TAPCON
ALL POINTS SOLID-SET
WEDGE-BOLT

MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR SPACING (in.) SCHEDULE FOR A GIVEN MAX. SHUTTER SPAN, DESIGN NEGATIVE LOAD AND A CORRESPONDING MOUNTING TYPE FOR CONCRETE INSTALLATIONS
(SEE MOUNTINGS 5, 6, 7, & 8 ON SHEET 8).

MAXIMUM SPAN (ft)	POURED CONCRETE																															
	CEILING MOUNTING 5							FLOOR MOUNTING 6							FLOOR MOUNTING 7							FLOOR MOUNTING 8										
	NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)							NEGATIVE DESIGN LOAD (psf)										
	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205	30	40	60	75	90	120	160	205
3'-0" OR LESS	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
4'-0"	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
5'-0"	14	12	10	9	8	8	6	5.5	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
6'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
7'-0"	14	12	10	9	8	7.5	5.5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
8'-0"	14	12	10	9	8	7	5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
9'-0"	14	12	10	9	8	7	5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
10'-0"	14	12	10	9	8	7	5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
11'-0"	14	12	10	9	8	6.5	5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
12'-0"	14	12	10	9	8	6	5	4	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
13'-0"	13.5	10	8.5	5.5	4.5	-	-	-	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
14'-0"	12.5	9.5	8	5	-	-	-	-	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
15'-0"	12	9	8	-	-	-	-	-	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6
16'-0"	11	8	5.5	-	-	-	-	-	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6	14	12	10	9	8	8	6	6

***NOTES ON ANCHOR REQUIREMENTS: POURED CONCRETE OR CONCRETE BLOCK SUBSTRATES**

- ANCHORS TO WALL SHALL BE AS FOLLOWS:
 - TO EXISTING POURED CONCRETE: (Min. 1" = 3 min)
 - 1/4" TAPCON ANCHORS, AS MANUFACTURED BY I.T.W. RAMSET/ RED HEAD.
 - 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
 - 1/4" WEDGE-BOLT ANCHORS AS MANUFACTURED BY POWERS FASTENING, INC.
 - MINIMUM EMBEDMENT INTO POURED CONCRETE OF TAPCON ANCHORS IS 1 3/4", AND 2" FOR WEDGE-BOLT ANCHORS.
 - MINIMUM EMBEDMENT INTO POURED CONCRETE OF ALL POINTS SOLID-SET ANCHORS SHALL BE 7/8" INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, PAVERS OR ANY VENEER BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SAID WALL FINISHES. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE. FOR INSTALLATIONS ON VINYL SPOING OR EIFS CONSULT THIS ENGINEER.
 - TO EXISTING CONCRETE BLOCK WALL:
 - 1/4" TAPCON ANCHORS, AS MANUFACTURED BY I.T.W. RAMSET/ RED HEAD.
 - 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS AS DISTRIBUTED BY ALL POINTS SCREW, BOLT & SPECIALTY COMPANY.
 - 1/4" WEDGE-BOLT W/ 1/4" BLOCK-PLUG ANCHORS AS MANUFACTURED BY POWERS FASTENING, INC.
- NOTES:
- MINIMUM EMBEDMENT INTO CONCRETE BLOCK OF TAPCON & WEDGE-BOLT ANCHORS, IS 1 1/4".
 - MINIMUM EMBEDMENT OF 1/4" x 3/4" ALL POINTS SOLID-SET ANCHORS SHALL BE ENTIRELY EMBEDDED INTO THE CONCRETE BLOCK. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" #20 S.S. MACHINE SCREW USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS, PAVERS OR ANY VENEER BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SAID WALL FINISHES. ANCHORAGE SHALL BE AS INDICATED ON NOTES B.1) & B.2) ABOVE. FOR INSTALLATIONS ON VINYL SPOING OR EIFS CONSULT THIS ENGINEER.
- (C) ANCHORS SHALL BE INSTALLED FOLLOWING ALL OF THE RECOMMENDATIONS AND SPECIFICATIONS OF THE ANCHOR'S MANUFACTURER.
- (D) SEE SCHEDULE BELOW FOR EDGE DISTANCE (E.D.) VERSUS SPACING RELATIONSHIP FOR ANCHORS.

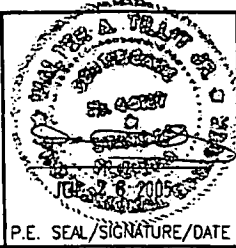
EDGE DISTANCE VERSUS SPACING FOR ANCHORS

MAXIMUM ANCHOR SPACINGS ARE VALID FOR 3 1/2" EDGE DISTANCE FOR 1/4" TAPCON AND SOLID SET AND WEDGE-BOLT FOR E. D. LESS THAN THE ABOVE MENTIONED, REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SHOWN ON SCHEDULE BY THE FOLLOWING FACTORS. (NOTE: MIN. E. D. FOR ALL POINT SOLID SET ANCHORS IS 1"). REDUCED SPACING OBTAINED USING FACTOR SHALL NOT BE LESS THAN MINIMUM SPACING INDICATED FOR EACH ANCHOR TYPE.

ACTUAL E. D.	FACTOR		
	WEDGE-BOLT	1/4" TAPCON	SOLID SET
	MIN. SPACING = 3"	MIN. SPACING = 1"	MIN. SPACING = 3/4"
3"	0.83	0.83	0.78
2 1/2"	0.68	0.68	-
2"	0.50	0.50	-

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

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 West Palm Beach, FL 33407

BERTHA HV™
Accordion Shutter System

REV. NO.	DESCRIPTION	DATE	Drawn by: J.A.S.
1	OLD 03-03A	7/13/03	DATE: 7/13/05
2			DRAWING No
3			05-196
4			SHEET
5			11 OF 14
6			

ANCHOR SPACING LEGEND

Table with 2 columns: TAPCON, WEDGE-BOLT. Row 1: ALL POINTS SOLID-SET.

MAXIMUM DESIGN PRESSURE RATING (p.s.f.) AND CORRESPONDING MAXIMUM ANCHOR* SPACING (in.) SCHEDULE FOR A GIVEN MAX. SHUTTER SPAN, DESIGN NEGATIVE LOAD AND A CORRESPONDING MOUNTING TYPE FOR CONCRETE OR CONCRETE BLOCK INSTALLATIONS

(SEE MOUNTINGS 1, 2, 3 & 4 ON SHEET 5)

* SEE ANCHOR SPECIFICATIONS ON SHEET 11

Main data table with columns for MAXIMUM SPAN (ft), MOUNTING TYPE, and NEGATIVE DESIGN LOAD (psf) for various configurations.

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BERTHA HV™ Accordion Shutter System

Table with columns: REV. NO, DESCRIPTION, DATE, DRAWN BY. Includes drawing number 05-196 and sheet number 10 OF 14.

P.E. SEAL/SIGNATURE/DATE (with circular stamp)



TILIT TESTING & ENGINEERING COMPANY 8355 N.W. 36th St., Ste. 303, Virginia Gardens, Florida 33166

A.S.S.A. American Shutter Systems Association, Inc. 4268 Westroads Drive West Palm Beach, FL 33407

MAXIMUM SHUTTER SPAN
"L+" OR "L-" (ft.) INSTALLATIONS
W/ SYMMETRICAL CENTERMATES,
ONE HV LOCK & NO LOCKING RODS *
(SEE NOTE †)

MAXIMUM DESIGN LOAD (p.s.f.) (+ OR -)	CONCRETE & WOOD INSTALLATIONS ▲			
	WALL MOUNTING		FLOOR/CEILING MOUNTING	
	L+ (ft.)	L- (ft.)	L+ (ft.)	L- (ft.)
30 OR LESS	18'-0"	18'-0"	16'-0"	16'-0"
35	14'-10"	14'-10"	15'-2"	16'-0"
40	13'-10"	13'-10"	14'-2"	15'-2"
45	13'-1"	13'-1"	13'-4"	14'-3"
50	12'-5"	12'-5"	12'-8"	13'-7"
55	11'-10"	11'-10"	12'-1"	12'-11"
60	11'-4"	11'-4"	11'-7"	12'-4"
65	10'-10"	10'-10"	11'-1"	11'-11"
70	10'-8"	10'-8"	10'-9"	11'-5"
75	10'-1"	10'-1"	10'-4"	11'-1"
80	9'-10"	8'-10"	10'-0"	10'-9"
85	9'-8"	9'-8"	9'-9"	10'-5"
90	9'-3"	9'-3"	9'-5"	10'-1"
95	9'-0"	8'-9"	9'-2"	9'-10"
100	8'-9"	8'-4"	9'-0"	9'-7"
105	8'-7"	7'-11"	8'-9"	9'-4"
110	8'-4"	7'-7"	8'-7"	9'-2"
115	8'-2"	7'-3"	8'-4"	8'-11"
120	8'-0"	6'-11"	8'-2"	8'-9"
125	7'-10"	6'-8"	8'-0"	8'-5"
130	7'-8"	6'-5"	7'-10"	8'-1"
135	7'-7"	6'-2"	7'-9"	7'-9"
140	7'-5"	5'-11"	7'-7"	7'-6"
145	7'-3"	5'-8"	7'-5"	7'-3"
150	7'-2"	5'-7"	7'-4"	7'-0"
155	7'-0"	5'-5"	7'-2"	6'-9"
160	6'-11"	5'-2"	7'-1"	6'-7"
165	6'-10"	5'-1"	7'-0"	6'-4"
170	6'-9"	4'-11"	6'-11"	6'-2"
175	6'-7"	4'-9"	6'-9"	6'-0"
180	6'-6"	4'-8"	6'-8"	5'-10"
185	6'-5"	4'-6"	6'-7"	5'-8"
190	6'-4"	4'-5"	6'-6"	5'-6"
195	6'-3"	4'-3"	6'-5"	5'-5"
200	6'-2"	4'-2"	6'-4"	5'-3"
205	6'-1"	4'-1"	6'-3"	5'-1"

MAXIMUM SHUTTER SPAN
"L+" OR "L-" (ft.)
INSTALLATIONS W/
OPPOSING CENTERMATES,
ONE HV LOCK & NO
LOCKING RODS *
(SEE NOTE †)

MAXIMUM DESIGN LOAD (p.s.f.) (+ OR -)	CONCRETE & WOOD INSTALLATIONS ▲	
	WALL MOUNTING & FLOOR/CEILING MOUNTING	
	L+ (ft.)	L- (ft.)
30	16'-0"	16'-0"
35	14'-10"	14'-10"
40	13'-10"	13'-10"
45	13'-1"	13'-1"
50	12'-5"	12'-5"
55	11'-10"	11'-10"
60	11'-4"	11'-4"
65	10'-10"	10'-10"
70	10'-8"	10'-8"
75	10'-1"	10'-1"
80	9'-10"	9'-10"
85	9'-6"	9'-6"
90	9'-3"	9'-3"
95	9'-0"	8'-9"
100	8'-9"	8'-4"
105	8'-7"	7'-11"
110	8'-4"	7'-7"
115	8'-2"	7'-3"
120	8'-0"	6'-11"
125	7'-10"	6'-8"
130	7'-8"	6'-5"
135	7'-7"	6'-2"
140	7'-5"	5'-11"
145	7'-3"	5'-9"
150	7'-2"	5'-7"
155	7'-0"	5'-5"
160	6'-11"	5'-2"
165	6'-10"	5'-1"
170	6'-9"	4'-11"
175	6'-7"	4'-9"
180	6'-6"	4'-8"
185	6'-5"	4'-6"
190	6'-4"	4'-5"
195	6'-3"	4'-3"
200	6'-2"	4'-2"
205	6'-1"	4'-1"

INSTALLATION LEGEND		
	CONCRETE & MANSORY	WOOD
WALL MOUNTING	1, 2, 3 & 4	1W, 2W, 3W, 4W, 5W & 6W
FLOOR/CEILING MOUNTING	5, 6, 7 & 8	8W, 9W & 10W

▲ MAXIMUM SHUTTER SPAN "L+" OR "L-" FOR INSTALLATIONS INTO WOOD SHALL BE LIMITED TO 110 psf. DESIGN LOAD.

† CORNER CENTERMATE #3 MAY BE USED AT ALL MOUNTING INSTALLATIONS. LOCKING SPECIFICATIONS SHALL BE AS INDICATED ON MANDATORY CONDITION #2 NOTE #4, SHEET 4 OF 14

* NOTES:

(1) L+: MAXIMUM ALLOWABLE SPAN FOR A GIVEN POSITIVE DESIGN LOAD.
L-: MAX. ALLOWABLE SPAN FOR A GIVEN NEGATIVE DESIGN LOAD.

(2) PROCEDURE TO DETERMINE MAXIMUM SPAN FOR WALL MOUNTINGS (TOP/BOTTOM) OR FLOOR/CEILING:

GIVEN A POSITIVE DESIGN LOAD, DETERMINE MAXIMUM SPAN "L+" FROM SCHEDULE.
GIVEN A NEGATIVE DESIGN LOAD, DETERMINE MAXIMUM SPAN "L-" FROM SCHEDULE.

FINAL MAXIMUM ALLOWABLE SPAN IS EQUAL TO THE MINIMUM DETERMINED SPAN BETWEEN "L+" AND "L-".

(3) PROCEDURE TO DETERMINE MAXIMUM SPAN FOR COMBINATIONS IN BETWEEN WALL MOUNTINGS W/ FLOOR/CEILING MOUNTINGS:

FOR A GIVEN POSITIVE DESIGN LOAD:
DETERMINE:

L1+= MAX. SPAN FOR WALL MOUNTING INSTALLATIONS.
L2+= MAX. SPAN FOR FLOOR/CEILING MOUNTING INSTALLATIONS.

FOR A GIVEN NEGATIVE DESIGN LOAD:
DETERMINE:

L1-= MAX. SPAN FOR WALL MOUNTING INSTALLATIONS.
L2-= MAX. SPAN FOR FLOOR/CEILING MOUNTING INSTALLATIONS.

FINAL MAXIMUM ALLOWABLE SPAN IS EQUAL TO THE MINIMUM BETWEEN "L1+", "L2+", "L1-" AND "L2-".

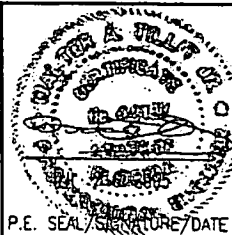
(4) GO TO ANCHOR SCHEDULE WITH FINAL MAXIMUM ALLOWABLE SPAN AND NEGATIVE DESIGN LOAD TO DETERMINE MAXIMUM ANCHOR SPACING.

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

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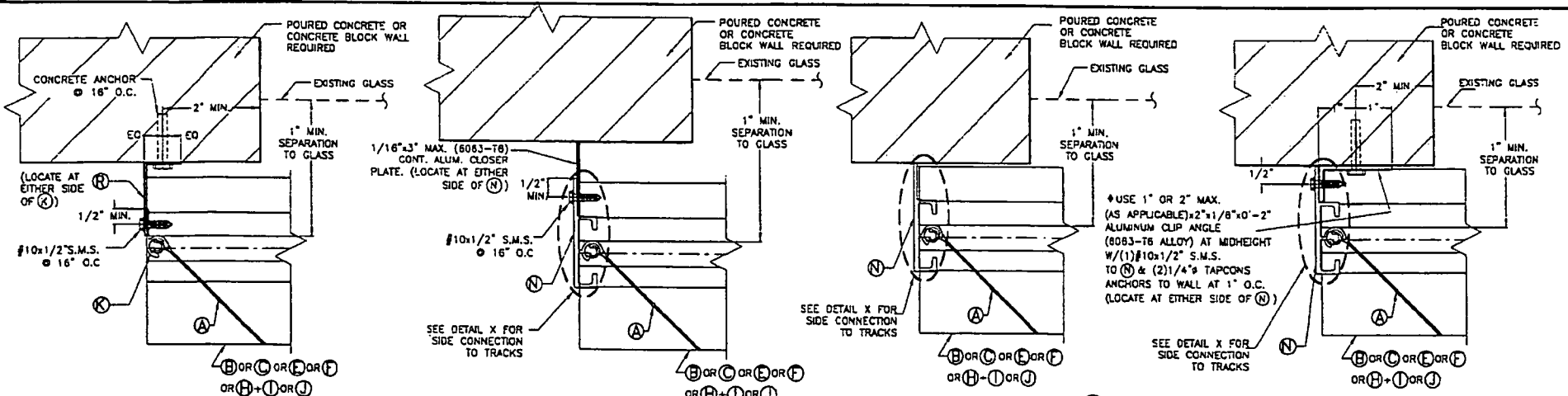
BERTHA HV™
Accordion Shutter System

REV. No	DESCRIPTION	DATE	Drawn by J.A.S.
1	OLD 03-03a	7/12/05	DATE: 7/13/05
2			DRAWING No 05-196
3			
4			SHEET 9 OF 14
5			
6			



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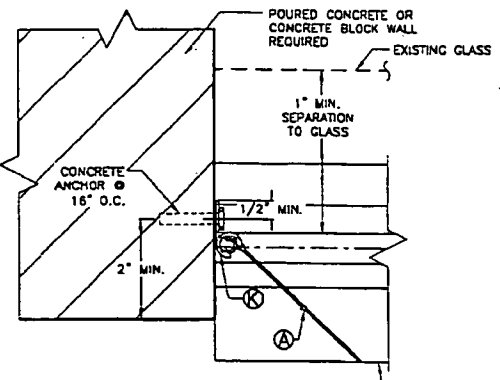
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END CONNECTION DETAIL ②

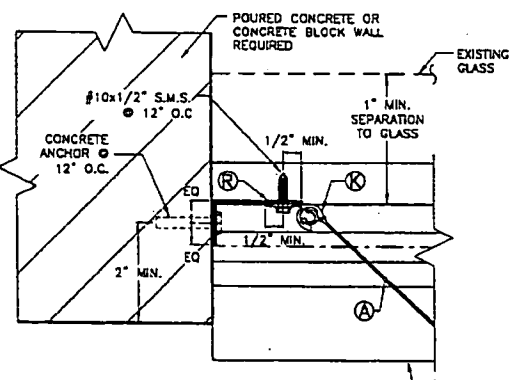
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END CONNECTION DETAIL ④

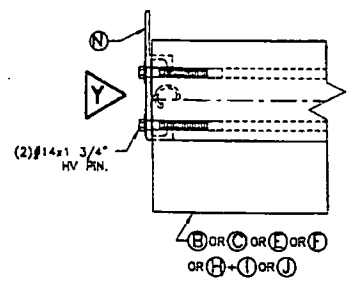
• REQUIRED ONLY FOR SPANS GREATER THAN 12'-0"



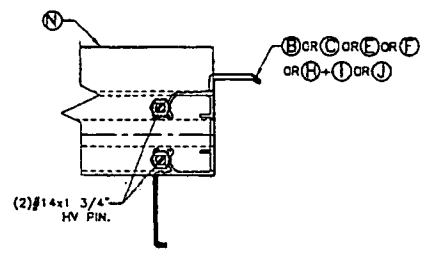
END CONNECTION DETAIL ⑤



END CONNECTION DETAIL ⑥



PLAN

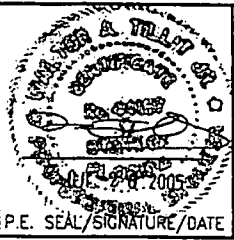


VIEW Y

DETAIL X

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

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P.E. SEAL/SIGNATURE/DATE



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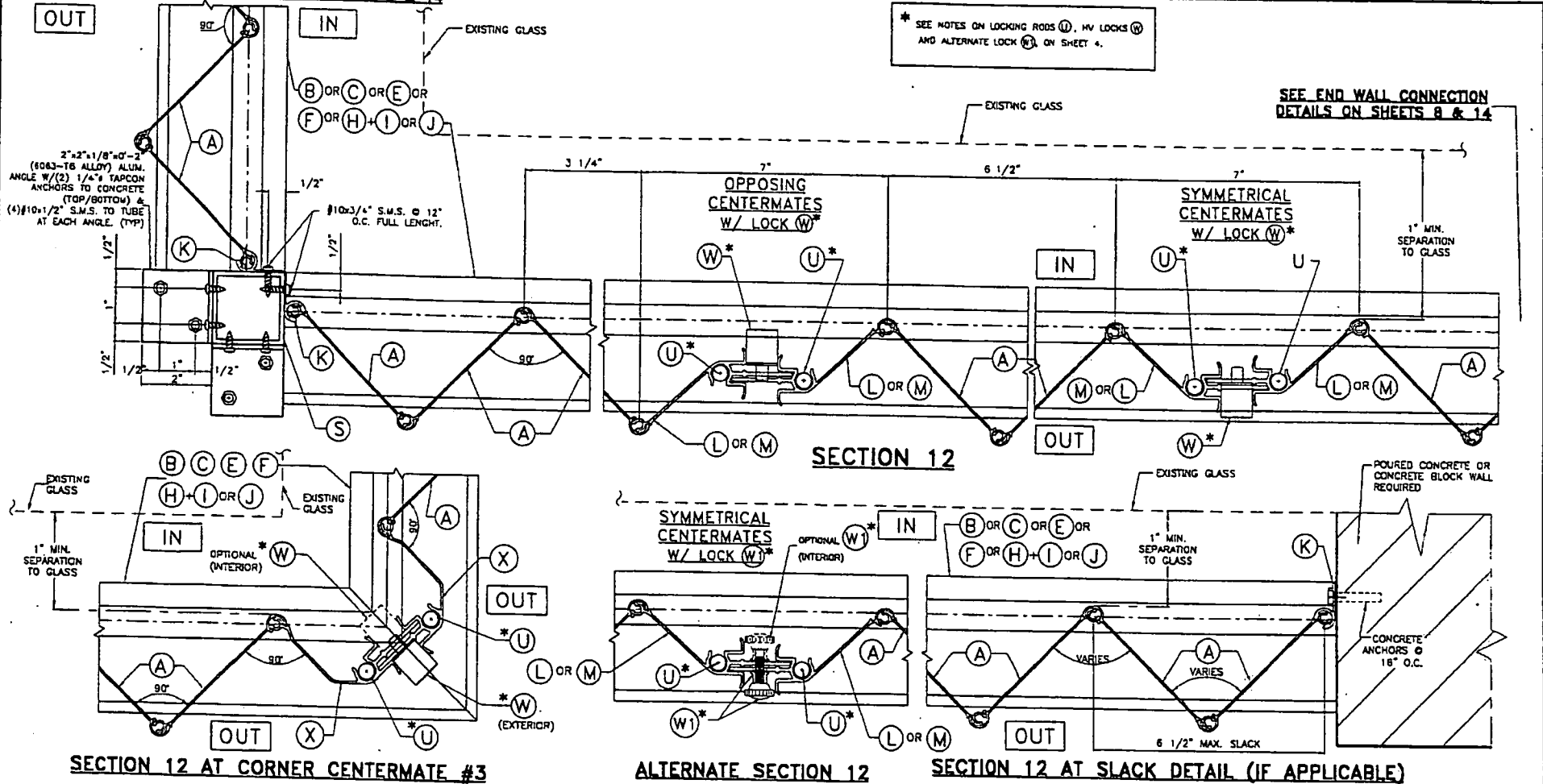
A.S.S.A.
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 4268 Westroads Drive
 West Palm Beach, FL 33407

BERTHA HV™			
Accordion Shutter System			
REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	REV 03-03	7/13/05	DATE: 7/13/05
2			DRAWING No 05-196 SHEET 8 OF 14
3			
4			
5			
6			

SEE END WALL CONNECTION DETAILS ON SHEETS 8 & 14

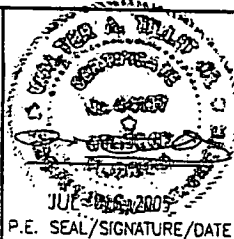
* SEE NOTES ON LOCKING RODS (U), HV LOCKS (W) AND ALTERNATE LOCK (W1) ON SHEET 4.

SEE END WALL CONNECTION DETAILS ON SHEETS 8 & 14



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

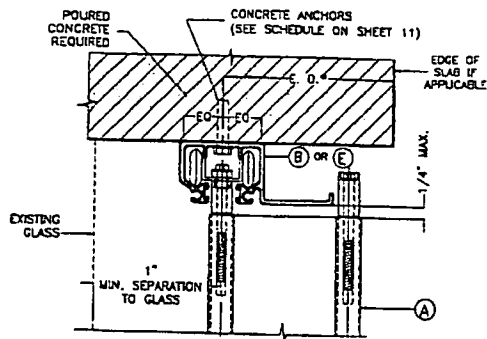
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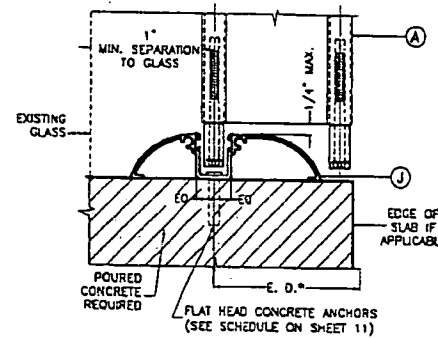
TILTECO INC.
 TILLIT TESTING & ENGINEERING COMPANY
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1	OLD 03-03	7/13/05	DATE: 7/13/05
2			
3			
4			DRAWING No 05-196
5			SHEET
6			7 OF 14



⑤ CEILING MOUNTING INSTALLATION

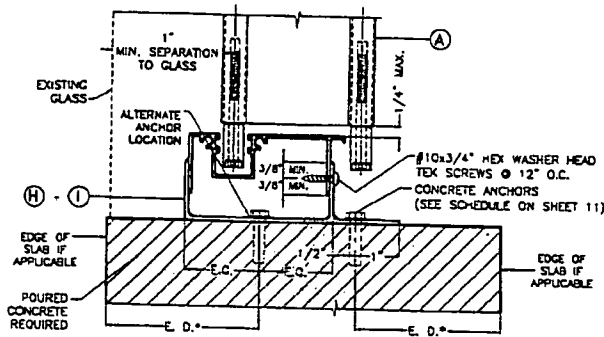


⑥ WALK-OVER MOUNTING INSTALLATION

NOTE FOR COMBINATION OF SECTIONS:

- 1- SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
- 2- MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

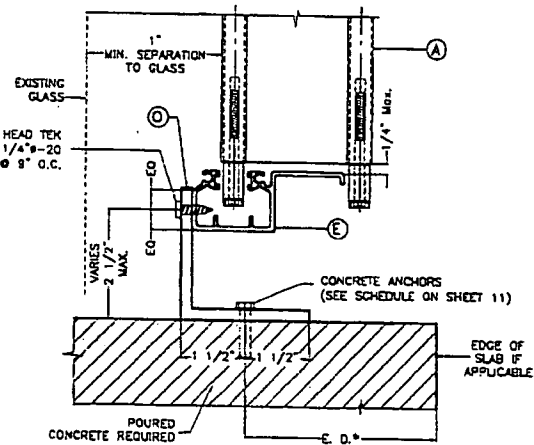
* E. D. = EDGE DISTANCE
(SEE NOTES & SCHEDULE ON SHEET 11)



⑦ FLOOR MOUNTING INSTALLATION †

#14 x 3/4" S.S. HEX HEAD TEK SCREWS @ 9" O.C. OR 1/4" @ 20 S.S. M.S. W/ NUT @ 9" O.C.

† NOTE:
THIS INSTALLATION SHALL BE REMOVABLE WHEN PERFORMED ADJACENT TO AN OPERABLE EXIT OR ENTRANCE



⑧ FLOOR MOUNTING INSTALLATION †

INSTALLATION DETAILS

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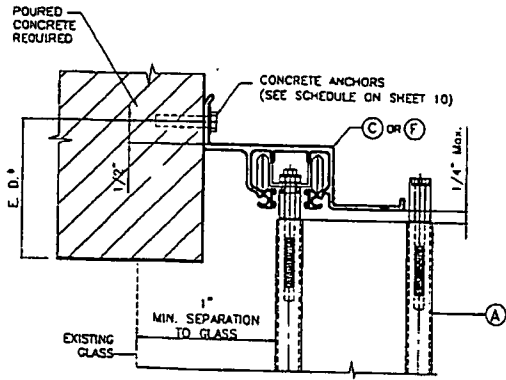
BERTHA HV™
Accordion Shutter System

REV. No	DESCRIPTION	DATE	Drawn by: J.A.S.
1	0.0 03-03A	7/13/03	DATE: 7/13/03
2			DRAWING No
3			05-196
4			SHEET
5			8 OF 14

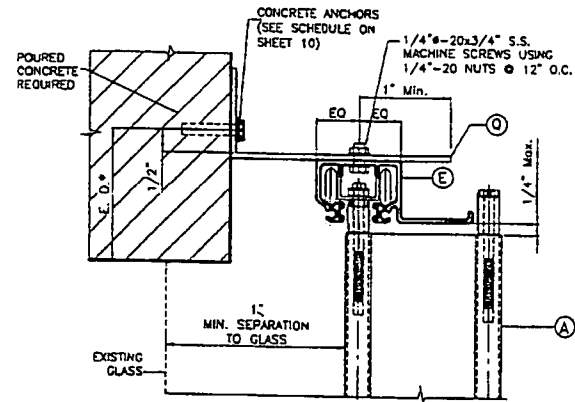


TILTUT TESTING & ENGINEERING COMPANY
6355 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33168
Phone: (305)871-1330 Fax: (305)871-1331
e-mail: tiltut@earthlink.net
EB-0008719
WALTER A. TILT, Jr., P. E.
FLORIDA Lic. # 44187

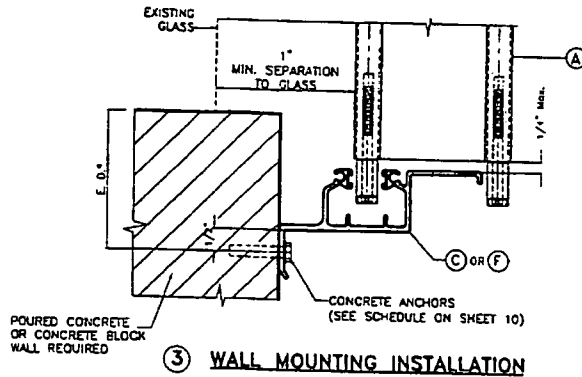
A.S.S.A.
American Shutter Systems
Association, Inc.
4268 Westroads Drive
West Palm Beach, FL 33407



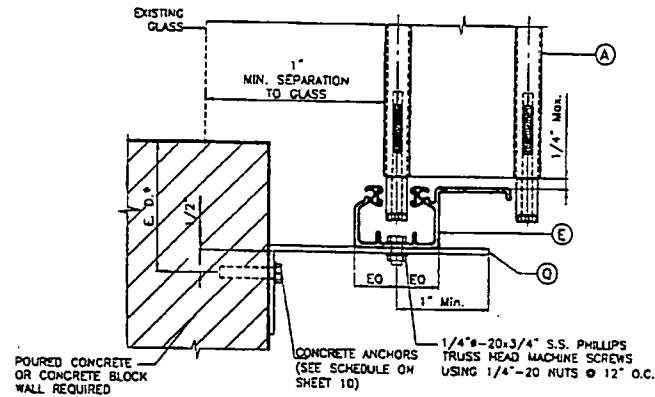
① WALL MOUNTING INSTALLATION



② WALL MOUNTING INSTALLATION



③ WALL MOUNTING INSTALLATION



④ WALL MOUNTING INSTALLATION

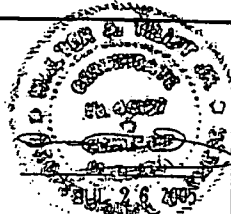
NOTE FOR COMBINATION OF SECTIONS:
 1- SEE SHEET 3 FOR TYPICAL SHUTTER ASSEMBLY
 2- MOUNTING SECTIONS CAN BE COMBINED IN ANY WAY TO SUIT ANY INSTALLATION.

* E. D. = EDGE DISTANCE
 (SEE NOTES & SCHEDULE ON SHEET 11)

INSTALLATION DETAILS

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

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P.E. SEAL/SIGNATURE/DATE



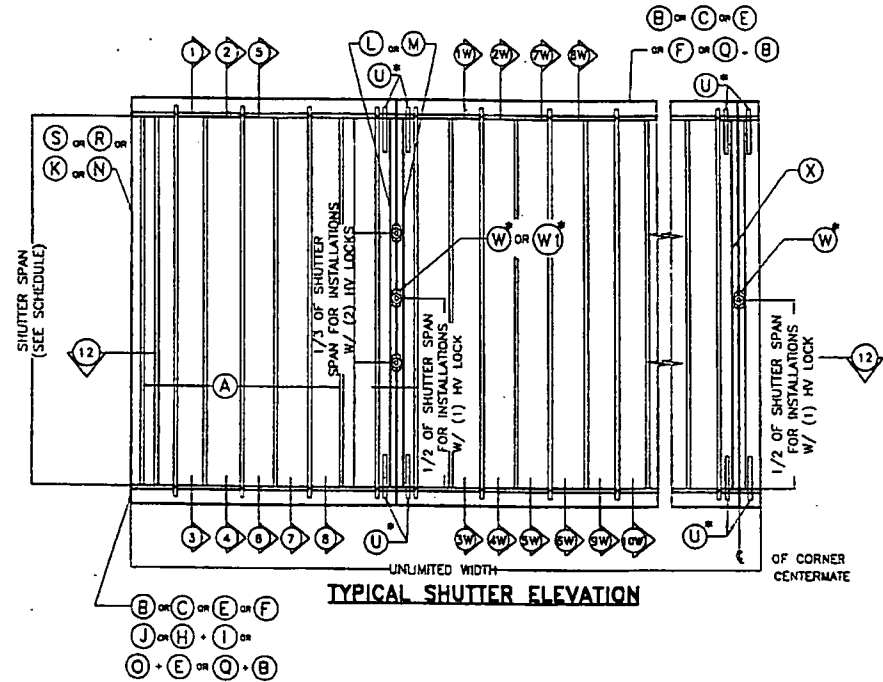
TILLIT TESTING & ENGINEERING COMPANY
 8355 N.W. 36th. St. Ste. 303, VIRGINIA GARDENS, FLORIDA 33108
 Phone : (305)871-1530 . Fax : (305)871-1531
 e-mail: tillit@tillit.com
 EB-0008719
 WALTER A. TILLIT JR., P. E.
 FLORIDA Lic. # 44167

A.S.S.A.
 American Shutter Systems
 Association, Inc.
 4268 Westroads Drive
 West Palm Beach, FL 33407

BERTHA HV™ Accordian Shutter System			
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1	OLD 03-034	7/13/03	DATE: 7/13/03
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3			05-196
4			
5			SHEET
6			5 OF 14

* NOTES ON LOCKING RODS (U), HV LOCK (W) AND ALTERNATE (W1) LOCK:

1. **MANDATORY CONDITION #1:** ONE HV LOCK (W) SHALL BE USED FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. HV LOCK (W) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK, ATTACHED TO (1) OR (2) CENTERMATES W/(2) 1/4"Ø-20 x 1/2" LONG FLAT HEAD S.S. M.S. LOCATION OF LOCK SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION.
2. **OPTIONAL CONDITION #1:** IF DESIRED, FOR BETTER PERFORMANCE OR FOR SECURITY PURPOSES, UP TO TWO HV LOCKS (W) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK. CONNECTION OF LOCKS TO CENTERMATES (1) OR (2) SHALL BE AS INDICATED ON NOTE (1) ABOVE. LOCATION OF LOCKS SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION.
3. **OPTIONAL CONDITION #2:** LOCKING RODS (U) ARE NOT REQUIRED AT HURRICANE POSITION, BUT MAY BE USED IF DECIDED TO ENHANCE SHUTTER PERFORMANCE. LOCKING RODS (U) OR AN ALTERNATIVE DEVICE MAY ALSO BE USED AT STACKING POSITION (NON HURRICANE POSITION).
4. **MANDATORY CONDITION #2:** ONE HV LOCK (W) SHALL BE USED AT CORNER CENTERMATES FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. HV LOCK (W) SHALL BE USED AS AN OUTSIDE OR INSIDE LOCK, ATTACHED TO (X) CORNER CENTERMATE W/(2) 1/4"Ø-20 x 1/2" LONG FLAT HEAD S.S. M.S. TWO LOCKING RODS (U) AT TOP & BOTTOM SHALL BE USED. LOCATION OF LOCK SHALL BE AS INDICATED ON TYPICAL SHUTTER ELEVATION. MAXIMUM SHUTTER SPAN SHALL BE DETERMINED AS PER SCHEDULES SHOWN ON SHEET 9.
5. **ALTERNATE TO MANDATORY CONDITION #1 VALID ONLY FOR SYMMETRICAL CENTERMATES:** ONE ALTERNATE LOCK (W1) MAY BE USED IN LIEU OF HV LOCK (W) FOR ANY SPAN AND INSTALLATIONS AT ANY ELEVATION. ALTERNATE LOCK (W1) MAY BE USED AS AN INSIDE OR OUTSIDE LOCK. ATTACHMENT OF 1/4"Ø-20x3/4" S.S. THUMBSCREW TO (1) OR (2) CENTERMATES SHALL BE MADE W/ 1/4"Ø-20x3/4" ALUM. RIVNUT AS SHOWN ON ALTERNATE SECTION 12, SHEET 7.

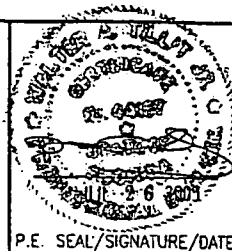


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BERTHA HV™
Accordion Shutter System

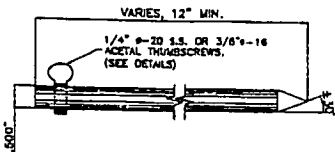
REV. No	DESCRIPTION	DATE	Drawn By: SAGW/n
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2			DRAWING No
3			05-196
4			SHEET
5			4 OF 14
6			



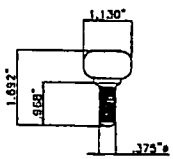
TILLIT TESTING & ENGINEERING COMPANY
 6333 N.W. 26th St., Ste. 305, VIRGINIA GARDENS, FLORIDA 33186
 Phone : (305)871-1530 . Fax : (305)871-1531
 e-mail: tilteco@aol.com
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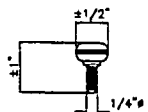
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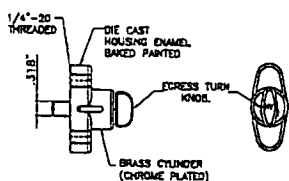
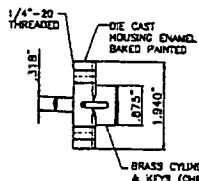
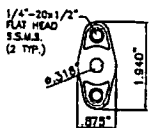
U LOCKING ROD
(SEE NOTES ON SHEET 4)



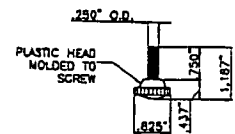
3/8" -16 ACETAL THUMBSCREWS



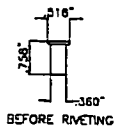
1/4" -20 S.S. THUMBSCREWS



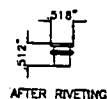
W H.V. LOCK/ EGRESS H.V. LOCK
(SEE NOTES ON SHEET 4)



1/4" -20 x 3/4" S.S. THUMBSCREW

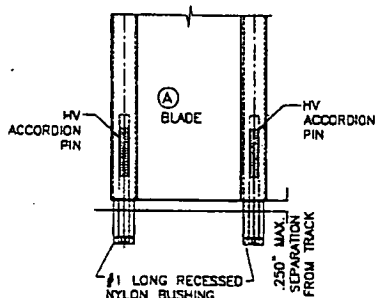
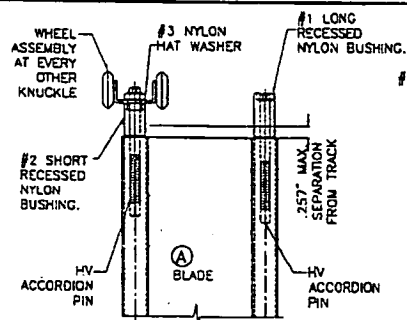


1/4" -20 RIVNUT



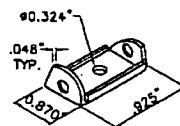
W1 ALTERNATE LOCK (TO HV LOCK W)
(SEE NOTES ON SHEET 4)

*SERIES 9444 ALUMINUM (2024-T3 ALLOY) LARGE FLANGE THIN SHEET NUTSERT. PART # 0820, AS MANUFACTURED BY AVDEL CHERRY TEXTORN, PARSIPPANY, NEW JERSEY 07054 OR EQUAL.



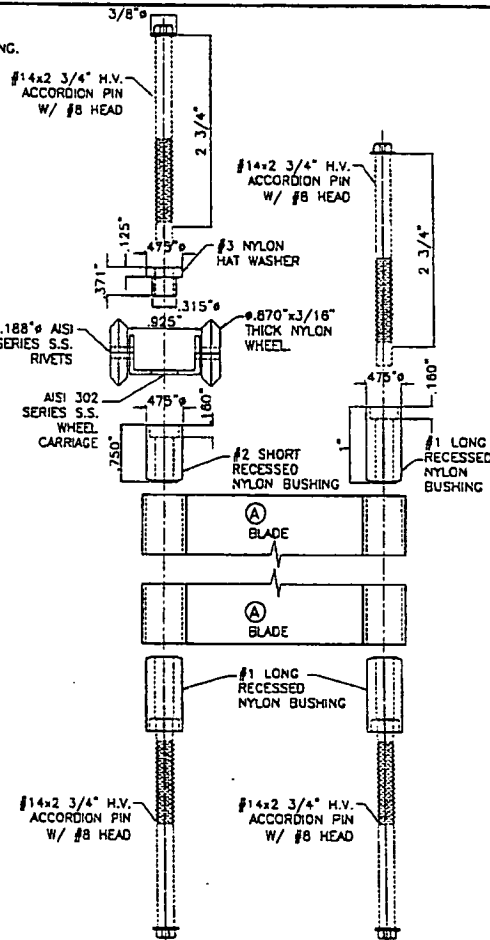
TYPICAL SHUTTER ASSEMBLY

SCALE: 3/8" = 1"



WHEEL CARRIAGE DETAIL

N.T.S.



ASSEMBLY LAYOUT

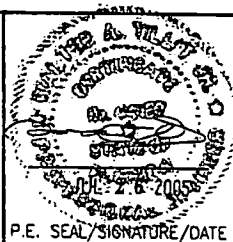
N.T.S.

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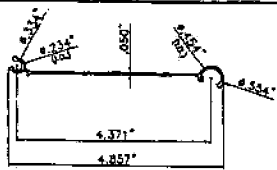
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8			3 OF 14



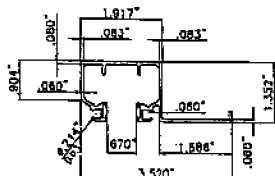
TILT TESTING & ENGINEERING COMPANY
4230 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33169
Phone: (305)871-1530 Fax: (305)871-1531
e-mail: tiltco@aol.com
EQ-0006718
WALTER A. TILT, JR., P. E.
FLORIDA Lic. # 44167

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West Palm Beach, FL 33407

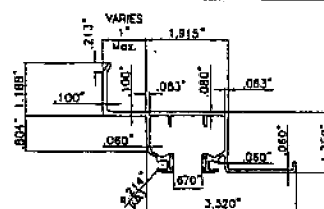


A HV BLADE # 1

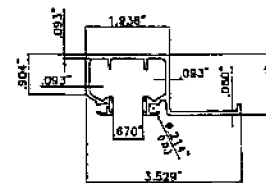
COVERED UNDER US PATENT # 5458179



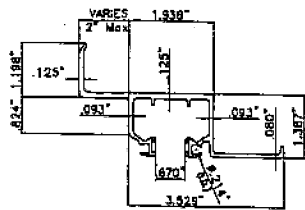
B HV CEILING HEADER # 1



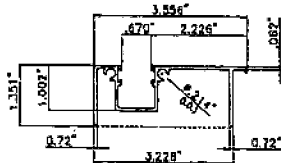
C HV 1" (Max.) B/O HEADER/SILL # 1



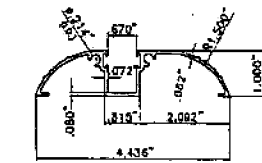
E HD CEILING HEADER/SILL # 2



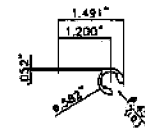
F HD 2" (Max.) B/O HEADER/SILL # 2



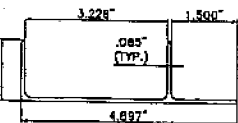
I HV ADJ. TRACK



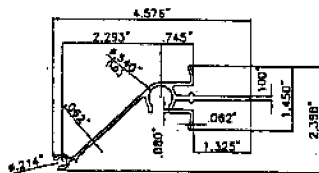
J HV WALK-OVER TRACK



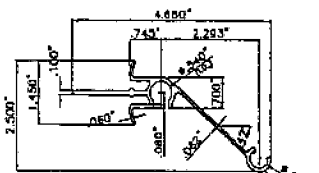
K HV 90°/180° STARTER



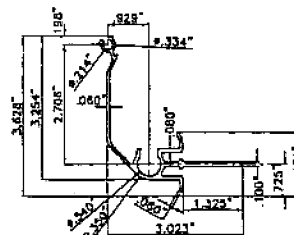
H HV ADJ. ADAPTER W/LIP



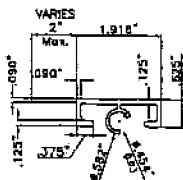
**L HV CENTERMATE # 1
(SELF MATING)**



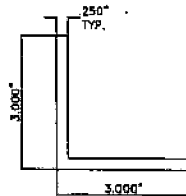
**M HV FLOATING
CENTERMATE # 2**



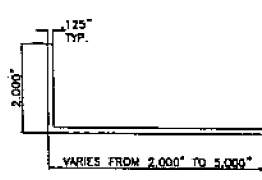
X HV CORNER CENTERMATE # 3



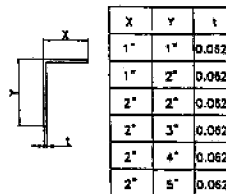
N H.V. 2" (Max.) DIRECT MOUNT



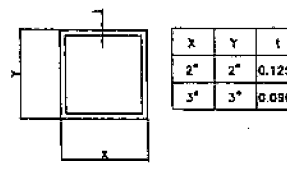
O 3\" FLOOR ANGLE



Q B.O. WALL ANGLE



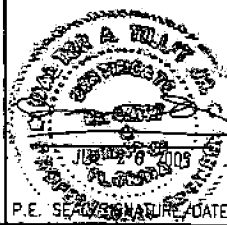
R SIDE ANGLE



S CORNER POST

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4255 N.W. 38th St., Ste. 303, VIRGINIA GARDENS, FLORIDA 33148
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4			SHEET
5			2 OF 14

GENERAL NOTES:

1. BERTHA H.V. ACCORDION SHUTTER SYSTEM SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN VERIFIED FOR COMPLIANCE IN ACCORDANCE WITH THE 2004 EDITION OF THE FLORIDA BUILDING CODE. THIS ACCORDION SHUTTER SYSTEM SHALL NOT BE INSTALLED AT HIGH VELOCITY HURRICANE ZONES. DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1609 OF THE ABOVE MENTIONED CODE FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE SHUTTER WILL BE INSTALLED, AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, IN ACCORDANCE WITH ASCE 7-98 STANDARD. IN ORDER TO VERIFY THAT ANCHORS ON THIS P.A.D., AS TESTED, WERE NOT OVERSTRESSED, A 33% INCREASE IN ALLOWABLE LOADS FOR WIND LOADS WAS NOT USED IN THEIR ANALYSIS. BERTHA H.V. ACCORDION SHUTTER SYSTEM'S ADEQUACY FOR WIND AND IMPACT LOAD HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1609.1.4 OF THE ABOVE MENTIONED CODE AS PER ATL REPORTS #0214.01-03 AND #0715.01-03 AS PER TAS-201, TAS-202 AND TAS-203 PROTOCOLS AND ASTM E-1886 AND E-1996 STANDARDS.
2. BERTHA H.V. ACCORDION PINS (HV SCREWS), USED AT BLADES KNUCKLE AND FOR DIRECT MOUNT CONNECTION TO TRACKS SHALL BE # 14X2.75 AND # 14X1.75 RESPECTIVELY, 410-HT MINIMUM SERIES STAINLESS STEEL SCREWS WITH 135.0 ksi YIELD STRENGTH AND 180 ksi TENSILE STRENGTH. PINS SHALL BE COATED WITH BERTHA HV DACROSHELD® COATING SYSTEM AS MANUFACTURED BY APPROVED COATING APPLICATORS, REGISTERED WITH AMERICAN SHUTTER SYSTEMS ASSOCIATION. PINS MUST BEAR THE HV MARKING ON THEIR HEAD.
3. ALL ALUMINUM EXTRUSIONS SHALL BE ALUMINUM ASSOCIATION 6063-T6 ALLOY AND TEMPER, WITH $F_y = 25.0$ ksi MINIMUM (UNLESS OTHERWISE NOTED).
4. ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 AISI SERIES OR CORROSION RESISTANT COATED CARBON STEEL AS PER DIN 50018 WITH 50 ksi YIELD STRENGTH AND 90 ksi TENSILE STRENGTH.
5. BOLTS TO BE ALUMINUM ASSOCIATION 2024-T4 ALLOY AND TEMPER, ASTM A-307 GALVANIZED STEEL, OR AISI 304 SERIES STAINLESS STEEL WITH 35 ksi MINIMUM YIELD STRENGTH.
6. SEE SHEETS 10, 11 AND 12 FOR ANCHORS SPECIFICATIONS.
7. THIS BERTHA H.V. ACCORDION SHUTTER SYSTEM IS PATENT PENDING. COMPONENTS OF THIS APPROVAL ARE COVERED, IN WHOLE OR IN PART BY U.S. PATENT ISSUED TO EASTERN METAL SUPPLY, INC.
8. IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO INSURE PROPER ANCHORAGE. CONTRACTOR TO SEAL/CAULK ALL SHUTTER COMPONENT EDGES WHICH REMAIN, THRU FASTENING IN CONTINUOUS CONTACT WITH THE BUILDING TO PREVENT WIND/RAIN INTRUSION.
9. EACH UNIT MUST BEAR A PERMANENT LABEL IN A VISIBLE PLACE WITH WARNING NOTE INSTRUCTING THE TENANT OR HOME OWNER THAT THE H.V. LOCK (W) OR ALTERNATE LOCK (W) MUST BE PROPERLY LOCKED DURING PERIODS OF HURRICANE WARNING. FOR EGRESS CONDITIONS, AN INSIDE HV LOCK (W) (WHERE KEY MUST REMAIN IN THE LOCK), AN INSIDE ALTERNATE LOCK (W), OR AN EGRESS H.V. LOCK (W) SHALL BE USED.
10. SHUTTER'S MANUFACTURER LABEL SHALL BE PLACED ON A READILY VISIBLE LOCATION. ONE LABEL SHALL BE PLACED FOR EVERY OPENING. LABEL SHALL READ AS FOLLOWS:
AMERICAN SHUTTER SYSTEMS ASSOCIATION INC.
WEST PALM BEACH, FL.
FLORIDA STATEWIDE PRODUCT APPROVED.

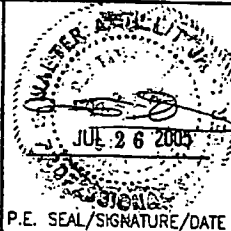
11. BERTHA H.V. ACCORDION SHUTTER SYSTEM'S INSTALLATION SHALL COMPLY WITH SPECS INDICATED IN THIS DRAWING PLUS ANY BUILDING AND ZONING REGULATIONS PROVIDED BY THE JURISDICTION WHERE PERMIT IS APPLIED TO.
12. (a) THIS P.E.D. PREPARED BY THIS ENGINEER IS GENERIC AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; I.E. WHERE THE SITE CONDITIONS DEVIATE FROM THE P.E.D.
- (b) CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION INCLUDING LIFE SAFETY OF THIS PRODUCT, BASED ON THIS P.E.D., PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT. CONSTRUCTION SAFETY AT SITE IS THE CONTRACTOR'S RESPONSIBILITY.
- (c) THIS P.E.D. WILL BE CONSIDERED INVALID IF ALTERED BY ANY MEANS.
- (d) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A FLORIDA REGISTERED ENGINEER OR ARCHITECT WHICH WILL BECOME THE ENGINEER OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER SHALL SUBMIT TO THIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.
- (e) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.

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P.E. SEAL/SIGNATURE/DATE



TILLIT TESTING & ENGINEERING COMPANY
1335 N.W. 36th St., Ste. 305, VERO BEACH, FLORIDA 33166
Phone : (305)871-1530 Fax : (305)871-1531
e-mail: tillit@tillit.com
EB-0008719
WALTER A. TILLIT Jr. P. E.
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A.S.S.A.
American Shutter Systems
Association, Inc.
4268 Westroads Drive
West Palm Beach, FL 33407

Quality Assurance Entity
Validated By

National Accreditation and Management Institute
John Henry Kampmann Jr.

Certificate of Independence

Referenced Standard and Year (of Standard)	<u>Standard</u>	<u>Year</u>
	ASTM E-1886	2002
	ASTM E-1996	2002

Equivalence of Product Standards
Certified By

Sections from the Code
1609.1.4
1609.1.4

Product Approval Method
Method 1 Option D

Date Submitted
8/5/2005
Date Validated
9/23/2005
Date Pending FBC Approval
9/29/2005
Date Approved
10/11/2005

Summary of Products

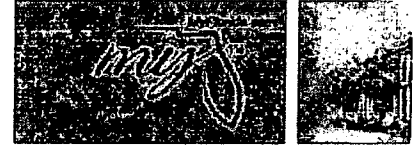
FL #	Model, Number or Name	Description
389.1	Bertha HV Accordion Shutter (Non-HVHZ)- Drwg #05-196	Extruded aluminum interlocking blades by tracks (top and bottom) for storm pr
Limits of Use Approved for use in HVHZ: Approved for use outside HVHZ: Impact Resistant: Design Pressure: +/- Other: This product shall not be installed within High Velocity Hurricane Zone as defined on section 1620.2 of the Florida Building Code..		Installation Instructions Verified By: Evaluation Reports PTID_389_R1_T_CERT_INDEPENDENCE 0715.01.pdf PTID_389_R1_T_Drawing_No.05-196.p PTID_389_R1_T_PROD_EVALUATION_R 05-0715.01.pdf

Back

Next

DCA Administration

Department of Community Affairs
Florida Building Code Online
Codes and Standards
2555 Shumard Oak Boulevard
Tallahassee, Florida 32399-2100



 **Product Approval**
USER: Public User

[Product Approval Menu](#) > [Product or Application Search](#) > [Application List](#) > **Application Detail**

- [COMMUNITY PLANNING](#)
- [HOUSING & COMMUNITY DEVELOPMENT](#)
- [BUILDING CODES](#)
- [FLORIDA COMMUNITIES TRUST](#)
- [FRONT PORCH FLORIDA](#)
- [EMERGENCY MANAGEMENT](#)
- [OFFICE OF THE SECRETARY](#)
- [ONE'S](#)
- [FREQUENTLY ASKED QUESTIONS](#)
- [ABOUT OUR SECRETARY](#)
- [EMAIL THE SECRETARY](#)
- [INSPECTOR GENERAL](#)
- [WEB ASSISTANCE](#)
- [CONTACT US](#)
- [OUR LOGO](#)
- [DCA EMPLOYEE SERVICES](#)

FL #	FL389-R1
Application Type	Revision
Code Version	2004
Application Status	Approved
Comments	
Archived	<input type="checkbox"/>
Product Manufacturer	American Shutter Systems Association, Inc.
Address/Phone/Email	4268 Westroads Drive West Palm Beach, FL 33407 (561) 841-5480 bfeeley@easternmetal.com
Authorized Signature	Bill Feeley bfeeley@easternmetal.com
Technical Representative	
Address/Phone/Email	
Quality Assurance Representative	
Address/Phone/Email	
Category	Shutters
Subcategory	Accordion
Compliance Method	Evaluation Report from a Florida Registered Architect Licensed Florida Professional Engineer <input checked="" type="checkbox"/> Evaluation Report - Hardcopy Received
Florida Engineer or Architect Name who developed the Evaluation Report	Walter A.. Tillit, Jr. P.E.
Florida License	PE-44167



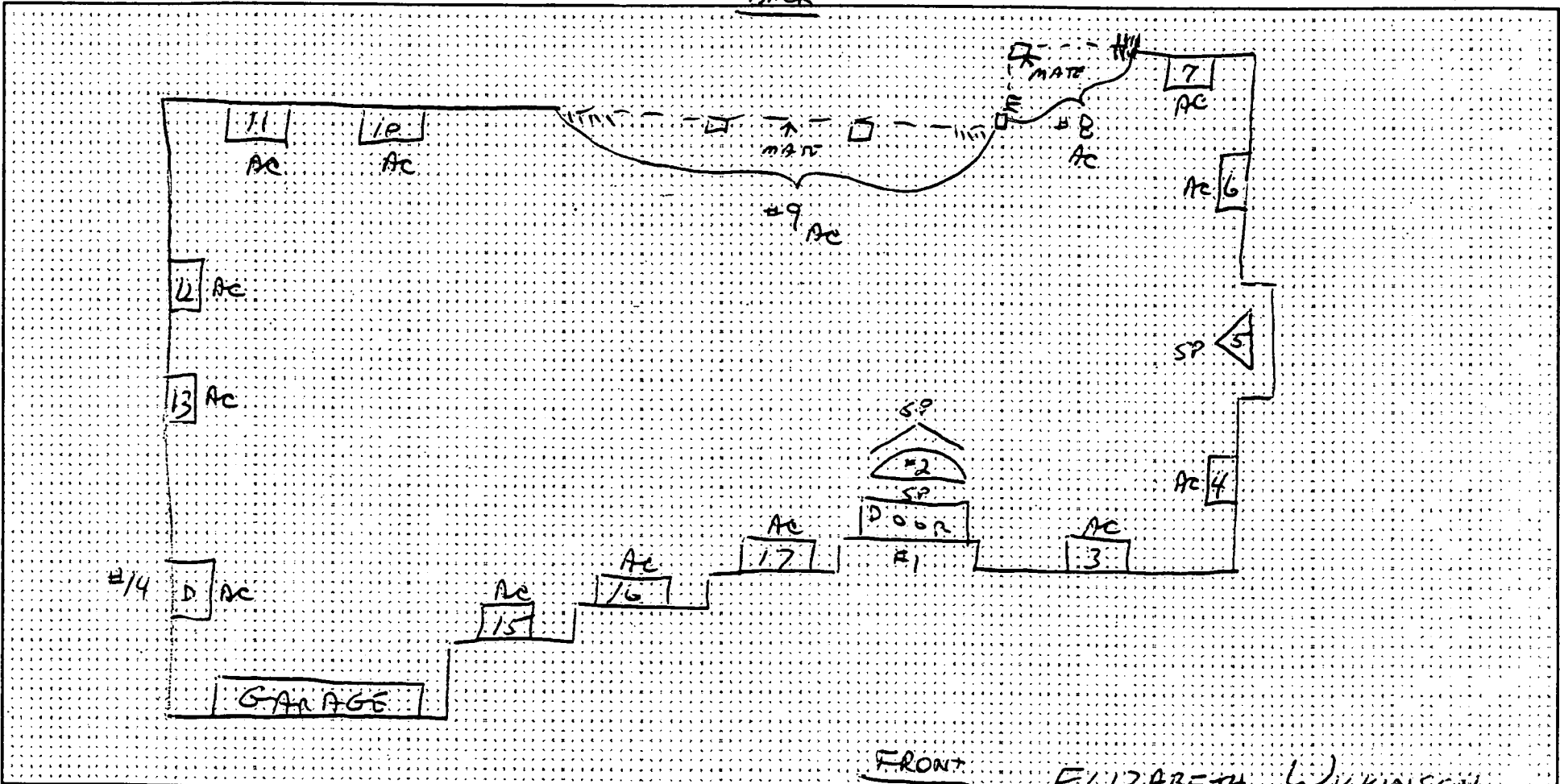
Do It Once. Do It Right.
Since 1979

3001 S.E. Gran Park Way, Stuart, Florida 34997
(772) 287-6476 • (800) 244-4143
FAX (772) 287-9740
E-mail: jobrien@gulfshutters.com
www.gulfshutters.com
Lic. #MC00231, SL 1211, PB# U-17051 & CRC58017

Key	
Storm Panels - SP	Rollups - RU
Accordions - AC	Lexan - LX
Bahamas - BA	Garage Brace - GB
Colonial - CO	

LAYOUT SHEET

Back



ELIZABETH WILKINSON

Special Instructions: MAIL INSURANCE LETTER

Signature _____


Date _____

Salesperson Kenny King

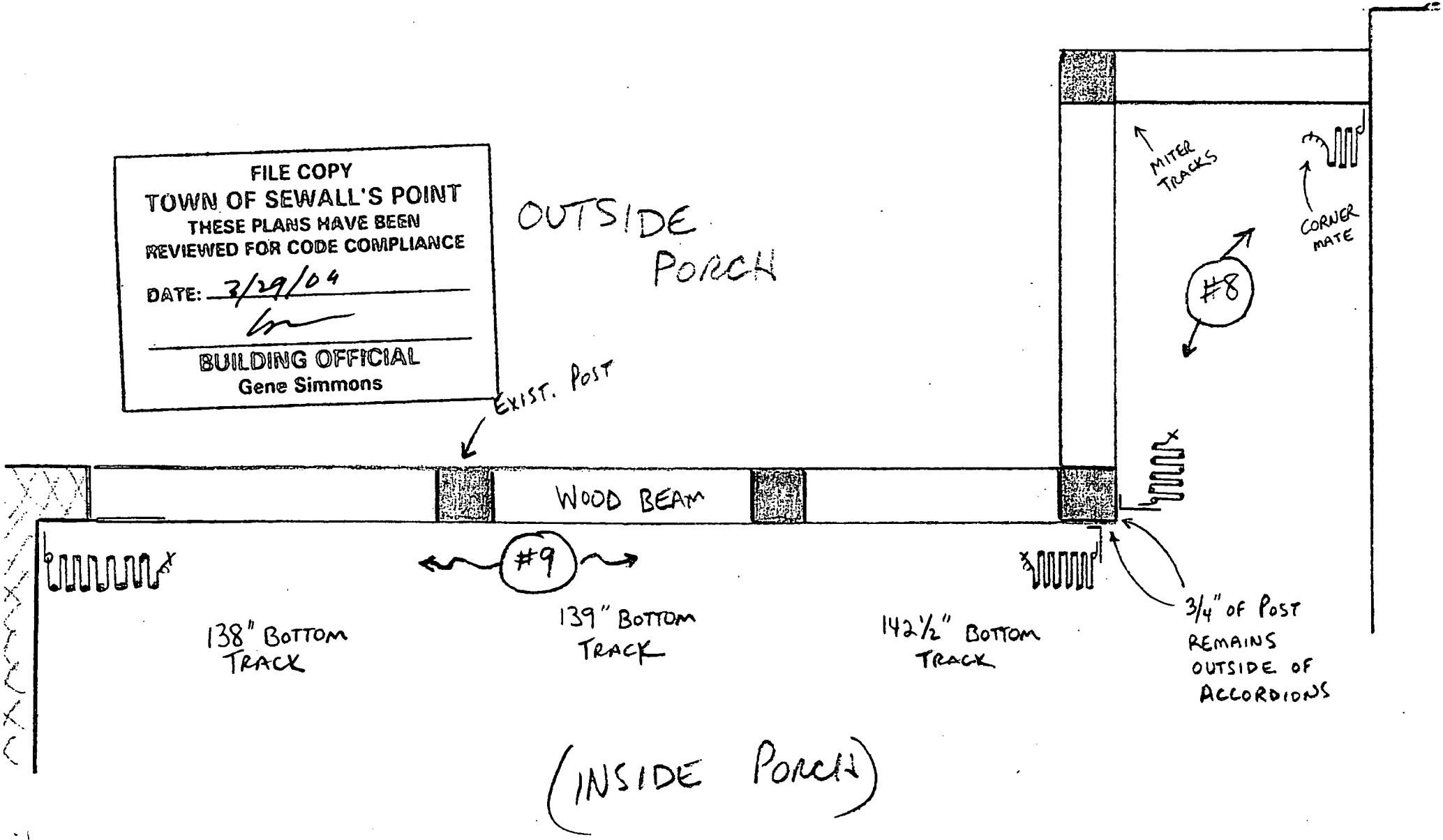
Gulfstream Aluminum and Shutter Corp.

Date 5/17/05

WILKINSON RESIDENCE

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 3/29/04

BUILDING OFFICIAL
Gene Simmons

OUTSIDE PORCH



EXIST. POST

WOOD BEAM

138" BOTTOM TRACK

139" BOTTOM TRACK

142 1/2" BOTTOM TRACK

MITER TRACKS

CORNER MATE

#8

#9

3/4" of POST
REMAINS
OUTSIDE OF
ACCORDIONS

(INSIDE PORCH)

NOTICE OF COMMENCEMENT

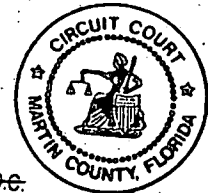
Property Appraisers Parcel ID No. 13-38-41-009-000-00030-2

State of Florida
County of Martin

THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statute, the following information is provided in this Notice of Commencement:

- 1). Description of property: OAKWOOD LOT 3
Address: 8 OAKWOOD DR
SEWALLS POINT
- 2). General description of improvement: Storm protection
- 3). Owner information:
Name Elizabeth Wilkinson
Address: 8 OAKWOOD DR
Interest in property: _____
Name & address of fee simple title holder _____
STATE OF FLORIDA
MARTIN COUNTY
- 4). Contractor information:
Name: Gulfstream Aluminum & Shutter Corp.
Address: 3001 SE Gran Park Way, Stuart, FL 34997
(888) 287-6476
- 5). Surety: N/A
Name: _____
Address: _____
- 6). Lender Information: N/A
Name: _____
Address: _____
- 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: _____
- 8). In addition to himself, Owner designates _____ to receive a copy of the Lienor as provided in Section 713.13(1)(b), Florida Statutes.
- 9). Expiration date of Notice of Commencement (the expiration date is One (1) year from the date of recording unless a different date is specified).

THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL
BY [Signature]
MARSHA EWING, CLERK
DATE 3/24/06 D.C.

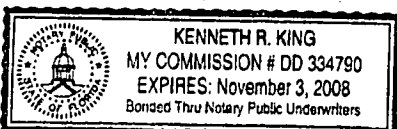


Sworn to and subscribed before me by Elizabeth Wilkinson who is personally known to me or produced as identification, and who did take an oath this 17th day of MARCH, 2006

Signature of Notary: [Signature]
Printed Name of Notary: BENJAMIN B. KING
Commission Number: DD 334790
Expiration Date: 11-3-08

Signature of Owner: [Signature]
Printed Name of Owner: ELIZABETH MAYER WILKINSON
Owner's Address: 8 OAKWOOD DR
PA. Lic # W425-233-51-750-0

SEAL:



AC#1553709

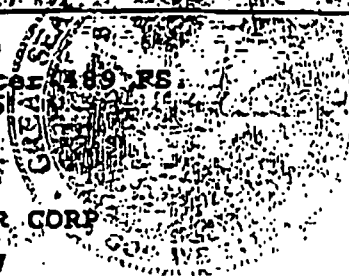
STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L04091902325

DATE	BATCH NUMBER	LICENSE NBR
08/19/2004	040164182	CRC058017

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



O'BRIEN, JOHN L.
GULFSTREAM ALUMINUM & SHUTTER CORP
3001 SE GRAN PARK WAY
STUART FL 34997

JEB BUSH
GOVERNOR

DIANE CARR
SECRETARY

DISPLAY AS REQUIRED BY LAW

2003-2004 MARTIN COUNTY ORIGINAL
 COUNTY OCCUPATIONAL LICENSE
 Larry C. O'Steen, Tax Collector, P.O. Box 9013, Stuart, FL 34995
 (772) 288-5604

LICENSE 1900-518-362 CRHT
 PHONE (561) 287-6476 SIC NO 001311
 LOCATION: 3001 SE GRAN PARK WAY

CHARACTER COUNTS IN MARTIN COUNTY

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

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

ALUMINUM CONTRACTOR

AT LOCATION LISTED FOR THE PERIOD BEGINNING ON THE
 27 DAY OF AUGUST 03
 AND ENDING SEPTEMBER 30 2004

O'BRIEN, JOHN L
 GULFSTREAM ALUMINUM & SHUTTER CORP
 JOHN L O'BRIEN
 3001 SE GRAN PARK WAY
 STUART FL 34997

RECEIPT OF PAYMENT
 LARRY C. O'STEEN
 9700/27/2003 DEPT. OF BUSINESS
 150651696343098
 9700 3018 7007 3018
 125.00

AC# 0516721

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

DATE	BATCH NUMBER	LICENSE NBR
08/06/2002	967439068	CRC058017


The RESIDENTIAL CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2004

O'BRIEN, JOHN L
 GULFSTREAM ALUMINUM & SHUTTER CORP
 3001 SE GRAN PARK WAY
 STUART FL 34997

JEB BUSH
 GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-SKYER
 SECRETARY



MARTIN COUNTY, FLORIDA
 Construction Industry Licensing Board
 Certificate of Competency

ALUMINUM/CONCRETE CONTRACTOR
 License Number SP00107 Expires: 30-SEP-05

O'BRIEN, JOHN L
 GULFSTREAM ALUMINUM PROD INC
 3001 SE GRAN PARKWAY
 STUART, FL 34997

ACORD CERTIFICATE OF LIABILITY INSURANCE

OP ID BB
GULFS-5

DATE (MM/DD/YYYY)
12/21/05

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

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: Southern Owners Insurance	10190
INSURER B: Auto-Owners Insurance Co	18988
INSURER C: Bridgefield Casualty Ins Co	
INSURER D:	
INSURER E:	

INSURED
Gulfstream Aluminum & Shutter Corp dba Gulfstream Alum. Prod
3001 SE Gran Parkway
Stuart FL 34997

COVERAGES

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

INSR ADD'L LTR INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS	
A	GENERAL LIABILITY	20654247	07/08/05	07/08/06	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)	\$ 10,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 2,000,000
					PRODUCTS - COMP/OP AGG	\$ 2,000,000
					Emp Ben.	1,000,000
B	AUTOMOBILE LIABILITY	4514445400	07/08/05	07/08/06	COMBINED SINGLE LIMIT (Ea accident)	\$ 1,000,000
	<input checked="" 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					
B	EXCESS/UMBRELLA LIABILITY	4515545401	07/08/05	07/08/06	EACH OCCURRENCE	\$ 1,000,000
	<input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE	\$ 1,000,000
	<input type="checkbox"/> DEDUCTIBLE					\$
	<input checked="" type="checkbox"/> RETENTION \$10,000				\$	
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	196-03957	12/12/05	12/12/06	WC STATUTORY LIMITS	OTHER
	ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED?				E.L. EACH ACCIDENT	\$ 500000
	If yes, describe under SPECIAL PROVISIONS below				E.L. DISEASE - EA EMPLOYEE	\$ 500000
					E.L. DISEASE - POLICY LIMIT	\$ 500000
	OTHER					

DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
30 days notice of cancellation for Workers Compensation coverage. Companies have the option to cancel 10 days for non-payment.

CERTIFICATE HOLDER
TOWN024
Town of Sewalls Point
1 S. Sewalls Point Road
Stuart FL 34996

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



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

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

Summary

[Print](#) Owner
6 of 19

Parcel Info Summary

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
13-38-41-009-000-00030-2	8 OAKWOOD DR	27841	Owner	0	1

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

Summary
Property Location 8 OAKWOOD DR
Tax District 2200 Sewall's Point
Account # 27841
Land Use 101 0100 Single Family
Neighborhood 120400
Acres

Legal Description
Property Information
 OAKWOOD LOT 3

Search By

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

Owner Information
Owner Information
 WILKINSON, ELIZABETH

Mail Information
 8 OAKWOOD DR
 STUART FL 34996

Assessment Info
Front Ft. 0.00

Market Land Value \$200,000
Market Impr Value \$290,050
Market Total Value \$490,050

Site Functions

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

Recent Sale
Sale Amount \$0

Sale Date 2/4/2005
Book/Page 1979 1849

[Print](#) | [Back to List](#) | [<< First](#) | [< Previous](#) | [Next >](#) | [Last >>](#)

[Legal disclaimer / Privacy Statement](#)

Data updated on 03/12/2006



RECEIVED
3/27/06

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 3/27/06

Permit Number: _____

OWNER/TITLEHOLDER NAME: Elizabeth Wilkinson Phone (Day) 286-1851 (Fax) _____

Job Site Address: 8 OAKWOOD Dr City: _____ State: _____ Zip: _____

Legal Desc. Property (Subd/Lot/Block) OAKWOOD Lot 3 Parcel Number: 13-33-41-009-000-00030-2

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

Description of Work To Be Done: Storm Protection

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 7,800-
(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: Gulfstream Admin + Suther Phone: 287-6476 Fax: 297-9740

Street: 3001 SE GRAN PARK WAY City: Stuart State: FL Zip: 34997

State Registration Number: CRC058017 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 Parch: _____
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: National Electrical Code: 2002 Florida Energy Code: 2004 Florida Building Code (Structural, Mechanical, Plumbing, Gas): 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)
Elizabeth Wilkinson
State of Florida, County of: Martin
This the 28th day of MARCH, 2006
by Elizabeth Wilkinson who is personally
known to me or produced
as identification.

CONTRACTOR SIGNATURE (required)
John L. O'Brien
On State of Florida, County of: Martin
This the 27th day of MARCH, 2006
by John L. O'Brien who is personally
known to me or produced
As identification. Kenneth R King

Notary Public
LAURA L. O'BRIEN
MY COMMISSION # DD 205961
EXPIRES: April 28, 2007
Bonded Thru Notary Public Underwriters

Notary Public
My Commission Expires: 11-3-08

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION

KENNETH R. KING
MY COMMISSION # DD 30830
EXPIRES: November 3, 2008
Bonded Thru Notary Public Underwriters

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 4-3-06

BUILDING PERMIT NO. **8151**

Building to be erected for WILKINSON Type of Permit HURRICANE SHUTTERS

Applied for by UPSTREAM ALUMINUM (Contractor) Building Fee 120.00

Subdivision Oakwood Lot 3 Block _____ Radon Fee _____

Address 8 Oakwood Drive Impact Fee _____

Type of structure SFR A/C Fee _____

Parcel Control Number:

1338410090000003020000 Electrical Fee _____

Amount Paid 120.00 Check # 10977 Cash _____ Other Fees (_____) Plumbing Fee _____

Total Construction Cost \$ 7800.00 Roofing Fee _____

TOTAL Fees 120.00

Signed [Signature]

Applicant

Signed [Signature]

Town Building Official

PERMIT

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

INSPECTIONS

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

8151

HURRICANE SHUTTERS

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1-10, 2007 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
0064 8414	Lazarus 31 Sliver Rd 8414	Final CAS FINAL	PASS CLOSE	RESCHEDULE FOR 1/12/07 INSPECTOR: <i>[Signature]</i>
7	Ken Wendell			
1791	W. Williams	Final	PASS	CLOSE
2	8 Oakwood Dr Home Depot			INSPECTOR: <i>[Signature]</i>
8475	Hexworth 8 Riv Vista	Interior rough	FAIL	#40 FEE ✓ INSPECTOR: <i>[Signature]</i>
3	Elite			
Tree	Kelso	Tree	PASS	
4	18 Rio Vista OB			INSPECTOR: <i>[Signature]</i>
8488	Zorn 11 N. Via Lucinda	Final	PASS	CLOSE INSPECTOR: <i>[Signature]</i>
5	Stuart Fence			
8398	Helfman 8 Ridgeland Dr	Final-general	FAIL	#40 FEE ✓ INSPECTOR: <i>[Signature]</i>
6	Hardware Elec			
8186	Baytree/Hipling 1435 River Rd	Final-tracker	FAIL	INSPECTOR: <i>[Signature]</i>
1				

OTHER: 4A 57,55PR. PUMPS FOR IRRIGATION.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1/3, 2007

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1801	Cummings	Skew wall footer	PASS	REAR/SIDE @ POOL
4	83 Skew Rd Elias Mgmt			INSPECTOR: <i>[Signature]</i>
8426	Kremer	Final	FAIL	
5	23 Ridgeland Dr Pioneer Screen			INSPECTOR: <i>[Signature]</i>
1794	Wilkinson	Roof Final	FAIL	
2	8 Oakwood Home Depot	(REINSPECT)		INSPECTOR: <i>[Signature]</i>
8396	Frederick	Final	PASS	CLOSE
8152	32 Sewalls Pt			
6	O/B			INSPECTOR: <i>[Signature]</i>
MC 0054	Doss	Final	FAIL	
3	85 S River Rd Harbor Bay			INSPECTOR: <i>[Signature]</i>
8172	Marieno	Column & beam	CANCEL	WILL RESCHEDULE
1	23 Middle Rd Ken Wendell			INSPECTOR: <i>[Signature]</i>
	Gouel	Drive-by	OK	
7	24 Castle Hill Way	(see John or me)		INSPECTOR: <i>[Signature]</i>

OTHER:

~~23 RIDGELAND SCREENS~~
~~SEE OWNER~~
~~WANTS TO ADD~~
~~REPAIRING PLATES.~~



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 8 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.

FINAL ROOF

SUBMIT STATIC FIELD UPLIFT TEST
PER RAS 100.

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

DATE: 1/3/07

[Signature]
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-29, 2006 Page 2 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
12994	Wilkinson	Roof Final	FAIL	
4	8 Oakwood Dr Home Depot			INSPECTOR: <i>[Signature]</i>
8474	Wallenguest	Final	FAIL	
9	3 Copaire Rd Eden Screen			INSPECTOR: <i>[Signature]</i>
8480	Taormina	Final	FAIL	
10	26 Fieldway Eden Screen			INSPECTOR: <i>[Signature]</i>
Tree	Galini's	Tree	PASS	
8	26 S Sewalls OB			INSPECTOR: <i>[Signature]</i>
8121	Hardin	Final demo	FAIL	
1	155 830 275. River Rd OB			INSPECTOR: <i>[Signature]</i>
1966	Hardin	Final dock	FAIL	
1	275 River Rd OB			INSPECTOR: <i>[Signature]</i>
8456	lope	nailing chest	PASS	
3	124 S Sewalls Pt Coker			INSPECTOR: <i>[Signature]</i>

OTHER: _____



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 8 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.

FINAL ROOF

REMOVE DEBRIS RELATED
TO ROOF WORK. (BROKEN
TILE, PALLETS ETC.)

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

DATE: 12/29


INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-1, 2006

Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
1704	Wilkinson	tin-tag	PASS	
3	8 Oakwood DR Home Depot			INSPECTOR: <i>[Signature]</i>
—	Demarest	Final	CANCEL	DUPLICATION
4	925 RIVER Schiller			INSPECTOR:
8461	Masterpiece	Temp Tower	PASS	NOTIFY FPL. FOR METER CHANGE.
2	5 Mandalay Howard Elec			INSPECTOR: <i>[Signature]</i>
8410	Thompson	Final-shutter	PASS	CLOSE
1	179 Skiver 21st Century			INSPECTOR: <i>[Signature]</i>
8447	Hart	Final	PASS	CLOSE
6	61 Skiver Rd Terrellgas			INSPECTOR: <i>[Signature]</i>
		WORK W/O PERMIT		INSPECTOR:
	3 DELANO			
TREE		TREE	PASS	
	19 RIVERVIEW			INSPECTOR: <i>[Signature]</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 11-22, 2006 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7794	1000000000	Home tag	PASS	
1	8 Oakwood DR Home Depot			INSPECTOR: <i>JM</i>
8432	Inderson 10 N. Sewall Pt	Final fence	PASS	CLOSE
6	Stuart Fence			INSPECTOR: <i>JM</i>
8434	32 N. Sewall Pt	Final Ac	PASS	Cancel
		(See me)		INSPECTOR:
7786	Walker	Lath	PASS	
2	6 Cranes Nest James Const			INSPECTOR: <i>JM</i>
8412	Hart	Reinspection generator	PASS	CLOSE
5	61 S River Rd Howard Elect.			INSPECTOR: <i>JM</i>
8431	Hayes Bonigan	back in line	PASS	
7	27 N River Rd Propane Disc.			INSPECTOR: <i>JM</i>
Tree	Cummings	Trees	PASS	
4	83 S River Rd Elias			INSPECTOR: <i>JM</i>

OTHER: 70/71 PLUMERIA



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(772) 287-2455

CORRECTION NOTICE

ADDRESS: 8 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

COPPER FLASHING IS IN
CONTACT W/ GALV. STEEL
FLASH/CURB @ SKYLIGHT -
DISSIMILAR MATERIALS
MUST NOT BE IN CONTACT.
SEPERATE W/ 30# FELTS

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

DATE: 11/22

[Signature]

INSPECTOR

DO NOT REMOVE THIS TAG

Com-Ten INDUSTRIES
Compression & Tensile Testing Equipment

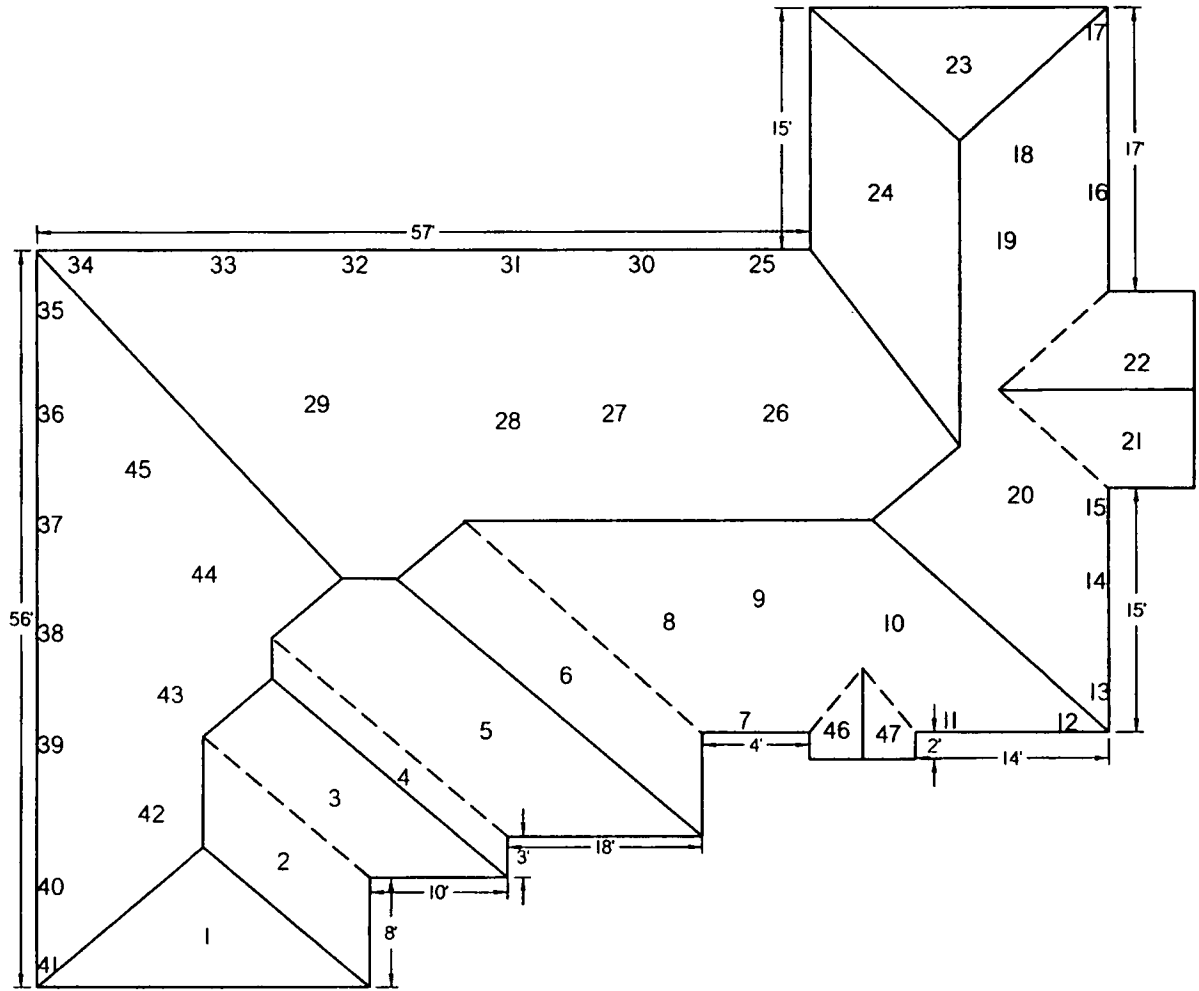
6405 49th Street North
Pinellas Park, FL 33781
Phone: 727-520-1200

CERTIFICATE OF CALIBRATION

This is to certify that the following Com-Ten instrument was calibrated using loading equipment traceable to NIST through one or more of the listed NIST reports and was found to meet or exceed the stated accuracy. Applicable NIST report numbers: 6641, 9830, 9209-9211, 731/242697.

Model: CT110000 Serial No: 56109 Date: 10-13-06

Accuracy: ± 0.5 % of full scale ± 1 least significant count By: [Signature]



Roof Plan

Copyright 2006 Advanced Research & Testing, Inc.

2900 NE 30th St. 3M
 Ft. Lauderdale, FL 33306
 PH: 866.270.7331 Fax: 954.561.6407

Table 1: Uplift Test Results

Test Location Legend: **C** = Corner **P** = Perimeter **F** = Field

Failure Mode Legend: **B** = Broken/Cracked Tile **U** = Underlayment separation from Adhesive or Mortar
T = Tile separation from Adhesive or Mortar **D** = Nose of tile defects vertically in excess of 2" (Mech. attached only)

Test #	Pass	Fail	Fail Mode	Test Location
1	X			F
2	X			F
3	X			F
4	X			F
5	X			F
6	X			F
7	X			P
8	X			F
9	X			F
10	X			F
11	X			P
12		X	T	C
13	X			C
14	X			P
15	X			P
16	X			P
17	X			C
18	X			F
19	X			F
20	X			F

Test #	Pass	Fail	Fail Mode	Test Location
21	X			F
22	X			F
23	X			P
24	X			F
25	X			P
26	X			F
27	X			F
28		X	T	F
29	X			F
30	X			P
31	X			P
32	X			P
33	X			P
34	X			C
35	X			C
36	X			P
37	X			P
38		X	T	P
39	X			P
40	X			P

Test #	Pass	Fail	Fail Mode	Test Location
41	X			C
42	X			F
43	X			F
44	X			F
45	X			F
46	X			F
47	X			F
48				
49				
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57				
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59				
60				



Advanced

RESEARCH & TESTING INC.

PERMIT #: 7794
 DATE: December 27, 2006
 THD #: 1768821
 ART#: 1027706
 NOA#: 02-1205.07
 INSPECTED BY: Nathan Benner

FLORIDA BUILDING CODE COMPLIANCE TAS - 106 REPORT

Standard Procedure for Field Verification of the Bonding of Mortar or Adhesive Set Tile Systems and Mechanically Attached, Rigid, Discontinuous Roof Systems

General Information:

Project Name: Wilkinson
 Project Address: 8 Oakwood Drive
 Stuart, FL 34996

7794
FILE


Project Manager: Tiffany Corn Phone: (561) 536-1295
 Company: The Home Depot Fax: (561) 742-4078
 Address: 2017 Corporate Drive
 Boyton Beach, FL 33426

Testing Agency/Equipment Information:

The undersigned representative agrees that all testing has been conducted and results have been reported in compliance with Florida Building Code TAS 106 Protocol.

Testing Agency Name: Advanced Research & Testing, Inc.
 Address: 2900 NE 30th Street 3M
 Ft. Lauderdale, FL 33306
 Telephone: (954) 270-7422
 Fax: (954) 561-6407

Representative: Thomas Steier
 Test Apparatus: Com-Ten S #56109


 Paul W. Scanlon, PE
 FL License # 65199

12/28/06
 Date

BUILDING/ROOF SYSTEM INFORMATION:

Roofing System Description: N/A
 Tile Manufacturer: N/A
 Installation Attachment: Foam

Mean Roof Height: N/A ft.
 Roof Length: N/A ft.
 2nd Largest Dimension: N/A ft.
 Approx. Roof Area: 5400 SF
 Approx. Roof Squares: 54

TAS 106 TEST REPORT SUMMARY:

No. of Tile Test Locations: 47

The uplift test consisted of placing a properly calibrated load test device with an adjustable connector under the front lip of the tested tile, gradually increasing the pressure exerted until a reading of thirty-five (35) pounds force (mortar and adhesive applications) or 80% minimum characteristic resistance load listed in the Product Approval (mechanically attached application) is achieved, then holding that load for five (5) seconds. If > 3% of the tiles within a given roof are found to be loose, the entire system is failed. A minimum of 75% of all tested tiles must pass the static uplift test for the roof to receive a passing score. For roofs > 500 SF in area, a minimum of one uplift test per 200 SF of tile in the Field must be tested, and a minimum of one uplift test per 100 SF of tile in the Perimeter and Corner areas must be tested.

This Roofing system has been found to PASS TAS 106.

Please see attached table and roof drawing for the test results for specific tiles tested
 Copyright 2006 Advanced Research & Testing, Inc.



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

(850) 487-1395

July 30

LIPHAM, BOYD ALAN
THE HOME DEPOT AT-HOME SERVICES
3200 COBB GALLERIA PARKWAY STE 200
ATLANTA GA 30339

STATE OF FLORIDA AC# 1488611
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

CCCL325818 07/14/04 040041391

CERTIFIED ROOFING CONTRACTOR
LIPHAM, BOYD ALAN
THE HOME DEPOT AT-HOME SERVICES

IS CERTIFIED under the provisions of ch. 469 FS.
Expiration date: AUG 31, 2006 804871400612

DETACH HERE

#1488611

STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD SEQ#804871400612

EXPIRES	REGISTRATION NO.	LICENSE NO.
7/14/2004	040041391	CCCL325818

The ROOFING CONTRACTOR
named below IS CERTIFIED
under the provisions of Chapter 469
Expiration date: AUG 31, 2006



LIPHAM, BOYD ALAN
THE HOME DEPOT AT-HOME SERVICES
150 W TOM COSTINE RD
LAKELAND FL 33809

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

2004-07641

STATE OF FLORIDA
PALM BEACH COUNTY
OCCUPATIONAL LICENSE

OC-032
CLASSIFICATION

EXPIRES: SEPTEMBER 30 - 2005

HOME DEPOT THE
LIPHAM BOYD A

** LOCATED AT

1395 NW 17TH AVE #102
DELRAY BEACH FL 33445

CNTY \$26.25

TOTAL \$26.25

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:
ROOFING CONTRACTOR
GCC1325818

THIS IS NOT A BILL - DO NOT PAY

PAID, PBC TAX COLLECTOR
\$26.25 OCC 523.09754 09-30-2004

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

THIS LICENSE VALID ONLY WHEN RECEIVED BY
TAX COLLECTOR

MARSH

CERTIFICATE OF INSURANCE

CERTIFICATE NUMBER
ATL-000994862-07

PRODUCER
MARSH USA, INC.
ATTN: ELIZABETH BRISENDINE (404)995-3568
OR BRENDA BOOKER 404)995-2594
FAX (404)760-5768
3475 PIEDMONT ROAD, SUITE 1200
ATLANTA, GA 30305

100492-IPUSA-GWA-03/04

INSURED
THD AT - HOME SERVICES INC.
DBA THE HOME DEPOT AT - HOME SERVICES, INC.
HOME DEPOT USA, INC.
2455 PACES FERRY ROAD NW
BUILDING C-8
ATLANTA, GA 30339

THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER OTHER THAN THOSE PROVIDED IN THE POLICY. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

COMPANIES AFFORDING COVERAGE

COMPANY A	STEADFAST INSURANCE COMPANY
COMPANY B	N/A
COMPANY C	NEW HAMPSHIRE INS COMPANY
COMPANY D	AMERICAN HOME ASSURANCE COMPANY

COVERAGES: This certificate supersedes and replaces any previously issued certificate for the policy period noted below.

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

CO LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY	IPR 3757 608-00	02/01/05	03/01/06	GENERAL AGGREGATE \$ 4,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY	'LIMITS OF POLICY ARE EXCESS'			PRODUCTS-COMP/OP AGG \$ 4,000,000
	<input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	'OF SIR: \$1,000,000 PER OCC'			PERSONAL & ADV INJURY \$ 4,000,000
	<input type="checkbox"/> OWNERS & CONTRACTOR'S PROT				EACH OCCURRENCE \$ 4,000,000
					FIRE DAMAGE (Any one fire) \$ 1,000,000
					MED EXP (Any one person) \$ EXCLUDED
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT \$
	<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 \$
	GARAGE LIABILITY				AUTO ONLY- EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: \$
					EACH ACCIDENT \$
					AGGREGATE \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> UMBRELLA FORM				AGGREGATE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				\$
C	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	5899472 (AOS)	02/01/05	03/01/05	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER
		5899479 (AOS)	03/01/05	03/01/06	EL EACH ACCIDENT \$ 1,000,000
		5899477 (NY, WI)	02/01/05	03/01/05	EL DISEASE-POLICY LIMIT \$ 1,000,000
		5899484 (NY, WI)	03/01/05	03/01/06	EL DISEASE-EACH EMPLOYEE \$ 1,000,000
F	OTHER WORKERS COMPENSATION CONTINUED	5899475 (AZ, ID, MA, MD, OR, VA)	02/01/05	03/01/05	
		5899482 (AZ, ID, MA, MD, OR, VA)	03/01/05	03/01/06	
		5899473 (CA)	02/01/05	03/01/05	
		5899480 (CA)	03/01/05	03/01/06	

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/SPECIAL ITEMS
BILL C. BERTIER - CRC 058500
BOYD A. LIPHAM - CCC1325818
EDWARD LYNN GUILLORY - CGC1507093
WORKERS COMPENSATION IS COVERED IN THE STATE OF FLORIDA

CERTIFICATE HOLDER

TOWN OF SEWALLS POINT
1 S. SEWALLS POINT RD
SEWALLS POINT, FL 34996

CANCELLATION

SHOULD ANY OF THE POLICIES DESCRIBED HEREIN BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE INSURER AFFORDING COVERAGE WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED HEREIN, BUT FAILURE TO MAIL SUCH NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER AFFORDING COVERAGE, ITS AGENTS OR REPRESENTATIVES, OR THE ISSUER OF THIS CERTIFICATE.

MARSH USA INC
BY:

Margaret B. Middleton

MM1(3/02)

VALID AS OF: 01/27/06

MARSH

CERTIFICATE OF INSURANCE

PRODUCER
MARSH USA, INC.
ATTN: ELIZABETH BRISENDINE (404)995-3568
OR BRENDA BOOKER 404)995-2594
FAX (404)760-5768
3475 PIEDMONT ROAD, SUITE 1200
ATLANTA, GA 30305
100492-IPUSA-GWA-03/04

INSURED
THD AT - HOME SERVICES INC.
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	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (per accident) \$
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	GARAGE LIABILITY				AUTO ONLY- EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN AUTO ONLY: \$
					EACH ACCIDENT \$
	EXCESS LIABILITY				AGGREGATE \$
	<input type="checkbox"/> UMBRELLA FORM				EACH OCCURRENCE \$
	<input type="checkbox"/> OTHER THAN UMBRELLA FORM				AGGREGATE \$
C C E E	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	5899472 (AOS)	02/01/05	03/01/05	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER \$
		5899479 (AOS)	03/01/05	03/01/06	EL EACH ACCIDENT \$ 1,000,00
	THE PROPRIETOR/PARTNERS/EXECUTIVE OFFICERS ARE: <input checked="" type="checkbox"/> INCL <input type="checkbox"/> EXCL	5899477 (NY,WI)	02/01/05	03/01/05	EL DISEASE-POLICY LIMIT \$ 1,000,00
		5899484 (NY,WI)	03/01/05	03/01/06	EL DISEASE-EACH EMPLOYEE \$ 1,000,00
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1 S. SEWALLS POINT RD
SEWALLS POINT, FL 34996

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MARSH USA INC
BY:

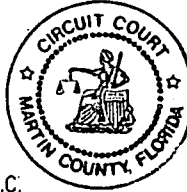
Margaret L. Madison

Permit # _____

Tax Folio # _____

STATE OF FLORIDA
MARTIN COUNTY
NOTICE OF COMMENCEMENT

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



133841009000000302

State of Florida
County of _____

BY Shawnix D.C.
DATE 11-3-06

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: Oakwood Lot 3
2. General description of improvement: RE-ROOF
3. Owner information:
 - a. Name & Address: Elisabeth Wilkinson
8 Oakwood Dr Stuart FL 34996
 - b. Interest In Property: _____
 - c. Name & Address of fee simple titleholder (other than owner): _____
4. Contractor's Name & Address: The Home Depot
1250 LINTON BLVD DELRAY 33444
 - a. Phone number: _____ b. Fax number: _____
5. Surety Information:
 - a. Name & Address: _____
 - b. Phone number: _____ c. Fax number: _____
 - d. Amount of Bond: \$ _____
6. Lender's Name & Address: _____
 - a. Phone number: _____ b. Fax number: _____
7. Person within the State of Florida designated by owner upon whom notices or other documents may be served as provided by 713.13 (1) (a), 7 Florida Statutes:
Name & Address: _____
 - a. Phone number: _____ b. Fax number: _____
8. In addition to himself, owner designates _____ of _____ to receive a copy of the Lienor's Notice as provided in Section 713.13 (1) (b), Florida Statutes.
9. Expiration date of Notice of Commencement (the expiration date is one (1) year from the date of recording unless a different date is specified): _____

(signature of owner)

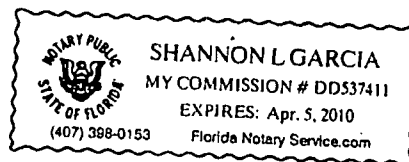
Shawnix

Sworn to and subscribed before me
this 25 day of Oct 20 06.

Notary Shannon L Garcia

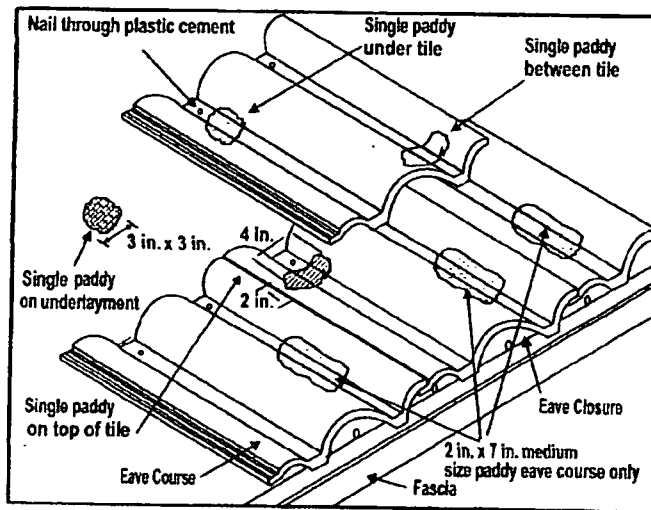
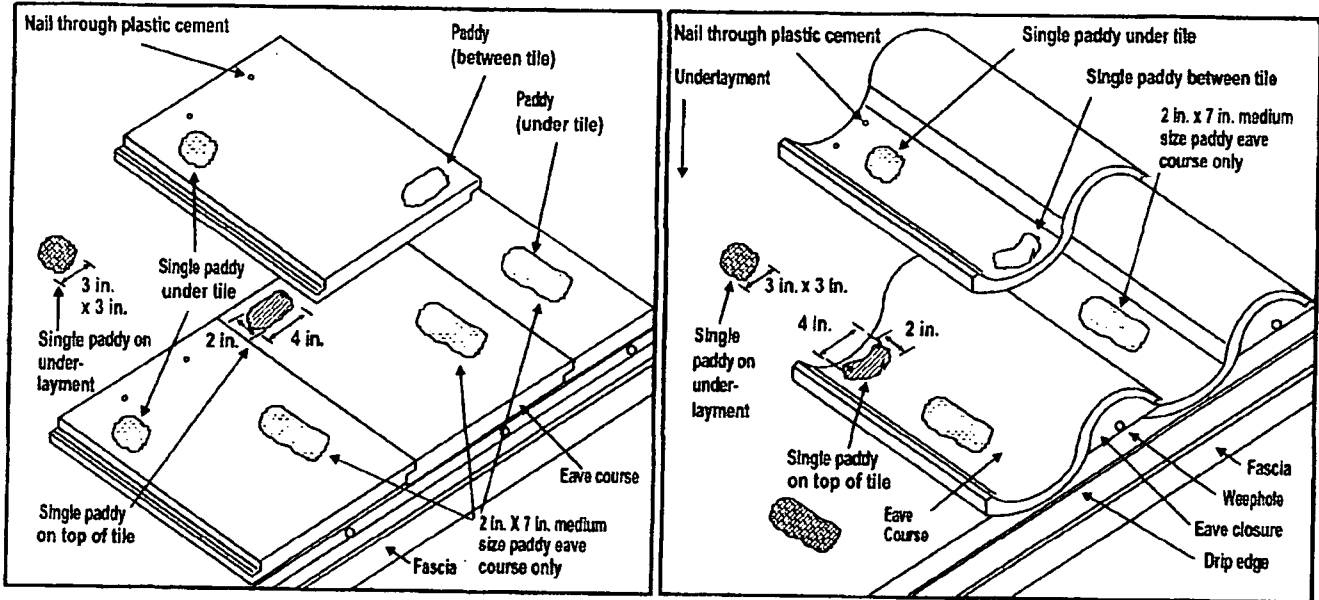
Known Personally/ R.D. Shown _____

My commission expires: 4-5-10



1788921

ADHESIVE PLACEMENT DETAIL 3 DOUBLE PATTY

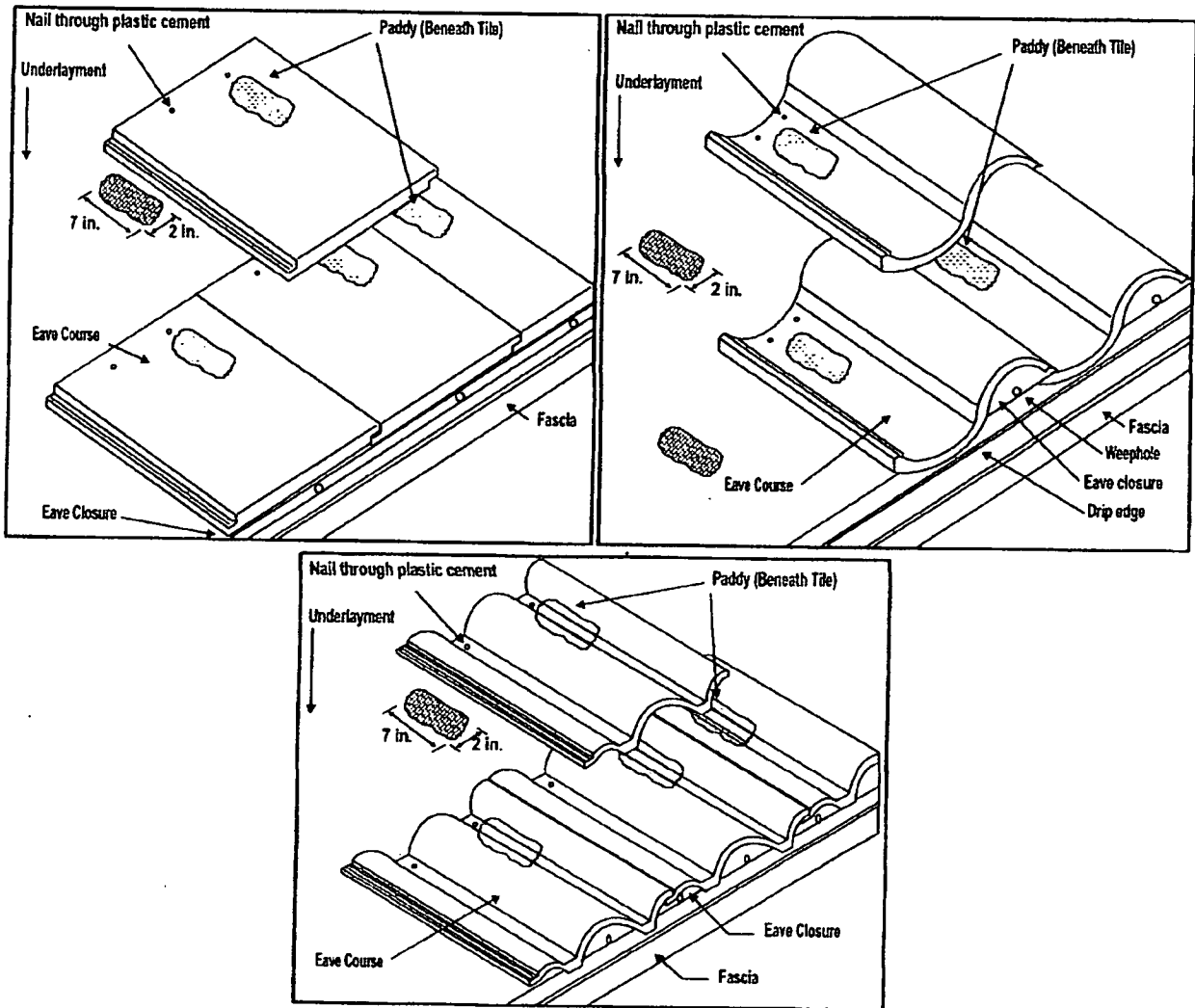


END OF THIS ACCEPTANCE

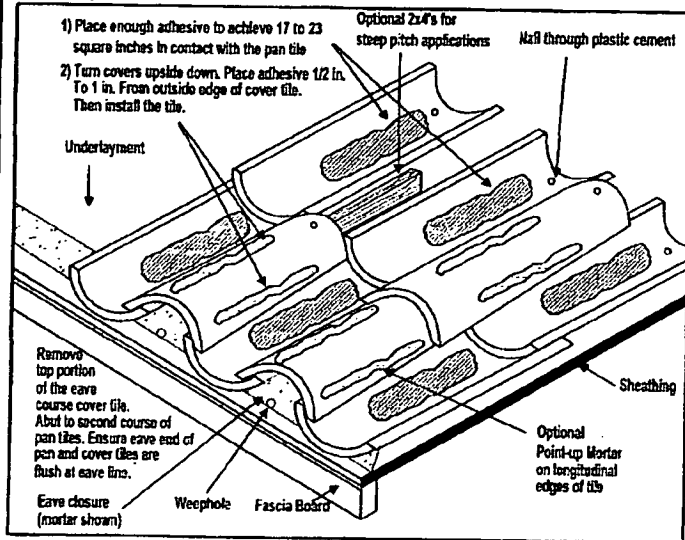
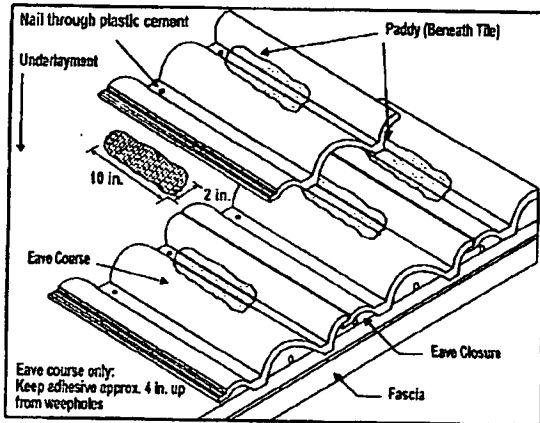
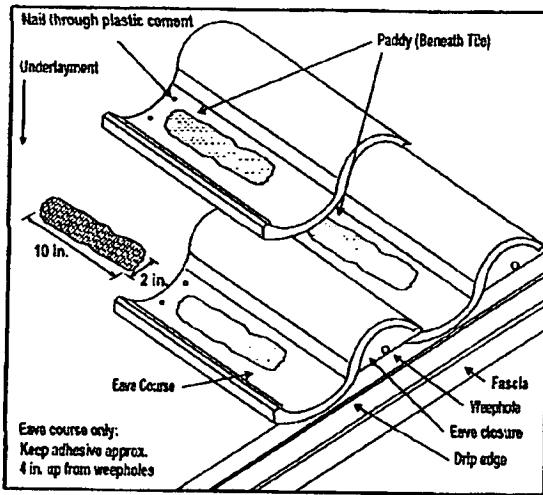
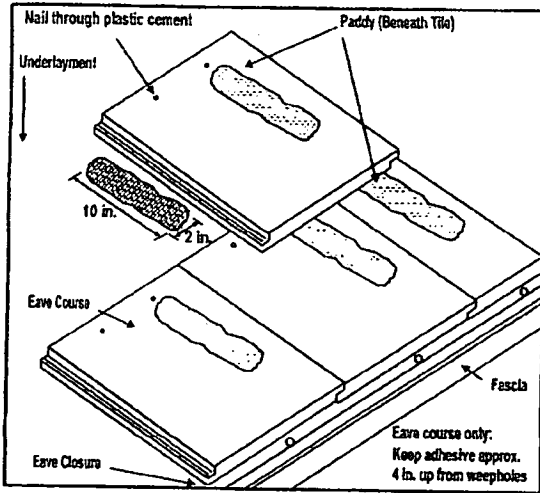


NOA No.: 06-0201.02
 Expiration Date: 05/10/11
 Approval Date: 04/13/06
 Page 7 of 7

ADHESIVE PLACEMENT DETAIL 2 SINGLE PATTY



ADHESIVE PLACEMENT DETAIL 1 SINGLE PATTY



INSTALLATION:

1. Polypro® AH160 may be used with any roof tile assembly having a current NOA that lists uplift resistance values with the use of Polypro® AH160.
2. Polypro® AH160 shall be applied in compliance with the Component Application section and the corresponding Placement Details noted herein. The roof tile assembly's adhesive attachment with the use of Polypro® AH160 shall provide sufficient attachment resistance, expressed as an uplift based system, to meet or exceed the uplift resistance determined in compliance with Miami-Dade County Roofing Application Standards RAS 127. The adhesive attachment data is noted in the roof tile assembly NOA
3. Polypro® AH160 roof tile adhesive and its components shall be installed in accordance with Roofing Application Standard RAS 120, and Polyfoam Products, Inc. Polypro® AH160 Operating Instruction and Maintenance Booklet.
4. Installation must be by a Factory Trained 'Qualified Applicator' approved and licensed by Polyfoam Products, Inc. Polyfoam Products Inc. shall supply a list of approved applicators to the authority having jurisdiction.
5. Calibration of the Foampro® dispensing equipment is required before application of any adhesive. The mix ratio between the "A" component and the "B" component shall be maintained between 1.0-1.15 (A): 1.0 (B). The dispense timer shall be set to deliver 0.0175 to 0.15 pounds per tile as determined at calibration. No other settings shall be approved.
6. Polypro® AH160 shall be applied with Foampro RTF1000 or ProPack® 30 & 100 dispensing equipment only.
7. Polypro® AH160 shall not be exposed permanently to sunlight.
8. Tiles must be adhered in freshly applied adhesive. Tile must be set within 2 to 3 minutes after Polypro® AH160 has been dispensed.
9. Polypro® AH160 placement and minimum patty weight shall be in accordance with the 'Placement Details' herein. Each generic tile profile requires the specific placement noted herein.

Table 1: Adhesive Placement For Each Generic Tile Profile			
Tile Profile	Placement Detail	Single Paddy Weight Min. (grams)	Two Paddy Weight per paddy Min. (grams)
Flat, Low, High Profiles	#1	35	N/A
High Profile (2 Piece Barrel)	#1	17/side on cap and 34/pan	N/A
Flat, Low, High Profiles	#2	24	N/A
Flat, Low, High Profiles	#3		8

LABELING:

All Polypro® AH160 containers shall comply with the Standard Conditions listed herein.

BUILDING PERMIT REQUIREMENTS:

As required by the Building Official or applicable building code in order to properly evaluate the installation of this system.



NOA No.: 06-0201.02
 Expiration Date: 05/10/11
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EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Center for Applied Engineering	#94-060	TAS 101	04/08/94
	257818-1PA	TAS 101	12/16/96
	25-7438-3	SSTD 11-93	10/25/95
	25-7438-4		
	25-7438-7	SSTD 11-93	11/02/95
	25-7492	SSTD 11-93	12/12/95
	NB-589-631	ASTM D 1623	02/01/94
Miles Laboratories Polymers Division			
Ramtech Laboratories, Inc.	9637-92	ASTM E 108	04/30/93
Southwest Research Institute	01-6743-011	ASTM E 108	11/16/94
Trinity Engineering	01-6739-062b[1]	ASTM E 84	01/16/95
	7050.02.96-1	TAS 114	03/14/96
Celotex Corp. Testing Services	528454-2-1	TAS 101	10/23/98
	528454-9-1		
	528454-10-1		
	520109-1	TAS 101	12/28/98
	520109-2		
	520109-3		
	520109-6		
	520109-7		
	520191-1	TAS 101	03/02/99
	520109-2-1		

LIMITATIONS:

1. Fire classification is not part of this acceptance. Refer to the Prepared Roof Tile Assembly for fire rating.
2. Polypro® AH160 shall solely be used with flat, low, & high tile profiles.
3. Minimum underlayment shall be in compliance with the Roofing Application Standard RAS 120.
4. Roof Tile manufactures acquiring acceptance for the use of Polypro® AH160 roof tile adhesive with their tile assemblies shall test in accordance with TAS 101.
5. Roof Tile manufactures acquiring acceptance for the use of HANDI-STICK roof tile adhesive with their tile assemblies shall test in accordance with TAS 101 with section 10.4 as modified herein.

(F)
2) W
F= MS



NOA No.: 06-0201.02
 Expiration Date: 05/10/11
 Approval Date: 04/13/06
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ROOFING ASSEMBLY APPROVAL:

Category: Roofing
Sub Category: Roof tile adhesive
Materials: Polyurethane

SCOPE:

This approves Polypro® AH160 as manufactured by Polyfoam Products, Inc. as described in Section 2 of this Notice of Acceptance. For the locations where the design pressure requirements, as determined by applicable building code, does not exceed the design pressure values obtained by calculations in compliance with Roofing Application Standard RAS 127, for use with approved flat, low, and high profile roof tiles system using Polypro® AH 160. Where the attachment calculations are done as a moment based system for single patty placement, and as an uplift based system for double patty systems

PRODUCTS MANUFACTURED BY APPLICANT:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Polypro® AH160	N/A	TAS 101	Two component polyurethane foam adhesive
Foampro® RTF1000	N/A		Dispensing Equipment
ProPack® 30 & 100	N/A		Dispensing Equipment

PRODUCTS MANUFACTURED BY OTHERS:

Any Miami-Dade County Product Control Accepted Roof Tile Assembly having a current NOA which list moment resistance values with the use of Polypro AH160 roof tile adhesive.

PHYSICAL PROPERTIES:

<u>Property</u>	<u>Test</u>	<u>Results</u>
Density	ASTM D 1622	1.6 lbs./ft. ³
Compressive Strength	ASTM D 1621	18 PSI Parallel to rise 12 PSI Perpendicular to rise
Tensile Strength	ASTM D 1623	28 PSI Parallel to rise
Water Absorption	ASTM D 2127	0.08 Lbs./Ft ²
Moisture Vapor Transmission	ASTM E 96	3.1 Perm / Inch
Dimensional Stability	ASTM D 2126	+0.07% Volume Change @ -40° F., 2 weeks +6.0% Volume Change @158°F., 100% Humidity, 2 weeks
Closed Cell Content	ASTM D 2856	86%

Note: The physical properties listed above are presented as typical average values as determined by accepted ASTM test methods and are subject to normal manufacturing variation.



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

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

NOTICE OF ACCEPTANCE (NOA)

**Polyfoam Products, Inc.
11715 Boudreaux Road
Tomball, TX 77375**

SCOPE:

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

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

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

DESCRIPTION: Polypro® AH160

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

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

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

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

This NOA renews NOA No.01-0521.02 and consists of pages 1 through 7
The submitted documentation was reviewed by Jorge L. Acebo.



**NOA No.: 06-0201.02
Expiration Date: 05/10/11
Approval Date: 04/13/06
Page 1 of 7**

Table 5A: Attachment Resistance Expressed as a Moment - M_r (ft-lbf) for Single Patty Adhesive Set Systems		
Tile Profile	Tile Application	Minimum Attachment Resistance
Monier Lifetile Spanish 'S' Tile	Polyfoam PolyPro™	66.5 ³
	Polyfoam PolyPro™	38.7 ⁴
3 Large paddy placement of 63grams of PolyPro™.		
4 Medium paddy placement of 24grams of PolyPro™.		

Table 5B: Attachment Resistance Expressed as a Moment - M_r (ft-lbf) for Mortar Set Systems		
Tile Profile	Tile Application	Attachment Resistance
Monier Lifetile Spanish 'S' Tile	Mortar Set	24.5

5. LABELING

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

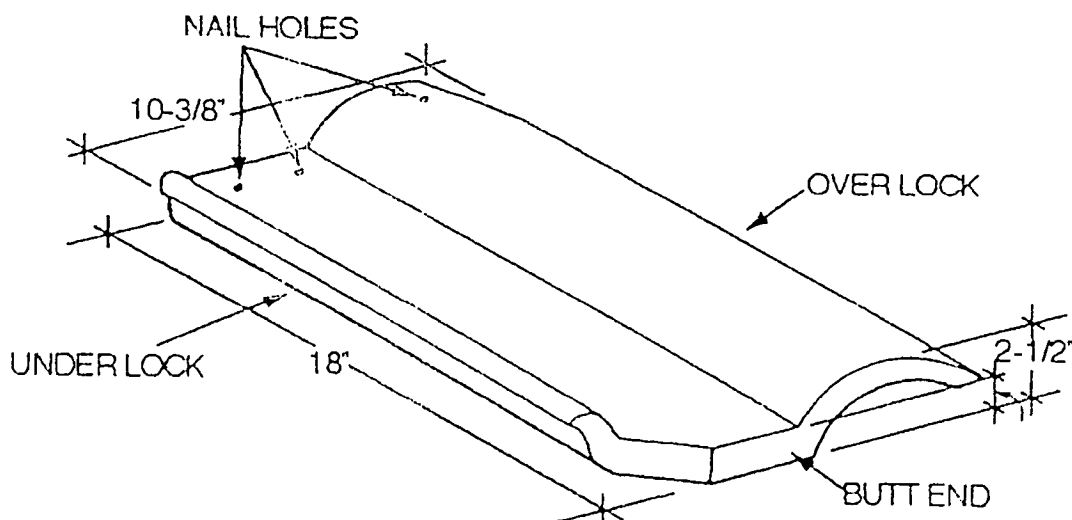
6. BUILDING PERMIT REQUIREMENTS

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

6.1.1 This Notice of Acceptance.

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

PROFILE DRAWINGS



MONIER LIFETILE SPANISH 'S' CONCRETE ROOF TILE

END OF THIS ACCEPTANCE.



Table 1: Average Weight (W) and Dimensions (l x w)			
Tile Profile	Weight-W (lbf)	Length-l (ft)	Width-w (ft)
Monier Lifetile Spanish 'S' Tile	9.64	1.5	0.865

Table 2: Aerodynamic Multipliers - λ (ft ³)	
Tile Profile	λ (ft ³) Direct Deck Application
Monier Lifetile Spanish 'S' Tile	0.259

Table 3: Restoring Moments due to Gravity - M_g (ft-lbf)										
Tile Profile	3":12"		4":12"		5":12"		6":12"		7":12" or greater	
	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck	Battens	Direct Deck
Monier Lifetile Spanish 'S' Tile	N/A	8.51	N/A	8.44	N/A	8.27	N/A	8.07	N/A	7.87

Table 4: Attachment Resistance Expressed as a Moment - M_r (ft-lbf) for Nail-On Systems			
Tile Profile	Fastener Type	Direct Deck (min 15/32" plywood)	Direct Deck (min. 19/32" plywood)
Monier Lifetile Spanish 'S' Tile	2-10d Ring Shank Nails	28.6	41.2
	1-10d Smooth or Screw Shank Nail	5.1	6.8
	2-10d Smooth or Screw Shank Nails	6.9	9.2
	1 #8 Screw	20.7	20.7
	2 #8 Screws	43.2	43.2
	1-10d Smooth or Screw Shank Nail (Field Clip)	23.1	23.1
	1-10d Smooth or Screw Shank Nail (Eave Clip)	29.3	29.3
	2-10d Smooth or Screw Shank Nails (Field Clip)	27.6	27.6
	2-10d Smooth or Screw Shank Nails (Eave Clip)	38.1	38.1

Table 5: Attachment Resistance Expressed as a Moment M_r (ft-lbf) for Two Patty Adhesive Set Systems		
Tile Profile	Tile Application	Minimum Attachment Resistance
Monier Lifetile Spanish 'S' Tile	Adhesive	29.3 ¹
¹ See manufactures component approval for installation requirements. ² Flexible Products Company TileBond Average weight per patty 10.7 grams. Polyfoam Product, Inc. Average weight per patty 8 grams.		



<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
The Center for Applied Engineering, Inc.	25-7214-3	Static Uplift Testing PA 102 (1 Quik-Drive Screw, Direct Deck)	March, 1995
Redland Technologies	Letter Dated Aug. 1, 1994	Wind Tunnel Testing PA 108 (Nail-On)	Aug. 1994
The Center for Applied Engineering, Inc.	Project No. 307025	Wind Driven Rain	Oct. 1994
Professional Service Industries, Inc.	Test #MDC-78 224-47099	PA 100 Physical Properties	Sept. 1994
Celotex Corporation Testing Service	520111-3 520191-2-1	Static Uplift Testing PA 101	Dec. 1998 March 1999
Walker Engineering, Inc.	Calculations	Aerodynamic Multiplier	March 1999
Walker Engineering, Inc.	Evaluation Calculations	25-7094	February 1996
Walker Engineering, Inc.	Evaluation Calculations	25-7496	April 1996
Walker Engineering, Inc.	Evaluation Calculations	25-7584 25-7804b-8 25-7804-4 & 5 25-7848-6 25-7183	December 1996 March 1995
Walker Engineering, Inc.	Evaluation Calculations	Aerodynamic Multipliers	April 1999
Walker Engineering, Inc.	Calculations	Two Patty Adhesive Set System	April 1999

3. LIMITATIONS

- 3.1 Fire classification is not part of this acceptance.
- 3.2 For mortar or adhesive set tile applications, a static field uplift test shall be performed in accordance with RAS 106.
- 3.3 Applicant shall retain the services of a Miami-Dade County Certified Laboratory to perform quarterly test in accordance with TAS 112, appendix 'A'. Such testing shall be submitted to the Building Code Compliance Office for review.
- 3.4 Minimum underlayment shall be in compliance with the applicable Roofing Applications Standards listed section 4.1 herein.
- 3.5 30/90 hot mopped underlayment applications may be installed perpendicular to the roof slope unless stated otherwise by the underlayment material manufacturers published literature.
- 3.6 This acceptance is for wood deck applications. Minimum deck requirements shall be in compliance with applicable building code.
- 3.7 May be installed on slopes 7:12 and greater.

4. INSTALLATION

- 4.1 Monier Lifetile Spanish 'S' Concrete Roof Tile and its components shall be installed in strict compliance with Roofing Application Standard RAS 118, RAS 119, and RAS 120.
- 4.2 Data For Attachment Calculations



ROOFING ASSEMBLY APPROVAL

Category: Roofing
 Sub-Category: High Profile Roofing Tiles
 Material: Concrete

1. SCOPE

This renews a system using Monier Lifetile Spanish 'S' Concrete Roof Tile, as manufactured Monier Lifetile LLC and described in Section 2 of this Notice of Acceptance. For locations where the pressure requirements, as determined by applicable Building Code does not exceed the design pressure values obtained by calculations in compliance with RAS 127 using the values listed in section 4 herein. The attachment calculations shall be done as a moment based system.

2. PRODUCT DESCRIPTION

<u>Manufactured by Applicant</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Monier Lifetile Spanish 'S' Tile	l = 18" w = 10 ³ / ₈ " min. 3/4" thick	PA 112	High profile, interlocking, one-piece, 'S' shaped, high-pressure extruded concrete roof tile equipped with two nail holes. For direct deck nail-on, mortar set or adhesive set applications.
Trim Pieces	l = varies w = varies varying thickness	PA 112	Accessory trim, concrete roof pieces for use at hips, rakes, ridges and valley terminations. Manufactured for each tile profile.

2.1 SUBMITTED EVIDENCE:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Redland Technologies	7161-03 Appendix III	Static Uplift Testing PA 102 & PA 102(A)	Dec. 1991
Redland Technologies	7161-03 Appendix II	Wind Tunnel Testing PA 108 (Nail-On)	Dec. 1991
Redland Technologies	P0647-01	Wind Tunnel Testing PA 108 (Mortar Set)	Aug. 1994
Redland Technologies	P0402	Withdrawal Resistance Testing of screw vs. smooth shank nails	Sept. 1993
The Center for Applied Engineering, Inc.	94-084	Static Uplift Testing PA 101 (Mortar Set)	May 1994
The Center for Applied Engineering, Inc.	94-083	Static Uplift Testing PA 101 (Adhesive Set)	April 1994
The Center for Applied Engineering, Inc.	25-7183-4	Static Uplift Testing PA 102 (2 Quik-Drive Screws, Direct Deck)	Feb. 1995





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)

Monier Lifetile, LLC
 135 NW 20th Street
 Boca Raton, FL 33431

SCOPE:

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

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

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

DESCRIPTION: Spanish 'S' Concrete Roof Tile

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

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

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

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

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

This NOA consists of pages 1 through 5.

The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 02-1205.07
 Expiration Date: 01/02/08
 Approval Date: 01/02/03
 Page 1 of 5

SECTION 1524
HIGH VELOCITY HURRICANE ZONES REQUIRED OWNER NOTIFICATION FOR
ROOFING CONSIDERATION

1524.1 As it pertains to this section, it is the responsibility of the roofing contractor to provide the owner with the required roofing permit, and to explain to the owner the content of this section. The provisions of Chapter 15 of the *Florida Building Code, Building* govern the minimum requirements and standards of the industry for roofing system installations. Additionally, the following items should be addressed as part of the agreement between the owner and the contractor. The owner's initial in the box adjacent indicates that the item has been explained.

- EW 1. **Aesthetics-Workmanship:** The workmanship provisions of Chapter 15 (High Velocity Hurricane Zone) are for the purpose of providing that the roofing system meets the wind resistance and water intrusion performance standards. Aesthetics (appearance) are not a consideration with respect to workmanship provisions. Aesthetic issues such as color or architectural appearance, that are not part of a zoning code, should be addressed as part of the agreement between the owner and the contractor.
- EW 2. **Renailing Wood Decks:** When replacing roofing, the existing wood roof deck may have to be renailed in accordance with the current provisions of Chapter 16 (High Velocity Hurricane Zones) of the Florida Building Code. (The roof deck is usually concealed prior to removing the existing roof system)
- EW 3. **Common Roofs:** Common roofs are those which have no visible delineation between neighboring units (i.e. townhouses, condominiums, etc.). In buildings with common roofs, the roofing contractor and/or owner should notify the occupants of adjacent units of roofing work to be performed.
- EW 4. **Exposed Ceilings:** Exposed, open beam ceilings are where the underside of the roof decking can be viewed from below. The owner may wish to maintain the architectural appearance; therefore, roofing nail penetrations of the underside of the decking may not be acceptable. The Florida Building Code provides the option of maintaining this appearance.
- EW 5. **Ponding Water:** The current roof system and/or deck of the building may not drain well and may cause water to pond (accumulate) in low-lying areas of the roof. Ponding can be an indication of structural distress and may require the review of a professional structural engineer. Ponding may shorten the life expectancy and performance of the new roofing system. Ponding conditions may not be evident until the original roofing system is removed. Ponding conditions should be corrected.
- EW 6. **Overflow Scuppers (Wall Outlets):** It is required that rainwater flows off so that the roof is not overloaded from a buildup of water. Perimeter/edge walls or other roof extensions may block this discharge if overflow scuppers (wall outlets) are not provided. It may be necessary to install overflow scuppers in accordance with the requirements of Florida Building Code, Plumbing.
- EW **Ventilation:** Most roof structures should have some ability to vent natural airflow through the interior of the structural assembly (the building itself). The existing amount of attic ventilation shall not be reduced. It may be beneficial to consider additional venting which can result in extending the service life of the roof.

[Signature]
Owner's/Agents Signature

7-28-05
Date

[Signature]
Contractor's Signature

Section E (Tile Calculations)

For Moment based tile systems, choose either Method 1 or 2. Compared the values for M_r with the values from M_r . If the M_r values are greater than or equal to the M_r values, for each area of the roof, then the tile attachment method is acceptable.

Method 1 "Moment Based Tile Calculations Per RAS 127"
 $(P_1: -45 \times \lambda 0.259 = 11.65) - Mg: 8.27 = M_{r1} 3.38$ NOA $M_r 38.7^4$
 $(P_2: -95.1 \times \lambda 0.259 = 24.63) - Mg: 8.27 = M_{r2} 16.36$ NOA $M_r 38.7^4$
 $(P_3: -95.1 \times \lambda 0.259 = 24.63) - Mg: 8.27 = M_{r3} 16.36$ NOA $M_r 38.7^4$

Method 2 "Simplified Tile Calculation Per Table Below"
 Required Moment of Resistance (M_r) From Table Below 28.4 NOA $M_r 38.7^4$

Mean Roof Height Roof Slope	15'	20'	25'	30'	40'
2:12	34.4	36.5	38.2	39.7	42.2
3:12	32.2	34.4	36.0	37.4	39.8
4:12	30.4	32.2	33.8	35.1	37.3
5:12	28.4	30.1	31.6	32.8	34.9
6:12	26.4	28.0	29.4	30.5	32.4
7:12	24.4	25.9	27.1	28.2	30.0

*Must be used in conjunction with a list of moment based tile systems endorsed by the Broward County Board of Rules and Appeals.

For Uplift based tile systems use Method 3. Compared the values for F' with the values for F_r . If the F' values are greater than or equal to the F_r values, for each area of the roof, then the tile attachment method is acceptable.

Method 3 "Uplift Based Tile Calculations Per RAS 127"
 $(P_1: \quad \times l: \quad = \quad \times w: \quad) - W: \quad \times \cos \theta: \quad = F_{r1}: \quad$ NOA F' _____
 $(P_2: \quad \times l: \quad = \quad \times w: \quad) - W: \quad \times \cos \theta: \quad = F_{r2}: \quad$ NOA F' _____
 $(P_3: \quad \times l: \quad = \quad \times w: \quad) - W: \quad \times \cos \theta: \quad = F_{r3}: \quad$ NOA F' _____

Description	Symbol	Where to find
Design Pressure	P_1 or P_2 or P_3	RAS 127 Table 1 or by an engineering analysis prepared by PE based on ASCE 7
Mean Roof Height	H	Job Site
Roof Slope	θ	Job Site
Aerodynamic Multiplier	λ	NOA
Restoring Moment due to Gravity	M_g	NOA
Attachment Resistance	M_r	NOA
Required Moment Resistance	M_r	Calculated
Minimum Attachment Resistance	F'	NOA
Required Uplift Resistance	F_r	Calculated
Average Tile Weight	W	NOA
Tile Dimensions	l= length w= width	NOA

All calculations must be submitted to the Building Official at the time of permit application.

Section D (Steep Sloped Roof System)

Roof System Manufacturer: MONIER LIFE TILE

Notice of Acceptance Number: 02-1205.07

Minimum Design Wind Pressures, If Applicable (From RAS 127 or Calculations):

P1: -45 P2: -95.1 P3: -95.1

Maximum Design Pressure
(From the NOA Specific System): N/A

Method of tile attachment: POLY FOAM

Step Sloped Roof System Description

Deck Type: PLYWOOD 5/8"

Type Underlayment: #30 ASTMA

Insulation: N/A

Fire Barrier: N/A

Fastener Type & Spacing: 1 1/4" RS 6" @ 12"

Adhesive Type: ASTM TYPE 4

Type Cap Sheet: #90 ASTMA

Roof Covering: SPANISH 'S' CONCRETE ROOF TILE

Type & Size Drip Edge: GALVANIZED METAL 3x3

Roof Slope: 5' : 12

Ridge Ventilation? N/A

Mean Roof Height: 14 FT

Section A (General Information)

Master Permit No. _____ Process No. _____
 Contractor's Name THE HOME DEPOT
 Job Address 8 OAKWOOD DR

ROOF CATEGORY

- Low Slope
 Asphaltic Shingles
 Mechanically Fastened Tile
 Metal Panel/Shingles
 Mortar/Adhesive Set Tile
 Wood Shingles/Shakes
 Prescriptive BUR-RAS 150

Are there Gas Vent Stacks?
 Yes No
 Type: Natural LPGX

ROOF TYPE

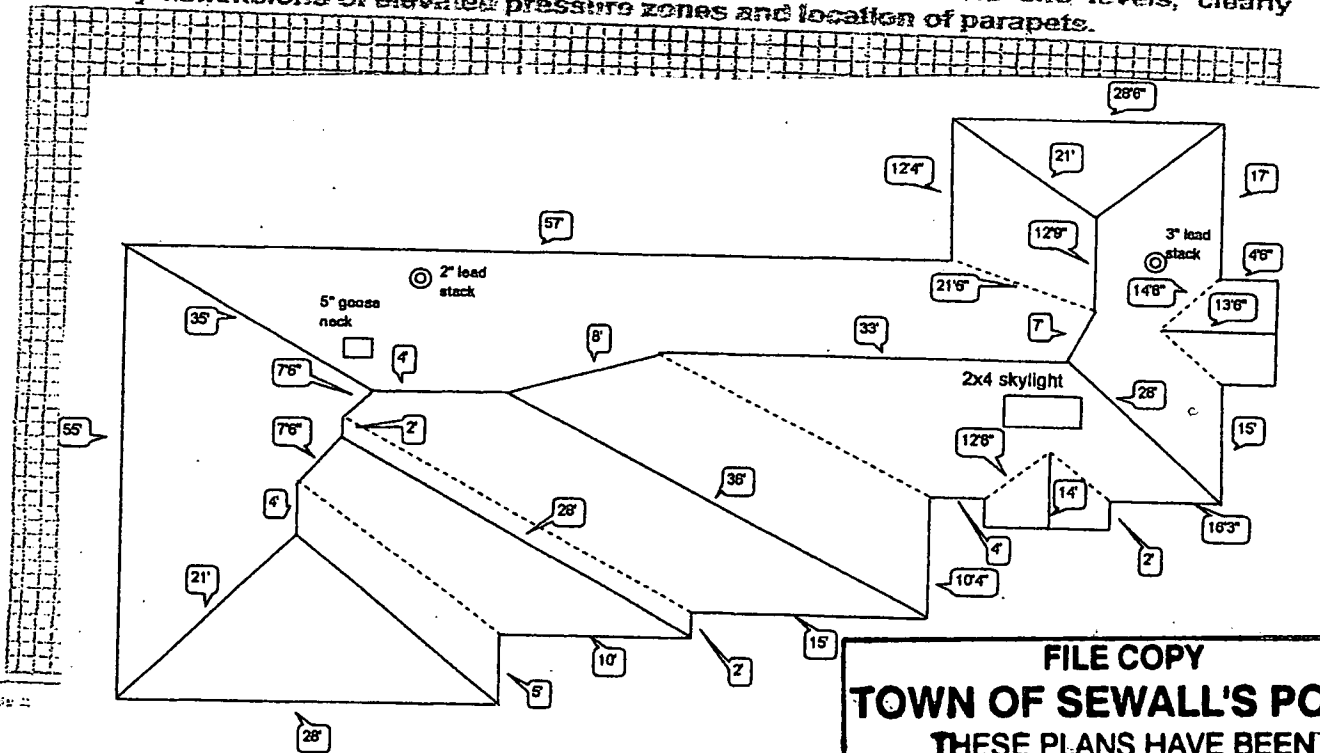
- New Roof
 Re-Roofing
 Recovering
 Repair
 Maintenance

ROOF SYSTEM INFORMATION

Low Slope Roof Area (SF) _____ Steep Sloped Roof Area (SF) 5400 Total (SF) 5400

Section B (Roof Plan)

Sketch Roof Plan: Illustrate all levels and sections, roof drains, scuppers, overflow scuppers and overflow drains. Include dimensions of sections and levels, clearly identify dimensions of elevated pressure zones and location of parapets.



*PULL TEST REQUIRED
 SEE TILE PRODUCT APPROVAL*

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 11.3.08

BUILDING OFFICIAL

HOME IMPROVEMENT CONTRACT

Branch Name: Miami Date: 7-28-05

Sold, Furnished and Installed by:

THD At-Home Services, Inc.
d/b/a The Home Depot At-Home Services

1250 Linton Blvd, Delray Beach, FL 33444

(561) 742-1567 Fax: (561) 742-1568

FL Lic # CGC1506093, CRC058500, CCC1325818

Branch Number: 60
RECEIVED
AUG 2 2005

Job #: 1768821

JUL 29 2005

BY: [Signature] Installation Address: 8 OAKWOOD DRIVE, STUART BY: FL 34996
City State Zip

Purchaser(s): <u>ELIZABETH WILKINSON</u>	Driver's Lic. # & Exp. Date: <u>KFL W425-233-51-792-0</u>	Work Phone: <u>(772) 286-1851</u>	Home Phone: <u>(772) 287-3300</u>
		()	()

Home Address: _____
(If different from Installation Address) City State Zip

Project Information: I/We/You ("Purchaser"), the owners of the property located at the above installation address, offer to contract with Home Depot U.S.A., Inc. ("Home Depot") to furnish, deliver and arrange for the installation of all materials as described on the attached Spec Sheet # 1768821/218846 incorporated herein by reference and made a part hereof.
Job #

Home Depot reserves the right to cancel this contract if, upon re-inspection of the job, Home Depot determines that it cannot perform its obligations due to a structural problem with the home or because work required to complete the job was not included in the contract.

DEPOSIT PAYMENT OPTIONS
(Subject to fund verification and/or credit approval.)

- Check, Cashiers Check or US Postal Service Money Order (Made payable to The Home Depot).
- Credit Card* and/or other payment options - Circle One Below
 Visa MasterCard Discover American Express
 The Home Depot Home Improvement Loan The Home Depot Credit Card
 Available Credit: \$22,500 (HIL & HDCC ONLY)
 Acct#: 6035 3206 7899 6685 Exp. Date: _____
 Name as it appears on card: ELIZABETH WILKINSON
 *By my/our signature below I/we agree to allow Home Depot to charge the above referenced credit card for the deposit indicated.
[Signature] 7-28-05
 Cardholder's Signature Date

CONTRACT AMOUNT	\$ <u>22,215.-</u>
*LESS DEPOSIT	\$ <u>8054.00</u>
BALANCE DUE ON COMPLETION	\$ <u>24,161.-</u>

*Minimum 25% of Contract Amount due upon execution of this contract.

Indicate Payment Method For BALANCE DUE ON COMPLETION:
CUSTOMER CHECK

HIL or HDCC Authorization Codes	
Deposit	Final Payment
# <u>028075</u>	#

Purchaser agrees that, immediately upon satisfactory completion of the work, Purchaser will execute a Completion Certificate and pay any balance due. Purchaser also agrees to be jointly and severally obligated and liable hereunder.

Entire Agreement: This agreement and its attachments, including any financing agreement, contain the complete agreement between the parties and can not be amended or modified unless in writing in a separate agreement signed by both parties.

NOTICE TO PURCHASER

Do not sign this contract before you read it. You are entitled to a completely filled-in copy of the contract at the time you sign. Keep it to protect your rights. Do not sign any Completion Certificate or agreement stating that you are satisfied with the entire project before this project is complete. Law prohibits home repair contractors from requesting or accepting a Completion Certificate signed by the owner prior to the actual completion of the work to be performed under the contract.

You may cancel this transaction at any time prior to midnight of the third business day after the date of this contract. See Notice of Cancellation for an explanation of this right. There will be a service charge equal to 25% of the contract amount if the job is cancelled by Purchaser AFTER the third business day.

BY MY/OUR SIGNATURE BELOW, I/WE AGREE TO BE BOUND BY THE TERMS OF THIS CONTRACT. I/WE ACKNOWLEDGE RECEIPT OF A COPY OF THIS CONTRACT AND TWO COMPLETED COPIES OF THE NOTICE OF CANCELLATION.

BY MY/OUR SIGNATURE BELOW, I/WE UNDERSTAND THAT THE AGREEMENT IS SUBJECT TO REVIEW OF MY/OUR CREDIT HISTORY AND I/WE AUTHORIZE HOME DEPOT AUTHORIZED CONTRACTOR, TO VERIFY AND REVIEW MY/OUR CREDIT RECORD WITH AN INDEPENDENT CREDIT REPORTING AGENCY AND RELEASE THEM FROM ALL LIABILITY INCURRED FROM INADVERTENT OMISSIONS OR ERRORS.

SUBMITTED BY: Anette E. Jordan Date: 7-28-05
Sales Consultant
ACCEPTED BY: [Signature] Date: 7-28-05
Homeowner
Homeowner Date: _____

NOTICE: ADDITIONAL TERMS, CONDITIONS AND WARRANTIES ARE STATED ON THE REVERSE SIDE AND ARE PART OF THIS CONTRACT

White - Branch File Yellow - Customer Pink - Sales Consultant

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9-22-05

BUILDING PERMIT NO. 7794

Building to be erected for WILKINSON

Type of Permit PERMIT

Applied for by HOME DEPOT

(Contractor) Building Fee _____

Subdivision OAKWOOD

Lot 3

Block _____

Radon Fee _____

Address 8 OAKWOOD DRIVE

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

1338410090000003020000

Roofing Fee 120.00

Amount Paid 120.00 Check # 4839 Cash _____

Other Fees (_____) 1

Total Construction Cost \$ 32215

TOTAL Fees 120.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

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

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

INSPECTIONS

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

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

RE-ISSUED 4/11/06 #120 ⁰⁰/_{xx}

Renew @ \$120

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9-22-05

BUILDING PERMIT NO. 7794

Building to be erected for WILKINSON

Type of Permit RENOV

Applied for by HOME DEPOT

(Contractor) Building Fee _____

Subdivision OAKWOOD

Lot 3 Block _____

Radon Fee _____

Address 8 OAKWOOD DRIVE

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

Electrical Fee _____

1338410090000003020000

Plumbing Fee _____

Amount Paid 120.00 Check # 4839 Cash _____

Roofing Fee 120.00

Other Fees (_____) 1

Total Construction Cost \$ 32,215

TOTAL Fees 120.00

Signed _____

[Signature]
Applicant

Signed _____

[Signature]
Town Building Official

Reissue
New Prod App -
these expired

11/2 Home Depot
called will be in
tomorrow -



Town of Sewall's Point BUILDING PERMIT APPLICATION

Date: 8-24-05 Permit Number: _____

OWNER/TITLEHOLDER NAME: ELIZABETH WILKINS Phone (Day) 772-286-1851 (Fax) _____

Job Site Address: 8 OAKWOOD DR City: STUART State: FL9 Zip: 34996

Legal Desc. Property (Subd/Lot/Block) OAKWOOD LOT 3 Parcel Number: 133841009000000302

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

Description of Work To Be Done: RE ROOF

WILL OWNER BE THE CONTRACTOR?:

YES NO (NO is circled)

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 32,215.-

(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: THE HOME DEPOT Phone: 954-979-2137 Fax: 954-979-3102

Street: 1250 LITTON BLVD City: DELREY BCH State: FL Zip: 33444

State Registration Number: LLL1325818 State Certification Number: _____ Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

Electrical: N/A State: _____ License Number: _____
Mechanical: N/A State: _____ License Number: _____
Plumbing: N/A State: _____ License Number: _____
Roofing: _____ State: _____ License Number: _____

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____
Carport: _____ Total Under Roof 5406 Wood Deck: _____ Accessory Building: _____

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

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

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

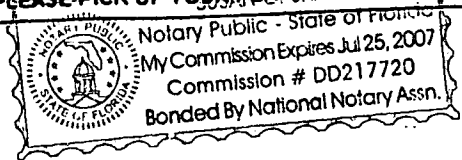
OWNER OR AGENT SIGNATURE (required)
State of Florida, County of: _____
This the 16 day of Aug 2005
by ELIZABETH WILKINS who is personally known to me or produced as identification.

CONTRACTOR SIGNATURE (required)
On State of Florida, County of: Hillsborough
This the 16 day of Aug 2005
by [Signature] who is personally known to me or produced as identification.

My Commission Expires: _____
Notary Public - State of Florida
My Commission Expires Jun 5, 2009
Commission # DD 436152

My Commission Expires: 7-25-07
Notary Public
Seal

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



RE-ISSUED 4/11/06 #120 ⁰⁰/_{XX}
 Renew: 9/22/06 - 9/22/07 - \$120 - Pd 11/3/06 CK # 7450
 MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 9-22-05 BUILDING PERMIT NO. 7794

Building to be erected for WILKINSON Type of Permit PERMIT

Applied for by HOME DEPOT (Contractor) Building Fee _____

Subdivision OAKWOOD Lot 3 Block _____ Radon Fee _____

Address 8 OAKWOOD DRIVE Impact Fee _____

Type of structure SFR A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

1338410090000003020000 Plumbing Fee _____

Amount Paid 120.00 Check # 4839 Cash _____ Other Fees (_____) 1

Total Construction Cost \$ 32,215 TOTAL Fees 120.00

Signed [Signature] Applicant Signed [Signature] Town Building Official

PERMIT

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

INSPECTIONS

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

7794

REROOF

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri JULY 20, 2005 Page 1 of 3

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7622	WILKINSON	STORM PANELS	FAIL	PER DISCUSSION ABOUT FASTENERS
3	8 OAKWOOD DR O/B	* FIRST PLEASE *	PASS	CLOSE INSPECTOR: <i>OW</i>
7686	DOBNEY	DEY-IN	PASS	
1	96 S. SEWALLS DR A&P CONST.			INSPECTOR: <i>OW</i>
7252	KINARD	FINAL REPAIR SEAWALL	PASS	CLOSE
4	5 TIMOR ST WILCO CONSTR			INSPECTOR: <i>OW</i>
7128	BRUNER	FINAL GAS TANK + LINES	PASS	CLOSE
2	19 RIVERVIEW DR FERREN GAS			INSPECTOR: <i>OW</i>
6903	BRUNER	FINAL FENCE REPAIR	PASS	CLOSE
2	19 RIVERVIEW DR O/B			INSPECTOR: <i>OW</i>
7161	BRUNER	FINAL KITCHEN REMODEL	FAIL	
2	19 RIVERVIEW DR O/B			INSPECTOR: <i>OW</i>
7459	BRUNER	FINAL GENERATOR & ELECTRIC	PASS	CLOSE
2	19 RIVERVIEW DR O/B			INSPECTOR: <i>OW</i>

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri JULY 20, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7622	WILKINSON	STORM DRAIN	FAIL	PER DISCUSSION
3	8 ORWOOD DR		PASS	W/PAVEL INSTALLER
	O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7686	DOBNEY	DEY-IN	PASS	
1	96 S. SEWALLS DR			INSPECTOR: <i>[Signature]</i>
	A&P CONST			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7252	KINARD	FINAL REPAIR	PASS	CLOSE
4	5 TIMOR ST	SEAWALL		
	WILCO CONST			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7128	BRUNER	FINAL GAS	PASS	CLOSE
2	19 RIVERVIEW DR	TANK+LINES		
	FERRER GAS			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6903	BRUNER	FINAL FENCE	PASS	CLOSE
2	19 RIVERVIEW DR	REPAIR		
	O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7161	BRUNER	FINAL KITCHEN	FAIL	
2	19 RIVERVIEW DR	REMODEL		
	O/B			INSPECTOR: <i>[Signature]</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7459	BRUNER	FINAL GENERATOR	PASS	CLOSE
2	19 RIVERVIEW DR	ELECTRIC		
	O/B			INSPECTOR: <i>[Signature]</i>

OTHER: _____

COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

T# _____

Parcel ID # 1338410090000003020000
TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF Martin

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

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

OAKWOOD LOT 3 8 OAKWOOD DR Stuart FL

GENERAL DESCRIPTION OF IMPROVEMENT: Shutters / hurricane window treatment

OWNER: Elizabeth M Wilkinson

ADDRESS: 8 OAKWOOD DR Stuart FL 34996

PHONE #: 287-3300 FAX #: 287 554

CONTRACTOR: self

ADDRESS: _____

PHONE #: _____ FAX #: _____

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

NAME: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

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

PHONE #: _____ FAX #: _____

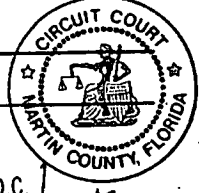
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 10th DAY OF June 2005 BY Elizabeth Mayer Wilkinson

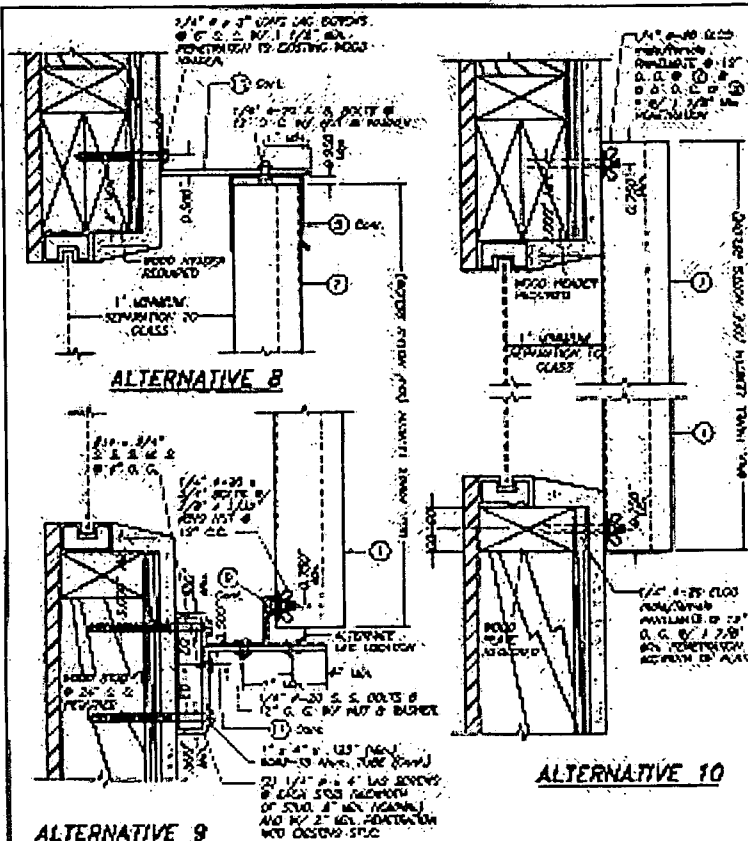
[Signature]
NOTARY SIGNATURE

PERSONALLY KNOWN
PRODUCED ID W425-233-51-792-20
TYPE OF ID FLD x 8/12/09



THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
BY: [Signature] D.C.
DATE: 6/20/05

INSTR # 1848738 OR BK 02026 PG 1747 RECD 06/20/2005 10:11:58 AM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK L. Hood



ALTERNATIVE 8

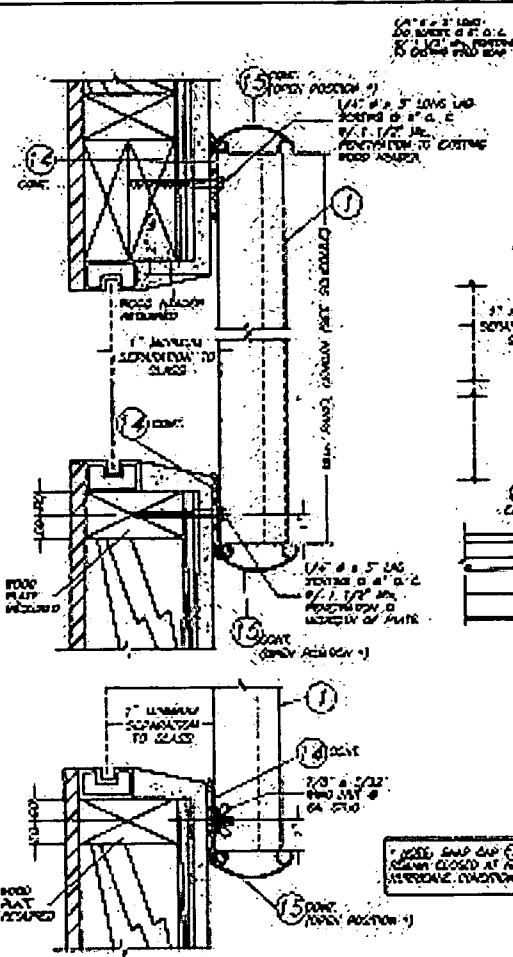
ALTERNATIVE 10

ALTERNATIVE 9

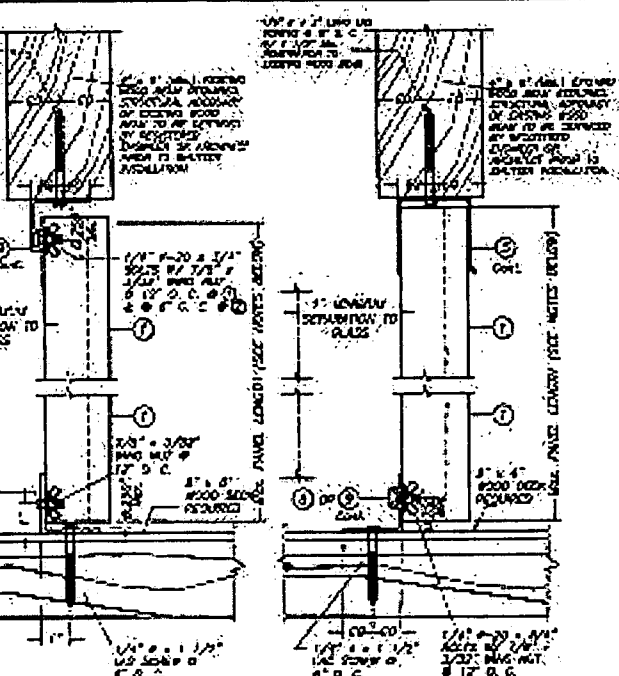
WALL MOUNTING INSTALLATIONS
SECTIONS A

NOTE FOR CONSTRUCTION OF SECTIONS
ROOF/WALL/CEILING MOUNTING SECTIONS CAN BE
CONSTRUCTED IN ANY WAY TO SUIT ANY INSTALLATION.

- NOTES
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS UP TO 165.0
= 72.0 psf AND PANELS LENGTHS UP TO 8'-0".
 2. FOR WOOD FRAME CONSTRUCTION, WOODS RELATIVE TO BE SUBSEQUENT
PART NO. 9, W/ SPECIFIC DENSITY OF 0.65 OR EQUAL.



SECTION @ STUD TYP, TOP/BOTTOM
ALTERNATIVE 11

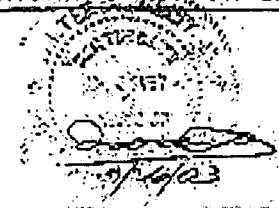


ALTERNATIVE 1

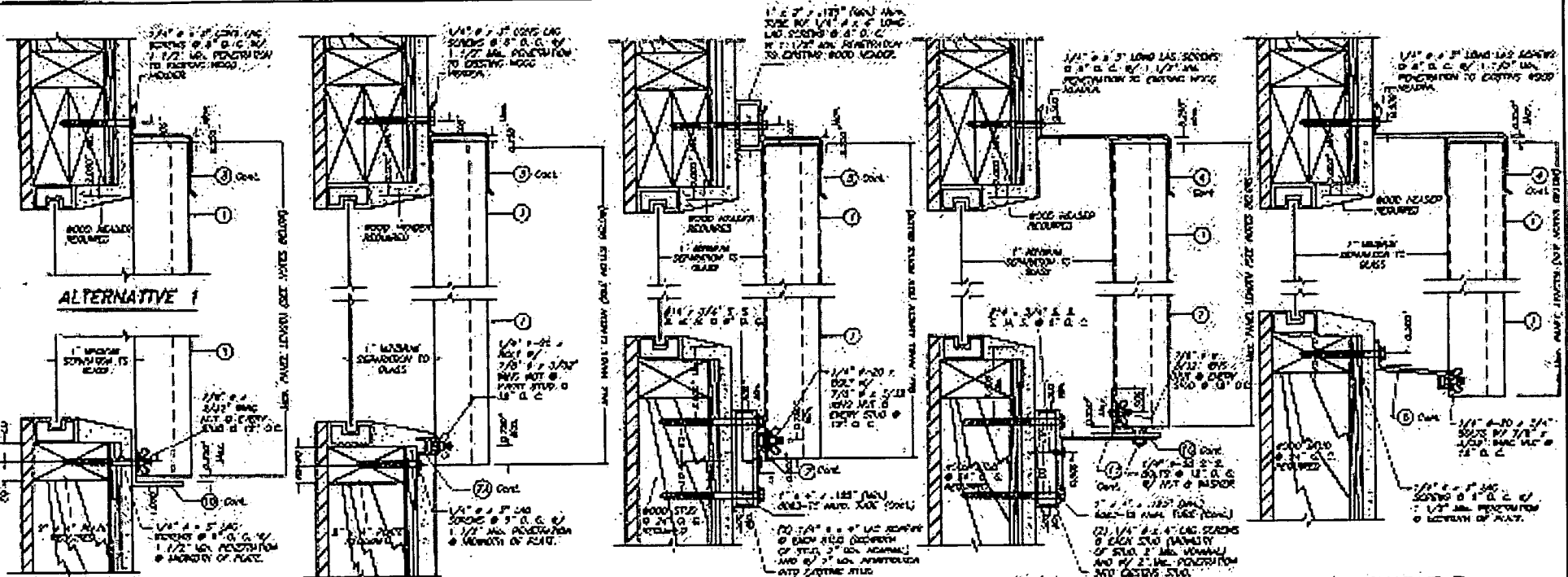
ALTERNATIVE 2

CEILING & FLOOR MOUNTING INSTALLATIONS
SECTIONS B

INSTALLATION-DETAILS, ON EXISTING WOOD BUILDINGS



	D.056" BERTHO ALUMINUM STORM PANEL	AS SHOWN
	EASTERN METAL SUPPLY, INC. 4345 WEST WOOD DRIVE WINTER BUCKLE, VA 22187	
EASTERN METAL SUPPLY, INC. 4345 WEST WOOD DRIVE WINTER BUCKLE, VA 22187	ORDER NO. _____ QUANTITY _____ DATE _____	EASTERN METAL SUPPLY, INC. 03-053 DRAWING NO. _____ SHEET 3 OF 3



ALTERNATIVE 1

ALTERNATIVE 2

ALTERNATIVE 4

ALTERNATIVE 5

ALTERNATIVE 6

ALTERNATIVE 7

WALL MOUNTING INSTALLATIONS
SECTIONS A

SCALE: 1/4" = 1'

INSTALLATION DETAILS ON
EXISTING WOOD BUILDINGS

- NOTES:
1. INSTALLATIONS ARE ONLY VALID FOR DESIGN WIND LOADS UP TO 40 PSF - 72.4 mph AND PANEL LENGTHS UP TO 8'-0".
 2. FOR WOOD FRAME CONSTRUCTION, WOOD MEMBERS TO BE SOUTHERN PINE No. 2, @ SPACING INTERVALS OF 16" O.C.

DO NOT FOR CONSTRUCTION OF SYSTEMS.
WALL MOUNTING SECTIONS CAN BE COMBINED.
IN ANY WAY TO SAT. ANY INSTALLATIONS.

Signature
9/24/82

TILECO INC.
1001 PLYMOUTH ST. DEPT. 100
ANN ARBOR, MI 48106
TEL: 313-769-1100
FAX: 313-769-1101

0.050" PERFOR ALUMINUM STORM PANEL		AS SHOWN DATE
EASTERN METAL SUPPLY, INC.		1/1/82
2500 WEST HARRIS BLVD.		02-053
MARTIN ROAD, FL 32907		REVISED BY
DATE	BY	APP. BY

F.B.C./M.A.A.V.C.Z.
DRAWING NO. 02-053
REVISED BY

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

C. D. = EDGE DISTANCE

MAXIMUM ANCHOR SPACING (SEE NOTE #1)	MINIMUM ANCHOR SPACING FOR C. D. = 3 1/2" **										APPLICABLE TO SECTIONS 7 & 8 OF ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH (SEE NOTE #2)
	SPACING		Z-ANCHOR (SEE NOTE #3)		CAL-M		ANCHORITE		OF DR-500†			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+21.0 -40.0 TO +55.0 -60.0	18"	-	12"	-	12"	-	12"	-	12"	-	1 (TOP)	0'-0" OR LESS
	18"	2"	12"	5"	12"	5"	12"	5"	12"	5"	1 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	2 (TOP)	
	18"	4"	12"	10"	12"	5"	12"	10"	12"	5"	2 (BOTTOM)	
	18"	6"	12"	10"	12"	5"	12"	10"	12"	5"	2 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	3 & 4 (TOP)	
	18"	6"	12"	10"	12"	5"	12"	10"	12"	5"	3 (BOTTOM)	
	18"	6"	12"	10"	12"	5"	12"	10"	12"	5"	4 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	5 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	5 (BOTTOM)	
+55.0 -60.0 TO +75.0 -80.0	18"	-	12"	-	12"	-	12"	-	12"	-	6 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	6 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	7 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	7 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	8 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	8 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	9 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	9 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	10 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	10 (BOTTOM)	
+75.0 -80.0 TO +95.0 -100.0	18"	-	12"	-	12"	-	12"	-	12"	-	11 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	11 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	12 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	12 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	13 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	13 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	14 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	14 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	15 (TOP)	
	18"	8"	12"	10"	12"	5"	12"	10"	12"	5"	15 (BOTTOM)	

MAXIMUM ANCHOR SPACING (SEE NOTE #1)	MINIMUM ANCHOR SPACING FOR C. D. = 3 1/2" **										APPLICABLE TO SECTIONS 7 & 8 OF ANY COMBINATION OF THEM	MAXIMUM PANEL LENGTH (SEE NOTE #2)
	SPACING		Z-ANCHOR (SEE NOTE #3)		CAL-M		ANCHORITE		OF DR-500†			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+55.0 -60.0 TO +75.0 -80.0	18"	-	12"	-	12"	-	12"	-	12"	-	1 (TOP)	0'-0" OR LESS
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	1 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	2 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	2 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	3 & 4 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	3 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	5 & 6 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	5 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	7 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	7 (BOTTOM)	
+75.0 -80.0 TO +95.0 -100.0	18"	-	12"	-	12"	-	12"	-	12"	-	8 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	8 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	9 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	9 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	10 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	10 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	11 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	11 (BOTTOM)	
	18"	-	12"	-	12"	-	12"	-	12"	-	12 (TOP)	
	18"	2"	12"	10"	12"	5"	12"	10"	12"	5"	12 (BOTTOM)	

- + ONLY WOOD ANCHORS ALLOWED FOR WINDING SYSTEMS
- + † ANCHOR SPACING MAY VARY FROM 1/4" TO 1" FOR WINDING SYSTEMS
- * SEE SHEET # 2 & 3 OF 4 FOR ANCHOR TYPE & SPACING FOR INSTALLATIONS INTO MASONRY STRUCTURES
- ** MINIMUM ANCHOR SPACING IS 3 1/2" FOR 3 1/2" EDGE DISTANCE
- † FOR C. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING SCHEDULE ON BASIS OF THE FOLLOWING EQUATION:
- (NO. C. D. / 3.5) * (ANCHOR TYPE & SPACING SCHEDULE) = 3 1/2"

ACTUAL C. D.	FACTOR		
	Z-ANCHOR (SEE NOTE #3) / ANCHORITE	CAL-M	OF DR-500†
3"	1.25	1.25	1.25
2 1/2"	1.1	1.1	1.1
2"	1.0	1.0	1.0



		EASTERN METAL SUPPLY, INC. 4201 W. 13th Ave. MIAMI, FL 33155		F.B.C. (P.N.A. 1976)
TILECO INC. 1100 N. W. 13th St. MIAMI, FL 33136	EASTERN METAL SUPPLY, INC. 4201 W. 13th Ave. MIAMI, FL 33155	SHEET # OF #	DATE:	02-053

MAXIMUM DESIGN PRESSURE RATING "W" (P.S.F.) AND CORRESPONDING MAXIMUM ANCHOR SPACING SCHEDULE FOR INSTALLATIONS INTO CONCRETE AND CONCRETE BLOCK STRUCTURES *

E. D. = EDGE DISTANCE

MAXIMUM DESIGN LOAD "W" (P.S.F.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" #										APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM ANCHOR LENGTH "L" (IN.)
	DIVISION		ELECTRICALLY RES. W/ STAINLESS		GALV-N		RINGS/CLIPS		OF DR-OVER			
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY		
+35.0 -40.0 OR 1000	12"	-	12"	-	12"	-	12"	-	12"	-	1	12'-0" TO 12'-6"
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	1	
	12"	-	12"	-	12"	-	12"	-	12"	-	2	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	2	
	12"	-	12"	-	12"	-	12"	-	12"	-	2A	
	12"	-	12"	-	12"	-	12"	-	12"	-	2A & 4	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	3	
	12"	-	12"	-	12"	-	12"	-	12"	-	3	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	3	
	12"	-	12"	-	12"	-	12"	-	12"	-	3 & 4	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	4	
	12"	-	12"	-	12"	-	12"	-	12"	-	4	
	12"	10"	12"	12"	12"	8"	12"	12"	12"	10 1/2"	5	
	12"	-	12"	-	12"	-	12"	-	12"	-	5	
+22.0 -25.0 OR 600	12"	-	12"	-	12"	-	12"	-	12"	-	1	12'-0" TO 12'-6"
	12"	8"	12"	12"	12"	8"	12"	12"	12"	8 1/2"	1	
	12"	-	12"	-	12"	-	12"	-	12"	-	2	
	12"	8"	12"	12"	12"	8"	12"	12"	12"	8 1/2"	2	
	12"	-	12"	-	12"	-	12"	-	12"	-	2A	
	12"	-	12"	-	12"	-	12"	-	12"	-	2A & 4	
	12"	8"	12"	12"	12"	8"	12"	12"	12"	8 1/2"	3	
	12"	-	12"	-	12"	-	12"	-	12"	-	3	
	12"	8"	12"	12"	12"	8"	12"	12"	12"	8 1/2"	3	
	12"	-	12"	-	12"	-	12"	-	12"	-	3 & 4	
	12"	8"	12"	12"	12"	8"	12"	12"	12"	8 1/2"	4	
	12"	-	12"	-	12"	-	12"	-	12"	-	4	
	12"	8"	12"	12"	12"	8"	12"	12"	12"	8 1/2"	5	
	12"	-	12"	-	12"	-	12"	-	12"	-	5	
12"	-	12"	-	12"	-	12"	-	12"	-	5		

MAXIMUM DESIGN LOAD "W" (P.S.F.)	MAXIMUM ANCHOR SPACING FOR E. D. = 3 1/2" #										APPLICABLE TO SECTIONS # & ANY COMBINATION OF THEM	MAXIMUM ANCHOR LENGTH "L" (IN.)	
	DIVISION		ELECTRICALLY RES. W/ STAINLESS		GALV-N		RINGS/CLIPS		OF DR-OVER				
	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY	TO CONCRETE	TO MASONRY			
+35.0 -40.0 OR 1000	12"	-	12"	-	12"	-	12"	-	12"	-	1	12'-0" TO 12'-6"	
	12"	6"	12"	12"	12"	5"	12"	12"	12"	11 1/2"	6 1/2"		1
	12"	-	12"	-	12"	-	12"	-	12"	-	2		
	12"	6"	12"	12"	12"	5"	12"	12"	12"	11 1/2"	6 1/2"		2
	12"	-	12"	-	12"	-	12"	-	12"	-	2A		
	12"	-	12"	-	12"	-	12"	-	12"	-	2A & 4		
	12"	6"	12"	12"	12"	5"	12"	12"	12"	11 1/2"	6 1/2"		3
	12"	-	12"	-	12"	-	12"	-	12"	-	3		
	12"	6"	12"	12"	12"	5"	12"	12"	12"	11 1/2"	6 1/2"		3
	12"	-	12"	-	12"	-	12"	-	12"	-	3 & 4		
	12"	6"	12"	12"	12"	5"	12"	12"	12"	11 1/2"	6 1/2"		4
	12"	-	12"	-	12"	-	12"	-	12"	-	4		
	12"	6"	12"	12"	12"	5"	12"	12"	12"	11 1/2"	6 1/2"		5
	12"	-	12"	-	12"	-	12"	-	12"	-	5		
10"	-	12"	-	10"	-	12"	-	12"	-	6			
8"	-	12"	-	8"	-	12"	-	12"	-	6			
7"	-	12"	-	7"	-	12"	-	12"	-	7			
7"	-	12"	-	7"	-	10"	-	12"	-	7			
-	-	-	-	11"	-	12"	-	12"	-	8			

- + ONLY BRASS ANCHORS ALLOWED FOR MOUNTING SECTION 3.
- + ANCHORS STRONG ONLY VALID FOR RED HEAD STAINLESS ANCHORS.
- * SEE SHEET # 6 OF # 8 FOR ANCHORS THAT A SPACING FOR INSTALLATION W/DR. HOOD / TRANS. BALANCE.
- ** MAXIMUM ANCHOR SPACING ARE VALID FOR 3/2" EDGE DISTANCE. FOR E. D. LESS THAN 3 1/2", REDUCE ANCHOR SPACING BY MULTIPLYING SPACING GIVEN ON BASELINE BY THE FOLLOWING FACTORS: SEE E. D. FOR GALV-N ANCHORS & CLOS. FACILITY IS 2 1/2".

ACTUAL E. D.	FACTOR		
	EMERGENCY MOUNTING AND ALL STAINLESS ANCHORS	GALV-N	OF DR-OVER
3"	.83	.75	1.00
2 1/2"	.71	.60	.80
5"	.88	-	-

TILECO Inc.
 NEW TESTING & ENGINEERING DIVISION
 100 W. PARKWAY, SUITE 100, DALLAS, TX 75241
 (214) 343-1111
 6500 A. W. J. P. C.
 MEMPHIS, TN 38117

0.050" BERTH ALUMINUM SPONGE PANEL

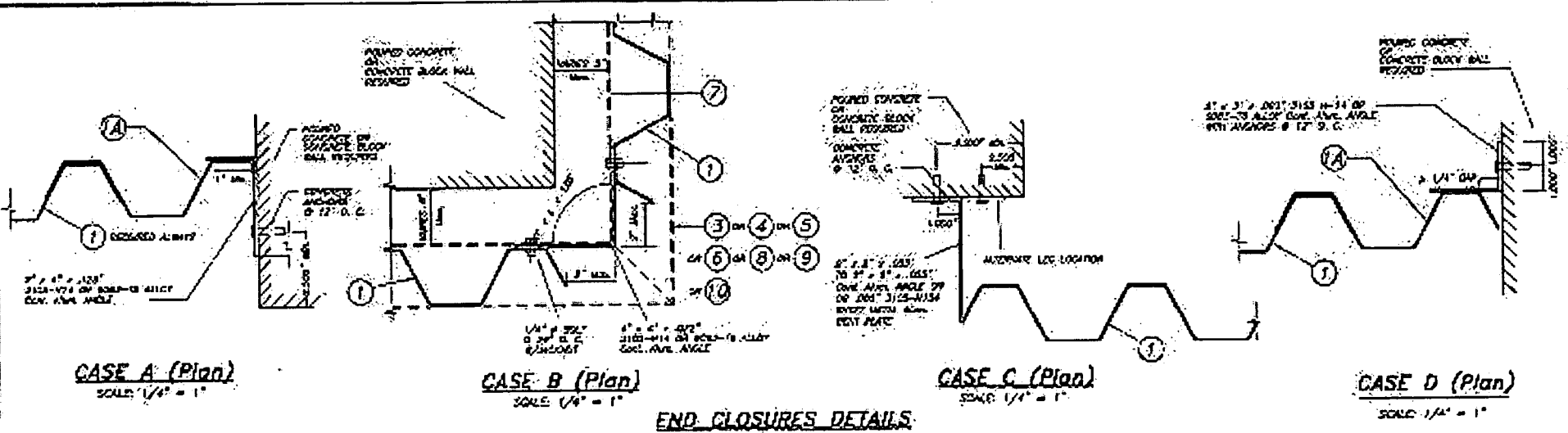
EASTERN METAL SUPPLY, INC.
 624 WEST BRIDGE DRIVE
 MIAMI BEACH, FL 33137

NO. IN STOCK	ORDER	PRICE	QTY. S.	TOTAL	TAX
1	1	1.00		1.00	

12-053
 02-053
 02-053
 02-053

0.050" (BULK) (12)

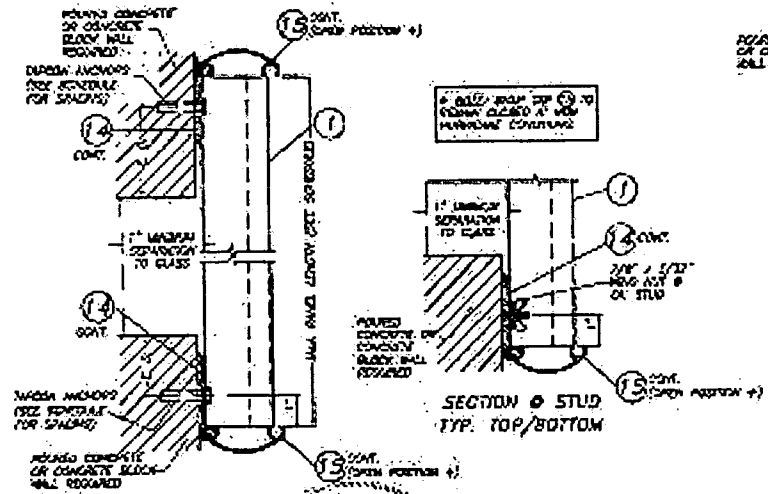
DATE: 8 OF 8



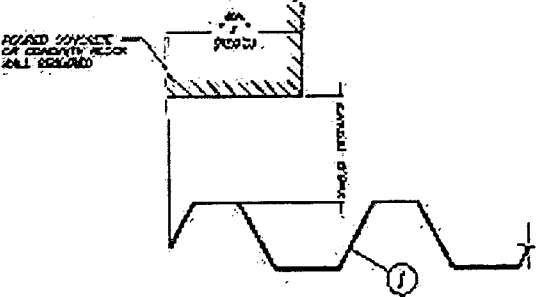
END CLOSURES DETAILS

MAXIMUM DESIGN PRESSURE RATING "W" (D.S.L.) AND CORRESPONDING MAXIMUM PANEL LENGTH "L" SCHEDULE FOR A GIVEN PANEL SYSTEM

WINDWALL DESIGN PRESSURE RATING "W" (D.S.L.)	MAX. PANEL LENGTH "L" (D.S.L.)		
	WINDWALL RFD 1" HEADS (1)	WINDWALL RFD 1" HEADS (2)	WALL MOUNTING RFD 1 1/2" & (2)
+30.0 -30.0	12'-7 1/2"	17'-1 1/2"	12'-11"
+30.0 -35.0	12'-11"	19'-7 1/2"	17'-11"
+35.0 -40.0	12'-0"	17'-0"	12'-0"
+40.0 -45.0	11'-2 1/2"	11'-2 1/2"	11'-5"
+45.0 -50.0	10'-7"	10'-4"	10'-7"
+50.0 -55.0	10'-0"	8'-6"	10'-0"
+55.0 -60.0	8'-2 1/2"	8'-6"	8'-7"
+60.0 -65.0	8'-2"	7'-9"	8'-2"
+65.0 -70.0	8'-2"	7'-2"	8'-9"
+70.0 -75.0	8'-5"	6'-8"	8'-6"
+75.0 -80.0	8'-2"	6'-3"	8'-9"



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



CASE E (Plan) *
SCALE: 1/4" = 1"

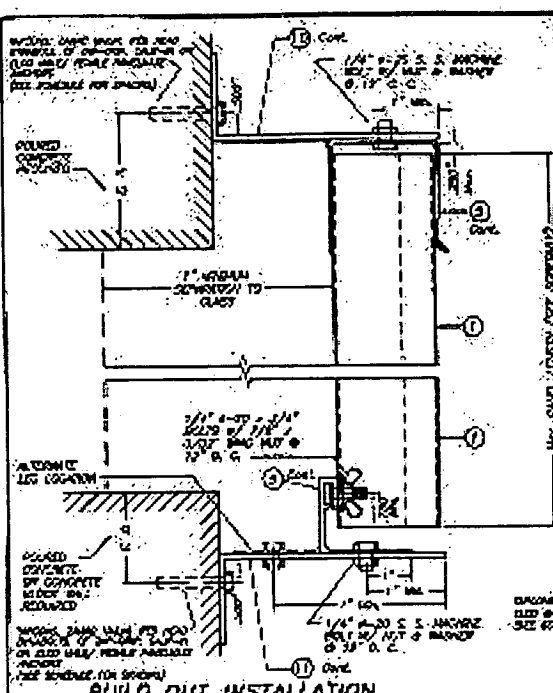
* ALL INSTALLATION PERFORMED WITH THE FOLLOWING NOTES: SHALL SECURE PANEL LENGTH BY 20% AT END OF APPLICATION FROM WALLS SHOWN ON TOLERANCE BY THE SUBMITTER.

TILECO INC.
FLOORING & PARTITIONING COMPANY
1111 N. 11th St. P.O. Box 1000, Waukegan, IL 60087
TEL: 815-491-1111 FAX: 815-491-1112
E-MAIL: SALES@TILECO.COM

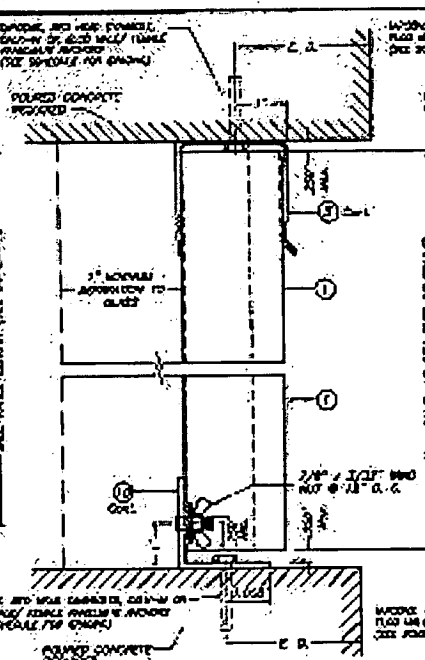
6.050" BERTHA ALUMINUM STORM PANEL
AS SHOWN SCALE
3/4" x 3/4" GUT
02-055
EASTERN METAL SUPPLY, INC.
4150 WEST 104TH STREET
CHICAGO, IL 60643
TEL: 708-439-1111 FAX: 708-439-1112

F.B.G./D.M.M./M.Z.J.
SHEET 3 OF 3

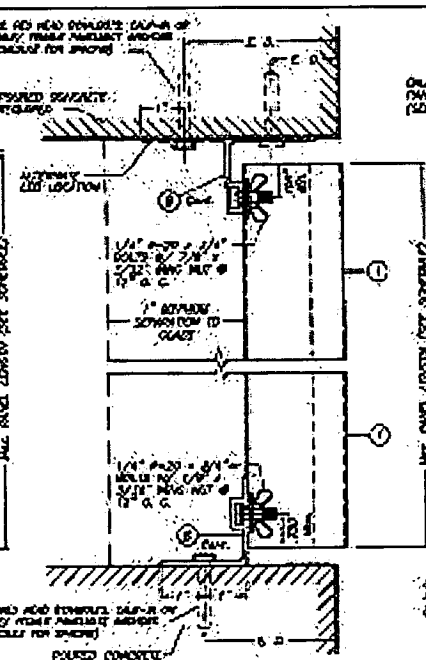
Handwritten signature and date: 11/1/13



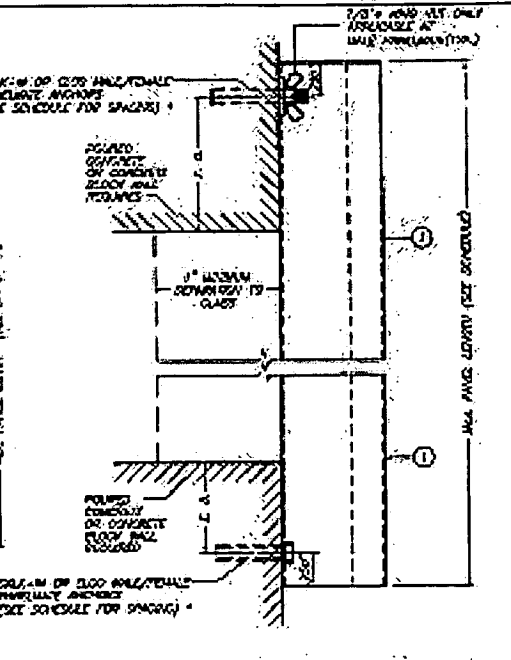
BUILD OUT INSTALLATION
- SECTION 5 SCALE: 3/8" = 1"



CEILING & FLOOR MOUNTING INSTALLATION - SECTION 6
SCALE: 3/8" = 1"

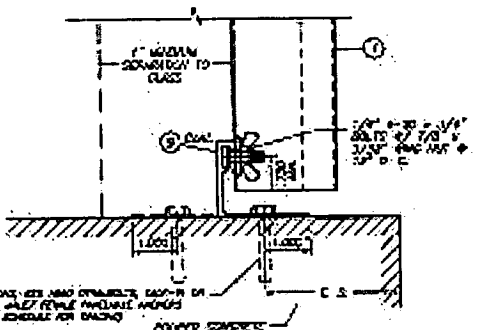


CEILING & FLOOR MOUNTING INSTALLATION - SECTION 7
SCALE: 3/8" = 1"



WALL MOUNTING INSTALLATION (D.M.) - SECTION 8
SCALE: 3/8" = 1"

- * ANCHORS USED AT ANCHORS MUST BE 1/4" X 1/2" S.S. ANCHOR BOLT OR 1/4" X 1/2" S.S. ANCHOR BOLT W/ (2) & (3).
- * S.S. ANCHOR BOLTS ARE 3/4" DIA. X 1/2" LONG. WELD ANCHORS FROM 1/2" LENGTH AS PER NOTES A2 & A3 (SHEET 1).
- * CROSS HEAD BOLTS ARE 1/2" DIA. X 1/2" LONG. WELD ANCHORS FROM 1/2" LENGTH AS PER NOTES A2 & A3 (SHEET 1).



FLOOR MOUNTING INSTALLATION - SECTION 5A SCALE: 3/8" = 1"

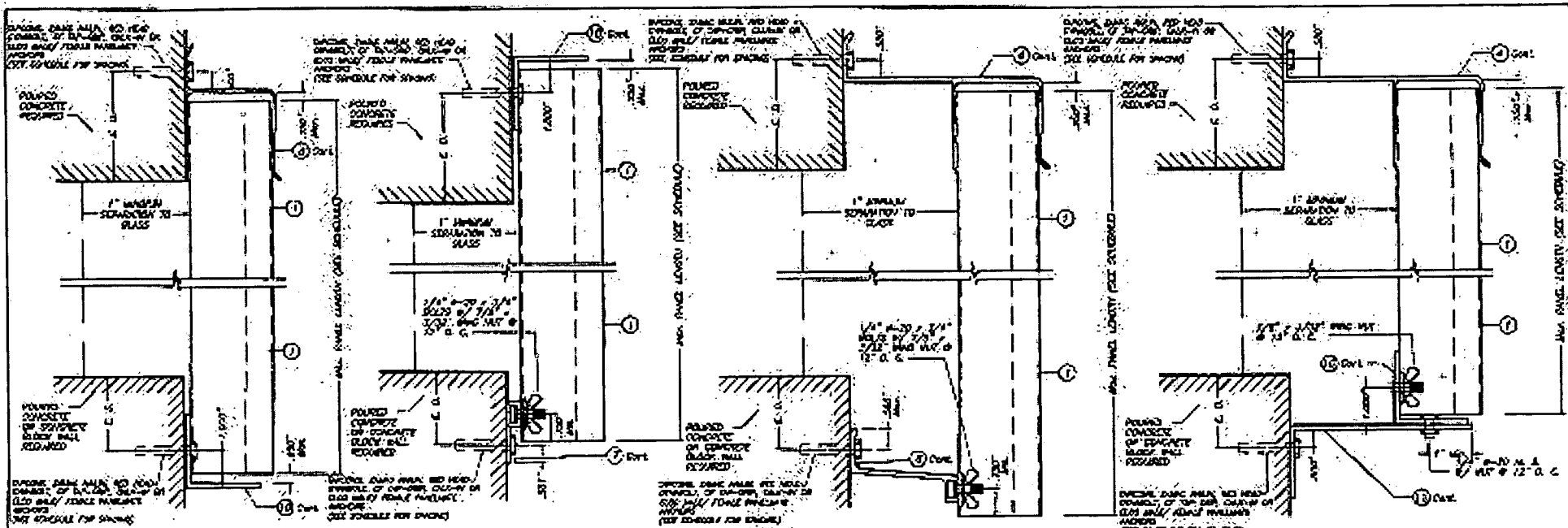
SEE SCHEDULE FOR SPACING
SEE SCHEDULE ON SHEET 6 & 7 OF 8

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

Handwritten signature and date: 9/24/03

LILICO INC.
ALUMINUM TESTING & INSTALLATION COMPANY
1400 WEST ROAD DRIVE
MARTIN, GEORGIA, U.S.A.
349-0071
FLOORING & FLOORING
FLOORING & FLOORING

0.050" BERTHUM ALUMINUM STORM PANEL					AS SHOWN
EASTERN METAL SUPPLY, INC.					DATE
4400 WEST ROAD DRIVE MARTIN, GEORGIA, U.S.A.					02-053
REV.	DESCRIPTION	DATE	BY	APPROVED BY	DATE
1					
					SHEET 4 OF 8

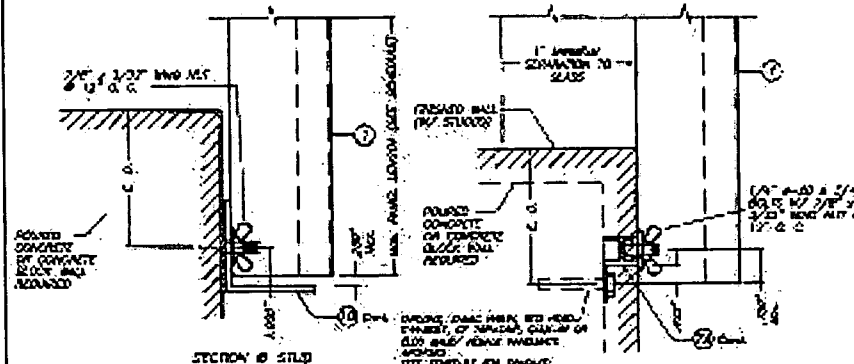


SECTION 2 (PARTIAL)

WALL MOUNTING INSTALLATION
SECTION 2 SCALE: 1/8" = 1'

BUILD OUT INSTALLATION
SECTION 3 SCALE: 3/8" = 1'

BUILD OUT INSTALLATION
SECTION 4 SCALE: 3/8" = 1'



SECTION 1 (PARTIAL)

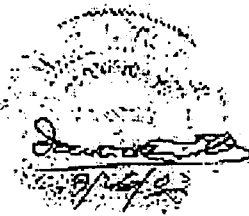
WALL MOUNTING INSTALLATION
SECTION 1 SCALE: 3/8" = 1'

WALL MOUNTING INSTALLATION
SECTION 2A SCALE: 3/8" = 1'

NOTE: DETAIL OF SECTION 1 (PARTIAL) SCALE ALSO FOR WALL MOUNTING INSTALLATION - SECTION 2 (TOP)

C.C. = EDGE DISTANCE
SEE SPECIAL OF
SECTIONS 2 & 3

NOTE FOR DETERMINATION OF SECTIONS 1
WALL/FLOOR/CEILING-MOUNTING SECTIONS CAN BE
CONFINED BY ANY MEANS TO SUIT ANY REGULATION

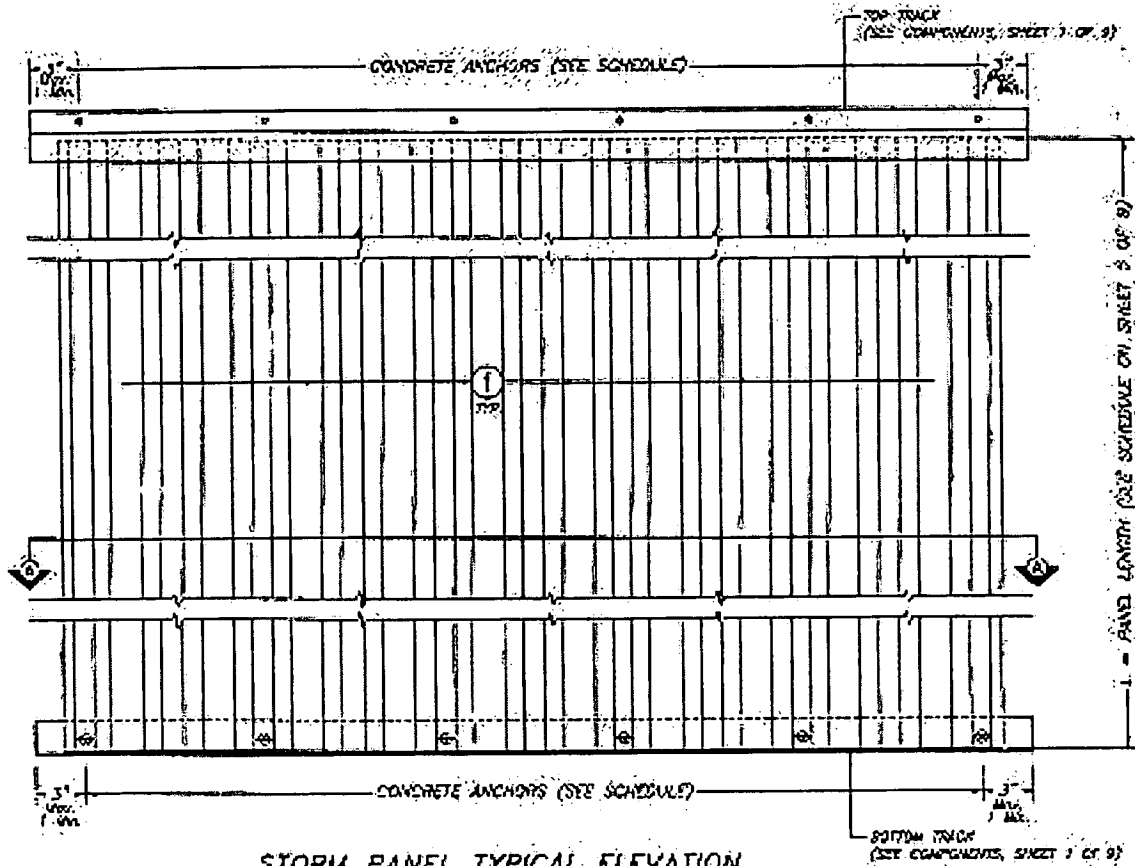


TILECO, INC.
TILECO SYSTEMS & WALLMOUNTING COMPANY
1401 W. 10th St., Ft. Lauderdale, FL 33304
PHONE: (305) 555-1234
FAX: (305) 555-5678
TELETYPE: (305) 555-9010

EASTERN METAL SUPPLY, INC.
1400 W. 10th St., Ft. Lauderdale, FL 33304
PHONE: (305) 555-1234
FAX: (305) 555-5678

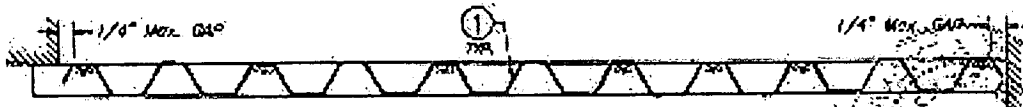
0.030" SERIES ALUMINUM STORM PANEL	12' X 60' PANEL
	JAN 81
	02-553
	02-553

F.B.C./N.M.S.C.



STORM PANEL TYPICAL ELEVATION

SCALE : 3/8" = 1"



SECTION A-A

SCALE : 1/8" = 1"

Signature
9/26/03

TILECO INC.
 TILE TESTING & CHALLENGING COMPANY
 100 W. 11th St., P.O. Box 110, Waukegan, IL 60087
 (815) 499-1111
 FAX: (815) 499-1112
 WWW.TILECO.COM

0.030" BERTH ALUMINUM STORM PANEL

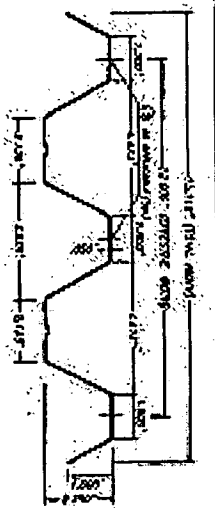
EASTERN METAL SUPPLY, INC.
 1400 WEST WASHINGTON DRIVE
 WASHINGTON, MISSISSIPPI 39292

QTY	DESCRIPTION	UNIT	AMOUNT	EXTENSION

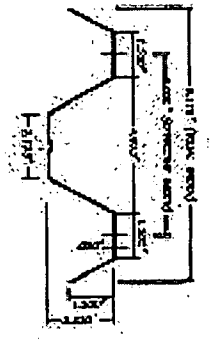
(F.B.C./REVISIONS)

19	500V
20	0412
02-053	

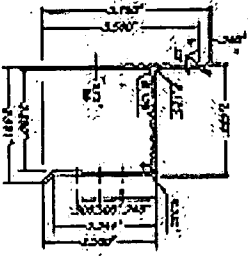
SHEET 3 OF 3



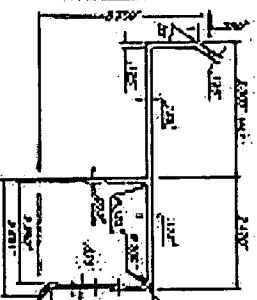
1 ALUMINUM PANEL
DETAIL 1/2\"/>



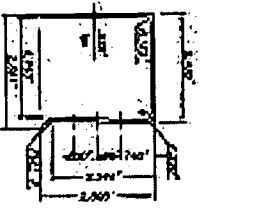
2 ALUMINUM HEAVY PANEL
DETAIL 1/2\"/>



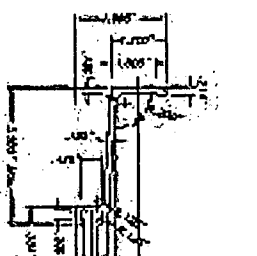
3 3\"/>



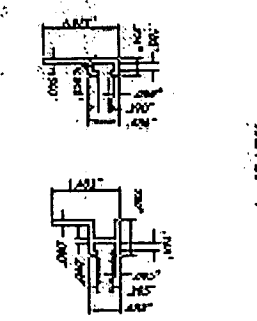
4 3\"/>



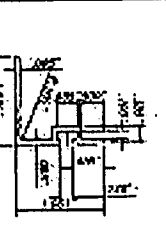
5 UP HEADER
DETAIL 1/2\"/>



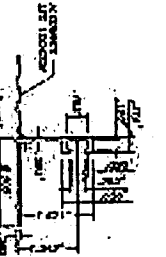
6 3\"/>



7 1 1/2\"/>



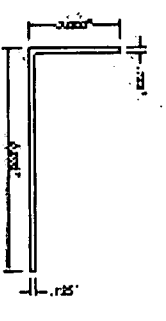
8 INVERTED 3\"/>



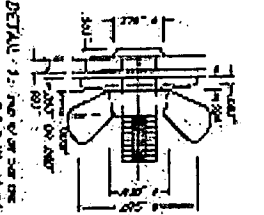
9 3\"/>



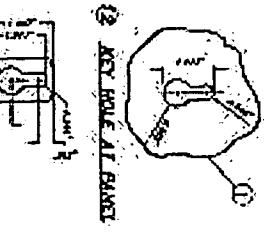
10 STANDARD ANGLE
DETAIL 1/2\"/>



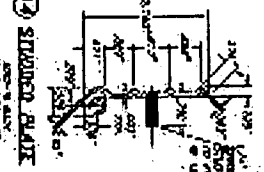
11 2\"/>



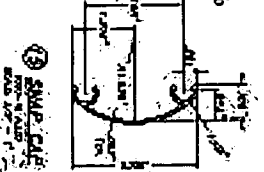
DETAIL 1/2\"/>



13 KEY HOLE AT BLIND
DETAIL 1/2\"/>



14 STANDING PLATE
DETAIL 1/2\"/>



15 SHIELD CASE
DETAIL 1/2\"/>



DETAIL 1/2\"/>

Handwritten signature and date: *9/26/61*

1. All aluminum extrusions shall be finished according to the following:

- 1.1. All aluminum extrusions shall be finished according to the following:
- 1.2. All aluminum extrusions shall be finished according to the following:
- 1.3. All aluminum extrusions shall be finished according to the following:

2. All aluminum extrusions shall be finished according to the following:

- 2.1. All aluminum extrusions shall be finished according to the following:
- 2.2. All aluminum extrusions shall be finished according to the following:
- 2.3. All aluminum extrusions shall be finished according to the following:

3. All aluminum extrusions shall be finished according to the following:

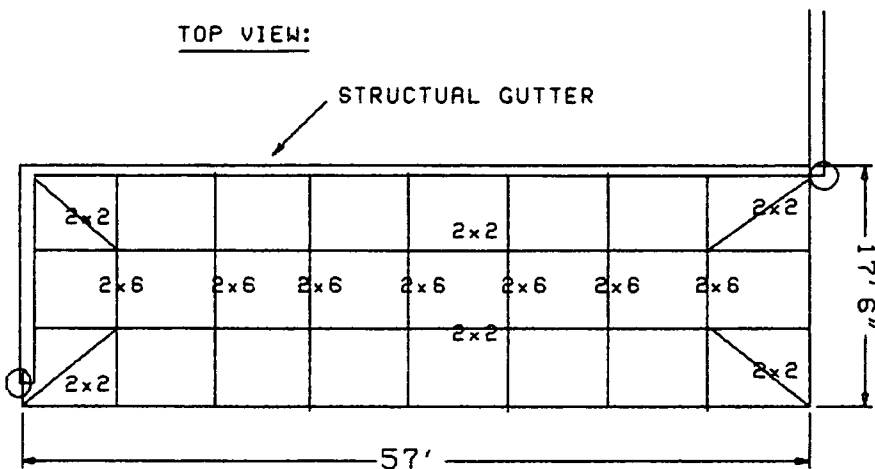
- 3.1. All aluminum extrusions shall be finished according to the following:
- 3.2. All aluminum extrusions shall be finished according to the following:
- 3.3. All aluminum extrusions shall be finished according to the following:

TILECO INC.
COMMERCIAL ROOFING PRODUCTS DIVISION
1000 W. 10TH STREET
DENVER, COLORADO 80202
TELEPHONE 333-1111

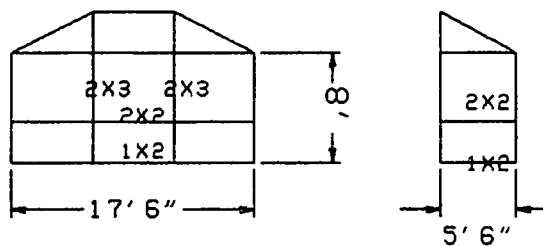
DESCRIPTION	QUANTITY	UNIT	PRICE	TOTAL

ESTIMATE NO. 08-051
DATE 9/26/61

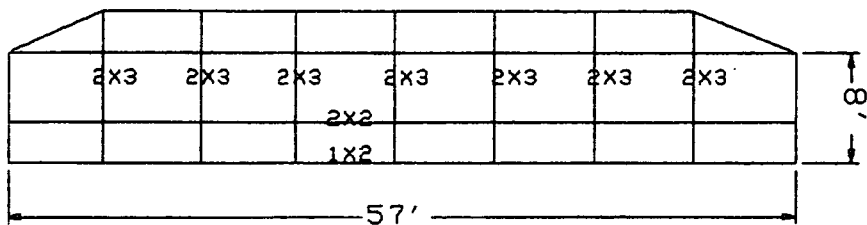
TOP VIEW:



SIDE VIEWS:

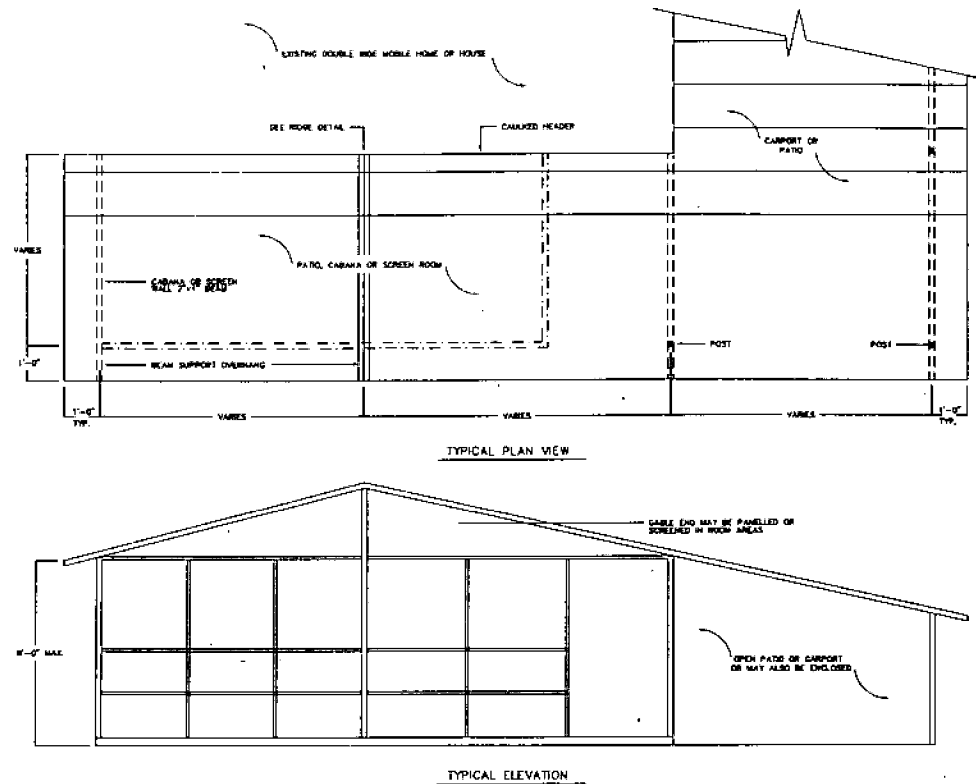


REAR VIEW:

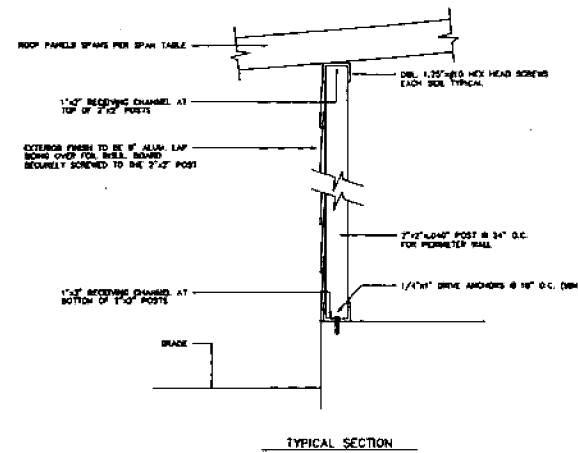


PROPOSED ADDITION:

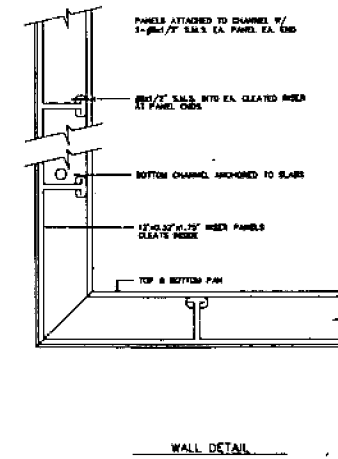
POOL ENCLOSURE	
OWNER:	288-0751
CHRIS RAMEY 8 OAKWOOD DRIVE SEWELL'S POINT	
CONTRACTOR:	SPA-00122
G&K ALUMINUM, INC. 3110 S.E. SLATER STREET STUART, FLORIDA 34997	
	283-1297



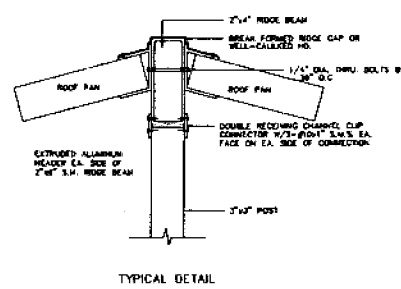
ATTACHED A-FRAME COMBINATION PATIO-CABANA OR CARPORT



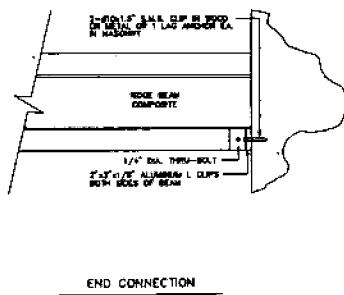
TYPICAL UTILITY ROOM



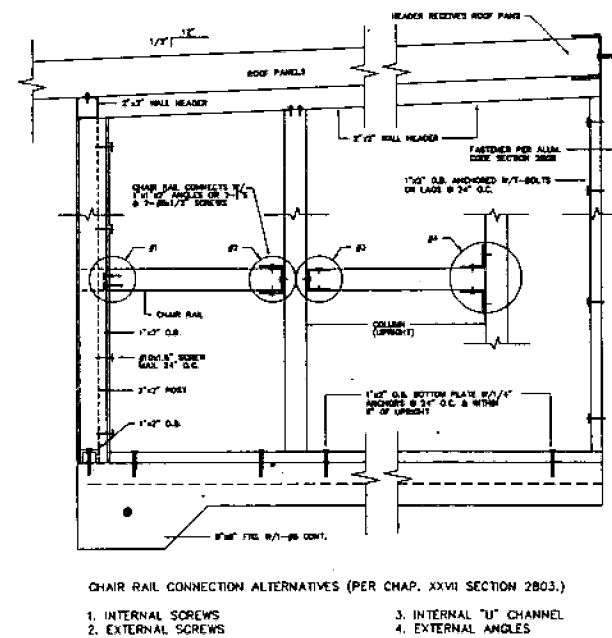
TYPICAL UTILITY ROOM



RIDGE BEAM



RIDGE BEAM



SCREEN ROOM
(WITH ALUMINUM ROOF)

DATE	BY	DESCRIPTION

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

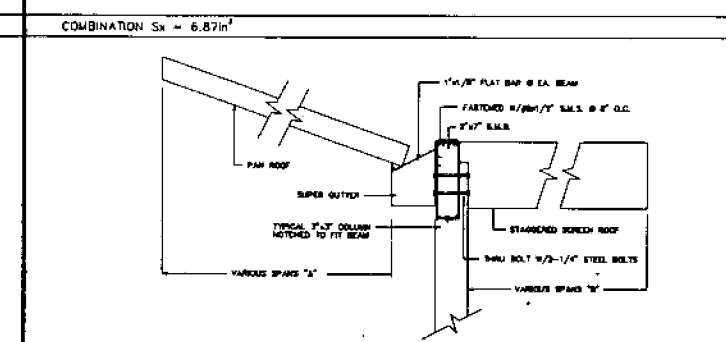
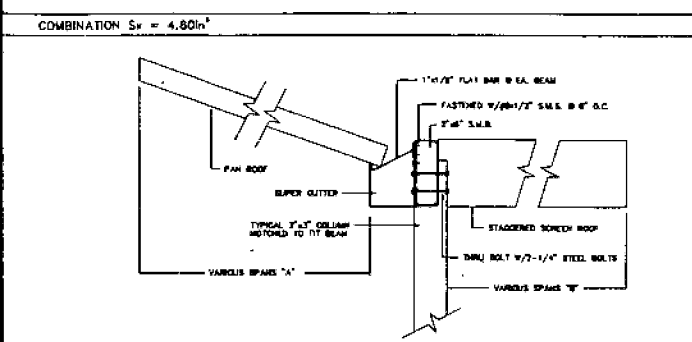
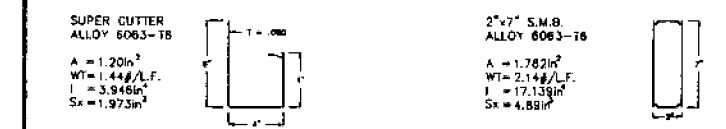
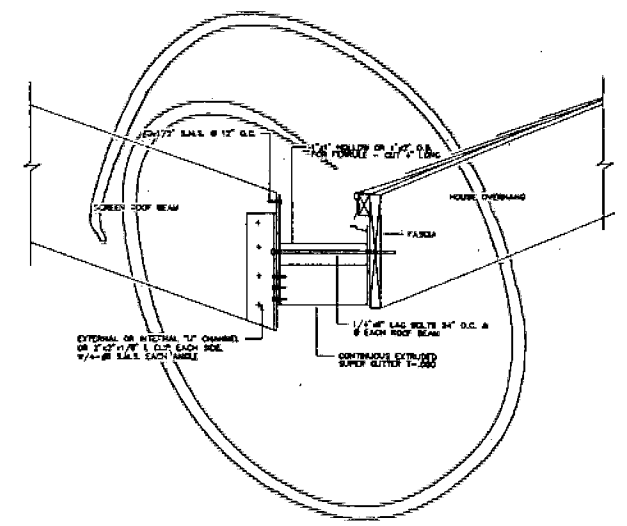
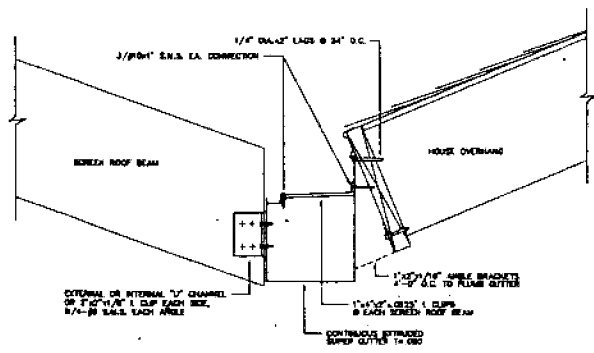


ALUMINUM CONSTRUCTION
DETAILS

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

John Nash
9/21/87
SEAL

SHEET
5
OF FIVE SHEETS



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

VARIOUS SPANS OF ROOF PANS "A"	VARIOUS SPANS OF SCREEN ROOFS "B"												
	18'	20'	22'	24'	26'	28'	30'	32'	34'	36'	38'	40'	42'
4'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
6'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
8'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
10'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
12'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
14'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"

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

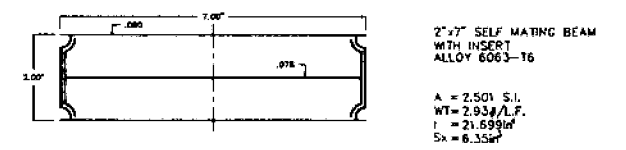
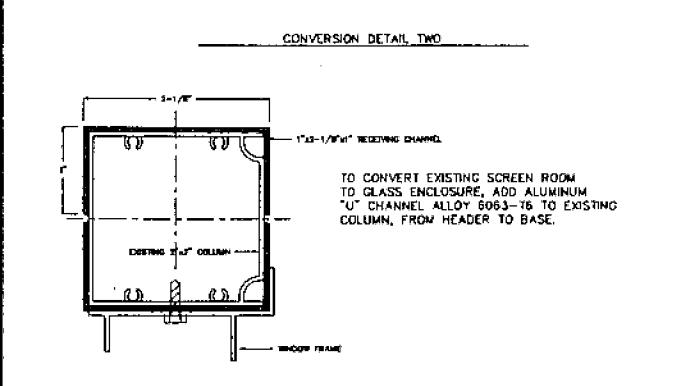
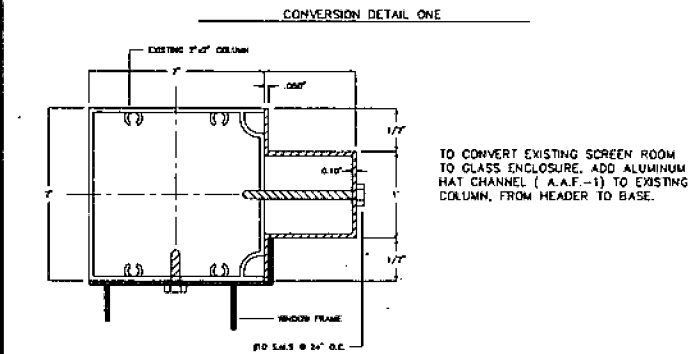
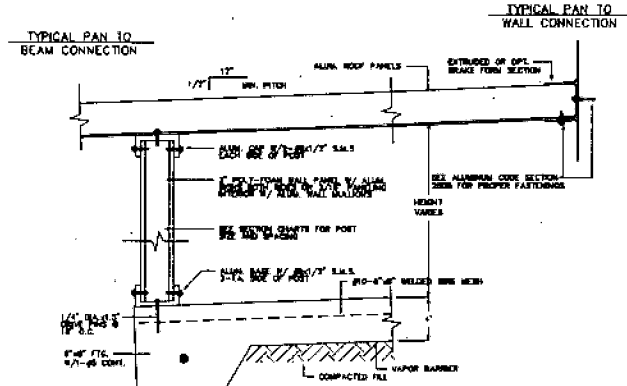
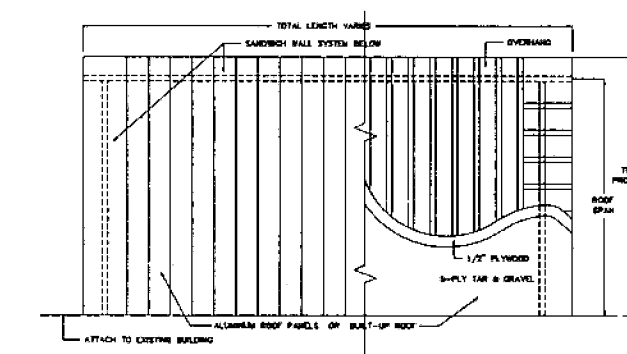
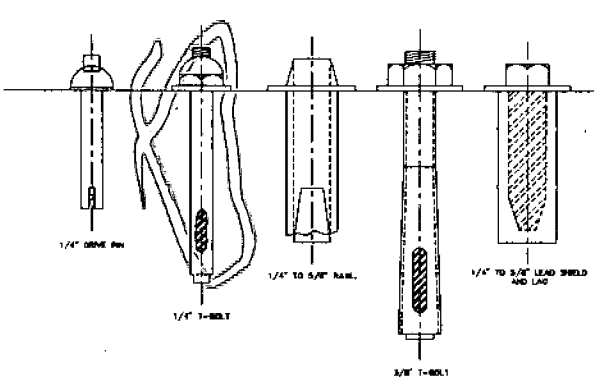
VARIOUS SPANS OF ROOF PANS "A"	VARIOUS SPANS OF SCREEN ROOFS "B"												
	18'	20'	22'	24'	26'	28'	30'	32'	34'	36'	38'	40'	42'
4'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
6'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
8'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
10'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
12'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"
14'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"	18'-0"

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

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

CARRIER BEAM - SPAN TABLE S-2
(SUPER GUTTER & 2"x6" S.M.B.)

CARRIER BEAM - SPAN TABLE S-3
(SUPER GUTTER & 2"x7" S.M.B.)



SPACING AND SPAN TABLES

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

MASONRY - CONCRETE FASTENERS

GLASS ROOMS
(SANDWICH SYSTEM)

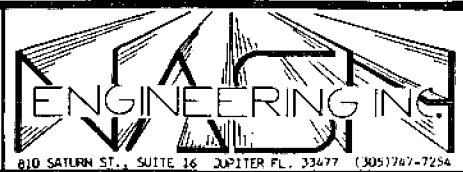
GLASS ROOM "HAT"
(REINFORCEMENT OF .040 POST)

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

DATE	BY	DESCRIPTION

REVISIONS

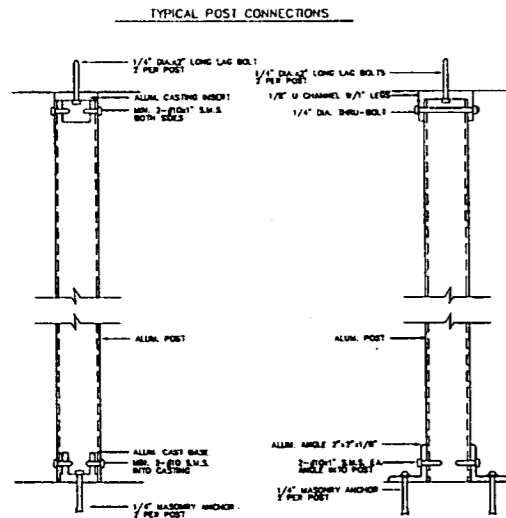
TREASURE COAST CHAPTER, INC.
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



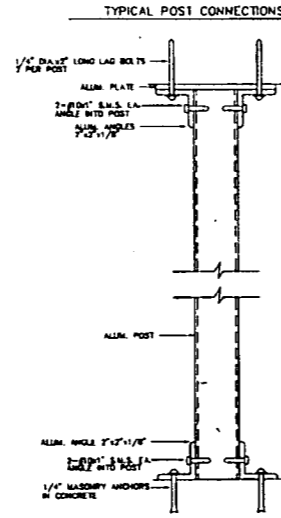
ALUMINUM CONSTRUCTION
DETAILS

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

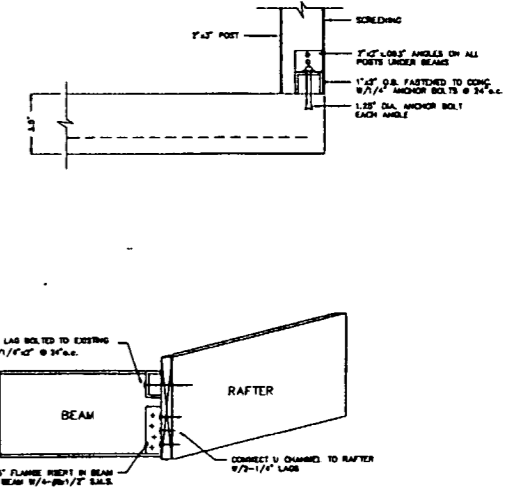
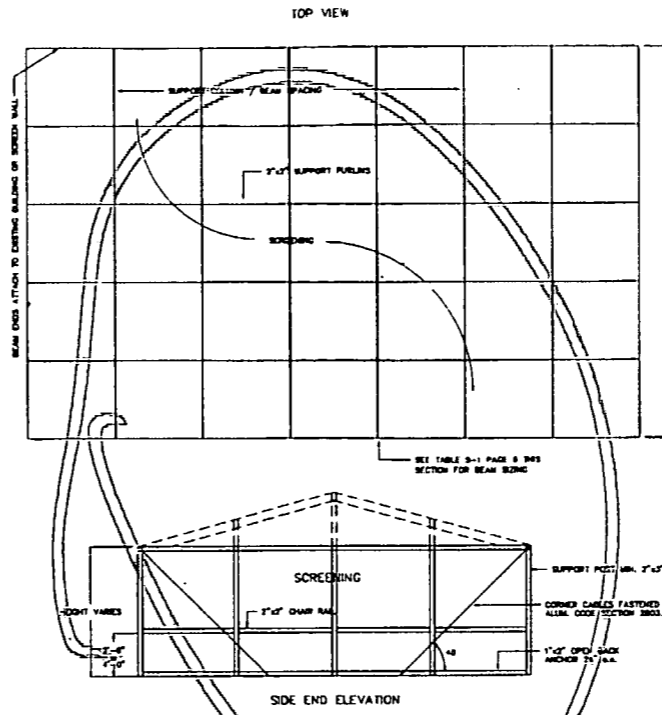
SEAL
OF FIVE SHEETS
4



NOTE: ANGLES MAY HAVE 1 LEG INSIDE POST



NOTE: ANGLES MAY HAVE 1 LEG INSIDE POST

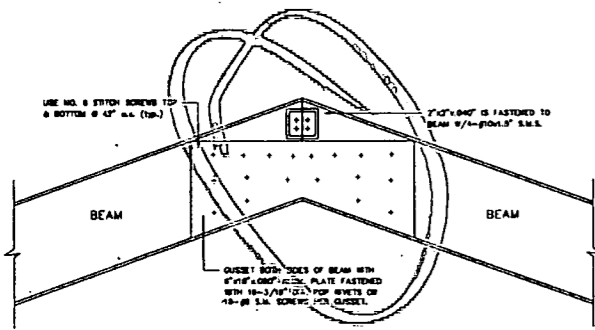


SCREEN ROOM
(UNDER WOOD ROOF)

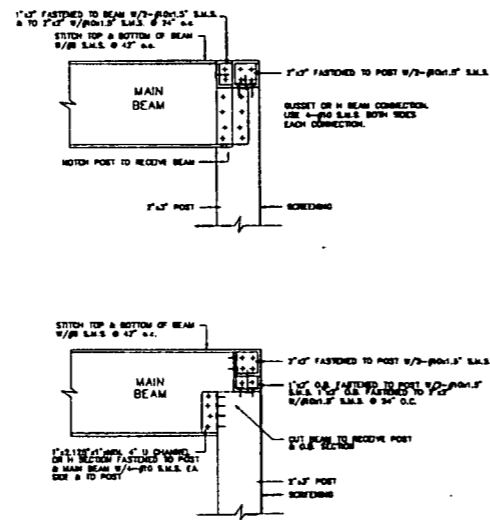
SCREEN ROOM
(UNDER WOOD ROOF)

POOL ENCLOSURE
(TYPICAL)

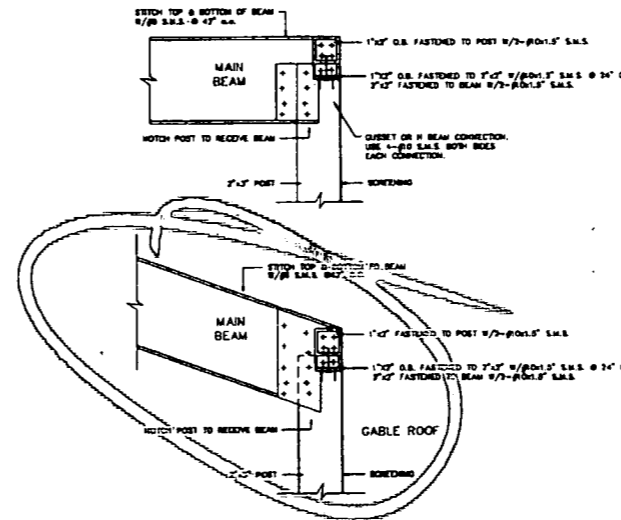
POOL ENCLOSURE
(CONNECTION TYPICALS)



POOL ENCLOSURE
(CONNECTION TYPICALS)



POOL ENCLOSURE
(POST TO BEAM TYPICALS)



POOL ENCLOSURE
(POST TO BEAM TYPICALS)

BEAM SIZE	MAXIMUM CLEAR SPAN FOR SCREENED ROOF BEAMS @ VARIOUS SPACING							
	4'-0" O-C	6'-0" O-C	8'-0" O-C	10'-0" O-C	12'-0" O-C	14'-0" O-C	16'-0" O-C	18'-0" O-C
2"x4" S.M. BEAM S ₁ - 1.25	21'-8"	19'-4"	18'-8"	17'-8"	17'-0"	16'-4"	15'-10"	15'-3"
2"x4" S.M. BEAM W/ INSERT S ₁ - 1.75	25'-5"	22'-9"	21'-9"	20'-9"	20'-0"	19'-3"	18'-8"	18'-0"
2"x6" S.M. BEAM S ₁ - 3.00	32'-9"	29'-4"	28'-0"	26'-9"	25'-9"	24'-8"	24'-0"	23'-2"
2"x7" S.M. BEAM S ₁ - 4.00	42'-9"	38'-3"	36'-7"	35'-0"	33'-8"	32'-4"	31'-4"	30'-3"
2"x7" S.M. BEAM W/ INSERT S ₁ - 5.25	49'-2"	44'-0"	42'-0"	40'-2"	38'-8"	37'-2"	36'-0"	34'-9"
3"x7" I BEAM W/ SNAP S ₁ - 3.00	25'-10"	25'-0"	24'-3"	23'-7"	23'-0"	22'-5"	21'-11"	21'-5"
3"x7" I BEAM W/ SNAP S ₁ - 3.15	34'-10"	31'-1"	29'-10"	28'-6"	27'-5"	26'-4"	25'-5"	24'-8"
4"x8" I BEAM W/ SNAP S ₁ - 4.00	42'-10"	38'-4"	36'-8"	35'-0"	33'-9"	32'-5"	31'-5"	30'-4"

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

SCREEN ROOF BEAM - SPAN TABLE S-1

DATE	BY	DESCRIPTION

REVISIONS

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



ALUMINUM CONSTRUCTION
DETAILS

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

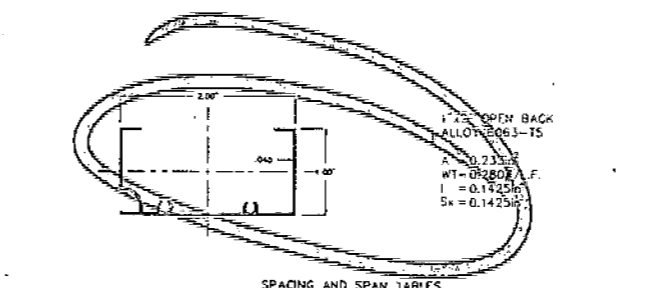
SEAL OF FIVE SHEETS
3

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

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

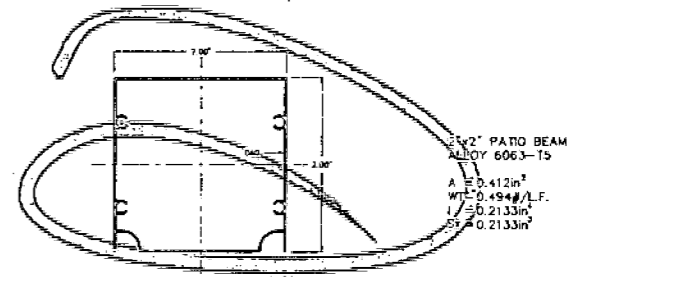
ROOF PAN (ALLOY 3003 H-16)	PAN THICKNESS	SK	MAX. SPAN @ WIND VELOCITIES SHOWN
2" INTERLOCKING PANEL			100MPH | 110MPH | 120MPH
	.024	.450in ³	13'-4"
	.032	.608in ³	15'-6"
	.032	.346in ³	11'-0"

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



SPACING AND SPAN TABLES

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



SPACING AND SPAN TABLES

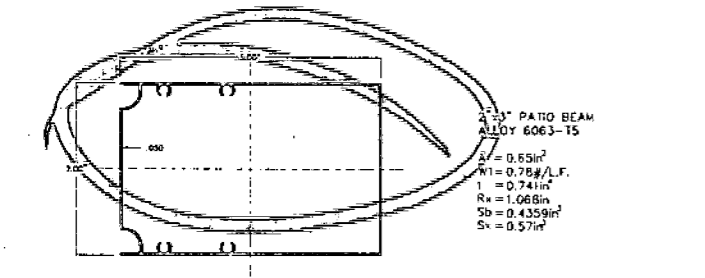
SPACING	SCREEN ROOF 7# PER S.F.	SCREEN WALL 10# PER S.F.	SOLID WALL 25# PER S.F.	SOLID ROOF 30# PER S.F.
3'	10'-5"	8'-8"	5'-6"	5'-0"
4'	9'-0"	7'-6"	4'-9"	4'-4"
5'	8'-0"	6'-9"	4'-3"	3'-10"
6'	7'-4"	6'-2"	3'-10"	3'-5"
7'	6'-10"	5'-8"	3'-8"	3'-4"
8'	6'-4"	5'-4"	3'-4"	3'-0"
9'	6'-0"	5'-0"	3'-2"	2'-11"
10'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

CLEATED ROOF PANS

INTERLOCKING ROOF PANS

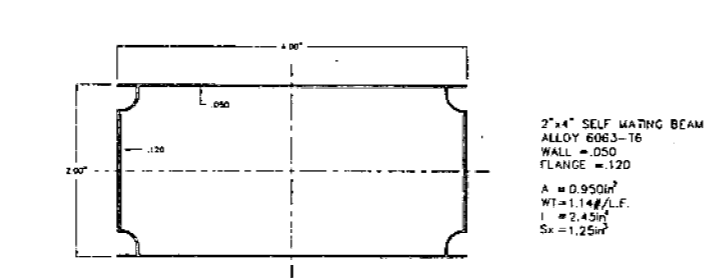
1" x 2" OPEN BACK

2" x 2" PATIO BEAM



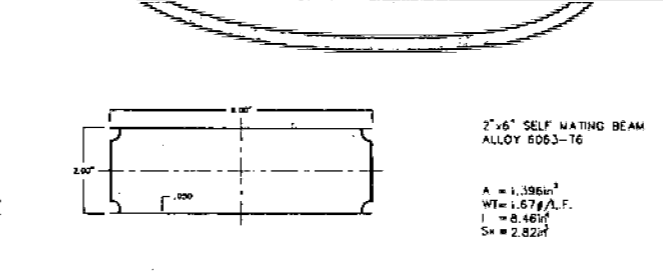
SPACING AND SPAN TABLES

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



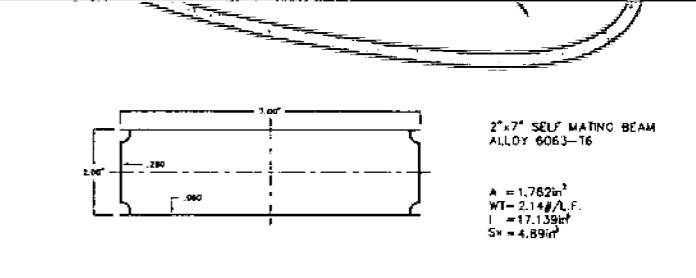
SPACING AND SPAN TABLES

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



SPACING AND SPAN TABLES

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



SPACING AND SPAN TABLES

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

2" x 3" PATIO BEAM

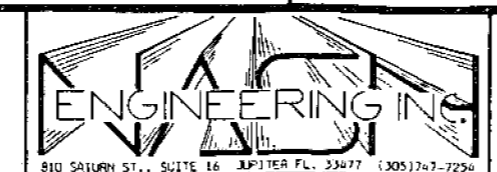
2" x 4" SELF MATING BEAM

2" x 6" SELF MATING BEAM

2" x 7" SELF MATING BEAM

DATE	BY	DESCRIPTION

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



ALUMINUM CONSTRUCTION
 DETAILS

DRAWN	COMPTON
CHECKED	NASH
SCALE	N.T.S.
DATE	SEPTEMBER 1987
JOB NO.	S7-034

SHEET
 1
 OF FIVE SHEETS

SEPTEMBER 1987

TREASURE COAST CHAPTER, INC
OF THE ALUMINUM ASSOCIATION
OF FLORIDA



PREPARED BY:

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

6635

FENCE

FINAL
8-27-04

~~DOMINICAN~~
~~GILL~~
~~(OTB)~~

~~PN 6635~~
~~PRICE~~
(DATE: ~~3/16/04~~)

PN 6672

FILL
(DATE: 4/7/04)

FINAL GILL
8-27-04 (LO/B)

Final Gill Shutter + Screens
7-21-08 (Schmitt/Lou)
£

PN 8921
Hurricane Shutter
6-9-08

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 10-28-04

Permit Number: _____

OWNER/TITLEHOLDER NAME Elizabeth Wilkinson (Bruce) Phone (Day) 287-3300 (Fax) 287-5511

Job Site Address: 8 OAKWOOD DR City: Sewalls Pt State: _____ Zip: _____

Legal Desc. Property (Subd/Lot/Block) LOT 3 OAKWOOD Parcel Number: _____

Owner Address (if different): 8 OAKWOOD DR City: _____ State: _____ Zip: _____

Description of Work To Be Done: Fence replaced AFTER hurricane

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: \$ _____

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: Stuart Fence Phone: _____ Fax: _____

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

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: _____

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): Elizabeth Wilkinson

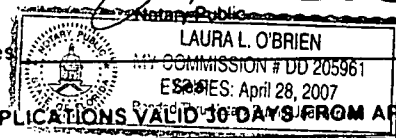
State of Florida, County of: MARTIN

This the 28th day of OCTOBER, 2004

by ELIZABETH MAURE WILKINSON who is personally

known to me or produced FD W428-287-7920

as identification. [Signature] x8/12/09



CONTRACTOR SIGNATURE (required): _____

On State of Florida, County of: _____

This the _____ day of _____, 2004

by _____ who is personally

known to me or produced _____

As identification. _____ Notary Public

My Commission Expires: _____ Seal

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

7581

A/C CHANGEOUT

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 5/26/05

BUILDING PERMIT NO. 7581

Building to be erected for WILKINSON

Type of Permit A/C CHANGEOUT

Applied for by CLASSIC COOLING (Contractor)

Building Fee _____

Subdivision Oakwood Lot 3 Block _____

Radon Fee _____

Address 8 OAKWOOD DRIVE

Impact Fee _____

Type of structure SFR

A/C Fee 35.00

Parcel Control Number:

1338410090000003020000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 35.00 Check # 5150 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 9,000.00

TOTAL Fees 35.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

INSPECTIONS

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

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 5-26-05

Permit Number: _____

OWNER/TITLEHOLDER NAME: Elizabeth Wilkinson Phone (Day) 286-1851 (Fax) _____

Job Site Address: 8 Oakwood Dr. City: Stuart State: FL Zip: 34996

Legal Desc. Property (Subd/Lot/Block) Oakwood Lot #3 Parcel Number: 13384100900000302

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

Description of Work To Be Done: Replaced 3 1/2 Ton A/C systems (Exact Repl.)

WILL OWNER BE THE CONTRACTOR?:

YES

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 9000.00
(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: _____ Phone: _____ Fax: _____

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

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: Classic Cooling State: FL License Number: CAC029403

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: _____

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

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

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

OWNER OR AGENT SIGNATURE (required) _____

State of Florida, County of: Martin

This the 26th day of May, 2005

by Elizabeth Wilkinson who is personally

known to me or produced _____

as identification. _____

CONTRACTOR SIGNATURE (required) _____

On State of Florida, County of: Martin

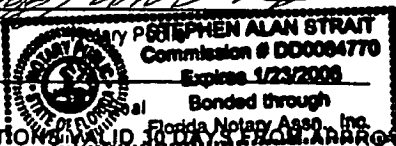
This the 26th day of May, 2005

by Stephen Alan Strait who is personally

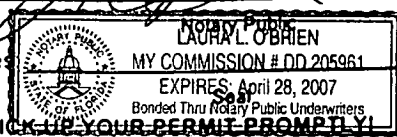
known to me or produced FOI 2005-281-54-365-0

As identification. 1/18/08

My Commission Expires: _____



My Commission Expires: _____





PERMIT # _____ TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida COUNTY OF Martin

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

LEGAL DESCRIPTION OF PROPERTY (INCLUDE STREET ADDRESS IF AVAILABLE):
8 Oakwood Dr. Oakwood Lot 3 133841009 000 000 302

GENERAL DESCRIPTION OF IMPROVEMENT: Replace 2 A/C SYSTEMS

OWNER: Elizabeth Wilkinson

ADDRESS: 8 Oakwood Dr. Stuart, FL 34986

PHONE #: 286-1851 FAX #: _____

CONTRACTOR: Classic Cooling

ADDRESS: 1259 S.W. 34th St. Palm City, FL 34990

PHONE #: 283-8710 FAX #: 283-8735

SURETY COMPANY (IF ANY) _____

ADDRESS: _____

PHONE # _____

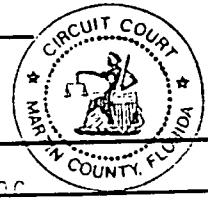
BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____

STATE OF FLORIDA
MARTIN COUNTY
FAX # _____
THIS IS TO CERTIFY THAT THE
FOREGOING _____ PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL
MARSHA EWING CLERK
BY [Signature]
DATE 5-26-05



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

NAME: _____

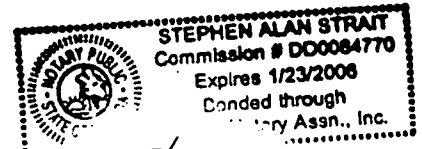
ADDRESS: _____

PHONE #: _____ FAX #: _____

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

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

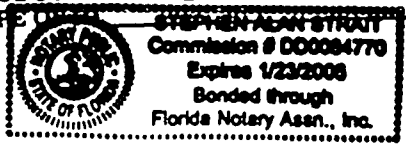
[Signature]
SIGNATURE OF OWNER



SWORN TO AND SUBSCRIBED BEFORE ME THIS 26th DAY OF May 2005 BY Elizabeth Wilkinson

PERSONALLY KNOWN
PRODUCED ID _____
TYPE _____

[Signature]
NOTARY SIGNATURE





7581

TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: B 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.

A/C CHANGED OUT

CKT BREAKERS FOR A/C
EQUIPMENT EXCEED MAXIMUM
ALLOWABLE AS RECOMMENDED
BY EQUIP. MANUFACTURER

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: 6/6





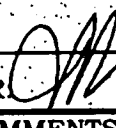

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/6, 2008 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
7441	TOMPECK	FINAL ROOF	FAIL	
4	20 EMERALTA WY O/B			INSPECTOR: 
7596	MADDEN	BATH WINDOW	PASS	
2	160 S. RIVER RD O/B			INSPECTOR: 
7597	MADDEN	Door	PASS	
2	160 S. RIVER RD O/B			INSPECTOR: 
7391	CONRAD	FINAL ROOF		CKL
	9 S. VIALUCINDA STUART ROOFING			INSPECTOR:
7521	ZELINA	Rat PUMB	PASS	
3	1 RIVERVIEW DR HOMESAFE	Rat Electric FRAMING	PASS	INSPECTOR: 
7581	WILKINSON	A/C CHANGEOUT	FAIL	
1	8 OAKWOOD CLASSIC COOLING			INSPECTOR: 
7455	WILSON	UG PUMB.	PASS	
5	11 LOFTING WAY BUFORD			INSPECTOR: 

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/22, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7301	MURRAY	GARAGEDOOR	PASS	CLOSE
14	27 FIELDWAY			INSPECTOR:
	O/B			
7054	TAPPER	TIE BEAM	PASS	READ SORCH AREA
2	22 ISLAND	2ND FLOOR		INSPECTOR:
	WINCHIP			
7581	WILKINSON	A/C CANOPY	PASS	CLOSE
1	B. OAKWOOD	2ND FLOOR		INSPECTOR:
	O/B			
7354	WOOD	FINAL SCR. ENCL	PASS	CLOSE
9	15 LANTANA			INSPECTOR:
	PALM COAST AUM.			
7174	BOVEL	FINAL ROOF	PASS	CLOSE
8	S RIVERVIEW			INSPECTOR:
	GOLD COAST RES			
7200	KRAUNSOE	DRY-IN	---	WILL RESCHEDULE
11	112 HILLCREST			INSPECTOR:
	PACIFIC ROOFING			
7592	BROWN	FINAL ROOF	FAIL	
13	7 FIELDWAY DR			INSPECTOR:
	ROBT ESTEIN			

OTHER: _____

7622

STORM PANELS

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 6/13/05

BUILDING PERMIT NO. 7622

Building to be erected for WILKINSON

Type of Permit HURRICANE SHUTTERS

Applied for by O/B

(Contractor)

Building Fee 120.00

Subdivision OAKWOOD

Lot 3

Block _____

Radon Fee _____

Address 8 OAKWOOD DRIVE

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

1338410090000003020000

Roofing Fee _____

Amount Paid 120.00

Check # 272

Cash _____

Other Fees (_____)

Total Construction Cost \$ 5000.00

TOTAL Fees 120.00

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

INSPECTIONS

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

RECEIVED

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 6-10-05

Permit Number: _____

OWNER/TITLEHOLDER NAME: ELIZABETH M. WILKINSON

Phone (Day) 287-3300

(Fax) 287-5571

Job Site Address: 8 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: Shutters/panels/accordian

WILL OWNER BE THE CONTRACTOR?:

YES (circled)

NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ _____
(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: _____ Phone: _____ Fax: _____

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

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: _____

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

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

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

OWNER OR AGENT SIGNATURE (required)

State of Florida, County of: Martin

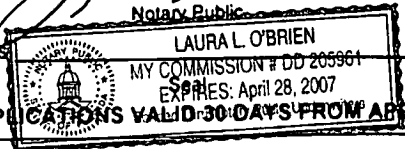
This the 10th day of June, 2005

by Elizabeth Mayer Wilkinson who is personally

known to me or produced by [Signature] 287-233-51-72-0

as identification. [Signature] 18/12/09

My Commission Expires



CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____, 2005

by _____ who is personally

known to me or produced _____

As identification. _____ Notary Public

My Commission Expires: _____ Seal

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


TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

DISCLOSURE STATEMENT

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even through you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statues 489.103(7).

I have read the above and agree to comply with the provisions as stated.

Name:  Date: 6-10-05

Signature: ELIZABETH M. WILKINSON

Address: 8 OAKWOOD DR

City & State: STUART FL 34996

Permit No. _____



SITE NAVIGATION



PRODUCT APPROVAL

Product Type Detail

- Overview
- Product Search
- Organization Search
- Product Application

User: Public User - Not Associated with Organization -

[Need Help ?](#)

Application #: FL419
 Date Submitted: 09/30/2003
 Code Version: 2001

Product Manufacturer: Eastern Metal Supply
 Address/Phone/email: 4268 Westroads Drive
 West Palm Beach, FL 33407
 (561) 841-5480

Category: Shutters
 Subcategory: Storm Panels

Evaluation Method: Evaluation Report from a Florida Registered Architect or Florida Professional Engineer

Referenced Standards from the Florida Building Code:

Section	Standard	Year
1606.1.4	SSTD 12-99	2001

Florida Engineer or Architect Name: Walter A. Tillit, Jr.
 Florida License: PE-44167
 Quality Assurance Entity: National Accreditation and Management Institute
 Validation Entity: John Henry Kampmann Jr.

Authorized Signatory
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 6/13/04

BUILDING OFFICIAL
 Gene Simmons

Bill Feeley
 bfeeley@easternmetal.com

[PTID_419_T_1 Product Evaluation Report\(1\).pdf](#)
[PTID_419_T_3 Drawing 02-055.pdf](#)
[PTID_419_T_3 Drawing 02-](#)

- [057.pdf](#)
- [PTID_419_T_4_Test_Reports
\(2\).pdf](#)
- [PTID_419_T_Drawing_03-
053.pdf](#)
- [PTID_419_T_Product_Evaluation
Report.pdf](#)
- [PTID_419_T_Test_Report
0121.pdf](#)
- [PTID_419_T_Test_Report
0329.pdf](#)
- [PTID_419_T_Test_Report
0512.pdf](#)
- [PTID_419_T_Test_Report
0525.pdf](#)

Installation Documents Uploaded:

Product Approval Method:

Method 1 Option D

Application Status:

Approved

Date Validated:

05/28/2004

Date Approved:

06/01/2004

Date Certified to the 2004 Code:

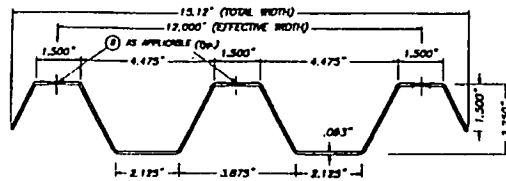
Page:

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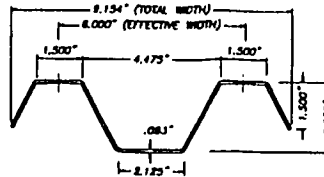
App/Seq #	Product Model # or Name	Model Description	Limits of Use
419.1	02-055	EMS - 24ga Galvanized Steel Storm Panel	
419.2	02-057	EMS - Clear Bertha Storm Panel	
419.3	03-053	EMS - 0.050 Bertha Aluminum Storm Panel	



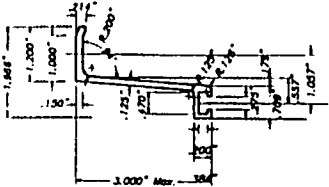
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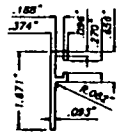
① CLEAR PANEL
SCALE: 1/4" = 1"



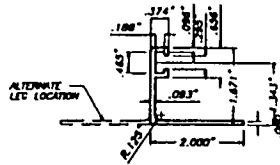
①A CLEAR HALF PANEL
SCALE: 1/4" = 1"



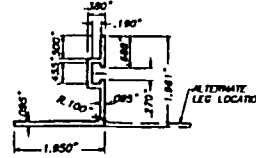
② 3" ANGLE BUILD OUT BRACKET
SCALE: 3/4" = 1"



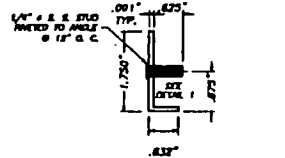
③ 3/8" B.O. F TRACK
SCALE: 3/4" = 1"



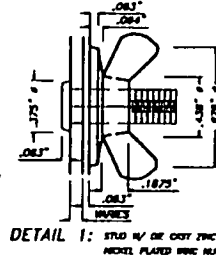
④ F TRACK ANGLE
SCALE: 3/4" = 1"



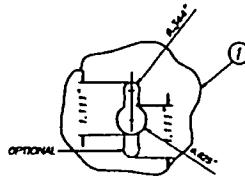
⑤ REVERSED F ANGLE TRACK
SCALE: 3/4" = 1"



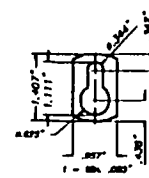
⑥ MINI WALL 1.75" x 0.632" ANGLE WITH STUD
SCALE: 1/2" = 1"



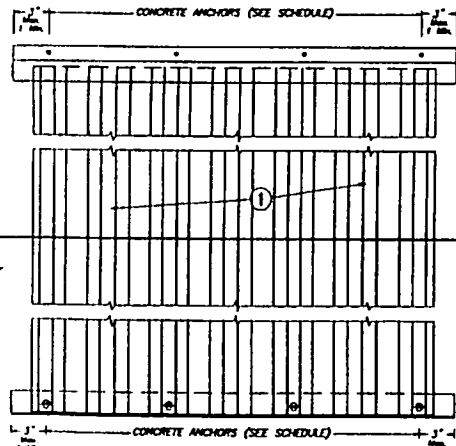
⑦ 2"x5"(MAX.)x1/8" ANGLE WITH STUD
SCALE: 3/4" = 1"



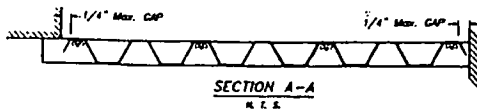
⑧ KEY HOLE AT PANEL



⑨ KEY HOLE WASHER
3100-1104 ALUM. ALLOY
SCALE: 3/4" = 1"



STORM PANEL TYPICAL ELEVATION
N.T.S.



SECTION A-A
N.T.S.

GENERAL NOTES:

1. STORM PANEL SHOWN ON THIS PRODUCT EVALUATION DOCUMENT (P.E.D.) HAS BEEN DESIGNED IN ACCORDANCE WITH THE 2001 EDITION OF THE FLOOR BUILDING CODE. DESIGN WIND LOADS SHALL BE DETERMINED AS PER SECTION 1608 OF THE ABOVE MENTIONED CODE. FOR A BASIC WIND SPEED AS REQUIRED BY THE JURISDICTION WHERE STORM PANELS WILL BE INSTALLED AND FOR A DIRECTIONALITY FACTOR $K_d=0.85$, IN ACCORDANCE WITH ASCE 7-98 STANDARD. STORM PANEL'S AERODYNAMIC FORCE AND FATIGUE RESISTANCE HAS BEEN VERIFIED IN ACCORDANCE WITH SECTION 1608.1.4 OF THE ABOVE MENTIONED CODE AS PER AIA REPORT # 01.03.01-01.

2. CLEAR BOTTOM STORM PANEL SHALL BE EXTRUDED USING G.C. PLASTICS LEON 103 PC RESIN (POLYCARBONATE) WITH THE FOLLOWING MINIMUM PROPERTIES:

PROPERTY	APPLICABLE TEST REFERENCE	MINIMUM
PHYSICAL:		
SPECIFIC GRAVITY	ASTM D782	1.203 G/CC
MELT FLOW RATE	ASTM D1238	6.3-8.00 G/10 MINUTE
Mechanical:		
COMPRESSIVE MODULUS	ASTM D695	345,000 P.S.I.
FLEXURAL MODULUS	ASTM D790	333,000 P.S.I.
COMPRESSIVE STRENGTH	ASTM D695	17,500 P.S.I.
FLEXURAL STRENGTH AT YIELD	ASTM D790	12,800 P.S.I.
TENSILE FIELD STRENGTH	ASTM D638	800 P.S.I.
SEAR STRENGTH	ASTM D732	8000 P.S.I.
IMPACT:		
NOTCHED IZOD @ 125 M/S	ASTM D256	17.7 FT-LB/IN
FLAMMABLE:		
BURN RATE	FMVSS302	0 inch/minute AT 0.000" TYP
NOT $\geq 7/8"$ CABLE-IN ANCHORS OR ELOD WALLS & MINIMUM "PANELMATE" AS MANUFACTURED BY POWERS FASTENING, INC AND ELOD EXTRUDER, RESPECTIVELY.		

- ALL ALUMINUM EXTRUSIONS SHALL BE 6063-T5 ALLOY.
- ALL SCREWS TO BE STAINLESS STEEL 304 OR 316 SERIES.
- BOLTS TO BE 3024-T4 ALUMINUM ALLOY, OILHEAT TREATED OR STAINLESS STEEL, WITH 30 IN MIN. WELD POINT.
- ANCHORS TO WALL SHALL BE AS FOLLOWS:

- TO EXISTING POURED CONCRETE:
 - 1/4" ϕ DIPCON ANCHORS AS MANUFACTURED BY I.I.R. BUILDER.
 - 1/4" ϕ x 7/8" CABLE-IN ANCHORS OR ELOD WALLS & MINIMUM "PANELMATE" AS MANUFACTURED BY POWERS FASTENING, INC AND ELOD EXTRUDER, RESPECTIVELY.

- NOTES:
- MINIMUM EMBEDMENT INTO POURED CONCRETE OF DIPCON ANCHORS IS 1 3/4" AND FOR ELOD PANELMATES IS 1 1/2".
 - 7/8" CABLE-IN ANCHORS SHALL BE ENTIRELY ENCASED INTO THE POURED CONCRETE. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" ϕ x 3-10 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - IN CASE THAT PRECAST STONE, PRECAST CONCRETE PANELS OR ANCHORS BE FOUND ON THE EXISTING WALL OR FLOOR, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES A.1) & A.2) ABOVE.

- TO EXISTING CONCRETE BLOCK WALL:
 - 1/4" ϕ DIPCON ANCHORS AS MANUFACTURED BY I.I.R. BUILDER.
 - 1/4" ϕ x 7/8" CABLE-IN ANCHORS OR ELOD WALLS & MINIMUM "PANELMATE" AS MANUFACTURED BY POWERS FASTENING, INC AND ELOD EXTRUDER, RESPECTIVELY.
- NOTES:
- MINIMUM EMBEDMENT OF DIPCON ANCHORS AND ELOD PANELMATES INTO THE CONCRETE BLOCK UNIT SHALL BE 1 1/4".
 - 7/8" CABLE-IN ANCHORS SHALL BE ENTIRELY ENCASED INTO THE CONCRETE BLOCK UNIT. NO EMBEDMENT INTO STUCCO SHALL BE PERMITTED. 1/4" ϕ x 3-10 SCREWS USED SHALL BE 1 1/2" LONG MINIMUM SHOULD STUCCO EXIST, AND 1" MINIMUM FOR WALLS WITH NO STUCCO.
 - IN CASE THAT PRECAST STONE OR PRECAST CONCRETE PANELS BE FOUND ON THE EXISTING WALL, ANCHORS SHALL BE LONG ENOUGH TO REACH THE MAIN STRUCTURE BEHIND SUCH PANELS. ANCHORAGE SHALL BE AS INDICATED ON NOTES B.1) & B.2) ABOVE.

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

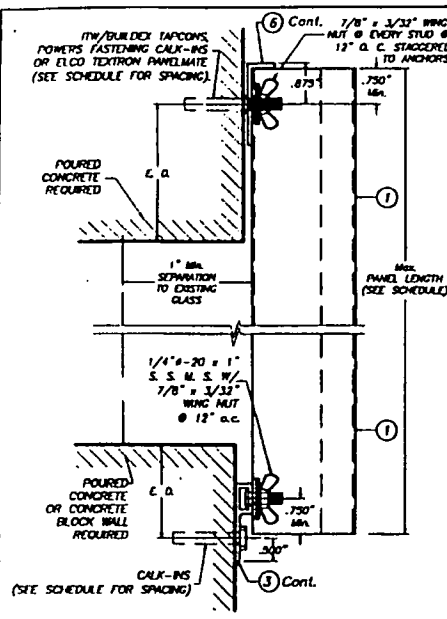
- PANEL MAY ALSO BE INSTALLED HORIZONTALLY FOLLOWING INSTALLATION DETAILS SHOWN ON SECTIONS 1 THRU 3, SHEET 2 OF 4.
- STORM PANEL SHALL BE REMOVED AFTER THE HURRICANE AND SHALL BE STORED AND PROPERLY MAINTAINED.
- IT SHALL BE THE RESPONSIBILITY OF THE CONTRACTOR TO VERIFY THE SOUNDNESS OF THE STRUCTURE WHERE SHUTTER IS TO BE ATTACHED TO ASSURE PROPER ANCHORAGE.
- (d) THIS P. E. D. PREPARED BY THIS ENGINEER IS GENERAL AND DOES NOT PROVIDE INFORMATION FOR A SITE SPECIFIC PROJECT; I.e. WHERE THE SITE CONDITIONS DEVIATE FROM THE P. E. D.
- CONTRACTOR TO BE RESPONSIBLE FOR THE SELECTION, PURCHASE AND INSTALLATION OF THIS PRODUCT BASED ON THIS P. E. D. PROVIDED HE/SHE DOES NOT DEVIATE FROM THE CONDITIONS DETAILED ON THIS DOCUMENT.
- (e) THIS P. E. D. WILL BE CONSIDERED VOID IF ALTERED (I.e. UNINITIALED, MARKED, ETC.) BY ANY MEANS.
- (f) SITE SPECIFIC PROJECTS SHALL BE PREPARED BY A LICENSED REGISTERED ENGINEER OR ARCHITECT WHOSE RECORD OF RECORD (E.O.R.) FOR THE PROJECT AND WHO WILL BE RESPONSIBLE FOR THE PROPER USE OF THE P.E.D. ENGINEER OF RECORD, ACTING AS A DELEGATED ENGINEER TO THE P.E.D. ENGINEER SHALL SUBMIT TO HIS LATTER THE SITE SPECIFIC DRAWINGS FOR REVIEW.
- (g) THIS P.E.D. SHALL BEAR THE DATE AND ORIGINAL SEAL AND SIGNATURE OF THE PROFESSIONAL ENGINEER OF RECORD THAT PREPARED IT.

COMPONENTS

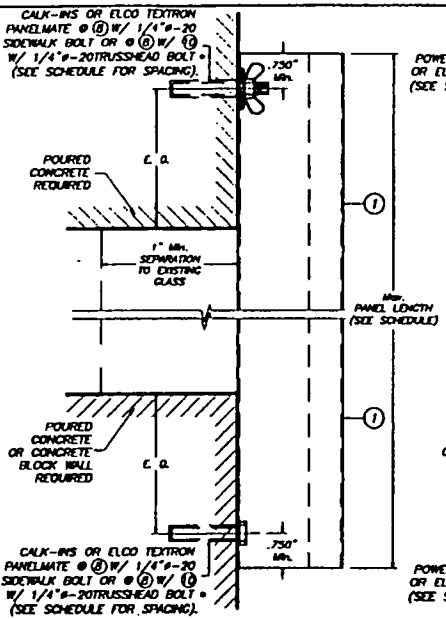
This is Not a Master Drawing.
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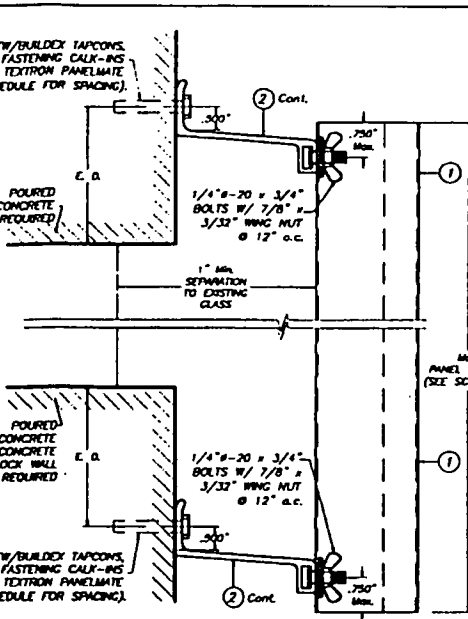
<p>TILECO INC. TILECO TESTING & ENGINEERING COMPANY 4200 A & B, SW. 215, WICHITA, KANSAS, KS 67207 Phone: (316) 717-1530 Fax: (316) 717-1531 ED-0006719 WALTER A. TILIT, P. E. FLORIDA Lic. # 44167</p>		<p>F.B.C.</p> <p>CLEAR BERTHA STORM PANEL</p> <p>AS SHOWN SCALE</p>			
		<p>EASTERN METAL SUPPLY, INC</p> <p>4268 WEST ROADS DRIVE RIVERA BEACH, FL 33407</p>			
REV. NO.	DESCRIPTION	DATE	BY	REVISION	DATE
1					
2					
<p>02-057 DRAWING No.</p>					<p>SHEET 1 OF 4</p>



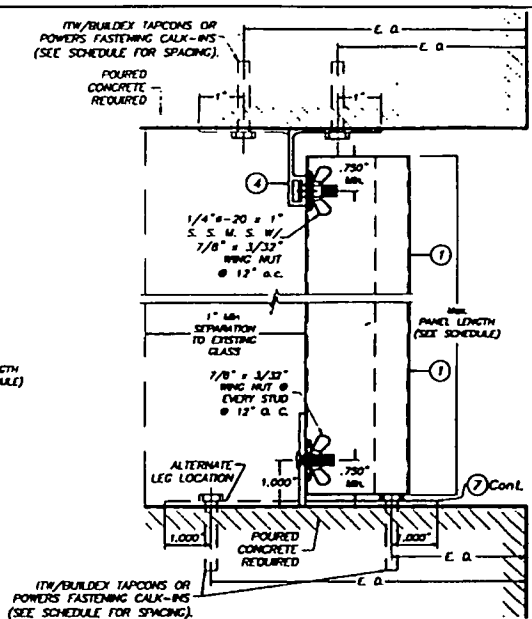
WALL MOUNTING INSTALLATION SECTION 1
SCALE: 3/8" = 1"



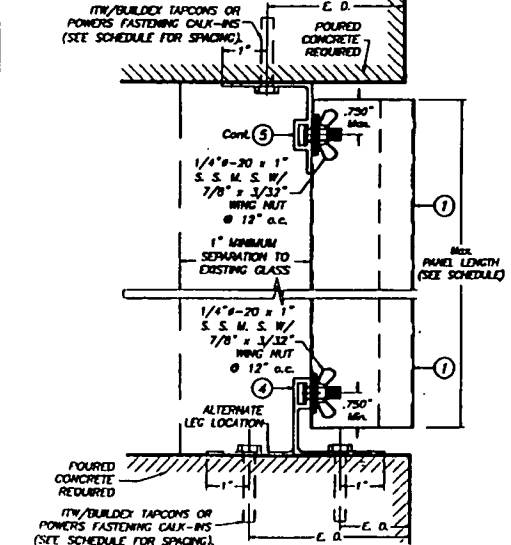
WALL MOUNTING INSTALLATION (D.M.) SECTION 2
SCALE: 3/8" = 1"



BUILD OUT INSTALLATION SECTION 3
SCALE: 3/8" = 1"



CEILING & FLOOR MOUNTING INSTALLATION SECTION 4
SCALE: 3/8" = 1"



CEILING & FLOOR MOUNTING INSTALLATION SECTION 5
SCALE: 3/8" = 1"

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

TRUSS HEAD BOLTS ARE 1/2" x 1/8" THICK HEAD MACHINE SCREW W/LENGTH AS PER NOTES A.2 & B.2 (SHEET 1)

E. D. = EDGE DISTANCE (SEE SCHEDULE ON SHEET 3 OF 4)

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

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TILECO INC.
TILECO TESTING & ENGINEERING COMPANY
6300 N.W. 20th St., Ste 217, Miramar, FL 33181
Phone: (305) 871-1330 Fax: (305) 871-1331
E3-0001719
WALTER A. TELLE, P. E.
FLORIDA LIC. # 24187

CLEAR BERTHA STORM PANEL		F.B.C.
EASTERN METAL SUPPLY, INC		AS SHOWN SCALE
4268 WEST ROADS DRIVE RIVERA BEACH, FL 33407		1/3/02 DATE
REV. BY: DESCRIPTION: DATE: REV. BY: DESCRIPTION: DATE:		02-057 DRAWING NO.
		SHEET 2 OF 4

MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.) WITH CORRESPONDING MAXIMUM PANEL LENGTH "L" (ft.) AND CORRESPONDING ANCHOR SPACING "S" (in.) SCHEDULE FOR INSTALLATIONS IN CONCRETE, CONCRETE BLOCK AND WOOD FRAME STRUCTURES *

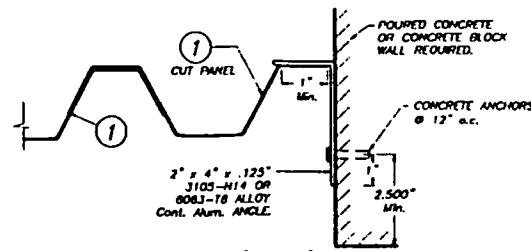
MAXIMUM DESIGN PRESSURE RATING "W" (p.s.f.)	MAX. PANEL LENGTH "L" (ft.) 0.01" CLEAR LEAD STORM PANEL	ANCHOR SPACINGS "S" (in.) **		
		SECTION 4 (BOTTOM)	SECTIONS 2, 3 (TOP/BOTTOM) & SECTION 1 (BOTTOM)	SECTION 1 (TOP) & SECTION 4 (TOP)
+28.0, -28.0	10'-0"	7"	12"	18"
+28.0, -30.0	9'-8"	7"	12"	18"
+30.0, -35.0	8'-11"	7"	12"	18"
+35.0, -40.0	8'-4"	7"	12"	18"
+40.0, -45.0	7'-11"	7"	12"	18"
+45.0, -50.0	7'-8"	7"	12"	18"
+50.0, -55.0	7'-2"	7"	12"	18"
+55.0, -60.0	6'-10"	7"	12"	18"
+60.0, -65.0	6'-7"	7"	12"	18"
+65.0, -70.0	6'-3"	7"	12"	18"
+70.0, -75.0	5'-10"	7"	12"	18"
+75.0, -80.0	5'-6"	7"	12"	18"
+80.0, -85.0	5'-2"	7"	12"	18"
+85.0, -90.0	4'-11"	7"	12"	18"
+90.0, -95.0	4'-8"	7"	12"	18"
+95.0, -100.0	4'-5"	7"	12"	18"
+100.0, -105.0	4'-2"	7"	12"	18"
+105.0, -110.0	4'-0"	7"	12"	18"

ANCHORS LEGEND

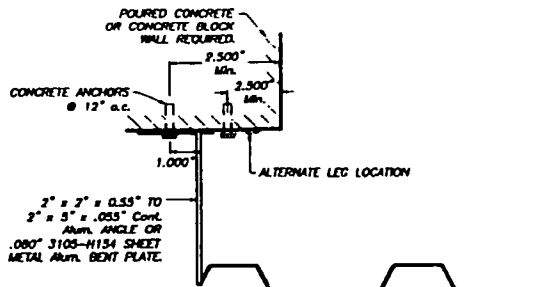
ANCHORS TYPE	ANCHOR MIN. SPACING
TAPCON/ PANELMATES	3.0"
CALK-IN	2.5"

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

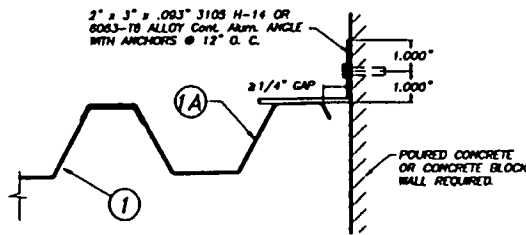
ACTUAL E. D.	FACTOR	
	TAPCON/ PANELMATES	CALK-IN
3"	.88	.75
2 1/2"	.71	.50
2"	.50	-



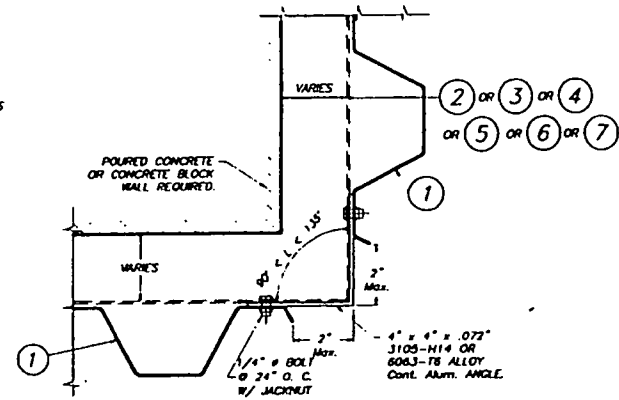
CASE A (Plan)
SCALE: 1/4" = 1"



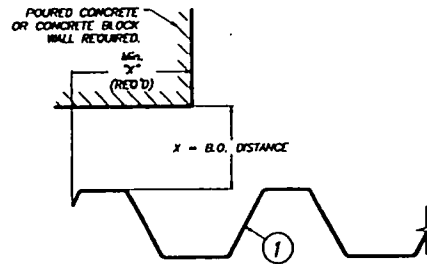
CASE C (Plan)
SCALE: 1/4" = 1"



CASE D (Plan)
SCALE: 1/4" = 1"



CASE B (Plan)
SCALE: 1/4" = 1"



CASE E (Plan) *
SCALE: 1/4" = 1"

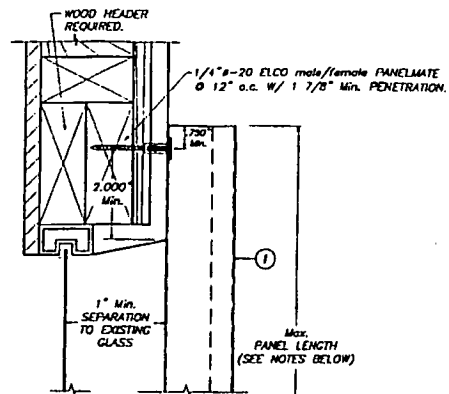
* ALL INSTALLATIONS PERFORMED WITH THIS CLOSURE DETAIL SHALL REDUCE PANEL LENGTH BY 20% AT EVERY APPLICATION FROM VALUES SHOWN ON SCHEDULE ON THIS SHEET.

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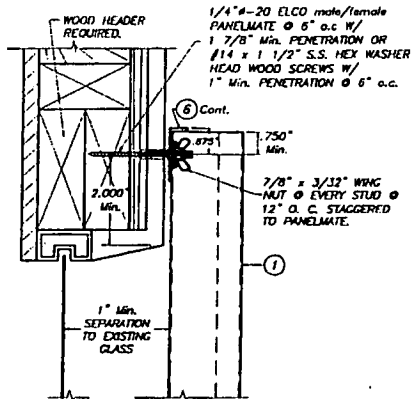
END CLOSURES DETAILS

[Signature]
NOV 01 2002

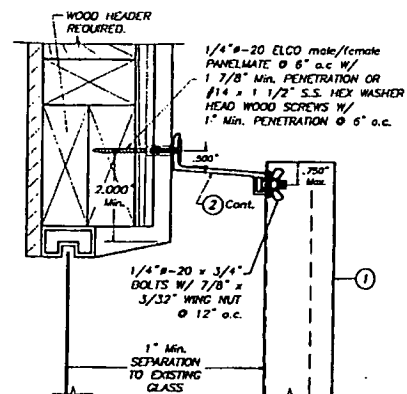
 TILLY TESTING & ENGINEERING COMPANY 2365 N.W. 39th St., 2nd Fl., Miramar, Florida, FL 33181 Phone: 1 (305) 971-1530 Fax: 1 (305) 971-1531 EB-0006719 WALTER A. TILLY, P. E. FLORIDA LIC. # 44167	CLEAR BERTHA STORM PANEL AS SHOWN SCALE
	EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE RIVERA BEACH, FL 33407
DATE: 1/3/02 DATE: 02-057 DRAWING NO: SHEET 3 OF 4	



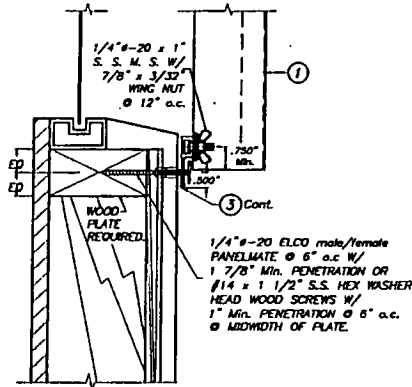
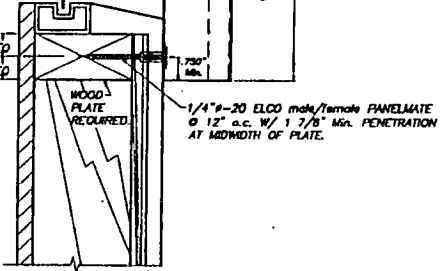
**WALL MOUNTING (D. M.)
ALTERNATIVE 1**



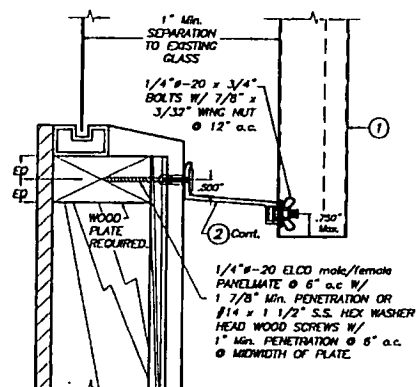
**WALL MOUNTING INSTALLATION
ALTERNATIVE 2**



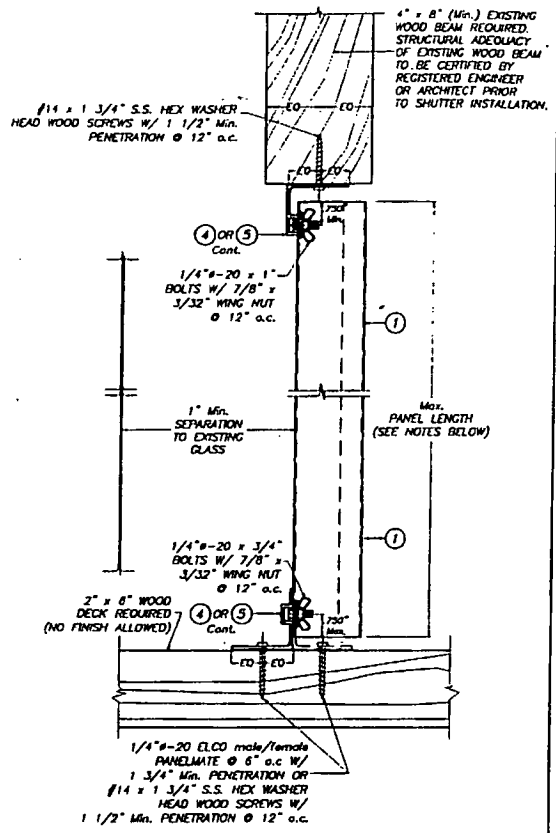
**BUILD OUT INSTALLATION
ALTERNATIVE 4**



**WALL MOUNTING INSTALLATION
ALTERNATIVE 3**



**BUILD OUT INSTALLATION
ALTERNATIVE 5**



**CEILING & FLOOR MOUNTING INSTALLATION
ALTERNATIVE 6**

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

- NOTES:**
- INSTALLATION ARE ONLY VALID FOR WIND LOADS AND PANEL'S LENGTHS AS PER SCHEDULE SHOWN ON SHEETS 3 OF 4.
 - FOR WOOD FRAME CONSTRUCTION: WOOD MEMBERS TO BE SOUTHERN PINE No. 2, W/ SPECIFIC DENSITY OF 0.55 OR EQUAL.

INSTALLATION DETAILS ON EXISTING WOOD BUILDINGS

**This is Not A Master Drawing.
Valid Only For One Time Permit.**

[Signature]
NOV 01 2002

 TILLIT TESTING & ENGINEERING COMPANY 6395 N.W. 35th St., Ste. 217, Miramar, CA 92051 Phone: (305) 871-1530, Fax: (305) 871-1531 EB-0008719 WALTER A. TILLIT, Jr., P. E. FLORIDA Lic. # 44187		F.B.C. CLEAR BERTHA STORM PANEL EASTERN METAL SUPPLY, INC 4268 WEST ROADS DRIVE RIVERA BEACH, FL 33407	AS SHOWN SCALE 3/5/02 DATE 02-057 DRAWING No SHEET 4 OF 4		
REV. NO.	DESCRIPTION	DATE	REV. NO.	DESCRIPTION	DATE
1			1		
2			2		