

2 Palm Court

868

SFR

TOWN OF
SEWALL'S POINT
FLORIDA

Permit No. 868
Date 8/30/78

APPLICATION FOR BUILDING PERMIT

RECEIVED
AUG 30 1978

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 and electrical layouts, and at least two elevations, as applicable. A copy of the property deed is required for new house construction.

-Owner ROBERT HERRICK Present address 1007 EAST ST.
Phone 465-1317 FT. PIERCE, FLA. 33450

-General contractor ROBERT HERRICK D/B/A PEPPER TREE PROPERTIES address 1007 EAST ST.
Phone 465-1317 FT. PIERCE, FLA. 33450

Where licensed ST. LUCIE Co. & FLA. STATE License No. PR0027601

-Plumbing contractor HUBER PLUMBING License No. RM 0026707

-Electrical contractor ALPINE ELECTRIC License No. MARTIN Co. # 62

-Name the street on which the building, its front building line and its front yard will face PALM COURT #2

Subdivision KNOWLES Lot No. ONE Area 21,720 Sq. Ft.

-Building area, inside walls (excluding garage, carport, porches, etc.)..square feet 2,152

-Other construction (pools, additions, etc.) 808 Sq. Ft. PATIO & GARAGE

-Contract price (excluding land, carpeting, appliances, landscaping, etc) \$ 48,000⁰⁰

-Total cost of permit \$ 260⁰⁰

-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 building must be completed in accordance with the approved plan, and that the site will be clean and rough-graded within the 12 month period.

[Signature]
General Contractor

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 Approval for 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.

[Signature]
Owner

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

TOWN RECORD Date submitted _____

Approved: [Signature] Building Inspector Date 8/30/78

Approved: [Signature] Commissioner Date 31 Aug '78

Certificate of Occupancy issued March 21, 1979 Date 868

Application/Permit No. HD 78-716

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

MARTIN County Health Dept.

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

DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES
DIVISION OF HEALTH
Application and Permit of Individual Sewage Disposal Facilities

Well MUST be installed BEFORE a Final approval is issued.

Section I - Instructions:

1. Percolation test data, soil profile and water table elevation information must be attached. (Note: Test must be made at proposed location of system).
2. Existing building and proposed buildings on lot must be shown and drawn to scale at their location or proposed location (Use block on this sheet or attach plot plan).
3. Proposed location of septic tank must be shown on plan.
4. Any pond or stream areas must be indicated on the plan.

5. Indicate name and date of recording of subdivision. If not recorded, attach metes and bounds description.
6. Complete the following information section.

Notes:

1. Not valid if sewer is available.
2. Individual well must be 75 feet from any part of system.
3. Call 287-2211 and give this office a 24-hour notice when ready for inspection

Section II - Information:

1. Property Address (Street & House No.) NEED N.E. CORN KNOWLES RD. SEAWALK RD.
 Lot 1 Block _____ Subdivision KNOWLES SUBDIVISION BK. 6, P. 90
 Date Recorded 6/24/75 Directions to Job NORTH ON SEAWALK POINT RD. TO KNOWLES RD., CORN. LOT RIGHT
2. Owner or Builder ROBERT HERRICK
 P.O. Address 1007 EAST ST. City FT. PIERCE

3. Specifications 3 BDRM

Tank _____	Drainfield _____
Gals. _____	ft. of 6" Clay tile or 5" perforated plastic drain in a 3' trench or _____
<u>900</u> Gals. <u>255</u>	ft. of 4" clay drain or 4" perforated plastic drain in an 18" trench

Scale 1" = 50'

(Rear)

REMOVE ALL IMPERVIOUS MATERIALS TO A DEPTH OF 6' AND BACKFILL WITH A GOOD GRADE OF SAND IN ENTIRE AREA OF DRAINFIELD.

SEE ATTACHED PLOT PLAN SHEET 3 OF 3

4. House to be constructed:
 Check one: _____ FHA
 _____ VA _____ Conventional

This is to certify that the project described in this application, and as detailed by the plans and specifications and attachments will be constructed in accordance with state requirements.

PRICE ENGINEER, FOR:

Applicant: ROBERT HERRICK
Please Print

Signature: [Signature]

(Front)
(Name of Street or State Road)

Date: AUGUST 16, 1978

*****DO NOT WRITE BELOW THIS LINE*****

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions: _____

The above signed application has been found to be in compliance with Chapter 17-1 Florida Administrative Code, and construction is hereby approved, subject to the above specifications and conditions.

By: [Signature] County Health Dept. Martin Date 8/22/78

Section IV - Final Construction Approval

Construction of installation approved: _____ Yes _____ No

Date: _____ By: _____

FHA No. _____ VA No. _____

868

DEPARTMENT OF HEALTH AND REHABILITATIVE
SERVICES

DIVISION OF HEALTH

INDIVIDUAL SEWAGE DISPOSAL FACILITIES
DATA SHEET

Location: N.E. CORNER KNOWLES RD. & SEAWALK RD. Applicant: PRICE ENGINEERING CO., FOR: ROBERT HERRICK
 LOT # 1, KNOWLES S/D County MARTIN.

NOTE: This septic tank system is not located within 50 feet of the high water line of a lake, stream, canal or other waters, nor within 75 feet of any private well; nor within 100 feet of any public water supply; nor within 10 feet of water supply pipes; nor within 100 feet of any public sewer system.

Plot plan must show all data required in 10D-60: 2(a) and all other pertinent data.

SEE ATTACHED
PLOT PLAN
SHT. 3 OF 3

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

PLAN
Scale: 1" = _____

SOIL DATA

0	CL. I, G.P. SP.	0'-8"
1		
2		
3		
4	CL. I, G.P. SW.	4'-0"
5	WATER TABLE	
6		
7		
8		

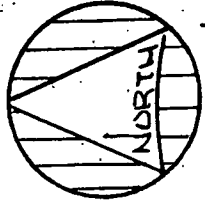
LEGEND

Drainage Pattern
Proposed Septic Tank and Drainfield
Proposed Water Supply Well
Existing Water Supply Well
Soil Boring & Percolation Test Location:

Soil Boring Log:

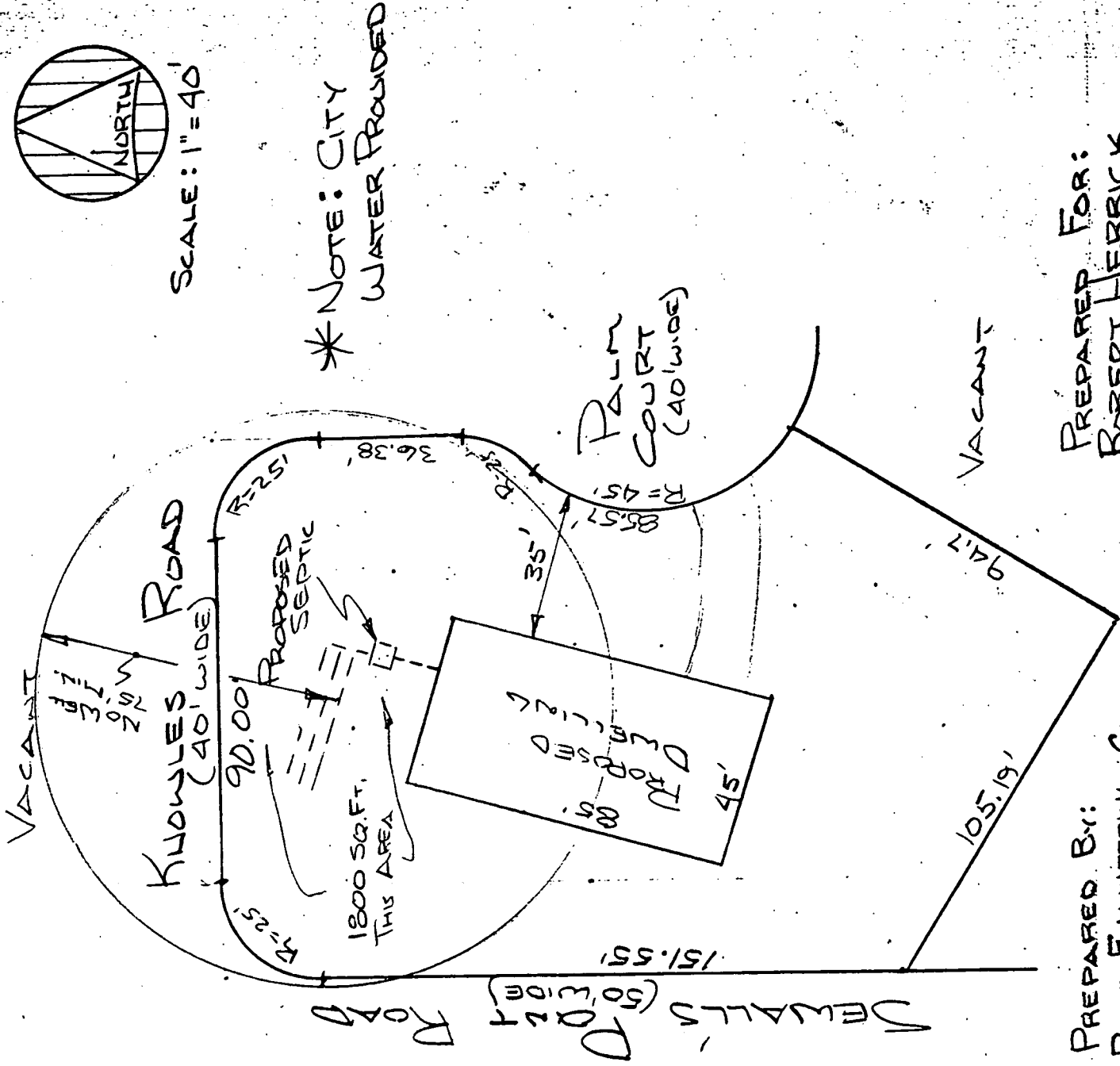
AS SHOWN ABOVE
 Soil Identification: CLASS _____ GROUP _____
 Soil Characteristics SANDY
 Percolation Rate 1/2 min/inch
 Water Table Depth 4'-6"
 Water Table Depth During Wet Season 4'-0"
 Compacted Fill of -0- Req'd
 Compacted Fill Checked By: _____
 Date _____

Ronald S. Price
 CERTIFIED BY:
RONALD S. PRICE
 Florida Professional
 Number 11788
 Date 8/16/78 Job # 78-251
 Sheet 3 Of 3



SCALE: 1" = 40'

Dwelling Under Construction
Septic Front Yard



* NOTE: CITY WATER PROVIDED

PREPARED BY:
PRICE ENGINEERING CO.
STUART, FLORIDA

PREPARED FOR:
ROBERT HERRICK
FT. PIERCE, FLORIDA

Plot Plan
- DESCRIPTION -

BEING KNOWN AS LOT 1, BLOCK A
AS RECORDED IN PLAT BOOK 6,
PAGE 90, PUBLIC RECORDS OF
MARTIN COUNTY, FLORIDA.

Ronald Price

868

BESSEMER PROPERTIES

A DIVISION OF

BESSEMER SECURITIES CORPORATION

249 ROYAL PALM WAY

PALM BEACH, FLORIDA 33480

August 25, 1978

Mr. Robert S. Herrick
5900 Orange Avenue
Fort Pierce, Florida 33450

Re: Lot 1, Knowles Subdivision

Dear Mr. Herrick:

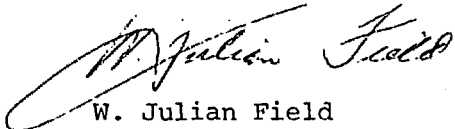
Enclosed is a set of plans for the proposed residence which has been approved by Bessemer Securities Corporation.

In approving these plans it is understood that the floor area of the residence shall not be less than 2,500 square feet, not including the area of porches unless roofed and closed in on three sides, carports or outbuildings, and shall cost not less than \$35,000.00.

It is also understood that you will comply with the Zoning Code and Ordinances of the Town of Sewall's Point.

The plans indicate that the residence will have #1 red cedar shingle roof which is also acceptable.

Sincerely yours,



W. Julian Field

WJF:ms
Enclosure

Deed

This Deed, Dated this _____ day of _____ A. D. 19 78

between BESSEMER SECURITIES CORPORATION, a Delaware corporation
authorized to transact business in the State of Florida.

hereinafter called the Grantor , which term shall include when used herein, wherever the
context so requires or admits, its successors and assigns,

and ROBERT S. HERRICK and RITA P. HERRICK, his'wife

hereinafter called the Grantees, which term shall include when used herein, wherever the
context so requires or admits, their heirs and assigns,

Grantees' address:

WITNESSETH: That for the sum of Ten Dollars (\$10.00) and other good and
valuable considerations, said Grantor does hereby grant, bargain, sell, alien, remise,
release, convey and confirm unto the said Grantee all that certain piece of property and
tract of land situate in the County of Martin and State of Florida,
described as follows:

Lot 1, of KNOWLES SUBDIVISION, a subdivision in the Town of
Sewall's Point, Florida, according to the plat thereof on
file and of record in the office of the Clerk of the Circuit
Court in and for Martin County, Florida, in Plat Book 6,
page 90.

SUBJECT, however, to the following:

1. Taxes for the year 1978 and subsequent years.
2. The zoning laws of the Town of Sewall's Point, Florida.
3. The matters shown on the aforesaid plat.
4. The Declaration of Protective Covenants recorded in Official
Record Book 387, page 949, as amended by Termination of Restrictive
Covenants recorded in Official Record Book 447, page 2012, which
Declaration is deemed to include the Articles of Incorporation of
Knowles Property Owners Association, Inc. recorded in Official Record
Book 387, page 957, and the By-Laws of Knowles Property Owners
Association, Inc. recorded in Official Record Book 387,, page 962
(all recording references being to the public records of Martin
County, Florida).
5. The further protective covenants, which shall run with the
land, reading as follows:

This instrument was prepared by
GEORGE P. ORD
Alley, Maass, Rogers, Lindsay & Chauncey
321 Royal Poinciana Plaza
P. O. Box 431
Palm Beach, Florida 33480

868

And the said Grantor does hereby warrant the title to said land against the lawful claims of all persons claiming under, by or through it.

IN WITNESS WHEREOF, the said Grantor has caused these presents to be executed by its Vice President, and its corporate seal to be affixed, attested by its Assistant Secretary, the day and year aforesaid.

BESSEMER SECURITIES CORPORATION

(CORPORATE SEAL)

By [Signature]
Its Vice President.

Attest:

[Signature]

Its Assistant Secretary.

Signed, sealed and delivered in the presence of:

[Signature]

[Signature]

STATE OF Florida
COUNTY OF Palm Beach } ss.

Before me personally appeared W. J. Field
and Harold G. Maass
respectively, Vice President and Ass't Secretary of Bessemer Securities Corporation,
to me well known, and they acknowledged before me that they executed the foregoing instrument as such officers of said corporation, and that they affixed thereto the official seal of said corporation; and I FURTHER CERTIFY that I know the said persons making said acknowledgment to be the individuals described in and who executed the said instrument.

WITNESS my hand and official seal this 24th day of August, 1978.

[Signature]
Notary Public in and for the County and State Aforesaid.

My Commission expires: [Signature]

1
- GRAD

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date March 21, 1979

This is to request that a Certificate of Approval for Occupancy be issued to ROBERT HERRICK

For property built under Permit No. 868 Dated Aug. 30, 1978

when completed in conformance with the Approved Plans.

[Signature]
Signed

RECORD OF INSPECTIONS

Item	Date	Approved by
Footings	11/26/78	} Jam
Rough plumbing	11/23/78	
Perimeter beam	2/2/79	
Rough electric	2/4/79	
Close in	3/20/78	
Final plumbing	3/29/78	
Final electric	11/30/78	
SLAB		

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Jamagrusca date

Approved by Town Commissioner [Signature] 22 Mar '79 date

Utilities notified March 21, 1979 date

Original Copy sent to _____

(Keep carbon copy for Town files)

868

1352

POOL

TOWN OF SEWALL'S POINT FLORIDA

RECEIVED JUN 65 1981

Permit No. _____

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 sets of complete plans, to scale, including a plot plan showing set-backs; plumbing and electrical layouts, if applicable, and at least two elevations, as applicable.

Owner MR & MRS³ WILKINSON Present address HITCHINSON

Phone 225-1527 ISLAND.

Contractor POOLS BY LAEL Address #50 SHANNON SQ. STUART

Phone 692-1419

Where licensed MARTIN COUNTY License number 000348

Electrical contractor D.J. HARMAN License number _____

Plumbing contractor N/A License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: CONSTRUCTION OF A RESIDENTIAL POOL

AS PER ATTACHED PLANS

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

Subdivision KNOWLES Lot No. 1

Contract price \$ 14,000 Cost of Permit \$ 70⁰⁰

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 a Town Commissioner "Red-tagging" the construction project.

Contractor Greg Schmidt

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 V.A. Wilkinson

TOWN RECORD

Date submitted 6/5/81

Approved: [Signature] Building Inspector Date 6/8/81

Approved: [Signature] Commissioner Date 6/9/81

Final Approval given: 8/5/81 [Signature] Date

Certificate of Occupancy issued None Req. Date

Steel Grounding 6/23/81
Patio Steel 7/13/81

SP/1-79

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.

1 352

1404

FENCE

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1404

Date 9/21/81

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 sets of complete plans, to scale, including a plot plan showing set-backs; plumbing and electrical layouts, if applicable, and at least two elevations, as applicable.

Owner V. Sheppard Wilkinson Present address 2 NE Palm CT

Phone 287-1971

Contractor Prropertyguard Fence Co. Address 1484 NE 24th St. Jensen Bch.

Phone 334-3153

Where licensed Martin County License number 00574

Electrical contractor N/A License number N/A

Plumbing contractor N/A License number N/A

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Approx. 132 feet of 72" Shadowbox wood fence.

Approx. 161 feet of 48" brown vinyl chain link fence.

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

#2 Palm Ct. with the wood fence facing Sewall's Point Road.

Subdivision Knowles Lot No. 1

Contract price \$ 2000.00 Cost of Permit \$ 10.00

Plans approved as submitted Plans approved as marked

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

Contractor Mark M. Crill

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 V. Wilkinson

TOWN RECORD

Date submitted

Approved: J. Mazzucco Building Inspector Date 9/23/81

Approved: J.C. Stubbess Commissioner Date 9/23/81

Final Approval given: Jan. Date 10/23/81

Certificate of Occupancy issued Not Req Date

SP/1-79

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 and the Energy Efficiency Building Code.

1404

1517

SCREEN PORCH

Permit No. 1517

TOWN OF SEWALL'S POINT FLORIDA

RECEIVED

OCT - 8 1982

Date 10-28-82

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

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

Owner Henry D'Angelo Present address 2 Palm Court

Phone 286-4783 Sewell's Pt. S.B.

Contractor Climatrol Address 3718 Interstate Park Rd. N.

Phone 283-8070 Riviera Bch. Fl.

Where licensed _____ License number C.RC001786

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

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

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

2 Palm Court Sewell's Pt.

Subdivision Knowles Lot No. 1

Contract price \$ 560.00 Cost of Permit \$ 25.00

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Climatrol
Brian Moran

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 Henry D'Angelo

TOWN RECORD Date submitted _____

Approved: J. Maguire Building Inspector Date 10/8/82

Approved: _____ Commissioner Date _____

Final Approval given: 10/28/82 Date _____

Certificate of Occupancy issued None Req. Date _____

SP/1-79

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.

#1517

TO:

From: Salvatore Fajore Qualifier
CLIMATROL Company name
3718 INTERSTATE PARK Rd. N. Address
Riviera Beach, Fl. City, State

I hereby authorize the Sewalls Point Building Department to issue permits in the name of CLIMATROL (Company name) signed by BARBARA MURRAY.

I certify that the above authorized person is employed by the firm and understand that I am fully responsible and liable for all acts performed under said permits.

10-8-82
(Date)

Salvatore Fajore
(Signature of Qualifier)

Barbara Murray
(Signature of authorized agent)

State of Florida

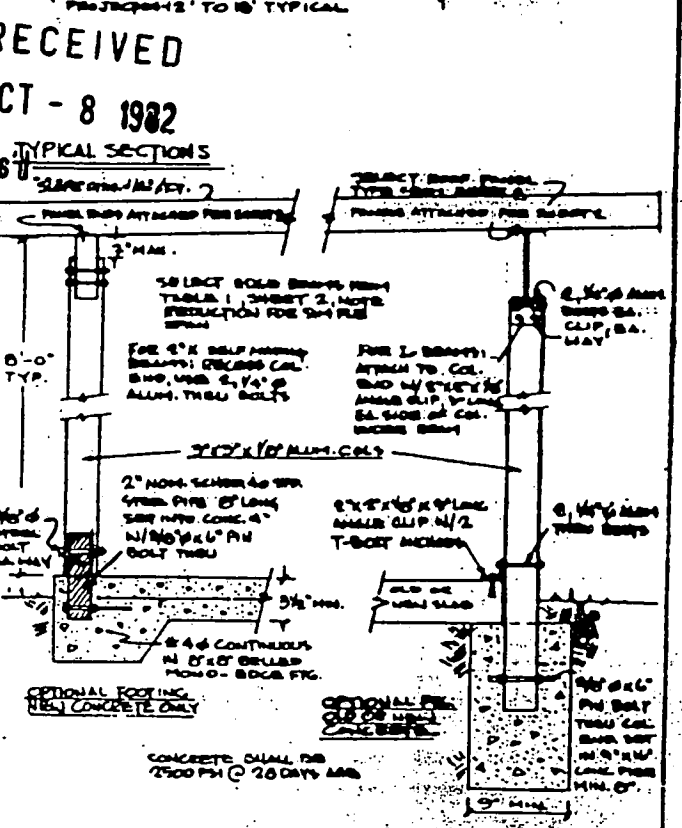
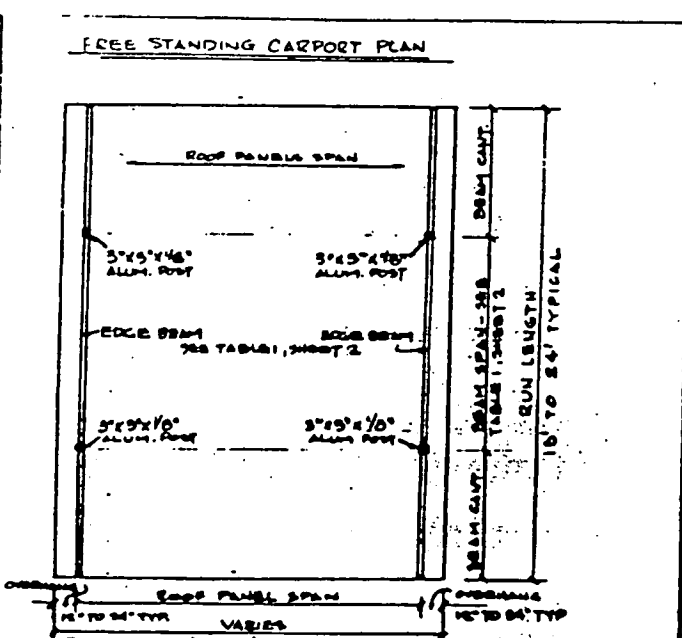
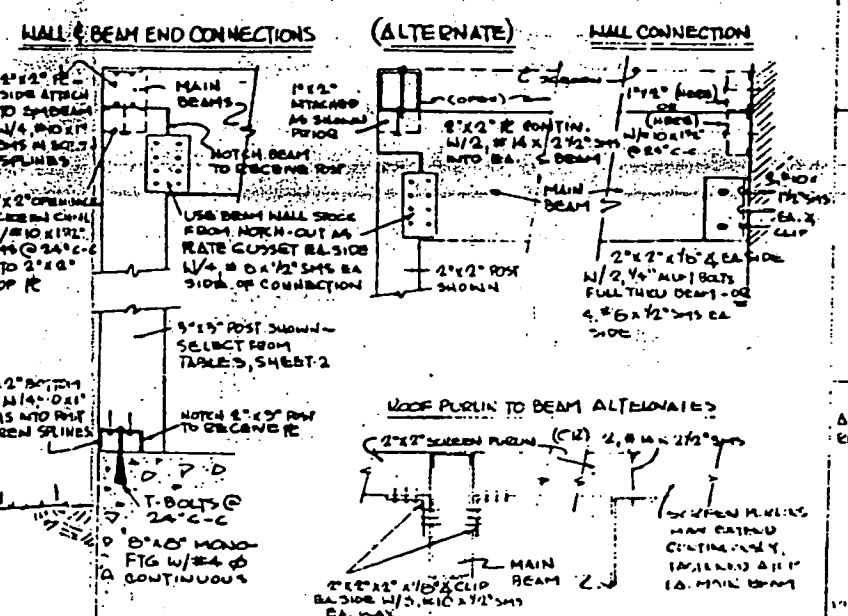
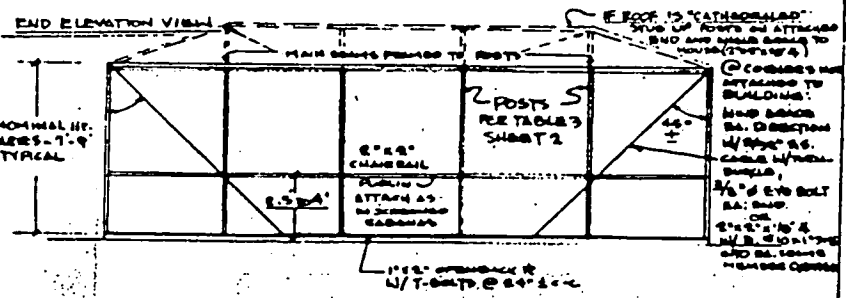
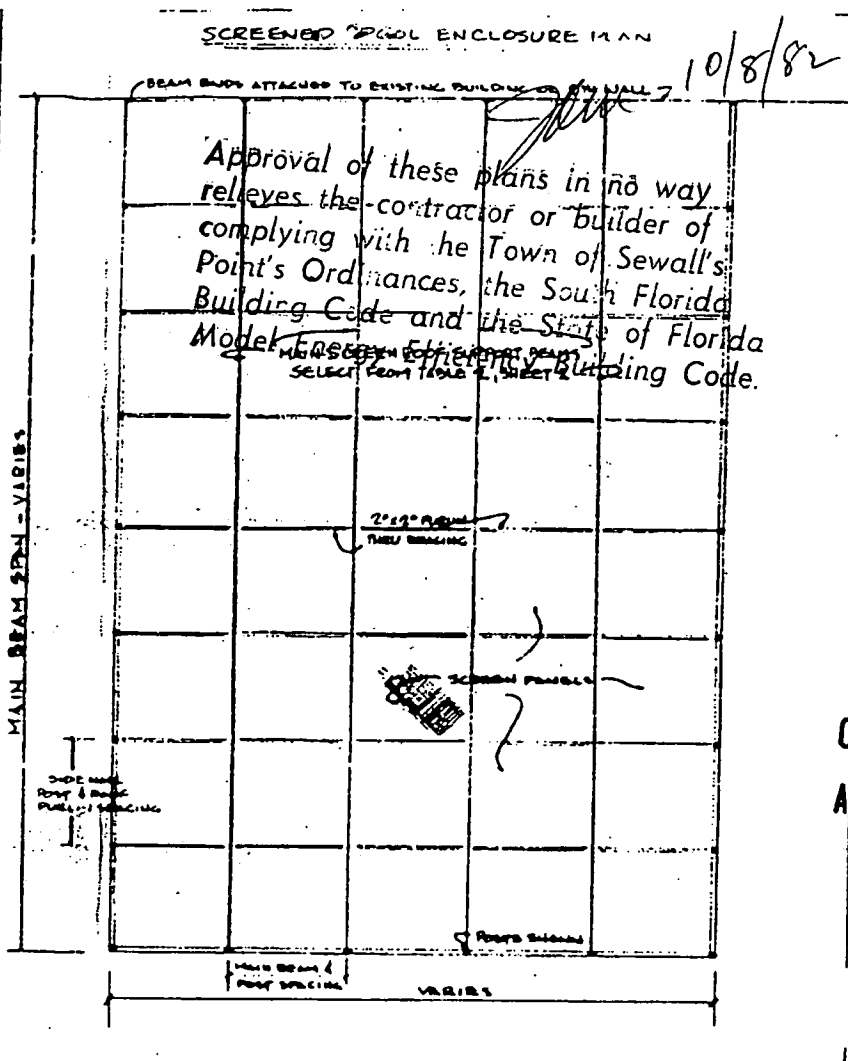
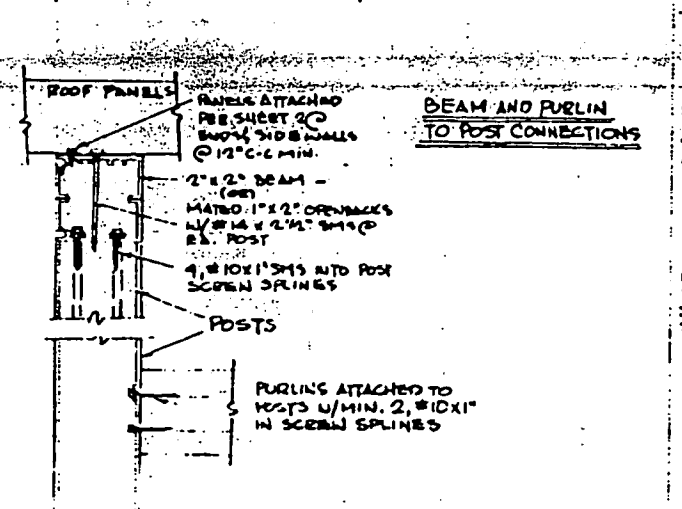
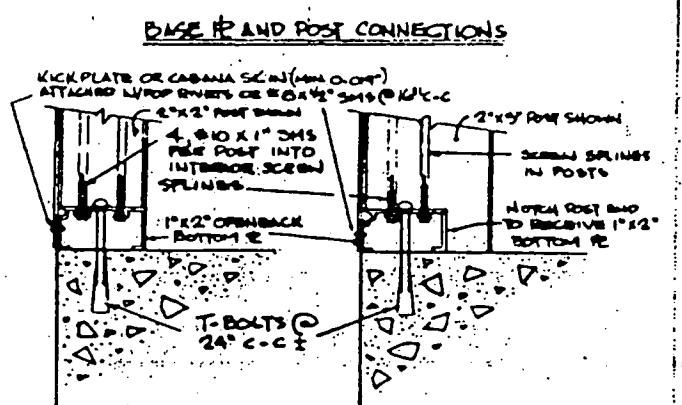
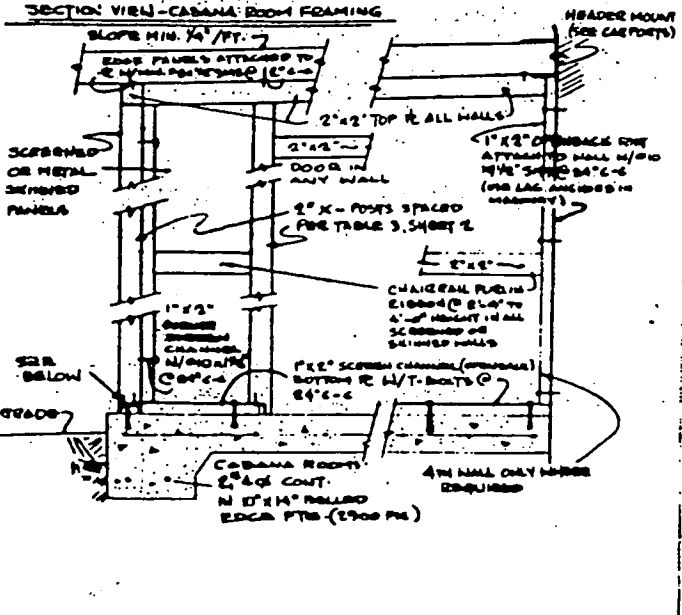
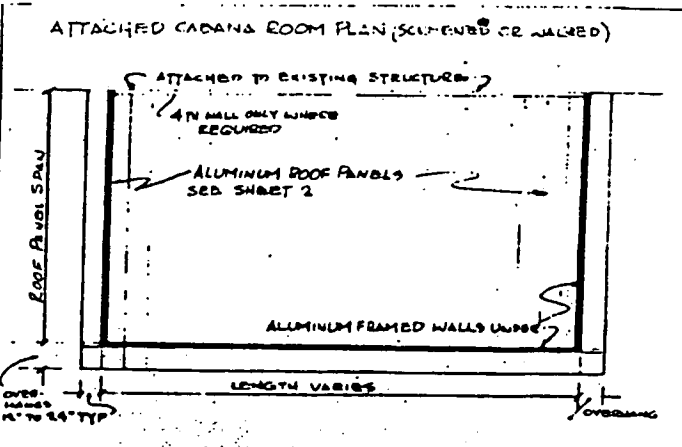
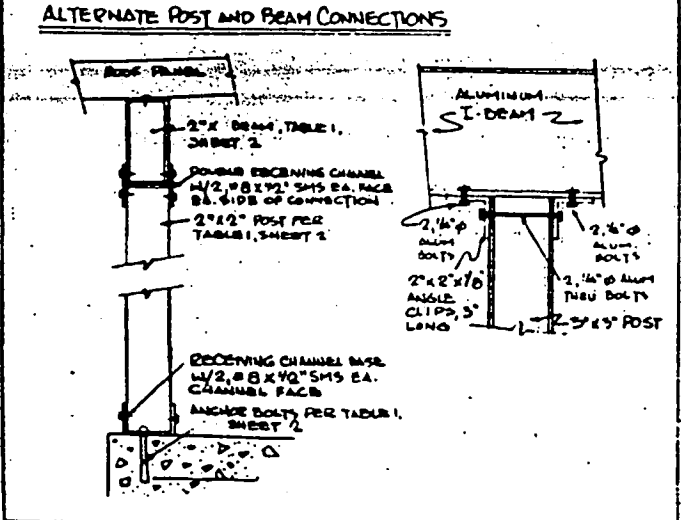
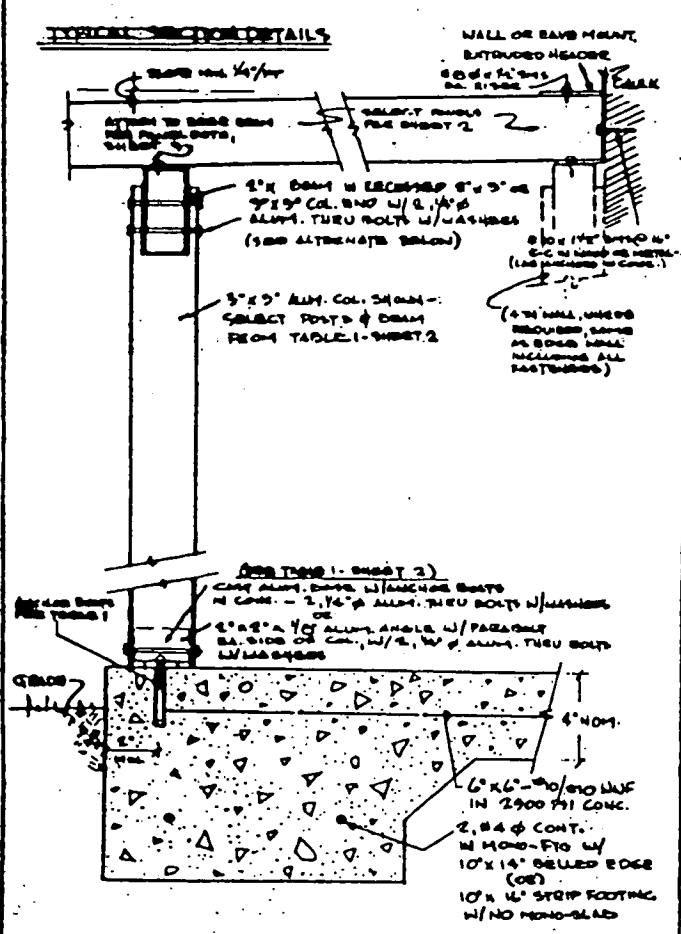
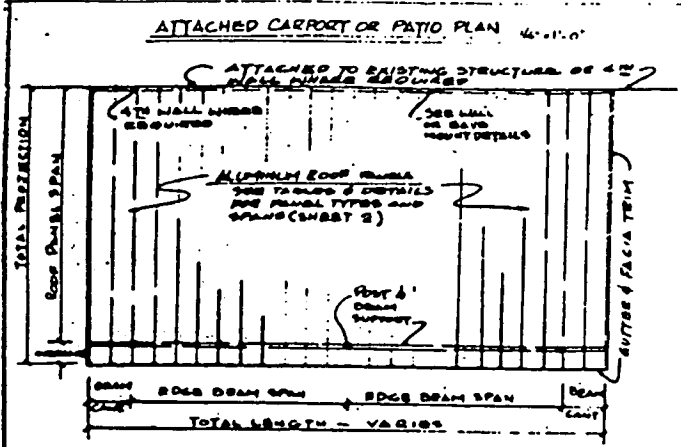
County of Martin

Subscribed and sworn to before me

this 8 day of 10, 19 82.

Notary Public Barbara G. Murray

My commission expires **Notary Public, State Of Florida At Large**
My Commission Expires May 13, 1984
Bonded By SAFECO Insurance Company



STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH SOUTHERN STANDARD BUILDING CODE (SSBC) REQUIREMENTS, FOR LOAD CONDITIONS AS FOLLOWS:

DEAD LOADS: PLUS 20 PSF LIVE LOADS (8 PSF MIN.)

120 MPH WIND VELOCITY PRESSURES.

WHERE LOCAL ORDINANCES IMPOSE FURTHER LIMITATIONS ON WINDS, SUCH ORDINANCES SHOULD BE ADHERED TO IN APPLICATION OF THIS DESIGN.

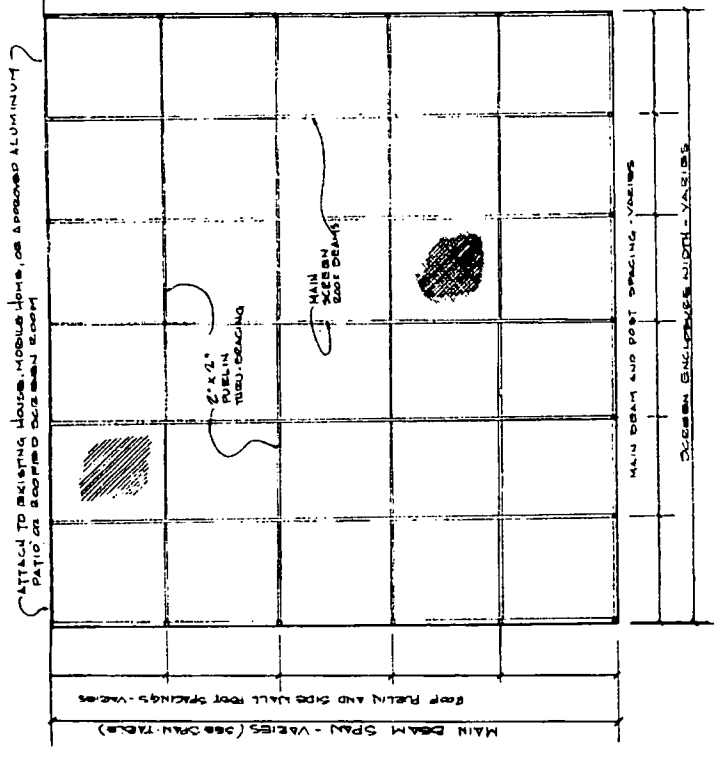
Charles R. Caine
CHARLES R. CAINE, F.L.A. PE #12295

MASTER PLANS
ALUMINUM PATIOS, CARPORTS, SCREENED POOLS, CABANAS & POOL ENCLOSURES FOR 120 MPH WIND REGIONS

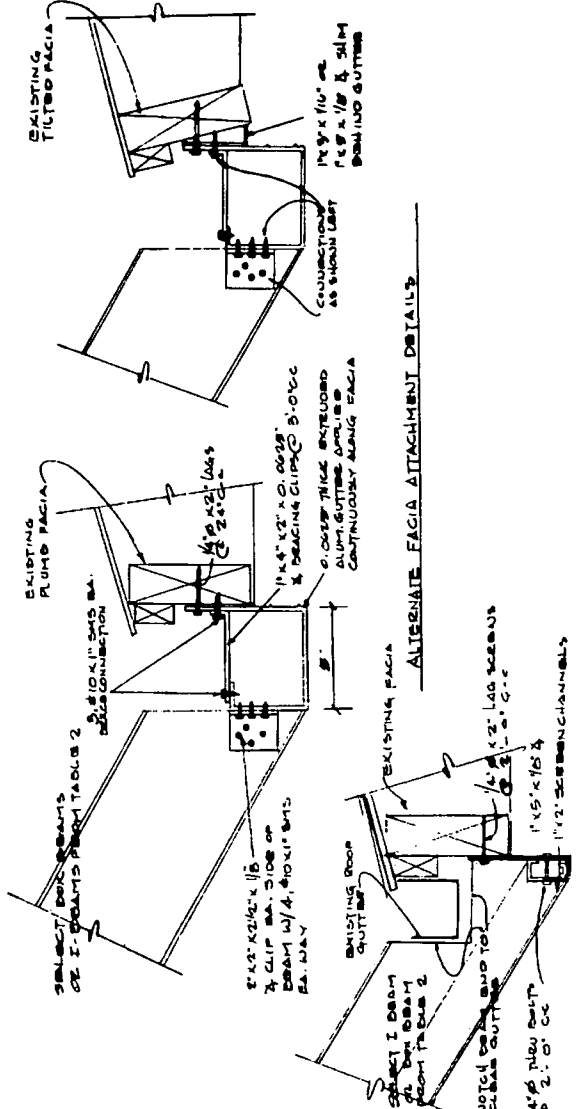
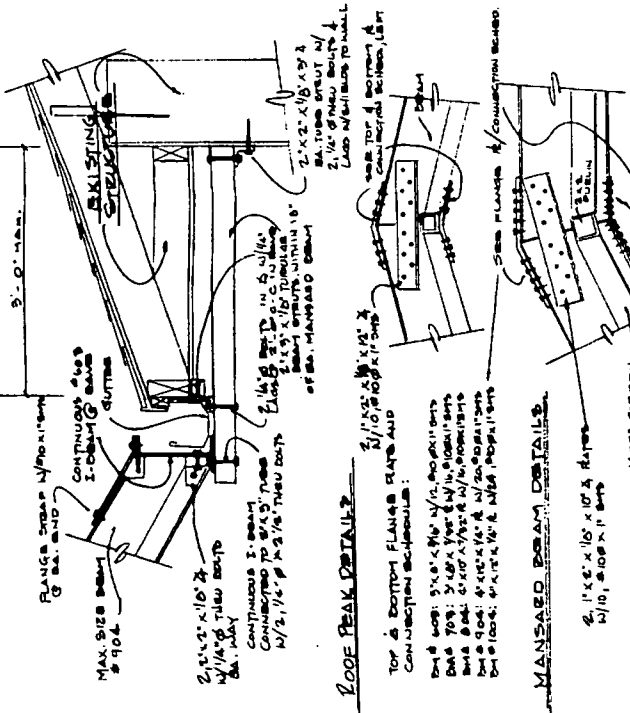
SHEET 1 OF 2
PLAN, SECTION AND DETAIL VIEWS

FOR AMERICAN ALUMINUM DISTRIBUTORS
955 US HIGHWAY 19 SOUTH
CLEARWATER, FLA. 34616

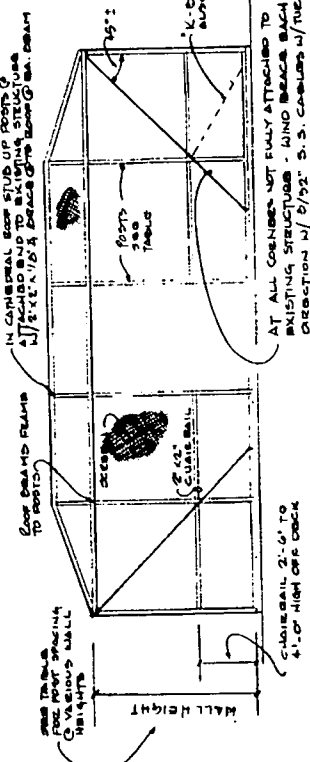
TYPICAL PLAN VIEW



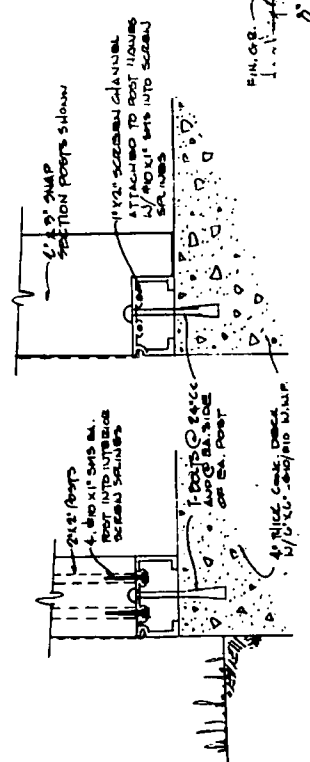
MANSAED SCREEN ROOF ATTACHMENT DETAILS



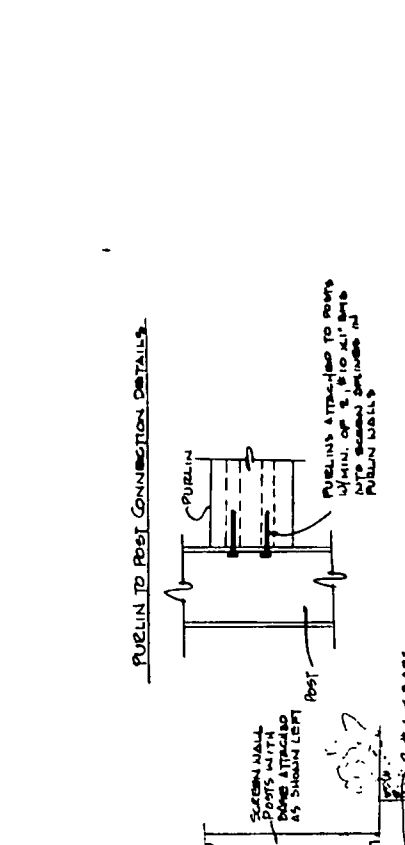
TYPICAL POOL ENCLOSURE ELEVATION



TYPICAL PASE PLATE AND POST CONNECTION DETAILS



ALTERNATE ROOF PURLIN CONNECTION DETAILS



TYPICAL SCREEN ENCLOSURE FOOTING DETAILS

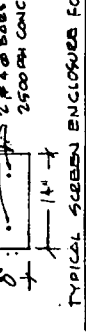


TABLE 1 - POST SIZES AND SPACING BY SCREENED WALL HEIGHT

NOMINAL WALL HEIGHT	POST SIZE	SPACING	MAXIMUM WALL HEIGHT
7'-0"	4x4	8'-0"	17'-0"
8'-0"	4x6	8'-0"	17'-0"
9'-0"	4x8	8'-0"	17'-0"
10'-0"	4x10	8'-0"	17'-0"
11'-0"	4x12	8'-0"	17'-0"
12'-0"	6x6	8'-0"	17'-0"

TABLE 2 - SPAN TABLE FOR SCREENED ROOF BEAMS

BEAM SIZE	MAXIMUM CLEAR SPAN FOR SCREENED ROOF BEAMS AT VARIOUS BEAM SPACING
2x4x4 SPAN BEAM	10'-0"
2x6x6 SPAN BEAM	12'-0"
2x8x8 SPAN BEAM	14'-0"
2x10x10 SPAN BEAM	16'-0"
2x12x12 SPAN BEAM	18'-0"
2x14x14 SPAN BEAM	20'-0"
2x16x16 SPAN BEAM	22'-0"
2x18x18 SPAN BEAM	24'-0"
2x20x20 SPAN BEAM	26'-0"
2x22x22 SPAN BEAM	28'-0"
2x24x24 SPAN BEAM	30'-0"
2x26x26 SPAN BEAM	32'-0"
2x28x28 SPAN BEAM	34'-0"
2x30x30 SPAN BEAM	36'-0"
2x32x32 SPAN BEAM	38'-0"
2x34x34 SPAN BEAM	40'-0"
2x36x36 SPAN BEAM	42'-0"
2x38x38 SPAN BEAM	44'-0"
2x40x40 SPAN BEAM	46'-0"
2x42x42 SPAN BEAM	48'-0"
2x44x44 SPAN BEAM	50'-0"
2x46x46 SPAN BEAM	52'-0"
2x48x48 SPAN BEAM	54'-0"
2x50x50 SPAN BEAM	56'-0"
2x52x52 SPAN BEAM	58'-0"
2x54x54 SPAN BEAM	60'-0"
2x56x56 SPAN BEAM	62'-0"
2x58x58 SPAN BEAM	64'-0"
2x60x60 SPAN BEAM	66'-0"
2x62x62 SPAN BEAM	68'-0"
2x64x64 SPAN BEAM	70'-0"
2x66x66 SPAN BEAM	72'-0"
2x68x68 SPAN BEAM	74'-0"
2x70x70 SPAN BEAM	76'-0"
2x72x72 SPAN BEAM	78'-0"
2x74x74 SPAN BEAM	80'-0"
2x76x76 SPAN BEAM	82'-0"
2x78x78 SPAN BEAM	84'-0"
2x80x80 SPAN BEAM	86'-0"
2x82x82 SPAN BEAM	88'-0"
2x84x84 SPAN BEAM	90'-0"
2x86x86 SPAN BEAM	92'-0"
2x88x88 SPAN BEAM	94'-0"
2x90x90 SPAN BEAM	96'-0"
2x92x92 SPAN BEAM	98'-0"
2x94x94 SPAN BEAM	100'-0"
2x96x96 SPAN BEAM	102'-0"
2x98x98 SPAN BEAM	104'-0"
2x100x100 SPAN BEAM	106'-0"

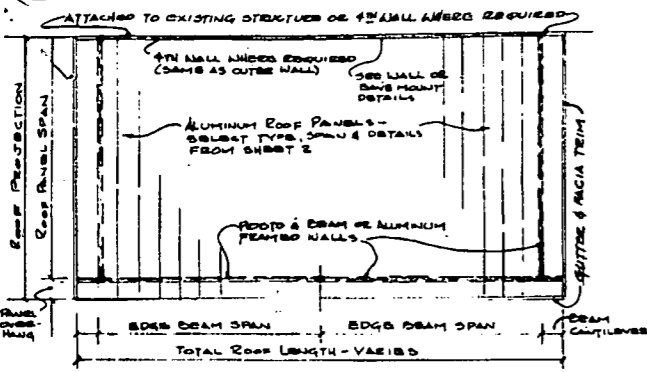
SECTION PROPERTIES

SECTION NO.	SECTION TYPE	SECTION AREA (SQ. FT.)	SECTION PERIMETER (L.F.)	SECTION WEIGHT (LBS.)
101	4x4	16.00	16.00	112.00
102	4x6	24.00	24.00	168.00
103	4x8	32.00	32.00	224.00
104	4x10	40.00	40.00	280.00
105	4x12	48.00	48.00	336.00
106	6x6	36.00	36.00	252.00
107	6x8	48.00	48.00	336.00
108	6x10	60.00	60.00	420.00
109	6x12	72.00	72.00	504.00
110	8x8	64.00	64.00	448.00
111	8x10	80.00	80.00	560.00
112	8x12	96.00	96.00	672.00
113	10x10	100.00	100.00	700.00
114	10x12	120.00	120.00	840.00
115	12x12	144.00	144.00	1008.00

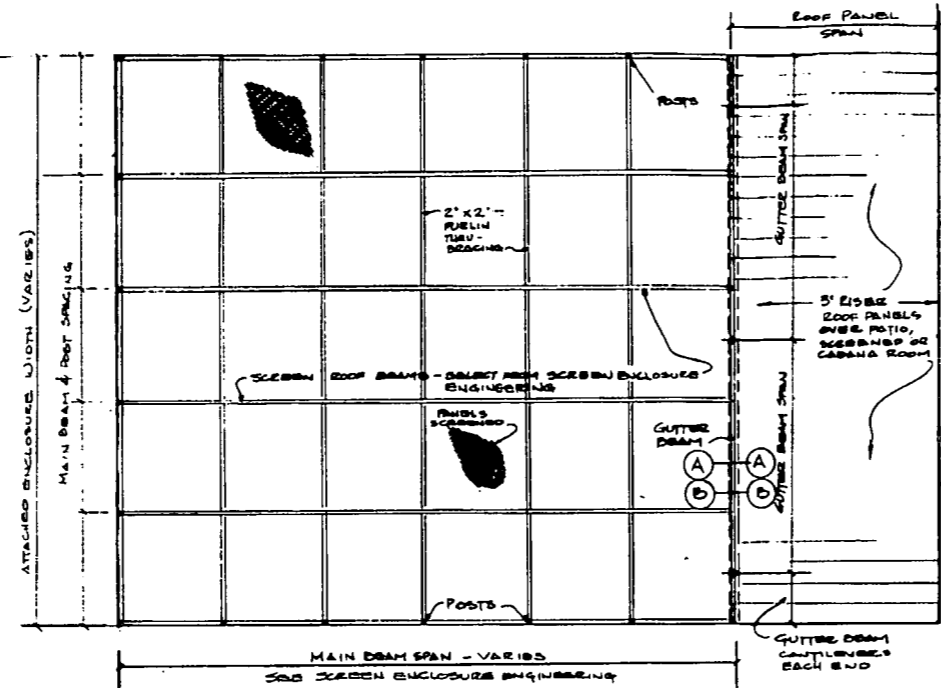
CONCRETE: f'c 2500 PSI
 STEEL: A36
 ALUMINUM: 6061-T6
 GLASS: 1/2\"/>

CLIMATECO FLORIDA CORPORATION
 929 SOUTH INDUSTRY ROAD
 COCOA, FLORIDA 32909

PLAN VIEW: ATTACHED CARPORT PATIO OF CABANA ROOM (SCREENED OR WALLS)



SCREENED POOL ENCLOSURE ATTACHED TO PATIO OF CABANA ROOM



RECEIVED

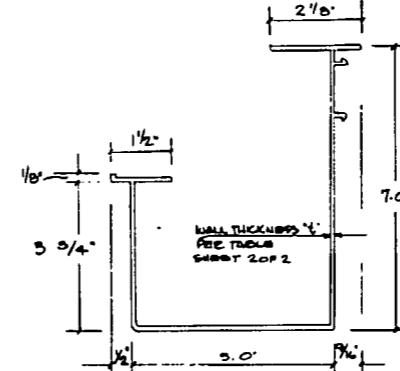
OCT - 8 1982

Ans'd.....

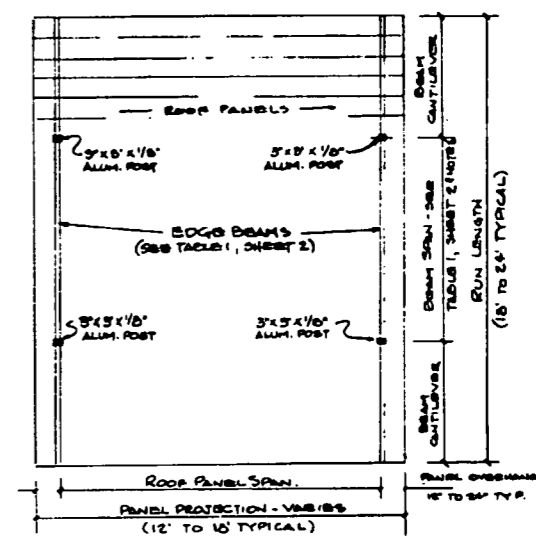
EXISTING STRUCTURE

JLW 10/8/82

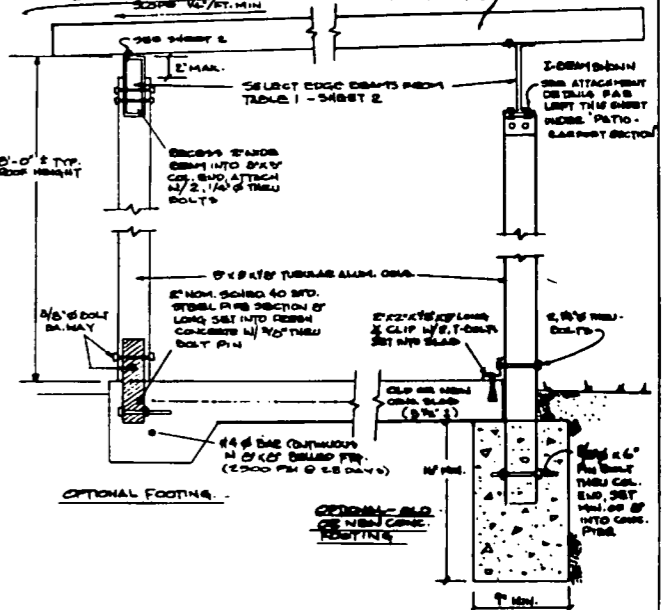
EXTENDED STRUCTURAL GUTTER BEAM DETAILS (SEE SECT. B-D, BELOW) HALF SCALE



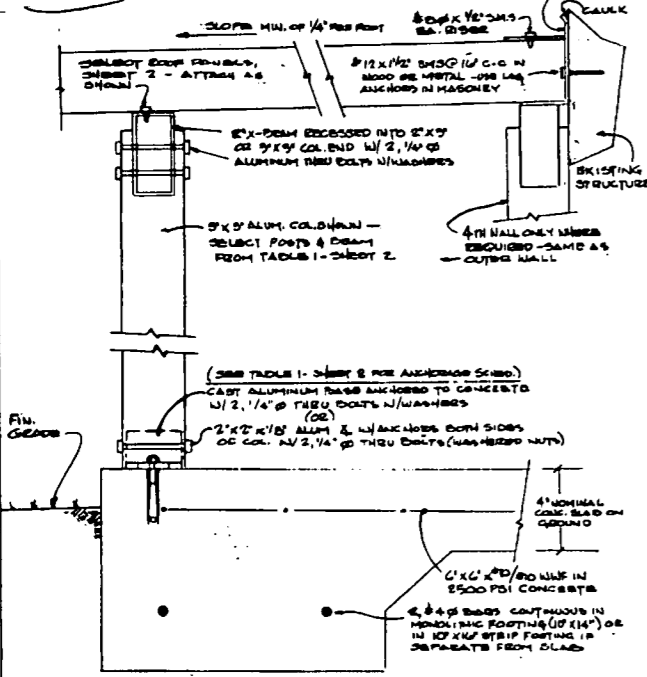
PLAN VIEW - FREE STANDING CARPORT



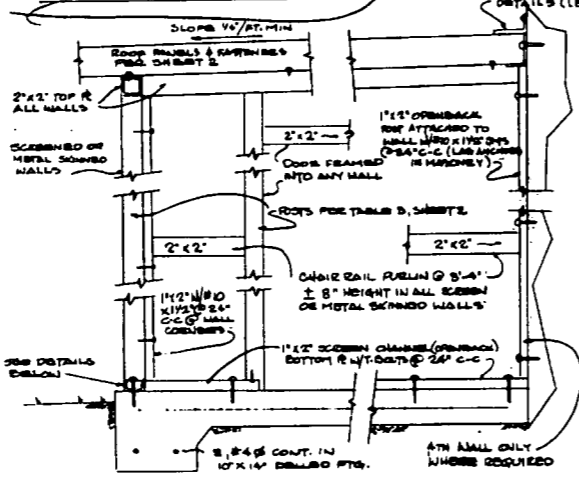
TYPICAL SECTION DETAILS



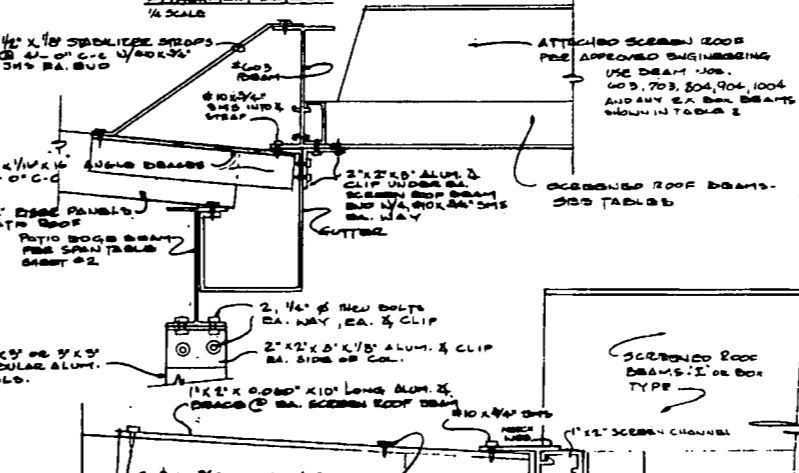
TYPICAL PATIO-CARPORT SECTION DETAILS



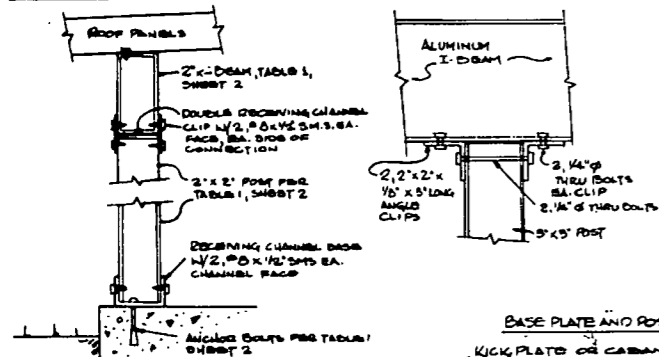
TYPICAL CABANA ROOM SECTION DETAILS



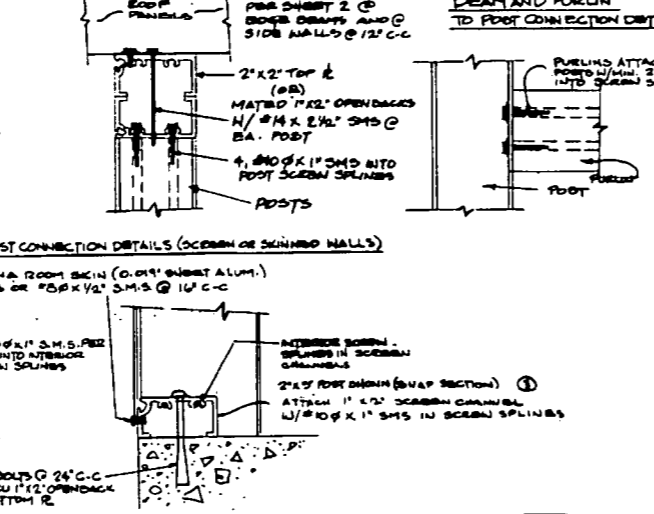
SECTION A-A: STACKED GUTTER AND BEAM ATTACHMENT DETAILS



ALTERNATE ROOF AND BEAM CONNECTION DETAILS



BASE PLATE AND POST CONNECTION DETAILS (SCREENED OR SHIMBO WALLS)



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.

SELECT METAL SCREEN PARTS ARE DESIGNED IN ACCORDANCE WITH ALUMINUM ASSOCIATION STANDARDS.

STRUCTURES DETAILED AND SPECIFIED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH STANDARD BUILDING CODE (1979) FOR LOAD CONDITIONS AND FOLLOWING:

WINDS: LIVE LOADS AND APPLICABLE: 20 PSF LIVE LOADS & DEAD LOADS (4" ± 1/2" MAX.)

ALL WIND LOADS: 120 MPH WIND VELOCITY PRESUMPTIONS

ADHERE TO LOCAL ORDINANCES WHICH IMPROVE FURTHER LIMITATIONS ON PROJECTIONS, SPANS AND LOAD CONDITIONS.

ALSO DESIGNED TO CONFORM TO PALM BEACH COUNTY CODES, 120 MPH WINDS, 30 PSF LL AND 75 PSF LL BASIC SERVICE WITH APPROPRIATE FACTORS APPLIED. ALSO CONFORMS TO THE SOUTH FLORIDA BUILDING CODES.

10-27-81
CLAYTON R. CLINE, P.E.
P.A. REG. NO. 12295
9-24-81 7-27-81
10-28-81

MASTER PLANS - ALUMINUM PATIOS, CARPORTS, SCREEN ROOMS, CABANAS, (120 MPH WIND REGIONS)

PLAN, SECTION AND DETAIL VIEWS

SHEET 1 OF 2

C-1997-A

CLINE ASSOCIATES ENGINEERS ARCHITECTS 3501 A U.S. HWY. 19 N. PALM HARBOR, FL 33663 TEL: (813) 796-1980

PREPARED FOR: CLIMATED FLORIDA CORPORATION 929 SOUTH INDUSTRY ROAD COCOA, FLORIDA 32922

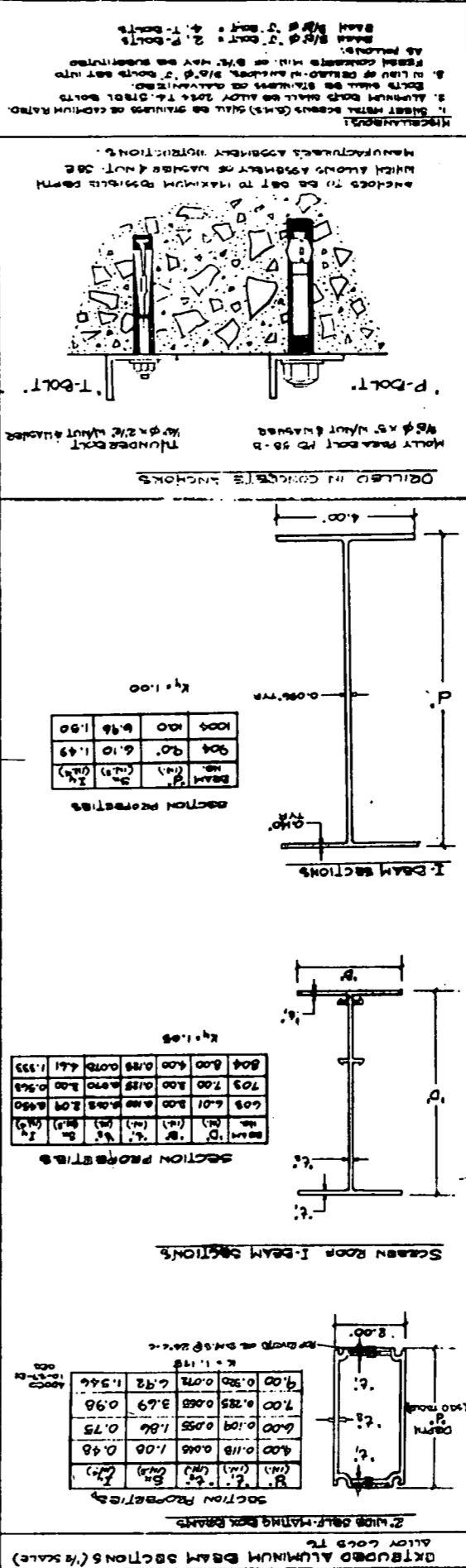
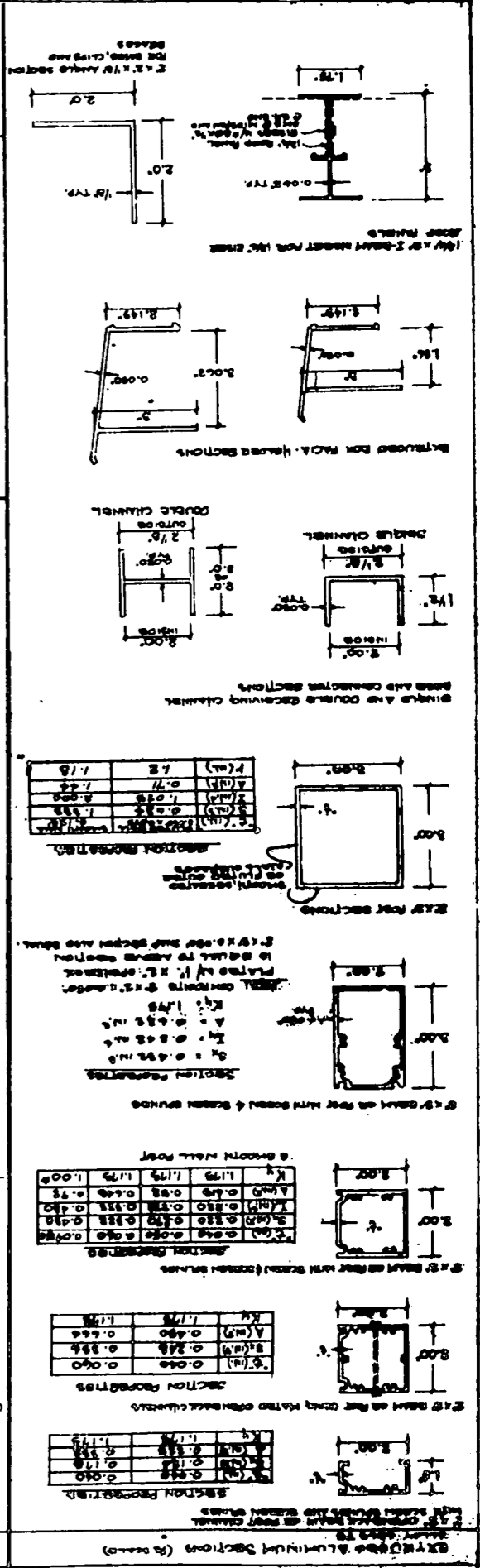


TABLE 1 - SPAN TABLE FOR BEAM BEAMS IN CANOPY ROOF STRUCTURES

MAXIMUM CLEAR SPANS FOR SCANNED BEAM BEAMS

BEAM SIZE	2 X 2 X 0.060	2 X 3 X 0.090	2 X 4 X 0.120	2 X 6 X 0.150	2 X 7 X 0.180	2 X 8 X 0.210	2 X 10 X 0.240	2 X 12 X 0.270	2 X 14 X 0.300	2 X 16 X 0.330	2 X 18 X 0.360	2 X 20 X 0.390	2 X 22 X 0.420	2 X 24 X 0.450	2 X 26 X 0.480	2 X 28 X 0.510	2 X 30 X 0.540
10 FT	1.0	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6
12 FT	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7
14 FT	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8
16 FT	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9
18 FT	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0
20 FT	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1
22 FT	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2
24 FT	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2	3.3
26 FT	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2	3.3	3.4
28 FT	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2	3.3	3.4	3.5
30 FT	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2	3.3	3.4	3.5	3.6

TABLE 2 - SPAN TABLE FOR SCANNED ROOF BEAMS

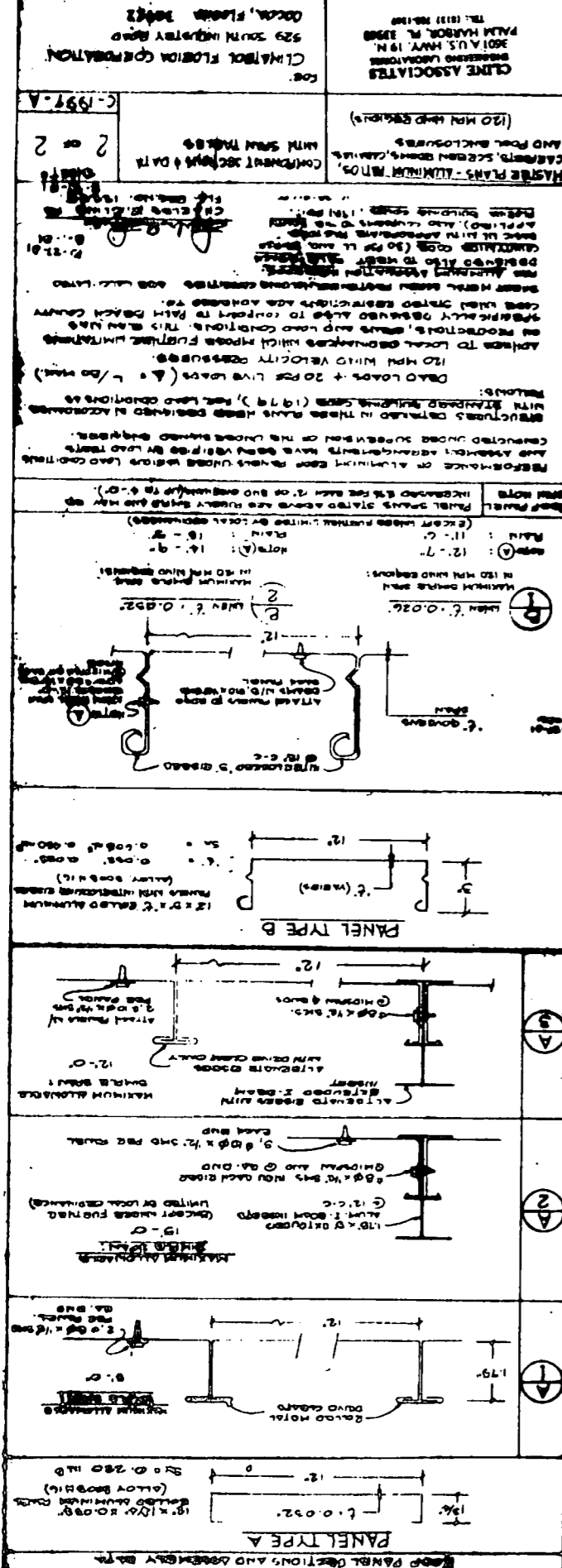
MAXIMUM CLEAR SPANS FOR SCANNED ROOF BEAMS

BEAM SIZE	2 X 4 X 0.120	2 X 6 X 0.150	2 X 8 X 0.210	2 X 10 X 0.240	2 X 12 X 0.270	2 X 14 X 0.300	2 X 16 X 0.330	2 X 18 X 0.360	2 X 20 X 0.390	2 X 22 X 0.420	2 X 24 X 0.450	2 X 26 X 0.480	2 X 28 X 0.510	2 X 30 X 0.540
10 FT	1.0	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3
12 FT	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4
14 FT	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5
16 FT	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6
18 FT	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7
20 FT	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8
22 FT	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9
24 FT	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0
26 FT	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1
28 FT	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2
30 FT	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2	3.3

TABLE 3 - SPAN TABLE FOR SCANNED DECK BEAMS

MAXIMUM CLEAR SPANS FOR SCANNED DECK BEAMS

BEAM SIZE	2 X 4 X 0.120	2 X 6 X 0.150	2 X 8 X 0.210	2 X 10 X 0.240	2 X 12 X 0.270	2 X 14 X 0.300	2 X 16 X 0.330	2 X 18 X 0.360	2 X 20 X 0.390	2 X 22 X 0.420	2 X 24 X 0.450	2 X 26 X 0.480	2 X 28 X 0.510	2 X 30 X 0.540
10 FT	1.0	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3
12 FT	1.1	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4
14 FT	1.2	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5
16 FT	1.3	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6
18 FT	1.4	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7
20 FT	1.5	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8
22 FT	1.6	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9
24 FT	1.7	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0
26 FT	1.8	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1
28 FT	1.9	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2
30 FT	2.0	2.1	2.2	2.3	2.4	2.5	2.6	2.7	2.8	2.9	3.0	3.1	3.2	3.3



CLINE ASSOCIATES
552 SOUTH HAVEN ROAD
P.O. BOX 100
SOUTH HAVEN, CT 06488

CLIMATE CONTROL SYSTEMS
552 SOUTH HAVEN ROAD
P.O. BOX 100
SOUTH HAVEN, CT 06488

CLIMATE CONTROL SYSTEMS
552 SOUTH HAVEN ROAD
P.O. BOX 100
SOUTH HAVEN, CT 06488

LEGAL DESCRIPTION

LOT 1, KNOWLES

S/D PLAT BOOK 6, PAGE 30

MARLINCO FLA. SITE PLAN

N 33°03'05" W

SEWALLS PT. RD.

ACCESS

151.55

← 155' →

25

25.00

15'

N: 56°56'55" E

35

70'

50.00

KNOWLES RD.

PALM CT.

45.00

85.57

35

93.00

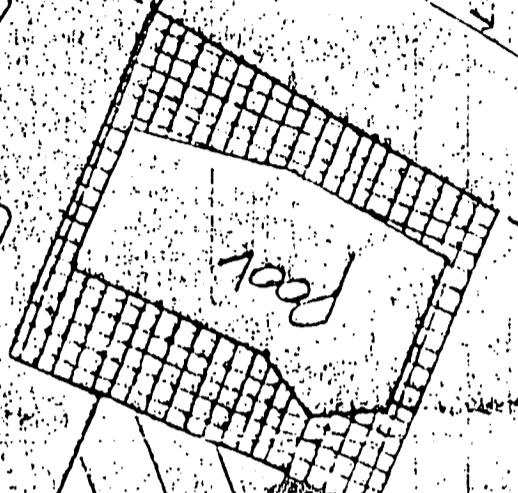
25.00

52

20

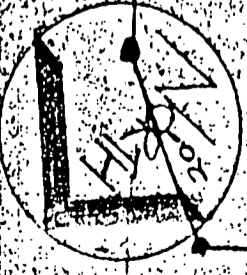
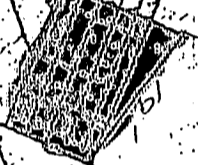
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PROPANE TANK



Pool

RESIDENCE



35

1831

POOL ENCLOSURE

TOWN OF SEWALL'S POINT FLORIDA

287-2455

Permit No. 1831

Date 7-8-85

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 HENRY D'ANGELO Present address 2 PALM COURT

Phone 286-4783

General contractor GAK ALUMINUM Address 3110 S.E. SLATER STREET

Phone 283-1297

Where licensed MARION COUNTY License No. 00122

Plumbing contractor _____ License No. _____

Electrical contractor _____ License No. _____

Air-conditioning contractor _____ License No. _____

Describe the building, or alteration to existing building POOL ENCLOSURE

Name the street on which the building, its front building line and its front yard will face SEWALL'S POINT RD.

Subdivision KNOWLES ^{S/D PLAT BOOK 6} Page 90 Lot No. 1 Area KNOWLES
MARION CO.

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

Contract price (excluding land, carpeting, appliances, landscaping, etc.) \$ 1995.

Cost of permit \$ 10.00 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 [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 [Signature]

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

TOWN RECORD

Date submitted 7/8/85

Approved by Building Inspector (date) 7/10/85

Inspector's initials [Signature]

Approved by Town Commissioner (date) 7/29/85

Commissioner's initials [Signature]

Certificate of Occupancy issued (date) 7/25/85

FLORIDA CONSTRUCTION, COMMERCE and INDUSTRY
SELF INSURERS FUND

P.O. Box 1616
Sarasota, Florida 33578-1616

6/12/85

DATE

TO Whom it may Concern:

This is to certify that: REDISH WELDING & G.L.K. ALUMINIUM
3110 SOUTH EAST SLATER STREET
STUART FL 31497

being subject to the provisions of the Florida Worker's Compensation Act,
has secured the payment of compensation by insuring their risk with the

FLORIDA CONSTRUCTION, COMMERCE AND INDUSTRY SELF INSURERS FUND.

COVERAGE IS SUBJECT TO CANCELLATION WITH 30 DAYS NOTICE TO INSURED
SERVICED BY: F.C.C.I. Claims Service
P.O. Box 25248
Sarasota, FL 34277-2248

AGENT 00063 - 01

COVERAGE NUMBER: 03357 - 01

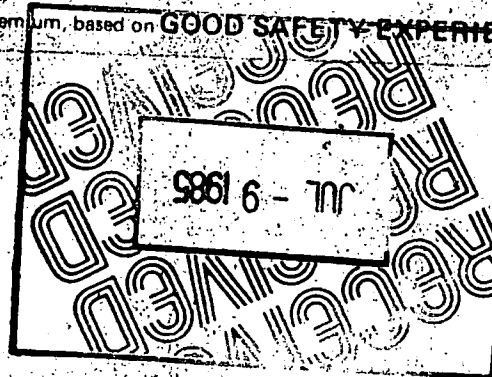
EFFECTIVE DATE: 1/01/85

EXPIRATION DATE: 12/31/85

Respectfully submitted,

J. Waters

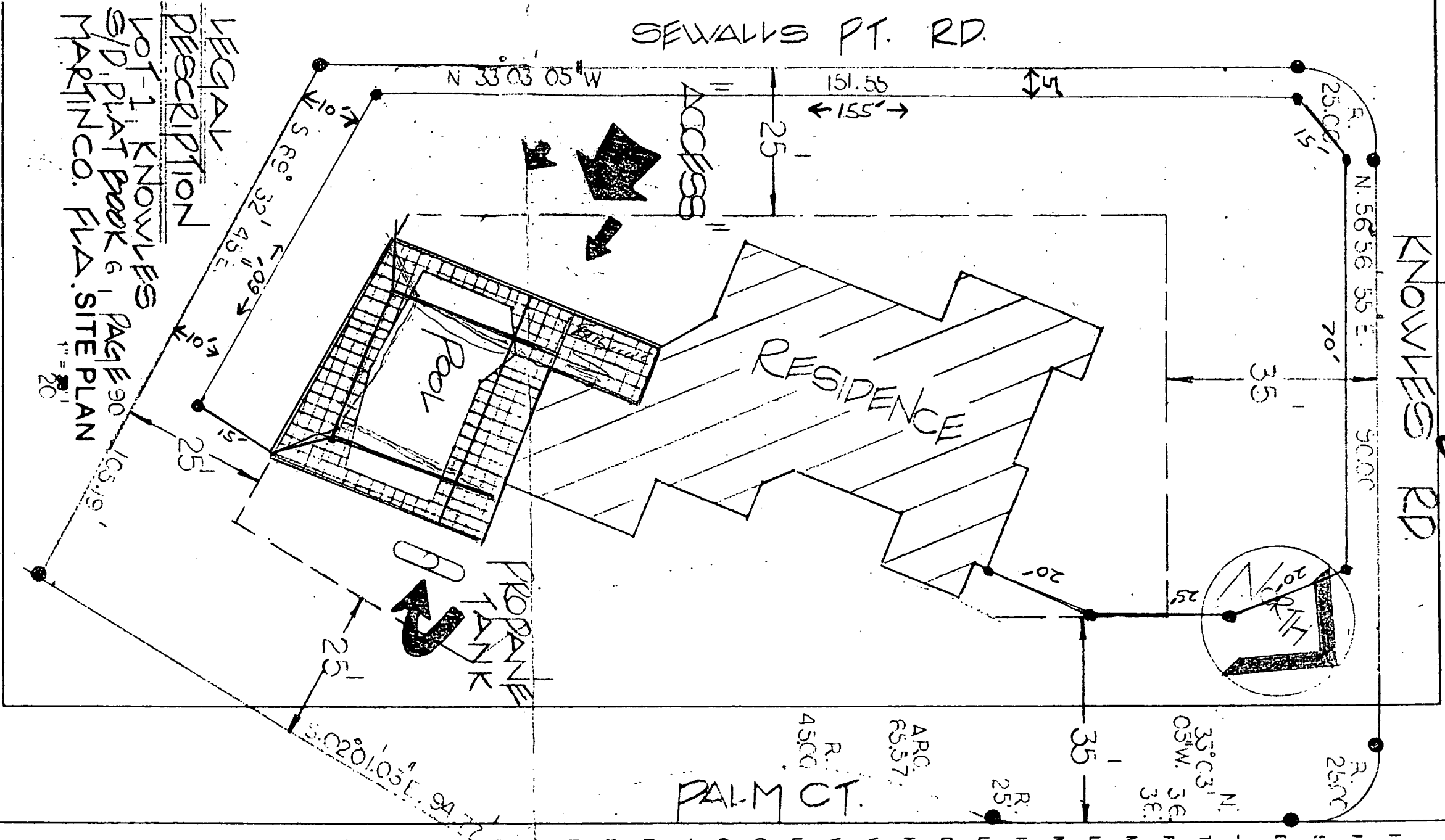
F.C.C.I. members last year, still with the Fund, will receive refunds of up to 50% of premium, based on GOOD SAFETY EXPERIENCE.



3003

WOOD FENCE

**NO PERMANENT STRUCTURES
IN SET-BACK AREAS**

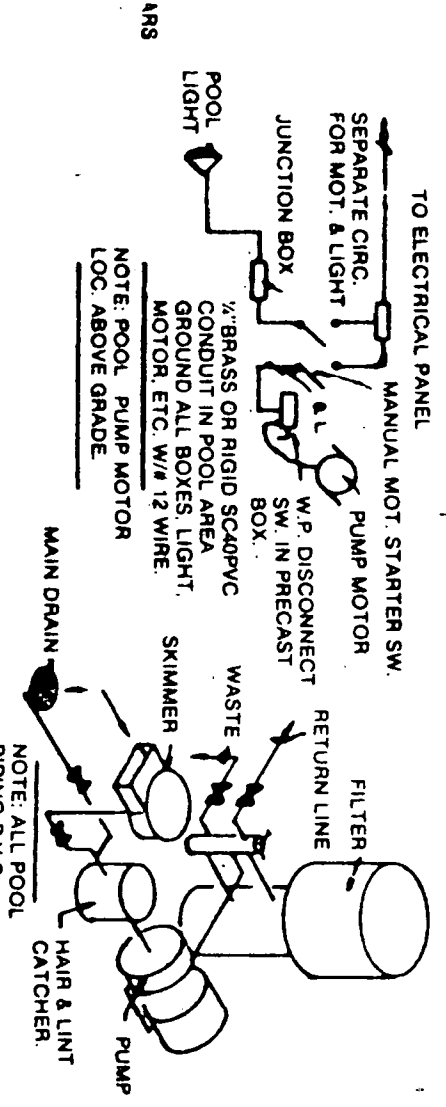


LEGAL DESCRIPTION
 LOT-1, KNOWLES
 S/D PLAT BOOK 6, PAGE 90
 MARINCO, FLA. SITE PLAN
 1" = 20'

Office Plan

ARC. 65.57
 R. 4500
 PALM CT.
 N. 35°03'05" W. 36'
 R. 2500
 E. 90'00'
 N. 56°56'35" E. 70'
 R. 2500

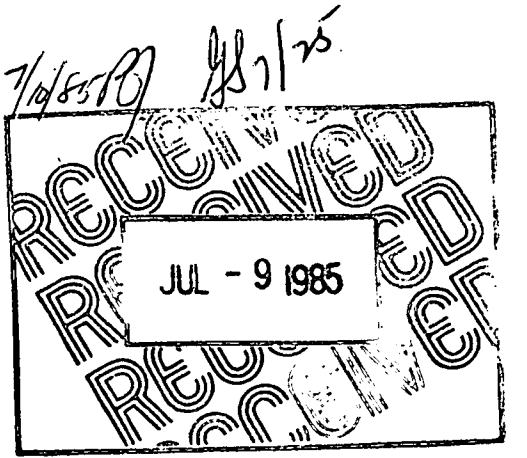
D 1A 626



ELECTRICAL DIAGRAM
NO SCALE

PIPING SCHEMATIC
NO SCALE

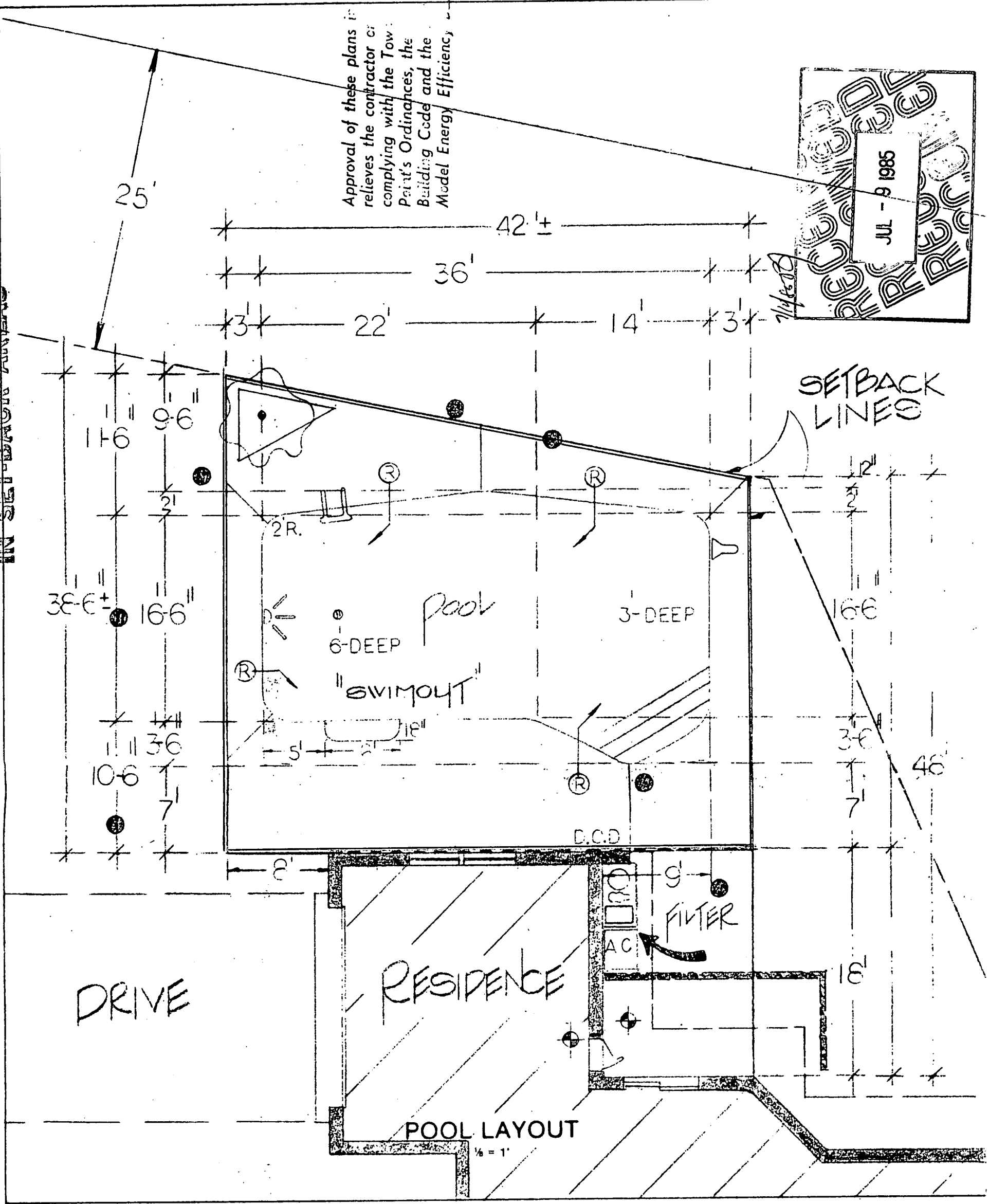
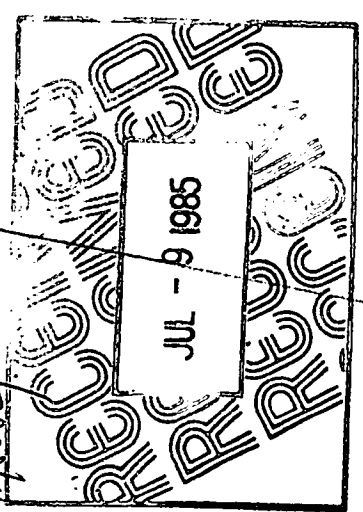
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.



*No Changes
To Setbacks.*

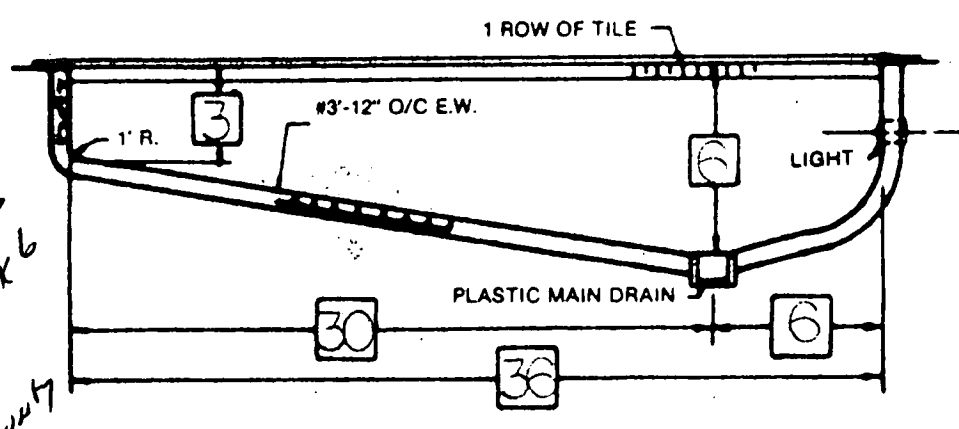
NO PERMANENT STRUCTURES
IN SET-BACK AREAS

Approval of these plans
relieves the contractor of
complying with the Town
of Palm Beach's Ordinances, the
Building Code and the
Model Energy Efficiency



● - PALM TREES

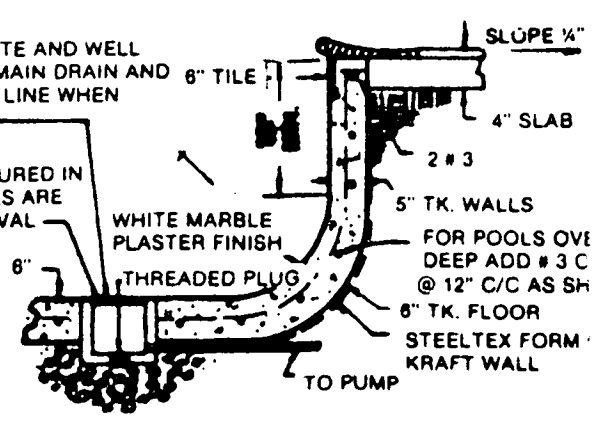
JAN 6/86
2 PALM TREES
SEWALLS POINT
LOT 1 KNOWLES
SPD PLAT BOOK 6
PAGE 90
PALM BEACH COUNTY
FL.



TYPICAL SECTION THRU POOL
NO SCALE

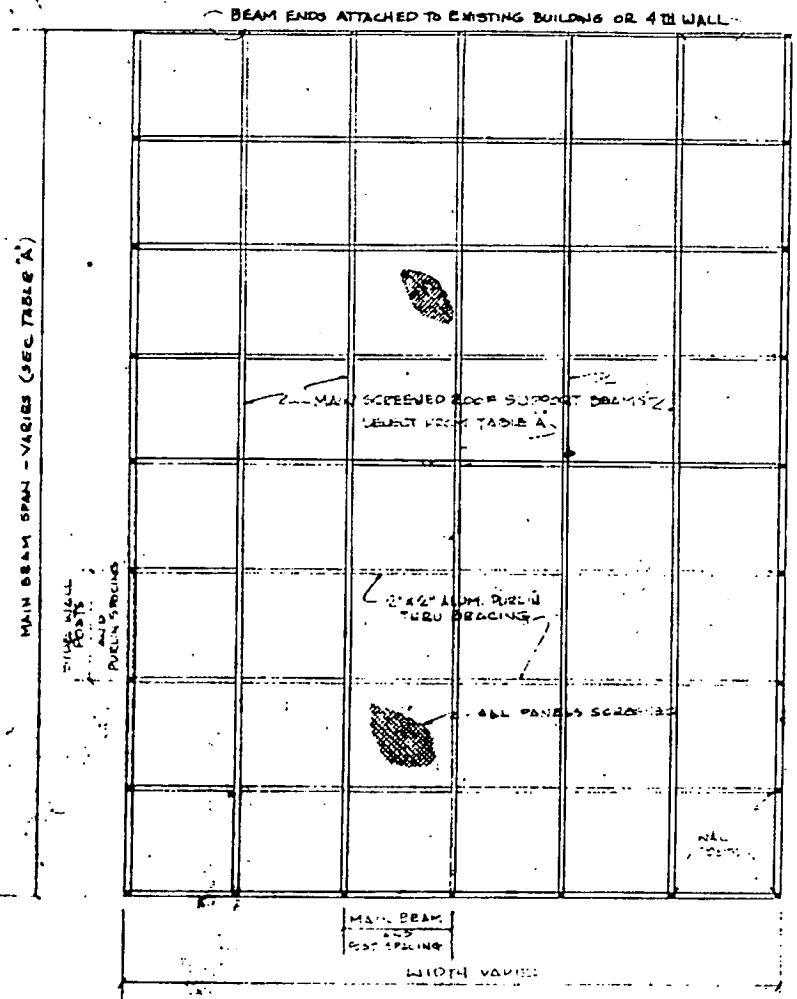
NOTE: REMOVE GRATE AND WELL
POINT PLUG FROM MAIN DRAIN AND
ATTACH AUX. PUMP LINE WHEN
EMPTYING POOL.

GRATE SHALL BE SECURED IN
PLACE SO THAT TOOLS ARE
REQUIRED FOR REMOVAL

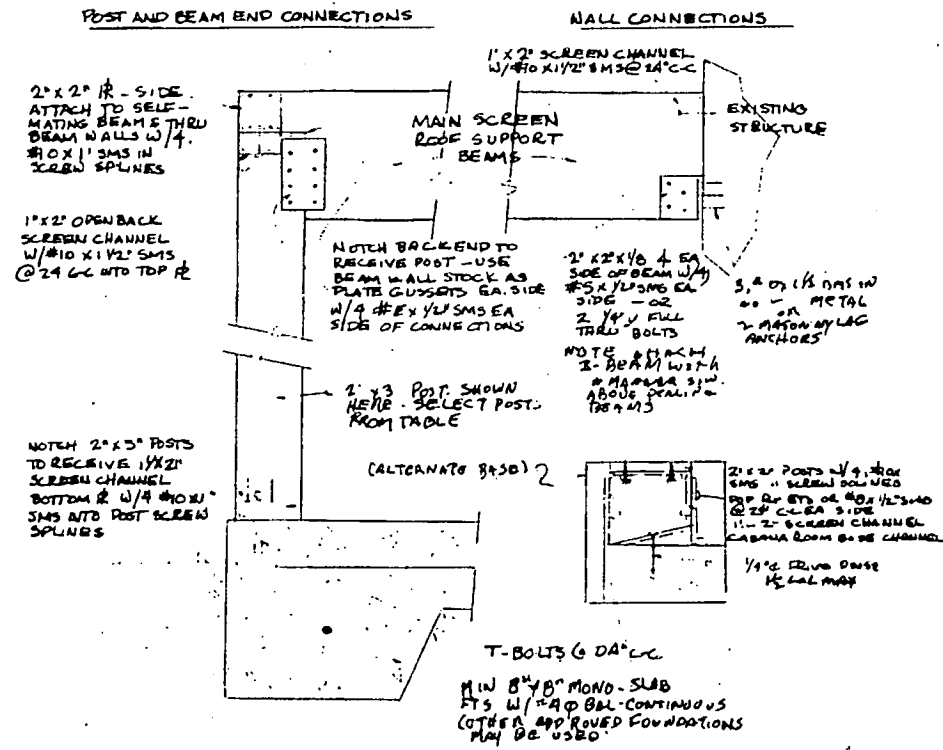


TYPICAL WALL SECTION & WELL POINT
NO SCALE

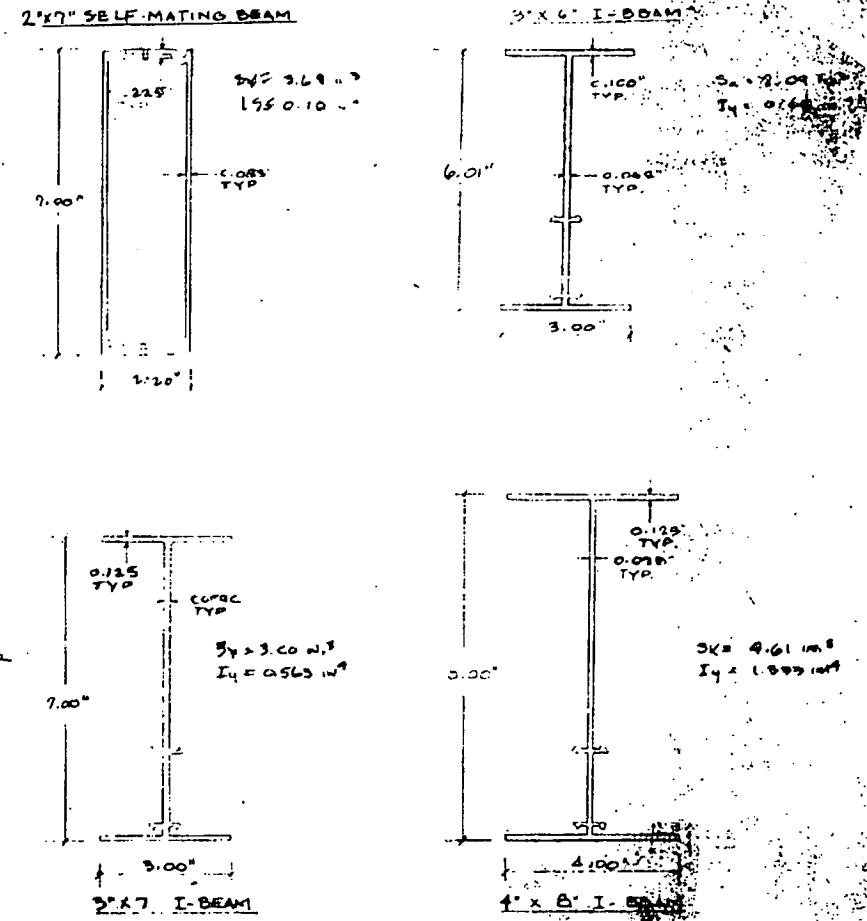
SCREENED POOL ENCLOSURE PLAN



TYPICAL CONNECTION DETAILS



ADDITIONAL BEAM SECTIONS - ALLOY 6063 T6 (MAX 11\"/>



ALTERNATE CONNECTION DETAILS

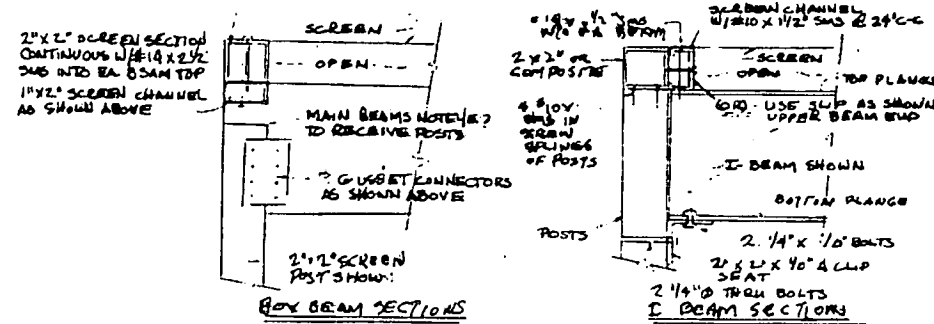
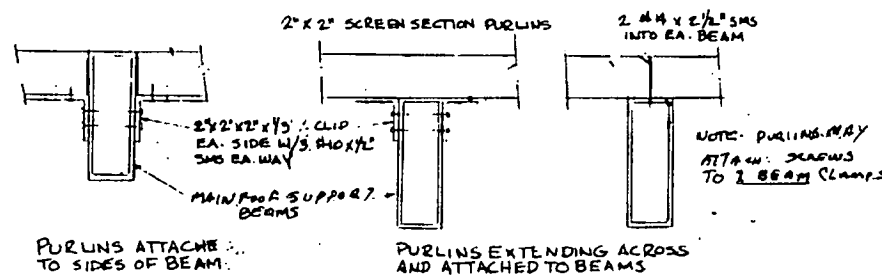
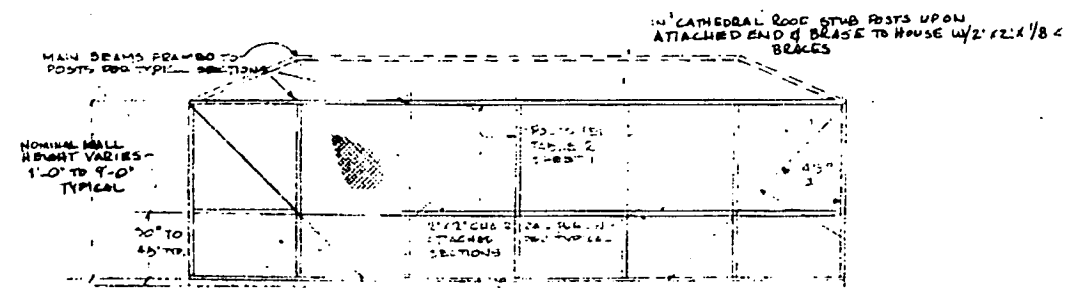


TABLE A.2 SPAN TABLE FOR SCREENED ROOF BEAMS

BEAM SIZE	MAXIMUM CLEAR SPANS FOR SCREENED ROOF BEAMS @ VARIOUS SPACINGS					
	4'-0\"/>					
2x4 S.M. BEAM	25'-0"	21'-0"	21'-0"	20'-0"	19'-0"	18'-6"
2x6 S.M. BEAM	32'-10"	27'-0"	28'-0"	26'-0"	25'-0"	24'-4"
2x8 S.M. BEAM	40'-0"	41'-0"	39'-10"	36'-10"	35'-4"	34'-0"
3x6 I-BEAM	34'-5"	31'-0"	30'-0"	29'-0"	26'-8"	25'-9"
3x7 I-BEAM	41'-0"	37'-6"	36'-0"	35'-0"	31'-10"	31'-0"
4x8 I-BEAM	50'-0"	46'-0"	44'-6"	41'-0"	39'-6"	36'-4"

REMARKS: BEAM SPAN LINES GIVEN PERPENDICULAR TO BEAM FRAMES ACROSS ROOF & BEAM POSTS IN SCREENED SIDE WALLS AS SHOWN ON PLAN VIEW.

END ELEVATION VIEW



ALTERNATE ROOF PURLINS TO BEAM ATTACHMENTS

1. CORNERS NOT ATTACHED TO BUILDING WIND BRACE EA. DIRECTION W/ 3/8\"/>

THESE SCREENED ENCLOSURES ARE DESIGNED IN ACCORDANCE WITH CHAP 12 AND 20 OF STANDARD BUILDING CODE (S.B.C.) FOR UNID. PRESSURE AS FOLLOWS:

SCREENED ROOFS: 10 PSF (2.0) SCAFFOLDING: 10 PSF (2.13)

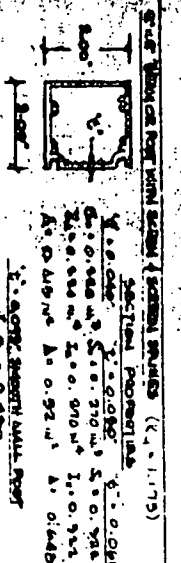
CLINE ASSOCIATES ENGINEERS & ARCHITECTS 3601 US HIGHWAY 90 PALM HARBOR, FL 33556 TEL: 888-785-1667

REDDISH BUILDING 3355 SO OAK HIGHWAY STUART, FLORIDA 33994

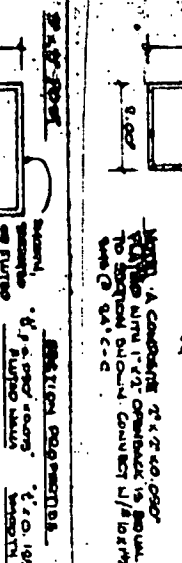
EXTRUDED ALUMINUM SECTIONS - ALLOY 6063-T5



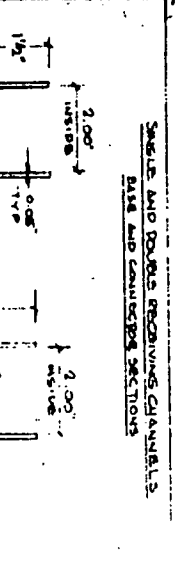
SECTION PROPERTIES
 4.00" x 1.00" x .030"
 4.00" x 1.00" x .030"
 4.00" x 1.00" x .030"
 4.00" x 1.00" x .030"



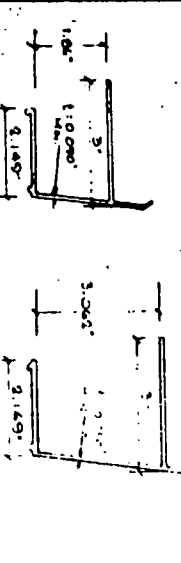
SECTION PROPERTIES
 2x6 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



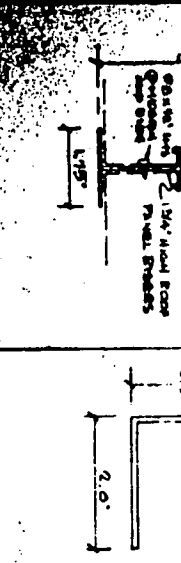
SECTION PROPERTIES
 2x4 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



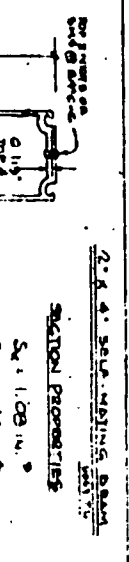
SECTION PROPERTIES
 2x2 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



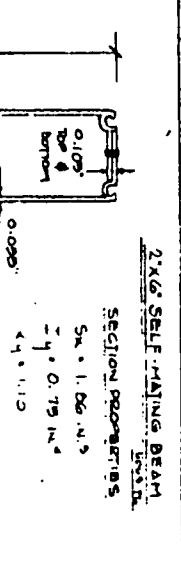
SECTION PROPERTIES
 2x2 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



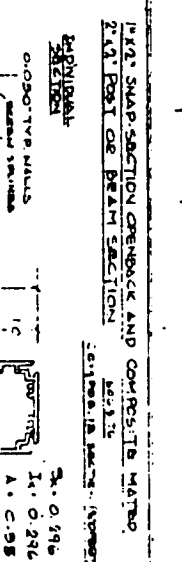
EXTRUDED ALUMINUM SECTION - ALLOY 6063-T5



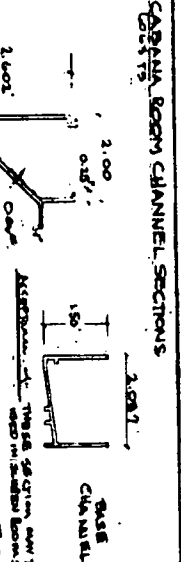
SECTION PROPERTIES
 2x6 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



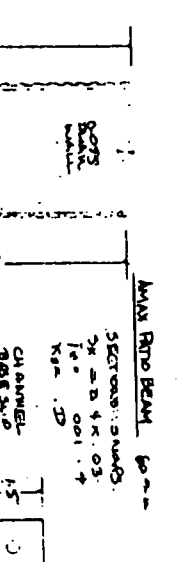
SECTION PROPERTIES
 2x4 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



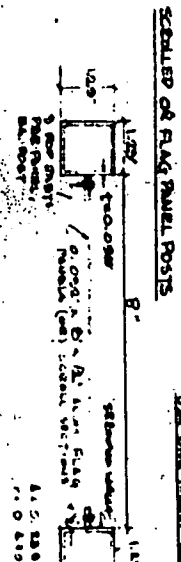
SECTION PROPERTIES
 2x2 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



SECTION PROPERTIES
 2x2 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



SECTION PROPERTIES
 2x2 SELF-FLASHING BEAM
 SECTION PROPERTIES
 Sx = 1.06 in.²
 Ix = 0.79 in.⁴
 Ky = 1.10



POST AND BEAM SPAN TABLES

TABLE 1 - SPAN TABLE FOR WOOD BEAMS IN CANOPY ROOF STRUCTURES

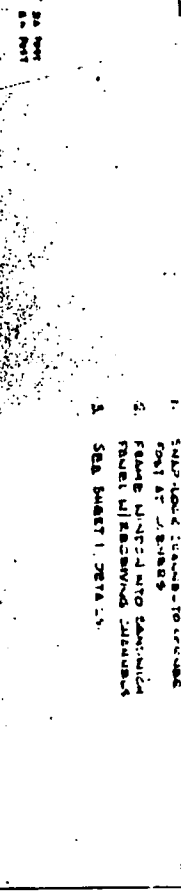
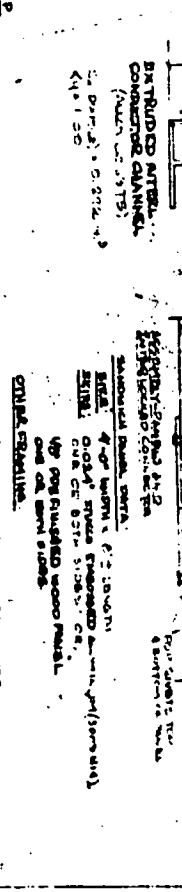
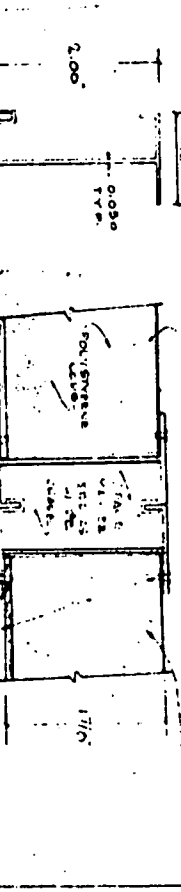
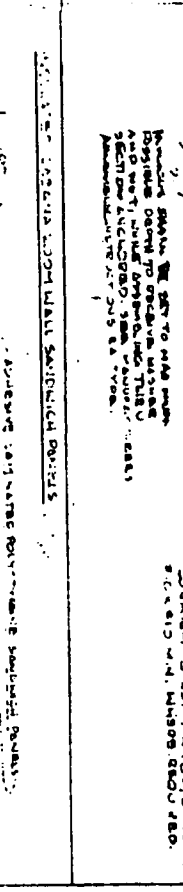
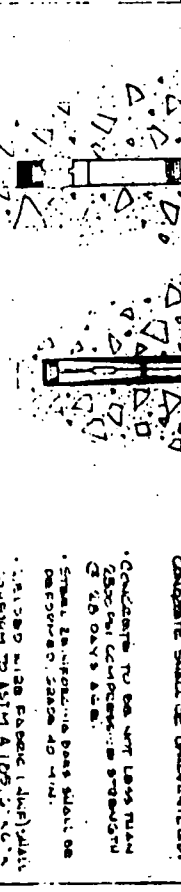
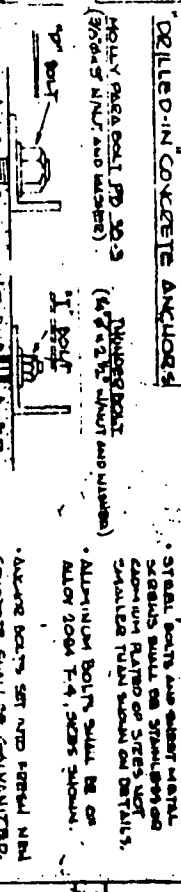
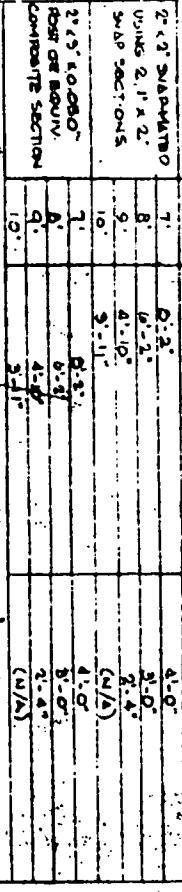
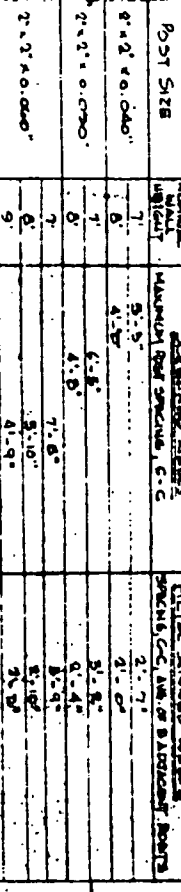
BEAM SIZE	MAXIMUM SPAN (ft)	MAXIMUM SPAN (m)	MINIMUM POST SIZE AND SPACING
2x4	10.5	3.2	4x4 @ 10'-0"
2x6	12.5	3.8	4x4 @ 10'-0"
2x8	14.5	4.4	4x4 @ 10'-0"
2x10	16.5	5.0	4x4 @ 10'-0"
2x12	18.5	5.6	4x4 @ 10'-0"

TABLE 2 - POST LENGTHS AND SPACING IN SCAFFOLD OR METAL SOUNDED WALLS

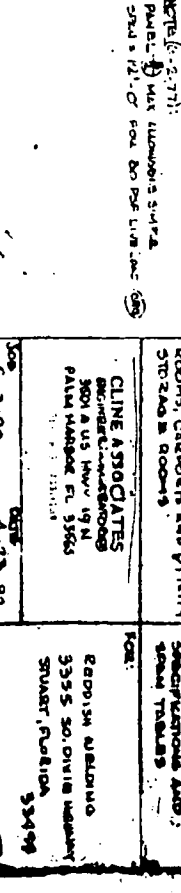
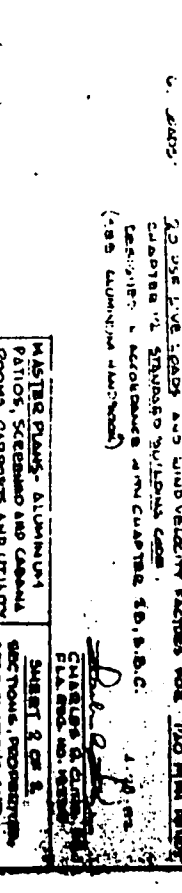
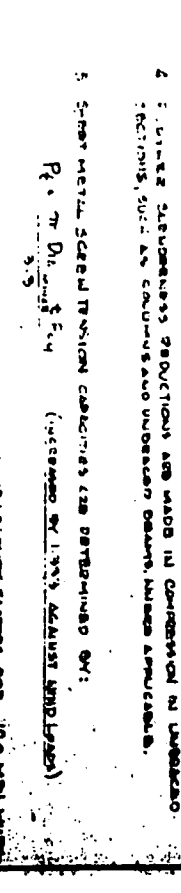
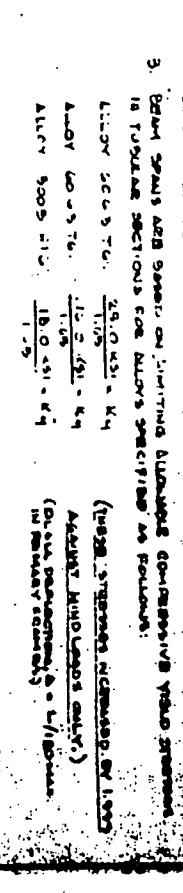
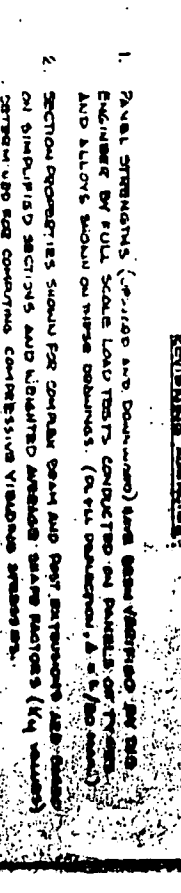
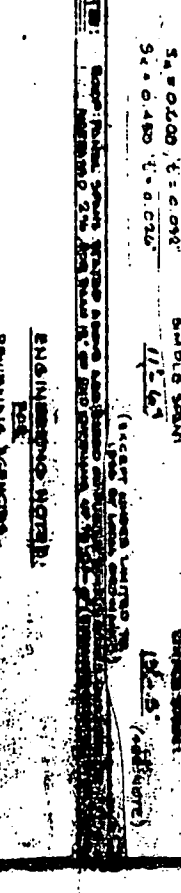
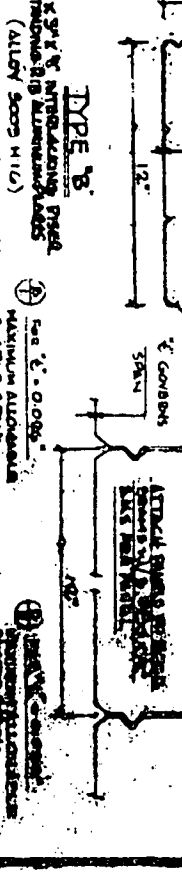
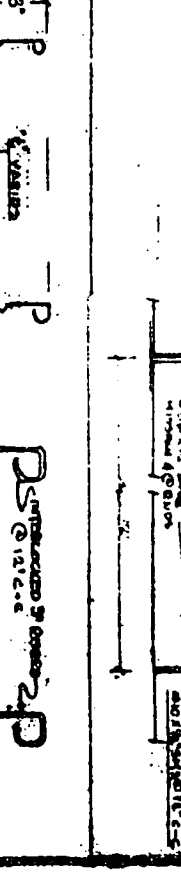
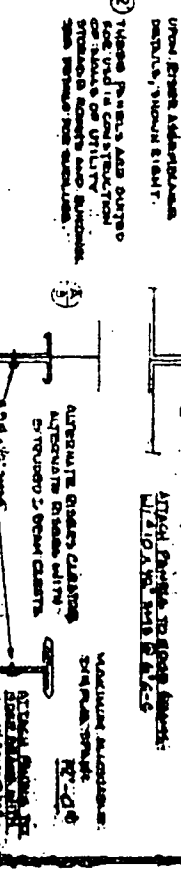
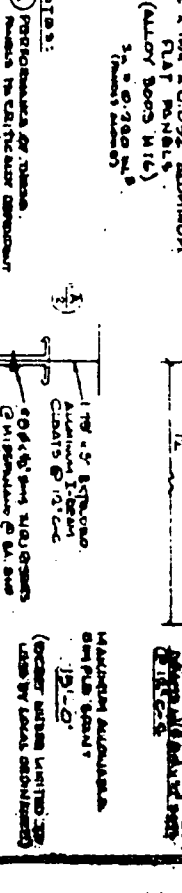
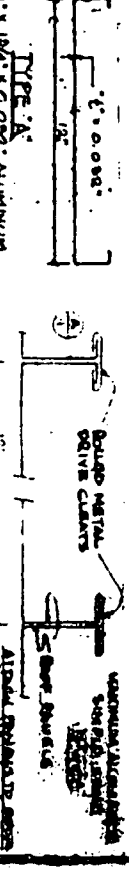
POST SIZE	MINIMUM POST LENGTH (ft)	MAXIMUM POST SPACING (ft)
4x4	7.0	4.0
4x6	8.0	4.0
4x8	9.0	4.0
4x10	10.0	4.0
4x12	11.0	4.0

TABLE 3 - DELLED-IN CONCRETE ANCHORS

ANCHOR SIZE	MINIMUM EMBEDMENT (in)	MAXIMUM SPACING (in)
1/2"	4.0	18.0
3/8"	3.0	16.0
5/16"	3.0	16.0
1/4"	2.0	14.0



ALUMINUM ROOF PANELS - TYPE ASSEMBLY AND SPAN DATA



ENGINEERING NOTES

1. PANEL STRENGTHS (UPPER AND DOWNWARD) HAVE BEEN DETERMINED BY THE ENGINEER BY FULL SCALE LOAD TESTS CONDUCTED ON PANELS OF THE TYPE AND ALLOY SHOWN ON THESE DRAWINGS. (SEE DRAWING 4-23-81)

2. SECTION PROPERTIES SHOWN FOR CHANNEL BEAM AND POST STRUCTURES ARE BASED ON SIMPLIFIED SECTIONS AND UNIFORM STRESS DISTRIBUTION. (SEE DRAWING 4-23-81)

3. BEAM SPANS AND BEAM OR POST SPACING SHOULD BE DETERMINED BY THE ENGINEER FOR EACH CASE. (SEE DRAWING 4-23-81)

4. WIND SPEED REDUCTIONS ARE MADE IN CONNECTION WITH LOCAL WIND SPEEDS. (SEE DRAWING 4-23-81)

5. SHEAR METAL SCREEN TENSION CAPACITIES ARE DETERMINED BY THE ENGINEER. (SEE DRAWING 4-23-81)

6. USE LIVE LOADS AND WIND VELOCITY FACTORS FOR (NO MINIMUM) CHARACTERISTIC STRENGTHS OF ALUMINUM. (SEE DRAWING 4-23-81)

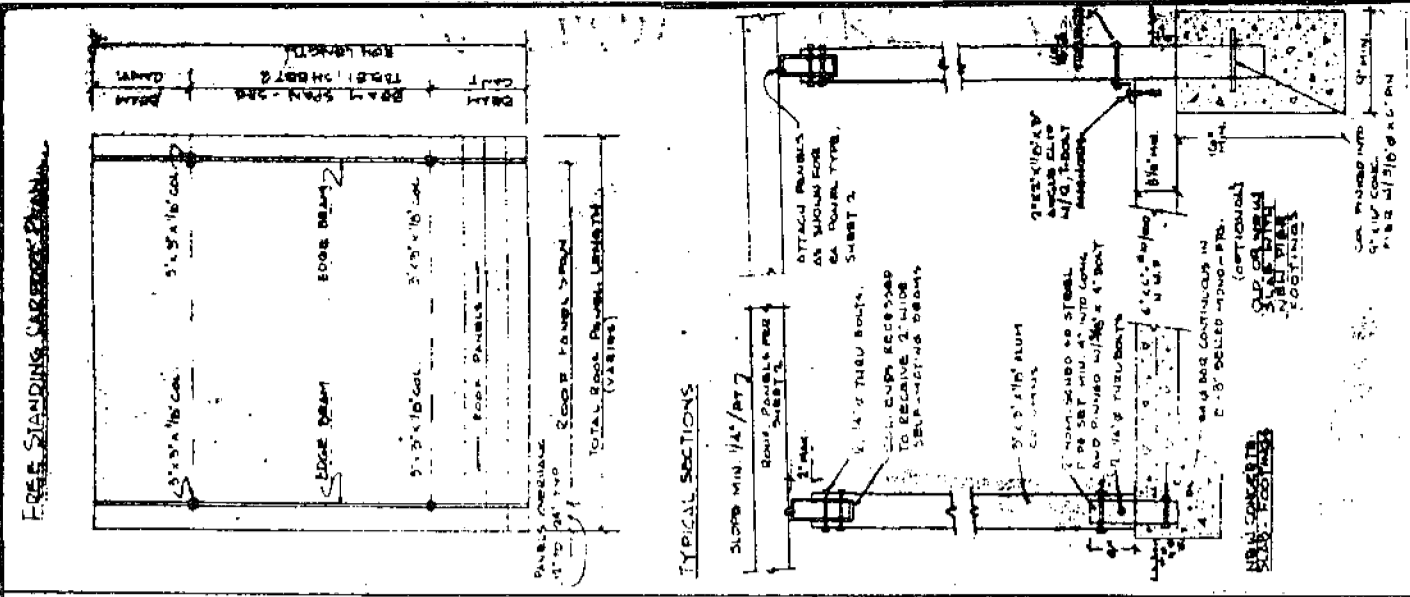
7. SHEAR METAL SCREEN TENSION CAPACITIES ARE DETERMINED BY THE ENGINEER. (SEE DRAWING 4-23-81)

8. USE LIVE LOADS AND WIND VELOCITY FACTORS FOR (NO MINIMUM) CHARACTERISTIC STRENGTHS OF ALUMINUM. (SEE DRAWING 4-23-81)

9. SHEAR METAL SCREEN TENSION CAPACITIES ARE DETERMINED BY THE ENGINEER. (SEE DRAWING 4-23-81)

10. USE LIVE LOADS AND WIND VELOCITY FACTORS FOR (NO MINIMUM) CHARACTERISTIC STRENGTHS OF ALUMINUM. (SEE DRAWING 4-23-81)

11. SHEAR METAL SCREEN TENSION CAPACITIES ARE DETERMINED BY THE ENGINEER. (SEE DRAWING 4-23-81)



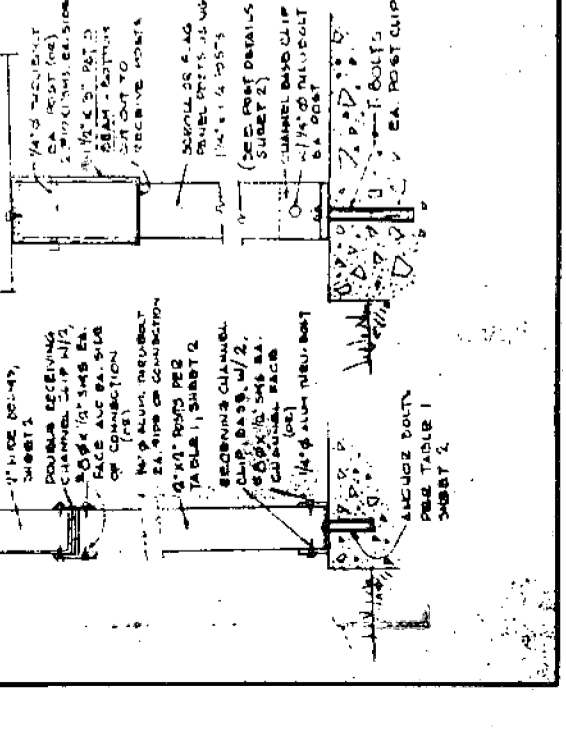
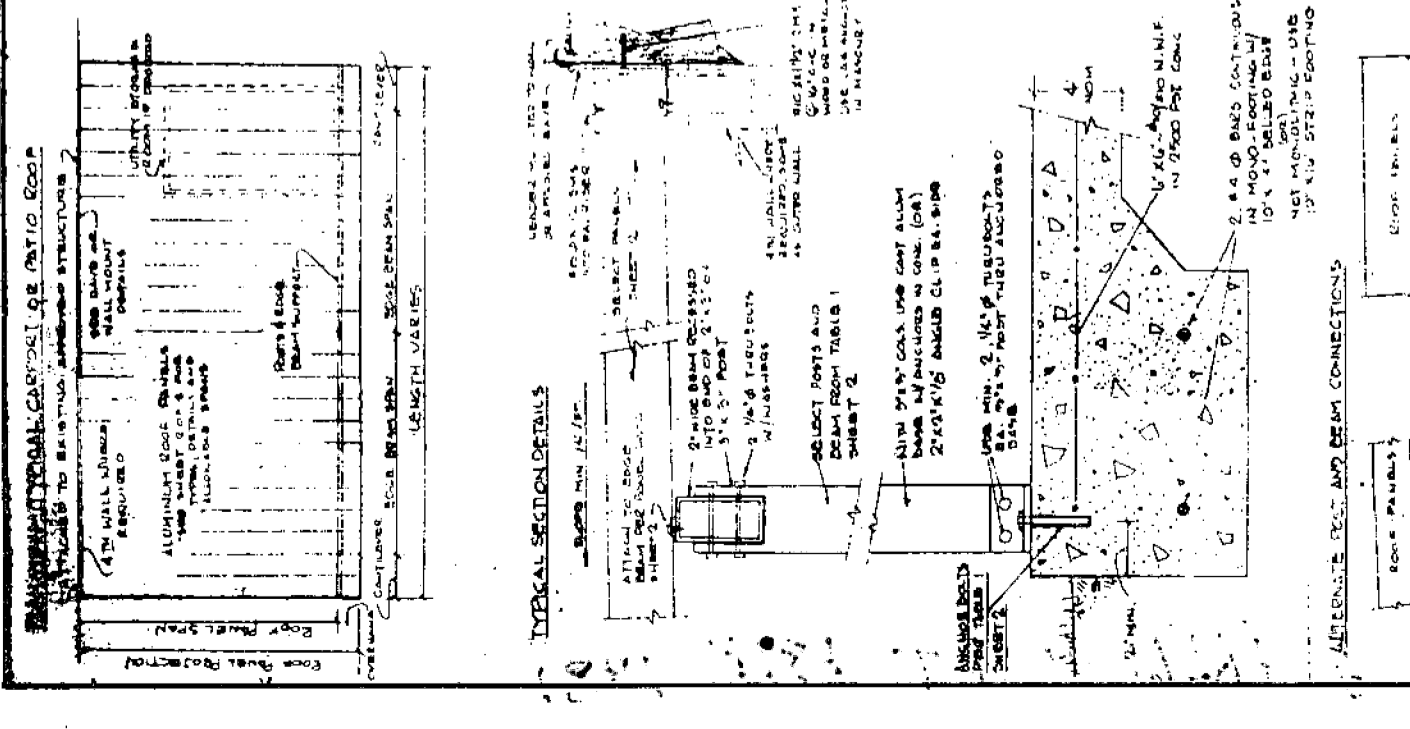
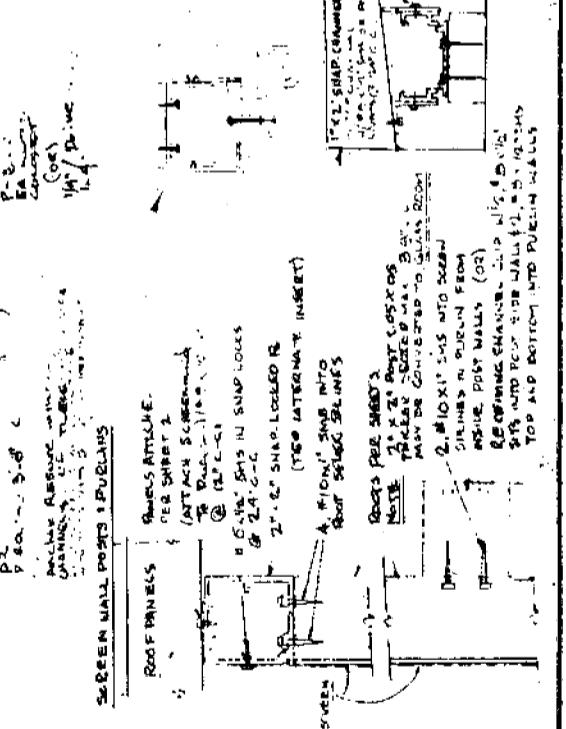
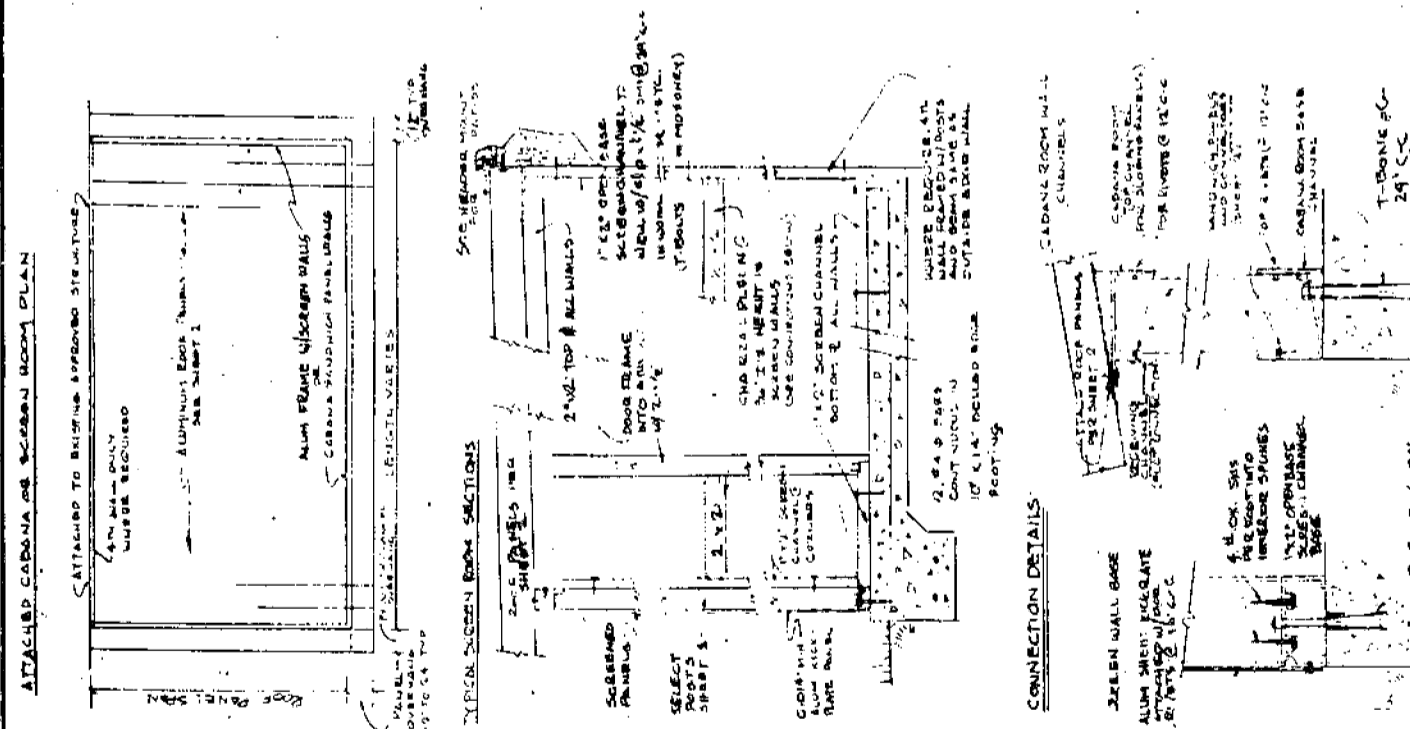
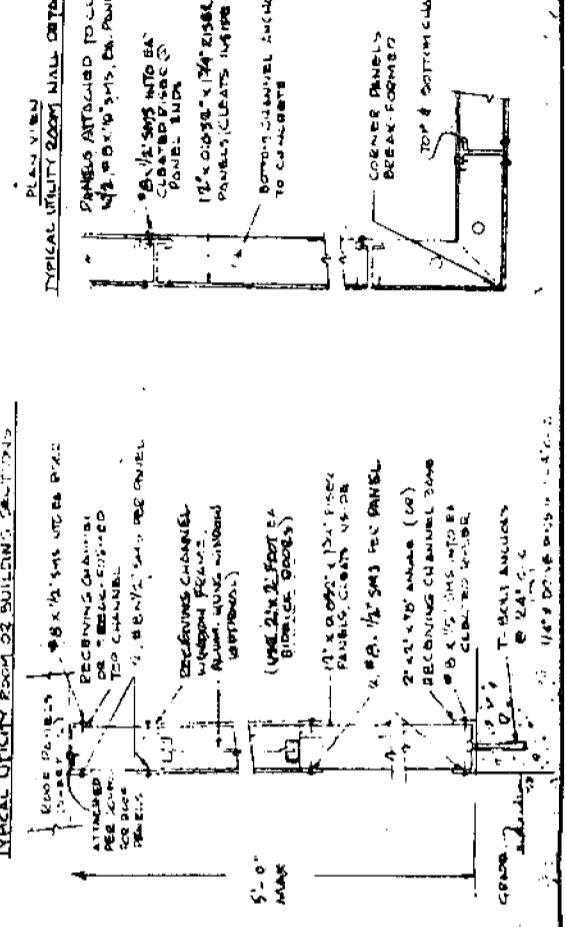
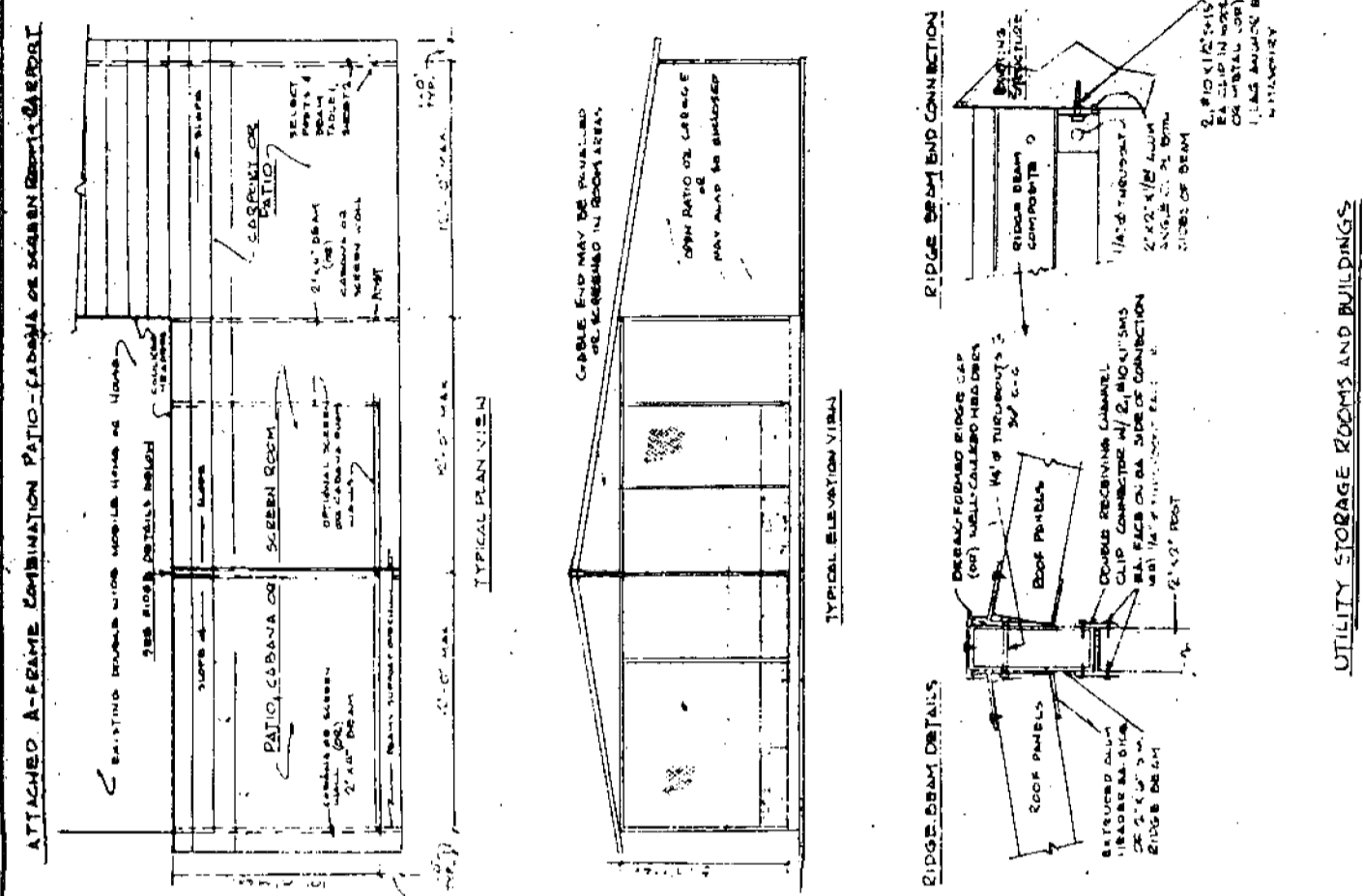
FOR: EDWIN ARNDINO, 3355 S. DIXIE HIGHWAY, SUITE 101, PALM HARBOR, FL 34683

FOR: CLINE ASSOCIATES, INC., 3601 U.S. HWY. 19 N., PALM HARBOR, FL 34683

FOR: MASTER PLANS - ALUMINUM PLANS, DETAILS AND ASSEMBLY SECTION STORED COPY

FOR: SHEET 1 OF 2

DATE: 10/15/98



2 PALM COURT PV 1831

2 PALM COURT ~~1831~~ 1831

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.

7/10/85 B 7/25
RECEIVED
JUL 9 1985
RECEIVED

Date

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

3003

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 Dennis A. Birdsall Present Address 2 Palm Court

Phone 286-9828

Contractor SELF Address same

Phone same

Where licensed _____ License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Wood 12'x32' fence

State the street address at which the proposed structure will be built: 2 Palm Court

Subdivision _____ Lot number _____ Block number _____

Contract price \$ 275 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor D. A. Birdsall

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 D. A. Birdsall

TOWN RECORD

Date submitted 5/31/91 Approved: _____ Building Inspector _____ Date _____

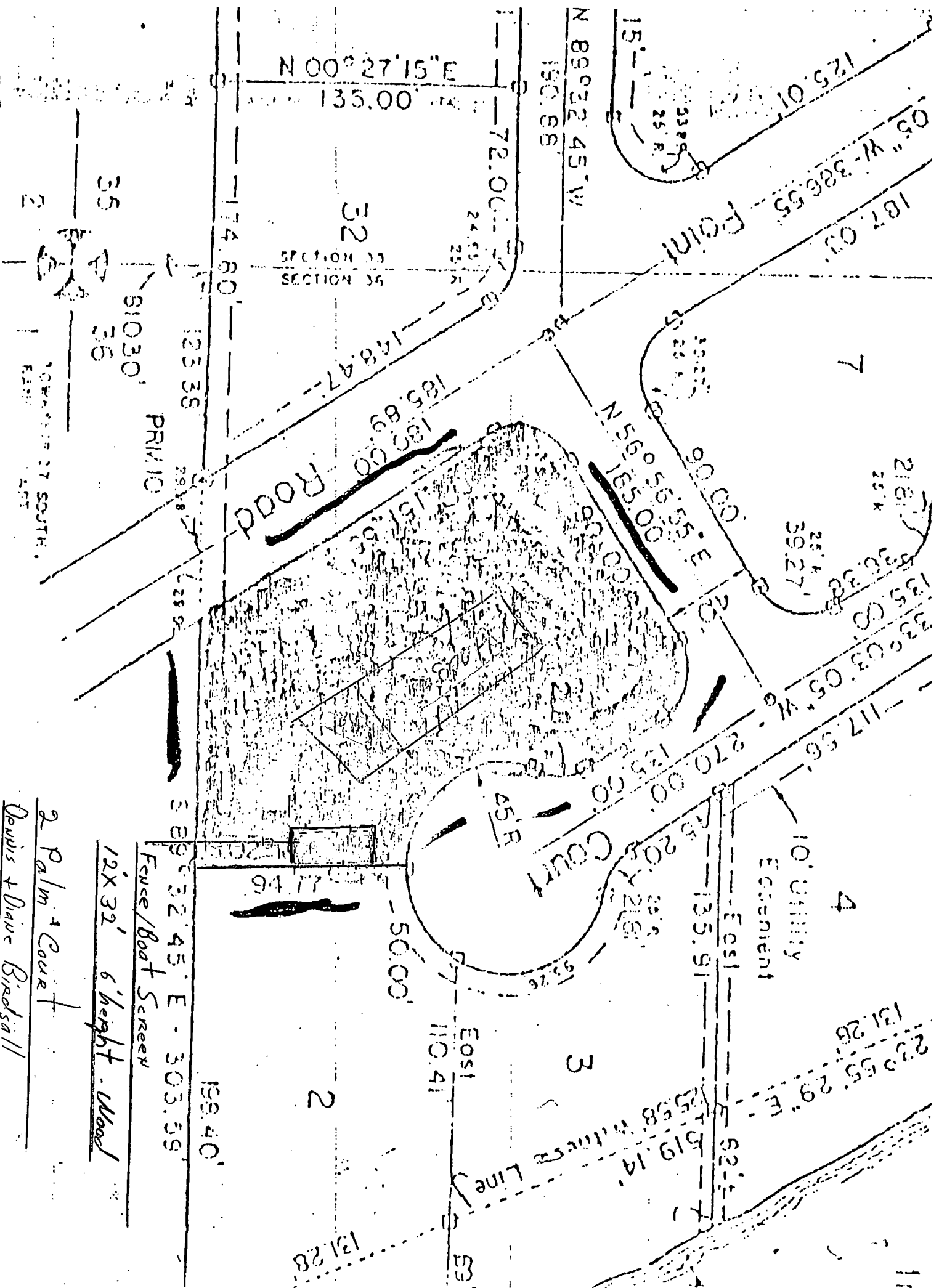
Approved: _____ Commissioner _____ Date _____ Final Approval given: _____ Date _____

Certificate of Occupancy issued (if applicable) _____ Date _____

SP1282 Permit No. _____

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

CERTIFICATION



N 00° 27' 15" E

135.00

N 89° 32' 45" W
150.98

72.00

32

SECTION 35
SECTION 36

174.60

35

81030'

36

PRIMIC

123.35

Road

185.89

185.60

151.55

N 56° 55' 59" E

185.55

185.55

185.55

185.55

185.55

185.55

185.55

185.55

185.55

7

216.25

26.38

135.03

117.56

117.56

117.56

117.56

117.56

117.56

117.56

117.56

117.56

117.56

10' Utility Easement

4

East

135.91

3

COURT

45' R

50.00

East

110.41

2

159.40

58

99

32

45

E - 303.59

Fence/Boat Screen

12x32' 6' height - Wood

2 Palm 4 Cove +

Dennis + Diane Birdsa //

100' SECTION 27 SOUTH

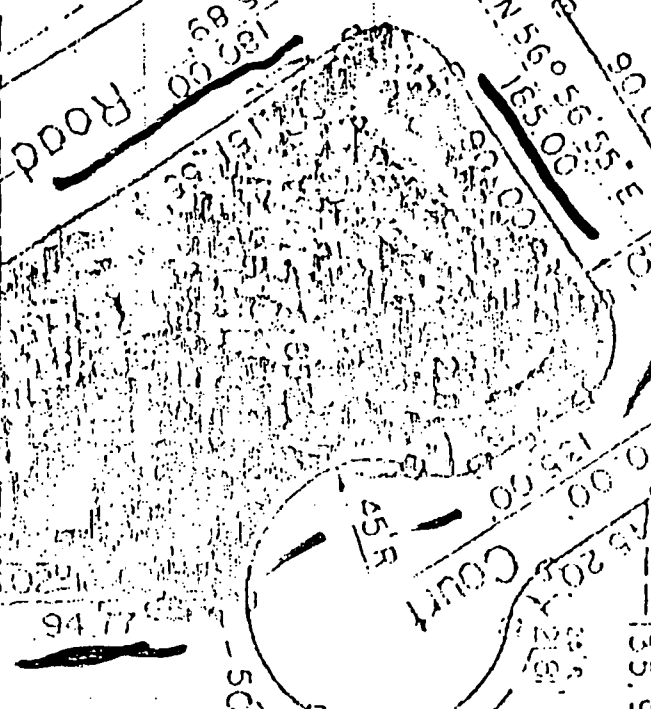
TION

TOWNSHIP 27 SOUTH,
RANGE 1205

30'
6

2335' 291.8' 258.9' 589' 32.45' E - 505.59' 159.40' 80' 12'

68.47' 185.85' 185.00' Road



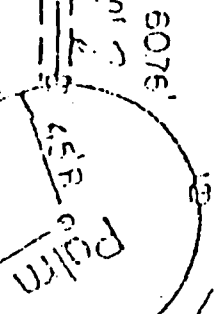
Indian River

636'17" E - 402.07' 184.00' PRM 10'

N 12° 36' 00" W
65.76'

5

120.17'



10' Utility Easement

40' Drainage Easement

COURT

58' Width Line

3

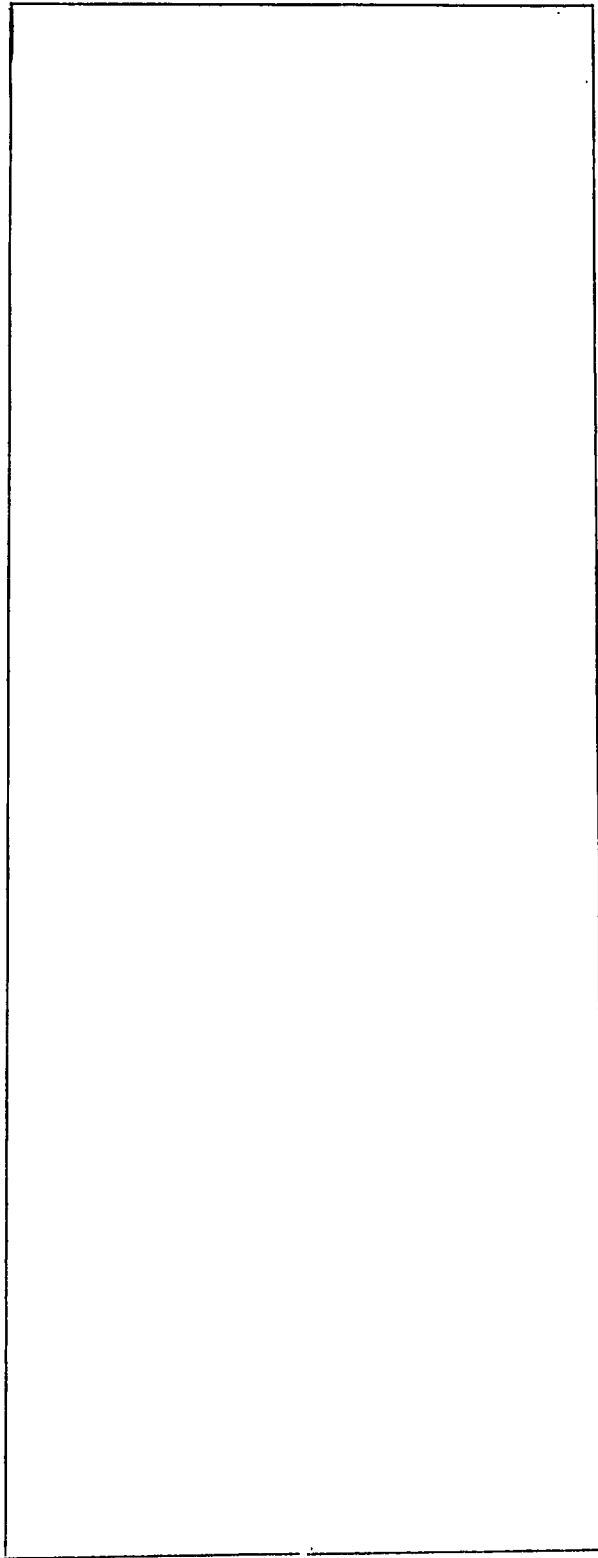
4

2

PRM 12

PRM 10

12'



Stockade Fence - Wood

Height 6'

12' x 32' width/length

Drive Gates 2-6'x6'

CORNER Posts set in concrete

32'

Drive Gates 2-6'x6'

2 Palm Ct

Dennis + Diane Birdsall

3255

REROOF

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: Dennis Birdsell Present Address 2 Palm Ct.

Phone 286-9828

Contractor Dan Butler Roofing Address 8645 Alabama Place

Phone 546-3430 Hope Sound Fla. 33455

Where licensed Martin County License number SP00858

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Re-roof existing house with shingles

State the street address at which the proposed structure will be built: 2 Palm Ct.

Subdivision Knawles Lot number 1 Block number _____

Contract price \$ 45,000.00 Cost of permit \$ 100.00

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Dan Butler

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 D. Birdsell

Date submitted 9/15/92 Approved: Dale Brown Building Inspector Date 9/15/92

Approved: [Signature] Commissioner Date 9/16/92 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.

Fax 220-4765

STATE OF FLORIDA
DEPARTMENT OF PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY
LICENSING BOARD

REGISTERED ROOFING CONTRACTOR

BUTCHER, DANNY STEPHEN
DAN BUTCHER ROOFING
(INDIV. MUST MEET LOCAL LICENSING
REQ. PRIOR TO CONTR. IN ANY AREA)
HAS PAID THE FEE REQUIRED BY CHAPTER 489 F.S.
FOR THE YEAR EXPIRING AUG 31, 1993


LAWTON CHILES
GOVERNOR


GEORGE STUART, JR.
SECRETARY D.P.R.

MARTIN COUNTY CONTRACTORS
CERTIFICATE OF COMPETENCY

BUTCHER, DANNY S
DAN BUTCHER ROOFING
8753 SE JARDIN ST
HOBE SOUND, FL 33345

EXPIRES SEPTEMBER 30, 19 92

AUDIT
CONTROL
NUMBER

15004

CERTIFICATE NUMBER

SP00858

4794

RESIDING

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 1/19/80 BUILDING PERMIT NO. 4794
 Building to be erected for DEONIS BIRDSELL Type of Permit BLDG (NEW SIDING)
 Applied for by EMMICK CONST. INC. (Contractor) Building Fee \$192.00
 Subdivision KNOWLES Lot 1 Block _____ Radon Fee _____
 Address 2 N.E. PALM COURT Impact Fee _____
 Type of structure S.F.R. A/C Fee _____
(NO STRUCTURAL MODIFICATIONS) Electrical Fee _____
 Parcel Control Number: _____ Plumbing Fee _____
 _____ Roofing Fee _____
 Amount Paid \$211.20 Check # 4749 Cash _____ Other Fees (PLAN REV.) 19.20
 Total Construction Cost \$ 20,000.00 TOTAL Fees \$211.20

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

NON-STRUCT. BUILDING PERMIT SIDING

FORM BOARD SURVEY	DATE _____	SHEATHING	DATE _____
COMPACTION TESTS	DATE _____	FRAMING	DATE _____
GROUND ROUGH	DATE _____	INSULATION	DATE _____
SOIL POISONING	DATE _____	ROOF DRY-IN	DATE _____
FOOTINGS / PIERS	DATE _____	ROOF FINAL	DATE _____
SLAB ON GRADE	DATE _____	METER FINAL	DATE _____
TIE-BEAMS & COLUMNS	DATE _____	AS BUILT SURVEY	DATE _____
STRAPS AND ANCHORS	DATE _____	STORM PANELS	DATE _____
DRIVEWAY	DATE _____	LANDCAPE & GRADE	DATE _____
AS-BUILT SURVEY	DATE _____	FINAL INSPECTION	DATE <u>2/23/80</u>

FLOOD ZONE _____ LOWEST HABITABLE FLOOR ELEV. _____

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# 4794
1/20/00

Town of Sewall's Point

Date _____

BUILDING PERMIT APPLICATION

Owner's Name: DENNIS A. Birdsell Phone No. 286-9828
Owner's Present Address: 2 NE PALM CT, STUART, FL 34996
Fee Simple Titleholder's Name & Address if other than owner _____

RECEIVED
JAN 10 2000

Location of Job Site: _____
TYPE OF WORK TO BE DONE: INSTALL HARDI-PLANK SIDING
CONTRACTOR INFORMATION
Contractor/Company Name: EMMICK CONST. INC. Phone No. (561) 334-0440
COMPLETE MAILING ADDRESS: P.O. BOX 1968 JENSEN BCH, FLA 34958
State Registration _____ State License CRCO 17291
Legal Description of Property KNOWLES S/D LOT 1
Parcel Number 35-37-41-008-000-00010-20000

ARCHITECT/ENGINEER INFORMATION

Architect _____ Phone No. _____
Address _____
Engineer _____ Phone No. _____
Address _____

Area Square Footage: Living Area _____ 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 \$20,000.00
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 N/A State License N/A
Mechanical _____ State License# _____
Plumbing _____ State License# _____
Roofing _____ State License# _____

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 _____
Sworn to and subscribed before me this 7th day of January, 2000, 1998 by Nanci Kurz who is personally known to me or has produced or has produced personally known and who did (did not) take an oath.

CONTRACTOR SIGNATURE _____
Sworn to and subscribed before me this 10th day of Jan, 2000 by Joseph Pennick who is personally known to me or has produced _____ and who did (did not) take an oath.

NOTARY PUBLIC
NANCI L. KURZ
My Comm Exp. 8/25/2000
No. CC 579366
I Personally Know () Other ()

ES20-495-51-4662

Mary P. Dezso
MY COMMISSION # CC786341 EXPIRES
October 27, 2002
BONDED THRU TROY FAIR INSURANCE, INC.

Mary P. Dezso
MY COMMISSION # CC786341 EXPIRES
October 27, 2002
BONDED THRU TROY FAIR INSURANCE, INC.

for Joseph Emmick

TREE REMOVAL (Attach sealed survey)

No. of trees to be removed N/A 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 _____

ACORD. CERTIFICATE OF LIABILITY INSURANCE		EP ID SB PACIC-1	DATE (MM/DD/YY) 01/03/00
PRODUCER Stuart Insurance, Inc. 3070 S W Mapp Palm City FL 34990 Phone: 561-286-4334 Fax: 561-286-9389		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
		INSURERS AFFORDING COVERAGE	
INSURED Joseph P. Emmick Emmick Construction, Inc. PO Box 1968 Jensen Beach FL 34958		INSURER A: Southern Owners INSURER B: INSURER C: INSURER D: INSURER E:	

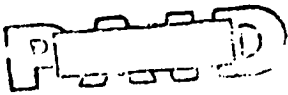
COVERAGES

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

INSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	20552563	09/20/99	09/20/00	EACH OCCURRENCE \$ 300,000
	GENL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				FIRE DAMAGE (Any one fire) \$ 100,000 MED EXP (Any one person) \$ 10,000 PERSONAL & ADV INJURY \$ 300,000 GENERAL AGGREGATE \$ 300,000 PRODUCTS - COMP/OP AGG \$ 300,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
Residential Carpentry - State of Florida

CERTIFICATE HOLDER Town of Sewalls Point 1 S Sewalls Point Road Stuart FL 34996	ADDITIONAL INSURED; INSURER LETTER: TOWNS-1	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. Cabot W. Lord, CIC.
--	--	--



CONSTRUCTION INDUSTRY

NOTICE OF ELECTION TO BE EXEMPT FROM THE PROVISIONS OF THE FLORIDA WORKERS' COMPENSATION LAW

MAIL TO: Department of Labor & Employment Security
Bureau of W.C. Compliance
2728 Centerview Drive, 100 Forrest Bldg.
Tallahassee, Florida 32399-0666

2-13-94
EFFECTIVE DATE
ACKNO: ED: 113
CARRIER
AGENT
EMPLOYER
PLEASE TYPE OR PRINT: 869005

STATE USE ONLY
POSTMARK DATE 1-13-94
This notice shall be in effect for two (2) years from the effective date of 2-13-94 until or until revoked, whichever comes first.

RE: Joe Emmick DBA: Emmick Construction, Inc.
(Legal Business Name of Sole Proprietorship, Partnership, or Corporation) (D/B/A If Applicable)
PO Box 1968 1909 N.E. ACAPULCO DR.
(Mailing Address) (Street Address, if different)
Jensen Beach Fl. 34958 59-2641855
(City) (State) (Zip) (Federal Employer Identification Number)

Nature of Business or Trade: RESIDENTIAL CONSTRUCTION

As of 12:01 a.m. 30 days following the date of the mailing of this form, you are hereby notified that the following Sole Proprietor, Partner or Corporate Officer of the above named business does elect to be exempt from the provisions of the Florida Workers' Compensation Law. I understand that by this action I am not entitled to be covered under the Florida Statute. By filing this form I have not exceeded the exemption limit of three Partners or three Corporate Officers. I understand that any employees of the business named above are covered by workers' compensation insurance.

PURGED

The following are the certified or registered licenses held by me pursuant to chapter 489 Florida Statutes (If none, so state):

(1) Type: CERTIFIED Number: CACR17291 (2) Type: Number:
RESIDENTIAL CONTRACTOR

INSURANCE CARRIER INFORMATION (If Applicable): A construction industry employer with one (1) or more employees must maintain Workers' Compensation coverage. Failure to comply will result in a five-hundred dollar (\$500) fine and a one-hundred dollar (\$100) fine for each day of noncompliance (see section 440.43, F.S.).

Name of Carrier: FL Home Bldrs SIF
Carrier Address: PO Box 166007, Altamonte Springs, Fl. 32716
Policy Number: 23427 EFFECTIVE DATE: 3/1/93
Insurance Agent (Agency): RICK CARROLL INS
Agency Address: PO BOX 877, JENSEN BEACH, FL. 34958

Signature: [Signature] Social Security Number: 266-04-9930
Type/Print Name: JOSEPH P. EMMICK
Position: Proprietor /Partner /or/Officer (Title): PRESIDENT

IMPORTANT: Individual exemption filing fee, pursuant to Section 440.05, F.S., is seven dollars and fifty cents (\$7.50) and is payable only by money order or cashier's check, to W.C. Administrative Trust Fund. Failure to enclose fee will result in return of request and delay of certification.

SWORN TO AND SUBSCRIBED BEFORE ME THIS 30 DAY OF December, 1993.
AT Stuart, FLORIDA



[Signature of Nancy L. Speedy]
Notary Public, State of Florida
My Commission Expires:

AC# 5204239

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

DATE	BATCH NUMBER	LICENSE NBR
07/10/1998	98900077	CR -C017291

The RESIDENTIAL CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 489 FS.
Expiration date: AUG 31, 2000

EMMICK, JOSEPH P JR
EMMICK CONSTRUCTION INC
1909 NE ACAPULCO DR
P O BOX 1768
JENSEN BEACH FL 34957-6650

LAWTON CHILES
GOVERNOR

DISPLAY AS REQUIRED BY LAW

RICHARD T. FARRELI
SECRETARY

NOTICE OF PROPOSED PROPERTY TAXES

G13297
8933

DO NOT PAY
THIS IS NOT A BILL

MARTIN COUNTY TAXING AUTHORITIES
%o 100 E. Ocean Blvd., Suite 300
Stuart, Florida 34994

Account Number: 9558

LEGAL: KNOWLES S/D LOT 1



BIRDSALL, DENNIS A BIRDSALL, DIANE G
2 PALM COURT
STUART FL 34996-6603

The taxing authorities which levy property taxes against your property will soon hold PUBLIC HEARINGS to adopt budgets and tax rates for the next year.

The purpose of the PUBLIC HEARINGS is to receive opinions from the general public and to answer questions on the proposed tax change and budget PRIOR TO TAKING FINAL ACTION.

Each taxing authority may AMEND OR ALTER its proposals at the hearing.

3537410080000001020000

TAXING AUTHORITY	YOUR PROPERTY TAXES LAST YEAR	YOUR TAXES THIS YEAR IF PROPOSED BUDGET CHANGE IS MADE	A PUBLIC HEARING ON THE PROPOSED TAXES AND BUDGET WILL BE HELD:	YOUR TAXES THIS YEAR IF NO BUDGET CHANGE IS MADE
County:	909.97	930.58	Sept. 8, 99 5:05pm Commission Meeting Rm. 2401 SE Monterey Rd.	989.70
	.00	.00		.00
Stormwater:	.00	.00		.00
Public Schools:			Sept. 7, 99 7:00pm School Board Meeting Room, 500 E Ocean Blvd.	
By State Law:	1052.84	1001.83		1029.37
By Local Board:	426.48	433.50		416.99
Sewalls Pt	311.13	316.87	Sept. 14, 99 7:00pm Town Hall 1 South Sewall's Point Rd.	310.21
	.00	.00		.00
Late/Non File	.00	.00		.00
Water Mgmt Dist:	97.81	99.62	Sept. 8, 99 5:15pm Bldg B-1 3301 Gun Club Rd. West Palm Bch.	95.44
Everglades	16.38	16.69		16.02
Independent Special Dist*	45.07	53.18	Includes: Childrens Services, FIND	44.07
Voter Approved Debt Payment*	98.96	100.28	Includes: School & County Bonds	100.28
Non-Ad Valorem	.00	.00	WATER CONTROL/CONSERVANCY DIST	.00
Total Property Tax	2958.64	2952.55		2902.08
Real Property	COLUMN 1	COLUMN 2	* FOR DETAILS ON INDEPENDENT SPECIAL DISTRICTS AND VOTER APPROVED DEBT, CONTACT YOUR TAX COLLECTOR AT: (561) 288-5595	COLUMN 3
	SEE REVERSE SIDE FOR EXPLANATION			SEE REVERSE SIDE FOR EXPLANATION
YOUR PROPERTY VALUE LAST YEAR: 1998	MARKET VALUE 196300	ASSESSED VALUE 188840	EXEMPTIONS 25000	TAXABLE VALUE 163840
YOUR PROPERTY VALUE THIS YEAR: 1999	194762	191861	25000	166861

- IF YOU FEEL THE MARKET ASSESSED VALUE OF YOUR PROPERTY IS INACCURATE OR DOES NOT REFLECT FAIR MARKET VALUE, CONTACT YOUR PROPERTY APPRAISER AT:
100 E Ocean Blvd. Suite 300, Stuart, FL 34994 (561) 288-5608
- IF THE PROPERTY APPRAISER'S OFFICE IS UNABLE TO RESOLVE THE MATTER AS TO MARKET VALUE, YOU MAY FILE A PETITION FOR ADJUSTMENT WITH THE VALUE ADJUSTMENT BOARD. PETITION FORMS ARE AVAILABLE FROM THE COUNTY PROPERTY APPRAISER AND MUST BE FILED **ON OR BEFORE 09/16/1999**
- YOUR FINAL TAX BILL MAY CONTAIN NON-AD VALOREM ASSESSMENTS WHICH MAY NOT BE REFLECTED ON THIS NOTICE SUCH AS ASSESSMENTS FOR ROADS, FIRE, GARBAGE, LIGHTING, DRAINAGE, WATER, SEWER, OR OTHER GOVERNMENTAL SERVICES AND FACILITIES WHICH MAY BE LEVIED BY YOUR COUNTY, CITY, OR ANY SPECIAL DISTRICT.

PERMIT # _____

TAX FOLIO # 35374/00800000102000

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):

KNOWLES S/D LOT 1 2 PALM COURT

GENERAL DESCRIPTION OF IMPROVEMENT: INSTALL NEW SIDING

OWNER: DENNIS & DIANE BIRDSALL

ADDRESS: 2 PALM COURT STUART, FLA 34996

PHONE #: 561-286-9828 **FAX #:** 561-692-5890

CONTRACTOR: EMMICK CONST. INC.

ADDRESS: P.O. BOX 1968 JENSEN BEACH, FLA 34957

PHONE #: 561 334-0440 **FAX #:** - SAME -

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: _____

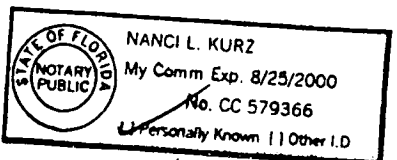
PHONE #: _____ **FAX #:** _____

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

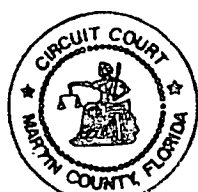


SWORN TO AND SUBSCRIBED BEFORE ME THIS 12th DAY OF Jan 2000 BY Nanci Kurz

[Signature]
NOTARY SIGNATURE

PERSONALLY KNOWN
OR
PRODUCED ID _____
TYPE OF ID _____

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.
BY [Signature] D.C.
DATE 1-15-00



10/28/99



MIAMI-DADE COUNTY, FLORIDA
METRO-DADE FLAGLER BUILDING

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

James Hardie Building Products, Inc.
10901 Elm Ave.
Fontana CA 92337

CONTRACTOR LICENSING SECTION
(305) 375-2327 FAX (305) 375-2558

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

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

Your application for Product Approval of:
Hardiplank, Hardipanel and Hardisoffit

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

This approval shall not be valid after the expiration date stated below. BCCO reserves the right to secure this product or material at anytime from a jobsite or manufacturer's plant for quality control testing.

If this product or material fails to perform in the approved manner, BCCO may revoke, modify, or suspend the use of such product or material immediately. BCCO reserves the right to revoke this approval, if it is determined BCCO that this product or material fails to meet the requirements of the South Florida Building Code.

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

Acceptance No.: 99-0223.07

Expires: 05/01/2002

Raul Rodriguez
Chief Product Control Division

THIS IS THE COVERSHEET, SEE ADDITIONAL PAGES FOR SPECIFIC AND GENERAL CONDITIONS

BUILDING CODE & PRODUCT REVIEW COMMITTEE

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

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

Approved: 05/20/1999

1 of 3

James Hardie Building Products, Inc.

ACCEPTANCE NO: 99-0223.07

APPROVED : MAY 20 1999

EXPIRES : 05/01/2002

NOTICE OF ACCEPTANCE: SPECIFIC CONDITIONS

1. SCOPE

- 1.1 This renews the Notice of Acceptance No. 94-1230.04 that was issued on 05/01/96. It approves Fiber Cement Siding/Soffit as described in Section 2 of this Notice of Acceptance (N.O.A.) designed to comply with the South Florida Building Code 1994 Edition for Miami-Dade County (SFBC). It is approved for the location where the pressure requirements, as determined by the SFBC Chapter 23 do not exceed the design pressure rating values indicated in the approved drawing.

2. PRODUCT DESCRIPTION

- 2.1 The Hardipanel, Hardiplank & Hardisoffit and its components shall be constructed in strict compliance with the following documents: Drawing No. HPNL-3X, HPLK-4X8 & HSOPFF-8X titled "Hardipanel, Hardiplank & Hardisoffit Installation Details", prepared by James Hardie Building Products, dated 03/31/99 with no revisions. They bear the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division. These documents shall hereinafter be referred to as the Approved Drawing.

3. LIMITATIONS

- 3.1 This system is to be installed in front of a 5/8" (5ply) plywood substrate supported by studs or joists at 16" on center as shown on the approved drawings.

4. INSTALLATION

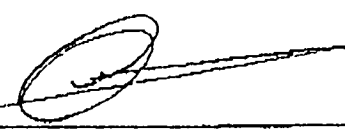
- 4.1 The James Hardie Siding/Soffit and its components shall be installed in strict compliance with the approved drawing.
4.2 The installation of this product will not require Hurricane Protection System.

5. LABELING

- 5.1 Each component shall bear a permanent label with the manufacturer's logo, city, state and the 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, including duplicate copies of the approved drawings, as identified in Section 2 of this N.O.A.
6.1.2 Any other document required by the Building Official or the SFBC in order to properly evaluate the installation of this system.


Candido Font PE, Senior Product Control Examiner
Product Control Division

-2 of 3-

James Hardie Building Products, Inc.

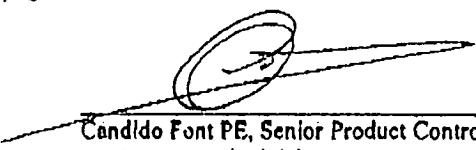
ACCEPTANCE NO.: 99-0223-07

APPROVED : MAY 20 1999

EXPIRES : 05/01/2002

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: "Miami-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 purpose.
6. The Notice of Acceptance number preceded by the words Miami-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
7. A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all time. The engineer need not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
9. This Notice of Acceptance consists of pages 1, 2 and this last page 3.


Candido Font PE, Senior Product Control Examiner
Product Control Division

END OF THIS ACCEPTANCE

-3 of 3-

James Hardie Building Products, Inc.

ACCEPTANCE NO: 99-0223.07

APPROVED : MAY 20 1999

EXPIRES : 05/01/2002

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED
(For File ONLY. Not part of NOA)

A DRAWING

1. Drawing prepared by James Hardie Building Products, Inc. titled "Hardiepanel, Hardieplank & Hardiesoffit Installation Details", drawing No HPNL-8X, HPLK-4X8 & HSOFFIT-8X, dated 03/31/99, with no revisions, signed and sealed by R. L. Ogana, PE.

B TEST

Laboratory Report	Test	Date	Signature
1 ATI-16423-1	PA 202 & 203	03/18/96	A. N. Reeves PE.
2 ATI 16423-2	PA 202 & 203	03/18/96	A. N. Reeves PE.
3 ATI 16423-3	PA 202 & 203	03/18/96	A. N. Reeves PE.

C CALCULATIONS

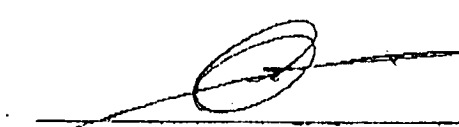
None

D MATERIAL CERTIFICATION

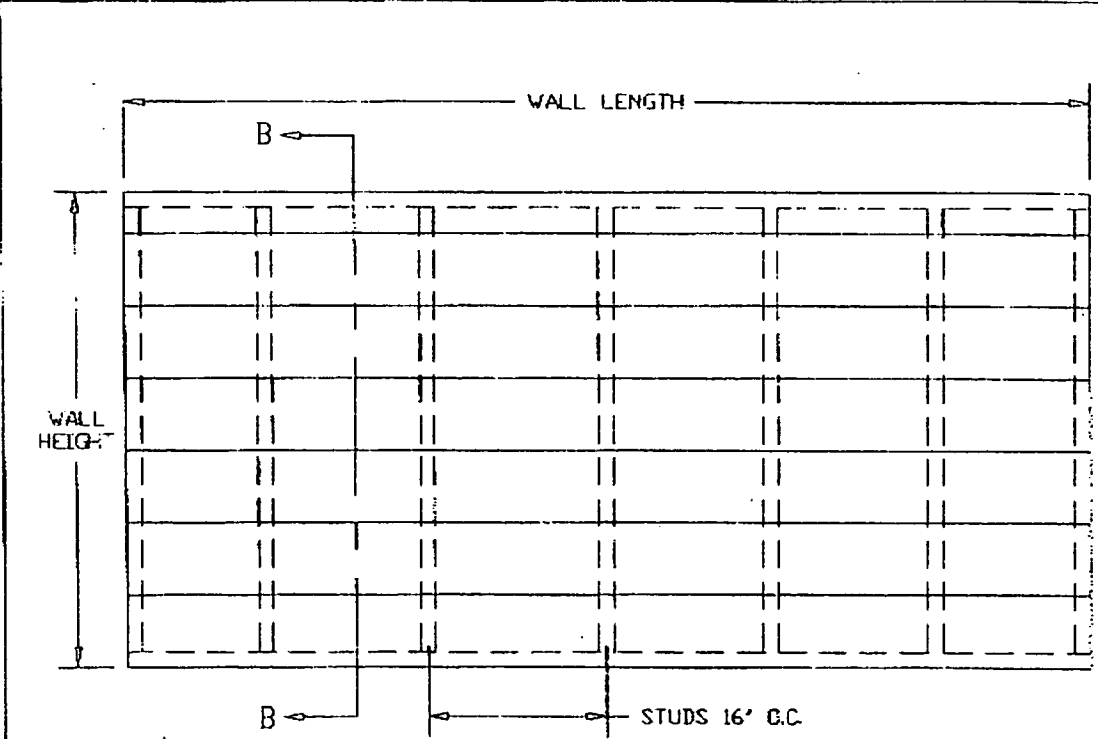
- 1 Standard Compliance (ASTM C-1185) issued by ETL Testing Laboratories on 05/09/95 signed by D. K. Tucker, PE.
- 2 Evaluation Report NER-405 issued by National Evaluation Service, Inc. on 01/01/93, with no signature.

E STATEMENT

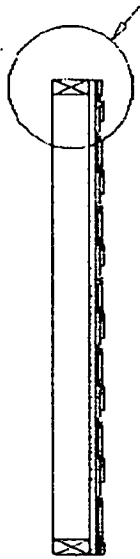
- 1 No change letter issued by James Hardie Building Products, Inc. issued on 02/16/99, signed and by J. L. Mulder.


Candido Font PE, Senior Product Control Examiner
Product Control Division

EI



REVISION BLOCK
REV. 1/1 OKS



DESCRIPTION
Hardiplank siding material is a non asbestos fiber cement product tested in accordance with ASTM C-1185 and meeting the requirements of the South Florida Building Code.

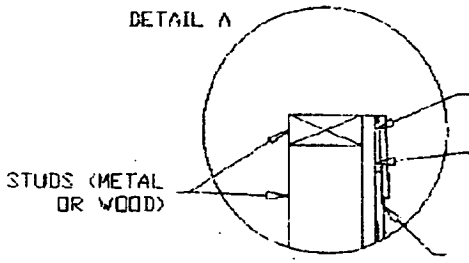
PLANK DIMENSIONS
Width Length Thickness
59 1/2" 12 & 14' 5/16"

DESIGN PRESSURE RATING
Installation Design Pressure
Wood frame -92 PSF
Metal frame -92 PSF

NOTES
1) ALL INSTALLATION SHALL BE DONE IN CONFORMANCE WITH THIS NOTICE OF ACCEPTIONS, THE MANUFACTURER'S INSTALLATION RECOMMENDATIONS, AND THE APPLICABLE SECTIONS OF THE SOUTH FLORIDA BUILDING CODE.
2) STUDS OF METAL OR WOOD WHERE HARDIPLANK WILL BE INSTALLED SHALL BE DESIGNED BY AN ENGINEER OR ARCHITECT PER THE S.F.B.C. AND THE REQUIREMENTS OF THIS N.O.A.

SECTION B-B

HARDIPLANK SIDING INSTALLATION DETAILS
The planks are applied horizontally commencing from the bottom course of a wall with 1/4" side laps at top of the plank. The optional PVC cover molding 1 5/8" wide is applied to the bottom plate under the bottom plank course. The vertical joints must be over framing members. Optional PVC butt joints inserts are used for on-stud jointing. The planks are to be installed over 5/8" (5 ply) APA rated plywood supported by a minimum of 2"x4" wood studs or 20 ga. x 3 5/8" x 1 3/8" steel studs spaced a maximum of 16" o.c. The siding shall be fastened through over lapping planks with 8d x 2 1/2" long galvanized box nails over wood studs or with 48 x 2 1/4" long x 0.315" corrosion resistance N.D. ribbed trige screws over steel studs. The fasteners shall be placed in the over-lapping area 58" o.c. vertically and 16" o.c. horizontally into the studs through the 5/8" plywood sheathing. A distance of 3/4" from the edges shall always be observed.



STUDS (METAL OR WOOD)

5/8" PLYWOOD SHEATHING WATERPROOFING PER 2704.6b OF S.F.B.C.

HARDIPLANK SIDING

Approved
4/13/99

APPROVED AS COMPLYING WITH THE SOUTH FLORIDA BUILDING CODE
DATE: 4/13/99
BY: [Signature]
PROJECT GENERAL DIVISION
DURING CODE COMPLIANCE OFFICE
ACCEPTANCE NO. 99-0223-07

JAMES HARDIE BUILDING PRODUCTS - USA RESEARCH & DEVELOPMENT CENTER	15001 ELK AVENUE FONTANA, CA 92337 909-356-6300 FAX: 909-427-0674
	DATE: 3/31/99
This drawing and the copyright therein are the property of the above company and accordingly the drawing must not be copied or reproduced in any material form whatsoever.	TITLE: HPLK-4XB
TITLE: HARDIPLANK® INSTALLATION DETAILS	SHEET NO:
APPROVED BY: [Signature]	SCALE: NTS
BY OFFICE: CE	DRAWN BY: R LAPPIN
	REV. NO: 24121

~~2000 1999 1998~~
Town of Sewall's Point
Building Department - Inspection Log

Inv. 1-24-00

PAGE 1 OF 1

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4765	Spencer 155 S. G. Cottrell Rd	porch deck	cancel	re-schedule 1-26-00
4682	Shurt 385 S. Smiths Pt. Rd	final No shutters Required FOR EXTER. ENDS	Passed. WG.	Copy of C.O.? FOR OWNER.
4702	Perry 18 N. Ridgeway	strap Addition (AFTER 9:30)	Passed WG.	PARTIAL WALL STRAPS NO TRUSSES INSTALLED
4717	ZARRO 124 N.S.P. Rd.	partial footer	CANCEL BY CONTR.	
4516	LINO 6 Island Rd E. side	privacy wall before pour if required	Passed WG.	Picked up Revised plan FOR B.B.Q AREA WALL + Inspected Beam Steel
4794	Bradell 2 Palm Court	improvement	WG.	
		(AFTER 10 AM)		

OTHER: L.P.N. 4732 19 NE COPPING WAY; SPBC UN. FE. (SPRINK) COME REQ. TO GC.
 Left with Permit in Box. WG.

INSPECTOR: _____ DATE: 1/24/00

ALL INSPECTIONS BY: BILL COOPER - REVIEWER:

2000 ~~123456789~~

Town of Sewall's Point
Building Department - Inspection Log

Fr: 2-4-00

PAGE 1 OF 2

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4748	Dunn		Passed	postponed from Wed.
⑧	7 Via Lucindia North	plywood sheathing	B.G.	See Below
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4619	Roos			CONTRACTOR TO COME TO OFFICE MONDAY RE: REVISIONS
X	8 Quail Run Ln.	c/o		
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4699	Taormina	roof final	Passed	
⑥	26 Fieldway (Indialucie)		B.G.	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4791	TO CASTLE HILL WAY	FINAL (SHUTTER)	Rejected	panels not stacked
⑤	(FOUNDING SHUTTER)		B.G. (CALL WHEN CONNECTED)	Numbered & not stacked
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4589	DeGoia	prep pour steel for floor	Passed	Bearing Panel in GAR: Picked up ENG. DRAWING of Detail
③	130 N.S.P. Rd.		B.G.	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
N. 4659	Conway	eng strapping	passed	Faxed drawing To Add Straps + 3-1/4" TAPCON
④	17 Lofting		B.G.	
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
①	2 Palm Court (opposite Knowles)	check	passed	

OTHER: * Need letter From Architect For NOT USING Two Small Trusses. Before FRAMING INSPECTION - Architect. Looked AT Job this morning per Contractor
1.66 N. SP RD tree removal (DEP) ✓ PASSED: PERMIT 293 ISSUED

INSPECTOR: _____

DATE: 2/7/00

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/23/00, 2000;

Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4839	Schwartz	after the fact	Partial	Visual Inspection
①	109 S. Sewall's Pt Bill 285-1054 Rd	Rough end Elec + PIB	BG.	Elect + PIB Rough Almost Complete
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4821	Ciconia	wall	Passed	10:00 AM if possible
⑥	126 N.S Pt. Rd	Column Steel	BG.	2-Columns by Rd. Steel.
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4577	474 Sinton	30 day Temp	Consultation	afternoon of
⑧	33 N River Rd (enter INDIALUCIE)	elect *	BG.	possible Visual Inspe House Almost Complete Left Form with owner
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4799	Brownsville	for sub Footing	Passed	
④	2 NE Palm Ct.		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4805*	FOGUA	UNDER-ELECT.	Passed	*MASTER P.N. 4803
②	4806* 101 HENRY SENAWAY	ROUGH PLUMBING	BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4838	Gigante	sheathing	Passed	
③	14 N. Lucinda		BG.	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
4759	Daycon	611 5109	Passed	
⑤	14 Palm Court		BG.	

OTHER: 16 S. SEWALL'S POINT RD (FADDEN): A/C PLATFORM RELOCATION COMPLIANCE? (E)
CONTR. TO CALL 110

INSPECTOR (Name/Signature): _____

6187

FENCE

**(PERMIT NEVER
ISSUED)**

TOWN OF SEWALL'S POINT

Date 3/14/03 **BUILDING PERMIT NO. 6187**
 Building to be erected for BALLARD Type of Permit FENCE
 Applied for by O/B (Contractor) Building Fee 30.00
 Subdivision KNOWLES Lot 1 Block _____ Radon Fee _____
 Address 2 PALM COURT Impact Fee _____
 Type of structure SFR A/C Fee _____
 Parcel Control Number: _____ Electrical Fee _____
3537410080000001020000 Plumbing Fee _____
 Amount Paid 30.00 Check # _____ Cash _____ Other Fees (_____) Roofing Fee _____
 Total Construction Cost \$ 2000.00 TOTAL Fees 30.00

Signed Michael Ballard Applicant Signed Gene Simmons (rod) 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 checked="" 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

Building Permit Number: 6187

Owner or Titleholder Name: MICHAEL C. BALLARD City: Stuart State: FL Zip: 34996
Legal Description of Property: 2 Palm Ct. STUART FL 34996 Parcel Number: 35-37-41-008-000-0001
Location of Job Site: 2 Palm Court Type of Work To Be Done: Fence Replacement

CONTRACTOR/Company Name: Hancock O/B Phone Number: 772-288-7040
Street: 503 E. Monterey Rd. City: Stuart State: FL Zip: 34994
State Registration Number: State Certification Number: Martin County License Number:

ARCHITECT: Braden Braden Phone Number: 772-287-8258
Street: 417 COCONUT AVE City: STUART State: FL Zip: 34996

ENGINEER: N/A Phone Number:
Street: N/A City: State: Zip:

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: Garage: Covered Patios: ScreenedPorch:
Carpport: Total Under Roof Wood Deck: Accessory Building:
Type Sewage: Septic Tank Permit Number From Health Depart. Well Permit Number:

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

COST AND VALUES Estimated Cost of Construction or Improvements: 2000 Estimated Fair Market Value (FMV) Prior
To Improvements: N/A If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES NO X

SUBCONTRACTOR INFORMATION

Electrical: State: License Number:
Mechanical: N/A State: License Number:
Plumbing: N/A State: License Number:
Roofing: State: License Number:

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) South Florida Building Code (Structural, Mechanical, Plumbing, Gas)
National Electrical Code Florida Energy Code
Florida Accessibility Code

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 13th day of March 200 3
by Michael C Ballard who is personally
known to me or produced Drivers License
as identification. Michael C Ballard
Notary Public: [Signature]
My Commission Expires: [Signature]
Seal Expires March 18, 2005

CONTRACTOR SIGNATURE (Required)
On State of Florida, County of: MARTIN
This the 13th day of March 200 3
by MICHAEL Anthony who is personally
known to me or produced Drivers License
As identification. [Signature]
Notary Public: [Signature]
My Commission Expires: [Signature]
Seal Expires March 18, 2005

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR A FENCE

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

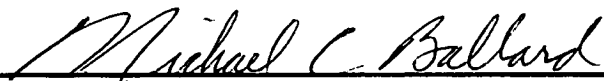
Application form must contain the following information:

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

Submittals (2 copies)

1. Current survey (boundary & topographic) containing the following information:
 - a. Legal Description of Lot
 - b. Lot dimensions and bearings
 - c. Street and Waterway names
 - d. Easements
 - e. ROW's
 - f. Canals, Ponds, or Riverfront locations
 - g. Location of existing and proposed fences
 - h. Description of type and height of fence at all locations
2. Statement of Fact (owner/builder affidavit)
3. Proof of ownership (deed or tax recpt.)
4. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants
5. Application for tree removal or relocation (attach tree survey and removal or relocation plan)
6. A certified copy of the Notice of Commencement for any work over \$2500.00
7. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
8. Copy of Workmen's Compensation
9. Copy of Liability Insurance

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



(SIGNATURE OF APPLICANT)

DATE SUBMITTED: 3.13.03

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 though 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 Statutes 489.103(7).

I have read the above and agree to comply with the provisions as stated.

Name: MICHAEL C BALLARD Date: 3.13.03

Signature: Michael C Ballard

Address: 2 Palm Court

City & State: Stuart, FL. 34996

Permit No. _____

This form is for all permits except electrical.

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF _____

COUNTY OF _____

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):

2 Palm Court Stuart, FL. 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Fence Replacement

OWNER: MICHAEL C BALLARD

ADDRESS: 2 Palm Court Stuart, FL. 34996

PHONE #: 772-288-7040

FAX #: 561-627-8091

CONTRACTOR: Stonewalk

ADDRESS: 503 E. Monterey Rd. Stuart, FL. 34994

PHONE #: 910-448-2222

FAX #: 772-463-0709

SURETY COMPANY (IF ANY) NONE

ADDRESS: _____

PHONE # _____

FAX #: _____

BOND AMOUNT: _____

LENDER: NONE

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.

Michael C Ballard
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 13th DAY OF March 2007 BY Michael C. Ballard

Blake Miller
NOTARY SIGNATURE

PERSONALLY KNOWN
OR PRODUCED ID _____
TYPE OF ID _____



Blake Miller
My Commission CC088604
Expires March 19, 2008

NORTH
Pg 1

INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

PERMIT #	OWNER'S NAME	ADDRESS	DESCRIPTION	APPROVED BY & DATE
9188	Robinson	164 Robinson	Back deck repair	
6323	Brown	7 Fieldway Dr	Solar pool heater	JW 12/28/07
6868	Heck	28 Fieldway Dr	Paver driveway - finish	JW 12/28/07
6939	Hoops	22 N Sewalls Pt	Deck repair	
7023	Dee	26 N Sewalls Pt	Roof shingle repair	
7001	Motley	34 N Sewalls Pt	Fence repair	JW 12/28/07
7001	Motley	34 N. Sewalls Pt	Repair dock & seawall	JW 12/28/07
7001	Sparks	200 N. Sewalls Pt	Back deck repair	
6997	Donelson	35 N. River Rd	Deck floor board repair	
7417	Young	40 N. River Rd	Fence repair	JW 12/28
6569	Young	40 N. River Rd	Fill for landscaping	JW 12/28
7018	Koch	71 N. River Rd	Repair dock	
1038	Stanford	73 N. River Rd	Fence repair	
6364	Hanan	84 N. Sewalls Pt	Accordion shutters	
6365	Bew	86 N. Sewalls Pt	Accordion shutters	
8051	Bessemer	116 N. Sewalls Pt	Pool Enclosure	
6187	Ballard	2 Palm Ct	Fence	JW 12/28
6387	Ballard	2 Palm Ct	Fence	JW 12/28

6208

ELECTRIC FENCE

TOWN OF SEWALL'S POINT

Date 3/31/03

BUILDING PERMIT NO. 6208

Building to be erected for BARNAUD

Type of Permit FENCE ELECTRICAL

Applied for by TERRY A. BRUTON (Contractor)

Building Fee _____

Subdivision KNOWLES Lot 1 Block _____

Radon Fee _____

Address 2 PALM COURT

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

353741008000001020000

Electrical Fee 35.00

Plumbing Fee _____

Amount Paid 35.00 Check # 4799 Cash _____ Other Fees (_____)

Roofing Fee _____

Total Construction Cost \$ 550.00

TOTAL Fees 35.00

Signed Terry A. Bruton

Signed Gene Simmons (Rob)

Applicant

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 _____

FOR PLANS REF SEE PERMIT #6187

Permit Number: _____

Town of Sewall's Point BUILDING PERMIT APPLICATION

OWNER/TITLEHOLDER NAME: MICHAEL C. BALLARD Phone (Home) 288-7040 (Work) _____

Job Site Address: 2 PALM CT, STUART, FL 34996 City: _____ State: _____ Zip: _____

Legal Description of Property: _____ Parcel Number: 3537410080000001

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

Description of Work To Be Done: WIRING FOR LIGHT FIXTURES ATOP FENCE COLUMNS

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

CONTRACTOR/Company Name: TERRY A. BRUTON Phone Number: 370-3247

Street: 2255 SE HADDON ST City: PORT ST LUCIE State: FL Zip: 34984

State Registration Number: FL 0004781 State Certification Number: _____ Martin County License Number: ME 481

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 550.00 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Phone Number: _____

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

ENGINEER _____ Phone Number: _____

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ ScreenedPorch: _____
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: _____
This the _____ day of _____, 200____
by _____ who is personally
known to me or produced _____
as identification. _____

Notary Public

My Commission Expires: _____

Seal

CONTRACTOR SIGNATURE (required)

Terry A. Bruton
On State of Florida, County of: Martin
This the 27th day of March, 2003
by T. A. Bruton who is personally
known to me or produced FL D.I.
As identification: Joan H. Barrow

Notary Public

My Commission Expires: _____

PERMIT APPLICATIONS VALID 30 DAYS FROM APPROVAL NOTIFICATION - PLEASE CHECK EXPIRES PROMPTLY!



AC# 0564189

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
ELECTRICAL CONTRACTORS LICENSING BOARD

SEQ# L02083001856

DATE	BATCH NUMBER	LICENSE NBR
08/30/2002	190260985	ER0004781



The ELECTRICAL CONTRACTOR
Named below HAS REGISTERED
Under the provisions of Chapter 489 FS
Expiration date: AUG 31, 2004
(INDIVIDUAL MUST MEET ALL LOCAL LICENSING
REQUIREMENTS PRIOR TO CONTRACTING IN ANY AREA)

BRUTON, TERRY A
INDIVIDUAL
2255 SE HADDON ST
PORT ST LUCIE FL 34984

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY SEYER
SECRETARY

OCCUPATIONAL TAX RECEIPT
CITY OF PORT ST. LUCIE

121 SW PORT ST. LUCIE BOULEVARD
PORT ST. LUCIE, FLORIDA 34984-5099

THIS LICENSE VALID WHEN ALL STATE AND LOCAL
REGULATED TRADE LICENSES / COMPETENCY
CARDS ARE VALID FOR THE CURRENT FISCAL YEAR.

TERM: October 1, 2002 to September 30, 2003

THIS IS A RECEIPT FOR TAX PAID AND IS NOT REGULATORY IN NATURE

This license does not warrant or hold that the licensee is competent to perform in the business(es) as licensed, but that the licensee has paid the required fee(s) and provided the necessary documentation (if required) to be licensed in this business.
LICENSE MUST BE EXHIBITED CONSPICUOUSLY AT YOUR PLACE OF BUSINESS.

VALID AT THIS BUSINESS ADDRESS ONLY

Business/Lic. 103847/03-1013141

Business Address: 2255 SE HADDON ST
Classification: CONT CONTRACTOR
Issued to: TERRY A BRUTON
2255 SE HADDON ST


Fee: 110.25
Discount: 0.00

Mary A. Mastro
BUSINESS LICENSE COORDINATOR

PORT ST LUCIE FL 34984

704/111 KA BUSINESS COPY

Fees: 110.25 Late Fees: 11.03 Total this payment : 121.28



MARTIN COUNTY, FLORIDA
Construction Industry Lic Bc
Certificate of Competency
License: ME00401
Expires September 30, 2003
BRUTON, TERRY A

2255 SE HADDON ST
PSL, FL 34984
MASTER ELECTRICIAN

STATE OF FLORIDA
DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY
DIVISION OF WORKERS' COMPENSATION

CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW


CONSTRUCTION INDUSTRY EXEMPTION

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

EFFECTIVE	04/16/2002	EXPIRATION DATE	04/15/2004
PERSON	BRUTON	TERRY	A
SSN	261-82-9437		
FEIN	592047395		
BUSINESS	BRUTON TERRY A ELECTRICAL CONTRACTOR 2255 SE HADDON STREET PORT SAINT LUCIE FL 34984		

NOTE: Pursuant to Chapter 440.10(1),(g),2,F.S., a sole proprietor, partner, or an officer of a corporation who elects exemption from the Florida Workers' Compensation Law may not recover benefits or compensation under Chapter 440.

PLEASE CUT OUT THE CARD BELOW AND RETAIN FOR FUTURE REFERENCE

<p>STATE OF FLORIDA DEPARTMENT OF LABOR AND EMPLOYMENT SECURITY DIVISION OF WORKERS' COMPENSATION</p>  <p>CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION FROM FLORIDA WORKERS' COMPENSATION LAW</p> <p>EFFECTIVE: 04/16/2002 EXPIRATION: 04/15/2004</p> <p>PERSON: BRUTON TERRY SSN: 261-82-9437 FEIN: 592047395 BUSINESS: BRUTON TERRY A ELECTRICAL CONT 2255 SE HADDON STREET PORT SAINT LUCIE FL 34984</p>	<p>F O L D H E R E</p> <p>NOTE: Pursuant to chapter 440.10(1),(g),2, F.S., a sole proprietor, partner, or officer of an corporation who elects exemption from the Florida Woerks' Compensation Law may not recover benefits or compensation under Chapter 440.</p>
--	---

CUT HERE

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

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
02/04/03

PRODUCER S.T. Good Insurance of FL 2501 SE Aviation Way Stuart, FL 34996 561 287-3625	THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
	INSURERS AFFORDING COVERAGE	NAIC #
INSURED Terry A. Bruton dba Terry A. Bruton Electrical Contractor 2255 SE Haddon St. Port St. Lucie, FL 34984	INSURER A: The Hartford Insurance Group	
	INSURER B:	
	INSURER C:	
	INSURER D:	
	INSURER E:	

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

INSR ADD'L LTR INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A	GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	21SBAER7388	03/22/03	03/22/04	EACH OCCURRENCE \$2,000,000 DAMAGE TO RENTED PREMISES (EA OCCURRENCE) \$300,000 MED EXP (Any one person) \$10,000 PERSONAL & ADV INJURY \$2,000,000 GENERAL AGGREGATE \$4,000,000 PRODUCTS - COMP/OP AGG \$4,000,000
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA ACCIDENT) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below				WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER <input type="checkbox"/> E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

CERTIFICATE HOLDER Town of Sewalls Point fax 220-4765	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
--	---

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 6/16, 20013 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6092	PLITT	ELEC / Part	Passed	
	12 HERON'S NEST	Plumbing Part	Passed	
	O/B			INSPECTOR: <i>[Signature]</i>
6215	FABINSKY	DRIVEWAY +	No swale →	Geo
↓	10 MANDALAY DR	DRAINAGE FINAL		
6013	FLORIDA'S FINEST	ADD'N + REPAIR FINAL		INSPECTOR: <i>[Signature]</i> #1
6008	BELL	ELEC FINAL	Passed	3/12
	2 Palm Ct.			
	Belton			INSPECTOR: <i>[Signature]</i>
6274	BELL	FINAL FENCE	Passed	
	34 S. SEWALL PT.	NO PERMIT ON		
	ALUM. CONCEPTS	SITE		INSPECTOR: <i>[Signature]</i>
6282	LEWIS	POOL STEEL	} Passed	
	43 RIO VISTA DR.	GROUND/DRAIN		
	ADVANTAGE	Plumbing	Passed	INSPECTOR: <i>[Signature]</i>
6124	LANPI	REMODEL	Passed	No access
	3 MIDDLE	KITCHEN CAB +	(Bath + kitchen)	
	O/B (warren 4851825)	TILE FINAL	Passed	INSPECTOR: <i>[Signature]</i>
5875	MAXON	FRAMING	Passed	
	9 S. River Road			
	KNEPPER			INSPECTOR: <i>[Signature]</i>

OTHER:

*1 Roof Replacement Final Close *[Signature]* 6/16
 Porch Addition Final Close *[Signature]* 6/16

6324

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 7/11/03

BUILDING PERMIT NO. 6324

Building to be erected for BALLARD

Type of Permit RE-ROOF

Applied for by PACIFIC ROOFING (Contractor)

Building Fee 120.00

Subdivision KNOWLES Lot 1 Block _____

Radon Fee _____

Address 2 PALM COURT

Impact Fee _____

Type of structure ROOF

A/C Fee _____

Parcel Control Number:
3537410080000001020000

Electrical Fee _____

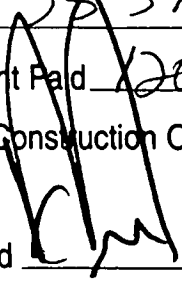
Plumbing Fee _____

Roofing Fee _____

Amount Paid 120.00 Check # 2966 Cash _____ Other Fees (_____)

Total Construction Cost \$ 8,000.00

TOTAL Fees 120.00

Signed 

Signed Gene Simmons (Signature)

Applicant

Town Building Official

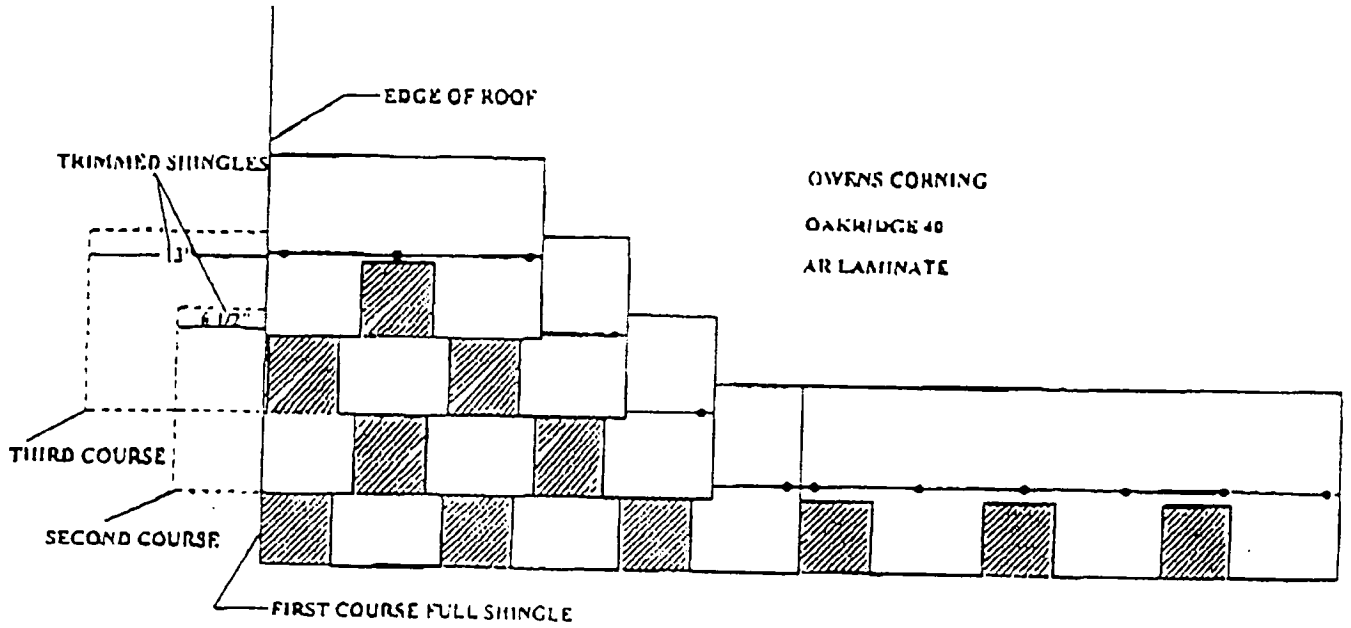
PERMIT

- | | | |
|---|--|--|
| <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 |

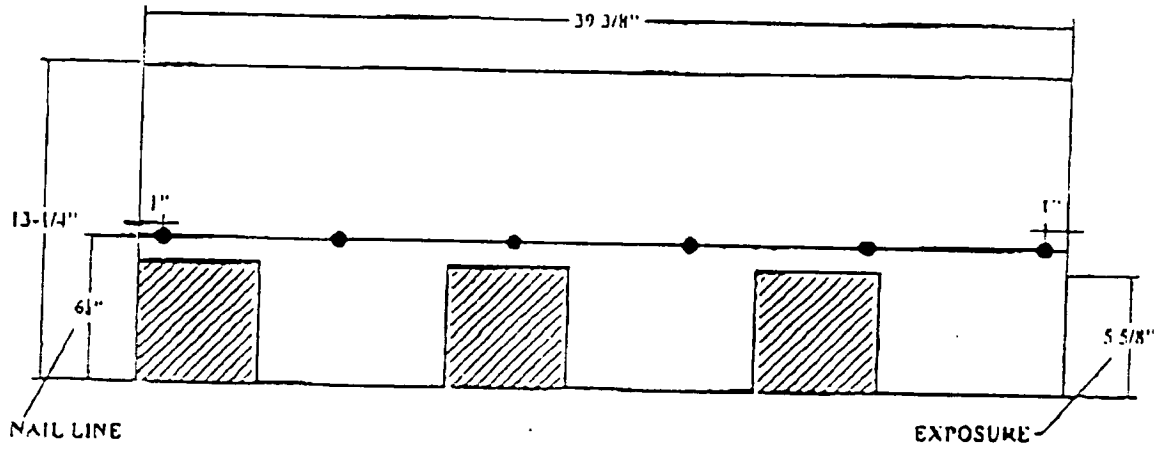
INSPECTIONS

- | | |
|-----------------------------------|------------------------------|
| 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 _____ |

DETAIL A



DETAIL B



OWENS CORNING
FASTENING PATTERN & PHYSICAL DIMENSIONS
OAKRIDGE 40 AR LAMINATE


Frank Zuloaga, RRC
Roofing Product Control Examiner

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 2 through 4.

END OF THIS ACCEPTANCE

Page 4



Frank Zuloaga, RRC
Roofing Product Control Examiner

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Owner or Titleholder Name: MICHAEL BALLARD Building Permit Number: City: STUART State: FL Zip: 34996
Legal Description of Property: Parcel Number:
Location of Job Site: 2 PALM COURT Type of Work To Be Done: RE-ROOF SHINGLE TO SHINGLE

CONTRACTOR/Company Name: PACIFIC ROOFING Phone Number: 283-1763
Street: P.O. Box 2697 City: STUART State: FL Zip: 34995
State Registration Number: State Certification Number: CCC056793 Martin County License Number:

ARCHITECT: Street: City: State: Zip: Phone Number:

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: Garage: Covered Patios: Screened Porch:
Carport: Total Under Roof Wood Deck: Accessory Building:
Type Sewage: Septic Tank Permit Number From Health Dept. Well Permit Number:

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

COST AND VALUES Estimated Cost of Construction or Improvements: 8,000 Estimated Fair Market Value (FMV) Prior
To Improvements If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES NO

SUBCONTRACTOR INFORMATION

Electrical: State: License Number:
Mechanical: State: License Number:
Plumbing: State: License Number:
Roofing: PACIFIC ROOFING State: FL License Number: CCC056793

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

CODE EDITIONS IN EFFECT AT TIME OF APPLICATION

Florida Building Code (Structural, Mechanical, Plumbing, Gas) South Florida Building Code (Structural, Mechanical, Plumbing, Gas)
National Electrical Code Florida Energy Code
Florida Accessibility Code

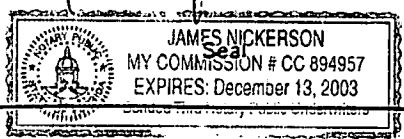
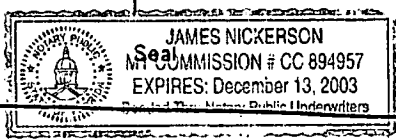
I HEREBY CERTIFY THAT THE INFORMATION I HAVE FURNISHED ON THIS APPLICATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND I AGREE TO COMPLY WITH ALL APPLICABLE CODES, LAWS AND ORDINANCES DURING THE BUILDING PROCESS.

OWNER OR AGENT SIGNATURE (Required)
State of Florida, County of: MARTIN
This the 9 day of July, 2003
by ROB ASEN who is personally known to me or produced as identification.

CONTRACTOR SIGNATURE (Required)
On State of Florida, County of: MARTIN
This the 9 day of July, 2003
by REINHARD T. GONZALEZ who is personally known to me or produced as identification.

Notary Public
My Commission Expires:

Notary Public
My Commission Expires:





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

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375-2558

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

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

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Owens Corning
One Owens Corning Parkway
Toledo, OH 43659

Your application for Notice of Acceptance (NOA) of:
Oakridge 40 AR

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

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

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

ACCEPTANCE NO.: 01-0522.04
EXPIRES: 07/19/2006

Raul Rodriguez
Chief Product Control Division

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

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

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

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
APPROVED: 07/19/2001 DATE: 7/11/03

BUILDING OFFICIAL
Gene Simmons

ROOFING SYSTEM APPROVAL

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

Approval Date: July 19, 2001
 Expiration Date: July 19, 2006

1. Scope:

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

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Onkrige 40 AR	13 1/4" x 39 3/8"	PA 110	A heavy weight, fiberglass reinforced four tab asphalt shingle.

3. LIMITATIONS:

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

4. INSTALLATION:

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

5. LABELING:

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

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



Frank Zuloaga, RRC
 Roofing Product Control Examiner

ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
11/01/2002

PRODUCER (561)746-4346 FAX (561)746-9599
Tequesta Agency, Inc.
 218 S. US Highway One, Ste 300
 Tequesta, FL 33469
 Debra Hicks

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

INSURERS AFFORDING COVERAGE

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

INSURER A:	American Casualty Company
INSURER B:	Transportation Insurance
INSURER C:	
INSURER D:	NOV 05 2002
INSURER E:	

RECEIVED

COVERAGES

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

INSR LTR	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	C2020206931	10/28/2002	10/28/2003	EACH OCCURRENCE \$ 1,000,000 FIRE DAMAGE (Any one fire) \$ 50,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
	GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input checked="" type="checkbox"/> PROJECT <input type="checkbox"/> LOC				
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	C2020206945	10/28/2002	10/28/2003	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATUTORY LIMITS OTH-ER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWN OF SEWALLS POINT
 ATTN: ED ARNOLD
 1 SOUTH SEWALLS POINT ROAD
 STUART, FL 34996

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.

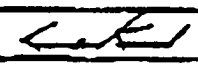
AUTHORIZED REPRESENTATIVE
Mark Kasten/DEBBIE

Debra Hicks

ACORD CERTIFICATE OF LIABILITY INSURANCE		DATE (mm/dd/yyyy) 08/20/02
APPROVER First Union Insurance Exchange Agency, Inc. PO Box 937 Weights, NJ 07474-3937		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AFFECT, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICY(IES) BELOW.
INSURED Owens Corning, Inc. / Owens Corning Laminating Services Group, Inc. Laminating Services Group, Inc. 4 Commercial Drive Cranford, NJ 07818 908.001.3688		
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.		RECEIVED NOV 05 2002 BY:

TYPE OF COV.	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (mm/dd/yyyy)	POLICY EXPIRES (mm/dd/yyyy)	LIMITS
GENERAL LIABILITY	<input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIM MADE <input type="checkbox"/> OCCUR				EACH OCCURRENCE 1 0 PRODUCTS - COMPLETED 1 0 MEDICAL & LEGAL DEFENSE 1 0 AGGREGATE 1 0
	<input type="checkbox"/> DEF. AGGREGATE LIMIT <input type="checkbox"/> POLICY <input type="checkbox"/> PROD. <input type="checkbox"/> OCC.				
AUTOMOBILE LIABILITY	<input type="checkbox"/> ALL AUTO <input type="checkbox"/> NON-SCHEDULED AUTO <input type="checkbox"/> SCHEDULED AUTO <input type="checkbox"/> TRUCK AUTO <input type="checkbox"/> RECREATIONAL AUTO				COMBINED SINGLE LIMIT (Per Occurrence) 1 0 BODILY INJURY (Per Person) 1 0 BODILY INJURY (Per Occurrence) 1 0 PROPERTY DAMAGE (Per Occurrence) 1 0
	<input type="checkbox"/> AUTO LIABILITY <input type="checkbox"/> AUTO AUTO				AUTO ONLY - EA ACCIDENT 1 0 OTHER THAN AUTO ONLY 1 0
COMMERCIAL LIABILITY	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIM MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE 1 0 AGGREGATE 1 0
	<input type="checkbox"/> RETENTION				
A	EMPLOYERS COMPENSATION AND EMPLOYERS LIABILITY	6890005107	7/31/2002	7/31/2003	<input checked="" type="checkbox"/> EACH EMPLOYEE <input type="checkbox"/> EACH OCCURRENCE E.L. DEDUCTIBLE - \$0 EMPLOYEE 1 1,000,000 E.L. DEDUCTIBLE - POLICY LIMIT 1 1,000,000

See back of this certificate for exclusions, conditions and terms of coverage. For employees named on this certificate, Pacific Roofing Corp. is not a subcontractor of Pacific Roofing Corp.

CERTIFICATE HOLDER Town of Sewall's Pt. Bldg. Dept. 1 South Sewall's Pt. Road Stuart, FL 34997	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING COMPANY WILL BE OBLIGATED TO MAIL 30 DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER AS SHOWN TO THE LEFT, BUT FAILURE TO DO SO SHALL NOT CONSTITUTE OR CONSTITUTE AN ACT OR OMISSION THAT SHALL AFFECT OR ALTER THE COVERAGE AFFORDED BY THE POLICY(IES) BELOW.
	SIGNED AND DELIVERED BY:  TITLE: LINE NO. / UNIT:

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ#L0206100081

DATE	BATCH NUMBER	LICENSE NBR
06/10/2002	011129085	CCC056793

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

RECEIVED
NOV 05 2002
BY: _____

GOMES, RICHARD JOHN
PACIFIC ROOFING CORP
PO BOX 2697
STUART

FL 34995

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

KIM BINKLEY-BRYER
SECRETARY

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00
PERMIT # _____

TAX FOLIO # 3537410080000010

STATE OF FLORIDA

NOTICE OF COMMENCEMENT

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):
KNOWLES S/D LOT 1

GENERAL DESCRIPTION OF IMPROVEMENT: RE-ROOF

OWNER: MICHAEL BALLARD
ADDRESS: 2 PKM Court Stuart, FL 34996
PHONE #: NA FAX #: NA

INTEREST IN PROPERTY: _____

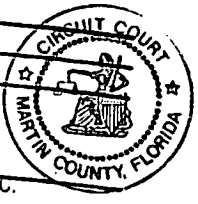
NAME AND ADDRESS OF FEE SIMPLE TITLE HOLDER (IF OTHER THAN OWNER): _____

CONTRACTOR: PACIFIC ROOFING
ADDRESS: P.O. Box 2697 Stuart, FL 34995
PHONE #: 233-7663 FAX #: 233-9505

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

LENDER/MORTGAGE COMPANY _____
ADDRESS: _____
PHONE #: _____

THIS IS TO CERTIFY THAT THE FOREGOING _____ PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
MARSHA EWING, CLERK
BY [Signature] D.C.
FAX # 719123



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 OR HERSELF, OWNER DESIGNATES _____ TO RECEIVE A COPY OF THE LIENORS NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.
PHONE #: _____
FAX #: _____

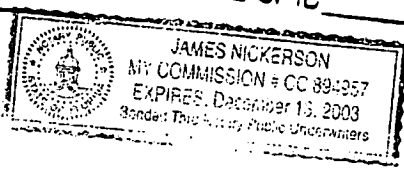
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

* [Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 9 DAY OF July 2005
BY Michael Ballard

[Signature]
NOTARY SIGNATURE

PERSONALLY KNOWN
OR PRODUCED ID _____
TYPE OF ID _____



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ^{9/23} (6/23), 2003 Page 1 of 1

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6252	GREENE	DRY IN+	(S)	(late?)
(12)	26 ISLAND WILFRAM	SHEATHING (FLAT ROOF)		Cancelled by code
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6324	BALDWIN	FLAT ROOF	Passed	close
(10)	2 PALM COURT PACIFIC POOL			INSPECTOR: J
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6343	MASSOY	STEEL - CAP	Passed	
(3)	1 MINDORO WILCO CONST	Seawall		INSPECTOR: J
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6301	SMITH	STEEL-CAP	Passed	
(1)	7 SIMARA ST WILCO CONST.			INSPECTOR: J
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6340	MCBRIDE	SHEATHING	Passed	
(5)	9 S. RIDGEVIEW GOLD COAST	TIN TAG + METAL IN PROGRESS	Partial	INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6261	SMITH	UNDERGROUND	Passed	
(2)	7 SIMARA SUNRISE CONST	PUMBINA SUB	Passed	INSPECTOR: J
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6335	TWOHEY	TEMP POWER	Passed	
(4)	119 HILLCREST DR SEAGATE			INSPECTOR: J


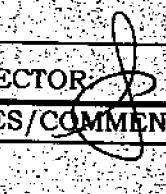
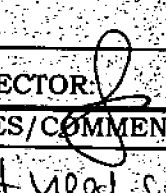
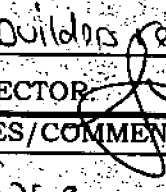
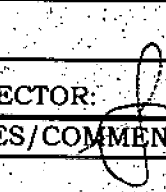
OTHER:

Note: Harb Bay Council sign not per drg !!

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/14, 2003 Page 3 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6321	BOWARD	SEATING	Partial	Partial
	2 PALM COURT PACIFIC			INSPECTOR: 
6092	PIIT	Bl. rough kt	Partial	
	12 HERON'S NEST G/TB			INSPECTOR: 
TREE	MOSELY	TREE	Partial	
	52 S. RIVER CRT			INSPECTOR: 
6272	MOORE	Retain. wall	Partial	but need survey!
	5 Oakhill way AR Martin Homes	Footers		→ builders resp.
		260 1959 Rocky		INSPECTOR: 
6296	BUSSEY	FINAL	Partial	close
	1 PALMETTO DR RIZZOTTO			INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
				INSPECTOR:
OTHER:	9 S. River Rd → Site Compliance			
	26 Island Rd → Revised Drgr. → box full and blocked			

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 7/19, 20023 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6147	ALEXANDER	DRIVENWAY PRE-	Passed	
(3)	86 S. SEWALLS PRD JOHANSON HOMES	POUR		INSPECTOR: <i>[Signature]</i>
6636	FRANCIS	ELEC FINAL	Passal	
(8)	5 S. RIVER WILBERDING			INSPECTOR: <i>[Signature]</i>
6324	BAUARD	INTAGNEAL	Passal	
(4)	2 PALM COURT PACIFIC ROOFING			INSPECTOR: <i>[Signature]</i>
TREE	STUKEL	TREE	Passal	
(7)	7 LANTANA LA			INSPECTOR: <i>[Signature]</i>
5946	ALLMAN	POOL DECK FINAL	Passal	Affidavit: ✓
(5)	3 SUMMER LANE BRIAN'S QUALITY POOL			close INSPECTOR: <i>[Signature]</i>
6054	ALLMAN	MASONRY WALL FINAL	Passal	Final Survey:
(6)	3 SUMMER LANE O/B			done INSPECTOR: <i>[Signature]</i>
6326	WEGMAN	DRY LN + SHEATHING	Passal	
(1)	5 KINGSTON CT STUART ROOFING			INSPECTOR: <i>[Signature]</i>
OTHER:	SEYMOUR			
(2)	73 S. SEWALLS PRD	dumper?	(Tree debris = O.K.)	<i>[Signature]</i>

6387

FENCE

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 8/22/03

BUILDING PERMIT NO. 6387

Building to be erected for BALLARD

Type of Permit FENCE

Applied for by O/B

(Contractor) Building Fee 30.00

Subdivision KNOWLES Lot 1 Block _____

Radon Fee _____

Address 2 Palm Court

Impact Fee _____

Type of structure FENCE

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

3537410080000001020000

Roofing Fee _____

Amount Paid 30.00 Check # _____ Cash _____ Other Fees (_____)

Total Construction Cost \$ 3000.00

TOTAL Fees 30.00

Signed Michael C Ballard

Signed Gene Simmons (Gov)

Applicant

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 checked="" 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

Permit Number:

RECEIVED
AUG 21 2003
BY: [Signature]
(Fax) 561-627-8091

OWNER/TITLEHOLDER NAME: MICHAEL BALLARD Phone (Day) 561-644-1621 (Fax) 561-627-8091

Job Site Address: 2 Palm Ct City: Stuart State: FL Zip: 34996

Legal Description of Property: Same Parcel Number: _____

Owner Address (if different): N/A City: _____ State: _____ Zip: _____

Description of Work To Be Done: Replace existing fence.

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

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

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

COST AND VALUES: Estimated Cost of Construction or Improvements: \$ 3000 (Notice of Commencement needed over \$2500)

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Phone Number: _____

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

ENGINEER _____ 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)
Michael Ballard

State of Florida, County of: MARTIN

This the 20th day of AUGUST, 2003

by MICHAEL CLAYTON BALLARD who is personally known to me or produced B463 543 57086 0 (FLD)

as identification. [Signature]
Notary Public

My Commission Expires: _____
LAURA L O'BRIEN
MY COMMISSION # DD 203981
Expires: April 28, 2007
Bonded Thru Notary Public Underwriters

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____, 200

by _____ who is personally known to me or produced _____

As identification. _____
Notary Public

My Commission Expires: _____
Seal

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # _____

NOTICE OF COMMENCEMENT

STATE OF Florida

COUNTY OF Martin

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

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

2 Palm Court Stuart FL 34996

GENERAL DESCRIPTION OF IMPROVEMENT: Replace existing Fence Add. Add. Fence.

OWNER: Michael C Ballard

ADDRESS: 2 Palm Ct. Stuart, FL. 34996

PHONE #: 772-285-7040

FAX #: 561-627-7901

CONTRACTOR: Self

ADDRESS: Same.

PHONE #: -

FAX #: _____

SURETY COMPANY (IF ANY) None.

ADDRESS: _____

PHONE #: _____

FAX #: _____

BOND AMOUNT: None.

LENDER: None.

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 #: _____

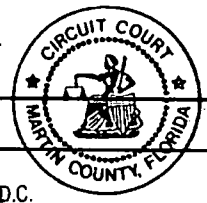
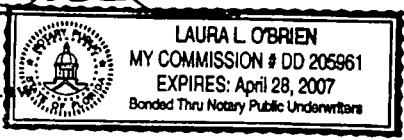
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Michael C Ballard
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 20th DAY OF August 2003
BY MICHAEL BALLARD

Laura L. O'Brien
NOTARY SIGNATURE

OR PERSONALLY KNOWN
PRODUCED ID _____
TYPE OF ID _____



Mike Ballard

2 Palm Ct.

4x4x8 pt.

1x6x6 pt.

2x4x8 pt.

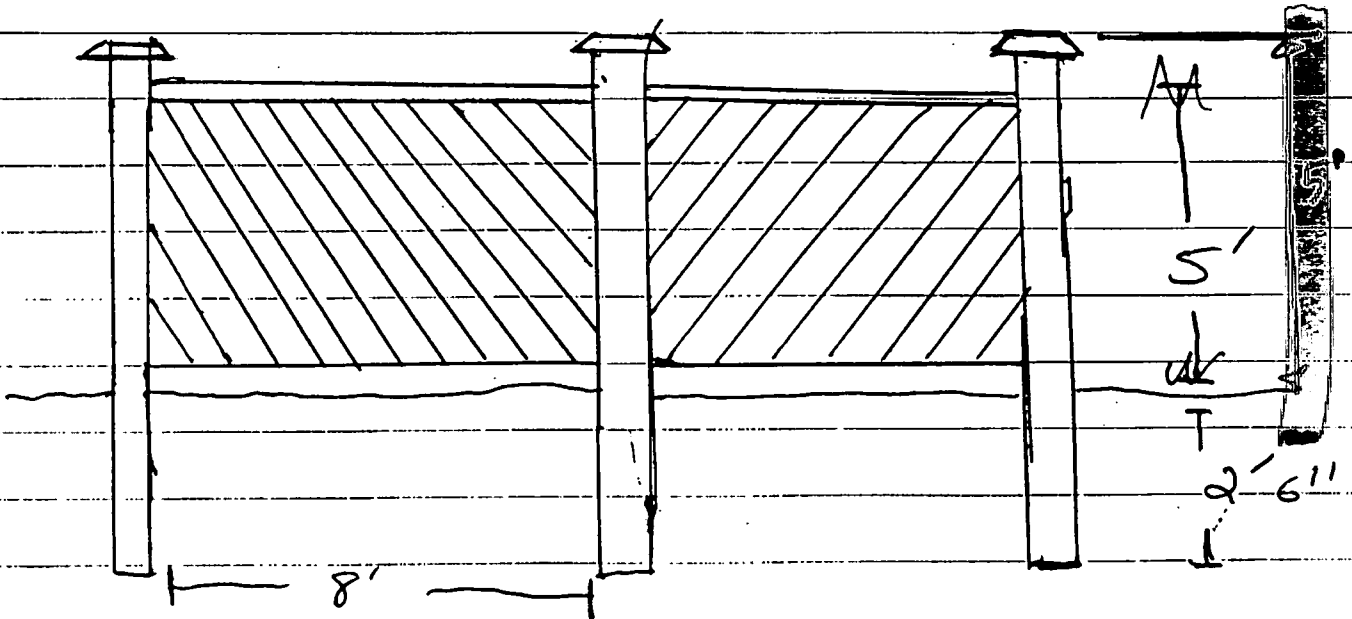
2x8x16 pt.

1x4x8 pt.

3" galv. screws

6d ringshanked nails

12d ringshanked nails



~~EDGE HEIGHT~~

~~MEASUREMENT~~

~~TOP OF FENCE~~

~~TO ADJACENT~~

~~FINISH GRADE~~

~~ORD. 5-8-2016 (10)~~

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 though 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 Statutes 489.103(7).

I have read the above and agree to comply with the provisions as stated.

Name: MICHAEL C BALLARD Date: 8-20-03

Signature: Michael C Ballard

Address: 2 Palm Ct.

City & State: Stuart FL 34994

Permit No. 7

NORTH
Pg 1

INSPECTION LOG FOR ABANDONED/EXPIRED PERMITS

PERMIT #	OWNER'S NAME	ADDRESS	DESCRIPTION	APPROVED BY & DATE
7158	Brown	7 Fieldway Dr	Pool deck repair	
6323	Brown	7 Fieldway Dr	Solar pool heater	JM 12/28/07
6868	Hick	28 Fieldway Dr	Paver driveway - finish	JM 12/28/07
6939	Hick	22 N Sewalls Pt	Deck repair	
7023	Hick	26 N Sewalls Pt	Roof shingle repair	
7001	Motley	34 N Sewalls Pt	Fence repair	JM 12/28/07
7001	Motley	34 N. Sewalls Pt	Repair dock & seawall	JM 12/28/07
7001	Stanford	35 N. River Rd	Deck repair	
6997	Stanford	35 N. River Rd	Dock floor board repair	
7417	Young	40 N. River Rd	Fence repair	JM 12/28
6569	Young	40 N. River Rd	Fill for landscaping	JM 12/28
7018	Koch	71 N. River Rd	Repair dock	
1038	Stanford	73 N. River Rd	Fence repair	
6364	Hanan	84 N. Sewalls Pt	Accordion shutters	
6365	Bew	86 N. Sewalls Pt	Accordion shutters	
8051	Bessemer	116 N. Sewalls Pt	Pool Enclosure	
6187	Ballard	2 Palm Ct	Fence	JM 12/28
6387	Ballard	2 Palm Ct	Fence	JM 12/28

9152

REMOVE

&

REPLACE

WALKING DECK



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:	9152	DATE ISSUED:	MAY 4, 2009
SCOPE OF WORK:	REMOVE WOOD DECK WALKWAY AND REPLACE WITH STONE		
CONDITIONS:			
CONTRACTOR:	OB		
PARCEL CONTROL NUMBER:	353741-008-000-000102	SUBDIVISION	KNOWLES - LOT 1
CONSTRUCTION ADDRESS:	2 PALM CT		
OWNER NAME:	MARTIN		
QUALIFIER:	OB	CONTACT PHONE NUMBER:	631-767-4473

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

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

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

REQUIRED INSPECTIONS

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

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



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:	9152		
ADDRESS	2 PALM CT		
DATE:	5/4/09	SCOPE:	REMOVE WOOD DECK WALKWAY AND REPLACE W/STONE

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: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
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.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$75.00 each	1	\$	75
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5

TOTAL ACCESSORY PERMIT FEE:	\$	80	pd cash <i>W</i>
------------------------------------	----	----	------------------

RECEIVED
TOWN OF SEWALL'S POINT

Town of Sewall's Point

Date: 5/4/09 **DATE: 5-4-09** **BUILDING PERMIT APPLICATION** Permit Number: _____

OWNER/TITLEHOLDER NAME: THOMAS P. MARTIN Phone (Day) 631 767 4473 (Fax) _____

Job Site Address: 2 PALM CT. City: _____ State: FLA Zip: 34996

Legal Description SEWALLS PT FLA Parcel Control Number: _____

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

Scope of work (please be specific): REMOVE DECK/WALKWAY REPLACE WITH STONE WALKWAY

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: \$ 2450
(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
FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:
Estimated Fair Market Value prior to improvement: \$ _____
(Fair Market Value of the Primary Structure only, Minus the land value)
PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: _____ Phone: _____ Fax: _____
Street: _____ City: _____ State: _____ Zip: _____
State License Number: _____ OR: Municipality: _____ License Number: _____

LOCAL CONTACT: _____ Phone Number: _____

DESIGN PROFESSIONAL: _____ Lic# _____ Phone Number: _____
Street: _____ City: _____ State: _____ Zip: _____

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

CODE EDITIONS IN EFFECT THIS APPLICATION: Florida Building Code (Structural, Mechanical, Plumbing, Existing, Gas): 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.

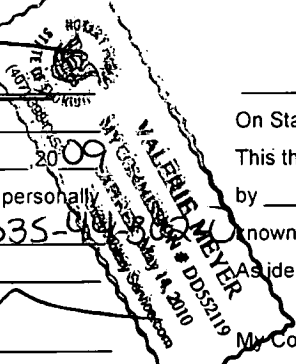
******* A FINAL INSPECTION IS REQUIRED ON ALL BUILDING PERMITS *******

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)
OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)
Thomas P. Martin
State of Florida, County of: Martin
This the 4th day of May, 2009
by Thomas P. Martin who is personally known to me or produced FDL# M635-835-
as identification. Valerie Meyer
Notary Public
My Commission Expires: _____

CONTRACTOR SIGNATURE: (required)

On State of Florida, County of: _____
This the _____ day of _____, 20____
by _____ who is personally known to me or produced _____
as identification. _____
Notary Public
My Commission Expires: _____



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



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: THOMAS MARTIN

Site address of the proposed building work: 2 PARK CT

Name of legal title owner of the address above: SEWALLS PT

Describe the scope of work for the proposed new construction: REMOVE DOWN FLOOR/WALLS
REPAIR WITH PAVED STONE WALK AND DECK

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

Who will supervise the trade work to meet the applicable code? THOMAS MARTIN

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

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? N/A

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

Location: N/A Scope of Work Done: _____ Year: _____

Location: N/A 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: N/A

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

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

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

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



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

OWNER/BUILDER DISCLOSURE STATEMENT

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

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



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

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

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

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

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

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

ON THIS 4 DAY OF May, 2009.

PROPERTY ADDRESS 2 Palm Ct.

CITY Squares Pt STATE FLA ZIP 34996

[Signature]

SIGNATURE OF OWNER/BUILDER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 4th DAY OF May 2009

BY Romas P Martini

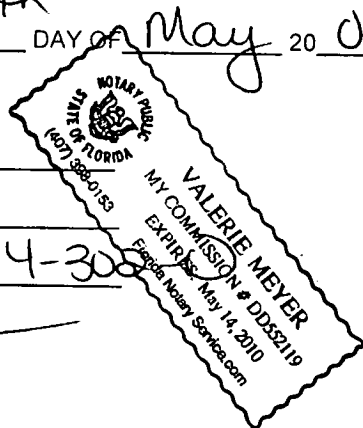
PERSONALLY KNOWN

OR PRODUCED ID

TYPE OF ID FDLHM 635-835-44-300

[Signature]

NOTARY SIGNATURE





Martin County, Florida

Laurel Kelly, C.F.A

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

Summary

print Address 1 of 67

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
35-37-41-008-000-00010-2	2 PALM CT	9558	Address	0	1

Summary

Property Location 2 PALM CT
Tax District 2200 Seawalls Point
Account # 9558
Land Use 101 0100 Single Family
Neighborhood 120600
Acres 0.604

Legal Description
Property Information
 KNOWLES S/D LOT 1

Search By

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

Owner Information
Owner Information
 MARTIN THOMAS

Assessment Info
 Front Ft. 0.00

Mail Information

4373 NE SKYLINE DR
 JENSEN BEACH FL 34957

Market Land Value \$206,150
Market Impr Value \$262,840
Market Total Value \$468,990

Site Functions

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

Recent Sale
Sale Amount \$255,000

Sale Date 4/6/2009
Book/Page 2383 0363

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

Legal disclaimer / Privacy Statement

Data updated on 04/22/2009



9251

REPLACE

WINDOWS AND

SLIDING GLASS

DOOR



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

BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK
 A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	9251	DATE ISSUED:	09/10/2009
SCOPE OF WORK:	WINDOWS AND SGD		
CONDITIONS :	SHUTTER PERMIT REQUIRED		
CONTRACTOR:	LOWES		
PARCEL CONTROL NUMBER:	353741008000000-102	SUBDIVISION	PALM COURT Knowles-Lot 1
CONSTRUCTION ADDRESS:	2 PALM COURT		
OWNER NAME:	MARTIN		
QUALIFIER:	PETER CAFARO	CONTACT PHONE NUMBER:	321-243-0634

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

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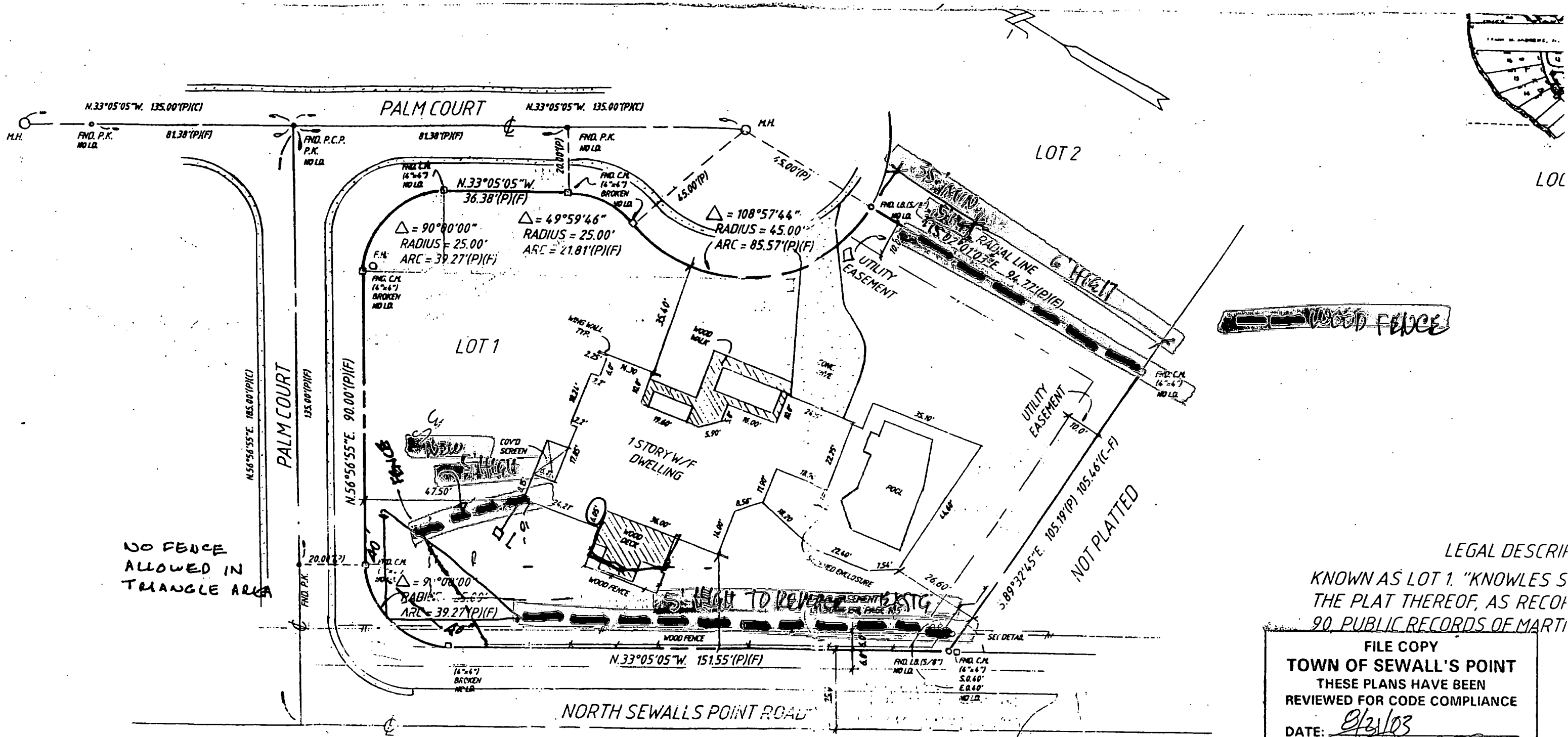
**24 HOUR NOTICE REQUIRED FOR INSPECTIONS - ALL CONSTRUCTION DOCUMENTS MUST BE AVAILABLE ON SITE
 CALL 287-2455 - 8:00AM TO 4:00PM INSPECTIONS 8:30AM TO 12:00PM - MONDAY, WEDNESDAY & FRIDAY**

REQUIRED INSPECTIONS

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

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

Kate - 692-7745 (Lowes)



NO FENCE ALLOWED IN TRIANGLE AREA

LEGAL DESCRIPTION
 KNOWN AS LOT 1, "KNOWLES S
 THE PLAT THEREOF, AS RECORDED
 IN PUBLIC RECORDS OF MARTIN

FILE COPY
 TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 8/31/03
 BUILDING OFFICIAL
 Gene Simola
 EDWIN B. ARSOLD

PN 6387

PROPERTY LOCATED WITHIN FLOOD ZONE: "V-13" BASE ELEV. 10.00
 COMMUNITY - PANEL NUMBER - 120164 0001D

PROPERTY STREET ADDRESS: 2 PALM COURT,
 STUART, FL. 34996

CERTIFIED TO: MICHAEL C. BALLARD & SHARON S. BALLARD;
 WASHINGTON MUTUAL BANK,
 ITS SUCCESSORS AND/OR ASSIGNS;
 BAUER & TWOHEY, P.A.;

SURVEYOR'S NOTES

EASTERLY R/W LINE
 N. SEWALLS POINT RD.
 "DETAIL"
 NOT TO SCALE

SURVEYOR'S C

RECEIVED

DATE: 9-4-09

Date: 09/04/09 TOWN OF SEWALL'S POINT BUILDING PERMIT APPLICATION Permit Number: 9251

OWNER/TITLEHOLDER NAME: Thomas Martin Phone (Day) 281-0407 (Fax)

Job Site Address: 2 Palm Ct. City: State: Zip:

Legal Description 35-37-41-008-000-008 Parcel Control Number: Knowles S/D LOT 1

Owner Address (if different): 4373 NE Skyline Drive City: Jensen Bk State: FL Zip: 34957

Scope of work (please be specific): Replacement windows + SGD

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

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

COST AND VALUES: (Required on ALL permit applications) Estimated Value of Improvements: \$ 5018.81 (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: Peter Capano / LOWES #0763 Phone: 321-243-0634 Fax: 321-773-1528 Street: 4100 NW Federal Hwy City: Jensen Bk State: FL Zip: 34957

State License Number: CGC1508417 OR: Municipality: License Number:

LOCAL CONTACT: Matthew Schlick Phone Number: 321-243-0634

DESIGN PROFESSIONAL: Lic# Phone Number: Street: City: State: Zip:

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

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

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

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

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

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

OWNER SIGNATURE (required) OR OWNER'S LEGAL AUTHORIZED AGENT (PROOF REQUIRED) State of Florida, County of: Martin This the 3rd day of Sept 2009 by Thomas P. Martin who is personally known to me or produced FLD# M635-835 as identification. Notary Public

CONTRACTOR SIGNATURE (required) On State of Florida, County of: Martin This the 1 day of Sept 2009 by Peter A. Capano who is personally known to me or produced as identification. Notary Public

My Commission Expires: My Commission Expires:

SINGLE FAMILY PERMIT APPLICATIONS MUST BE ISSUED WITHIN 30 DAYS OF APPROVAL. NOT REISSUED. ALL OTHER APPLICATIONS WILL BE CONSIDERED ABANDONED AFTER 180 DAYS (FBC 105.3.2) - PLEASE PICK UP YOUR PERMIT PROMPTLY.

RECEIVED
11-25-09

Revision to PN 925

Town of Sewall's Point
BUILDING PERMIT APPLICATION Permit Number: _____

Date: 10/29/09

OWNER/TITLEHOLDER NAME: TOM Martin Phone (Day) 772-287-0407 (Fax) _____

Job Site Address: 2 Palm Court City: Sewall's Pt State: FL Zip: 34990

Legal Description 35-37-41-008-000-00016-2 Parcel Control Number: _____

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

Scope of work (please be specific): Replacement windows (14) in (9) openings

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

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

COST AND VALUES: (Required on ALL permit applications)
Estimated Value of Improvements: \$ 1010.75
(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: Lowe's # 0703 Phone: 772-692-7745 Fax: _____

Street: 4100 NW Federal Hwy City: Jensen Bch State: FL Zip: 34957

State License Number: CGC1508417 OR: Municipality: _____ License Number: _____

LOCAL CONTACT: Matthew Schlick Phone Number: 321-243-0634

DESIGN PROFESSIONAL: N/A Lic# _____ Phone Number: _____

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

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:
1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
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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*****

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

CONTRACTOR SIGNATURE: (required)
[Signature]

State of Florida, County of: Martin
This the 4th day of November 2009
by [Signature] who is personally known to me or produced as identification.

On State of Florida, County of _____
This the 29 day of Oct 2009
by Peter A. Ciccaro III who is personally known to me or produced as identification.

My Commission Expires: 9/13/11

My Commission Expires: _____

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



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:	9251		
ADDRESS	2 PALM CT.		
DATE:	09/10/2009	SCOPE:	WINDOWS AND SGD

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: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
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.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	
		\$	5018.
Total number of inspections @ \$75.00 each	2	\$	150.00
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5.00
TOTAL ACCESSORY PERMIT FEE:		\$	155.00



Summary

print Address
 1 of 67

Parcel Info
Summary

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
35-37-41-008-000-00010-2	2 PALM CT	9558	Address	0	1

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

Summary
Property Location 2 PALM CT
Tax District 2200 Sewall's Point
Account # 9558
Land Use 101 0100 Single Family
Neighborhood 120600
Acres 0.604

Legal Description
Property Information
 KNOWLES S/D LOT 1

Search By

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

Owner Information
Owner Information
 MARTIN THOMAS

Mail Information
 4373 NE SKYLINE DR
 JENSEN BEACH FL 34957

Assessment Info
Front Ft. 0.00

Market Land Value \$184,450
Market Impr Value \$223,930
Market Total Value \$408,380

Site Functions

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

Recent Sale
Sale Amount \$255,000

Sale Date 4/6/2009
Book/Page 2383 0363

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

Legal disclaimer / Privacy Statement

Data updated on 10/21/2009





Summary

print Address
 1 of 67

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
35-37-41-008-000-00010-2	2 PALM CT	9558	Address	0	1

Summary
Property Location 2 PALM CT
Tax District 2200 Sewall's Point
Account # 9558
Land Use 101 0100 Single Family
Neighborhood 120600
Acres 0.604

Legal Description
Property Information
 KNOWLES S/D LOT 1

Search By

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

Owner Information
Owner Information
 MARTIN THOMAS

Assessment Info
Front Ft. 0.00

Mail Information
 4373 NE SKYLINE DR
 JENSEN BEACH FL 34957

Market Land Value \$206,150
Market Impr Value \$262,840
Market Total Value \$468,990

Site Functions

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

Recent Sale
Sale Amount \$255,000

Sale Date 4/6/2009
Book/Page 2383 0363

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

Legal disclaimer / Privacy Statement

Data updated on 8/23/2009



Storm Windows : None or Customer will handle Window Capping : No Existing Damage : No Customer Understands Scope of the Project : Yes Who Will Obtain Permit : Third Party Additional Miles Traveled over 20 : 0 Local Disposal Fee : None Other Work Charge : Yes	Total Number of Window AC Units : None Replace Window Stop / Sill / Brick Mould : No Description of Existing Damage to repair : None Permit Required : Yes Permit Fee : Yes Bring up to Code Description : None Describe Other Work Needed : extra labor Comments : No Comment				
<table border="1" style="margin-left: auto; margin-right: 0;"> <tr> <td style="padding: 2px;">Labor Charges</td> <td style="text-align: right; padding: 2px;">\$ 1045.75</td> </tr> <tr> <td style="padding: 2px;">Detail Deduction</td> <td style="text-align: right; padding: 2px;">-\$ 35.00</td> </tr> </table>		Labor Charges	\$ 1045.75	Detail Deduction	-\$ 35.00
Labor Charges	\$ 1045.75				
Detail Deduction	-\$ 35.00				

Additional Specifications:

Notation: Lowe's will not make structural modifications, paint or stain or remove/reinstall security system equipment. Customer is responsible to advise if property is governed by Historic District Regulations.
 Additional Specifications: The Environmental Protection Agency (EPA) has requested that Lowe's notify installation customers that a lead based paint hazard may exist in dwellings built prior to 1978. See pamphlet EPA 747-K-99-001 for details.

TOTAL CHARGES OF ALL MERCHANDISE AND SERVICES	*where applicable labor is taxable, check local tax restrictions.										
	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="padding: 2px;">SUB-TOTAL</td> <td style="text-align: right; padding: 2px;">\$ 1010.75</td> </tr> <tr> <td style="padding: 2px;">SALES TAX</td> <td style="text-align: right; padding: 2px;">\$ 0.00</td> </tr> <tr> <td style="padding: 2px;">DELIVERY</td> <td style="text-align: right; padding: 2px;">\$ 0.00</td> </tr> <tr> <td style="padding: 2px;">ORDER TOTAL</td> <td style="text-align: right; padding: 2px;">\$ 1010.75</td> </tr> <tr> <td style="padding: 2px;">BALANCE DUE</td> <td></td> </tr> </table>	SUB-TOTAL	\$ 1010.75	SALES TAX	\$ 0.00	DELIVERY	\$ 0.00	ORDER TOTAL	\$ 1010.75	BALANCE DUE	
SUB-TOTAL	\$ 1010.75										
SALES TAX	\$ 0.00										
DELIVERY	\$ 0.00										
ORDER TOTAL	\$ 1010.75										
BALANCE DUE											

Work is to commence upon reasonable availability of Contractor which is anticipated to be _____ [fill in date].
 Estimated completion date is _____ [fill in date].

NOTICE TO CUSTOMER

All items listed in this contract and specification sheet(s) are to be installed under conditions agreed upon at time of purchase and at the price appearing on this contract form. This assumes sound existing substructures, superstructure and points of attachments. Extra labor or material incident to installation necessitated by defective substructures, superstructure, points of attachment, or the moving of fixtures or appliances to be billed at extra cost to customer. DO NOT SIGN THIS CONTRACT UNTIL COMPLETE AND YOU HAVE READ THE TERMS AND CONDITIONS OF THIS CONTRACT. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS SET FORTH ON THIS CONTRACT. YOU ARE ENTITLED TO A COPY OF THIS CONTRACT AT THE TIME OF SIGNATURE.

WITNESS OUR HAND(S) AND SEAL(S) BELOW THIS 24TH DAY OF October, 2009.

Lowe's Home Centers, Inc.

By: [Signature] (Seal)

Print Name: Nick Bryant

4100 NW Fed Hwy
Address

Jensen Beach FL 34957
City State / Province Zip / Postal Code

[Signature] (Seal)
Owner

[Signature]
Print Name

Spouse (Seal)

Print Name

Customer acknowledges receipt of a true copy which was completely filled in prior to Customer's execution hereof. You the customer may cancel this transaction at any time prior to midnight on the third business day after the date of this transaction. See the attached Notice of Flight to Cancel for an explanation of this right.

Storm Windows : None or Customer will handle Window Capping : No Existing Damage : No Customer Understands Scope of the Project : Yes Who Will Obtain Permit : Third Party Additional Miles Traveled over 20 : 0 Local Disposal Fee : None Other Work Charge : Yes	Total Number of Window AC Units : None Replace Window Stop / Sill / Brick Mould : No Description of Existing Damage to repair : None Permit Required : Yes Permit Fee : Yes Bring up to Code Description : None Describe Other Work Needed : extra labor Comments : No Comment
---	---

Labor Charges	\$ 1045.75
Detail Deduction	-\$ 35.00

Additional Specifications:

Notation: Lowe's will not make structural modifications, paint or stain or remove/reinstall security system equipment. Customer is responsible to advise if property is governed by Historic District Regulations.
 Additional Specifications: The Environmental Protection Agency (EPA) has requested that Lowe's notify installation customers that a lead based paint hazard may exist in dwellings built prior to 1978. See pamphlet EPA 747-K-99-001 for details.

TOTAL CHARGES OF ALL MERCHANDISE AND SERVICES	*where applicable labor is taxable, check local tax restrictions.	
	SUB-TOTAL	\$ 1010.75
	SALES TAX	\$ 0.00
	DELIVERY	\$ 0.00
	ORDER TOTAL	\$ 1010.75
	BALANCE DUE	

Work is to commence upon reasonable availability of Contractor which is anticipated to be _____ [fill in date].
 Estimated completion date is _____ [fill in date].

NOTICE TO CUSTOMER

2009-10-28 13:48

All items listed in this contract and specification sheet(s) are to be installed under conditions agreed upon at time of purchase and at the price appearing on this contract form. This assumes sound existing substructures, superstructure and points of attachments. Extra labor or material incident to installation necessitated by defective substructures, superstructure, points of attachment, or the moving of fixtures or appliances to be billed at extra cost to customer. DO NOT SIGN THIS CONTRACT UNTIL COMPLETE AND YOU HAVE READ THE TERMS AND CONDITIONS OF THIS CONTRACT. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS SET FORTH ON THIS CONTRACT. YOU ARE ENTITLED TO A COPY OF THIS CONTRACT AT THE TIME OF SIGNATURE.

WITNESS OUR HAND(S) AND SEAL(S) BELOW THIS 24TH DAY OF October 2009.

Lowe's Home Centers, Inc.

By: [Signature] (Seal)

Print Name: Nick Bryant

4100 NW Fed Hwy
Address

Teaser Beach FL 34957
City State / Province Zip / Postal Code

[Signature] (Seal)
Owner

[Signature]
Print Name

Spouse (Seal)

Print Name

Customer acknowledges receipt of a true copy which was completely filled in prior to Customer's execution hereof. You the customer may cancel this transaction at any time prior to midnight on the third business day after the date of this transaction. See the attached Notice of Right to Cancel for an explanation of this right.

P 8/8

WINDOW/DOOR SCHEDULE

ID NO	APPROX OPENING SIZE (WxH)	DESIGNATION	TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	72 X 80	sw. ng DOORS patio				
2	106 X 80	↓				
3	106 X 80					
4	106 X 80					
5	23 X 70		SH			
6	23 X 70	↓				
7	23 X 70					
8	23 X 70					
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TOTAL GLAZED OPENING AREA FOR STRUCTURE: _____ S.F.

*PERCENTAGE OF NEW GLAZED AREA: _____ %
 (TOTAL INSTALLED GLAZED AREA DIVIDED BY TOTAL GLAZED OPENINGS FOR STRUCTURE)

NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwellings within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing) as per 2007 FBC EXISTING BUILDING 507.5

* TYPE WINDOWS

SH - SINGLE HUNG
 DH - DOUBLE HUNG

AWN - AWNING
 CAS - CASEMENT

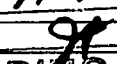
SL - SLIDING
 FIX - FIXED

Tom Marin
 287 0907

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 9.9.09
BUILDING OFFICIAL

WINDOW/DOOR SCHEDULE

ID NO	APPROX OPENING SIZE (WXH)	DESIGNATION	* TYPE	IMPACT PROTECTION		REMARKS
				IMPACT GLASS	SHUTTER	
	37" X 63"	25	SH		X	EXAMPLE
1	72 X 24	SH				
2	48 X 60					
3	48 X 24					
4	48 X 60					
5	72 X 24					
6	72 X 24					
7	72 X 24					
8	72 X 24					
9	36 X 36					
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FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 11.13.09

BUILDING OFFICIAL

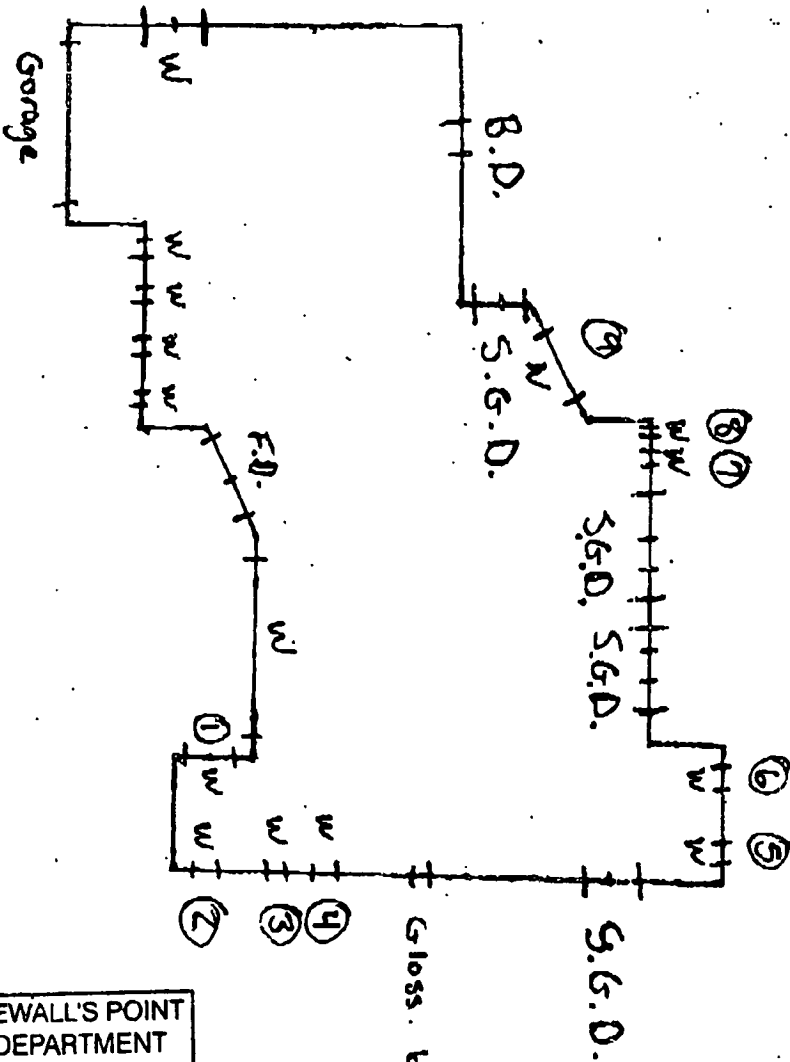
TOTAL GLAZED OPENING AREA FOR STRUCTURE: _____ S.F.

*PERCENTAGE OF NEW GLAZED AREA: _____ %
 (TOTAL INSTALLED GLAZED AREA DIVIDED BY TOTAL GLAZED OPENINGS FOR STRUCTURE)

NOTE: The replacement of more than 25% of the aggregate area of exterior glazing (windows & doors) in one & two family dwellings within a 12 month period will require impact protection on all proposed glazed opening replacement (approved shutters or impact resistant glazing) as per 2007 FBC, EXISTING BUILDING 507.3.

*** TYPE WINDOWS**

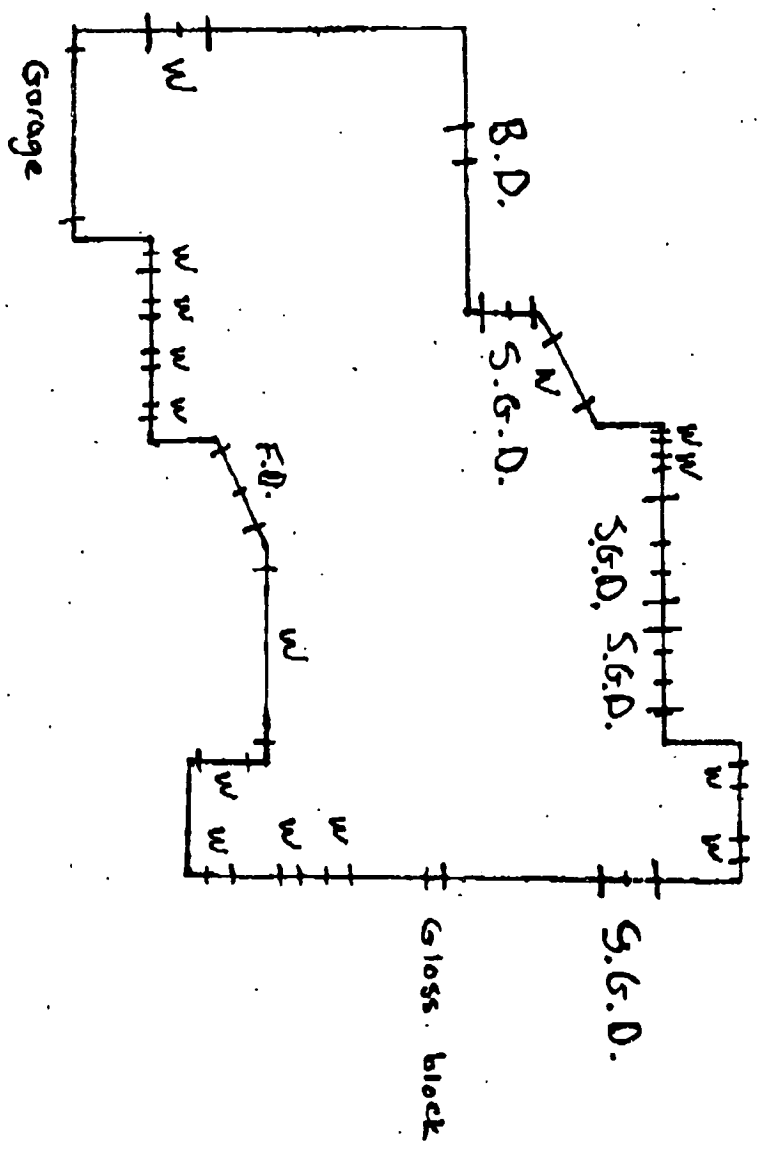
- | | | |
|------------------|----------------|--------------|
| SH - SINGLE HUNG | AWN - AWNING | SL - SLIDING |
| DH - DOUBLE HUNG | CAS - CASEMENT | FIX - FIXED |



Name: Martin, Tom
 Address: 2 Palm Ct Stuart FL
 Phone #: 334-8220
 Store: 703
 Cell: 79558927

TOWN OF SEWALL'S POINT
 BUILDING DEPARTMENT
 FILE COPY

- ① 72 x 24
 - ② 48 x 60
 - ③ 48 x 24
 - ④ 48 x 60
 - ⑤ 72 x 24
 - ⑥ 72 x 24
 - ⑦ 72 x 24
 - ⑧ 72 x 24
 - ⑨ 36 x 36
- Oil windows

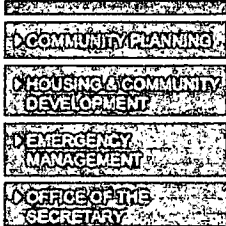


Name: Martin, Tom
address: 2 Palm Ct Stuart FL
phone #: 334-8220
Store: 703
cell: 79558927



Product Approval
USER: Public User

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



FL # FL11367
Application Type New
Code Version 2007
Application Status Approved
Comments
Archived

Product Manufacturer AWP, LLC
Address/Phone/Email 8130 NW 74th Ave
 Medley, FL 33166
 (305) 887-2646
 rperez@awpllc.com

Authorized Signature Vivian Wright
 rickw@rwbdgconsultants.com

Technical Representative
Address/Phone/Email

Quality Assurance Representative
Address/Phone/Email

Category Windows
Subcategory Single Hung

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

Florida Engineer or Architect Name who developed the Evaluation Report Lyndon F. Schmidt, P.E.
Florida License PE-43409
Quality Assurance Entity National Accreditation and Management Institute
Quality Assurance Contract Expiration Date 12/31/2009
Validated By Ryan J. King, P.E.
 Validation Checklist - Hardcopy Received

Certificate of Independence FL11367 - RI - COI_CERT OF INDEPENDENCE.pdf

Referenced Standard and Year (of Standard)	Standard	Year
	ASTM E1300	2002
	ASTM E1300	2004
	ASTM E1886/E1996	2002
	ASTM E330	2002
	TAS 201, 202, 203	1994

Equivalence of Product Standards
Certified By

Sections from the Code

Product Approval Method

Method 1 Option D

Date Submitted

09/11/2008

Date Validated

11/07/2008

Date Pending FBC Approval

11/12/2008

Date Approved

12/10/2008

Handwritten signature and date: 09/21/09

Summary of Products		
FL #	Model, Number or Name	Description
11367.1	a. Model 580	Extruded Aluminum Single Hung Window with Flange - Monolithic Glazing
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 11367.1 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars. (Note - ASTM E1300-02 utilized for areas inside the HVHZ)		Installation Instructions FL11367_R0_II_INST_11367.1.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_R0_AE_EVAL_11367.1.pdf Created by Independent Third Party: Yes
11367.2	b. Model 580	Extruded Aluminum Single Hung Radius Top Window with Flange - Monolithic Glazing
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 11367.2 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars. (Note - ASTM E1300-02 utilized for areas inside the HVHZ)		Installation Instructions FL11367_R0_II_INST_11367.2.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_R0_AE_EVAL_11367.2.pdf Created by Independent Third Party: Yes
11367.3	c. Model 580	Extruded Aluminum Single Hung Window with Nailing Fin - Monolithic Glazing
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 11367.3 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars.		Installation Instructions FL11367_R0_II_INST_11367.3.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_R0_AE_EVAL_11367.3.pdf Created by Independent Third Party: Yes
11367.4	d. Model 580	Twin Extruded Aluminum Single Hung Window with Nailing Fin - Monolithic Glazing
Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: N/A Other: See INST 11367.4 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars.		Installation Instructions FL11367_R0_II_INST_11367.4.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_R0_AE_EVAL_11367.4.pdf Created by Independent Third Party: Yes
11367.5	e. Model 2500	Extruded Aluminum Single Hung Window with Flange - Monolithic Laminated Glazing
Limits of Use Approved for use in HVHZ: Yes		Installation Instructions FL11367_R0_II_INST_11367.5.pdf

<p>Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 11367.5 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars. (Note - ASTM E1300-02 utilized for areas inside the HVHZ)</p>	<p>Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_RO_AE_EVAL_11367.5.pdf Created by Independent Third Party: Yes</p>	
11367.6	f. Model 2500	Extruded Aluminum Single Hung Window with Nailing Fin - Monolithic Laminated Glazing
<p>Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 11367.6 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars. (Note - ASTM E1300-02 utilized for areas inside the HVHZ)</p>		<p>Installation Instructions FL11367_RO_II_INST_11367.6.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_RO_AE_EVAL_11367.6.pdf Created by Independent Third Party: Yes</p>
11367.7	g. Model 2500	Twin Extruded Aluminum Single Hung Window with Nailing Fin - Monolithic Glazing
<p>Limits of Use Approved for use in HVHZ: No Approved for use outside HVHZ: Yes Impact Resistant: Yes Design Pressure: N/A Other: See INST 11367.7 for Design Pressure Ratings, any additional use limitations, installation instructions and product particulars.</p>		<p>Installation Instructions FL11367_RO_II_INST_11367.7.pdf Verified By: Lyndon F. Schmidt, P.E. 43409 Created by Independent Third Party: Yes Evaluation Reports FL11367_RO_AE_EVAL_11367.7.pdf Created by Independent Third Party: Yes</p>

Back

Next

DCA Administration

Department of Community Affairs
Florida Building Code Online
Codes and Standards
2555 Shumard Oak Boulevard
Tallahassee, Florida 32399-2100
(850) 487-1824, Fax (850) 414-8436

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Product Approval Accepts:



Product Information

Product Information for N.O.A. 07-1029.08

NOA	07-1029.08
File Classification	High velocity hurricane zone
Category	Windows
Subcategory	Double Hung - Single Hung
Material	Aluminum
Applicant	AWP, LLC
Status	File Approved
Expiration_Date	November/14/2012
Impact_Rate	[None]
Maximum_Design_Pressure_Positive	60
Maximum_Design_Pressure_Negative	210
Description	Series 580 Aluminum Single Hung Window



R
W
B
C

R W Building Consultants, Inc.

Consulting and Engineering Services for the Building Industry

P.O. Box 230 Valrico, FL 33595 Phone 813.659.9197 Facsimile 813.754.9989

Florida Board of Professional Engineers Certificate of Authorization No. 9813

Certificate of Independence

RW Building Consultants and Lyndon F. Schmidt, P.E. do not have nor will acquire financial interest in the company manufacturing or distributing the product or in any other entity involved in the approval process of the product named in the accompanying Florida Product Approval.



9.29.08

Lyndon F. Schmidt, P.E.
FL No. 43409
September 29, 2008



A subsidiary of Arch Aluminum & Glass Company, Inc.

MODEL 580 - SINGLE HUNG EXTRUDED ALUMINUM WINDOW with FLANGE "NON-IMPACT"

GENERAL NOTES

- This product has been evaluated and is in compliance with the 2007 Florida Building Code (FBC) structural requirements including the "High Velocity Hurricane Zone" (HVHZ).
- Product anchors shall be as listed and spaced as shown on details. Anchor embedment to base material shall be beyond wall dressing or stucco.
- When used in the "HVHZ" this product is required to be protected with an impact resistant covering that complies with Section 1626 of the 2007 FBC.
- When used in areas outside of the "HVHZ" requiring wind borne debris protection this product is required to be protected with an impact resistant covering that complies with Section 1609.1.2 of the FBC.
- For 2x stud framing construction, anchoring of these units shall be the same as that shown for 2x buck masonry construction.
- Site conditions that deviate from the details of this drawing require further engineering analysis by a licensed engineer or registered architect.
- This product meets water infiltration requirements for "HVHZ".

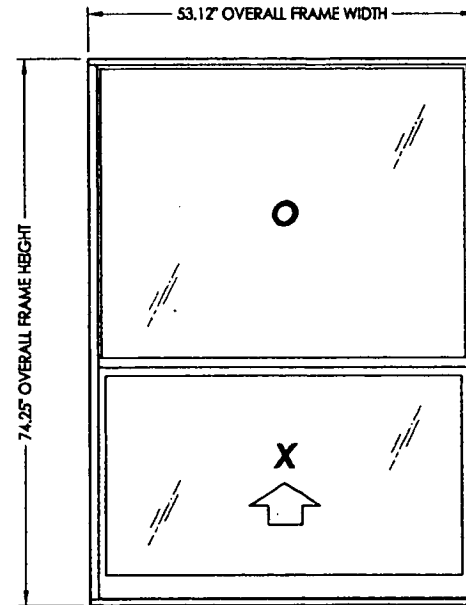


TABLE OF CONTENTS	
SHEET #	DESCRIPTION
1	Typical elevation, design pressures, & general notes
2	Vertical & horizontal cross sections
3	Vertical & horizontal cross sections
4	Buck & frame anchoring
5	Bill of materials, glazing details & components

OVERALL FRAME DIMENSION	OVERALL (O) D.L.O. DIMENSION	OVERALL (N) D.L.O. DIMENSION	GLASS TYPE	DESIGN PRESSURE (PSF)	
				POSITIVE	NEGATIVE
37.00" x 63.00"	33.75" x 28.62"	32.37" x 26.87"	G1	+47.0	-47.0
53.12" x 74.25"	49.62" x 39.75"	48.50" x 27.00"	G2	+60.0	-60.0

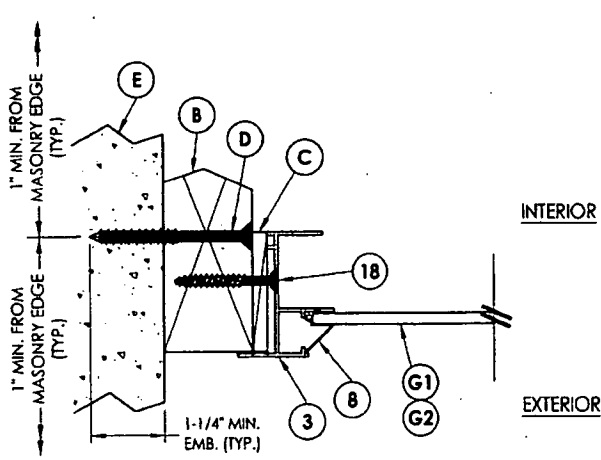
Documents Prepared By: **RW BUILDING CONSULTANTS, INC.**
 P.O. Box 230 Vero Beach FL 33560
 Phone No.: 813.659.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
LF 10/16/08
 Lyndon F. Schmidt, P.E. No. 43409

PRODUCT: **AWP SINGLE HUNG WINDOW**

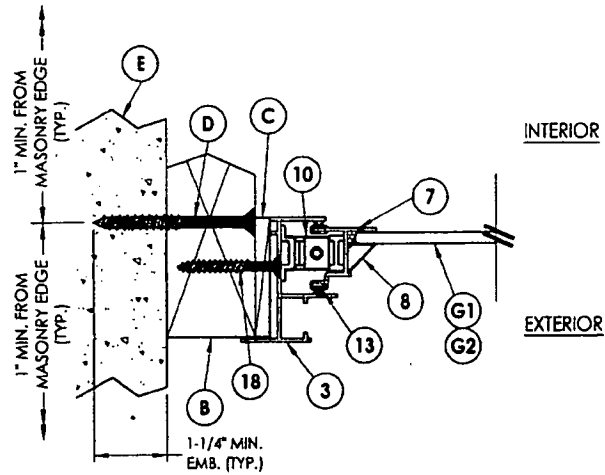
PART OR ASSEMBLY: **TYPICAL ELEVATION, DESIGN PRESSURES & GENERAL NOTES**

NO.	DATE	BY	REVISIONS

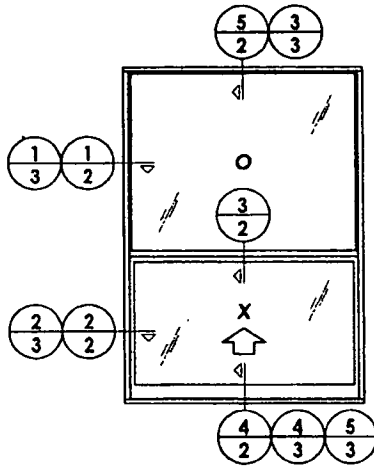
DATE: 10/14/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11367.1
 SHEET 1 of 5



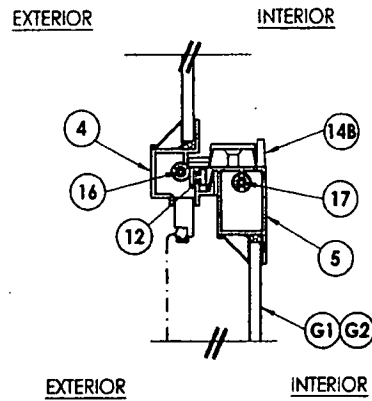
1 HORIZONTAL CROSS SECTION
2 2X buck construction



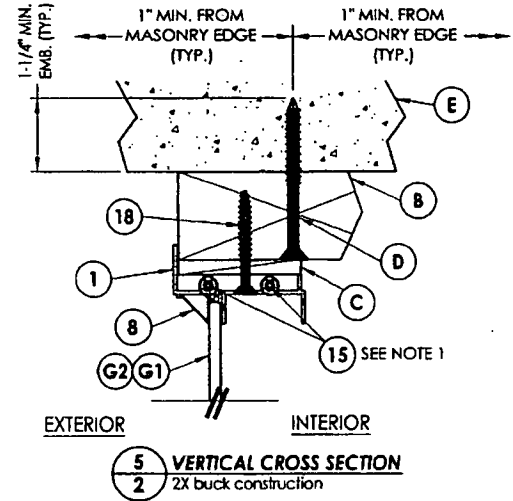
2 HORIZONTAL CROSS SECTION
2 2X buck construction



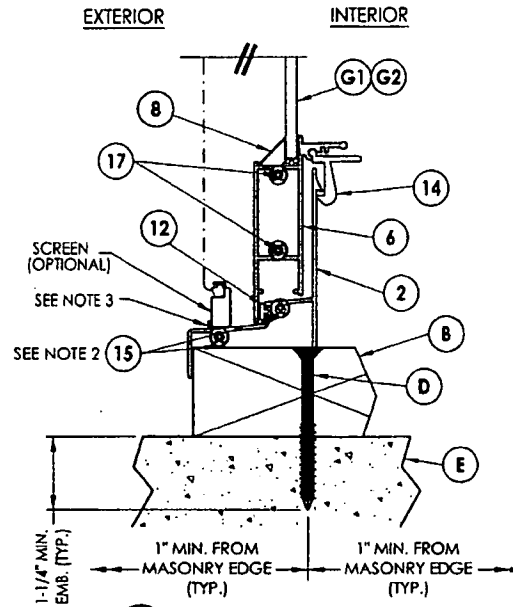
NOTE:
 1. Side jamb joins to head jamb with
 (2) item #15 #10 x 3/4" ph. sms
 2. Side jamb joins to sill jamb with
 (2) item #15 #10 x 3/4" ph. sms
 3. (2) 5/8" weep notches one at
 each end of screen retainer leg



3 VERTICAL CROSS SECTION
2 2X buck construction



5 VERTICAL CROSS SECTION
2 2X buck construction



4 VERTICAL CROSS SECTION
2 2X buck construction

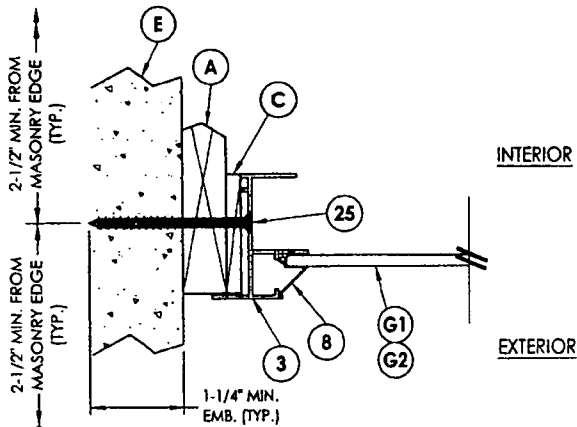
Documents Prepared By:
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Venice FL 33595
 Phone No.: 813.899.0197
 Florida Board of Professional Engineers
 Certificate Of Authorization No. 8813
 L. F. Schmidt, P.E. No. 43498

DATE: 10/14/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHG. BY: LFS
 DRAWING NO.: FL-11367.1
 SHEET 2 OF 5

NO.	DATE	BY	REVISIONS

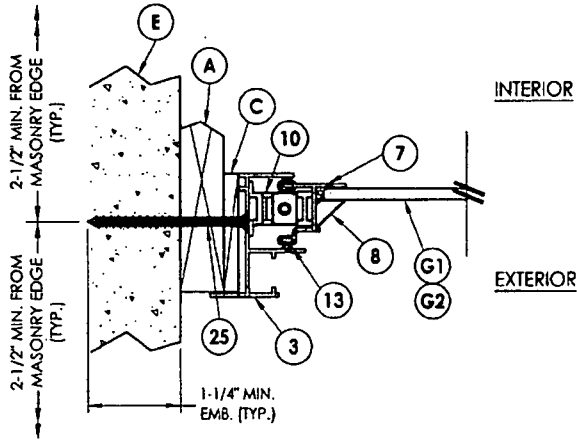
PRODUCT: AWP HUNG WINDOW
 PART OR ASSEMBLY: VERTICAL & HORIZONTAL CROSS SECTIONS

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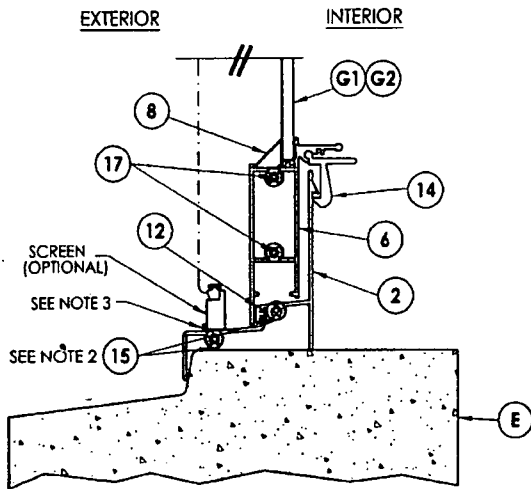


1
3 **HORIZONTAL CROSS SECTION**
Shown w/1X sub-buck substituting concrete screws for wood screws per Section 1714.5.4.2 of the FBC

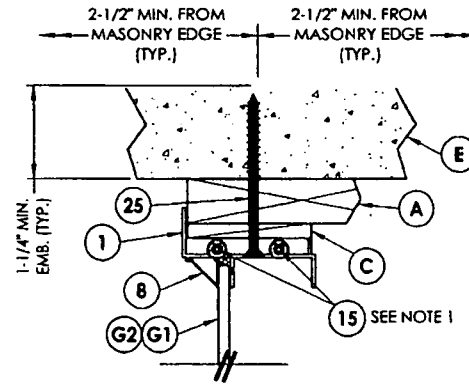
- NOTE:
- Side jamb joins to head jamb with (2) item #15 #10 x 3/4" ph. sms
 - Side jamb joins to sill jamb with (2) item #15 #10 x 3/4" ph. sms
 - (2) 5/8" weep notches one at each end of screen retainer leg



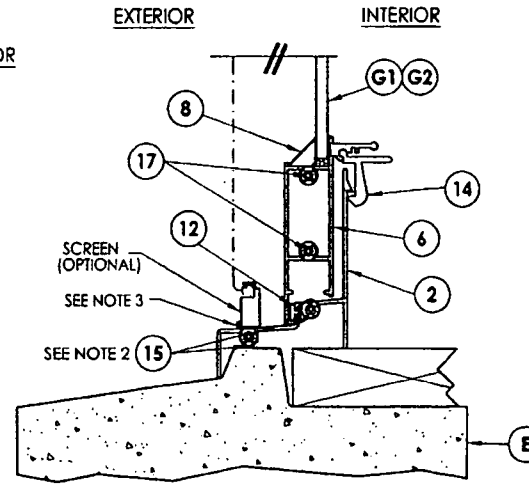
2
3 **HORIZONTAL CROSS SECTION**
Shown w/1X sub-buck substituting concrete screws for wood screws per Section 1714.5.4.2 of the FBC



4
3 **VERTICAL CROSS SECTION**
Optional masonry sill



3
3 **VERTICAL CROSS SECTION**
Shown w/1X sub-buck substituting concrete screws for wood screws per Section 1714.5.4.2 of the FBC



5
3 **VERTICAL CROSS SECTION**
Optional masonry sill

Documents Prepared By: **RW BUILDING CONSULTANTS, INC.**
 P.O. Box 230, Vero Beach, FL 33595
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 Florida Board of Professional Engineers
 Certificate of Authorization No. 8813
LFS 10/16/08
 Lyndon F. Schmidt, P.E. No. 43409

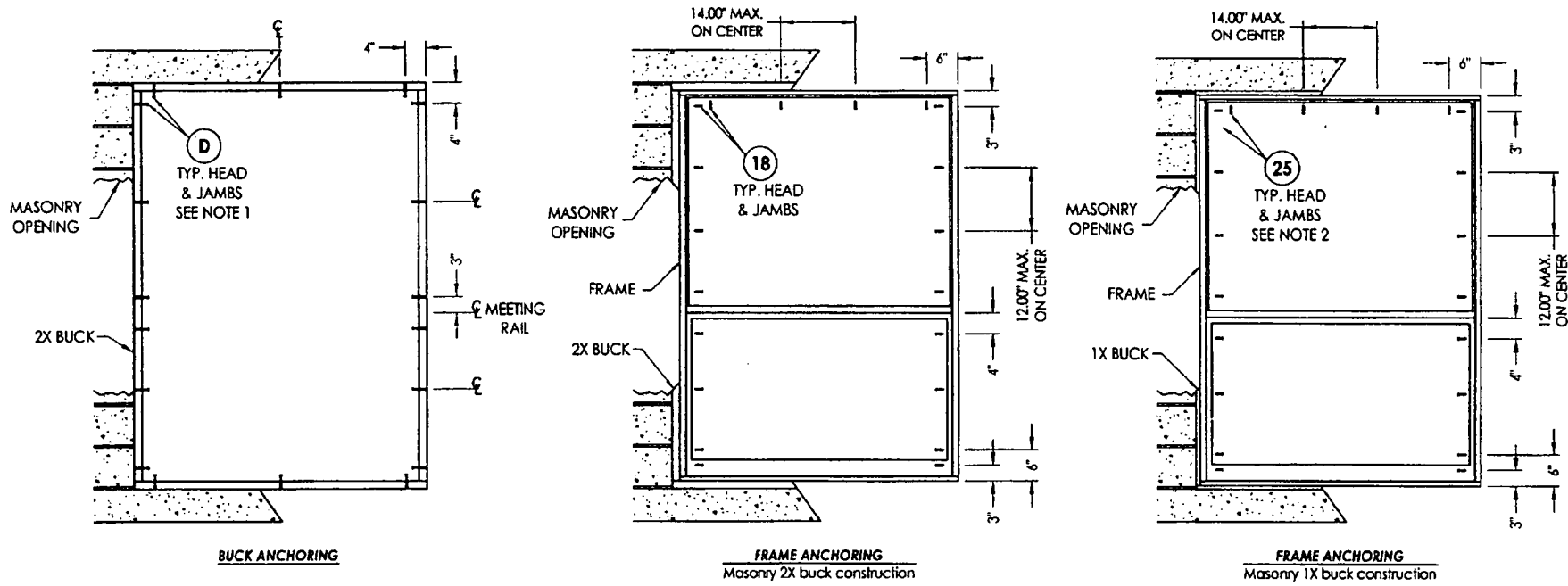
PRODUCT: AWP SINGLE HUNG WINDOW
 PART OR ASSEMBLY: VERTICAL & HORIZONTAL CROSS SECTIONS

NO.	DATE	BY

DATE: 10/14/08
 SCALE: N.T.S.
 DWG. BY: AL
 CHK. BY: LFS
 DRAWING NO.: FL-11367.1
 SHEET 3 of 5

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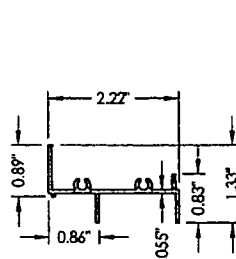
NOTES:

1. 1/4" Elco concrete screws anchoring 2x buck require a minimum 1" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 4" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners and at meeting rail centerline locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.
2. 1/4" ITW concrete screws anchoring frame and/or sill require a minimum 2-1/2" clearance to masonry edges, a 1-1/4" minimum embedment and a minimum 3" clearance to adjacent concrete screws. Substitution of equal concrete screws from a different supplier may have different edge distance and center distance requirements. Concrete screw locations at the corners and at meeting rail centerline locations may be adjusted to maintain the minimum edge distance to mortar joints. If concrete screw locations noted as "MAX. ON CENTER" must be adjusted to maintain the minimum edge distance to mortar joints, additional concrete screws may be required to ensure the maximum on center dimension is not exceeded.

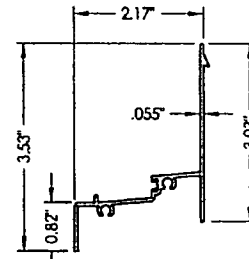
Documents Prepared By: **RW** BUILDING CONSULTANTS, INC.
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 Phone No.: 813.659.9197
 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
 10/16/08
 Lyndon F. Schmidt, P.E. No. 43409

PRODUCT:	AWP SINGLE HUNG WINDOW
PART OR ASSEMBLY:	BUCK & FRAME ANCHORING
BY:	
NO.	DATE
REVISIONS	
DATE:	10/14/08
SCALE:	N.T.S.
DRG. BY:	AL
CHK. BY:	LFS
DRAWING NO.:	FL-11367.1
SHEET	4 of 5

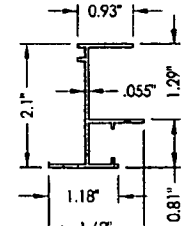
BILL OF MATERIALS		
ITEM	DESCRIPTION	MATERIAL
A	1X BUCK SG >= 0.55	WOOD
B	2X BUCK SG >= 0.55	WOOD
C	1/4" MAX. SHIM SPACE	-
D	1/4" X 2-3/4" PFH ELCO CONCRETE SCREW	STEEL
E	MASONRY - 3,192 PSI MIN. CONCRETE CONFORMING TO ACI 301 OR HOLLOW BLOCK CONFORMING TO ASTM C90	CONCRETE
1	FRAME HEAD (YE-169)	ALUM.
2	FRAME SILL (YE-167)	ALUM.
3	FRAME JAMB (YE-102)	ALUM.
4	MEETING RAIL (YE-152)	ALUM.
5	VENT TOP RAIL (YE-151)	ALUM.
6	VENT BOTTOM RAIL (YE-168)	ALUM.
7	VENT JAMB (YE-92D)	ALUM.
8	GLAZING BEAD	ALUM.
10	BLOCK & TACKLE BALANCE ASSEMBLY	-
12	BULB VINYL WEATHERSTRIP (YH-510)	SINGLE ROW
13	PILE-SCHLEGLER .187" X .250" (YH-509F)	WOOL
14	VENT LATCHES (YH-504)	NYLON / CELCON
14B	SWEEP LOCK (OPTIONAL) (YH-515)	CAST
15	#10 X 3/4" PH. SMS FRAME ASSY. SCREW (YF-1)	STEEL
16	#8 X 1" PH. SMS MEETING RAIL ASSY. SCREW (YF-10)	STEEL
17	#8 X 1-1/4" PH. SMS VENT ASSY. SCREW (YF-12)	STEEL
18	#12 X 1-3/4" PFH WOOD SCREW	STEEL
25	1/4" X 2-3/4" PFH ITW CONCRETE SCREW	STEEL
26	GE SC3 1000	SILICONE



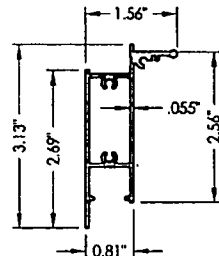
1 FRAME HEAD



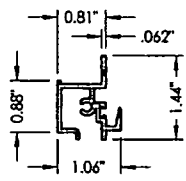
2 FRAME SILL



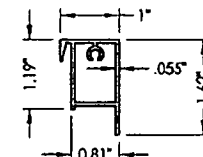
3 FRAME JAMB
Right side



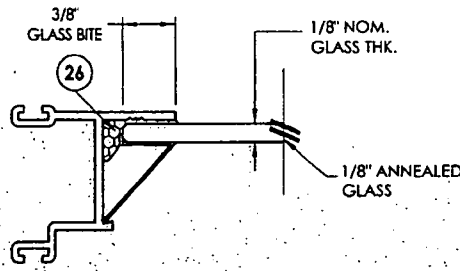
6 VENT BOTTOM RAIL



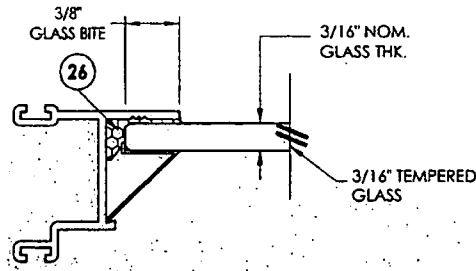
4 MEETING RAIL



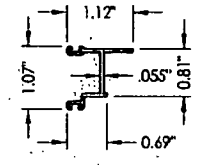
5 VENT TOP RAIL



G1 GLAZING DETAIL



G2 GLAZING DETAIL



7 VENT JAMB

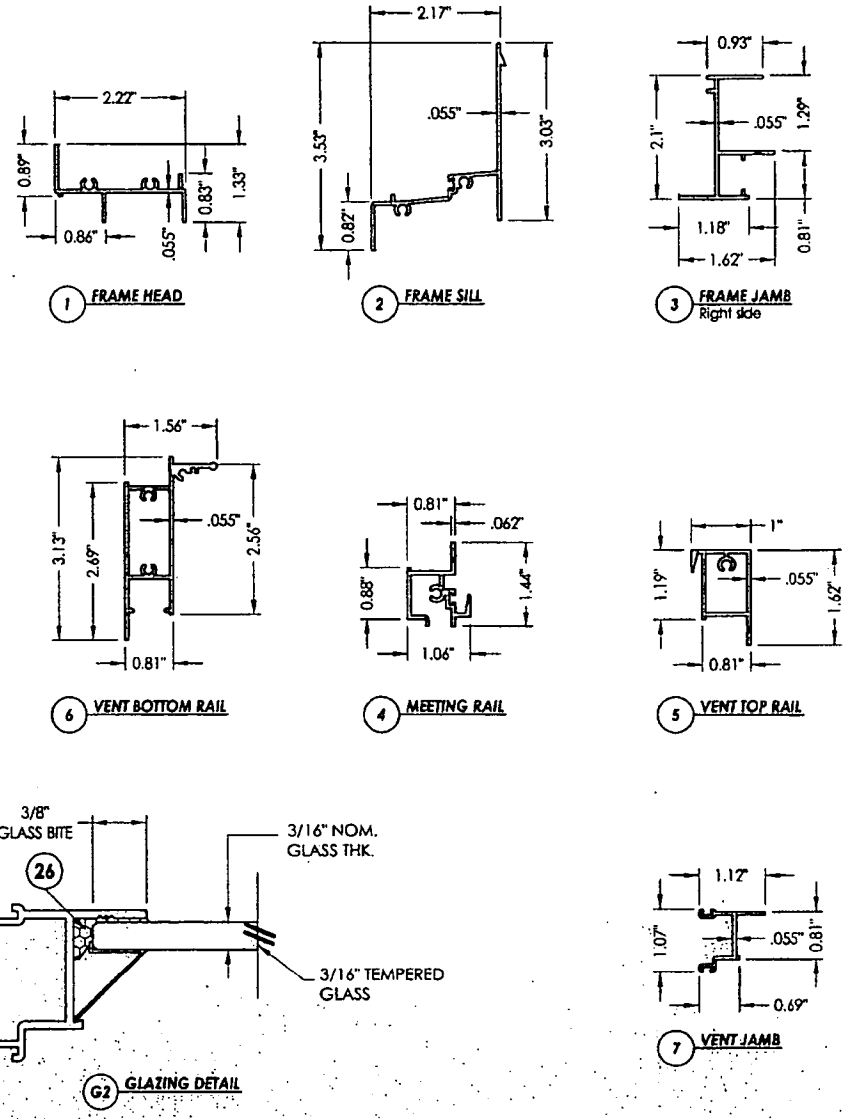
RW BUILDING CONSULTANTS, INC.
 P.O. Box 230 Vero Beach, FL 33595
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 Florida Board of Professional Engineers
 Certificate of Authorization No. 9813
EFR 10/16/08
 Lyndon F. Schmitt, P.E. No. 43408

DOCUMENTS PREPARED BY:	
PRODUCT:	AWP SINGLE HUNG WINDOW
PART OR ASSEMBLY:	BILL OF MATERIALS, GLAZING DETAILS & COMPONENTS
NO.	DATE
BY:	REVISIONS
DATE: 10/14/08	
SCALE: N.T.S.	
DRW. BY: AL	
CHK. BY: LFS	
DRAWING NO.: FL-11367.1	
SHEET 5 OF 5	

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R:\A - Projects\Project Folders\Proj 1481\1500\PF 1426\DWG RWBC Drawings\FL-11367\1-8.dwg, Model

BILL OF MATERIALS		
ITEM	DESCRIPTION	MATERIAL
A	1X BUCK SG >= 0.55	WOOD
B	2X BUCK SG >= 0.55	WOOD
C	1/4" MAX. SHIM SPACE	-
D	1/4" X 2-3/4" PFH ELCO CONCRETE SCREW	STEEL
E	MASONRY - 3,192 PSI MIN. CONCRETE CONFORMING TO ACI 301 OR HOLLOW BLOCK CONFORMING TO ASTM C90	CONCRETE
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6	VENT BOTTOM RAIL (YE-168)	ALUM.
7	VENT JAMB (YE-92D)	ALUM.
8	GLAZING BEAD	ALUM.
10	BLOCK & TACKLE BALANCE ASSEMBLY	-
12	BULB VINYL WEATHERSTRIP (YH-510)	SINGLE ROW
13	PILE-SCHLEGEL .187" X .250" (YH-509F)	WOOL
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14B	SWEEP LOCK (OPTIONAL) (YH-515)	CAST
15	#10 X 3/4" PH. SMS FRAME ASSY. SCREW (YF-1)	STEEL
16	#8 X 1" PH. SMS MEETING RAIL ASSY. SCREW (YF-10)	STEEL
17	#8 X 1-1/4" PH. SMS VENT ASSY. SCREW (YF-12)	STEEL
18	#12 X 1-3/4" PFH WOOD SCREW	STEEL
25	1/4" X 2-3/4" PFH ITW CONCRETE SCREW	STEEL
26	GE SCS 1000	SILICONE



Documents Prepared By: **RW BUILDING CONSULTANTS, INC.**
P.O. Box 230 Valrico FL 33595
Phone No.: 813.559.9197
Florida Board of Professional Engineers
Certificate of Authorization No. 8813
RF 10/16/08
Lyndon F. Schmidt, P.E. No. 43409

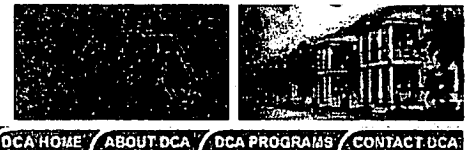
PRODUCT: **AWP SINGLE HUNG WINDOW**

PART OR ASSEMBLY: **BILL OF MATERIALS, GLAZING DETAILS & COMPONENTS**

NO.	DATE	BY	REVISIONS

DATE: 10/14/08
SCALE: N.T.S.
DWG. BY: AL
CHK. BY: LFS
DRAWING NO.: FL-11367.1
SHEET 5 of 5

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Product Approval
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 Application Detail

- ▶ COMMUNITY PLANNING
- ▶ HOUSING & COMMUNITY DEVELOPMENT
- ▶ EMERGENCY MANAGEMENT
- ▶ OFFICE OF THE SECRETARY

FL # FL12635
Application Type New
Code Version 2007
Application Status Approved
Comments
Archived

Product Manufacturer AWP, LLC
Address/Phone/Email 8130 NW 74th Ave
 Medley, FL 33166
 (305) 887-2646
 rperez@awpllc.com

Authorized Signature Roberto Perez
 rperez@awpllc.com

Technical Representative
Address/Phone/Email

Quality Assurance Representative
Address/Phone/Email

Category Exterior Doors
Subcategory Swinging Exterior Door Assemblies

Compliance Method Certification Mark or Listing

Certification Agency Miami-Dade BCCO - CER
Validated By Miami-Dade BCCO - VAL

Referenced Standard and Year (of Standard)	<u>Standard</u>	<u>Year</u>
	ASTM E1300/02	2002
	ASTM E1300/04	2004
	TAS 202/94	1994

Equivalence of Product Standards
Certified By

Product Approval Method Method 1 Option A

Date Submitted 05/11/2009
 Date Validated 06/09/2009
 Date Pending FBC Approval 07/09/2009
 Date Approved 08/11/2009

Summary of Products		
FL #	Model, Number or Name	Description
12635.1	Series 'La Français' Outswing French Door with Sidelights	Non impact resistant outswing aluminum french door with sidelights with monolithic glazing
Limits of Use Approved for use in HVHZ: Yes Approved for use outside HVHZ: Yes Impact Resistant: No Design Pressure: +70/-100.9 Other: For use outside HVHZ, the maximum pressure is limited to +/-70 psf (Load Test) See Installation Instructions drawings for design pressure rating and product particulars		Certification Agency Certificate FL12635_R0_C_CAC_NOA_09-0316.06 Series La Française Alum. French Door with Sidelights - NI.pdf Quality Assurance Contract Expiration Date 07/22/2011 Installation Instructions FL12635_R0_II_NOA_09-0316.06 Series La Française Alum. French Door with Sidelights - NI.pdf Verified By: Miami-Dade BCCO - CER Created by Independent Third Party: Evaluation Reports Created by Independent Third Party:

DCA Administration

Department of Community Affairs
Florida Building Code Online
Codes and Standards
 2555 Shumard Oak Boulevard
 Tallahassee, Florida 32399-2100
 (850) 487-1824, Fax (850) 414-8436

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Product Approval Accepts:



NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

A. DRAWINGS

1. Manufacturer's die drawings and sections.
2. Drawing No **W97-18**, Sheets 1 through 8 of 8, titled "Series 'La Francais' Alum French Door w/Sidelites", dated 08/05/97 with revision H dated 02/23/09, prepared by Al-Farooq Corporation, signed and sealed by Humayoun Farooq, P.E.

B. TESTS

1. Test reports on 1) Air Infiltration Test, per FBC, TAS 202-94
2) Uniform Static Air Pressure Test, Loading per FBC TAS 202-94
3) Water Resistance Test, per FBC, TAS 202-94
4) Forced Entry Test, per FBC 3603.2 (b) and TAS 202-94
along with marked-up drawings and installation diagram of an aluminum French door w/sidelites, OXXO configuration, prepared by Hurricane Engineering & Testing Inc., Test Report No. HETI 04-1402, dated 09/17/04 signed and sealed by Ivonne Ghia, P.E.
2. Test reports on: 1) Air Infiltration Test, per PA 202-94
2) Uniform Static Air Pressure Test, Loading per PA 202-94
3) Water Resistance Test, per PA 202-94
4) Forced Entry Test, per SFBC 3603.2 (b) and PA 202-94
along with installation diagram of an aluminum outswing French entrance door w/sidelites prepared by Fenestration Testing Laboratory, Inc, Test Report No. FTL-1659, dated June 18, 1997, reissued on 6/11/98, signed and sealed by Gilbert Diamond, P.E.
(Submitted under previous NOA #97-0815.09)

C. CALCULATIONS

1. Revised anchor calculations and structural analysis, prepared by Al-Farooq Corporation, dated 02/19/09, signed and sealed by Humayoun Farooq, P.E.
2. Anchor calculations and structural analysis, prepared by Al-Farooq Corporation, dated 12/20/04, signed and sealed by Humayoun Farooq, P.E.
3. Comparative Analysis and Anchor Calculations prepared by Al-Farooq Corporation, P.E dated 5/31/01, signed and sealed by Humayoun Farooq, P.E. *(Submitted under previous NOA #97-0815.09)*
Complies with ASTM E1300-98
No 1/3 stress increase used in mullion or anchors into masonry and steel substrate.


Fitz A. Harris, P.E.

Product Control Examiner

NOA No. 09-0316-06

Expiration Date: July 22, 2011

Approval Date: May 6, 2009

AWP,LLC

NOTICE OF ACCEPTANCE: EVIDENCE SUBMITTED

D. QUALITY ASSURANCE

1. Miami Dade Building Code Compliance Office (BCCO).

E. MATERIAL CERTIFICATIONS

1. None.

F. STATEMENTS

1. Statement letter of conformance, dated February 25, 2009, signed by Dr. Humayoun Farooq, P.E.
2. Letter of Compliance, dated February 19, 2009, signed by Dr. Humayoun Farooq, P.E.
3. Letter from AWP, LLC, dated 03/10/09, requesting a revision to update to the FBC2007 and company name, signed by Mr. Roberto Perez, AWP, LLC.

G. OTHERS

1. Notice of Acceptance No. 05-0426.03, issued to Yale Ogron Manufacturing Co., Inc. for their Series "La Francais" Aluminum Outswing French Door with Sidelites, approved on 08/18/05 and expiring on 07/22/2011.



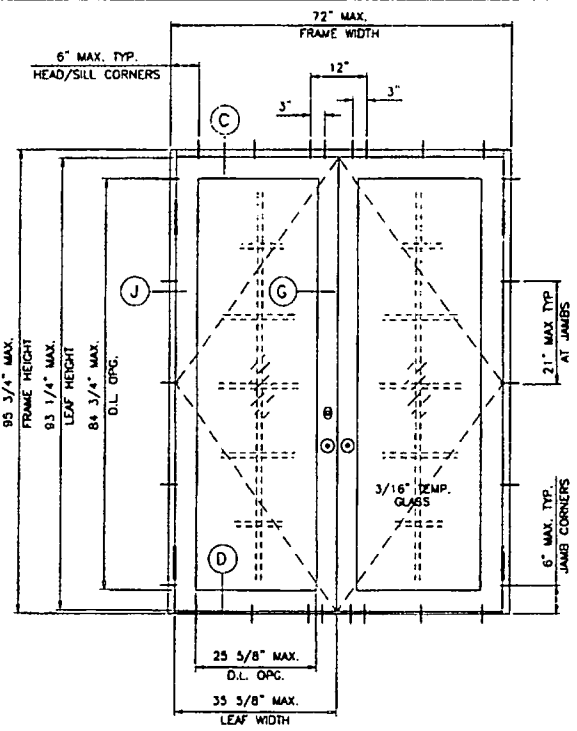
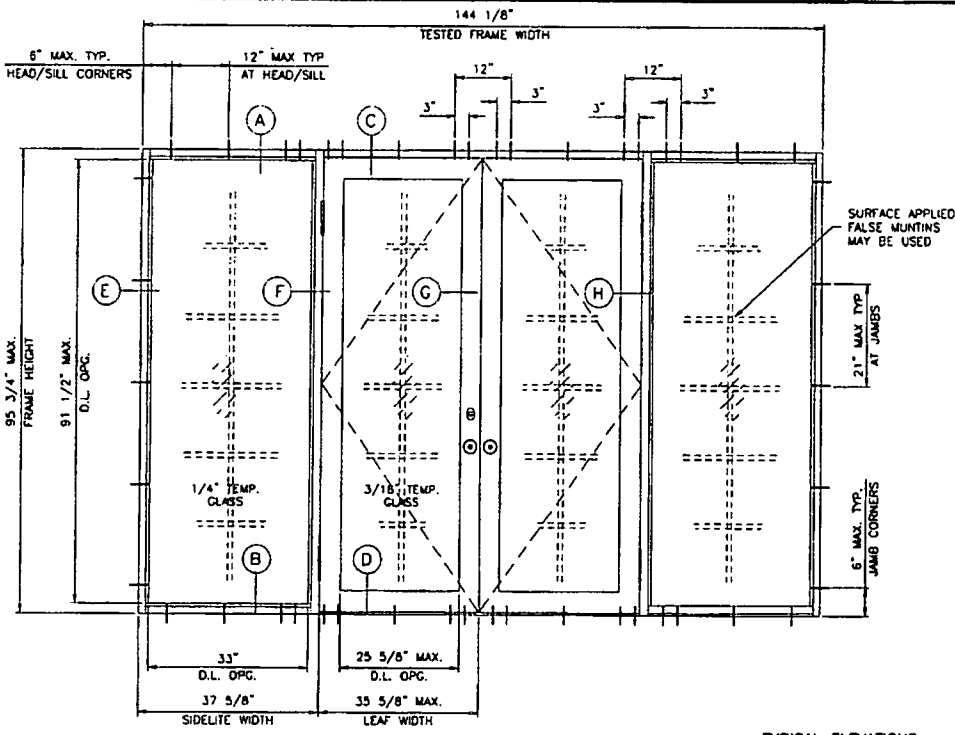
Fitz A. Harris, P.E.

Product Control Examiner

NOA No. 09-0316.06

Expiration Date: July 22, 2011

Approval Date: May 6, 2009



TYPICAL ELEVATIONS

SERIES 'LA FRANCAIS' ALUM FRENCH DOOR W/ SIDELITES

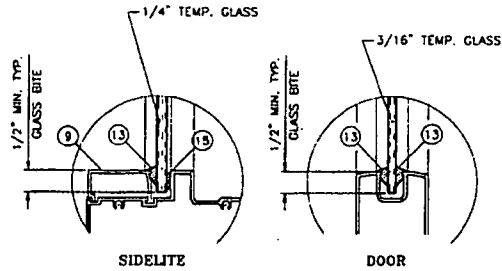
APPROVAL APPLIES TO SINGLE (X) AND DOUBLE (XX) LEAF DOORS WITH OR WITHOUT SIDELITES. SIDE LITES CAN BE ON ONE OR BOTH SIDES OF DOOR. SEE SHEET 2 FOR DESIGN LOAD CAPACITIES.

THIS PRODUCT HAS BEEN DESIGNED AND TESTED TO COMPLY WITH THE REQUIREMENTS OF THE FLORIDA BUILDING CODE 2004/2007 EDITION INCLUDING HIGH VELOCITY HURRICANE ZONE (HVHZ).

WOOD BUCKS BY OTHERS, MUST BE ANCHORED PROPERLY TO TRANSFER LOADS TO THE STRUCTURE.

ANCHORS SHALL BE AS LISTED, SPACED AS SHOWN ON DETAILS, ANCHORS EMBEDMENT TO BASE MATERIAL SHALL BE BEYOND WALL DRESSING OR STUCCO. ANCHORING OR LOADING CONDITIONS NOT SHOWN IN THESE DETAILS ARE NOT PART OF THIS APPROVAL.

A LOAD DURATION INCREASE IS USED IN DESIGN OF ANCHORS INTO WOOD ONLY. MATERIALS INCLUDING BUT NOT LIMITED TO STEEL/METAL SCREWS, THAT COME INTO CONTACT WITH OTHER DISSIMILAR MATERIALS SHALL MEET THE REQUIREMENTS OF 2004/2007 FLORIDA BLDG. CODE SECTION 2003.8.4.



GLAZING DETAIL

DOORSS NOT RATED FOR IMPACT. INSTALLATION OF THIS PRODUCT IN THE HVHZ AREA REQUIRES THE USE OF APPROVED SHUTTERS OR EXTERNAL PROTECTION DEVICES COMPLYING WITH HVHZ REQUIREMENTS. INSTALLATION OF THIS SYSTEM OUTSIDE THE HVHZ AREA SHALL MEET THE APPLICABLE REQUIREMENTS FOR WIND BORNE DEBRIS PROTECTION.

**MONOLITHIC GLASS
NON IMPACT**

Eng: DR. HUSSAFOO FAROOQ
STRUCTURES
FLA. PE # 18557
C.A.N. 3538

MAR 04 2009

PRODUCT REVISID
as complying with the Florida
Building Code
Acceptance No. 0316.06
Expiration Date 03-22-2007

By: *[Signature]*
Miami Dade Product Control
Division

afC

AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
4595 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL: (305) 264-8100 FAX: (305) 262-8078
COMP-ANKI W97-18AWP

SERIES LA FRANCAIS ALUM FRENCH DOOR W/ SIDELITES (M.I.)
AWP, L.L.C.
8130 N.W. 74TH AVE.
MEDLEY, FL. 33166
TEL: (305) 887-2646 FAX: (305) 883-1309

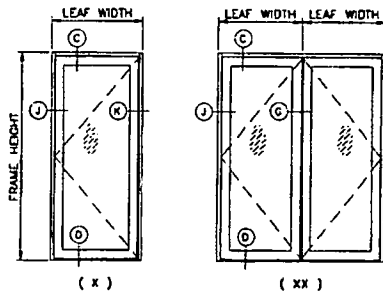
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1	10.31.08	M. ANDREWS	REV.
2	12.27.08	J. GENERAL	REVISION
3	02.21.09	M.	UPDATED FOR 2004 FBC
4	02.23.09	M.	UPDATED FOR 2007 FBC

date: 08-05-07
scale: 3/8" = 1"
dwn. by: HAWID
chk. by:

drawing no.
W97-18

sheet 1 of 8

DOORS WITHOUT SIDELITES				
DESIGN LOAD CAPACITY - PSP				
DOOR HEIGHT FT./IN.	NOMINAL DOOR WIDTH FT./IN.		3/16" TEMP. GLASS	
	EXT. (+)	INT. (-)	EXT. (+)	INT. (-)
6/8	2/6 (X)	5/0 (XX)	70.0	100.9
	3/0 (X)	6/0 (XX)	70.0	84.0
7/0	2/6 (X)	5/0 (XX)	70.0	96.0
	3/0 (X)	6/0 (XX)	70.0	80.0
8/0	2/6 (X)	5/0 (XX)	70.0	84.0
	3/0 (X)	6/0 (XX)	70.0	70.0

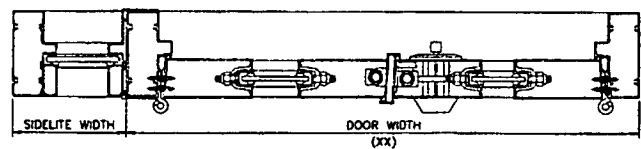
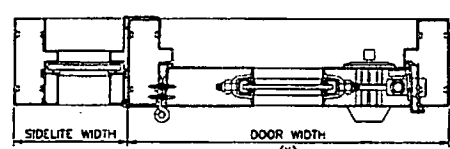
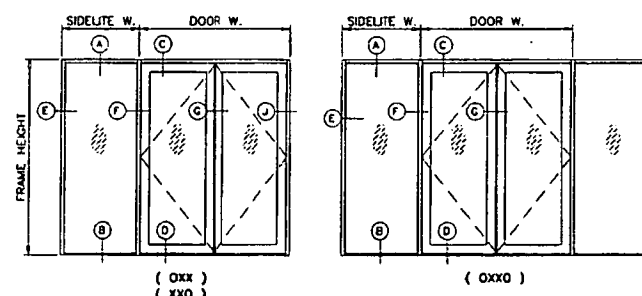
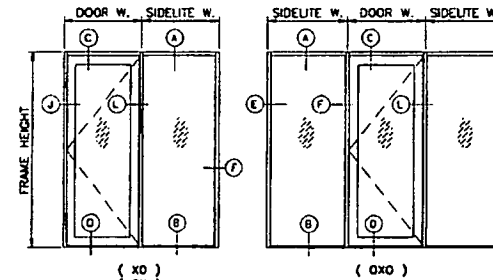
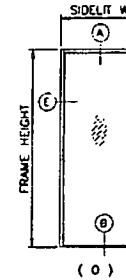


OVERALL DOOR DIMENSIONS:

NOMINAL WIDTH	FRAME WIDTH	NOMINAL HEIGHT	FRAME HEIGHT
2/6 (X)	31-1/2"	6/8	79-3/4"
3/0 (X)	37-1/2"	7/0	83-3/4"
5/0 (XX)	60"	8/0	95-3/4"
6/0 (XX)	72"		

STATIONARY PANEL (O) OR DOORS WITH SIDELITES					
DESIGN LOAD CAPACITY - PSP					
FRAME HEIGHT FT./IN.	DOOR WIDTH FT./IN.	SIDELITE WIDTH INCHES	1/4" TEMP. GLASS		
			EXT. (+)	INT. (-)	
6/8	2/6 (X) 5/0 (XX)	30	70.0	100.9	
		36	70.0	100.9	
		42	70.0	94.7	
		48	70.0	89.2	
		54	70.0	85.0	
		30	70.0	84.0	
7/0	2/6 (X) 5/0 (XX)	36	70.0	84.0	
		42	70.0	84.0	
		48	70.0	84.0	
		54	70.0	83.3	
		30	70.0	96.0	
		36	70.0	91.6	
8/0	2/6 (X) 5/0 (XX)	42	70.0	85.2	
		48	70.0	80.1	
		54	70.0	76.1	
		30	70.0	80.0	
		36	70.0	80.0	
		42	70.0	79.2	
	3/0 (X) 6/0 (XX)	48	70.0	74.8	
		54	70.0	71.3	
		30	67.6	67.6	
		36	67.6	67.6	
		42	62.5	62.5	
		48	58.9	58.9	
	3/0 (X) 6/0 (XX)	30	67.6	67.6	
		36	62.5	62.5	
		42	58.4	58.4	
		48	55.0	55.0	

NOTE:
GLASS CAPACITIES ON THIS SHEET ARE
BASED ON ASTM E1300-02/04 (3 SEC. GUSTS)
AND FLORIDA BUILDING COMMISSION
DECLARATORY STATEMENT DCA05-DEC-219



Engr. DR. MUMAYOUN FAROOQ
STRUCTURES
FLA. PE # 18357
C.A.N. 3538
MAR 04 2009

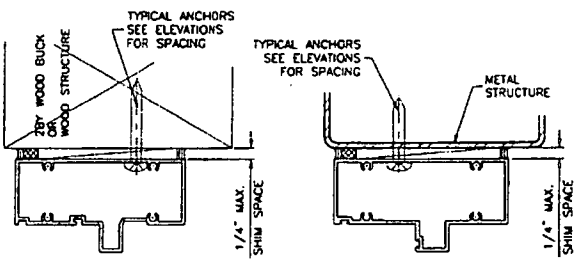
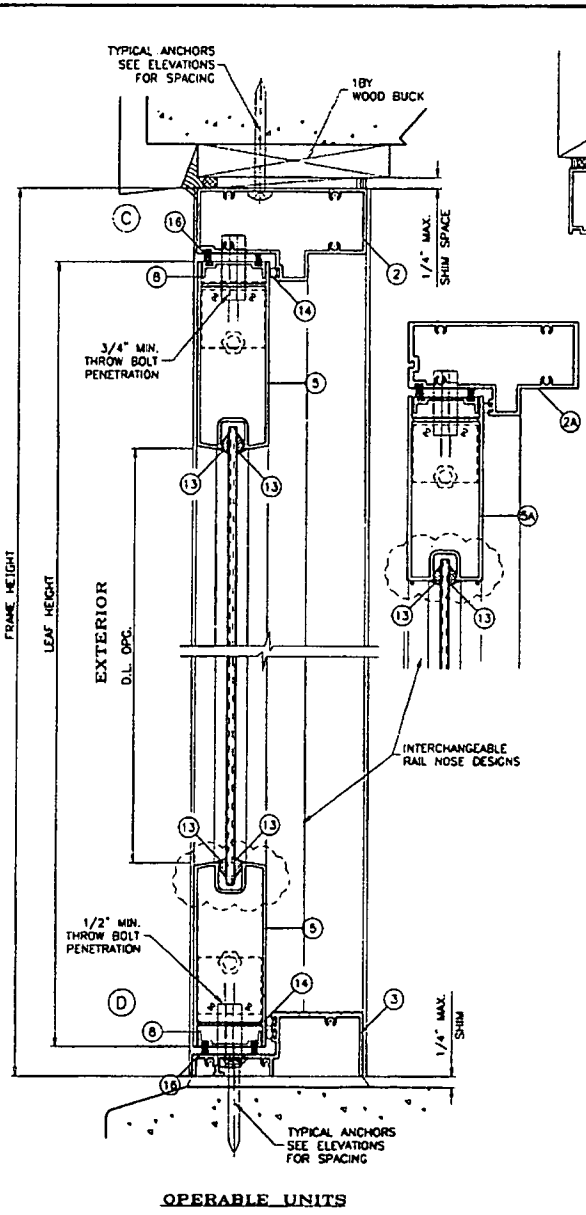
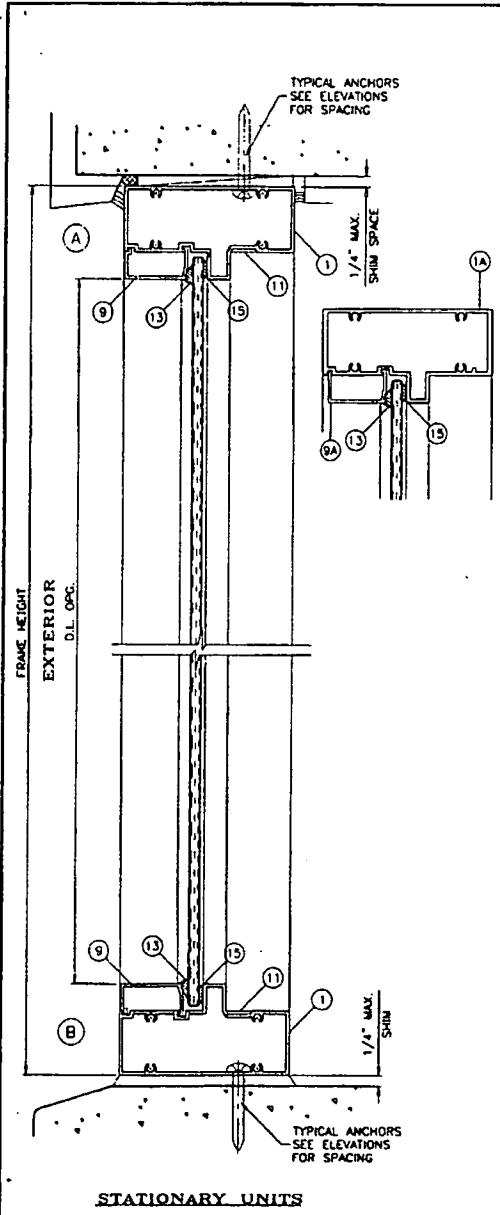
PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No 04-0316.06
Expiration Date 07-31-32
By: [Signature]
Miami Gate Product Control
Division

a f c
AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
1238 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL. (305) 284-9100 FAX. (305) 284-9978
CDMP-ANL/W97-1/BAWF

SEES LA FRAMING ALUM TRENCH DOOR W/ SIDELITES (NL)
AWP, LLC.
8130 N.W. 74TH AVE.
MEDLEY, FL. 33166
TEL. (305) 887-2646 FAX (305) 883-1309

REVISIONS:	BY	DESCRIPTION
1	AWP	ISSUE
2	AWP	LOCAL NOTES REVERSED
3	AWP	AWP
4	AWP	AWP
5	AWP	AWP
6	AWP	AWP
7	AWP	AWP
8	AWP	AWP
9	AWP	AWP
10	AWP	AWP

date: 08-08-97
scale: 3/8" = 1"
dr. by: HAWD
chk. by:
drawing no. **W97-18**
sheet 2 of 8



WOOD BUCKS AND METAL STRUCTURE NOT BY AWP MUST SUSTAIN LOADS IMPOSED BY GLAZING SYSTEM AND TRANSFER THEM TO THE BUILDING STRUCTURE.

TYPICAL ANCHORS: SEE ELEV. FOR SPACING
1/4" DIA. JAPCON BY 'ITW'
1/4" DIA. ULTRACON BY 'ELCO' (F_u=177 KSI, F_y=155 KSI)
 INTO 2" BY WOOD BUCKS OR WOOD STRUCTURES
 1-1/2" MIN. PENETRATION INTO WOOD
 THRU 1" BY BUCKS INTO CONC. OR MASONRY
 1-1/4" MIN. EMBED INTO CONC. OR MASONRY
 DIRECTLY INTO CONC. OR MASONRY
 1-1/4" MIN. EMBED INTO CONC. OR MASONRY

#14 SMS OR SELF DRILLING SCREWS (GRADE 2 CRS)
 INTO MIAMI-DADE COUNTY APPROVED MULLIONS (MIN. THK. = .090")
 INTO METAL STRUCTURES
 STEEL : 12 GA. MIN. (F_y = 36 KSI MIN.)
 ALUMINUM : 1/8" THK. MIN. (B063-T5 MIN.)
 (STEEL IN CONTACT WITH ALUMINUM TO BE PLATED OR PAINTED)

TYPICAL EDGE DISTANCE
 INTO CONCRETE AND MASONRY = 2-1/2" MIN.
 INTO WOOD STRUCTURE = 1" MIN.
 INTO METAL STRUCTURE = 3/4" MIN.

CONCRETE f'_c = 3000 PSI MIN.
 MASONRY f'_m = 1500 PSI MIN.

SEALANT:
 ALL JOINTS AND FRAME CONNECTIONS SEALED WITH WHITE/ALUMINUM COLORED SILICONE.

Engr. DR. MUMAYYOUN FAROOQ
 STRUCTURES
 FLA. PE # 16557
 C.A.N. 3536

MAR 04 2009

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 04-03-16-06
 Expiration Date 07-27-2517

By: *[Signature]*
 Miami Dade Product Control
 Division

afc

AL-FAROOQ CORPORATION
 ENGINEERS & PRODUCT DEVELOPMENT
 3235 S.W. 87 AVE
 MIAMI, FLORIDA 33174
 TEL (305) 264-8100 FAX (305) 263-8978
 COMP-ANI W97-18AWP

SIZES LA FINISH ALUM FINISH DOOR W/ SCREENS (ML)

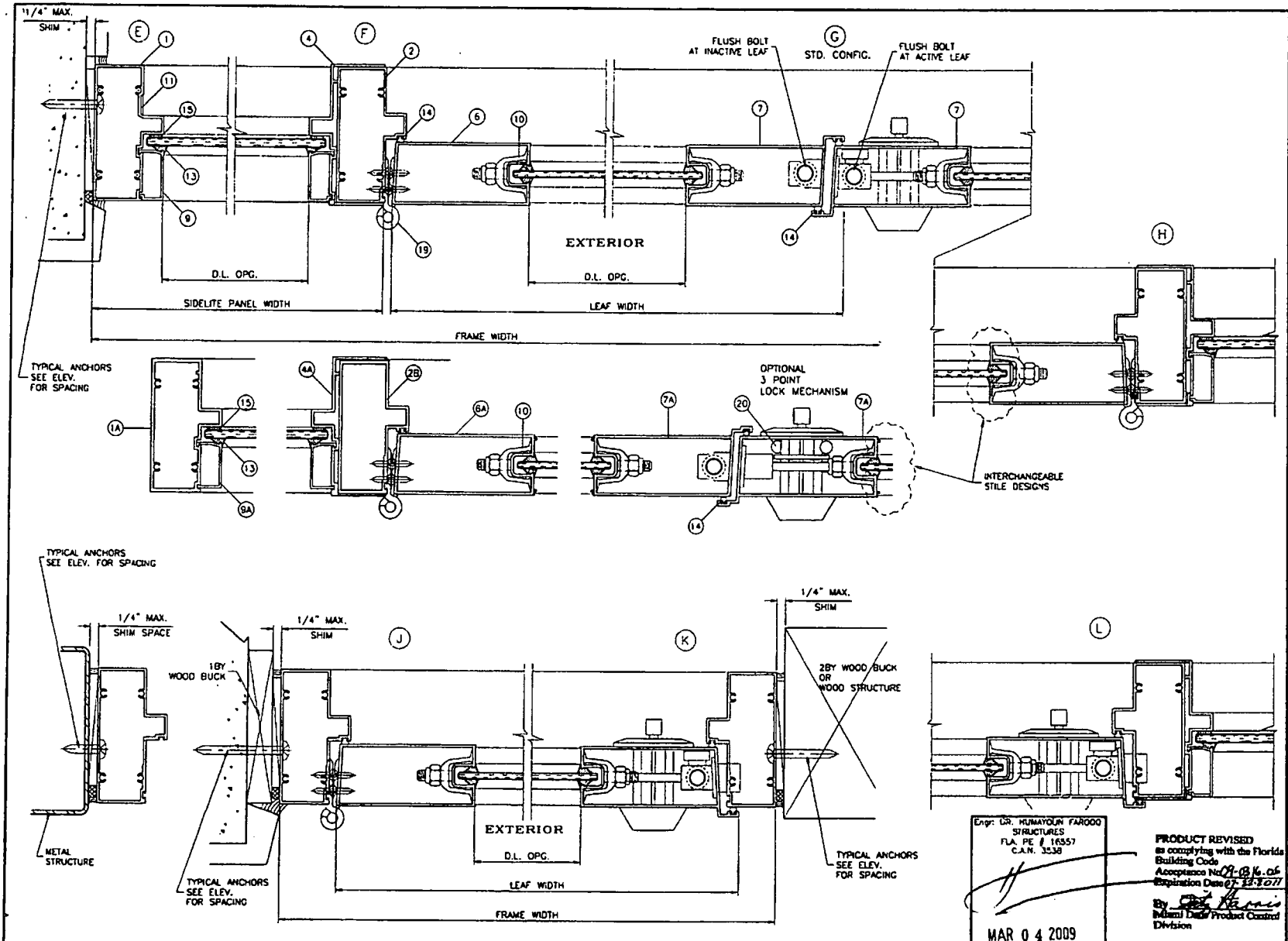
AWP, L.L.C.
 8130 N.W. 74TH AVE.
 MEDLEY, FL 33166
 TEL (305) 887-2846 FAX (305) 883-1309

NO.	DATE	BY	DESCRIPTION
1	02/21/05		NO CHANGE THIS SHEET
2	02/23/09		UPDATED FOR 2002 FBC

Revisions:
 (NO DATE) BY DESCRIPTION

DATE: 08-06-97
 SCALE: 3/8" = 1"
 DR. BY: HAWD
 CHK. BY:

drawing no.
W97-18
 sheet 3 of 8



Engr. DR. HEMAYOUN FAROOQ
 STRUCTURES
 FLA. PE # 16557
 C.A.N. 3538

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 08-08 No. 06
 Expiration Date 07-18-07

By *[Signature]*
 Industrial Design Product Control
 Division

MAR 04 2009

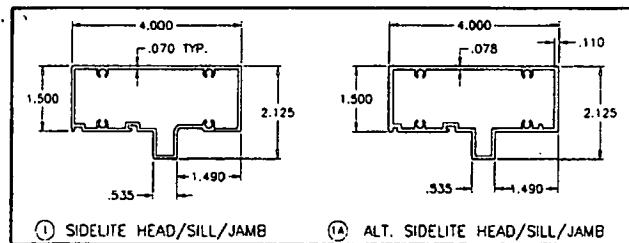
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AL-FAROOQ CORPORATION
 ENGINEERS & PRODUCT DEVELOPMENT
 1238 S.W. 81st AVE
 MIAMI FLORIDA 33174
 TEL. (305) 264-6100 FAX (305) 264-6978
 COMP-ANL W97-18AWP

SIZES 1A FRANCOIS ALUM TRENCH DOOR W/ SIDELITE (ML)
 AWP, L.L.C.
 8130 N.W. 74TH AVE.
 MEDLEY, FL 33166
 TEL. (305) 887-2646 FAX (305) 883-1509

REV.	DATE	BY	DESCRIPTION
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H	10.23.06		UPDATED FOR 2007 FBC

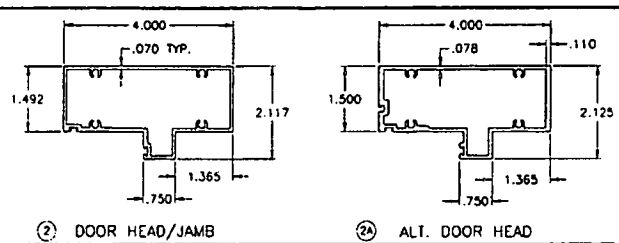
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 dr. by: HAWP
 chg. by:

drawing no.
W97-18
 sheet 4 of 8



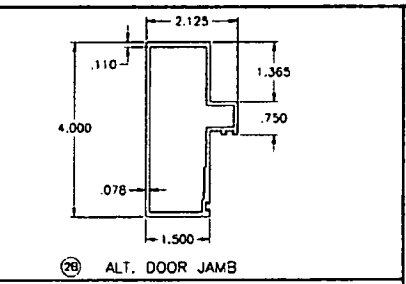
① SIDELITE HEAD/SILL/JAMB

①A ALT. SIDELITE HEAD/SILL/JAMB

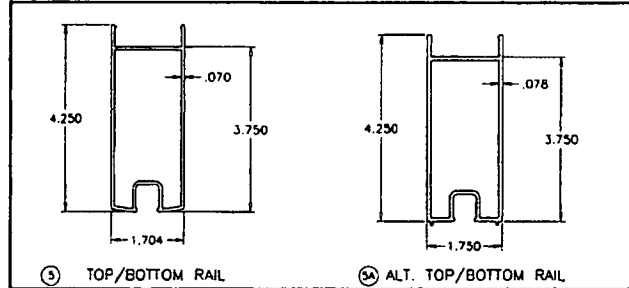


② DOOR HEAD/JAMB

②A ALT. DOOR HEAD

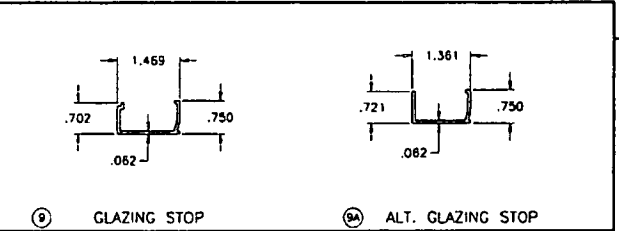


②B ALT. DOOR JAMB



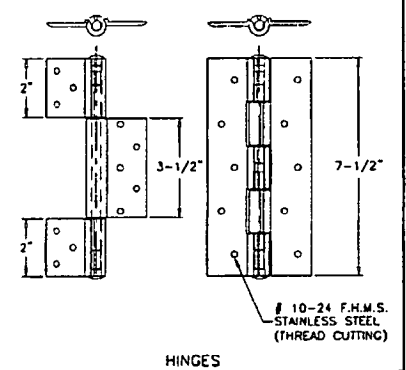
③ TOP/BOTTOM RAIL

③A ALT. TOP/BOTTOM RAIL

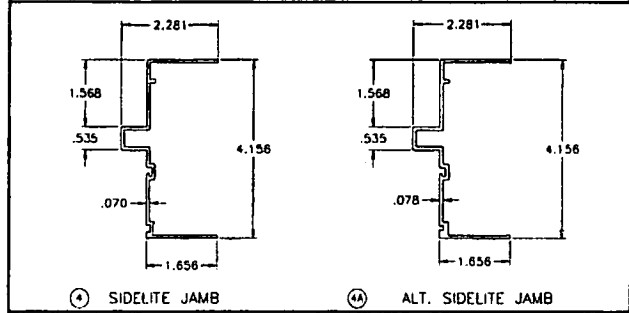


③ GLAZING STOP

③A ALT. GLAZING STOP

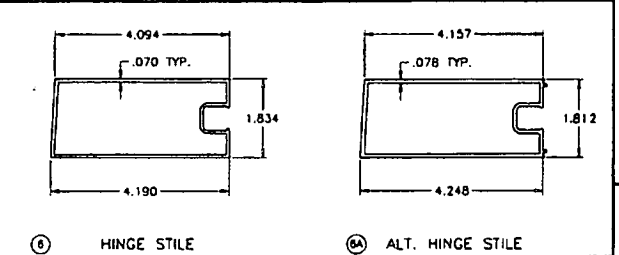


HINGES



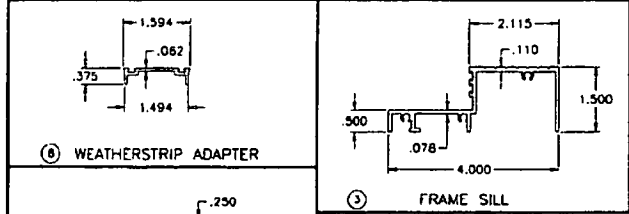
④ SIDELITE JAMB

④A ALT. SIDELITE JAMB



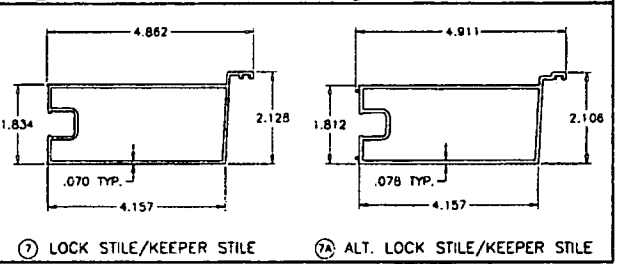
⑤ HINGE STILE

⑤A ALT. HINGE STILE



⑥ WEATHERSTRIP ADAPTER

⑦ FRAME SILL



⑦ LOCK STILE/KEEPER STILE

⑦A ALT. LOCK STILE/KEEPER STILE



⑩ PRESSURE PLATE

Eng: DR. HUMAYOON FAROOQ
STRUCTURES
FLA. P.E. # 16557
C.A.N. 3538

MAR 04 2009

PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No. 07-0316
Expiration Date 07-31-2017

By: *[Signature]*
Miami Dade Product Control
Division

a f c

AL-FAROOQ CORPORATION
ENGINEERS & PRODUCT DEVELOPMENT
1235 S.W. 87 AVE
MIAMI, FLORIDA 33174
TEL: (305) 264-8100 FAX: (305) 263-8078
COMP-AL-W97-18AWP

SERIES 1A FRENCH ALUM FRENCH DOOR W/ SIDELITE (RL)

AWP, LLC.
8130 N.W. 74TH AVE.
MEDLEY, FL 33166
TEL: (305) 887-2846 FAX: (305) 883-1309

revision no.	date	description
G	01/21/09	NO CHANGE THIS SHEET
H	07/21/09	UPDATED FOR 2007 FBC

00-00-17
scale: 3/8" = 1"
d. by: WAWD
chk. by:

drawing no.
W97-18
sheet 5 of 8

HINGE OPTIONS: BY YALE OGRON'

ALUM HINGES 7-1/2" LONG
 2 PER PANEL AT 6-3/4" FROM TOP AND 9-3/4" FROM BOTTOM
 3 PART HINGE NO. 858 - STANDARD OR
 2 PART HINGE NO. 650 - OPTIONAL

LOCKS:**A) INACTIVE LEAF**

CONCEALED FLUSH BOLTS: BY 'DELTA INDUSTRIES'
 MANUALLY OPERATED, LEVER LOCATED AT
 11-1/2" FROM BOTTOM AND 17-1/2" FROM TOP

B) ACTIVE LEAF:

- 1) CONVENTIONAL DOOR KNOB LOCKSET AT 38-1/2" FROM BOTTOM
 LOCKSET CAN BE HARLOC 100XUS3 OR WESTLOCK LQ 4928
- 2) KEY OPERATED ON EXTERIOR AND THUMB TURN ON INTERIOR
 THROW BOLT LOCATED AT 43-1/2" FROM BOTTOM
 LOCK CAN BE HARLOC 820XUS3 OR WESTLOCK K 1092
- 3) CUSTOM MECHANISM BY YALE OGRON NO YH-618
 THROW BOLTS CONNECTED TO HARLOCK LOCKSET
 OPERATED BY KEY OR THUMB TURN AND ENGAGING
 FRAME AT HEAD AND SILL.
- 4) CONCEALED FLUSH BOLTS, MANUALLY OPERATED LEVER
 MOUNTED ON INSIDE FACE OF LEAF STILE LOCATED AT
 17-1/2" FROM TOP AND 11-1/2" FROM BOTTOM

OPTION 1 AND 2 ARE REQUIRED ON ALL ACTIVE LEAFS
 FOR TOP AND BOTTOM BOLTS USE OPTION 3 OR 4

KEYED THROW BOLTS BY HARLOC OR WESTLOCK TO BE OF
 STEEL CASING WITH MULTI PART STEEL BOLTS

FLUSH BOLTS BODY AND LEVER TO BE OF ZAMAK CASTING
 WITH .208 DIA. STEEL EXTENSION ROD AND 1/2" DIA. NYLON TIP.

NOTE: TOP AND BOTTOM FLUSH BOLTS MUST BE
 ENGAGED DURING PERIODS OF HURRICANE WARNING.

ITEM #	PART #	QUANTITY	DESCRIPTION	MATERIAL	MANF./SUPPLIER/REMARKS
1	YE-809B	1	SIDELITE FRAME HEAD/SILL/JAMB	6063-T6	-
1A	YE-809	1	ALT. SIDELITE FRAME HEAD/SILL/JAMB	6063-T6	-
2	YE-832	1	DOOR FRAME HEAD/JAMB	6063-T6	-
2A	YE-804	1	ALT. DOOR FRAME HEAD	6063-T6	-
2B	YE-811	1	ALT. DOOR FRAME JAMB	6063-T6	-
3	YE-810	1	DOOR FRAME SILL	6063-T6	-
4	YE-808B	AS REOD.	SIDELITE JAMB	6063-T6	-
4A	YE-806	AS REOD.	ALT. SIDELITE JAMB	6063-T6	-
5	YE-801	2/ LEAF	TOP AND BOTTOM RAIL	6063-T6	-
5A	YE-801B	2/ LEAF	ALT. TOP AND BOTTOM RAIL	6063-T5	-
6	YE-803	1/ LEAF	HINGE STILE	6063-T6	-
6A	YE-803B	1/ LEAF	ALT. HINGE STILE	6063-T5	-
7	YE-802	1/ LEAF	LOCK STILE	6063-T6	-
7A	YE-802B	1/ LEAF	ALT. LOCK STILE	6063-T5	-
8	YE-806	2/ LEAF	WEATHERSTRIP ADAPTER	6063-T6	-
9	YE-807	AS REOD.	GLAZING STOP	6063-T6	-
9A	YE-807B	AS REOD.	ALT. GLAZING STOP	6063-T5	-
10	YE-805	4/ PANEL	PRESSURE PLATE	6063-T6	-
11	YE-816	AS REOD.	COVER PLATE	6063-T6	-
12	-	-	-	-	-
13	YH-621	AS REOD.	WEDGE GASKET	-	TEAM PLASTIC
14	YH-622	AS REOD.	BULB WEATHERSTRIPPING (.198 X .260)	VINYL	TEAM PLASTIC
15	YH-625	AS REOD.	GLAZING TAPE (3/8" X 1/8")	-	VG100 BY VENTURE TAPE
16	YE-602	AS REOD.	FIN SEAL W'STRIPPING (.187 X .260)	-	ULTRAFAB
17	-	-	-	-	-
18	#10 X 1"	AS REOD.	FRAME ASSY. SCREWS	-	PAN HEAD SMS
19	YH-650	AS REOD.	HINGE	ALUMINUM	ST. STEEL PIN
20	YH-618	-	3 POINT LOCK MECHANISM (OPTIONAL)	-	-

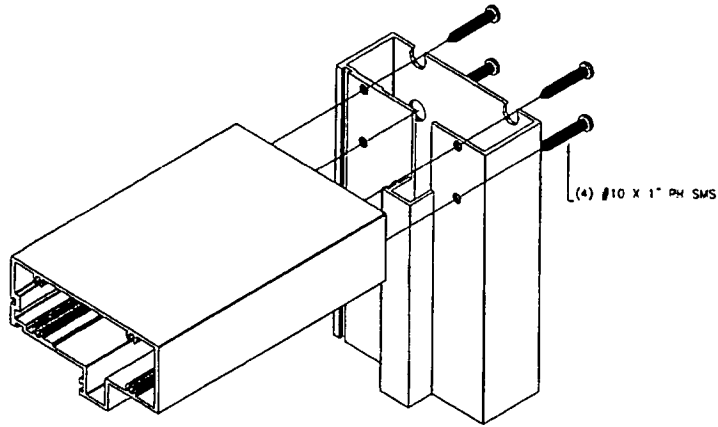
Engr. DR. HUMAYOUN FAROOD
 STRUCTURES
 FLA. PE # 16557
 C.A.N. 3538

MAR 04 2009

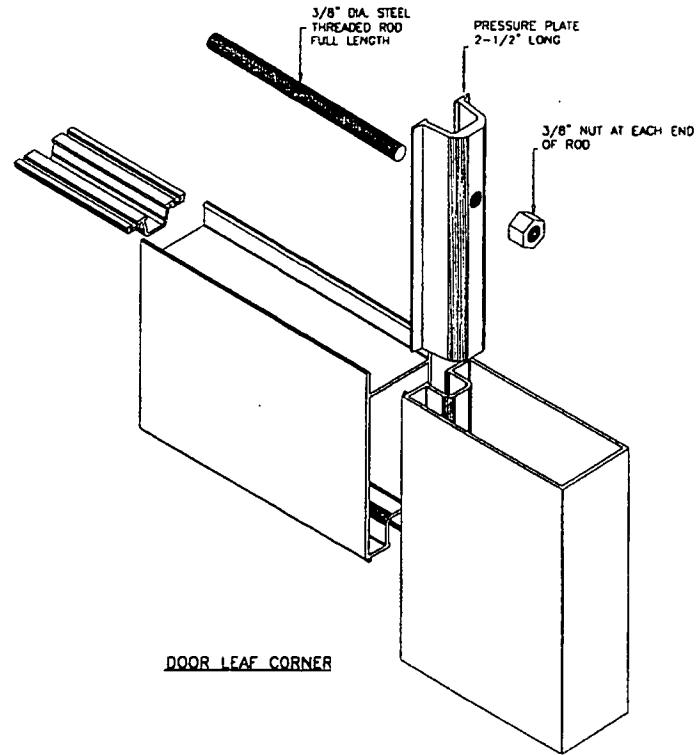
PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 09-0316-06
 Expiration Date 2-27-2017

By *John Harris*
 Miami Field Product Control
 Division

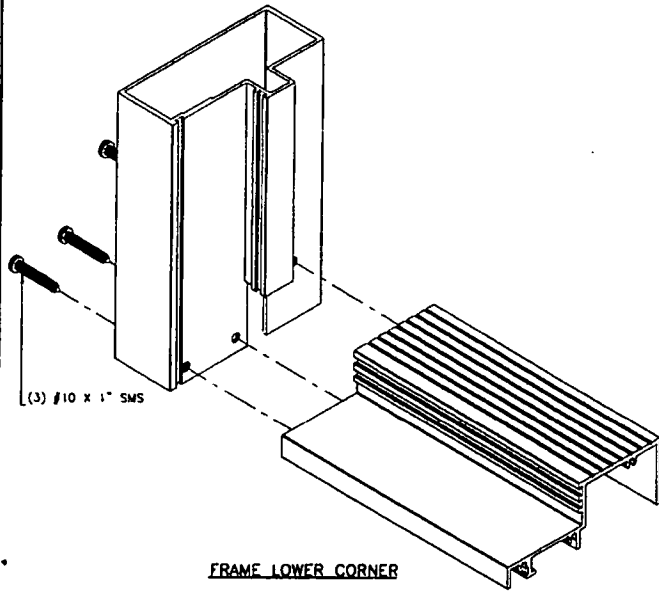
af c	
AL-FAROOQ CORPORATION ENGINEERS & PRODUCT DEVELOPMENT 12215 S.W. 81 ST AVE. MIAMI, FLORIDA 33174 TEL: (305) 264-8100 FAX: (305) 262-8978 COMP - AIL W97 - 18AWP	
SERIES 'A' FINCAST ALUM FINCAST DOOR W/ SILL (N.I.)	
AWP, LLC. 8130 N.W. 74TH AVE. MEDLEY, FL 33166 TEL: (305) 887-2646 FAX: (305) 883-1309	
Revisions:	by description
no date	
C 07-21-05	ALLOY REV.
H 07-23-05	UPDATED FOR 2007 IBC
06-05-97	entire
3/8" x 1"	size
by: JAMP	entire
no.	drawing no.
W97-18	
sheet 6 of 8	



FRAME UPPER CORNER



DOOR LEAF CORNER



FRAME LOWER CORNER

Eng: DR. HUMAYOON FAROOQ
STRUCTURES
FLA. PE # 16557
CAN. 3538

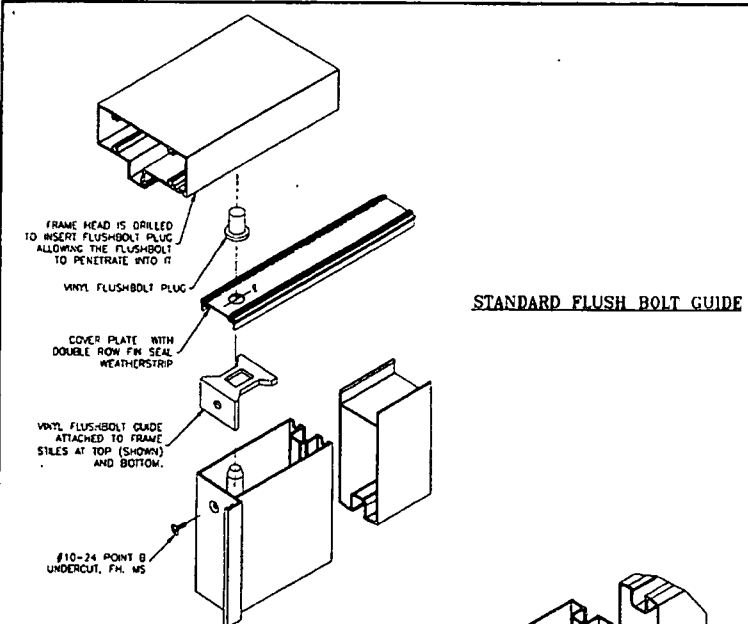
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MAR 04 2009

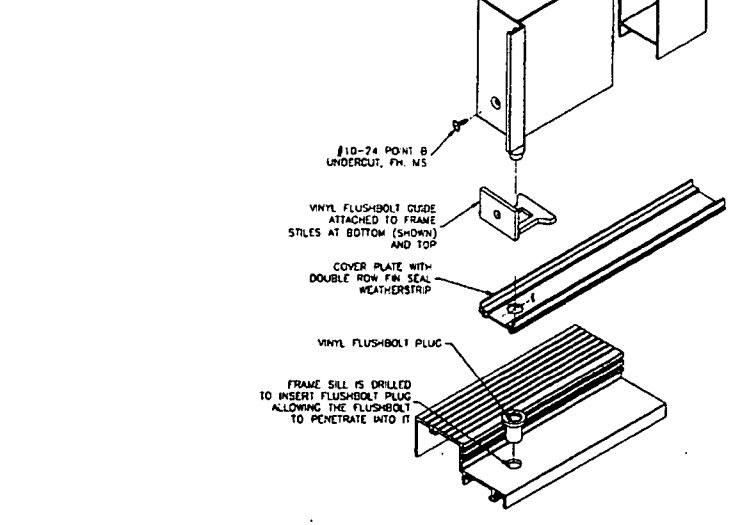
PRODUCT REVISED
as complying with the Florida
Building Code
Acceptance No 09-0316-04
Expiration Date 02-28-2017

By: *[Signature]*
Miami Dept Product Control
Division

AL-FAROOQ CORPORATION ENGINEERS & PRODUCT DEVELOPMENT 1235 S.W. 87 AVE MIAMI, FLORIDA 33174 TEL. (305) 264-8100 FAX. (305) 264-8978 COMP-ANL\W97-18AMP													
SERIES 1A FANCOQ ALUM FRENCH DOOR W/ SOLUTES (U.I) AWP, LLC. 8130 N.W. 74TH AVE. MEDLEY, FL. 33166 TEL. (305) 687-2846 FAX (305) 683-1109													
REVISIONS <table border="1"> <thead> <tr> <th>NO</th> <th>DATE</th> <th>BY</th> <th>DESCRIPTION</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>07/21/08</td> <td></td> <td>NO CHANGE THIS SHEET</td> </tr> <tr> <td>1</td> <td>02/23/09</td> <td></td> <td>UPDATED FOR 2007 IBC</td> </tr> </tbody> </table>	NO	DATE	BY	DESCRIPTION	0	07/21/08		NO CHANGE THIS SHEET	1	02/23/09		UPDATED FOR 2007 IBC	DATE: 08-05-97 SCALE: 3/8" = 1" DR. BY: HAHM CHK. BY:
NO	DATE	BY	DESCRIPTION										
0	07/21/08		NO CHANGE THIS SHEET										
1	02/23/09		UPDATED FOR 2007 IBC										
drawing no. W97-18 sheet 7 of 8													

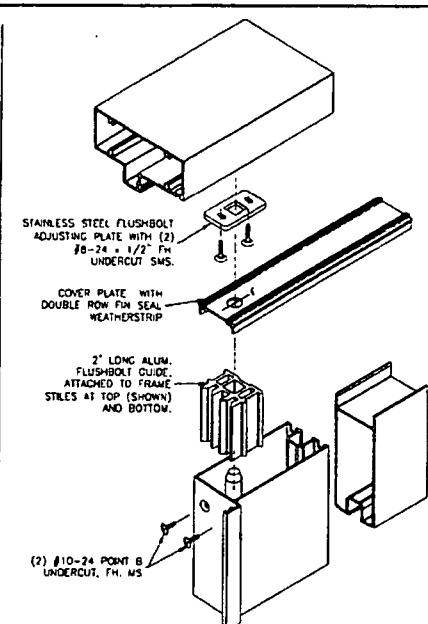


TOP FLUSHBOLT ASSEMBLY

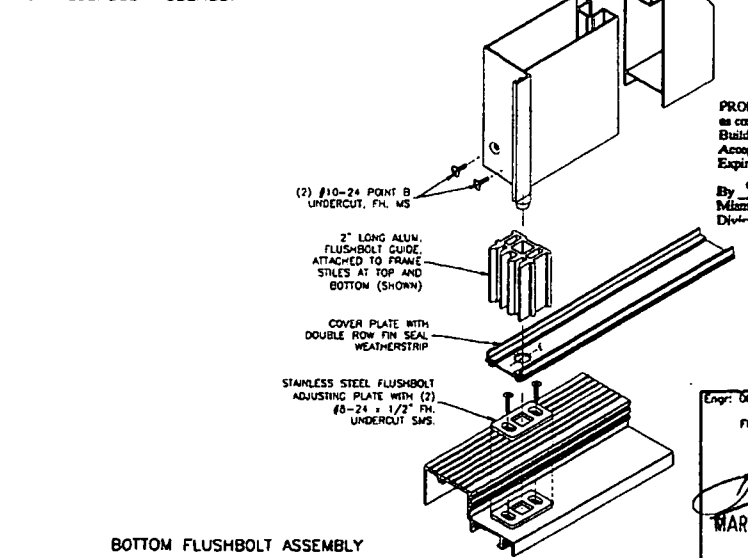


BOTTOM FLUSHBOLT ASSEMBLY

STANDARD FLUSH BOLT GUIDE



TOP FLUSHBOLT ASSEMBLY



BOTTOM FLUSHBOLT ASSEMBLY

OPTIONAL FLUSH BOLT GUIDE AND ADJUSTMENT PLATE

PRODUCT REVISED
 as complying with the Florida
 Building Code
 Acceptance No. 09-036-06
 Expiration Date 02-21-2017

By: *[Signature]*
 Miami Door Product Control
 Division

Engr: DR. HUMAYOUN FAROOQ
 STRUCTURES
 F.L.A. # 16557
 C.A.R. 3538

drawing no.
W97-18
 MAR 04 2009
 sheet 8 of 8

af c

AL-FAROOQ CORPORATION
 ENGINEERS & PRODUCT DEVELOPMENT
 1235 S.W. 87 AVE
 MIAMI, FLORIDA 33174
 TEL. (305) 264-8100 FAX. (305) 263-0978
 COMP-ANL W97-18AMP

SERIES 'A' FAMOUS ALUM. FRENCH DOOR W/ SEALS (LL)

AWP, LLC.
 8130 N.W. 74TH AVE.
 MEDLEY, FL 33166
 TEL. (305) 887-2646 FAX. (305) 883-1309

REV.	DATE	BY	DESCRIPTION
1	02-21-07	MS	CHANGE THE SHEET
2	02-21-09	MS	UPDATED FOR 2007 FBC

date: 08-05-07
 scale: 3/8" = 1"
 dr. by: HAWD
 ch. by:

may exist in dwellings built prior to 1978. See pamphlet EPA 747-K-99-001 for details.

TOTAL CHARGES OF ALL MERCHANDISE AND SERVICES		where applicable labor is taxable, check local tax restrictions
SUB-TOTAL		\$ 4939.85
*SALES TAX		\$ 0.00
DELIVERY		\$ 79.00
ORDER TOTAL		\$ 5018.85
BALANCE DUE		

Work is to commence upon reasonable availability of Contractor which is anticipated to be _____ [fill in date].
 Estimated completion date is _____ [fill in date].

NOTICE TO CUSTOMER

All items listed in this contract and specification sheet(s) are to be installed under conditions agreed upon at time of purchase and at the price appearing on this contract form. This assumes sound existing substructures, superstructure and points of attachments. Extra labor or material incident to installation necessitated by defective substructures, superstructure, points of attachment, or the moving of fixtures or appliances to be billed at extra cost to customer. DO NOT SIGN THIS CONTRACT UNTIL COMPLETE AND YOU HAVE READ THE TERMS AND CONDITIONS OF THIS CONTRACT. BY SIGNING BELOW, YOU ARE ACKNOWLEDGING THAT YOU HAVE READ, UNDERSTAND AND AGREE TO THE TERMS AND CONDITIONS SET FORTH ON THIS CONTRACT. YOU ARE ENTITLED TO A COPY OF THIS CONTRACT AT THE TIME OF SIGNATURE.

WITNESS OUR HAND(S) AND SEAL(S) BELOW THIS July DAY OF 31 2009.

Lowe's Home Centers, Inc.

By: Paul S... (Seal)

Print Name: Paul S...

1100 US Hwy 1

Address Mar Borch FL 32901

Thomas Martin (Seal)
 Owner Thomas Martin

NOTICE OF COMMENCEMENT

STATE OF FLORIDA
COUNTY OF Martin

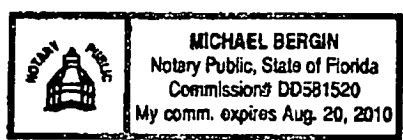
THE UNDERSIGNED hereby gives notice that improvement will be made to certain real property, and in accordance with Chapter 713, Florida Statutes, the following information is provided in this Notice of Commencement.

- 1. Description of property: (legal description of property, and street address if available)
35-37-41-008-000-00010-2,2 Palm Ct., Sewall's Point, FL 34996 Knowledge S/D LOT 1
- 2. General description of improvement: Replacement doors and windows
- 3. Owner information:
 - a. Name and address: Thomas Martin, 4373 NE Skyline Dr., Jensen Beach FL. 34957
 - b. Phone number: 772-287-0407
 - c. Name and address of fee simple titleholder (if other than owner): N/A
- 4. Contractor:
 - a. Name and address: Lowes # 0703, 8529 South Park Cir., #430, Orlando, Fl. 32819
 - b. Phone number: 772-692-7745
- 5. Surety:
 - a. Name and address: N/A
 - b. Amount of bond \$ _____ c. Phone number: _____
- 6. Lender:
 - a. Name and address: N/A
 - b. Phone number: _____
- 7. Persons with 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:
 - a. Name and address: N/A
 - b. Phone number: _____
- 8. In addition to himself, Owner designates the following person(s) to receive a copy of the Lienor's Notice as provided in Section 713.13(1)(b), Florida Statutes:
 - a. Name and address: N/A
 - b. Phone number: _____
- 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) _____

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

[Signature]
Signature of Owner or Owner's Authorized Officer/Director/Partner/Manager
Signatory's Title/Office NOTARY

The foregoing instrument was acknowledged before me this 3 day of SEPT, 2009 by Thomas P. Martin (name of person) as owner (type of authority, ...e.g. officer, trustee, attorney in fact) for [Signature] (name of party on behalf of whom instrument was executed).



[Signature]
Signature of Notary Public - State of Florida
Print, type, or stamp commissioned name of Notary Public
Personally Known _____ OR Produced Identification
Type of identification produced FL DL

Verification pursuant to Section 92.525, Florida Statutes

Under penalties of perjury, I declare that I have read the foregoing and that the facts stated in it are true to the best of my knowledge and belief

STATE OF FLORIDA
MARTIN COUNTY



[Signature]
Signature of natural person signing above (owner)

THIS IS TO CERTIFY THAT THE FOREGOING 1 PAGES IS A TRUE AND CORRECT COPY OF THE ORIGINAL.
BY: [Signature] D.C.
DATE: 9/3/09

INSTR # 216313 OR BK 02410 Pg 0905 RECD 09/03/2009 10:12:17 AM
HARSHA EWING MARTIN COUNTY DEPUTY CLERK C Hunter

TOWN OF SEWALLE POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 9-19 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
TREE	KIMES			
	2 RIVERVIEW	TREE	OK	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9250	BREHENY			
	6 RIVERVIEW	HARD PLANK		
	O/B	ROUGH	Pass	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
C.E.	6 MORGAN			
		DIRT/DEBRIS	OK	
		IN ROAD		
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
C.E.	102 N. SPINA			
		DIRT IN RD.	OK	
				INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9251	2 PALM CT	DOOR ATTACHMENT	FAIL	Not Working
	2 PALM CT	DOOR ATTACHMENT		
	LOWES			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 9-16 2009 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9216	Maslerpiece 1 Marguerita Schiller Pools	Plumbing	FAIL	Plumb OK ELECT FAIL INSPECTOR <i>[Signature]</i>
9250	Baeheny 6 Luverne OB	tyvek	Pass	NEED ELEC PERMIT INSPECTOR <i>[Signature]</i>
9251	Warten 2 Palm Co Louie's	ATTORNEY WINDOWS	Pass <i>[Signature]</i>	INSPECTOR <i>[Signature]</i>
9000	CD2 4 River Oak Pl Riverview Const	Final roof	Pass	INSPECTOR <i>[Signature]</i>
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **2-18-10** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9365	Carelli 4 Middle Rd TB AC	Final	Pass	Close Inspector <i>JF</i>
9253	Martin 2 Palm Ct Hoskins & Clarke	Final Shutters	Pass	Close Inspector <i>JF</i>
9253	Martin 2 Palm Ct Lewis	Final Windows 4 sets	Pass	Close Inspector <i>JF</i>
9208	Fare 1095 River Rd Harbor Bay Marine	Final DOCK	Pass	Close Inspector <i>JF</i>
9367	BARON 25 FIELDWAY PINNACLE ROOF	ROOF FINAL	Pass	Close Inspector <i>JF</i>
9299	BUSCH 14 RIVERVIEW Cecannon	FINAL	Pass	Close Inspector <i>JF</i>
9340	Waters Waters Waters	Waters Waters Waters		Inspector

9253

HURRICANE

SHUTTERS



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

BUILDING PERMIT CARD

THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS

PERMIT NUMBER:	9253	DATE ISSUED:	SEPTEMBER 11, 2009
SCOPE OF WORK:	HURRICANE SHUTTERS		
CONDITIONS :			
CONTRACTOR:	HOSKIN & CLARKE		
PARCEL CONTROL NUMBER:	353741-008-000-000102	SUBDIVISION	KNOWLES - LOT 1
CONSTRUCTION ADDRESS:	2 PALM CT		
OWNER NAME:	MARTIN		
QUALIFIER:	MICHAEL HOSKIN	CONTACT PHONE NUMBER:	631-3600

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

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

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

REQUIRED INSPECTIONS

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

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



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:	9253
ADDRESS	2 PALM CT
DATE:	9/11/09
SCOPE:	HURRICANE SHUTTERS

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: (@ \$110.25 per sq. ft.)		s.f.	
Total square feet non-conditioned space: (@ \$51.60 per sq. ft.)		s.f.	
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.		\$	
Radon Fee (\$.005 per sq. ft. under roof):		\$	
DBPR Licensing Fee: (\$.005 per sq. ft. under roof)		\$	
Road impact assessment: (.04% of construction value - \$5.00 min.)			
Martin County Impact Fee:		\$	
TOTAL BUILDING PERMIT FEE:		\$	

ACCESSORY PERMIT	Declared Value:	\$	
Total number of inspections @ \$75.00 each	1	\$	75
Road impact assessment: (.04% of construction value - \$5.00 min.)		\$	5
TOTAL ACCESSORY PERMIT FEE:		\$	80 pd cash

Martin County, Florida

generated on 8/14/2009 12:48:38 PM EDT

Summary

Parcel ID	Unit Address	Serial ID	Index Order	Commercial	Residential
35-37-41-008-000-00010-2	2 PALM CT	9558	Address	0	1

Summary

Property Location 2 PALM CT
Tax District 2200 Sewall's Point
Account # 9558
Land Use 101 0100 Single Family
Neighborhood 120600
Acres 0.604

Legal Description
Property Information
 KNOWLES S/D LOT 1

Owner Information
Owner Information
 MARTIN THOMAS

Mail Information
 4373 NE SKYLINE DR
 JENSEN BEACH FL 34957

Assessment Info
Front Ft. 0.00

Market Land Value \$206,150
Market Impr Value \$262,840
Market Total Value \$468,990

Recent Sale
Sale Amount \$255,000

Sale Date 4/6/2009
Book/Page 2383 0363

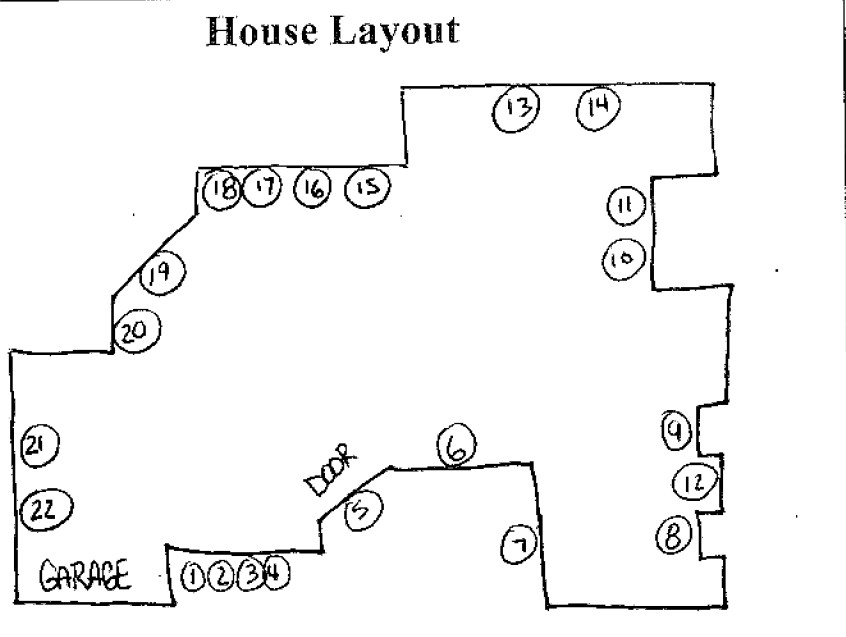
Data updated on 08/13/2009



Provided by



Opening	Width	Height
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2	27	78
3	27	78
4	27	78
5	66	87
6	183	73
7	78	27
8	55	63
9	55	63
10	65	78
11	66	85
12	55	27
13	78	27
14	78	27
15	112	86
16	112	86
17	78	27
18	78	27
19	43	39
20	78	87
21	55	27
22	55	27

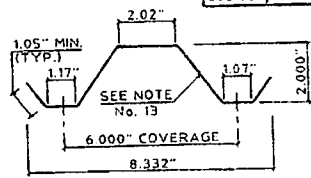
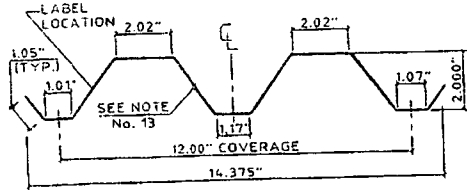


FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE 8-26-09
BUILDING OFFICIAL

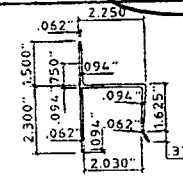
* NUMBERS 11, 15, 16, 20 ARE *
 ACCORDION SHUTTERS
 ALL OTHER OPENINGS ALUMINUM
 PANELS

HURRICANE SHUTTERS & CONSTRUCTION
 1090 N. E. INDUSTRIAL BLVD. Jensen Beach Fl. 34957
 772-334-1404 OFFICE 772-631-3600 MOBILE 772-225-1092 FAX

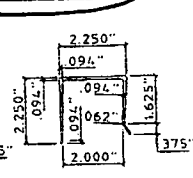
0.040", 0.050" & 0.060" ALUMINUM STORM PANELS



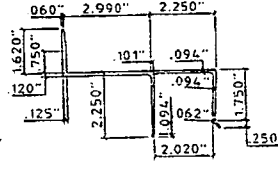
1a HALF STORM PANEL
SCALE: 3" = 1'-0"



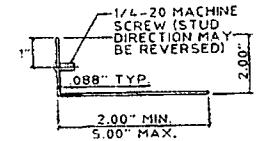
2 1/2" HEADER
SCALE: 3" = 1'-0"



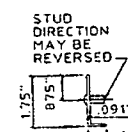
3 3/4" HEADER
SCALE: 3" = 1'-0"



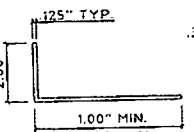
3a BUILD-OUT 1/2" HEADER
SCALE: 3" = 1'-0"



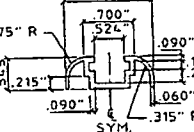
4 STUD ANGLE
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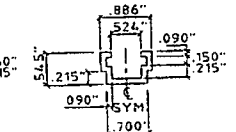
4a STUD ANGLE
SCALE: 3" = 1'-0"



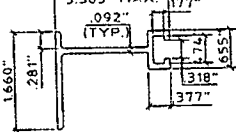
5 ANGLE
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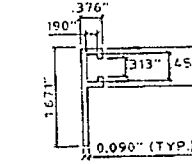
6 C-TRACK
SCALE: HALF SIZE



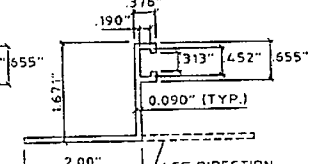
6a C-TRACK
SCALE: HALF SIZE



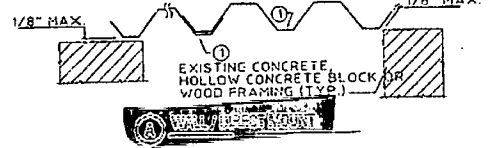
7 BUILD-OUT F-TRACK
SCALE: HALF SIZE



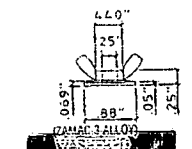
8 F-TRACK
SCALE: HALF SIZE



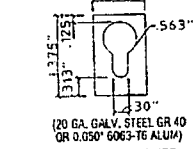
8a F-ANGLE - TRACK
SCALE: HALF SIZE



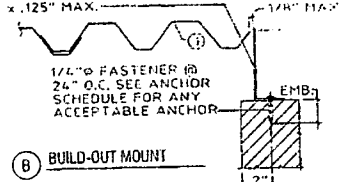
B BUILD-OUT MOUNT



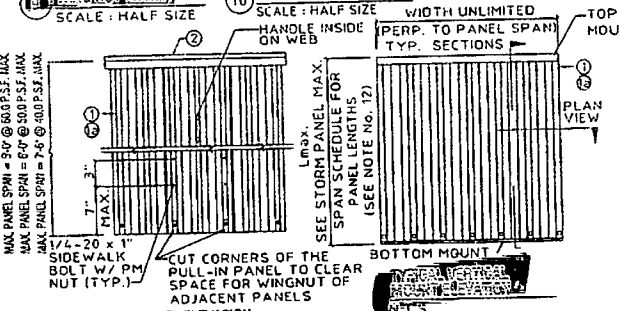
9 KEYHOLE WASHER
SCALE: HALF SIZE



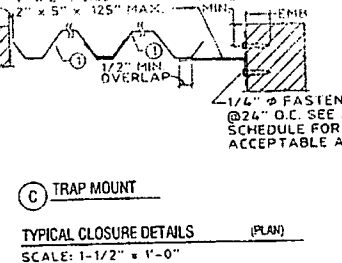
10 KEYHOLE WASHER
SCALE: HALF SIZE



C TRAP MOUNT



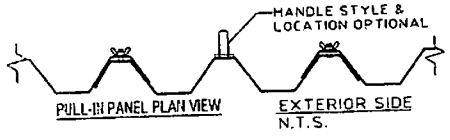
PULL-IN PANEL PLAN VIEW
PULL-IN PANEL ELEVATION N.T.S.




TYPICAL CLOSURE DETAILS (PLAN)
SCALE: 1-1/2" = 1'-0"

GENERAL NOTES:

1. THESE PRODUCT EVALUATION DOCUMENTS REPRESENT A SHUTTER SYSTEM DESIGNED AND TESTED AS A LARGE MISSILE IMPACT PROTECTIVE SYSTEM IN ACCORDANCE WITH THE FLORIDA BUILDING CODE.
2. THIS SHUTTER SYSTEM HAS BEEN TESTED FOR LARGE MISSILE IMPACT RESISTANCE IN CONFORMANCE WITH THE SBCCI STANDARD SSTD 12-99 AND FOR UNIFORM STATIC AIR PRESSURE IN CONFORMANCE WITH ASTM E330-02. REFERENCED TEST REPORTS CONSTRUCTION TESTING CORPORATION (C.T.C.), TEST REPORT No. 97-063, 98-009, 98-010, 98-011, 98-014, 99-044, 00-041, 00-022, 01-037 AND 02-012.
3. AN ALLOWABLE STRESS INCREASE HAS NOT BEEN USED IN THE DESIGN OF THIS PRODUCT.
4. DETERMINE THE POSITIVE AND NEGATIVE DESIGN LOADS TO USE WHEN REFERENCING THESE DOCUMENTS IN ACCORDANCE WITH THE GOVERNING CODE AND GOVERNING WIND VELOCITY.
5. USE OF THESE PRODUCT EVALUATION DOCUMENTS ARE PREPARED BY THE PRODUCT ENGINEER AND ARE GENERIC. THEY DO NOT INCLUDE INFORMATION PREPARED FOR A SPECIFIC SITE.
6. USE OF THESE APPROVAL DOCUMENTS SHALL COMPLY WITH CHAPTER 54G15-23 OF THE FLORIDA ADMINISTRATIVE CODE.
7. THESE PRODUCT EVALUATION DOCUMENTS ARE SUITABLE TO BE APPLIED BY THE CONTRACTOR PROVIDED THE CONTRACTOR DOES NOT DEVIATE FROM THE CONDITIONS DETAILED HEREIN AND THE CONTRACTOR VERIFIES THE EXISTING STRUCTURE IS CAPABLE OF SUPPORTING THE SUPERIMPOSED LOADS.
8. ALTERATIONS OR ADDITIONS TO THIS DOCUMENT ARE NOT PERMITTED.
9. WHEN THE SITE CONDITIONS DEVIATE FROM THESE PRODUCT EVALUATION DOCUMENTS, SITE SPECIFIC DOCUMENTS SHALL BE PREPARED BY A DULY LICENSED AND REGISTERED ENGINEER OR ARCHITECT. SAID DOCUMENTS SHALL BEAR THE DATE, SIGNATURE AND EMBOSSED SEAL OF THE DELEGATED ENGINEER OR ARCHITECT AND SHALL BE SUBMITTED TO THE PRODUCT ENGINEER FOR REVIEW.
10. WHERE COMPLIANCE WITH SSTD 12-99 IS REQUIRED, PANELS SHALL BE PERMANENTLY LABELED WITH A MINIMUM OF ONE LABEL PER OPENING OR THE MANUFACTURER AND INSTALLER SHALL PROVIDE A CERTIFICATE OF COMPLIANCE. WHERE LABELS ARE USED, THE LABEL SHALL READ AS FOLLOWS:
TOWN & COUNTRY INDUSTRIES
FORT LAUDERDALE, FL
11. ALL SCREWS, BOLTS AND WASHERS SHALL BE 2024-T4 ALUMINUM ALLOY, STAINLESS STEEL OR GALVANIZED STEEL WITH A MINIMUM TENSILE STRENGTH OF 40 KSI TYP.
12. TOP & BOTTOM DETAILS SHOWN MAY BE INTERCHANGED AS FIELD CONDITIONS DICTATE. C-TRACK, F-ANGLE, STUD ANGLE OR DIRECT MOUNTED IS USED.
13. STORM PANELS SHALL BE ALUMINUM ALLOY WITH THE FOLLOWING METAL TOLERANCES:
MAX. PANEL SPAN = 50" @ 60 P.S.F. MAX.
MAX. PANEL SPAN = 60" @ 50 P.S.F. MAX.
MAX. PANEL SPAN = 75" @ 40 P.S.F. MAX.
14. ALL FINISHES SHALL BE 6063-T6 ALUMINUM ALLOY, U.O.N.





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eyewall Armor
HURRICANE PROTECTION

revisions

no.	date	by

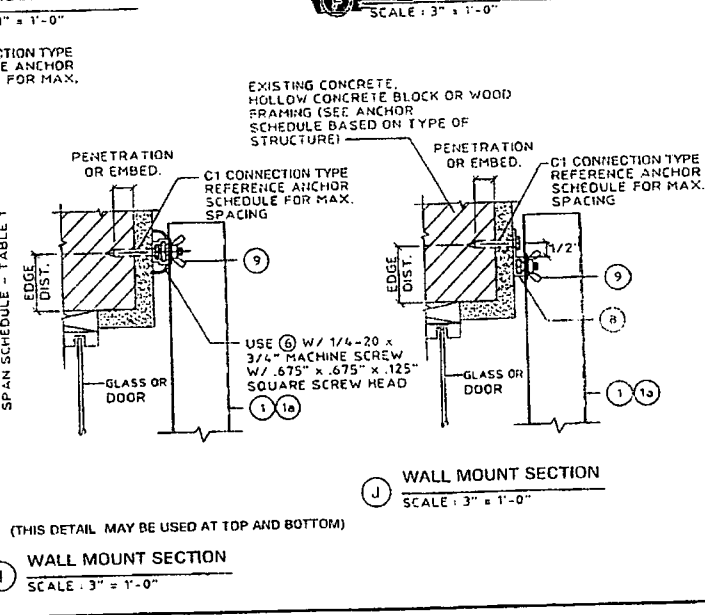
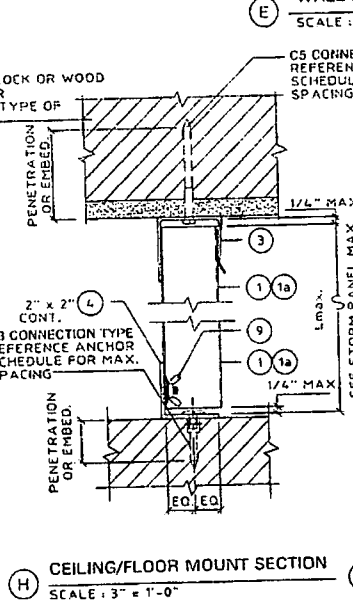
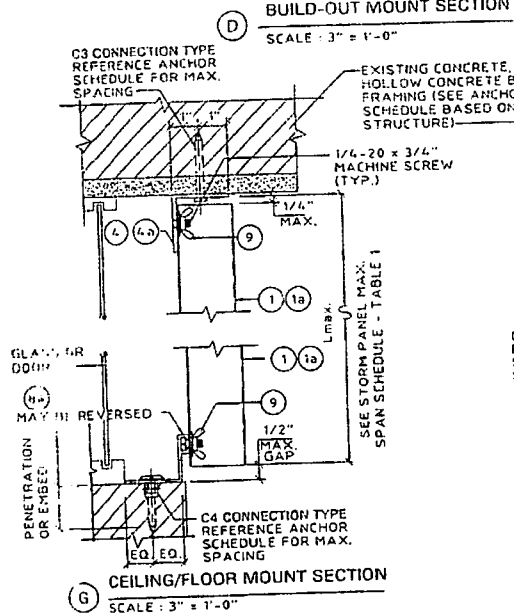
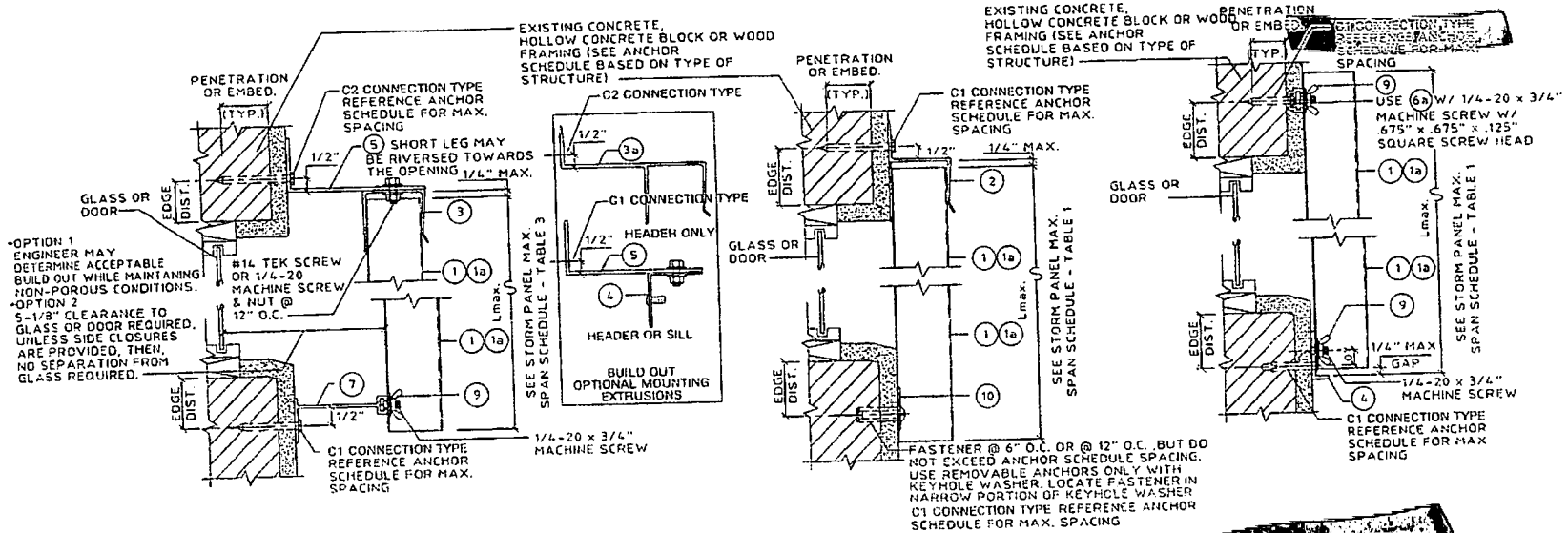
AS NOTED

09/10/2008

08-353

This seal was fabricated by J. Knezvich, P.E. in 09/08. This does not constitute an electronic signature or approval for any specific project. This seal is void if used on any project other than the one for which it was fabricated.

0.040", 0.050" & 0.060" ALUMINUM STORM PANELS



OPTION 1
ENGINEER MAY DETERMINE ACCEPTABLE BUILD OUT WHILE MAINTAINING NON-POROUS CONDITIONS.

OPTION 2
5-1/8" CLEARANCE TO GLASS OR DOOR REQUIRED. UNLESS SIDE CLOSURES ARE PROVIDED, THEN, NO SEPARATION FROM GLASS REQUIRED.

FASTENER @ 6" O.C. OR @ 12" O.C. BUT DO NOT EXCEED ANCHOR SCHEDULE SPACING. USE REMOVABLE ANCHORS ONLY WITH KEYHOLE WASHER. LOCATE FASTENER IN NARROW PORTION OF KEYHOLE WASHER

K&B

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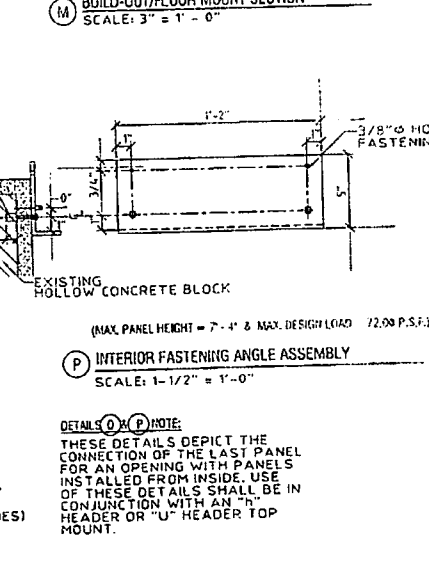
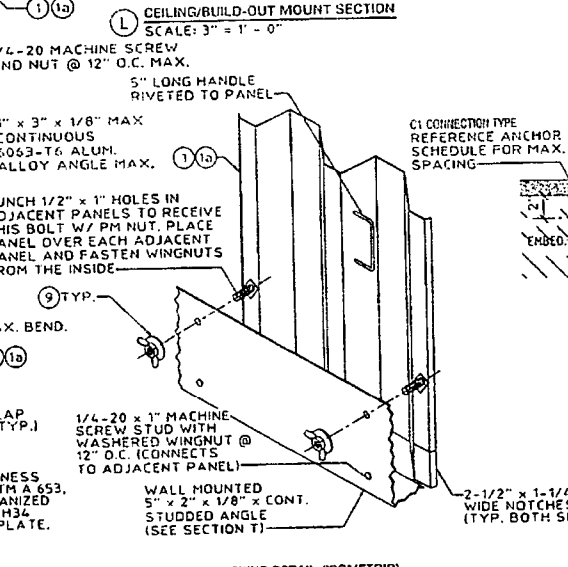
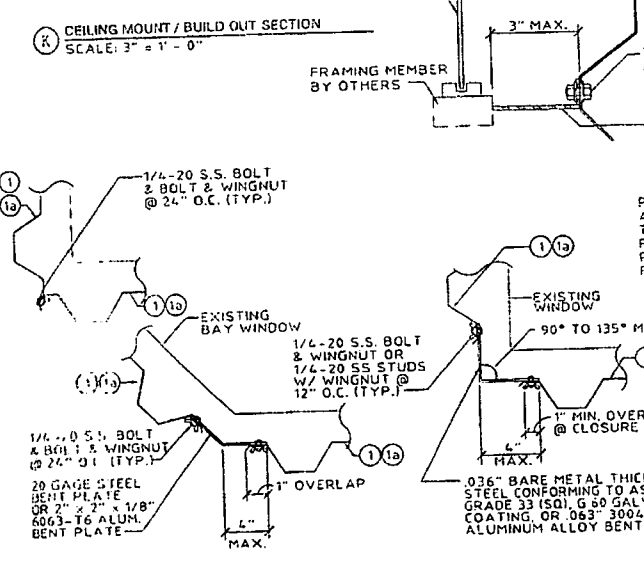
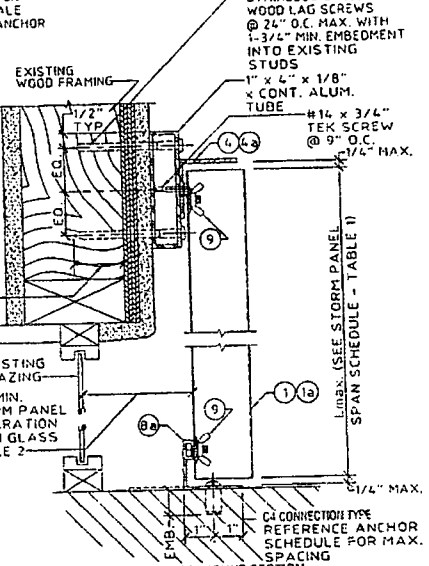
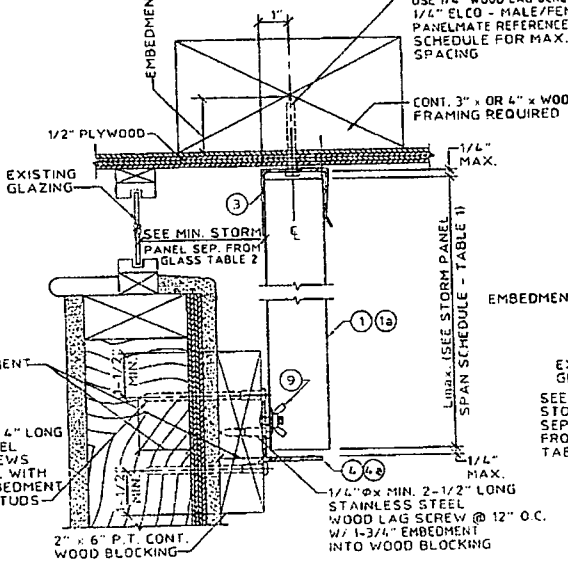
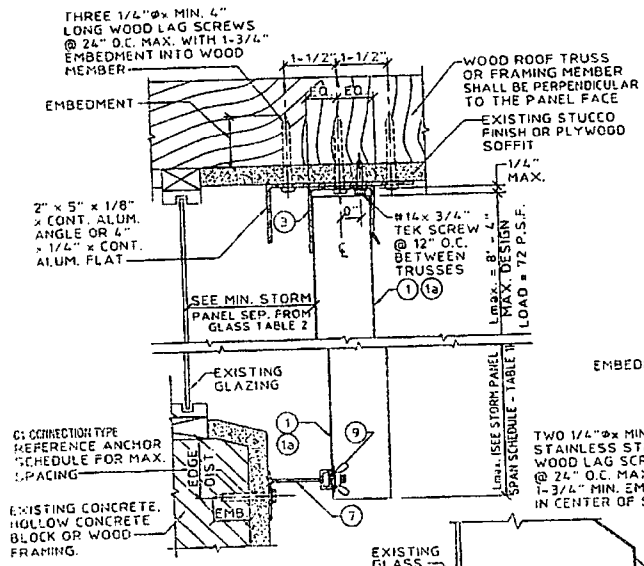
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NO.	DATE	DESCRIPTION

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PAGE 2 of 6

0.040", 0.050" & 0.060" ALUMINUM STORM PANELS




(N) TYPICAL CORNER CLOSURE DETAILS (PLAN)
SCALE: 1-1/2" = 1'-0"

(O) OPTIONAL INTERIOR FASTENING DETAIL (ISOMETRIC)
N.T.S.

(P) INTERIOR FASTENING ANGLE ASSEMBLY
SCALE: 1-1/2" = 1'-0"

DETAILS (O, N, P) NOTE:
THESE DETAILS DEPICT THE CONNECTION OF THE LAST PANEL FOR AN OPENING WITH PANELS INSTALLED FROM INSIDE. USE OF THESE DETAILS SHALL BE IN CONJUNCTION WITH AN "H" HEADER OR "U" HEADER TOP MOUNT.



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REV.	DATE	DESCRIPTION

08-353

DATE: 09/10/2008

PAGE 3 of 6

0.040", 0.050" & 0.060" ALUMINUM STORM PANELS

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXIST. STRUC.	ANCHOR TYPE	EDGE DISTANCE	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	SHORTER EDGE DISTANCES				EDGE DISTANCE	LONGER EDGE DISTANCES															
				SPANS UP TO 5'-0"		SPANS UP TO 8'-9"			SPANS UP TO 12'-0"		SPANS UP TO 5'-0"		SPANS UP TO 8'-9"		SPANS UP TO 12'-0"		SPANS UP TO 15'-0"							
				(SEE NOTE 1)		(SEE NOTE 1)			(SEE NOTE 1)		(SEE NOTE 1)		(SEE NOTE 1)		(SEE NOTE 1)		(SEE NOTE 1)							
				CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)							
C1 C2 C3 C4 C5		C1 C2 C3 C4 C5		C1 C2 C3 C4 C5		C1 C2 C3 C4 C5		C1 C2 C3 C4 C5		C1 C2 C3 C4 C5		C1 C2 C3 C4 C5		C1 C2 C3 C4 C5										
CONCRETE	<p>1/4" Ø ITW TAPCON W/ 1-3/4" MIN. EMBEDMENT</p>	ED = 1.0"	33.0	18	18	13	12	12	18	18	7	7	18	18	5	5	18	18	4	4	18	18	4	4
			44.2	18	18	10	9	9	18	18	5	5	18	18	5	5	18	18	5	5	18	18	5	5
			47.2	18	18	9	8	8	18	18	5	5	18	18	5	5	18	18	5	5	18	18	5	5
			64.0	18	18	7	6	6	18	18	4	4	18	18	5	5	18	18	5	5	18	18	5	5
			80.0	18	18	5	5	5	18	18	3	3	18	18	5	5	18	18	5	5	18	18	5	5
	<p>ELCO ULTRACON WITH 1/4" Ø W/ 1-3/4" MIN. EMBEDMENT</p>	ED = 1.0"	33.0	18	18	18	18	18	18	18	11	10	18	18	9	8	18	18	7	6	18	18	7	6
			44.2	18	18	16	14	14	18	18	9	8	18	18	9	8	18	18	9	8	18	18	9	8
			47.2	18	18	15	13	13	18	18	8	7	18	18	8	7	18	18	8	7	18	18	8	7
			64.0	18	18	11	10	9	18	18	6	5	18	18	8	7	18	18	8	7	18	18	8	7
			80.0	18	18	9	8	7	18	18	6	5	18	18	8	7	18	18	8	7	18	18	8	7
	<p>1/4" Ø ELCO MALE/ FEMALE "PANELMATE" W/ 1-7/8" MIN. EMBED. & 1/4"-20 MACHINE SCREW WITH NUT</p>	ED = 2.0"	33.0	Hatched area																				
			44.2	Hatched area																				
			47.2	Hatched area																				
			64.0	Hatched area																				
			80.0	Hatched area																				
	<p>1/4" Ø POWERS ZAMAC NAIL-IN W/ 1-1/8" MIN. EMBEDMENT</p>	ED = 2.0"	33.0	18	18	11	10	10	17	17	6	6	18	18	5	5	18	18	5	5	18	18	5	5
			44.2	18	18	8	7	7	18	18	5	4	18	18	5	4	18	18	5	4	18	18	5	4
			47.2	18	18	8	7	7	18	18	4	4	18	18	5	4	18	18	5	4	18	18	5	4
			64.0	18	18	6	5	5	18	18	3	3	18	18	5	4	18	18	5	4	18	18	5	4
			80.0	18	18	4	4	4	18	18	3	3	18	18	5	4	18	18	5	4	18	18	5	4
	<p>5/16" Ø ELCO ULTRACON WITH 1-3/4" MIN. EMBEDMENT</p>	ED = 2.187"	33.0	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
			44.2	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
			47.2	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
			64.0	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
80.0			18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	
<p>1/4" Ø ALL-POINTS SOLID-SET ANCHOR W/ 7/8" EMBEDMENT & 1/4"-20 STAINLESS STEEL MACHINE SCREW</p>	ED = 1.25"	33.0	18	18	17	15	14	18	18	9	8	18	18	7	6	18	18	7	6	18	18	7	6	
		44.2	18	18	12	11	11	18	18	7	6	18	18	7	6	18	18	7	6	18	18	7	6	
		47.2	18	18	12	10	10	18	18	6	6	18	18	7	6	18	18	7	6	18	18	7	6	
		64.0	18	18	8	7	7	18	18	5	4	18	18	7	6	18	18	7	6	18	18	7	6	
		80.0	18	18	7	6	6	18	18	4	4	18	18	7	6	18	18	7	6	18	18	7	6	

SEE PAGE 6 OF 6 FOR COMPLETE ANCHOR NOTES.



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no.	date	by	description

APPROVED FOR CONSTRUCTION

Signature:

Date: 08/16/2008

08-353

0.040", 0.050" & 0.060" ALUMINUM STORM PANELS

ANCHOR SCHEDULE

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXIST. STRUC.	ANCHOR TYPE	EDGE DISTANCE	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	SHORTER EDGE DISTANCES																LONGER EDGE DISTANCES																						
				SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"				SPANS UP TO 5'-0"				SPANS UP TO 8'-9"				SPANS UP TO 12'-0"				SPANS UP TO 15'-0"										
				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)				(SEE NOTE 1)										
				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)				CONNECTION TYPE (SEE NOTE 3)														
				C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5									
HOLLOW CONCRETE BLOCK	1/4" Ø ITW TAPCON W/ 1-1/4" MIN. EMBEDMENT	ED = 1.0"	33.0	13	13	6	5	5	7	7	3	3	3	5	5	5	4	4	4	4	4	18	18	14	11	11	12	12	8	6	6	9	9	5	4	4	7	7	4	3	3	
			44.2	10	10	5	4	4	5	5	5	5	5	5	4	4	4	4	4	4	4	4	16	16	10	8	8	9	9	6	4	4	6	6	4	3	3	6	4	3	3	
			47.2	9	9	4	4	3	5	5	5	5	5	5	3	3	3	3	3	3	3	3	11	11	7	5	5	6	6	4	3	3	6	4	3	3	6	4	3	3		
			64.0	6	6	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	9	9	5	4	4	6	6	4	3	3	6	4	3	3	6	4	3	3		
			80.0	5	5	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	3	9	9	5	4	4	6	6	4	3	3	6	4	3	3	6	4	3	3		
			ED = 2.5"	33.0	18	18	17	14	13	14	14	9	8	7	10	10	7	5	5	5	5	5	5	18	18	17	16	16	18	18	12	10	9	13	13	8	7	7	10	10	7	5
	ED = 1.0"	33.0	18	18	9	8	7	10	10	5	4	4	7	7	3	3	3	7	5	5	3	18	18	12	10	9	10	10	7	5	5	7	7	5	4	4	7	5	4	3	3	
	ED = 2.5"	33.0	18	18	9	8	7	10	10	5	4	4	7	7	3	3	3	7	5	5	3	18	18	12	10	9	10	10	7	5	5	7	7	5	4	4	7	5	4	3	3	
	ED = 3.0"	33.0	18	18	12	11	10	16	16	8	6	6	11	11	5	5	4	10	8	5	4	18	18	15	13	13	16	16	9	7	7	11	11	6	5	5	10	8	5	4	4	
	ED = 2.0"	33.0	18	18	10	8	8	11	11	5	4	4	8	8	4	3	3	8	6	3	3	18	18	18	17	16	18	18	12	10	9	13	13	8	7	7	10	10	7	5	5	
	ED = 3.0"	33.0	18	18	10	8	8	11	11	5	4	4	8	8	4	3	3	8	6	3	3	18	18	18	17	16	18	18	12	10	9	13	13	8	7	7	10	10	7	5	5	
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	ED = 1.25"	33.0	18	18	12	11	10	17	17	7	6	6	12	12	5	4	4	10	10	4	3	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18	18
	ED = 1.25"	44.2	18	18	9	8	8	12	12	5	4	4	9	9	3	3	3	8	6	3	3	18	18	15	13	13	18	18	9	7	7	15	15	6	5	5	14	11	6	5	5	
	ED = 1.25"	47.2	18	18	8	7	7	12	12	5	4	4	8	8	3	3	3	8	6	3	3	18	18	14	13	12	18	18	8	7	7	15	15	6	5	5	14	11	6	5	5	
	ED = 1.25"	64.0	15	15	6	5	5	8	8	3	3	3	8	6	3	3	3	8	6	3	3	18	18	11	9	9	15	14	6	5	5	14	11	6	5	5	14	11	6	5	5	
	ED = 1.25"	80.0	12	12	5	4	4	8	6	3	3	3	8	6	3	3	3	8	6	3	3	18	18	8	7	7	14	11	6	5	5	14	11	6	5	5	14	11	6	5	5	

SEE PAGE 6 OF 6 FOR COMPLETE ANCHOR NOTES.



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no.	date	by	description

08-353
 09/10/2008
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ANCHOR SCHEDULE

0.040", 0.050" & 0.060" ALUMINUM STORM PANELS

FASTENER MAXIMUM SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

EXIST. STRUC.	ANCHOR TYPE	EDGE DISTANCE	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	SPANS UP TO			
				5'-0"	8'-9"	12'-0"	15'-0"
				CONNECTION TYPE (SEE NOTE 3)	CONNECTION TYPE (SEE NOTE 3)	CONNECTION TYPE (SEE NOTE 3)	CONNECTION TYPE (SEE NOTE 3)
WOOD	1/4" WOOD LAG W/ 1-27/32" MIN. THREAD PENETRATION SHEAR PARALLEL OR PERP. TO WOOD GRAIN	ED = 0.75"	33.0	18 18 18 18 18	18 18 15 13 13	18 18 10 10 9	18 18 8 8 7
		44.2	18 18 18 18 17	18 18 11 10 10	18 18 8 7 7	18 18 7 6 6	
		47.2	18 18 18 16 18	18 18 10 9 9	18 18 7 7 6	18 18 7 6 6	
	1/2" WOOD BUSHING W/ 5/8" MIN. PENETRATION & 1/4"-20 MACHINE SCREW FOR FEMALE AND 1/4"-20 W/W FOR MALE	ED = 0.75"	33.0	18 18	18 15	12 12	9 9
		44.2	18 18	12 12	9 9	8 6	
		47.2	18 18	12 12	8 7	8 6	
	7/16" WOOD BUSHING W/ 5/8" MIN. PENETRATION & 1/4"-20 SIDEWALK BOLT	ED = 0.75"	33.0	18 18 18 18 18	18 18 16 13 12	17 17 12 9 9	13 13 9 7 7
		44.2	18 18 18 17 16	17 17 12 10 9	15 13 9 7 6	11 9 8 6 6	
		47.2	18 18 18 15 15	16 16 11 9 8	12 11 8 6 6	11 9 8 6 6	
		ED = 1"	64.0	18 18 15 12 11	12 11 8 6 6	11 9 8 6 6	11 9 8 6 6
		80.0	17 17 12 9 9	11 9 8 6 6	11 9 8 6 6	11 9 8 6 6	

TABLE 1	NEGATIVE DESIGN LOAD W (P.S.F.)	STORM PANEL MAXIMUM SPAN SCHEDULE		
		THICKNESS		
		0.040"	0.050"	0.060"
		ALL MOUNTING CONDITIONS EXCEPT "F" ANGLE TRACK	ALL MOUNTING CONDITIONS EXCEPT "F" ANGLE TRACK	ALL MOUNTING CONDITIONS EXCEPT "F" ANGLE TRACK
		L MAX. (FT - IN)	L MAX. (FT - IN)	L MAX. (FT - IN)
	30	11' - 1"	11' - 9"	14' - 11"
	33	10' - 7"	11' - 2"	14' - 3"
	35.8	10' - 2"	10' - 9"	13' - 8"
	38.3	9' - 10"	10' - 4"	13' - 2"
	40.7	9' - 6"	10' - 1"	12' - 10"
	44.2	9' - 1"	9' - 8"	12' - 3"
	47.2	8' - 6"	9' - 4"	11' - 11"
	50.9	8' - 6"	9' - 0"	11' - 5"
	52.4	8' - 4"	8' - 10"	11' - 2"
	56	8' - 1"	8' - 7"	10' - 4"
	60	7' - 10"	8' - 3"	9' - 5"
	64	7' - 7"	8' - 0"	9' - 2"
	68	7' - 4"	7' - 6"	8' - 7"
	72	7' - 1"	7' - 1"	8' - 2"
	76	6' - 9"	6' - 9"	7' - 8"
	80	6' - 5"	6' - 6"	7' - 4"

TABLE 3	NEGATIVE DESIGN LOAD W (P.S.F.)	STORM PANEL WITH "F" ANGLE TRACK (TOP OR BOTTOM) MAX. SPAN SCHED.		
		THICKNESS		
		0.040"	0.050"	0.060"
		ALL MOUNTING CONDITIONS	ALL MOUNTING CONDITIONS	ALL MOUNTING CONDITIONS
		L MAX. (FT - IN)	L MAX. (FT - IN)	L MAX. (FT - IN)
	30	11' - 1"	11' - 9"	14' - 11"
	33	10' - 7"	11' - 2"	14' - 11"
	35.8	10' - 2"	10' - 9"	12' - 11"
	38.3	9' - 10"	10' - 4"	12' - 11"
	40.7	9' - 6"	10' - 1"	11' - 5"
	44.2	9' - 1"	9' - 8"	10' - 6"
	47.2	8' - 10"	9' - 4"	9' - 10"
	50.9	8' - 6"	9' - 0"	9' - 1"
	52.4	8' - 4"	8' - 10"	8' - 10"
	56	8' - 1"	8' - 3"	8' - 3"
	60	7' - 9"	7' - 9"	7' - 9"
	64	7' - 3"	7' - 3"	7' - 3"
	68	6' - 10"	6' - 10"	6' - 10"
	72	6' - 5"	6' - 5"	6' - 5"
	76	6' - 1"	6' - 1"	6' - 1"
	80	5' - 9"	5' - 9"	5' - 9"

ANCHOR NOTES:

- SPANS AND LOADS SHOWN HERE ARE FOR DETERMINING ANCHOR SPACING ONLY. ALLOWABLE STORM PANEL SPANS FOR SPECIFIC LOADS MUST BE LIMITED TO THOSE SHOWN IN TABLE 1.
- ENTER ANCHOR SCHEDULE BASED ON THE EXISTING STRUCTURE MATERIAL, ANCHOR TYPE AND EDGE DISTANCE. SELECT DESIGN LOAD GREATER THAN OR EQUAL TO NEGATIVE DESIGN LOAD ON SHUTTER AND SELECT SPAN GREATER THAN OR EQUAL TO SHUTTER SPAN.
- EXISTING STRUCTURE MAY BE CONCRETE, HOLLOW CONCRETE BLOCK OR WOOD FRAMING. REFERENCE ANCHOR SCHEDULE FOR PROPER ANCHOR TYPE BASED ON TYPE OF EXISTING STRUCTURE AND APPROPRIATE CONNECTION TYPE. SEE MOUNTING SECTION DETAILS FOR IDENTIFICATION OF CONNECTION TYPE.
- ANCHORS SHALL BE INSTALLED IN ACCORDANCE WITH MANUFACTURERS' RECOMMENDATIONS.
- MINIMUM EMBEDMENT AND EDGE DISTANCE EXCLUDES WALL FINISH OR STUCCO.
- WHERE EXISTING STRUCTURE IS WOOD FRAMING, WOOD FRAMING CONDITIONS VARY. FIELD VERIFY THAT FASTENERS ARE INTO ADEQUATE WOOD FRAMING MEMBERS, NOT PLYWOOD. FASTENING TO PLYWOOD IS ACCEPTABLE ONLY FOR SIDE CLOSURE PIECES.
- WHERE LAG SCREWS FASTEN TO NARROW FACE OF STUD FRAMING, FASTENER SHALL BE LOCATED IN CENTER OF NOMINAL 2" x 4" (MIN.) WOOD STUD, 3/4" EDGE DISTANCE IS ACCEPTABLE FOR WOOD FRAMING. WOOD STUD SHALL BE "SOUTHERN PINE" GRADE 55 OR GREATER DENSITY. LAG SCREWS SHALL HAVE PHILLIPS PAN HEAD OR HEX HEAD.
- MACHINE SCREWS SHALL HAVE MINIMUM OF 1/2" ENGAGEMENT OF THREADS IN BASE ANCHOR AND MAY HAVE EITHER A PAN HEAD, TRUSS HEAD, OR WAFER HEAD (SIDEWALK BOLT), U.O.N.
- DESIGNATES ANCHOR CONDITIONS WHICH ARE NOT ACCEPTABLE USES.
- DESIGNATES ANCHORS WHICH ARE REMOVABLE BY REMOVING MACHINE SCREW, NUT OR WASHER WINGNUT.
- FOR LOADS GREATER THAN THOSE SPECIFIED (ANCHOR SCHEDULE), SITE SPECIFIC FASTENER ANALYSIS SHALL BE PREPARED BY KNEZEVICH ASSOCIATES.
- SEE THE APPROPRIATE SBCCI PGT & EST OR NES EVALUATION REPORT ON THE SPECIFIC FASTENER FOR SPECIAL INSPECTION REQUIREMENTS WHEN REQUIRED AS WELL AS FOR INSTALLATION, LIMITATIONS & IDENTIFICATION PURPOSES.
- FASTENER MAXIMUM SPACING ARE BASED ON FACTOR OF SAFETY OF 4:1 ON TENSION AND SHEAR VALUES WITH THE EXCEPTION OF THE 1/4" WOOD LAG SCREW AND THE 7/16" WOOD BUSHING WHICH ARE BASED ON NDS REQUIREMENTS AND SBCCI TESTING REQUIREMENTS RESPECTIVELY.
- ALL POINTS SOLID SET AND POWERS CALK-IN ANCHORS MAY ONLY BE USED IN CONCRETE SLABS, HOLLOW CONCRETE BLOCK WALLS OR CONCRETE SLABS ON GRADE.
- FOR ELCO CRETEFLEX SS4, CONCRETE STRENGTH, $F_c = 3.5$ KSI. FOR ITW TAPCON, CONCRETE STRENGTH, $F_c = 3.2$ KSI. FOR ALL OTHERS CONCRETE STRENGTH, $F_c = 3$ KSI.

TABLE 2	MOUNTING CONDITIONS	MINIMUM PANEL LENGTH SCHEDULE					
		MINIMUM PANEL LENGTH - (IN)					
	TOP	DIRECT MOUNT OR RECESSED C-TRACK	2" x 2" STUD ANGLE	C-TRACK (6 OR 6A)	"H" OR "U" HEADER	F-TRACK	C-TRACK (6 OR 6A) W/ SIDE CLOSURE PIECES
	BOTTOM	DIRECT MOUNT OR RECESSED C-TRACK (6a)	2" x 2" STUD ANGLE	F-ANGLE TRACK	C-TRACK (6 OR 6A)	F-TRACK	C-TRACK (6 OR 6A) W/ SIDE CLOSURE PIECES
		52	34	110	30	57	-
		36	30	35	30	31	-
		57	31	90	31	62	-
		64	55	110	35	90	-
		57	49	90	31	76	-
		-	-	-	-	-	52

TABLES 1 & 3 NOTE:

ENTER TABLE WITH NEGATIVE DESIGN LOAD TO DETERMINE MAX. PANEL SPAN (MAX.). POSITIVE LOADS LESS THAN OR EQUAL TO THE NEGATIVE LOAD ARE ACCEPTABLE. FOR DESIGN LOADS BETWEEN TABULATED VALUES, USE NEXT HIGHER LOAD OR LINEAR INTERPOLATION MAY BE USED TO DETERMINE ALLOWABLE SPANS.

TABLE 2 NOTE:

THIS SHUTTER SYSTEM IS DESIGNED SUCH THAT THERE IS NO SEPARATION FROM GLASS REQUIRED PROVIDED MINIMUM PANEL LENGTHS AS NOTED. PANEL LENGTHS LESS THAN THOSE NOTED IN TABLE ARE NOT ACCEPTABLE, UNLESS SITE SPECIFIC POROSITY CALCULATIONS ARE PERFORMED BY A PROFESSIONAL ENGINEER.



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NO.	DATE	BY	DESCRIPTION

V. J. Knezevich
 V.P. & P.E.
 Professional Engineer
 State of Florida
 License No. 12003

08/14/2008
 09/10/2008

08-353

6.8 ACCORDION SHUTTER

TABLE 1

HVHZ MANDATORY COMPLIANCE

ACCORDION SHUTTER SPAN SCHEDULE

ASCE 7 DESIGN WIND LOAD	HVHZ POSITIVE WIND LOAD WITH UNIMATE	HVHZ POSITIVE WIND LOAD WITH (29) & (30) or (31) & (32)	HVHZ NEGATIVE WIND LOAD ALL MOUNTING CONDITIONS
W (P.S.F.)	L max. (FT - IN)	L max. (FT - IN)	L max. (FT - IN)
23.9	13-0	13-0	13-0
29.2	12-5	13-0	13-0
30.0	12-4	12-11	13-0
35.0	11-10	12-6	13-0
40.0	11-5	12-1	13-0
45.0	11-1	11-8	13-0
50.0	10-10	11-5	13-0
54.3	10-7	11-2	13-0
55.0	10-7	11-1	12-11
60.0	10-4	10-11	12-4
65.0	10-2	10-8	11-10
70.0	9-11	10-6	11-5
75.0	9-9	10-3	11-0
80.0	9-7	10-1	10-8
85.0	9-6	10-0	10-4
90.0	9-4	9-10	10-1
95.0	9-3	9-8	9-10
100.0	9-1	9-7	9-7
105.0	9-0	9-4	9-4
110.0	8-11	9-1	9-1
115.0	8-9	8-11	8-11
120.0	8-8	8-9	8-9
125.0	-	-	8-6
130.0	-	-	8-4
135.0	-	-	8-3
140.0	-	-	7-11
145.0	-	-	7-8
150.0	-	-	7-5
155.0	-	-	7-2
160.0	-	-	6-11
165.0	-	-	6-9
170.0	-	-	6-6
175.0	-	-	6-4
180.0	-	-	6-2
185.0	-	-	6-0
190.0	-	-	5-10
195.0	-	-	5-8
200.0	-	-	5-6

TABLE 2

HVHZ MANDATORY COMPLIANCE

MINIMUM SHUTTER SEPARATION FROM GLASS

POSITIVE DESIGN LOAD	ACTUAL SHUTTER SPAN	MIN. SEPARATION FROM GLASS FOR INSTALLATIONS ≤ 30'-0" ABOVE GRADE	MIN. SEPARATION FROM GLASS FOR INSTALLATIONS > 30'-0" ABOVE GRADE
(W) (P.S.F.)	(L) (FT - IN)	(IN.)	(IN.)
29.3	13-0	3-3/4	3-3/8
	9-0	3	1
30.0	8-3	2-1/4	1-3/8
	10-0	2-1/4	1-3/4
	12-11	3-3/4	3-1/2
50.0	5-0	3	1-1/8
	8-3	2-1/4	1-5/8
	9-0	2-1/4	2
	11-5	3-3/4	3-1/2
70.0	5-0	3	1-1/8
	7-0	3	1-1/2
	8-3	2-1/4	1-3/4
	10-6	3-3/4	3-1/2
90.0	5-0	3	1-1/8
	7-0	3	1-5/8
	8-3	2-1/4	2-1/4
	9-10	3-1/2	3-1/2
110.0	5-0	3	1-1/4
	6-0	3	1-3/8
	8-3	2-1/2	2-1/2
	9-1	3-1/4	3-1/4
120.0	5-0	3	1-1/4
	7-0	3	1-3/4
	8-3	2-5/8	2-5/8
	8-9	3	3

HVHZ-(TABLES 1 & 2 ONLY) TABLE NOTES:

1. HVHZ: DEFINED AS MIAMI-DADE COUNTY AND BROWARD COUNTY FLORIDA.
2. WIND LOADS: DETERMINE POSITIVE AND NEGATIVE WIND LOAD FROM ASCE 7.
3. SPAN: IN TABLE 1, ENTER POSITIVE AND NEGATIVE WIND LOADS AND READ ACROSS TO THE APPROPRIATE COLUMN TO DETERMINE MAX. SHUTTER SPAN (BLADE LENGTH).
4. REVERSING: THE 6.8 SYSTEM MAY BE MOUNTED WITH THE INSIDE AND OUTSIDE OF THE SHUTTER BEING REVERSED. FOR EXAMPLE: IT IS PERMISSIBLE TO MOUNT ON THE INSIDE OF A WOOD OR CONCRETE BEAM WITH THE BACK OF THE SLAT FACING OUTWARD. FOR THIS CONDITION YOU MUST ENSURE THAT THE SPANS IN THE APPROPRIATE POSITIVE COLUMN OF TABLE 1 ARE APPLIED IN THE DIRECTION TOWARDS THE HOST STRUCTURE AND THE SPANS IN THE NEGATIVE COLUMN OF TABLE 1 ARE APPLIED IN THE DIRECTION AWAY FROM THE HOST STRUCTURE.
5. SEPARATION TO GLASS: DETERMINE SEPARATION FROM GLASS VALUE IN TABLE 2 WITH THE APPROPRIATE POSITIVE LOAD AND SHUTTER SPAN.
6. FOR DESIGN WIND LOADS BETWEEN TABULATED VALUES, USE LINEAR INTERPOLATION TO DETERMINE SPANS AND SEPARATION FROM GLASS, EXCEPT FOR LESS THAN 30 FT. WHERE INTERPOLATION IS NOT ALLOWED AND THE NEXT HIGHER LOAD MUST BE USED.



TABLE 3

NON-HVHZ & ASTM Wind Zone 4

ACCORDION SHUTTER SPAN SCHEDULE

ASCE 7 DESIGN WIND LOAD	POSITIVE & NEGATIVE WIND LOAD ALL MOUNTING CONDITIONS
W (P.S.F.)	L max. (FT - IN)
0 to 54.3	13-0
55.0	12-11
60.0	12-4
65.0	11-10
70.0	11-5
75.0	11-0
80.0	10-8
85.0	10-4
90.0	10-1
95.0	9-10
100.0	9-7
105.0	9-4
110.0	9-1
115.0	8-11
120.0	8-9
125.0	8-6
130.0	8-4
135.0	8-3
140.0	7-11
145.0	7-8
150.0	7-5
155.0	7-2
160.0	6-11
165.0	6-9
170.0	6-6
175.0	6-4
180.0	6-2
185.0	6-0
190.0	5-10
195.0	5-8
200.0	5-6

NON-HVHZ & ASTM WIND ZONE 4 (TABLES 3 & 4 ONLY) TABLE NOTES:

1. NON-HVHZ: DEFINED AS ALL LOCATIONS OTHER THAN MIAMI-DADE COUNTY AND BROWARD COUNTY FLORIDA.
2. WIND LOADS: DETERMINE POSITIVE AND NEGATIVE WIND LOADS FROM ASCE 7.
3. SPAN: IN TABLE 3, ENTER NEGATIVE WIND LOAD ONLY, DETERMINED FROM ASCE 7, THEN MOVE ACROSS TO SELECT THE ALLOWABLE SHUTTER SPAN (BLADE LENGTH).

TABLE 4

NON-HVHZ ASTM Wind Zone 4 - ONLY

MINIMUM SHUTTER SEPARATION FROM GLASS

POSITIVE DESIGN LOAD	ACTUAL SHUTTER SPAN	MIN. SEPARATION FROM GLASS FOR INSTALLATIONS ≤ 30'-0" ABOVE GRADE	MIN. SEPARATION FROM GLASS FOR INSTALLATIONS > 30'-0" ABOVE GRADE
(W) (P.S.F.)	(L) (FT - IN)	(IN.)	(IN.)
30.0	5-0	3	1
	8-3	2-1/4	1-3/8
	10-0	2-1/4	1-3/4
	13-0	3-3/4	3-1/2
40.0	5-0	3	1-1/8
	8-3	2-1/4	1-1/2
	9-0	2-1/4	1-3/4
	10-0	2-1/4	2-1/8
	11-0	3-3/4	2-5/8
	13-0	4-1/4	4-1/4
50.0	5-0	3	1-1/8
	8-3	2-1/4	1-5/8
	9-0	2-1/4	2
	10-0	2-3/8	2-3/8
	11-0	3-3/4	3-1/8
	13-0	5-1/8	5-1/8
60.0	5-0	3	1-1/8
	8-3	2-1/4	1-3/4
	9-0	2-1/4	2-1/8
	10-0	2-3/4	2-3/4
	12-4	5	5
70.0	5-0	3	1-1/8
	7-0	2-1/4	1-1/2
	8-3	2-1/4	1-3/4
	11-5	4-1/2	4-1/2
90.0	5-0	3	1-1/8
	7-0	2-1/4	1-5/8
	8-3	2-1/4	2-1/4
	10-1	3-3/4	3-5/8
110.0	5-0	3	1-1/4
	7-0	2-1/4	1-3/4
	8-3	2-1/2	2-1/2
	9-1	3-1/4	3-1/4
120.0	5-0	3	1-1/4
	7-0	2-1/4	1-3/4
	8-3	2-5/8	2-5/8
	8-9	3	3

4. REVERSING: THE 6.8 SYSTEM MAY BE MOUNTED WITH THE INSIDE AND OUTSIDE OF THE SHUTTER BEING REVERSED. FOR EXAMPLE: IT IS PERMISSIBLE TO MOUNT ON THE INSIDE OF A WOOD OR CONCRETE BEAM WITH THE BACK OF THE SLAT FACING OUTWARD. FOR THIS CONDITION, IN ASTM WIND ZONE 4, USE THE APPROPRIATE POSITIVE LOAD/NEGATIVE LOAD AND SHUTTER SPANS IN THE APPROPRIATE POSITIVE COLUMN OF TABLE 4.
5. SEPARATION TO GLASS: (TABLE 2 or 4) IS NOT REQUIRED IN WIND ZONE 4 THRU 3 (140 MPH WIND SPEED OR LESS). SEPARATION FROM GLASS TABLE 4 IS REQUIRED FOR WIND ZONE 4 (141 MPH OR GREATER WIND SPEEDS). ENTER TABLE 4 WITH THE DESIGN POSITIVE LOAD AND READ ACROSS TO THE SEPARATION FROM GLASS VALUE IN COLUMNS 1 OR 2 (WHICHEVER IS APPROPRIATE).
6. FOR DESIGN WIND LOADS BETWEEN TABULATED VALUES, USE THE NEXT HIGHER LOAD OR USE LINEAR INTERPOLATION TO DETERMINE ALLOWABLE SHUTTER SPAN.

K2

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revisions: [table with columns for description, date, and initials]

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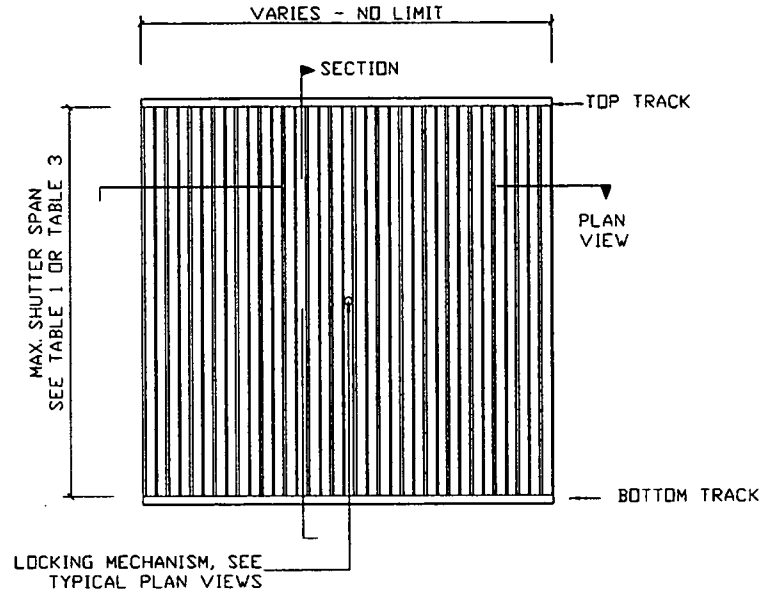
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6.8 ACCORDION SHUTTER

GENERAL NOTES:

1. THESE EVALUATION DOCUMENTS REPRESENT A SHUTTER SYSTEM ANALYZED WITH THE PROVISION SET FOR THE ISSUANCE OF A FLORIDA BUILDING CODE PRODUCT APPROVAL, FOR THE HIGH VELOCITY HURRICANE ZONE (HVHZ) & NON-HIGH VELOCITY HURRICANE ZONE (NON-HVHZ).
2. THIS SYSTEM HAS BEEN TESTED AND EVALUATED AND IS IN COMPLIANCE WITH THE INTERNATIONAL BUILDING CODE (IBC) AND THE INTERNATIONAL RESIDENTIAL CODE (IRC).
3. NO INCREASE IN ALLOWABLE STRESS HAS BEEN USED IN THE DESIGN OF THESE PRODUCTS. WIND LOAD DURATION FACTOR $C_d = 1.6$ WAS USED FOR WOOD LAG SCREW DESIGN.
4. THIS SYSTEM HAS BEEN TESTED AND EVALUATED AND IS IN COMPLIANCE WITH THE FLORIDA BUILDING CODE (FBC) REQUIREMENTS, INCLUDING THE HIGH VELOCITY HURRICANE ZONE (HVHZ). THIS SYSTEM MEETS MISSILE LEVEL "D" AND INCLUDES WIND ZONE 4 AS DEFINED IN ASTM E1996-05.
5. TESTING WAS CONDUCTED IN ACCORDANCE WITH TAS 201/202/203 AND ASTM E1886-05/E1996-05/E330-02.
6. DETERMINE THE POSITIVE AND NEGATIVE DESIGN LOADS TO USE WHEN REFERENCING THESE DOCUMENTS IN ACCORDANCE WITH THE GOVERNING CODE AND GOVERNING WIND VELOCITY. FOR WIND LOAD CALCULATIONS IN ACCORDANCE WITH ASCE 7, A DIRECTIONALITY FACTOR OF $K_d = 0.85$ SHALL BE USED.
7. THESE APPROVAL DOCUMENTS ARE GENERIC AND DO NOT INCLUDE INFORMATION FOR SITE-SPECIFIC APPLICATION OF THIS SHUTTER SYSTEM.
8. USE OF THESE APPROVAL DOCUMENTS SHALL COMPLY WITH CHAPTER 61G15-23 OF THE FLORIDA ADMINISTRATIVE CODE.
9. THESE APPROVAL DOCUMENTS ARE SUITABLE TO BE APPLIED BY THE CONTRACTOR PROVIDED THE CONTRACTOR DOES NOT DEVIATE FROM THE CONDITIONS DETAILED HEREIN AND THE CONTRACTOR VERIFIES THAT THE EXISTING STRUCTURE DOES NOT DEVIATE IN EITHER FORM OR MATERIAL FROM THE STRUCTURAL SUBSTRATES DETAILED HEREIN.
10. ANY MODIFICATIONS OR ADDITIONS TO THESE APPROVAL DOCUMENTS WILL VOID THE APPROVAL DOCUMENTS.
11. WHEN THE SITE CONDITIONS DEVIATE FROM THESE APPROVAL DOCUMENTS, THE BUILDING OFFICIAL MAY REQUIRE THAT SITE SPECIFIC DOCUMENTS BE PREPARED, SIGNED, DATED AND SEALED BY A LICENSED ENGINEER OR REGISTERED ARCHITECT, WHICH DETAIL AND JUSTIFY THE DEVIATION, AS A CONDITION TO THE BUILDING OFFICIAL GRANTING HIS/HER APPROVAL.
12. EACH SHUTTER ASSEMBLY SHALL BE PERMANENTLY LABELED WITH THE FOLLOWING MINIMUM INFORMATION:

TOWN & COUNTRY IND.
FORT LAUDERDALE, FL
MISSILE "D" - ASTM E1886, E1996 & E330
TAS 201,202 & 203
FLORIDA BUILDING CODE APPROVED
13. ALL EXTRUSIONS SHOWN SHALL BE 6063-T6 ALUMINUM ALLOY, U.O.N., WITH A MINIMUM F_y OF 20 K.S.I.
14. ALL BOLTS AND WASHERS (EXCLUDING INSTALLATION) SHALL BE STAINLESS STEEL WITH A MINIMUM TENSILE STRENGTH OF 60 K.S.I., U.O.N. POP RIVETS SHALL BE 1/4" Ø OR 3/16" Ø 5052 ALUM. ALLOY.
15. ALL SHUTTERS SHALL HAVE A LOCKING MECHANISM CONSISTING OF THUMBSCREW, PUSH LOCK OR BOX LOCK AT CENTER OR SIDE CLOSURE.
16. TOP AND BOTTOM DETAILS MAY BE INTERCHANGED AS FIELD CONDITIONS REQUIRE. SEE PAGE 5 FOR LOCK LOCATIONS AND DETAILS.
17. FLOOR TRACKS MAY BE REMOVABLE AT NON-STACKING LOCATIONS. USE REMOVABLE ANCHORS.
18. THE ACCORDION SHUTTERS MAY BE MOUNTED WITH THE INSIDE AND OUTSIDE OF SHUTTER BEING REVERSED. FOR EXAMPLE: IT IS PERMISSIBLE TO MOUNT EXTRUSIONS ON INSIDE OF WOOD OR CONCRETE BEAM WITH BACK OF SHUTTER FACING OUTSIDE (SEE PAGE 5 - TYPICAL PLAN VIEW).
19. DETAIL 5 to 12, 16 & 27 on page 3 to 4, MAY BE BENT TO FORM A CURVE WITH A MIN. RADIUS OF 10".
20. ALL DIMENSIONS SHOWN INCLUDE POWDER COATING FINISH.



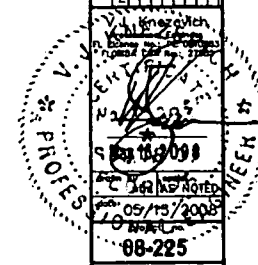
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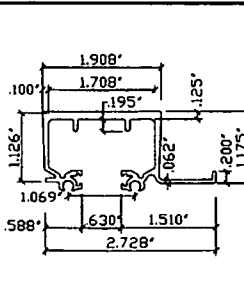
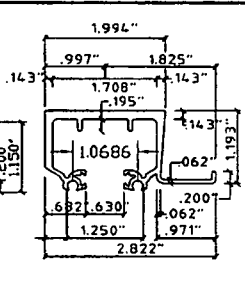
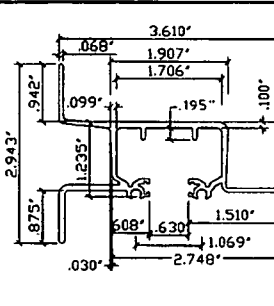
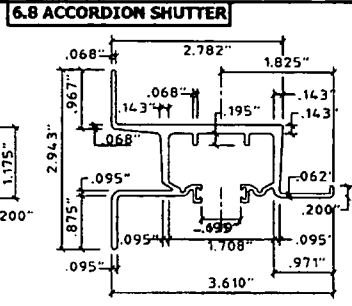
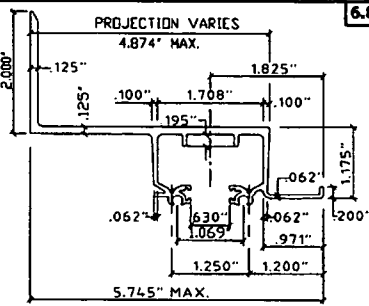
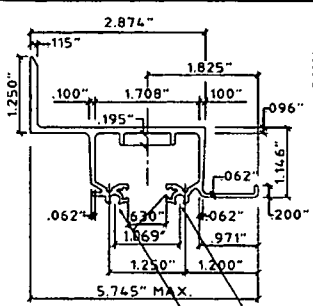
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2 BUILD OUT WALL
SCALE: HALF SIZE

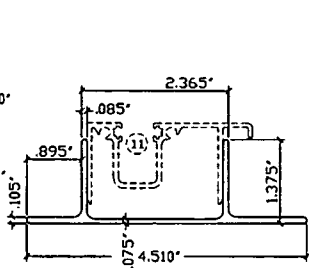
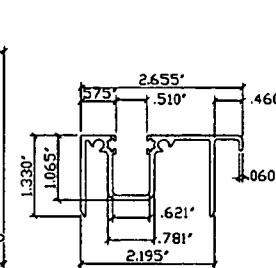
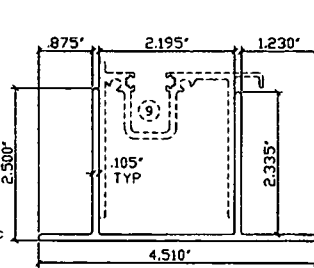
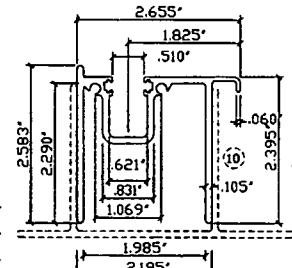
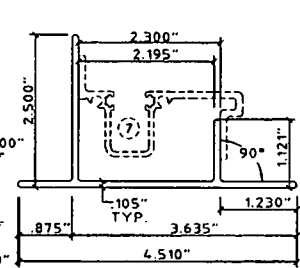
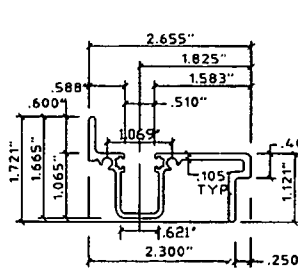
3 HEAVY 2-LEG WALL
SCALE: HALF SIZE

4 LITE 2-LEG WALL
SCALE: HALF SIZE

5 HEAVY HEADER/SILL
SCALE: HALF SIZE

6 LITE HEADER/SILL
SCALE: HALF SIZE

WHERE SHOWN SCREW BOSSES & FELT GROVES ARE OPTIONAL ON ALL EXTRUSIONS



7 SILL
SCALE: HALF SIZE

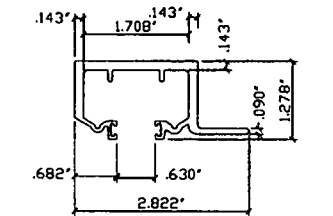
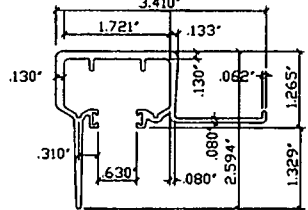
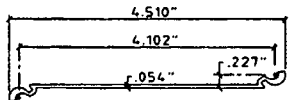
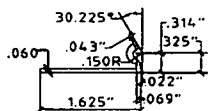
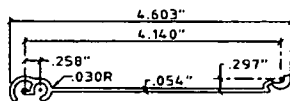
8 SILL ADAPTER
SCALE: HALF SIZE

9 EXTENDED SILL
SCALE: HALF SIZE

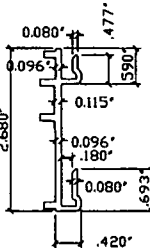
10 EXTENDED SILL ADAPTOR
SCALE: HALF SIZE

11 MID SILL
SCALE: HALF SIZE

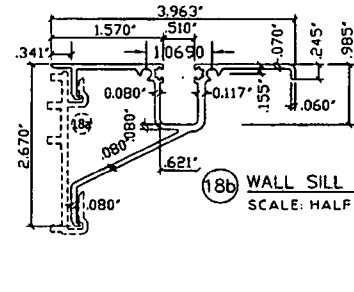
12 MID SILL ADAPTOR
SCALE: HALF SIZE



16 RADIUS CEILING HEADER/SILL
SCALE: HALF SIZE



18c WALL SILL CLIP
SCALE: HALF SIZE



18b WALL SILL
SCALE: HALF SIZE

15 6.8 STACK/CONNECTOR SLAT/BLADE
SCALE: HALF SIZE

14 CEILING HEADER/SILL
SCALE: HALF SIZE

Ka

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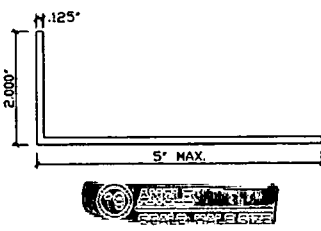
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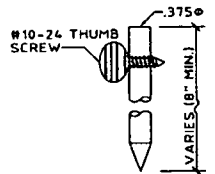
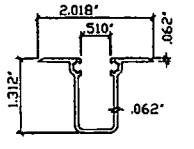
PAGE 3 of 11

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6.8 ACCORDION SHUTTER

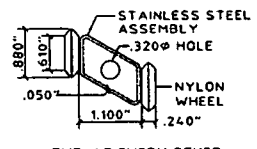


20 RECESS SILL
SCALE: HALF SIZE



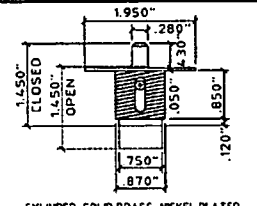
21 SLIDE ROD
SCALE: HALF SIZE

FOR USE WITH 20 AND 24 ONLY



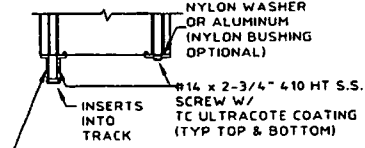
22 NYLON WHEEL ASSEMBLY
SCALE: HALF SIZE

TYP. AT EVERY OTHER INSIDE JOINT AT TOP.



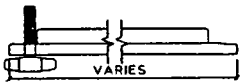
23 BRASS BUSHING
SCALE: HALF SIZE

NOTE: MAY BE KEY OPERATED OUTSIDE OR THUMB TURN OPERATED INSIDE.

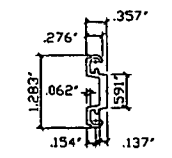


24 NYLON BUSHING W/ WASHER
SCALE: HALF SIZE

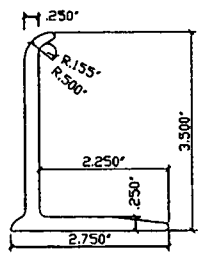
NYLON BUSHING W/ WASHER: 7/16" x 1/2" @ INTERIOR JOINT TOP
7/16" x 1" @ INTERIOR JOINT BOTTOM
EITHER CAN BE USED ON EXTERIOR



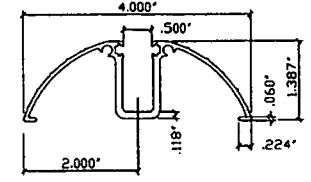
25 OPTIONAL ALUMINUM OR PVC LOCK PIN FOR 29A+29B
SCALE: HALF SIZE



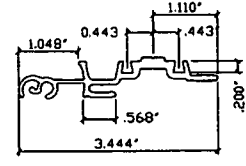
26 BOX CENTER INSERT
SCALE: HALF SIZE



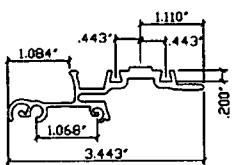
27 RAI NGUARD
SCALE: HALF SIZE



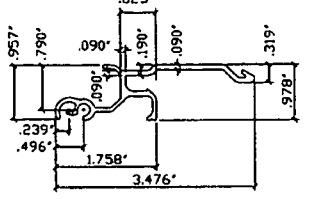
28 DECORATIVE FLOOR TRACK
SCALE: HALF SIZE



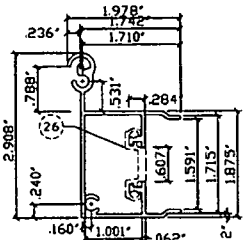
29 OLD 6.8 CENTER MATE
SCALE: HALF SIZE



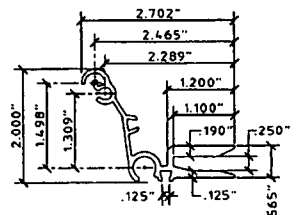
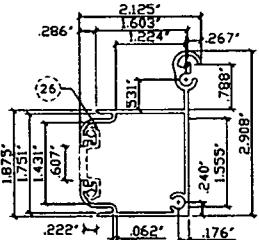
29b 2003 6.8 CENTER MATE
SCALE: HALF SIZE



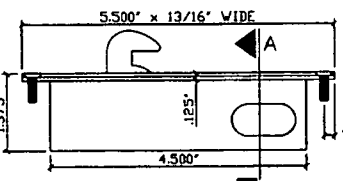
31 MALE BOX CENTER
SCALE: HALF SIZE



32 FEMALE BOX CENTER
SCALE: HALF SIZE

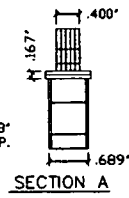


34 INSIDE CENTER MATE
SCALE: HALF SIZE

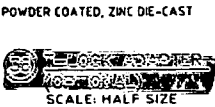


35 BOX LOCK
SCALE: HALF SIZE

DELTA MODEL 2022 INDUSTRIAL SYSTEMS



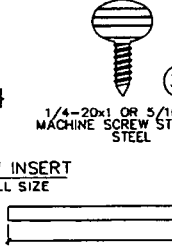
SECTION A



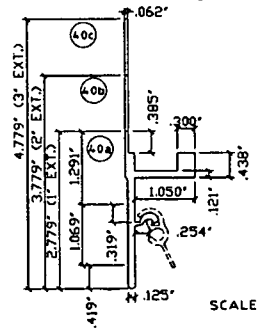
37 T-SCREW INSERT
SCALE: FULL SIZE



30 THUMB SCREW
SCALE: FULL SIZE



39 2X7 ANGLE
SCALE: HALF SIZE



40c 40b 40a END STRIP
2" & 3" EXT
SCALE: HALF SIZE

Ka

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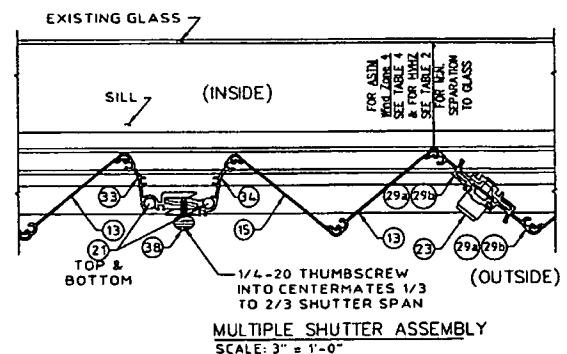
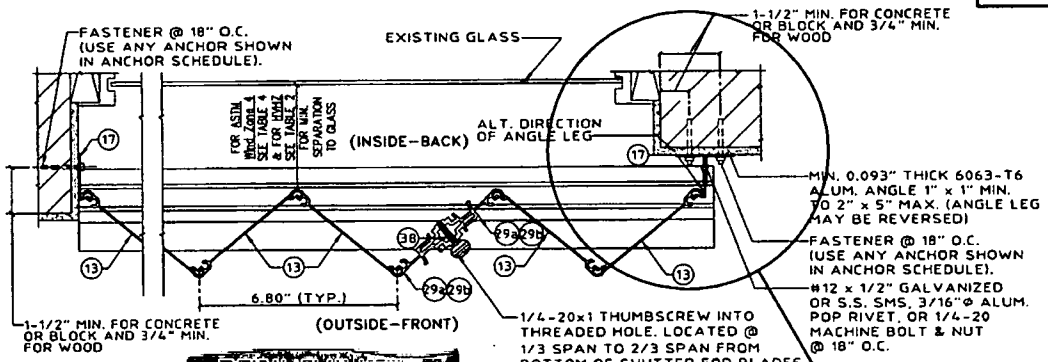
NO	DATE	BY	DESCRIPTION

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08-225

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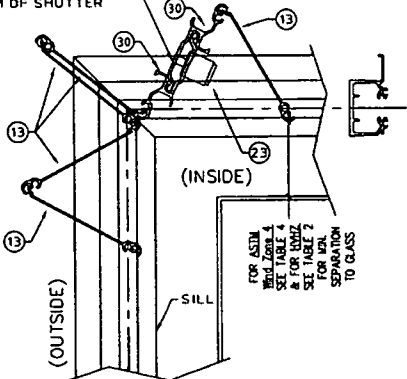
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6.8 ACCORDION SHUTTER

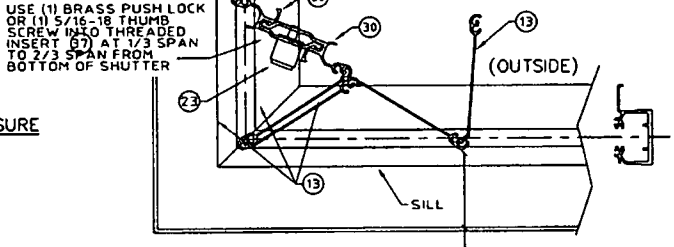


LOCKING DETAILS FOR CENTER MATES SHOWN ON RANDOM DETAILS

USE (1) BRASS PUSH LOCK OR (1) 5/16"-18 THUMB SCREW INTO THREADED INSERT (30) AT 1/3 SPAN TO 2/3 SPAN FROM BOTTOM OF SHUTTER



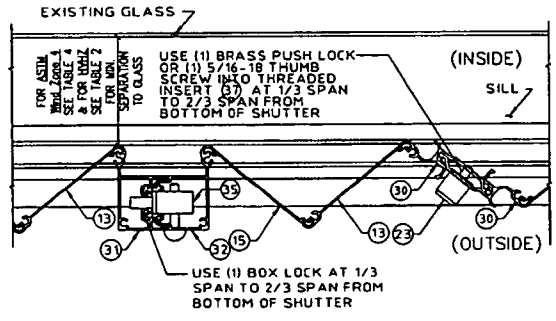
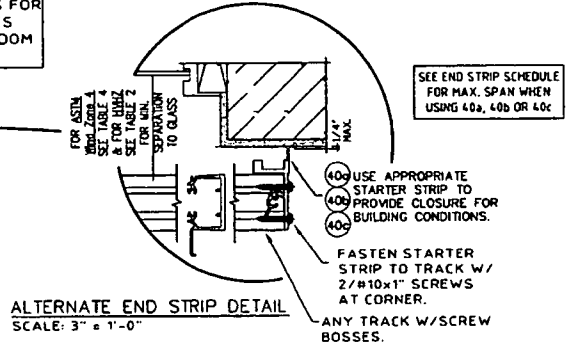
CC1 TYPICAL OUTSIDE CORNER CLOSURE DETAILS WO/CORNER POST NTS



CC2 TYPICAL INSIDE CORNER CLOSURE DETAILS WO/CORNER POST NTS

END STRIP SCHEDULE		
1" B/O (2.7")	PSE	SPAN
60	62	108.1
	72	100.3
	82	94
	112	80.4
	132	76.1
65	62	99.8
	72	92.6
	82	86.7
	112	72.7
	132	68.6
70	62	92.7
	72	86
	82	80.6
	112	
	132	

FOR GREATER SPANS OR LOADS THAN SHOWN IN TABLE ABOVE, END STRIPS REQUIRE A 1" x 1" .090" CLIP ANGLE MID SPAN USING ANY ANCHOR ON THE ANCHOR SCHEDULE & #14x3/4" TEK SCREW OR 1/4"-20 BOLT TO END STRIP.



MULTIPLE SHUTTER ASSEMBLY SCALE: 3" = 1'-0"



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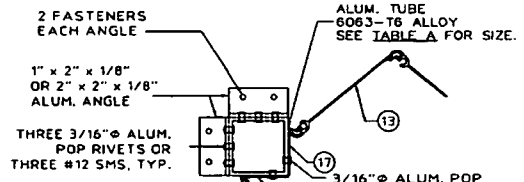
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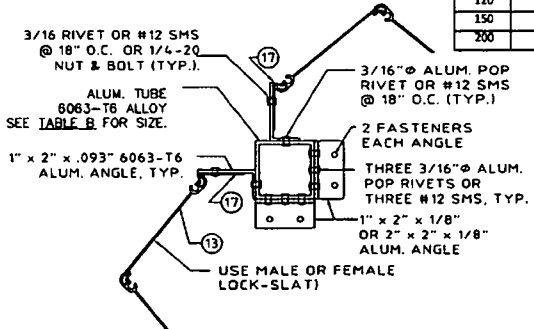
6.8 ACCORDION SHUTTER



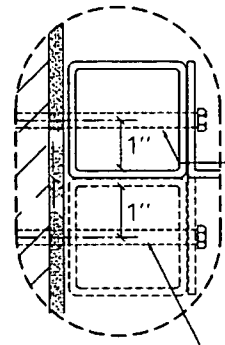
PRESSURE VS ALLOWABLE LENGTH		
PSF	2" x 2" x 1/8" No B/O	3" x 3" x 1/8" No B/O
62	9'-8"	13'-8"
72	9'-2"	13'-0"
82	8'-9"	12'-5"
92	8'-5"	11'-11"
102	8'-2"	11'-7"
120	7'-9"	10'-11"
150	7'-2"	10'-2"
200	6'-6"	9'-3"

CC3 TYPICAL CORNER CLOSURE DETAILS NTS

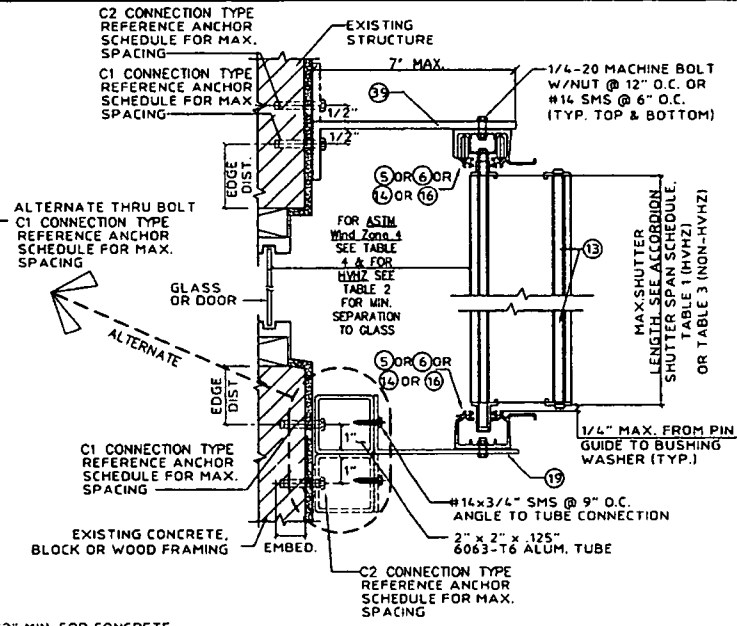
PRESSURE VS ALLOWABLE LENGTH		
PSF	2" x 2" x 1/8" WITH B/O	3" x 3" x 1/8" WITH B/O
62	8'-3"	12'-4"
72	7'-10"	11'-9"
82	7'-6"	11'-3"
92	7'-3"	10'-10"
102	7'-0"	10'-5"
120	6'-7"	9'-11"
150	6'-2"	9'-2"
200	5'-7"	8'-4"



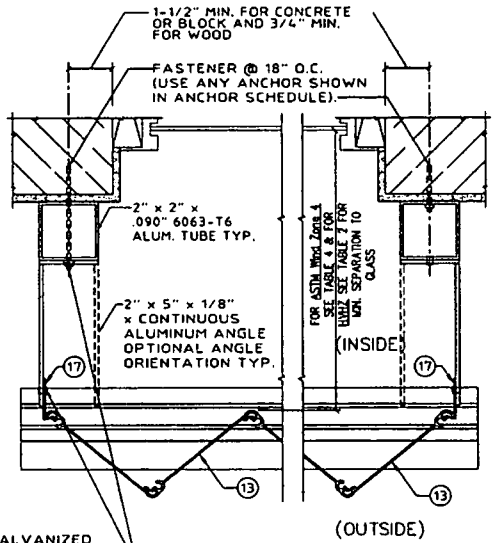
CC4 TYPICAL CORNER CLOSURE DETAILS NTS



ALTERNATE THRU BOLT C2 CONNECTION TYPE REFERENCE ANCHOR SCHEDULE FOR MAX. SPACING



CCb ALTERNATE BUILD OUT MOUNT SECTION SCALE=3" = 1'-0"



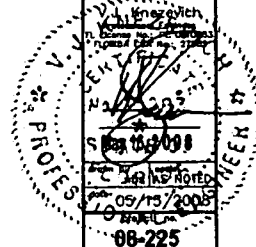
SIDE CLOSURE OPTIONS SCALE: 3" = 1'-0"

#12 x 1/2" GALVANIZED OR S.S. SMS, 3/16" ALUM. POP RIVET, OR 1/4-20 MACHINE BOLT & NUT @ 18" O.C.

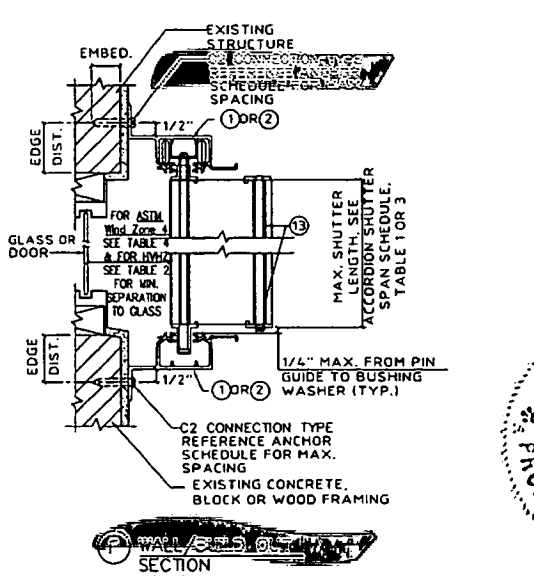
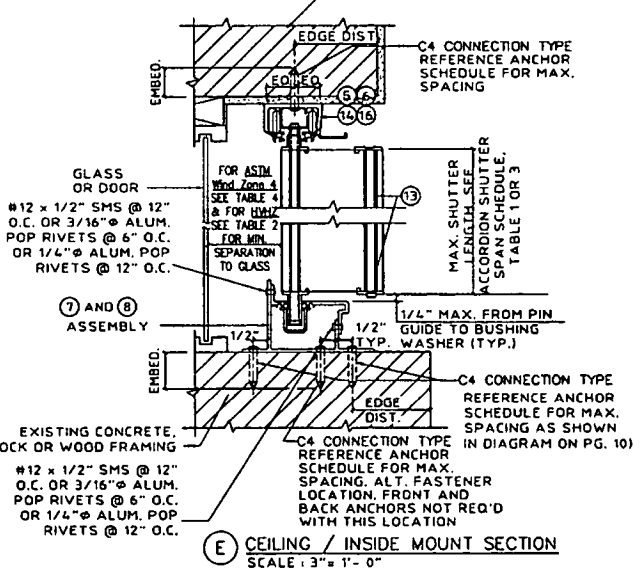
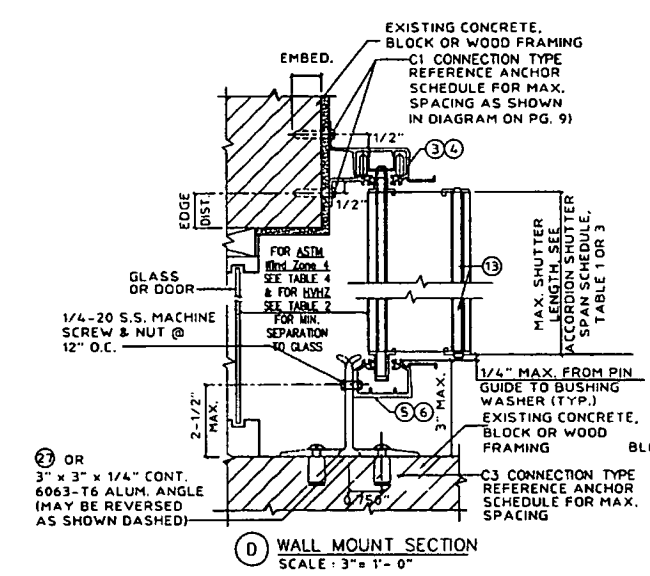
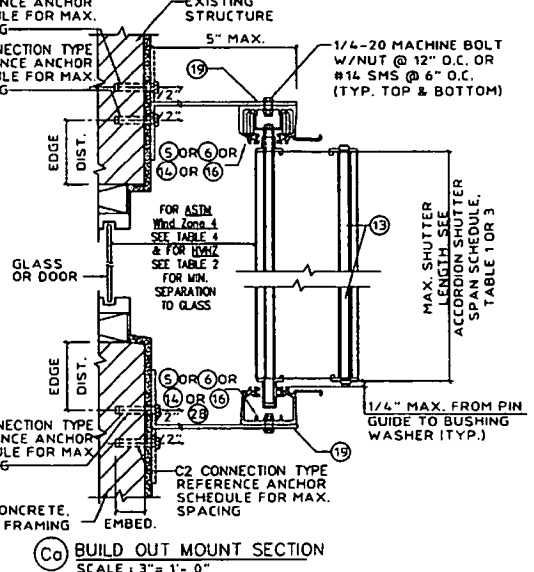
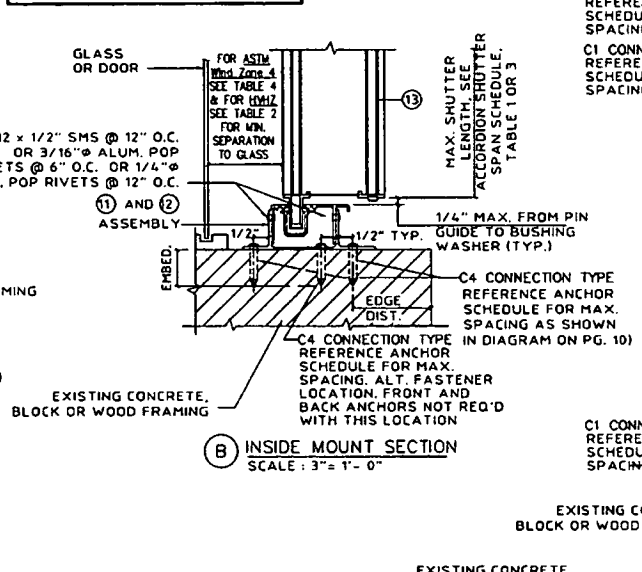
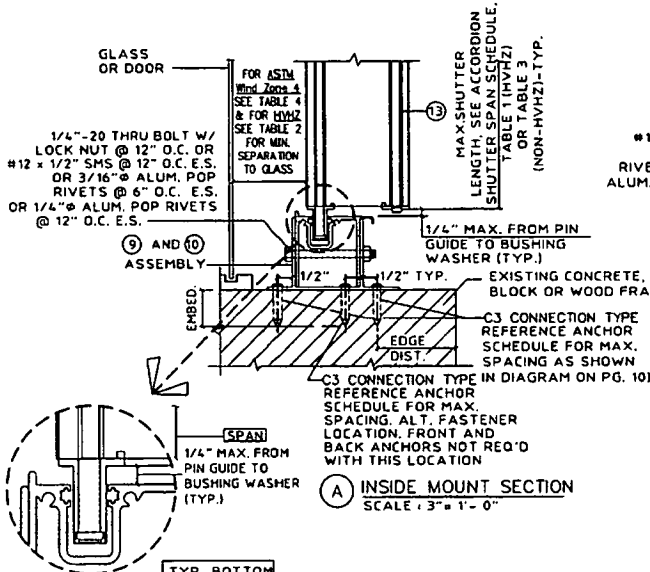


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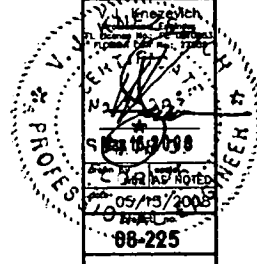
6.8 ACCORDION SHUTTER



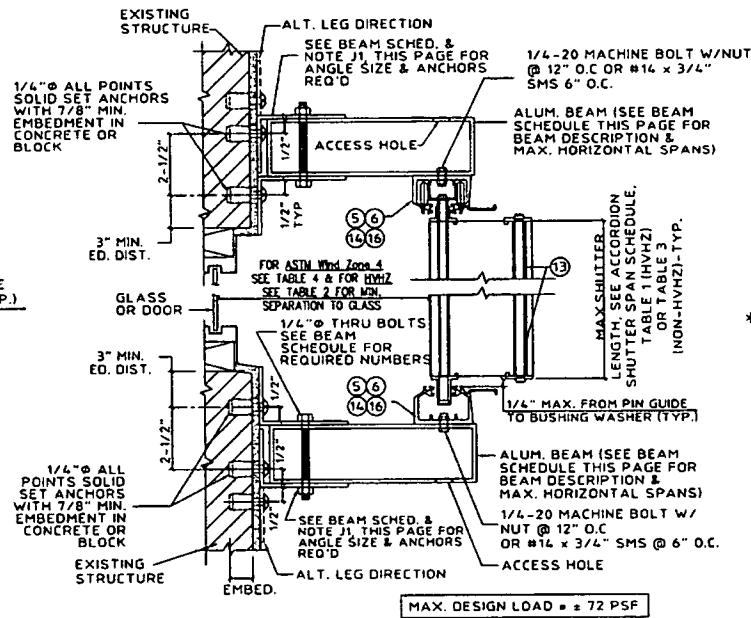
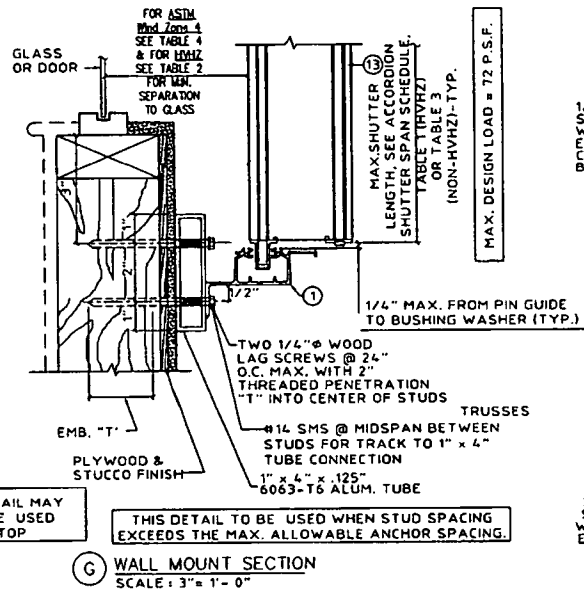
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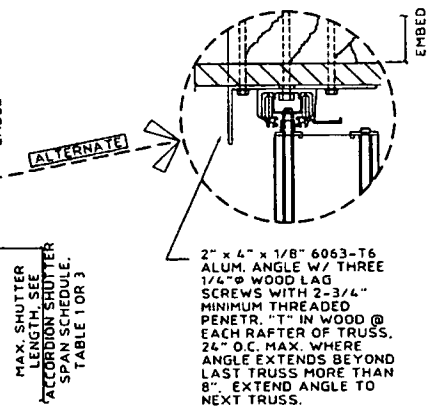
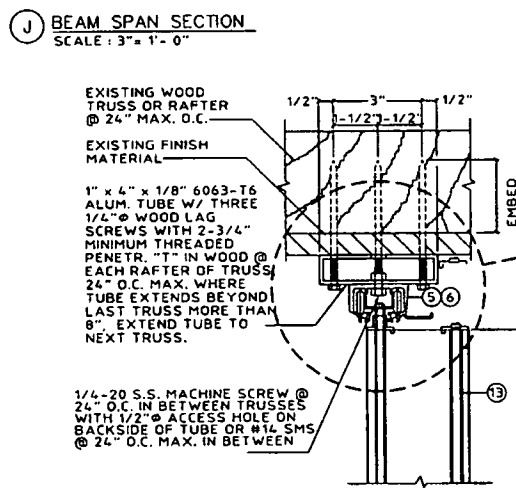
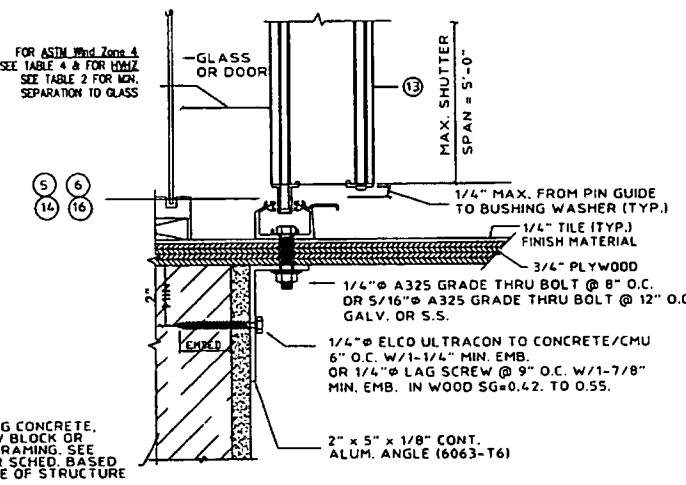


*** BOX BEAM SCHEDULE**

BOX BEAM	SPRINTER SPAN	TOP BEAM	BOT. BEAM	# OF TRUSS BOLTS			MIN. TRUSS ANGLE			MIN. TRUSS		
				TOP	BOT.	END	TOP	BOT.	END	TOP	BOT.	END
2" x 5" 0.125"	5'-0"	9'-0"	9'-6"	2	2	2	2	2	2	6"	6"	6"
	8'-0"	8'-0"	8'-1"	2	2	3	3	3	9"	9"	9"	
	10'-3"	7'-7"	7'-5"	2	2	3	3	3	9"	9"	9"	
2" x 6" 0.125"	5'-0"	9'-5"	11'-1"	2	2	2	2	2	6"	6"	6"	
	8'-0"	8'-6"	9'-6"	2	2	3	3	3	9"	9"	9"	
	10'-3"	7'-10"	8'-6"	2	2	3	3	3	9"	9"	9"	
2" x 8" 0.125"	5'-0"	10'-7"	14'-3"	2	2	2	2	2	6"	6"	6"	
	8'-0"	9'-0"	11'-10"	2	2	3	3	3	9"	9"	9"	
	10'-3"	8'-5"	10'-2"	2	2	3	3	3	9"	9"	9"	
2" x 10" 0.1875"	5'-0"	11'-7"	18'-8"	2	2	2	2	2	6"	6"	6"	
	8'-0"	10'-3"	16'-8"	2	2	3	3	3	9"	9"	9"	
	10'-3"	9'-9"	14'-10"	3	4	4	4	4	12"	15"	15"	

* USE 2X3X1/4 OR 2X5X1/4 ANGLES FOR 2X5 & 2X6 BEAMS
 USE 2X5X1/4 ANGLES FOR 2X8 & 2X10 BEAMS

- BEAM SCHEDULE NOTES:**
- J1. USE BEAM SCHEDULE FOR DETAIL J.
 - J2. TOP & BOTTOM BEAMS MAY BE USED TOGETHER OR IN COMBINATION WITH OTHER CONNECTION DETAILS. WHERE USED TOGETHER, BEAM MUST BE LIMITED TO TOP BEAM SPANS.
 - J3. LAP BEAMS ARE NOT ALLOWED.
 - J4. ALL BEAMS & ANGLES TO BE 6063-T6 ALLOY.





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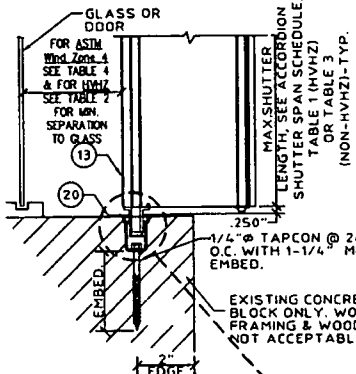


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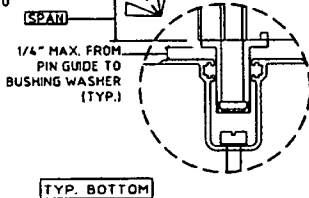
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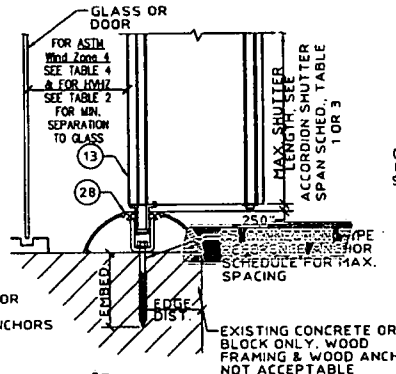
6.8 ACCORDION SHUTTER



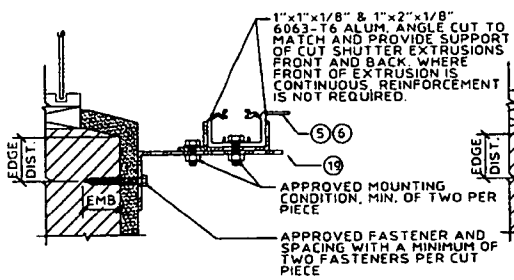
(M) RECESS SILL DETAIL
SCALE: 3" = 1'-0"



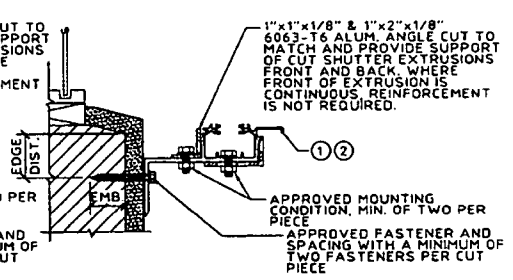
TYP. BOTTOM



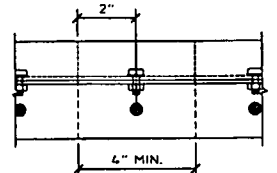
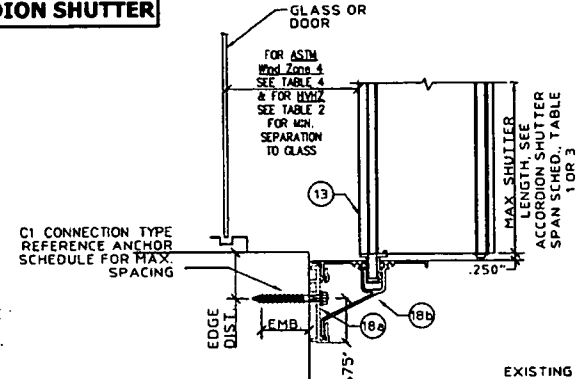
(O) WALL MOUNT SILL DETAIL
SCALE: 3" = 1'-0"



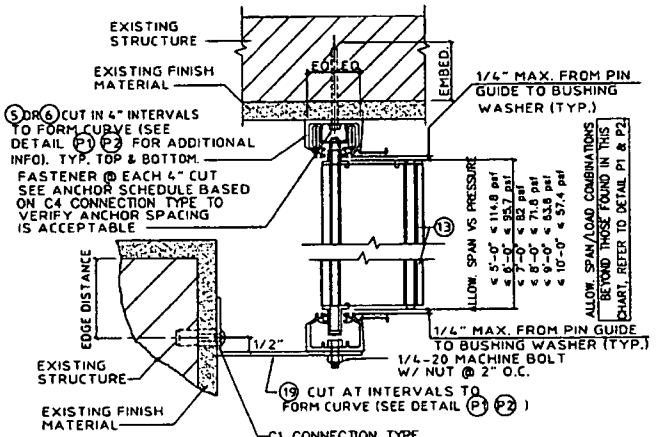
(P1) TYP. SECTION FOR SHUTTERS
SCALE: 3" = 1'-0"



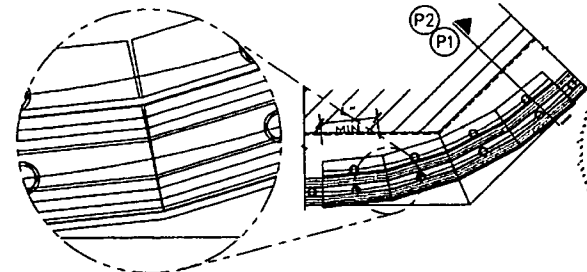
(P2) TYP. ALTERNATE SECTION FOR SHUTTERS
SCALE: 3" = 1'-0"



RADIUS HEADER MOUNTED
PARTIAL ELEVATION
SCALE: 3" = 1'-0"



(P) CURVED TRACK SECTION DETAIL
SCALE: 3" = 1'-0"



Ka

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revisions	description	date	by	checked	approved

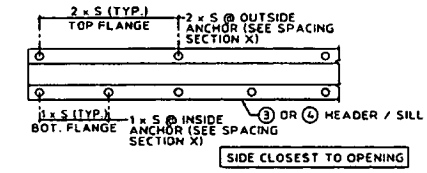
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6.8 ACCORDION SHUTTER

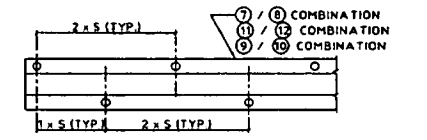
ANCHOR SCHEDULE FOR CONCRETE

MAXIMUM FASTENER SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

ANCHOR TYPE & MINIMUM CONCRETE REQUIREMENTS	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 1" EDGE DISTANCE				MIN. 2-1/2" EDGE DISTANCE																									
		SPANS UP TO 6'-0"		SPANS UP TO 8'-0"		SPANS UP TO 13'-0"		SPANS UP TO 8'-0"		SPANS UP TO 13'-0"																					
		(SEE NOTE 1)		(SEE NOTE 1)		(SEE NOTE 1)		(SEE NOTE 1)		(SEE NOTE 1)																					
		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)																					
		C1	C2	C3	C4	C1	C2	C3	C4	C1	C2	C3	C4																		
1/4" ITW TAPON WITH 1-3/4" MIN. EMBEDMENT	48.0	16	16	6	7	8	16	16	4	5	5	16	16	3	3	3	3	16	16	13	16	16	16	9	12	15	16	6	8	10	
	62.0	16	16	5	5	6	16	16	3	4	4	15	9	3	16	16	10	14	16	16	16	7	9	12	16	10	4	6	8		
	72.0	16	16	4	5	5	16	16	3	3	3	13	6	3	16	16	8	12	15	16	16	6	8	10	14	7	4	5	7		
	110.0	16	16	3	3	12	6	11	4	3	3	11	4	3	16	16	5	7	10	14	6	4	5	6	12	4	3	4	5		
	200.0	11	4	3	3	11	4	11	4	11	4	11	4	12	4	3	4	6	12	4	3	4	5	12	4	3	4	5	5		
1/4" ELO ULTRACON WITH 1-3/4" MIN. EMBEDMENT	48.0	15	15	9	12	14	16	16	6	8	10	16	16	4	5	8	16	16	12	16	16	16	8	12	15	15	16	5	8	11	
	62.0	16	16	7	9	11	16	16	5	6	7	13	8	3	4	5	16	16	9	13	16	16	6	9	12	14	8	4	6	8	
	72.0	15	16	6	8	9	15	16	4	5	6	11	5	3	4	16	16	8	11	15	16	5	8	11	12	5	3	5	7		
	110.0	15	16	4	5	6	11	5	3	4	9	3	3	3	16	16	5	7	10	11	5	3	5	7	10	4	3	4	6		
	200.0	9	3	3	3	9	3	3	3	9	3	3	3	3	10	4	3	4	6	10	4	3	4	6	10	4	3	4	6		
1/4" ELO CRETE FLEX S34 WITH 2" MIN. EMBEDMENT	48.0	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	62.0	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	72.0	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	110.0	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	200.0	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
1/4" ALL POINTS SOLID-SET ANCHOR WITH 7/8" EMBEDMENT & 1/4"-20 STAINLESS STEEL MACHINE SCREW	48.0	15	16	7	9	11	16	16	4	6	8	12	12	3	4	5	16	16	14	16	16	15	16	10	14	16	15	16	6	9	13
	62.0	15	16	5	7	9	14	14	3	5	6	9	5	3	4	16	16	11	16	16	15	16	8	11	15	16	9	5	7	10	
	72.0	15	16	4	6	7	12	12	3	4	5	8	4	3	16	16	9	14	16	16	16	6	9	13	13	6	4	6	9		
	110.0	11	11	3	4	5	8	3	7	3	7	3	3	3	16	16	6	9	12	13	6	4	6	8	11	4	3	5	7		
	200.0	7	3	3	7	3	7	3	7	3	7	3	3	3	11	4	3	5	7	11	4	3	5	7	11	4	3	5	7		
3/8" POWERS DROP-IN & 3/8-16 STAINLESS STEEL BOLT WITH 1-5/8" MIN. EMBEDMENT	48.0	15	16	16	16	16	16	16	16	16	16	16	16	8	11	15	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	62.0	15	16	13	16	16	16	16	9	13	15	16	12	6	8	11	16	16	16	16	16	15	16	12	16	16	16	14	8	12	16
	72.0	15	16	11	16	16	16	16	8	11	15	16	8	5	7	10	16	16	16	16	16	16	16	16	16	16	16	9	7	11	15
	110.0	15	16	7	10	14	16	8	5	7	9	15	6	4	6	8	16	16	10	15	16	16	9	7	10	15	16	6	6	9	13
	200.0	15	6	4	6	8	15	6	4	6	8	15	6	4	6	8	16	6	6	9	13	16	6	6	9	13	16	6	6	9	13
5/16" ITW BUILDIX TAPON XL WITH 1-3/4" MIN. EMBEDMENT	48.0	15	16	15	16	16	16	16	10	15	16	16	7	14	14	15	16	16	15	16	16	15	16	10	15	16	16	7	10	14	
	62.0	15	16	11	16	16	16	16	8	12	16	16	9	5	8	11	16	16	12	16	16	15	16	8	12	15	10	5	8	11	
	72.0	16	16	10	15	16	16	16	7	10	14	13	6	4	6	9	16	16	10	15	16	16	7	10	14	14	4	7	9		
	110.0	16	16	6	9	13	13	6	4	6	9	11	4	3	5	8	16	16	6	10	13	14	6	4	6	9	12	4	4	5	8
	200.0	11	4	3	5	8	11	4	3	5	8	11	4	3	5	8	12	4	4	5	8	12	4	4	5	8	12	4	4	5	8
5/16" ELO ULTRACON WITH 1-3/4" MIN. EMBEDMENT	48.0	15	16	16	16	16	16	16	12	16	16	16	16	8	12	16	16	16	16	16	16	16	16	16	16	16	16	16	16	16	
	62.0	15	16	13	16	16	16	16	9	14	16	16	10	6	9	13	16	16	15	16	16	16	16	10	15	16	16	11	6	10	14
	72.0	16	16	11	16	16	16	16	8	12	16	15	7	5	8	11	16	16	12	16	16	16	16	16	8	13	16	8	5	8	12
	110.0	16	16	7	11	16	15	7	5	8	11	12	5	4	6	9	16	16	8	12	16	16	7	5	8	12	14	5	7	10	
	200.0	12	5	4	6	9	12	5	4	6	9	12	5	4	6	9	14	5	5	7	10	14	5	5	7	10	14	5	5	7	10



NOTE: "S" INDICATES ANCHOR SCHEDULE SPACING.
SPACING DIAGRAM FOR C1 CONNECTION TYPE:
- C1 CONNECTION TYPE USING PIECE 3 OR 4



NOTE: "S" INDICATES ANCHOR SCHEDULE SPACING.
SPACING DIAGRAM FOR C3 & C4 CONNECTION TYPE:
- C3 CONNECTION TYPE USING PIECE (10) WITH OUTSIDE ANCHORS ONLY
- C4 CONNECTION TYPE USING PIECE (10) OR (12) WITH OUTSIDE ANCHORS ONLY

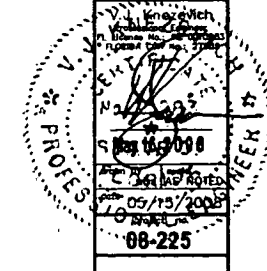
- ANCHOR NOTES:**
- SPANS AND LOADS SHOWN HERE ARE FOR DETERMINING ANCHOR SPACING ONLY. ALLOWABLE STORM SHUTTER SPANS FOR SPECIFIC LOADS MUST BE LIMITED TO THOSE SHOWN IN TABLE 1 & 3 (Pg 1).
 - ENTER ANCHOR SCHEDULE BASED ON THE EXISTING STRUCTURE MATERIAL AND ANCHOR TYPE AND EDGE DISTANCE. SELECT DESIGN LOAD GREATER THAN OR EQUAL TO NEGATIVE DESIGN LOAD ON SHUTTER AND SELECT SPAN GREATER THAN OR EQUAL TO SHUTTER SPAN.
 - SEE MOUNTING SECTION DETAILS FOR IDENTIFICATION OF CONNECTION TYPE.
 - EXISTING STRUCTURE MAY BE CONCRETE, ASTM C-90 HOLLOW CONCRETE BLOCK OR WOOD FRAMING. REFERENCE ANCHOR SCHEDULE FOR PROPER ANCHOR TYPE BASED ON TYPE OF EXISTING STRUCTURE AND APPROPRIATE CONNECTION TYPE. SEE CONNECTION DETAILS FOR IDENTIFICATION OF CONNECTION TYPE.
 - THE CONTRACTOR IS RESPONSIBLE TO ENSURE THE ANCHORS ARE INSTALLED IN ACCORDANCE WITH MANUFACTURERS' RECOMMENDATIONS. EMBEDMENT LENGTHS SHALL BE AS NOTED AND DO NOT INCLUDE STUCCO OR OTHER FINISHES.
 - WHERE EXISTING STRUCTURE IS WOOD FRAMING, WOOD FRAMING CONDITIONS VARY. FIELD VERIFY THAT FASTENERS ARE INTO ADEQUATE WOOD FRAMING MEMBERS, NOT PLYWOOD. FASTENING TO PLYWOOD IS ACCEPTABLE ONLY FOR SIDE CLOSURE PIECES.
 - WHERE LAG SCREWS FASTEN TO NARROW FACE OF STUD FRAMING, FASTENER SHALL BE LOCATED IN CENTER OF NOMINAL 2" x 4" (MIN.) WOOD STUD. 3/4" EDGE DISTANCE IS ACCEPTABLE FOR WOOD FRAMING. LAG SCREWS SHALL HAVE PHILLIPS PAN HEAD OR HEX HEAD.
 - MACHINE SCREWS SHALL HAVE MINIMUM OF 1/2" ENGAGEMENT OF THREADS IN BASE ANCHOR AND MAY HAVE EITHER A PAN HEAD, TRUSS HEAD, OR WAFER HEAD (SIDEWALK BOLT), U.O.N.
- ☒ DESIGNATES ANCHOR CONDITIONS WHICH ARE NOT ACCEPTABLE USES.
- * DESIGNATES ANCHORS WHICH ARE REMOVABLE BY REMOVING MACHINE SCREW, NUT OR WASHER WINGNUT.
9. FOR 5/16" ELO CRETE FLEX, CONCRETE $f_c = 3.55$ KSI, FOR ELO ULTRACON, CONCRETE $f_c = 3.5$ KSI, FOR ITW TAPON, CONCRETE $f_c = 3.2$ KSI, OTHERWISE MIN. $f_c = 3$ KSI.



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no.	date	by	description



6.8 ACCORDION SHUTTER

ANCHOR SCHEDULE FOR CONCRETE BLOCK

MAXIMUM FASTENER SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

ANCHOR TYPE & MINIMUM BLOCK REQUIREMENTS	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 1" EDGE DISTANCE						MIN. 2-1/2" EDGE DISTANCE																								
		SPANS UP TO 6'-0"		SPANS UP TO 8'-8"		SPANS UP TO 13'-0"		SPANS UP TO 6'-0"		SPANS UP TO 8'-8"		SPANS UP TO 13'-0"																				
		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)		CONNECTION TYPE (SEE NOTE 3)																				
		C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5						
	48.0	7	7		3	4	5	5			3	3	3			12	12	4	7	10	8	8	3	5	7	5	5			3	5	
	62.0	5	5			3	4	4								9	9	3	5	8	6	6		3	5	4					3	
	72.0	5	5			3	3	3								8	8	3	4	7	5	5		3	5	3					3	
	110.0	3	3													5	5		3	4	3				3	3						3
	200.0																			3	3											
	48.0	14	14	4	6	9	10	10	3	4	6	6	6		3	4	14	14	5	9	13	10	10	3	6	9	6	6		4	6	
	62.0	11	11	3	5	7	7	7		3	4	5	3		3	11	11	4	6	10	7	7	3	4	7	5	3			3	4	
	72.0	9	9	3	4	6	6	6		3	4	4			9	9	3	6	9	6	6		4	6	4						4	
	110.0	6	6			4	4				3				6	6		3	6	4				4	3						3	
	200.0	3					3				3				3				3	3				3	3							3
	48.0	16	16	5	6	8	12	12	3	4	6	8	8		3	4	16	16	8	11	14	16	16	5	8	10	13	13	3	5	6	
	62.0	13	13	3	5	6	9	9		3	4	6	3		3	16	16	6	8	11	15	15	4	6	7	10	6	3	4	5		
	72.0	11	11	3	4	5	7	7		3	4	5			16	16	5	7	9	13	13	3	5	6	9	4			3	4		
	110.0	7	7		3	3	5				4				13	13	3	5	6	9	4			3	4	7	3			3	4	
	200.0	4					4				4				7	3			3	7	3			3	7	3					3	
	48.0																															
	62.0																															
	72.0																															
	110.0																															
	200.0																															
	48.0	16	16	8	13	16	15	15	5	9	14	10	10		3	6	9															
	62.0	16	16	6	10	16	11	11	4	7	11	7	4		3	4	7															
	72.0	14	14	5	9	13	10	10	3	6	9	6	3		4	6																
	110.0	9	9	3	5	9	6	3		4	6	5			3	5																
	200.0	5				3	5	5		3	5	5			3	5																

ANCHOR NOTES:
SEE PAGE 10 of 11

ANCHOR SCHEDULE FOR WOOD S_G = 0.45 MDL.

MAXIMUM FASTENER SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

ANCHOR TYPE & MINIMUM REQUIREMENTS	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 3/4" EDGE DISTANCE																			
		SPANS UP TO 6'-0"			SPANS UP TO 8'-8"			SPANS UP TO 13'-0"			SPANS UP TO 13'-0"										
		CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)										
		C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5
	48.0	16	16	12	14	16	16	16	8	10	11	16	16	5	6	7					
	62.0	16	16	9	11	12	16	16	6	7	8	16	13	4	5	5					
	72.0	16	16	8	9	11	16	16	5	6	7	16	9	3	4	5					
	110.0	16	16	5	6	7	16	9	3	4	5	16	6	3	3	4					
	200.0	6	3	3	4	4	16	6	3	4	4	16	6	3	3	4					
	48.0	16	16				11	11				7	7			7	7				
	62.0	13	13				9	9				6	3			6	3				
	72.0	11	11				7	7				5				5					
	110.0	7	7				5					4				4					
	200.0	4					4					4				4					
	48.0	16	16	11	15	16	16	16	8	10	12	16	16	5	7	8					
	62.0	16	16	9	11	14	16	16	6	8	9	16	11	4	5	6					
	72.0	16	16	7	10	12	16	16	5	7	8	15	7	3	4	5					
	110.0	16	16	5	6	7	15	7	3	4	5	13	5	3	3	4					
	200.0	13	5	3	3	4	13	5	3	3	4	13	5	3	3	4					

ANCHOR SCHEDULE FOR WOOD S_G = 0.42 MDL.

MAXIMUM FASTENER SPACING (INCHES) REQUIRED FOR VARIOUS DESIGN LOADS AND SPANS

ANCHOR TYPE & MINIMUM REQUIREMENTS	LOAD (W) P.S.F. MAX. (SEE NOTE 1)	MIN. 3/4" EDGE DISTANCE																			
		SPANS UP TO 6'-0"			SPANS UP TO 8'-8"			SPANS UP TO 13'-0"			SPANS UP TO 13'-0"										
		CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)			CONNECTION TYPE (SEE NOTE 3)										
		C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5	C1	C2	C3	C4	C5
	48.0	16	16	9	11	13	16	16	6	8	9	16	16	4	5	6					
	62.0	16	16	7	9	10	16	16	5	6	7	15	9	3	4	4					
	72.0	16	16	6	7	9	16	16	4	5	6	13	6			3	4				
	110.0	16	16	4	5	6	12	6			3	4	10	4		3	3				
	200.0	10	4		3	3	10	4			3	3	10	4		3	3				
	48.0	16	16	8	10	13	16	16	5	7	9	13	13	3	4	6					
	62.0	16	16	6	8	10	15	15	4	5	7	10	6			3	3				
	72.0	16	16	5	7	9	13	13	3	4	5	6	9	4		3	3				
	110.0	12	12	3	4	5	8	4			3	4	7	3		3	3				
	200.0	7	3		3	7	3				3	7	3			3	7				



KNEZEVICH ASSOCIATES
 2900 S.W. 103th Avenue, Fort Lauderdale, FL 33324
 Tel: (954) 571-6933 Fax: (954) 432-7980
 www.knezevich.com email: info@knezevich.com

Town & Country
 Wholesale Aluminum and Building Products
 420 West Piquet Road, Fort Lauderdale, FL 33309
 Phone: 954-970-9999 Fax: 954-970-9925

no.	date	by	description	revision

APPROVED: DATE: 05/15/2005
 PROJECT: 88-225



Internal Revenue Service

The Digital Daily

DEPARTMENT OF THE TREASURY

Federal Tax ID / EIN

This is your provisional Employer Identification Number:

20-1865660

Today's Date is: November 11, 2004 GMT

You will receive a confirmation letter in U.S. mail within fifteen days. The letter will also contain useful tax information for your business or organization.

If you have input any of the information on your application in error, please wait seven days and contact the EIN Toll Free area at 1-800-829-4933, Monday - Friday, 7:30am - 5:30pm. If you do not want to call, please make corrections on the letter you receive confirming your EIN and return it to the IRS.

If you are going to complete other on-line applications that require your Employer Identification Number(EIN) you can copy it by performing the following steps:

- 1) Use your mouse to highlight your EIN (blue number on top of page) by moving your pointer on top of the number.
- 2) Press the Ctrl key at the same time pressing the C key.

Once you copy your EIN you can paste it in the appropriate place by pressing the Ctrl key at the same time pressing the V key.

You may click on the buttons below for different print options or to fill out another Form SS-4.

[Review and Print Form SS-4](#)

[Fill Out Another Form SS-4](#)

Click [here](#) to return to the Internet Employer Identification Number landing (start) page.



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

HURRICANE SHUTTER INSTALLATION CHECKLIST

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

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

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

MICHAEL HOSKIN
772-631-3600

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri **2-18-10** Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9365	Carelli 4 Middle Rd JB AC	Final	Pass	close INSPECTOR <i>JF</i>
9252	Martin 2 Palm Ct Hoskins & Clarke	Final	Pass	close INSPECTOR <i>JF</i>
9251	Martin 2 Palm Ct Louie's	Final windows & SGD	Pass	close INSPECTOR <i>JF</i>
9208	Pare 1095 River Rd Harbor Bay Marine	Final DOCK	Pass	close INSPECTOR <i>JF</i>
9367	BARON 25 FIELDWAY PINNACLE ROOF	ROOF FINAL	Pass	close INSPECTOR <i>JF</i>
9299	BUSCH 14 RIVERVIEW Cecaron	FINAL	Pass	close INSPECTOR <i>JF</i>
9340	Waters Waters	Final		INSPECTOR

● 9619

A/C CHANGEOUT

●

●



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

BUILDING PERMIT CARD

**THIS CARD MUST BE POSTED IN A CONSPICUOUS PLACE IN PLAIN VIEW FROM THE STREET PRIOR TO BEGINNING ANY WORK
 A FINAL INSPECTION IS REQUIRED FOR ALL PERMITS**

PERMIT NUMBER:	9619	DATE ISSUED:	NOVEMBER 1, 2010
SCOPE OF WORK:	AC CHANGEOUT		
CONDITIONS :			
CONTRACTOR:	JENSEN BEACH A/C		
PARCEL CONTROL NUMBER:	353741-008-000-000102	SUBDIVISION	KNOWLES - LOT 1
CONSTRUCTION ADDRESS:	2 PALM CT		
OWNER NAME:	MARTIN		
QUALIFIER:	GREG HALL	CONTACT PHONE NUMBER:	334-3200

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**

REQUIRED INSPECTIONS

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

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

Town of Sewall's Point

Date: October 28, 10 BUILDING PERMIT APPLICATION Permit Number: 9619

OWNER/TITLEHOLDER NAME: THOMAS MARTIN Phone (Day) 287-0407 (Fax) _____

Job Site Address: 2 PALM COURT City: SEWALL State: FL Zip: 34996

Legal Description KNOWLES SIDLOT 1 Parcel Control Number: 35-37-41-008-000-00010-2

Owner Address (if different): _____ City: _____ State: FL Zip: 34957

SCOPE OF WORK (PLEASE BE SPECIFIC): AC Change Out - 2 systems

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: \$ 6,215.00 (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 FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY: Estimated Fair Market Value prior to improvement: \$ _____ (Fair Market Value of the Primary Structure only, Minus the land value) PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

Construction Company: JENSEN BEACH A/C Phone: 334-3200 Fax: 334-3201

Qualifiers name: GREG HALL Street: 940 NE DIXIE HWY City: JENSEN State: FL Zip: 34957

State License Number: CAC01445.1 OR: Municipality: _____ License Number: 0

LOCAL CONTACT: GREG HALL Phone Number: 772-334-3200

DESIGN PROFESSIONAL: _____ Fla. License# _____

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

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

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

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

NOTICES TO OWNERS AND CONTRACTORS:

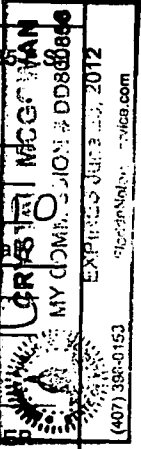
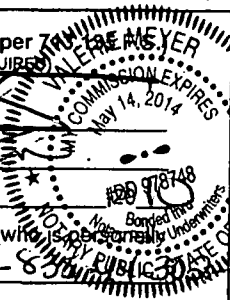
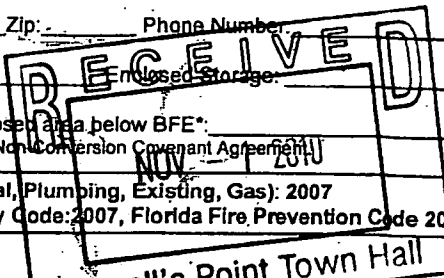
- 1. YOUR FAILURE TO RECORD A NOTICE OF COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS TO YOUR PROPERTY. WHEN FINANCING, CONSULT WITH YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF COMMENCEMENT.
2. THERE ARE SOME PROPERTIES THAT MAY HAVE DEED RESTRICTIONS RECORDED UPON THEM. THESE RESTRICTIONS MAY LIMIT OR PROHIBIT THE WORK APPLIED FOR IN YOUR BUILDING PERMIT. IT IS YOUR RESPONSIBILITY TO DETERMINE IF YOUR PROPERTY IS ENCUMBERED BY ANY RESTRICTIONS. SOME RESTRICTIONS APPLICABLE TO THIS PROPERTY MAY BE FOUND IN THE PUBLIC RECORDS OF MARTIN COUNTY OR THE TOWN OF SEWALL'S POINT, THERE MAY BE ADDITIONAL PERMITS REQUIRED FROM OTHER GOVERNMENTAL ENTITIES SUCH AS WATER MANAGEMENT DISTRICTS, STATE AGENCIES, OR FEDERAL AGENCIES.
3. BUILDING PERMITS FOR SINGLE FAMILY RESIDENCES AND SUBSTANTIAL IMPROVEMENTS TO SINGLE FAMILY RESIDENCES ARE VALID FOR A PERIOD OF 24 MONTHS. RENEWAL FEES WILL BE ASSESSED AFTER 24 MONTHS PER TOWN ORDINANCE 60-96.
4. THIS PERMIT WILL BECOME NULL AND VOID IF THE WORK AUTHORIZED BY THIS PERMIT IS NOT COMMENCED WITHIN 180 DAYS, OR IF WORK IS SUSPENDED OR ABANDONED FOR A PERIOD OF 180 DAYS AT ANY TIME AFTER THE WORK IS COMMENCED. ADDITIONAL FEES WILL BE ASSESSED ON ANY PERMIT THAT BECOMES NULL AND VOID. REF: FBC 2007 SECT. 105.4.1, 105.4.1.1 - .5.

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

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

OWNER NOTORIZED SIGNATURE: (required per 713.135 OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)) [Signature] State of Florida, County of: Martin On This the 1st day of NOV by Thomas P. Martin known to me or produced PD# 14635-530 As identification. Valley Notary Public My Commission Expires: _____

CONTRACTOR NOTORIZED SIGNATURE: (required per 713.135) [Signature] State of Florida, County of: MARTIN On This the 28th day of OCTOBER 2010 by GREG HALL known to me or produced _____ As identification. Chad Notary Public My Commission Expires: JUNE 25, 2012





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

Site Provided by...
governmentmax.com 1,11

Summary

print Address 11 of 12

Tabs

- Summary**
- Print View
- Land
- Improvements
- Assessments & Exemptions
- Sales
- Taxes →
- Parcel Map →
- Trim Notice →

Parcel ID	Account #	Unit Address	Market Total Value	Data as of
35-37-41-008-000-00010-2	9558	2 PALM CT, SEWALL'S POINT	\$282,560	10/23/2010

Searches

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

Owner Information

Owner(Current)	MARTIN THOMAS
Owner/Mail Address	2 PALM CT STUART FL 34996
Sale Date	04/06/2009
Document Number	2139355
Document Reference No.	2383 0363
Sale Price	255000

Location/Description

Account #	9558	Map Page No.	SP-02
Tax District	2200	Legal Description	KNOWLES S/D LOT 1
Parcel Address	2 PALM CT, SEWALL'S POINT		
Acres	.6040		

Functions

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

Parcel Type

Use Code	0100 Single Family
Neighborhood	120600 Perriwinkle,Knowles

Assessment Information

Market Land Value	\$151,200
Market Improvement Value	\$131,360
Market Total Value	\$282,560

Print Back to List First Previous Next Last

Legal Disclaimer / Privacy Statement





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

Handwritten note: 1- 2 1/2 Ton system

Air Conditioning Change out Affidavit

Residential [checked] Commercial
Package Unit Yes [checked] No
Duct Replacement Yes [checked] No - Refrigerant line replacement Yes [checked] No
Flushing Existing Refrigerant lines Yes [checked] No - Adding Refrigerant Drier Yes [checked] No
Rooftop A/C Stand Installation Yes [checked] No - Curb Installation Yes [checked] No
Smoke Detector in Supply (over 2000 CFM) Yes [checked] No

One form required for each A/C system installed

TOWN OF SEWALL'S POINT BUILDING DEPARTMENT FILE COPY

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: RHEEM Model# RHKL-HM3821JA
Volts 208/240 CFM's 1000 Heat Strip 10 Kw
Min. Circuit Amps 40 Wire gauge #6
Max. Breaker size 100 Min. Breaker size 50
Ref. line size: Liquid 3/8 Suction 3/4
Refrigerant type 410A
Location: Existing [checked] New
Attic/Garage/Closet (specify) Hall Closet
Access:

Condenser: Mfg RHEEM Model# 14AJM30A01
Volts 208/230 SEER/EER 110 BTU's 30,000
Min. Circuit Amps 23/23 Wire gauge #8
Max. Breaker size 35 Min. Breaker size 30
Ref. line size: Liquid 3/8 Suction 3/4
Refrigerant type 410A
Location: Existing [checked] New
Left/Right/Rear/Front/Roof
Condensate Location on slab - North side of house

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Model#
Volts 240 CFM's 1000 Heat Strip 10 Kw
Min. Circuit Amps Wire gauge
Max. Breaker size Min. Breaker size
Ref. line size: Liquid Suction
Refrigerant type
Location: Ext. New
Attic/Garage/Closet (specify)
Access:

Condenser: Mfg Model#
Volts 240 SEER/EER 10 BTU's 30,000
Min. Circuit Amps Wire gauge
Max. Breaker size Min. Breaker size
Ref. line size: Liquid Suction
Refrigerant type
Location: Ext. New
Left/Right/Rear/Front/Roof
Condensate Location

Certification:

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

Signature [Handwritten Signature]

Date 10-27-10

10/23/2010



http://www.townofsewallspoint.com/products/hvac/resshvac/87-adpl.html

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

3 TON

Air Conditioning Change out Affidavit

Residential [checked] Commercial
Package Unit Yes [checked] No
Duct Replacement Yes [checked] No - Refrigerant line replacement Yes [checked] No
Flushing Existing Refrigerant lines Yes [checked] No - Adding Refrigerant Drier Yes [checked] No
Rooftop A/C Stand Installation Yes [checked] No - Curb Installation Yes [checked] No
Smoke Detector in Supply (over 2000 CFM) Yes [checked] No

One form required for each A/C system installed

REPLACEMENT SYSTEM COMPONENTS

Air handler: Mfg: Rneem Model# RHUHM3EP1JA
Volts 208/240 CFM's 1200 Heat Strip 10 Kw
Min. Circuit Amps 47/54 Wire gauge #6
Max. Breaker size 100 Min. Breaker size 50
Ref. line size: Liquid 3/8 Suction 3/4
Refrigerant type 410A
Location: Existing [checked] New
Attic/Garage/Closet (specify) Garage
Access:

Condenser: Mfg Rneem Model# 14AINB1A
Volts 208/230 SEER/EER 10 BTU's 310000
Min. Circuit Amps 18/18 Wire gauge #8
Max. Breaker size 35 Min. Breaker size 30
Ref. line size: Liquid 3/8 Suction 3/4
Refrigerant type 410A
Location: Existing [checked] New
Left/Right/Rear/Front/Roof North Side
Condensate Location on slab next to garage

EXISTING SYSTEM COMPONENTS

Air handler: Mfg: Model#
Volts 240 CFM's Heat Strip Kw
Min. Circuit Amps Wire gauge
Max. Breaker size Min. Breaker size
Ref. line size: Liquid Suction
Refrigerant type
Location: Ext. New
Attic/Garage/Closet (specify)
Access:

Condenser: Mfg Model#
Volts SEER/EER BTU's
Min. Circuit Amps Wire gauge
Max. Breaker size Min. Breaker size
Ref. line size: Liquid Suction
Refrigerant type
Location: Ext. New
Left/Right/Rear/Front/Roof
Condensate Location

Certification:

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

[Signature]

Signature

10-27-10

Date



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2010.

Certificate of Product Ratings

AHRI Certified Reference Number: 3805983

Date: 10/27/2010

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

Outdoor Unit Model Number: 14AJM36

Indoor Unit Model Number: RHLL-HM3821+RCSL-H*3821

Manufacturer: RHEEM MANUFACTURING COMPANY

Trade/Brand name: RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM MANUFACTURING COMPANY

Rated as follows in accordance with AHRI Standard 210/240-2006 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:

Cooling Capacity (Btuh):	37600
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00

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

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CERTIFICATE VERIFICATION

The information for the model cited on this certificate can be verified at www.ahridirectory.org, click on "Verify Certificate" link and enter the AHRI Certified Reference Number and the date on which the certificate was issued, which is listed above, and the Certificate No., which is listed below.



Air-Conditioning, Heating, and Refrigeration Institute

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CERTIFICATE NO.: 129327045928863352



This combination qualifies for a Federal Energy Efficiency Tax Credit when placed in service between Feb 17, 2009 and Dec 31, 2010.

Certificate of Product Ratings

AHRI Certified Reference Number: 3805936

Date: 10/27/2010

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

Outdoor Unit Model Number: 14AJM30

Indoor Unit Model Number: RHKL-HM3821+RCSL-H*3821

Manufacturer: RHEEM MANUFACTURING COMPANY

Trade/Brand name: RHEEM 14AJM SERIES

Manufacturer responsible for the rating of this system combination is RHEEM MANUFACTURING COMPANY

Rated as follows in accordance with AHRI Standard 210/240-2006 for Unitary Air-Conditioning and Air-Source Heat Pump Equipment and subject to verification of rating accuracy by AHRI-sponsored, independent, third party testing:

Cooling Capacity (Btuh):	30000
EER Rating (Cooling):	13.00
SEER Rating (Cooling):	16.00

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

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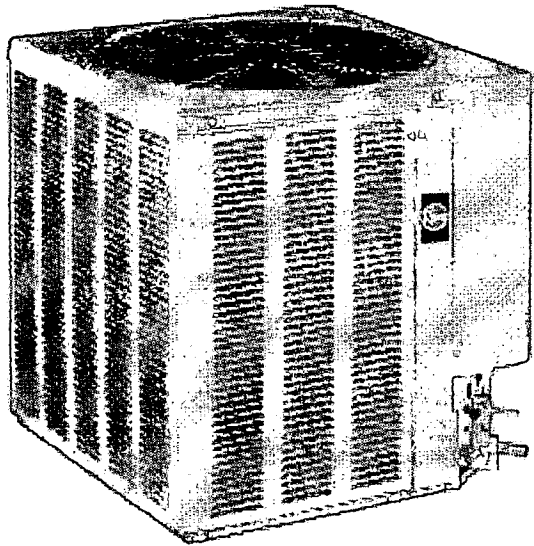
CERTIFICATE NO.: 129327045532913182

Rheem SALES FACT SHEET



Featuring
Industry Standard
R-410A Refrigerant

R-410A



14.5 SEER VALUE SERIES CONDENSING UNITS

Features

- Painted louvered steel cabinet
- Easily accessible control box
- Condenser coils constructed with copper tubing and enhanced aluminum fins
- Grille/Motor mount for quiet fan operation
- Filter Drier (shipped – not installed)

14AJM

14.5 SEER Models
Efficiencies up to 17 SEER/13.50 EER
Nominal Sizes 1 1/2 to 5 Tons
[5.28 kW] to [17.6 kW]

Nine Models

Cooling Capacities
19,600 to 56,500 BTU/HR
[5.74 to 16.56 kW]

14	A	J	M
14.5 SEER	A = AIR CONDITIONER	<u>VOLTAGE</u> J = 208-230 SINGLE PHASE	<u>DESIGN SERIES</u> M = 1ST DESIGN R-410A

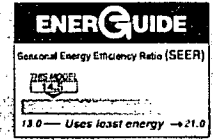
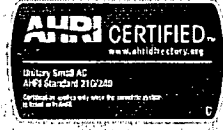
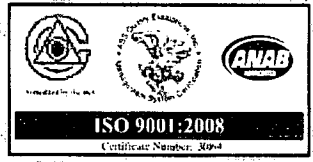
GENERAL TERMS OF LIMITED WARRANTY

Rheem will furnish a replacement for any part of this product which fails in normal use and service within the applicable period stated, in accordance with the terms of the limited warranty.

Conditional Parts*
(Registration Required) Ten (10) Years
Conditional Compressor*
(Registration Required) Ten (10) Years
Any Other Part Five (5) Years
*See Product Warranty Card for Details.

18	A	01
<u>NOMINAL COOLING CAPACITY</u>	<u>CABINET</u>	RHEEM VALUE SERIES
18 = 18,000 BTU/HR [5.28 kW] 24 = 24,000 BTU/HR [7.03 kW] 30 = 30,000 BTU/HR [8.79 kW] 36 = 36,000 BTU/HR [10.55 kW] 42 = 42,000 BTU/HR [12.31 kW] 48 = 48,000 BTU/HR [14.07 kW] 49 = 47,000 BTU/HR [13.77 kW] 56 = 54,000 BTU/HR [15.83 kW] 60 = 60,000 BTU/HR [17.58 kW]	A = FULL METAL JACKET	

Price	Starting at: \$
-------	--------------------



*Proper sizing and installation of equipment is critical to achieve optimal performance. Split system air conditioners and heat pumps must be matched with appropriate coil components to meet ENERGY STAR criteria. Ask your Contractor for details or visit www.energystar.gov.

Rheem SALES FACT SHEET



RHKA- SERIES
featuring R-22 Refrigerant
RHKL- SERIES
featuring Earth-Friendly
R-410A Refrigerant

Features

- Includes an energy efficient GE® ECM® Motor, which in most applications, enhances the SEER rating of the outdoor unit. It also slowly ramps its speed up for quiet operation and enhanced customer satisfaction.
- Versatile 4-way convertible design for upflow, downflow, horizontal left and horizontal right applications.
- Nominal airflow up to 1.0" external static pressure.
- Factory-installed high efficiency indoor coil.
- Sturdy cabinet construction with 1.0 inch [25.4 mm] of foil faced insulation for excellent sound and insulating characteristics.
- Field-installed auxiliary electric heater kits provide exact heat for indoor comfort. Kits include circuit breakers which meet U.L. and cUL requirements for service disconnect.
- Dip switch settings for selectable, customized cooling airflow over a wide variety of applications.
- On-demand dehumidification terminal that adjusts airflow to help control humidity for unsurpassed comfort in cooling mode.

GENERAL TERMS OF LIMITED WARRANTY

Rheem will furnish a replacement for any part of this product which fails in normal use and service within the applicable period stated, in accordance with the terms of the limited warranty.

Indoor Coils leaks caused by factory defectsFive (5) Years
Electric Heating ElementFive (5) Years
*Any Other PartFive (5) Years

*In addition, a ten-year conditional parts warranty applies when the RHKL air handler is matched with a JEZ or JEC condensing unit or heat pump.

*For complete details of the limited warranty, including applicable terms & conditions, see your local installer or contact the manufacturer for a copy.

Price	Starting at: \$
-------	--------------------

<u>R</u>	<u>H</u>	<u>K</u>	<u>A</u>	<u>—</u>	<u>HM</u>	<u>24</u>	<u>17</u>	<u>J</u>	<u>A</u>
RHEEM	<u>CLASSIFICATION</u> H = AIR HANDLER	K = PREMIUM	<u>REFRIGERANT</u> A = R-22 L = R-410A		<u>A/C OR HP MULTI- POSITION</u> (VERTICAL UPFLOW/ HORIZONTAL LEFT IS THE FACTORY CONFIGURATION)	<u>CAPACITY</u> 24 = 18,000/24,000 BTU/HR [5.27/7.03 kW] 36 = 30,000/36,000 BTU/HR [6.79/10.55 kW] 48 = 42,000/48,000 BTU/HR [12.31/14.07 kW] 60 = 60,000 BTU/HR [17.58 kW]	<u>CABINET SIZE</u> 17 = 17.5" [431.8 mm] (800-1200 CFM) 21 = 21" [533.4 mm] (1400-1600 CFM) 24 = 24.5" [609.6 mm] (1600-1800 CFM)	<u>VOLTAGE</u> J = 208/240/1/60	<u>DESIGN VARIATION</u> A = 1ST DESIGN



BDR RHEEM MANUFACTURING CO. RESEARCH & DEVELOPMENT DEPARTMENT

STANDARD TOLERANCE UNLESS OTHERWISE SPECIFIED	{-FRACTIONAL ±1/32 -ANGULAR +1° -3' -DECIMAL ±0.030	REVISIONS	X1 MOUNTING HOLES WERE VERTICAL	09-17-03 TWC	X4 ADDED MODELS	JHB	6-20-06
CHECKED			X2 ADDED DMJ, SMJ, OKJ AND SKJ	3-26-04 TWC	X5 CORRECTED FRAME GRAPHICS ADDED GRAPHIC OF TIE DOWNS ON LENGTHS 140" AND OVER	JHB	NONE 09-27-06
APPROVED			X3 ADDED NEW MODELS.	JHB 1-26-05	X5 ADDED (2) SCREWS FOR A TOTAL OF (6) *12 SELF DRILLING SCREWS.	JHB	NONE 09-27-06

NO REVISION TO DESIGN MATERIAL TOLERANCE OR PROCESS IS ACCEPTABLE WITHOUT PRIOR CHECK WITH RHEEM THROUGH AN AUTHORIZED ENGINEER OR DESIGNER. RHEEM SHALL BE RESPONSIBLE FOR NOTIFYING RHEEM IN A TIMELY MANNER OF ANY CHANGES AFFECTING PRODUCT QUALITY, PERFORMANCE, RELIABILITY, PACKAGING, DELIVERY OR SUPPORT. CHANGES AFFECTING PRODUCT QUALITY, PERFORMANCE, RELIABILITY, PACKAGING, DELIVERY OR SUPPORT ARE INCLUDED IN THE SPECIFICATIONS FOR THIS COMPONENT.

DR. BY TWC ORIGINAL DATE 09-11-03 RELEASE NO.

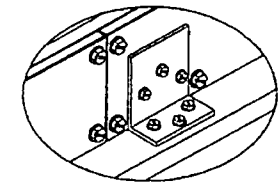
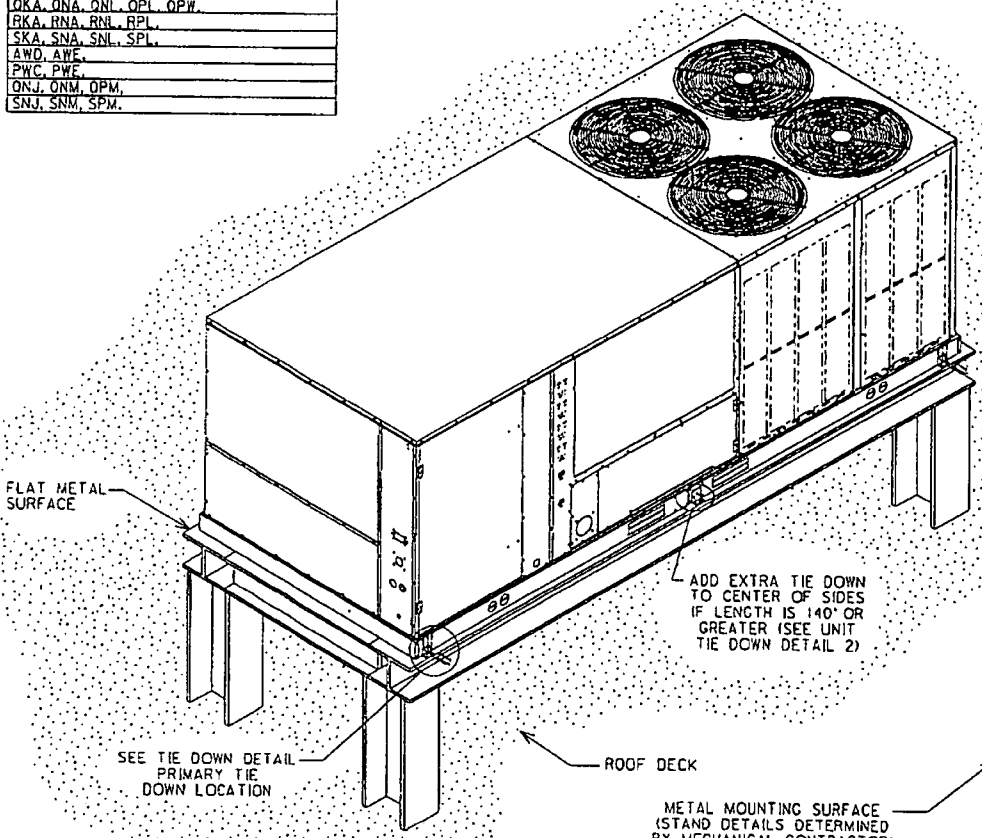
UNIT TIE DOWN INSTRUCTIONS

PART NO. ST A1024 01 REV. X5

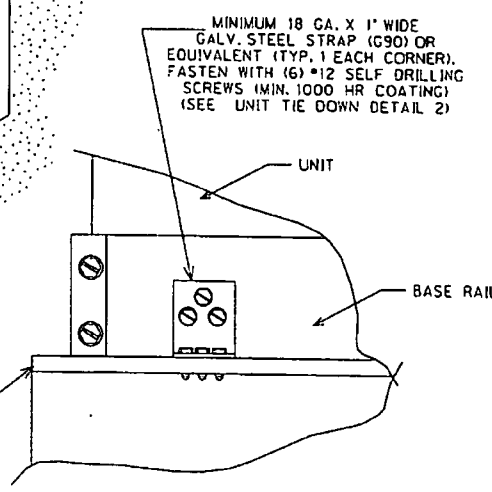
NOTE: ALL BRACKETS ARE 3P UNLESS OTHERWISE SPECIFIED

UNIT APPLICABILITY TABLE

JKA, JKB, JMA, JMB, JNA, JNL, JPL
KKA, KKB, KMA, KMB, KNA, KNB, KNL, KPL
LKA, LKB, LMA, LMB, LNA, LNB, LNL, LPL
OKA, ONA, ONL, OPL, OPW
RKA, RNA, RNL, RPL
SKA, SNA, SNL, SPL
AWD, AWE
PWC, PWE
ONJ, ONM, OPM
SNJ, SNM, SPM



UNIT TIE DOWN DETAIL 2



UNIT TIE DOWN DETAIL 1

PLOTTED: \$DATE AND TIME\$\$

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection: Mon Tue Wed Thur Fri 11-9-2010 Page 1 of 1

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9573	Harte 3E High Pt Jensen Beach AC	AC, Final	Fail	No answer P.D. not INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
1619	Martinez	AC, Final	Fail	See A/C
1619	2 Palm Ct	Jensen Beach AC	Fail	Stand Over
9051	BENT KANA 3602 SE. OCEAN COMMERCIAL	QP WALL STAIRS	PASS	INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	VACANT 34W H. Pt			
	9 Rio Vista			
				INSPECTOR

TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 12-1 2010 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9169	11400 E.
	2100
	JB AC			INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
				INSPECTOR

TOWN OF SEWALL'S POINT, FLORIDA

Date 7/14 1999 TREE REMOVAL PERMIT No. 247

APPLIED FOR BY DENNIS BIRDSELL (Contractor or Owner)

Owner SAME 2 PALM COURT

Sub-division _____, Lot _____, Block _____

Kind of Trees PINE

No. Of Trees: REMOVE 1

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS TREE DAMAGE, EXIST'G SEPTIC SYSTEM (PER APPLICATION)
FILED INSPECTION 7/14/99 FEE \$ 25.00

Signed, [Signature] Applicant Signed, [Signature] Town Clerk

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.

TOWN OF SEWALL'S POINT

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

RECEIVED
JUL 14

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

RECEIVED
JUL 12 1999

Permit # _____

Date Issued _____

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

Owner Dennis Birdsall Address 2 Palm Ct. Phone 286-9828

Contractor _____ Address _____ Phone _____

Number of trees to be removed (list kinds of trees) 1 pine tree growing into the septic tank

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

Number of trees to be replaced _____ (list kinds of trees): _____

Permit Fee \$ _____ (\$25.00 - first tree plus \$10.00 - each additional tree - not to exceed \$100.00.)

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 [Signature] Date submitted 7/14/99

Approved by Building Inspector [Signature] Date 7/14/99

Approved by Building Commissioner _____ Date _____

Completed _____ Date _____ Checked by _____

FIBL 165782000
7/14/99

THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT OBTAINING A PERMIT. 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 AS 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

Date SEPT. 13, 1999 TREE REMOVAL PERMIT No. 267

APPLIED FOR BY DEANUS BIRDSELL (Contractor of Owner)

Owner ZNE PACM CT

Sub-division _____, Lot _____, Block _____

Kind of Trees WHITE CEDAR (DEAD/DISEASED)

No. Of Trees: REMOVE 4

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

FEE
WAIVED
PER ORD.

REMARKS LOCATION SKETCH ON APPLICATION

Signed, [Signature] Applicant FEE \$ -0-
Signed, [Signature] Town Clerk

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 drawing or notes]

PROJECT DESCRIPTION _____

REMARKS _____

SINGLE FAMILY HOME
HABITAT MANAGEMENT AND
LANDSCAPE PERMIT APPLICATION

OWNER NAME: Dennis Bredson

ADDRESS: 2 NE Palm Ct

NUMBER & TYPE TREES TO BE REMOVED: 4 WHITE CEDAR (DEAD)

CONTRACTOR: _____

ADDRESS: _____

LICENSE NUMBER: _____

PHONE: _____ Owner _____ Contractor

CONTRACT PRICE: \$ _____

PERMIT FEE: \$ _____ PAID: _____ Date

* \$25.00 1ST; 10.00 EA. ADD'L.; MAX. \$100.00.

REASON FOR RELOCATION, REMOVAL, OR REPLACEMENT:

DEAD/DISEASED (NO FEE)

APPLICANT SIGNATURE: [Signature] DATE: 9/13/99

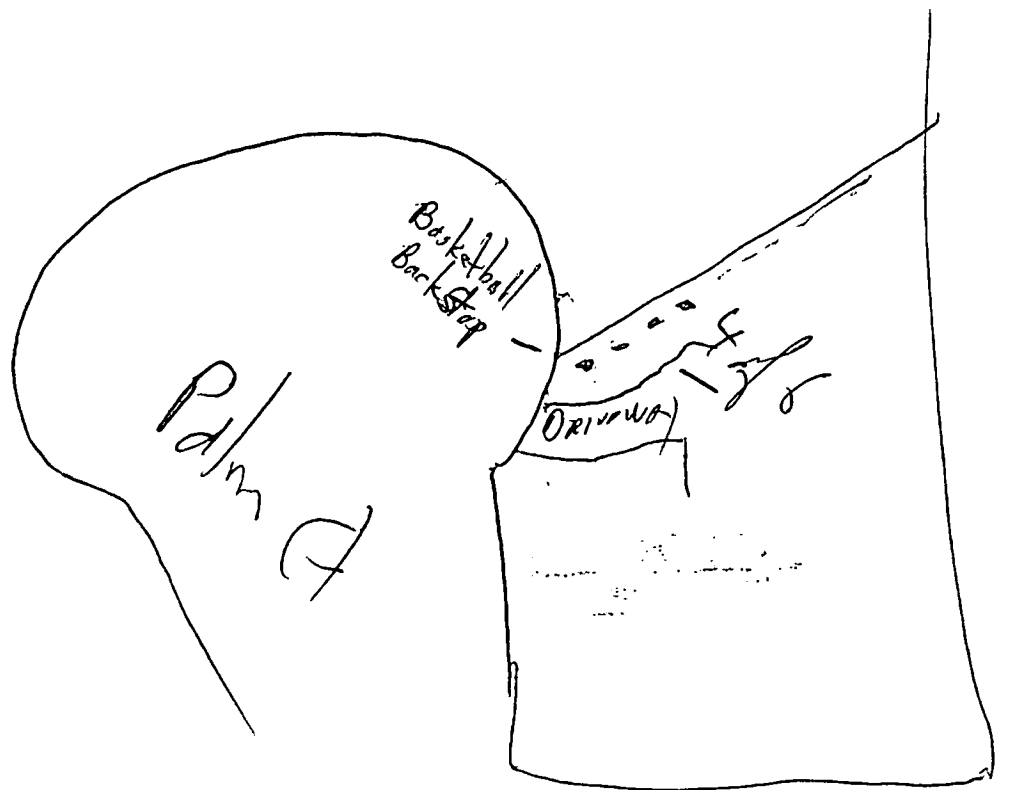
APPROVED: [Signature] Date: 9/13/99
Building Inspector

DENIED: _____ Date: _____
Building Inspector

_____ Date: _____
Building Commissioner

REASON FOR DENIAL, IF APPLICABLE:

*FILED WSP
9/13/99*



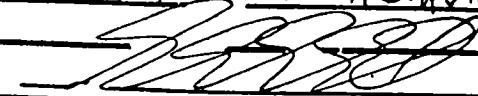


1998 - 1999
Town of Sewall's Point
Building Department - Inspection Log
~~Mon. 9-13-99~~

N
N
S

PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
4565	Kennedy 3 Oak Hill Way	mechanical framing	CANCEL	HURRICANE PREP
4628	Hollrieger 11 castle Hill Way	slab	PASSED	
4553	FADDEN 16 S. SEWALL'S PT. RD.	"ALL TRADES" = FRAMING?	CANCEL	HURRICANE PREP
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	NOT SCHED - ATTEMPT. "ROLL OVER" FRI. REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ ADDRESS	INSPECTION TYPE	RESULTS	REMARKS
				"HURRICANE FLOOD" IMMEDIATE

OTHER: 1. ~~ZONING~~ OF THE PERMITS INSP. ✓ TRUE
 2. POSTED HURRICANE PRECAUTIONS (SPBC) @ ALL BLDG SITES
 3. INSPECTED CONSTRUCTION SITES THROUGHOUT TOWN & POSTED NOTICE OF SPBC HURRICANE PRECAUTIONS.

INSPECTOR:  **DATE:** 9/13/99

TOWN OF SEWALL'S POINT, FLORIDA

FILE

Date 1/29/01 +9 TREE REMOVAL PERMIT No 0403

APPLIED FOR BY Dr. William Roy | Shade Tree, Inc. (Contractor or Owner)

Owner 2 Palm Ct. | 987 Industrial Blvd. J-Road

Sub-division _____, Lot _____, Block _____

Kind of Trees Brazilian Poppe (cluster)

No. Of Trees: REMOVE 1

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

No. Of Trees: REPLACE 0 WITHIN 30 DAYS

Field verified
1/29/01

REMARKS See applicat for location

Signed, (Signature of file) Applicant FEE \$ 0.00

Signed, [Signature] Town Clerk
Bldg. Insp.

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.

TOWN OF SEWALL'S POINT

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Large empty rectangular box for notes or drawings]

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

1/29 SCREEND INSP APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

1/18/01 HOLD PENDING ENFORCEMENT COMPLAINT
1/25/01 OK TO PROCESS (PER TOWN MGR.)

RECEIVED
JAN 18 2001
BY: [Signature]

Permit # 0403
Date Issued 1/29/01

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 DR. WILLIAM ROY Address 2 PALM CT Phone 305-444-0004

Contractor SHADE TREE INC Address 983 INDUSTRIAL BLVD Phone 334-7010
THOMAS SHIVERS

Number of trees to be removed (list kinds of trees) BRAZILIAN PEPPER (1)
(PROHIBITED SPECIES - NO FEE)

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

Number of trees to be replaced (list kinds of trees):

Permit Fee \$ -0- ~~(\$25.00 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 [Signature] Date submitted 1-18-01

Approved by Building Inspector [Signature] Date 1/29/01

Approved by Building Commissioner Date

Completed Date Checked by

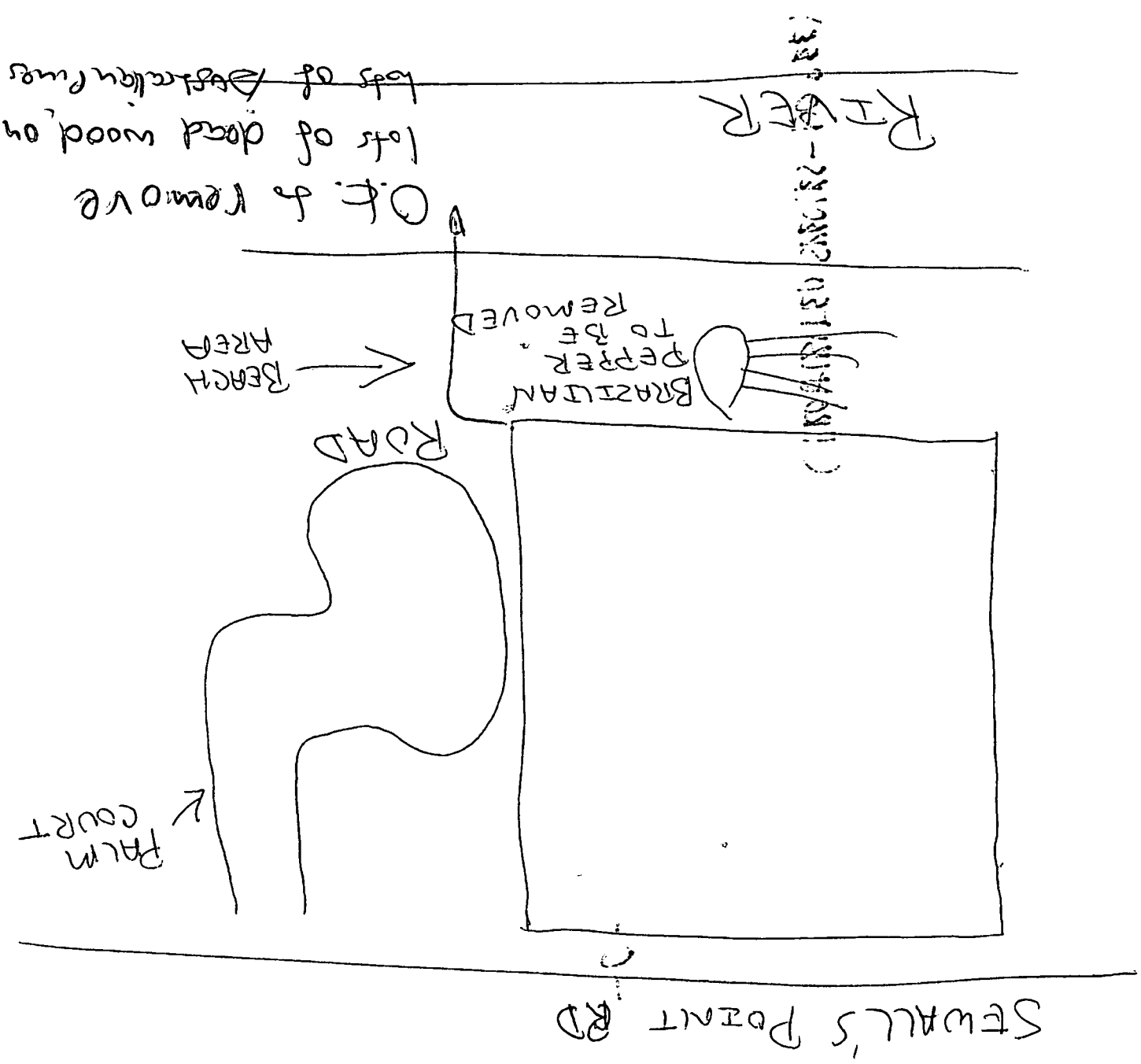
THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT ~~OBTAINING A PERMIT~~ **PERMIT**. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE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

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

Scout
 10/20/21

Surveyed with 10/18/21
 Surveyed with 10/20/21
 (10/20/21)

1/20/22



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 1/29/01

2000

Page 2 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
1/12	204	FIELD VISUAL	OK	Remove Braz Penne
3	ZWILL CT. SHADE TREE INC			<i>[Signature]</i> 1/29
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
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, FLORIDA

Date SEPTEMBER 17 2004 TREE REMOVAL PERMIT No 2337

APPLIED FOR BY DR. ROY (Contractor or Owner)

Owner LOT 2 PALM COURT

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE ALL NON NATIVE

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

_____ FEE \$ 0

Signed, _____ Applicant Signed [Signature] Town Clerk

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
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 two inches.

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, Marberry, Mastic, Mulberry, Myrtle Oak, Paradise Tree, Pigeon Plum, Pond Apple, Prickly Pear, Red Mangrove, Red Maple, Red bay, Saffron Plum, Sand Pine, Scrib 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 William R. Payne address 2 PALM COURT Phone 305 444-0004
Contractor MARCO TRISIN C. STANWOOD address 1550 NE 11TH STREET Phone 786 217-2778
FL CO - C062240 Home STREAD EL
No. of Trees: REMOVE ALL Type: NON NATIVE

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

Written statement giving reasons: THIS IS A VACANT LOT, WE WILL REMOVE ALL DAMAGED TREES AND ALL PROHIBITED SPECIES TREES *

Signature of Property Owner [Signature] Date 9/18/04

Approved by Building Inspector: [Signature] Date 9/17 Fee: 0
Plans approved as submitted Plans approved as revised/marked:

*WORK WILL BE DONE NEXT WEEK SO THAT DEBRIS CAN BE REMOVED BEFORE NEXT STORM.
(1) CONTRACTOR IS FULLY LICENSED AND INSURED CURRENTLY WORKING FOR ME ON OTHER CONSTRUCTION PROJECTS IN DADE COUNTY

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/17, 2008 Page 4 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6551	LANGER	STRAP	PASS	
5	3 LOFTING WAY			INSPECTOR:
	FLORIDA'S FINEST			
6792	RAPPAPORT	WIRE LATH	PASS	
6	9 RIVER CREST	BATH EXHAUST		INSPECTOR:
	GULLICK & MCCAULEY	DUCT	FAIL	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	ROY	TREE	FAIL	
4	2 PALM COURT			INSPECTOR:
6413	POWERS	MECH ROOM	FAIL	
2	70 S. SEWALL'S PT RD.			INSPECTOR:
	FLORIDA'S FINEST			
6821	POWERS	GAS ROUGH	FAIL	
2	70 S. SEWALL'S PT			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
Tree	SUBIN	TREE	PASS	
3	8 PALM COURT			INSPECTOR:
6719	DONALWE	TIE BEAM	PASS	
1	163 S. SEWALL'S PT			INSPECTOR:
	HALL SAMMONS	* FIRST PLEASE *		

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

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 Tom Martini Address [REDACTED] Phone 287 0407

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 1 Species: PAVM

No. of Trees: RELOCATE _____ Species: _____

No. of Trees: REPLACE _____ Species: _____

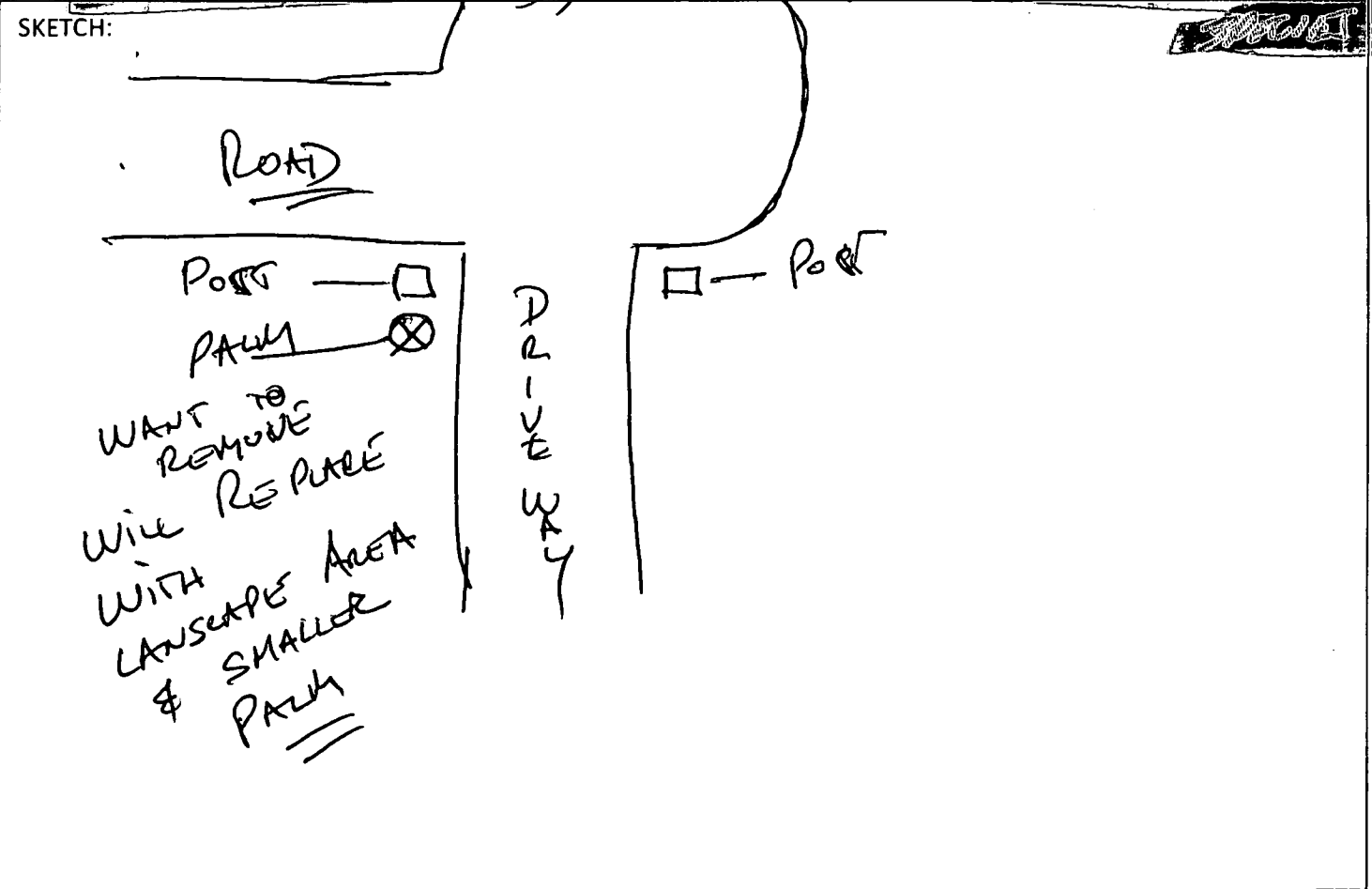
ANY TREE TO BE RELOCATED OR REPLACED MUST OCCUR WITHIN 30 DAYS AND REQUIRES A FINAL INSPECTION

Reason for tree removal /relocation (See notice above) _____

Signature of Property Owner [Signature] Date Nov 1 - 2010

Approved by Building Inspector: [Signature] Date 11-1-10 Fee: _____

NOTES: [REDACTED]





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 state 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.
- 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.



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



Since 1990, Sewall's Point has proudly been designated a "Tree City USA"

TREE REMOVAL, RELOCATION, REPLACEMENT PERMIT

WORK PERMITTED FROM 8:00 AM TO 5:00 PM - NO SUNDAYS

Owner FELICE & CARLOS DOMINGUEZ Address [REDACTED] Phone 954 701-5999
 Contractor LAWN LANDSCAPING ^{by 797 Tax} Address PO BOX 7660 PT. ST. LUCE Phone 772 335-9274
 No. of Trees REMOVE 18 Species: ARECAS Caliper @ 4' above soil 3-4 (inches) Height 10-15 (ft.)
 No. of Trees RELOCATE Species: Caliper @ 4' above soil (inches) Height (ft.)
 No. of Trees REPLACE Species: Caliper @ 4' above soil (inches) Height (ft.)

REPLACED OR RELOCATED TREES MUST BE INSPECTED WITHIN 30 DAYS OF PERMIT ISSUANCE

ALL PROHIBITED SPECIES AND VEGETATIVE WASTE MUST BE REMOVED FROM PROPERTY

Reason for tree removal /relocation GANODERMA DISEASE infecting 13 trees on road, 5 inside fence. To be replaced with Clusia.

Signature of Property Owner [Signature] Date 3/16/06

This space for Official Use only:

Approved by Building Official: [Signature] Date 3-31-16 Fee: N/C

BUILDING INSPECTOR NOTES:

Minimum Tree Requirements Met On Property Prohibited Species Identified for Removal

SKETCH (Show location of tree(s) to be removed/relocated; dimensions of lot; location of structures):

151 ft. fronting Sewalls point Rd. - Due to disease limbs falling into road.

See attached picture.



THE
SUN
IS
SHINING