

8 Palm Road

TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

Permit No. 806

Date 3/20/78

(This application must be accompanied by 3 sets of complete plans, to proper scale, including plot plan, foundation plan, floor plans, wall and roof cross sections; plumbing and electrical layouts, and at least, two elevations as applicable) Copy of property Deed required for new home construction.

Owner RALPH & PAMELA PARKS Present Address #33 Osceola, Stuart Ph 287-5382

General Contractor Stewart Rogers (PARKS & ROGERS) Address 912 E. Parkway, Stuart Ph 286-1548

Where licensed FLA. License No. 000331

Plumbing Contractor _____ License No. _____
Electrical Contractor _____ License No. _____

Street building will front on 8 Palm Road

Subdivision Palm Row Lot No. 4 Area 2836 TOTAL

Building area, inside walls (excluding garage, carport, porches) Sq ft 1960

Other Construction (Pools, additions, etc.) _____

Contract Price (excluding land, rugs, appliances, landscaping) \$ 44,000

Total cost of permit \$ 240.00

Plans approved as submitted _____ Plans approved as marked

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period.

Ralph H. Parks for Parks & ROGERS
Signed by General Contractor

I understand that this building must be in accordance with the approved plan and comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I, also, agree that within 90 days after the building has been approved for occupancy, that the property will, also, be landscaped as to be compatible with the neighborhood.

Ralph H. Parks
Signed by Owner

Note: Speculation Builders will be required to sign both statements.

TOWN RECORD

Date submitted 3/20/78 Jo Rouse

Date approved 3/17/78 Thalia G. [unclear]

Certificate of Occupancy issued Feb. 1, 1979 Date

#806

TOWN OF SEWALL'S POINT, FLORIDA

APPLICATION FOR BUILDING PERMIT

Permit No. _____

Date _____

(This application must be accompanied by 3 sets of complete plans, to proper scale, including plot plan, foundation plan, floor plans, wall and roof cross sections, plumbing and electrical layouts, and at least, two elevations as applicable)

Owner Thomas Hughes Present Address 8 Palm Rd Ph _____

General Contractor Superior Const. Address PO Drawer 6, East Melbourne, FL Ph 383-3200

Where licensed Martin County License No. 00066

Plumbing Contractor Master License No. 00061

Electrical Contractor VALDANE ELECTRIC License No. 00112

Street building will front on Palm Road

Subdivision Palm Bow Lot No. 4 Area 891 #

Building area, inside walls (excluding garage, carport, porches) Sq ft 859

Other Construction (Pools, additions, etc.) ADDITION

Contract Price (excluding land, rugs, appliances, landscaping) \$ 40,000⁰⁰

Total cost of permit \$ ~~40,000⁰⁰~~

Plans approved as submitted _____ Plans approved as marked _____

I understand that this permit is good for 12 months from date of issue and that the building must be completed in accordance with the approved plan and that the site be clean and rough-graded within 12 month period.

[Signature]
Signed by General Contractor

I understand that this building must be in accordance with the approved plan and comply with all code requirements before a Certificate of Approval for Occupancy will be issued and the property approved for all utility services. I, also, agree that within 90 days after the building has been approved for occupancy, that the property will, also, be landscaped as to be compatible with the neighborhood.

Signed by Owner

Note: Speculation Builders will be required to sign both statements.

TOWN RECORD

Date submitted _____

Date approved _____

Certificate of Occupancy issued _____ Date _____

STATE OF FLORIDA
Department of Professional And Occupational Regulation
**CONSTRUCTION INDUSTRY
LICENSING BOARD**

ROGERS, STEWART C
INDIVIDUAL
CERTIFIED BUILDING CONTRACTOR

HAS PAID THE FEE REQUIRED BY CHAPTER 468
FOR THE YEAR ENDING **JUNE 30, 1979**

Stewart C. Rogers
SIGNATURE

Robert L. ...
LICENSURE

PLEASE READ IMPORTANT
INFORMATION ON REVERSE

Conroy W. ...
SECRETARY OF PROFESSIONAL
AND OCCUPATIONAL REGULATION

CONSTRUCTION INDUSTRY LICENSING BOARD
POST OFFICE BOX 8621
JACKSONVILLE, FL 32211

AUDIT CONTROL NO	FILE NO	BATCH NO	FEE AMOUNT
159633	CBC000331	0720	\$225.00

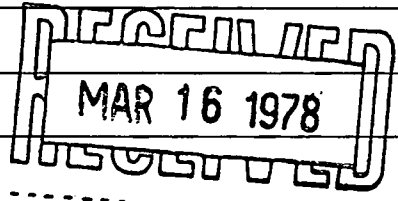
#806

Certificate of Insurance



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 LISTED BELOW.

NAME AND ADDRESS OF AGENCY Rick Carroll Insurance P. O. Box 877 Jensen Beach, FL 33457	COMPANIES AFFORDING COVERAGES COMPANY LETTER A South Carolina Insurance COMPANY LETTER B Argonaut COMPANY LETTER C COMPANY LETTER D COMPANY LETTER E
NAME AND ADDRESS OF INSURED Stewart C. Rogers & ralph R. Parks P. O. Box 74 Jensen Beach, FL 33457	COMPANY LETTER C COMPANY LETTER D COMPANY LETTER E



This is to certify that policies of insurance listed below have been issued to the insured named above and are in force at this time.

COMPANY LETTER	TYPE OF INSURANCE	POLICY NUMBER	POLICY EXPIRATION DATE	Limits of Liability in Thousands (000)		
					EACH OCCURRENCE	AGGREGATE
A	GENERAL LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> PREMISES—OPERATIONS <input type="checkbox"/> EXPLOSION AND COLLAPSE HAZARD <input type="checkbox"/> UNDERGROUND HAZARD <input type="checkbox"/> PRODUCTS/COMPLETED OPERATIONS HAZARD <input type="checkbox"/> CONTRACTUAL INSURANCE <input type="checkbox"/> BROAD FORM PROPERTY DAMAGE <input type="checkbox"/> INDEPENDENT CONTRACTORS <input type="checkbox"/> PERSONAL INJURY	GLA578746	4/2/78	BODILY INJURY	\$ 300	\$ 300
				PROPERTY DAMAGE	\$ 50	\$ 100
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
				PERSONAL INJURY		\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> COMPREHENSIVE FORM <input type="checkbox"/> OWNED <input type="checkbox"/> HIRED <input type="checkbox"/> NON-OWNED			BODILY INJURY (EACH PERSON)	\$	
				BODILY INJURY (EACH OCCURRENCE)	\$	
				PROPERTY DAMAGE	\$	
				BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	
X	EXCESS LIABILITY <input type="checkbox"/> UMBRELLA FORM <input type="checkbox"/> OTHER THAN UMBRELLA FORM	XXXXXXXXXXXX	XXXXXXXXXX	BODILY INJURY AND PROPERTY DAMAGE COMBINED	\$	\$
B	WORKERS' COMPENSATION and EMPLOYERS' LIABILITY	WC83350002414	9/20/78	STATUTORY		
					\$ 100	(EACH ACCIDENT)
	OTHER					

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES

 Carpentry in State of Florida

Cancellation: Should any of the above described policies be cancelled before the expiration date thereof, the issuing company will endeavor to mail 10 days written notice to the below named certificate holder, but failure to mail such notice shall impose no obligation or liability of any kind upon the company.

NAME AND ADDRESS OF CERTIFICATE HOLDER:

Town of Sewall Point, Town Hall
 S. Sewalls Point Road
 Jensen Beach, FL 33457

DATE ISSUED: November 30, 1977

Richard K. Carroll
 Richard K. Carroll/vlh
 AUTHORIZED REPRESENTATIVE

#806



RICHARD J. DUNGEY
of the Law Offices of
ANDERSON, DUNGEY & HERSHEY, P.A.
Box 288/1451 East Ocean Boulevard
STUART, FLORIDA 33494

Warranty Deed

(STATUTORY FORM - SECTION 689.02 F.S.)

This Indenture, Made this 2nd day of March 1978 Between

ELMER T. CARLSON and ANN G. CARLSON, his wife,

of the County of _____, State of _____, grantor*, and

RALPH H. PARKS and PAMELA R. PARKS, his wife

whose post office address is Post Office Box 74, Jensen Beach, Florida

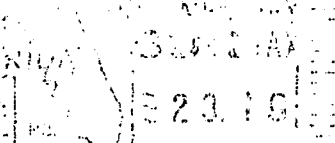
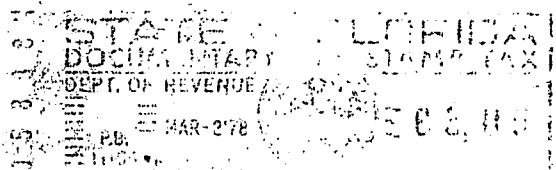
of the County of Martin, State of Florida, grantee*.

Witnesseth, That said grantor, for and in consideration of the sum of TEN and NO/100 -----

----- (\$10.00) ----- Dollars,
and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby
acknowledged, has granted, bargained and sold to the said grantee, and grantee's heirs and assigns forever, the following
described land, situate, lying and being in Martin County, Florida, to-wit:

Lot 4, REVISED AND AMENDED PLAT OF PALM ROW, according to
the plat thereof filed 16, May, 1968 and recorded in Plat
Book 4, Page 68, Martin County, Florida Public Records

SUBJECT to restrictions, reservations and easements of
record



MAR 20 1978 P 4:14

and said grantor does hereby fully warrant the title to said land, and will defend the same against the lawful claims of all
persons whomsoever.

* "Grantor" and "grantee" are used for singular or plural, as context requires.

In Witness Whereof, Grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:

Richard J. Dungey
Gertrude C. Kennedy

Elmer T. Carlson (Seal)
Elmer T. Carlson

Ann G. Carlson (Seal)
Ann G. Carlson

(Seal)

(Seal)

STATE OF FLORIDA
COUNTY OF MARTIN

I HEREBY CERTIFY that on this day before me, an officer duly qualified to take acknowledgments, personally appeared
ELMER T. CARLSON and ANN G. CARLSON, his wife

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

WITNESS my hand and official seal in the County and State last aforesaid this 2nd day of March
1978

Gertrude C. Kennedy
Notary Public

My commission expires:
Notary Public, State of Florida at Large
My Commission Expires March 11, 1979
Bonded by American Fire & Casualty Co.

#806

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

STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES

Post Office Box 270 Jacksonville, Florida 32201

Application and Permit of

Individual Sewage Disposal Facilities

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

Application/Permit No. HD 78-205

Martin County Health Department

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 plat of subdivision. If not platted, 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 267-2277 and give this office a 24-hour notice when ready for inspection.

Section II - Information:

- 1. Property Address (Street & House No.) Palm Road
Lot 4 Block Subdivision Palm Road
Date Platted 1957 Directions to Job Out East Ocean Blvd to Sewell Street and South to Palm Road, west to Lot
2. Owner or Builder Rogers & Parks
P.O. Address Box 74 City Stuart Fla
Septic tank system to be installed by:

Scale 1" = 50'

(Rear)

3. Specifications:

900 gallon tank with 255 square feet of drainfield with at least 4" inside diameter pipe.

4. House to be constructed:

Check one: FHA VA X Conventional

3 Bedroom 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.

Applicant: Rogers & Parks Please Print

Signature: [Signature]

(Name of Street or State Road) (Side)

Septy Sheet 2 of 2 for Sketch & Data for 3 Bedroom Single Residence REMOVE ALL IMPERVIOUS MATERIALS TO A DEPTH OF 6" AND BACKFILL WITH A GOOD GRADE OF SAND IN ENTIRE AREA OF DRAINFIELD.

(Name of Street or State Road) (Side)

(Front)

(Name of Street or State Road)

Date: 3/6/78

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

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions: Maintain 10' separation from public water supply & septic system.

The above signed application has been found to be in compliance with Chapter 10D-6, Florida Administrative Code, and construction is hereby approved, subject to the above specifications and conditions.

By: [Signature] County Health Dept, Martin Date 3/7/78

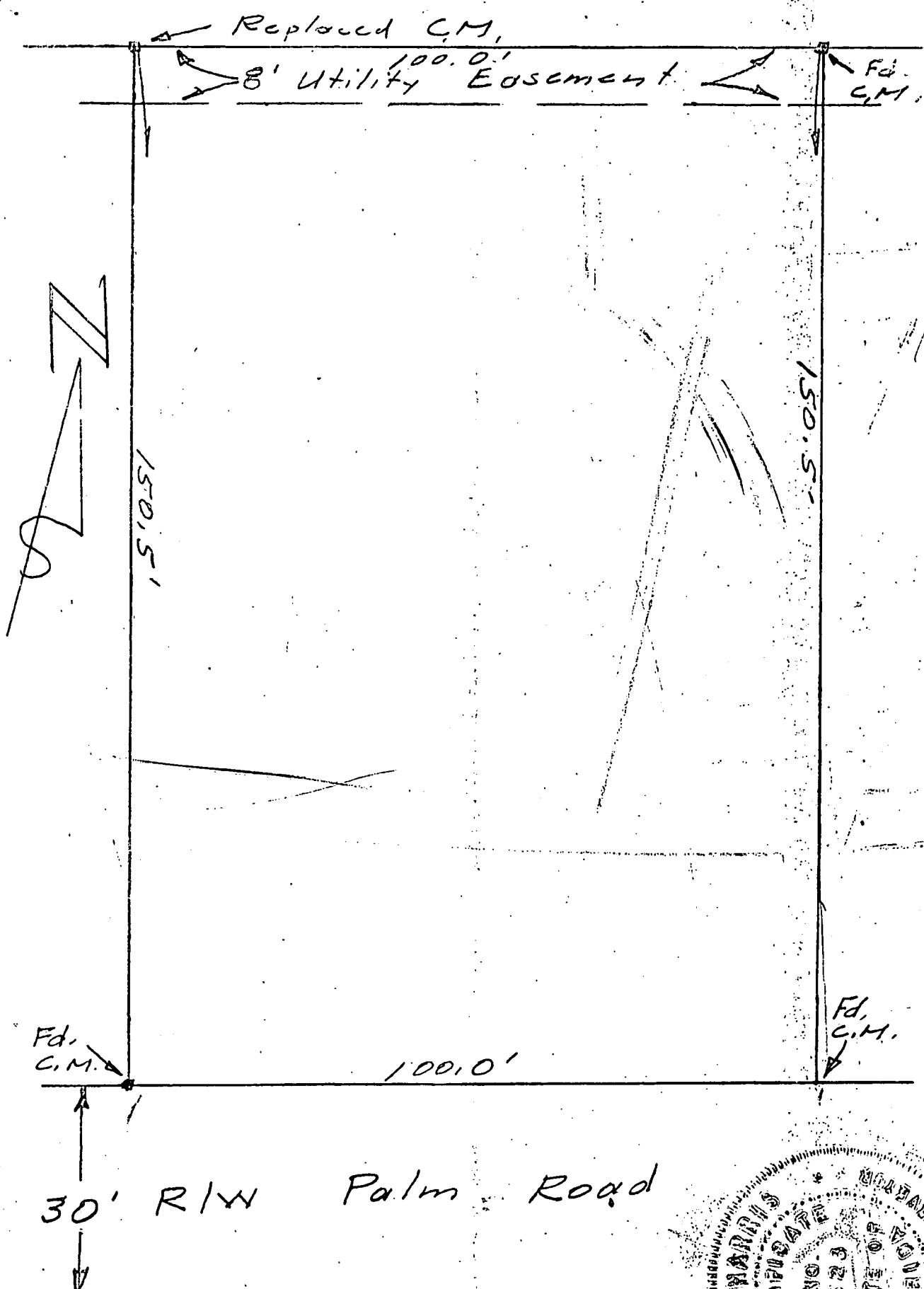
Section IV - Final Construction Approval

Construction of installation approved: Yes No

Date: By:

FHA No. VA No.

#806



CERTIFICATION OF SURVEY

I hereby certify that the Plat shown hereon is a true and correct representation of a survey made under my direction and said survey is accurate to the best of my knowledge & belief.

Kenneth A. Harris
 KENNETH A. HARRIS
 Reg. Land Surveyor
 Fla. Cert. #1523

KENNETH A. HARRIS, P. E.
 Agricultural Engineer
 515 SO. CAROLINA DRIVE
 STUART, FLORIDA 33494

Survey of Lot 4 of Palm Row S/D as in P.B. 3, Pg. 115, Town of Sewalls Point, Martin County, Florida Public Records

DESIGNED	DRAWN	APPROVED	SHEET
	<i>K.A.H.</i>	<i>Kenneth A. Harris</i>	1 of 1
DATE	SCALE	DATE	REG. ENGR. NO.
	1"=20'	3/78	6274
			PLATE
			I

#806

TOWN OF SEWALL'S POINT

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1 Feb 179

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

For property built under Permit No. 806 Dated 3/20/78 when completed in conformance with the Approved Plans.

[Signature]
Signed _____

RECORD OF INSPECTIONS

<u>Item</u>	<u>Date</u>	<u>Approved by</u>
Footings & SLAB	4/21/78	Dunyea
Rough plumbing	4/18/78	Dunyea
Perimeter beam		
Rough electric	7/16/78	Dunyea
Close in	7/16/78	Dunyea
Final plumbing	2/1/79	Jan
Final electric	2/1/79	Jan

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector [Signature] 2/1/79 date

Approved by ^{Bldg} ~~Town~~ Commissioner [Signature] 1 Feb 179 date

Utilities notified 1 Feb 179 date

Original Copy sent to _____

(Keep carbon copy for Town files)

#806

1038

POOL & PATIO

1038

RECEIVED SEP 10 1979

TOWN OF SEWALL'S POINT FLORIDA

Permit No. _____

Date 9-7-79

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 Terry Townsend Present address 8 PALM ROAD

Phone 287-4740

Contractor Louden Pool Co. Address 4306 S. US 1 - Ft. Pierce

Phone 283-4040

Where licensed STATE License number CP 010400

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:

Pool + Patio

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

Subdivision PALM ROW Lot No. 4

Contract price \$ 8000.00 Cost of Permit \$ 40

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 JRM Malouf de la Costa

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 Mrs. Jerry Townsend

TOWN RECORD

Date submitted: _____

Approved: J. Mazzucca Building Inspector Date 9/10/79

Approved: J. Guenther Commissioner Date 11 Sep '79

Final Approval given: 11/13/79 Date

Certificate of Occupancy issued _____ 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.

1038

1058

POOL ENCLOSURE

TOWN OF SEWALL'S POINT FLORIDA

Permit No. 1058

Date 10/17/79

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. Townsend Present address 8 Palm Road

Phone 287-4740 Sewall's Point

Contractor Clumetrol Florida Corp Address 5295 Industrial Rd

Phone 283-8070 Cocoa, Fla.

Where licensed STATE License number CRC-001786

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: Pool Screen Enclosure

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

8 Palm Road

Subdivision Palm Row Lot No. 4

Contract price \$ 2563.00 Cost of Permit \$ 13.00

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 [Signature]

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

Owner Mrs. J. Townsend

TOWN RECORD

Date submitted _____

Approved: [Signature] Building Inspector Date 10/24/79

Approved: [Signature] Commissioner Date 24 Oct 1979

Final Approval given: 11/26/79 Jan Date

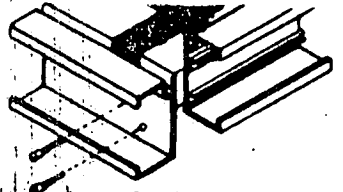
Certificate of Occupancy issued _____ Date

#1058

RECEIVED OCT 17 1979



CLIMATROL FLORIDA CORPORATION



Pat. Pend.
Originators and Manufacturers of
Extruded Aluminum Patio, Pool
and Screen House Enclosures.

CLIMATROL FLORIDA CORP.
2201 S.E. Water St. Bldg. 1-75
Sewall, Florida 33494
PH: 283-8070 - West Palm 842-4655

529 South Industry Road
COCOA, FLORIDA 32922
Telephone: 632-0264
MELBOURNE: (305) 727-2600
ORLANDO: (305) 422-2646
JACKSONVILLE: (904) 269-2201

Job No. _____

SOLD TO Townsend PHONE 287 4740 DATE 8-7 1979

ADDRESS _____ CITY _____

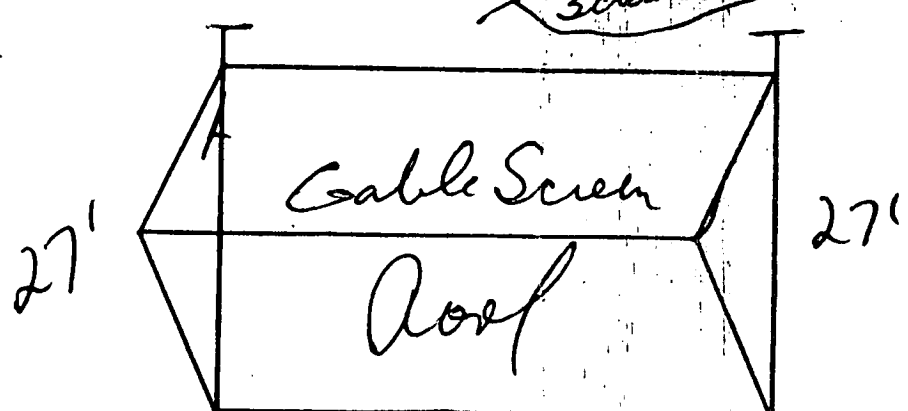
INSTALLATION ADDRESS 8 Palm Rd CITY Sewall Pt.

TERMS & FINANCE Balance on completion DELIVERY DATE _____

- SCREEN WALLS _____ COLOR: _____
- SCREEN ROOF _____ COLOR: _____
- FLAT GABLE BUBBLE
- DIVING DOME _____
- BEAMS T-TYPE
- ALUM. ROOF _____
- VINYL STRIPS NO
- CHAIR RAIL 16" 24" 36"
- FLA. GLASS _____
- KICK PLATE NO SIZE _____
- DOORS 2
- GUTTERS 41' x 2 D.W.
- COLUMNS _____
- WINDOWS _____ TYPE _____
- CABLE BRACES YES
- ENGINEER DRAWINGS _____
- PERMIT _____
- LOT 4 BLOCK _____

Chan 18x14

SKETCH Remove Exist. Screened



Silver TOTAL PRICE ~~2563~~ DEPOSIT \$ ~~2563~~ BALANCE \$ ~~2563~~

2563
THIS PRICE IS BASED ON DIMENSIONS SHOWN IN THE ABOVE SKETCH
D.W. Markov 200

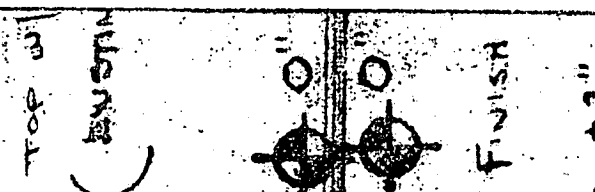
MATERIAL & WORKMANSHIP GUARANTEED FOR 1 YEAR

1. For the total price including tax the seller agrees to fabricate, deliver and install the screen enclosure described above.
2. This proposal does not become a contract until accepted and signed by an officer of the seller-company, and if not accepted, any cash payment will be returned.
3. Price terms and other elements of this proposal are good for 90 days from date _____ and void thereafter at the seller's option.
4. No statement, warranty, implied or expressed, representation or agreement, written or verbal, not appearing upon the face of this contract shall be binding upon the parties hereto.
5. Seller expressly reserves all contractors, mechanics and material man's lien which may be asserted under any provision of law to secure payment of the contract price and may assert and fix the same as lien upon the real property on which installation is made.
6. In the event payment on this contract is enforced through attorneys or by suit or in bankruptcy or probate proceedings, seller may recover and purchaser hereby agrees to pay reasonable attorney fees and costs of court.
7. All sums not paid as due shall bear interest of 8% per annum and unless otherwise stated all sums become due and payable upon completion of work.
8. Seller agrees to take all reasonable steps to insure the fulfillment of orders received, but our performance is subject to delays or cancellations caused by war, accident strikes, inability to secure labor and raw materials, fires, embargoes, transportation shortages and delays, government conscription, priorities, and restraint, failure on your part to give notice of your requirements and/or proper measurements and other information and all other causes whether of the same or different class affecting the whole or any part of seller's obligation hereunder.
9. Contractor or owner agrees to supply electrical power at job site.
10. Climatrol Florida Corporation will retain title until full payment of obligation of indebtedness is met.

I/WE have read the foregoing proposed contract and accept the same on the terms and conditions stated above.

PURCHASER Mrs. E. Townsend
DATE 8/26/79

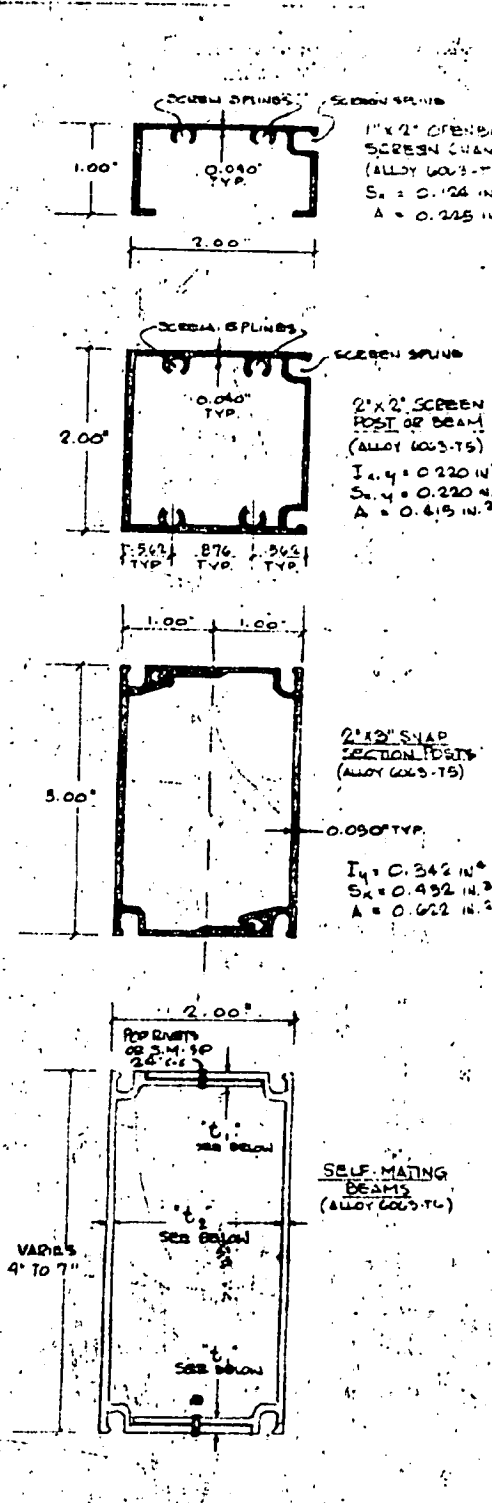
CLIMATROL FLORIDA CORPORATION
By Michael R. Donnan



RECEIVED OCT 17 1979

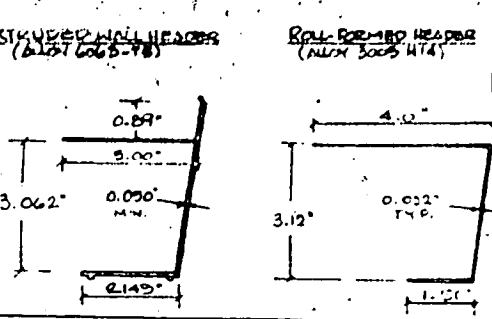
Approval of these plans in no way
relieves the contractor or builder of
complying with the Town of Sewall's
Point's Ordinances, the South Florida
Building Code and the State of Florida
Model Energy Efficiency Building Code.

EXTRUDED POST AND BEAM SECTIONS

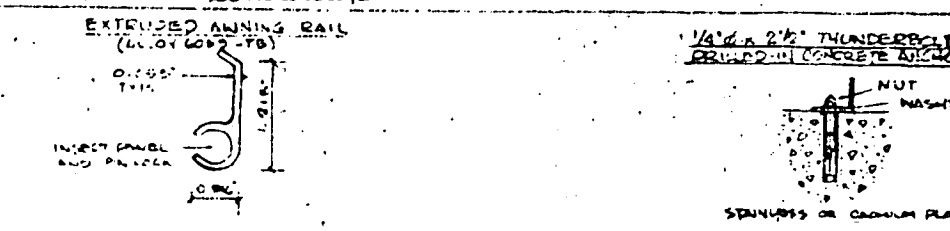
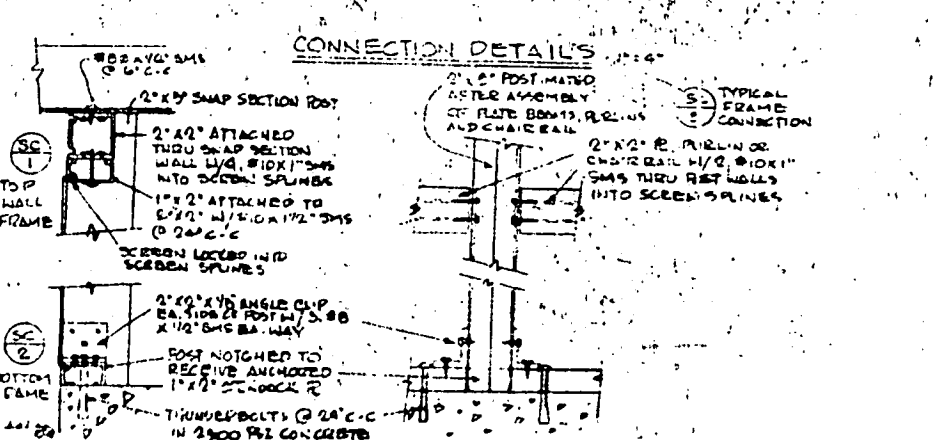
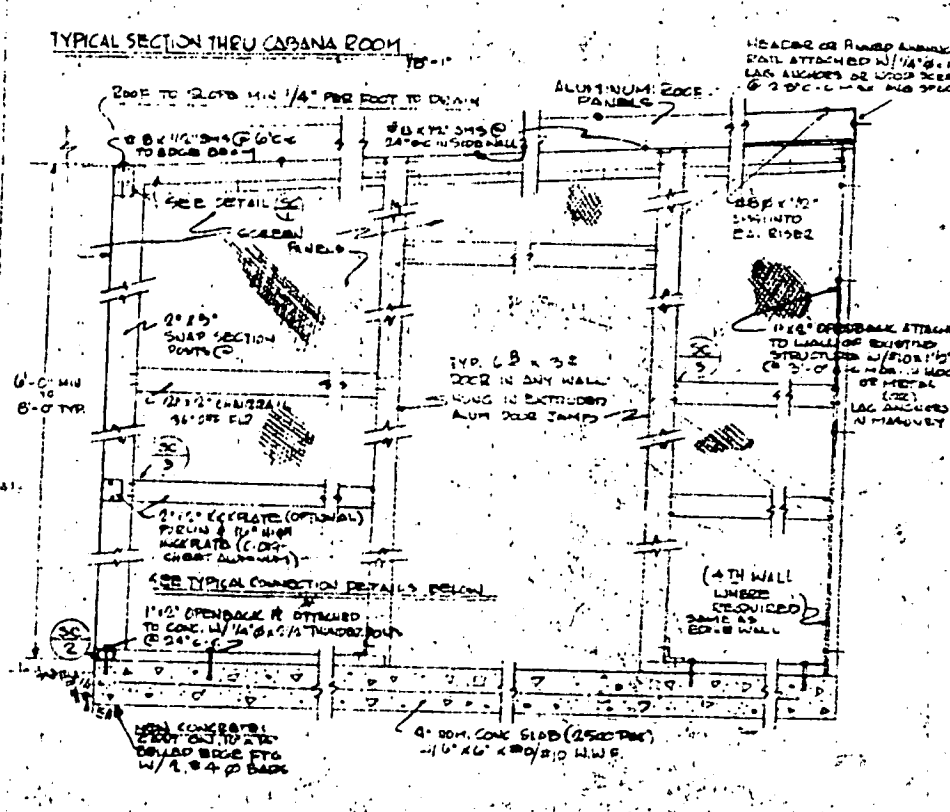
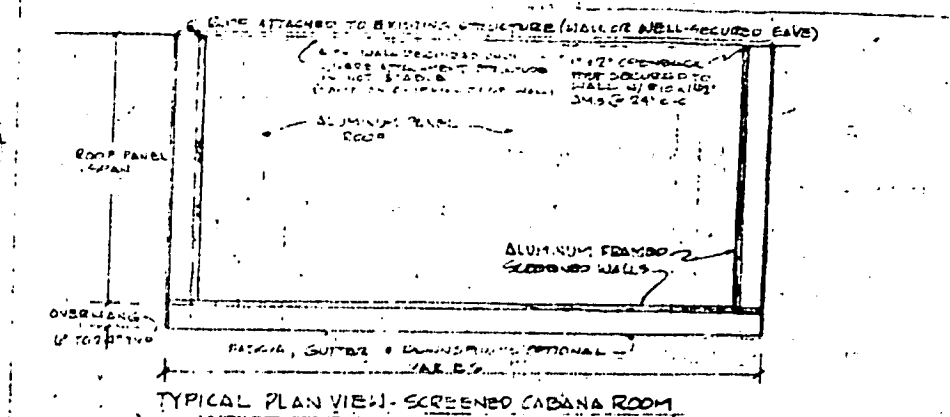


PROPERTIES OF SELF-MATING BEAMS

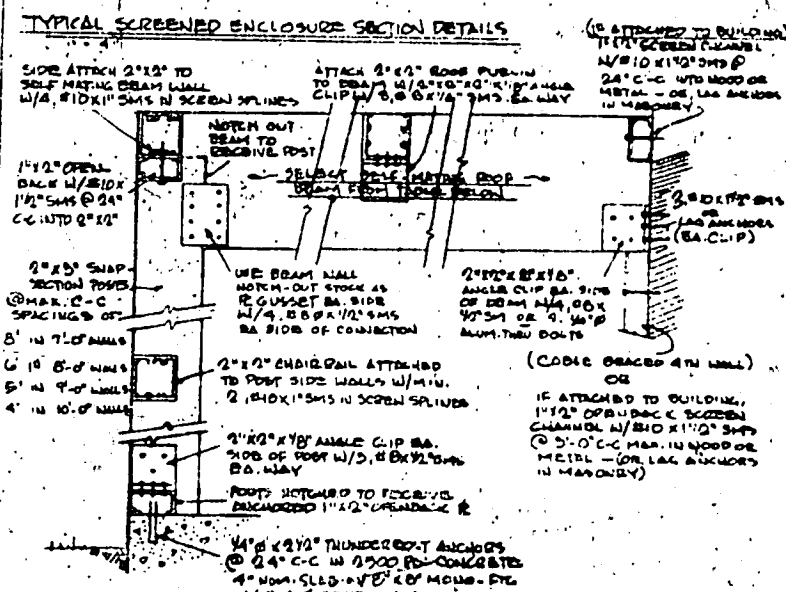
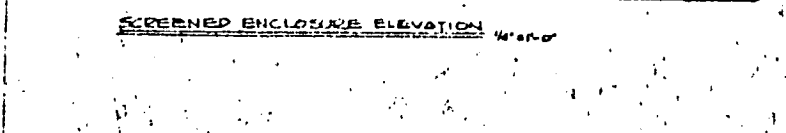
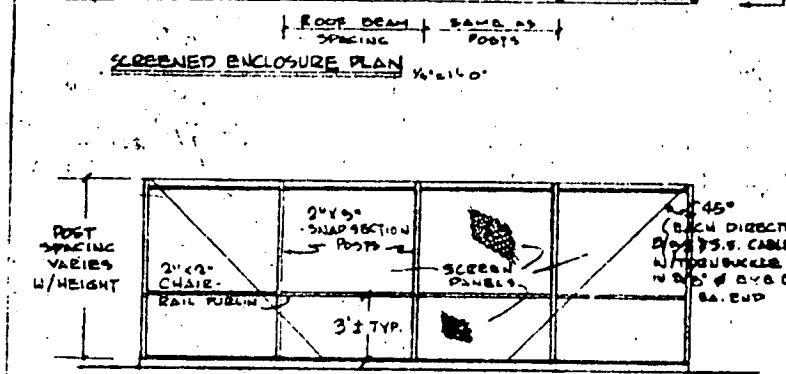
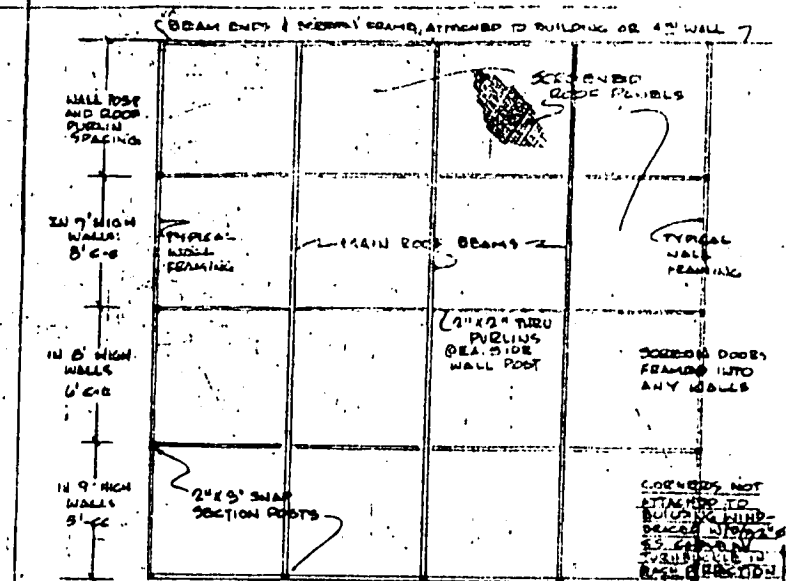
DEPTH	I_x	I_y	S_x	S_y	A
4"	0.115	0.045	1.06	0.48	0.48
6"	2.109	0.055	1.86	0.75	1.14
7"	0.225	0.055	3.69	0.98	1.14



SCREENED CABANA ROOM DETAILS



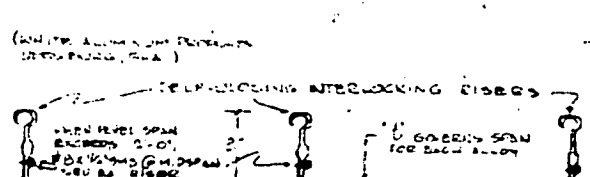
SCREEN ENCLOSURE DETAILS



SCREENED ROOF BEAM SPAN TABLE

BEAM SIZE	MAXIMUM CLEAR SPAN FOR BEAMS SPACED AS SHOWN, CENTER TO CENTER					
	4'-0" C-C	5'-0" C-C	6'-0" C-C	8'-0" C-C	10'-0" C-C	12'-0" C-C
2" X 4" SELF-MATING	25'-0"	22'-6"	21'-6"	20'-0"	19'-0"	18'-0"
2" X 6" SELF-MATING	32'-10"	29'-6"	28'-3"	26'-0"	25'-0"	24'-4"
2" X 7" SELF-MATING	46'-0"	41'-0"	39'-10"	36'-10"	35'-4"	34'-0"

ALUMINUM ROOF PANEL SYSTEM



MAXIMUM SPAN FOR 120 MPH WIND - 20 PSF LL

ALLOY	6" X 0.092"	6" X 0.076"
3003 H14	14'-0"	12'-0"
3005 H16	14'-9"	12'-7"

ENGINEERING NOTE

STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH SOUTHERN STANDARD BUILDING CODE 1974 AMENDMENTS.

DESK'D LOADS CONSIDERED:
DL + 20 PSF LL
120 MPH WIND VELOCITY PRESSURES

WHERE LOCAL ORDINANCES IMPOSE FURTHER LIMITATIONS OF SPANS OR PROJECTIONS, SUCH ORDINANCES SHOULD BE ADHERED TO IN APPLICATION OF THIS DESIGN.

CHARLES P. CLINE, P.E.
FLORIDA REG. NO. 12295

RECEIVED OCT 17 1979

JAN 10/24/79

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.

J. J. JENNIFER
10/24/79

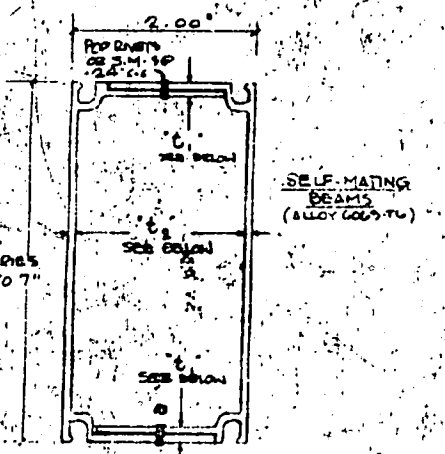
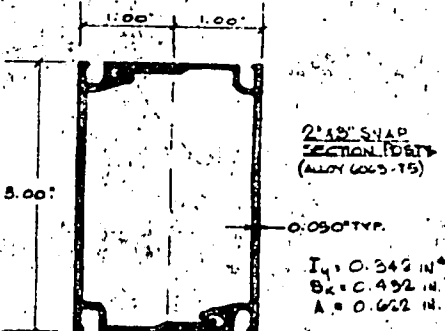
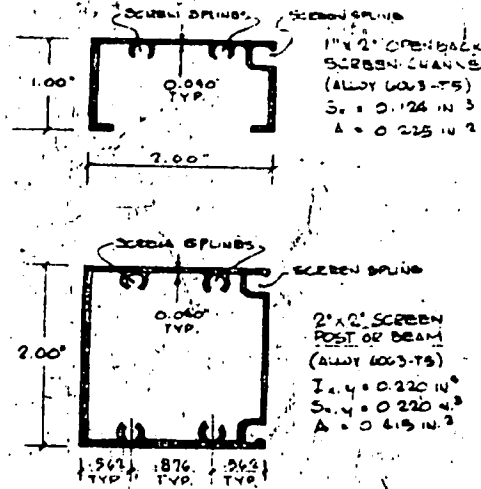
HARLAN ENGINEERING LABORATORIES, INC.
PO BOX 9050
LAKELAND, FLORIDA 33805

MASTER PLAN FOR SCREENED CABANA ROOMS & ENCLOSURES

FOR
CLIMATROL, INC.
5919 SOUTH INDUSTRY ROAD
COCOA, FLORIDA 32922

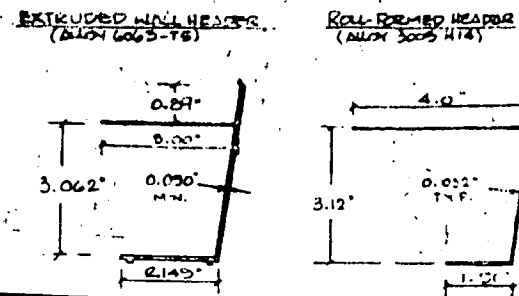
JOB NO. E-7% - LT 6 DATE: 7/17/76

EXTRUDED POST AND BEAM SECTION

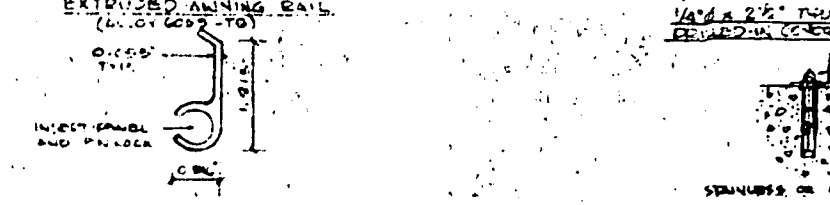
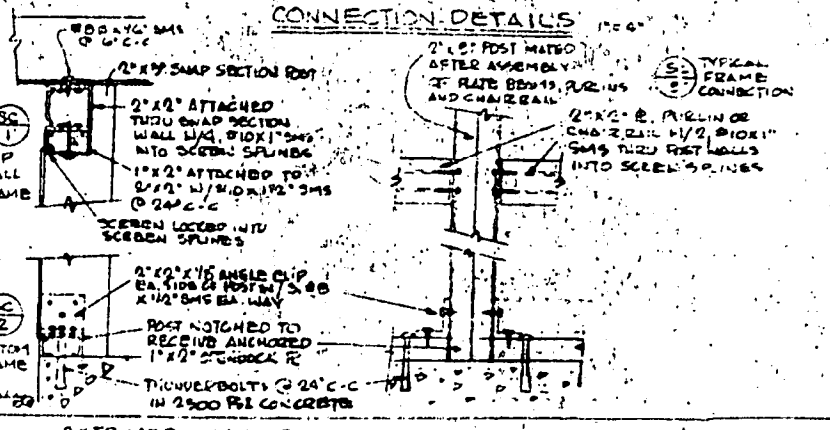
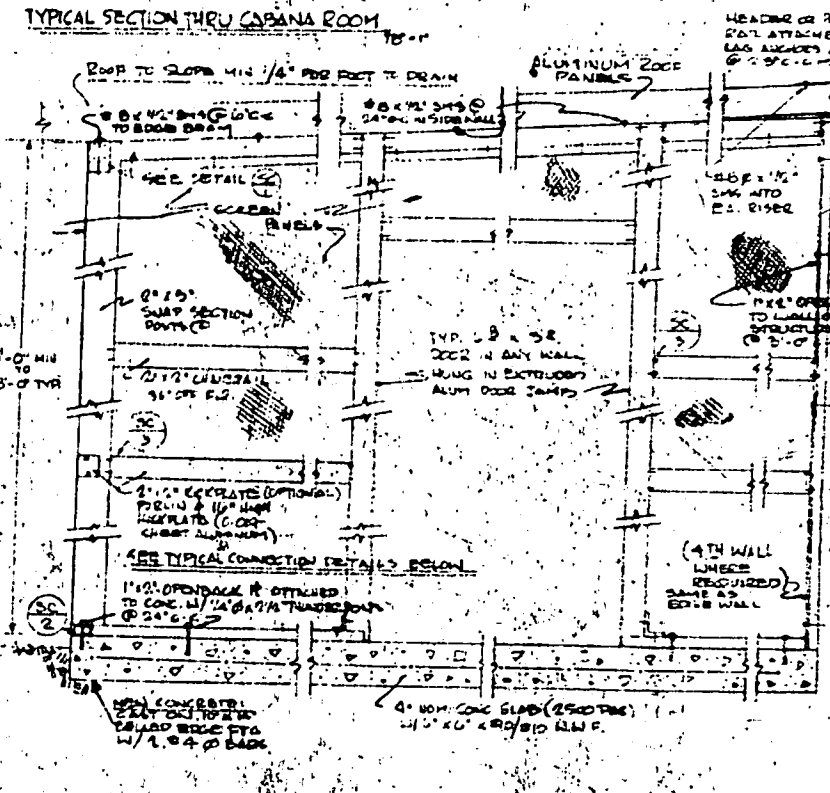
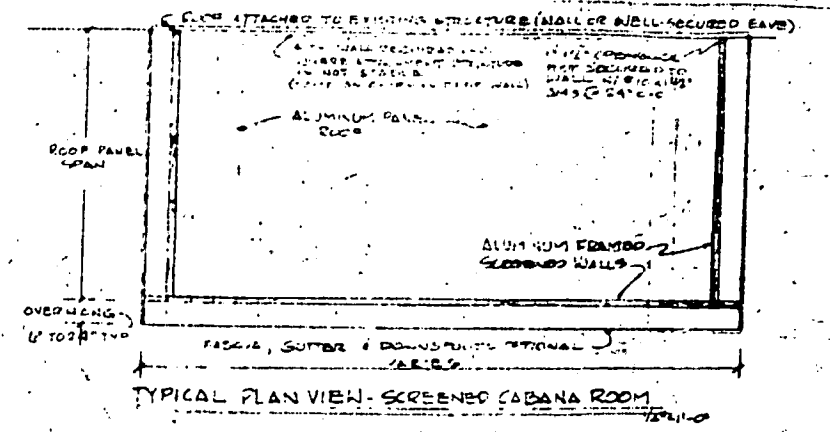


PROPERTIES OF SELF-MATING BEAMS

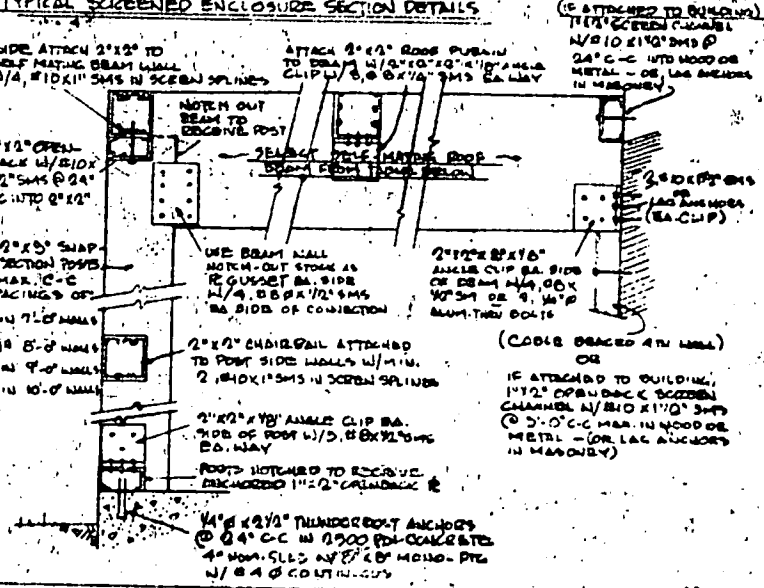
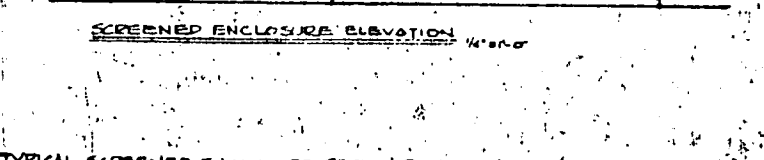
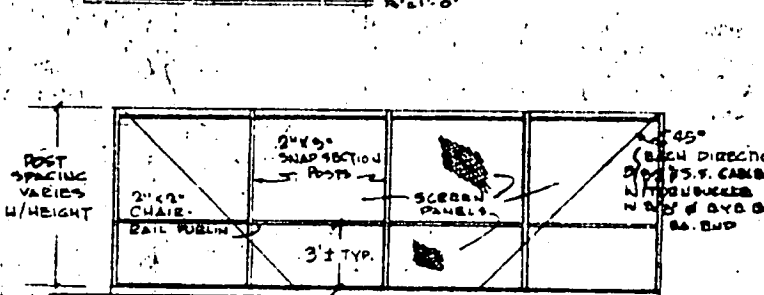
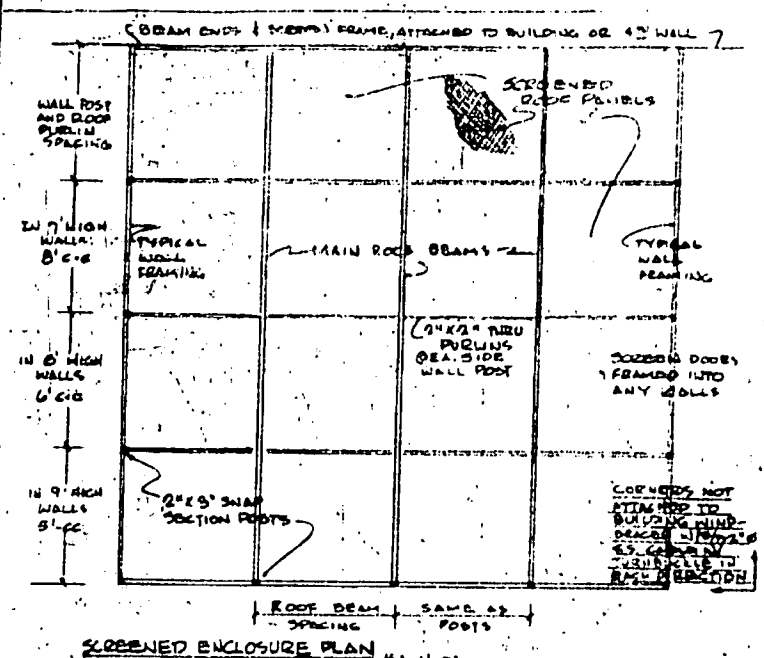
DEPTH	C_x	C_y	S_x	I_x
4"	0.115"	0.045"	1.08 IN ³	0.48 IN ⁴
6"	0.109"	0.055"	1.86 IN ³	0.75 IN ⁴
7"	0.225"	0.055"	3.69 IN ³	0.98 IN ⁴



SCREENED CABANA ROOM DETAILS



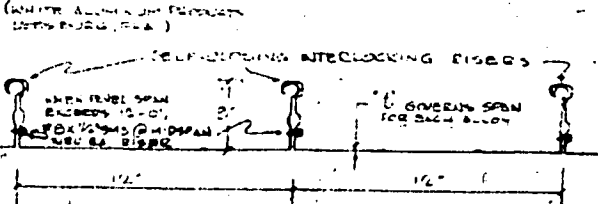
SCREEN ENCLOSURE DETAILS



SCREENED ROOF BEAM SPAN TABLE

BEAM SIZE	MAXIMUM CLEAR SPANS FOR BEAMS SPACED AS SHOWN, CENTER TO CENTER	4'-0" C-C	5'-0" C-C	6'-0" C-C	7'-0" C-C	8'-0" C-C
2" X 4" SELF-MATING	25'-0"	21'-6"	21'-6"	20'-0"	19'-0"	18'-6"
2" X 6" SELF-MATING	32'-10"	29'-6"	28'-5"	26'-0"	25'-0"	24'-4"
2" X 7" SELF-MATING	46'-0"	41'-0"	39'-10"	36'-10"	35'-4"	34'-0"

ALUMINUM ROOF PANEL SYSTEM



MAXIMUM SPANS FOR 120 MPH WIND - 20 PSF LL

ALLOY	6" x 0.092"	6" x 0.026"
3003 H14	14'-0"	12'-0"
3003 H16	14'-9"	12'-7"

(EXCEPT WHERE OTHERWISE LIMITED BY LOCAL ORDINANCES.) SAFE LOAD-CARRYING PROPERTIES AND SPANS FOR THESE ROOF PANELS HAVE BEEN VERIFIED BY LOAD TESTS ON ROOF ASSEMBLIES CONDUCTED UNDER THE SUPERVISION OF THE UNDERSIGNED ENGINEER. DEFLECTION IS LIMITED TO 1/80 OF SPAN AT 20 PSF LL IN ALL CASES. SHEET METAL FASTENING (SMF) SHALL BE STAINLESS OR COPPER PLATED METAL ALUMINUM BOLTS SHALL BE ALLOY 2024-T6

ENGINEERING NOTE

STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH SOUTHERN STANDARD BUILDING CODE 1974 AMENDMENTS. DESIGN LOADS CONSIDERED: DL + 20 PSF LL 120 MPH WIND VELOCITY PRESSURES. WHERE LOCAL ORDINANCES IMPOSE FURTHER LIMITATIONS OF SPANS OR PROTECTIONS, SUCH ORDINANCES SHOULD BE ADHERED TO IN APPLICATION OF THE DESIGN.

CHARLES D. CLINE, P.E.
FLORIDA REG. NO. 12235

RECEIVED OCT 17 1979

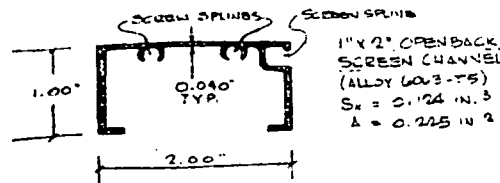
Approval of these plans in no way relieves the contractor or builder of complying with the Town of Sewall's Point's Ordinances, the South Florida Building Code and the State of Florida Model Energy Efficiency Building Code.

HARLAN ENGINEERING LABORATORIES, INC.
PO BOX 5050
LAKELAND, FLORIDA 33805

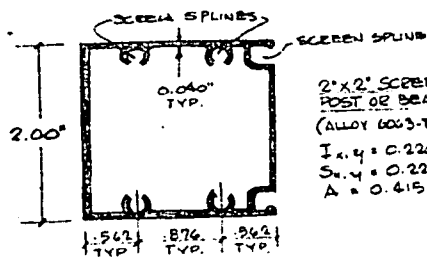
MASTER PLAN FOR SCREENED CABANA ROOMS & ENCLOSURES
FOR
CLIMATROL, INC.
599 SOUTH INDUSTRY ROAD
COCOA, FLORIDA 32922

JOB NO. E-726-LTG DATE: 7/17/79

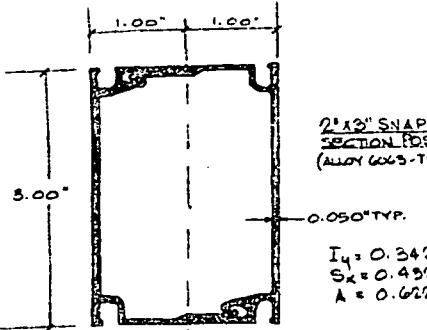
EXTRUDED POST AND BEAM SECTIONS



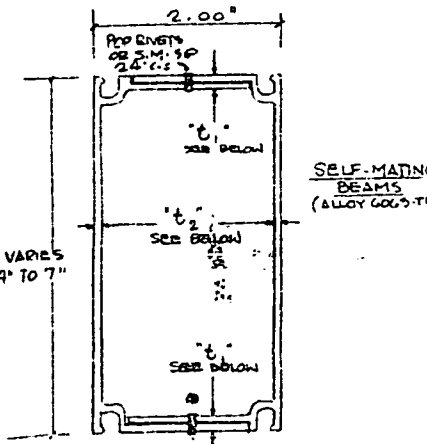
1" x 2" OPEN BACK SCREEN CHANNEL (ALLOY 6063-T5)
 $S_x = 0.124 \text{ IN}^2$
 $I_x = 0.225 \text{ IN}^4$



2" x 2" SCREEN POST OR BEAM (ALLOY 6063-T5)
 $I_x = 0.220 \text{ IN}^4$
 $S_x = 0.220 \text{ IN}^3$
 $A = 0.415 \text{ IN}^2$



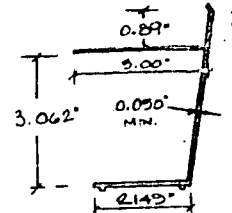
2" x 2" SNAP SECTION POSTS (ALLOY 6063-T5)
 $I_x = 0.342 \text{ IN}^4$
 $S_x = 0.492 \text{ IN}^3$
 $A = 0.622 \text{ IN}^2$



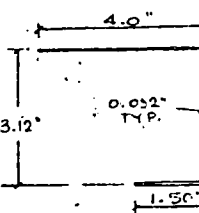
SELF-MATING BEAMS (ALLOY 6063-T5)

DEPTH	b	b ₂	S _x	I _x
4"	0.115"	0.045"	1.00 IN ³	0.48 IN ⁴
6"	0.109"	0.055"	1.86 IN ³	0.75 IN ⁴
7"	0.225"	0.055"	3.69 IN ³	0.98 IN ⁴

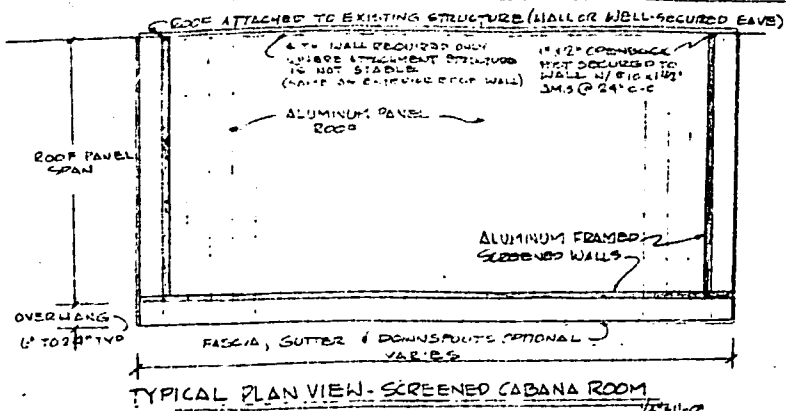
EXTRUDED WALL HEADER (ALLOY 6063-T5)



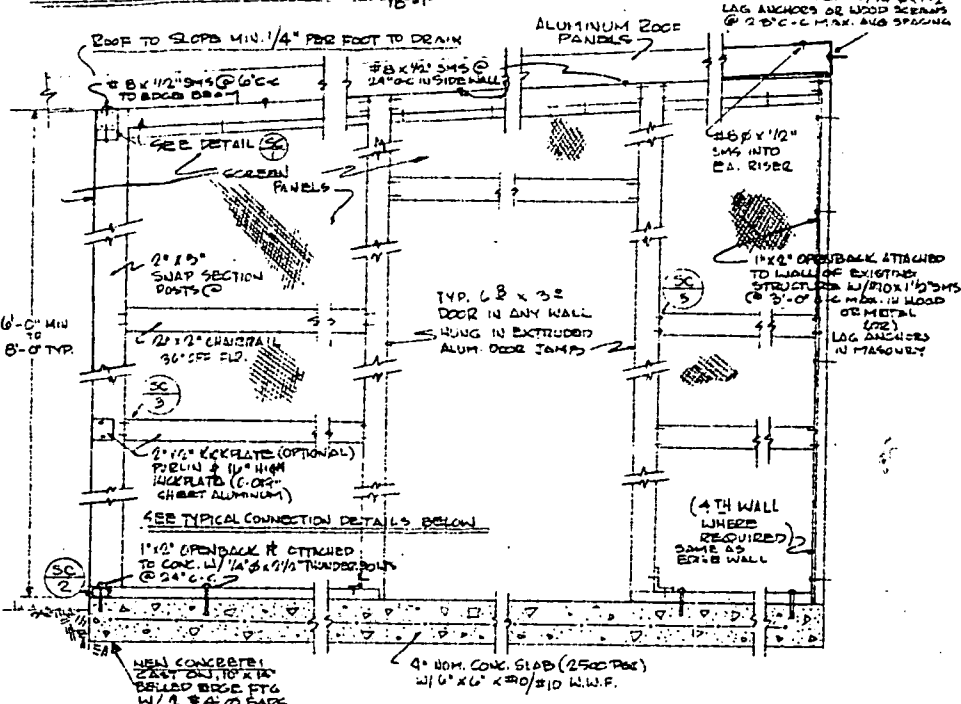
ROLL-FORMED HEADER (ALLOY 3003-H14)



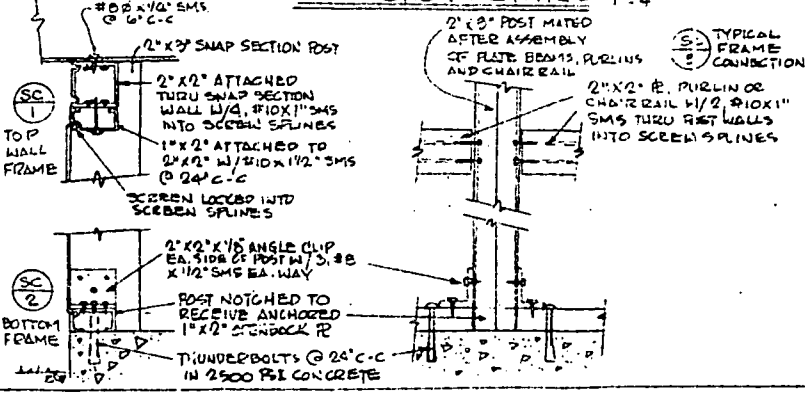
SCREENED CABANA ROOM DETAILS



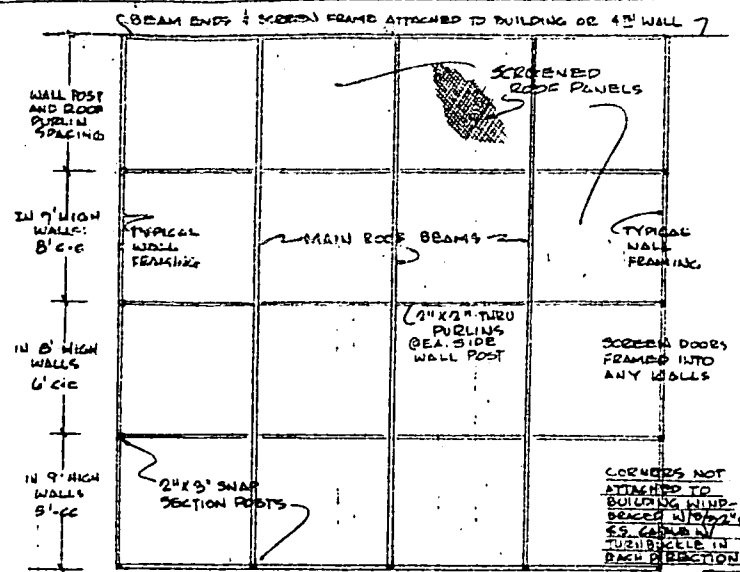
TYPICAL SECTION THRU CABANA ROOM



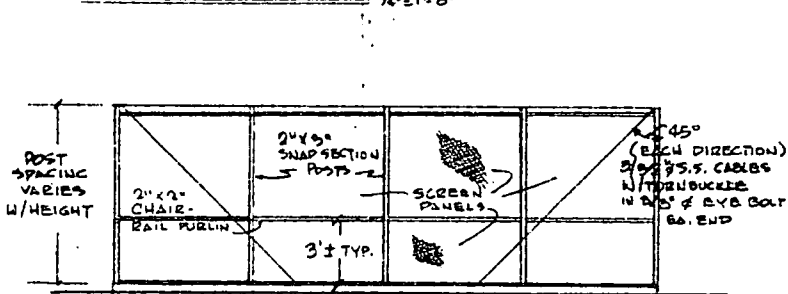
CONNECTION DETAILS



SCREEN ENCLOSURE DETAILS



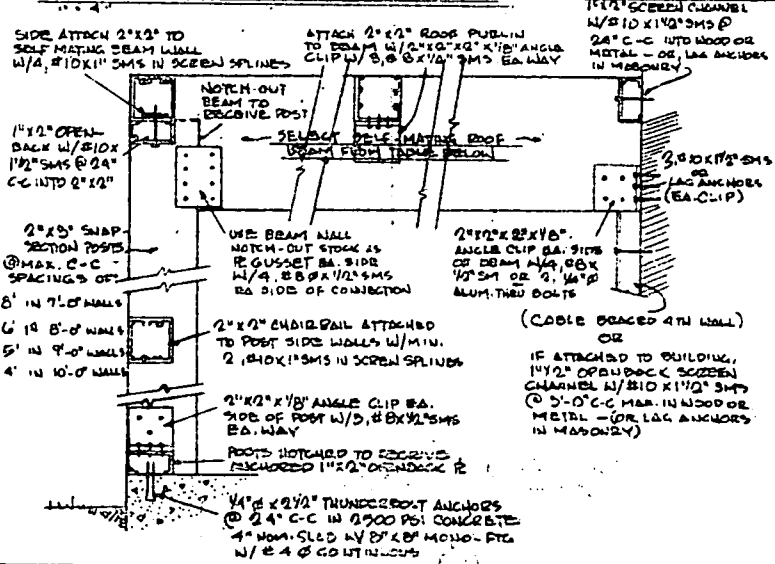
SCREENED ENCLOSURE PLAN



SCREENED ENCLOSURE ELEVATION



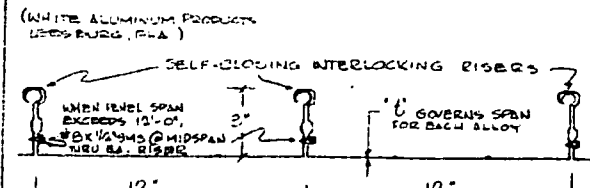
TYPICAL SCREENED ENCLOSURE SECTION DETAILS



SCREENED ROOF BEAM TABLE

BEAM SIZE	MAXIMUM CLEAR SPAN FOR BEAMS SPACED AS SHOWN, CENTER TO CENTER					
	4'-0" C-C	6'-0" C-C	8'-0" C-C	10'-0" C-C	12'-0" C-C	14'-0" C-C
2" x 4" SELF-MATING	25'-0"	21'-6"	21'-6"	20'-0"	19'-0"	18'-0"
2" x 6" SELF-MATING	32'-10"	29'-6"	28'-3"	26'-0"	25'-0"	24'-4"
2" x 7" SELF-MATING	46'-0"	41'-0"	39'-10"	36'-10"	35'-4"	34'-0"

ALUMINUM ROOF PANEL SYSTEM (ALLOY 3003-H14 OR 3003-H16)



ALLOY	MAXIMUM SPANS FOR 120 MPH WIND - 20 PSF LL	
	6" = 0.092"	6" = 0.076"
3003 H14	14'-0"	12'-0"
3003 H16	14'-9"	12'-7"

(* EXCEPT WHERE FURTHER LIMITED BY LOCAL ORDINANCE.)
 SAFE LOAD-CARRYING PROPERTIES AND SPANS FOR THESE ROOF PANELS HAVE BEEN VERIFIED BY LOAD TESTS ON ROOF ASSEMBLIES CONDUCTED UNDER THE SUPERVISION OF THE UNDERSIGNED ENGINEER. DEFLECTION IS LIMITED TO L/60 OR LESS AT 20 PSF LL IN ALL CASES.

SUBST. METAL SCREENS (SMS) SHALL BE STAINLESS OR COPPER PLATED STEEL.
 ALUMINUM BOLTS SHALL BE ALLOY 2024-T4

ENGINEERING NOTE

STRUCTURES DETAILED IN THESE PLANS WERE DESIGNED IN ACCORDANCE WITH SOUTHERN STANDARD BUILDING CODE 1974 AMENDMENTS.
 DESIGN LOADS CONSIDERED:
 DL + 20 PSF LL
 120 MPH WIND VELOCITY PRESSURES
 WHERE LOCAL ORDINANCES IMPOSE FURTHER LIMITATIONS OF SPANS OR PROTECTIONS, SUCH ORDINANCES SHOULD BE ADHERED TO IN APPLICATION OF THE DESIGN.

Charles P. Eline, P.E.
 CHARLES P. ELINE, P.E.
 FLORIDA REG. NO. 12255

RECEIVED OCT 17 1979

Jan 10/24/79
 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

HARLAN ENGINEERING LABORATORIES, INC.
 P.O. BOX 5050
 LAKELAND, FLORIDA 33803

MASTER PLAN FOR SCREENED CABANA ROOMS & ENCLOSURES
 FOR
 CLIMATROL, INC.
 5919 SOUTH INDUSTRY ROAD
 COCOA, FLORIDA 32922

JOB NO. E-76-LTG DATE: 7/17/76

S. Palm Row

100'

LEGAL:

LOT A - PALM ROW
REDEVELOPMENT
PLAT OF BKA-PS 88
ST. JOHNS COUNTY

~~NORTH~~

RESIDENCE

Pool

50'

100'

17'

29'

100'

Plot Plan
SCALE 1/4" = 20'-8"

PALM RD

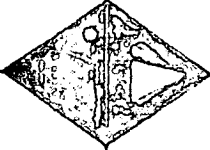
- EQUIPMENT LIST
- 1 300 V. LIGHT SCORER
 - 1 300 V. TRANSFORMER
 - 1 JUNX. BOX

RECEIVED OCT 17 1979

RECEIVED OCT 17 1979

CLIMATROL FLORIDA CORPORATION

529 SOUTH INDUSTRY ROAD - COCOA, FLORIDA - 632-0264



Climatrol Florida Corporation
Salvatore Fapore
State Certification No. CRC001786

To Whom It May Concern:

Please accept this letter as my authorization for the undersigned to acquire Building Permits in my behalf for Climatrol Florida Corporation.

Gi. Braunhart
Undersigned

RECEIVED OCT 19 1979

For the job located at

8th Palm Road

Lot 4 Block _____

Subdivision Palm Row

Property Owner TOWNSEND

Sincerely,

Salvatore Fapore
Salvatore Fapore

State of Florida
County of Brevard

Sworn to and subscribed before me this 19th
day of OCTOBER 1979.

Grace Meadows
Notary

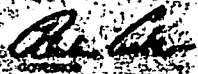
(SEAL)

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES NOV. 9, 1979.

STATE OF FLORIDA Department of Professional And Occupational Regulation
CONSTRUCTION INDUSTRY LICENSING BOARD

DATE: **05/29/77** FILE NO. **CR C001786** BATCH NO. **300**
THE CERTIFIED RESIDENTIAL CONTRACTOR
NAMED BELOW IS CERTIFIED
UNDER THE PROVISIONS OF CHAPTER **468** FOR
THE YEAR EXPIRING **JUNE 30, 1979**

FAPORE SALVATORE
CLIMATROL FLORIDA CORP
529 S INDUSTRY ROAD
COCOA FL 32922



DISPLAY IN A CONSPICUOUS PLACE

1336

POCH ROOM

ADDITION

1336

TOWN OF SEWALL'S POINT FLORIDA

Permit No.

Date _____

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

This application must be accompanied by three 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 Thomas Hughes Present address 8 Palm Road

Phone _____ Contractor Sylvester Construction Address P.O. Drawer E. Point Saleraso

Phone 283-2200

Where licensed Manatee County License number 00066

Electrical contractor Saldane Elec License number 00112

Plumbing contractor Master Plumbing License number 00061

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

Porch Room ADDITION - 8 Palm Road
State the street address at which the proposed structure will be built:

Subdivision _____ Lot No. _____

Contract price \$ 40,000 Cost of Permit \$ 220.00

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 Sylvester Const.

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 Thomas G Hughes

TOWN RECORD

Date submitted _____

Approved: Jamaguerca Building Inspector Date 5/6/81

Approved: A.C. Stubbell Commissioner Date 5/13

Final Approval given: 8/14/81 Date

Certificate of Occupancy issued not Reg Date

SP/1-79

1336

336
Reg 5/21/81
Slab & Footing 5/27/81
Framing 6/5/81
Final 8/14/81

2170

REPLACE ROOF

SHINGLES

Permit No.

2170

Date

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

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

Owner Ron Mullett Present Address 8 Palm Rd.

Phone 286-5154

Contractor _____ Address _____

Phone _____

Where licensed _____ License number _____

Electrical contractor _____ License number _____

Plumbing contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: My Self & Friends

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

Same

Subdivision _____ Lot number _____ Block number _____

Contract price \$ 1000,- Cost of permit \$ 5,-

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 _____

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 Ron Mullett

TOWN RECORD

Date submitted _____ Approved: Dale Brown
Building Inspector Date

Approved: _____ Commissioner Date Final Approval given: _____ Date

Certificate of Occupancy issued (if applicable) _____
Date

SP1282

Permit No. _____

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

4106

REROOF

Owner _____

TOWN RECORD

Approved: Dale Brown
Building Inspector Date

Date submitted _____

Approved: _____
Commissioner Date

Final approval given: _____
Date

CERTIFICATE OF OCCUPANCY Issued (if applicable) _____
Date

PERMIT NO. _____

TOWN OF SEWALL'S POINT BUILDING PERMIT

DO NOT REMOVE UNTIL JOB IS COMPLETED

NO. 4290 DATE ISSUED 11/7/97

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

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

OWNER Philip Schuck
 CONTRACTOR Just Wood Fence Co
 LOT 4 BLOCK _____ SUB Palm Row
 NO. 8 Palm Road

- REQUESTS FOR INSPECTIONS REQUIRE AT LEAST 24 HOURS NOTICE.
- ALL WORK MUST BE IN COMPLIANCE WITH THE TOWN OF SEWALL'S POINT ORDINANCES, THE SOUTH FLORIDA BUILDING CODE, THE STATE OF FLORIDA ENERGY EFFICIENCY BUILDING CODE AND ELEVATIONS BASED ON THE LATEST FLOOD INSURANCE RATE MAP.
- WORKING HOURS ARE FROM 8:00 A.M. TO 5:00 P.M. MONDAY THRU SATURDAY.

TO CONSTRUCT FENCE

REMARKS:

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
ROOF:		
A. TIN TAG		
B. FINAL		
POOL:		
A. STEEL & GROUND		
B. DECK		
C. FINAL		
DOCK:		
A. PILINGS		
B. FINAL		
FENCE:	<u>FINAL</u>	<u>11/19/97</u>
STORM SHUTTERS:		
OTHER:		



4106

REROOF

4106

TAX FOLIO NO. 13-38-41-005-000-00040.40000

DATE _____

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

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

Owner ROGER HEDKE Present address 8 PALM ROAD
STUART, FL 34996
 Phone 561-220-9773
 Contractor Stein Co., Inc. Address 602 S Market Ave
FT. PIERCE, FL 34982
 Phone 465 9468
 Where licensed State License number CC 0142725
 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: FOR: REFOOF OF FLAT- REMOVE EXISTING, DISCARD
INSTALL 30.13 FELT-ONE PLY MODIFIED, REPAIR 2 COURSES SHAKE

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

8 PALM RD, STUART, FL 34996

Subdivision SECTION 41 Lot Number 13 Block Number 38
 Contract price \$ 3190.00 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, picking 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 [Signature]

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

Owner _____
 TOWN RECORD
 Approved: [Signature] Date _____
 Building Inspector
 Approved: _____ Date _____
 Commissioner Date _____

CERTIFICATE OF OCCUPANCY Issued (if applicable) _____ Date _____ PERMIT NO. _____

TAX FOLIO NO. _____ DATE _____

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

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

Owner _____ Present Address _____

Phone _____

Contractor _____ Address _____

Phone _____

Where licensed _____ License Number _____

Electrical Contractor _____ License Number _____

Plumbing Contractor _____ License Number _____

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

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

Subdivision _____ Lot Number _____ Block Number _____

Contract Price \$ _____ 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 of Town Commissioner "Red-Tagging" the construction project.

Contractor _____

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 A. Neetha _____

TOWN RECORD

Date submitted _____

Approved: _____
Building Inspector Date

Approved: _____ Date
Commissioner Date

Final Approval given: _____ Date

Certificate of Occupancy issued(if applicable) _____
Date

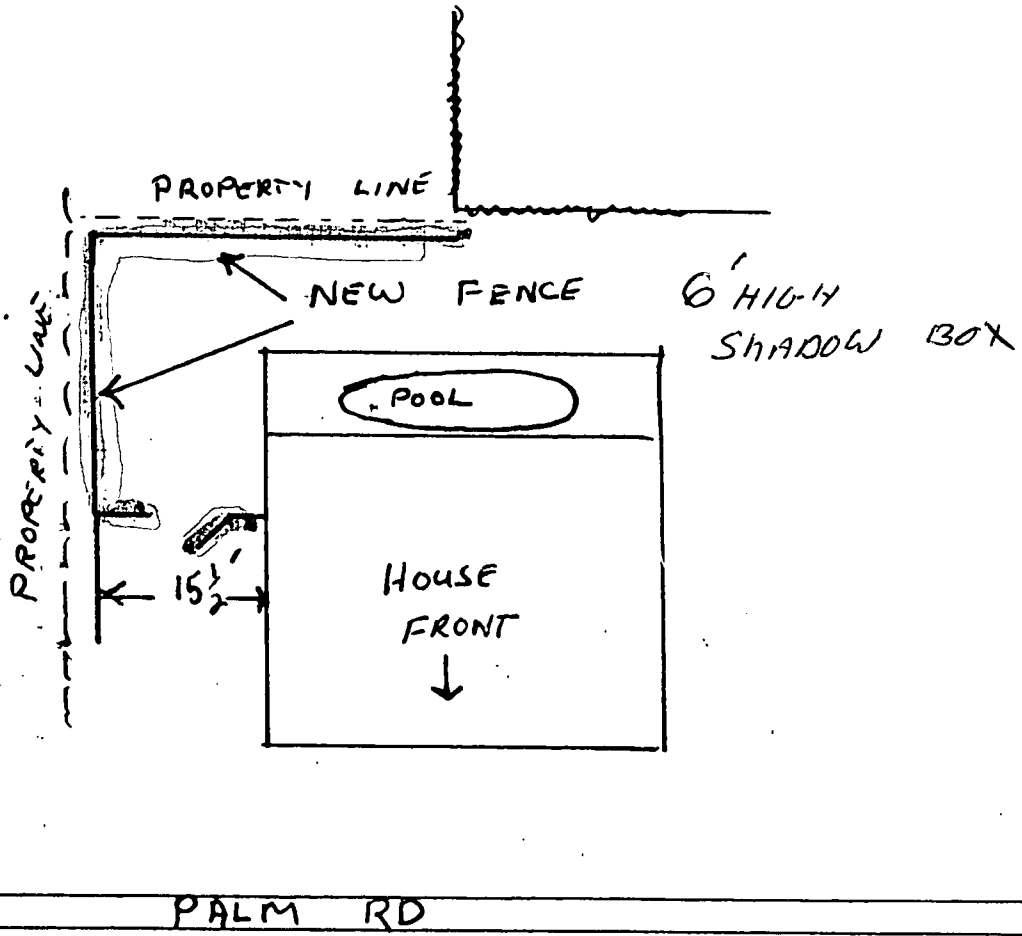
SP1282

Permit No. _____

4290

FENCE

JUSTWOOD Fence Co.
5030 Pineridge Way
Stuart, FL 34997



4290

Town of Sewall's Point

P.I.N. _____ Date Nov. 6, 1997

ACCESSORY STRUCTURE PERMIT APPLICATION to construct:

- DOCK requires prerequisite approval from State and Army Corps of Engineers.
- BULKHEAD requires prerequisite approval from State and Army Corps of Engineers.
- DETACHED GARAGE SWIMMING POOL WALL
- SOLAR WATER HEATER SCREENED ENCLOSURE
- FENCE may not require sealed drawings.

OTHER: _____

Owner's Name Philip Schuck

Owner's Address 8 Palm Rd

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

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

City SEWALL'S PT State FLA. Zip _____

Contractor's Name DANNY KIMER

Contractor's Address 5030 PINE RIDGE WAY

City STUART State FLA. Zip 34997

Job Name _____

Job Address 8 PALM RD Martin County, Stuart, FL 34966

Legal Description LOT 4 PLAT BOOK 4

Bonding Company _____

Bonding Company Address _____

City _____ State _____ Zip _____

Architect/Engineer's Name _____

Architect/Engineer's Address _____

Mortgage Lender's Name _____


Mortgage Lender's Address _____

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

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

NOV 6 19 97 1172
 63-8711/2870
 6

PAY TO THE ORDER OF TOWN HALL - SEWALLS PT \$ 25.00
TWENTY FIVE NO 1.00 DOLLARS

 **Community Savings**
 STUART, FLORIDA 34997-6895

FOR Daniel Kerner

⑆ 26 708 7 1 1 2 ⑆ 16000006 7493 7 ⑆ 1 1 7 2

© Charles American Guardian® Safety Blue DRBBL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11/7/97 BUILDING PERMIT NO. 4290

Building to be erected for PHILIP SCHUCK Type of Permit FENCE

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

Subdivision PALM ROW Lot 4 Block _____ Radon Fee _____

Address B PALM ROAD Impact Fee _____

Type of structure FENCE A/C Fee _____

Parcel Control Number: _____ Electrical Fee _____

1338410050000004040000 Plumbing Fee _____

Amount Paid 25 Check # 1172 Cash _____ Other Fees (FENCE) 25.00

Total Construction Cost \$ 1,500 TOTAL Fees 25.00

Signed X Applicant

Signed [Signature] Town Building Inspector

5168

REROOF

MASTER PERMIT NO. N/A

TOWN OF SEWALL'S POINT

Date 11/16/00

BUILDING PERMIT NO. 5168

Building to be erected for PHILIP SCHULK

Type of Permit REEROOF

Applied for by A & W ROOFING

(Contractor) Building Fee _____

Subdivision _____ Lot _____ Block _____

Radon Fee _____

Address 8 PALM ROAD

Impact Fee _____

Type of structure SPR.

A/C Fee _____

NOTE: CK. # 1907 (\$240.00)

PN 5167 - \$120.00

5168 - \$120.00

Electrical Fee _____

Parcel Control Number:

13-38-41-005-000-0004.0-40000

Plumbing Fee _____

Roofing Fee \$120.00

Amount Paid \$120.00

Check # 1907

Cash _____

Other Fees (_____)

Total Construction Cost \$ 11,980.00

TOTAL Fees \$120.00

Signed [Signature]

Applicant

Signed [Signature]

Signed

Town Building Inspector [Signature]

RE-ROOFING PERMIT

INSPECTIONS

DRY IN
PROGRESS

DATE _____
DATE _____

PROGRESS
FINAL

DATE _____
DATE 12/15/00

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!



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

Bldg. Permit Number: NOV - 9200

Phone No. (813) 894-5967

Owner or Titleholder's Name Philip Schuck
Street: 8 Palm Rd City Sewalls Point State: FL Zip 34996

Legal Description of Property: 8 Palm Rd Row revised and amended plat
Lot 4 or 346/611 Parcel Number: 13-38-41-005-000-000-40-4000

Location of Job Site: 8 Palm Road

TYPE OF WORK TO BE DONE: Re-roof - Remove shake, install plywood decking + Shingle

CONTRACTOR/Company Name: A & W Roofing Phone No. (561) 283-8100
Street: 3301 Slater Street City Stuart State: FL Zip 34997
State Registration: _____ State License: CCC057686

ARCHITECT: _____ Phone No. () _____
Street: _____ City _____ State: _____ Zip _____

ENGINEER: _____ Phone No. () _____
Street: _____ City _____ State: _____ Zip _____

AREA SQUARE FOOTAGE - SEWER - ELECTRIC:

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 first habitable floor finished elevation: _____ NGVD (minimum 1 foot above BFE)

COSTS AND VALUES

Estimated cost of construction or Improvement: \$ 11,980.00
Estimated Fair Market Value (FMV) prior to improvement: \$ _____
If Improvement, is cost greater than 50% of Fair Market Value? YES _____ NO
Method of determining Fair Market Value: _____

SUBCONTRACTOR INFORMATION: (Notification to this office of subcontractor change is mandatory.)

Electrical: _____ State: _____ License # _____
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, AIR CONDITIONERS, DOCKS, SEA WALLS, ACCESSORY BUILDINGS, SAND OR FILL ADDITION OR REMOVAL, AND 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 or AGENT SIGNATURE (Required)

Philip Schuck
Owner
State of Florida, County of: MARTIN On this the 9th day of Nov., 2000, by PHILIP SCHUCK who is personally known to me or produced DL as identification.

CONTRACTOR SIGNATURE (Required)

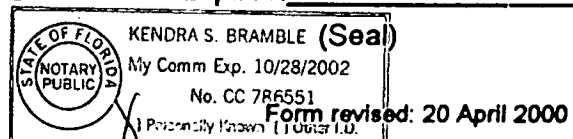
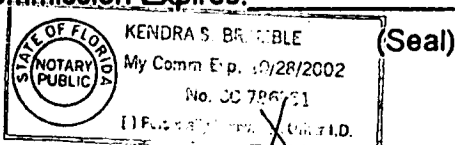
Kristopher Ashenback
Contractor
State of Florida, County of: MARTIN On this the 9th day of Nov., 2000, by KRISTOPHER ASHENBACK who is personally known to me or produced _____ as identification.

Notary Public

Notary Public

My Commission Expires: _____

My Commission Expires: _____



TREE REMOVAL (Attach sealed survey)

WTS 8 - VOA

Number of trees to be removed: _____ Number of trees to be retained: _____ Number of trees to be planted: _____ Number of Specimen trees removed: _____
Fee: \$ _____ Authorized/Date: _____

DEVELOPMENT ORDER # _____

1. ALL APPLICATIONS REQUIRE

- a. Property Appraisers Parcel Number.
- b. Legal Description of your property. (Can be found on your deed survey or Tax Bill.)
- c. Contractors name, address, phone number & license numbers.
- d. Name all sub-contractors (properly licensed).
- e. Current Survey

2. 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 architects seal and the following items:

- a. Floor Plan
- b. Foundation Details
- c. Elevation Views - Elevation Certificate due after slab inspection,
- d. Plot Plan (show desired floor elevation relative to Sea Level in front of building, plus location of driveway).
- e. Truss layout
- f. Vertical Wall Sections (one detail for each wall that is different)
- g. 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 (State Road A-1-A East Ocean Boulevard 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.
- 8. 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: _____ Date: _____

Approved by Town Engineer _____ Date: _____
(If required)

PERMIT # _____

TAX FOLIO # 13-38-41-005-000-0004.0-4000

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 THE NOTICE OF COMMENCEMENT.

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

8 Palm Road Palm Row Revised and amended plat Lot 4 or 346/611

GENERAL DESCRIPTION OF IMPROVEMENT Re-roof Shake to Shingle

OWNER: Philip Schulk

ADDRESS 8 Palm Road Sewall Point, Florida 34996

PHONE #: 513-894-5967

CONTRACTOR: A&W Construction Roofing Division

ADDRESS 3301 SE Slater Ave. Stuart, FL 34997

PHONE #: 561-283-8100 FAX #: 561-283-0292

SURETY COMPANY (IF ANY) _____

ADDRESS _____

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

PHONE #: _____ FAX #: _____

PERSONS WITHIN THE STATE OF FLORIDA DESIGNATED BY OWNER UPON WHOM NOTICES OF 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 #: _____

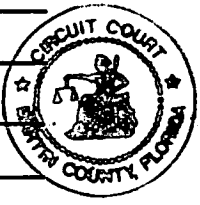
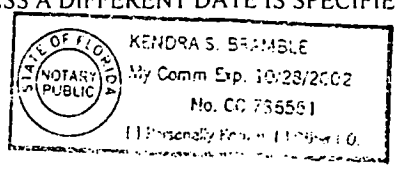
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____ THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

Philip Schulk
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 9th DAY OF NOVEMBER 2000 BY PHILIP SCHUCK

Kendra S. Bramble
NOTARY SIGNATURE

OR PERSONALLY KNOWN _____
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 MARSHA STILLER CLERR
DATE 11.9.00

ACORD

CERTIFICATE OF LIABILITY INSURANCE

CSR MR
R&WCO-3

DATE (MM/DD/YY)
07/19/00

PRODUCER
 Stuart Insurance, Inc.
 3070 S W Mapp
 Palm City FL 34990
 Phone: 561-286-4334 Fax: 561-286-9389

COPY FILE

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
 AWR of the Treasure Coast, Inc
 A & W Construction
 401 W. ...
 Stuart FL 34994

INSURER A: Employers SIF
 INSURER B: Auto Owners Insurance Co
 INSURER C: Bridgefield Insurance Co
 INSURER D:
 INSURER E:

RECEIVED
 JUL 14 2000
 BY: *[Signature]*

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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	071600	07/16/00	07/16/01	EACH OCCURRENCE	\$ 1,000,000
					FIRE DAMAGE (Any one fire)	\$ 300,000
					MED/EXP (Any one person)	\$ 10,000
					PERSONAL & ADV INJURY	\$ 1,000,000
					GENERAL AGGREGATE	\$ 1,000,000
					PRODUCTS - COMP/OP AGG	\$ 1,000,000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input checked="" type="checkbox"/> HIRED AUTOS <input checked="" type="checkbox"/> NON-OWNED AUTOS	4130139500	01/01/00	01/01/01	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 <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
C	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	04024664	04/07/00	04/07/01	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTH-ER	
					E.L. DISEASE - EA EMPLOYEE	\$ 100,000
					E.L. DISEASE - POLICY LIMIT	\$ 500,000
	OTHER					

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

CERTIFICATE HOLDER **TOWNS-1**
 Town of Sewalls Point
 1 S Sewalls Point Road
 Stuart FL 34996

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

D. CERTIFICATE OF LIABILITY INSURANCE

FP ID SB
CNAUN-1

DATE (MM/DD/YY)
12/27/99

Stuart Insurance, Inc.
10 S W Mapp
Miami 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

CNA Unisource, Inc. for
Leased Workers Assigned to
A & W Roofing / A & W Constr.
55 West Monroe Suite 2900
Chicago IL 60603-5058

INSURER A: **Continental Casualty**
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.

NSR LTR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCL175638031 (AOS)	01/01/99 01/01/00	01/01/00 01/01/01	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 2,000,000 E.L. DISEASE - EA EMPLOYEE \$ 2,000,000 E.L. DISEASE - POLICY LIMIT \$ 2,000,000
	OTHER				

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS
WITH RESPECT TO THE CO-EMPLOYER ARRANGEMENT BETWEEN A & W ROOFING AND CNA UNISOURCE

CERTIFICATE HOLDER

N ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

TOWNS-1
 Town of Sewalls Point
 1 S Sewalls Point Road
 Stuart FL 34996

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.

Mike Farley

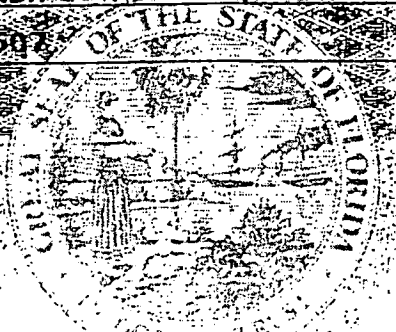
RECEIVED
SEP 26 2000
BY: *[Signature]*

FILE
be/mis

AC# 5947302
STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST. INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
8/15/2000	00004460	CB - C054507

The **BUILDING CONTRACTOR**
Named below **IS CERTIFIED**
Under the provisions of Chapter 489 FS.
Expiration date: **AUG 31, 2002**



ASHENBACK, KRISTOPHER TODD
A & W CONSTRUCTION INC
3301 SLATER ST
STUART FL 34997

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY

AC# 5947302
STATE OF FLORIDA
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONST. INDUSTRY LICENSING BOARD

DATE	BATCH NUMBER	LICENSE NBR
8/15/2000	00004460	CC - C057686

The **ROOFING CONTRACTOR**
Named below **IS CERTIFIED**
Under the provisions of Chapter 489 FS.
Expiration date: **AUG 31, 2002**



ASHENBACK, KRISTOPHER TODD
A & W CONSTRUCTION
3301 SLATER ST
STUART FL 34997

JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

CYNTHIA A. HENDERSON
SECRETARY

MARTIN COUNTY ORIGINAL
2000 COUNTY OCCUPATIONAL LICENSE 2001

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

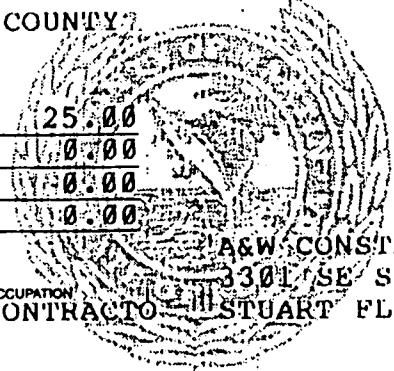
LICENSE 1999 513 020 CERT CCC57686

PHONE 561 283 8100 C NO 1761

LOCATION:
5186 SLATER ST SE

CHARACTER COUNTS IN MARTIN COUNTY

PREV YR. \$	<u>0.00</u>	LIC. FEE \$	<u>25.00</u>
\$	<u>0.00</u>	PENALTY \$	<u>0.00</u>
\$	<u>0.00</u>	COL. FEE \$	<u>0.00</u>
\$		TRANSFER \$	<u>0.00</u>
TOTAL			<u>25.00</u>



IS HEREBY LICENSED TO ENGAGE IN THE BUSINESS, PROFESSION OR OCCUPATION
OF **CONSTRUCTION/ROOFING CONTRACTOR** **A&W CONSTRUCTION ROOFING DIVISION**
3301 SE SLATER STREET
STUART FL 34997

AT ABOVE ADDRESS FOR THE PERIOD BEGINNING ON THE

8 DAY OF SEPTEMBER 2000
AND ENDING SEPTEMBER 30, 2001

RECEIPT OF PAYMENT
L.C. O'STEEN, T.C.
99 09/08/2001 OCC NORMAL
199951300
02200090305123CK
\$25.00

Weyant & Associates, Inc.

Civil & Structural Engineers
201 SW Port St. Lucie Blvd., Suite #104
Port St. Lucie, Florida 34984

Telephone 561-335-0772 WPB561-832-9094
Fax 561 335-0866

November 7, 2000

Job No. 00 1425

A&W Construction-Roofing Division
3301 SW Slater Street
Stuart, FL 34997

FILE

Subject: **ROOFING REPLACEMENT**
SINGLE FAMILY RESIDENCE
PHILIP SCHULK - 8 PALM ROAD
SEWALL'S POINT, FLORIDA

Gentlemen:

As requested, I have reviewed the roof structure for the single family residence at the address referenced above.

Based upon my review, I herein report that the existing roof trusses and related support structure will allow you to replace the existing cedar shake shingles with standard architectural roof shingles utilizing the following criteria:

5/8" CDX plywood may be placed over the 1x6 skip stripping providing that the sheet edges are installed over the trusses and the plywood nailed into the trusses with 10d nails at 4-inches on center at the edges and not more than 4-inches on center at intermediate supports. The nails should be ring-shank or equivalent.

*PROD. APPROVAL ATTACHED.
(OWENS CORNING - OAKRIDGE 30AR)*

Based on the criteria outlined above, I herein CERTIFY that this structure will support the proposed re-roof construction and meet the 140mph wind load criteria.

CERTIFIED THIS 7TH DAY OF NOVEMBER, 2000.

WEYANT & ASSOCIATES, INC.

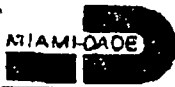
Dwight R. Weyant

Dwight R. Weyant, P.E.
President
Florida Certificate No. 20,273

*11/15/00 TOWN OF SEWALL'S POINT
REVIEW: [Signature]
BLDG. OFFICIAL*

FILE TOWN COPY
8 PALM ROAD

PN 5168



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

CONTRACTOR LICENSING SECTION
(305) 375-2527 FAX (305) 375-2538

CONTRACTOR ENFORCEMENT SECTION
(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 Product Approval of:
Oakridge 30 AR

under Chapter 8 of the Metropolitan Dade County Code governing the use of Alternate Materials and Types of Construction, and completely described in the plans, specifications and calculations as submitted by: Underwriters Laboratories, Inc. and Celotex Corporation Testing Services has been recommended for acceptance by the Building Code Compliance Office to be used in Dade County, Florida under the specific conditions set forth on pages 2-9 and the standard conditions on page 10.

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

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

ACCEPTANCE NO.: 98-0920.02
EXPIRES: 10.01.01

Raul Rodriguez
Product Control Supervisor

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

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

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

APPROVED: 10.01.98



OWENS CORNING CORPORATION

Product Control No.: 98-0820.02

PRODUCT CONTROL NOTICE OF ACCEPTANCE ROOFING SYSTEM APPROVAL

Applicant:
Owens Corning
One Foundation Drive
Savannah, GA 31408-2211

Product Control No: 98-0820.02

Approval Date: 10.01.98

Expiration Date: 10.01.01

Category: Prepared Roofing
Sub-Category: Shingle Roofing System
Type: Asphalt
Sub-Type: Dimensional

System Trade Name:

Oakridge 30 AR

Maximum Fire Classification

Deck Type

Classification

Min. 19/32" Plywood, or Wood Plank

See Limitation #1

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Oakridge 30 AR	15 1/2" x 39 3/8"	PA 110	A heavy weight, fiberglass reinforced four tab asphalt shingle.
Accessory Shingles	various	proprietary	Accessory shingles for hip, ridge and starter strip applications.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Flashing Cement	Various	ASTM D 4386	Cut back, asphalt modified adhesive for flashing attachment.	generic
Shingle Nails	Min. 12 ga. x 1 1/4"	PA 110	Corrosion resistant, deformed, roofing nails for Shingle application	generic

Frank Zuloaga, RRC
Roofing Product Control Examiner

OWENS CORNING CORPORATION

Product Control No.: 98-0920.02

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>	<u>Manufacturer</u>
Roofing Nails	Min 12ga. x 1 1/2"	PA 110	Corrosion resistant, deformed, annular ring shank roofing nails for metal and accessory attachment	generic
Mineral Surface Roll Roofing	Various	ASTM D 249	Asphalt impregnated, mineral surfaced organic roll roofing.	generic
Smooth Surfaced Asphalt Rolled Roofing	Various	ASTM D 224	Smooth surfaced organic rolled roofing	generic
Roofing Fabric	Various	ASTM D1668	Organic or inorganic woven fabric to reinforce flashing cement.	generic
# 30 Felt	Various	ASTM D 226 type II	Asphalt impregnated organic felt for use as a shingle underlayment.	generic
#15 Felt	Various	ASTM D 226, type I	Asphalt impregnated organic felt for use as a shingle underlayment.	generic

EVIDENCE SUBMITTED

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Celotex Corporation	258495B	Uplift and wind driven rain resistance PA 100-95	06/1/98
Underwriters Laboratories, Inc.	94NK9632	Wind uplift resistance PA 107	06/30/98
Underwriters Laboratories, Inc	98NK16342	Material properties ASTM J462	05/14/98
Underwriters Laboratories, Inc	96NKJ05003	Fire Resistance ASTM E108	10/11/96

The testing listed above, submitted with this application confirms the shingle assembly complies with all test requirements set forth under Chapter J4 of the South Florida Building Code. The shingle system has been tested in compliance with Miami-Dade County Protocols PA 100 and 107. The shingle component physical properties have been tested in compliance with ASTM D J462. All accessory components listed within this application are in compliance with South Florida Building Code Requirements.



Frank Zuloaga, RRC
 Roofing Product Control Examiner

OWENS CORNING CORPORATION

Product Control No.: 98-0920.02

SYSTEM APPLICATION

Slope Range: 2":12" and Greater

Underlayment:

Underlayment shall be applied in accordance with the South Florida Building Code: All underlayments shall be applied in a double layer of ASTM D 226, type I with a 19" overlap or by the application of a single layer of ASTM D 226, type II organic felt or an ASTM D 2626 coated base sheet as a base ply with a 4" overlap. End laps shall be 6". Underlayment shall be installed with minimum 12 ga. x 1 1/2" corrosion resistant roofing nails and minimum 32 ga. x 1 1/4" diameter tin caps, spaced 12" o.c. in a grid pattern in the field and 6" o.c. at the laps. Nails shall penetrate through the sheathing or wood plank a minimum of 1/2" or penetrate a 1" or greater thickness of lumber a minimum of 1".

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

Edge Metal:

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

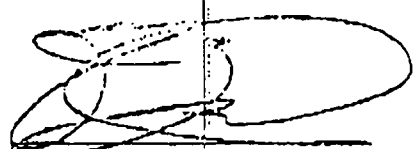
Note: All intersections, eaves, rakes, valleys, gable ends, and starter course shall be set in a 8" wide strip of ASTM D 4586 flashing cement.

Valleys:

Valleys may be applied in an open, closed or weaved fashion.

Install a 36" wide sheet of ASTM D 249 mineral surfaced rolled roofing; or ASTM D 224 smooth roll roofing felt centered over the valley and set in a full bed of hot asphalt or ASTM D 4586 flashing cement over the underlayment. The roll roofing shall be nailed 6" o.c. with minimum 12 ga. x 1 1/2" roofing nails at each edge. Nails shall penetrate the sheathing or wood plank a minimum of 1/2" or penetrate a 1" or greater thickness of lumber a minimum of 1". Endlaps shall be 12" and adhered with hot asphalt or ASTM D 4586 flashing cement.

A minimum 13" wide valley metal; in compliance with 3408 of the SFBC, shall be centered over the valley and set in a full bed of hot asphalt or ASTM D 4586 flashing cement. Valley metal shall be fastened with minimum 12 ga. x 1 1/4" annular ring shank roofing nails of compatible materials spaced 12" o.c. 1" in from each exterior edge. Nails shall penetrate the sheathing or wood plank a minimum of 1/2" or penetrate a 1" or greater thickness of lumber a minimum of 1". Strip in the two exterior edges with flashing cement and approved reinforcement. Valley metal overlaps shall be 12" minimum and fully adhered.


Frank Zuloaga, RRC
Roofing Product Control Examiner

OWENS CORNING CORPORATION

Product Control No.: 9S-0820.02

Starter strip:

The starter strip may be either a row of non-laminated shingles trimmed to the shingle manufacturer's recommendations or a strip of mineral-surfaced roll roofing not less than 7 inches wide. Starter strip and shingles shall overhang the eaves by $\frac{1}{4}$ " to $\frac{1}{2}$ ".

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

If shingles without a self-sealing strip are applied, the tabs shall be removed and ASTM D 4536 flashing cement shall be applied in spots approximately the size of a quarter at the corner of each tab of the first course. Starter shingles shall be nailed along a line not greater than 4" above the eave line nailing not greater than 6" o.c.. Trim at least three inches from the end of the first shingle to ensure that the cutouts of the first course are not placed over the starter strip joints.

If roll roofing is used for the starter strip, nail along a line not greater than 4" above the eave line nailing not greater than 12" o.c. ASTM D 4536 flashing cement shall be applied as noted above for non sealing shingle starter. If more than one piece of roll roofing must be used, the end joints shall be butted. Joints shall be staggered with succeeding shingle joints. Number of starter joints shall be kept to a minimum.

First and Succeeding Courses:

Be sure the first course is laid straight, checking it regularly during application against a horizontal chalk line. A few vertical chalk lines aligned with the ends of shingles in the first course will ensure proper alignment of cutouts. A shingle hatcher is an acceptable alternative to the use of succeeding chalk lines. If starter used does not provide a seal strip, bond the tabs of each shingle in the first course to the starter strip by placing a spot of ASTM D 4536 flashing cement about the size of a quarter on the starter strip beneath each tab if a non self sealing starter is used. Avoid excessive use of the cement, as it may cause blistering.

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

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

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

Fastening:

Shingles shall be fastened with a minimum of six nails. Fasteners shall be minimum 12 ga. x 1 1/4" corrosion resistant roofing nails. Place the fasteners according to fastening Detail 'B', attached. Align the shingles properly to avoid exposing fasteners in the course below. Fasteners shall penetrate through the sheathing or wood plank a minimum of $\frac{1}{16}$ " or penetrate a 1" or greater thickness of lumber a minimum of 1". Fasteners shall be driven straight and flush, and shall not break the shingle surface with the fastener

OWENS CORNING CORPORATION

Product Control No.: 98-0820.02

head. Do not drive fasteners into knot holes or cracks in the roof deck. Repair faulty fastening immediately. If fastener does not penetrate the deck properly, remove the fastener and repair the hole in the shingle with ASTM D 4536 flashing cement or replace the entire shingle.

Do not nail into or above factory-applied adhesives. Ensure no cutout or end joint is less than 2 inches from a nail in an underlying course.

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

Flashing:

Roof planes that butt against vertical walls shall be step flashed with 10" long metal shingles which are 2" wider than the exposed face of the roofing shingles. Place the first flashing unit over the end of the starter strip and position it so that the tab of the end shingle in the first course covers it completely. Secure the horizontal arm to the roof with two approved roofing nails. Do not nail flashing to the wall; settling of the roof could damage the seal. Apply the first course of shingles up to the wall. Position the second step flashing strip over the end shingle in the first course 5 inches up from the butt so that the tab of the end shingle in the second course covers it completely. Fasten the horizontal arm to the roof. The second course of shingles follows, the end is flashed as in the preceding courses and so on to the top of the intersection. Bring siding or other wall treatment down over the vertical sections of the step flashing to serve as cap flashing. Wall treatment or cap flashing shall terminate a minimum of 3" above the roof line.

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

Soil Stacks and Vent Pipes:

Apply shingles up to the vent pipe. Cut a hole in a shingle to go over the pipe and set the shingle in ASTM D 4536 flashing cement. A preformed flashing flange that fits snugly over the pipe is then placed over the shingle and vent pipe and set in approved flashing cement. Place the flange over the pipe to lay flat on the roof. After the flashing is in place, resume shingle application. Cut shingles in successive courses to fit around the pipe and embed them in approved flashing cement where they overlap the flange. Avoid excessive use of cement as it may cause blistering. Do not drive fasteners close to the pipe. The lower part of the flange shall overlap the lower shingles and the side and upper shingles shall overlap the flange.

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



Frank Zuloaga, RRC
Roofing Product Control Examiner

Chimneys:

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

Install 26 ga. corrosion resistant metal, or other approved corrosion resistant materials, as base flashing between the chimney and the roof deck, on all sides. Apply the base flashing to the low side of the chimney first. Bend the base flashing so that the lower section extends at least 4" over the shingles and the upper section extends at least 12" up the vertical face of the chimney. Work the flashing firmly and smoothly into the joint between the shingles and chimney. Set both the roof and chimney overlaps in approved flashing cement; placed over the shingles and on the chimney face. The flashing may be secured against the chimney with one or two nails to hold it in place until the cement sets. Use metal step flashing for the sides of the chimney, positioning the units in the same manner as flashing on a vertical sidewall. Cut, bend and apply the step flashing around the side of the chimney. Secure each flashing unit to the masonry with approved flashing cement and to the deck with approved nails. Embed the end shingles in each course that overlap the flashing in an 3" bed of approved flashing cement. Place the rear base flashing over the cricket and the high side of the chimney.

Apply the high side base flashing by bringing the end shingles in each course up to the cricket and secure in a bed of approved flashing cement. Cap flashings shall be installed over all base flashings. Set the metal cap flashing into the brickwork or exterior siding material. If brick, rake out the mortar joint to a depth of 1 1/4 inches and insert the bent edge of the flashing into the cleared joint. Refill the joint with mortar. Bend the cap flashing down to overlap the base flashing. Use one continuous piece of cap flashing on the low side of the chimney. On the sides and high side of the chimney, use several pieces of similar-sized flashing, trimming each to fit the particular location of brick joint or substrate material. Start the side units at the lowest point and overlap at least 3 inches. Chimney crickets shall be waterproofed in compliance with options published by the shingle manufacturer. If crickets are formed from wood, or other nailable materials a double layer underlayment shall be applied prior to waterproofing.

Hips and Ridges:

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

Maximum Fire Classification:

See Limitation #1

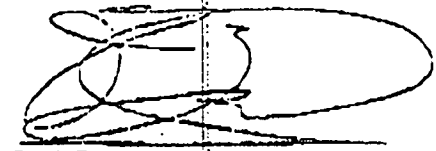
OWENS CORNING CORPORATION

Product Control Note: 9S-0820.02

LIMITATIONS:

1. Fire classification is not part of this acceptance, refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Shingles shall be labeled with the Miami-Dade Logo or the wording "Miami-Dade County - Dade Product Control Approved".
3. The manufacturer shall provide clearly written application instructions.
4. Underlayment materials and application shall be in compliance with Chapter 34 of the South Florida Building Code.
4. This is a general application procedure for asphalt and modified asphalt shingles. Manufacturers may place additional requirements upon roof system installations in the South Florida Building Code jurisdiction. Consult manufacturer's application instructions before system installation.
5. Exposure and course layout shall be in compliance with Detail 'A', attached.
6. Nailing shall be in compliance with Detail 'B', attached.
7. System shall not be installed at slopes less than 2":12".

This acceptance is a new system acceptance.

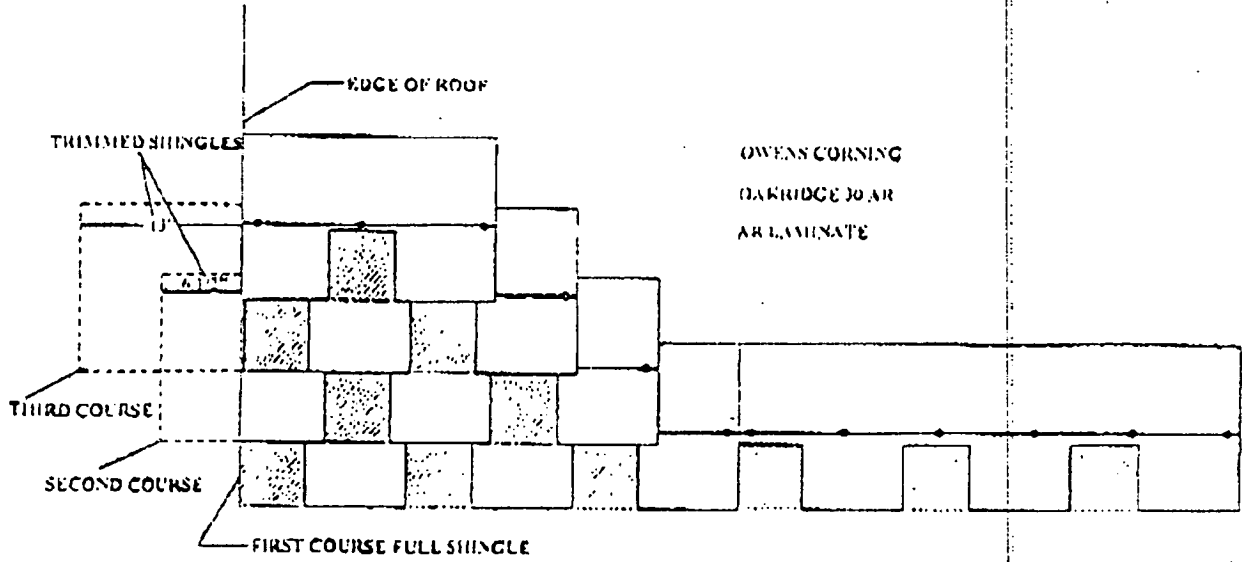


Frank Zuloaga, R.R.C.
Roofing Product Control Examiner

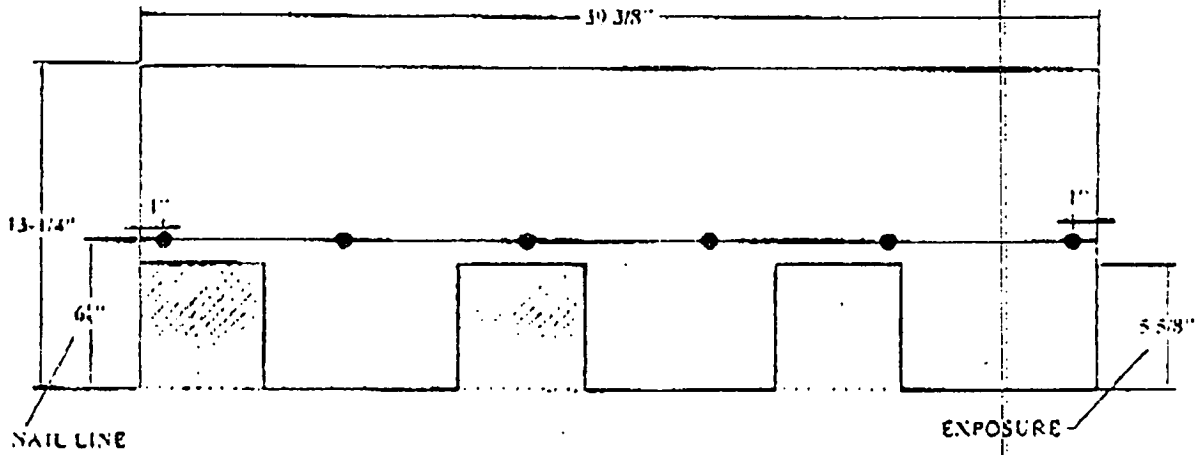
OWENS CORNING CORPORATION

Product Control No.: 98-0820.02

DETAIL A



DETAIL B



OWENS CORNING
FASTENING PATTERN & PHYSICAL DIMENSIONS

OAKRIDGE 30 AR LAMINATE

Frank Zuloaga, RRC
Roofing Product Control Examiner

OWENS CORNING CORPORATION

Product Control No.: 98-0820.02


Owens Corning
One Owens Corning Parkway
Toledo, OH 43659

ACCEPTANCE NO.: 98-0820.02
APPROVED : 10.01.98
EXPIRES : 10.01.01

NOTICE OF ACCEPTANCE STANDARD CONDITIONS

- 1 Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed and the original submitted documentation, including test supporting data, engineering documents, are no older than eight (8) years.
- 2 Any and all approved products shall be permanently labeled with the manufacturer's name, city, state, and the following statement: "Metro-Dade County Product Control Approved", or as specifically stated in the specific conditions of this Acceptance.
- 3 Renewals of Acceptance will not be considered if:
 - a) There has been a change in the South Florida Building Code affecting the evaluation of this product and the product is not in compliance with the code changes;
 - b) The product is no longer the same product (identical) as the one originally approved;
 - c) If the Acceptance holder has not complied with all the requirements of this acceptance, including the correct installation of the product;
 - d) The engineer who originally prepared, signed and sealed the required documentation initially submitted, is no longer practicing the engineering profession.
- 4 Any revision or change in the materials, use, and/or manufacture of the product or process shall automatically be cause for termination of this Acceptance, unless prior written approval has been requested (through the filing of a revision application with appropriate fee) and granted by this office.
- 5 Any of the following shall also be grounds for removal of this Acceptance:
 - a) Unsatisfactory performance of this product or process;
 - b) Misuse of this Acceptance as an endorsement of any product, for sales, advertising or any other purposes.
- 6 The Notice of Acceptance number preceded by the words Metro-Dade County, Florida, and followed by the expiration date may be displayed in advertising literature. If any portion of the Notice of Acceptance is displayed, then it shall be done in its entirety.
- 7 A copy of this Acceptance as well as approved drawings and other documents, where it applies, shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at all times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 10.

END OF THIS ACCEPTANCE



Frank Zuloaga, RRC
Roofing Product Control Examiner

A & W

ROOFING
DIVISION

CONSTRUCTION

EST. 1982

SCOPE OF WORK

- Removal and disposal of existing roof down to wood strips.
- Install 5/8" CDX plywood decking.
- Install 30# ASTM felt, fastened to code.
- Install a 30-yr. Owens Corning Architectural Shingle.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Thu 11-17, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
5162	Schulk	sheathing & siding	FAILED	11:30 YTL.
(11)	8 Palm Road A 1/2 W		FAIL	2:00 VERM - BLEND CK. RE SCAT SPEC
5075	Vasquez	partial sheathing	PASSED	
(10)	82 S. S.P. Rd. Groza	(w/ VERTIC)	FAIL	
4882	(4882) WOODS	STAIRS	PERFORMED	HANDICAP HGT TO BE
(2)	116 S. RIVER RD. EMMICK CONST.	(IN PROGRESS)	FAIL	MODIFIED TO CODE REQ. (MET W/OWNER & SUB)
4877	Loyola/Osborne	frame all	PASSED	RESCHEDULE FRAME-ALL
(12)	20 Castle Hill Way Buford	partial lethe (COMPLETE)	FAIL	FOR 11/20 AM.
T/R	JOSEPH	FIELD VERIF	PASSED	
(1)	12 N. VIA LUCINDIA (VAENT) SHELTRA CONST.	(PHASE II)	FAIL	
5068	WINER	TEMP. ELECT.	PASSED	
(13)	19 RIDGELAND DR. LEAP DEVELOPMENT	(REIUSP-NEW LOC.)	FAIL	FPL 223-4208 (WORK 11/17 11:25)

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: ~~Mon~~ Wed Fri ~~11-20~~ _____, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4755	Clements 6 Middle Rd. owner JIM CAMPBELL	electrical	X	CANCEL BY OWNER - WILL SUBMIT TEMP. SERVICE AGMT (TBS)
✓ 4921	Schramm 109 S.S.P. Rd. Ernick 781-5691	final (REINSPECT)	PASSED A	
5168	SCHULK 8 PALM ROAD A+W	SHEATHING + DRY IN		
✓ 5001	BERCAW 11 RIVERCREST RENNAR	2ND FL. COL/BAM.	X	CANCEL - RAIN (ROLLOVER/RESCHED)
✓ 4717	Zerro 124 N.S.P. Rd. Euford (142/99)	temp el.	PASSED A	REQUEST LTR. ON FILE - CC TO CONTRACTOR. FPL 223-4208 ✓ 10:40 11/20
✓ 4990	Elder 4 Ematica owner	framing	X	CANCELLED BY OWNER 11/20 8:00 (RAIN)
✓ 4775	Campo 5 Palama Way Seagore 220-7660	temp el. → hurricane shutters	PASSED A	will have elec. for Mon ✓ RCV 11/20 FPL 223-4208 ✓ 10:40 11/20

OTHER: _____

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed 12/6, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 5 5167	GIBSON 134 S. RIVER RD. A&W RFG.	FINAL (FURT)	Pass	12/6/00
✓ 5 5013	Dennis 16 Ridgeland Flo's Finest	beam (SLABS)	FAILED	REV. EDGE'G REVD 12/5/00 PTC. 105P. 12/4/00 STC. NOT PER EDGE'G.
✓ 5 5161	Brennan 111 H. Sewall Way Hutchins	footing	PASSED	
✓ N 5132	Brent 16 Knowles. A&W Roofing	Roof - final	Pass	12/6/00
✓ 5 5170	VW Bank Minn. 18 Heron's Nest Pacific	tin tag & metal	Pass	12/6/00
✓ 5 5168	Schulk 3 Palm Road Pacific A&W	dry-in Metal/Tin Tag	Pass	12/6/00
✓ 5 T/R	APRES 288-2835 15 S. RIVER RD MONTE'S TREE SERVICE	FIELD VERIF. (2ND ATTEMPT)	PASSED	

OTHER: _____

INSPECTOR (Name/Signature): _____

NOTE: ALL INSPECTIONS BY HELMUT GUNDELE UNDER DIRECT SUPERVISION OF BLDG. OFFICER. →

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Monday Tuesday Wednesday Thursday Friday Saturday Sunday, 12-13, 2000; Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ 4978 S (1)	Rimer 29 S. River Rd. Lear	stem wall - rear patio wall	Pass	12/12
✓ 5183 S (6)	De Garmo 16 E. High Point Pine Orchard	dock structural	Passed →	12/13 elevate el. conduit
✓ 5182 S (4)	Oakley 99 S.S.P. Rd. Rovoyens	driveway	Passed	12/13
✓ 4717 M (9)	Zarro 124 N.S.P. Rd. Buford	c.o. WALKDOWN	PERFORMED ✓	3:00 PM POUCH USE w/ G.C. REURP. 12/15
✓ 5123 S (3)	MICHAEL RIVER 65 S.S.P. Rd. Seagate	tie beam for ret. walls	Pass	12/13
✓ 5126 S (2)	Geller 10 Palmetto Dr. Mahaffey	plumbing	Passed	12/13 as possible
✓ 5164 S (5)	Schuck 8 Palm Rd. A & W	final roof	Completed 12/13	10: if possible not ready → Friday 12/15

OTHER: NOTE: ALL INSPECTIONS BY HERBERT GINNELL
UNDER DIRECT SUPERVISION OF BLDG. OFFICER G

INSPECTOR (Name/Signature): _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/15, 2000; Page 2 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	REMARKS
✓ N 5117 (9)	BREKHAM 3 OAK HILL POOLS BY GREGG.	PATIO/DECK FORM.	Passed 12/15	COMP. TEST ROAD 12/19/00
✓ N 4904 (10)	MIRANDA 34 CASTLE HILL WAY O/B	D/W	Passed 12/15	
✓ N 5143 (11)	Gifford 85 N.S.P.Rd. Holmes	stem wall Garage only	Pass 12/15	
✓ N 4777 (12)	Zerro 124 N.S.P.Rd. Buford	C.O. (LSP) (INCL. STORM SHUTTER PN 5186)	PASSED A	OK TO RELEASE C.O. 12/18/00 UPON PUNCH LIST VERIFICATION (104)
✓ N 5162 (3)	Schuck 8 Palm Hdy. A & W	ROOF FLOOR (3W RECORDED)	Passed 12/15	
0388 (7A)	RAO 30 CASTLE HILL WAY (LOT 32) AR MARTIN	UTILITY MARKING FOR T/12. (BUG PN 5192)	Passed 12/15	
5075 (13)	VASQUEZ 82 S. SEWALL'S POINT RD. GROZA BLDGS.	1. T/A & MTL. 2. PTL. ELECT. RGH (MEDIA ROOM)	Passed 12/15	

OTHER: _____

INSPECTOR (Name/Signature): _____

5618

REMODEL

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 12/6/01

BUILDING PERMIT NO. 5618

Building to be erected for PAUL R. SCHOPPE

Type of Permit REMODEL

Applied for by APOSTOLOPOULOS (Contractor)

Building Fee 288.00 x 2 (576)

Subdivision PALM ROW Lot 4 Block _____

Radon Fee _____

Address 8 PALM RD.

Impact Fee _____

Type of structure SPR

A/C Fee 1200 x 2 (240)

Electrical Fee 120.00 x 2 (240)

Parcel Control Number:

Plumbing Fee _____

1338410050000004040000

Roofing Fee _____

Amount Paid \$1084.00 Check # 433 Cash _____

Other Fees (PLAN REV) 28.00

Total Construction Cost \$ 30,000.00

TOTAL Fees \$1084.00

Signed  Applicant

Signed Gene Simmons / inc
Town Building Inspector
OFFICIAL

BUILDING PERMIT

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 _____

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!**

TOWN OF SEWALL'S POINT

Date 12/17/01 BUILDING PERMIT NO. 5619

Building to be erected for PAUL R. SCHOPPE Type of Permit A/C - SUB

Applied for by APOSTOLOPOULOS (Contractor) Building Fee _____

Subdivision PALM ROW Lot 4 Block _____ Radon Fee _____

Address 8 PALM RD. Impact Fee _____

Type of structure SFR A/C Fee SEE PN 5618

QUALIFIER: J HEMBERGER
LIC/CERT. 57450

Parcel Control Number: _____ Electrical Fee _____

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

Total Construction Cost \$ _____ Roofing Fee _____

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

OFFICIAL

PERMIT

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

INSPECTIONS

UNDERGROUND PLUMBING _____ UNDERGROUND 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 _____
--	---

24 HOUR NOTICE REQUIRED FOR INSPECTIONS – HAVE ALL REQUIRED PAPERWORK ON SITE
CALL 287-2455 **WORKING HOURS 8:00AM – 4:00PM** **MONDAY THROUGH FRIDAY**
INSPECTIONS 8:30AM -12:00PM **MONDAY, WEDNESDAY & FRIDAY**

Date _____

BUILDING PERMIT NO.

Building to be erected for _____ Type of Permit _____

Applied for by _____ (Contractor) Building Fee 288⁰⁰ x (2) 576

Subdivision _____ Lot _____ Block _____ Radon Fee _____

Address _____ Impact Fee _____

Type of structure _____ A/C Fee 20⁰⁰ x 240

Electrical Fee 120⁰⁰ x 2 240.

Parcel Control Number: _____ Plumbing Fee _____

_____ Roofing Fee _____

Amount Paid _____ Check # _____ Cash _____ Other Fees (Plan Review) 28⁰⁰ x

Total Construction Cost \$ _____ TOTAL Fees ~~644⁰⁰~~

1084⁰⁰ x

Signed _____ Signed _____

Applicant

Town Building Inspector

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: PAUL R. SCHOPPE City: STUART State: FL Zip: 34996

Legal Description of Property: LOT 4 REVISED & AMENDED PLAT OF PALM ROW Parcel Number: 13-38-41-005-000-0004.0-40-822

Location of Job Site: 8 PALM RD. STUART FL. Type of Work To Be Done: REMODEL OF MASTER BED/BATH + KITCHEN

CONTRACTOR/Company Name: Apostolopoulos, Paul C. Phone Number: _____

Street: 3425 SW 78th Ave City: Palm City State: FL Zip: 34278

State Registration Number: _____ State Certification Number: C66003907 Martin County 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: NONE

Carpport: NONE Total Under Roof _____ Wood Deck: NONE Accessory Building: NONE

Type Sewage: SEPTIC 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: \$30,000 Estimated Fair Market Value (FMV) Prior

To Improvements: \$249,000 If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES _____ NO X

SUBCONTRACTOR INFORMATION

Electrical: _____ State: _____ License Number: _____

Mechanical: KEMPER A/C State: _____ License Number: _____

Plumbing: DAUES PLBS 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 5 day of December, 2001

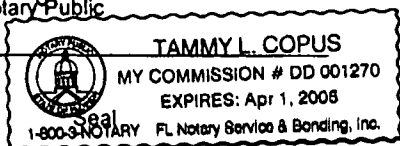
by Paul Schoppe who is personally

known to me or produced, Florida D.L.

as identification. Tammy L. Copus

Notary Public

My Commission Expires: _____



CONTRACTOR SIGNATURE (Required)

On State of Florida, County of: Martin

This the 6th day of December, 2001

by Costa Apostolopoulos who is personally

known to me or produced, FCLDLA123-100-46-307-0

As identification. [Signature]

Notary Public



PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR ADDITION TO SINGLE FAMILY RESIDENCE

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. Energy Calculations and Compliance Certification.
2. Current survey (boundary & topographic) containing the following information:
 - a. Legal Description of Lot
 - b. Lot dimensions and bearings
 - c. Street and Waterway names
 - d. Grade elevations (proposed and existing)
 - e. Swale and/or drainage arrows
 - f. Finish Floor Elevations (proposed and existing)
 - g. Crown of road(s)
 - h. Adjacent occupied/unoccupied
 - i. Easements
 - j. ROW's
 - k. Well locations (proposed and existing)
 - l. Septic drainfield(s) (proposed and existing)
 - m. Canals, Ponds, or Riverfront locations
 - n. Retention areas (proposed and existing)
3. Wind Load Certification Form (signed and sealed by Architect/Engineer)
4. Product approvals from Miami/Dade for the following items:
 - a. Windows
 - b. Exterior Doors
 - c. Roof System
 - d. Garage Door
 - e. Hurricane Shutters
5. Health Department Approval for septic system or information on existing system.
6. Health Department Well permit or information on existing system.
7. Statement of Fact (owner/builder affidavit)
8. Proof of ownership (deed or tax receipt)

9. Letter from Home Owners or Subdivision Associations stating design is per their deed restriction or covenants
10. Application for tree removal or relocation (attach tree survey and removal or relocation plan)
11. Manufacturers specifications or shop drawings for fireplaces, stairs, etc.
12. ~~A certified copy of the Notice of Commencement for any work over \$2500.00~~
13. Copy of License (either Martin County Certificate of Competency or State Certified or Registered Contractor License)
14. Copy of Workmen's Compensation
15. Copy of Liability Insurance

The following documents must be signed and sealed by a registered Architect or Engineer. (2 copies)

1. **Plot/Site plan containing the following information:**
 - a. Location of all structures proposed and existing along with dimensions
 - b. Location of driveway and turnabouts with dimensions
 - c. Walkways and planters
 - d. Location of all fences
 - e. Location of all docks
 - f. Location of all accessory buildings or structures
 - g. Setback requirements
 - h. Easements
 - i. All encroachments into setbacks
 - j. Location of existing septic, wells, retention areas
 - k. Flood Zone line or lines in relationship to structures proposed or existing
 - l. Elevations at three points along front of residence and at crown-of-road
 - m. Stormwater retention areas
 - n. Drainage Arrows
 - o. Computation of pervious and impervious areas
 - p. Desired finish floor elevation relative to Sea Level
2. **Floor Plan containing the following information:**
 - a. Square footage calculations
 - b. Scale – minimum ¼" per foot
 - o. All proposed and existing layouts of structures
 - p. Location of all pads/porches and patios
 - q. All dimensions exterior and interior to define design and construction
 - r. Room callouts
 - s. Elevations, steps, ramps, curbs, dashed outline for second story outline
 - t. ~~Location of all windows and doors with egress requirements~~
 - u. ~~Location of all bathroom fixtures~~
 - v. Location of all kitchen fixtures
 - w. ~~Water heater location~~
 - x. Attic access with side of opening
 - y. Beam callouts
 - z. All through wall or ceiling ventilation such as garage vents, dryer vent etc.

3. **Elevation Plan containing the following information:**
 - a. Front, Rear, and Side Elevations
 - b. All beam heights and changes in beams heights
 - c. Building heights from finish floor to top of roof (maximum 27 feet)
 - d. Location of all windows and doors
 - e. Roof slope
 - f. Wall finishes
 - g. Vertical features and horizontal projections
4. **Foundation Plan containing the following information:**
 - a. Bearing walls exterior and interior
 - b. Dimensions of all bearing walls exterior and interior
 - c. All footings and pad locations
 - d. Dimensions of all footing and pads
 - e. Step downs (minimum for residence to garage 7 inches)
 - f. Footing and Pad call outs for size (width and depth), steel (size, lap and placement)
 - g. Any underslab mechanical duct work or gas piping
 - h. Location of any in slab receptacle locations
 - i. Column Layout
 - j. Columns Schedule
5. **Electrical Plan containing the following information:**
 - a. Show all receptacle, switch, and fixture locations
 - b. Show all WPGFI's and GFI's locations
 - c. Ceiling fan locations
 - d. Attic or roof top receptacles and fixtures
 - e. Service entrance
 - f. Panel layout with circuits, loads, wire, breaker and conduit sizes
 - g. Riser diagram with size of service, meter, ground, disconnects feeders and panels
 - h. Any specialty lighting requirements
 - i. Disconnect locations for residence, pool, pumps, etc.
 - j. Load calculations
 - k. Panel and sub-panel locations
 - l. Meter can location
6. **Heating/Air Conditioning Plan containing the following information:**
 - a. Air Handler locations showing kw rating
 - b. Condensing unit locations
 - c. Duct layout showing sizes of duct and size of diffusers
 - d. CFM per outlet
 - e. Distribution box locations
 - f. Equipment callouts with name of equipment, model numbers and sizes
 - g. Sensible and latent heat quantities
7. **Plumbing Plan containing the following information:**
 - a. Piping layout showing all pipe sizes
 - b. All fixtures, sanitary drainage, vents, water supply, water heaters
 - c. Indicate all slopes

8. **Truss Layout containing the following information:**
 - a. Show location of all trusses
 - b. Show location of all girders
 - c. Uplift quantities for all trusses
 - d. Connectors schedule for all trusses and girders
 - e. Location of roof mounted equipment
 - f. Location of all structural elements size and reinforcing
9. **Second Floor Framing Plan**
 - a. Location of all floor trusses or joists
 - b. Size of all structural members and spacing dimensions
 - c. Location of all girders
10. **Section/Detail Drawings and Schedules showing the following information:**
 - a. Wall section drawings for single and two story sections
 - b. Show footings, slab, wall, ceiling and roof construction and insulation
 - c. Window and door schedules showing design pressures (+ and -)
 - d. Stair details showing riser height and tread width also handrail with baluster and newel post design showing distance between balusters and height of handrail from leading edge of tread
 - e. Garage door buck detail showing type, size, length and spacing of connectors to be used
 - f. Window buck detail showing type, size, length and spacing of connectors to be used
 - g. Attic ventilation calculations

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

(SIGNATURE OF APPLICANT)

DATE SUBMITTED: _____

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):

LOT 4, REVISED & AMENDED PLAT OF PALM ROW 8 PALM RD., STUART FL. 34986

GENERAL DESCRIPTION OF IMPROVEMENT: REMODEL OF MASTER BATH + KITCHEN

OWNER: PAUL R. SCHOPPE & LAURA B. SCHOPPE

ADDRESS: 8 PA 1993 S.W. MOCKINGBIRD LN. PALM CITY FL. 34990

PHONE #: (561) 221-1604 **FAX #:** _____

CONTRACTOR: OWNER / BUILDER

ADDRESS: _____

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

SURETY COMPANY(IF ANY) _____

ADDRESS: _____

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

BOND AMOUNT: _____

LENDER: _____

ADDRESS: _____

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

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

NAME: _____

ADDRESS: _____

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

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

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

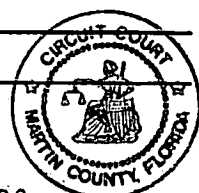
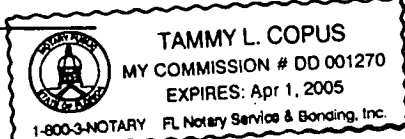
EXPIRATION DATE OF NOTICE OF COMMENCEMENT: _____
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

[Signature]
SIGNATURE OF OWNER

SWORN TO AND SUBSCRIBED BEFORE ME THIS 5 DAY OF Dec. 2001 BY Paul R. Schoppe

[Signature]
NOTARY SIGNATURE

OR PERSONALLY KNOWN
PRODUCED ID PDL
TYPE OF ID 510-676-73-4670



Marsha Ewing
Clerk of the Circuit Court
Martin County, FL
100 E Ocean Blvd.
Stuart FL, 34994
Ph (561)288-5551

DATE:12/05/2001
TIME:02:51:53 PM
RECEIPT:52698

SCHOPPE PAUL R

ITEM -01 NOC 02:53:23 PM

FILE:1538035 BK/P6:1601/2161
SCHOPPE PAUL R
PUBLIC

RECORDING FEE	6.00
COPIES	1.00
CERTIFICATION	1.00
OATH OR VERIFICATION	2.00
POSTAGE REIMBURSEMENT	0.40

Sub. Total 10.40

AMOUNT DUE: \$10.40
PAID CASH: \$11.00
CASH RETURNED: \$.60
TOTAL PAID: \$10.40

REC BY:TCOPUS
DEPUTY CLERK

INSTR # 1522491
OR BK 01581 PG 2433
RECORDED 09/17/2001 11:24 AM
MARSHA EWING
MARTIN COUNTY Florida
DOC TAX 1,743.00
RECORDED BY T Copus (asst mgr)

Prepared by and return to:
RICHARD J. DUNGEY

CERTIFIED LAND TITLE CO.
1100 South Federal Highway
Stuart, FL 34994
561-283-0090
File Number: 01-1956
Will Call No.: 55

[Space Above This Line For Recording Data]

Warranty Deed

This Warranty Deed made this 12th day of September, 2001 between PHILIP W. SCHUCK, an unmarried man whose post office address is 219 S"D"ST HOMERON OH 45013, grantor, and PAUL R. SCHOPPE and LAURA B. SCHOPPE, husband and wife whose post office address is 8 Palm Road, Stuart, FL 34996, grantee:

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

Witnesseth, that said grantor, for and in consideration of the sum of TEN AND NO/100 DOLLARS (\$10.00) and other good and valuable considerations to said grantor in hand paid by said grantee, the receipt whereof is hereby acknowledged, has granted, bargained, and sold to the said grantee, and grantee's heirs and assigns forever, the following described land, situate, lying and being in Martin County, Florida to-wit:

LOT 4, REVISED AND AMENDED PLAT OF PALM ROW, according to the map or plat thereof as recorded in Plat Book 4, Page 68, Public Records of Martin County, Florida.

Parcel Identification Number: 13-38-41-005-000-0004.0-40000

SUBJECT TO restrictions, reservations and easements of record, if any, but this provision shall not operate to re-impose the same, and taxes and assessments subsequent to 2000.

Together with all the tenements, hereditaments and appurtenances thereto belonging or in anywise appertaining.

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances, except taxes accruing subsequent to December 31, 2000.

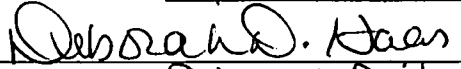
In Witness Whereof, grantor has hereunto set grantor's hand and seal the day and year first above written.

Signed, sealed and delivered in our presence:



Witness Name: THOMAS A. FOGT

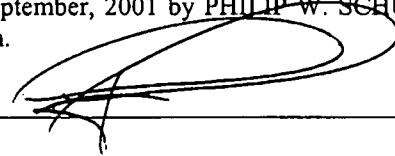
 (Seal)
PHILIP W. SCHUCK


Witness Name: Deborah D. Haas

State of Florida
County of Martin


The foregoing instrument was acknowledged before me this 12th day of September, 2001 by PHILIP W. SCHUCK, who is personally known or has produced a driver's license as identification.

[Notary Seal]


Notary Public

Printed Name: THOMAS A. FOGT

My Commission Expires: _____

 THOMAS A. FOGT
COMMISSION # CC 703489
EXPIRES JAN 26, 2002
BONDED THRU
ATLANTIC BONDING CO., INC.

OWNER'S AFFIDAVIT OF BUILDING COSTS

(To be submitted at time of final inspection for Certificate of Occupancy)

**STATE OF FLORIDA
MARTIN COUNTY**

BEFORE ME, the undersigned authority, personally appeared the undersigned Affidavit, who, being first duly sworn, under penalty of perjury, deposes and says:

- 1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
- 2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
- 3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is ~~\$907,000~~ \$30,000 P.S.
- 4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:

[Handwritten Signature]

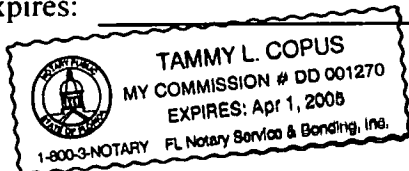
Property Address:

8 PALM RD. STUART FL. 34996

SWORN TO and subscribed before me this 5 day of Dec, 2001, by Paul Schoppe, who is personally known to me or produced Florida D.L. as identification.

Tammy L. Copus
Notary Public
My commission expires: _____

(Notary Seal)



TOWN OF SEWALL'S POINT

Building Department
One South Sewall's Point Road
Sewall's Point, Florida 34996

TEMPORARY ELECTRIC HOOK-UP AGREEMENT: PN: 5618
(To be submitted at final electrical inspection in order to turn on electric service)

Owner: PAUL SCHOPPE Address: 8 PALM RD.

Project Address: 8 PALM RD. Legal: Lot 4 Blk Subdivision PALM ROW

General Contractor APOSTOLOPOULOS Lic/Cert No: 57450

Address: Tel: Fax:

Electrical Contractor: RMS Electric Lic/Cert No: EC 0002707

Address: 1501 Decker Ave #113 Tel: 220-1052 Fax: 220-3628

WHEREAS, pursuant to the provisions of, and governed by, Sections 0307.6 and 4504.6 of the South Florida Building Code as adopted in Section 4-16 of the Codes and Ordinances of the Town of Sewall's Point, temporary electric hook-up for use during building operations and for testing purposes under a valid building permit is authorized under prescribed terms and conditions; and,

WHEREAS, the above named responsible persons, firms or corporations have requested a temporary electrical hook-up of for the purpose of
At the above designated construction now in progress under a valid building permit; and equipment and completion of building operations as herein above described.

NOW THEREFORE IT IS AGREED BY AND BETWEEN THE PARTIES THAT;

1. The parties to this agreement are Gene Simmons, Building Official, Town of Sewall's Point, and the above named responsible persons, firms, corporations.
2. In order to allow electrical service to be provided to certain equipment being placed at the referenced construction address the Building Official hereby agrees to grant a temporary hook-up permit.
3. This temporary hook-up permit shall be effective for 30 calendar days from the date of this agreement, after which time the temporary hook-up will be revoked or a Certificate of Occupancy will be issued to verify completion.
4. The temporary electric hook-up is solely for the purposes stated. No furniture or occupants will be moved into the building until a Certificate of Occupancy is issued.

IN WITNESS WHEREOF the parties have caused this agreement to be executed this 13 day of December, 2002

SIGNATURE OF GENERAL CONTRACTOR

[Signature]

SIGNATURE OF OWNER

[Signature]
MAY LOU ALEXANDER
MY COMMISSION # CC 915139
EXPIRES: June 22, 2004
Bonded Thru Notary Public Underwriters

SIGNATURE OF ELECTRICAL CONTRACTOR

GENE SIMMONS, BUILDING OFFICIAL

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: PAUL SCHORRE Date: 12/12/02

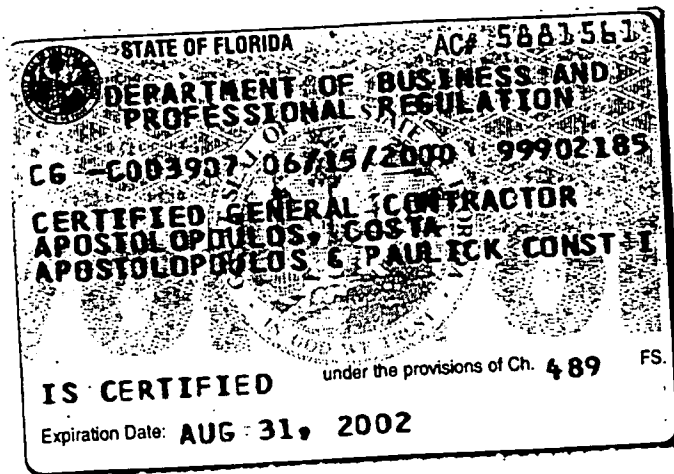
Signature: 

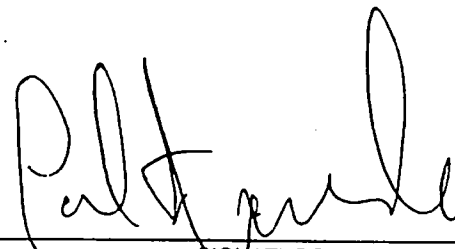
Address: 8 PALM RD.

City & State: STUART, FL. 34996

Permit No. 5618

This form is for all permits except electrical.




SIGNATURE

ACORD CERTIFICATE OF LIABILITY INSURANCE

7-8-99

PRODUCER

A Better Deal Insurance
 1026 Bayshore Blvd
 Port St Lucie, FL 34984
 (888) 771-7878

UC/105
FILE

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
 APOSTOLOPOULOS & PAULICK CONST. INC
 1501 SE DECKER AVENUE
 UNIT 129A
 STUART FL 34994

INSURER A: MARYLAND INSURANCE CO
 INSURER B: International Specialty Underwrite
 INSURER C:
 INSURER D:
 INSURER E:

RECEIVED

JUL 10 2001

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 SHOWED MAY HAVE BEEN REDUCED BY PAID CLAIMS.

FORM 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 GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	SCP 031610232	7-19-99	7-19-02	EACH OCCURRENCE \$300,000 FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$300,000 GENERAL AGGREGATE 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 DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
B	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	POP602S	12-08-98	12-8-02	WC STATUTORY LIMITS <input type="checkbox"/> OTHER <input type="checkbox"/> E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

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

CARPENTRY

CERTIFICATE HOLDER

Town Of Sewall's Point
 Fax: 220 4765

ADDITIONAL INSURED; INSURER LETTER:

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
Glenn... Macaselli
 © ACORD CORPORATION 1991

JRD. CERTIFICATE

STATE OF LIABILITY INSURANCE

7-8-99

A Better Deal
 1026 Bay
 Port St Lucie
 (887) 717

CIC/INS
FILE

THIS CERTIFICATE IS ISSUED AS A MATTER OF COURTESY ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, CHANGE OR ALTER THE COVERAGE AFFORDED BY THE POLICIES DESCRIBED HEREIN.

INSURED
 APOSTOLOPOULOS & PAU
 1501 SE DECKER AVENUE
 UNIT 129A
 STUART FL 34994

INSURANCE
 POLICY NO: L 3 084
 075
 CK CONST. INC

INSURERS AFFORDING COVERAGE

INSURER A:	MARYLAND INSURANCE CO
INSURER B:	International Specialty Group
INSURER C:	
INSURER D:	
INSURER E:	

RECEIVED

JUL 30 2001

COVERAGES
 THE POLICIES OF INSURANCE LISTED BELOW ARE SUBJECT TO THE POLICY WORDING, CONDITIONS, EXCLUSIONS, LIMITS AND CO-SURETY REQUIREMENTS, IF ANY, OF THE POLICIES DESCRIBED HEREIN. THIS CERTIFICATE MAY BE REVOKED OR AMENDED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF THE POLICIES. AGGREGATE LIMITS SHOWN IN THIS CERTIFICATE HAVE BEEN REDUCED BY PAID CLAIMS.

HAVE BEEN ISSUED TO THE INSURED NAMED ABOVE FOR THE POLICY PERIOD INDICATED. WORDING OF ANY CONTRACT OR OTHER DOCUMENT WITH RESPECT TO WHICH THIS CERTIFICATE MAY BE ISSUED BY THE POLICIES DESCRIBED HEREIN IS SUBJECT TO ALL THE TERMS, EXCLUSIONS AND CONDITIONS OF THE POLICIES. AGGREGATE LIMITS SHOWN IN THIS CERTIFICATE HAVE BEEN REDUCED BY PAID CLAIMS.

TYPE OF INSURANCE	DESCRIPTION	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRES DATE (MM/DD/YY)	LIMITS
GENERAL LIABILITY	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR	03 610232	7-19-99	7-19-02	EACH OCCURRENCE \$3,000,000 FIRE DAMAGE (Any one loss) \$500,000 MED EXP (Any one person) \$50,000 PERSONAL & ADV INJURY \$500,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000
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) \$500,000 BODILY INJURY (Per person) \$50,000 BODILY INJURY (Per accident) \$50,000 PROPERTY DAMAGE (Per accident) \$50,000
Garage Liability	<input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$500,000 OTHER THAN AUTO ONLY: EA AGG \$50,000 AGG \$50,000
EXCESS LIABILITY	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE \$				EACH OCCURRENCE \$500,000 AGGREGATE \$500,000
B	WORKERS COMPENSATION AND EMPLOYERS LIABILITY	0F6 02S	12-08-98	12-8-02	MC STATE-TORTY LIMITS \$500,000 E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000
OTHER					

POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRES DATE (MM/DD/YY)	LIMITS
03 610232	7-19-99	7-19-02	EACH OCCURRENCE \$3,000,000 FIRE DAMAGE (Any one loss) \$500,000 MED EXP (Any one person) \$50,000 PERSONAL & ADV INJURY \$500,000 GENERAL AGGREGATE \$3,000,000 PRODUCTS - COMP/OP AGG \$3,000,000
			COMBINED SINGLE LIMIT (Ea accident) \$500,000 BODILY INJURY (Per person) \$50,000 BODILY INJURY (Per accident) \$50,000 PROPERTY DAMAGE (Per accident) \$50,000
			AUTO ONLY - EA ACCIDENT \$500,000 OTHER THAN AUTO ONLY: EA AGG \$50,000 AGG \$50,000
			EACH OCCURRENCE \$500,000 AGGREGATE \$500,000
0F6 02S	12-08-98	12-8-02	MC STATE-TORTY LIMITS \$500,000 E.L. EACH ACCIDENT \$500,000 E.L. DISEASE - EA EMPLOYEE \$500,000 E.L. DISEASE - POLICY LIMIT \$500,000

DESCRIPTION OF OPERATIONS/LOCATION/VEHICLE
 CARPENTRY and ROOFING

EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS

CERTIFICATE HOLDER
 Town Of Sewall's Point
 Fax: 220 4765

INSURER LETTER: CANCELLATION
 SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED OR REVOKED BY THE INSURER, THE INSURER WILL endeavor to MAIL NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO MAIL NOTICE SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER OR ITS REPRESENTATIVES.
 AUTHORIZED REPRESENTATIVE
Jennifer L. MacC...

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

CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

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

EFFECTIVE DATE 06/22/2001
EXPIRATION DATE 06/22/2003
EXEMPTED INDIVIDUAL NAME HEMBERGER JOHN J
S.S. 079-44-6993
BUSINESS NAME AIRFLOW AIR CONDITIONING & HEATING INC
FEIN 650757176
BUSINESS ADDRESS 5315 S E MATOUSKEK ST FL 34997
STUART

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

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



CONSTRUCTION INDUSTRY CERTIFICATE OF EXEMPTION
FROM FLORIDA WORKERS' COMPENSATION LAW

EFFECTIVE DATE 06/22/2001
EXPIRATION DATE 06/22/2003
EXEMPTED PERSON LAST NAME HEMBERGER
FIRST NAME JOHN
SOCIAL SECURITY NUMBER 079-44-6993
BUSINESS NAME AIRFLOW AIR CONDITIONING & HEA
FEDERAL IDENTIFICATION NUMBER 650757176
BUSINESS ADDRESS 5315 S E MATOUSKEK ST
STUART FL 34997

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

CUT HERE

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



STATE OF FLORIDA
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONST INDUSTRY LICENSING BOARD
 7960 ARLINGTON EXPRESSWAY
 STE 300
 JACKSONVILLE FL 32211-7467

(904) 727-6530

HEMBERGER, JOHN JOSEPH
 AIRFLOW AIRCONDITIONING & HEATING INC
 5315 S E MATOUSEK STREET
 STUART FL 34997

STATE OF FLORIDA AC# 5827
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CA -C057450 06/16/2000 99902
 CLASS B CERTIFIED AIR COND CO
 HEMBERGER, JOHN JOSEPH
 AIRFLOW AIRCONDITIONING & HEAT
 IS CERTIFIED under the provisions of Ch. 489
 Expiration Date: AUG 31, 2002

DETACH HERE

AC# 5827
 STATE OF FLORIDA
 DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
 CONST INDUSTRY LICENSING BOARD

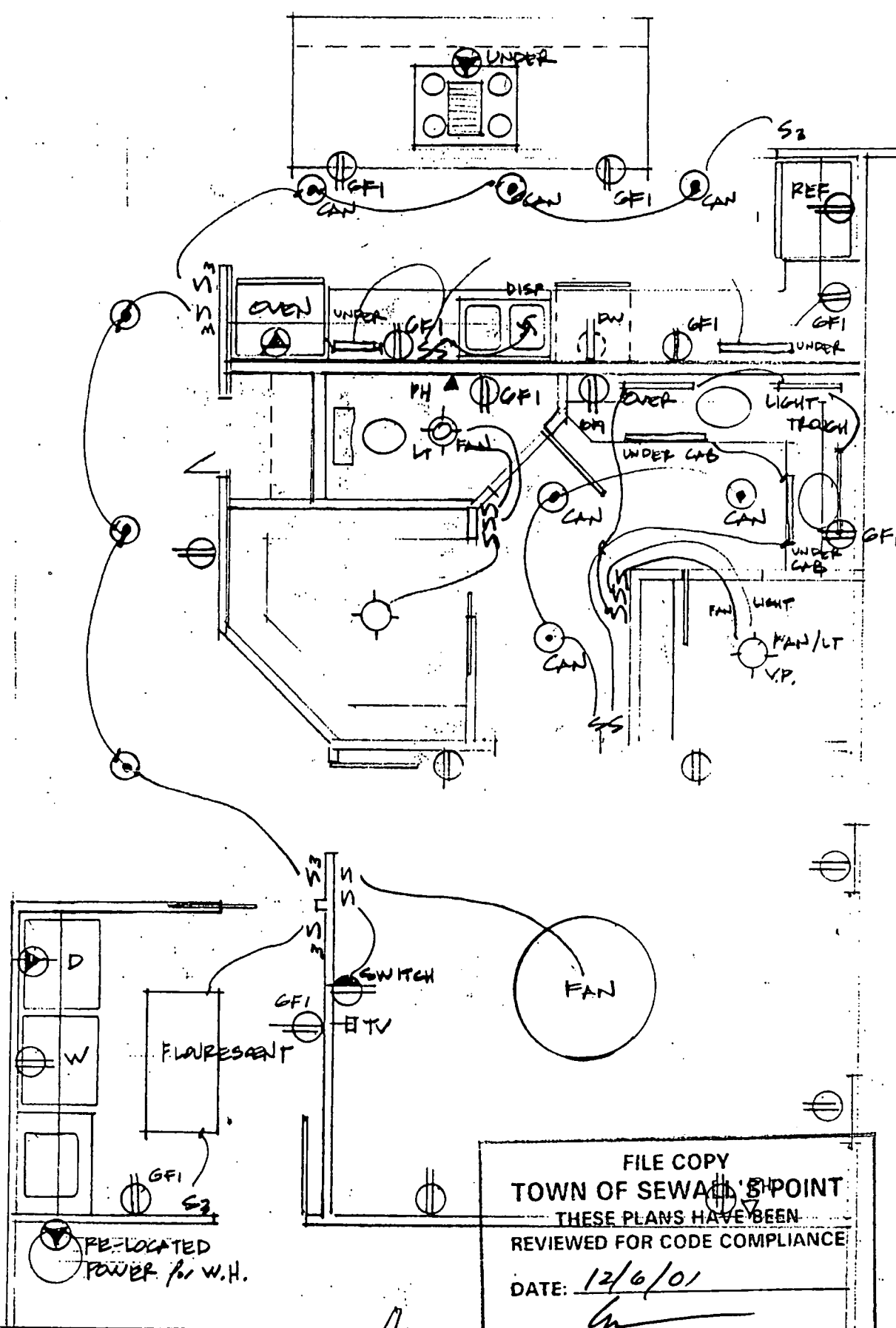
DATE	BATCH NUMBER	LICENSE NO.
06/16/2000	99902229	CA -C057450

The CLASS B AIR CONDITIONING CONTRACTOR
 Named below IS CERTIFIED
 Under the provisions of Chapter 489 FS.
 Expiration date: AUG 31, 2002

HEMBERGER, JOHN JOSEPH
 AIRFLOW AIRCONDITIONING & HEATING INC
 5315 S E MATOUSEK STREET
 STUART FL 34997

JOB TUSH

CYNTHIA A. HENDERS
 SECRETARY



FILE COPY
 TOWN OF SEWALLS POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 12/6/01

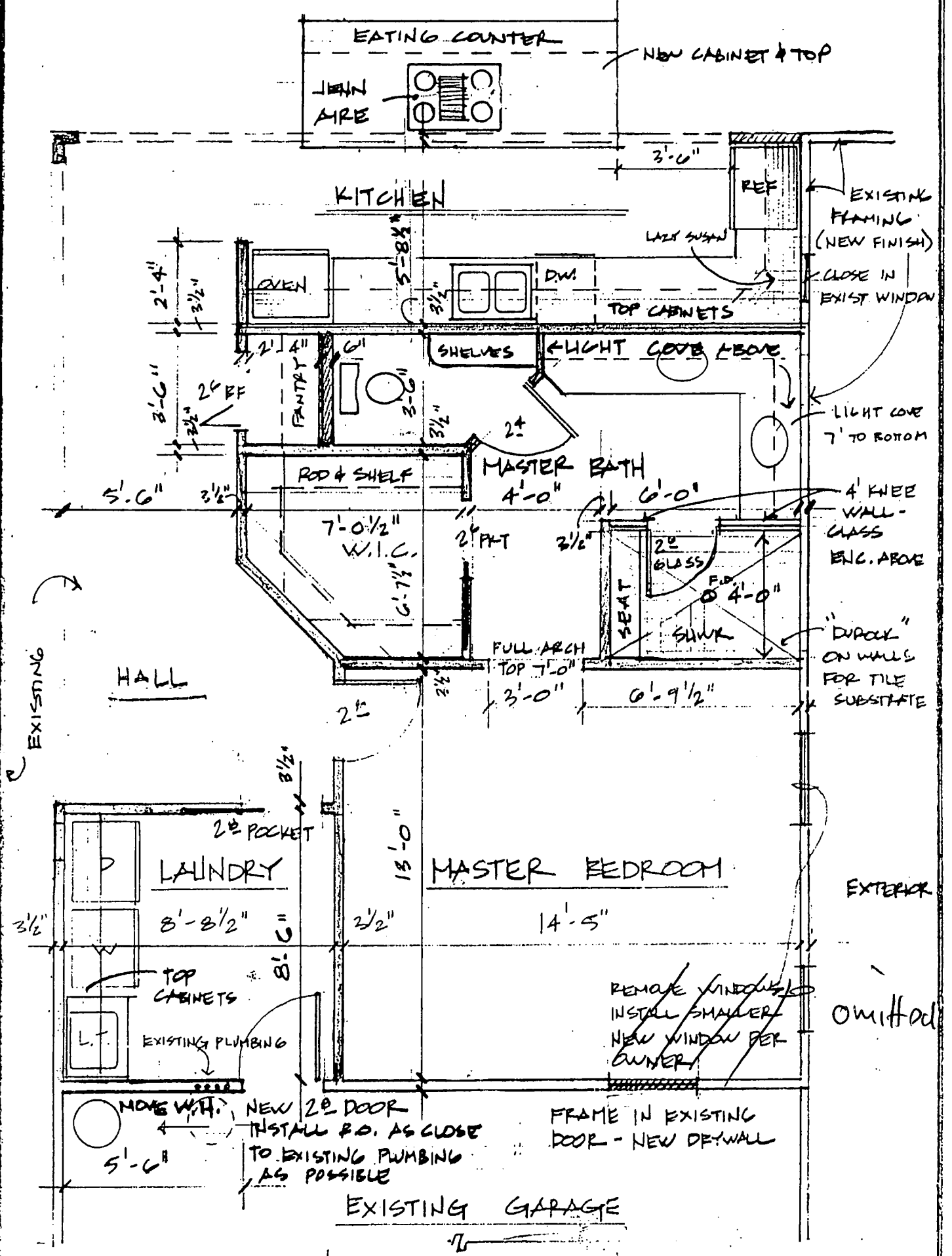
 BUILDING OFFICIAL
 Gene Simmons

ELECTRICAL PLAN $\frac{1}{4}'' = 1'-0''$ PLAN

RENOVATION for:
SCHOPPE RESIDENCE
 SEWALLS POINT, MARTIN COUNTY

SHEET
 2
 OF 2 SHEETS

EXISTING FAMILY ROOM



FLOOR PLAN $\frac{1}{4}'' = 1'-0''$ DIMENSIONS ARE FRAME TO FRAME

RENOVATION *psl*
 SCHOPPE RESIDENCE
 SEWALLS POINT, MARTIN COUNTY

SHEET
 1
 OF 2 SHEETS

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-16-02, 2001; Page of .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5693	Brewer 12 Copaire Stuart ROOFING	Final Roof	Passed	INSPECTOR: <i>[Signature]</i>
6024	Baser 10 CopAIRE Plumbing Pool	Plmby + Deck	Passed	INSPECTOR: <i>[Signature]</i>
5976	Barnfath 49 S. Sewall's Pt Domingo	Final	Passed	INSPECTOR: <i>[Signature]</i>
6068	Brewer 12 Copaire Banner	Final Hurricane Shelters	Passed	INSPECTOR: <i>[Signature]</i>
5683	Brewer 12 Copaire Stuart Roof	Roof-Final	Partial	INSPECTOR: <i>[Signature]</i>
5645	Brewer 12 Copaire Dolphin Alarm	Screen Enclos	Passed	INSPECTOR: <i>[Signature]</i>
5648	Schoppe 8 Palm Rd Apostolo Pous	Final	Passed	INSPECTOR: <i>[Signature]</i> Per Helmut <i>[Signature]</i>
OTHER: 6043	Schoppe 8 Palm Rd Beenet	Final Dumery	Passed	INSPECTOR: <i>[Signature]</i>

5986

POOL ENCLOSURE

TOWN OF SEWALL'S POINT

Date 10-23-02

BUILDING PERMIT NO. 5986

Building to be erected for Paul R. Schoppe

Type of Permit Pool Enclosure

Applied for by Coastal Alum.

(Contractor) Building Fee 120.00

Subdivision Palm Row Lot 4 Block _____

Radon Fee _____

Address 8 Palm Rd

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

Electrical Fee _____

1338410050000004040000

Plumbing Fee _____

Amount Paid 132.00 Check # 1994 Cash _____

Other Fees (Plan Rev) 12.00

Total Construction Cost \$ 2395.00

TOTAL Fees 132.00

Signed Bill Lomanillo

Signed Gene Simmons (dgn)

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 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 checked="" type="checkbox"/> ADDITION
<u>POOL ENCLOSURE</u> |

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: _____

Owner or Titleholder Name: Schoppe, Paul R + Larva B City: Stuart State: FL Zip: 34986

Legal Description of Property: Palm Row Revised + Amended Plat Lot 4 Parcel Number: 13-38-41-005-000-0004.0-40000

Location of Job Site: 8 Palm Road Type of Work To Be Done: Screen Pool Enclosure

CONTRACTOR/Company Name: Coastal Aluminum Construction Phone Number: 772-468-0288

Street: 4205 Metzger Rd. City: Ft. Pierce State: FL Zip: 34947

State Registration Number: SC-C056660 State Certification Number: _____ Martin County License Number: 1994-520-011

CC-5901154

ARCHITECT: _____ Phone Number: _____

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

ENGINEER: B D Q Inc. Phone Number: _____

Street: 7037 Stirling Cay Court City: Boynton Beach State: FL Zip: 33436

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: 936

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: \$ 2395⁰⁰ Estimated Fair Market Value (FMV) Prior

To Improvements: _____ If Improvement, Is Cost Greater Than 50% Of Fair Market Value YES _____ NO

SUBCONTRACTOR INFORMATION N/A

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ 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) 2001 South Florida Building Code (Structural, Mechanical, Plumbing, Gas) _____

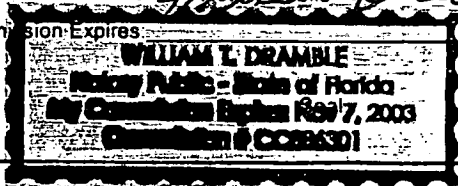
National Electrical Code 2002 Florida Energy Code 2001

Florida Accessibility Code 2001

THEREBY 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.

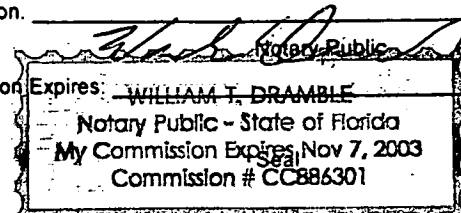
OWNER OR AGENT SIGNATURE (Required)
State of Florida, County of: Martin
This the 23 day of Sept, 2002
by Richard Sharp who is personally
known to me or produced N/A
as identification.

My Commission Expires:



CONTRACTOR SIGNATURE (Required)
On State of Florida, County of: Martin
This the 23 day of Sept, 2002
by Richard Sharp who is personally
known to me or produced N/A
as identification.

My Commission Expires:



ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE
1/7/2002

PRODUCER

JPA Insurance
P.O. Box 857217
10778 S. Federal Hwy.
Port St.Lucia FL 34985

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

COASTAL ALUMINUM CONSTRUCTION, INC.
4205 METZGER ROAD
FT. PIERCE FL 34947-1769

INSURER A: ZURICH

INSURER B:

INSURER C:

INSURER D:

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 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	CFM02484563	12/27/01	12/27/02	EACH OCCURRENCE \$1,000,000
	<input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY				FIRE DAMAGE (Any one fire) \$300,000
	<input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR				MED EXP (Any one person) \$10,000
					PERSONAL & ADV INJURY \$1,000,000
					GENERAL AGGREGATE \$2,000,000
					PRODUCTS - COMP/OP AGG \$2,000,000
					GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJ <input type="checkbox"/> LOC
	AUTOMOBILE LIABILITY				COMBINED SINGLE LIMIT (Ea accident) \$
	<input type="checkbox"/> ANY AUTO				BODILY INJURY (Per person) \$
	<input type="checkbox"/> ALL OWNED AUTOS				BODILY INJURY (Per accident) \$
	<input type="checkbox"/> SCHEDULED AUTOS				PROPERTY DAMAGE (Per accident) \$
	<input type="checkbox"/> HIRE AUTOS				
	<input type="checkbox"/> NON-OWNED AUTOS				
	GARAGE LIABILITY				AUTO ONLY - EA ACCIDENT \$
	<input type="checkbox"/> ANY AUTO				OTHER THAN EA ACC \$
					AGG \$
	EXCESS LIABILITY				EACH OCCURRENCE \$
	<input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE				AGGREGATE \$
	<input type="checkbox"/> DEDUCTIBLE				\$
	<input type="checkbox"/> RETENTION \$				\$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY				WC STATU- TORY 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

STATE OF FLORIDA
30 DAYS WRITTEN NOTICE REQUIRED ON WORK'S COMP

CERTIFICATE HOLDER

TOWN OF SEWALLS POINT
1 SOUTH SEWALLS POINT ROAD
ATTN: ED @ 220-4765
STUART, FL 34996

ADDITIONAL INSURED; INSURER LETTER:

CANCELLATION

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

AUTHORIZED REPRESENTATIVE

JIM POWER

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YY)
07/09/2001

PRODUCER
INNOVATIVE BUSINESSES CORP.
 780 DELTONA BLVD. SUITE # 201
 DELTONA, FLORIDA 32725

Serial # A2840

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
COASTAL ALUMINUM CONSTRUCTION, INC.
 4205 METZGER RD
 FORT PIERCE, FL 34947
 FAX # 561-468-0287

FILE
 UC/LWS

INSURER A: AMCOMP PREFERRED INSURANCE COMPANY
 INSURER B:
 INSURER C:
 INSURER D:
 INSURER E:

RECEIVED
 JUL 12 2001
 BY:

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	
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE	\$
					FIRE DAMAGE (Any one fire)	\$
					MED EXP (Any one person)	\$
					PERSONAL & ADV INJURY	\$
					GENERAL AGGREGATE	\$
					PRODUCTS - COMPOP AGG	\$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident)	\$
					BODILY INJURY (Per person)	\$
					BODILY INJURY (Per accident)	\$
					PROPERTY DAMAGE (Per accident)	\$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT	\$
					OTHER THAN AUTO ONLY: EA ACC	\$
					AGG	\$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE	\$
					AGGREGATE	\$
						\$
						\$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	WCV 7017451	07/10/2001	07/10/2002	X WC STATUTORY LIMITS	OTH-ER
					E.L. EACH ACCIDENT	\$ 100,000
					E.L. DISEASE - EA EMPLOYEE	\$ 100,000
					E.L. DISEASE - POLICY LIMIT	\$ 500,000
	OTHER					

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

CERTIFICATE HOLDER

TOWN OF SEWALLS POINT
 CITY HALL
 1 SOUTH SEWALLS POINT RD.
 SEWALLS POINT, FL 34994

ADDITIONAL INSURED; INSURER LETTER:

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



STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION

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

(904) 727-6530

FILE
Refun

RECEIVED
BY: *[Signature]*

SHARP, RICHARD LEE
COASTAL ALUMINUM CONSTRUCTION INC
1156 SW COLEMAN AVE
PORT ST LUCIE FL 34953

STATE OF FLORIDA AC# 593739
DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
SC -C056660 08/07/2000 0090035
CERT. SPECIALTY STRUCTURE CONTR
SHARP, RICHARD LEE
COASTAL ALUMINUM CONSTRUCTION I
IS CERTIFIED under the provisions of Ch. 489
Expiration Date: AUG 31, 2002

DETACH HERE

AC# 5937390

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

DATE	BATCH NUMBER	LICENSE NO
8/07/2000	009003541	SC -C056660

The **SPECIALTY STRUCTURE CONTRACTOR**
Named Below **IS CERTIFIED**
Under the provisions of Chapter 489 FS
Expiration date: **AUG 31, 2002**

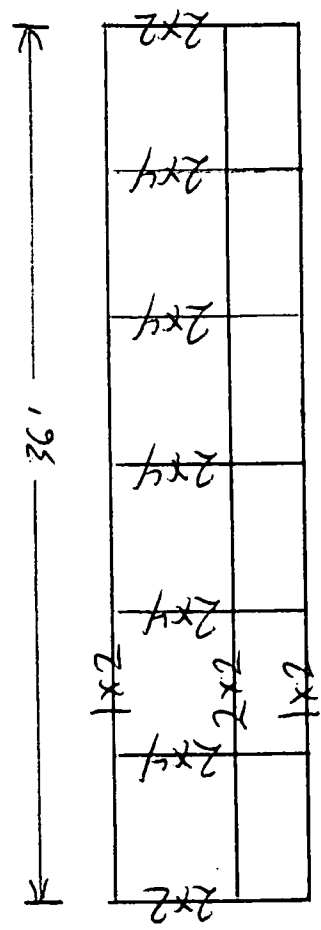
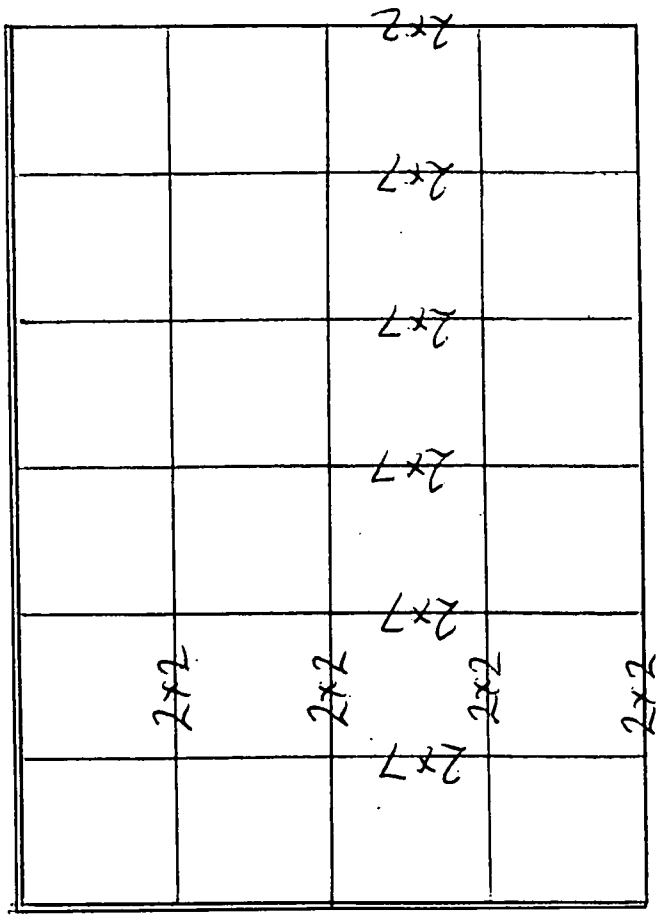
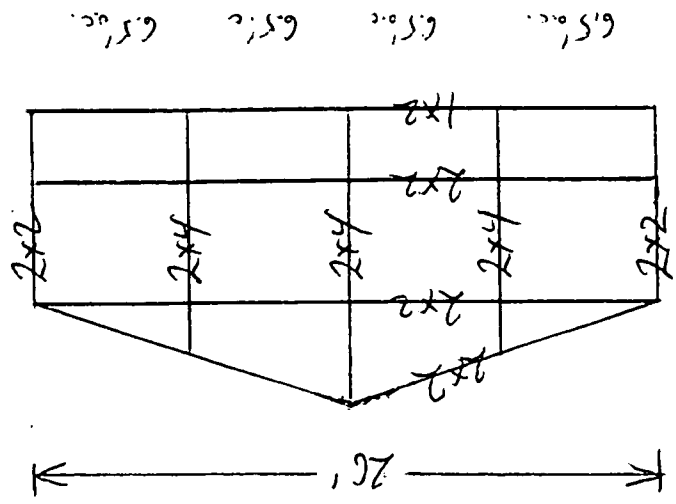
SHARP, RICHARD LEE
COASTAL ALUMINUM CONSTRUCTION INC
1156 SW COLEMAN AVE
PORT ST LUCIE FL 34953

Schoppe Residence
 8 Palm Rd.
 Stuart, FL 34996
 13-38-41-005-000-0004.0-4

Coastal Aluminum Construction
 4205 Metzger Road
 Ft. Pierce, FL 34947

A. Frame Gable - White
 8' w.H. 3' c.R.
 2 doors

Covered Porch

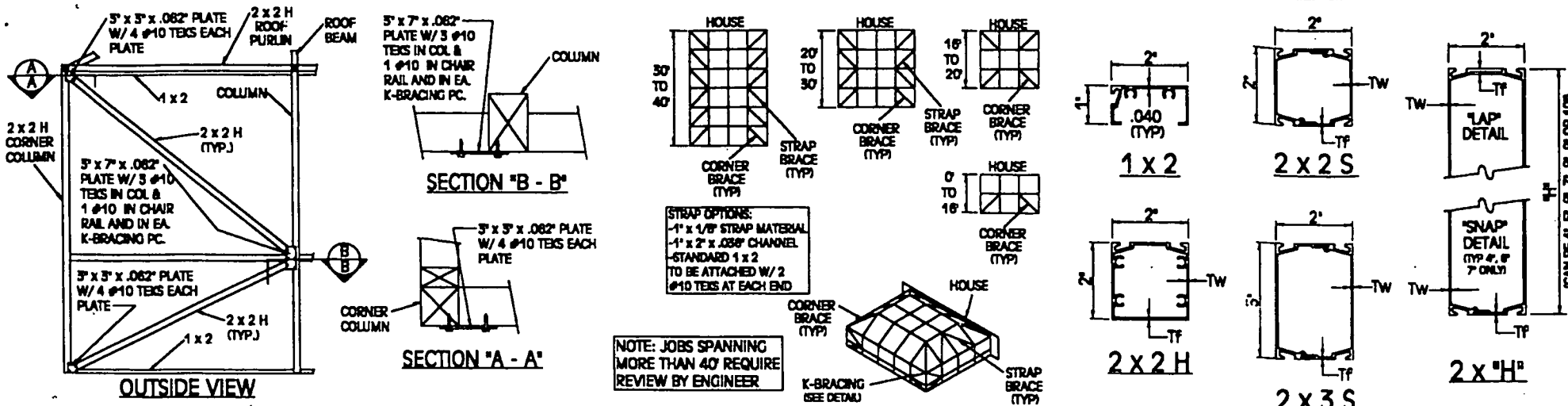


6'oc. 6'oc. 6'oc. 6'oc. 6'oc. 6'oc.

Residence

FILE COPY
 TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 9/25/02

 BUILDING OFFICIAL
 Gene Simmons

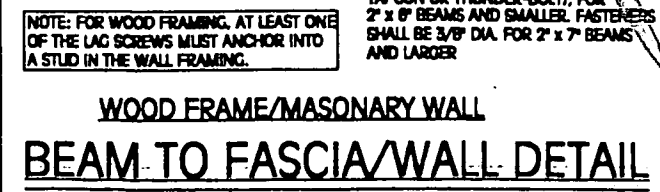
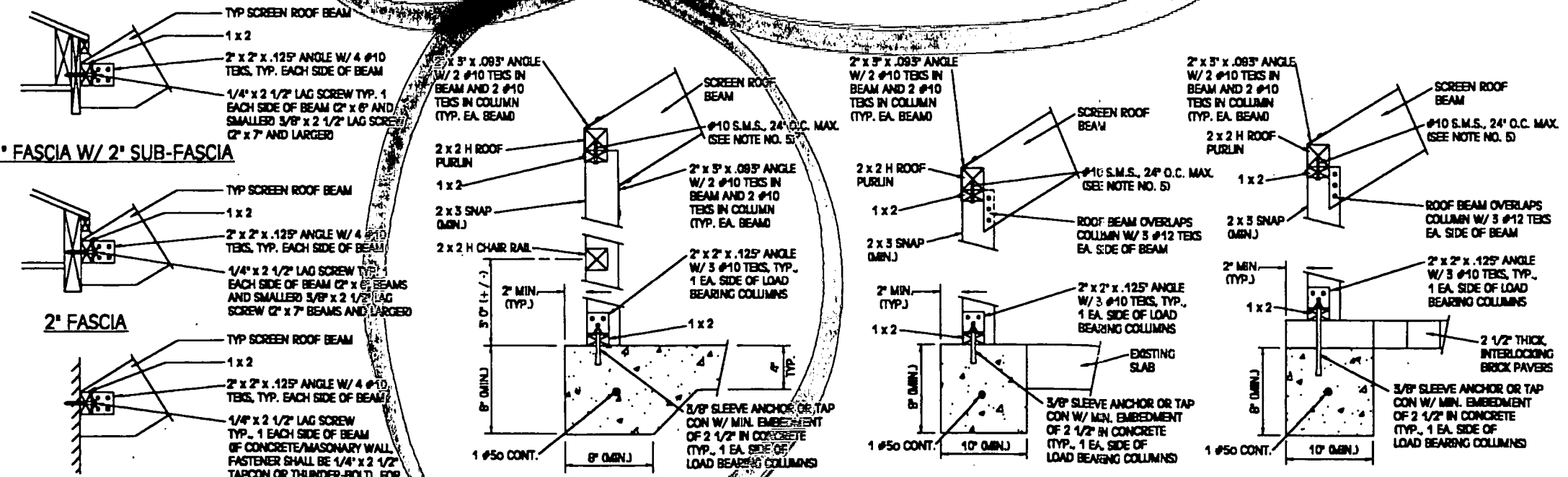
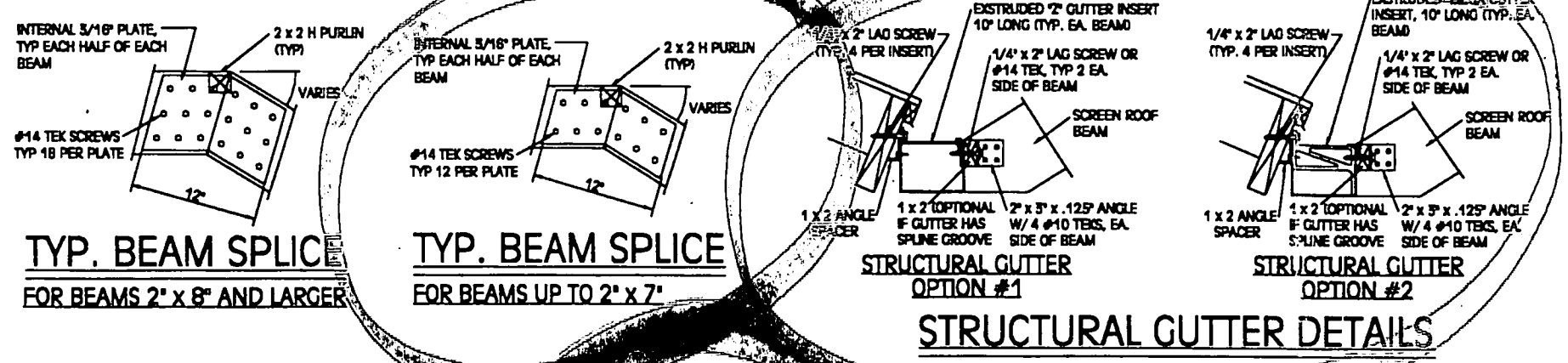


BEAM AND COLUMN SCHEDULE (140 MPH, EXPOS. 'C')

SIZE	DIMENSION		ROOF PANEL WIDTH VS BEAM SPAN									
	TF	TW	8'0"	7'6"	7'0"	6'6"	6'0"	5'6"	5'0"	4'6"	4'0"	
2x2 H	0.050	0.050	6'0"	6'1"	6'3"	6'5"	6'7"	6'9"	7'0"	7'3"	7'6"	
2x2 S	0.050	0.050	6'6"	6'7"	6'9"	6'11"	7'1"	7'4"	7'7"	7'10"	8'2"	
2x3	0.050	0.050	8'11"	8'1"	8'4"	8'6"	8'10"	10'1"	10'5"	10'8"	11'3"	
2x4	0.055	0.055	11'6"	11'9"	12'0"	12'4"	12'8"	13'0"	13'5"	14'1"	14'6"	
2x5	0.055	0.055	14'9"	15'2"	15'6"	15'10"	16'3"	16'9"	17'4"	17'11"	18'6"	
2x6	0.130	0.055	17'10"	18'3"	18'8"	19'2"	19'8"	20'8"	20'11"	21'8"	22'8"	
2x7	0.153	0.071	22'5"	22'11"	23'6"	24'1"	24'7"	25'5"	26'3"	27'2"	28'3"	
2x8	0.226	0.074	27'5"	28'0"	28'8"	29'5"	30'2"	31'1"	32'1"	33'8"	34'7"	
2x9	0.320	0.077	30'1"	30'9"	31'6"	32'3"	33'2"	34'1"	35'3"	36'8"	37'11"	
2x10	0.390	0.092	33'4"	34'1"	34'11"	35'9"	36'9"	37'10"	38'0"	40'5"	42'1"	

WALL PANEL WIDTH VS COLUMN HEIGHT DESIGN PRESSURE = 26 PSF

SIZE	DIMENSION		WALL PANEL WIDTH VS COLUMN HEIGHT									
	TF	TW	8'0"	7'6"	7'0"	6'6"	6'0"	5'6"	5'0"	4'6"	4'0"	
2x2 H	0.050	0.050	4'8"	4'10"	4'11"	5'1"	5'2"	5'4"	5'6"	5'8"	6'0"	
2x2 S	0.050	0.050	4'8"	4'10"	4'11"	5'1"	5'2"	5'4"	5'6"	5'8"	6'0"	
2x3	0.050	0.050	6'1"	6'3"	6'9"	6'11"	7'2"	7'4"	7'7"	7'10"	8'2"	
2x4	0.055	0.055	7'9"	8'0"	8'3"	8'6"	8'10"	9'3"	9'9"	10'1"	10'6"	
2x5	0.055	0.055	10'3"	10'7"	10'11"	11'4"	11'10"	12'2"	12'5"	13'1"	13'7"	
2x6	0.130	0.055	12'3"	12'5"	13'2"	13'7"	14'2"	14'8"	15'2"	15'8"	16'4"	
2x7	0.153	0.071	16'0"	16'7"	17'1"	17'6"	18'0"	18'6"	19'1"	19'9"	20'7"	
2x8	0.226	0.074	18'11"	20'5"	20'10"	21'5"	21'11"	22'7"	23'4"	24'2"	25'2"	
2x9	0.320	0.077	21'10"	22'4"	22'11"	23'6"	24'1"	24'10"	25'7"	26'6"	27'7"	
2x10	0.390	0.092	24'2"	24'9"	25'4"	26'0"	26'8"	27'9"	28'4"	29'5"	30'7"	



NOTE: ALL UPRIGHTS 2" x 5" AND LARGER REQUIRE A SECOND SET OF 2" x 2" ANGLES INSTALLED INSIDE THE 1" x 2" SCREEN FRAME AND AGAINST THE CONCRETE DECK, TO BE INSTALLED IN THE SAME MANNER AND WITH THE SAME SIZE FASTENERS.

BEAM TO COLUMN TO FOUNDATION DETAIL

NOTE: ANY OF THE ABOVE ATTACHMENT DETAILS CAN BE USED IN ANY COMBINATION, AS DETERMINED BY SPECIFIC JOB SITE CONDITIONS.

- GENERAL NOTES**
- DESIGN COMPLIES WITH SECTION 20, FLORIDA BLDG. CODE 2001, AND IS DESIGNED IN ACCORDANCE WITH THE FOLLOWING PARAMETERS:
 A. WIND SPEED = 140 MPH
 B. EXPOSURE CATEGORY = 'C'
 C. DESIGN PRESSURES:
 ROOF: 10 PSF
 WALLS: 26 PSF
 D. MAXIMUM ROOF HEIGHT = 30'0"
 E. ALLOWABLE DEFLECTION = L / 80
 F. CONTINUOUS LOAD PATH PROVIDED
 - MATERIALS (UNLESS OTHERWISE SPECIFIED)
 A. EXTRUSIONS - ALUMINUM ALLOY 6063-T6 & 5003-H16
 B. FASTENERS - ALUMINUM ALLOY 2024-T4 & 7075-T6, CAD PLATED STEEL, HOT-DIPPED GALVANIZED STEEL OR 300 SERIES STAINLESS STEEL
 C. SCREEN CLOTH - VINYL COATED, WOVEN FIBERGLASS, 60% OPEN OR GREATER
 - BOLT AND SCREW FASTENINGS THROUGH AN OPEN EXTRUSION INTO SLAB, MASONRY OR WOOD FRAME WALL OR FASCIA MUST HAVE A 5/8" DIA. HEAD OR USE A 5/8" DIA. WASHER, 24" MAXIMUM SPACING.
 - WIND BRACING IS NOT REQUIRED WHEN AN ENCLOSURE IS FULLY SUPPORTED ON TWO SIDES BY THE HOUSE.
 - ALL SPECIFIED TIE DOWN ANGLES ARE REQUIRED ONLY ON COLUMNS THAT ARE SUPPORTING STRUCTURAL BEAMS (UNLESS OTHERWISE SPECIFIED ON SITE-SPECIFIC ENGINEERING).
 - SEE SITE SPECIFIC DRAWINGS FOR ACTUAL LOCATION OF WALL K-BRACING.
 - ALL DOORS SHALL BE SELF-CLOSING AND SELF-LATCHING.
 - PRINTS OR COPIES THEREOF ARE VALID FOR BUILDING PERMIT PURPOSES ONLY WHEN BEARING THE ORIGINAL SIGNATURE OF THE ENGINEER OF RECORD UNDER HIS EMBOSSED SEAL.
 - AS DEFINED IN SECTION #1804.1.4, ALL BUILDINGS NOT OVER ONE STORY IN HEIGHT AND LESS THAN 400 SQUARE FEET IN AREA ARE EXEMPT FROM ALL FOOTER / FOUNDATION REQUIREMENTS SPECIFIED IN SECTION #1804, SUBJECT TO APPROVAL BY THE BUILDING OFFICIAL OF THE MUNICIPALITY IN WHICH THE PERMIT IS BEING APPLIED FOR.

DWN: E. DOWDY
DATE: 2/28/02

APPROVED:
D. A. DOWDY, P.E.

DWG. NO. 02-140-XC
LAST REV. 08/15/02

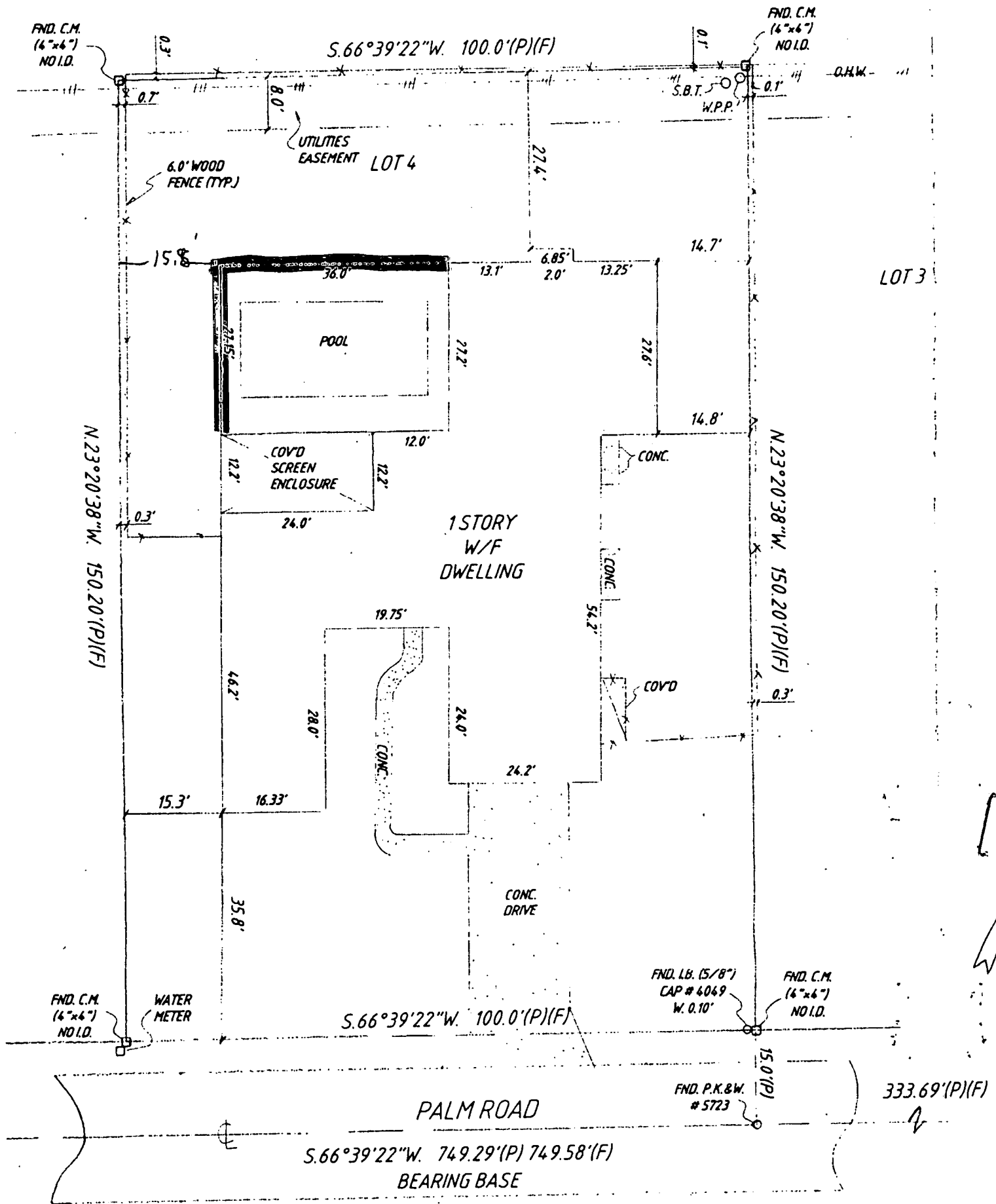
Coastal Aluminum Construction
4205 Metzger Road
Ft. Pierce, FL 34947

POOL / PATIO ENCLOS.
WITH SCREEN ROOF

140 MPH EXPOS. 'C'

SEAL

B.D.Q., INC.
8037 STIRRUP CAY CT.
BOYNTON BEACH, FL 33436
D. A. DOWDY, P.E.
FL REG. NO. 22763



PROPERTY LOCATED WITHIN FLOOD ZONE : "A8" BASE ELEV. 8.00
 COMMUNITY - PANEL NUMBER - 120164 0002 D

PROPERTY STREET ADDRESS : 8 PALM ROAD
 STUART, FL. 34994

CERTIFIED TO : PAUL R. SHOPPE AND LAURA SCHOPPE,
 CERTIFIED LAND TITLE COMPANY,
 ATTORNEYS TITLE INSURANCE FUND, INC.

SURVEYOR'S NOTES

1. - SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OT
2. - LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENT AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SUI
3. - ALL BEARINGS ARE REFERENCED TO THE INSTRUMENT OF RECO AS SHOWN HEREON, UNLESS OTHERWISE NOTED.
4. - ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEOC VERTICAL DATUM OF 1929, SEE SURVEY FOR REFERENCE BENC- UNLESS OTHERWISE NOTED.
5. - THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTH

LEGEND

- | | | |
|---|--|---|
| <ul style="list-style-type: none">)- DENOTES DISTANCE, ANGLE OR BEARING BY FURNISHED DESCRIPTION) - DENOTES MEASURED DISTANCE, ANGLE OR BEARING) - DENOTES CALCULATED DISTANCE, ANGLE OR BEARING OV'D - COVERED B.S. - CONCRETE BLOCK STRUCTURE W/F - WOOD FRAME CONC. - CONCRETE ALUM. - ALUMINIUM P. - POWER POLE HW - OVERHEAD WIRE O.B. - TOP OF BANK H. - FIRE HYDRANT P. - LIGHT POLE ELEV - ELEVATION | <ul style="list-style-type: none"> APPROX - APPROXIMATE SET I.B. - SET 5/8" IRON BAR & CAP # 4459 FND. - FOUND LP. - IRON PIPE C.M. - CONCRETE MONUMENT LB. - IRON BAR P.K. - P.K. NAIL R.R.S. - RAILROAD SPIKE BRK - BROKEN DIST - DISTURBED E.P. - EDGE OF PAVEMENT | <ul style="list-style-type: none"> P.O.C. - POINT OF COMMENCEMENT P.O.B. - POINT OF BEGINNING ENC. - ENCROACHMENT NO.I.D. - NO IDENTIFICATION NUMBER N.&W. - NAIL & WASHER N.&TT - NAIL & TIN TAB M.H. - MANHOLE C.B. - CATCH BASIN P.R.M. - PERMANENT REFERENCE MONUMENT P.C.P. - PERMANENT CONTROL POINT R/W - RIGHT-OF-WAY S.B.T. - SOUTHERN BELL TELEPHONE TYP - TYPICAL A/C - AIR CONDITIONER EQUIP - EQUIPMENT |
|---|--|---|

SYMBOLS

- Δ - DELTA / CENTRAL ANGLE
- ⊕ - CENTERLINE
- - DRAINAGE FLOW
- X - EXISTING ELEVATION
- ⊥ - PROPERTY LINE



TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(561) 287-2455

CORRECTION NOTICE

ADDRESS: _____

8 Palm Rd.

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

Screen Enclosure

Failed: not grounded

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

DATE: _____

2/13/13


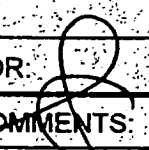
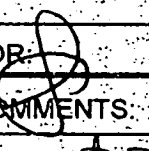
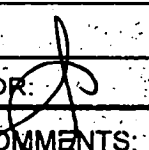
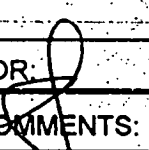
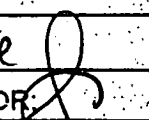
INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/12, 20013 Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
5880	HARTE	RENOVATION-FINAL	Passed	close
(10)	3 E. HIGH POINT NAVARRO & MAGGART			INSPECTOR: 
5786	SCHOPPE	SCREEN ENCLOSURE	Passed	
(7)	8 PALM ROAD COASTAL ALUM	FINAL		INSPECTOR: 
6107	BYERS	PLUMBING	Passed	
(4)	32 N. SEWALLS PT RD O/B	Rough		INSPECTOR: 
6000	MAJENSKI	Dock & Step Repair	Passed	Failed #30
(9)	24 E. HIGH POINT BLUEWATER MARINE	FINAL		in permit INSPECTOR:
6041	GRANFIELD	POOL ENCLOSURE	Passed	
(8)	15 W. HIGH POINT COASTAL ALUM.			INSPECTOR: 
5919	Burr	TIE BEAM	Passed	
(5)	21 RIVERVIEW O/B			INSPECTOR: 
5967	FOWLER	POOL FINAL	Passed	
(2)	18 FIELDWAY DR NATIONAL	Pool/Deck/Encl.		close INSPECTOR: 

OTHER: _____

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2-26, 2004; Page 3 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6155	HESS 74 N. SEWALL'S PT RD MARTIN COUNTY PROPANE	GAS TANK	Failed	Contractor to reduce Garage re roof ??
				INSPECTOR: <i>[Signature]</i>
6102	DUNN 21 PALMETTO DR PVD DEVELOPMENT	STRAPPING	Passal	9+
				INSPECTOR: <i>[Signature]</i>
5700	D'ALESSANDRO 107 ABBIE COURT FRASIER	SEPTIC TANK LINE Pool Plumbg.	Passal Passal	
				INSPECTOR: <i>[Signature]</i>
6140	ATHOS 3 Gumbo Limbo Way O/B	GARAGE DOOR	Failed	No access
				INSPECTOR: <i>[Signature]</i>
6158	DONNATELLI 19 BANYAN ROAD TREASURE COAST A/C	REPLACE AC FINAL El rough Plumb rough	Failed Passal Passal	Att 30 A 10 Ac 25/30 10
				INSPECTOR: <i>[Signature]</i>
6158	DONATELLI 19 BANYAN RD O/B	DUCT WORK FOR STONE WOOD + ELEC + PLUMBING + FRAMING	Failed Passal Passal	215-4779 220-1506
				INSPECTOR: <i>[Signature]</i>
6082	SCHAPPE 8 PALM ROAD COASTAL ALUM.	POOL ENCLAVE FINAL	Failed	
				INSPECTOR: <i>[Signature]</i>

OTHER: LUCAS ROOF Plywood Passal
6028 MANDALAY SHEATHING NAILING
EMMICK CONST

146 N Spd. → Stop

6027

HARDIPLANK

SIDING

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 11-8-02

BUILDING PERMIT NO. 6027

Building to be erected for Paul + Laura Schoppe

Type of Permit HARDIPLANK Siding

Applied for by O/B (Contractor)

Building Fee 35.00

Subdivision BALM Row Lot 4 Block _____

Radon Fee 8.75

Address 8 Palm Road

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:
1338410050000004040000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 43.75 Check # 607 Cash _____ Other Fees (_____)

Total Construction Cost \$ 2500.00

TOTAL Fees 43.75

Signed [Signature]
Applicant

Signed [Signature]
Town Building Official

PERMIT

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

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

Owner or Titleholder Name PAUL & LAURA SCHOPPE Building Permit Number:
Legal Description of Property LOT 4 REVISED & AMENDED PALM ROW City: STUART State: FL Zip: 34986
Location of Job Site: 8 PALM RD. Parcel Number: 13-38-41-005-000-0004.0
Type of Work To Be Done: HARDIPLANK SIDING

CONTRACTOR/Company Name: OWEN/RUILDEN Phone Number: 221-1604
Street: City: State: Zip:
State Registration Number: State Certification Number: Martin County 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:
Type Sewage: Septic Tank Permit Number From Health Depart. Wall 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: \$2000-500.00 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 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

THEREBY 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 7 day of Nov., 2002
by Paul Schoppe who is personally
known to me or produced
as identification: Joan H. Barrow

Notary Public
My Commission Expires: Joan H. Barrow
MY COMMISSION # CC763645 EXPIRES
November 30, 2002
BONDED THRU TROPICAN INSURANCE, INC.

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





BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

DATE: 11/8/02

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

BUILDING OFFICIAL

Gene Simmons

NOTICE OF ACCEPTANCE (NOA)

James Hardie Building Product, Inc.
10901 Elm Avenue
Fontana, CA 92337

SCOPE:

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

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

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

DESCRIPTION: Hardiplank, Hardipanel and Hardisoffit

APPROVAL DOCUMENT: Drawing No. HPNL-8X, HPLK-4X8 & HSOFFIT-8X, titled "Hardipanel, Hardiplank, & Hardisoffit Installation Details", sheets 1 through 3, prepared, signed and sealed by Ronald Ogawa, P.E., dated 4/13/99, bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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

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

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

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

This NOA renews NOA # 99-0223.07 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Raul Rodriguez.



NOA No 02-0318.08
Expiration Date: May 1, 2007
Approval Date: May 23, 2002
Page 1

TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

DISCLOSURE STATEMENT

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even through you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statutes 489.103(7).

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

Name: Laura Scheppe Date: 11/8/02

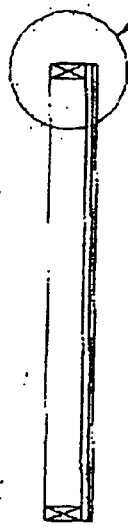
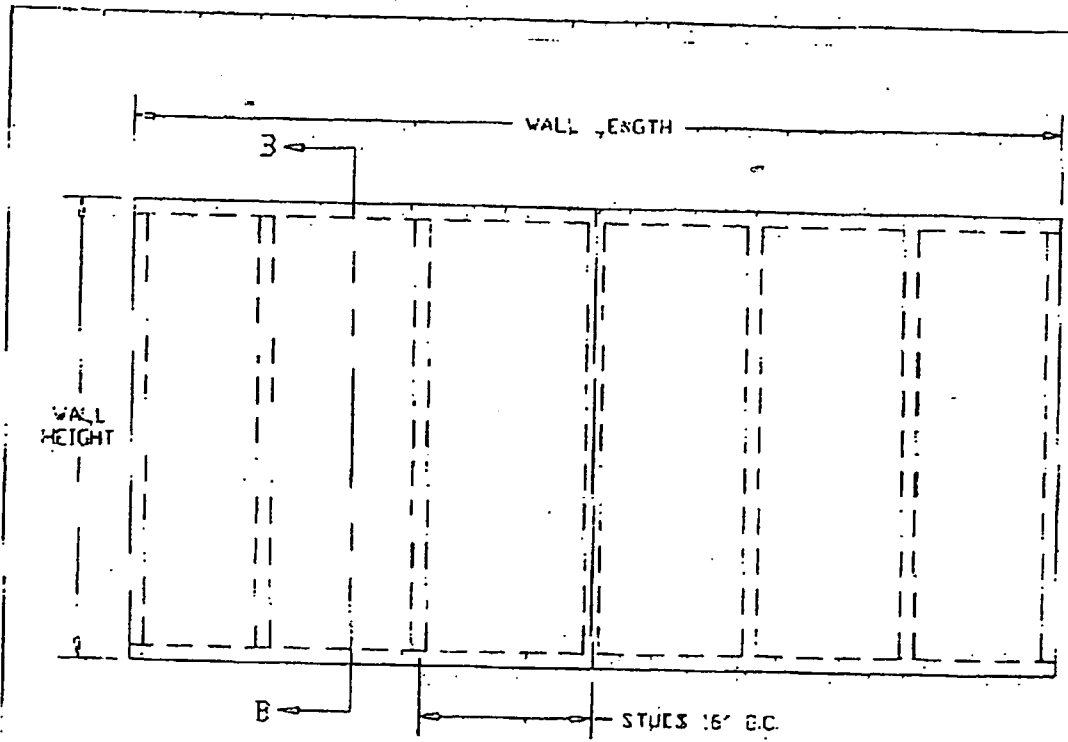
Signature: *Laura Scheppe*

Address: 8 Palm Road

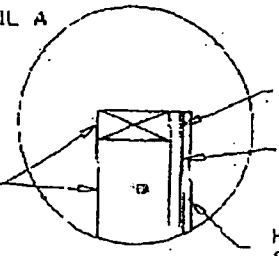
City & State: Stuart, FL 34996

Permit No. _____

This form is for all permits except electrical.



DETAIL A



HARDIPANEL SIDING INSTALLATION DETAILS
 The panels are applied vertically, avoiding horizontal joints, over 5/8" (9 ply) APA rated plywood supported by a minimum of 2"x4" wood studs or 20 ga. x 3 3/8" x 1 3/8" steel studs spaced a maximum of 16" o.c. When installed on wood studs panels shall be fastened with 60 x 2" long galvanized oak nails, on steel studs it shall be fastened with NB x 1 3/8" x 0.315" corrosion resistance H.B. ribbed buggie screws. The fasteners shall be placed @ 6" o.c. around the perimeter of the panel and intermediate studs, driven through the plywood sheathing into the studs. All joints shall be over studs. Nails and screws shall have a minimum edge distance of 1/8" and a minimum clearance of 2" from the corners.

PROJECT NAME
NO. / DATE

DESCRIPTION
 Hardipanel siding material is a non-
 asbestos fiber cement product tested
 in accordance with ASTM C-1183 and
 meeting the requirements of the
 South Florida Building Code.

PANEL DIMENSIONS
 Width: 48"
 Length: 6,9'10"
 Thickness: 5/16"

PRODUCT REGISTERED
 in compliance with the Florida
 Building Code
 Approval No. 02-07116-03
 Expiration Date 07-1-2007

DESIGN PRESSURE RATINGS
 Int. Suction: -76 PSF
 Wind Frame: -104 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) SECTIONS OF METAL OR WOOD WHERE HARDIPANEL WILL BE INSTALLED SHALL BE DESIGNED BY AN ENGINEER OR ARCHITECT FOR THE S.F.B.C. AND THE REQUIREMENTS OF THIS N.O.A.

Handwritten signature and date

APPROVED AS COMPLETED WITH THE
 S.F.B.C. BUILDING CODE
 DATE: 12/20/09
 BY: [Signature]
 INSPECTOR OFFICE OF
 BUILDING CODE COMPLIANCE OFFICE
 4625 W. 12th Ave. #9-20223-077

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

JAMES HARDIE BUILDING PRODUCTS - USA RESEARCH & DEVELOPMENT CENTER	16001 ELK AVENUE FORTNA, CA 92337 909-204-6300 FAX: 909-427-0624
	DATE: 3/31/09
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.	SCALE: NTS DRAWN BY: R. LAPPIN DATE: 2/11/09
TITLE: HARDIPANEL® INSTALLATION DETAILS	SHEET NO.: 24121



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

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

NOTICE OF ACCEPTANCE (NOA)

James Hardie Building Product, Inc.
10901 Elm Avenue
Fontana, CA 92337

SCOPE:

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

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DESCRIPTION: Hardiplank, Hardipanel and Hardisoffit

APPROVAL DOCUMENT: Drawing No. HPNL-8X, HPLK-4X8 & HSOFFIT-8X, titled "Hardipanel, Hardiplank, & Hardisoffit Installation Details", sheets 1 through 3, prepared, signed and sealed by Ronald Ogawa, P.E., dated 4/13/99, bearing the Miami-Dade County Product Control Renewal stamp with the Notice of Acceptance number and expiration date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: Large and Small Missile Impact

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

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INSPECTION: A copy of this entire NOA shall be provided to the user by the manufacturer or its distributors and shall be available for inspection at the job site at the request of the Building Official. This NOA renews NOA # 99-0223.07 and, consists of this page 1 as well as approval document mentioned above. The submitted documentation was reviewed by Raul Rodriguez.



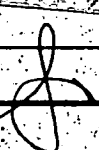
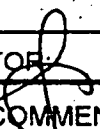
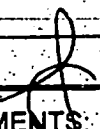



NOA No 02-0318.08
Expiration Date: May 1, 2007
Approval Date: May 23, 2002
Page 1

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-18-02, 2001; Page ___ of ___

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6047	STORCK 27. N. RIVER RD. COULIC	ROUGH PLUMBING BE, NUC, FRAMING Fail Fail Fail	Passed	Pls - EARLY - THY INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	Whiting 5 MARGUERITA	TREE		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
TREE	T. STURKEL 7 Lentane Ln	TREE	Passed	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5906	Schoppe 8 Palm Rd Coastal	Pool Pool Enclosure	Failed	None; need safety door from porch INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6059	Knudson 13 S. Via Lucinda Coastal	Final Screen Pool Enclosure	Passed	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5919	BURR. 21 RIVER VIEW O/B.	UNDERGROUND PLUMBING Slab	Passed Passed	INSPECTOR: 
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5977	DOSS 85 S. RIVER RD. CARDINAL	FINAL ROOF	Passed	INSPECTOR: 

OTHER:

TREE
TREE - 17 S. VIA Lucinda Large Banyan ??

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/4, 2007 3 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6267	WANDE 26 SIMARA	FINAL Hurricane	Passed	Close
	FOLDING SHUTTERS	SHUTTERS		INSPECTOR: <i>J</i>
6272	WANDER 26 SIMARA	FINAL SHUTTER	Passed	Close
	SHORELINE	ELECTRIC		INSPECTOR: <i>J</i>
6302	PARE 61 N. RIVER	FINAL DRIVEWAY	Passed	Close
	BEEBE & Co			INSPECTOR: <i>J</i>
6131	PFEIFFER 104 HENRY SEWALL	ROOF SHEATHING	Passed	(high roof)
	BUFORD			INSPECTOR: <i>J</i>
6117	SCHOPPE 8 PALM ROAD	HURRICANE SHUTTERS	Passed	close
6116	WIB	WINDOW + DOORS	↓	INSPECTOR: <i>J</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GOVEL 5 RIVERVIEW DR	TREE		INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
	→ Al Pinest / Pacific Roofg performing repairs			! no permit
				INSPECTOR:
OTHER	7 N Ridgeview	wip → no sign of work		
	* 28 No Vista	roofing debris in DW		
	15 Middle Rd	stump damaged tree down (cut up)		
		Alfa-Zeta Landscape Div		

6043

DRIVEWAY/WALK

TOWN OF SEWALL'S POINT

Date 11-20-02

BUILDING PERMIT NO. 6043

Building to be erected for Paul Schoppe

Type of Permit Driveway/WALK

Applied for by STEVE Burnett

(Contractor) Building Fee 35.00

Subdivision Palm Row Lot 4 Block _____

Radon Fee _____

Address 8 Palm Road

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Parcel Control Number:

Plumbing Fee _____

1338410050000004040000

Roofing Fee _____

Amount Paid 35.00 Check # 1194 Cash _____ Other Fees (_____)

Total Construction Cost \$ 2400.00

TOTAL Fees 35.00

Signed [Signature]

Signed [Signature]

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 DRIVEWAY & WALK

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 _____

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Owner or Titleholder Name: Paul Shoppe Building Permit Number:
City: Sewall's Point State: FL Zip: 33996
Legal Description of Property: Lot #4 Parcel Number:
Location of Job Site: #8 Palm Rd. Type of Work To Be Done: Driveway & Sidewalk

CONTRACTOR/Company Name: Steven D. Burnett Phone Number: (561) 371-1864
Street: 14155 67th Ct. N. City: Loxahatchee State: FL Zip: 33470
State Registration Number: 0511085 State Certification Number: CB061994 Martin County License Number: 1998-275-470

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:
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: \$2400.00 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: 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:
This the day of 200
by who is personally
known to me or produced
as identification.
Notary Public

My Commission Expires:

CONTRACTOR SIGNATURE (Required) Steven D. Burnett
On State of Florida, County of: Martin
This the 18th day of November 2002
by S.D. Burnett who is personally
known to me or produced F.D.I.
As identification: Joan H. Barlow

Notary Public
Joan H. Barlow
MY COMMISSION # CC763645 EXPIRES
November 30, 2002
BONDED THRU TROY FAIN INSURANCE, INC.
Seal

Seal

Seal

ACORD CERTIFICATE OF LIABILITY INSURANCE		OP ID LP STEVE-2	DATE (MM/DD/YY) 11/05/02
PRODUCER R.V. Johnson Agency, Inc. 2041 SE Ocean Blvd Stuart FL 34996 Phone: 772-287-3366 Fax: 772-287-4255		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED Steven D Burnett 16155 67th Court N Loxahatchee FL 33470		INSURERS AFFORDING COVERAGE INSURER A: Ohio Casualty Group INSURER B: Progressive Express Ins Co INSURER C: INSURER D: INSURER E:	

RECEIVED
 NOV 05 2002
 BY: _____

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.

INSUR 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 GENL. AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC	BH052375242	08/14/02	08/14/03	EACH OCCURRENCE \$ 300000 FIRE DAMAGE (Any one fire) \$ 100000 MED EXP (Any one person) \$ 10000 PERSONAL & ADV INJURY \$ 300000 GENERAL AGGREGATE \$ 300000 PRODUCTS - COMP/OP AGG \$ 300000
B	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input checked="" type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS	009777893	08/01/02	08/01/03	COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ 100000 BODILY INJURY (Per accident) \$ 300000 PROPERTY DAMAGE (Per accident) \$ 50000
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO	NOT COVERED			AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY EA ACC \$ AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE \$ RETENTION \$	NOT COVERED			EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	NOT COVERED			W/C STATUTORY LIMITS \$ OTHER \$ E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$
	OTHER				

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

CERTIFICATE HOLDER TOWN024 Town of Sewalls Point 1 S. Sewalls Point Road Stuart FL 34996	ADDITIONAL INSURED; INSURER LETTER	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL 10* DAYS WRITTEN NOTICE TO THE CERTIFICATE HOLDER NAMED TO THE LEFT, BUT FAILURE TO DO SO SHALL IMPOSE NO OBLIGATION OR LIABILITY OF ANY KIND UPON THE INSURER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE
---	------------------------------------	---

STEVE Burnett

ACORD. CERTIFICATE OF LIABILITY INSURANCE		DATE 11/5/2002
PRODUCER: BOUCHARD INSURANCE, INC. 101 STARCREST DRIVE PO BOX 6090 CLEARWATER, FL 33758-6090 PHONE: 727-447-6481 FAX: 727-449-1267		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 <div style="border: 2px solid black; padding: 5px; display: inline-block; transform: rotate(-2deg);"> RECEIVED NOV 07 2002 BY: _____ </div>
INSURED: PEOPLE LEASING INC 1301 6TH AVENUE WEST, SUITE 200 BRADENTON, FL 34205 PHONE: 9417508870		

COVERAGES

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

INSR LTR	ADDL INSRD	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
		GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PROJECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ DAMAGE TO RENTED PREMISES (EA OCCURENCE) \$ MED EXP \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
		AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (EA ACCIDENT) \$ BODILY INJURY (PER PERSON) \$ BODILY INJURY (PER ACCIDENT) \$ PROPERTY DAMAGE (PER ACCIDENT) \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTOS ONLY: EA ACC \$ AGG \$
		EXCESS/UMBRELLA LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input type="checkbox"/> RETENTION				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? IF YES, DESCRIBE UNDER SPECIAL PROVISIONS BELOW	WC247842167	11/1/2001	12/1/2002	<input checked="" type="checkbox"/> WC STATUTORY LIMITS <input type="checkbox"/> OTHER E.L. EACH ACCIDENT \$1000000 E.L. DISEASE - EA EMPLOYEE \$1000000 E.L. DISEASE - POLICY LIMIT \$1000000
		OTHER	QUALIFIERS NAME; STEVE D. BURNETT			

DESCRIPTION OF OPERATIONS/LOCATIONS/VEHICLES/EXCLUSIONS ADDED BY ENDORSEMENT/SPECIAL PROVISIONS:
 COVERAGE APPLIES ONLY TO THOSE EMPLOYEES LEASED TO BUT NOT SUBCONTRACTORS OF STEVEN D BURNETT CLIENT # 2003014 ADD ON DATE 9/24/01

CERTIFICATE HOLDER

TOWN OF SEWALL'S POINT
 TOWN HALL 1 SOUTH SEWALL'S POINT
 SEWALL'S POINT, FL 34996

CANCELLATION

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

[Signature]



STATE OF FLORIDA

AC#0511085

DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

CGC061994

07/31/02

521290690

CERTIFIED GENERAL CONTRACTOR
BURNETT, STEVEN DONALD
INDIVIDUAL

IS CERTIFIED under the provisions of ch. 489 FS.

Expiration date: AUG 31, 2004 SEQ # L02073100773

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12-16-02, 2001; Page of .

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5693	Brewer 12 Copaire Stuart ROOFING	Final Roof	Passed	INSPECTOR: <i>[Signature]</i>
6024	Basel 10 CopAIRE Plomberg Pool	Plmby + Deck	Passed	INSPECTOR: <i>[Signature]</i>
5976	Barnfeth 49 S. Sewall's Pt Homingo	Final	Passed	INSPECTOR: <i>[Signature]</i>
6068	Brewer 12 Copaire Banner	Final Hurricane Shutters	Passed	INSPECTOR: <i>[Signature]</i>
5693	Brewer 12 Copaire Stuart Roof	Roof-Final	Passed	INSPECTOR: <i>[Signature]</i>
5645	Brewer 12 Copaire Dolphin Alarm	Screen Enclosure	Passed	INSPECTOR: <i>[Signature]</i>
5618	Schoppe 8 Palm Rd Apostolo Pous	Final	Passed	INSPECTOR: <i>[Signature]</i>
OTHER:	Schoppe 8 Palm Rd Beemer	Final Deming	Passed	<i>[Signature]</i>

6116

REPLACE

WINDOWS &

DOORS

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 2/3/03

BUILDING PERMIT NO. 6116

Building to be erected for SCHOPPE

Type of Permit Repl. Windows & Doors
3512
(Contractor) Building Fee 70.00

Applied for by O/B

Subdivision PALM ROW Lot 4 Block _____

Address 8 PALM ROAD

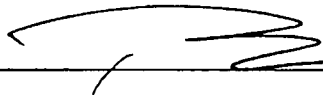
Type of structure SFR

Radon Fee _____
Impact Fee _____
A/C Fee _____
Electrical Fee _____
Plumbing Fee _____
Roofing Fee _____

Parcel Control Number:
133841005000000404 0000

Amount Paid 70.00 Check # 189 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 1200.00 TOTAL Fees 70.00

Signed 
Applicant

Signed Gene Simmons (P.O.)
Town Building Official

PERMIT

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

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: _____

Owner or Titleholder Name: PAUL SCHOPPE City: STUART State: FL Zip: 34996

Legal Description of Property: LOT 4 REVISED & AMENDED PLAT OF PALM ROW Parcel Number: 133841005000000 4040000

Location of Job Site: 8 PALM RD. Type of Work To Be Done: INSTALL WINDOWS + DOORS

CONTRACTOR/Company Name: OWNER / BUILDER Phone Number: 221-1604

Street: SAME City: State: Zip:

State Registration Number: State Certification Number: Martin County 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:

Carpport: 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: Estimated Fair Market Value (FMV) Prior

To Improvements: \$1200 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: 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

THEREBY 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

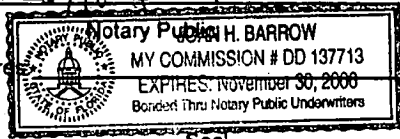
This the 31st day of January, 2003

by P. Schoppe who is personally

known to me or produced P.d.l.

as identification Joan H. Barrow

My Commission Expires



CONTRACTOR SIGNATURE (Required)

On State of Florida, County of: Martin

This the 31st day of January, 2003

by P. Schoppe who is personally

known to me or produced P.d.l.

as identification Joan H. Barrow

My Commission Expires



PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR HURRICANE SHUTTERS

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. Window design pressures for site specific conditions
2. Product approvals from Miami/Dade for the following items:
 - a. Hurricane Shutters
3. Statement of Fact (owner/builder affidavit)
4. Proof of ownership (deed or tax recpt.)
5. Manufactures specifications or shop drawings for hurricane shutters with highlighted areas of specific installation connectors and tracks (one copy signed and sealed)
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: 1/31/03

TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

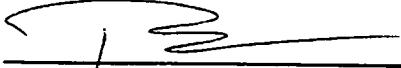
TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

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: PAUL SCHORPE Date: 1/29/03

Signature: 

Address: 8 PALM RD.

City & State: STUART, FL.

Permit No. _____

This form is for all permits except electrical.

OWNER'S AFFIDAVIT OF BUILDING COSTS

(To be submitted at time of final inspection for Certificate of Occupancy)

STATE OF FLORIDA
MARTIN COUNTY

BEFORE ME, the undersigned authority, personally appeared the undersigned Affidavit, who, being first duly sworn, under penalty of perjury, deposes and says:

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 30,000.
4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:

[Handwritten Signature]

Property Address:

8 PALM RD.

STUART, FL. 34996

SWORN TO and subscribed before me this 13th day
of December 2002 by PAUL
SCHOPPE, who is personally known to me or
produced _____ as identification.

Susan Ann Vellek

Notary Public

My commission expires: September 19, 2004

(Notary Seal)



Susan Ann Vellek
Commission # CC 968289
Expires Sep. 19, 2004
Bonded Thru
Atlantic Bonding Co., Inc.

NOTICE OF PROPOSED PROPERTY TAXES

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

DO NOT PAY
THIS IS NOT A BILL

Account Number: 27809

PALM ROW REVISED & AMENDED
PLAT LOT 4 OR 346/611

*******SINGLE-PIECE**
SCHOPPE, PAUL R & LAURA B
8 PALM ROAD
STUART, FL 34996-6305



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.

1338410050000004040000

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:	1354.23	1114.43	Sept 12, 2002 5:05pm Commission Meeting Rm. 2401 SE Monterey Rd.	1076.61
Public Schools:				
By State Law:	1437.35	1183.64	Sept 3, 2002 7:00pm School Board Meeting Room, 500 E Ocean Blvd.	1142.72
By Local Board:	638.03	537.06		507.25
Sewalls Pt	465.88	392.61	Sept. 1 Sou	361.49
Late/Non File	.00	.00		.00
Water Mgmt Dist:	147.24	124.08	Sept	115.37
Everglades	24.66	20.78	3301	19.37
Independent Special Dist*	87.01	73.33	Incl FINI	69.17
Voter Approved Debt Payment* County	15.29	12.05	Sep Mee	12.05
	72.02	56.53		56.53
	38.72	30.34		30.34
	.00	.00		.00
Non-Ad Valorem	.00	.00	WA	.00
Total Property Tax	4280.43	3544.85		3390.90
Real Property	COLUMN 1	COLUMN 2		COLUMN 3
	SEE REVERSE SIDE FOR EXPLANATION			SEE REVERSE SIDE FOR EXPLANATION
YOUR PROPERTY VALUE LAST YEAR: 2001	MARKET VALUE 246628	ASSESSED VALUE 246628	EXEMPTIONS 0	TAXABLE VALUE 246628
YOUR PROPERTY VALUE THIS YEAR: 2002	232839	232839	25000	207839

The Sunshine State
LICENSE NUMBER
S100-696-73-467-0
PAUL ROBERT SCHOPPE
1888 SW MOCKINGBIRD LANE
PALM CITY, FL 34980-0000
BIRTH DATE SEX HGT. REST. ENDORSE.
12-27-73 M 6-01 12-27-03
ISSUED 10-18-88 EXPIRES 12-27-03
DUPLICATE 02-22-00
ORGAN DONOR
Operation of a motor vehicle commeth./has consent to any sobriety test required by law.

• 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 [772] 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 **09/17/2002**



NOA No. 02-0109.02
 Expiration Date: July 3, 2007
 Approval Date: July 3, 2002
 Page 1

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

DESCRIPTION: Series "DoorCraft®" 6'8" S/E Inswing Glazed Insulated Steel Door w/w/o Sidelites 107" x 6'-8" Inswing Unit", sheets 1 through 7, dated 12/23/01, with revision 1 dated 03/15/02, prepared by RW Building Consultants, Inc., bearing the Miami-Dade County Product Control Approval stamp with the Notice of Acceptance number and approval date by the Miami-Dade County Product Control Division.

MISSILE IMPACT RATING: None

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

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

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

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

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

The submitted documentation was reviewed by Manuel Perez, P.E.

SCOPE:
 This NOA is being issued under the applicable rules and regulations governing the use of construction materials by the Board of Rules and Appeals (BORA) to be used in Miami Dade County and other areas where allowed by the Authority Having Jurisdiction (AHJ).

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

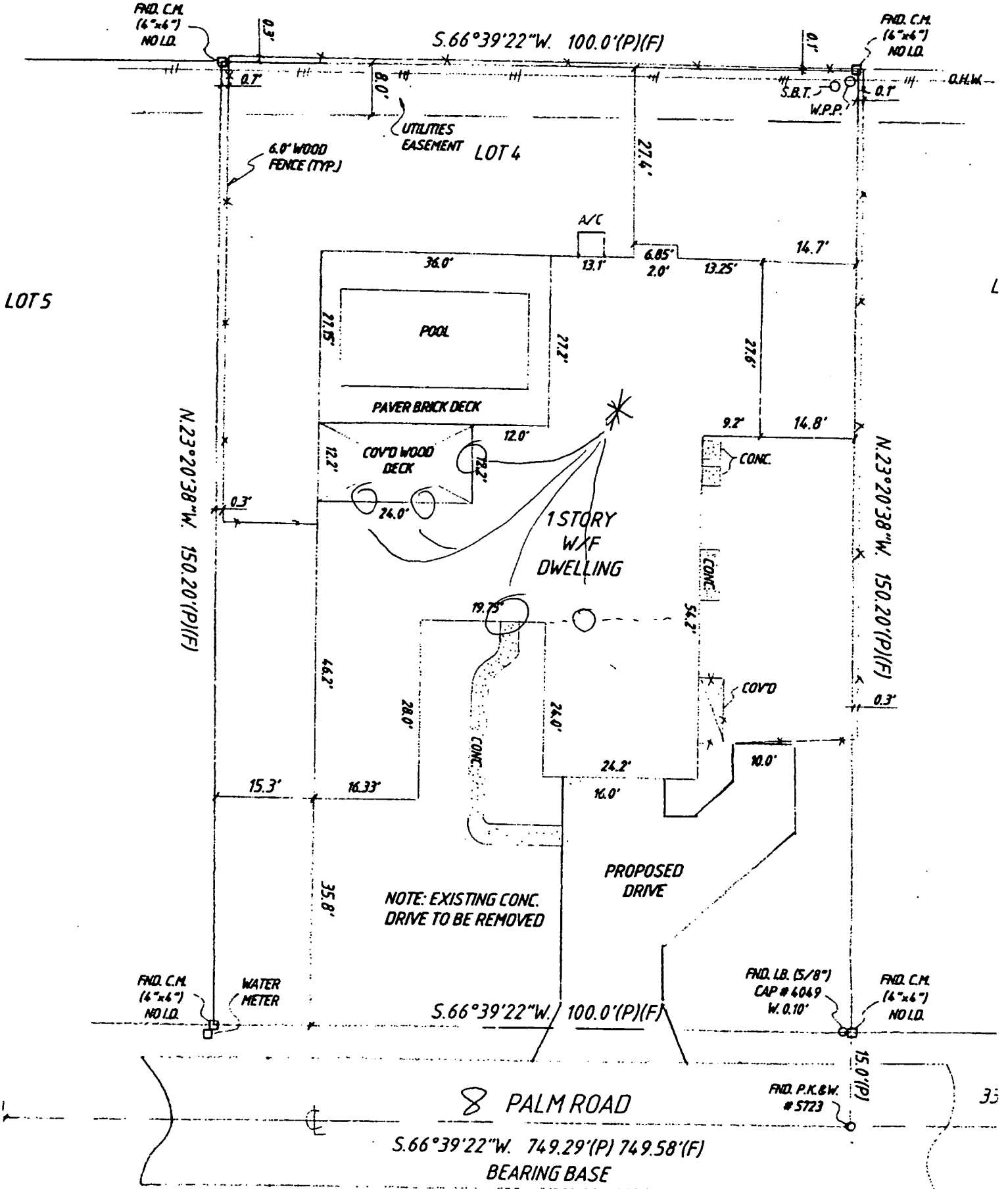
Jeld-Wen, Inc.
 3250 Lakeport Drive
 Klamath Falls, OR 97601

FILE COPY	
TOWN OF SEWALL'S POINT	
THESE PLANS HAVE BEEN	
REVIEWED FOR CODE COMPLIANCE	
DATE: 2/3/03	
BUILDING OFFICIAL (NOA)	
Gene Simmons	

MIAMI-DADE COUNTY, FLORIDA
 METRO-DADE FLAGLER BUILDING
 140 WEST FLAGLER STREET, SUITE 1603
 MIAMI, FLORIDA 33130-1563
 (305) 375-2901 FAX (305) 375-2903

MIAMI-DADE
 BUILDING CODE COMPLIANCE OFFICE (BCCO)
 PRODUCT CONTROL DIVISION

RIVER VIEW S/D



LOT 5

8 PALM ROAD

$S.66^{\circ}39'22''W. 749.29'(P) 749.58'(F)$
BEARING BASE

L

35

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/4, 20023 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6267	WANDER	FINAL	Passed	Close
	26 SIMARA	HURRICANE		
	FOLDING SHUTTERS	SHUTTERS		INSPECTOR: <i>J</i>
6272	WANDER	FINAL	Passed	Close
	26 SIMARA	SHUTTER		
	SHORELINE	ELECTRIC		INSPECTOR: <i>J</i>
6302	PARE	FINAL	Passed	Close
	61 N. RIVER	DRIVEWAY		
	DEEBE & Co			INSPECTOR: <i>J</i>
6131	PFEIFFER	ROOF	Passed	(high roof)
	104 HENRY SEWALL	SHEATHING		
	BUFORD			INSPECTOR: <i>J</i>
6117	SCHOPPE	HURRICANE	Passed	Close
	8 PALM ROAD	SHUTTERS	↓	
6027	101B	WINDMILL	↓	INSPECTOR: <i>J</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
TREE	GOVEL	TREE		
	5 RIVERVIEW DR			INSPECTOR:
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
OTHER:	7 N Ridgeview	WIP →	no sign of work	<i>J</i>
	* 98 Rio Vista	roofing	debris in DW	<i>J</i>
	15 Middle Rd	stump	damaged tree down (cut up)	<i>J</i>
		Delta-Zeta	Landscap. Div.	<i>J</i>

6117

HURRICANE

SHUTTERS

TOWN OF SEWALL'S POINT

Date 2/3/03

BUILDING PERMIT NO. 6.1.17

Building to be erected for SHOPPES

Type of Permit HURRICANE SHUTTERS

Applied for by O/B

(Contractor) Building Fee 35.00

Subdivision Palm Row Lot 4 Block _____

Radon Fee _____

Address 8 Palm Road

Impact Fee _____

Type of structure SFR

A/C Fee _____

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Parcel Control Number:

13384100500000040000

Amount Paid 35.00 Check # 190 Cash _____

Other Fees (_____) _____

Total Construction Cost \$ 1000 -

TOTAL Fees 35.00

Signed [Signature]

Applicant

Signed Gene Summers (POB)

Town Building Official

PERMIT

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

INSPECTIONS

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: PAUL & LAURA SCHOPPE City: STUART State: FL. Zip: 34996

Legal Description of Property: LOT 4 REVISED & AMENDED PLOT OF PALM ROAD Parcel Number: 133841005000000 4040000

Location of Job Site: 8 PALM RD. Type of Work To Be Done: INSTALL HURRICANE SHUTTERS

CONTRACTOR/Company Name: OWNER/BUILDER Phone Number: 221-1604

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

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

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: _____ Estimated Fair Market Value (FMV) Prior

To Improvements: 1000 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: _____ 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 _____

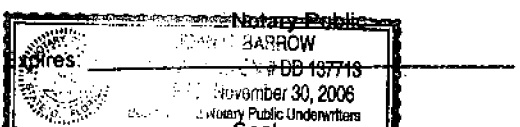
Florida Accessibility Code _____

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) [Signature]
State of Florida, County of: Martin
This the 31st day of January, 2003
by P. Schoppe who is personally
known to me or produced F.I.d.I.
as identification: Joan H. Barrow

CONTRACTOR SIGNATURE (Required) [Signature]
On State of Florida, County of: Martin
This the 31st day of January, 2003
by P. Schoppe who is personally
known to me or produced F.I.d.I.
As identification: Joan H. Barrow

My Commission Expires: _____


My Commission Expires: _____


NOTICE OF PROPOSED PROPERTY TAXES

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

DO NOT PAY
THIS IS NOT A BILL

Account Number: 27809

PALM ROW REVISED & AMENDED
PLAT LOT 4 OR 346/611

*****SINGLE-PIECE
 SCHOPPE, PAUL R & LAURA B
 8 PALM ROAD
 STUART, FL 34996-6305



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.

1338410050000004040000

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:	1354.23	1114.43	Sept 12, 2002 5:05pm Commission Meeting Rm. 2401 SE Monterey Rd.	1076.61
Public Schools:				
By State Law:	1437.35	1183.64	Sept 3, 2002 7:00pm School Board Meeting Room, 500 E Ocean Blvd.	1142.72
By Local Board:	638.03	537.06		507.25
Sewalls Pt	465.88	392.61	Sept 1 Sou	361.49
Late/Non File	.00	.00		.00
Water Mgmt Dist:	147.24	124.08	Sept 3301	115.37
Everglades	24.66	20.78	Incl FINI	19.37
Independent Special Dist*	87.01	73.33	Sep Mee	69.17
Voter Approved Debt Payment* County	15.29	12.05		12.05
	72.02	56.53		56.53
	38.72	30.34		30.34
	.00	.00		.00
Non-Ad Valorem	.00	.00		.00
Total Property Tax	4280.43	3544.85		3390.90
Real Property	COLUMN 1	COLUMN 2		COLUMN 3
	SEE REVERSE SIDE FOR EXPLANATION			SEE REVERSE SIDE FOR EXPLANATION
YOUR PROPERTY VALUE LAST YEAR: 2001	MARKET VALUE 246628	ASSESSED VALUE 246628	EXEMPTIONS 0	TAXABLE VALUE 246628
YOUR PROPERTY VALUE THIS YEAR: 2002	232839	232839	25000	207839

The Sunshine State
 LICENSE NUMBER
S100-696-73-467-0
 PAUL ROBERT SCHOPPE
 1888 SW MOCKINGBIRD LANE
 PALM CITY, FL 34890-0000
 BIRTH DATE 12-27-73 SEX M HGT. REST. 6-01
 ISSUED 10-18-88 EXPIRES 12-27-08
 ENDORSE DPLICATE 02-22-00
 ORGAN DONOR
 Operation of a motor vehicle constitutes consent to any sobriety test required by law.

• 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 [772] 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 09/17/2002

OWNER'S AFFIDAVIT OF BUILDING COSTS

(To be submitted at time of final inspection for Certificate of Occupancy)

STATE OF FLORIDA
MARTIN COUNTY

BEFORE ME, the undersigned authority, personally appeared the undersigned Affidavit, who, being first duly sworn, under penalty of perjury, deposes and says:

1. That Affidavit is the owner or the authorized agent of the owner of certain real estate (the Property) located within the municipal limits of the Town of Sewall's Point, Florida (the Town), having the street address set forth below Affidavit's signature.
2. That all of the improvements on the Property under current building permit(s) issued by the Town have been completed in substantial conformity with the plans and specifications on file with the Town and in accordance with all applicable state and local building codes.
3. That the total cost paid or to be paid by the owner for the complete construction of the improvements under the building permit(s), including the cost of all improvements shown on the plans and specifications filed with the Town and all machinery and equipment not shown thereon required to be installed as a condition for a certificate of occupancy under state and local law, is \$ 30,000.
4. That this Affidavit is made for the purpose of inducing the Building Official of the Town to issue a Certificate of Occupancy for the improvements, with the intention that it be relied upon for that purpose.

Affidavit's Signature:



Property Address:

8 PALM RD -

STUART, FL. 34996

SWORN TO and subscribed before me this 13th day of December, 2002 by PAUL SCHOPPE, who is personally known to me or produced _____ as identification.

Susan Ann Vellek
Notary Public

My commission expires: September 19, 2004

(Notary Seal)



Susan Ann Vellek
Commission # CC 968289
Expires Sep. 19, 2004
Bonded Thru
Atlantic Bonding Co., Inc.

TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

TOWN OF SEWALL'S POINT OWNER/BUILDER AFFIDAVIT
(To be submitted if permit is to be pulled by Owner/Builder)

DISCLOSURE STATEMENT

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even through you do not have a license. You must supervise the construction yourself. You may build or improve a one-family or two-family residence or a farm outbuilding. You may also build or improve a commercial building at a cost of \$25,000 or less. The building must be for your own use and occupancy. It may not be built for sale or lease. If you sell or lease a building you have built yourself within 1 year after the construction is complete, the law will presume that you built it for sale or lease, which is a violation of this exemption. You may not hire an unlicensed person as your contractor. It is your responsibility to make sure that people employed by you have licenses required by State law and by County or Municipal licensing ordinances. Any person working on your building who is not licensed must work under your supervision and must be employed by you, which means that you must deduct F.I.C.A. and withholding tax and provide workers' compensation for that employee, all as prescribed by law. Your construction must comply with all applicable laws, ordinances, building codes and zoning regulations. Florida Statutes 489.103(7).

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

Name: PAUL SCHOPPE Date: 1/29/03

Signature: 

Address: 8 PALM RD.

City & State: STUART, FL.

Permit No. _____

This form is for all permits except electrical.

PERMIT APPLICATION REQUIRED INFORMATION AND SUBMITTALS FOR HURRICANE SHUTTERS

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

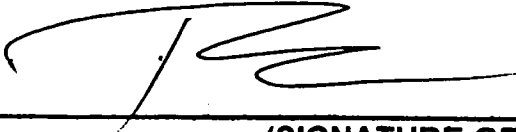
Application form must contain the following information:

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. Window design pressures for site specific conditions
2. Product approvals from Miami/Dade for the following items:
 - a. Hurricane Shutters
3. Statement of Fact (owner/builder affidavit)
4. Proof of ownership (deed or tax recpt.)
5. Manufactures specifications or shop drawings for hurricane shutters with highlighted areas of specific installation connectors and tracks (one copy signed and sealed)
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: _____

1/31/03

BUILDING CODE COMPLIANCE C
METRO-DADE FLAGLER BUI
140 WEST FLAGLER STREET, SUT
MIAMI, FLORIDA 331
(305) 375-2901 FAX (305) 3

CONTRACTOR LICENSING SI
(305) 375-2527 FAX (305):

CONTRACTOR ENFORCEMENT DI
(305) 375-2966 FAX (305):

PRODUCT CONTROL DI
(305) 375-2902 FAX (305):

PRODUCT CONTROL NOTICE OF ACCEPTANCE

Eastern Metal Supply, Inc.
3600 23rd Ave., South
Lake Worth, FL 33461

Your application for Notice of Acceptance (NOA) of:

0.030" Galvanized Steel Storm Panels Shutter

under Chapter 8 of the Code of Miami-Dade County governing the use of Alternate Materials and Ty Construction, and completely described herein, has been recommended for acceptance by the Miami-D 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 secu product or material at any time from a jobsite or manufacturer's plant for quality control testing. product or material fails to perform in the approved manner, BCCO may revoke, modify, or susper use of such product or material immediately. BCCO reserves the right to revoke this approval, i determined by BCCO that this product or material fails to meet the requirements of the South F Building Code.

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

ACCEPTANCE NO.: 00-0919.10

EXPIRES: 06/07/2004

Raul Rodriguez
Chief Product Control Divisio

**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 Bui Code and Product Review Committee to be used in Miami-Dade County, Florida under the conditior forth above.

APPROVED: 06/07/2001

FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 2/3/03

BUILDING OFFICIAL
Gene S. [unclear]

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

Eastern Metal Supply, Inc.

ACCEPTANCE No. : 00-091

APPROVED : 06/07/20

EXPIRES : 06/07/20

NOTICE OF ACCEPTANCE: SPECIFIC CONDITIONS

1. SCOPE

This approves 0.030" Galvanized Steel Storm Panels Shutter, as described in Section Notice of Acceptance, designed to comply with the South Florida Building Code, 1994 Edition, Miami-Dade County, for the locations where the pressure requirements, as determined in Chapter 23, do not exceed the Design Pressure Rating values indicated in the approved drawings.

2. PRODUCT DESCRIPTION

This 0.030" Galvanized Steel Storm Panels shutter and its components shall be constructed in compliance with the following documents: Drawing No. 00-252, titled "24 Gage Galvanized Steel Storm Panels", prepared by Tilteco, Inc., dated July 10, 2000, last revision #1 dated 2001, sheets 1 through 9 of 9, signed and sealed by Walter A. Tillit Jr., P.E., bearing the Miami-Dade County Product Control approval stamp with the Notice of Acceptance number and a date by the Miami-Dade County Product Control Division. These documents shall herein be referred to as the approved drawings.

3. LIMITATIONS

All permanent set components, included but not limited to embedded anchor bolts, threaded metal shields, headers and sills, must be protected against corrosion, contamination and damage at all times.

4. INSTALLATION

This 0.030" Galvanized Steel Storm Panels Shutter and its components shall be installed in compliance with the approved drawings.

5. LABELING

Each panel shall bear a permanent label with the manufacturer's name or 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.

6.1.2 Duplicate copies of the approved drawings, as identified in Section 2 of this Notice of Acceptance, clearly marked to show the components selected for the proposed installation.

6.1.3 Any other documents required by the Building Official or the South Florida Building Code (SFBC) in order to properly evaluate the installation of this system.

Walter A. Tillit Jr.

Eastern Metal Supply, Inc.

ACCEPTANCE No. : 00-0919

APPROVED : 06/07/20

EXPIRES : 06/07/20

NOTICE OF ACCEPTANCE: STANDARD CONDITIONS

1. Renewal of this Acceptance (approval) shall be considered after a renewal application has been filed with original submitted documents, including test-supporting data, engineering documents, are no older than (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 correct installation of the product.
 - d. The engineer, who originally prepared, signed and sealed the required documentation 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 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 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 needs not reseal the copies.
8. Failure to comply with any section of this Acceptance shall be cause for termination and removal of this Acceptance.
9. This Notice of Acceptance consists of pages 1, 2 and this last page 3.

END OF THIS ACCEPTANCE

Helmut A. M. L.



SBCCI PUBLIC SAFETY TESTING AND EVALUATION SERVICES INC.
900 Montclair Road, Suite A; Birmingham, Alabama 35213-1206
www.sbccies.org
a Participating Member of the NES, Inc.

Evaluation Reports are the opinion of the Committee on Evaluation, based on the findings, and do not constitute or imply an approval or acceptance by any local community. The Committee, in review of the data submitted, finds that in their opinion the product, material, system, or method of construction specifically identified in this report conforms with or is a suitable alternate to that specified in the Standard and International Codes,
SUBJECT TO THE LIMITATIONS IN THIS REPORT.

The Committee on Evaluation has reviewed the data submitted for compliance with the *Standard Building Code*, the *SBCCI Standard for Hurricane-Resistant Residential Construction SSTD 10*, and the International One and Two Family Dwelling Code and submits to the Building Official or other authority having jurisdiction the following report. The Committee on Evaluation, SBCCI PST & ESI and its staff are not responsible for any errors or omissions to any documents, calculations, drawings, specifications, tests or summaries prepared and submitted by the design professional or preparer of record that are listed in the Substantiating Data Section of this report.
Copyrighted © 2000 SBCCI PST & ESI

REPORT NO.: 2047

EXPIRES: See current SBCCI PST & ESI EVALUATION REPORT LISTING

CATEGORY: DOORS AND WINDOWS **FINAL REPORT**

SUBMITTED BY:

EASTERN METAL SUPPLY, INC.
3600 23rd AVENUE SOUTH
LAKE WORTH, FLORIDA 33461

1. PRODUCT TRADE NAME

- 1.1 Bertha 24 Gauge Galvanized Steel Storm Panels
- 1.2 Bertha 22 Gauge Galvanized Steel Storm Panels
- 1.3 Bertha 20 Gauge Galvanized Steel Storm Panels
- 1.4 0.050" Bertha Aluminum Storm Panels
- 1.5 Bertha Clear Polycarbonate Panels

2. SCOPE OF EVALUATION

- 2.1 Impact Resistance under SSTD 12
- 2.2 Structural - Transverse Wind Loads

3. USES

Bertha Storm Panels are used to protect glazed openings from windborne debris.

4. DESCRIPTION

4.1 Bertha Steel Storm Panel

4.1.1 Bertha 24 Gauge Galvanized Steel Storm Panels are 0.026 inch (0.7 mm) thick corrugated steel sections conforming with ASTM A 653 SQ Grade 40 with a minimum yield strength of 40 ksi (276 MPa) and galvanized under ASTM G 60. The full panels are 15.119 inches (384 mm) wide and 2.25 inches (57 mm) deep. Panels are overlapped for unlimited width openings. They are mounted directly to the structure or by the use of mounting extrusions. Extrusions for mounting panels are 6063-T6 aluminum alloy. Mounting extrusions are "h" header, "U" Header, 3" Maximum "U" Build Out, 3" Angle Build Out Bracket, B.O. "F" Track, Reversed "F" Angle Track, "F" Track Angle, Studded Angle, and Angle. The maximum allowable span is 8'- 11" (2.7 m) and the maximum allowable load is +65, -70 psf (+3.1, -3.4 kPa) when the system is attached to wood. See Table 1 of this report for allowable spans and loads when the system is attached to concrete or concrete masonry units (CMU).

4.1.2 Bertha 22 Gauge Galvanized Steel Storm Panels are the same as the 24 Ga Steel panels described in Section 4.1.1 above except the material thickness is 0.030 inch (0.8 mm). The maximum allowable span is 10'- 0" (3.0 m) and the maximum allowable load is +60, -65 psf (+2.9, -3.1 kPa) when the system is attached to wood. See Table 1 of this report for allowable spans and loads when the system is attached to concrete or concrete masonry units (CMU).

4.1.3 Bertha 20 Gauge Galvanized Steel Storm Panels are the same as the 24 Ga Steel panels described in Section 4.1.1 above except the material thickness is 0.036 inch (0.9 mm). The maximum allowable span is 10'- 0" (3.0 m) and the maximum allowable load is +60, -65 psf (+2.9, -3.1 kPa) when the system is attached to wood. See Table 1 of this report for allowable spans and loads when the system is attached to concrete or concrete masonry units (CMU).

4.1.4 0.050" Bertha Aluminum Storm Panel

The panels are 0.050 inch (1.3 mm) thick corrugated aluminum alloy sections conforming with 5052-H32 or 3004-H34 Aluminum Alloy with a minimum yield strength of 23 ksi (159 MPa). The full panels are 15.119 inches (384 mm) wide and 2.25 inches (57 mm) deep. Panels are overlapped for unlimited width openings. Extrusions for mounting panels are 6063-T6 aluminum alloy. Mounting extrusions are "h" header, "U" Header, 3" Maximum "U" Build Out, 3" Angle Build Out Bracket, B.O. "F" Track, Reversed "F" Angle Track, "F" Track Angle, Studded Angle, and Angle. The maximum allowable span is 9'- 0" (2.7 m) and the maximum allowable load is +65, -70 psf (+3.1, -3.4 kPa) when the system is attached to wood. See Table 2 of this report for allowable loads.

4.1.5 Bertha Clear Polycarbonate Panel

The panels are 0.060 inch (1.5 mm) thick corrugated clear polycarbonate sections. The panels are 15.119 inches (384 mm) wide and 2.25 inches (57 mm) deep. Panels are fabricated from Sheffield Plastic's HYZOD (SBCCI PST & ESI 9564D). The Bertha Clear Polycarbonate Panel is used in conjunction with the 0.050" Bertha Aluminum Storm Panels. Only one polycarbonate panel is permitted for each set of three panels. A minimum of one aluminum panel is required to be installed immediately adjacent to each side of the polycarbonate panel. A minimum of two aluminum panels shall separate polycarbonate panels. The mounting extrusions are the same as noted in section 4.1.4 above. The maximum allowable span is 6'- 4" (1.9 m) and the maximum allowable load is +65, -70 psf (+3.1, -3.4 kPa) when the system is attached to wood. See Table 3 of this report for allowable loads.

4.2 Large Missile Impact Resistance under SSTD 12

The Bertha Storm Panels were tested for large missile impact resistance under SSTD 12. The panels tested passed the large missile impact test. The panels listed in this report may be used to protect glazed openings from windborne debris.

5. INSTALLATION

5.1 General

The manufacturer's published installation instructions and this report shall be strictly adhered to and a copy of these instructions shall be available at all times on the job site during installation. The instructions within this report govern if there are any conflicts between the manufacturer's instructions and this report.

5.2 Allowable Transverse Wind Loads

The design wind loads on the shutters shall be determined in accordance with 1606 of the *Standard Building Code*® and shall not exceed the allowable transverse wind loads shown in Tables 1, 2, and 3 of this report.

The installation of fasteners into concrete or concrete masonry units (CMU) are based on special inspections. See the SBCCI PST & ESI or NES evaluation report on the specific fastener for special inspection requirements.

When Special Inspection is required as noted in this report, the owner or the registered design professional in responsible charge acting as the owner's agent shall employ one or more special inspectors to provide inspection of the construction involved. The special inspector shall be a registered design professional, a SBCCI certified building inspector, an employee of a SBCCI PST & ESI or N.E.S. listed quality assurance or inspection agency, or other third party qualified person who demonstrates competence to the satisfaction of the building official.

FINAL REPORT

- 6.1 Manufacturer's specifications and installation drawings:
 - Eastern Metal Supply 0.050" Bertha Aluminum Storm Panel, Drawing 98-04, dated January 5, 1998, Revision 4, dated October 16, 2000, 9 sheets, prepared by Tilteco, Inc., signed, sealed, and dated by Walter A. Tillit, JR., P.E.
 - Eastern Metal Supply 24, 22 & 20 Gauge Galvanized Bertha Steel Storm Panel, Drawing 98-11, dated January 29, 1998, Revision 4, dated September 8, 2000, 8 sheets, prepared by Tilteco, Inc., signed, sealed, and dated by Walter A. Tillit, JR., P.E.
- 6.2 Test report on large missile impact loadings on 24 gauge (0.026") galvanized steel storm panels under SSTD 12, prepared by American Test Lab of South Florida, ATL Report No. 0121.01-98R, revised April 28, 1999, signed by Keith Harker.
- 6.3 Test report on large missile impact loadings on 0.050" aluminum storm panels under SSTD 12, prepared by American Test Lab of South Florida, ATL Report No. 0210.01-98R, revised April 28, 1999, signed by Keith Harker.
- 6.4 Test report on large missile impact loadings on aluminum and polycarbonate systems, prepared by American Test Lab of South Florida, ATL Report No. 0306.01-98R, revised April 28, 1999, signed by Keith Harker.
- 6.5 Addendum to ATL Report No. 0306.01-98R, prepared by American Test Lab of South Florida, ATL Report #0525.01-00 dated May 26, 2000, signed by Keith Harker, signed and sealed by William R. Mehner, P.E..
- 6.6 Test report on large missile impact loadings on 24 gauge (0.026") galvanized steel storm panels under SSTD 12, prepared by American Test Lab of South Florida, ATL Report No. 0329.01-00, dated May 26, 2000, signed by Keith Harker, signed and sealed by William R Mehner, P.E. and Henry Hatter, P.E.
- 6.7 Engineering calculations on 0.050" Aluminum Storm Panels for allowable wind pressures using the Aluminum Design Manual, prepared by Tilteco Inc., dated April 15, 1998, signed and sealed by Walter A. Tillit, Jr., P.E.
- 6.8 Engineering calculations on 24 Gauge Galvanized Steel Storm Panels for allowable wind pressures, prepared by Tilteco Inc., dated April 15, 1998, signed and sealed by Walter A. Tillit, Jr., P.E.
- 6.9 Engineering calculations on 24 & 22 Gauge Galvanized Steel Storm Panels for allowable wind pressures, prepared by Tilteco Inc., dated June 16, 2000, Revised August 15, 2000, signed and sealed by Walter A. Tillit, Jr., P.E.
- 6.10 Test report on aluminum and polycarbonate panels in accordance with ASTM E 330, prepared by American Test Lab of South Florida, dated March 11, 1998, signed by Keith Harker.
- 11 Engineering calculations on Aluminum and Polycarbonate Storm Panels for allowable wind pressures, prepared by Tilteco Inc., dated June 16,

- 2000, Revised August 15, 2000, signed and sealed by Walter A. Tillit, Jr., P.E.
- 6.12 Comparative analysis between Steel Storm Panels, Aluminum Storm Panels, and Clear/Aluminum Storm Panel Systems, prepared by Tilteco Inc., 18 pages, dated September 8, 2000, signed and sealed by Walter A. Tillit, Jr., P.E.

7. CODE REFERENCES

- Standard Building Code*® - 1999 Edition
 - Section 103.7 Alternate Materials and Methods
 - Section 1606 Wind Loads
 - Chapter 17 Structural Tests and Inspections
 - Section 1707.4 Exterior Window and Door Assemblies
 - Chapter 20 Light Metal Alloys
 - Section 2002 Structural Aluminum
- SBCCI Standard for Hurricane Resistant Residential Construction*® SSTD10-99
 - Section 101.3 Integrity of Building Envelope
 - Section 101.4 Alternate Materials and Methods
 - Section 101.6 Design Concepts
 - Section 104 Design Criteria
 - Section 104.1 Wind Loads
 - Appendix B Design Load Assumptions
- International One and Two Family Dwelling Code* - 1998 Edition
 - Section 108 Alternate Materials and Systems
 - Section 301 Design Criteria
 - Section 308.5 Glazing - Wind Loads
 - Section 603 Metal

FINAL REPORT

8. COMMITTEE FINDINGS

The Committee on Evaluation in review of the data submitted finds that, in their opinion, the Bertha Storm Panels as described in this report conform with or are suitable alternates to that specified in the *Standard Building Code*®, the *SBCCI Standard for Hurricane Resistant Residential Construction*® SSTD 10, and the *International One and Two Family Dwelling Code* or Supplements thereto.

9. LIMITATIONS

- 9.1 Wood to which steel panel systems are attached shall be a minimum of No. 2 Souther Pine with a minimum specific gravity of 0.55.
- 9.2 The structural elements supporting the shutters shall be designed for the wind loads shown on the drawings. The calculations shall be submitted to the building official when applying for a permit. The calculations shall be signed, sealed, and dated by a registered professional engineer when required by the Code.

... installed in concrete with a minimum compressive strength of 3000 psi and hollow CMU with a minimum f' of 1200 psi. (SBCCI PST & ESI #9759)

ITW Dynabolt Sleeve Anchor fasteners shall be installed in concrete with a minimum compressive strength of 3500 psi or medium weight hollow CMU. Fasteners in CMU shall be carbon steel. (SBCCI PST & ESI #9570)

Tru-Fast CF Tap Grip fasteners shall be installed in concrete with a minimum compressive strength of 3200 psi and hollow CMU with a minimum f' of 2500 psi. (SBCCI PST & ESI #9807A)

Powers Caulk-In fasteners shall be installed in concrete with a minimum compressive strength of 3870 psi and hollow CMU with a minimum f' of 3235 psi. (SBCCI PST & ESI #9944)

Powers Zamac Nail-In fasteners shall be installed in concrete with a minimum compressive strength of 4000 psi and hollow CMU with a minimum f' of 3235 psi. (SBCCI PST & ESI #9944)

FINAL

Elco PanelMate fasteners shall be installed in concrete with a minimum compressive strength of 3350 psi and hollow CMU with a minimum f' of 2000 psi.

10. IDENTIFICATION

Each Eastern Metal Supply Storm Panel covered by this report shall be labeled with the manufacturer's name and/or trademark, the SBCCI Public Safety Testing and Evaluation Services Inc. seal or initials (SBCCI PST & ESI), and the number of this report for field identification.

The panels shall also be labeled in accordance with Section 102 of SSTD 12.

REPORT PERIOD OF ISSUANCE

SEE CURRENT SBCCI PST & ESI EVALUATION REPORT LISTING FOR STATUS OF THIS EVALUATION REPORT.

For information on this report contact:
Woods McRoy, P.E.
205/599-9800

TABLE 1
BERTHA GALVANIZED STEEL STORM PANELS
ALLOWABLE TRANSVERSE WIND LOAD
ATTACHED TO CONCRETE OR CONCRETE MASONRY UNITS

Design Load (PSF)	24 GAUGE STEEL PANELS ¹		22 GAUGE STEEL PANELS ¹		20 GAUGE STEEL PANELS ¹	
	Panel Length		Panel Length		Panel Length	
	Mountings Using "h" Header	Mountings Not Using "h" Header	Mountings Using "h" Header	Mountings Not Using "h" Header	Mountings Using "h" Header	Mountings Not Using "h" Header
-45, +40	11'-0"	11'-0"	11'-0"	11'-0"	11'-0"	11'-0"
-50, +45	10'-7"	10'-7"	11'-0"	11'-0"	11'-0"	11'-0"
-55, +50	10'-1"	10'-1"	11'-0"	11'-0"	11'-0"	11'-0"
-60, +55	9'-8"	9'-8"	10'-4"	11'-0"	11'-0"	11'-0"
-70, +60	8'-11"	8'-11"	8'-11"	10'-6"	8'-11"	11'-0"
-80, +75	7'-9"	8'-3"	7'-9"	9'-9"	7'-9"	10'-11" ²

SI: 1 in = 25.4 mm, 1 ft = 0.3 m, 1 psf = 48 Pa

- 1 Refer to engineering drawing 98-11 for the Anchor Schedules and installation details.
- 2 Panel Length shall be reduced to 10'-2" when using the "F" Track Angle.

FINAL REPORT

TABLE 2
BERTHA ALUMINUM STORM PANELS
ALLOWABLE TRANSVERSE WIND LOAD
ATTACHED TO CONCRETE
OR CONCRETE MASONRY UNITS

Design Load (PSF)	Panel Length	
	Mountings Using "h" Header	Mountings Not Using "h" Header
-40, +35	13'-0"	13'-0"
-45, +40	12'-11"	12'-11"
-50, +45	12'-2"	12'-2"
-55, +50	11'-4"	11'-7"
-60, +55	10'-4"	11'-0"
-65, +60	9'-7"	10'-7"
-70, +65	8'-11"	10'-2"
-75, +70	8'-3"	9'-9"
-80, +75	7'-9"	9'-5"

SI: 1 in = 25.4 mm, 1 ft = 0.3 m, 1 psf = 48 Pa

Refer to engineering drawing 98-04 for the Anchor Schedules and installation details.

TABLE 3
BERTHA ALUMINUM & POLYCARBONATE
STORM PANELS
ALLOWABLE TRANSVERSE WIND LOAD
ATTACHED TO CONCRETE
OR CONCRETE MASONRY UNITS

Design Load (PSF)	Panel Length	
	Mountings Using "h" Header	Mountings Not Using "h" Header
-30, +25	8'-11"	9'-9"
-35, +30	8'-7"	9'-0"
-40, +35	8'-3"	8'-5"
-45, +40	7'-11"	8'-0"
-50, +45	7'-6"	7'-6"
-55, +50	7'-0"	7'-0"
-60, +55	6'-10"	6'-10"
-65, +60	6'-7"	6'-7"
-70, +65	6'-4"	6'-4"
-75, +70	6'-2"	6'-2"
-80, +75	6'-0"	6'-0"

SI: 1 in = 25.4 mm, 1 ft = 0.3 m, 1 psf = 48 Pa
 Refer to engineering drawing 98-04 for the Anchor Schedules and installation details.

1. On paper, draw a layout of your home, noting the location of each opening. Number each opening with your front door as #1, then move counter clockwise and number each opening.
2. Measure both width and height of each opening to be protected from the outside of your house.
3. Figure the total number of panels needed along with their height by using the Material Order Form.
4. Panels can also be mounted horizontally by using studded angles installed vertically on each side of your opening. When measuring opening for horizontal mount, height becomes width and width becomes height. See Illustration G.

START HERE

* Required tools for direct mount and removable tracks with lead anchors.

- Pencil
- Tape Measure
- Level
- Hammer
- Electric Drill / Hammer Drill
- Straight Screw Driver
- 1/4" Steel Drill Bit
- 3/16" Masonry Bit
- Blower / Turkey Baster - a Tool* for removing Cement Dust
- 5/16" Nut Driver
- 1/2" Combination drill bit*
- Lead Anchor Set Tool*
- Wingnut Driver
- Electrical Extension Cord
- Black or Red Permanent Marker

TOOLS REQUIRED

Opening Number	Column 1 Opening Size Width x Height	Column 2 Number of Panels	Column 3 Panel Height	Column 4 h-Header Size	Column 5 Studded Angle Size
1	36 x 57	3	57	39	39

Material Order Form

1. Fill in width and height of opening in column 1.
2. Take width of opening and locate the proper number of panels under "Number of Panels" chart. Next to number of panels you will also find the proper size "h" header and studded angle. Write these numbers in columns 2, 4 and 5 of the "Material Order Form".
3. Take the height of opening and locate the height range under "Panel Height" chart. Next to the correct range is the panel size you will need for this opening. Write this size on the Material Order Form under column 3.
4. Repeat this process for each opening.
5. These instructions are intended for openings with standard "h" header and studded angle mounted flush to wall.

Instructions for Material Order Form





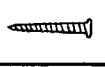
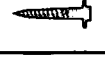
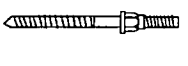






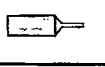
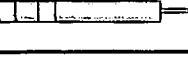
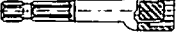
1. Before removing panels from openings, mark each panel with a permanent marker with the same number assigned to this opening on the diagram of your house that you completed earlier. Make several copies and place at different locations in the event that one copy is misplaced.
2. Machine bolts are paintable as well as metal panels, but be sure you receive recommended surface preparation from your local paint store.
3. Plan an escape route, since any opening protected by storm panels will be unavailable to you.
4. At least once a year, lubricate lead or brass anchors, wing nuts and studs located on studded angles.

Suggestions

Panel Height	If Your Opening Height is:
88"	65" to 82"
70"	52" to 64"
57"	42" to 51"
47"	28" to 41"
33"	23" to 27"




Studded Angle	Header	Number of Alum Panels	If the Width of Your Opening is:
99	99	8	85" to 96"
87	87	7	74" to 84"
75	75	6	62" to 73"
63	63	5	50" to 61"
51	51	4	38" to 49"
39	39	3	20" to 37"

Number of Panels

PARTS LIST		
1		.040 Aluminum Panel, .050 Aluminum Panel, .040/.050 Peek-A-Boo™ or 24 gauge Galvanized Steel Panel
2		Clear Panel
3		h-Header - Top Track
4		Studded Angle - Bottom Sill
*5		Lagscrew - Permanent Mount in Wood
*6		Tapcon - Permanent Mount in Concrete
*7		Male Panel Mate - Permanent Mount in Wood or concrete
*8		Female Panel Mate - For Removable Mount for Wood or Concrete
*9		Lead Anchor - For Removable Mount in Concrete
*10		Sidewalk Bolt - 1 1/2" For removable Mount. 1" Used in CPW
*11		Brass Wood Bushings
*12		Bushing Installation Tool
*13		Wingnut - Secures Panel To Sill, also used with CPW
*14		Wingnut Driver - Secures Wingnut
*15		Lead Anchor Set Tool - Taps in Lead Anchor
*16		5/16" Nut Driver - Secures Tapcon

* Located in Bins at Display

Parts List (continued)

16		1/4" Steel Drillbit - Mounting Holes in Tracks & Panels
17		3/16" Masonry Bit - Drills Hole for Tapcon into Concrete
*18		1/2" Combination Drillbit - Drills Hole for Lead Anchor into Concrete

Storage and Suggestions

Panels nest together for convenient storage. Care should be taken when handling and storing your panels.

Make sure panels are clean and dry. Try to store vertically off the ground in a dry protected area with good air circulation. Do not wrap panels in plastic or other moisture trapping material.

If moisture discoloration occurs (gray or black stain) this is normal and does not effect the structural strength.

The clear panel is made of an extremely strong material, however, it can be scratched. When moving the panels (putting up, taking down, or storing), be sure to avoid contact with abrasive surfaces such as concrete walls, stucco, and sharp metal corners. Also, be sure to wash away abrasive particles and granules of sand before storing in the nesting position.

If panels need cleaning, use ONLY SOAPY WATER and a clean sponge or rag. Dishwashing detergent and water is recommended.

DO NOT use ammonia, chlorine bleach, or any product containing solvent based ingredients.

DO NOT use abrasive cleaners.

DO NOT use steel wool pads, scrubber sponges, or a used sponge or rag that may have sand particles embedded in it.

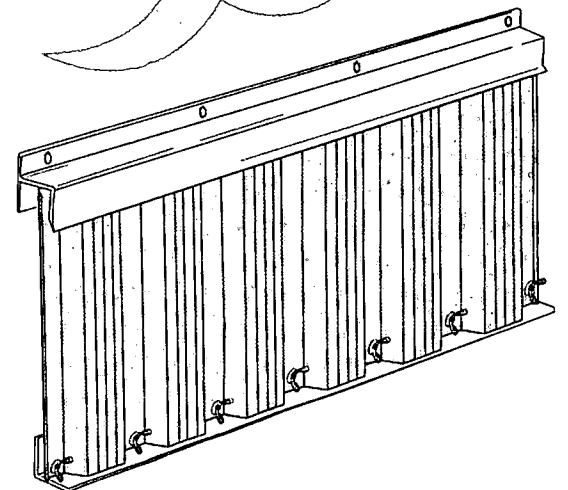
WARNING

The homeowner or tenant is advised that this storm panel system will not offer hurricane protection unless all fasteners are properly installed.

While the storm panels are installed, the openings blocked cannot be used as escape exits.

ERTHA STORM PANEL INSTALLATION AND SPECIFICATION GUIDE

PREMIUM PERFORMANCE AT AN ECONOMICAL COST



- All Products Code Approved
- Wide Assortment to Address Individual Needs:
 - 24 gauge galvanized steel
 - 24 gauge white steel
 - 040 Aluminum
 - 040 Peek-A-Boo™ Aluminum
 - 050 Aluminum
 - 050 White Aluminum
 - 050 Peek-A-Boo™ Aluminum
 - Clear Panel
- Easy Installation
- Custom Sizes Available by Special Order
- Panels Stack and Store Efficiently



Eastern Metal Supply Inc.

www.easternmetal.com

West Palm Beach, FL • Lake Worth, FL • Charlotte, NC
Houston, TX • Lakeland, FL • St. Louis, MO • Mobile, AL

Use the guide below for your type of construction

Wood Construction

Drill Size	Fastener Type	Drill Hole
1/8"	Lagscrew	1"
1/8"	Male Panel Mate	1"
1/8"	Female Panel Mate	1"

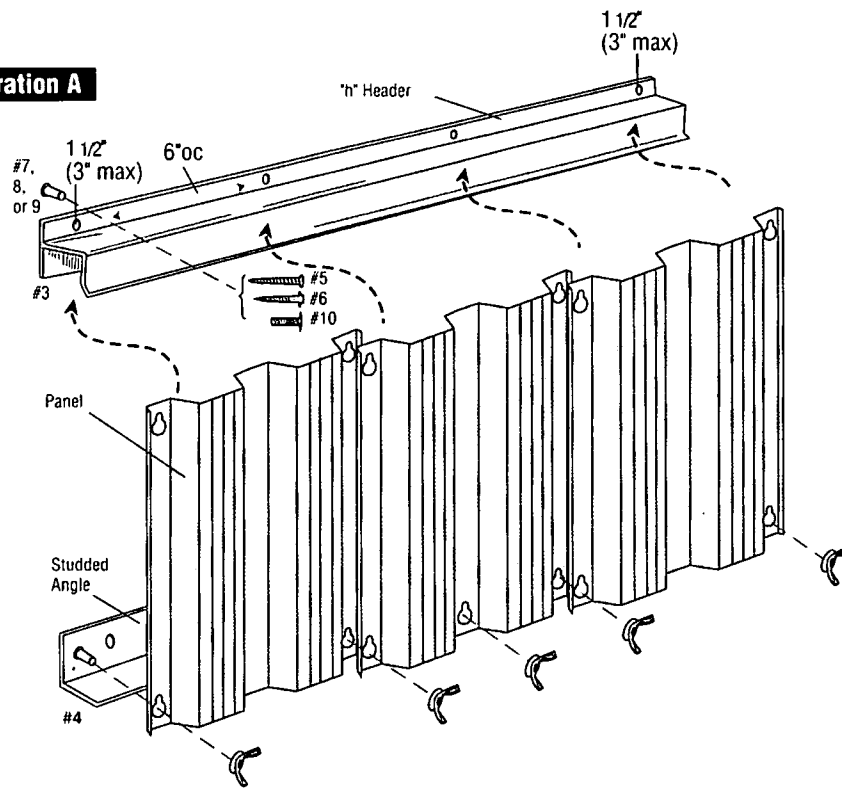
Concrete or CBS Construction

Drill Size	Fastener Type	Drill Hole
3/16"	Tapcon	1 3/4"
.234"	Male & FM Panel Mate	1 3/4"
1/2" Masonry Combo Bit	Lead Anchor	1 1/2"

Approved engineering is available upon request. Engineering will show alternative installations to address different standards, proper anchors, anchor spacing, edge distance and the minimum separation to the glass where applicable.

Disclaimer: These storm panels comply with many municipal codes and regulations, but may not comply with all requirements. Purchaser must determine that this product and its installation comply with all codes and regulations for storm panels at the place of installation. Manufacturer disclaims any responsibility for determining compliance with codes and/or regulations applicable to the purchaser and makes no representation or warranties regarding suitability in this regard. Relevant Code Approvals: Dade County - SBCCI (Southern Building Code Congress International). See engineering for applicable code.

Illustration A



Side View

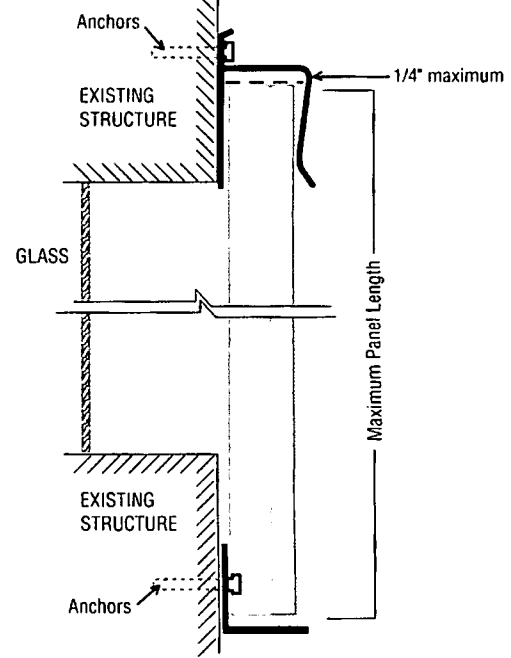


Illustration B

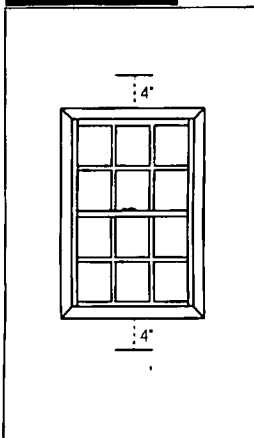


Illustration C

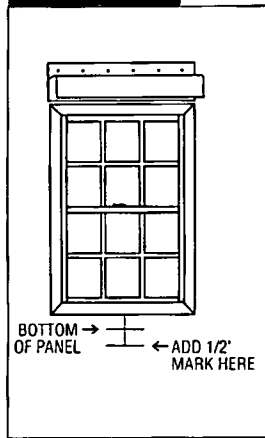


Illustration D

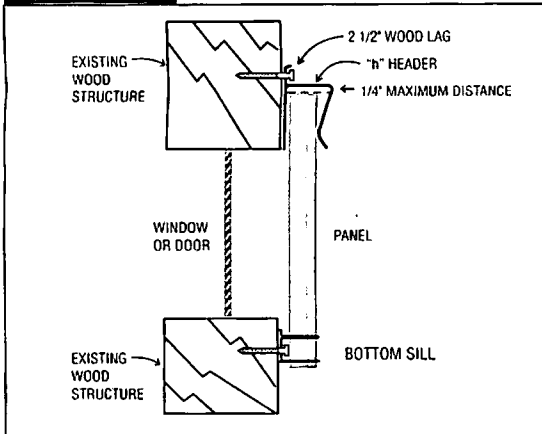


Illustration E

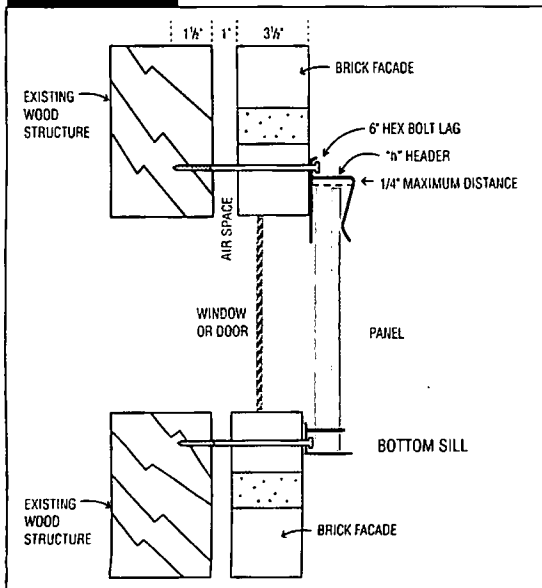
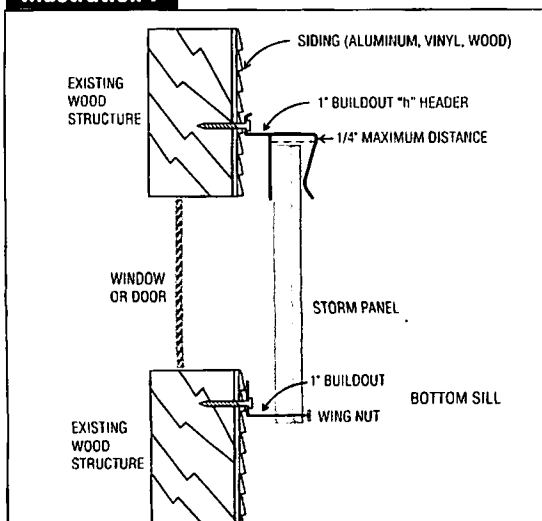


Illustration F



Mounting "h" Header and Studded Angle — Concrete or CBS Construction

1. Drill 1/4" holes into header and studded angle not more than 6" on center and within a maximum of 3" from each end. *See Illustration A.*
2. Mark the center of both the header and studded angle.
3. Locate the center of the top of the opening and pencil a 4" vertical line using a level. Repeat this exercise for the bottom of the opening. *See illustration B.*
4. Align the center mark on the header with the vertical line at the top of the window. Level the header track while verifying that the bottom of the track is even with the top of the opening.
5. While holding the header in place, make a mark in one of the 1/4" holes. Remove the track and drill a hole using a 3/16" masonry bit. With a 5/16" nut driver, screw the header to the wall, level it, drill the remaining holes and fasten with the appropriate tapcon. (If walls are heavily stuccoed, use a minimum 2 1/4" Tapcon.) To avoid water intrusion, caulk the top of the header.
6. To make header removable, level track, mark all holes, and remove header. Use a 1/2" combo bit to drill holes. (Holes should be 1 1/2" minimum.) Remove dust from holes by blowing them out using a turkey baster or similar device. Insert lead anchors into holes, making sure wedge section of anchor is inserted first. To set the anchor, strike the lead anchor set tool with a hammer until the head is spread to just below the top of the insert. Spray anchor thoroughly with silicone lubricant. Secure header to the wall with 1 1/2" sidewalk bolts.
7. Take one of the hurricane panels for this opening and slide the top into the header. Move the panel to the top of the header and while holding it in place, make a pencil mark on the wall at the bottom of the panel. Make another pencil mark exactly 1/2" below the previous mark. Be sure this mark intersects with the 4" vertical line drawn in step 3. *See Illustration C.* Align center mark on studded angle with center mark of opening. Set the base of studded angle on bottom horizontal line and level. Repeat steps 5 and 6 substituting studded angle for header.

Installing Panels

1. We recommend that installer use gloves and eye protection during installation. Always start left to right and overlap each panel.
2. Slide the top of each panel into the header and then push the bottom in over the studs. Verify that panel is straight, then install wing nuts on studs. The maximum gap between header and panel should be 1/4".
3. Complete the installation by overlapping the remaining panels and checking that all wing nuts are tightened.

Mounting "h" Header and Studded Angle — Wood

1. Panel sizes are determined by the amount of available structure around the opening. Structure for wood installations must be wood studs. You cannot attach tracks or panels to plywood, siding, or any other non-structural surface.
2. Repeat steps 1-4 as described under mounting for Concrete or CBS Construction.
3. If the header (area above opening) is similar to Illustration D, you can proceed. While holding the header track in place, make a mark in one of the 1/4" holes. Remove the track and drill a hole 1" deep using a 1/8" wood bit. With a 7/16" nut driver, screw the header to the wall, level it, drill the remaining holes and fasten with wood lags. To avoid water leaks, caulk the top of the header.
4. If the plate (area below opening) on your window is similar to Illustration D, you can proceed. Take the distance from the top of the sill to the top of the plate (2" x 4" wood plate) and add 3/4" (estimated distance to center of nominal 2" x 4" stud). For example, a stucco surface is approximately 1/2" thick; you then add the 3/4" to arrive at 1 1/4". This is the total distance from the top of the sill to the anchor holes. You must adjust first measurement to reflect any difference in material or construction. In the example, we determined the distance to be 1 1/4". Using a level, pencil a horizontal line 1 1/4" below sill completely across opening intersecting vertical line (see step 3 under Concrete or CBS Construction). Align the center mark on the studded angle with vertical line and place it over the horizontal line

so the holes are centered on the line. While holding studded angle in place, make a pencil mark in one of the 1/4" holes, then complete the process following instructions in step 3 substituting studded angle for header. 5. The length of the panel needed in this example will be approximately 5" longer than the height of the opening. If your construction is similar to Illustration D, your panel length will be approximately 5" longer than the height of your opening. In general, your panel height is the distance between a point 1/4" from inside top of "h" header to bottom of studded angle. *See Illustration D.* In many cases, the stock sizes will not be the correct size for a code-approved installation. If this is your situation, you can special order your sizes from a sales associate.

6. To make tracks removable, substitute brass wood bushings and sidewalk bolts for wood lags.

Mounting "h" Header and Studded Angle — Wood with Brick Facade

1. Use the same instructions as for wood except you must substitute 6" hex lag bolts as fasteners and pre-drill brick facade. *See Illustration E.*

Mounting "h" Header and Studded Angle — Wood with Siding

1. Use the same instructions as for wood, however you can better manage the slope of the siding by using a 1" build-out "h" header with a 1" build-out studless track. This is a special order product and is also available in 2" and 3" buildout tracks. *See Illustration F.*

Mounting "h" Header and Studded Angle — Situations Requiring Horizontal Mount or Buildout

1. Window sills, door steps, expansive trim and other obstructions may prevent a normal flush mount. In most cases, the most cost-effective method to address this problem is to employ a horizontal mount installation. In this case, the "h" header is eliminated and two studded angles are used. They are installed on each side of the window, allowing panels to be placed horizontally. Due to appearance concerns, we recommend that these tracks be made removable. This is accomplished by using either the lead or brass anchor system. Fasteners are to be a minimum of 3" from edge/side of window. *See Illustration G.*
2. Installation on some obstructions can be addressed by the use of buildout tracks. These tracks are also needed where building codes require a minimum separation between the glass and the storm panel. Buildout "h" header and studless tracks are available in 1", 2" and 3" sizes. *See Illustration H.*

Direct Mount — No Tracks

1. Use lead or brass anchors and bolts. These should line up with keyholes in panels.
2. Male or female panel mates are an alternative anchoring method.

Illustration G

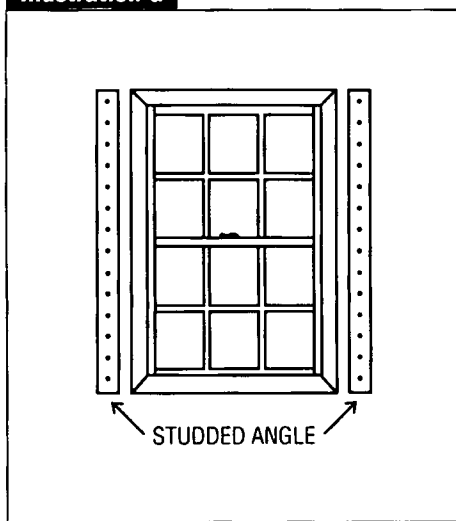
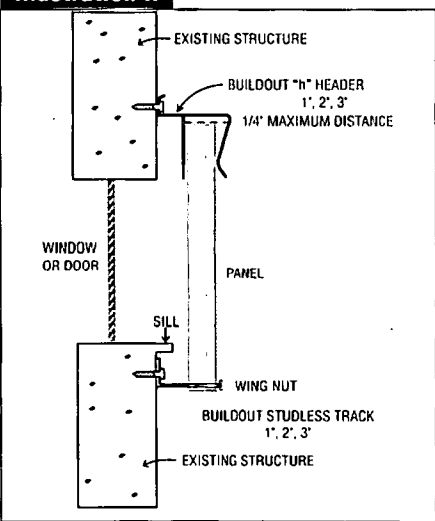


Illustration H



TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/4, 2003 Page of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
6267	WANDER 26 SIMARA	FINAL Hurricane	Passed	Close
	FOLDING SHUTTERS	SHUTTERS		INSPECTOR: <i>J</i>
6272	WANDER 26 SIMARA	FINAL SHUTTER	Passed	Close
	SHORELINE	ELECTRIC		INSPECTOR: <i>J</i>
6302	PARE 61 N. RIVER	FINAL DRIVEWAY	Passed	Close
	BECKE + Co.			INSPECTOR: <i>J</i>
6131	PFEIFFER 104 HENRY SEWALL	ROOF SHEATHING	Passed	(high roof)
	BUFORD			INSPECTOR: <i>J</i>
6117	SCHOPPE 8 PALM ROAD	HURRICANE SHUTTERS	Passed	Close
	101B			INSPECTOR: <i>J</i>
TREE	GOVEL 5 RIVERVIEW DR	TREE		
				INSPECTOR: <i>J</i>
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS
				INSPECTOR: <i>J</i>
OTHER	7 N. Ridgeview	wip		no sign of work
	* 28 Rio Vista	roofing debris in DW		
	15 Middle Rd.	Storm damaged tree down (cut up)		
		Alpha-Zeta Landscape Div.		

7185

REROOF

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 1/11/05

BUILDING PERMIT NO. 7.185

Building to be erected for SCHOPPE Type of Permit REEROOF

Applied for by ARISTOLOPOULOS + PAULICK (Contractor) Building Fee _____

Subdivision Dawn Row Lot 4 Block _____ Radon Fee _____

Address 8 Dawn Road Impact Fee _____

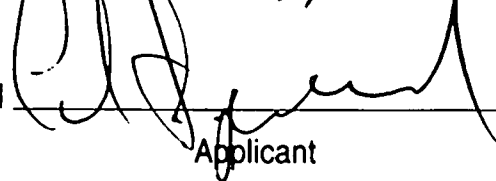
Type of structure SFR A/C Fee _____

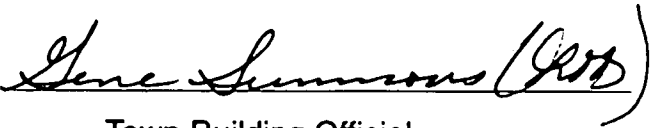
Parcel Control Number: _____ Electrical Fee _____

1338410050060004040000 Plumbing Fee _____

Amount Paid 120.00 Check # 2412 Cash _____ Other Fees (_____) _____

Total Construction Cost \$ 12000 TOTAL Fees 120.00

Signed  Applicant

Signed  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 | _____ |

PAID

JAN 04 2005

BY: 1405
Date: 1-4-05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Paul & Laura Schoppe Phone (Day) _____ (Fax) _____

Job Site Address: 8 Palm Rd City: _____ State: _____ Zip: _____

Legal Desc. Property (Subd/Lot/Block): Lot 4 Palm Row Parcel Number: 133841005000000404

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

Description of Work To Be Done: RE ROOF

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 12,000.00
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to improvement: \$ _____

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

Method of Determining Fair Market Value: _____

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: Apostolopoulos Pectick Phone: 260 5793 Fax: _____

Street: 3425 SW 78th Ave City: Palm City State: FL Zip: 32990

State Registration Number: _____ State Certification Number: CF003907 Martin County License Number: _____

SUBCONTRACTOR INFORMATION:

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

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

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: _____ Garage: _____ Covered Patios: _____ Screened Porch: _____
Carpport: _____ Total Under Roof _____ Wood Deck: _____ Accessory Building: _____

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

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

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

OWNER OR AGENT SIGNATURE (required) _____

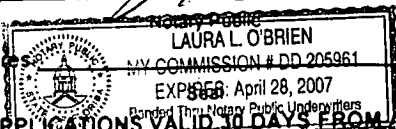
State of Florida, County of: MARTIN

This the 4th day of JANUARY, 2005

by PAUL SCHOPPE who is personally

known to me or produced as identification. Laura L. O'Brien

My Commission Expires _____



CONTRACTOR SIGNATURE (required) _____

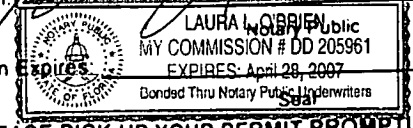
On State of Florida, County of: Martin

This the 4 day of JAN, 2005

by COSTA APOSTOLOPOULOS who is personally

known to me or produced as identification. Laura L. O'Brien

My Commission Expires _____



PERMIT APPLICATIONS VALID 10 DAYS FROM APPROVAL NOTIFICATION - PLEASE PICK UP YOUR PERMIT PROMPTLY!

TO BE COMPLETED WHEN CONSTRUCTION VALUE EXCEEDS \$2500.00

PERMIT # _____

TAX FOLIO # 13384100500000404

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):

PALM Row REVISED & AMENDED LOT 4

GENERAL DESCRIPTION OF IMPROVEMENT: RE-ROOF

OWNER: PAUL SCHOPPE + LADRA SCHOPPE
ADDRESS: 1 - Palm Row Street 31227
PHONE #: _____ FAX #: _____

INTEREST IN PROPERTY: _____

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

CONTRACTOR: Apostolos & Peulick Const Inc
ADDRESS: 3725 SU 7214 Ave Palm City
PHONE #: 260 5793 FAX #: _____

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

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

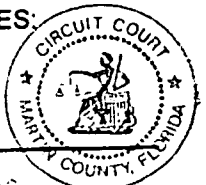
INSTR # 1804019
OR BK 01970 PG 0058
RECORDED 01/04/2005 04:02:32 PM
MARSHA EWING
CLERK OF MARTIN COUNTY FLORIDA
RECORDED BY T Copus (asst mgr)

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: N/A
ADDRESS: _____
PHONE #: _____

STATE OF FLORIDA
MARTIN COUNTY
THIS IS TO CERTIFY THAT THE
FOREGOING 1 PAGES IS A TRUE
AND CORRECT COPY OF THE ORIGINAL.

FAX #: _____
BY: T COPUS D.C.



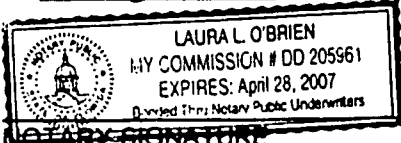
IN ADDITION TO HIMSELF OR HERSELF, OWNER DESIGNATES
OF Costa Home Services TO RECEIVE A COPY OF THE LIENOR'S
NOTICE AS PROVIDED IN SECTION 713.13(1)(B), FLORIDA STATUTES.
PHONE #: 260 5793 FAX #: _____

EXPIRATION DATE OF NOTICE OF COMMENCEMENT: 6-6-05
THE EXPIRATION DATE IS ONE (1) YEAR FROM THE DATE OF RECORDING UNLESS A DIFFERENT DATE IS SPECIFIED ABOVE.

SIGNATURE OF OWNER _____

SWORN TO AND SUBSCRIBED BEFORE ME THIS 4th DAY OF JANUARY 2005
BY PAUL SCHOPPE

PERSONALLY KNOWN X
OR PRODUCED ID _____
TYPE OF ID _____



ACORD CERTIFICATE OF LIABILITY INSURANCE

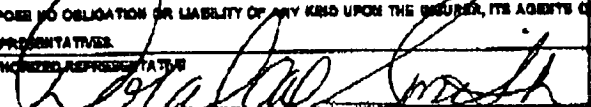
07/15/2004

PRODUCER A BETTER DEAL INSURANCE 1026 SW BAYSHORE BLVD PORT ST LUCIE 772-071-1975		THIS CERTIFICATE IS ISSUED AS A MATTER OF INFORMATION ONLY AND CONFERS NO RIGHTS UPON THE CERTIFICATE HOLDER. THIS CERTIFICATE DOES NOT AMEND, EXTEND OR ALTER THE COVERAGE AFFORDED BY THE POLICIES BELOW.	
INSURED APOSTOLOPOULOS & PAULICK CONST. INC. 3425 SW 78TH AVE PALM CITY, FL 34990		INSURERS AFFORDING COVERAGE	NAICS
		INSURER A: 8888X	
		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.

CLASS	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	3CX 2112	07/19/04	07/19/05	EACH OCCURRENCE \$300,000 DAMAGE TO RENTED PREMISES (EA occurrence) \$50,000 MED EXP (Any one person) \$1,000 PERSONAL & ADV INJURY \$300,000 GENERAL AGGREGATE \$600,000 PRODUCTS - COMP/OP AGG \$600,000
	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 \$
	BOILERMAKER LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
	WORKERS COMPENSATION AND EMPLOYERS LIABILITY ANY EMPLOYERS/EMPLOYEES/EMPLOYEE CONTRACTORS/EMPLOYEE? <input type="checkbox"/> If yes, describe under SPECIAL PROVISIONS BELOW OTHER				WC BY/ALL TOBY LIMITS OTHER E.L. EACH ACCIDENT \$ E.L. DISEASE - EA EMPLOYEE \$ E.L. DISEASE - POLICY LIMIT \$

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

CERTIFICATE HOLDER TOWN OF SEWALLS POINT 1 SOUTH SEWALLS POINT SEWALLS POINT FL 34996	CANCELLATION SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING INSURER WILL ENDEAVOR TO MAIL <u>30</u> 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 ISSUER, ITS AGENTS OR REPRESENTATIVES. AUTHORIZED REPRESENTATIVE: 
---	---

ACORD™ CERTIFICATE OF LIABILITY INSURANCE

JT
R076 DATE
03-18-2004

PRODUCER
PAYCHEX AGENCY, INC
210705 P: (877)287-1312 F: (877)287-1315
308 FARMINGTON AVE
FARMINGTON CT 06032

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
APOSTOLOPOULOS & PAULICK INC
3425 SW 78TH ST
PALM CITY FL 34990

INSURER A: Hartford Ins Co of the Southeast
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
	GENERAL LIABILITY <input type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> OCCUR GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC				EACH OCCURRENCE \$ FIRE DAMAGE (Any one fire) \$ MED EXP (Any one person) \$ PERSONAL & ADV INJURY \$ GENERAL AGGREGATE \$ PRODUCTS - COMP/OP AGG \$
	AUTOMOBILE LIABILITY <input type="checkbox"/> ANY AUTO <input type="checkbox"/> ALL OWNED AUTOS <input type="checkbox"/> SCHEDULED AUTOS <input type="checkbox"/> HIRED AUTOS <input type="checkbox"/> NON-OWNED AUTOS				COMBINED SINGLE LIMIT (Ea accident) \$ BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$
	GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN EA ACC \$ AUTO ONLY: AGG \$
	EXCESS LIABILITY <input type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE DEDUCTIBLE RETENTION \$				EACH OCCURRENCE \$ AGGREGATE \$ \$ \$ \$
A	WORKERS COMPENSATION AND EMPLOYERS' LIABILITY	76 WEG KN0009	03/22/04	03/22/05	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$100,000 E.L. DISEASE - EA EMPLOYEE \$100,000 E.L. DISEASE - POLICY LIMIT \$500,000
	OTHER				

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

Business of Insured: CARPENTRY

CERTIFICATE HOLDER

ADDITIONAL INSURED; INSURER LETTER: _____

CANCELLATION

TOWN OF SEWALLS POINT
One South Sewalls Point Road
Seawalls Point, Fl 34996

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 (10 DAYS FOR NON-PAYMENT) 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

Rose Paulick



STATE OF FLORIDA

AC# 1483133

DEPARTMENT OF BUSINESS AND
PROFESSIONAL REGULATION

CGC003907 07/09/04 040022517

CERTIFIED GENERAL CONTRACTOR
APOSTOLOPOULOS, COSTA
APOSTOLOPOULOS & PAULICK CONST IN

IS CERTIFIED under the provisions of Ch. 489 FS.
Expiration date: AUG 31, 2006 L04070900450



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

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

J.M. Metals
1505 Cox Road
Cocoa, FL 32926

Your application for Notice of Acceptance (NOA) of:
JM "5V" Crimp Architectural Metal Roof System

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.: 01-0622.02
EXPIRES: 08/16/2006

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.

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 11/5/05

BUILDING OFFICIAL
 Gene Simmons

APPROVED: 08/16/2001

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

JM METALS

Acceptance No.: 01-0622.02

ROOFING SYSTEM APPROVAL:

Category:	Roofing:	Approval Date: <u>August 16, 2001</u>
<u>Sub-Category:</u>	Metal, Panels (Non-Structural)	Expiration Date: <u>August 16, 2006</u>
<u>Material:</u>	Steel	
<u>Deck Type:</u>	Wood	
<u>Maximum Design Pressure</u>	-85 psf.	

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

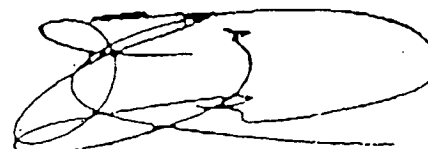
<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
5V Steel Roofing Panel	l = varies w = 26" h = 1/2" Min. Thickness 0.019"	PA 110	Metal Roof panel coated with Fluoropan®.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Product Description</u>	<u>Manufacturer</u>
Fasteners (Panel)	#9-15 IIII	Corrosion resistant, sharp point hex-head screws with 1/2" EPDM Bonded Steel sealing washer.	generic

EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
The Valspar Corporation	Lab Test Certification	ASTM B-117 ASTM G-23	
PRI Asphalt Technologies, Inc.	JMM-001-01-01	PA 100	05/10/01
Underwriters Laboratories, Inc.	01NK5594	UL 580	01/15/01



Frank Zuloaga, RRC
Roofing Product Control Examiner

JM METALS

Acceptance No.: 01-0622.02

APPROVED SYSTEMS:

SYSTEM: 5V Steel Roofing Panel

Deck Type: Wood, Non-insulated

Deck Description: New Construction or Re-roof
 $1\frac{19}{32}$ " or greater plywood or wood plank.

Slope Range: 2":12" or greater

Maximum Uplift Pressure: The maximum allowable design pressure -85 psf

Deck Attachment: In accordance with applicable building code, but in no case shall it be less than 8d ring shank nails spaced 6" o.c. In reroofing, where the deck is less than $1\frac{19}{32}$ " thick (Minimum $1\frac{15}{32}$ ") The above attachment method must be in addition to existing attachment.

Underlayment: Minimum underlayment shall be an ASTM D 226 Type II installed with a minimum 4" side-lap and 6" end-laps. Underlayment shall be fastened with corrosion resistant tin-caps and 12 gauge 1 $\frac{1}{4}$ " annular ring-shank nails, spaced 6" o.c. at all laps and two staggered rows 12" o.c. in the field of the roll.

Valleys: Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with JM Metals 5V Steel Roofing Panel' current published installation instructions.

Fire Barrier Board: For class A or B fire rating, install minimum $\frac{1}{4}$ " thick Georgia Pacific "Dens Deck" (with current NOA) or minimum 4mm thick of Tritex, RockRoof (with current NOA) or $\frac{5}{8}$ " water resistant type X gypsum sheathing with treated core and facer.

Metal Panels and Accessories: Install the "5V Steel Roofing Panel" and accessories in compliance with JM Metals' current published installation instructions and details. Flashing, penetrations, valley construction and other details shall be constructed in compliance with the minimum requirements provided in Roofing Application Standards RAS 133.

5V Roofing Panels shall be fastened with a minimum of #9-15 III corrosion resistant fasteners with sealing washer. Fasteners shall of sufficient length to penetrate through the sheathing a minimum of $\frac{3}{16}$ ". Fasteners shall be place in accordance with fastener detail herein as follows:

Fasteners shall be installed at a maximum of 12" o.c. at side laps perpendicular to roof slope and at a maximum of 12" o.c. in the center of the panel at the field perpendicular to roof slope. Fastener shall be placed at high points of panel ribs.

Page 3



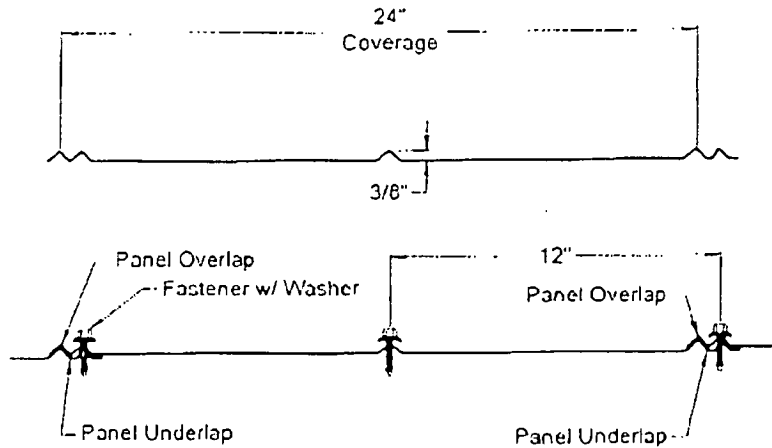
Frank Zuloaga, RRC
 Roofing Product Control Examiner

JM METALS

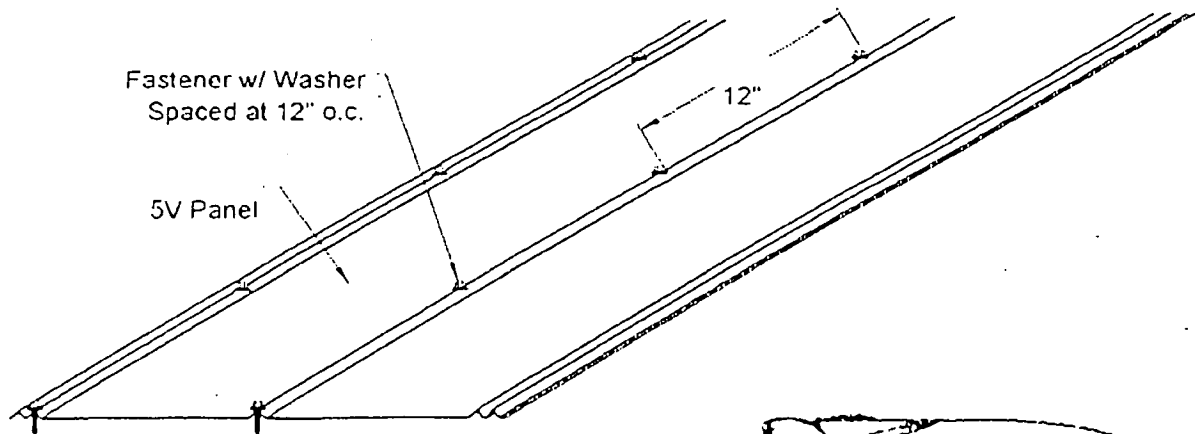
Acceptance No.: 01-0622.02

SYSTEM LIMITATIONS:

1. Increased design pressures at perimeter and corner areas, in compliance with applicable building code may be met through rational analysis by increasing the number of attachment points in these areas. The maximum fastener spacing noted in the "Systems Description" section of this approval shall not be exceeded. All rational analysis computation shall be prepared, signed and sealed by a Florida registered Professional Engineer, Registered Architect, or Registered Roof Consultant.
2. Panels shall be roll formed in continuous lengths from eave to ridge. Maximum lengths shall be as described in Miami-Dade County Roofing Application Protocol RAS 133.
3. All panels shall be permanently labeled with the manufacturer's name or logo, and the following statement: "Miami-Dade County Product Control Approved."



5V STEEL ROOFING PANEL



Frank Zuloaga, RRC
Roofing Product Control Examiner

JM METALS

Acceptance No.: 01-0622.02

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 purposes.
- 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 times. The copies need not be resealed by the engineer.
- 8 Failure to comply with any section of this Acceptance shall be cause for termination and removal of Acceptance.
- 9 This Acceptance contains pages 1 through 5.

END OF THIS ACCEPTANCE

Page 5



Frank Zulouga, RRC
Roofing Product Control Examiner

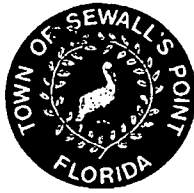
TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri JAN 19 2005 Page 1 of 2

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6857	PREISSMAN	LATH	PASS	
2	28 RIO VIO WINCHIP			INSPECTOR:
7151	HARRIGAN	FRAMING	PASS	
5	2 PALMETTO DE WORREN			INSPECTOR:
7071	TAN	FILL	PASS	CLOSE
6	7 COPAIRE RD O/B			INSPECTOR:
6959	MILORD	IN GR TANK	PASS	
7	10 N. SEWALL'S FERREN GAS			INSPECTOR:
7185	SCORPE	SHEATHING	PASS	
4	B PALM ROAD A & P CONSTR.	DECK IN TIN TACK METAL		INSPECTOR:
7208	DONOHUE	FOOTER PREP	PASS	
1	163 S. SEWALL'S Pt HAUL-SAMMONS	EARLY RELEASE		INSPECTOR:
TREE	HOLLAND	TREE	PASS	
3	16 N. RIDGEVIEW RD			INSPECTOR:

OTHER: _____



7185

TOWN OF SEWALL'S POINT

One South Sewall's Point Road

Sewall's Point, Florida 34996

(561) 287-2455

CORRECTION NOTICE

ADDRESS: B PALM ROAD

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

FINAL ROOF

OUR RECORDS SHOW THAT NO
SHEATHING/DRY IN INSPECTION
WAS SCHEDULED PRIOR TO
INSTALLATION OF FINAL ROOF.
WE NEED ENGINEER LTR
CERTIFYING THAT IT WAS
REPAIRED TO CURRENT
FLA. BLDG CODE,

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

DATE: 2/16

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 2/16, 2005 Page 2 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
6900	WEIGAND	Repaired door Final	PASS	
4	118 S. SEWALL'S Pt			INSPECTOR: <i>[Signature]</i>
	O/B			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7105	CARLTON	Elec Rough	PASS	
17	6 PERRIWINKLE	FRAMING	PASS	INSPECTOR: <i>[Signature]</i>
	GLENMARK HOMES	PUMPING	PASS	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7282	SHORT	Pumping Rpt	PASS	
14	10 N. RIVER RD	Elec "	PASS	INSPECTOR: <i>[Signature]</i>
	O/B	FOOTERS	PASS	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7307	WILCOX	Rough Elec	PASS	
7	95 S. RIVER RD			INSPECTOR: <i>[Signature]</i>
	TEC			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7247	DELANEY	DOCK FINAL	FAIL	
3	116 S. Sewall's Pt			INSPECTOR: <i>[Signature]</i>
	Custom Decks Inc			
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7242	KIPLINGER	FRAMING	PASS	
6	143 S. RIVER RD	Rough + Elec	PASS	INSPECTOR: <i>[Signature]</i>
	CONSTRUCTURE	ALC	PASS	
PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7185	SEHOPPE	FINAL ROOF	FAIL	RECORDS SHOW DRY IN INSPECTION WAS PASSED
2	8 PALM ROAD		PASS	on 1/19/05 - CLOSE THIS PERMIT
	APOSTOLOPOULOS	(See Law - no ladder)		INSPECTOR: <i>[Signature]</i>
OTHER: _____				

9962

WIRELESS ALARM



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:	9962	DATE ISSUED:	DECEMBER 22, 2011
SCOPE OF WORK:	ALARM – WIRELESS		
CONTRACTOR:	CERTIFIED ALARM TECHNICIANS		
PARCEL CONTROL NUMBER:	133841005000-000404	SUBDIVISION	PALM ROW-LOT 4
CONSTRUCTION ADDRESS:	8 PALM RD		
OWNER NAME:	SCHOPPE		
QUALIFIER:	EWELL MILLER	CONTACT PHONE NUMBER:	561-752-5555

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

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

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

INSPECTIONS

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

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

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Permit Number: 9962

Date: 12.7.11

OWNER/TITLEHOLDER NAME: Laura & Paul Schoppe Phone (Day) (Fax)

Job Site Address: 8 Palm Rd., Sewalls Point City: Stuart State: FL Zip: 34996

Legal Description: Palm Row Revised Lot 4 Parcel Control Number: 13-38-41-005-000-00040-4

Owner Address (if different): 9 Palm Rd. City: Stuart State: FL Zip: 34996

Scope of work (please be specific): Alarm System

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: \$ 1195.00

(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 AEB X

FOR ADDITIONS, REMODELS AND RE-ROOF APPLICATIONS ONLY:

Estimated Fair Market Value prior to improvement: \$

(Fair Market Value of the Primary Structure only, Minus the land value)

PRIVATE APPRAISALS MUST BE SUBMITTED WITH PERMIT APPLICATION

CONTRACTOR/Company: Certified Alarm Technicians Inc. Phone: 561-752-5555 Fax: 561-752-3033

Street: 1401 Neptune Dr. City: Boynton Beach State: FL Zip: 33426

State License Number: ECAC02282 OR: Municipality: License Number:

LOCAL CONTACT: Renee Phone Number: 561-752-5555

DESIGN PROFESSIONAL: Lic#

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, Electrical, Gas) 2007 National Electrical Code: 2005(2008 after 6/1/09) Florida Energy Code: 2007, Florida Accessibility Code: 2007, Florida Fire Prevention Code 2007

NOTICES TO OWNERS AND CONTRACTORS:

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

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

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

OWNER SIGNATURE: (required)

OR OWNERS LEGAL AUTHORIZED AGENT (PROOF REQUIRED)

State of Florida, County of:

This the 19 day of December, 2011

by PAUL SCHOPPE who is personally

known to me or produced

as identification.

Notary Public

My Commission Expires:

CONTRACTOR SIGNATURE: (required)

On State of Florida, County of: Palm Beach

This the 21 day of December 20 11

by Ewell Miller who is personally

known to me or produced

As identification.

My Commission Expires:

RENEE C. SILEO MY COMMISSION # DD 813300 EXPIRES August 11, 2012

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

NOTARY PUBLIC-STATE OF FLORIDA Jayne M. Johnson Commission # EE044769 Expires NOV. 23, 2014

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

generated on 12/22/2011 12:16:06 PM EST

Summary

Parcel ID	Account #	Unit Address	Market Total Value	Website Updated
13-38-41-005-000-00040-4	27809	8 PALM RD, SEWALL'S POINT	\$361,740	12/17/2011

Owner Information

Owner(Current)	SCHOPPE PAUL R & LAURA B
Owner/Mail Address	9 PALM RD STUART FL 34996
Sale Date	9/12/2001
Document Book/Page	1581 2433
Document No.	JMB
Sale Price	249000

Location/Description

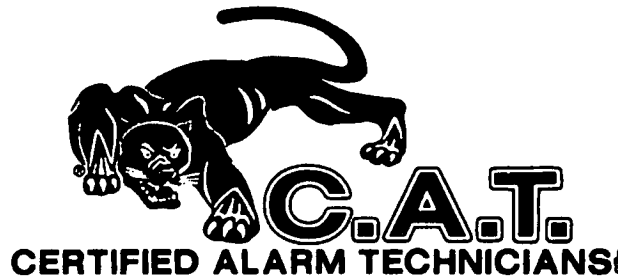
Account #	27809	Map Page No.	SP-05
Tax District	2200	Legal Description	PALM ROW REVISED & AMENDED PLAT LOT 4 OR 346/611
Parcel Address	8 PALM RD, SEWALL'S POINT		
Acres	.3460		

Parcel Type

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

Assessment Information

Market Land Value	\$150,000
Market Improvement Value	\$211,740
Market Total Value	\$361,740



CERTIFIED MAIL RETURN RECEIPT REQUESTED

June 26, 2012

Building Department
Town of Sewall's Point
One S Sewall's Point Road
Sewall's Point, FL 34996

Re: Permit 9962

The above referenced permit was pulled and the installation for the alarm was completed.

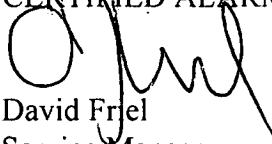
We have repeatedly tried to schedule for the final inspection and the tenant has not contacted us or the Town of Sewall's Point to allow access to the inspector so that the final inspection can be completed..

Attached is a copy of the certified letter sent to the tenant in April (which was received) that an inspection needed to be schedule with the Town of Sewall's Point for the final inspection. Any and all cost for the permit reactivation shall be the customer's responsibility to pay. We also have notified the homeowner (copy of letter enclosed).

Please mark the permit file accordingly that the owner or tenant must schedule for access to have a final inspection.

Thank you,

CERTIFIED ALARM TECHNICIANS INC.


David Friel
Service Manager

cc: Carolyn Timmann
Paul and Laura Schoppe



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:	99625	DATE ISSUED:	DECEMBER 22, 2011
SCOPE OF WORK:	ALARM - WIRELESS		
CONTRACTOR:	CERTIFIED ALARM TECHNICIANS		
PARCEL CONTROL NUMBER:	133841005000-000404	SUBDIVISION	PALM ROW-LOT 4
CONSTRUCTION ADDRESS:	8 PALM RD		
OWNER NAME:	SCHOPPE		
QUALIFIER:	EWELL MILLER	CONTACT PHONE NUMBER:	561-752-5555

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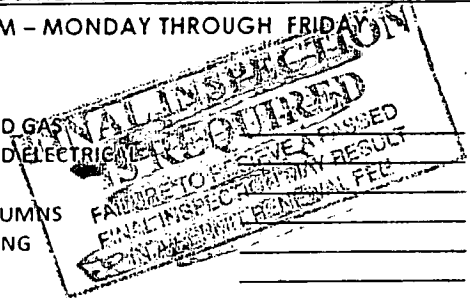
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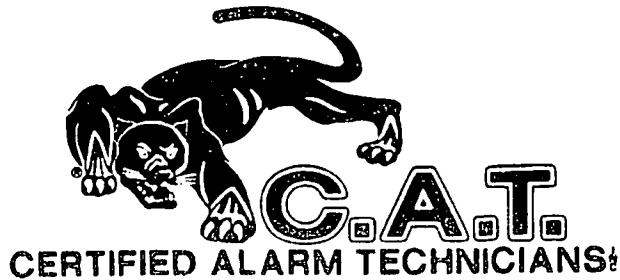
INSPECTIONS

UNDERGROUND PLUMBING _____
 UNDERGROUND MECHANICAL _____
 STEM-WALL FOOTING _____
 SLAB _____
 ROOF SHEATHING _____
 TIE DOWN /TRUSS ENG _____
 WINDOW/DOOR BUCKS _____
 ROOF DRY-IN/METAL _____
 PLUMBING ROUGH-IN _____
 MECHANICAL ROUGH-IN _____
 FRAMING _____
 FINAL PLUMBING _____
 FINAL MECHANICAL _____
 FINAL ROOF _____

UNDERGROUND GAS _____
 UNDERGROUND ELECTRICAL _____
 FOOTING _____
 TIE BEAM/COLUMNS _____
 WALL SHEATHING _____
 INSULATION _____
 LATH _____
 ROOF TILE IN-PROGRESS _____
 ELECTRICAL ROUGH-IN _____
 GAS ROUGH-IN _____
 METER FINAL _____
 FINAL ELECTRICAL _____
 FINAL GAS _____
 BUILDING FINAL _____



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



COPIED

CERTIFIED MAIL - # 7010-2780-0001-8285-4247 - RETURN RECEIPT REQUESTED

April 13, 2012

Carolyn Timmann
 8 Palm Rd.
 Sewall's Point, FL 34996

Dear Carolyn,

I am writing to you today as a final attempt to schedule your burglar alarm inspection. When we (C.A.T.) installed your burglar alarm system an installation permit was pulled with The Town of Sewall's Point. The town requires that one of their inspectors go to the property after installation and inspect that all work was done properly and up to city and electrical codes.

Please do not disregard this correspondence as your permit will soon expire.

Please call me at the number below to schedule your inspection and with any questions you may have. I thank you in advance for your promptness and cooperation in this matter.

Sincerely,

Renee Board
 Renee Board
 Permit Coordinator

SENDER: COMPLETE THIS SECTION	COMPLETE THIS SECTION ON DELIVERY
<ul style="list-style-type: none"> Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired. Print your name and address on the reverse so that we can return the card to you. Attach this card to the back of the mailpiece, or on the front if space permits. 	<p>A. Signature <input type="checkbox"/> Agent <input checked="" type="checkbox"/> Addressee</p> <p>B. Received by (Printed Name) <u>CAROLYN TIMMANN</u></p> <p>C. Date of delivery <u>4/19/12</u></p> <p>D. Is delivery address different from item 1? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If YES, enter delivery address below:</p>
<p>1. Article Addressed to:</p> <p style="text-align: center;">Carolyn Timmann 8 Palm Rd. Sewall's Point, FL 34996</p>	<p>3. Service Type</p> <p><input checked="" type="checkbox"/> Certified Mail <input type="checkbox"/> Express Mail</p> <p><input type="checkbox"/> Registered <input type="checkbox"/> Return Receipt for Merchandise</p> <p><input type="checkbox"/> Insured Mail <input type="checkbox"/> C.O.D.</p> <p>4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes</p>
<p>2. Article Number (Transfer from service label)</p>	<p style="text-align: center;">7010 2780 0001 8285 4247</p>

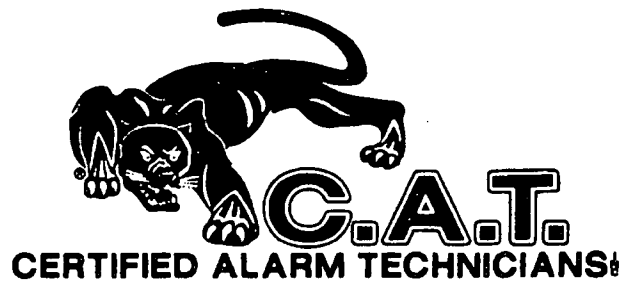

C.A.T.
CERTIFIED ALARM TECHNICIANS
1401 Neptune Drive
Boynton Beach, Florida 33426
FL. Lic. # ECA002282



Building Department
Town of Sewall's Point
One S Sewall's Point Road
Sewall's Point, FL 34996

34996673601





CERTIFIED MAIL RETURN RECEIPT REQUESTED

June 26, 2012

Paul and Laura Schoppe
9 Palm Road
Stuart, FL 34996

Re: Alarm Installation
8 Palm Road
Permit 9962

Dear Mr. And Mrs. Schoppe,

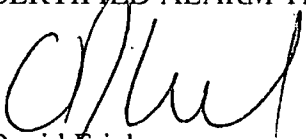
We have attempted several times to schedule a final inspection with your tenant, Carolyn Timmann. We have also notified her by certified mail, copy of letter enclosed, which she has not contacted the Town of Sewall's Point to schedule access.

The building permit you signed for the installation of the alarm your tenant contracted with us must receive a final inspection to close out the permit. It is important that access to the home is scheduled with Town of Sewall to complete this inspection, which has not been arranged with Ms. Timmann. If the inspection is never completed, there remains an open permit on the home and could possible cause you a delay if you ever sell your home.

Possibly you will be able to contact the Town of Sewall and arrange access to close out this permit.

Thank you,

CERTIFIED ALARM TECHNICIANS INC.



David Friel
Service Manager

cc: Town of Sewall's Point
Caroyln Timmann

Carolyn Timmann/Schoppe
 8 Palm Rd
 Sewall's Pt.

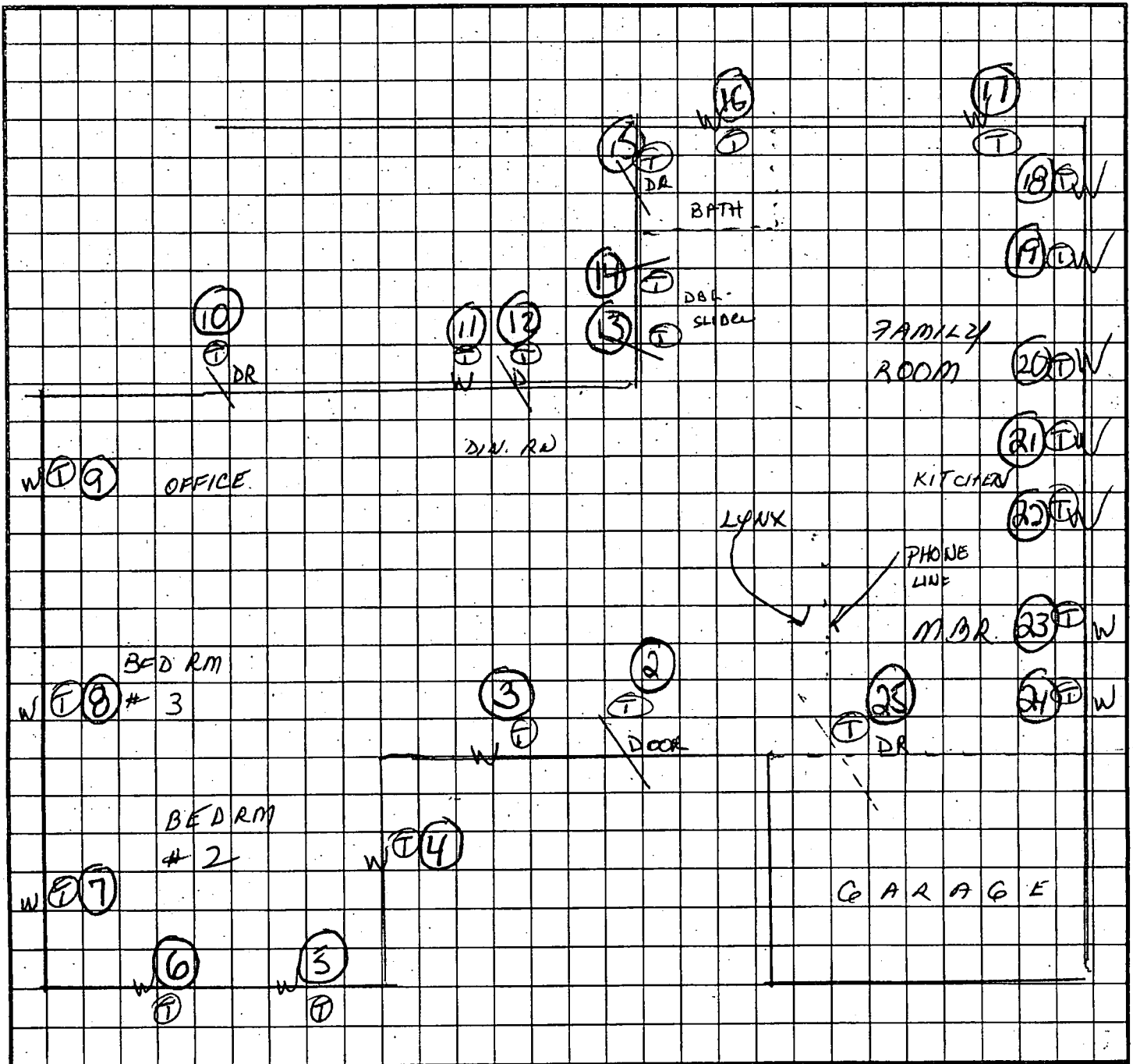


CERTIFIED ALARM TECHNICIANS OF SEWALL'S POINT

BUILDING DEPARTMENT
 FILE COPY

Alarm System Layout

LEGEND - LYNX = LYNX
 T = TRANSMITTER
 W = WINDOW
 D = DOOR



TOWN OF SEWALLS POINT

BUILDING DEPARTMENT - INSPECTION LOG

Date of Inspection Mon Tue Wed Thur Fri 6-12-13 Page 1 of

PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10484	Paradise	Final AC		
1ST 9AM	11 Ridgeland Dr Airon		Pass	Choke INSPECTOR <i>[Signature]</i>
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
10042	Trisole	Final		
	50 S Sewalls	boatlift dock	Pass	Choke INSPECTOR <i>[Signature]</i>
	Atlantic Sewall			
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
9916	Schoff	Ten	Pass	Choke
	Spom Rd	Alarm	Pass	Choke
	Certified Alarm			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
	WSEDS			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	DINNA JOYCE			
	ACCESS FROM HILLCREST			
	2 ON MIDDLE RD			INSPECTOR
PERMIT #	OWNER/ADDRESS/CONTRACTOR	INSPECTION TYPE	RESULTS	COMMENTS
	MARG + S. RIVER RD			
	MARG COURT - WIPENG			
	PALM RD			
	SIMONA GIACOMO			
	2 ON MORGAN			INSPECTOR

1800-536-3132

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

INSTR # 1528719
OR BK 01589 PG 1287
RECORDED 10/17/2001 03:25 PM
MARSHA EWING
MARTIN COUNTY Florida
RECORDED BY S Phoenix

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

1. Owner of Property: Philip W. Schuck

2. Legal Description of Property:
Lot 4, Rev. AND AMD PLAT of Palm
Row

3. Date of Administrative Variance Application: 8-26-01

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

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

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

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

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

Town of Sewall's Point
Administrative Variance Approval
Page Two

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

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

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

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

Dated this 10th day of October, 2001.

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

By: Thomas P. Bausch
Its: Building Commissioner

STATE OF FLORIDA
COUNTY OF MARTIN

Sworn to and subscribed before me this 10th day of October, 2001,
by T.P. Bausch, as Building Commissioner of the Town of Sewall's
Point, a Florida municipal corporation, who is personally known to me or who has produced
_____ as identification and who did not take an oath.

(NOTARY SEAL)

Jean H. Barrow
Name: Jean H. Barrow
I am a Notary Public of the
State of Florida and my
commission expires:
11-30-02

tbw/lsp/approve.frm



Jean H. Barrow
MY COMMISSION # CC763645 EXPIRES
November 30, 2002
BONDED THRU TROY FAIN INSURANCE, INC.

TOWN OF SEWALL'S POINT ADMINISTRATIVE
VARIANCE APPLICATION FORM

- 1. Owner of Property: Philip Schuck
- 2. Address of Property: 8 Palm Road
- 3. Address of Applicant: 8 Palm Road, Stuart, FL 34996
- 4. Phone No. of Applicant: 781-8089
- 5. Length and Location (front, rear, side) of Encroachment (if more than one, please list separately):

14.7 on East side

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

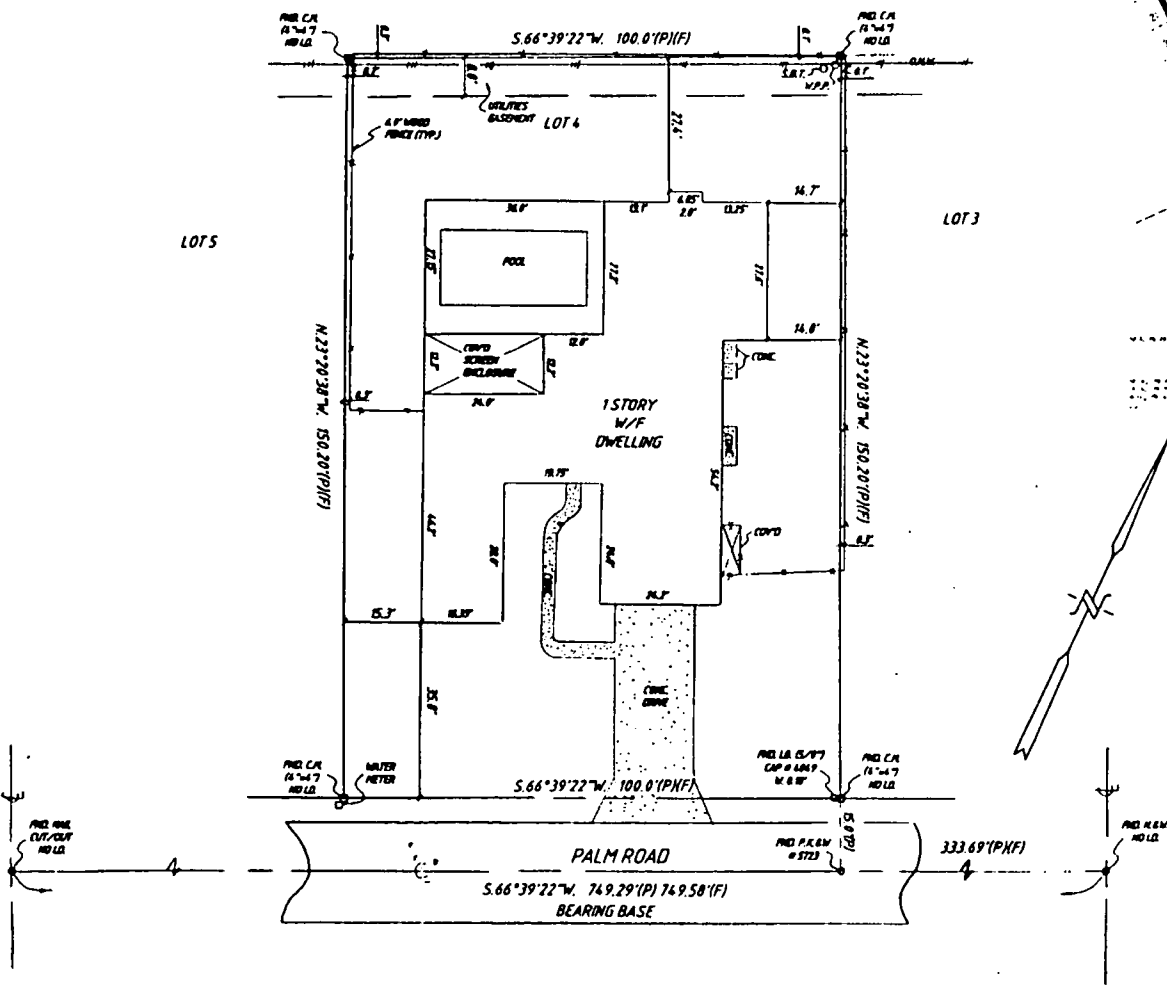
- A. \$250.00 Filing Fee
- B. \$250.00 Costs Deposit
- C. Certificate of Ownership
- D. Certificate of Adjacent Owners
- E. Survey
- F. Letters of No Objection or Proof of Mailing Notice

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

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

Philip Schuck
Applicant

Dated this 26th day of August, 2001.



LOCATION MAP

LEGAL DESCRIPTION
 LOT 4, REVISED & AMENDED PLAT OF "PALM ROW",
 ACCORDING TO THE PLAT THEREOF, AS RECORDED IN PLAT
 BOOK 4, PAGE 68, PUBLIC RECORDS OF MARTIN COUNTY,
 FLORIDA.

PROPERTY LOCATED WITHIN FLOOD ZONE: "A0" BASE ELEV. 8.00
 COMMUNITY - PANEL NUMBER - 120166 0002 D
 PROPERTY STREET ADDRESS: 8 PALM ROAD
 STUART, FL 34994
 CERTIFIED TO: PAUL R. SCHOPPE AND LAURA SCHOPPE;
 CERTIFIED LAND TITLE COMPANY;
 ATTORNEYS TITLE INSURANCE FUND, INC.

SURVEYOR'S NOTES

1. SURVEY OF DESCRIPTION AS FURNISHED BY CLIENT, UNLESS OTHERWISE NOTED.
2. LANDS SHOWN HEREON WERE NOT ABSTRACTED FOR EASEMENTS, BUILDING SETBACKS AND/OR RIGHTS-OF-WAY OF RECORD BY ACCURIGHT LAND SURVEYING INC.
3. ALL BEARINGS ARE REFERENCED TO THE INSTRUMENT OF RECORD AS SHOWN HEREON, UNLESS OTHERWISE NOTED.
4. ELEVATIONS SHOWN HEREON ARE RELATIVE TO NATIONAL GEODETIC VERTICAL DATUM OF 1929. SEE SURVEY FOR REFERENCE BENCH MARK, UNLESS OTHERWISE NOTED.
5. THERE ARE NO ABOVE GROUND ENCROACHMENTS, UNLESS OTHERWISE NOTED.

LEGEND

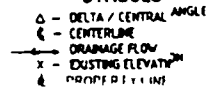
DP1 - DENOTES DISTANCE, ANGLE OR BEARING BY FURNISHED DESCRIPTION
 DP2 - DENOTES MEASURED DISTANCE, ANGLE OR BEARING
 CD - DENOTES CALCULATED DISTANCE, ANGLE OR BEARING
 CPVD - COVERED
 C.B.S. - CONCRETE BLOCK STRUCTURE
 W/F - WOOD FRAME
 CONC. - CONCRETE
 ALUM. - ALUMINUM
 P.P. - POWER POLE
 OPHW - OVERHEAD WIRE
 T.O.B. - TOP OF BANK
 F.H. - FIRE HYDRANT
 L.P. - LIGHT POLE
 ELEV. - ELEVATION

APPROX. - APPROXIMATE
 SET LB. - SET 5/8" IRON BAR & CAP @ 4459
 PND. - POUND
 LP. - IRON PIPE
 C.M. - CONCRETE MONUMENT
 LB. - IRON BAR
 P.K. - P.K. NAIL
 R.R.S. - RAILROAD SPIKE
 BRK. - BROKEN
 DST. - DISTURBED
 E.P. - EDGE OF PAVEMENT

P.O.C. - POINT OF COMMENCEMENT
 P.O.B. - POINT OF BEGINNING
 ENC. - ENCROACHMENT
 NO ID. - NO IDENTIFICATION NUMBER

N.B.W. - NAIL & WASHER
 N.B.TT. - NAIL & TIN TAB
 M.H. - MANHOLE
 C.B. - CATCH BASIN
 P.R.M. - PERMANENT REFERENCE MONUMENT
 P.C.P. - PERMANENT CONTROL POINT
 R/W. - RIGHT-OF-WAY
 S.B.T. - SOUTHERN BELL TELEPHONE
 TYP. - TYPICAL
 A/C. - AIR CONDITIONER
 EQUIP. - EQUIPMENT

SYMBOLS



NOT VALID WITHOUT THE SIGNATURE AND THE ORIGINAL RAISED SEAL OF A FLORIDA LICENSED SURVEYOR AND MAPPER

ACCURIGHT LAND SURVEYING, INC.
 LICENSED BUSINESS NO. 6607
 EARLE R. STARKEY - PROFESSIONAL LAND SURVEYOR
 REGISTRATION No. 6659 - STATE OF FLORIDA

BOUNDARY SURVEY

PREPARED FOR:
 SCHOPPE

ACCURIGHT LAND SURVEYING, INC.
 SURVEYORS DESIGNERS LANDPLANNERS CONSULTANTS
 1501 DECKER AVENUE, SUITE 419
 OFFICE PHONE (561) 286-7694

DATE: 09/11/2001
 DRAWN BY: W.E.H.
 CHECKED BY: E.R.S.
 SCALE: 1" = 20.00'
 JOB NO: 637-09-01
 SHEET: 1
 OF ONE SHEET

WRIGHT, PONSOLDT & LOZEAU

TRIAL ATTORNEYS, L.L.P.
1000 S.E. Monterey Commons Boulevard
Suite 208
Stuart, Florida 34996
(561) 286-5566 Telephone
(561) 286-9102 Facsimile

Tim B. Wright
William R. Ponsoldt, Jr.
Louis E. Lozeau, Jr.

September 19, 2001

Vice Mayor Thomas P. Bausch
Town of Sewall's Point
1 South Sewall's Point Road
Sewall's Point, Florida 34996

Re: Town of Sewall's Point; Administrative Variance of Philip Schuck, 8 Palm Road

Dear Vice Mayor Bausch:

I have reviewed the referenced administrative variance and find that it complies with Town of Sewall's Point Code of Ordinances. It is my understanding from the Town Clerk that Mr. Schuck is having 8½" x 11" reduced version of the signed, sealed, survey delivered to Town Hall for attachment to the original approval and recording in the Martin County, Florida, public records. I am enclosing with the letter for the Town's files the original full-size survey.

Please contact me if you have any questions regarding this matter.

Sincerely yours,


Tim B. Wright

TBW/mcf

Enclosure

cc: Mr. Edwin B. Arnold
Mr. Philip Schuck

Martin County Tax Information

PID: 13384100500000040 **SBN:** PALM ROW **SBN Code:** 1381005
Use: 0100 / Single Family **MAP PG:** SP-05 **NBH Code:** 1211
PAD: 8 PALM RD **Unit:** **City:** **Zip:**
Legal: PALM ROW REVISED & AMENDED PLAT LOT 4 OR 346/611

Owner Name: PHILIP W **Owner 2 Name:**
Last Name: SCHUCK **Last Name:**
Address1: 8 PALM RD
Address2:
City: STUART **State:** Florida **Zip:** 34996
Year Built: 1978 **Effective Year Built:** 1987
Total Living Area: 2,884 **Total Under Roof:** 3,460
Tax Year: 2000 **Tax:** 3731.37

Sales Record

<u>Sale</u>	<u>Price</u>	<u>Rec Date</u>	<u>D-Type</u>	<u>OR BK/PG</u>	<u>Seller</u>	
1	14-Jan-1998	\$0	10-Feb-1998	CO	1288/0277	HEDTKE, ROGER A
2	07-Oct-1997	\$220000	07-Oct-1997	WD	1265/0124	HEDTKE, ROGER A
3	07-Oct-1997	\$220000	07-Oct-1997	WD	1265/0124	HEDTKE, ROGER A

***Tax Information**

Market Land Val: 80000 **Market Imp. Val:** 132788 **Mobile Home Val:** 0
Tot Market Val: 212788 **Tot Appraised Val:** 212788 **Tot Assessed Val:** 212788
(-) AG Market Val: 0 **(-) Cap Loss:** 0 **(-) Exemptions:** 0
(+) AG Class Val: 0
Total Taxable Value: 212788 ***Current Market Tax Roll Multiplier:** 0.00

m/m.
Klisma
lot 5

FORM LETTER OF NO OBJECTION

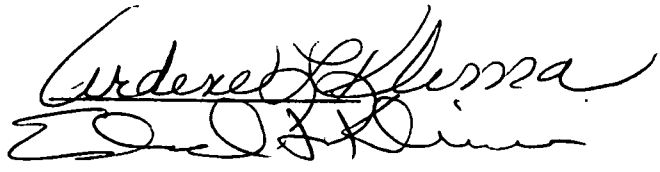
The Town of Sewall's Point
One South Sewall's Point Road
Stuart, Florida 34996

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

Dear Town of Sewall's Point:

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

Sincerely yours,



Martin County Tax Information

PID: 13384100500000050 **SBN:** PALM ROW **SBN Code:** 1381005
Use: 0100 / Single Family **MAP PG:** SP-05 **NBH Code:** 1211
PAD: 10 PALM RD **Unit:** **City:** **Zip:**
Legal: PALM ROW REVISED & AMENDED PLAT LOT 5 OR 359/573

Owner Name: EDWARD F & ARDENE L **Owner 2 Name:**
Last Name: KLIMA **Last Name:**
Address1: 10 PALM RD
Address2:
City: STUART **State:** Florida **Zip:** 34996
Year Built: 1978 **Effective Year Built:** 1988
Total Living Area: 1,578 **Total Under Roof:** 2,895
Tax Year: 2000 **Tax:** 2463.06

Sales Record

<u>Sale</u>	<u>Price</u>	<u>Rec Date</u>	<u>D-Type</u>	<u>OR BK/PG</u>	<u>Seller</u>
1 23-Jan-1998	\$180000	26-Jan-1998	WD	1285/0776	STAFFORD, FRANK P (ESTATE)
2 23-Jan-1998	\$180000	26-Jan-1998	WD	1285/0776	STAFFORD, FRANK P (ESTATE)
3 01-May-1978	\$28600	01-May-1978	WD	0444/2044	SELLER - see file for name

***Tax Information**

Market Land Val: 80000 **Market Imp. Val:** 85460 **Mobile Home Val:** 0
Tot Market Val: 165460 **Tot Appraised Val:** 165460 **Tot Assessed Val:** 165460
(-) AG Market Val: 0 **(-) Cap Loss:** 0 **(-) Exemptions:** 25000
(+) AG Class Val: 0
Total Taxable Value: 140460 ***Current Market Tax Roll Multiplier:** 1.08

*M. Collins
Lot 3*

FORM - WRITTEN NOTICE

Adjacent Property Owners
Town of Sewall's Point
Stuart, Florida 34996

RE: Administrative Variance Application Filed by Philip W. Schuck

To Whom It May Concern:

Enclosed is a copy of the Administrative Variance Application filed by Philip Schuck. If you have any objection to the Administrative Variance being granted by the Town of Sewall's Point, you must file a written objection with the Town Clerk within fifteen (15) days from the date that this notice was mailed.

Sincerely yours,



Mary Kay Collins

Martin County Tax Information

PID: 13384100500000030 **SBN:** PALM ROW **SBN Code:** 1381005
Use: 0100 / Single Family **MAP PG:** SP-05 **NBH Code:** 1211
PAD: 6 PALM RD **Unit:** **City:** **Zip:**
Legal: PALM ROW REVISED & AMENDED PLAT LOT 3 OR 360/181

Owner Name: EVAN **Owner 2 Name:** MARY K
Last Name: COLLINS **Last Name:** COLLINS
Address1: 2089 PINE TREE WAY
Address2:
City: STUART **State:** Florida **Zip:** 34994
Year Built: 1973 **Effective Year Built:** 1990
Total Living Area: 1,606 **Total Under Roof:** 2,046
Tax Year: 2000 **Tax:** 2244.83

Sales Record

<u>Sale</u>	<u>Price</u>	<u>Rec Date</u>	<u>D-Type</u>	<u>OR BK/PG</u>	<u>Seller</u>
1 04-Jun-1990	\$180000	04-Jun-1990	WD	0862/1151	SELLER - see file for name
2 04-Jun-1990	\$180000	04-Jun-1990	WD	0862/1151	SELLER - see file for name
3 04-Jun-1990	\$100	04-Jun-1990	WD	0862/1150	SELLER - see file for name

***Tax Information**

Market Land Val: 80000 **Market Imp. Val:** 73014 **Mobile Home Val:** 0
Tot Market Val: 153014 **Tot Appraised Val:** 153014 **Tot Assessed Val:** 153014
(-) AG Market Val: 0 **(-) Cap Loss:** 0 **(-) Exemptions:** 25000
(+) AG Class Val: 0
Total Taxable Value: 128014 ***Current Market Tax Roll Multiplier:** 1.17

Mrs. McManus
21

FORM LETTER OF NO OBJECTION

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

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

Dear Town of Sewall's Point:

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

Sincerely yours,

Evelyn McManus

Martin County Tax Information

PID: 12384100100000210 **SBN:** RIVERVIEW (SP) **SBN Code:** 1281001
Use: 0100 / Single Family **MAP PG:** SP-05 **NBH Code:** 1213
PAD: 5 RIVERVIEW DR **Unit:** **City:** **Zip:**
Legal: RIVERVIEW S/D LOT 21

Owner Name: EVELYN **Owner 2 Name:**
Last Name: MCMANUS **Last Name:**
Address1: 5 RIVERVIEW DR
Address2:
City: STUART **State:** Florida **Zip:** 34996
Year Built: 1988 **Effective Year Built:**
Total Living Area: 2,878 **Total Under Roof:** 3,946
Tax Year: 2000 **Tax:** 4010.80

Sales Record

<u>Sale</u>	<u>Price</u>	<u>Rec Date</u>	<u>D-Type</u>	<u>OR BK/PG</u>	<u>Seller</u>
1 21-Nov-1996	\$266000	21-Nov-1996	WD	1206/0756	CHOKSHI, DILIP & GEETA
2 21-Nov-1996	\$266000	21-Nov-1996	WD	1206/0756	CHOKSHI, DILIP & GEETA
3 22-Apr-1987	\$50000	22-Apr-1987	WD	0716/0239	SELLER - see file for name

***Tax Information**

Market Land Val: 67500 **Market Imp. Val:** 161222 **Mobile Home Val:** 0
Tot Market Val: 228722 **Tot Appraised Val:** 228722 **Tot Assessed Val:** 228722
(-) AG Market Val: 0 **(-) Cap Loss:** 0 **(-) Exemptions:** 0
(+) AG Class Val: 0
Total Taxable Value: 228722 ***Current Market Tax Roll Multiplier:** 1.16

m/m/2008/20
m/m/2008/20

FORM - WRITTEN NOTICE

Adjacent Property Owners
Town of Sewall's Point
Stuart, Florida 34996

RE: Administrative Variance Application Filed by Philip W. Schuck

To Whom It May Concern:

Enclosed is a copy of the Administrative Variance Application filed by Philip Schuck. If you have any objection to the Administrative Variance being granted by the Town of Sewall's Point, you must file a written objection with the Town Clerk within fifteen (15) days from the date that this notice was mailed.

Sincerely yours,

Ken Falkenberg

Martin County Tax Information

PID: 12384100100000200 **SBN:** RIVERVIEW (SP) **SBN Code:** 1281001
Use: 0100 / Single Family **MAP PG:** SP-05 **NBH Code:** 1213
PAD: 7 RIVERVIEW DR **Unit:** **City:** **Zip:**
Legal: RIVERVIEW S/D LOT 20

Owner Name: KENNETH V **Owner 2 Name:** BETH
Last Name: BERKHOLTZ **Last Name:** HANNA
Address1: 7 RIVERVIEW DRIVE
Address2:
City: STUART **State:** Florida **Zip:** 34996
Year Built: 1978 **Effective Year Built:** 1997
Total Living Area: 1,737 **Total Under Roof:** 2,625
Tax Year: 2000 **Tax:** 2434.02

Sales Record

<u>Sale</u>	<u>Price</u>	<u>Rec Date</u>	<u>D-Type</u>	<u>OR BK/PG</u>	<u>Seller</u>
1 25-Apr-2000	\$240000	01-May-2000	WD	1476/1483	WADSTEN, RICHARD A & EDYTHE A
2 25-Apr-2000	\$240000	01-May-2000	WD	1476/1483	WADSTEN, RICHARD A & EDYTHE A
3 01-May-1978	\$22500	01-May-1978	WD	0445/1401	SELLER - see file for name

***Tax Information**

Market Land Val: 67500 **Market Imp. Val:** 98519 **Mobile Home Val:** 0
Tot Market Val: 166019 **Tot Appraised Val:** 166019 **Tot Assessed Val:** 163803
(-) AG Market Val: 0 **(-) Cap Loss:** 2216 **(-) Exemptions:** 25000
(+) AG Class Val: 0
Total Taxable Value: 138803 ***Current Market Tax Roll Multiplier:** 1.44

ROBERT M. WIENKE
Mayor

THOMAS P. BAUSCH
Vice Mayor

DAWSON C. GLOVER, III
Commissioner

E. DANIEL MORRIS
Commissioner

MARC S. TEPLITZ
Commissioner

TOWN OF SEWALL'S POINT



JOSEPH C. DORSKY
Town Manager

JOAN H. BARROW
Town Clerk

LARRY E. McCARTY
Chief of Police

GENE SIMMONS
Building Official

JOSE TORRES, JR.
Maintenance

November 14, 2001

Mr. Philip Schuck
c/o Mary Lou Rada
Premier Realty Group
2 North Sewall's Point Road
Sewall's Point, Florida 34996

Re: Administrative Variance, Lot 4 Palm Row

Dear Mr. Schuck:

Enclosed is the Town's check in the amount of \$80.50, your refund regarding the above-referenced variance:

9/01	Received check from Philip Schuck	+\$500.00
9/01	Town of Sewall's Point - filing fee	-\$250.00
9/01	Wright Ponsoldt - legal fees	-\$150.00
11/01	Clerk of Circuit Court - recording fees	-\$ <u>19.50</u>
11/01	Refund to Philip Schuck	\$ 80.50

Also enclosed is a copy of the recorded variance. Please do not hesitate to contact me if you require anything further.

Sincerely,
TOWN OF SEWALL'S POINT

Joan Barrow, Town Clerk/Treasurer



One South Sewall's Point Road, Sewall's Point, Florida 34996
Town Hall (561) 287-2455 • Fax (561) 220-4765 • E-Mail: clerk@sewallspoint.org
Police Department (561) 781-3378 • Fax (561) 286-7669 • E-Mail: police@sewallspoint.org