

10 Palm Road

862

Single Family Residence

PERMIT
AUG 3 1978

TOWN OF SEWELL'S POINT FLORIDA

862 Permit No. _____ Date 8-9-78

APPLICATION FOR BUILDING PERMIT.

PERMIT
AUG 3 1978

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

- Owner Frank P Stafford Present address Box 163N
Phone (906) 524-6145 10 PALM ROAD SKANEE, Michigan 49962
- General contractor Blue Dolphin Developers address 1597 SE Port St Lucie Blvd
Phone 878-3311 Port St Lucie, Florida
- Where licensed STATE of Florida License No. CBC 011003
- Plumbing contractor Southpark Plumbing License No. 49
- Electrical contractor J Len Taylor License No. 44
- Name the street on which the building, its front building line and its front yard will face Palm Row
- Subdivision Palm Row Lot No. 5 Area Sewell's Point
- Building area, inside walls (excluding garage, carport, porches, etc.)..square feet 1,606
- Other construction (pools, additions, etc.) _____
- Contract price (excluding land, carpeting, appliances, landscaping, etc) \$ 47,900
- Total 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 building must be completed in accordance with the approved plan, and that the site will be clean and rough-graded within the 12 month period.

Joseph P. Johnson
General Contractor

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

Landscaping (i.e. Sod) is contractors responsibility
Joseph P. Johnson
Owner

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

TOWN RECORD Date submitted _____

Approved: Chas A. Curran 10 Aug 78
Building Inspector Date

Approved: John A. Guendler 10 Aug 1978
Commissioner Date

Certificate of Occupancy issued Dec 27, 1978 Jim #862
Date

This Warranty Deed Made the 6th day of May A D 1978 by

RUSSELL T. CALI, Jr. and ANNE G. CALI, his wife

hereinafter called the grantor, to

FRANK P. STAFFORD

whose postoffice address is Box 163N, Skanee, Michigan 49962

hereinafter called the grantee.

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

Witnesseth: That the grantor, for and in consideration of the sum of \$ 510.00 and other valuable considerations, receipt whereof is hereby acknowledged, hereby grants, bargains, sells, aliens, releases, conveys and confirms unto the grantee, all that certain land situate in County Florida, viz:

Lot 5, PALM ROW, according to amended and revised Plat of PALM ROW as filed in Plat Book 4, page 60, Martin County, Florida, public records.

SUBJECT TO reservations, restrictions and easements of record.

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

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

And the grantor hereby covenants with said grantee that the grantor is lawfully seized of said land in fee simple; that the grantor has good right and lawful authority to sell and convey said land; that the grantor hereby fully warrants the title to said land and will defend the same against the lawful claims of all persons whomsoever; and that said land is free of all encumbrances except taxes accruing subsequent to December 31, 1977.

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

Signed, sealed and delivered in our presence:

Gertrude O'Keefe *Russell T. Cali, Jr.*
Chris Potchoff *Anne Cali*



STATE OF FLORIDA
COUNTY OF MARTIN

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

RUSSELL T. CALI, JR. AND ANNE G. CALI, his wife.

to me known to be the person(s) described in and who executed the foregoing instrument and THEY acknowledged before me that THEY executed the same.

WITNESS my hand and official seal in the County and State last aforesaid this 6th day of MAY A D 1978

Gertrude O'Keefe

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

This Instrument prepared by: Russell T. Cali
Address 1951 Ludlam Drive
Gardnerville, Florida 33166

SPACE BELOW FOR RECORDERS USE

X 862

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

STATE OF FLORIDA DEPARTMENT OF HEALTH AND REHABILITATIVE SERVICES DIVISION OF HEALTH Post Office Box 210, Jacksonville, Florida 32201

Well MUST be installed BEFORE a Final approval is issued.

APPLICATION AND PERMIT OF INDIVIDUAL SEWAGE DISPOSAL FACILITIES

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

Application / Permit No. HD 78-582

Martin Co. 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 287-2277 and give this office a 24-hour notice when ready for inspection.

Section II - Information:

1. Property Address (Street & House No.) Palm Road Lot 5 Block Subdivision Palm Row Date Platted Directions to Job SE on Sewall's Pt. Rd. from E. Ocean Blvd. to Palm Rd., then SW for 460 ft. on NW side
2. Owner or Builder Blue Dolphin P. O. Address 1597 SE PSL Blvd Port St. Lucie Septic tank system to be installed by:

2 bedroom

Scale 1" = 50' (Rear)

3. Specifications: 750 gallon tank with 170 square feet of drainfield with at least 4" inside diameter pipe.
4. House to be constructed: Check one: FHA VA Conventional

REMOVE ALL IMPERVIOUS MATERIALS TO A DEPTH OF 6' AND BACKFILL WITH A GOOD GRADE OF SAND IN ENTIRE AREA OF DRAINFIELD. Check for possible well across Palm Rd.

(Name of Street or State Road) (Side)

(Name of Street or State Road) (Side)

(Front)

(Name of Street or State Road)

Applicant: Blue Dolphin Please Print

Signature: [Handwritten Signature]

Date: 6/29/78

DO NOT WRITE BELOW THIS LINE

Section III - Application Approval & Construction Authorization

Installation subject to following special conditions:

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

By: [Signature] County Health Dept. Martin Date 6/30/78

Section IV - Final Construction Approval

Construction of installation approved: Yes No

Date: By: FHA No. VA No.

[Handwritten Signature]

ST. LUCIE COUNTY HEALTH DEPARTMENT

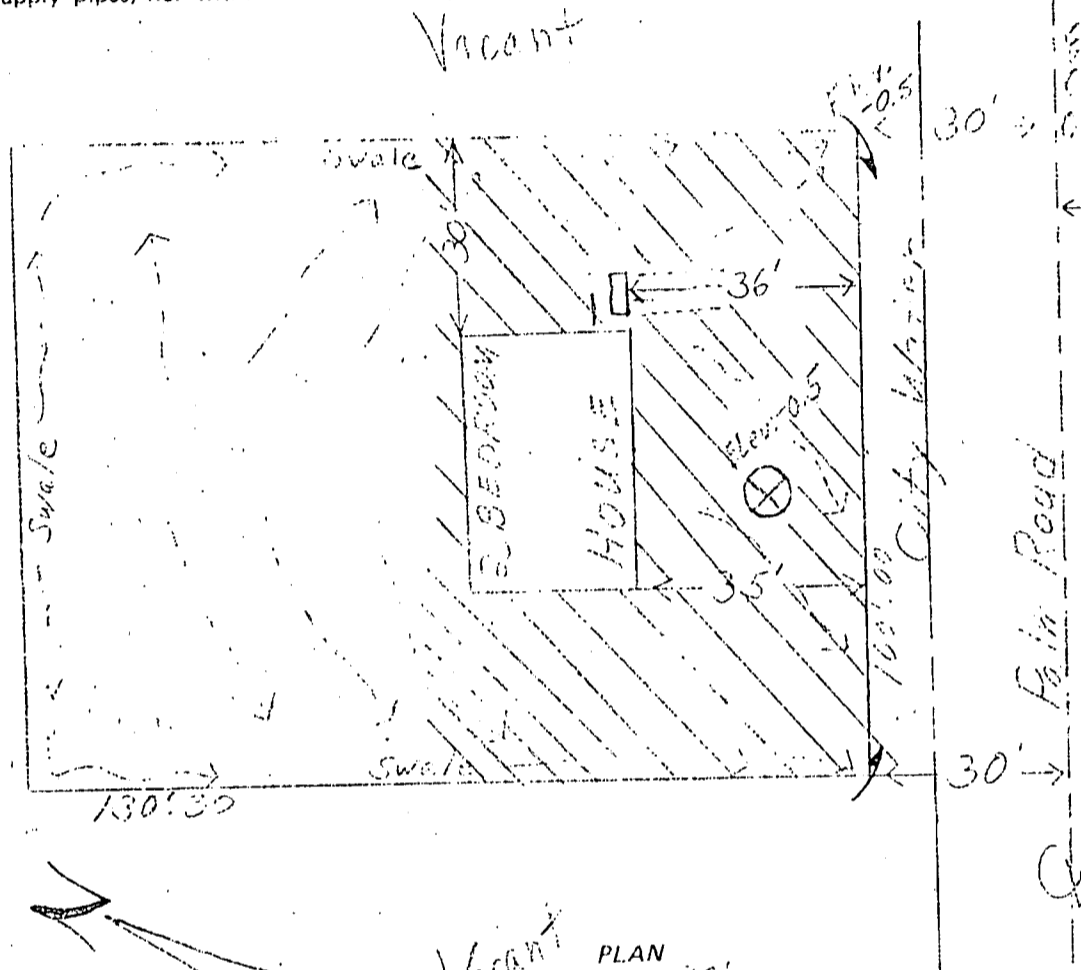
Post Office Box 580
Fort Pierce, Florida 33450
461-5350

INDIVIDUAL SEWAGE DISPOSAL FACILITIES
DATA SHEET

Location: Palm Row
Lot 5 Palm Row

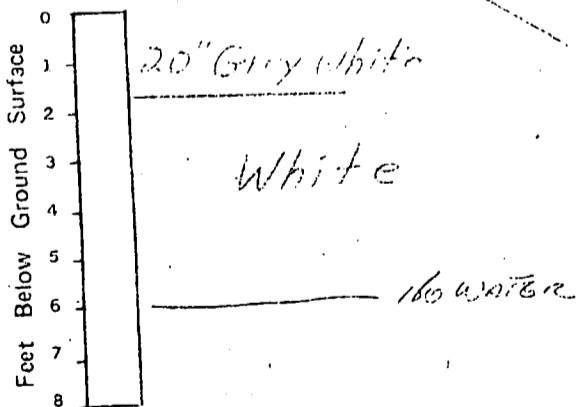
Applicant: Blue Dolphin
County: Martin Co.

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



Plot plan must show all data required per 10D-6.03 2(a) and all other pertinent data.

SOIL DATA



LEGEND

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

Elev. of the crown: 3.0
Elevation in relation to crown of road: -0.5

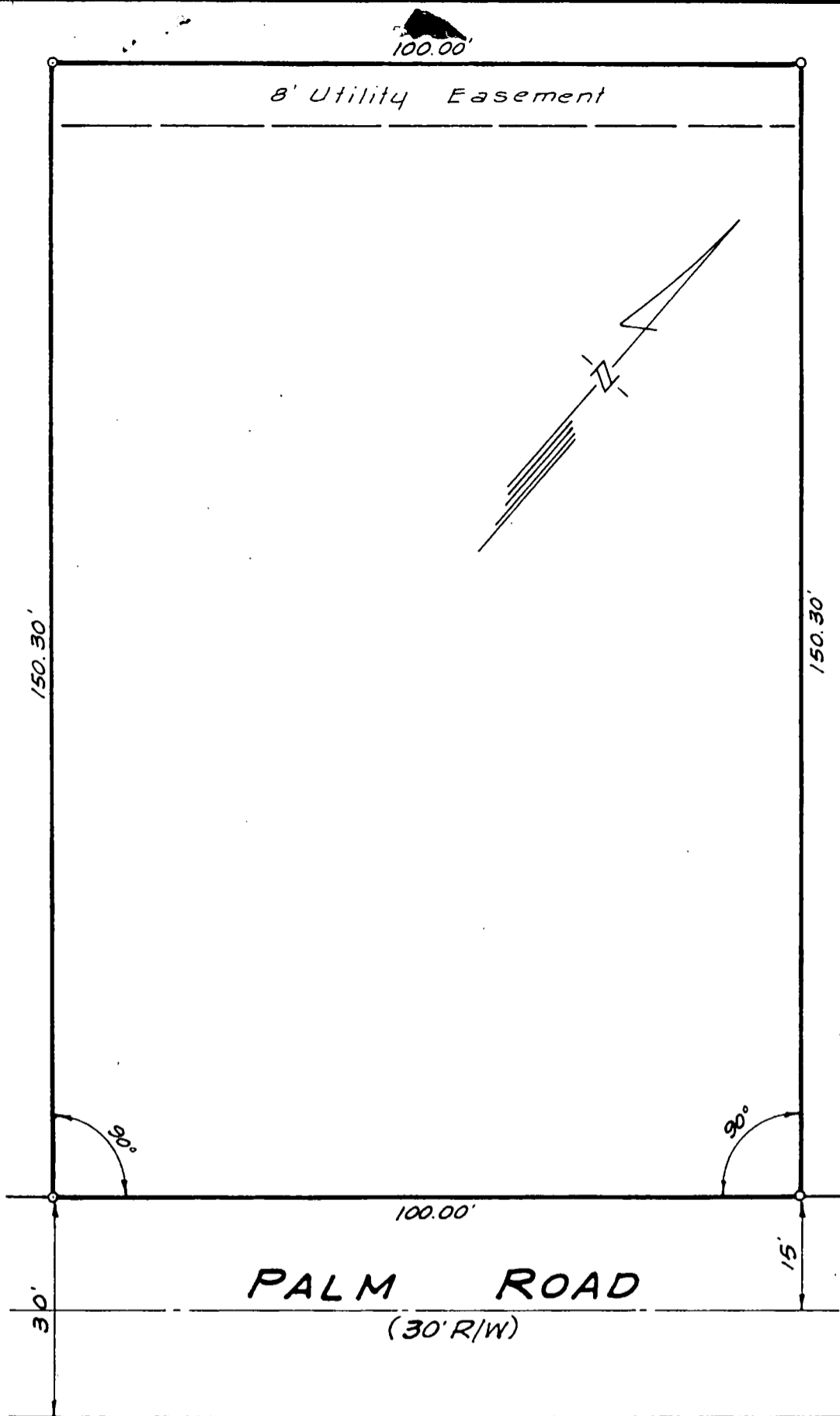
Elevation in relation to adjacent lot: _____

SOIL BORING LOG

Soil Identification: CLASS 1 GROUP SW
Soil Characteristics 1/4" Gravel

Percolation Rate 1/4" min./inch
Water Table Depth 6.2'
Water Table Depth During Wet Season 6.0'
Compacted Fill Of _____ Req'd
Compacted Fill Checked By: _____
Date _____

CERTIFIED BY: W. J. Schoepfer
W. J. Schoepfer
Florida Professional No. 3169
Date: 6-20-78 #86



LEGAL DESCRIPTION

**LOT 5
REVISED & AMENDED PLAT OF PALM ROAD
TOWN OF SEWALL'S POINT**

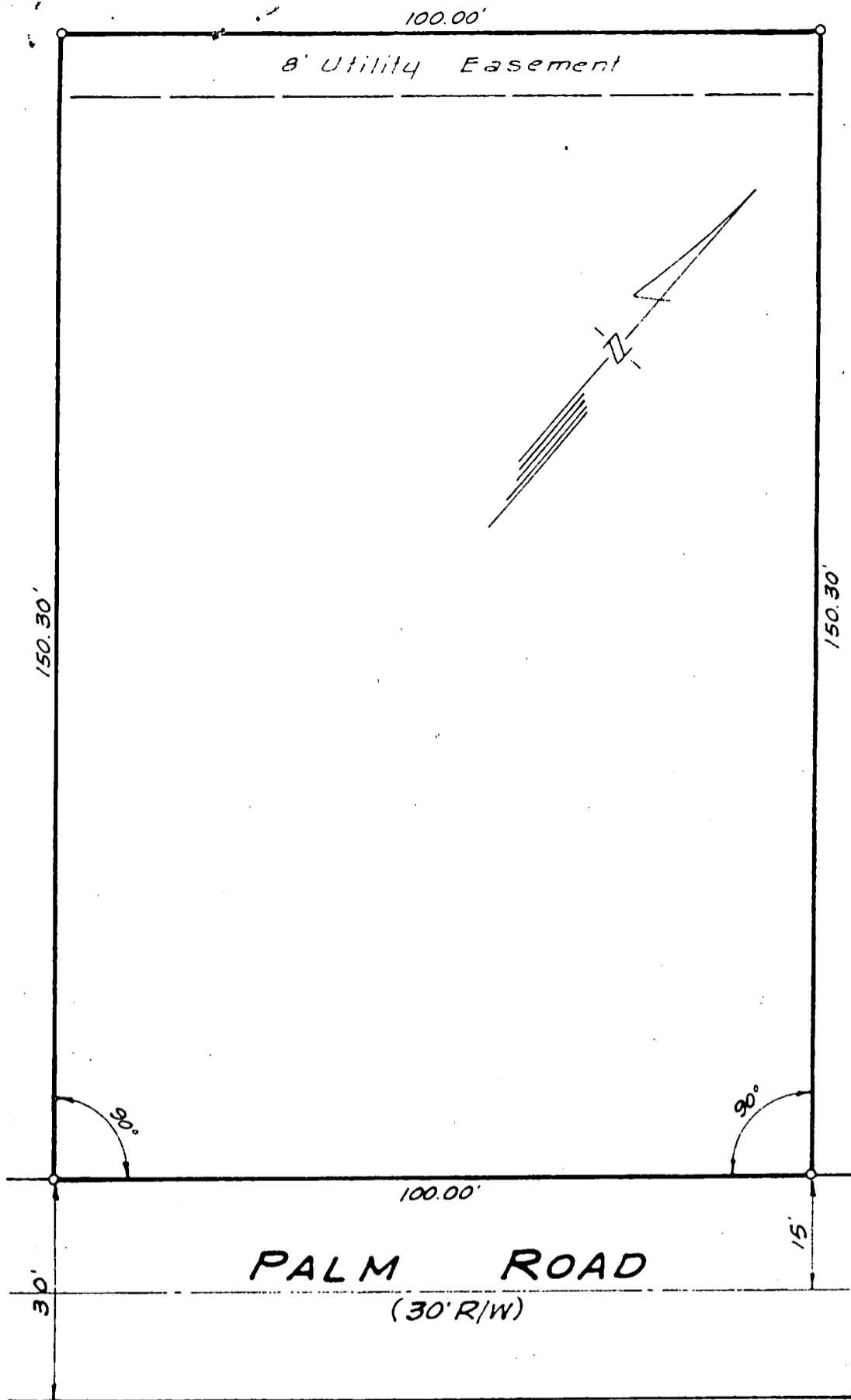
I HEREBY CERTIFY THAT THE PLAT SHOWN HEREON IS A TRUE AND CORRECT REPRESENTATION OF A SURVEY MADE UNDER MY DIRECTION AND THAT SAID SURVEY IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.



W. J. Schoepfer

 REGISTERED LAND SURVEYOR
 FLORIDA CERT NO. 3169

W. J. SCHOEPFER
 1671 THUMB POINT DRIVE
 FORT PIERCE, FLORIDA 34950
 6-25-78
 FILE #862



LEGAL DESCRIPTION

**LOT 5
REVISED & AMENDED PLAT OF PALM ROW
TOWN OF SEWALL'S POINT**

I HEREBY CERTIFY THAT THE PLAT SHOWN HEREON IS A TRUE AND CORRECT REPRESENTATION OF A SURVEY MADE UNDER MY DIRECTION AND THAT SAID SURVEY IS ACCURATE TO THE BEST OF MY KNOWLEDGE AND BELIEF AND THAT THERE ARE NO ENCROACHMENTS EXCEPT AS SHOWN.

W. J. Schoepfer
REGISTERED LAND SURVEYOR
FLORIDA CERT NO 3169



W. J. SCHOEPFER
1671 THUMB POINT DRIVE
FORT PIERCE, FLORIDA 33450
6-25-78

#862

#862

FRASER ENGINEERING AND TESTING

PHONE: (305) 461-7508

3504 INDUSTRIAL 33 RD STREET

FORT PIERCE, FLORIDA - 33450

Report of DENSITY OF SOIL IN PLACE ASTM 2167-66

Client: Blue Dolphin Developers

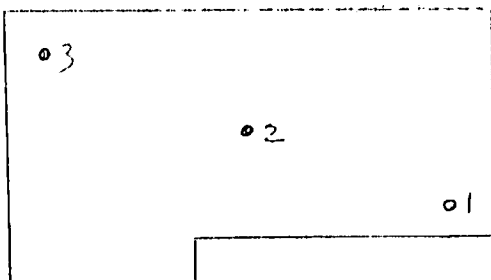
Date: September 21, 1978

Contractor: Client

Site: Lot #5, Palm Row
Sewells Point

Test No.	Location	Elevation	In Place Dry Density	Moisture Density Relationship		Percent Compaction
				Test No.	Max. Dry Density	
20146	Map Location #1	0 - 1'	102.9	20145	102.9	100.0
20147	Map Location #1	1 - 2'	102.2	20145	102.9	99.3
20148	Map Location #2	0 - 1'	101.9	20145	102.9	99.0
20149	Map Location #2	1 - 2'	99.8	20145	102.9	97.0
20150	Map Location #3	0 - 1'	102.8	20145	102.9	99.9
		All elevations below finish slab grade.				

Copies : Client - 2



Respectfully submitted,

Alexander H. Fraser

ALEXANDER H. FRASER, P. E.

#862

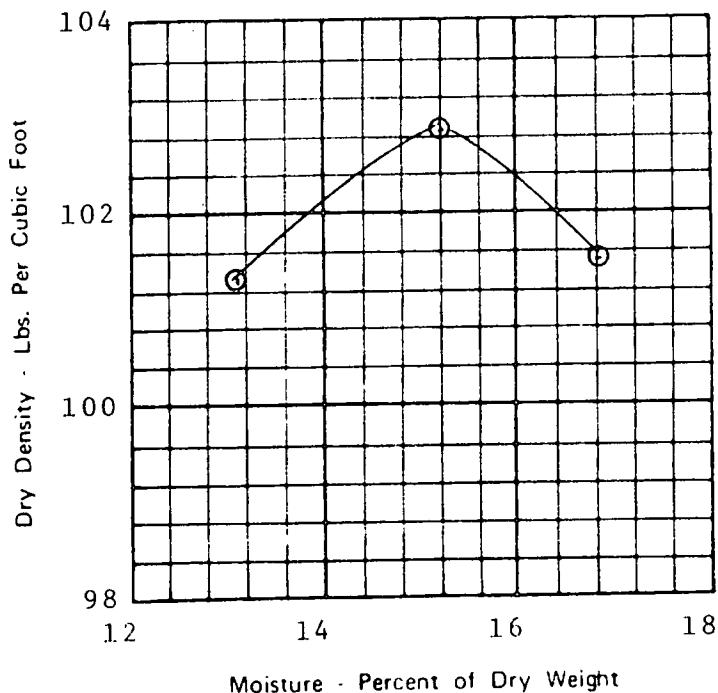
Report
 of
 MOISTURE DENSITY RELATIONSHIP
 ASTM 1557-70

Client: Blue Dolphin Developers

Date: September 21, 1978

Contractor: Client

Site: Lot #5, Palm Row
 Sewells Point



Test No.	Test Method	Sample Location	Optimum Moisture %	Max Dry Density-P.C.F.	Soil Description
20145	A	Density Composite	15.2	102.9	Orange to brown fine sand

Copies : Client - 2

Respectfully submitted,

Alexander H. Fraser
 ALEXANDER H. FRASER, P. E.

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date _____

This is to request that a Certificate of Approval for Occupancy be issued to _____
For property built under Permit No. 862 Dated 8/9/78 when completed in
conformance with the Approved Plans.

Signed Frank P. Staffel

RECORD OF INSPECTIONS

Item	Date	Approved by
Set-backs and footings		
Rough plumbing	9/19/78	
Slab	9/22/78	
Perimeter beam	9/29/78	
Close-in, roof and rough electric	11/2/78	
Final Plumbing	12/27/78	
Final Electric	12/27/78	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector J. Amozzura date _____

Approved by Building Commissioner _____ date _____

Utilities notified 12/27/78 date _____

Original Copy sent to _____

(Keep carbon copy for Town files)

2050

TOWN OF SEWALL'S POINT, FLORIDA

Permit Number _____

Date _____

APPLICATION FOR A PERMIT TO BUILD A DOCK, FENCE, POOL, SOLAR HEARING 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 FRANK P. STAFFORD Present Address 10 PALM RD

Phone 286-3154

SUB- Contractor RICHARD KIEFER Address 999 S.W. 31ST PALM CITY

Phone 282-3368

Where licensed MARTIN COUNTY License number 40570

Electrical contractor NEW LIGHT ELECT License number _____

Plumbing contractor NONE License number _____

Roofing contractor _____ License number _____

Air conditioning contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: 18' x 27' BEDROOM & DEN ADDITION

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

10 PALM RD

Subdivision PALM ROW Lot number 5 Block number _____

Contract price \$ ~~12,000~~ ^{\$28,000} Cost of permit \$ ~~75.00~~ 85.00

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, the State of Florida Model Energy Efficiency Building Code 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 Frank P. Stafford

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 Frank P. Stafford

TOWN RECORD

Date submitted 1/2/87 Approved Dale Brown
Building Inspector Date

Approved J.C. Strubbe 1/6/87 Final Approval given 3/5/87
Commissioner Date Date

Certificate of Occupancy issued (if applicable) 3/5/87
Date

RECORD OF INSPECTIONS

TOWN OF SEWALL'S POINT, FLORIDA

CERTIFICATE OF APPROVAL FOR OCCUPANCY

Date 1/7/87

This is to request that a Certificate of Approval for Occupancy be issued to STAFFORD
For property built under Permit No. 2050 Dated 3/4/87 when completed in
conformance with the Approved Plans.

Item	Signed	Approved by
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION	<u>1/20/87 DB</u>	
3. FOOTING - SLAB	<u>1/20/87 DB</u>	
4. ROUGH PLUMBING		
5. ROUGH ELECTRIC	<u>2/9/87 DB</u>	
6. LINTEL	<u>1/27/87 DB</u>	
7. ROOF		
8. FRAMING		
9. INSULATION	<u>2/11/87 DB</u>	
10. A/C DUCTS		
11. FINAL ELECTRIC	<u>3/4/87 DB</u>	
12. FINAL PLUMBING	<u>3/4/87 DB</u>	
13. FINAL CONSTRUCTION	<u>3/4/87 DB</u>	

Final Inspection for Issuance of Certificate for Occupancy.

Approved by Building Inspector Dale Brown 3/4/87 date

Approved by Building Commissioner GC Strubell date 3/5

Utilities notified _____ date

Original Copy sent to _____

(Keep carbon copy for Town files)

THIS PERMIT MUST BE DISPLAYED IN FRONT OF JOB

DO NOT REMOVE UNTIL JOB IS COMPLETED

OWNER Frank P. Stafford
CONTRACTOR Richard Kiffer
LOT 5 BLOCK _____ SUB Palm Row
NO. 10 Palm Rd St. or Ave.

NO. 2050 Date Issued 1/7/87

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

TOWN OF SEWALL'S POINT BUILDING PERMIT

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

REQUIRED INSPECTIONS	INSPECTOR'S FINDING	INSPECTOR'S SIGNATURE
1. LOT STAKES/SET BACKS		
2. TERMITE PROTECTION	OK 1/20/87	DB
3. FOOTING - SLAB	OK 1/20/87	DB
4. ROUGH PLUMBING		
5. ROUGH ELECTRIC		
6. LINTEL	OK 1/27/87	DB
7. ROOF		
8. FRAMING		
9. INSULATION	OK 2/14/87	DB
10. A/C DUCTS		
11. FINAL ELECTRIC	OK 3/4/87	DB
12. FINAL PLUMBING	OK 3/4/87	DB
13. FINAL CONSTRUCTION	OK 3/4/87	DB

TO CONSTRUCT Bedroom + den

REMARKS:

TRAVIS EXT
1-20-87 HBL

2635

Replace Stone Art Wall

Permit No. _____

Date _____

APPLICATION FOR 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 FRANK P. STAFFORD Present Address 10 PALM RD

Phone 286-3154

Contractor Richard Kieter Address 999 SW 31ST Palm City

Phone 283-3368

Where licensed Martian Co License number 00570

Electrical contractor None License number _____

Plumbing contractor None License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Replace two Art. Windows. Stone Art. wall
10 Palm Rd.

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

Subdivision PALM ROW Lot number 5 Block number _____

Contract price \$ 5,000.00 Cost of permit \$ _____

Plans approved as submitted _____ Plans approved as marked _____

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

Contractor Richard Kieter

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 Frank P. Stafford

TOWN RECORD Approved: Dale Brown 10/16/89
Building Inspector Date

Date submitted _____

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.

4002

Screen Enclosure

TAX FOLIO NO. 133841005 000 0000-9000 DATE 6.14.96

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 Frank Stafford Present address 10 Palm Road
Phone _____ Stuart Fl 34996

Contractor Pioneer Screen Address 3121 SE Walker St
Phone 283-9197 Stuart Fl 34997

Where licensed State License number 800046064
Electrical Contractor _____ License number _____
Plumbing Contractor _____ License number _____

Describe the structure, or addition or alteration to an existing structure, for which this permit is sought: Screen enclosure on existing
SIAB.

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

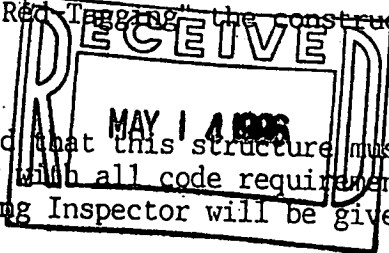
10 Palm Road

Subdivision Palm Row Lot Number 60 Block Number _____

Contract price \$ 2150.00 Cost of permit \$ 100.00

Plans approved as submitted _____ Plans approved as marked _____

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



Contractor [Signature]

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

Owner [Signature]

TOWN RECORD

Date submitted _____ Approved: Dale Brown 6/17/96
Building Inspector Date

Approved: [Signature] Final approval given: _____
Commissioner Date Date

CERTIFICATE OF OCCUPANCY issued (if applicable) _____
Date

PERMIT NO. _____

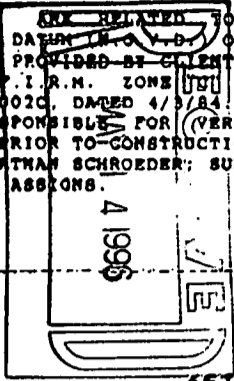
DESCRIPTION

LOT 6, PALM ROAD, AS RECORDED IN PLAT BOOK 3, PAGE 115, PUBLIC RECORDS OF MARTIN COUNTY, FLORIDA.

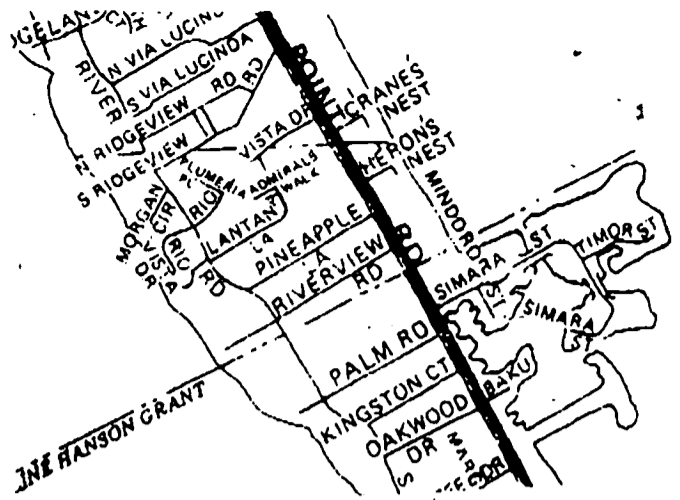
PROPERTY ADDRESS: PALM ROAD
SEWELL'S POINT, FLORIDA

NOTES:

- SUBJECT TO ANY APPLICABLE EASEMENTS, RIGHTS-OF-WAY, OR OTHER RESTRICTIONS OF RECORD.
- A SEARCH OF THE PUBLIC RECORDS HAS NOT BEEN MADE BY THIS OFFICE.
- ELEVATIONS SHOWN ARE RELATED TO THE NATIONAL GEODETIC VERTICAL DATUM (N.G.V.D.) OF 1929.
- LEGAL DESCRIPTION PROVIDED BY CLIENT.
- PROPERTY LIES IN "1" R.M. ZONE "1" & "B", AS SHOWN ON PANEL 120164-0002C, DATED 4/3/84.
- CONTRACTOR IS RESPONSIBLE FOR VERIFYING ALL SITE PLAN INFORMATION PRIOR TO CONSTRUCTION.
- CERTIFIED TO: JONATHAN SCHROEDER; SUNTRUST BANK, ITS SUCCESSORS AND/OR ASSIGNS.



VICINITY MAP



OCCUPIED

OCCUPIED
F.F.E. = 9.80

OCCUPIED

SET IRON ROD & CAP
LB # 4942

NORTH LINE
OF HANSON GRANT

FENCE CORNER
0.09' S.E.
0.49' S.W.

FND. C.M.
0.08' S.E.
0.15' N.E.

SBT
BOX

8' U.E.
PPOLE

Cordeiro

SCALE: 1" = 30'

LOT 7
OCCUPIED
F.F.E. = 12.90

LOT 5
OCCUPIED
F.F.E. = 8.55

FENCE CORNER
0.99' S.W.

PROP.
3-BRM. RESIDENCE
3010 S.F. LIVING AREA

GREEN AREA
960 S.F.

FND. C.M.
0.06' N.W.
0.82' N.E.

FND. C.M.
0.18' N.E.

FND. NAIL/DISC
(9CY)

R/W LINE

538.61' (P)
533.88' (M)

FND. NAIL
DISC (NO I.D.)

R/W LINE

PALM ROAD
(30' R/W)

BM B.26
N.67D

COMMUNITY WATER AVAILABLE
COMMUNITY DEVELOPMENT DEPARTMENT
BUILDING DIVISION

REVIEWED

DATE: 6/10/96

BY: [Signature]

ENGINTEERS & SURVEYORS

ROPER, INC.

8 S.W. PORT ST. LUCIE BLVD.
SUITE 200
PORT ST. LUCIE, FLORIDA 34953
(407) 335-4466 (407) 879-0477
(407) 871-6659 (FAX)

DALMAR (SCHROEDER) REVISIONS

NO.	DESCRIPTION	DATE	BY
1	BOUNDARY	1-25-96	BTS
2	SITE PLAN	2-1-96	BTS
3			
4			

DRAWN BY: D. SIMONS DATE: 1-25-96
SCALE: 1" = 30'

PROJECT NO: 141 DATE OF PLAN: 43
BY: R DATE OF PLOT: 1-25-96
NO: 96-20

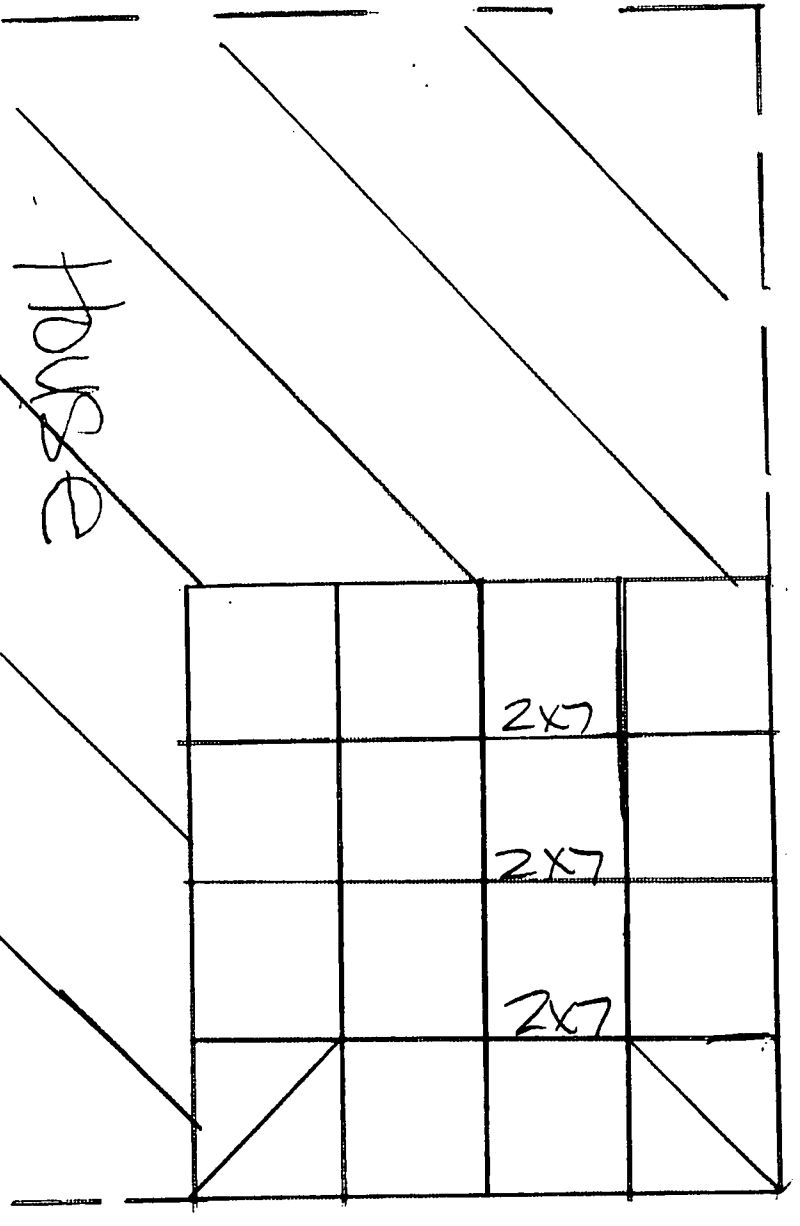
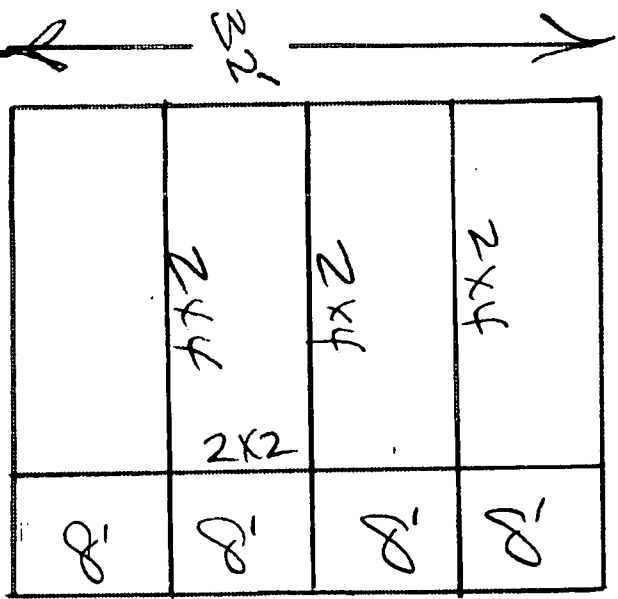
SURVEYOR'S CERTIFICATE

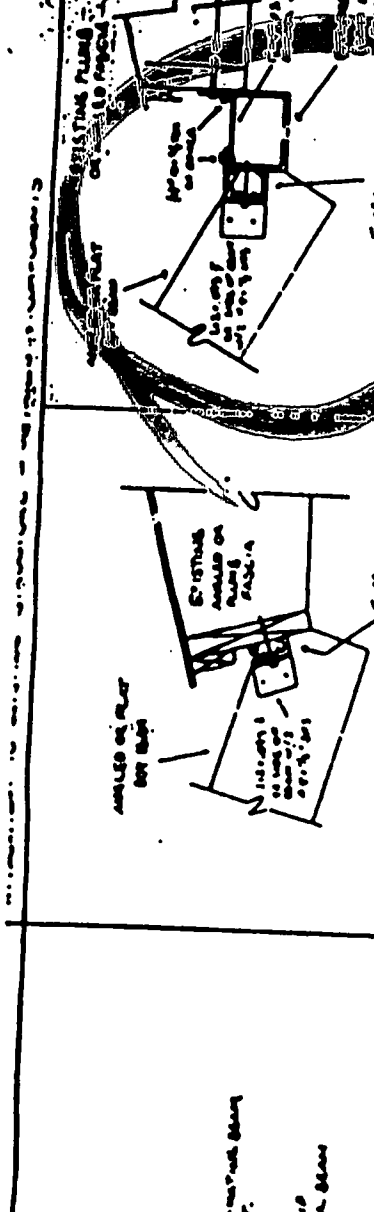
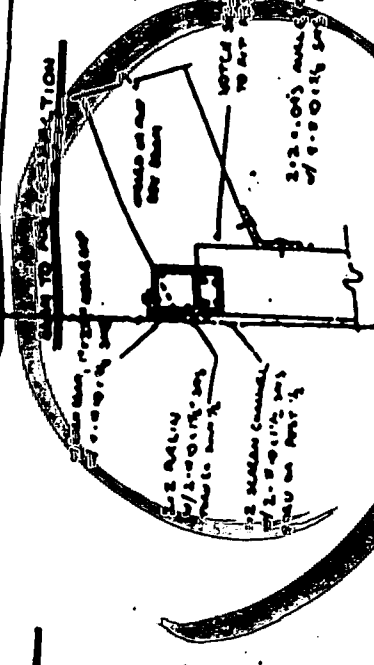
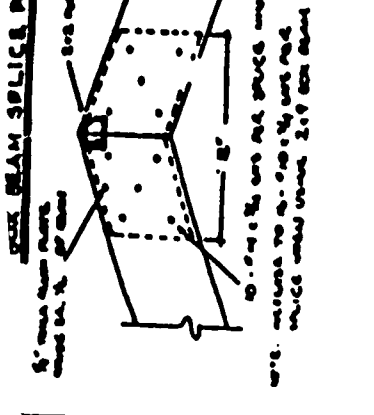
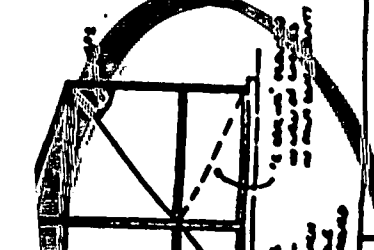
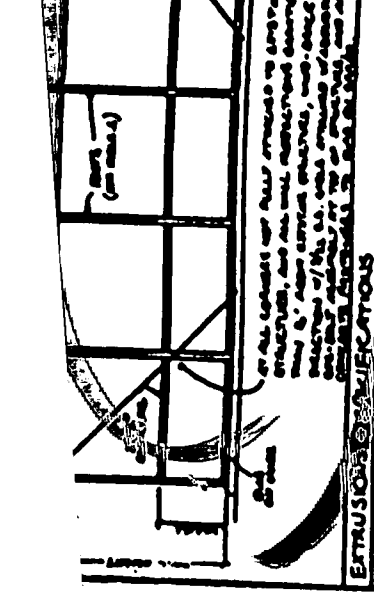
I HEREBY CERTIFY THAT THE PLAN SHOWN HEREON IS A TRUE AND CORRECT REPRESENTATION OF A SURVEY MADE UNDER MY DIRECTION AND THAT SAID SURVEY MEETS THE MINIMUM TECHNICAL STANDARDS OF CHAPTER 81G17, FLORIDA ADMINISTRATIVE CODE AND THAT THERE ARE NO ABOVE GROUND ENCROACHMENTS UNLESS OTHERWISE SHOWN. THIS IS VALID UNLESS RECALLED WITH AN EMBOSSED SEAL.

[Signature]

ROBERT J. SIMONS
PROFESSIONAL LAND SURVEYOR
STATE OF FLORIDA #3793

London Road
 (Sarpedon)
 Palm Rd





SECTION PROPERTIES

SHAPE	AREA	MOMENT OF INERTIA	SECTION MODULUS	WEIGHT
2x4	0.86	0.030	0.12	3.9
2x6	1.15	0.050	0.18	5.3
2x8	1.50	0.080	0.25	7.2
2x10	1.99	0.120	0.34	9.5
2x12	2.58	0.180	0.47	12.5

AMERICAN LUMBER CO. 1988

SECTION PROPERTIES

SHAPE	AREA	MOMENT OF INERTIA	SECTION MODULUS	WEIGHT
2x6	1.15	0.050	0.18	5.3
2x8	1.50	0.080	0.25	7.2
2x10	1.99	0.120	0.34	9.5
2x12	2.58	0.180	0.47	12.5

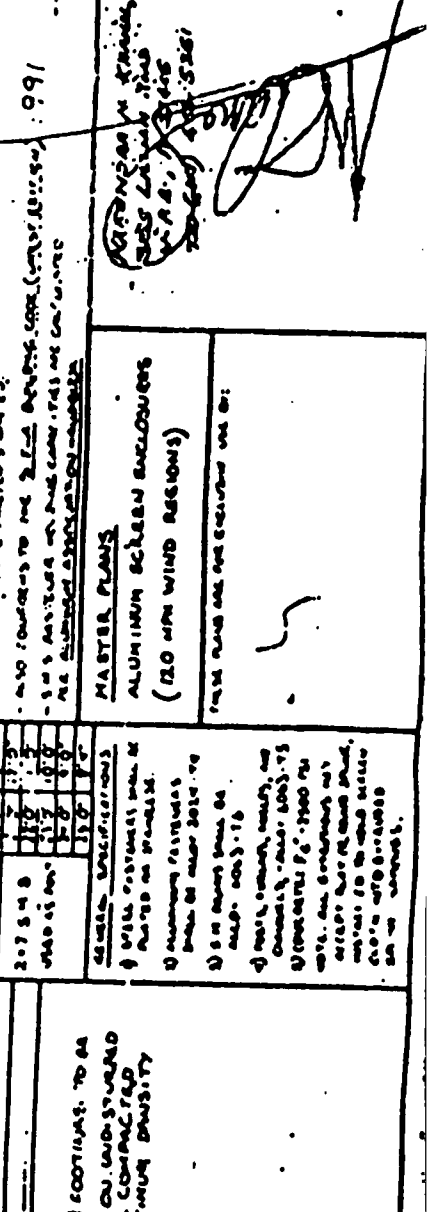
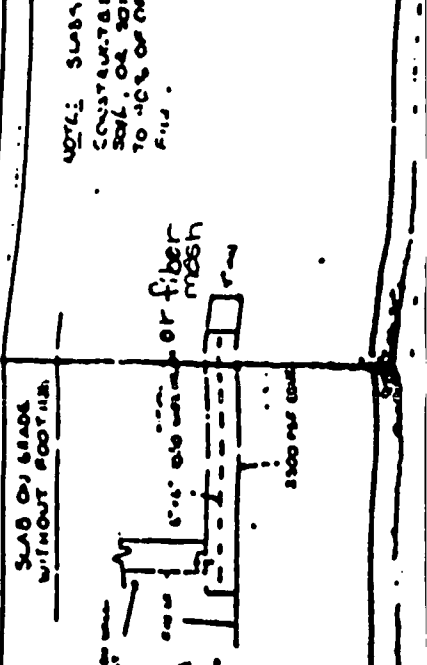
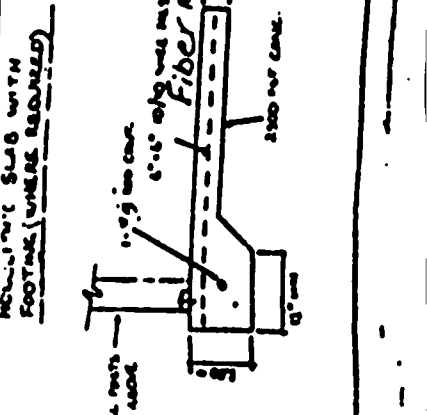
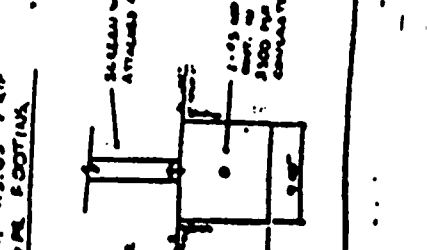
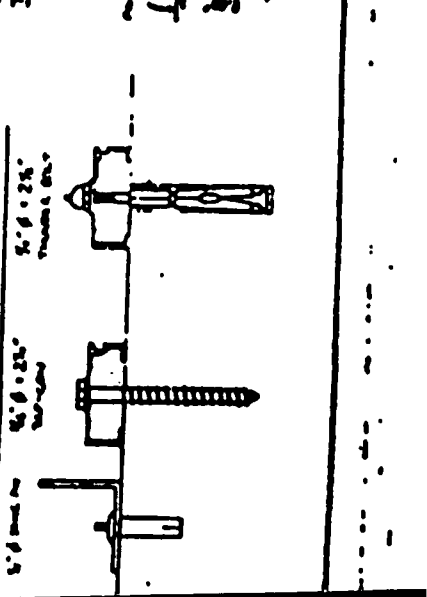
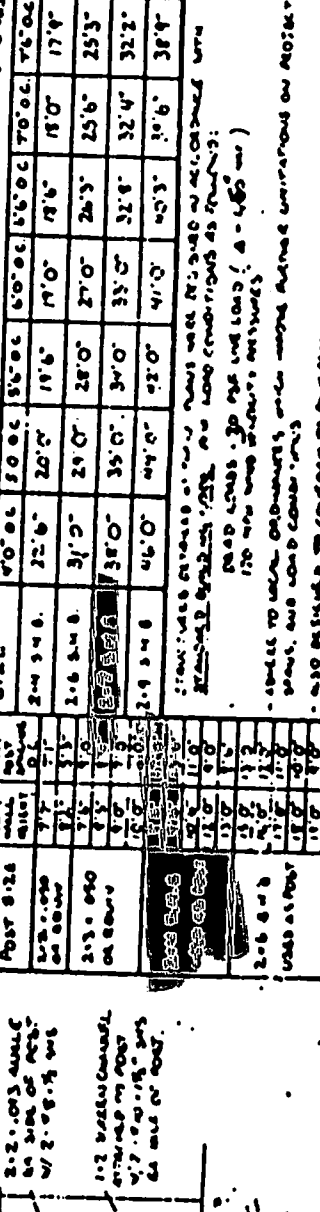
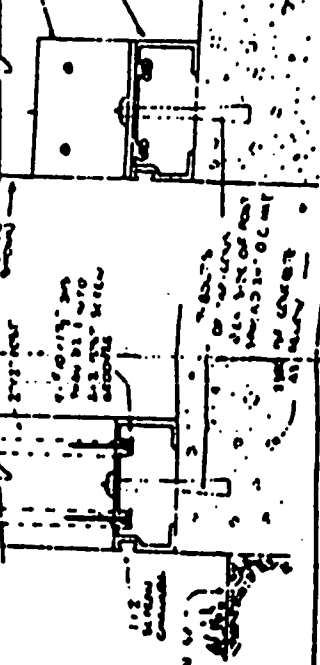
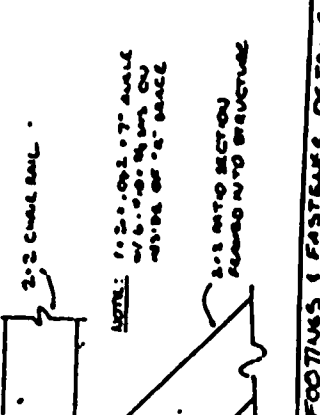
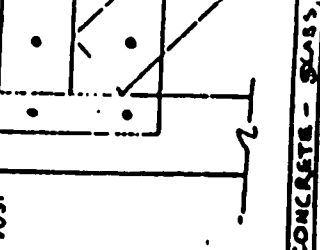
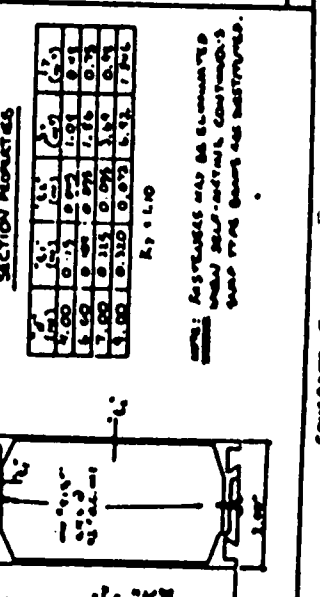
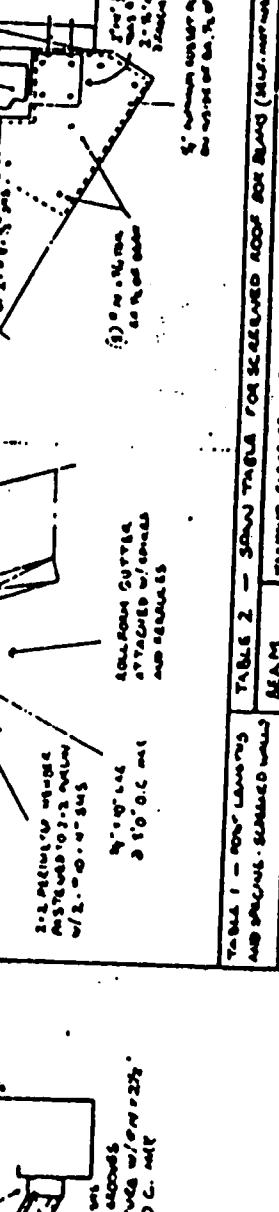
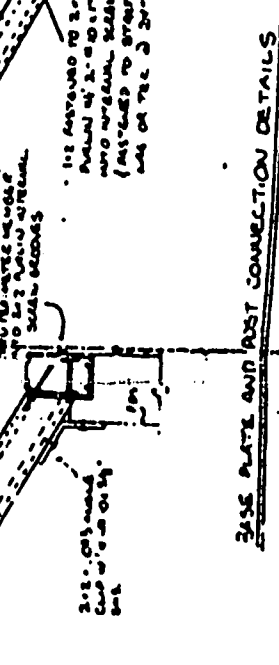
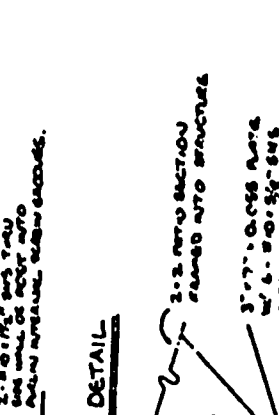
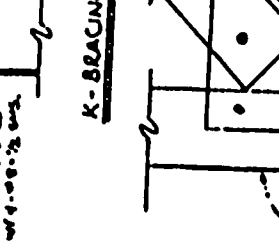
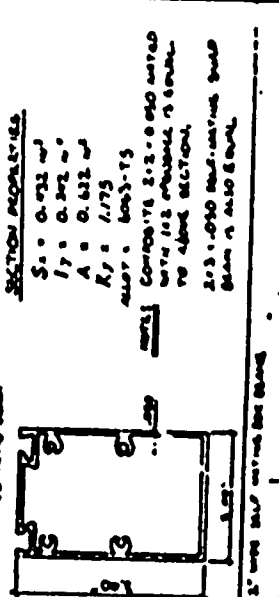
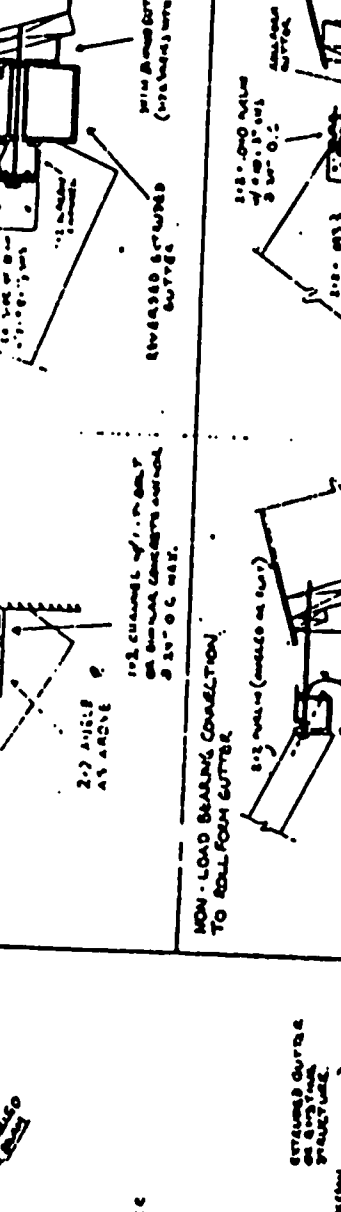
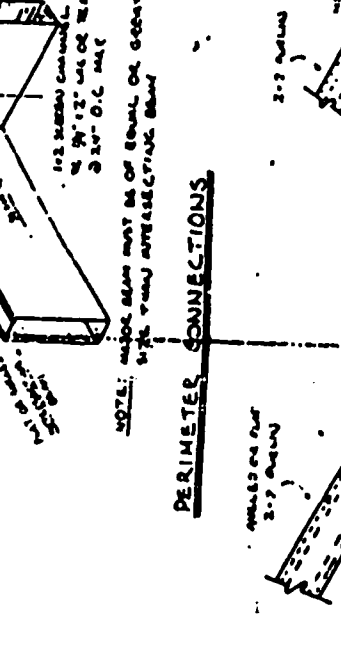
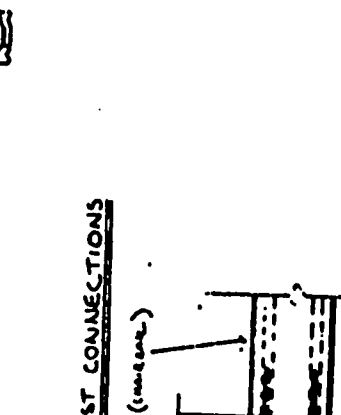
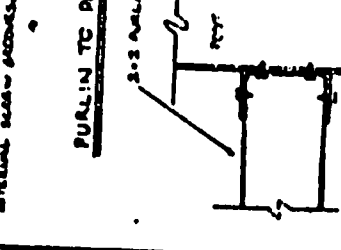
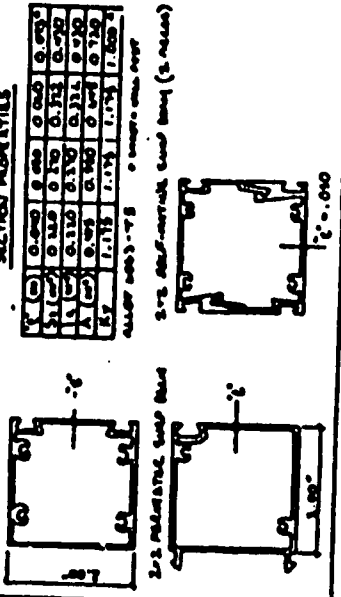
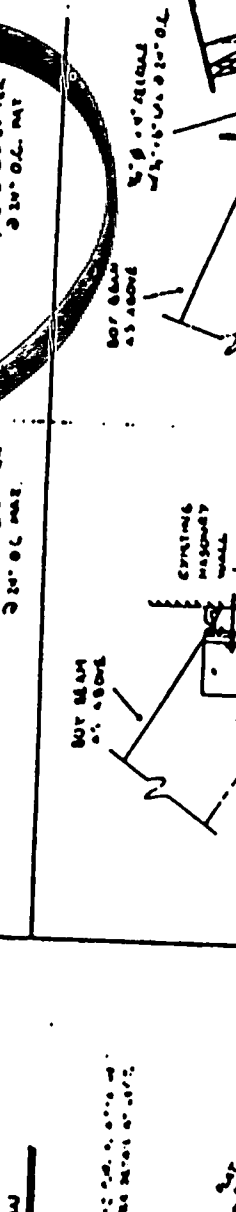
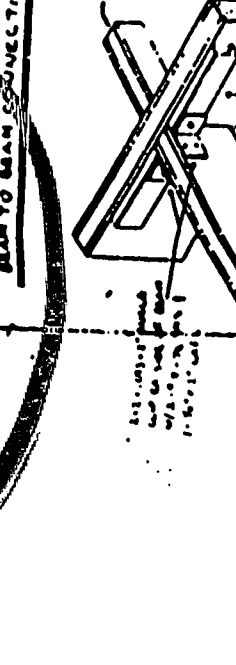
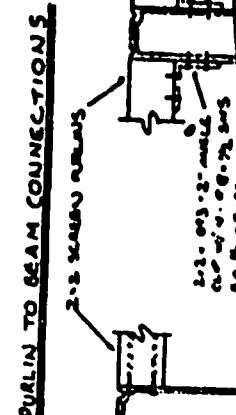


TABLE 1 - WIND LOADS

POST SIZE	WIND SPEED	WIND LOAD
2x4	20	20
2x6	25	25
2x8	30	30
2x10	35	35
2x12	40	40

TABLE 2 - SPREAD TABLE FOR SCREENED ROOF FOR BLIND

POST SIZE	SPREAD	BLIND
2x4	20	20
2x6	25	25
2x8	30	30
2x10	35	35
2x12	40	40

MASTERS PLANS ALUMINUM SCREEN ENCLOSURES (30 MPH WIND REGION)

NOTE: SLAB FOOTINGS TO BE CONSTRUCTION ON UNDOUBLED SOIL OR SOIL COMPACTED TO 95% OF DENSITY DENSITY

NOTE: SLAB FOOTINGS TO BE CONSTRUCTION ON UNDOUBLED SOIL OR SOIL COMPACTED TO 95% OF DENSITY DENSITY

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NOTE: SLAB FOOTINGS TO BE CONSTRUCTION ON UNDOUBLED SOIL OR SOIL COMPACTED TO 95% OF DENSITY DENSITY

TOWN OF SEWALL'S POINT

Date 1/21/02

BUILDING PERMIT NO. 5658

Building to be erected for CAMERON THOMAS

Type of Permit FENCE

Applied for by O/B

(Contractor)

Building Fee 30.00

Subdivision PALM ROW Lot 5

Block _____

Radon Fee _____

Address 10 PALM ROAD

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

Electrical Fee _____

13384100500005010000

Plumbing Fee _____

Roofing Fee _____

Amount Paid 30.00

Check # 0887

Cash _____

Other Fees (_____) _____

Total Construction Cost \$ \$1,500.00

TOTAL Fees \$30.00

Signed _____

Applicant

Signed Mere Simmons

Town Building Inspector

OFFICIAL

PERMIT

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

INSPECTIONS

UNDERGROUND PLUMBING	_____	UNDERGROUND GAS	_____
UNDERGROUND MECHANICAL	_____	UNDERGROUND ELECTRICAL	_____
STEMWALL FOOTING	_____	FOOTING	_____
SLAB	_____	TIE BEAM/COLUMNS	_____
ROOF SHEATHING	_____	WALL SHEATHING	_____
TRUSS ENG/WINDOW/DOOR BUCKS	_____	LATH	_____
ROOF TIN TAG/METAL	_____	ROOF-IN-PROGRESS	_____
PLUMBING ROUGH-IN	_____	ELECTRICAL ROUGH-IN	_____
MECHANICAL ROUGH-IN	_____	GAS ROUGH-IN	_____
FRAMING	_____	EARLY POWER RELEASE	_____
FINAL PLUMBING	_____	FINAL ELECTRICAL	_____
FINAL MECHANICAL	_____	FINAL GAS	_____
FINAL ROOF	_____	BUILDING FINAL	<u>2/1/02</u>

Town of Sewall's Point

BUILDING PERMIT APPLICATION

Building Permit Number: _____

Owner or Titleholder Name: CAMERON THOMAS City: Stuart State: FL Zip: 34990

Legal Description of Property: LOT 5, PALM ROW, PLAT BOOK 3, PG. 115, Martin County Parcel Number: 13-38-41-005-000-005.0-10000

Location of Job Site: Side and Back yard Type of Work To Be Done: fence back yard
10 PALM ROAD. 385-7552 (CELL) 233 7040 (HOME)

CONTRACTOR/Company Name: _____ Phone Number: _____

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: _____ ScreenedPorch: _____

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: \$1500.00 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) [Signature]

State of Florida, County of: Martin

This the 16th day of January, 2002

by Cameron Thomas who is personally

known to me or produced FL driver's license

as identification. [Signature]

CONTRACTOR SIGNATURE (Required) [Signature]

On State of Florida, County of: Martin

This the 16th day of January, 2002

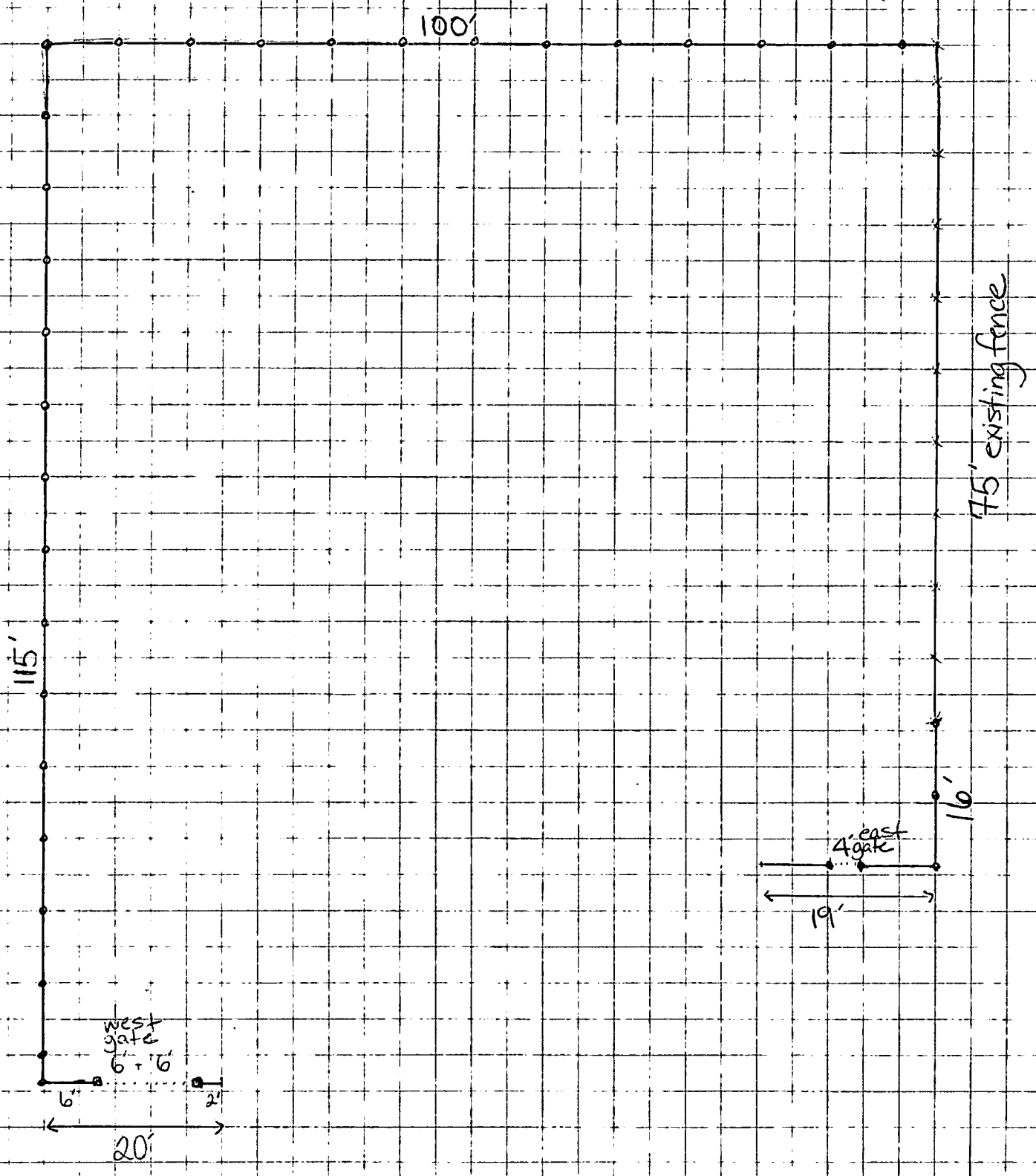
by Cameron Thomas who is personally

known to me or produced FL driver's license

as identification. [Signature]

My Commission Expires: _____
Notary Public [Signature]
DIANE B. GARRIDO
MY COMMISSION # CC 723750
EXPIRES: March 10, 2002
Bonded Thru Notary Public Underwriters
Seal

My Commission Expires: _____
Notary Public [Signature]
DIANE B. GARRIDO
MY COMMISSION # CC 723750
EXPIRES: March 10, 2002
Bonded Thru Notary Public Underwriters
Seal



6 ft. high shadow box privacy fence to consist of 6' x 8' panels attached to 4 x 4 x 8 pt. post set in concrete 2 ft. deep. Panels consist of 1 x 6 x 6 in. dogear pt. pickets attached to 3-2 x 3 x 8 rails.

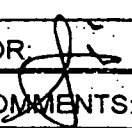
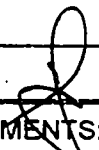

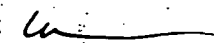
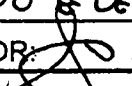
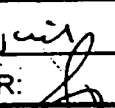
West gate panels to consist of 1 x 6 x 6 in. board on board dogear pickets with 2 x 3 frame attached to 6 x 6 x 8 post set in concrete 2 ft. deep. West gate will be a double gate with 12 ft. opening

East gate to be constructed in same manner but will be single 4 ft. opening attached to 4 x 4 x 8 posts.

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri ~~February 11~~, 2002 Page 1 of 2.

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
5501	ALLMAN	TRUSS	Failed	
(3)	3 SUMMER LANE O/B			INSPECTOR: 
5447	BARLAND	POOL-FINAL	Failed	
(9)	1 VIA LUCINDIA HARBOR BAY POOLS			INSPECTOR: 
5658	THOMAS	FENCE FINAL	Pass	
(6)	10 PALM ROAD. O/B	+ Tree		INSPECTOR: 
5656	D'AMINO	TIN TAG / METAL	Pass	\$30.-
(6)	5 ISLAND RD. TAYLOR	SHEATHING		INSPECTOR: 
5068	WINER	FRAMING	Failed	COORDINATE INSPECTION
(4)	19 RIDGELAND LEAR		NOT READY FOR FRAMING	WILL DO ELEC. + INSPECTOR: 
5667	RUPP	SHEATHING	Failed	CALL OFFICE TO HAVE
(5)	19 W. HIGH POINT PACIFIC			SOMEONE COME OUT - INSPECTOR: 283-7663
5592	MASSEY	ROOF-FINAL	Failed	
(7)	1 MINDORO (Simara) PACIFIC		Failed	no permit \$30.- INSPECTOR: 

OTHER: _____

TOWN OF SEWALL'S POINT

Date 7/20/05

BUILDING PERMIT NO. 7691

Building to be erected for Thomas

Type of Permit Re roof

Applied for by Freazel Roofing

(Contractor) Building Fee 144⁰⁰

Subdivision Palm Row Lot _____ Block _____

Radon Fee _____

Address 10 Palm Row

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

133841005000600501

Electrical Fee _____

Plumbing Fee _____

Amount Paid 144⁰⁰ Check # 3342 Cash _____ Other Fees (_____) _____

Roofing Fee _____

Total Construction Cost \$ 15312

TOTAL Fees 144⁰⁰

Signed *Freazel Roofing*
Applicant

Signed *Gene Simms*
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	_____

Date: **RECEIVED** 7/14/05

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Permit Number: _____

OWNER/TITLEHOLDER NAME: Cameron & Katherine Thomas Phone (Day) _____ (Fax) _____

Job Site Address: 10 Palm Rd City: Stuart State: FL Zip: 34986

Legal Desc. Property (Subd/Lot/Block): Palm Row Revised Lot 5 Parcel Number: 133841005000000050-1

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

Description of Work To Be Done: Roof Replacement

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 15,312
(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: Feazel Roofing Phone: 7724616336 Fax: 772461-6822

Street: 4000 S US Hwy 1 City: Ft. Pierce State: FL Zip: 34982

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: Feazel Roofing State: FL License Number: CCC 1326287

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.#: _____ Phone Number: _____

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

AREA SQUARE FOOTAGE - SEWER - ELECTRIC Living: 34 Garage: _____ Covered Patios: _____ Screened Porch: _____

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

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

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

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

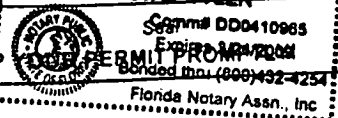
OWNER OR AGENT SIGNATURE (required)
Katherine Thomas
State of Florida, County of: MARTIN
This the 18th day of JULY, 2005
by KATHERINE WEAVER THOMAS who is personally
known to me or produced EAOL JK 2005 19-66-872-0
as identification Paul J. O'Brien 7/10/2005

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

CONTRACTOR SIGNATURE (required)
Paul Feazel
On State of Florida, County of: St. Lucie
This the 13th day of JULY, 2005
by Paul Feazel who is personally
known to me or produced N/A
As identification Crystal Tyler

My Commission Expires: _____
Notary Public
CRYSTAL TYLER
Comm # DD0410965
EXPIRES: 04/28/2008
Bonded thru (800)432-4254

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



ACORD CERTIFICATE OF LIABILITY INSURANCE

DATE (MM/DD/YYYY)
3/28/2005

PRODUCER Premier Risk Insurance Agency, Inc.
dba Schneider Insurance Agency
P.O. Box 538
Westerville, Oh. 43086-0538
(614)891-2858
34-608

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 Feazel Roofing Company

5855 Chandler Court
Westerville, OH 43082

INSURERS AFFORDING COVERAGE	NAIC #
INSURER A: Grange Mutual	
INSURER B:	
INSURER C:	
INSURER D:	
INSURER E:	

COVERAGES

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

INSR LTR	ADD'L INSR	TYPE OF INSURANCE	POLICY NUMBER	POLICY EFFECTIVE DATE (MM/DD/YY)	POLICY EXPIRATION DATE (MM/DD/YY)	LIMITS
A		GENERAL LIABILITY <input checked="" type="checkbox"/> COMMERCIAL GENERAL LIABILITY <input type="checkbox"/> CLAIMS MADE <input checked="" type="checkbox"/> OCCUR <input checked="" type="checkbox"/> Add'l Insured GEN'L AGGREGATE LIMIT APPLIES PER: <input type="checkbox"/> POLICY <input type="checkbox"/> PRO-JECT <input type="checkbox"/> LOC	CPP 2284539 Form CG 2026 (11/85)	1/20/2005	1/20/2006	EACH OCCURRENCE \$ 1,000,000 DAMAGE TO RENTED PREMISES (Ea occurrence) \$ 100,000 MED EXP (Any one person) \$ 5,000 PERSONAL & ADV INJURY \$ 1,000,000 GENERAL AGGREGATE \$ 2,000,000 PRODUCTS - COMP/OP AGG \$ 2,000,000
A		AUTOMOBILE LIABILITY <input checked="" 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	CPP 2284539	1/20/2005	1/20/2006	COMBINED SINGLE LIMIT (Ea accident) \$ 1,000,000 BODILY INJURY (Per person) \$ BODILY INJURY (Per accident) \$ PROPERTY DAMAGE (Per accident) \$ AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
		GARAGE LIABILITY <input type="checkbox"/> ANY AUTO				AUTO ONLY - EA ACCIDENT \$ OTHER THAN AUTO ONLY: EA ACC \$ AGG \$
A		EXCESS/UMBRELLA LIABILITY <input checked="" type="checkbox"/> OCCUR <input type="checkbox"/> CLAIMS MADE <input type="checkbox"/> DEDUCTIBLE <input checked="" type="checkbox"/> RETENTION \$ 0	CUP 2284540	1/20/2005	1/20/2006	EACH OCCURRENCE \$ 5,000,000 AGGREGATE \$ 5,000,000
A		WORKERS COMPENSATION AND EMPLOYERS' LIABILITY ANY PROPRIETOR/PARTNER/EXECUTIVE OFFICER/MEMBER EXCLUDED? If yes, describe under SPECIAL PROVISIONS below	CPP 2284539	1/20/2005	1/20/2006	<input checked="" type="checkbox"/> WC STATU-TORY LIMITS <input type="checkbox"/> OTH-ER E.L. EACH ACCIDENT \$ 1,000,000 E.L. DISEASE - EA EMPLOYEE \$ 1,000,000 E.L. DISEASE - POLICY LIMIT \$ 1,000,000
A		OTHER Property	CPP 2284539	1/20/2005	1/20/2006	Building \$ 551,000


DESCRIPTION OF OPERATIONS / LOCATIONS / VEHICLES / EXCLUSIONS ADDED BY ENDORSEMENT / SPECIAL PROVISIONS
 Location 1 is 5855 Chandler Ct., Westerville, OH. 43082
 Location 2 is 4000 South U.S. 1, Ft. Pierce, FL. 34982

CERTIFICATE HOLDER

THE TOWN OF SEWALL'S POINT
1 S. SEWALL'S POINT ROAD
SEWALL'S POINT, FL 34996

CANCELLATION

SHOULD ANY OF THE ABOVE DESCRIBED POLICIES BE CANCELLED BEFORE THE EXPIRATION DATE THEREOF, THE ISSUING 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 

ACCOUNT 1761-20040033

EXPIRES SEP 30, 2005

2004-2005

ST. LUCIE COUNTY OCCUPATIONAL LICENSE

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

EMPLOYEES 1-10

ROOMS

SEATS

RENEWAL
XNEW LICENSE
TRANSFER-
ORIGINAL TAX

11.25

1761 ROOFING/SHEET METAL CONTRACTOR

4000 S US #1
City of Fort Pierce

CCC1326287

AMOUNT
PENALTY
COLLECTION COST
TOTAL

11.25

Todd D. Feazel
Feazel Roofing Company Inc
Feazel, Todd D
5855 Chandler Court
Westerville, OH 43082

2434-801-0005-000/3

PAID BOB DAVIS, TAX COLLECTOR PAID

Please see back for additional information 2/9/05 2:28PM 00001316

F0500000258

2004 1761-20040033

0600 \$11.25

602004 000000000000 0000176120040033 0000 00000001125 000000000000 00009
CK CHANGE \$11.25 \$0.00

AC# 1839862

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L05012500080

DATE	BATCH NUMBER	LICENSE NBR
01/25/2005	040608725	QB37749

The BUSINESS ORGANIZATION
Named below IS QUALIFIED
Under the provisions of Chapter 490
Expiration date: AUG 31, 2005
(THIS IS NOT A LICENSE TO PERFORM WORK. THIS ALLOWS
COMPANY TO DO BUSINESS ONLY IF THE LICENSEE HAS A LICENSE.)

FEAZEL ROOFING COMPANY
4000 SOUTH US 1
FT. PIERCE FL 34982



JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

AC# 1839816

STATE OF FLORIDA

DEPARTMENT OF BUSINESS AND PROFESSIONAL REGULATION
CONSTRUCTION INDUSTRY LICENSING BOARD

SEQ# L05012500034

DATE	BATCH NUMBER	LICENSE NBR
01/25/2005	040608709	CCC1326287

The ROOFING CONTRACTOR
Named below IS CERTIFIED
Under the provisions of Chapter 490
Expiration date: AUG 31, 2006

FEAZEL, TODD DEAN
FEAZEL ROOFING COMPANY
316 SW MCKAY WAY
PORT ST. LUCIE FL 34986



JEB BUSH
GOVERNOR

DISPLAY AS REQUIRED BY LAW

DIANE CARR
SECRETARY

NOTICE OF COMMENCEMENT

Permit No. _____
State Of Florida

Tax Id No. _____
COUNTY OF _____

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

Legal Description of property and street address, if available: Calm Row Revised & Amended Plat Lot 5 or 359/573

General description of improvements Re-Roof
* Owner Cameron + Katherine Thomas
* Address 10 Palm Rd Stuart FL 34996
Owners interest in site of improvement 100%
Fee Simple Title holder (if other than owner) _____
Address _____

Contractor: FEAZEL ROOFING PHONE # 772-461-6336
Address: 4000 S US 1, Ft Pierce Fl. 34982 FAX # 772-461-6822
Surety _____ Phone _____
Address _____ FAX # _____
Amount of Bond (\$) _____
Lender _____ Phone # _____
Address _____ Fax # _____

Persons within the state of Florida designated by the Owner upon whose notice of other documents may be served as provided by Section 713.13(i) (a) 7., Florida Statutes:

Name _____ Phone # _____
Address _____ Fax # _____
In Addition to himself, owner designates _____ of _____
(Phone # _____ Fax # _____) to receive a copy of the Lienor's Notice as provided in section 713.13 (I)(b), Florida Statutes.
Expiration date of notice of commencement is one year from the date of recording unless a different date is specified.

[Signature]
OWNERS SIGNATURE

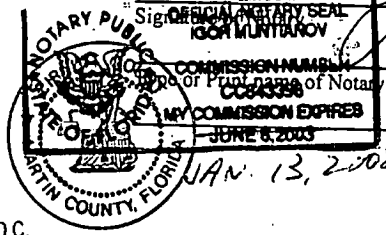
State of Florida, County of MARTIN
The foregoing instrument was acknowledge before me this 9th day of July, 2005, by THOMAS S, who is personally know to me or who has produced DR. TICHAIR as identification.

(Seal)

STATE OF FLORIDA
MARTIN COUNTY

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

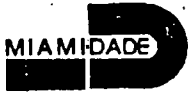
BY: [Signature] D.C.
DATE: 7/14/05



[Signature]
COMMISSION NUMBER

INSTR # 1855098 DR BK 02036 PG 0060 RECD 07/14/2005 08:45:22 AM
MARSHA EWING MARTIN COUNTY DEPUTY CLERK C W015H

Permit # 7691



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)

GAF Materials Corporation
1361 Alps Road
Wayne, NJ 07470

SCOPE:

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

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

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

DESCRIPTION: GAF EverGuard Freedom ~~PRO~~ SA Single Ply Roofing System over Wood Decks.

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

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

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

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

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

This new NOA consists of pages 1 through 7.
The submitted documentation was reviewed by Frank Zuloaga, BRC.



FILE COPY
TOWN OF SEWALL'S POINT
THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE
DATE: 6/8/05

BUILDING OFFICIAL
Gene Simmons

Revision

NOA No: 04-0122.03
Expiration Date: 09/15/09
Approval Date: 09/15/04
Page 1 of 7

ROOFING SYSTEM APPROVAL

Category: Roofing
Sub-Category: TPO, Self-Adhered Single Ply Roofing
Deck Type: Wood
Maximum Design Pressure -75 psf
Fire Classification: See General Limitation #1

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

TABLE 1

<u>Product</u>	<u>Dimensions</u>	<u>Test Specification</u>	<u>Product Description</u>
EverGuard Freedom TPO SA Membrane	Various	ASTM D 6878	Self-Adhered thermoplastic olefin reinforced membrane.
EverGuard Freedom HW TPO Membrane	Various	ASTM D 6878	Self-Adhered thermoplastic olefin reinforced membrane.
EverGuard Freedom EZ TPO Membrane	Various	ASTM D 6878	Self-Adhered thermoplastic olefin reinforced membrane.
EverGuard TPO-45 Utility Flashing Strips	Various	ASTM D 6878	Thermoplastic olefin reinforced flashing membrane.
EverGuard TPO UN-60 Detailing Membrane	Various	ASTM D 6878	Thermoplastic olefin reinforced flashing membrane.
EverGuard TPO Coated Metal	4' x 8' 4' x 10' sheets	US CS-245-62	EverGuard membrane laminated 24 Ga. galvanized steel.
EverGuard TPO Preformed Corners	4" x 4" x 4" 20 pcs. crtn.	ASTM D 6878	Prefabricated molded one piece corners.
EverGuard TPO Preformed Vent Boots	1" - 8" o.d. 6 pcs. crtn.	ASTM D 6878	Premolded vent pipe boots.
EverGuard TPO Cut Edge Sealant	1 quart squeeze tube	Proprietary	Solvent based sealant for TPO cut edges.
EverGuard Expansion Joint Cover	4"-8" x 50'		Low profile expansion joint cover.
EverGuard Standard Walkway	1/8" x 30" x 36"		Standard duty walkway pad.
EverGuard HD Walkway	1/4" x 30" x 36"		Heavy duty walkway pad.

APPROVED INSULATIONS:

TABLE 2

<u>Product Name</u>	<u>Product Description</u>	<u>Manufacturer</u> (With Current NOA)
EnergyGuard PolyIso, RA, RN, Ultra	Polyisocyanurate foam insulation	BMCA



NOA No: 04-0122.03
 Expiration Date: 09/15/09
 Approval Date: 09/15/04
 Page 2 of 7

APPROVED INSULATIONS:

TABLE 2		
Product Name	Product Description	Manufacturer (With Current NOA)
EnergyGuard High Density Fiberboard	High density wood fiberboard insulation.	BMCA
EnergyGuard Perlite	Perlite insulation board.	BMCA
EnergyGuard Composite, RA, RN	Polyisocyanurate foam insulation with high density fiberboard or Permalite perlite insulation.	BMCA
BMCA Dens Deck, Dens Deck Prime	Water-resistant gypsum board	BMCA
Wood Fiberboard	Regular wood fiber insulation	Generic
High Density Wood Fiberboard	High Density Wood Fiber insulation board.	Generic
Perlite Insulation Board	Perlite Insulation	Generic
Type X Gypsum	Gypsum Wallboard	Generic
Dens Deck, Dens Deck Prime	Water-resistant gypsum board	Georgia Pacific

APPROVED FASTENERS:

TABLE 3				
Fastener Number	Product Name	Product Description	Dimensions	Manufacturer (With Current NOA)
1.	Drill-Tec™ #12 Standard & #14 HD Roofing Fasteners	Insulation fastener for steel, wood & concrete decks.		BMCA.
2.	Drill-Tec™ ASAP	Pre-assembled fasteners and metal and plastic plates.		BMCA..
3.	Drill-Tec™ Plastic Polypropylene Plates	Round Polypropylene plate.	3" & 3-1/2" round	BMCA.
4.	Drill-Tec™ Metal Insulation Plates	Round galvalume plate.	3" & 3-1/2" round	BMCA.

EVIDENCE SUBMITTED:

<u>Test Agency/Identifier</u>	<u>Name</u>	<u>Report</u>	<u>Date</u>
Underwriters Laboratory, Inc.	03CA38009	UL 790	01/21/04
Factory Mutual Research Corp.	3B9Q1.AM 3020588	FM 4470 FM 4470	01/08/98 03/24/04
IRT-ARCON	02-005 04-025	TAS 114 TAS 114	01/18/01 07/13/04



NOA No: 04-0122.03
 Expiration Date: 09/15/09
 Approval Date: 09/15/04
 Page 3 of 7

APPROVED ASSEMBLIES:

- Deck Type 1I:** Wood, Insulated
- Deck Description:** 1 9/32" or greater plywood or wood plank
- System Type A:** All layers of insulation are adhered to a mechanically attached anchor sheet. Membrane fully or partially adhered.

All General and System Limitations apply.

One or more layers of any of the following insulations.

Insulation Layer	Insulation Fasteners (Table 3)	Fastener Density/ft ²
EnergyGuard PolyIso, RA, RN Minimum 1" thick	N/A	N/A

Note: All insulation shall be adhered to the anchor sheet in full mopping of approved asphalt within the EVT range and at a rate of 20-40 lbs/100 ft² or 3/4" to 1" wide beads 6" o.c. of Olympic OlyBond 500 Adhesive or Olympic Adhesive Fastener at a rate of 1 gal/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment.

Anchor sheet: GAFGLAS #80 Ultima™ Base Sheet, STRATAVENT® Eliminator Perforated Nailable Base Sheet, RUBEROID Modified Base Sheet, RUBEROID® 20 or RUBEROID Mop Smooth base sheet mechanically fastened to deck as described below;

Fastening Options:

Anchor sheet attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the lap staggered and in two rows 12" o.c. in the field. *(Maximum Design Pressure -45 psf, See General Limitation #7)*

Anchor sheets attached to deck with approved annular ring shank nails and tin caps at a fastener spacing of 9" o.c. at the 4" lap staggered and in two rows 9" o.c. in the field. *(Maximum Design Pressure -52.5 psf, See General Limitation #7)*

Anchor sheets attached to deck approved annular ring shank nails and 3" inverted Drill-Tec insulation plates at a fastener spacing of 9" o.c. at the 4" lap staggered in two rows 9" in the field. *(Maximum Design Pressure -60 psf, See General Limitation #7)*

Membrane: EverGuard Freedom TPO SA or Freedom TPO EZ adhered to insulation with a minimum 6" side lap
or
Freedom HW with a minimum 3" side lap. Laps are heat welded with a minimum 1.75" weld
or
Freedom EZ fully adhered to the insulation with a minimum 21" self-adhered laps.

Maximum Design Pressure:

See Fastening Options Above



Deck Type II: Wood, Insulated

Deck Description: $1\frac{9}{32}$ " or greater plywood or wood plank fastened to supports a maximum spacing of 16" o.c. with wood screws at spaced at 6" o.c.

System Type A(2): All layers of insulation are adhered to a mechanically attached anchor sheet. Membrane fully or partially adhered.

All General and System Limitations apply.

One or more layers of any of the following insulations.

Insulation Layer

**Insulation Fasteners
(Table 3)**

**Fastener
Density/ft²**

EnergyGuard PolyIso, RA, RN

Minimum 1" thick

N/A

N/A

Note: All insulation shall be adhered to the anchor sheet in full mopping of approved asphalt within the EVT range and at a rate of 20-40 lbs/100 ft² or $\frac{3}{4}$ " to 1" wide beads 6" o.c. of Olympic OlyBond 500 Adhesive or Olympic Adhesive Fastener at a rate of 1 gal/100 ft². Please refer to Roofing Application Standard RAS 117 for insulation attachment.

Anchor sheet: GAFGLAS #80-Ultima™ Base Sheet, STRATAVENT® Eliminator Perforated Nailable Base Sheet, RUBEROID Modified Base Sheet, RUBEROID® 20 or RUBEROID Mop Smooth base sheet mechanically fastened to deck as described below;

**Fastening
Options:**

Anchor sheets attached to deck with Drill-Tec #12 or #14 Screws and 3" Plates, 12" o.c. in 3 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 12" o.c. in the field of the sheet.

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

Anchor sheets attached to deck with Drill-Tec (GAFTITE) #12 or #14 Screws and 3" Plates, 8" o.c. in 4 rows. One row is in the 2" side lap. The other rows are equally spaced approximately 9" o.c. in the field of the sheet.

(Maximum Design Pressure -75 psf, See General Limitation #9)

Membrane:

EverGuard Freedom TPO SA or Freedom TPO EZ adhered to insulation with a minimum 6" side lap

or

Freedom HW with a minimum 3" side lap. Laps are heat welded with a minimum 1.75" weld

or

Freedom EZ fully adhered to the insulation with a minimum 21" self-adhered laps.

**Maximum Design
Pressure:**

See Fastening Options Above



Deck Type II: Wood, Insulated

Deck Description: $\frac{19}{32}$ " or greater plywood or wood plank

System Type C: One or more layers of insulation simultaneously attached; Base layer(s) optional.

All General and System Limitations apply.

One or more layers of any of the following insulations.

Base Insulation Layer

EnergyGuard PolyIso, RA, RN
Minimum 1" thick

**Insulation Fasteners
(Table 3)**

**Fastener
Density/ft²**

N/A

N/A

Dens Deck, Dens Deck Prime
Minimum $\frac{1}{4}$ " thick

N/A

N/A

Top Insulation Layer

EnergyGuard PolyIso, RA, RN
Minimum 1.5" thick

**Insulation Fasteners
(Table 3)**

**Fastener
Density/ft²**

1

1:3 ft²

Note: All layers shall be simultaneously fastened; see top layer below for fasteners and density. Insulation panels listed are minimum sizes and dimensions; if larger panels are used, the number of fasteners shall be increased maintaining the same fastener density. Please refer to Roofing Application Standard RAS 117 for insulation attachment.

Membrane:

EverGuard Freedom TPO SA or Freedom TPO EZ adhered to insulation with a minimum 6" side lap

or

Freedom HW with a minimum 3" side lap. Laps are heat welded with a minimum 1.75" weld

or

Freedom EZ fully adhered to the insulation with a minimum 21" self-adhered laps.

Maximum Design

Pressure:

-52.5 psf; (See General Limitation #7)



WOOD DECK SYSTEM LIMITATIONS:

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

GENERAL LIMITATIONS:

1. Fire classification is not part of this acceptance, refer to a current Approved Roofing Materials Directory for fire ratings of this product.
2. Insulation may be installed in multiple layers. The first layer shall be attached in compliance with Product Control Approval guidelines. All other layers shall be adhered in a full mopping of approved asphalt applied within the EVT range and at a rate of 20-40 lbs./sq., or mechanically attached using the fastening pattern of the top layer.
3. All standard panel sizes are acceptable for mechanical attachment. When applied in approved asphalt, panel size shall be 4' x 4' maximum.
4. An overlay and/or recovery board insulation panel is required on all applications over closed cell foam insulations when the base sheet is fully mopped. If no recovery board is used the base sheet shall be applied using spot mopping with approved asphalt, 12" diameter circles, 24" o.c.; or strip mopped 8" ribbons in three rows, one at each sidelap and one down the center of the sheet allowing a continuous area of ventilation. Encircling of the strips is not acceptable. A 6" break shall be placed every 12' in each ribbon to allow cross ventilation. Asphalt application of either system shall be at a minimum rate of 12 lbs./sq. **Note: Spot attached systems shall be limited to a maximum design pressure of -45 psf.**
5. Fastener spacing for insulation attachment is based on a Minimum Characteristic Force (F) value of 275 lbf., as tested in compliance with Testing Application Standard TAS 105. If the fastener value, as field-tested, are below 275 lbf. insulation attachment shall not be acceptable.
6. Fastener spacing for mechanical attachment of anchor/base sheet or membrane attachment is based on a minimum fastener resistance value in conjunction with the maximum design value listed within a specific system. Should the fastener resistance be less than that required, as determined by the Building Official, a revised fastener spacing, prepared, signed and sealed by a Florida Registered Engineer, Architect, or Registered Roof Consultant may be submitted. Said revised fastener spacing shall utilize the withdrawal resistance value taken from Testing Application Standards TAS 105 and calculations in compliance with Roofing Application Standard RAS 117.
7. Perimeter and corner areas shall comply with the enhanced uplift pressure requirements of these areas. Fastener densities shall be increased for both insulation and base sheet as calculated in compliance with Roofing Application Standard RAS 117. **(When this limitation is specifically referred within this NOA, General Limitation #9 will not be applicable.)**
8. All attachment and sizing of perimeter nailers, metal profile, and/or flashing termination designs shall conform with Roofing Application Standard RAS 111 and applicable wind load requirements.
9. The maximum designed pressure limitation listed shall be applicable to all roof pressure zones (i.e. field, perimeters, and corners). Neither rational analysis, nor extrapolation shall be permitted for enhanced fastening at enhanced pressure zones (i.e. perimeters, extended corners and corners). **(When this limitation is specifically referred within this NOA, General Limitation #7 will not be applicable.)**
10. All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

END OF THIS ACCEPTANCE



NOA No: 04-0122.03
Expiration Date: 09/15/09
Approval Date: 09/15/04
Page 7 of 7



BUILDING CODE COMPLIANCE OFFICE (BCCO)
PRODUCT CONTROL DIVISION

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

NOTICE OF ACCEPTANCE (NOA)

Elk Corporation of Dallas
4600 Stillman Blvd.
Tuscaloosa, AL 35401

SCOPE:

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

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

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

DESCRIPTION: Elk Prestique Shingles

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

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

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

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

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

This NOA revises NOA #02-1209.10 and consists of pages 1 through 5.
The submitted documentation was reviewed by Frank Zuloaga, RRC



NOA No.: 03-1027.03
Expiration Date: 03/13/08
Approval Date: 01/29/04
Page 1 of 5

ROOFING ASSEMBLY APPROVAL

Category: Roofing
Sub-Category: 07310 Asphalt Shingles

Materials: Laminate

Deck Type: Wood

1. SCOPE

This approves Elk Prestique Plus High Definition, Prestique I High Definition, Prestique High Definition and Raised Profile Shingles as manufactured by Elk Corporation of Dallas described in Section 2 of this Notice of Acceptance.

2. PRODUCT DESCRIPTION

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Prestique Plus High Definition Prestique I High Definition	13-1/4" x 39-3/4"	TAS 100	A heavy weight laminated asphalt shingle with a proprietary profile.
Prestique High Definition Raised Profile	13-1/4" x 38-1/4"	TAS 100	A heavy weight laminated asphalt shingle with a proprietary profile.
Accessory Shingles	various	proprietary	Accessory shingles for hip, ridge and starter strip applications.

3. EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
PRI Asphalt Technologies, Inc.	ELK-083-02-01	TAS 100	10/16/02
	ELK-084-02-01		10/15/02
	ELK-085-02-01		10/14/02
	ELK-086-02-01		10/24/02
	ELK-087-02-01		10/21/02
	ELK-088-02-01		10/16/02
	ELK-107-02-01		10/09/03
	ELK-108-02-01		10/09/03
	ELK-1098-02-01		10/09/03
Underwriters Laboratories, Inc.	02NK41811	TAS 107	11/11/02
Underwriters Laboratories, Inc.	02NK41809	ASTM D 3462	08/11/02
Underwriters Laboratories, Inc.	03CA35209	TAS 107	10/17/03
Underwriters Laboratories, Inc.	03NK26444	ASTM D 3462	10/17/03

4. LIMITATIONS

- 4.1 Fire classification is not part of this acceptance; refer to a current Approved Roofing Materials Directory for fire ratings of this product.
- 4.2 Shall not be installed on roof mean heights in excess of 33 ft.



NOA No.: 03-1027.03
 Expiration Date: 03/13/08
 Approval Date: 01/29/04
 Page 2 of 5

4.3 All products listed herein shall have a quality assurance audit in accordance with the Florida Building Code and Rule 9B-72 of the Florida Administrative Code.

5. INSTALLATION

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

6. LABELING

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

7. BUILDING PERMIT REQUIREMENTS

- 7.1 Application for building permit shall be accompanied by copies of the following:
 - 7.1.1 This Notice of Acceptance.
 - 7.1.2 Any other documents required by the Building Official or the applicable code in order to properly evaluate the installation of this system.

8. MANUFACTURING PLANTS

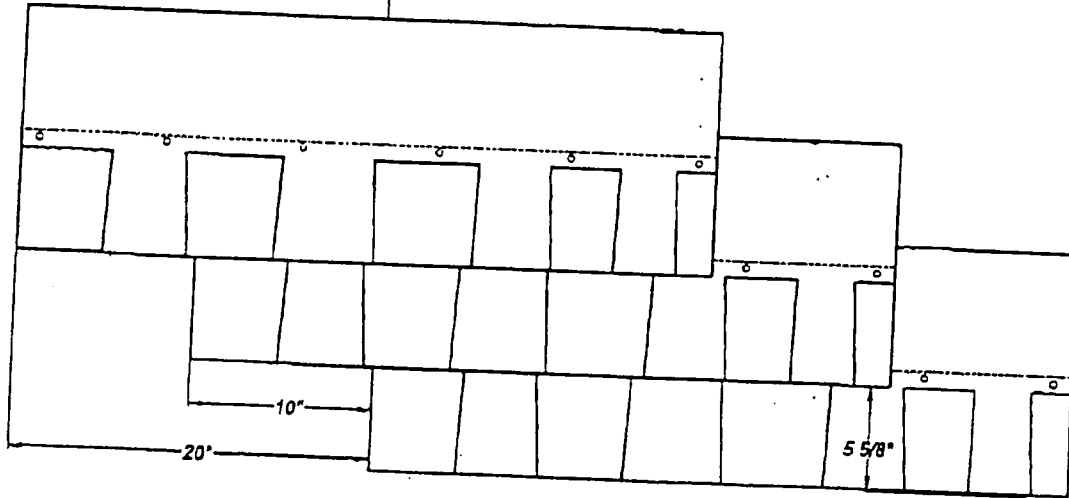
- 8.1 Meyerstown, PA
- 8.2 Ennis, TX
- 8.3 Tuscaloosa, AL



NOA No.: 03-1027.03
Expiration Date: 03/13/08
Approval Date: 01/29/04
Page 3 of 5

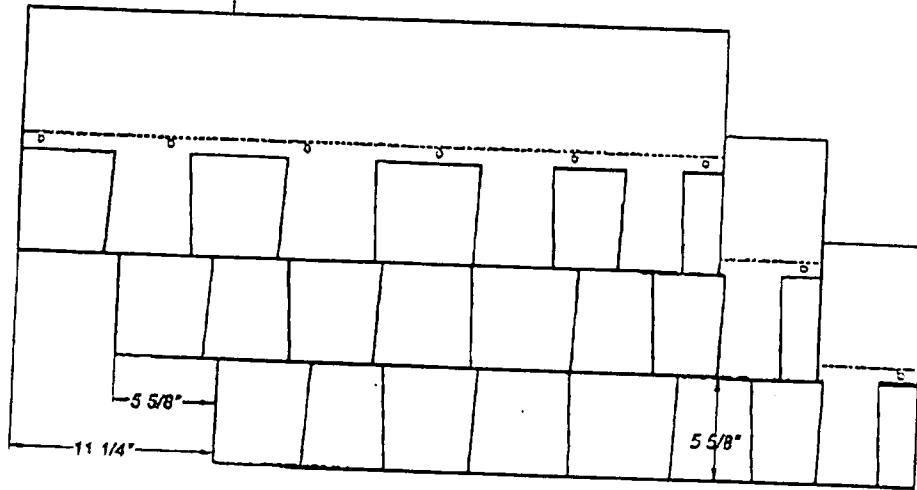
DETAIL A

EDGE OF ROOF



FIRST COURSE FULL SHINGLE

EDGE OF ROOF



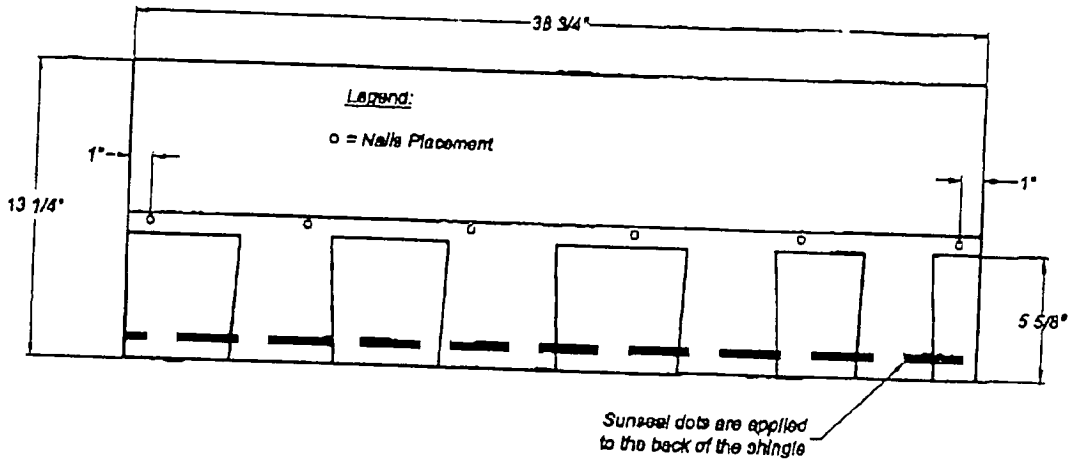
FIRST COURSE FULL SHINGLE



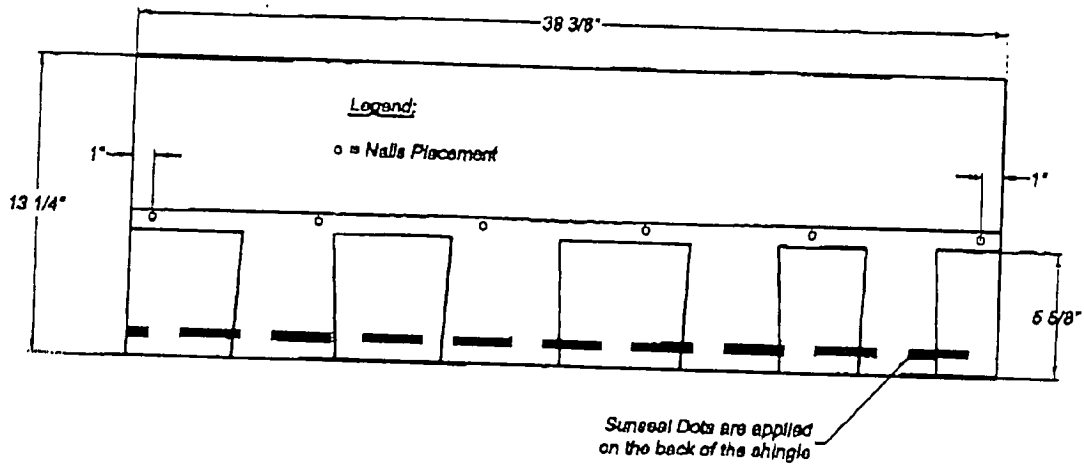
NOA No.: 03-1027.03
Expiration Date: 03/13/08
Approval Date: 01/29/04
Page 4 of 5

DETAIL B

Raised Profile and Prestique High Definition



Prestique Plus and Prestique I



END OF THIS ACCEPTANCE



NOA No.: 03-1027.03
Expiration Date: 03/13/08
Approval Date: 01/29/04
Page 5 of 5



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

Site Provided by...
governmentmax.com T1.4

Summary

print Owner
11 of 141

Parcel Info

Summary

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

Parcel ID	Unit Address	Serial Index ID	Order	Commercial	Residential
13-38-41-005-000-00050-1	10 PALM RD	27810	Owner	0	1

Summary

Property Location 10 PALM RD
Tax District 2200 Sewall's Point
Account # 27810
Land Use 101 0100 Single Family
Neighborhood 120400
Acres

Legal Description

Property Information
 PALM ROW REVISED & AMENDED
 PLAT LOT 5 OR 359/573

Owner Information

Owner Information
 THOMAS, CAMERON & KATHERINE W

Mail Information

10 PALM ROAD
 STUART FL 34996

Assessment Info

Front Ft. 0.00

Market Land Value \$220,000
Market Impr Value \$193,470
Market Total Value \$413,470

Search By

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

Site Functions

Property Search

- Feedback
- On-Line Help
- County Home
- Site Home
- County Login

Recent Sale

Sale Amount \$249,000

Sale Date 12/14/2001
Book/Page 1605 1245





The Florida Department of Community Affairs Building Code Information System

SITE NAVIGATION

- Home
- Course Accreditation
- Florida Building Code
- Manufact Buildings
- Prototype Building
- Surcharges
- Training
- Product Approval
- License Search
- Mailing List
- FBC Florida Building Commission

PRODUCT APPROVAL

Product Type Detail

- Overview
- Product Search
- Organization Search
- Product Application

User: Public User - Not Associated with Organization -

[Need Help ?](#)

Application #: FL1655
 Date Submitted: 01/29/2004
 Product Manufacturer: Kirsch Building Products LLC
 Address/Phone/email: 1464 Madera Road
 Suite 387
 Simi Valley, CA 93065
 (805) 750-0084

Technical Representative: Kirsch Building Products, LLC
 Technical Representative Address/Phone/email: Madera Road
 Suite 387
 Simi Valley, CA 93065
 mark@sharkskin.us

Quality Assurance Representative: Mark Strait
 Quality Assurance Representative Address/Phone/email: 1464 Madera Road
 Suite 387
 Simi Valley, CA 93065
 (805) 750-0084
 mark@sharkskin.us

Category: Roofing
 Subcategory: Underlayments
 Evaluation Method: Testing Report

Referenced Standards from the Florida Building Code:

Section	Standard	Year
1507	ICBO-ES AC 188	2001
1518	ASTM D226-97A	1997
	ASTM D4869-02	2002
	ASTM DI970-01	2001
	ASTM, E96-00	2000

Testing Lab: Intertek Testing Services - ETL / Warnock Hersey
 Quality Assurance Entity: Intertek Testing Services-ETL/Warnock Hersey

FILE COPY

TOWN OF SEWALL'S POINT

THESE PLANS HAVE BEEN
REVIEWED FOR CODE COMPLIANCE

DATE: 7/15/05

BUILDING OFFICIAL
Gene Simmons

Validation Entity: Intertek Testing Services - ETL/Warnock Hersey

Authorized Signature: mark strait
mark@sharkskin.us

Evaluation/Test Reports Uploaded: [PTID_1655_T_AC188Sharkskin_Ultra_and_Comp.pdf](#)
[PTID_1655_T_Certificate_of_Independence_2004-05-19.pdf](#)
[PTID_1655_T_KirschAC188SharkskinComp.pdf](#)
[PTID_1655_T_letter_06-18-04.pdf](#)
[PTID_1655_T_letter_07-09-04.PDF](#)
[PTID_1655_T_UltraTestReport.pdf](#)

Installation Documents Uploaded: [PTID_1655_I_Installation_Document_2_-SHARKSKIN_COMPInstallation2.ppt.lnk.ppt.pdf](#)
[PTID_1655_I_Installation_Document_2rev_-SHARKSKIN_ULTRAInstallation2.ppt.pdf](#)
[PTID_1655_I_SharkskinLimitation.pdf](#)

Product Approval Method: Method 1 Option B

Application Status: Approved

Date Validated: 08/17/2004

Date Approved: 09/01/2004

Page:



Page 1 / 1

App/Seq #	Product Model # or Name	Model Description	Limits of Use
1655.1	Sharkskin Comp	Polypropylene Roof Underlayment	
1655.2	Sharkskin Ultra	Polypropylene Roof Underlayment	

[Next](#)



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my



**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)

**Wheeling Corrugating Company
1134 Market Street
Wheeling, WV 26003**

SCOPE:

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

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

This product is approved as described herein, and has been designed to comply with the South Florida Building Code, 1994 Edition for Miami-Dade County or Florida Building Code.

DESCRIPTION: 5V Steel Roofing Panel

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

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

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

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

This NOA consists of pages 1 through 7.

The submitted documentation was reviewed by Frank Zuloaga, RRC.



**NOA No.: 00-0501.12
Expiration Date: 02/21/07
Approval Date: 02/21/02
Page 1 of 7**

ROOFING SYSTEM APPROVAL:

Category: Roofing
Sub-Category: Metal, Panels
Material: Steel
Deck Type: Wood
Maximum Design Pressure: -90 psf

TRADE NAMES OF PRODUCTS MANUFACTURED OR LABELED BY APPLICANT:

<u>Product</u>	<u>Dimensions</u>	<u>Test Specifications</u>	<u>Product Description</u>
Wheeling Corrugating Company 5V Steel Roofing Panel	Length: varies Width: 26" Height: 1/2" Thickness: 0.0217"	PA 110	G90 Galvanized, AZ55, Wheeling Paint System, Fluoropan, Kynar or Hylar over G60 Galvanized Steel.

TRADE NAMES OF PRODUCTS MANUFACTURED BY OTHERS:

<u>Product</u>	<u>Dimensions</u>	<u>Product Description</u>	<u>Manufacturer</u>
#30 Felt	N/A	Saturated organic felt to be used as a nailed underlayment.	Generic (With current NOA)
#43 Coated Base Sheet	N/A	Saturated and coated organic base sheet for single or double ply underlayment.	Generic (With current NOA)
Fire Barrier Board ("Dens Deck")	Min. 1/4" thick	Fire barrier for Class 'A' fire rating.	Georgia-Pacific (With current NOA)
Fire Barrier ("Roctex")	Min. 450 grams/m ²	Fire barrier for Class 'A' fire rating.	Partek Insulations, Inc. (With current NOA)
Fasteners (Panel)	Min. 0.178 inch diameter by 1-1/2 long	Corrosion resistant, sharp point hex-head screws with neoprene sealing washer.	Generic (With current NOA)



APPROVED SYSTEMS:

- SYSTEM:** Wheeling Corrugating Company 5V Steel Roofing Panel
- Deck Type:** Wood, Non-insulated
- Deck Description:** New Construction or Re-roof.
 $1\frac{5}{32}$ " or greater plywood or wood plank.
- Slope Range:** 2": 12" or greater
- Maximum Uplift Pressure:** The maximum allowable design pressure -52.5psf.
- Deck Attachment:** In accordance with applicable building code, but in no case shall it be less than $1\frac{5}{32}$ " plywood fastened with #8 x 2 inch wood screws spaced 6" o.c. to wood structural supports spaced at a maximum of 24 inches o.c.
- Underlayment:** Minimum underlayment shall be an ASTM D 226 Type II installed with a minimum 15" 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 one staggered rows 12" o.c. in the field of the 17" exposure.
- Valleys:** Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with Wheeling Corrugating Company 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" or one layer of "Roctex" or $\frac{3}{8}$ " water resistant type X gypsum sheathing with treated core and facer, in compliance with Roofing Application Standard RAS 133.
- Metal Panels and Accessories:** Install the "Wheeling Corrugating Company 5V Steel Roofing Panel" and accessories in compliance with Wheeling Corrugating Company' 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 sharp point screws with a hex-washer head with neoprene sealing washer of sufficient length to penetrate through the deck a minimum of $\frac{3}{16}$ " at a maximum spacing of 12 inches o.c. in all directions as follows:
1. Side laps shall be fastened with a minimum of two screws spaced at a maximum of 12 inches along the entire length of the roof (parallel to the roof slope) see details herein.
 2. Panel width shall be fastened with fasteners at a maximum spacing of 12 inches o.c. perpendicular to the slope of the roof in accordance with the detail herein. Fastener rows shall continue up the entire length of the roof (parallel to the roof slope) at a maximum spacing of 12 inches o.c.



- SYSTEM:** Wheeling Corrugating Company 5V Steel Roofing Panel
- Deck Type:** Wood, Non-insulated
- Deck Description:** New Construction or Re-roof.
 $1\frac{5}{32}$ " or greater plywood or wood plank.
- Slope Range:** 2": 12" or greater
- Maximum Uplift Pressure:** The maximum allowable design pressure -90 psf.
- Deck Attachment:** In accordance with applicable building code, but in no case shall it be less than $1\frac{5}{32}$ " plywood fastened with Phillips head #8 x $1\frac{7}{8}$ inch wood screws spaced 6" o.c. to wood structural supports spaced at a maximum of 12 inches o.c.
- Underlayment:** Minimum underlayment shall be an ASTM D 226 Type II installed with a minimum 15" 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 one-staggered rows 12" o.c. in the field of the 17" exposure.
- Valleys:** Valley construction shall be in compliance with Roofing Application Standard RAS 133 and with Wheeling Corrugating Company 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" or one layer of "Roctex" or $\frac{5}{8}$ " water resistant type X gypsum sheathing with treated core and facer, in compliance with Roofing Application Standard RAS 133.
- Metal Panels and Accessories:** Install the "Wheeling Corrugating Company 5V Steel Roofing Panel" and accessories in compliance with Wheeling Corrugating Company' 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 sharp point screw with a hex-washer head with neoprene sealing washer of sufficient length to penetrate through the deck a minimum of $\frac{3}{16}$ " at a maximum spacing of 12 inches o.c. in all directions as follows:
1. Side laps shall be fastened with a minimum of two screws spaced at a maximum of 12 inches along the entire length of the roof (parallel to the roof slope) see details herein.
 2. Panel width shall be fastened with fasteners at a maximum spacing of 12 inches o.c. perpendicular to the slope of the roof in accordance with the detail herein. Fastener rows shall continue up the entire length of the roof (parallel to the roof slope) at a maximum spacing of 12 inches o.c.



SYSTEM LIMITATIONS:

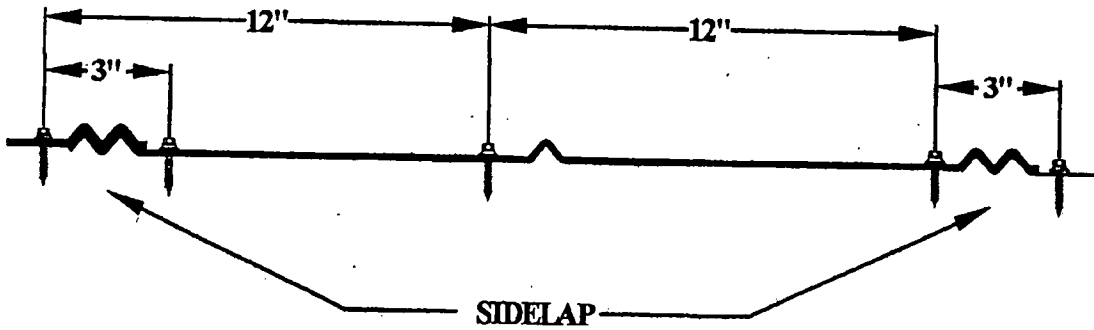
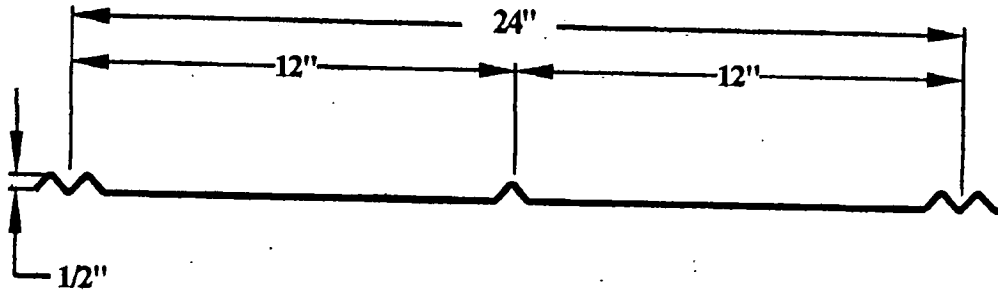
1. Increased design pressures at perimeter and corner areas, in compliance with applicable building code may be met through rational analysis by increasing the number of attachment points in these areas. The maximum fastener spacing noted in the "Systems Description" section of this approval shall not 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 rolls 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."

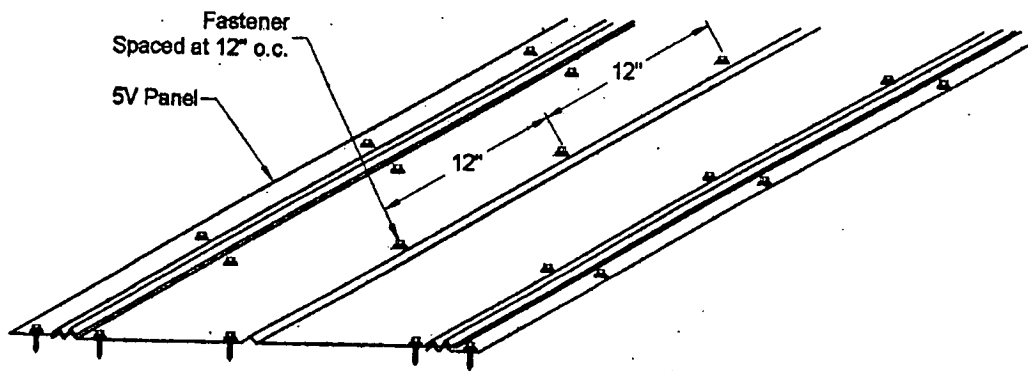
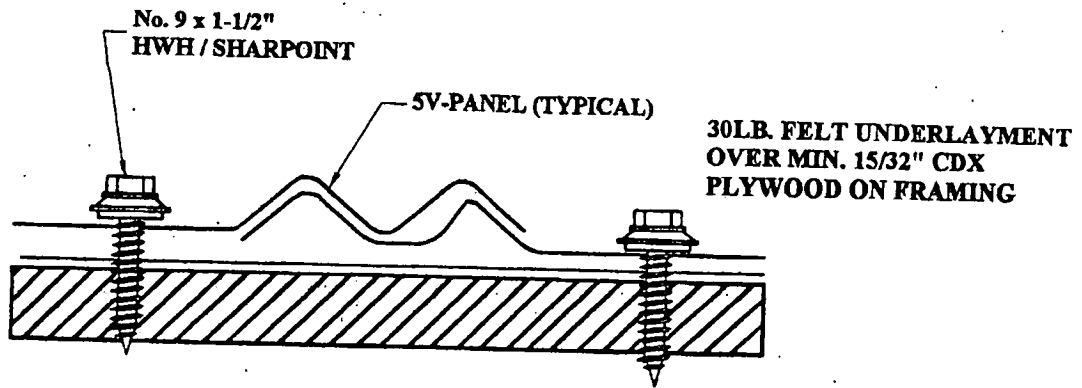
EVIDENCE SUBMITTED:

<u>Test Agency</u>	<u>Test Identifier</u>	<u>Test Name/Report</u>	<u>Date</u>
Architectural Testing Inc.	01-35688.01	PA 125 PA 100	11/17/99
Architectural Testing Inc.	01-35687.03	ASTM B-117 ASTM G-23 ASTM D-714 ASTM D-772	12/22/99
Architectural Testing Inc.	01-35688.02	ASTM B-117 ASTM G-23 ASTM D-714 ASTM D-772	12/22/99
Architectural Testing Inc.	01-35689.02	ASTM B-117 ASTM G-23 ASTM D-714 ASTM D-772	12/22/99
Architectural Testing Inc.	01-35690.02	ASTM B-117 ASTM G-23 ASTM D-714 ASTM D-772	12/22/99
Underwriters Laboratories, Inc.	00NB/R20684	UL 580 UL 1897	09/14/01



WHEELING CORRUGATING COMPANY 5V STEEL ROOFING PANEL





END OF THIS ACCEPTANCE



NOA No.: 00-0501.12
 Expiration Date: 02/21/07
 Approval Date: 02/21/02
 Page 7 of 7



TOWN OF SEWALL'S POINT

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

CORRECTION NOTICE

ADDRESS: 10 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.

DRY-IN
SHEATHING - PASSED
FELTS - FAILED
NAILING INADEQUATE AT
METAL DRIP EDGE
NEED PRODUCT APPROVAL
(2 COPIES) SUBMITTED
FOR SHINGLE ROOF &
PLANT DECK IN REAR -

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: 8/5

INSPECTOR

DO NOT REMOVE THIS TAG

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/5, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7696	POTSDAM	FINAL GAS	PASS	CLOSE
7	50 RIO VISTA Dr MARTIN GY PROPANE			INSPECTOR: <i>OM</i>
7687	COOPER	DRY IN	PASS	
1	33 W. HIGH POINT TOTAL ROOFING	FIRST FINIS		INSPECTOR: <i>OM</i>
7702	MILLARD	FINAL GARAGE DOOR		RESCHEDULE FOR 8/8
11	5 INDIAN LUCIE PL OIB			INSPECTOR: <i>OM</i>
TREE	BAERY	TREE	PASS	
6	97 S. SEWALLS PT			INSPECTOR: <i>OM</i>
7556	ZYGMAN	FINAL SEAWALL	PASS	CLOSE
5	18 SIMARA ST WILCO CONSTR			INSPECTOR: <i>OM</i>
7568	STORCK	FINAL ROOF	PASS	CLOSE
12	27 N. RIVER RD PACIFIC ROOFING			INSPECTOR: <i>OM</i>
7691	THOMAS	DRY-IN	FAIL	
2	10 Palm Road FEAZEL	SHEATHING SECOND PLY	PASS	INSPECTOR: <i>OM</i>
OTHER: _____				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 8/8, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
3 A	6413 Powers			RESCHEDULE FOR
	70 S. SEWALLS PT FLORIDA'S FINEST			8/10 FIRST PLAN INSPECTOR: <i>[Signature]</i>
5	7638 MONZON	FINAL ROOF		CANCEL
	118 HILLCREST DR PACIFIC ROOFING			INSPECTOR:
1	7702 MILLARD	FINAL GARAGE		PASS
	5 INDIA WOOD PRY O/B	(8:30 PLEASE)		INSPECTOR: <i>[Signature]</i>
2	7328 SCHMADER	BEAM BELOW		PASS
	102 HENRY SEWALL CONWAY	(8:30 PLEASE)		INSPECTOR: <i>[Signature]</i>
4	7685 GILLEN	FINAL ROOF		CANCEL
	5 PALMETTO DR PACIFIC ROOFING			INSPECTOR:
6	7568 STORCK	FINAL ROOF		CANCEL
	27 N RIVER RD PACIFIC ROOFING			INSPECTOR:
3	7691 THOMPSON THOMAS	DRY-IN		PASS
	10 PALM RD. FEAZEL RD			INSPECTOR: <i>[Signature]</i>
OTHER: SCHECOONIC BATTENS FOR PASS				
7637 1 RIVERCREST METAL ROOF				
MARLO INC. SYSTEM.				

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 9/9, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
52691	THOMAS	FINAL ROOF	PASS	CLOSE
2	10 Palm Road FEAZEL ROOFING			INSPECTOR: <i>[Signature]</i>
TREE	SIMPSON	TREE	PASS	
1	140 S. Sewalls Pt	FIRST PLEASE = DOG		INSPECTOR: <i>[Signature]</i>
7755	BARILE	DRY-IN	PASS	
7	17 Fieldway Dr SUPERIOR ROOFING			INSPECTOR: <i>[Signature]</i>
TREE	CONWAY	TREE	PASS	
8	4 Oak Hill Way			INSPECTOR: <i>[Signature]</i>
7724	SWEENEY/BOLNIK	FINAL GARAGE DOOR	PASS	CLOSE
4	4 S. Via Lucindia BROTEN GARAGE			INSPECTOR: <i>[Signature]</i>
7511	HART	FINAL RENOV.	PASS	CLOSE
9	113 N. Sewalls Pt BLACK DIAMOND			INSPECTOR: <i>[Signature]</i>
7712	THORNE	FINAL ROOF	FAIL	
10	22 Peerwinkela DUREN			INSPECTOR: <i>[Signature]</i>
OTHER:	82 Sewalls Pt DRY ROOF WORK W/O PERMIT			NO ACTIVITY ON SITE - <i>[Signature]</i>

825 SEWALLS PT RD

MASTER PERMIT NO. _____

TOWN OF SEWALL'S POINT

Date 10-21-05

BUILDING PERMIT NO. 7841

Building to be erected for THOMAS

Type of Permit FENCE

Applied for by O/B

(Contractor) Building Fee 30.00

Subdivision Palm Row Lot 5 Block _____

Radon Fee _____

Address 10 Palm Road

Impact Fee _____

Type of structure SFR

A/C Fee _____

Parcel Control Number:

1338410050000005010000

Electrical Fee _____

Plumbing Fee _____

Roofing Fee _____

Amount Paid 30.00 Check # 1725 Cash _____

Other Fees (_____) _____

Total Construction Cost \$ 700.00

TOTAL Fees 30.00

Signed _____

Applicant

Signed Gene Simmons

Town Building Official

PERMIT

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

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

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

INSPECTIONS

UNDERGROUND PLUMBING _____

UNDERGROUND MECHANICAL _____

STEMWALL FOOTING _____

SLAB _____

ROOF SHEATHING _____

TRUSS ENG/WINDOW/DOOR BUCKS _____

ROOF TIN TAG/METAL _____

PLUMBING ROUGH-IN _____

MECHANICAL ROUGH-IN _____

FRAMING _____

FINAL PLUMBING _____

FINAL MECHANICAL _____

FINAL ROOF _____

UNDERGROUND GAS _____

UNDERGROUND ELECTRICAL _____

FOOTING _____

TIE BEAM/COLUMNS _____

WALL SHEATHING _____

LATH _____

ROOF-IN-PROGRESS _____

ELECTRICAL ROUGH-IN _____

GAS ROUGH-IN _____

EARLY POWER RELEASE _____

FINAL ELECTRICAL _____

FINAL GAS _____

BUILDING FINAL _____

RECEIVED

Town of Sewall's Point
BUILDING PERMIT APPLICATION

Date: 10-18-05 Permit Number: _____

OWNER/TITLEHOLDER NAME: Cameron Thomas Phone (Day) 223-7040 (Fax) _____

Job Site Address: 10 Palm Rd. City: Sewalls Pt. State: _____ Zip: _____

Legal Desc. Property (Subd/Lot/Block) Lot 5 Revised + Amended Plat Parcel Number: 13-38-41-005-000-00050

Owner Address (if different): _____ of Palm Row City: _____ State: _____ Zip: _____

Description of Work To Be Done: Fence / Picket 4' Vinyl

WILL OWNER BE THE CONTRACTOR?:

YES NO

COST AND VALUES:

Estimated Cost of Construction or Improvements: \$ 700.00
(Notice of Commencement needed over \$2500)

Estimated Fair Market Value prior to Improvement: \$ 311,000.00

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

Method of Determining Fair Market Value: Martin County Prop. Appraiser

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

(If yes, Owner Builder Affidavit must accompany application)

CONTRACTOR/Company: _____ Phone: _____ Fax: _____

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

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

SUBCONTRACTOR INFORMATION:

Electrical: _____ State: _____ License Number: _____

Mechanical: _____ State: _____ License Number: _____

Plumbing: _____ State: _____ License Number: _____

Roofing: _____ State: _____ License Number: _____

ARCHITECT _____ Lic.#: _____ Phone Number: _____

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

ENGINEER _____ Lic.# _____ Phone Number: _____

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

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

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

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

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

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

OWNER OR AGENT SIGNATURE (required)

State of Florida, County of: MARTIN

This the 19th day of OCTOBER, 2005

by Cameron Moore Thomas who is personally

known to me or produced [Signature] 13-65-244-0

as identification. [Signature] 714/08

CONTRACTOR SIGNATURE (required)

On State of Florida, County of: _____

This the _____ day of _____, 200

by _____ who is personally

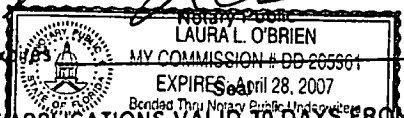
known to me or produced _____

As identification. _____

Notary Public

My Commission Expires: _____

Seal



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

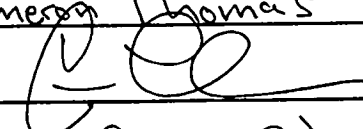
TOWN OF SEWALL'S POINT
ONE SOUTH SEWALL'S POINT ROAD
SEWALL'S POINT, FLORIDA 34996

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

DISCLOSURE STATEMENT

State law requires construction to be done by licensed contractors. You have applied for a permit under an exemption to that law. The exemption allows you, as the owner of your property, to act as your own contractor even 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.

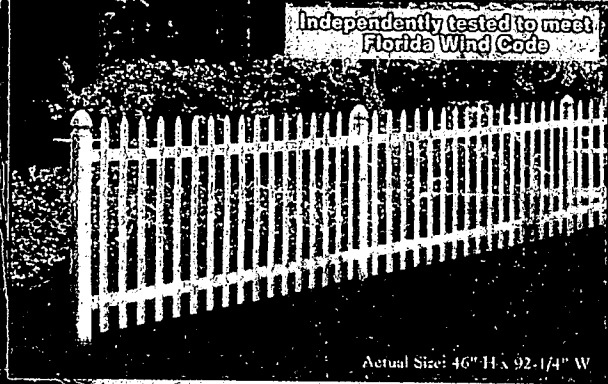
Name: Cameron Thomas Date: 10-18-05
Signature: 
Address: 10 Palm Rd
City & State: Sewalls Pt. FL.
Permit No. _____

To Contact a Freedom Fence Specialist
 Call 888-418-4400 Fax 440-891-5265
 Available in 14 Days

Fence Sections & Posts Use SOS# 88995
 Gates & Accessories Use SOS# 189324

Pre-Built

4x8 CAPE COD



Independently tested to meet
 Florida Wind Code

Actual Size: 46" H x 92-1/4" W

- Cape Cod style picket
- Ideal for front yards and gardens

Lowes #	Description	Model No.
88957	4x8 Cape Cod Fence	73002111
189324	4x3-1/2 Cape Cod Gate	73050973
88995	3x8 Cape Cod Fence	73002110
189324	3x3-1/2 Cape Cod Gate	73098972
87378	3-1/2" x 3-1/2"-72" Post	73002146
87400	3-1/2" x 3-1/2" Bevel Post Top	73002168
189324	3-1/2" x 3-1/2" Ball Post Top	73065601
87406	3-1/2" x 3-1/2" Gothic Post Top	73002170

6x6 CLASSIC GOTHIC



Florida Approved Wind Speed
 Under 130 M.P.H. Zone



Florida Approved Wind Speed
 Over 130 M.P.H. Zone

Actual Size: 70" H x 40-3/4" W

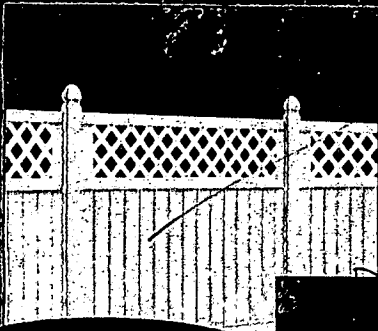
Lowes #	Description	Model No.
88995	6x6 Classic Gothic Fence	73010372
189324	6x3-1/2 Classic Gate	73099372
92531	4-3/4" x 4-3/4" -98" Post	73002136
87410	4-3/4" x 4-3/4" Bevel Post Top (Adaptor)	73002171
188838	4-3/4" x 4-3/4" Gothic Post Top	73002186

- Decorative picket top features classic styling
- Ideal for side yards back yards and gardens

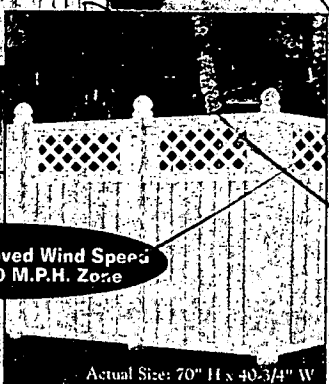
6x3 1/2

Lowes #	Description	Model No.
88995	6x3-1/2 Classic Gothic Fence	73022272
189324	6x3-1/2 Classic Gate	73099372
92531	4-3/4" x 4-3/4" -98" Post	73002136
87410	4-3/4" x 4-3/4" Bevel Post Top (Adaptor)	73002171
188838	4-3/4" x 4-3/4" Gothic Post Top	73002186

6x6 LATTICE TOP



Florida Approved Wind Speed
 Under 130 M.P.H. Zone



Florida Approved Wind Speed
 Over 130 M.P.H. Zone

Actual Size: 70" H x 40-3/4" W

Lowes #	Description	Model No.
88995	6x6 Lattice Top Fence	73002117
20748	6x3-1/2 Lattice Top Gate	73002131
92531	4-3/4" x 4-3/4" -98" Post	73002136
87410	4-3/4" x 4-3/4" Bevel Post Top (Adaptor)	73002171
188838	4-3/4" x 4-3/4" Gothic Post Top	73002186

- Semi privacy lattice design
- Ideal for side & backyards where semi privacy is desired

6x3 1/2

Lowes #	Description	Model No.
96899	6x3-1/2 Lattice Top Fence	73002122
20748	6x3-1/2 Lattice Top Gate	73002131
92531	4-3/4" x 4-3/4" -98" Post	73002136
87410	4-3/4" x 4-3/4" Bevel Post Top (Adaptor)	73002171
188838	4-3/4" x 4-3/4" Gothic Post Top	73002186

FILE COPY
TOWN OF SEWALL'S POINT
 THESE PLANS HAVE BEEN
 REVIEWED FOR CODE COMPLIANCE
 DATE: 10/20/06

BUILDING OFFICIAL
 Gene Simmons

TOWN OF SEWALL'S POINT

Building Department - Inspection Log

Date of Inspection: Mon Wed Fri 12/16, 2005 Page 1 of

PERMIT	OWNER/ADDRESS/CONTR.	INSPECTION TYPE	RESULTS	NOTES/COMMENTS:
7719	SCUOPPE	TRE BEAM	FAIL	
3	PALM ROAD A&P CONSTRUCT.			INSPECTOR: <i>OW</i>
7380	BOATFARE	MSR TOB		
	63 S. RIVER RD WILSON BLDG			INSPECTOR: <i>OW</i>
7764	RUCKS	SLAB	FAIL	NEEDS COMP. TEST. / BUT CAN
1	20 N. SEWALL ST MASTERPIECE BLDG	FIRST		INSPECTOR: <i>OW</i>
6513	DUNN	FINAL SER	FAIL	
2	31 N. RIVER RD FIRST FLORIDA			INSPECTOR: <i>OW</i>
7934	PARKS	POOL SP & DRAIN	FAIL	\$40 FEE
6	3 M. NOLO ST OLYMPIC POOLS			INSPECTOR: <i>OW</i>
7034	JONES	FINAL DOOR REPAIR	FAIL	
7	14 HERON'S NEST O/B			INSPECTOR: <i>OW</i>
7841	THOMAS	WOOD FENCE FINAL	PASS	CLOSE
5	10 PALM ROAD O/B			INSPECTOR: <i>OW</i>

OTHER: _____

TOWN OF SEWALL'S POINT, FLORIDA

Date 2/1/2 19 TREE REMOVAL PERMIT No 0542

APPLIED FOR BY C. Thomas (Contractor or Owner)

Owner 10 Palm Rd.

Sub-division _____, Lot _____, Block _____

Kind of Trees Ficus / Banyan

No. Of Trees: REMOVE 1

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS crowding other trees in area

FEE \$ 0

Signed, Sign. on file
Applicant

Signed, [Signature]
Town Clerk
Eliz. Insp.

TOWN OF SEWALL'S POINT

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

TREE REMOVAL PERMIT

RE: ORDINANCE 103

[Empty grid area for drawing or notes]

PROJECT DESCRIPTION _____

REMARKS _____

TOWN OF SEWALL'S POINT

APPLICATION FOR TREE REMOVAL, RELOCATION, REPLACEMENT

Permit # 0542

Date Issued: 2/1/2

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

Owner Cameron Thomas Address 10 Palm Rd. Phone 223-7040

Contractor _____ Address _____ Phone _____

Number of trees to be removed (list kinds of trees) 1 ficus/banyan?

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

Ø

Number of trees to be replaced: _____ (list kinds of trees): _____

Permit Fee \$ Ø
\$15.00

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

Plans approved as submitted _____ Plans approved as marked _____

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

Signature of applicant [Signature] Plans approved as marked _____

Approved by Building Inspector [Signature] Date submitted: 2/1/2

Completed [Signature] Date _____ Checked by _____

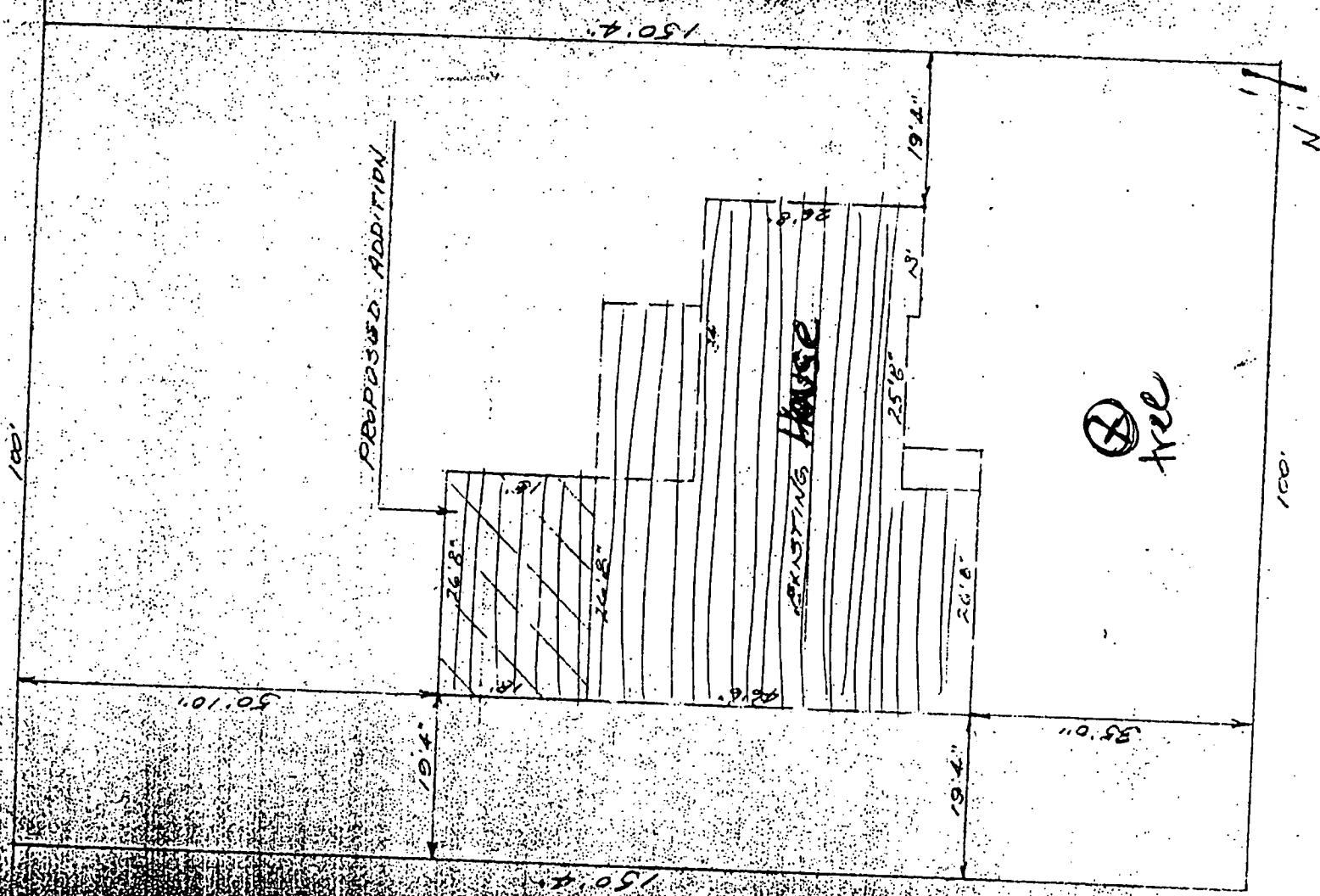
THE FOLLOWING TREES MAY BE REMOVED OR DESTROYED WITHOUT A FEE. BRAZILIAN PEPPER, FLORIDA HOLLY TREE, AUSTRALIAN PINE AND STRANGLER FIG. FOR THE PURPOSE OF THIS PERMIT, A TREE IS DEFINED AS ANY SELF-SUPPORTING WOODY OR FIBROUS PERENNIAL PLANT WHICH HAS A MINIMUM HEIGHT OF TWELVE (12) FEET.

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

See attached Tree Species List

I wish to remove this ficus/banyan tree because of its invasive root system and proximity to septic tank, drain field, and our house. Also, it is beginning to crowd out the other trees in its vicinity.

Cameron Thomas
10 Palm Rd
223-7040



PLOT PLAN 1" = 20'

10 Palm RD

TOWN OF SEWALL'S POINT, FLORIDA

Date December 30 11 2005 TREE REMOVAL PERMIT No 2615

APPLIED FOR BY HAYNES (Contractor or Owner)

Owner 10 PALM ROAD

Sub-division _____, Lot _____, Block _____

Kind of Trees _____

No. Of Trees: REMOVE 1 GRAPEFRUIT

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

No. Of Trees: REPLACE _____ WITHIN 30 DAYS

REMARKS _____

Signed, _____ Applicant

Signed Gene Simmons (RS) FEE \$ 0
Town Clerk
Brenda Garcia

TREE REMOVAL PERMIT

RE: ORDINANCE 103

PROJECT DESCRIPTION _____

REMARKS _____

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

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

No permit required for:

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

Permit Fee:

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

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

Application procedures:

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

Owner Sandy Haynes Address 6 Palm Rd Phone 220-0388

Contractor _____ Address _____ Phone _____

No. of Trees: REMOVE 1 Type: grapefruit

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

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

Written statement giving reasons: non fruit bearing/hurricane damaged

Signature of Property Owner Sandy Haynes Date 12/29/05

Approved by Building Inspector: [Signature] Date 12/30 Fee: ✓

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

Tree
X

